



Key Cross-State Variations in CCDF Policies as of October 1, 2020

The CCDF Policies Database Book of Tables

OPRE Report 2022-60

July 2022

KEY CROSS-STATE VARIATIONS IN CCDF POLICIES AS OF OCTOBER 1, 2020: THE CCDF POLICIES DATABASE BOOK OF TABLES

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ABOUT THE CCDF POLICIES DATABASE

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

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Overview

Introduction

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

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

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

Primary Research Questions

This report—the eleventh in a series—focuses on the CCDF policies that were in place in October 2020, using data from the CCDF Policies Database. This report addresses the following:

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

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

In addition to providing detailed information about the policies in effect in 2020, the report also addresses:

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

The policies presented here are those that were in effect as of October 1, 2020. The report does not reflect more recent changes to policies. Policy changes implemented after October 1, 2020 will be captured in future years' reports.

Purpose

The CCDF Policies Database project produces a comprehensive, up-to-date database of CCDF policies for the 50 States, the District of Columbia, and five U.S. Territories and outlying areas.² The database contains hundreds of variables designed to capture CCDF policies across time, allowing users to access policy information for a specific point in time as well as to see how and when policies change over time. The database is funded by the Office of Planning, Research, and Evaluation (OPRE) and maintained by the Urban Institute.

Highlights

Highlights from 2020 policies include:

- Among the 52 States/Territories that consider job search to be a qualifying activity, 31 only allow a family that was already receiving subsidies for another reason to continue to receive subsidized care during a period of job search (in other words, job search is an allowable activity only for continuing eligibility), while the other 21 consider job search a qualifying activity for both initial and continuing eligibility.
- Among the States/Territories, initial income eligibility thresholds for a family of three range from \$1,511 in Puerto Rico to \$6,157 in California per month.
- Copayments for a three-person family with \$25,000 in annual earnings range from \$0 per month in 19 States/Territories to \$238 per month in Kentucky. The median copayment across the States/Territories is \$64. A three-person family at this income level does not qualify for subsidized care in one State/Territory (Puerto Rico).

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

- In 47 States/Territories, providers may receive payment on days they are closed; States/Territories may limit the number of days providers can be paid for closures or limit the policy to certain types of providers (e.g., licensed providers). In 55 States/Territories, providers may be paid for days children are absent; the policies often vary based on the type of provider.

Highlights of policy changes from 2016 to 2020 include:

- Twenty-two States/Territories made changes to their policies regarding eligibility during periods of job search.
- Almost all States/Territories made changes to the monthly income eligibility thresholds from 2016 to 2020, with most of the changes resulting in higher thresholds over time.
- Fifty-two States/Territories changed their reimbursement rates for toddlers in center-based care during this time period. Forty-eight States/Territories changed their reimbursement rates for toddlers in family child care homes between 2016 and 2020. The majority of these changes were increases to the reimbursement rates or beginning to use tiered reimbursement rates.

Methods

The information in the database, and thus the information in the tables, is based primarily on the documents that caseworkers use as they work with families and providers (often termed “caseworker manuals”). The initial set of manuals coded for the database reflected policies in effect on or before October 1, 2009. Ongoing policy updates have been collected since that point to capture policy changes when they occur in each State/Territory.

Each year, the project produces a set of tables containing selected policies from the database. The tables are then reviewed by State/Territory administrators and verified for accuracy. (Because verification of this year’s tables took place in the spring of 2021, when many State/Territory administrators were focused on emergency needs in their States/Territories resulting from the COVID-19 pandemic, fewer States/Territories are considered “fully verified” than in some previous years.) The final tables are included in an annual report, with the current report showing the policies in effect on October 1, 2020. The full database containing all of the variables and longitudinal details is also made available for public use at <https://ccdf.urban.org>.

Glossary

CCDBG: Child Care and Development Block Grant

CCDF: Child Care and Development Fund

CPS: Child Protective Services

TANF: Temporary Assistance for Needy Families

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I. Introduction and Overview

The Child Care and Development Fund (CCDF) provides federal money to States, Territories, and Tribes to subsidize the cost of child care for lower-income families and to improve the quality of child care. In the average month of fiscal year 2019, the latest year for which data are available, 1.4 million children received care that was subsidized through CCDF.³ The Child Care and Development Block Grant (CCDBG) Act outlines requirements for the CCDF program and allows subsidies to be provided to children who are under age 13 and children under age 19 who have special needs, with parents or guardians who are working, or attending a job training or educational program, and with family incomes up to 85 percent of the applicable state median income. Within the broad federal parameters, States and Territories—and in some cases localities—set the detailed program policies.⁴ Those policies determine whether a family will or will not be eligible for subsidies, how much the family will have to pay for the care (if anything), how families apply for and retain subsidies, the maximum amounts that child care providers will be reimbursed, and the administrative procedures that providers must follow. Thus, while CCDF is a single program from the perspective of federal law, in practice it is a different program in every State and Territory.

This Book of Tables presents key aspects of the differences in CCDF-funded programs across all 50 States, the District of Columbia, American Samoa, the Northern Mariana Islands, Guam, Puerto Rico, and the Virgin Islands as of October 1, 2020.⁵ Additionally, highlights of policy changes between 2019 and 2020 are included throughout this report. October 1 was chosen as the focus date because it is the start of the federal fiscal year, consistent with the focus date of the triennial CCDF Plans (previously biennial), and consistent with the starting date of the annual period covered by ACF’s administrative data (ACF-800 – Annual Aggregate Child Care Data Report and ACF-801 – Monthly Child Care Data Report).⁶

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

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

³ See “FY 2019 CCDF Data Tables (Preliminary),” Table 1, available on-line at <https://www.acf.hhs.gov/occ/data/fy-2019-ccdf-data-tables-preliminary>

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

⁵ Books of Tables showing policies in effect on October 1 of each year for 2009 through 2020 are available from the project website (<https://ccdf.urban.org/resources>). Work is currently under way to collect policy changes through October 1, 2021.

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

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

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

The policies presented here are those that were in effect as of October 1, 2020. The report does not reflect more recent changes to policies. Policy changes implemented after October 1, 2020 will be captured in future years' reports.

The information in the tables is taken from the CCDF Policies Database, a cross-state, cross-time database of CCDF policy information funded by HHS/ACF/OPRE. The information in the database, and thus the information in the tables, is based primarily on the documents caseworkers use as they work with families and providers (often termed "caseworker manuals"). The caseworker manuals generally provide more detailed information on eligibility, family payments, and provider-related policies than is included in the CCDF Plan documents submitted by States/Territories to ACF.⁷ The caseworker manuals also provide ongoing detail for periods in between CCDF Plan submission dates. The database includes some of the policy variations that exist within States/Territories, and it includes policy details beyond those that appear in this Book of Tables. Readers interested in that level of information may obtain the full database detail.⁸

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

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

⁷ Throughout this Book of Tables, the term "States/Territories" refers to the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, and the Territories of American Samoa, Guam, and the United States Virgin Islands.

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

- The Book of Tables focuses on CCDF-funded child care subsidies; child care funded solely with Temporary Assistance for Needy Families (TANF) funds or other non-CCDF funds and administered outside of the primary CCDF program in the State is not included.⁹
- Tribal CCDF programs are not included.
- Some important aspects of child care subsidy policies are not addressed in the tables. In particular, the tables do not address most aspects of program administration, do not cover rules for provider licensing, and do not include information on how States/Territories spend funds for quality activities.¹⁰

The remainder of this introduction provides a brief overview of the 2014 CCDBG reauthorization and its effect on State and Territory policies, as well as more information on the programs covered by this Book and the process by which the information in the Book of Tables was obtained and verified. Subsequent sections of the Book present the tables describing each area of policy. Appendix A provides more information on the content of the full CCDF Policies Database. Appendix B provides more information about the eligibility thresholds, showing the thresholds as a percent of the Federal Poverty Guidelines. Appendix C provides a rotating table that describes additional policies, with this year's table focusing on additional redetermination policies. Appendix D provides the state-specific provider types for which the unlicensed home-based provider policies in Tables 39a-41a apply. Appendix E describes changes in selected policies from 2016 to 2020.

CCDBG Reauthorization

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

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

¹⁰ These types of policies may extend beyond CCDF, and may be handled by a different agency than the agency that administers CCDF. Information regarding program administration is reported in the CCDF Plans, and information regarding quality activities is reported in the Quality Performance Report. Information regarding licensing can be found through the National Association for Regulatory Administration (<https://www.naralicensing.org/>).

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

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

The tables presented in this report show the policies that were in effect on October 1, 2020 as implemented by the States/Territories. The tables do not reflect details of waiver requests that may have delayed implementation of some policies required under federal guidelines.

Policies in Response to the COVID-19 Pandemic

The COVID-19 pandemic that began in 2020 significantly impacted families and children as well as child care providers across the country. States/Territories faced challenges in helping families access child care and subsidies, supporting providers who had to close during periods of state lockdowns, and helping providers address increased needs and costs for health and safety measures. In response to the pandemic, the federal Office of Child Care provided ongoing guidance for how States/Territories could use their CCDF programs to help support families and providers during the public health emergency, including how CCDF funds could be used to address the changing needs of families and providers.¹⁴

This report focuses on policies in effect on October 1, 2020. Throughout the report, we have noted how policies that changed or were implemented in response to the pandemic are shown in the tables. We note when information is available in the full CCDF Policies Database for policies that are not included in the tables, such as some policies for essential workers. Additionally, because the report focuses on the policies in effect as of October 1, 2020, policies that were temporarily in place prior to this date are not reflected in the tables; however, this information can be found in the full database and in a supplemental project report focused on State/Territory policies in response to the pandemic.¹⁵ Policies in place prior to the start of the pandemic can also be found in the full database.

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

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

¹⁴ For federal guidelines on policies in response to the COVID-19 pandemic, see "Office of Child Care COVID-19 Resources" available at <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

¹⁵ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

The Programs Covered by the Book of Tables

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

Table I.A. State/Territory Program Names for the Programs Represented in the CCDF Policies Database's Book of Tables for October 1, 2020

State/Territory	Program ¹⁶
Alabama	Child Care Subsidy Program
Alaska	Child Care Assistance Program
American Samoa	Child Care Program
Arizona	Child Care Assistance
Arkansas	Child Care Assistance Program
California	California Alternative Payment Programs ¹⁷
Colorado	Colorado Child Care Assistance Program
Connecticut	Care 4 Kids
DC	Subsidized Child Care
Delaware	Child Care Subsidy Program
Florida	School Readiness
Georgia	Childcare and Parent Services
Guam	CCDF Program
Hawaii	Child Care Connection Hawaii
Idaho	Idaho Child Care Program
Illinois	Child Care Assistance Program
Indiana	CCDF Program
Iowa	Child Care Assistance
Kansas	Child Care Program
Kentucky	Child Care Assistance Program
Louisiana	Child Care Assistance Program
Maine	DHHS Child Care Subsidy Program
Maryland	Child Care Subsidy Program
Massachusetts	Early Education and Care Financial Assistance
Michigan	Child Development and Care
Minnesota	Child Care Assistance Program
Mississippi	Child Care Payment Program

¹⁶ The selected programs were used to code the child care policies and represent the main program providing subsidized child care in each State/Territory. In most cases the program was selected based on consultation with a State/Territory representative.

¹⁷ When applicable, different policies were coded for CalWORKs Stage 2, CalWORKs Stage 3, and Non-CalWORKs Alternative Payment Programs. If separate sub-programs were coded, the footnotes in the tables will reflect which program is represented.

State/Territory	Program ¹⁶
Missouri	Child Care Subsidy Program
Montana	Best Beginnings Child Care Scholarship Program
Nebraska	Child Care Subsidy Program
Nevada	Child Care and Development Program
New Hampshire	NH Child Care Scholarship
New Jersey	Child Care Subsidy Program
New Mexico	Child Care Assistance
New York	Child Care Subsidy Program
No. Mariana Islands	DCCA Child Care and Development Fund Program
North Carolina	Subsidized Child Care Assistance (SCCA) Program
North Dakota	Child Care Assistance Program
Ohio	Publicly Funded Child Care
Oklahoma	Child Care Subsidy Program
Oregon	Employment Related Day Care
Pennsylvania	Child Care Works Subsidized Child Care
Puerto Rico	Child Care and Development Program
Rhode Island	Child Care Assistance Program
South Carolina	SC Voucher Program
South Dakota	Child Care Assistance
Tennessee	Child Care Certificate Program
Texas	Child Care Services
Utah	Child Care Assistance
Vermont	Child Care Financial Assistance Program
Virgin Islands	Subsidy, Resource, and Referral Program
Virginia	Child Care Subsidy and Services
Washington	Working Connections Child Care
West Virginia	Child Care
Wisconsin	Wisconsin Shares Child Care Subsidy Program
Wyoming	Child Care Subsidy Program

Source: CCDF Policies Database October 1, 2020 Data.

Programs with Joint Funding

Many child care subsidy programs are funded jointly by CCDF and other funds. Non-CCDF funds may be from the TANF program (to the extent they are not formally transferred to CCDF), state-only child care funds in excess of mandatory and matching funds, private or donated funds, and funds from other programs such as housing programs, the Supplemental Nutrition Assistance Program (SNAP), and foster care or Child Protective Services (CPS).¹⁸ Further, up to 30 percent of a State's/Territory's TANF funds may be transferred to CCDF; however, once this money is transferred, it is considered CCDF funding.

¹⁸ The SNAP program was formerly known as the Food Stamp Program.

In recognition of this joint funding, States/Territories are required to report to the federal government a “pooling factor,” computed as total CCDF funds divided by all the funds (CCDF and non-CCDF) used to provide the child care subsidies to the children included in the States’/Territories’ administrative data reports to ACF.¹⁹ For FY 2017, the most recent year for which data are publicly available, the pooling factors ranged from 0.162 in D.C. to 1.0 in 18 States/Territories. The figure for D.C. indicates that of the subsidies described by D.C.’s data reports (ACF-800 – Annual Aggregate Child Care Data Report and ACF-801 – Monthly Child Care Data Report), only 16.2 percent of the funds were CCDF funds. In other words, CCDF funds supported subsidies for approximately 16 percent of the children reported as being served by D.C. in the ACF-800 and 801 reports. In contrast, in the 18 States/Territories with a pooling factor of 1.0, 100 percent of the funds were either originally CCDF funds or TANF funds transferred to CCDF. The average factor was 0.823.²⁰ ACF applies the pooling factor to a State’s/Territory’s total children served to estimate the number of children served by CCDF.

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

Programs Not Included in the Book of Tables

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

¹⁹ ACF Technical Bulletin #1r-v6 includes an Appendix that details the computation of the pooling factor, with a spreadsheet that lists all the potential sources of CCDF and non-CCDF funds. See <https://www.acf.hhs.gov/occ/resource/tb01r-v6>. TANF-transfer, State Match, and State Maintenance of Effort (MOE) funds are all considered part of CCDF funds.

²⁰ FY 2017 ACF-801 data, obtained from the Inter-University Consortium for Political and Social Research (ICPSR) website, <https://www.icpsr.umich.edu/web/ICPSR/studies/37627>. Pooling factors for more recent years will be available as those years of CCDF administrative data are publicly released.

Book is particularly important for readers who are combining policy information from the Book of Tables with information from other sources, such as CCDF administrative data or household-level survey data.²¹

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

Policies governing States'/Territories' Head Start programs and State/Territory-funded pre-kindergarten ("pre-k") programs are not included in the Book of Tables.²² However, these programs serve large numbers of pre-school children, and Early Head Start serves infants and toddlers. Approximately 873,000 children (mostly ages 3 and 4) were served by Head Start and Early Head Start during FY 2019, and approximately 1.64 million (mostly age 4) were in State/Territory-funded pre-kindergarten programs in the 2019-20 school year.²³ In contrast, about 391,000 children ages 3 and 4 were served by CCDF in FY 2019.²⁴ Thus, for this age group, Head Start and State/Territory-funded pre-kindergarten both serve more children than CCDF. (Some children are served by more than one program.²⁵) A child's enrollment in Head Start or State/Territory-funded pre-k could allow a parent to work part time without needing to obtain child care, or could reduce the number of hours that a parent must pay for child care (or try to obtain a subsidy). In some cases, a financial link is created between CCDF and pre-k programs since a portion of the amount that a State/Territory spends on pre-k programs can be used as part of its required State/Territory match or maintenance-of-effort (MOE) spending for purposes of CCDF.²⁶ However, even when a State/Territory takes that option, children enrolled in pre-k are not included in the case-level administrative data on the number of children receiving child care services.²⁷

²¹ For information on how data from the CCDF Policies Database can be linked with administrative data, see "Researching the CCDF Program by Linking Administrative Data with Data from the CCDF Policies Database: A How-To Guide," available at https://ccdf.urban.org/sites/default/files/mergingadminandrulesdata_b508_0.pdf (PDF).

²² Any discussion of pre-kindergarten programs in this report refers only to state-funded programs.

²³ Head Start data are available from: <https://eclkc.ohs.acf.hhs.gov/about-us/article/head-start-program-facts>. Pre-k enrollment figures are from: <http://nieer.org/yearbook>.

²⁴ According to the CCDF enrollment statistics from the ACF-801 data for FY 2019, approximately 28 percent of children served were ages 3 and 4 and 1.40 million children were served through CCDF in the average month. See Tables 1 and 9 in the "FY 2019 CCDF Data Tables (Preliminary)," available from the Office of Child Care at: <https://www.acf.hhs.gov/occ/data/fy-2019-ccdf-data-tables-preliminary>

²⁵ Partnerships between Early Head Start and CCDF providers may result in greater coordination and continuity between the programs. For more information on Early Head Start-Child Care Partnerships, see: <https://www.acf.hhs.gov/ecd/early-learning/ehs-cc-partnerships>

²⁶ According to CCDF financial data for FY 2019, 13 States used pre-kindergarten expenditures to help satisfy State matching and/or MOE requirements. See table 8b from "CCDF Expenditures for FY 2019 as of 9/30/2019." <https://www.acf.hhs.gov/occ/data/fy-2019-ccdf-state-expenditure-data>

²⁷ See the ACF-800 reporting guide (<https://www.acf.hhs.gov/occ/resource/acf-800-reporting-guide>) for instructions on which children are counted in the administrative data as receiving child care subsidies. States/Territories are asked to indicate the estimated number of CCDF-eligible children receiving public pre-kindergarten services for which CCDF match and MOE is claimed.

TANF-FUNDED CHILD CARE

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

1. Transfer TANF funds into CCDF, in which case the funds are considered and reported as CCDF funds²⁸; or
2. Spend TANF funds directly on child care (often referred to as TANF-direct) in which case States/Territories may either:
 - a. “Pool” the TANF-direct funds with CCDF funds to pay for services reported on the ACF-800 and ACF-801 data reports; or
 - b. Keep TANF-direct funds completely separate, in which case no TANF-funded child care services would be reported in either the ACF-800 or ACF-801 data.

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

For the child care programs included in the Book, the tables capture a great deal of information about the treatment of families within that program who also receive TANF benefits. This is the case regardless of funding mechanisms—whether the program is using TANF funds transferred to CCDF, or simply pooled with CCDF, or neither; if the program’s materials describe policies for TANF families, they are included in the database and in these tables. However, if a State/Territory provides child care to families receiving TANF *through a completely separate program with no funding or administrative connection with CCDF*, the policies of that program are not captured in the database or in these tables. In general, if a State’s/Territory’s ACF-801 data indicate that a very low percentage of the caseload receives TANF, the State/Territory might be serving TANF families through a separate program or approach. Thus, readers

²⁸ When TANF funds are transferred to CCDF, they must be spent according to CCDF regulations.

who are particularly interested in those families who receive TANF benefits should be aware that the policies captured here do not provide a complete picture of the free or subsidized child care available to this subset of families in all States/Territories.

OTHER GOVERNMENT SUBSIDY PROGRAMS

States, Territories, and localities may operate other programs that provide free or subsidized child care or child development services beyond the programs already discussed. For example, free after-school programs may be operated by school districts, city governments, or other agencies. A State/Territory may have a separate program for special groups such as foster children, children under protective services, or migrant farmworkers. These programs, while important, are outside the scope of the current project. Also, if a State/Territory operates more than one distinct program with CCDF funds (as is the case in California), only the primary program is included in the Book.²⁹

Sources and Verification

For Tables 1 through 42 and the appendix tables, the primary sources of information were the detailed policy documents used by caseworkers in each State/Territory to administer the child care subsidy program, together with ongoing updates to those documents.³⁰ The updated documents are obtained via the State's/Territory's website, email listservs, or contact with State/Territory staff. The CCDF Policies Database and tables capture policies that have been implemented. They do not incorporate legislative changes that States/Territories have made but have not yet implemented.

To maximize the accuracy of the information in this Book, we conducted a verification process with the States/Territories. An initial set of tables prepared by project staff was submitted to program administrators for their review and comment. State/Territory contacts were asked to identify incorrect information and to indicate where project staff could locate information that was not initially identified in the policy materials used for coding.³¹ In some cases, State/Territory staff indicated that information that had not been found in a manual was not applicable for the State/Territory due to other aspects of the

²⁹ We coded the Alternative Payment Programs (CAPP) and the CalWORKS Stage 2 and Stage 3 programs in the CCDF Policies Database. When policies differed, policies for the CAPP program (for non-TANF families) are shown in the tables. We did not code some other California child care programs that serve very few families, such as a program serving migrant farmworker families, due to project resource constraints.

³⁰ Some State/Territory policies can be changed relatively easily through administrative actions, while others might require action from the State/Territory legislature. Policies that require legislative action may not change as often.

³¹ For most adjustments to initial coding, documentation was obtained in the form of an updated policy or supplemental policy document. In some cases when a particular policy was not documented in any written form, initial coding was adjusted based on discussion with the State/Territory contact.

State's/Territory's policies. State/Territory contacts also provided additional details that augmented the notes included with each table.

Table I.B shows the extent to which each State's/Territory's data were reviewed. The verification process for this report occurred between February and May 2021. Due to the COVID-19 pandemic and the resulting emergency needs faced by State/Territory program administrators and staff, some States/Territories were not able to complete the verification process.

In the majority of States/Territories (51 out of 56), a State/Territory contact reviewed the materials and any issues that were raised were fully resolved (shown as "fully verified" in the table below). In two States/Territories (New Jersey and the Virgin Islands), we were able to verify some of the information in the tables but had outstanding questions left after the verification period (shown as "partially verified"). In three cases (American Samoa, Kentucky, and Puerto Rico), the State/Territory was unable to review the tables (shown as "not verified").

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

Table I.B. Verification Status of the Information in the CCDF Policies Database Project's Book of Tables for October 1, 2020

State	Status of Verification ³²
Alabama	Fully verified
Alaska	Fully verified
Arizona	Fully verified
American Samoa	Not verified
Arkansas	Fully verified
California	Fully verified
Colorado	Fully verified
Connecticut	Fully verified
DC	Fully verified
Delaware	Fully verified
Florida	Fully verified
Georgia	Fully verified
Guam	Fully verified
Hawaii	Fully verified
Idaho	Fully verified

³² "Fully verified" (51 States/Territories) means the State/Territory reviewed the draft tables, and all issues that were raised were fully resolved. "Partially verified" (two States/Territories) means we were able to verify some of the information in the tables but had outstanding questions left after the verification period. "Not verified" (three States/Territories) means that the State/Territory was not able to review the tables.

State	Status of Verification ³²
Illinois	Fully verified
Indiana	Fully verified
Iowa	Fully verified
Kansas	Fully verified
Kentucky	Not verified
Louisiana	Fully verified
Maine	Fully verified
Maryland	Fully verified
Massachusetts	Fully verified
Michigan	Fully verified
Minnesota	Fully verified
Mississippi	Fully verified
Missouri	Fully verified
Montana	Fully verified
Nebraska	Fully verified
Nevada	Fully verified
New Hampshire	Fully verified
New Jersey	Partially verified
New Mexico	Fully verified
New York	Fully verified
Northern Mariana Islands	Fully verified
North Carolina	Fully verified
North Dakota	Fully verified
Ohio	Fully verified
Oklahoma	Fully verified
Oregon	Fully verified
Pennsylvania	Fully verified
Puerto Rico	Not verified
Rhode Island	Fully verified
South Carolina	Fully verified
South Dakota	Fully verified
Tennessee	Fully verified
Texas	Fully verified
Utah	Fully verified
Vermont	Fully verified
Virgin Islands	Partially verified
Virginia	Fully verified
Washington	Fully verified
West Virginia	Fully verified
Wisconsin	Fully verified
Wyoming	Fully verified

II. Eligibility Requirements for Families and Children

Federal policies establish the basic requirements for eligibility for CCDF-funded child care subsidies. First, a child must be under 13 years of age, although the States/Territories have the option of extending services to children under 19 years of age if they are physically or mentally incapable of self-care or under court supervision. Second, the family's income cannot exceed 85 percent of the applicable state median income, and the family cannot have countable assets in excess of \$1,000,000. Third, the parents or guardians must be working or attending a job training or educational program.³³

Within these overall requirements, States/Territories have the flexibility to establish a wide range of detailed policies. In particular, States/Territories (and in some cases localities) determine the following:

- Whether to allow searching for employment as an initial qualifying activity
- Whether to set income thresholds lower than the federally allowed maximums
- How to define the family unit and family income for purposes of establishing eligibility
- Whether to provide care for older children with special needs
- How to define the parent/guardian activities for which child care may be provided
- Whether to use the CCDF-funded program to provide child care for foster children or children being monitored through child protective services
- Whether to modify requirements in any way for families also enrolled in other programs

Basic Age and Activity Requirements

Child care subsidies are provided for families in need of child care because the parents participate in work or certain other activities. To qualify for subsidized care, the family must have an age-eligible child as defined by federal guidelines and State/Territory policies. In addition to having a qualifying child, the family must meet activity requirements. Within the federal guidelines, States/Territories establish which

³³ The general requirements for income, assets, and activities may differ for families with children in need of protective services. States/Territories have discretion in how they define children in need of protective services. Under federal rules these children do not have to be formally connected to child protective services (CPS). For example, children experiencing homelessness can be considered in need of protective services even if they are not connected with CPS. In the remainder of this report, Child Protective Services refers to the State's/Territories' formal Child Protective Services programs.

activities are approved for CCDF-funded child care. In a two-parent family, both parents or guardians generally must be involved in approved activities for the family to qualify for subsidized care. (States/Territories sometimes make exceptions for two-parent families in which one parent has a disability or is otherwise incapable of providing care.)

Maximum Age Allowed for CCDF Eligibility (Table 1)

Under the federal rules for CCDF, States/Territories may provide subsidized care for children who are under age 13, or, if the State/Territory chooses, who are under age 19 and either under court supervision or mentally or physically incapable of caring for themselves. States/Territories determine what age limits to use within the federal parameters. States/Territories that pool non-CCDF funds with CCDF funds may extend eligibility in ways not permitted by CCDF funds. (When States/Territories set age limits higher than the federal guidelines, it should be assumed that the State/Territory is using State/Territory dollars rather than federal funding to provide subsidies for the children who exceed the federal age limit.) Table 1 shows the variation in State/Territory policies regarding age limits. Findings for 2020 include:

- For children without any special circumstances (not under court supervision and no special needs), 55 States/Territories provide subsidies through age 12 (until the child's 13th birthday). In accordance with the CCDF Final Rule, 41 of these States set the age limit at 12 but allow children to continue receiving assistance through the end of the eligibility period if they turn 13 while receiving subsidies. One State (Wyoming) provides subsidies through age 13. In New York, children are eligible through age 12, but children who turn 13 while receiving subsidies may continue receiving assistance through the end of the school year.
- All but five States/Territories set higher age limits for children who are mentally or physically incapacitated. Among the States/Territories that set a higher age limit, the maximum age for children with a mental or physical incapacity to be eligible for CCDF ranges from 14 in Minnesota to 21 in California, with most States/Territories serving these children through either age 17 or age 18.
- Policies for children under their State's/Territory's Child Protective Services (CPS) program show greater variation. Four States (Illinois, Maryland, Minnesota, and North Dakota) do not provide children under CPS subsidized care through the primary CCDF-funded programs included in this report. Among the States/Territories that do provide children under CPS subsidized care through their CCDF-funded programs, more than half use the same age limit as for all other children; the remainder allow children under CPS to receive care through age 17 or 18.

Approved Activities for CCDF Eligibility (Tables 2 and 3)

Employment is not the only activity that may allow a family to be eligible for child care subsidies. Other activities for which States/Territories provide CCDF-funded subsidies include job search, employment and training under the SNAP program, housing search, high school, GED activities, English as a Second Language (ESL) activities, training, adult basic education, and post-secondary education.³⁴ For families receiving TANF, some States/Territories require families to meet TANF work program requirements in order to receive CCDF-subsidized child care, while others allow for additional TANF activities in addition to the States'/Territories' work programs.

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

Tables 2 and 3 show the policies in each State/Territory. Findings for the policies in effect in 2020 include:

- Employment is an approved activity in all States/Territories.
- Among the 52 States/Territories that consider job search to be a qualifying activity, 31 only allow a family that was already receiving subsidies for another reason to continue to receive subsidized care during a period of job search (in other words, job search is an allowable activity only for continuing eligibility), while the other 21 consider job search a qualifying activity for both initial and continuing eligibility. (For the CCDF Policies Database, the variables regarding job search eligibility and time limits refer specifically to periods when the parent is classified by the State/Territory as searching for a job. States/Territories may also provide a general grace period for parents when their qualifying activity permanently ends, but this more general grace period is not reflected here.)
- The amount of time parents can receive subsidized child care during job search activities varies across States/Territories. In California, Connecticut, Kansas, Michigan, and Washington, job search activities are approved through the end of the 12-month eligibility period, regardless of when employment ended. In the remaining States/Territories, there is a set amount of time for job search, which States/Territories set at a maximum amount per year or a maximum amount per job loss occurrence.

³⁴ The activities listed are not explicitly stated in the CCDF federal guidelines. States/Territories have leeway concerning which activities they approve for care.

- Twenty-four States/Territories consider SNAP Employment and Training (E&T) activities to be a qualifying activity for subsidized child care.
- Twenty-two States/Territories consider search for housing to be a qualifying activity in at least some cases for families experiencing homelessness.
- Focusing specifically on families receiving TANF, almost all States/Territories consider TANF work program activities eligible activities for subsidized child care, and 39 allow for TANF activities in addition to the TANF work program.³⁵
- Almost all States/Territories consider high school and GED to be qualifying activities for teen parents (with many also approving these activities for adult parents). All but six States/Territories include job training, and all but eleven include post-secondary education as qualifying activities in at least some cases for adult parents. Thirty-one States/Territories consider ESL classes to be a qualifying activity. Thirty-nine States/Territories count adult basic education as a qualifying activity.

The activity requirements are imposed within the context of the federal guidelines, including a 12-month minimum eligibility period and a rule that prevents immediate termination of subsidies due to a change in parental activity. When an activity—such as employment—ends prior to the end of the 12-month eligibility period, States/Territories must either continue to provide a subsidy to the family for the remainder of the 12-month eligibility period or, if the State/Territory chooses to terminate the subsidy of a parent whose approved activity ends prior to the end of the 12-month eligibility period, they must continue to provide care during a job search period of at least three months.³⁶ As shown in table 2, as of October 1, 2020, a majority of the States/Territories continue to provide care during a job search period of at least three months. As the remaining States/Territories adopt the federal requirements for job search activities, that information will be captured in the database and future tables.

Rules concerning allowable activities are complex, and an activity may qualify a parent or guardian for subsidized child care in some but not all circumstances. For example, for educational activities, States/Territories may allow for any type of educational program, or they may restrict eligibility to parents who are working in addition to attending school (see table 4). Some details of States'/Territories' policies

³⁵ TANF work program activities are broadly defined as employment or training activities that are part of the State's/Territory's TANF program. Eligible activities outside of the TANF work program vary by state; examples include education activities, rehabilitation services, treatment programs, and shelter or housing search.

³⁶ For additional information on the job search requirements, see "Implications of Child Care and Development Block Grant Reauthorization for State Policies: Changes to Job Search Policies" available at https://ccdf.urban.org/sites/default/files/ccdbgreauthandjobsearch_508compliance.pdf (PDF).

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

In response to the COVID-19 pandemic, some States/Territories expanded their job search eligibility periods to assist parents who lost employment. If the expanded job search eligibility policies were in effect on October 1, 2020, the policies are reflected in the tables. Footnotes to the tables show that the policies were adopted in response to the pandemic. Information about job search policies prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.³⁷

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

Although employment is a qualifying activity for child care subsidies in all places, some programs only provide subsidies for parents/guardians working a minimum number of hours. These requirements may also extend to students, who might be required to work a minimum number of hours in addition to their school activities. Table 4 outlines these policies. Highlights from 2020 include:

- Twenty-six States/Territories require that parents work a minimum number of hours per week to be eligible for subsidized care based on work. Among these programs, the minimum required hours range from 15 to 30 hours each week. Additionally, Montana does not use a weekly work hour requirement, instead requiring parents to meet a monthly work hour minimum.
- Almost all States/Territories with minimum work hour policies require each parent in a two-parent family to meet the same requirement as a single parent would have to meet. However, three States (Florida, Kentucky, and Utah) modify the requirement for two-parent families. In Florida and Kentucky, while a single parent must work 20 hours per week to receive subsidized care, a two-parent family can qualify for care if the two parents work a total of 40 hours. In Utah, the general requirement is 15 hours per week, but in a two-parent family, one parent must work at least 30 hours while the other parent must work at least 15 hours.
- Utah is the only State/Territory that requires full-time high school students to work a minimum number of hours per week to receive subsidized care. Eight States/Territories require full-time post-secondary students to work a minimum number of hours per week, ranging from 5 to 20 hours per week, to receive subsidized care. Additionally, two States (Montana and Oregon) have

³⁷ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

other minimum work requirements for post-secondary students. Montana has no work hour requirement if both parents in a two-parent family are in school full time, but if one is in school full time and the other is in school part time, the parents must work a combined 40 hours per month. Oregon requires half of a post-secondary student's authorized hours to come from employment.

This table shows a minimum work hour requirement only when the State/Territory has an explicit policy requiring parents to engage in an approved activity for a minimum number of hours. Even if a program has no explicit minimum work hour policy for subsidy eligibility, the number of work hours generally affects the number of hours approved for subsidized child care.³⁸

If Certain Families Have Different Parent Activity Requirements (Table 5)

Families who are receiving another type of benefit or service, such as foster care, homeless services, CPS supervision, or transitional child care following TANF receipt, may have different eligibility requirements than other families. They may be eligible for the subsidized child care program without meeting activity requirements, they may be ineligible for the subsidized child care program because their care is provided by another program, or they may have modified activity requirements. Table 5 shows how the CCDF-funded programs treat families receiving these benefits or services. Highlights for 2020 include:

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

³⁸ States/Territories often approve care for travel time, study hours, and other work and education-related activities. Further, there is no federal requirement for States/Territories to strictly align the approved child care hours with work hours.

- Families with foster children must meet the same requirements as all other families in 26 States/Territories. In the remaining States/Territories, foster families are either eligible for subsidized care with no activity requirements (10 States/Territories), are not eligible because child care is provided through another program (4 States/Territories), or are eligible with modified policies (16 States/Territories).

In some States/Territories, eligibility for transitional child care is determined by separate caseworkers for families transitioning off the TANF program, rather than by the CCDF program staff. When eligibility is determined through a different program, the requirements are often not outlined in the State/Territory caseworker manuals for the child care subsidy program. When this occurs, the table indicates the difference, but the specific policies are not provided.³⁹

Changes in Age and Activity Requirements from 2019 to 2020

Several States/Territories made changes to their basic eligibility requirements between October 2019 and October 2020. Minnesota and Nebraska began allowing children who reached the age limit during the eligibility period to remain eligible for subsidies through the end of the eligibility period. In Minnesota, this policy also applied for children with special needs. Oregon increased its age limit for children, including children with special needs, from 11 to 12 and began allowing children who reached the age limit during the eligibility period to remain eligible through the end of the eligibility period.

Mississippi stopped allowing job search for initial eligibility. Missouri and Tennessee began allowing job search for initial eligibility. Louisiana began allowing job search for initial and continuing eligibility, having previously not approved job search for either. Alabama, Indiana, and Massachusetts increased the number of weeks families could receive subsidies during periods of job search, Connecticut and Kansas changed their job search eligibility periods from a set amount of time to allowing job search through the end of the eligibility period, and West Virginia changed its job search eligibility period from three months in a six-month period to three months per job loss occurrence. The changes in Alabama, Indiana, Massachusetts, Missouri, Kansas, and Tennessee were made in response to the COVID-19 pandemic.⁴⁰ Additional States (Georgia, Oklahoma, Rhode Island, and Texas) retained their usual job search periods, but allowed for some exceptions if the job loss was due to COVID-19 or began to allow exceptions on a case-by-case basis. For more information on the additional States/Territories that extended job search periods

³⁹ Due to resource constraints, policy manuals for additional programs were not collected unless they were part of a shared manual with the State's/Territory's CCDF program. If the State/Territory provided additional documentation during the verification process, the additional information was captured in the database and tables.

⁴⁰ Policies are described as being in response to the pandemic if the State/Territory policy documents described them as such.

in response to the pandemic prior to October 1, but had reverted to standard policies by October 1, see the full CCDF Policies Database.⁴¹

Nebraska began allowing housing search for families experiencing homelessness to count as a qualifying activity for eligibility, and Minnesota stopped requiring families experiencing homelessness to meet initial activity requirements when they first apply for subsidies. Tennessee began allowing SNAP Employment and Training activities to count as a qualifying activity. Delaware began allowing eligibility for parents participating in English as a Second Language activities, training, and adult basic education. Colorado stopped using separate activity requirements for families transitioning off of TANF. North Dakota began allowing some families with foster children to receive CCDF subsidies.

Family and Income Definitions

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

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

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

⁴¹ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

eligibility if the parents have very low earnings or if there are additional children of the adult parents included in the family size.

In general, if a person is included in the family unit, his or her income is counted in determining family income. However, there are some exceptions. In addition to describing the policies for defining family size, the following tables capture some of the exceptions to the general rule that the income of all family members included in the family unit is counted, focusing specifically on earnings. States'/Territories' policies concerning the treatment of family members' earnings can be quite detailed. For instance, whether a child's earnings are counted may depend on whether the child is in school. Additional detail can be found in the table footnotes and in the full detail of the CCDF Policies Database.

Defining the Family Unit and Income: Treatment of Children and Siblings (Table 6)

Table 6 shows States'/Territories' policies for defining the family unit when older siblings are present in the home with the eligible child. The age at which siblings are included in the unit may vary based on whether the siblings are attending school. Table 6 also shows the policies for how the States/Territories treat the earnings of children and siblings who are included in the family unit (e.g., the earnings of a teenage sibling or of a CCDF-eligible child under CPS or court supervision). Findings from 2020 include:

- A majority of States/Territories (41) count children in the family unit through the age of 17 if they are not attending school.
- There is greater variation in policies for children attending school, with 21 States/Territories maintaining the 17-year-old age limit and 18 States/Territories counting children through age 18. The oldest age at which a child attending school is counted in the unit is 23 (Massachusetts).
- Six States count all siblings as members of the assistance unit without regard to age, as long as the children meet the State's definition of being dependent on the parents. Guam counts all siblings in the unit without regard to age, as long as they are still in high school.
- Thirty States/Territories do not count the earnings of children and siblings, while three States fully count the earnings of children and siblings who are included in the unit. In six States, earnings are counted once a child reaches a certain age, ranging from 15 to 18 years old. The remaining States/Territories have varying policies, often related to whether the child is attending school.

Defining the Family Unit and Income: Treatment of Teen Parents (Table 7)

Table 7 shows States'/Territories' policies for defining the family unit when there is a young parent living with his or her own parents. Each State's/Territory's definition of teen parent is included, along with the policy for counting the earnings of teen parents. Key findings from 2020 include:

- In 24 States/Territories, a teen parent is defined as a parent age 17 or under. In 17 States/Territories, a teen parent is defined as a parent age 19 or under. The oldest age at which a parent living with his or her parents may be considered a teen parent is in Washington, where a parent age 21 or younger is considered a teen parent.
- In 35 States/Territories, the income of teen parents is fully counted. Five States/Territories never count the earnings of teen parents, while the remaining States/Territories have varying policies, such as excluding teen parents' earnings when they are attending school.
- Twenty-eight States/Territories always count a minor parent and his or her child as a separate family unit, even if the teen parent lives with his or her adult parents and regardless of whether the teen parent has siblings receiving CCDF subsidies. The remaining States/Territories either always consider the size and income of the larger family (including the teen parent's parents and siblings), or have a more complex policy that considers other factors, such as which members of the family are part of the same TANF assistance unit.

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

Table 8 shows the States'/Territories' policies for defining the family unit and income when step-parents or non-married, non-parent partners are present. For the purposes of the database, a caretaker's partner is defined as a person who resides in the home, is not married to the child's parent, is not a parent of the child, and has no children in common with the child's parent. Table 8 also reflects the policies in cases of blended families, where the family consists of married parents with no children in common. Finally, policies are shown for cases where a parent is temporarily absent from the home. A parent might be absent from the home due to work, military deployment, or other reasons; State/Territory policies for counting temporarily absent parents in the family size sometimes vary based on the reason for the absence.

Highlights from 2020 include:

- All States/Territories, except New Jersey, always include a step-parent as part of the family unit. In New Jersey, step-parents are included in the assistance unit if they are legally responsible for the child in need of care.

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

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

In addition to having varied policies for step-parents and teen parents, States/Territories also vary in their treatment of non-parent caretakers, such as grandparents taking care of their grandchildren. We define a non-parent caretaker as an adult who lives with the child and who has assumed responsibility for the care of the child when the child's parents do not live in the home with the child. Policies regarding non-parent caretakers may vary depending on whether the caretaker is a relative or non-relative. Table 9 shows the State/Territory policies for defining the family unit and income when caretakers are responsible for the children.

Key 2020 findings regarding the treatment of *relative* caretakers include:

- Forty-six States/Territories allow all relative caretakers to apply for subsidies for the children in their care. The remaining States/Territories limit eligibility to caretakers meeting certain criteria, such as establishing legal guardianship.
- Six States (California, Delaware, Iowa, Maine, North Carolina, and Washington) always exclude relative caretakers from family size when determining eligibility.⁴² An additional seven States exclude relative caretakers under some circumstances, such as when the relative caretaker is a foster parent.

⁴² This creates what is sometimes termed a "child-only" unit for purposes of eligibility determination and computation of the copayment. A child-only unit is treated as a unit of one person (the child), with adult caretakers excluded for purposes of determining family size and income.

- Of the 50 States/Territories that always or sometimes include relative caretakers in the family unit, a majority count the income of any caretakers included in the unit, but four States (the District of Columbia, Massachusetts, New York, and South Dakota) always exclude the income of relative caretakers when determining eligibility and copayments.

Key 2020 findings regarding the treatment of *non-relative* caretakers include:

- Thirty-four States/Territories allow all non-relative caretakers to apply for subsidies for the children in their care, with the remaining States/Territories limiting eligibility to caretakers meeting certain criteria, such as establishing legal guardianship.
- Six States (California, Delaware, Iowa, Maine, North Carolina, and Washington) always exclude non-relative caretakers from the family size when determining eligibility, and an additional seven States exclude non-relative caretakers under some circumstances.
- Of the 50 States/Territories that always or sometimes include non-relative caretakers in the family unit, three (the District of Columbia, Massachusetts, and New York) always exclude the income of non-relative caretakers when determining eligibility and copayments.

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

Family units, as defined by the States/Territories for CCDF purposes, often include siblings, parents, and caretakers, but some States/Territories may also count additional adults living in the home, such as aunts, uncles, grandparents, and family friends. Policies regarding other adults living in the home may vary depending on whether the adults are relatives or non-relatives. Table 10 shows the State/Territory policies for defining the family unit and income when adults other than the parents or caretakers and their spouses or partners are living in the home. Highlights for 2020 include:

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

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

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

States/Territories also establish policies for what types of income are counted. How a State/Territory chooses to define countable income can greatly impact a family's eligibility and copayment. In States/Territories with more narrow definitions of income, families may be more likely to qualify for subsidized care because their countable income is lower. Tables 11 and 12 show how States/Territories treat different types of income. Table 11 captures the policies for the following types of income and benefits: TANF income, Supplemental Security Income (SSI), Social Security Disability Income (SSDI), net self-employment income, child support income, and the value of SNAP benefits. Table 12 captures the treatment of general assistance, the value of housing assistance, benefits from the Low-Income Home Energy Assistance Program (LIHEAP), foster care income, State Earned Income Tax Credit (EITC) refunds, non-recurring lump sum income, and non-recurring gifts. Key findings from 2020 include:

- TANF income is fully counted in a little under half of the States/Territories. It is either not counted or only counted under certain circumstances in the remainder.
- SSI is fully counted in approximately half of the States/Territories, and the majority of States/Territories fully count SSDI income.
- All States/Territories fully count net income from self-employment.
- Five States/Territories do not count child support income. Wisconsin counts child support income only if the household receives over \$1,250 per month. Two States/Territories (D.C. and the Virgin Islands) specify that child support income is counted for CCDF-eligible children only, while the remaining States/Territories count child support income for all children in the family.
- Most States/Territories do not count the value of any type of housing assistance, while six States/Territories count the value of all or some types of housing assistance, such as military housing assistance or employer-provided housing.
- All of the States/Territories exclude the value of SNAP benefits, with the exception of one State (Florida) that does not serve SNAP recipients through the primary CCDF-funded subsidy program.
- Among States with an EITC in their State income tax code, almost all exclude the value of State EITC refunds.
- Lump-sum and non-recurring gift income policies show greater variation, with some States/Territories counting income above a certain dollar amount, such as income that exceeds \$50 in a month. Approximately half of the States/Territories do not count lump-sum income, and more than half exclude gift income.

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

In response to the COVID-19 pandemic, many families received additional financial assistance, including economic impact payments (commonly referred to as stimulus payments) and unemployment assistance funded through various federal pandemic unemployment programs. While States/Territories were not allowed to count the economic impact payments as income when determining eligibility, they had discretion in whether they counted the additional unemployment compensation.⁴³ Information about States'/Territories' policies for counting the additional unemployment assistance can be found in the full CCDF Policies Database and special COVID-19 project report.⁴⁴

Income Disregards When Determining Eligibility (Table 13)

A program's definition of income may include a disregard, or deduction, of a portion of the family's earned income or a disregard of the child support that is paid by the family to children outside the household. Disregards make it more likely that a family will be eligible for CCDF and may lower the family's required copayment. Table 13 shows each State's/Territory's policies for earned income disregards and disregards for child support payments. Key findings from the 2020 policies include:

- Three States/Territories (South Dakota, Utah, and Wyoming) disregard a portion of earned income—either a monthly dollar amount (\$100 in Utah and \$200 in Wyoming) or a percentage of income (four percent in South Dakota).
- Half of the States/Territories allow families to deduct from their income the amount of child support paid in support of children outside of the home.

Note that the child support disregards described in this table refer to the child support *paid* by the family for the support of children living elsewhere; the treatment of the child support *received* by the family is covered in table 11.

⁴³ See "Office of Child Care COVID-19 Resources" for more information about the guidance provided to States/Territories: <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

⁴⁴ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Changes in Family and Income Definitions from 2019 to 2020

Comparing October 2019 to October 2020, two States made changes to the income and family definition policies shown in the tables. Wisconsin increased the maximum age for children not receiving subsidies to be counted in the unit, from 17 to 18, and lowered the age a parent is considered a teen parent, from 19 to 18. Oklahoma stopped counting the parent or caretaker's partner when determining the family size for eligibility.⁴⁵

Financial Eligibility Tests

In almost all cases, families must have income below a certain threshold to be fully eligible for a child care subsidy. The countable income of the family (using the definitions of family and income discussed above) is compared to the applicable eligibility threshold. As discussed earlier, each State/Territory establishes income eligibility thresholds, subject to the maximum limits allowed by the federal CCDF rules (85 percent of state median income). Some States/Territories have one set of eligibility thresholds used at initial application and a higher (i.e., less restrictive) set of thresholds for continuing eligibility during the eligibility period or at the end of the eligibility period (at redetermination).

Other States/Territories use a higher set of eligibility thresholds for other circumstances, such as for families whose children have special needs or for families transitioning off TANF. (In some States/Territories, certain children, such as children under child protective services, are automatically eligible for care without an explicit financial eligibility test.) In response to the COVID-19 pandemic, some States/Territories also adopted policies that allowed families with essential workers, as defined by public officials in the States/Territories, to be eligible to receive subsidies at higher income levels.⁴⁶ Information about higher thresholds for certain groups of families can be found in the full database and special COVID-19 project report.⁴⁷

A second type of financial eligibility test that is sometimes used in determining eligibility for means-tested programs is an “assets test.” An assets test requires that a family’s countable assets (e.g., the

⁴⁵ For the purposes of the CCDF Policies Database, a parent or caretaker's partner is defined as a person who resides in the household, is not married to the child's parent, is not a parent of the child, and has no children in common with the child's parent.

⁴⁶ States/Territories could choose to classify families with essential workers as in need of protective services, thus allowing them to receive subsidies without meeting certain eligibility requirements, such as income limits. For more information on the guidance provided to States/Territories, see “Office of Child Care COVID-19 Resources” at <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

⁴⁷ For more information about States’/Territories’ policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). “Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021.” OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

amount of money in bank accounts and the value of a vehicle) be lower than a specified maximum. The legislation that originally created the CCDF program neither established nor prohibited assets tests, but under CCDBG reauthorization, States/Territories must now include a \$1,000,000 assets test for families applying for subsidies. States/Territories may also choose to set the asset limit for families at any amount lower than \$1,000,000.

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

Every State/Territory establishes income eligibility thresholds to determine eligibility for subsidized child care. Table 14 provides the States'/Territories' initial eligibility thresholds, for one-person to five-person families.⁴⁸ A family newly applying for subsidies must have countable monthly income at or below the initial eligibility threshold to be eligible for subsidies. The initial eligibility threshold can be as high as 85 percent of state median income,

Once a family's income eligibility is initially determined at the time of application, the family qualifies for child care for the full eligibility period, unless their income exceeds the continuing eligibility limit. The continuing eligibility limit may be the same as the initial income limit used at application (this is always the case if the initial limit was already set at 85 percent of state median income), or it may be set at a higher income limit (which could allow families to work toward increasing employment and income without losing their child care benefits, especially in States/Territories with relatively lower initial income limits). Table 15 provides the thresholds to continue receiving subsidies during the eligibility period. Under CCDBG reauthorization, States/Territories may continue to use income thresholds below 85 percent of state median income when determining initial eligibility, but once a family qualifies for assistance and begins their eligibility period, the States/Territories will have to continue to provide assistance during the entire eligibility period as long as the family's income does not exceed 85 percent of state median income and the family does not experience a permanent change in employment, education, or training status.⁴⁹

Table 16 provides the thresholds to continue receiving subsidies at redetermination at the end of the eligibility period. While CCDBG reauthorization outlined requirements for allowing families to remain in the program at higher incomes during the eligibility period, States/Territories may continue to use income

⁴⁸ A one-person family is relevant only in States/Territories with policies that may result in a "child-only" family. For instance, a State/Territory may consider a child living with a non-parent caretaker to be a one-person "child-only" family. Thresholds for larger family sizes (up to families with 10 members) can be found in the full detail of the CCDF Policies Database. Additionally, some States use different thresholds for different subgroups of families (i.e., families receiving TANF or headed by minor parents). When thresholds vary, the amounts shown in the report are for non-TANF families headed by adults; the thresholds for subgroups can be found in the full database detail.

⁴⁹ As more states adopt the federal requirements establishing continuing eligibility at 85 percent of state median income, this information will be reflected in future updates to the CCDF Policies Database.

thresholds below 85 percent of state median income when redetermining eligibility at the end of the eligibility period.⁵⁰ Key findings from 2020 include:

- Among the States/Territories, initial income eligibility thresholds for a family of three range from \$1,511 per month in Puerto Rico to \$6,157 per month in California.⁵¹ (Appendix B shows each State's initial and continuing eligibility thresholds for a three-person family as a percentage of the Federal Poverty Guidelines.)
- Once families begin receiving subsidies, 39 States use higher eligibility thresholds for families during the eligibility period. Where higher thresholds are used, the threshold for a three-person family ranges from 18 percent higher than the initial threshold in Pennsylvania to approximately 131 percent higher than the initial threshold in Ohio.
- Of the States that use higher thresholds during the eligibility period than they use for initial eligibility determination, 30 use those same higher thresholds at the end of the eligibility period when families are reassessed for eligibility (at redetermination), and 9 use thresholds at redetermination that are above the initial amounts used but below the amounts used during the eligibility period.

The tables capture any policy changes implemented by October 1, 2020. As the remaining States/Territories adopt the requirements outlined under CCDBG reauthorization, that information will be captured in the CCDF Policies Database and future tables.

Assets Test (Table 17)

Assets tests establish a limit on the amount of assets a family may hold and still qualify for subsidized child care. When an assets test is used, the State/Territory must decide what types of assets to count (bank accounts, all or part of the value of vehicles, or other financial assets). With reauthorization of CCDGB, States/Territories must establish an assets test with a value of \$1,000,000 or less. (States/Territories have the discretion to require documentation of assets beyond a family statement.) Table 17 shows the State/Territory policies related to assets tests.

⁵⁰ For additional information on the eligibility requirements, see “Implications of Child Care and Development Block Grant Reauthorization for State Policies: Changes to Requirements for Ongoing Eligibility” available at <https://www.urban.org/research/publication/implications-child-care-and-development-block-grant-reauthorization-state-policies-changes-requirements-ongoing-eligibility>.

⁵¹ In three States (Colorado, Texas, and Virginia), eligibility thresholds vary geographically within the State. The table shows the thresholds that apply to the most populous area within the State.

Highlights from 2020 include:

- Fifty-four States/Territories use an assets test for determining eligibility for the CCDF-funded child care program. Almost all of the States/Territories with an assets test place the limit at \$1,000,000, but two States use a lower limit (\$10,000 in Kansas and \$25,000 in Wisconsin).
- Among the States/Territories that use an assets test, 17 States/Territories exempt the entire value of all vehicles in the household, and Colorado exempts the entire value of one vehicle. Thirty-six States/Territories count the value of all vehicles toward the asset limit.

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

Changes in Financial Eligibility Tests from 2019 to 2020

Comparing October 2019 to October 2020, 45 States/Territories increased their income thresholds for initial eligibility. The percentage increase for a family of three ranged from 1.8 percent in Missouri to 50.7 percent in Oregon, with a median increase of 7.8 percent.⁵²

Thirty-nine States/Territories used different eligibility thresholds during the eligibility period than at initial eligibility in 2020. Between October 2019 and October 2020, 29 of these States/Territories increased their thresholds, 4 lowered their thresholds, and 6 made no changes to the thresholds. Among the States/Territories that increased the eligibility thresholds used during the eligibility period, the percentage change for a family of three ranged from 1.8 percent in Missouri to 13.4 percent in Michigan, with a median increase of 4.2 percent. Among the States/Territories that lowered the eligibility thresholds used during the eligibility period, the percentage change for a family of three ranged from a 9.8 percent decrease in Delaware to a 29.6 percent decrease in Alabama. Two States (Oregon and Utah) stopped using different thresholds for families during the eligibility period, instead using the same thresholds as used for initial eligibility.

Nine States/Territories used different eligibility thresholds at redetermination than those used at either initial eligibility or during the eligibility period. Between October 2019 and October 2020, seven of these States/Territories increased the thresholds, one lowered the thresholds, and one made no changes to the thresholds. Among the States/Territories that increased the thresholds, the percentage change for a family of three ranged from 1.8 percent in Delaware to 4.7 percent in Illinois, with a median increase of 1.8

⁵² Some changes in eligibility thresholds can be attributed to inflation. Between October 2019 and October 2020, the Consumer Price Index for All Urban Consumers (CPI-U) increased 1.2 percent. For additional information, see the Bureau of Labor Statistics: https://www.bls.gov/regions/mid-atlantic/data/consumerpriceindexhistorical_us_table.htm

percent. In Idaho, the state newly began using different thresholds at redetermination, lowering the threshold for a family of three by 35 percent compared to 2019. Oregon, Utah, and Vermont no longer used different thresholds than those used at initial eligibility and during the eligibility period.

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

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

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

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

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Kentucky	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Louisiana	12	Subsidy provided through the end of eligibility period if child ages out	17 ¹⁵	No exceptions	12	No exceptions
Maine	12	No exceptions	18	No exceptions	12 ⁷	No exceptions ⁷
Maryland	12	No exceptions	18	No exceptions	NA ¹⁶	NA ¹⁶
Massachusetts	12	Subsidy provided through the end of eligibility period if child ages out	15	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Michigan	12	Subsidy provided through the end of eligibility period if child ages out	17	Other ¹⁷	12	No exceptions ¹⁸
Minnesota	12	Subsidy provided through the end of eligibility period if child ages out ¹⁹	14	Subsidy provided through the end of eligibility period if child ages out ²⁰	NA ¹⁶	NA ¹⁶
Mississippi	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Missouri	12	Subsidy provided through the end of eligibility period if child ages out	17	Subsidy provided through the end of school year if child ages out	17	No exceptions

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Montana	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	17	No exceptions
Nebraska	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	18	No exceptions
Nevada	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
New Hampshire	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	17	No exceptions
New Jersey	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	18	No exceptions
New Mexico	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	12	No exceptions
New York	12	Subsidy provided through the end of school year if child ages out ²¹	17	Other ²²	12 ²³	Subsidy provided through the end of school year if child ages out ²³
No. Mariana Islands	12	No exceptions	12	No exceptions	12	No exceptions

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
North Carolina	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	17	No exceptions
North Dakota	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	NA ²⁴	NA ²⁴
Ohio	12	Subsidy provided through the end of eligibility period if child ages out	17	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Oklahoma	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12 ⁷	No exceptions ⁷
Oregon	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	12 ²⁵	Subsidy provided through the end of eligibility period if child ages out ²⁵
Pennsylvania	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	Subsidy provided through the end of eligibility period if child ages out
Puerto Rico	12	No exceptions	18	No exceptions	18	No exceptions
Rhode Island	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	Subsidy provided through the end of eligibility period if child ages out

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
South Carolina	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	No exceptions
South Dakota	12	Subsidy provided through the end of eligibility period if child ages out	17 ²⁶	Other ²⁶	17 ²⁷	No exceptions ²⁷
Tennessee	12	No exceptions	18 ²⁸	Subsidy provided through the end of school year if child ages out	12 ²⁹	No exceptions ²⁹
Texas	12	Subsidy provided through the end of eligibility period if child ages out	18 ³⁰	Other ³⁰	18 ³¹	Other ³¹
Utah	12	Subsidy provided through the end of eligibility period if child ages out	17 ¹⁵	No exceptions	17 ¹⁵	No exceptions
Vermont	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	18 ³²	No exceptions ³²
Virgin Islands	12 ³³	No exceptions	18 ³⁴	No exceptions	18 ³⁵	No exceptions ³⁵
Virginia	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	12 ⁶	No exceptions ⁶

Table 1. Maximum Age Allowed for CCDF Eligibility, 2020

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Washington	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12 ³⁶	No exceptions
West Virginia	12	No exceptions	17 ³⁷	No exceptions	12 ⁶	No exceptions ⁶
Wisconsin	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12 ³⁸	No exceptions ³⁸
Wyoming	13	No exceptions	17	No exceptions	13	No exceptions

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² The policies shown here apply to children receiving protective services. Additional policies about children under court-ordered supervision are captured in notes.

³ The policies shown here apply to children receiving services through the State's/Territory's Child Protective Services (CPS) program. Additional policies about children under court-ordered supervision are captured in notes. If the state continues eligibility through the end of the month in which the child exceeds the age limit (i.e., through the end of the month of the child's 19th birthday), this is not coded as an exception to the age requirement. Instead it is treated as part of a general administrative procedure (with care having been approved through the last month in which the child was age-eligible) and footnoted for the general age requirement.

⁴ The age limit is 12 for children under court-ordered supervision.

⁵ Counties may opt to provide protective services child care using CCDF funds.

⁶ The age limit is 17 for children under court-ordered supervision.

⁷ The age limit is 18 for children under court-ordered supervision.

⁸ The child may receive care until the month of his or her 19th birthday.

⁹ Children who turn 13 during the eligibility period may remain eligible for the entire eligibility period unless the birthday occurs in the first month of the eligibility period.

¹⁰ Children with special needs who turn 19 during the eligibility period may remain eligible for the entire eligibility period unless the birthday occurs in the first month of the eligibility period.

¹¹ Child protective services child care is not provided under the state's primary child care subsidy program. The age limit for children under court-ordered supervision is 18, or until the end of the eligibility period if the child ages out.

¹² A child with special needs may participate until the Sunday following his or her 18th birthday.

- ¹³ Children age 13 up to age 16 who do not have special needs and are not in protective services or foster care may be eligible for child care benefits if there are special circumstances that put the safety and well-being of the children at risk if left home alone.
- ¹⁴ Children age 13 up to age 16 may be eligible for child care benefits if there are special circumstances that put the safety and well-being of the children at risk if left home alone.
- ¹⁵ A child is eligible through the month of the child's 18th birthday.
- ¹⁶ Child protective services child care is not provided under the state's primary child care subsidy program.
- ¹⁷ At age 18, the child may continue to receive care if he or she requires constant care due to a physical, mental, or psychological condition or a court order, is a full-time high school student, and is reasonably expected to complete high school before age 19.
- ¹⁸ Children under court supervision may receive care up to age 17, or 18 if still in high school and expected to graduate before turning 19.
- ¹⁹ When a child turns age 13, the child's service authorization must end on the child's birthday, but the child remains eligible for a subsidy until the family's next redetermination. If care is still needed after the child turns age 13, the parent must contact the caseworker and request care be authorized.
- ²⁰ When a child with a documented disability turns age 15, the child's service authorization must end on the child's birthday, but the child remains eligible for a subsidy until the family's next redetermination. If care is still needed after the child turns age 15, the parent must contact the caseworker and request care be authorized.
- ²¹ Children who turn 13 during the school year may continue to receive care through the end of the school year using Title XX funding and using a provider with whom the district has a contract or letter of intent and who is licensed or registered.
- ²² If the child is enrolled full time in secondary school or in an equivalent level of vocational or technical training, he or she may receive care through age 18.
- ²³ Children who turn 13 during the school year may continue to receive care through the end of the school year using Title XX funding and using a provider with whom the district has a contract or letter of intent and who is licensed or registered. Children under court supervision may receive care through age 17. If the child is enrolled full time in secondary school or in an equivalent level of vocational or technical training, he or she may receive care through age 18.
- ²⁴ Child protective services child care is not provided under the state's primary child care subsidy program. The age limit is 18 for children under court-ordered supervision.
- ²⁵ Unless the state determines that the child should not be left unsupervised during the parents' work hours, the general age limit for children in protective services is through age 12.
- ²⁶ The maximum age is 18 if the child is enrolled in school and expected to graduate, and is physically or mentally incapable of self-care.
- ²⁷ The maximum age is 18 if the child is enrolled in school and expected to graduate, and is under court supervision.
- ²⁸ Children are eligible until the date of their 18th birthday or the date of their high school graduation if they graduate before turning 19, whichever is later.
- ²⁹ Children can receive care through their 18th birthday or high school graduation, whichever one comes first, if the child has special needs or is under court ordered supervision.
- ³⁰ Subsidies for children over the age of 12 with disabilities are at the discretion of the local agency.
- ³¹ Services for a child receiving protective services may continue as long as the child protective services agency authorizes the care.
- ³² Children under court supervision or committed to the custody or guardianship of the commissioner are eligible through age 18.
- ³³ A child is eligible through the month of the child's 13th birthday.
- ³⁴ A child is eligible through the month of the child's 19th birthday.
- ³⁵ The age of a child in protective services must be exempt by a court order within the Virgin Islands code. A child is eligible through the month of the child's 19th birthday.
- ³⁶ Children in child protective services and foster care can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they must meet the same requirements as other families.
- ³⁷ For home-based self-employed applicants, the maximum age for a child who is physically or mentally incapacitated is 12.
- ³⁸ Children who are receiving child protective services and reside with the natural or biological parents receive the same services and must meet the same eligibility requirements as all other families served in the program.

Table 2. Approved Activities for CCDF Eligibility, 2020

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Alabama	Yes ²	Yes, only for continuing eligibility	6 months in a year ³	No	Yes	Yes	No
Alaska	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ⁴	No	No	Yes	Yes
American Samoa	Yes	Yes, for initial and continuing eligibility	Other ⁵	NA ⁶	No	NA ⁷	NA ⁷
Arizona	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	No	Yes	Yes
Arkansas	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence ⁸	No	Yes	Yes	No
California	Yes	Yes, for initial and continuing eligibility	Through the end of the eligibility period	NA ⁹	Yes ¹⁰	Yes	Yes
Colorado	Yes	Yes, for initial and continuing eligibility	13 weeks per job loss occurrence ¹¹	NA ⁹	Yes ¹²	Yes ¹³	Yes ¹⁴
Connecticut	Yes	Yes, only for continuing eligibility	Through the end of the eligibility period	No	No	Yes ¹⁵	Yes ¹⁵
DC	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	Yes	Yes	Yes
Delaware	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	Yes ¹⁶	Yes ¹⁷	Yes ¹⁷
Florida	Yes	Yes, only for continuing eligibility ¹⁸	3 months per job loss occurrence	NA ⁹	Yes ¹⁹	Yes	Yes
Georgia	Yes ²⁰	Yes, only for continuing eligibility ²¹	13 weeks per job loss occurrence ²²	Yes	No	Yes	Yes ²³
Guam	Yes	No ²⁴	NA	Yes	Yes ²⁴	Yes	No
Hawaii	Yes	Yes, for initial and continuing eligibility	30 days in a year ²⁵	No	No ²⁶	Yes ²⁷	Yes

Table 2. Approved Activities for CCDF Eligibility, 2020

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Idaho	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	Other ²⁸	Yes	Yes ²⁹
Illinois	Yes	Yes, only for continuing eligibility ³⁰	90 days per job loss occurrence	No	No	Yes	Yes ³¹
Indiana	Yes	Yes, only for continuing eligibility	26 weeks per job loss occurrence ³²	Yes ³³	No	Yes	No
Iowa	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	No	No	Yes ³⁴	Yes ³⁴
Kansas	Yes ³⁵	Yes, only for continuing eligibility ³⁶	Through the end of the eligibility period ³⁷	Yes	No	Yes	Yes ³⁸
Kentucky	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	No	Yes	No
Louisiana	Yes	Yes, for initial and continuing eligibility	90 days per job loss occurrence	No	No ³⁹	Yes ⁴⁰	No
Maine	Yes	Yes, only for continuing eligibility ⁴¹	12 weeks per job loss occurrence	No	No	No	Yes ⁴²
Maryland	Yes	Yes, only for continuing eligibility ¹⁸	3 months per job loss occurrence ⁴³	No	No	Yes	Yes
Massachusetts	Yes	Yes, for initial and continuing eligibility	26 weeks per job loss occurrence ⁴⁴	No	Yes ⁴⁵	Yes ⁴⁶	Yes ⁴⁶
Michigan	Yes	Yes, only for continuing eligibility ⁴⁷	Through the end of the eligibility period	Yes ⁴⁸	No	Yes	Yes
Minnesota	Yes	Yes, for initial and continuing eligibility	12 weeks in a year ⁴⁹	No	No ⁵⁰	Yes ⁵¹	Yes ⁵¹
Mississippi	Yes	Yes, only for continuing eligibility ⁵²	3 months per job loss occurrence ⁵²	No	Yes ⁵³	Yes	Yes
Missouri	Yes	Yes, for initial and continuing eligibility ⁵⁴	90 days per job loss occurrence ⁵⁵	Yes	Other ⁵⁶	Yes ⁵⁷	Yes ⁵⁷

Table 2. Approved Activities for CCDF Eligibility, 2020

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Montana	Yes	Yes, only for continuing eligibility ⁵⁸	90 days per job loss occurrence ⁵⁹	No	Yes ⁶⁰	Yes ⁶¹	No
Nebraska	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ⁶²	Yes	Yes ⁶³	Yes	Yes
Nevada	Yes	Yes, for initial and continuing eligibility ⁶⁴	90 days in a year ⁶⁵	Yes	Yes ⁶⁶	Yes	Yes
New Hampshire	Yes	Yes, for initial and continuing eligibility	92 days per job loss occurrence ⁶⁷	No	Other ⁶⁸	Yes ⁶⁹	Yes ⁶⁹
New Jersey	Yes	Yes, only for continuing eligibility ⁷⁰	3 months in a year	NA ⁹	No	Yes	Yes
New Mexico	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	No	Yes	Yes
New York	Yes	Yes, for initial and continuing eligibility ⁷¹	6 months per job loss occurrence ⁷²	Yes	Yes ⁷³	Yes	No
No. Mariana Islands	Yes	Yes, for initial and continuing eligibility	3 months in a year	NA ⁶	No	NA ⁷	NA ⁷
North Carolina	Yes	Yes, for initial and continuing eligibility	90 days per job loss occurrence ⁷⁴	Yes	No	Yes	Yes
North Dakota	Yes	Yes, only for continuing eligibility ⁷⁵	3 months per job loss occurrence ⁷⁶	No	Yes ⁷⁷	Yes ⁷⁸	Yes ⁷⁸
Ohio	Yes	Yes, only for continuing eligibility	Other ⁷⁹	Yes	No ⁸⁰	Yes ⁸¹	Yes ⁸¹
Oklahoma	Yes	No ⁸²	NA	Yes	Yes	Yes	No
Oregon	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ⁸³	No	No	Yes ⁸⁴	No
Pennsylvania	Yes	Yes, only for continuing eligibility	92 days per job loss occurrence ⁸⁵	Yes	No	Yes ⁸⁶	No

Table 2. Approved Activities for CCDF Eligibility, 2020

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Puerto Rico	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	NA ⁶	No ⁸⁷	Yes	Yes
Rhode Island	Yes ⁸⁸	Yes, only for continuing eligibility	3 months per job loss occurrence ⁸⁹	Yes ⁹⁰	No	Yes ⁹¹	Yes ⁹¹
South Carolina	Yes ⁹²	Yes, only for continuing eligibility	3 months per job loss occurrence	Yes	No	Yes ⁹³	Yes ⁹³
South Dakota	Yes	Yes, only for continuing eligibility ⁹⁴	90 days per job loss occurrence ⁹⁴	No	No	Yes ⁹⁵	No
Tennessee	Yes	Yes, for initial and continuing eligibility ⁹⁶	3 months per job loss occurrence	Yes	No	Yes	Yes
Texas	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ⁸⁹	Yes	No ⁹⁷	Yes	No
Utah	Yes	No ⁹⁸	NA	No	Yes ⁹⁹	Yes	Yes
Vermont	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	No	Yes	Yes	No
Virgin Islands	Yes	Yes, only for continuing eligibility ¹⁰⁰	3 months per job loss occurrence	No	No	Yes ¹⁰¹	Yes ¹⁰¹
Virginia	Yes ¹⁰²	No ¹⁰³	NA	Yes	No	Yes	Yes
Washington	Yes	Yes, only for continuing eligibility ¹⁸	Through the end of the eligibility period ¹⁰⁴	Yes	Yes ¹⁰⁵	Yes	Yes ¹⁰⁶
West Virginia	Yes ¹⁰⁷	Yes, for initial and continuing eligibility	3 months per job loss occurrence ¹⁰⁸	No	No	Yes	No
Wisconsin	Yes	Yes, only for continuing eligibility ¹⁰⁹	3 months per job loss occurrence ¹¹⁰	Yes	No	Yes	Yes ¹¹¹
Wyoming	Yes	Yes, only for continuing eligibility	90 days in a year ¹¹²	Yes	No	Yes	Yes ¹¹³

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² Working from home is an approved activity for eligibility due to the COVID-19 pandemic.

³ Job search activities are limited to one 6-month period within the 12-month eligibility period. If a parent experiences a non-temporary job loss during the eligibility period, the family will continue to receive care authorized at the current level so the parent can engage in job search activities.

⁴ If a parent experiences a non-temporary job loss during the eligibility period, the family will continue to receive care authorized at the current level for three months so the parent can engage in job search activities.

⁵ Job search activities can be approved for two months at a time and initially renewed up to a maximum of six months. The parent must then wait six months before qualifying for a second and final job search period, not to exceed an additional six months. For those who are initially found eligible for child care based on employment but lose their job, continuing eligibility for job search is approved until the end of the authorization period.

⁶ The nutrition assistance program does not have an employment and training program.

⁷ This territory or outlying area does not have a TANF program.

⁸ Job search activities can be accessed for up to 3 months per job loss within the 60-month lifetime limit.

⁹ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.

¹⁰ The basis of need for families experiencing homelessness is defined as seeking permanent housing for family stability, though there is no activity requirement for families experiencing homelessness.

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

¹² Families experiencing homelessness are provided child care for a 60-day stabilization period.

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

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

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

¹⁶ Families experiencing homelessness can receive child care services for up to 90 days.

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

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

¹⁹ If a family experiencing homelessness and participating in housing search activities receives a documented referral from a certified homeless shelter or domestic violence shelter, they are eligible for child care services.

²⁰ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. New applicants must still meet the 24-hour requirement.

²¹ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. Job search qualifies as an initial eligibility activity for clients who receive priority due to TANF, homelessness, domestic violence, or natural disaster. Clients with job search as an activity for continuing eligibility can count job search hours towards their hour requirement. Families who experience a permanent loss of employment or cannot attend an education or training program due to matters related to COVID-19 can continue child care services at the current level through the end of their current eligibility period. The family does not have to report the permanent loss of activity.

²² If the client does not resume participation in a state-approved activity at any level during the 13-week job search period, the case will close at the end of the 13-week job search period.

²³ TANF participation requirements, as outlined in the family service plan, are approved activities.

²⁴ Job search is an allowable activity for families experiencing homelessness.

- ²⁵ Thirty consecutive days in a 12-month period may be approved for job search activities. Families who do not have an activity currently, lost their activity, or whose activity hours are limited or reduced due to the pandemic are eligible for subsidies.
- ²⁶ Families with income below 100 percent of the Federal Poverty Guidelines who are employed and homeless are given priority.
- ²⁷ Applicants may participate in a TANF work program or a treatment program.
- ²⁸ Families experiencing homelessness and searching for housing through a homeless agency may be approved as participating in a training activity.
- ²⁹ Employment and other activities are approved under the state's TANF program. The family may participate in other activities as outlined in its personal responsibility contract.
- ³⁰ For TANF clients participating in an approved agency program, job search is an eligible activity for initial and continuing eligibility if listed in their plan.
- ³¹ Approved activities include education, training, job search, substance abuse and mental health treatment, or any activity included in the participant's responsibility and services plan.
- ³² The job search eligibility period was extended due to the COVID-19 pandemic.
- ³³ Families participating in the SNAP IMPACT program are eligible for four weeks.
- ³⁴ Families who receive TANF or participate in the state's TANF work program are eligible for child care assistance regardless of income.
- ³⁵ Employed adults must earn at least the federal minimum wage per hour, including tips, to qualify for child care. If a person has been self-employed for at least six full months and is not earning the equivalent of the federal minimum wage at the end of the 12-month eligibility period, child care services will be terminated.
- ³⁶ For TANF and SNAP work program participants, job search is an eligible activity for initial and continuing eligibility.
- ³⁷ The job search period is extended through the end of the eligibility period due to the COVID-19 pandemic.
- ³⁸ TANF child care can also be approved for TANF families who need child care for employment, as well as TANF families who have a temporary emergency need, known as a social service need. Qualifying social service reasons include situations in which parents are in crisis, situations in which a foster child has been placed with a relative or non-related kin who is not licensed for foster care and may or may not be receiving a relative or Kinship Care payment from the foster care contractor, and situations in which a parent or caretaker has temporarily placed a child with a Safe Families for Children host family to avoid placement of the child in foster care while they work to resolve a crisis situation.
- ³⁹ Families experiencing homelessness do not have a requirement for a qualifying activity.
- ⁴⁰ Eligibility is approved for participation in the state program that provides education, employment, training, and related services for families receiving or applying for TANF assistance.
- ⁴¹ Job search activities may be approved for a maximum of 12 weeks for current recipients who have lost work or who have completed school and are looking for work. Coverage starts on the first day of unemployment, and parents are granted up to 20 hours of care per week. Families are eligible for care during one of three breaks in eligibility (maternal/paternal leave, short-term medical leave, or job search) within a six-month period.
- ⁴² Child-only TANF recipients and TANF families with parents in school are eligible for the state's subsidy program.
- ⁴³ The three-month time limit is per job loss occurrence. If the individual has difficulty finding employment, multiple job search periods may be approved.
- ⁴⁴ In response to the COVID-19 health emergency, families could be approved for job search for up to 26 weeks or the end of the 12-month eligibility period, whichever is sooner.
- ⁴⁵ If the family is referred by the state's housing authority program, the family may be approved for care for housing search and other shelter activities. The service need for a family experiencing homelessness is limited to two 12-month authorization periods, unless approved by the state in writing on a case-by-case basis.
- ⁴⁶ Families receiving TANF may receive child care if the family is referred by the department that administers the state's TANF program.
- ⁴⁷ For TANF work program families, job search is an eligible activity for initial and continuing eligibility if it is part of their work participation requirement.
- ⁴⁸ Department assigned employment preparation activities are approved.
- ⁴⁹ Parents may be authorized at initial application or redetermination for job search. A maximum of 20 hours per week over 12 weeks for a total of 240 hours per year is allowed. Parents can participate in job search activities for more than 12 weeks if they are approved for less than 20 hours of job search per week. TANF families are exempt from this maximum if job search activities are a part of their employment plan. Families who met other activity requirements and experience a permanent end to all activities can continue to receive 12 weeks of child care for job search under extended eligibility. There is no limit to the number of extended eligibility periods a family may use during their 12-month eligibility period.
- ⁵⁰ Families experiencing homelessness at application are exempt from activity requirements. The family must be participating in an authorized activity within three months of the application date to continue receiving subsidy.

- ⁵¹ TANF recipients must either be involved in activities related to an approved employment plan as developed by the participant and a job counselor, or one of the following activities outside of the work program: employment, job search, financial and employment services orientation, or appeals and hearings for cash assistance.
- ⁵² Job search is typically an eligible activity for three months from the last day of employment, provided the parent notified the agency of the loss of employment within 10 days. When disaster or emergency conditions have been declared, the agency may initiate an extended period of job search at which time new redetermination dates will be set. Families will have 60 days from the day that the declared emergency has ended to complete job search activities or enroll in an approved educational program.
- ⁵³ Eligibility is determined by the referral agency.
- ⁵⁴ For TANF clients, job search is an eligible activity for initial and continuing eligibility. In response to the COVID-19 pandemic, job search is also approved for initial eligibility for non-TANF families.
- ⁵⁵ Job search activities are allowed through the last day of the month in which the 90th day falls.
- ⁵⁶ Families experiencing homelessness may be approved for care if they participate in a community-based program designed to eliminate the homelessness.
- ⁵⁷ The applicant must be participating in work or education activities.
- ⁵⁸ For TANF recipients, job search activities are only approved for applicants who have job search in their employability or service plan.
- ⁵⁹ Job search activities are limited to 90 days per job loss occurrence beginning on the day the job loss occurs. One grace period may be granted per job loss or cessation of school or training. There is no explicit limit on the number of times a parent may use the job loss grace period.
- ⁶⁰ A family that reports homeless status is eligible for 90 calendar days of eligibility to meet program requirements.
- ⁶¹ Parents receiving TANF cash assistance must be participating in their employability or service plan.
- ⁶² Job search is approved for three months following the loss of employment or the end of an educational activity during the eligibility period. Job search is not an approved activity for initial eligibility.
- ⁶³ Child care may be authorized up to 40 hours per week for three months to provide stability to the individual's child and to allow the parent or usual caretaker the opportunity to seek out community resources. If the individual is not meeting another need for service by the end of the three month period, the authorization will end.
- ⁶⁴ Families are not eligible for job search if the eligible child is school age (between 6 and 12 years old) or has special needs (over 13 years old). If the child is not in school due to school breaks or holidays, child care is approved during job search activities.
- ⁶⁵ Job search activities are limited to 90 days per calendar year.
- ⁶⁶ Housing search is an approved activity if it is part of a homeless self-sufficiency plan.
- ⁶⁷ Job search is available for initial and continuing eligibility for 92 calendar-day periods. A parent may receive multiple 92 calendar-day periods during their 12-month eligibility. If the parent has not found an approved employment activity at the end of the 92nd day, the family will not be eligible for care.
- ⁶⁸ Participants who are seeking both employment and housing can qualify for subsidized care.
- ⁶⁹ TANF participants must be participating in employment, an associate's or bachelor's degree program, or a course of study necessary to meet the participants' goals for obtaining employment.
- ⁷⁰ For TANF clients, job search is an eligible activity for initial and continuing eligibility. Non-TANF families may continue to receive child care assistance if they experience a temporary absence from work, as long as this temporary change in circumstances does not last more than three months. If the cessation in work lasts more than three months, applicants can apply for job search child care assistance for an additional three months. Families that are not engaged in work, school, or a training activity when the three-month period ends are no longer eligible for the subsidy.
- ⁷¹ Policy coded for New York City. Job search activities are defined by each district.
- ⁷² Policy coded for New York City. Job search activities can be approved for up to six months if a district selects this option in its Child and Family Services Plan and has funds available. Districts can limit job search activities to less than six months. This limitation is per year, unless otherwise noted in the district's Child and Family Services Plan.
- ⁷³ If funds are available, districts must provide child care to homeless families for housing search if the child's caretaker is also seeking employment, engaged in work, or participating in an approved educational or vocational activity, or for the caretaker to access or participate in counseling services programs.

- ⁷⁴ Ninety days of child care eligibility are authorized for unemployment following a job loss, transition from education or training activities, the post-secondary education time limit, or any other interruption of eligible activity that does not exceed 90 days. Assistance can be extended beyond 90 days if the caseworker determines that an extension is warranted.
- ⁷⁵ Job search is an approved activity for initial eligibility for homeless households and for TANF and Transitional Child Care families who have job search listed on their employment plan.
- ⁷⁶ Job search activities are allowed for three consecutive months. The limit does not apply to TANF recipients if they have different guidelines listed in their individual employment plans. A household may be allowed more than one period of three consecutive months within the 12-month certificate period.
- ⁷⁷ Families experiencing homelessness can be approved for care if they meet activity requirements, which can include housing search. If the family's only allowable activity is housing search, the family is eligible to receive up to 15 hours of care per week.
- ⁷⁸ Approved activities include participation in employment, education, training, or any approved TANF work program.
- ⁷⁹ When an approved activity ends, child care can be continued for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ⁸⁰ If the homeless caretaker does not meet the eligibility requirements, the family will be determined eligible for homeless child care without regard to income or activity and the copayment will be waived.
- ⁸¹ Child care is approved if it is necessary for the parent to comply with the requirements of a self-sufficiency contract.
- ⁸² Job search activities are approved if they are part of a TANF work assignment. Eligible families who lost their job due to COVID-19 may receive a temporary child care subsidy benefit for 60 days of job search.
- ⁸³ Job search may be approved for up to three months after a job loss occurs. For TANF clients, job search activities must be approved by agency staff.
- ⁸⁴ TANF recipients receive child care through the CCDF program if they are participating in the TANF work program and at least half of their work program hours are for employment.
- ⁸⁵ Job search activities are approved for 92 days from the date employment ended. TANF families are allowed 30 days between breaks in activities during which time they continue receiving subsidized child care.
- ⁸⁶ Participants in the TANF training or work support training program are eligible for child care subsidies.
- ⁸⁷ Families experiencing homelessness do not need to comply with any approved activities to be eligible for the first 30 days of services. After 30 days, families will have to comply with approved activities. Housing search is not an approved activity.
- ⁸⁸ Each client must earn, per hour, an average of the greater of either the state or federal minimum wage.
- ⁸⁹ The job search period may be extended based on the needs of the family due to COVID-19.
- ⁹⁰ SNAP E&T activities may be approved for income-eligible parents if the activities include an approved training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness or job attachment program. SNAP E&T activities may be approved for TANF recipients if part of their employment plan.
- ⁹¹ TANF applicants may participate in employment or education as approved in their employment plan.
- ⁹² Employment includes subsidized employment, on-the-job training, and self-employment. It may also include part-time or work-study employment for at least 15 hours a week. A participant is considered employed if he or she is paid a salary. Self-employed participants must make at least minimum wage by the end of the first year of child care services in order to continue receiving care.
- ⁹³ A TANF participant who is participating in work, school, or training, complying with his or her TANF family plan, participating in a TANF countable component, attempting to start a countable component within two weeks, or incapacitated and unable to work for 90 or more days is eligible for child care assistance. Care may be authorized for up to 26 weeks at a time and up to 52 weeks per application.
- ⁹⁴ If a person is already receiving child care assistance and suffers a loss of employment, three months of continued assistance can be granted from the last day of employment.
- ⁹⁵ TANF families participating in activities approved by the TANF employment specialist are eligible for reimbursement of child care costs for those activities.
- ⁹⁶ Families that no longer meet the minimum work hour requirement at redetermination because of a change due to the COVID-19 pandemic are given a 90-day job search period. If the family meets the minimum work hour requirement during the 90-day period, the family is approved for a full 12-month eligibility period. If the family is not able to meet the minimum work hour requirement during the job search period, their eligibility will end at the end of the 90 days.
- ⁹⁷ Children determined to be experiencing homelessness may receive three months of care before documentation of the child's eligibility and the caretaker's participation in an eligibility activity are required. Families experiencing homelessness are not subject to the minimum participation requirements; participation in work, education, or training may be at any level.

⁹⁸ Effective May 31, 2019, child care assistance for job search activities is no longer available. Households already utilizing the previous program will remain eligible through the end of their current certification period.

⁹⁹ Families experiencing homelessness may use child care assistance for activities including, but not limited to, employment, job search, training, shelter search, or working through a crisis situation.

¹⁰⁰ A three-month job search period is triggered if the parent or legal guardian loses his or her employment during the eligibility period. If the parent or legal guardian engages in a qualifying activity by the end of the grace period, assistance continues until the end of the 12-month eligibility period.

¹⁰¹ Any TANF parent who is working or officially enrolled or registered and actively participating in a job training or educational program is eligible.

¹⁰² If the client has been self-employed for less than a year, he or she must provide proof of earnings equivalent to the minimum wage for actual hours worked at the time of the next scheduled redetermination.

¹⁰³ Job search activities are only approved if they are part of a TANF or SNAP work program.

¹⁰⁴ After eligibility determination, participation in an approved activity is not a factor in continuing eligibility for the entirety of a 12-month certification period. Job search periods are limited to two times per year. Each job search period is for 28 days, and the job search periods may be used back to back, for a total of 56 days of job search per year.

¹⁰⁵ Families experiencing homelessness are eligible for a 12-month certification period, regardless of approved activity participation requirements. These families, if approved, have 12 months to provide verification of participation in an approved activity. If not provided, the eligibility will be terminated.

¹⁰⁶ The following additional TANF activities are automatically approved for subsidized child care: community service, disability-related vocational rehabilitation, alcohol or substance abuse treatment, resolution of homelessness, parenting or family planning classes, pursuit of disability or veteran's benefits, family violence intervention, mental health services, learning disability services, temporary physical incapacity, and medical treatment.

¹⁰⁷ Parents who telework from home during scheduled business hours may receive child care services provided the employer has approved the parent for teleworking or the parent has entered into a telework contract with the employer. The parent must provide either a written statement from the employer indicating the days and hours approved by teleworking or a copy of a telework contract signed by the employer indicating the days and hours telework is approved.

¹⁰⁸ Recipients can receive care for job search activities for up to three months. Job search activities are covered for eight hours a day, five days a week.

¹⁰⁹ Eligible parents who experience a permanent loss of employment or a permanent loss of another approved activity will be offered an opportunity to receive at least the same level of child care assistance for job search for up to three months.

¹¹⁰ Parents are not limited to one job search period during the 12-month eligibility period, but the parent must be engaged in another approved activity between periods of job search.

¹¹¹ Child care is approved for all TANF placement types and activities assigned on the employability plan or case management plan as long as care is needed in order to participate in the activities.

¹¹² Job search activities may be approved for up to 90 days during the 12-month eligibility period.

¹¹³ Child care is approved for all TANF activities assigned on the applicant's case management plan, as long as care is needed to participate in these activities.

Table 3. Approved Activities for CCDF Eligibility (continued), 2020

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

Table 3. Approved Activities for CCDF Eligibility (continued), 2020

State/Territory*	High School ²	GED ²	ESL ²	Training ²	Adult Basic Education ³	Post-Secondary Education ²
Mississippi	Yes	Yes	No	Yes	Yes	Yes
Missouri	Yes	Yes	Yes	Yes	Yes ⁴⁷	Yes
Montana	Yes ⁴⁸	Yes ⁴⁸	No	Yes ⁴⁹	Yes	Yes ⁵⁰
Nebraska	Yes	Yes	Yes	Yes	Yes	Yes ⁵¹
Nevada	Yes ⁵²	Yes ⁵²	No	Yes ⁵³	Yes ⁵⁴	Yes ⁵⁵
New Hampshire	Yes	Yes	Yes	Yes ⁵⁶	Yes	Yes ⁵⁷
New Jersey	Yes	No ⁵⁸	Yes	Yes	--- ¹	Yes
New Mexico	Yes	Yes ⁵⁹	Yes	Yes	Yes	Yes
New York	Yes ⁶⁰	Yes ⁶⁰	Yes ⁶¹	Yes ⁶²	Yes ⁶¹	No ⁶³
No. Mariana Islands	Yes	Yes	No	Yes	Yes	Yes
North Carolina	Yes	Yes	No	Yes	Yes	Yes ⁶⁴
North Dakota	Yes	Yes	Yes	Yes ⁶⁵	Yes	Yes ⁶⁶
Ohio	Yes ⁶⁷	Yes ⁶⁷	Yes ⁶⁷	Yes	Yes ⁶⁷	Yes ⁶⁸
Oklahoma	Yes	Yes ⁶⁹	Yes ⁶⁹	Yes ⁷⁰	Yes	Yes ⁷¹
Oregon	No ⁷²	No ⁷²	No ⁷²	No	No ⁷²	No ⁷²
Pennsylvania	Yes	Yes ⁷³	No ⁷⁴	No ⁷⁵	Yes	No ⁷⁶
Puerto Rico	Yes ⁷⁷	Yes ⁷⁷	No	Yes ⁷⁸	--- ¹	Yes ⁷⁹
Rhode Island	Yes ⁸⁰	Yes ⁸⁰	No ⁸¹	Yes ⁸²	No ⁸³	No
South Carolina	Yes	Yes	Yes ⁸⁴	Yes	Yes	Yes
South Dakota	Yes	Yes	No	Yes	No	Yes
Tennessee	Yes	No ⁸⁵	No	Yes	No ²⁶	Yes
Texas	Yes	Yes	Yes	Yes	Yes ⁸⁶	Yes
Utah	No ⁸⁷	No ⁸⁷	No ⁸⁷	No ⁸⁷	No ⁸⁷	No ⁸⁸
Vermont	Yes	Yes	Yes	Yes ⁸⁹	Yes	Yes ⁸⁹
Virgin Islands	Yes	Yes	No	Yes	Yes	Yes
Virginia	Yes	Yes	Yes	Yes	Yes	Yes
Washington	Yes ⁹⁰	Yes ⁹⁰	No ⁹⁰	No ⁹⁰	No ⁹⁰	No ⁹⁰

Table 3. Approved Activities for CCDF Eligibility (continued), 2020

State/Territory*	High School ²	GED ²	ESL ²	Training ²	Adult Basic Education ³	Post-Secondary Education ²
West Virginia	Yes	Yes	Yes	Yes	Yes	Yes ⁹¹
Wisconsin	Yes ⁹²	Yes ⁹²	No ⁹³	Yes ⁹⁴	No ⁹⁵	No ⁹⁶
Wyoming	Yes	Yes	No	Yes	Yes	Yes ⁹⁷

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

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

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

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

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

⁷ Training and educational activities are limited to academic, non-academic vocational, trade, or technical training programs lasting no more than 48 calendar months from the parent's initial enrollment into the program. In the absence of an instructor or educational institution, the timeframe for eligibility will not exceed 24 months. Online classes may be approved for college students due to the COVID-19 pandemic.

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

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

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

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

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

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

¹⁴ High school and GED activities are approved for families with parents under age 20, as well as TANF families if it is part of their employment services plan.

¹⁵ GED activities are approved for families with parents under age 20, as well as TANF families if it is part of their employment services plan.

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

- ¹⁷ Preliminary training is basic training provided before job skills training to prepare the person for employment. Preliminary training includes English as a Second Language courses for foreign-born adults and GED classes for adults. Preliminary training may be counted as an approved activity for up to two years.
- ¹⁸ Post-secondary education is only approved if it is part of a TANF employment and training program or if the applicant began education activities while in a SNAP employment and training program.
- ¹⁹ Parents' education activities must consist of at least 20 hours of combined approved activities per week.
- ²⁰ Parents eligible for training must participate in at least 20 hours of combined approved activities per week.
- ²¹ Parents eligible based on education or training activities must participate in at least 20 hours of combined approved activities per week. Post-secondary education is limited to technical or vocational programs, associate degree programs, and bachelor's degree programs.
- ²² GED activities qualify as eligible activities for minor parents below the age of 21. Adult parents, 21 and older, must have at least 24 hours per week of their GED activity or 24 hours per week of their GED activity in combination with another approved activity to qualify.
- ²³ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training.
- ²⁴ Adult basic education activities qualify as eligible activities for minor parents below the age of 21. Adult parents, 21 and older, must have at least 24 hours per week of their GED activity or 24 hours per week of their GED activity in combination with another approved activity to qualify.
- ²⁵ Full- or part-time enrollment in associate or bachelor's degree programs at eligible institutions qualifies as an eligible activity.
- ²⁶ Adult basic education is only approved if part of a TANF work program plan or SNAP Employment and Training program plan.
- ²⁷ Adult basic education may be approved for families who are participating in a TANF work program.
- ²⁸ Child care subsidies are not approved for online classes or post-baccalaureate classes. Post-secondary education is approved for a maximum of 48 months.
- ²⁹ Students must maintain a C average, or in cases where grades are not used, meet comparable requirements of the education or training program. Beginning with the 25th month of participation, the client must work 20 hours or more per week. The work requirement does not apply to a teen parent.
- ³⁰ GED activities are approved with no work requirement for the first 24 non-consecutive months. After 24 months of assistance, the parent must be working on average 20 hours per week in addition to participating in GED activities to continue to qualify for assistance.
- ³¹ Adult basic education activities provide eligibility for assistance without work requirements for the first 24 non-consecutive months. After 24 months of assistance, the parent must be working on average 20 hours per week in addition to participating in Adult basic education activities to continue to qualify for assistance.
- ³² Students who do not work must maintain a 2.5 GPA, and students who work 20 hours or more per week must maintain a 2.0 GPA. The client cannot already have an associate's degree or bachelor's degree and be seeking a second one.
- ³³ For TANF work program families, activities must be approved by a TANF work program caseworker. For other families, activities must be completed through a certified or accredited secondary or post-secondary training organization or institution.
- ³⁴ For TANF work program families, activities must be approved by a TANF work program caseworker. For other families, activities must be completed through a certified or accredited secondary or post-secondary training organization or institution. Benefits for post-secondary education may only be given for a maximum of 16 semesters and may only support one four-year degree or two associate degrees.
- ³⁵ Training is not approved if the occupation has low job prospects, or if the program does not require regular attendance.
- ³⁶ Education beyond a bachelor's degree is not an approved activity for CCDF eligibility.
- ³⁷ High school and GED activities are limited to teen parents and TANF and SNAP work program participants.
- ³⁸ ESL is only authorized under the TANF and SNAP work programs.
- ³⁹ If self-employed, child care plans will be terminated at the end of the current eligibility period if post-secondary students are not working a minimum of 15 hours per week and earning the equivalent of the federal minimum wage per hour.
- ⁴⁰ Parents may receive child care assistance for vocational training activities to the extent that funds are available as long as they have not received assistance for more than 60 months due to enrollment in a certified trade school or accredited college or university.

- ⁴¹ Parents may receive child care assistance for post-secondary education to the extent that funds are available as long as they have not received assistance for more than 60 months due to enrollment in a certified trade school or accredited college or university.
- ⁴² ESL is considered as education and training.
- ⁴³ The education activity must be related to a specific occupation, job, or job offer.
- ⁴⁴ Education activities must take place at an accredited college or university and lead to an associate's or bachelor's degree.
- ⁴⁵ Post-secondary education must be at the undergraduate level. Graduate level education is not a valid need reason for care.
- ⁴⁶ Post-secondary education is not approved for a second bachelor's degree or education beyond a bachelor's degree except for continuing education units, certification, and coursework required to obtain or retain employment, or if it is part of a cash-welfare approved employment plan.
- ⁴⁷ The maximum time limit authorized for child care is one year for adult basic education activities, with an extension possible on an individual basis. The program must be certified through the state in order to be considered an eligible activity.
- ⁴⁸ High school, HiSET, and equivalency programs are approved activities for teen parents (through age 19) with low income, without a minimum work requirement.
- ⁴⁹ Single parent families must work 40 hours per month while the parent attends education or training part time. The minimum hourly work requirement, however, may be waived if it becomes a barrier to finishing school. Full-time students do not have a minimum work requirement. Two parent households where one parent is a full-time student and one parent is a part-time student must work 40 hours per month.
- ⁵⁰ Single parent families must work 40 hours per month while the parent attends education or training part time. The minimum hourly work requirement, however, may be waived if it becomes a barrier to finishing school. Post-secondary education is not allowed above a bachelor's degree. If, however, the parent received the last post-secondary degree or training certificate over five years ago, subsidies may be allowed for a second certificate or bachelor's degree. Full-time students do not have a minimum work requirement. Two-parent households where one parent is a full-time student and one parent is a part-time student must work 40 hours per month.
- ⁵¹ Post-secondary education is not approved for a client to earn a second bachelor's degree or for any graduate schooling.
- ⁵² High school and GED activities are limited to minor parents or adult parents participating in a training program. Minor parents who turn 18 and have not graduated or obtained their GED remain eligible for educational activities as long as they obtain their diploma or GED before turning 19.
- ⁵³ A recipient must attend 20 or more hours of training per week. Additionally, the recipient must attend a post-secondary institution that offers vocational educational programs, a program which provides for the completion of the equivalent to a secondary school diploma, or a program that offers defined and verifiable employment preparation training.
- ⁵⁴ Adult basic education is approved as a part of a training program.
- ⁵⁵ The approval of post-secondary education is subject to available funding. If funding is available, the recipient must enroll in six or more semester credit hours.
- ⁵⁶ Training is approved if it prepares the individual for employment.
- ⁵⁷ Post-secondary education is an approved activity if it leads to a degree, certificate, or license in an area of specialization; has immediate practical application toward employment; does not exceed 104 weeks in a lifetime; and does not result in a degree at the bachelor's level or higher. Prerequisite courses for post-secondary education are not an eligible activity, except for a maximum of two pre-requisite courses for nursing programs. TANF recipients who are not in the employment program must fulfill the general requirements but are allowed to pursue a bachelor's degree.
- ⁵⁸ GED activities are approved for TANF families.
- ⁵⁹ Child care benefits for clients who are preparing to get a GED are limited to one year.
- ⁶⁰ Policy coded for New York City. Caretakers may attend high school or an equivalent program.
- ⁶¹ Policy coded for New York City. ESL and adult basic education activities may be approved by districts if they elect this option in their Child and Family Services Plan and have the available funding.
- ⁶² Policy coded for New York City. Enrollment in more than one program, when care is needed, is not allowed.
- ⁶³ Policy coded for New York City. In New York City, certain post-secondary education activities are approved for two or four-year programs for parents working at least 17.5 hours per week. Two-year programs with a specific vocational goal may be approved with no work requirement. Statewide, districts may approve post-secondary education activities that include

two-year programs leading to an associate's degree, that do not have a specific vocational sequence, and four-year college programs if the parent is also working at least 17.5 hours per week.

⁶⁴ Post-secondary education is limited to 20 months and cannot be approved for graduate or post-graduate studies.

⁶⁵ Allowable training activities include but are not limited to basic remedial education, training designed to achieve basic literacy, training needed to secure or retain a job, vocational training, and ESL classes.

⁶⁶ An applicant may participate in post-secondary education that leads to a certificate, associate's degree, or bachelor's degree, provided the individual has not already received a bachelor's degree. Post-graduate education activities are not eligible activities.

⁶⁷ The education program must require classroom attendance with an instructor present.

⁶⁸ Post-baccalaureate education is only approved if the education is necessary to meet specific requirements associated with maintaining employment, certification, or licensure. Post-secondary education is not approved for individuals who have already completed 140 undergraduate semester hours or 216 undergraduate quarter hours, or the combined equivalent.

⁶⁹ Care is not approved for both parents to attend GED or ESL classes at the same time.

⁷⁰ Training is approved when it will qualify the individual to meet requirements for a job that the client could not meet without a certificate, accreditation, or licensure. The training program must qualify for federal financial aid from the U.S. Department of Education. In a two-parent household, the other parent must be employed during the hours the first parent is attending training. On-the-job training or apprenticeship programs that pay minimum wage are approved under employment activities.

⁷¹ Post-secondary education must be expected to lead to a degree or certificate. In a two-parent household, care will not be authorized if both parents are attending a formal education or training program at the same time.

⁷² Child care for education activities is covered as long as the client is primarily an employee rather than a student, the education program leads to a certificate, degree, or job-related knowledge and skills, and the program is provided through an institution eligible for federal student aid. Working students can qualify for subsidies as long as at least 50 percent of their authorized hours are for employment.

⁷³ GED activities are approved with no work requirement for parents under the age of 18. All other parents must work a minimum of 10 hours per week.

⁷⁴ Parents enrolled in ESL must also work a minimum of 10 hours per week.

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

⁷⁶ Post-secondary students must work a minimum of 10 hours per week.

⁷⁷ Any program from an institution that is accredited by the department of education resulting in a diploma or certificate is approved.

⁷⁸ A minimum of 20 hours of weekly training is required.

⁷⁹ Any educational, training, or rehabilitation program licensed by the department of higher education with a specific vocational, education, or occupational goal that is geared towards the development of knowledge and skills necessary to secure employment is an eligible activity.

⁸⁰ High school or GED activities are approved for teen parents, under the age of 20, without a high school degree or its equivalent. The applicant must be participating in the state's assistance program for teen parents. TANF applicants may participate in employment or education as approved in their employment plan.

⁸¹ ESL is an approved activity for TANF recipients.

⁸² Income-eligible parents participating in approved training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness or job attachment programs may receive subsidies. A recipient must attend 20 or more hours of training per week and the program must be no longer than one year. TANF applicants may participate in employment or education as approved in their employment plan.

⁸³ Adult basic education is an approved activity for TANF recipients.

⁸⁴ ESL may be authorized for TANF recipients in order to comply with a family plan.

⁸⁵ GED activities qualify as an eligible activity for teen parents under TANF only.

⁸⁶ Policy coded for Gulf Coast Region.

⁸⁷ Care is authorized for education or training activities only if clients meet the minimum work requirement.

⁸⁸ Care is authorized for education or training activities only if clients meet the minimum work requirement. Only the last two years of a four-year program may be supported. Graduate study or customers who already have a bachelor's degree will not be supported.

⁸⁹ Parents must demonstrate participation in a program that is likely to lead to employment within one year after completion of the program. The policy also applies to training or education programs required to maintain employment. Community service time and training are eligible activities. Volunteer work and post-bachelor education are not eligible activities.

⁹⁰ Non-TANF clients over the age of 21 must work at least 20 hours per week or be in a paid federal or state work study program for at least 16 hours per week in conjunction with education (ESL and adult basic education included) or training to be eligible for care. Those under age 22 are not required to work. Vocational education at a technical or community college is approved if it leads to a degree or certificate in a specific occupation.

⁹¹ A student must keep a 2.0 grade point average and satisfactory attendance. A student who fails to maintain the 2.0 grade point average, or whose grade report reflects withdrawals or incompletes in more than half of the semester's classes will be given an improvement period for one semester upon provision of a letter from the college confirming the student attends classes. Other students must submit statements from the educational or training facility which document that attendance and progress are satisfactory. If the student fails to meet the 2.0 requirement within the improvement period, the case will be suspended for a semester. Clients may resubmit the materials to prove they are enrolled. If they fail to maintain satisfactory progress a second time, the case is suspended for a calendar year. If they fail to maintain satisfactory progress a third or fourth time, the suspensions are for two calendar years each.

⁹² If the parent is age 20 or older, approval for high school or GED activities is limited to 24 months and the parent must participate in at least 20 hours of employment per month. The time restriction and employment requirement does not apply to parents age 19 or younger.

⁹³ ESL activities are limited to 24 months and the parent must also participate in at least 20 hours of employment per month.

⁹⁴ Apprenticeships and employer-sponsored training and certification are considered allowable employment. Pre-job training will be approved if it is a part of a TANF or SNAP E&T work plan.

⁹⁵ Adult basic education activities are limited to 24 months. The activity must provide an employment skill that would help the individual's efforts to maintain employment. The individual must also be working at least 20 hours per month throughout the duration of the school program.

⁹⁶ Post-secondary education activities are limited to 24 months. The activity must provide an employment skill that would help the individual's efforts to maintain employment. Parents must work a minimum of 20 hours per month.

⁹⁷ Approval for post-secondary education is limited to one degree, unless an associate's degree was earned as part of working towards completing a bachelor's degree. The participant must also maintain at least a 2.0 cumulative grade point average each term or semester.

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2020 ¹

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

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2020 ¹

State/Territory*	Minimum Hours of Work Required for Eligibility ²	Minimum Work Hours for a Two-Parent Household ²	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time High School Student	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time Post-Secondary Student
Kansas	20 ¹⁶	Each parent must work 20 hours	No minimum ¹⁷	15 ¹⁸
Kentucky	20 ¹⁹	Both must work a total of 40 hours ²⁰	No minimum ²¹	20 ²²
Louisiana	20 ²³	Each parent must work 20 hours ²³	No minimum	No minimum
Maine	No minimum ²⁴	No minimum	No minimum	No minimum
Maryland	No minimum	No minimum	No minimum	No minimum
Massachusetts	20	Each parent must work 20 hours ²⁵	No minimum	No minimum
Michigan	No minimum	No minimum	No minimum	No minimum
Minnesota	20	Each parent must work 20 hours	No minimum ²⁶	No minimum ²⁶
Mississippi	25	Each parent must work 25 hours ²⁷	No minimum	No minimum ²⁷
Missouri	No minimum	No minimum	No minimum	No minimum
Montana	Other ²⁸	Other ²⁸	No minimum ²⁹	Other ³⁰
Nebraska	No minimum	No minimum	No minimum	No minimum
Nevada	No minimum	No minimum	No minimum	No minimum
New Hampshire	No minimum	No minimum	No minimum	No minimum
New Jersey	30 ³¹	Each parent must work 30 hours ³¹	No minimum ³¹	No minimum ³¹
New Mexico	No minimum	No minimum	No minimum	No minimum
New York	20	Each parent must work 20 hours	No minimum	17.5 ³²
No. Mariana Islands	30	Each parent must work 30 hours	No minimum	No minimum
North Carolina	No minimum ³³	No minimum ³³	No minimum	No minimum

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2020 ¹

State/Territory*	Minimum Hours of Work Required for Eligibility ²	Minimum Work Hours for a Two-Parent Household ²	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time High School Student	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time Post-Secondary Student
North Dakota	No minimum	No minimum	No minimum	No minimum
Ohio	No minimum ³⁴	No minimum ³⁴	No minimum ³⁴	No minimum ³⁴
Oklahoma	No minimum ³⁵	No minimum ³⁵	No minimum	No minimum
Oregon	No minimum	No minimum	NA ³⁶	Other ³⁷
Pennsylvania	20 ³⁸	Each parent must work 20 hours	No minimum	10
Puerto Rico	20 ³⁹	Each parent must work 20 hours	No minimum	No minimum
Rhode Island	20 ⁴⁰	Each parent must work 20 hours ⁴⁰	No minimum ⁴¹	NA ⁴²
South Carolina	15 ⁴³	Each parent must work 15 hours ⁴⁴	No minimum	No minimum
South Dakota	20 ⁴⁵	Each parent must work 20 hours	No minimum	No minimum ⁴⁶
Tennessee	30	Each parent must work 30 hours	No minimum	No minimum
Texas	25 ⁴⁷	Each parent must work 25 hours ⁴⁸	No minimum ⁴⁹	No minimum ⁵⁰
Utah	15	One parent must work 30 hours and the other must work 15 hours	15 ⁵¹	15 ⁵¹
Vermont	No minimum	No minimum	No minimum	No minimum
Virgin Islands	30 ³¹	Each parent must work 30 hours ³¹	No minimum ³¹	No minimum ³¹
Virginia	No minimum	No minimum	No minimum	No minimum
Washington	No minimum ⁵²	No minimum	No minimum ⁵³	20 ⁵³
West Virginia	20	Each parent must work 20 hours	No minimum	No minimum

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2020 ¹

State/Territory*	Minimum Hours of Work Required for Eligibility ²	Minimum Work Hours for a Two-Parent Household ²	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time High School Student	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time Post-Secondary Student
Wisconsin	No minimum	No minimum	No minimum ⁵⁴	5 ⁵⁵
Wyoming	No minimum	No minimum	No minimum	No minimum

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ This table shows a minimum work hour requirement only when the State/Territory has an explicit policy requiring parents to engage in an approved activity for a minimum number of hours. Even if a program has no explicit minimum work hour policy, the number of work hours generally affects the number of hours approved for subsidized child care. This table captures work requirement differences for two-parent families, full-time high school students, and full-time post-secondary students. Work exemptions for parents with special needs are captured in the full database. The minimum work hour requirement to qualify for any amount of child care assistance is shown here. This table is not intended to capture the states' definitions of full-time and part-time care or full-time student status.

² These columns capture the minimum number of work hours required for parents qualifying based on employment. The requirement does not apply to parents qualifying for subsidies based on education or training activities or based on job search.

³ Each parent must participate in one or more approved activities for a minimum average of 15 hours per week. Approved activities include employment, education, and training.

⁴ Teen parents are not required to meet a minimum work requirement. All other parents in school must meet a minimum work requirement of 20 hours per week.

⁵ Counties have the option of including training or education as an eligible activity for subsidies for adult parents. If a county elects to provide child care assistance to parents in training or education, the county cannot impose additional criteria or target certain types of training. Counties are required to include education and training as eligible activities for teen parents.

⁶ Post-secondary education is only approved if the applicant receives TANF and post-secondary education is part of his or her employment services plan.

⁷ The student must participate in at least 20 hours of combined approved activities, which include education, training, and employment.

⁸ Post-secondary education is only approved if it is part of a TANF employment and training program or if the applicant began education activities while in a SNAP employment and training program.

⁹ If individuals are employed and also in school or an approved training program, they can work less than 20 hours, as long as their combined participation in approved activities is at least 20 hours per week.

¹⁰ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. New applicants must still meet the 24-hour requirement.

¹¹ The student must participate in at least 24 hours of combined approved activities, which include education, training, and employment.

¹² To receive full-time child care assistance each parent must work 30 hours per week.

¹³ There is no work requirement for the first 24 non-consecutive months the client participates. From the 25th month on, the client must work at least 20 hours per week.

¹⁴ There is no work requirement for the first 48 non-consecutive months the client participates. From the 49th month on, the client must work at least 20 hours per week.

¹⁵ TANF recipients do not need to meet the minimum work hours requirement. For participants who are working and in school or in a training program, a minimum of 28 hours of school and work combined confers eligibility.

- ¹⁶ TANF recipients do not need to meet the minimum work hours requirement. TANF recipients who gain employment, and therefore lose their cash assistance, are not required to meet the work hours requirement for the rest of their 12-month eligibility period. If a new application is made within two months of losing TANF eligibility, the family is also exempt from meeting the minimum work hours requirement.
- ¹⁷ There is no work requirement for teen parents in high school or GED activities. All other parents must work 15 hours per week while participating in educational activities.
- ¹⁸ If the student participates in an unpaid internship for more than 15 hours per week for course credit, hours over 15 may be applied to the employment requirement.
- ¹⁹ A single parent must work an average of 20 hours per week.
- ²⁰ The minimum requirement for one parent in a two-parent household is five hours per week. A two-parent household must work a combined average of forty hours per week.
- ²¹ Teen parents in school are not required to meet an additional work requirement.
- ²² Unpaid work, such as a practicum, internship, or work study, can be counted.
- ²³ The employment and training requirements for families of children with special needs may be reduced to 15 hours per week.
- ²⁴ Applicants who are self-employed must participate in a self-employment activity a minimum average of 20 hours per week.
- ²⁵ Part-time care may be authorized if one or both parents are working fewer than 30 hours, but at least 20 hours.
- ²⁶ Work is not a required activity for students. However, if a full-time student has employment and wishes to receive subsidized child care during hours worked, he or she must work a minimum of 10 hours per week. Part-time students must work 20 hours if they wish to receive subsidized child care for employment hours.
- ²⁷ Each parent must work at least 25 hours per week, or one parent must work at least 25 hours per week and the other parent must be enrolled in an approved full-time educational or training program.
- ²⁸ The work requirement is monthly. Two-parent households must work 120 hours per month. Single parents must work 60 hours per month. Single parents attending school part time are required to work 40 hours per month. The recipient must earn at least the current applicable minimum wage to be eligible for assistance.
- ²⁹ High school, HiSET, and equivalency programs are approved activities for teen parents with low incomes (through age 19), without a minimum work requirement.
- ³⁰ Single-parent families have no work requirement while the parent attends education or training full time. Single-parent families must work 40 hours per month while the parent attends education or training part time. Two-parent families have no work requirement while both parents attend education or training full time. Two-parent families must work 40 hours per month while one parent attends education or training part time and the other parent attends education or training full time.
- ³¹ A parent or applicant is considered to be working full time if work and education or training activities combine to equal 30 hours per week.
- ³² Policy coded for New York City. Participants in a two-year program with no specific occupation goal or in a four-year degree program must work at least 17.5 hours per week in a job that pays at least minimum wage. The work requirement does not apply to two-year programs with a specific vocational goal.
- ³³ In general, there is no minimum number of hours a recipient must work to receive a subsidy. In order to receive full-time care though, a recipient must work an average of 30 hours or more per week. Part-time care is approved for any number of hours less than full time.
- ³⁴ Both parents must be engaged in an activity and have a need for care.
- ³⁵ Foster families must work a minimum of 20 hours per week.
- ³⁶ High school education is not an approved activity for eligibility.
- ³⁷ Working students can qualify for subsidies as long as at least 50 percent of their authorized hours are for employment.
- ³⁸ Ten hours of training may be substituted for 10 hours of the 20-hour work requirement.
- ³⁹ Parents must participate in work or another eligible activity for a minimum of 20 hours per week.
- ⁴⁰ Income eligible parents must work an average of at least 20 hours per week in a month.
- ⁴¹ Parents must engage in 20 hours of approved activities per week. If the parent is in school for 20 hours per week, this fully satisfies the 20-hour requirement and additional employment or work hours are not required.
- ⁴² Post-secondary education is not an approved activity for eligibility.
- ⁴³ TANF applicants must meet the participation requirements outlined in their TANF family plan. A parent who receives SSI may be eligible for assistance if he or she is either employed at least part time or participating in an activity that will enable him or her to become employed.

- ⁴⁴ If one or both parents work part time, only part-time care will be authorized. The parents must each work 15 hours in order to qualify for part-time care.
- ⁴⁵ There are no minimum work requirements for foster parents; however, authorization for care can only be given for times when foster parents are working or going to school. Applicants must work a minimum of 80 hours per month. Applicants must also receive a salary equivalent to the federal minimum wage.
- ⁴⁶ Associate's or bachelor's degree students meet the activity requirements if they attend 80 school hours per month, their combined school and employment hours equal 80 or more hours per month, or they are enrolled in 12 semester credit hours. Master's and doctoral students are not exempt from the 80-hour per month work requirement.
- ⁴⁷ Policy coded for Gulf Coast Region. If individuals are employed and also in school or an approved training program, they can work less than 25 hours, as long as their combined participation in approved activities is at least 25 hours per week.
- ⁴⁸ Policy coded for Gulf Coast Region.
- ⁴⁹ Policy coded for Gulf Coast Region. The student must participate in at least 25 hours of combined approved activities, which include education, training, and employment. Teen parents must work or attend school in the summer with the intention of returning to high school or GED classes in the fall.
- ⁵⁰ Policy coded for Gulf Coast Region. The student must participate in at least 25 hours of combined approved activities, which include education, training, and employment.
- ⁵¹ Clients in training or education must also be employed an average of 15 hours or more a week.
- ⁵² When a non-TANF client is receiving care for education or training, he or she must work a minimum of 20 hours a week or 16 hours in a federal or state work study program.
- ⁵³ Non-TANF clients over the age of 21 must work at least 20 hours per week or be in a paid federal or state work study program for at least 16 hours per week in conjunction with education and training to be eligible for care.
- ⁵⁴ Individuals under age 20 enrolled in high school or participating in an approved high school equivalency program are not required to work in addition to attending school. Individuals age 20 or older enrolled in high school or participating in an approved high school equivalency program must participate in at least 20 hours of employment per month.
- ⁵⁵ Individuals in technical college or a course of study that leads to employment, must participate in at least 20 hours of employment per month.

Table 5. If Certain Families Have Different Parent Activity Requirements, 2020 ¹

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

Table 5. If Certain Families Have Different Parent Activity Requirements, 2020 ¹

State/Territory*	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Louisiana	TCC-specific requirements not specified in child care manual ⁴⁹	No activity requirement ⁵⁰	Other ⁵¹	No activity requirement ⁵²
Maine	NA ⁵³	Same as other families	Same as other families	Same as other families
Maryland	Same as other families	Other ⁵⁴	Not eligible	Not eligible
Massachusetts	Same as other families	Other ⁵⁵	Other ⁵⁶	Same as other families ⁵⁷
Michigan	Same as other families ⁵⁸	Same as other families	Other ⁵⁹	Same as other families ⁶⁰
Minnesota	Same as other families	No activity requirement ⁶¹	Not eligible	Not eligible
Mississippi	Other ⁶²	No activity requirement ⁶²	No activity requirement ⁶²	No activity requirement ⁶²
Missouri	Same as other families	Other ⁶³	No activity requirement	No activity requirement
Montana	Same as other families	Other ⁶⁴	Other ⁶⁵	Other ⁶⁶
Nebraska	Same as other families	Same as other families	Same as other families ⁶⁷	Same as other families ³⁵
Nevada	Same as other families	Other ⁶⁸	Other ⁶⁹	Other ⁷⁰
New Hampshire	Same as other families	Other ⁷¹	Varies depending on if child left in home ⁷²	Same as other families
New Jersey	Other ⁷³	Same as other families	No activity requirement	No activity requirement ⁷⁴
New Mexico	Same as other families	Same as other families	Other ⁷⁵	Other ⁷⁵
New York	TCC-specific requirements not specified in child care manual ⁷⁶	Other ⁷⁷	No activity requirement ⁷⁸	Other ⁷⁹
No. Mariana Islands	NA ⁷	Same as other families	Same as other families	Same as other families
North Carolina	Other ⁸⁰	Same as other families ⁸¹	Varies depending on if child left in home ⁸²	No activity requirement ⁸³
North Dakota	Same as other families	Same as other families	Not eligible	Other ⁸⁴
Ohio	Other ⁸⁵	No activity requirement	Varies depending on if child left in home ⁸⁶	Same as other families

Table 5. If Certain Families Have Different Parent Activity Requirements, 2020 ¹

State/Territory*	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Oklahoma	Same as other families	No activity requirement ⁸⁷	Other ⁸⁸	Same as other families
Oregon	Same as other families	Same as other families	Same as other families	Same as other families
Pennsylvania	Other ⁸⁹	Other ⁹⁰	Same as other families	Same as other families ⁹¹
Puerto Rico	Same as other families	No activity requirement ⁹²	No activity requirement	No activity requirement
Rhode Island	Same as other families	Same as other families	Same as other families	Other ⁹³
South Carolina	Same as other families ⁹⁴	Same as other families	Other ⁹⁵	Same as other families ⁹⁶
South Dakota	Same as other families	Same as other families	Other ⁹⁷	Other ⁹⁷
Tennessee	Same as other families	Same as other families	No activity requirement	No activity requirement
Texas	Same as other families	No activity requirement ⁹⁸	Other ⁹⁹	Other ⁹⁹
Utah	Same as other families ¹⁰⁰	Other ¹⁰¹	Same as other families	Not eligible ¹⁰²
Vermont	Same as other families	Other ¹⁰³	Other ¹⁰⁴	Other ¹⁰⁵
Virgin Islands	Same as other families	Same as other families	Other ¹⁰⁶	No activity requirement ¹⁰⁷
Virginia	Other ¹⁰⁸	Same as other families	Other ¹⁰⁹	Same as other families ¹¹⁰
Washington	NA ¹¹¹	No activity requirement ¹¹²	No activity requirement ¹¹³	Same as other families ¹¹⁴
West Virginia	Same as other families	Same as other families	Other ⁷⁵	Same as other families ¹¹⁵
Wisconsin	Same as other families	Same as other families	Same as other families	Same as other families ¹¹⁶
Wyoming	Same as other families	Same as other families	Same as other families	Same as other families

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Federal CCDF policies require families to meet at least one reason for care. States may choose to use state funds to provide subsidies for families who do not meet the federal guidelines.

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

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

- ⁴ Any child for whom the department submits a written referral requesting services for a reason of protective services is eligible for care.
- ⁵ If the department has legal custody of the child or the parent has signed a boarding home agreement, and the department provides a written referral, the foster child is eligible for care.
- ⁶ Eligibility is determined by the office of children's services.
- ⁷ This territory or outlying area does not have transitional child care.
- ⁸ If a family is categorized as protective services due to homelessness as a result of a natural disaster, the family is eligible as long as funds are available.
- ⁹ Children referred by child protective services receive immediate placement.
- ¹⁰ The foster parent is not required to participate in employment, education, or training activities.
- ¹¹ Families receiving transitional child care must be employed.
- ¹² In addition to other eligible activities, a client living in a homeless or domestic violence shelter may be eligible for care based on participation in structured shelter activities as verified by the shelter.
- ¹³ Families are eligible for protective services child care when the protective services file requires child care and there is either a confirmed case of abuse or a risk of abuse or neglect. Families receiving care through child protective services are not required to meet income guidelines.
- ¹⁴ Foster care families do not have to meet the same income requirements as other families. The department may pay for child protective services child care during the time foster parents spend at work, in training, counseling, or similar activities which are directly connected to their ability to care for foster children in their home.
- ¹⁵ Child protective services and foster children are categorically eligible when services are being provided to prevent abuse or neglect or to strengthen family functioning and overall well-being of the children. Protective services and foster care families have a separate eligibility process, and the parents may request a waiver exempting them from activity requirements.
- ¹⁶ Activity requirements for transitional child care families are generally the same as non-transitional child care families except that they may also be participating in job retention services approved by the county welfare department.
- ¹⁷ If eligibility and need are based on child protective services, families do not have to meet income requirements. The written referral must include a statement certifying that child care services are necessary.
- ¹⁸ For income eligibility and family fee purposes, only the foster child and related siblings are included in the family size, and only their income is counted.
- ¹⁹ Families experiencing homelessness are provided child care for a 60-day stabilization period, during which they are not required to participate in an eligible activity.
- ²⁰ Policy coded for Denver. Counties may opt to provide protective services child care using CCDF funds. There is no activity requirement for protective services child care.
- ²¹ Counties may opt to provide care for foster children using CCDF funds.
- ²² New applicants who have received TANF must apply within five years of the date cash assistance benefits were discontinued.
- ²³ There are no requirements of the parents for training or employment. The child under protection may reside with a relative or guardian outside the District of Columbia.
- ²⁴ The foster parent must participate in a qualifying activity for a minimum of 20 hours per week, or be receiving some form of verifiable income. The child may reside with a foster parent or guardian outside the District of Columbia.
- ²⁵ Families referred by and active with the division of family services do not have to meet income requirements.
- ²⁶ Families with a documented referral from a certified homeless shelter or domestic violence shelter do not have to meet activity or income requirements.
- ²⁷ Eligibility is not dependent on family income or work requirements but rather on a documented referral from the child protective services department.
- ²⁸ Transitional child care recipients must participate in one or more state-approved activities for a minimum of 24 hours per week for each responsible adult, unless the parents were determined ineligible for TANF based on not meeting the 24-hour activity requirement. In this case, parents must maintain the number of hours that resulted in their ineligibility for TANF.
- ²⁹ Families experiencing homelessness may be authorized for job search activities for the entire 12-month eligibility period.
- ³⁰ When the child is left in the home and care is needed for the child's protection, the family is not required to meet work requirements, but the family must meet income and residency criteria. When the child is placed in the care of another relative or family friend, the applicant must meet work or activity requirements as well as income and residency requirements.
- ³¹ In addition to the activities allowed for other families, job search is an allowable activity for families experiencing homelessness.
- ³² Income and copayment requirements are waived and the parent must be participating in work, education, or training activities. If a non-parent caretaker is requesting child care for his or her own child in addition to the child in protective services, income is counted.

- ³³ Income and copayment requirements are waived and the parent must be participating in work, education, or training activities. If a non-parent caretaker is requesting child care for his or her own child in addition to the child in foster care, income is counted. Children may also receive care while awaiting placement in a foster home, while the foster parent requires time to implement the case plan, or when the foster parent requires time away from the child.
- ³⁴ The family must have a court order that specifies care is needed for a specific purpose, such as work. Child protective services families do not have to meet the same income requirements as other families.
- ³⁵ Foster care families do not have to meet the same income requirements as other families.
- ³⁶ Families experiencing homelessness and searching for housing through a homeless agency may be approved as participating in a training activity.
- ³⁷ Families experiencing homelessness and not participating in an eligible activity can receive up to two periods of child care assistance lasting 90 days each within a 12-month period to allow them an opportunity to address their basic needs.
- ³⁸ The state's child welfare and protection agency pays for child care provided for child protective services and foster care. To ensure continuity of care, families with child protective services cases that are transitioning out of the state system are eligible to receive an additional six months of child care through the Child Care Assistance Program.
- ³⁹ The state's child welfare and protection agency pays for child care provided for child protective services and foster care.
- ⁴⁰ Custodians or caretakers in child protective services cases in which children are in out-of-home placements are subject to the same requirements as non-child protective services families. In child protective services cases in which children remain in their own homes, families are categorically eligible (service and financial need requirements are waived) if the child protective services caseworker provides written documentation that child care is a necessary part of the case plan.
- ⁴¹ Activities conferring eligibility for foster children are the same as for non-foster care families. However, licensed foster parents are not included in the unit for the purpose of calculating family income.
- ⁴² Families who receive TANF or participate in the state's TANF work program are eligible for child care assistance regardless of income.
- ⁴³ Only relative foster families receive child care through the CCDF program. Children who are placed in licensed foster family homes do not receive child care through the CCDF program.
- ⁴⁴ TANF recipients who gain employment and therefore lose their cash assistance remain eligible for child care subsidies for the remainder of their eligibility period and do not have to meet the 20-hour per week minimum work requirement. If a new application is submitted within the first two months following the loss of TANF eligibility, meeting the minimum work hours requirement is not necessary for approval. At the time of the next review, however, recipients must meet the work requirement or be participating in a different eligible activity.
- ⁴⁵ If a temporary emergency need for service is established and a social services program manager signs a request for social services child care, care may be approved for 12 months.
- ⁴⁶ Care may be approved for juvenile offenders when the foster parent is employed and needs child care.
- ⁴⁷ Families experiencing homelessness are eligible for expedited services. They are entitled to immediate approval and enrollment with a child care provider. Families experiencing homelessness have up to three calendar months from the date of application to return all other verification.
- ⁴⁸ Care may be authorized for preventive services when the child is at risk of abuse or neglect or protective services when the child has been abused or neglected. Child protective services cases are not required to meet the same income thresholds as other participants.
- ⁴⁹ Families leaving TANF are required to participate in the Strategies to Empower People Program (STEP) for six months. Participants in the STEP program will receive subsidies for 12 months.
- ⁵⁰ A participant who is included in a homeless household and is normally required to be employed or attend a job or educational training program, can be exempt from employment and training requirements if the participant is in a transitional living program or the participant is seeking employment by registering with the state workforce commission.
- ⁵¹ A child in protective services is eligible regardless of income when the child care services are necessary in order to maintain the child in his or her own home and when the need for care meets the eligibility policy for the protective services program. There is no work requirement for eligibility for families in child protective services.
- ⁵² Foster children are categorically eligible for care to maintain the child's current placement in a foster or adoptive home and when the need for care meets the eligibility policy for the foster care program.
- ⁵³ Families transitioning off TANF are eligible for care under a separate Transitional Child Care Program.
- ⁵⁴ All families experiencing homelessness are issued a 60-day voucher to meet all eligibility requirements. Once all eligibility requirements are met, the family is issued a 12-month voucher.
- ⁵⁵ If the family is referred by the state's housing authority program or child welfare agency, the family may be approved for care for housing search and other shelter activities. Families that meet the definition of homelessness under the McKinney-Vento Act may

also use homelessness as a service need. The service need for a family experiencing homelessness is limited to two 12-month authorization periods, unless approved by the state in writing on a case-by-case basis.

⁵⁶ The child protective services agency may authorize care on a case-by-case basis for families with active protective needs documented in a supported report of abuse or neglect within the previous 12 months or when there is a determination of need to begin or continue supportive child care at a supervisory progress review.

⁵⁷ The family is required to meet the activity requirement but is exempt from the income requirement.

⁵⁸ Families are exempt from income determination.

⁵⁹ Families are automatically eligible if child care is required by an active protective services plan. Families are exempt from income determination.

⁶⁰ When the child needing care has been placed with a licensed foster care parent, the child is eligible for care without income determination.

⁶¹ Families experiencing homelessness at application are exempt from activity requirements. The family must be participating in an authorized activity within three months of the application date to continue receiving subsidy. Families experiencing homelessness are eligible for 30 hours of care per week including school-age children.

⁶² Eligibility is determined by the referral agency.

⁶³ Families experiencing homelessness and participating in a community-based program designed to eliminate homelessness are eligible to receive child care assistance. If a family experiencing homelessness is not participating in a community-based program, they need to meet the same requirements as all other families.

⁶⁴ A family that reports homeless status is eligible for 90 days of eligibility to meet all non-TANF requirements.

⁶⁵ Eligibility is determined by the Child and Family Services Division.

⁶⁶ The department may pay for child care during the time foster parents spend at work, in training, in counseling, or participating in similar activities that are directly connected to their ability to care for foster children in their home.

⁶⁷ Families who require emergency child protective services or require child protective family services may be eligible without regard to income. Families receiving protective services must still meet the need for service requirement.

⁶⁸ Families experiencing homelessness may qualify under a self-sufficiency plan, which may include housing search and other activities that are not available to other families.

⁶⁹ To be eligible under this category, children must be placed in the custody of an individual for a defined length of time, until they can be returned to their parents. If the child is placed in the custody of an individual who is related by blood or marriage, the applicant must become a licensed foster parent during the initial 12-month eligibility period.

⁷⁰ Approved activities for foster parents must be verified by a caseworker.

⁷¹ Applicants can qualify for child care assistance if they are participating in a combination of job and housing search activities.

⁷² If the children remain in the parent's home and child care is provided to prevent child abuse or neglect, to rehabilitate the family, or to reunite the family, the parents are not required to be in an employment related activity.

⁷³ Families receiving transitional child care must be employed, but they do not have to meet the full-time employment requirement.

⁷⁴ Foster children in out-of-home settings are considered to be under child protective services and therefore automatically eligible.

⁷⁵ Eligibility is determined by the child protective services worker.

⁷⁶ The family must have received TANF for three of the previous six months, have income at or below 200 percent of the state income standard, meet child support requirements, and meet certain criteria for closing the TANF case. The TANF case must have been closed due to increased employment income, voluntary closure, or meeting the five-year time limit for assistance, and the family must not be applying for, eligible for, or in the process of applying for additional safety net assistance. To receive transitional child care the child's parent or caretaker must be engaged in work.

⁷⁷ Policy coded for New York City. If funds are available, families may be approved for child care to seek housing if the child's caretaker is also seeking employment, engaged in work, participating in an approved educational or vocational activity, or for the caretaker to access or participate in counseling services programs.

⁷⁸ Policy coded for New York City. Children must be referred by the administration for children's services or a contracted preventive services agency. If one child is authorized for child care due to preventive or protective services, all other children in the household may receive care. Protective services cases pay no copayment. Preventive services cases are assigned a copayment.

⁷⁹ The foster parent is eligible if working or self-employed without regard to hours worked or income earned.

⁸⁰ Families that reach the end of their TANF eligibility can continue to receive transitional child care for 90 days if they are not participating in an eligible activity, such as work or education. If they are participating in an eligible activity, they will receive services through the end of the eligibility period.

⁸¹ Families experiencing homelessness are eligible at the time of application based on information reported by the recipient. If the reported information meets all eligibility criteria, the application is approved, and child care services can begin immediately. The

recipient will then have 30 days to provide all needed documentation to support their eligibility. If it is determined that the recipient is not eligible once all required documentation has been submitted, the case is terminated with a 10-day notice.

⁸² If a child is in protective services and needs child care in order to stay in his or her own home, the child is automatically eligible. If a child is removed from the home, he or she can no longer receive care as a child protective services case and must apply under another need category.

⁸³ Children in foster care who are in the custody of a county and have been placed either with an adult other than their parents or in a licensed foster home are eligible.

⁸⁴ Children in licensed foster care are not eligible. Children in unlicensed foster care settings are eligible under the same requirements as other families.

⁸⁵ The family must be in need of child care due to employment. The family's income must not exceed 150 percent of the Federal Poverty Guidelines for initial eligibility and 300 percent of the Federal Poverty Guidelines for ongoing eligibility, and the family must meet all requirements of the application and redetermination process.

⁸⁶ Protective child care is authorized only if the child resides in the home of the parent for whom the protective case plan is written and the case plan specifically requests child care. Caretakers approved for protective child care are determined eligible without regard to income or assets.

⁸⁷ Families experiencing homelessness meet the definition of protective/preventive care and are therefore not required to meet a traditional need factor such as work, school, or training.

⁸⁸ Child care may be approved in critical situations to prevent neglect, abuse, or exploitation.

⁸⁹ Families must meet work participation requirements, unless they lost TANF eligibility due to having earnings over the TANF income limit, in which case they do not have to meet minimum work hour requirements.

⁹⁰ At application or redetermination, a parent or caretaker in a family that is experiencing homelessness may substitute job search activities to meet the work requirement.

⁹¹ Foster children are eligible for care as long as the foster parents meet the non-financial eligibility requirements.

⁹² Children in families experiencing homelessness are not required to meet eligibility requirements.

⁹³ Foster parents must be working, or the developmental needs of the foster child must require that the child attend day care.

⁹⁴ Participants must fall into one of four program categories. The first transitional child care category applies to applicants whose TANF case closed due to earned income exceeding TANF guidelines and who received TANF assistance in the previous month. The second category is for applicants whose first year of transitional child care is ending or who previously received TANF and failed to apply for transitional child care. The third category is for applicants whose TANF case closed due to reaching the TANF two-year time limit. The fourth category is for families who become employed or increased earnings during a full-family sanction in TANF and become ineligible for TANF. Applicants in all categories must meet income and work requirements.

⁹⁵ Care must be needed to enable the child to remain in the home of the parent, or a caretaker if the child is removed from the parent's home, and to reduce the effects of abuse and neglect by addressing physical, social, emotional, cognitive, and language development needs. The parent is not required to meet income or activity requirements.

⁹⁶ Only the child's income is used to determine eligibility, but foster parents must be participating in eligible employment or an eligible education or training activity. Foster parents with a verified disability may be exempt from activity requirements. Other exceptions to the activity requirements may be made on a case-by-case basis. Children placed in South Carolina from another state are not eligible for child care services through the state's primary child care program.

⁹⁷ In cases where the state or other licensed agency has legal custody of the child, foster parents are not required to meet income or work requirements. However, care is only authorized for the times the foster parents are working or attending school. In cases where the foster parents adopt the child or receive guardianship, the foster parents must meet the minimum work or school requirements.

⁹⁸ Families experiencing homelessness are not subject to the minimum participation requirements; participation in work, education, or training may be at any level.

⁹⁹ The child protective services agency has the responsibility for determining child care eligibility for children in the agency's protective care, including foster care.

¹⁰⁰ Though an application is not required of transitional child care families during the six-month transitional period, the families must undergo a child care review at the end of the six-month transitional period in order to be eligible for non-transitional child care.

¹⁰¹ Families experiencing homelessness may qualify under different activity requirements. If the individual has a referral from a recognized homeless agency, care may be approved for employment, job search, training, shelter search, or working through a crisis situation.

¹⁰² Foster care parents are not eligible for child care benefits for their foster children. This includes the child of a teen parent in foster care.

¹⁰³ Families experiencing homelessness can apply for family support child care, a prevention and early intervention service designed to reduce stress for families and their children and promote positive child development. Families qualifying under family support child care do not have to meet activity requirements.

¹⁰⁴ The family must have a referral from a child protective services worker. If a family is categorized as protective services, the family is eligible as long as funds are available.

¹⁰⁵ Foster families whose service need is based on the special needs of a foster child or foster parent are eligible for child care financial assistance at 100 percent of the state established rate, regardless of income.

¹⁰⁶ Applicants who have children in protective services must have a letter of recommendation or court order documenting it is in the best interest of the child to be placed in child care daily. The parents or legal guardians' incomes are not required to determine eligibility.

¹⁰⁷ Foster care parents are not required to work or participate in education or training activities.

¹⁰⁸ Families receiving transitional child care must be employed, in an approved transitional employment and training activity, or enrolled in an accredited higher education program that leads to a post-secondary credential, showing satisfactory progress.

¹⁰⁹ Child protective service is an approved activity for CCDF-eligible families if the families are receiving child protective services through the family assessment track, investigation track, or child protective services on-going. When parents are involved in activities included in the child protective services plan, the local department is required to approve child care.

¹¹⁰ Child care for foster children is not provided under the state's primary child care subsidy program. A foster child may receive CCDF funding if a local department maintains custody of the child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.

¹¹¹ This state does not have transitional child care.

¹¹² Families experiencing homelessness are eligible for 12 months of care with no activity requirements. After this period, they must verify participation in an approved activity.

¹¹³ Families with child protective services cases are eligible for full-time care regardless of income or participation in approved activities. The child must receive child care from a licensed center or licensed family home provider. The family is not required to show the child is legally living in the U.S.

¹¹⁴ Foster children can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they must meet the same activity requirements as other families.

¹¹⁵ The foster parent must be participating in an employment, education, or job training activity. If there are two foster parents in the home, both foster parents must be participating in a qualifying activity. The family must meet the income requirement, but it is based on the income of the child.

¹¹⁶ Foster parents must meet the activity requirement. Income is based on the natural or adoptive parents' income. The eligibility threshold is set at 200 percent of the Federal Poverty Guidelines, rather than the 185 percent used for other families. If the natural or adoptive parent's income exceeds 200 percent of the Federal Poverty Guidelines, the financial eligibility test is then based on the foster parent's income at 185 percent of the Federal Poverty Guidelines.

Table 6. Defining the Family Unit and Income: Treatment of Children and Siblings, 2020²

State/Territory*	Maximum Age Siblings Who are Not in School are Counted in the Unit	Maximum Age Siblings Who are Still in School are Counted in the Unit	Treatment of Children's and Siblings' Earnings (When Included in Family Size)
Alabama	17	17	Fully counted
Alaska	17	17	Not counted ³
American Samoa	--- ¹	--- ¹	Not counted
Arizona	17	17	Varies/partially counted ⁴
Arkansas	NA ⁵	NA ⁵	Counted at age 18 and older
California	17	18	Not counted
Colorado	17 ⁶	18 ⁷	Not counted
Connecticut	17	17	Not counted
DC	17	21	Not counted
Delaware	17	17	Fully counted
Florida	NA ⁸	NA ⁸	Counted at age 18 and older ⁹
Georgia	17	17	Not counted
Guam	17 ¹⁰	NA ¹¹	Varies/partially counted ¹²
Hawaii	17	17	Varies/partially counted ¹³
Idaho	NA ¹⁴	NA ¹⁴	Counted at age 18 and older
Illinois	20 ¹⁵	20 ¹⁵	Not counted ¹⁶
Indiana	17	17	Not counted
Iowa	17	17	Counted at age 15 and older ¹⁷
Kansas	17	18 ¹⁸	Not counted ¹⁹
Kentucky	18	18	Not counted
Louisiana	18	18	Not counted
Maine	17	17	Varies/partially counted ²⁰
Maryland	17	21	Counted at age 15 and older ²¹
Massachusetts	17	23	Not counted
Michigan	17	17	Varies/partially counted ²²
Minnesota	17	17 ²³	Varies/partially counted ²⁴
Mississippi	17 ²⁵	20 ²⁵	Not counted
Missouri	17	17	Varies/partially counted ⁴
Montana	17 ²⁶	17 ²⁶	Varies/partially counted ²⁷
Nebraska	18	18	Varies/partially counted ²⁸
Nevada	17	18	Varies/partially counted ²⁹
New Hampshire	17	19	Varies/partially counted ³⁰
New Jersey	NA ⁵	NA ⁵	Fully counted
New Mexico	17	18	Not counted
New York	17 ³¹	17 ³¹	Not counted ³²
No. Mariana Islands	17	17	Varies/partially counted ³³

Table 6. Defining the Family Unit and Income: Treatment of Children and Siblings, 2020²

State/Territory*	Maximum Age Siblings Who are Not in School are Counted in the Unit	Maximum Age Siblings Who are Still in School are Counted in the Unit	Treatment of Children's and Siblings' Earnings (When Included in Family Size)
North Carolina	17	18 ³⁴	Not counted
North Dakota	18 ³⁵	18 ³⁵	Not counted ³⁶
Ohio	17	17	Varies/partially counted ³⁷
Oklahoma	17	17	Varies/partially counted ³⁸
Oregon	17	18	Not counted ³⁶
Pennsylvania	17	21	Not counted
Puerto Rico	20	20	Not counted
Rhode Island	17 ³⁹	17 ³⁹	Not counted
South Carolina	17	20	Counted at age 18 and older ⁴⁰
South Dakota	17	18	Not counted
Tennessee	17	18	Varies/partially counted ⁴¹
Texas	NA ⁴²	NA ⁴²	Varies/partially counted ⁴³
Utah	17	18	Not counted
Vermont	NA ⁴⁴	NA ⁴⁴	Not counted
Virgin Islands	17	18	Not counted
Virginia	17	17	Not counted
Washington	18	18 ⁴⁵	Varies/partially counted ⁴⁶
West Virginia	17	17	Not counted
Wisconsin	18	18	Not counted ⁴⁷
Wyoming	17	18	Not counted

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

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

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

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

⁶ Children of the primary applicant continue to be counted as part of the family unit as long as they live with the primary applicant and are under 18 years old.

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

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

⁹ Earned income is excluded for any family member who is under age 18, or age 18 if enrolled as a full-time student in a secondary school or its equivalent. Earned income of family members under the age of 24 is excluded if they are full-time students in a post-secondary school or its equivalent. Income is based on the child's income only for child-only TANF cases.

¹⁰ Children under age 18 are included in the unit. If a child age 18 or over is a tax dependent of the applicant, he or she is included in the unit.

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

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

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

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

- ¹⁵ Children under age 21 may be included in the unit if including these individuals would be beneficial for the family, they are dependent on the family for more than 50 percent of their support, and they are full-time students away at school. In order to be counted in the unit, they cannot establish residency outside of the family household.
- ¹⁶ The earnings of a child under the age of 21 are exempt, unless that child is the applicant.
- ¹⁷ Earnings of a child under age 15 are not counted. Earnings of a child under age 18 are not counted if the child is a full-time student.
- ¹⁸ A child in high school is included through the month of the child's 19th birthday.
- ¹⁹ The earnings of any child under 18, or 19 if the child is working toward the attainment of a high school diploma or its equivalent, are exempt.
- ²⁰ Earned income is not counted if the child is 19 or younger, attending elementary or secondary school, and living with the applicant.
- ²¹ Earnings of a child under age 15 or a child under age 18 who is attending public school are not counted.
- ²² If a child is attending school, including GED completion, his or her earned income is not counted as long as the child is living with someone who provides care or supervision.
- ²³ An adult age 18 or older who is a full-time high school or post-secondary student may be considered a dependent if 50 percent or more of the adult student's support is provided by the parents, step-parents, guardians and their spouses, or eligible relative caregivers and their spouses residing in the same family. To include the adult student as a dependent in the family, the family must verify that it provides 50 percent or more of the student's support.
- ²⁴ The earned income of a full-time student under age 19 is not counted if he or she has not yet earned a high school diploma or GED. The earned income of any child not in school full time between the ages of 6 and 17 is counted. Earned income of children under 6 is not counted.
- ²⁵ A child younger than 21 years old in the home, attending school or with a disability, is considered a dependent and should be counted as a household member.
- ²⁶ Adult siblings, age 18 and over, have the option of being counted as household members.
- ²⁷ The earned income of a dependent child who is attending elementary or high school, regardless of age, is excluded.
- ²⁸ Earnings are not counted if the child is age 18 or under and in school. Summer earnings of a child age 18 or under are not counted if the caseworker verifies the child will return to school in the fall.
- ²⁹ If a sibling is attending high school, earnings are not counted. If earnings cannot be separated from those of other household members, total earnings are prorated equally among working members of the household and the sibling's portion is disregarded.
- ³⁰ Earned income of a child through the age of 19 is not counted if the child is a full-time student in high school or its equivalent.
- ³¹ Children under age 18 must be included in the unit. Districts may elect to include 18, 19, or 20-year-old individuals in the same family unit. All individuals may be included or just those whose inclusion would benefit the family.
- ³² Districts may elect to include 18, 19, or 20-year-old siblings in the same family unit. The income of siblings aged 18 and over and included in the unit is fully counted.
- ³³ Earnings of minor children who are students at least half time are excluded, even during semester and vacation breaks.
- ³⁴ A sibling is counted if he or she is still in high school and scheduled to graduate before his or her 19th birthday.
- ³⁵ A child is considered 18 through the month of the child's 19th birthday.
- ³⁶ Children's and sibling's unearned income is counted.
- ³⁷ Earnings of a minor child are not counted as long as the child is a full-time student.
- ³⁸ Earnings of a child, age 17 or under, are not counted if the child is attending school full time or attending classes to obtain a GED.
- ³⁹ A dependent child under the age of 18, or under the age of 19 if the child has a documented disability, is included in the unit.
- ⁴⁰ Earned income of children under age 18 is not counted unless the children are emancipated or teen parents with a benefit case in their own name.
- ⁴¹ Summer or part-time income is not counted if the child or sibling is 24 or younger and in school or training.
- ⁴² Children of the primary applicant continue to be counted as part of the family unit as long as they live with the primary applicant and are counted on his or her tax return.
- ⁴³ Income from children in the household who are between the ages of 14 and 19 and attending school is not counted.
- ⁴⁴ Siblings are counted in the unit as long as a caretaker in the household is legally responsible for them, regardless of age.
- ⁴⁵ Siblings up to 21 years of age may be included if they are participating in a special education program.
- ⁴⁶ A child's income is counted if he or she is under legal guardianship.
- ⁴⁷ Earned income is not counted for dependent minors, defined as children under age 18, or dependent 18-year-olds.

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2020

State/Territory*	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
Alabama	18 ¹	Fully counted	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Alaska	17	Fully counted	Varies ²	Only teen parent and child(ren) included
American Samoa	17	Varies/partially counted ³	Varies ⁴	Varies ⁴
Arizona	19 ⁵	Fully counted	Teen, child, parent, and siblings form one unit ⁶	Varies ⁷
Arkansas	20 ⁸	Varies/partially counted ⁹	Teen and child form one unit, and parent and siblings form another ¹⁰	Only teen parent and child(ren) included ¹⁰
California	18 ¹¹	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Colorado	20 ¹²	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Connecticut	19 ¹³	Fully counted	Varies ¹⁴	Varies ¹⁴
DC	19 ¹⁵	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Delaware	17	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Florida	17 ¹⁶	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Georgia	20	Varies/partially counted ¹⁷	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Guam	18 ¹⁸	Varies/partially counted ¹⁹	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Hawaii	17 ²⁰	Varies/partially counted ²¹	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Idaho	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2020

State/Territory*	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
Illinois	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Indiana	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Varies ²²
Iowa	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Kansas	19	Fully counted	Teen, child, parent, and siblings form one unit	Varies ²³
Kentucky	19 ²⁴	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Louisiana	17	Fully counted	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Maine	19 ²⁵	Fully counted	Varies ²⁶	Only teen parent and child(ren) included
Maryland	17	Varies/partially counted ²⁷	Varies ²⁸	Parents/caretakers and minor siblings of the teen parent included
Massachusetts	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Michigan	17 ²⁹	Varies/partially counted ³⁰	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Minnesota	18 ³¹	Varies/partially counted ³²	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Mississippi	17	Not counted	Varies ³³	Varies ³³
Missouri	17	Varies/partially counted ³	Varies ²	Varies ²
Montana	19	Fully counted	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Nebraska	18	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Nevada	17	Varies/partially counted ³⁴	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2020

State/Territory*	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
New Hampshire	19 ³⁵	Varies/partially counted ³⁶	Teen and child form one unit, and parent and siblings form another ³⁷	Only teen parent and child(ren) included ³⁷
New Jersey	18	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
New Mexico	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
New York	20	Fully counted	Teen and child form one unit, and parent and siblings form another ³⁸	Only teen parent and child(ren) included ³⁸
No. Mariana Islands	18 ³⁹	Varies/partially counted ⁴⁰	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
North Carolina	17	Fully counted	Varies ⁴¹	Only teen parent and child(ren) included
North Dakota	20 ⁴²	Varies/partially counted ⁴²	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Ohio	17	Fully counted	Teen, child, parent, and siblings form one unit ⁴³	Parents/caretakers of the teen parent included ⁴³
Oklahoma	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Oregon	17	Varies/partially counted ⁴⁴	Varies ⁴⁴	Varies ⁴⁴
Pennsylvania	17	Varies/partially counted ²¹	Varies ²	Only teen parent and child(ren) included
Puerto Rico	20	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Rhode Island	19	Fully counted	Varies ⁴⁵	Varies ⁴⁵
South Carolina	19 ⁴⁶	Fully counted	Varies ⁴⁷	Varies ⁴⁷
South Dakota	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Tennessee	19	Fully counted	Varies ⁴⁸	Varies ⁴⁸
Texas	19 ⁴⁹	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2020

State/Territory*	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
Utah	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Vermont	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Virgin Islands	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Virginia	17	Not counted	Teen, child, parent, and siblings form one unit	Parents/caretakers of the teen parent included ⁵⁰
Washington	21 ⁵¹	Fully counted	Teen and child form one unit, and parent and siblings form another ⁵²	Only teen parent and child(ren) included ⁵²
West Virginia	17	Fully counted	Teen and child form one unit, and parent and siblings form another ⁵³	Only teen parent and child(ren) included ⁵³
Wisconsin	18 ⁵⁴	Varies/partially counted ⁵⁵	Teen, child, parent, and siblings form one unit ⁵⁴	Parents/caretakers and minor siblings of the teen parent included ⁵⁴
Wyoming	17	Fully counted	Varies ⁵⁶	Varies ⁵⁶

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

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

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

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

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

⁷ If the parent of the minor intends to claim either the minor or the minor's child as a dependent, they are both included in the unit. If the parent does not intend to count either the minor or the minor's child as a dependent, the minor and the minor's child are counted as a separate unit.

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

⁹ Parents attending high school full time are excluded from income requirements. If the teen parent is not attending high school full time and is considered an emancipated minor, he or she is treated the same as an adult applicant.

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

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

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

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

- ¹⁴ Policies for minor and teen parents vary. Minor parents and their children are included in the same assistance unit as their siblings and adult parents. Teen parents form their own assistance unit.
- ¹⁵ A teen parent that is 19 years old or younger must either be enrolled and attend a middle school, high school, an equivalent secondary program (e.g. GED program), or college; or enrolled in a verified job search, job training, or work readiness program.
- ¹⁶ The maximum age applies unless the parent is married or emancipated.
- ¹⁷ Earnings are not counted if the teen parent is under age 18.
- ¹⁸ A teen parent is an unmarried parent who is under the age of 19, has not received a high school diploma or GED, lives in the home of his or her parent or guardian, and attends a high school program.
- ¹⁹ A teen parent's income is excluded if the teen parent and child reside with the teen's parents, an adult relative, or legal guardian, and the teen parent is attending school.
- ²⁰ Teen parents may be eligible for care if they meet the eligibility criteria and are not living in the same household as their adult parents or caretakers.
- ²¹ Income is counted if the teen parent is an emancipated minor.
- ²² The minor parent and his or her children are considered a separate family unless the minor parent is not the primary caregiver of his or her children, in which case the minor parent and his or her children are considered part of the family unit of their mutual caregiver.
- ²³ When a minor teen parent needs child care to finish high school or obtain a GED, the minor's caretaker is included in the unit, but his or her income is not counted. The teen parent's siblings are not included.
- ²⁴ A teen parent is defined as being age 19 or younger and actively seeking a high school diploma or GED.
- ²⁵ The teen parent must reside with his or her child and attend a secondary school or GED equivalency program.
- ²⁶ The family unit composition is decided on a case-by-case basis.
- ²⁷ A disregard of \$5,000 of a family's annual gross income per child is allowed if the minor parent is attending public school full time.
- ²⁸ Teen parents apply as the head of household. When an adult parent has physical custody of children in need of care, another unit is established with the adult listed as head of household. The adult parent is still considered part of the unit in the teen parent's case.
- ²⁹ The subsidy recipient must be unmarried and living with his or her adult parents to be considered a minor parent. The adult parent or guardian must be the applicant for the subsidy, not the minor parent. A valid need reason is only required for the minor parent, not the applicant.
- ³⁰ Earnings are not counted if the teen parent is under age 18, attending school, and living with someone who provides care or supervision.
- ³¹ The maximum age is 17 if the parent is not a full-time student in school or training.
- ³² The earned income of a student parent age 19 and under and in school at least half time is not counted.
- ³³ Any teen parent enrolled full time in high school or in a GED program must make an application in his or her own name, as a family unit separate from his or her parent.
- ³⁴ If a teen is attending high school, earnings are not counted. If earnings cannot be separated from those of other household members, total earnings are prorated equally among working members of the household and the teen's portion is disregarded.
- ³⁵ Full-time students with a biological, foster, step, guardianship, or adoptive relationship to a parent in the household may be considered teen parents through age 19.
- ³⁶ Income is counted unless the individual is under age 20 and attending high school or its equivalent full time.
- ³⁷ The parents of the minor parent are not included in the unit when the minor parent has legal responsibility for the child.
- ³⁸ Any individuals in the household with legal responsibility for the child are included in the unit with the teenage parent and child.
- ³⁹ The applicant must be unmarried, attending high school or a GED program, and be living with a parent, adult relative, or legal guardian.
- ⁴⁰ Earnings of minor children who are students at least half time are excluded, even during semester and vacation breaks.
- ⁴¹ The teen parent is counted in the adult parent's unit, but the teen parent's child is not.
- ⁴² In order to be eligible for income-excluded child care through age 20, the parent must be enrolled in the Crossroads program, a program to assist with child care costs for parents through age 20 who have primary responsibility for the care of their children and who are in high school or working on their GED. Other teen parents do not receive preferential treatment.
- ⁴³ A minor parent who participates in the learning, earning, and parenting (LEAP) program may apply for child care benefits on his or her own. The family is then defined as the minor parent and the children of the minor parent.
- ⁴⁴ Minor parents who are employed and request a separate employment-related day care case are considered the caretaker of their own unit and their income is counted. If they do not request a separate case, they may be included in the adult parent's unit, and the income of the minor parent is not counted.
- ⁴⁵ If the teen parent is under the age of 16 and not an emancipated minor, the parent or legal guardian of the teen parent is included in the unit. A teen parent under the age of 16 may obtain child care assistance on his or her own if the inclusion of the parent or legal guardian would present an obstacle to receiving child care.

⁴⁶ In order to apply for child care, the parent must be 18 or within six months of turning 18. If the parent is not 18, he or she must be legally emancipated or have a notarized emancipation statement from his or her parents in order to apply for child care. If the minor is not legally emancipated, the minor's parent must apply for child care and meet all eligibility criteria. Teen parents under age 18 receiving TANF do not have to be emancipated in order to receive child care.

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

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

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

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

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

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

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

⁵⁴ A teen parent is defined as a parent under age 19, or under age 20 if they are enrolled in a high school or GED program. Parents under age 18 must reside with a parent or guardian to be eligible to apply.

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

⁵⁶ If all three generations are part of the same TANF payment unit, they are considered one unit; otherwise the minor and child form one unit, and the minor's parents and siblings form another unit.

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2020

State/Territory*	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Alabama	Always included	Fully counted	The parents and children form one unit	Never included ⁴	Always included	Fully counted
Alaska	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁵	Fully counted
American Samoa	Always included	Fully counted	The parents and children form one unit	--- ¹	--- ¹	--- ¹
Arizona	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁶	Fully counted
Arkansas	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
California	Always included	Fully counted	The parents and children form one unit	Varies ⁷	Varies ⁸	Fully counted
Colorado	Always included	Fully counted	The parents and children form one unit	Varies ⁹	Varies ¹⁰	Fully counted
Connecticut	Always included	Fully counted	The parents and children form one unit	Varies ¹¹	Always included	Fully counted
DC	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA
Delaware	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹²	Fully counted
Florida	Always included	Fully counted	The parents and children form one unit	Always included	Varies ¹³	Fully counted
Georgia	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted ¹⁴
Guam	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2020

State/Territory*	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Hawaii	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁵	Fully counted ¹⁵
Idaho	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Illinois	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁶	Not counted ¹⁶
Indiana	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁷	Fully counted
Iowa	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Kansas	Always included	Fully counted	The parents and children form one unit	Always included	Always included	Fully counted
Kentucky	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁸	Fully counted ¹⁹
Louisiana	Always included	Fully counted	The parents and children form one unit	Always included	Varies ²⁰	Fully counted
Maine	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Maryland	Always included	Fully counted	The parents and children form one unit	Never included	Varies ²¹	Fully counted
Massachusetts	Always included	Fully counted	The parents and children form one unit	Never included	Varies ²²	Fully counted
Michigan	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Minnesota	Always included	Varies/partially counted ²³	The parents and children form one unit	Never included	Always included	Fully counted

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2020

State/Territory*	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Mississippi	Always included	Fully counted	The parents and children form one unit	Varies ²⁴	Varies ²⁵	Fully counted
Missouri	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA ²⁶
Montana	Always included	Fully counted	The parents and children form one unit	Varies ²⁷	Always included ²⁸	Fully counted
Nebraska	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Nevada	Always included	Fully counted	The parents and children form one unit	Always included	Varies ²⁹	Fully counted
New Hampshire	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
New Jersey	Varies ³⁰	Fully counted	The parents and children form one unit	Varies ³¹	Always included ³²	Fully counted
New Mexico	Always included	Fully counted	The parents and children form one unit	Never included	Always included ³³	Fully counted ³³
New York	Always included	Fully counted	The parents and children form one unit	Never included	Varies ³⁴	Varies/partially counted ³⁵
No. Mariana Islands	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA
North Carolina	Always included	Fully counted	Each parent forms one unit with their children	Never included	Always included	Fully counted
North Dakota	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Ohio	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2020

State/Territory*	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Oklahoma	Always included	Fully counted	The parents and children form one unit	Never included ³⁶	Always included	Fully counted
Oregon	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Pennsylvania	Always included	Varies/partially counted ³⁷	The parents and children form one unit	Never included	Varies ³⁸	Fully counted
Puerto Rico	Always included	Fully counted ³⁹	The parents and children form one unit	Never included	Always included	Fully counted
Rhode Island	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
South Carolina	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
South Dakota	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Varies/partially counted ⁴⁰
Tennessee	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁴¹	Fully counted
Texas	Always included	Fully counted	The parents and children form one unit	Never included	Varies ³⁸	Fully counted
Utah	Always included	Fully counted	The parents and children form one unit	Never included ⁴	Always included	Fully counted
Vermont	Always included	Fully counted	The parents and children form one unit	Never included	Always included ⁴²	Fully counted
Virgin Islands	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA
Virginia	Always included	Fully counted	The parents and children form one unit	Always included ⁴³	Always included	Fully counted

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2020

State/Territory*	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Washington	Always included	Fully counted	The parents and children form one unit	Never included	Always included ⁴⁴	Fully counted
West Virginia	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Wisconsin	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁴⁵	Fully counted
Wyoming	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁴⁶	Fully counted

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

³ For the purposes of the CCDF Policies Database, a parent or caretaker's partner is defined as a person who resides in the household, is not married to the child's parent, is not a parent of the child, and has no children in common with the child's parent. Policies regarding other adults residing in the household, who are not the parent's partner, are captured in Table 10.

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

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

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

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

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

⁹ The significant other is always included if he or she financially contributes to the welfare of the children.

¹⁰ Parents who are temporarily absent from the home are included in the unit if they are participating in an eligible activity. If the parent is involuntarily removed from the home, he or she is not counted in the unit.

¹¹ The partner is included if the parent or caretaker identifies the partner as a spouse, life partner, or the co-parent of the child.

¹² The temporarily absent parent is included in the family size if his or her needs and income are considered together with the household when determining eligibility.

- ¹³ If one parent is temporarily living outside of the home for employment, but the primary residence is with the family receiving services, then that parent is considered part of the family unit.
- ¹⁴ Income is counted for parents absent from the home due to military or work assignments.
- ¹⁵ Parents living temporarily outside the home are included in the unit if they continue to maintain responsibility for the care, education, and financial support of the child.
- ¹⁶ If the parent is absent from the household for 30 days or more due to military service, incarceration, education, or other reasons at the time of eligibility determination, the parent is not included in the assistance unit and his or her earnings are not counted.
- ¹⁷ A parent in the military who is stationed away from the home is considered part of the unit if he or she is married to the parent residing in the home. A parent stationed away from the home is not included in the unit if he or she is not married to the parent residing in the home.
- ¹⁸ A parent that is temporarily absent from the household for 30 days or more due to incarceration or hospitalization is not included in the family unit.
- ¹⁹ Earnings of a temporarily absent parent are counted. Earnings of a parent who is absent from the household for 30 days or more due to incarceration or hospitalization are not counted, and the parent is not included in the unit.
- ²⁰ Parents living temporarily outside the home are included in the unit if they continue to maintain responsibility for the care, education, and financial support of the child. Parents, spouses, and non-legal spouses are not considered temporarily living outside of the home if they establish permanent residence elsewhere.
- ²¹ Parents who are temporarily absent due to military deployment are included in the family unit.
- ²² If the person is considered a member of the household, he or she is included in the family size.
- ²³ The income of a new spouse, in a family receiving child care from the state's TANF program (Minnesota Family Investment Program), does not count towards the family's income for 26 consecutive biweekly periods if the family's income prior to the exemption does not exceed 67 percent of state median income. This exemption begins the second biweekly period after the marriage date.
- ²⁴ Any person living in the household who is financially or legally responsible for the care of the children who need child care is included in the unit.
- ²⁵ Temporarily absent parents are included in the family unit on a case by case basis at the caseworker's discretion depending on the reason for their absence.
- ²⁶ A family member who is in the military and stationed away from the residence is not included in the family unit for the purpose of determining household size, but any income sent to the family unit is included.
- ²⁷ The parent's significant other has the option of being counted as a household member.
- ²⁸ The temporarily absent parent must be considered part of an intact family (for example, an incarcerated parent).
- ²⁹ A temporarily absent parent is included as a member of the family unit unless the parent is single or incarcerated. If the parent's absence is solely due to being on active duty in a uniformed service, then the parent is included as a member of the family unit.
- ³⁰ If the step-parent is legally responsible for the child, he or she is included in the assistance unit.
- ³¹ The partner is included if he or she is legally responsible for the children.
- ³² Parents are included in the unit if they are legally responsible for the child.
- ³³ A temporarily absent parent is included as long as the parent plans to return to the home. Temporary absences may include, but are not limited to, attending school, working, training, or military service.
- ³⁴ Individuals who are temporarily absent from the home are counted as part of the unit if they are contributing to or are required to contribute to the needs of the household.
- ³⁵ Income is counted if the individual is contributing or required to contribute to the needs of the household.
- ³⁶ The partner is only included when they share a child in common.
- ³⁷ There is a step-parent deduction if the child requesting care is not his or her biological child. The deduction varies by family size and county. If care is needed for either a child in common or his or her own children, the step-parent's income is fully counted.
- ³⁸ Parents who are temporarily absent due to military service are included in the family unit.
- ³⁹ A step-parent's income is included except in cases where there is a pre-nuptial agreement.
- ⁴⁰ If the parent is absent because of work or school, his or her income is counted. If the parent is incarcerated for at least 30 consecutive days, his or her income is not counted.

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

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

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

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

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

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

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2020 ¹

State/Territory*	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Alabama	Yes, all relative caretakers ²	Varies ³	Fully counted	Yes, only legal guardians ²	Varies ⁴	Fully counted
Alaska	Yes, all relative caretakers ⁵	Always included	Fully counted	Yes, all non-relative caretakers ⁵	Always included	Fully counted
American Samoa	Other ⁶	Always included	Varies/partially counted ⁷	Other ⁸	Always included	Varies/partially counted ⁷
Arizona	Yes, all relative caretakers	Varies ⁹	Fully counted ¹⁰	Yes, only legal guardians	Varies ¹¹	Fully counted ¹²
Arkansas	Yes, all relative caretakers ¹³	Always included ¹⁴	Fully counted ¹⁴	Yes, all non-relative caretakers ¹³	Always included ¹⁴	Fully counted ¹⁴
California	Yes, all relative caretakers	Never included	NA	Yes, all non-relative caretakers	Never included	NA
Colorado	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Connecticut	Yes, all relative caretakers ¹⁵	Always included	Fully counted	Yes, all non-relative caretakers ¹⁵	Always included	Fully counted
DC	Yes, only legal guardians	Always included ¹⁶	Not counted	Yes, only legal guardians	Always included ¹⁶	Not counted
Delaware	Yes, all relative caretakers ¹⁷	Never included	NA	Yes, only legal guardians	Never included	NA
Florida	Yes, all relative caretakers	Varies ¹⁸	Fully counted ¹⁸	Yes, all non-relative caretakers ¹⁹	Varies ¹⁸	Fully counted ¹⁸
Georgia	Yes, all relative caretakers	Varies ²⁰	Fully counted ²⁰	Yes, all non-relative caretakers	Varies ²⁰	Fully counted ²⁰

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2020 ¹

State/Territory*	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Guam	Yes, all relative caretakers	Always included	Varies/partially counted ²¹	Yes, all non-relative caretakers	Always included	Varies/partially counted ²¹
Hawaii	Yes, all relative caretakers	Always included	Varies/partially counted ²²	Yes, all non-relative caretakers	Always included	Varies/partially counted ²²
Idaho	Yes, all relative caretakers ²³	Always included	Fully counted	Yes, all non-relative caretakers ²³	Always included	Varies/partially counted ²⁴
Illinois	Yes, all relative caretakers ²⁵	Always included	Varies/partially counted ²⁶	Yes, only legal guardians	Always included	Fully counted
Indiana	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Varies/partially counted ²⁷
Iowa	Other ²⁸	Never included	NA	Other ²⁸	Never included	NA
Kansas	Yes, all relative caretakers ²⁹	Always included	Varies/partially counted ³⁰	Yes, all non-relative caretakers ²⁹	Always included	Varies/partially counted ³⁰
Kentucky	Yes, all relative caretakers ³¹	Always included	Fully counted	Yes, all non-relative caretakers ³²	Always included	Fully counted
Louisiana	Yes, all relative caretakers ³³	Always included	Fully counted	Yes, all non-relative caretakers ³³	Always included	Fully counted
Maine	Yes, all relative caretakers ²³	Never included ³⁴	NA	Yes, all non-relative caretakers ²³	Never included ³⁴	NA
Maryland	Yes, all relative caretakers	Always included	Varies/partially counted ³⁵	Yes, all non-relative caretakers	Always included	Varies/partially counted ³⁵
Massachusetts	Yes, only legal guardians ³⁶	Always included	Not counted	Yes, only legal guardians ³⁶	Always included	Not counted
Michigan	Yes, all relative caretakers	Varies ³⁷	Fully counted	Other ³⁸	Varies ³⁷	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2020 ¹

State/Territory*	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Minnesota	Other ³⁹	Always included	Fully counted ³⁹	Yes, only legal guardians	Always included	Fully counted
Mississippi	Yes, all relative caretakers ⁴⁰	Always included	Fully counted	Yes, all non-relative caretakers ⁴⁰	Always included	Fully counted
Missouri	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Montana	Yes, all relative caretakers	Always included ⁴¹	Fully counted	Yes, all non-relative caretakers	Always included ⁴¹	Fully counted
Nebraska	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Nevada	Other ⁴²	Always included ⁴³	Fully counted	Other ⁴²	Always included ⁴⁴	Fully counted
New Hampshire	Yes, all relative caretakers	Always included	Varies/partially counted ⁴⁵	Yes, only legal guardians	Always included	Varies/partially counted ⁴⁵
New Jersey	Yes, only legal guardians	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
New Mexico	Other ⁴⁶	Always included	Fully counted	Yes, only legal guardians ⁴⁶	Always included	Fully counted
New York	Yes, all relative caretakers	Varies ⁴⁷	Not counted ⁴⁸	Yes, all non-relative caretakers	Varies ⁴⁷	Not counted ⁴⁸
No. Mariana Islands	Yes, all relative caretakers	Always included ⁴¹	Fully counted	Yes, all non-relative caretakers	Always included ⁴¹	Fully counted
North Carolina	Yes, all relative caretakers ⁴⁹	Never included	NA	Yes, all non-relative caretakers	Never included	NA
North Dakota	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers ⁵⁰	Always included	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2020 ¹

State/Territory*	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Ohio	Yes, all relative caretakers ⁵¹	Always included	Fully counted	Yes, all non-relative caretakers ⁵¹	Always included	Fully counted
Oklahoma	Yes, all relative caretakers	Varies ⁵²	Fully counted	Yes, all non-relative caretakers	Varies ⁵²	Fully counted
Oregon	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Pennsylvania	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Puerto Rico	Yes, all relative caretakers ⁵³	Always included ⁵⁴	Fully counted	Yes, all non-relative caretakers ⁵³	Always included ⁵⁴	Fully counted
Rhode Island	Yes, all relative caretakers ⁵⁵	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
South Carolina	Yes, all relative caretakers	Always included ⁵⁶	Fully counted	Yes, all non-relative caretakers	Always included ⁵⁶	Fully counted
South Dakota	Other ⁵⁷	Always included ⁵⁸	Not counted	Other ⁵⁷	Always included ⁵⁸	Fully counted
Tennessee	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Texas	Yes, all relative caretakers ⁵⁹	Always included ⁵⁹	Fully counted	Yes, all non-relative caretakers ⁵⁹	Always included ⁵⁹	Fully counted
Utah	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Vermont	Yes, all relative caretakers	Always included ⁶⁰	Varies/partially counted ⁶¹	Yes, all non-relative caretakers	Always included ⁶⁰	Varies/partially counted ⁶¹
Virgin Islands	Yes, only legal guardians	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2020 ¹

State/Territory*	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Virginia	Yes, all relative caretakers ²³	Always included	Fully counted	Yes, all non-relative caretakers ²³	Always included	Fully counted
Washington	Yes, all relative caretakers	Never included	NA	Other ⁶²	Never included	NA
West Virginia	Yes, all relative caretakers ⁶³	Always included ⁶⁴	Fully counted	Yes, all non-relative caretakers ⁶³	Always included ⁶⁴	Fully counted
Wisconsin	Yes, all relative caretakers ⁶⁵	Always included	Varies/partially counted ⁶⁶	Yes, all non-relative caretakers ⁶⁵	Always included	Varies/partially counted ⁶⁶
Wyoming	Yes, all relative caretakers	Always included ⁶⁷	Fully counted	Yes, only legal guardians ⁶⁸	Always included ⁶⁷	Fully counted

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² The assistance unit consists of a household of minor unmarried children and their parents by blood, marriage, adoption; legal guardians; or adult relatives without legal custody who are standing in loco parentis. Foster parents are not included in the assistance unit, although they are allowed to apply.

³ Caretakers are included in the unit unless they are foster parents referred by the foster care program, in which case they are allowed to apply for subsidies, but they are not counted in the family size.

⁴ A non-parent, non-relative caretaker is included in the unit if he or she is the legal guardian. Caretakers are included in the unit unless they are foster parents referred by the foster care program, in which case they are allowed to apply for subsidies, but they are not counted in the family size.

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

⁶ A non-parent, relative caretaker is allowed to apply for subsidies if he or she is the child's legal guardian or acting in loco parentis. A person is considered to be acting in loco parentis when he or she has assumed guardianship and control of a child for a period of at least six months. This determination must be confirmed by the child's closest living relative.

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

⁸ A non-parent, non-relative caretaker is allowed to apply for subsidies if he or she is the child's legal guardian or acting in loco parentis. A person is considered to be acting in loco parentis when he or she has assumed guardianship and control of a child for a period of at least six months. This determination must be confirmed by the child's closest living relative.

- ⁹ When care is requested for the related child only, the caretaker is not included in the unit. When care is requested for the caretaker's own children in addition to the related child, the unit consists of the caretaker, the other responsible person if applicable, their children, and the related child.
- ¹⁰ If the relative caretaker applies for child care assistance for his or her own children in addition to the related children, his or her income is included.
- ¹¹ Legal guardians are not included in the family size unless they apply for care for their own children in addition to the child in guardianship.
- ¹² If the legal guardian applies for child care assistance for his or her own children in addition to the children under guardianship, his or her income is included.
- ¹³ The caretaker must be at least 18 years of age or be emancipated and have full-time physical custody of the child.
- ¹⁴ If a child is in the full-time physical custody of someone other than the parent or guardian due to the parent or guardian being activated for military duty, the adult with power of attorney over the child serves as an authorized representative for the household. All income of the child's caretaker is disregarded.
- ¹⁵ A non-parent caretaker is included when he or she is standing in loco parentis. In loco parentis is defined as a person with whom the child lives who is responsible for the day-to-day care and custody of the child.
- ¹⁶ A non-parent caretaker is included in the unit only if guardianship is documented.
- ¹⁷ A relative caretaker is an adult who is by marriage, blood relationship, or court decree the grandparent, great-grandparent, sibling, aunt, or uncle of the child receiving care.
- ¹⁸ Foster parents and caretakers who fall under the relative caregiver category of care are not included in the unit and their income is not counted. Legal guardians and individuals acting in loco parentis are included in the unit and their income is counted.
- ¹⁹ Individuals who are acting in loco parentis may apply, as well as parents by blood, marriage, or adoption.
- ²⁰ Foster parents are not counted in the family size, and their income is not counted.
- ²¹ The income of a non-parent caretaker is not counted if the child is receiving child protective services.
- ²² The income of foster parents is not counted.
- ²³ Adults acting in loco parentis are allowed to apply for child care subsidies.
- ²⁴ A foster parent's income is excluded when determining eligibility for a foster child.
- ²⁵ All relative caretakers within the fifth degree of kinship are allowed to apply for child care subsidies. Relatives outside of the first five degrees must have legal guardianship.
- ²⁶ The income of a caretaker relative who is not a parent or step-parent, is employed, is cooperating with child support, and is the representative payee of a child who is receiving child-only or general assistance TANF is not counted for eligibility and copayment purposes. However, if the caretaker relative is in an education and training program, his or her income is counted for eligibility and copayment purposes.
- ²⁷ The income of licensed foster parents is not included.
- ²⁸ Licensed foster parents cannot apply for subsidies for their foster children. If a licensed foster parent needs child care for the purpose of employment, this is handled by the foster care worker.
- ²⁹ In cases not involving legal guardianship or custody, if a biological or adoptive parent of a child for whom assistance is requested also resides in the home, that parent must be included in the assistance unit regardless of who claims to be the child's caretaker, unless that parent is not physically or mentally capable of caring for the child (as verified by a qualified professional), or is legally prohibited from caring for the child.
- ³⁰ If the child in need of care receives TANF benefits or SSI and no other children in the household need child care or the family is eligible based on a social services reason, the income of the caretaker is not counted.
- ³¹ A parent can be a person acting in loco parentis.
- ³² A non-relative caretaker must show verification of pursuit of legal custody within one year of application.
- ³³ Any adult in the household with primary responsibility for the child's financial support and care is allowed to apply for child care subsidies.
- ³⁴ The child is considered a family of one.
- ³⁵ A disregard of \$5,000 of a family's annual gross income per child is allowed if an adult with physical custody of the child is not the child's parent.
- ³⁶ In order for a non-parent relative caretaker to be eligible to apply for a child care subsidy, the biological or adoptive parents must not reside in the house and the non-parent caretaker must be a legal guardian, foster parent, or designated caretaker.

- ³⁷ Relative and non-relative caretakers, foster parents, and legal guardians are not included in the family size unless they apply for care for their own children in addition to the child in guardianship.
- ³⁸ An unrelated adult who is at least age 21 and whose petition for legal guardianship of the child is pending or with whom the department of human services has placed a child, subsequent to a court order identifying the department as responsible for the child's care, may apply for subsidies.
- ³⁹ Relative caretakers who are non-TANF recipients are only eligible for subsidies if they are the child's legal guardian. Relative caretakers who are receiving TANF or are the caregiver for a child receiving a TANF grant are eligible for subsidies.
- ⁴⁰ A parent is defined as a mother or father by blood, marriage, or adoption, a legal guardian, or other person standing in loco parentis.
- ⁴¹ A person acting in loco parentis is always counted as a household member.
- ⁴² Any adult with court-ordered custody of the child is allowed to apply for child care subsidies.
- ⁴³ An adult with court-ordered custody of the child who is related to the child by blood or marriage is counted in the assistance unit, with the exception of foster parents.
- ⁴⁴ A non-relative adult with court-ordered custody of the child is counted in the assistance unit, with the exception of foster parents and child protective services parents or caregivers.
- ⁴⁵ If a caretaker requests child care for his or her own children as well as a child for whom he or she cares, the income of the caretaker and spouse is counted.
- ⁴⁶ Legal guardians and grandparents, in addition to biological or step-parents, are allowed to apply for child care assistance. Grandparents have to be the legal guardians and determined to be providing for the grandchild's physical and emotional needs.
- ⁴⁷ Non-parent caretakers are allowed to apply for subsidies but are not included in the family unit, unless the non-parent caregiver is receiving either TANF cash assistance or New York State-only cash assistance.
- ⁴⁸ If the caretaker is receiving either TANF cash assistance or New York State-only cash assistance, then the child is automatically eligible for a child care subsidy and exempt from the copayment regardless of the caretaker's earnings.
- ⁴⁹ The spouse of a non-parent, relative caretaker is included in the family unit.
- ⁵⁰ A non-parent, non-relative caretaker is allowed to apply for subsidies if he or she is the child's legal guardian or acting in loco parentis. An individual is considered to be acting in loco parentis when he or she has assumed parental responsibilities and is physically caring for the child in the person's home on a 24-hour-a-day basis and the duration is expected to last over 30 uninterrupted days.
- ⁵¹ Adults who are standing in loco parentis are permitted to apply for subsidized child care and are included in the assistance unit.
- ⁵² The caretaker is included if he or she is court-ordered to be legally and financially responsible for the child.
- ⁵³ Evidence of temporary or permanent custody must be presented to the family court.
- ⁵⁴ Any person that functions as a parent is considered part of the unit.
- ⁵⁵ Relative caretakers acting in loco parentis are allowed to apply for child care subsidies.
- ⁵⁶ If the caretaker has legal responsibility or has assumed full physical responsibility for the child, he or she is counted in the unit.
- ⁵⁷ Any individual 18 years of age or older who has a signed statement from the child's parent or guardian giving the individual authority to exercise parental control of the child is allowed to apply for child care subsidies and counted in the unit. The caretaker must open and maintain an active child support enforcement case within six months of initial eligibility.
- ⁵⁸ The caretaker is counted in the unit if he or she has submitted a signed statement from the child's parents giving the caretaker parental control or provided court documentation giving parental control.
- ⁵⁹ A non-parent caretaker is included in the unit if he or she is responsible for the care and supervision of the children.
- ⁶⁰ Persons who live with, supervise, and care for a child or children whose parents do not live in the home are always included.
- ⁶¹ If the caretaker is legally responsible for the child's welfare, such as a biological, step, adoptive, or foster parent or legal guardian, then the caretaker's income is considered. However, if the child is living with an adult caretaker other than the legally responsible adult, then the legally responsible adult's income is considered, not the adult caretaker who lives in the home.
- ⁶² The non-parent, non-relative caretaker must have a written, signed agreement from the parent giving the caretaker custodial responsibility for the child, or the caretaker must receive a TANF grant on behalf of the child in his or her care, in order to apply for child care subsidies.

⁶³ The non-parent caretaker is allowed to apply for child care subsidies if he or she has been given custody or guardianship of the child by a court or has taken full physical custody and responsibility for the child.

⁶⁴ The non-parent caretaker is counted in the unit if he or she has been given custody or guardianship of the child by a court or taken full physical custody and responsibility for the child.

⁶⁵ The non-parent caretaker is allowed to apply for child care subsidies and is included in the assistance unit if the child is living with the caretaker and the parents are absent from the home.

⁶⁶ The financial eligibility test for foster care, subsidized guardianship, interim caretakers, and relatives with court-ordered placement who receive a Kinship Care payment is based on the child's biological or adoptive parent's income tested at 200 percent of the Federal Poverty Guidelines at the time the child was removed from the home. If the biological or adoptive parent's income exceeds 200 percent of the Federal Poverty Guidelines, the financial eligibility test is then based on the caregiver's household income and is tested at 185 percent of the Federal Poverty Guidelines. If the Child Protective Services worker is unable to provide the biological or adoptive parents' income and household size, the child will be considered financially eligible.

⁶⁷ The caretaker's spouse is always included in the assistance unit.

⁶⁸ A non-relative caretaker must have a court order giving legal responsibility or guardianship.

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2020¹

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

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2020¹

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

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2020¹

State/Territory*	If a Relative Adult Who is Not a Parent or Caretaker is Included when Defining the Family Size	Treatment of an Adult Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)	If a Non-Relative Adult Who is Not a Parent or Caretaker is Included when Defining the Family Size	Treatment of an Adult Non-Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)
Vermont	Never included	NA	Never included	NA
Virgin Islands	Never included	NA	Never included	NA
Virginia	Never included	NA	Never included	NA
Washington	Never included	NA	Never included	NA ¹⁷
West Virginia	Never included	NA	Never included	NA
Wisconsin	Never included	NA	Never included	NA
Wyoming	Never included	NA	Never included	NA

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ For the purposes of the CCDF Policies Database, these variables capture policies for non-parent, non-caretaker adults (e.g., aunts, uncles, or family friends) living in the home when the parent or caretaker is present. Information regarding the parent's partner is not captured here (see Table 8).

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

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

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

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

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

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

⁸ Adult relatives may be included in the family unit and their earnings may be counted if they are dependent on the family for 50 percent or more of their support.

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

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

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

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

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

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

¹⁵ If the non-relative adult is counted in the TANF or SNAP budget, he or she is counted in the family unit for child care.

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

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

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2020¹

State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
Alabama	Varies/partially counted ²	Fully counted	Fully counted	Fully counted ³	Not counted	Not counted
Alaska	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
American Samoa	NA ⁴	NA ⁵	Not counted	Fully counted	Counted for all children in the unit	Not counted ⁶
Arizona	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Arkansas	Varies/partially counted ⁷	Varies/partially counted ⁸	Varies/partially counted ⁹	Fully counted	Not counted	Not counted
California	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ¹⁰	Not counted ¹¹
Colorado	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted ¹¹
Connecticut	Not counted	Fully counted	Fully counted	Fully counted	Not counted	Not counted
DC	Not counted	Not counted	Not counted	Fully counted	Counted only for CCDF-eligible children	Not counted
Delaware	Not counted	Fully counted	Fully counted	Fully counted ¹²	Counted for all children in the unit	Not counted
Florida	Fully counted	Varies/partially counted ¹³	Varies/partially counted ⁹	Fully counted	Counted for all children in the unit	NA ¹⁴
Georgia	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Guam	Fully counted	Fully counted ¹⁵	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Hawaii	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2020¹

State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
Idaho	Not counted	Fully counted	Fully counted	Fully counted ¹⁶	Counted for all children in the unit ¹⁷	Not counted
Illinois	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Indiana	Fully counted	Fully counted ¹⁸	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Iowa	Fully counted ¹⁹	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Kansas	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Kentucky	Varies/partially counted ²⁰	Varies/partially counted ²¹	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Louisiana	Not counted	Fully counted	Fully counted	Fully counted ²²	Counted for all children in the unit	Not counted
Maine	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Maryland	Not counted	Not counted	Fully counted	Fully counted ²³	Counted for all children in the unit ²⁴	Not counted
Massachusetts	Varies/partially counted ²⁵	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Michigan	Not counted	Varies/partially counted ²⁶	Fully counted	Fully counted	Counted for all children in the unit ²⁷	Not counted
Minnesota	Fully counted ²⁸	Not counted	Fully counted	Fully counted	Counted for all children in the unit ²⁹	Not counted
Mississippi ³⁰	NA ³¹	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Missouri	Fully counted	Not counted	Fully counted	Fully counted ³²	Counted for all children in the unit	Not counted
Montana	Varies/partially counted ³³	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2020¹

State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
Nebraska	Not counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Nevada	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New Hampshire	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New Jersey	Fully counted	Fully counted	Fully counted	Fully counted ³⁴	Counted for all children in the unit	Not counted ¹¹
New Mexico	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New York	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit ³⁵	Not counted
No. Mariana Islands	NA ⁴	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted ⁶
North Carolina	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
North Dakota	Not counted	Fully counted	Fully counted	Fully counted ³⁶	Counted for all children in the unit	Not counted ³⁷
Ohio	Fully counted ³⁸	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Oklahoma	Not counted ³⁹	Varies/partially counted ⁴⁰	Fully counted	Fully counted ⁴¹	Counted for all children in the unit	Not counted
Oregon	Fully counted ⁴²	Fully counted	Fully counted	Fully counted ⁴³	Counted for all children in the unit	Not counted
Pennsylvania	NA ³¹	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Puerto Rico	Not counted	Not counted ⁴⁴	Not counted	Fully counted	Not counted	Not counted ⁶
Rhode Island	Not counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2020¹

State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
South Carolina	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ⁴⁵	Not counted
South Dakota	Fully counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Tennessee	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Texas	Not counted	Not counted	Fully counted	Fully counted	Not counted	Not counted
Utah	Not counted	Not counted ⁴⁶	Fully counted	Fully counted ⁴⁷	Counted for all children in the unit ⁴⁸	Not counted
Vermont	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Virgin Islands	Not counted	Not counted ⁴⁴	Not counted	Fully counted	Counted only for CCDF-eligible children	Not counted
Virginia	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ⁴⁹	Not counted
Washington	Varies/partially counted ⁵⁰	Fully counted	Fully counted	Fully counted ⁵¹	Counted for all children in the unit	Not counted
West Virginia	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Wisconsin	Not counted	Varies/partially counted ⁵²	Fully counted	Fully counted ⁵³	Other ⁵⁴	Not counted
Wyoming	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ TANF is the Temporary Assistance for Needy Families program, SSI is Supplemental Security Income, SSDI is Social Security Disability Insurance, and SNAP is the Supplemental Nutrition Assistance Program (formerly known as Food Stamps). For information about state policies regarding the treatment of unemployment benefits during the COVID-19 pandemic, see the full CCDF Policies Database.

- ² If the TANF benefit amount is the sole reason for a family's income ineligibility, the TANF benefit is excluded for income eligibility purposes.
- ³ Forty percent of income from self-employment is deducted to cover the cost of operating the business.
- ⁴ The territory or outlying area does not have a TANF program.
- ⁵ The territory or outlying area does not have SSI or a similar program.
- ⁶ The value of nutrition assistance program benefits is not counted.
- ⁷ Income is counted except when the person designated to represent the household is a relative applying on behalf of a child for whom he or she has full-time custody. If the person is receiving extended support services, income is counted after the first year of receiving extended support services.
- ⁸ SSI of adults in the household is counted. SSI income of children is not counted.
- ⁹ SSDI income of adults in the household is counted. SSDI income of children is not counted.
- ¹⁰ If financial assistance is provided by the absent parent for housing or car expenses, that income is also counted.
- ¹¹ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.
- ¹² A standard deduction that is a percentage of the gross income applies to all families with costs to produce income. Self-employed households not claiming or verifying any costs to produce income do not get the deduction.
- ¹³ SSI of adults in the household is counted. SSI income of children is not counted.
- ¹⁴ Child care for SNAP participants is not provided under the state's primary child care subsidy program.
- ¹⁵ Income from Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled is fully counted.
- ¹⁶ A standard deduction is determined by subtracting 50 percent of the gross monthly self-employment income.
- ¹⁷ Child support payments are counted as income. Court-ordered child support payments made by a parent who receives child care benefits are deducted from income when determining eligibility.
- ¹⁸ Lump sum SSI payments are not counted.
- ¹⁹ Families who receive TANF or participate in the state's TANF work program are eligible for child care assistance regardless of income.
- ²⁰ TANF child-only payments are excluded.
- ²¹ SSI of adults in the household is counted. SSI income of children is not counted.
- ²² Personal, work-related expenses and depreciation are non-allowable deductions from self-employment income.
- ²³ For income eligibility determination purposes, a flat 30 percent is subtracted from the annual gross taxable self-employment income amount for business-related expenses.
- ²⁴ The first \$2,500 of child support lump sum payments or arrearages are disregarded.
- ²⁵ If the applicant is not receiving TANF cash benefits, any cash benefits the applicant receives for a child in his or her care are counted.
- ²⁶ SSI is not counted when determining eligibility and copayments for children receiving SSI. If the household is applying for child care for any other children not receiving SSI, SSI is counted for determining eligibility for the other household members. If the parent applying is receiving SSI, an income determination is not required for any of that parent's children.
- ²⁷ Child support that goes directly to pay a creditor or service supplier, or that is retained by the department, is excluded.
- ²⁸ TANF-funded housing assistance grants are also counted.
- ²⁹ The amount of child support assigned to the state is excluded from the family's income when determining eligibility.
- ³⁰ When disaster or emergency conditions have been declared, the agency may choose to waive the requirement for consideration of family income for eligibility. If income is required to be calculated during a declared emergency, disaster relief funds are not included in the calculation of income.
- ³¹ Eligibility for child care service for TANF parents is determined by the TANF case manager.
- ³² In order to calculate net income, the state deducts allowable business expenses. Allowable expenses vary based on the nature of the self-employment.
- ³³ Only TANF cash assistance benefits, not including work support payments, and Tribal TANF benefits are counted.
- ³⁴ Self-employment income is defined as earned income, received directly from one's own business, trade, or profession. Self-employment income must be reported to the IRS to be counted. Income and wages are calculated for applicants with self-employment income using a formula based on the gross income reported on the applicant's IRS Form 1040.

- ³⁵ Lump sum child support arrears are not counted as income.
- ³⁶ Self-employment income is counted, minus allowable costs of producing the income. The sale of capital items may be considered earned and unearned income. When the total business profit is calculated as a loss, the self-employment income is counted as zero. A loss from self-employment business cannot be used to offset or reduce income from other self-employment or sources such as earned income.
- ³⁷ Tribal food coupons are also excluded.
- ³⁸ Cash assistance from TANF is counted as income. TANF payments for support services are excluded.
- ³⁹ Recipients of TANF are predetermined eligible and assigned no copayment.
- ⁴⁰ Children who receive SSI are predetermined eligible and assigned no copayment. If other children in the household are applying for child care, the SSI income is counted in determining the copayment for the other household members.
- ⁴¹ The tax return for the previous year is used to determine self-employment income. If the tax return is no longer representative or the business is less than one year old, business records are used and a 50 percent deduction is given for expenses.
- ⁴² Pre-TANF and post-TANF program payments are excluded.
- ⁴³ The gross amount is used when there are no allowable costs. If there are allowable costs, a standard deduction is determined by subtracting 50 percent of the gross monthly self-employment income, or the actual costs are deducted from the gross amount when they exceed 50 percent.
- ⁴⁴ Income from Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled is not counted.
- ⁴⁵ Child support is counted for all children in the unit if it is received regularly, otherwise it is not counted.
- ⁴⁶ Earned or unearned income of a household member receiving SSI is counted with the exception of the SSI income.
- ⁴⁷ A household may choose one of two options for claiming self-employment expenses. They may elect to have 40 percent of gross income deducted for business expenses or they may elect to claim actual expenses.
- ⁴⁸ Child support income for a child in the household and child support arrears for the parent are counted. The first \$50 of child support received by the household is deducted.
- ⁴⁹ Lump sum child support income is not counted.
- ⁵⁰ When a TANF client starts a new job, TANF income may be exempted for three months.
- ⁵¹ A client may verify itemized deductions or take a standard \$100 monthly deduction.
- ⁵² SSI payments for adults in the household are included for eligibility and copay purposes, but SSI payments of minor dependents are excluded for eligibility and copay purposes.
- ⁵³ Net earnings are defined as the sum of net earnings reported to the IRS plus depreciation expenses, personal business and entertainment expenses, personal transportation costs, purchases of capital equipment, and payments on the principal of loans.
- ⁵⁴ Child support is disregarded if the household receives \$1,250 or less per month. If the household receives over \$1,250 per month in child support, the entire amount is counted as income.

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2020¹

State/Territory*	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
Alabama	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
Alaska	Varies/partially counted ⁴	Varies/partially counted ⁵	Not counted	Fully counted ⁶	NA ³	Counted if above \$500	Counted if above \$500
American Samoa	Fully counted	Fully counted	Fully counted	Not counted	NA ³	Fully counted ⁷	Fully counted ⁷
Arizona	Fully counted	Not counted	Not counted	Not counted	NA ³	Varies/partially counted ⁸	Not counted
Arkansas	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
California	Fully counted	Fully counted	Not counted	Fully counted	Not counted	Varies/partially counted ⁹	Not counted
Colorado	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted ¹⁰	Fully counted ¹⁰
Connecticut	Fully counted	Not counted	Not counted	Not counted ¹¹	Not counted	Counted if above \$600 yearly	Counted if above \$1,200 yearly
DC	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Delaware	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted ¹²	Not counted
Florida	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted ¹³
Georgia	Not counted	Not counted	Not counted	Not counted	NA ³	Varies/partially counted ¹⁴	Not counted
Guam	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted
Hawaii	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Idaho	Not counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
Illinois	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ¹⁵	Varies/partially counted ¹⁶
Indiana	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted ¹⁷	Not counted ¹⁸
Iowa	Fully counted	Not counted	Not counted	Fully counted ¹⁹	Not counted	Not counted	Not counted

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2020¹

State/Territory*	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
Kansas	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted ²⁰	Counted if above \$50 monthly
Kentucky	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
Louisiana	NA ²¹	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Maine	Fully counted	Not counted	Not counted	Not counted	Fully counted ²²	Not counted	Not counted
Maryland	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²³	Not counted
Massachusetts	NA ²¹	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²³	Not counted
Michigan	Not counted	Not counted	Not counted	Not counted	Not counted ²⁴	Fully counted ²⁵	Counted if above \$30 quarterly
Minnesota	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁶	Varies/partially counted ²⁷
Mississippi ²⁸	Not counted	Not counted	Not counted	Not counted	NA ³	Fully counted ²⁹	Not counted
Missouri	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Varies/partially counted ³⁰
Montana	Varies/partially counted ³¹	Not counted	Not counted	Not counted	Not counted	Fully counted	Counted if above \$50
Nebraska	Not counted	Not counted	Not counted	Varies/partially counted ³²	Not counted	Varies/partially counted ¹⁵	Not counted
Nevada	Fully counted	Not counted	Not counted	Not counted	NA ³	Counted if above \$5,000 ³³	Varies/partially counted ³⁴
New Hampshire	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
New Jersey	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ³⁵	Not counted
New Mexico	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
New York	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2020¹

State/Territory*	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
No. Mariana Islands	Fully counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
North Carolina	Not counted	Varies/partially counted ³⁶	Not counted	Not counted	NA ³	Not counted	Not counted
North Dakota	Not counted	Not counted	Not counted	Not counted	NA ³	Not counted ³⁷	Not counted
Ohio	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted ³⁸	Not counted
Oklahoma	Not counted ³⁹	Not counted	Not counted	Not counted	Not counted	Not counted	Counted if above \$30 quarterly ⁴⁰
Oregon	NA ⁴¹	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Pennsylvania	Fully counted	Not counted	Not counted	Not counted	NA ³	Counted if above \$100	Counted if above \$100 yearly
Puerto Rico	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Rhode Island	Fully counted	Not counted	Not counted	Fully counted ⁶	Not counted	Not counted	Not counted
South Carolina	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
South Dakota	Not counted	Not counted	Not counted	Not counted	NA ³	Varies/partially counted ⁴²	Not counted
Tennessee	NA ²¹	Not counted	Not counted	Fully counted	NA ³	Not counted	Not counted
Texas	Not counted	Not counted	Not counted	Not counted	NA ³	Varies/partially counted ⁴³	Not counted
Utah	Not counted	Varies/partially counted ⁴⁴	Not counted	Not counted	Not counted	Varies/partially counted ⁴⁵	Varies/partially counted ⁴⁶
Vermont	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Virgin Islands	Not counted	Not counted	Not counted	Not counted	NA ³	Not counted	Not counted
Virginia	Not counted	Varies/partially counted ⁴⁷	Varies/partially counted ⁴⁸	Fully counted	Not counted	Not counted	Not counted ⁴⁹
Washington	Fully counted	Not counted ⁵⁰	Not counted	Not counted	Not counted	Fully counted ⁵¹	Not counted

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2020¹

State/Territory*	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
West Virginia	Fully counted	Not counted	Not counted	Not counted	NA ³	Varies/partially counted ¹⁵	Not counted ⁵²
Wisconsin	NA ²¹	Not counted	Not counted	Not counted	Not counted	Fully counted ⁵³	Not counted
Wyoming	Fully counted	Not counted	Not counted	Not counted	NA ³	Fully counted	Counted if above \$50 quarterly

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ LIHEAP is the Low-Income Home Energy Assistance Program and EITC is the Earned Income Tax Credit. For information about state policies regarding the treatment of unemployment benefits during the COVID-19 pandemic, see the full CCDF Policies Database.

² General assistance programs are state or locally funded cash assistance programs for low-income families.

³ This state, territory, or outlying area does not have a state EITC.

⁴ When a Native Family Assistance Program (NFAP) benefit is paid directly to a family it is included in the family's monthly countable income as unearned income. If a NFAP benefit is paid to the family's provider it is not counted as income.

⁵ Federal non-cash benefits are excluded. Housing allowances or the fair market value of employer-provided housing are counted.

⁶ Foster care payments are included when the child is included in the assistance unit.

⁷ Money from friends or relatives as well as grants, scholarships, and loans are counted as long as they are not restricted or intended for educational purposes.

⁸ Money received through lottery or gambling is counted.

⁹ The following types of non-recurring lump sum income are not counted in income: loans; scholarships for educational purposes (except funding for living costs); tax refunds; GI Bill entitlements, hardship duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay; insurance or court settlements (excluding lost wages and punitive damages); reimbursements for work-related expenses; disaster relief grants or payments (except portions for rental assistance or unemployment); adoption assistance payments. The following types of non-recurring lump sum income are counted in income: bonuses; gambling or lottery winnings; survivor or retirement benefits; inheritance; portion of student grants or scholarships not identified for education purposes such as tuition, books, or supplies; insurance or court settlements for lost wages or punitive damages; capital gains defined as net proceeds from sale of property or stocks.

¹⁰ Income can either be counted in the month it is received or divided over a 12-month period.

¹¹ Foster children are a separate family unit of one. Their income does not count for the rest of the family.

¹² If earned or unearned income differs in the current month, the income from the previous month or the average of the last three months is used, whichever is less.

¹³ Cash gifts received regularly are counted as unearned income.

¹⁴ Cash bonuses and lump sum lottery payments are counted.

¹⁵ Lump sum inheritances or insurance payments are not counted. Other one-time lump sum payments may be counted.

¹⁶ Voluntary contributions from a spouse, other relatives, or non-relatives may be counted if the information is shown in and verified through the state databases used to verify applicants' income.

¹⁷ Lump sums received through life insurance, Social Security, inheritances, lawsuit settlements, annual employment bonuses, gambling, or lottery winnings are counted. The total lump sum is divided by 12 to calculate monthly earnings.

¹⁸ Gifts are defined as contributions or money received from a source outside of the family with no intent to repay.

¹⁹ Only relative, non-licensed foster families receive child care through the CCDF program. If a licensed foster parent applies for child care assistance for his or her own children, the parent's foster care income is counted.

²⁰ Lump sum payments are defined as non-recurring one-time payments and are excluded from income. Income sources such as royalties, trust fund income, or gambling winnings are considered recurring income and are counted.

²¹ The state does not have general assistance.

²² State and local EITC payments are not excluded from income.

²³ Lump sum inheritances or insurance payments are not counted. Other lump sum payments are counted.

²⁴ Advanced payments of the earned income tax credit are also excluded.

²⁵ Lump sum income, such as inheritances, insurance settlements, and injury awards, are fully counted for the month they are received. With a single payment of benefits, such as veterans benefits and workers compensations, that includes both accumulated benefits and benefits intended as payment for the current month, only the current month's portion is counted as income.

²⁶ The first \$60 of non-recurring income per quarter is not counted. Non-recurring lump sum income that is earmarked and used for the specific purpose it is intended is not counted. All other lump sum income is counted.

²⁷ The first \$60 of non-recurring income per quarter is not counted. The gift, if cash, is not counted if funds are earmarked and used for a specific purpose or if funds are paid by a source other than the family directly to the family's child care provider. All other cash gifts are counted.

²⁸ When disaster or emergency conditions have been declared, the agency may choose to waive the requirement for consideration of family income for eligibility. If income is required to be calculated during a declared emergency, disaster relief funds are not included in the calculation of income.

²⁹ Lump sum payments and cash bonuses are considered for income calculation.

³⁰ Gifts and casual income that exceed the state's TANF thresholds for basic needs are included as income.

³¹ Assistance payments from other states are counted; however, supportive services which are specified in a public assistance program are excluded.

³² If foster parents are applying for child care assistance for their own children and the children in foster care, they may choose to have all of the children placed in one case and assistance unit, and the income of the foster parents and any stipend they receive for the foster children are counted. If they are applying for subsidies only for the foster children or if they choose not to include the foster children in the same case as their own children, their income and any stipend they receive for the foster children are not counted.

³³ Lump sum payments of \$5,000 or less received from a single source in a month are disregarded. Any portion in excess of \$5,000 is counted as income.

³⁴ Cash gifts are not counted if they are given voluntarily without payment in return and are received too irregularly to be reasonably anticipated. A cash contribution that is given to the household from someone not living in the home is counted unless the contribution is payment to the family's child care provider. The cash contribution is not counted if it is made for common household expenses by an individual living in the home who is not in the family unit.

³⁵ The income is averaged over the same time period used to calculate income. For lump sum payments of past due child support, there is a 30 percent disregard for the first child and a 20 percent disregard for the second child.

³⁶ Rental assistance provided by an organization on a regular basis is counted; subsidized housing and housing allotments paid directly to the landlord, including military housing allotments, are not counted.

³⁷ Lump sum income is defined as non-recurring lump sum unearned payments including, but not limited to, retroactive lump sum social security, SSI or pension benefits; retroactive unemployment benefits; retroactive TANF; retroactive veteran's benefits; retroactive workforce safety and insurance; insurance settlements; and severance pay.

³⁸ Lump sum income is defined as money received in the form of a nonrecurring lump sum payment including, but not limited to, retroactive lump sum social security, SSI or pension benefits; retroactive lump sum insurance settlements; retroactive lump sum payment of child support; refunds of security deposits; or prevention, retention, and contingency payments not defined as cash assistance.

- ³⁹ Recipients of public assistance payments are predetermined eligible and assigned no copayment.
- ⁴⁰ Income received irregularly but in excess of \$30 per quarter is considered income unless it is from an excluded income source.
- ⁴¹ The state does not currently fund general assistance. When general assistance is funded, the payments are counted as unearned income.
- ⁴² Non-recurring lump sum payments are considered unearned income sources. This income is divided over the number of months since the date of receipt, up to 12 months, to determine the total countable income of the sum. Lump sums that were received more than 12 months prior to the time of application are not considered toward eligibility.
- ⁴³ One-time cash payments, insurance payments, gifts, and lump sum inheritances are excluded. Other lump sum earnings such as a bonus are considered if there is any expectation of future repetition.
- ⁴⁴ If a veteran is a student and receives a monthly housing allowance, this is counted as income.
- ⁴⁵ The lump sum payment of a type of income normally not counted is not counted. Insurance settlements for destroyed exempt property are not counted. Funds released from crowd funding accounts are counted in the month they are received. Payments from the Coronavirus Aid, Relief, and Economic Security (CARES) Act are exempt for 12 months.
- ⁴⁶ Cash contributions from non-household members are counted. Irregular income such as donations, cash prizes, gifts, and awards are counted only if they can be reasonably anticipated in a month. Irregular income less than or equal to \$30 per household member per quarter year is not counted.
- ⁴⁷ Housing assistance is not counted if paid directly to the landlord. Housing assistance for military personnel is not counted if the individual is living on base and the entire assistance amount is deducted on the leave and earning statement.
- ⁴⁸ Energy assistance is not counted if the assistance is paid directly to the vendor.
- ⁴⁹ Monetary gifts for identifiable one-time occasions or normal annual occasions are disregarded.
- ⁵⁰ Corporate compensation such as rent and living expenses are considered countable income.
- ⁵¹ Lump sum income is divided by 12 to get a monthly income figure and applied for the remainder of the current eligibility period.
- ⁵² Monetary gifts received on an infrequent basis, such as those received on birthdays or holidays, are not counted.
- ⁵³ Tax refunds are excluded for determining eligibility and copayment rates. All other non-recurring income is counted in the month it is received.

Table 13. Income Disregards When Determining Eligibility, 2020

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

Table 13. Income Disregards When Determining Eligibility, 2020

State/Territory*	Amount of Monthly Earned Income Disregard	Amount of Child Support Paid Outside of Household that is Deducted
North Dakota	\$0 ⁸	All ⁹
Ohio	\$0	All
Oklahoma	\$0	All ¹⁰
Oregon	\$0	None
Pennsylvania	\$0	All
Puerto Rico	\$0 ¹¹	None
Rhode Island	\$0	None
South Carolina	\$0	None
South Dakota	4% ¹²	All
Tennessee	\$0	All
Texas	\$0	None
Utah	\$100 ¹³	All
Vermont	\$0	All
Virgin Islands	\$0 ¹⁴	None
Virginia	\$0 ¹⁵	All
Washington	\$0	All
West Virginia	\$0	None
Wisconsin	\$0	None
Wyoming	\$200 ¹⁶	All ¹⁷

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

³ The applicant must have a court order and pay stubs showing the child support is being deducted from pay or copies of check or money orders showing child support is being paid out.

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

⁵ A disregard of \$5,000 of a family's annual gross income per child is allowed if the minor parent is attending public school full time or if an adult with physical custody of the child is not the child's parent.

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

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

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

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

¹⁰ The child support deducted must be court ordered.

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

¹² Gross income is adjusted with a four percent income disregard. Families with children with advanced special needs can receive a 20 percent income disregard, along with consideration of income at a maximum of 85 percent of the state median income.

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

¹⁴ There is an income disregard for families with children with special needs enrolled in Head Start or private centers equal to the amount of medical and rehabilitative services incurred.

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

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

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

Table 14. Maximum Monthly Countable Income to Initially Qualify for CCDF Subsidies, 2020 ¹

State/Territory*	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Alabama	NA	1,868	2,353	2,838	3,324
Alaska	NA	4,825	5,960	7,095	8,230
American Samoa	2,431	3,179	3,927	4,675	5,423
Arizona	1,756	2,372	2,987	3,604	4,220
Arkansas	2,557	3,343	4,130	4,917	5,704
California	5,540	5,540	6,157	7,069	8,199
Colorado ²	NA	3,233	4,073	4,913	5,753
Connecticut	2,614	3,418	4,222	5,027	5,831
DC	2,602	3,523	4,444	5,365	6,285
Delaware	1,968	2,658	3,349	4,040	4,730
Florida	1,595	2,155	2,715	3,275	3,835
Georgia	1,737	2,272	2,807	3,342	3,876
Guam	1,741	2,277	2,812	3,348	3,884
Hawaii	2,431	3,179	3,927	4,675	5,423
Idaho	1,383	1,868	2,353	2,839	3,324
Illinois	NA	2,874	3,620	4,367	5,114
Indiana	1,350	1,825	2,299	2,773	3,247
Iowa ³	1,542	2,084	2,625	3,166	3,708
Kansas	NA	2,658	3,349	4,039	4,730
Kentucky	NA	2,195	2,771	3,347	3,923
Louisiana	NA	2,411	2,978	3,545	4,113
Maine	3,321	4,343	5,365	6,387	7,409
Maryland	NA	4,053	5,007	5,960	6,914
Massachusetts ⁴	NA	3,551	4,387	5,222	6,058
Michigan	1,595	2,156	2,715	3,275	3,836
Minnesota	NA	2,771	3,423	4,074	4,726
Mississippi	NA	3,167	3,833	4,583	5,333
Missouri	1,467	1,983	2,498	3,013	3,529
Montana	NA	2,114	2,666	3,219	3,771
Nebraska	NA	1,868	2,353	2,838	3,324
Nevada	1,524	2,028	2,531	3,034	3,537
New Hampshire	2,340	3,161	3,982	4,804	5,625
New Jersey	2,127	2,873	3,620	4,367	5,113
New Mexico	NA	2,873	3,620	4,367	5,113
New York	2,127	2,873	3,620	4,367	5,113
No. Mariana Islands	1,998	1,998	2,325	3,420	4,057
North Carolina ⁵	2,082	2,818	3,555	4,292	5,028

Table 14. Maximum Monthly Countable Income to Initially Qualify for CCDF Subsidies, 2020 ¹

State/Territory*	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
North Dakota	2,620	3,427	4,233	5,039	5,845
Ohio	NA	1,868	2,353	2,839	3,324
Oklahoma	2,707	3,539	4,372	5,205	6,038
Oregon	NA	4,012	4,956	5,899	6,843
Pennsylvania	2,127	2,873	3,620	4,367	5,113
Puerto Rico	885	1,198	1,511	1,824	2,137
Rhode Island	NA	2,586	3,258	3,930	4,602
South Carolina	1,835	2,400	2,965	3,529	4,094
South Dakota	NA	3,003	3,783	4,562	5,344
Tennessee ⁶	NA	2,492	3,078	3,664	4,250
Texas ⁷	NA	2,873	3,620	4,367	5,113
Utah ⁸	NA	3,712	4,585	5,458	6,332
Vermont	5,430	5,430	5,430	6,550	7,670
Virgin Islands	NA	2,406	2,506	2,606	2,707
Virginia ⁹	1,967	2,659	3,349	4,039	4,731
Washington	2,126	2,874	3,620	4,366	5,114
West Virginia	1,561	2,114	2,666	3,219	3,771
Wisconsin ¹⁰	NA	2,658	3,349	4,039	4,730
Wyoming	1,861	2,514	3,168	3,821	4,474

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Family size refers to the number of household members included in the unit for determining eligibility. States determine which household members are included in the unit. The thresholds shown here apply to families who do not have additional special circumstances (they do not receive TANF or transitional child care and do not have children with special needs); this table does not capture eligibility threshold differences between various eligibility groups, but this additional detail can be found in the full CCDF Policies Database. Amounts are rounded to the nearest whole dollar. For information about eligibility for essential workers during the COVID-19 pandemic, see the full CCDF Policies Database.

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

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

⁴ Families requiring care for children with special needs use a different set of eligibility thresholds.

⁵ The thresholds shown in this table are for school age children (children over age 5) without special needs. The initial eligibility thresholds for non-school-age children (children through age five) and children of all ages with special needs are set at 200 percent of the Federal Poverty Guidelines.

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

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

⁸ The entry, exit, and interim thresholds are set at 85 percent of the state median income for all families to support more families during the COVID-19 pandemic.

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

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

Table 15. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies During the Eligibility Period, 2020¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used at Redetermination	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Alabama	Yes	No	NA	2,422	3,077	3,712	4,346
Alaska	No	No	NA	4,825	5,960	7,095	8,230
American Samoa	No	No	2,431	3,179	3,927	4,675	5,423
Arizona	Yes	No	2,921	3,820	4,718	5,616	6,516
Arkansas	No	No	2,557	3,343	4,130	4,917	5,704
California	No	No	5,540	5,540	6,157	7,069	8,199
Colorado ²	Yes	No	NA	4,853	5,995	7,137	8,279
Connecticut	Yes	Yes	4,444	5,811	7,179	8,546	9,913
DC ³	Yes	No	3,874	5,066	6,258	7,450	8,642
Delaware	Yes	Yes	3,154	4,125	5,095	6,066	7,037
Florida	Yes	No	2,714	3,549	4,384	5,218	6,053
Georgia	Yes	No	2,954	3,863	4,772	5,681	6,590
Guam	No	No	1,741	2,277	2,812	3,348	3,884
Hawaii	No	No	2,431	3,179	3,927	4,675	5,423
Idaho	Yes	Yes	2,753	3,599	4,446	5,293	6,140
Illinois	Yes	Yes	NA	4,489	5,546	6,602	7,658
Indiana	Yes	No	2,932	3,834	4,737	5,639	6,541
Iowa ⁴	Yes	No	2,393	3,233	4,073	4,913	5,753
Kansas	Yes	No	NA	4,031	4,979	5,927	6,876
Kentucky	Yes	Yes	NA	4,294	4,808	6,072	6,772
Louisiana	Yes	No	NA	3,726	4,603	5,479	6,356
Maine	No	No	3,321	4,343	5,365	6,387	7,409
Maryland	Yes	No	NA	5,300	6,547	7,794	9,041
Massachusetts ⁵	Yes	No	NA	6,037	7,457	8,878	10,298
Michigan	Yes	No	3,303	4,320	5,336	6,353	7,369

Table 15. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies During the Eligibility Period, 2020¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used at Redetermination	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Minnesota	Yes	Yes	NA	5,011	6,190	7,369	8,548
Mississippi	No	No	NA	3,167	3,833	4,583	5,333
Missouri	Yes	No	2,285	3,090	3,892	4,693	5,498
Montana	Yes	No	NA	2,607	3,288	3,970	4,651
Nebraska ⁶	Yes	Yes	NA	4,348	5,371	6,394	7,417
Nevada	Yes	No	2,900	3,793	4,685	5,577	6,470
New Hampshire	Yes	Yes	4,035	5,277	6,518	7,760	9,002
New Jersey	Yes	No	4,850	5,826	7,420	9,137	9,775
New Mexico	Yes	No	NA	3,592	4,525	5,458	6,392
New York	No	No	2,127	2,873	3,620	4,367	5,113
No. Mariana Islands	No	No	1,998	1,998	2,325	3,420	4,057
North Carolina ⁷	Yes	No	2,826	3,695	4,565	5,435	6,304
North Dakota	Yes	No	3,712	4,854	5,997	7,138	8,281
Ohio	Yes	No	NA	4,310	5,430	6,550	7,670
Oklahoma	No	No	2,707	3,539	4,372	5,205	6,038
Oregon	No	No	NA	4,012	4,956	5,899	6,843
Pennsylvania	Yes	No	2,499	3,376	4,254	5,131	6,008
Puerto Rico	No	No	885	1,198	1,511	1,824	2,137
Rhode Island	Yes	No	NA	3,233	4,073	4,913	5,753
South Carolina	Yes	No	2,836	3,709	4,582	5,454	6,327
South Dakota	Yes	No	NA	4,165	5,144	6,124	7,104
Tennessee	No	No	NA	2,492	3,078	3,664	4,250
Texas ⁸	Yes	No	NA	3,954	4,884	5,814	6,744
Utah	No	No	NA	3,712	4,585	5,458	6,332
Vermont ⁹	No	No	5,430	5,430	5,430	6,550	7,670
Virgin Islands	No	No	NA	2,406	2,506	2,606	2,707

Table 15. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies During the Eligibility Period, 2020¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used at Redetermination	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Virginia ¹⁰	Yes	No	3,853	5,040	6,226	7,412	8,598
Washington	Yes	Yes	3,566	4,663	5,760	6,857	7,954
West Virginia	Yes	No	1,926	2,607	3,288	3,970	4,651
Wisconsin	Yes	No	NA	4,427	5,468	6,510	7,551
Wyoming	Yes	No	2,393	3,233	4,073	4,913	5,753

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Family size refers to the number of household members included in the unit for determining eligibility. States determine which household members are included in the unit. The thresholds shown here apply to families who do not have additional special circumstances (they do not receive TANF or transitional child care and do not have children with special needs); this table does not capture eligibility threshold differences between various eligibility groups, but this additional detail can be found in the full CCDF Policies Database. Amounts are rounded to the nearest whole dollar. For information about eligibility for essential workers during the COVID-19 pandemic, see the full CCDF Policies Database.

² The initial income eligibility threshold is set by the state department for each county and cannot be set below 185 percent of the Federal Poverty Guidelines. The continuing income eligibility threshold is set by the state at 85 percent of the state median income.

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

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

⁵ Families requiring care for children with special needs use a different set of eligibility thresholds.

⁶ Once a family is determined eligible and child care is authorized, they will remain eligible for care through the remainder of the eligibility period as long as their income is below 85 percent of the state median income.

⁷ The thresholds shown in this table are for school age children (children over age 5) without special needs. The initial eligibility thresholds for non-school-age children (children through age five) and children of all ages with special needs are set at 200 percent of the Federal Poverty Guidelines.

⁸ Policy coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

⁹ The threshold for family size three is greater at redetermination than at initial eligibility or during the eligibility period.

¹⁰ Policy coded for Group III. Group III includes the following localities: Alexandria, Arlington, Clarke, Culpepper, Fairfax, Fauquier, Fredericksburg, King George, Loudon, Manassas, Prince William, Spotsylvania, Stafford, and Warren.

Table 16. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies at Redetermination, 2020¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used During Eligibility Period	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Alabama	Yes	No	NA	2,422	3,077	3,712	4,346
Alaska	No	No	NA	4,825	5,960	7,095	8,230
American Samoa	No	No	2,431	3,179	3,927	4,675	5,423
Arizona	Yes	No	2,921	3,820	4,718	5,616	6,516
Arkansas	No	No	2,557	3,343	4,130	4,917	5,704
California	No	No	5,540	5,540	6,157	7,069	8,199
Colorado ²	Yes	No	NA	4,853	5,995	7,137	8,279
Connecticut	Yes	Yes	3,398	4,444	5,489	6,535	7,581
DC ³	Yes	No	3,874	5,066	6,258	7,450	8,642
Delaware	Yes	Yes	2,127	2,873	3,619	4,367	5,113
Florida	Yes	No	2,714	3,549	4,384	5,218	6,053
Georgia	Yes	No	2,954	3,863	4,772	5,681	6,590
Guam	No	No	1,741	2,277	2,812	3,348	3,884
Hawaii	No	No	2,431	3,179	3,927	4,675	5,423
Idaho	Yes	Yes	1,595	2,155	2,715	3,275	3,835
Illinois ⁴	Yes	Yes	NA	3,233	4,073	4,913	5,793
Indiana	Yes	No	2,932	3,834	4,737	5,639	6,541
Iowa ⁵	Yes	No	2,393	3,233	4,073	4,913	5,753
Kansas	Yes	No	NA	4,031	4,979	5,927	6,876
Kentucky	Yes	Yes	NA	2,743	3,463	4,183	4,903
Louisiana ⁶	Yes	No	NA	3,726	4,603	5,479	6,356
Maine	No	No	3,321	4,343	5,365	6,387	7,409
Maryland	Yes	No	NA	5,300	6,547	7,794	9,041
Massachusetts	Yes	No	NA	6,037	7,457	8,878	10,298
Michigan	Yes	No	3,303	4,320	5,336	6,353	7,369

Table 16. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies at Redetermination, 2020¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used During Eligibility Period	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Minnesota	Yes	Yes	NA	3,950	4,879	5,808	6,738
Mississippi	No	No	NA	3,167	3,833	4,583	5,333
Missouri	Yes	No	2,285	3,090	3,892	4,693	5,498
Montana	Yes	No	NA	2,607	3,288	3,970	4,651
Nebraska ⁷	Yes	Yes	NA	2,658	3,349	4,039	4,730
Nevada	Yes	No	2,900	3,793	4,685	5,577	6,470
New Hampshire	Yes	Yes	2,659	3,592	4,525	5,459	6,392
New Jersey ⁸	Yes	No	4,850	5,826	7,420	9,137	9,775
New Mexico	Yes	No	NA	3,592	4,525	5,458	6,392
New York	No	No	2,127	2,873	3,620	4,367	5,113
No. Mariana Islands	No	No	1,998	1,998	2,325	3,420	4,057
North Carolina ⁹	Yes	No	2,826	3,695	4,565	5,435	6,304
North Dakota	Yes	No	3,712	4,854	5,997	7,138	8,281
Ohio	Yes	No	NA	4,310	5,430	6,550	7,670
Oklahoma	No	No	2,707	3,539	4,372	5,205	6,038
Oregon	No	No	NA	4,012	4,956	5,899	6,843
Pennsylvania	Yes	No	2,499	3,376	4,254	5,131	6,008
Puerto Rico ¹⁰	No	No	885	1,198	1,511	1,824	2,137
Rhode Island	Yes	No	NA	3,233	4,073	4,913	5,753
South Carolina	Yes	No	2,836	3,709	4,582	5,454	6,327
South Dakota	Yes	No	NA	4,165	5,144	6,124	7,104
Tennessee	No	No	NA	2,492	3,078	3,664	4,250
Texas ¹¹	Yes	No	NA	3,954	4,884	5,814	6,744
Utah ¹²	No	No	NA	3,712	4,585	5,458	6,332
Vermont ¹³	No	No	5,430	5,430	5,430	6,550	7,670
Virgin Islands	No	No	NA	2,406	2,506	2,606	2,707

Table 16. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies at Redetermination, 2020¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used During Eligibility Period	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Virginia ¹⁴	Yes	No	3,853	5,040	6,226	7,412	8,598
Washington ¹⁵	Yes	Yes	2,339	3,161	3,982	4,803	5,625
West Virginia	Yes	No	1,926	2,607	3,288	3,970	4,651
Wisconsin	Yes	No	NA	4,427	5,468	6,510	7,551
Wyoming	Yes	No	2,393	3,233	4,073	4,913	5,753

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Family size refers to the number of household members included in the unit for determining eligibility. States determine which household members are included in the unit. The thresholds shown here apply to families who do not have additional special circumstances (they do not receive TANF or transitional child care and do not have children with special needs); this table does not capture eligibility threshold differences between various eligibility groups, but this additional detail can be found in the full CCDF Policies Database. Amounts are rounded to the nearest whole dollar. For information about eligibility for essential workers during the COVID-19 pandemic, see the full CCDF Policies Database.

² The initial income eligibility threshold is set by the state department for each county and cannot be set below 185 percent of the Federal Poverty Guidelines. The continuing income eligibility threshold is set by the state at 85 percent of the state median income.

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

⁴ Eligibility thresholds at redetermination are set at 225 percent of the Federal Poverty Guidelines. Families with incomes above 225 percent of the Federal Poverty Guidelines and below 85 percent of the state median income will receive a graduated phase-out period of three months.

⁵ Families requiring care for children with special needs use a different set of eligibility thresholds. If a family has children that meet the criteria for special needs and children that do not meet the criteria for special needs, the caseworker uses both sets of thresholds to determine eligibility.

⁶ At redetermination, if the family's income exceeds 55 percent of the state median income, but is below 85 percent of the state median income, the family will receive a graduated phase-out period of 12 months.

⁷ Once a family is determined eligible and child care is authorized, they will remain eligible for care through the remainder of the eligibility period as long as their income is below 85 percent of the state median income. At redetermination, if the family's income does not exceed 185 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

⁸ Families with income exceeding 250 percent of the Federal Poverty Guidelines but less than 85 percent of state median income at redetermination can qualify for one additional year of graduated phase-out assistance. This period of assistance can only be granted once.

⁹ The thresholds shown in this table are for school age children (children over age 5) without special needs. The initial eligibility thresholds for non-school-age children (children through age five) and children of all ages with special needs are set at 200 percent of the Federal Poverty Guidelines. If the family's income is above 200 percent of the Federal Poverty Guidelines but below 85 percent of the state median income, the family will be given a graduated phase-out period of 12 months at redetermination.

¹⁰ At redetermination, families may be eligible for three additional months if their income exceeds 85 percent of the state median income.

¹¹ Policy coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

¹² The entry, exit, and interim thresholds are set at 85 percent of the state median income for all families to support more families during the COVID-19 pandemic.

¹³ The threshold for family size three is greater at redetermination than at initial eligibility or during the eligibility period.

¹⁴ Policy coded for Group III. Group III includes the following localities: Alexandria, Arlington, Clarke, Culpepper, Fairfax, Fauquier, Fredericksburg, King George, Loudon, Manassas, Prince William, Spotsylvania, Stafford, and Warren. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines.

¹⁵ At redetermination, if the family's income exceeds 200 percent of the Federal Poverty Guidelines, but is below 220 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

Table 17. Assets Test, 2020¹

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

Table 17. Assets Test, 2020¹

State/Territory*	Maximum Countable Assets	Exempted Value of a Vehicle
Ohio	\$1,000,000 ⁸	No exemption
Oklahoma	\$1,000,000	Entire value of all vehicles
Oregon	\$1,000,000	Entire value of all vehicles
Pennsylvania	\$1,000,000	Entire value of all vehicles
Puerto Rico	\$1,000,000	No exemption
Rhode Island	\$1,000,000	Entire value of all vehicles ⁹
South Carolina	\$1,000,000	Entire value of all vehicles
South Dakota	\$1,000,000	Entire value of all vehicles
Tennessee	\$1,000,000	No exemption ¹⁰
Texas	\$1,000,000	No exemption
Utah	\$1,000,000 ¹¹	No exemption
Vermont	\$1,000,000 ¹¹	No exemption
Virgin Islands	No limit	NA
Virginia	\$1,000,000	No exemption
Washington	\$1,000,000	No exemption
West Virginia	\$1,000,000	No exemption
Wisconsin	\$25,000 ¹²	Entire value of all vehicles ¹²
Wyoming	\$1,000,000	Entire value of all vehicles

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ States coded "No limit" do not have a limit on the amount of assets a family can hold. There is no assets test in these states.

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

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

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

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

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

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

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

⁹ Only liquid assets are counted for the assets test.

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

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

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

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

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

Application, Waiting Lists, Redetermination, and Terms of Authorization

Families who wish to obtain CCDF-funded child care subsidies go through an application process as established by each States'/Territories' program. The application process may include providing documents that verify certain items of information. When funds are limited, some States/Territories place eligible families on a waiting list.

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

For families receiving subsidies, eligibility must generally be redetermined at specified intervals. Within those intervals, many States/Territories require families to report significant changes that might affect their eligibility.

Application and Waiting List Procedures (Table 18)

Table 18 captures three aspects of each program’s application and waiting list process: the methods by which a family may apply for a child care subsidy, the timeframe within which an applicant is notified of his or her eligibility status and subsidy level, and whether a State/Territory has written waiting list policies for use when full funding is not available. Findings from 2020 include:

- Almost all States/Territories give potential clients the option of applying for child care subsidies in person, and three States/Territories (D.C., Guam, and the Northern Mariana Islands) require that

all applications be processed in person. Applications can be submitted via e-mail or through an internet-based system in 49 States/Territories.

- States/Territories vary widely in how quickly they require applications to be processed, ranging from the date of application up to 60 days. Many States/Territories commit to notifying applicants within 30 days.
- Roughly two-thirds of the States/Territories have established waiting list policies for when funds are limited.

State/Territory office closures due to the COVID-19 pandemic resulted in some States/Territories modifying their policies for how families could submit applications. Some States/Territories suspended in-person applications or began using a physical drop-box for applications. Policies that were in effect on October 1, 2020 are captured in the table and footnotes. Footnotes to the tables show if the policies were adopted in response to the pandemic. For information on policies prior to October 1, including policies prior to and in response to the pandemic, see the full CCDF Policies Database.

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

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

Waiting list policies are also closely connected to priority policies (tables 25 and 26) in that groups who are guaranteed subsidies receive child care benefits regardless of funding constraints and are not subject to the waiting list. Additionally, some States/Territories place families with higher priority higher up on the waiting list so that they may receive subsidies sooner than families who are not in a priority group.

Information That Must Be Verified with Documentation When Applying for CCDF Subsidies (Table 19)

States/Territories take different approaches to determining the validity of the information provided by applicants. While some States/Territories require specific forms of documentation to verify certain eligibility criteria, others require only the applicant's signature attesting to the accuracy of the information. For example, many States/Territories do not require separate documentation of family composition;

however, the applicant must sign a document stating, under penalty of law, that the list of household members he or she provided is complete. For purposes of the CCDF Policies Database, “verification” is defined as a requirement for an item of documentation beyond a form signed by the applicant.

Table 19 indicates whether any additional documentation is required for each of six items of information: the identity of the applicant, the applicant’s household composition, the applicant’s relationship to the child needing care, the employment status of the applicant, the applicant’s household income, and the immunization records of the child needing care. Findings for 2020 include:

- Almost every State/Territory requires applicants to provide proof of income and verification of employment. Some States/Territories do not require verification of income or employment for applicants receiving benefits from another program, such as TANF.
- A majority of States/Territories require verification of the applicant’s identity as well as his or her relationship to the child in need of care.
- Half of the States/Territories require verification of household composition.
- A majority of States/Territories do not require verification of child immunization records at application because this information is often collected by child care providers.

In response to the COVID-19 pandemic, some States/Territories waived certain verification requirements. In some cases, the waivers only applied to requirements for essential workers. Policies that were in effect on October 1, 2020 are captured in the table and footnotes. Footnotes to the tables show if the policies were adopted in response to the pandemic. For information on policies prior to October 1, including policies prior to and in response to the pandemic, see the full CCDF Policies Database.

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

Child Support Enforcement Requirements for Families (Table 20)

States/Territories may mandate that applicants comply with child support requirements when one parent is absent from the home. Table 20 displays if applicants must comply with child support enforcement requirements and whether States/Territories allow exemptions in some cases. States/Territories sometimes allow exemptions in cases where there is reasonable fear of harm to the child, reasonable fear of harm to the caregiver, the child was conceived as a result of rape or incest, the applicant is involved in

pending legal proceedings, the parent is being counseled about adoption, the child was conceived through the use of a donor, or other reasons the State/Territory deems necessary. Findings from 2020 include:

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

Redetermination Requirements (Table 21)

Recipients of child care subsidies receive assistance for a set period of time, often called a redetermination period, an eligibility period, or a benefit period. After that period, the family's eligibility and subsidy level must generally be redetermined. Redetermination policies vary by State/Territory and sometimes vary according to a family's particular circumstances or eligibility group.

Table 21 displays four key redetermination requirement policies: the length of the redetermination (eligibility) period, if new documentation is required at redetermination (even if nothing has changed), the minimum length of time between the point that a family is notified of an adverse change in the subsidy and the point that the change is implemented, and the minimum number of days of notification that must be provided to the family before subsidies are terminated. Findings from 2020 include:

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

Several States/Territories extended redetermination periods during the COVID-19 pandemic. Policies that were in effect on October 1, 2020 are captured in the table footnotes. Footnotes to the tables show if the policies were adopted in response to the pandemic. For information on policies prior to October 1, including policies prior to and in response to the pandemic, see the full CCDF Policies Database.

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

Policies regarding notification often differ depending on the type of change—whether it is an increase in benefits or a decrease or termination of benefits. For instance, a State/Territory may require that families be notified at least 10 days prior to an increase in the copayment, but not have any explicit requirement for notification prior to a decrease in the copayment.⁵³ Additional detail on the variation in notification requirements can be found in the table footnotes.

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

Additionally, some eligibility groups may be categorically exempt from the redetermination process. For example, in some States/Territories, families receiving TANF benefits may remain eligible for CCDF as long as they are participating in the TANF program. Additional detail on groups that are exempt from redetermination requirements can be found in Appendix C and the full detail of the CCDF Policies Database.

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

In addition to requiring eligibility and subsidy amounts to be redetermined at regular intervals, most State/Territory CCDF programs require participants to report certain changes, such as changes in hours of work or hourly wage, as they occur.⁵⁴ Participants failing to report changes as required may suffer sanctions or interruptions in child care subsidy benefits. Table 22 shows the number of days within which a subsidized family is expected to report key changes to the program agency. The table also shows the

⁵³ The CCDF Final Rule published in September 2016 prohibits States/Territories from raising the copayment during the 12-month eligibility period. State/Territory policy changes resulting from this requirement will be reflected in future years' tables.

⁵⁴ The 2016 final federal rule does not define specific reporting requirements, but States/Territories may establish their own reporting requirements.

requirements for reporting specific types of changes, including changes in employment, income, and household composition.

Findings for 2020 include:

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

Some State/Territories modified what changes need to be reported in response to the COVID-19 pandemic. Policies that were in effect on October 1, 2020 are captured in the table and footnotes. Footnotes to the tables show if the policies were adopted in response to the pandemic. For information on policies prior to October 1, including policies prior to and in response to the pandemic, see the full CCDF Policies Database.

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

While the CCDBG legislation does not require interim reporting, it does outline requirements for States/Territories to describe in their CCDF Plans their policies for simplifying the redetermination process and explain how they will ensure parents' employment and other activities are not disrupted as a result of the process.⁵⁵

Maximum Hours Approved for Child Care Subsidies (Table 23)

Families that are determined eligible to receive child care benefits are authorized to use child care for approved activities for a certain number of hours. Some States/Territories have general maximum hours of

⁵⁵ The CCDF Final Rule published in September 2016 does address reducing reporting requirements. State/Territory policy changes that result from the Final Rule will be reflected in future years' tables.

care policies that limit the number of hours of care that can be subsidized in a given period of time. Additionally, States/Territories may establish policies that allow care for travel, rest, or other related activities within certain limitations. For example, some States/Territories take into consideration the travel time between the parent's workplace and the child care facility, and in some States/Territories, parents who work an overnight shift (a shift crossing over midnight) may be eligible to receive subsidies during the day to allow for rest or sleep time. Table 23 captures the policies for maximum hours of care, variations for parents working part time, policies for travel time, and policies for rest hours. Findings from 2020 include:

- Twenty-three States/Territories have policies for the maximum hours of care that can be paid through the subsidy program.
- Of the States/Territories that utilize a maximum hours of care policy, only two States (Arizona and Massachusetts) have a different policy for part-time workers.
- Fifty-one States/Territories allow care to be authorized for travel time. Of these, about half have policies for an explicit maximum number of hours, while the allowed hours for the other half can vary at the caseworker's discretion.
- Forty-five States/Territories allow care for rest hours in at least some circumstances. Twenty-three specify a maximum number of hours, twenty allow the caseworker to determine the number of rest hours to authorize, and the remaining two have policies that vary depending on need and the amount of care authorized for non-rest hours.

Care During Breaks in Activities (Table 24)

In addition to establishing the amount of care authorized for approved activities, States/Territories may continue subsidies during breaks in employment, such as school breaks or maternity leave.⁵⁶ These policies may vary depending on whether the parent is expected to return to the approved activity (e.g., work or school) or whether the family will lose its child care slot if care is temporarily suspended (e.g., if the

⁵⁶ The CCDF Final Rule, published September 30, 2016, provides additional requirements for care during breaks in activities. Under the CCDF Final Rule, "temporary" changes are defined "to include, at a minimum: (1) Any time-limited absence from work for employed parents due to reasons such as need to care for a family member or an illness; (2) any interruption in work for a seasonal worker who is not working between regular industry work seasons; (3) any student holiday or break for a parent participating in training or education; (4) any reduction in work, training or education hours, as long as the parent is still working or attending training or education; and (5) any cessation of work or attendance at a training or education program that does not exceed three months or a longer period of time established by the Lead Agency." As State/Territory policies are changed to reflect this definition, changes will be captured in the full CCDF Policies Database and future years' tables. The Final Rule is available from the Federal Register at <https://www.federalregister.gov/documents/2016/09/30/2016-22986/child-care-and-development-fund-ccdf-program>.

provider would intend to fill the slot of a child who was not attending). Table 24 captures the policies for authorizing care during school breaks for parents who are students and during maternity leave.

Key findings from 2020 include:

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

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

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

Breaks in employment due to job loss are not included in this section, as job search activities fall under the list of activities that confer eligibility. State/Territory policies for job search activities are outlined in table 2.

Changes in Application, Verification, and Authorization Policies from 2019 to 2020

Seven States made changes to their application requirements from October 2019 to October 2020. Indiana added an option for submitting applications online, New York added options for submitting applications by fax or email, and Oregon and West Virginia added a phone option. Connecticut removed options for applying in-person or by fax, and the Virgin Islands removed mail, fax, and phone options. California and Rhode Island removed options for applying in-person during the COVID-19 pandemic.

Two States, Missouri and Wisconsin, made changes to their verification requirements in response to the pandemic. Missouri removed requirements for providing documentation of household composition,

the applicant's relationship to the child, employment, and income in some cases. Wisconsin removed requirements for providing documentation of employment and income.

Three States also made changes to their child support enforcement policies between 2019 and 2020. Oklahoma and Rhode Island removed child support enforcement cooperation requirements as a condition of eligibility. Wisconsin also removed the child support enforcement requirements in response to the COVID-19 pandemic, temporarily considering all families to be exempt for good cause. For more information on the additional States/Territories that changed their application and verification requirements in response to the pandemic prior to October 1, see the full CCDF Policies Database.⁵⁷

Several States/Territories temporarily extended redetermination periods during the COVID-19 pandemic. As of October 1, 2020 Alabama, Guam, Massachusetts, and Texas allowed for extended eligibility periods in response to the pandemic. For more information on the additional States/Territories that extended redetermination periods prior to October 1, but had reverted to standard policies by October 1, see the full CCDF Policies Database.

Wisconsin changed its reporting requirements between October 2019 and October 2020. In 2019, families were required to report changes in income above a specified amount. In 2020, families were only required to report changes if the changes resulted in income above the eligibility limits.

Between October 2019 and October 2020, four States changed their policies for authorizing care for certain activities. New York and Montana began allowing subsidies for rest hours for parents who work overnight shifts. Massachusetts extended the length of time families could receive subsidies for school breaks and maternity leave. Wisconsin continued to allow three months of subsidies during maternity leave but removed the requirement that the parent show the job would be available upon return.

Priority Groups

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

⁵⁷ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Priority Policies for Different Groups (Tables 25 and 26)

Tables 25 and 26 describe if and how States/Territories give priority to certain groups of applicants. The categories of applicants covered in table 25 are families with children with special needs, families with very low income, families who receive TANF, families who are transitioning off TANF benefits, families who are at risk of becoming dependent on TANF, and families with children under CPS. Table 25 also provides the States'/Territories' definition of families with very low income. The categories of applicants covered in table 26 are families with foster care children, families with children in Head Start, families with children in publicly funded pre-k, families experiencing homelessness, families with teen parents not in school, families with teen parents in school, and military families. For each group of families, the tables indicate whether that group is treated the same as all other families, whether that group has priority (but without a guarantee of a subsidy when funds are limited), or whether that group of families is guaranteed a subsidy. Findings from 2020 include:

- Five States guarantee subsidies for children with special needs, with an additional twenty-nine States/Territories giving these families priority over some other families or priority in certain circumstances.
- Twenty-three States/Territories guarantee subsidies for all families enrolled in TANF under their CCDF-funded program. Additional States guarantee subsidies for TANF families if they are participating in the State's TANF work program. (As mentioned earlier, States/Territories may serve TANF families through a child care program other than the CCDF-funded program covered in this report.)
- Families transitioning off TANF are guaranteed subsidies in 18 States/Territories. There is almost always a time limit associated with this type of transitional child care.
- Three States/Territories (Colorado, Guam, and Texas) guarantee subsidies for families at risk of becoming dependent on TANF, and six States/Territories give priority to these families in at least some circumstances.
- Twelve States/Territories guarantee subsidies for children in foster care, and thirteen States/Territories prioritize care in at least some cases for children in foster care.
- Only four States (Colorado, Oregon, Pennsylvania, and South Carolina) give priority to children in Head Start in at least some circumstances. Three States (Colorado, Georgia, and Pennsylvania) give priority to children in pre-kindergarten in at least some circumstances.
- Twelve States/Territories guarantee subsidies for families experiencing homelessness. Twenty-six States/Territories give priority to these families in at least some circumstances.

- Four States (Alaska, Delaware, the District of Columbia, and Illinois) guarantee subsidies for all teen parents in school; only the District of Columbia guarantees subsidies for teen parents not in school.

In response to the COVID-19 pandemic, some States/Territories established priority policies for families with essential workers, as defined by public officials within the States/Territories. Information about States'/Territories' policies for prioritizing subsidies for families with essential workers can be found in the CCDF Policies Database and special COVID-19 project report.⁵⁸

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

Changes in Priority Policies from 2019 to 2020

Between 2019 and 2020, two States made changes to their priority policies. Maine no longer gave priority to TANF recipients. Texas began giving priority to families at risk of becoming dependent on TANF.

⁵⁸ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Table 18. Application and Waiting List Procedures, 2020¹

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

Table 18. Application and Waiting List Procedures, 2020¹

State/Territory*	Method for Submitting Application	Within How Many Days Applicant Must Be Notified of Eligibility After Submitting the Application	If the State Uses a Waiting List When Needed ²
Nevada	In-person, mail, fax, email, online	30	Yes
New Hampshire	In-person, mail, fax, email, online, phone	30 ³¹	Yes
New Jersey	In-person, mail, email	45	Yes
New Mexico	In-person, mail, fax, email	14 ³²	No
New York	In-person, mail, fax, email	45 ³³	Yes ³⁴
No. Mariana Islands	In-person	15	Yes
North Carolina	In-person, mail	30	Yes
North Dakota	In-person, mail, fax, email, online	30 ³⁵	No
Ohio	In-person, mail, fax, email, online ³⁶	30	No
Oklahoma	In-person, mail, fax, email, online	Other ³⁷	No
Oregon	In-person, mail, fax, email, online, phone ³⁸	45	Yes
Pennsylvania	In-person, mail, fax, online	30	Yes
Puerto Rico	In-person, phone	Other ³⁹	Yes
Rhode Island	Mail, online ⁴⁰	Other ⁴¹	No
South Carolina	In-person, mail, fax, email	5 ⁴²	No
South Dakota	In-person, mail, fax, email, online	10 ⁴³	Yes
Tennessee	In-person, mail, fax, online	15 ⁴⁴	No
Texas	In-person, mail, fax, email, online	20	Yes
Utah	In-person, mail, fax, online	30	No
Vermont	In-person, mail, fax, online	30	No
Virgin Islands	In-person, email ⁴⁵	5	Yes
Virginia	In-person, mail, fax, online	30	Yes
Washington	In-person, mail, fax, online, phone ⁴⁶	30	Yes
West Virginia	In-person, online, phone ⁴⁷	Other ⁴⁸	No
Wisconsin	In-person, mail, fax, online, phone	30 ⁴⁹	No
Wyoming	In-person, mail, fax, email	30	No

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

³ Applications can be made during face-to-face interviews. Families enrolled in TANF work programs, families with members in protective services, and families with members in foster care may use a written referral from the appropriate department.

⁴ Offices were closed during the pandemic, but families could continue to submit applications in person through a drop box.

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

⁶ Eligibility determination must be made within 10 days and the applicant must be given notice, either hand delivered or mailed.

⁷ No face-to-face interview is required if the information needed for verifying identity and citizenship or legal residency status is already on file with the department or if the required information can be obtained through another method.

⁸ Once all required information has been received, the state has 10 business days to deny the application, approve the family for benefits, or place the application on the waiting list.

⁹ Policy coded for Non-CalWORKs Alternative Payment Program. Due to the COVID-19 pandemic, applications may be submitted online using digital signatures and electronic submission of supporting documentation.

¹⁰ Policy coded for Non-CalWORKs Alternative Payment Program.

¹¹ Policy coded for Non-CalWORKs Alternative Payment Program. Child care agencies are required to maintain a waiting list. This requirement may be satisfied by participating in a county child care centralized eligibility list, where available.

¹² Counties have the option to maintain a waiting list. If the county chooses to maintain a waiting list, it must develop waiting list policies and report those policies to the state agency. Counties also have the option to freeze enrollment.

¹³ Families are placed on a waiting list either because funds are not available or because the agency cannot match the child's need with an available provider at that time.

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

¹⁵ Families were allowed to apply in person, if needed, on Tuesdays and Thursdays.

¹⁶ The caseworker has 30 calendar days to determine eligibility, beginning the next business day after receipt of the application.

¹⁷ Eligibility is determined within 10 work days.

¹⁸ The initial application must be submitted in writing.

¹⁹ The application interview to establish eligibility must be arranged by staff as soon as possible but no later than 30 days after receipt of the signed and dated application and supporting documentation. When the application is denied, the agency must give timely notice of 10 days prior to the effective date of the denial action.

²⁰ Applicants are generally notified of eligibility within 30 days. When the eligibility determination requires additional clarifying information, applicants are notified of eligibility within 45 days from the date the initial application was received.

²¹ The applicant is notified at the time of the appointment.

²² If the application is denied for failure to provide requested information, the applicant is entitled to a 14-day grace period to supply the missing information and have eligibility determined without having to file a new application.

²³ Families participating in the Kansas Early Head Start/Child Care Partnerships must have their applications processed within seven calendar days of the application date.

²⁴ Applications are taken in county offices, by toll-free phone, or online.

²⁵ Staff must create a process to exchange documents in a way that can be flexible for different parents' needs and may include, but are not be limited to, email, fax, and no-touch drop off. For virtual redetermination, documentation may be exchanged in advance, but staff should make every effort to meet with parents by video or phone appointment to counsel parents and answer any questions. Staff must be sensitive to the different technology capabilities of parents and make accommodations as needed.

²⁶ Applicants must be notified within 14 calendar days if the application is denied, but there is no requirement for when applicants must be notified if the application is approved.

²⁷ Families experiencing homelessness or with children in foster care must be notified of eligibility within seven days under expedited service. All other families must be notified within 30 days.

- ²⁸ The response time can be extended to 45 days with the applicant's consent. For families experiencing homelessness, the application must be processed within five working days of receipt.
- ²⁹ All required documentation can be returned by mail or email.
- ³⁰ The caseworker must take action on the application within 30 days of receipt of the application, and a notice of action must be sent to the applicant.
- ³¹ Applicants experiencing homelessness are eligible to receive an expedited child care scholarship within seven days of application. Final eligibility for the applicant will be determined within 30 days.
- ³² The applicant is notified immediately if he or she submits all required documentation at the time of application. Otherwise, the applicant is given 14 days to submit documentation and then notified of eligibility.
- ³³ Eligibility decisions must be made within 30 calendar days from the date of application, and a written notice must be sent to the family within 15 calendar days of the eligibility decision.
- ³⁴ Districts may maintain waiting lists when funds are not available for all eligible families.
- ³⁵ The application must be acted upon within 30 days unless there are extenuating circumstances, such as an applicant waiting for a provider to become licensed. If there are extenuating circumstances, the agency may respond within 45 days.
- ³⁶ Applicants may apply at locations, other than the department office, that are convenient and accessible for families.
- ³⁷ The worker must determine eligibility within two working days of completing an interview and receiving all verification.
- ³⁸ If the family is applying for SNAP and employment-related day care together, the online SNAP application may be used.
- ³⁹ Applicants will be notified of their eligibility during the in-person application process if they have provided all of the requested information.
- ⁴⁰ Applications can no longer be submitted in person due to the COVID-19 pandemic.
- ⁴¹ Applicants receive timely notice, and the application must be completed within 30 days. An application that remains incomplete on the last day of the application period will be denied unless the agency is responsible for the delay in processing the application. Applicants experiencing homelessness have up to 90 days to provide the required documentation.
- ⁴² Applicants in the state's STARS workforce development program are notified within one to two days. All other applicants are notified in three to five business days.
- ⁴³ Eligibility is determined within 10 days and then a written notice is sent to the family.
- ⁴⁴ Child care for TANF families is approved during the TANF application processing period, which is limited to 45 days.
- ⁴⁵ Completed applications can be scanned and emailed or dropped off at secure drop boxes.
- ⁴⁶ Applicants may apply by telephone through the state's call center.
- ⁴⁷ Families are required to apply for child care services via phone call directly with a case manager due to an initial statewide closure of Child Care Resource & Referral offices. Each Child Care Resource & Referral office is responsible for determining the safety level for opening the sites and returning to face-to-face applications.
- ⁴⁸ Applicants receive an eligibility decision during the in-person application if they have provided all requested information. If additional information is needed, it must be provided to the caseworker and eligibility must be determined within 13 days.
- ⁴⁹ The agency must determine eligibility when the individual's verification requirements are complete. If the applicant requests more time to provide verification, the agency may extend the verification due date to not more than 30 calendar days from the application filing date.

Table 19. Information That Must Be Verified with Documentation When Applying for CCDF Subsidies, 2020¹

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

Table 19. Information That Must Be Verified with Documentation When Applying for CCDF Subsidies, 2020¹

State/Territory*	Applicant Identity	Household Composition	Applicant's Relationship to Child	Employment ²	Income	Child's Immunization Record ³
Minnesota	Yes	No ³⁴	Yes	Yes	Yes	No
Mississippi	Yes	No	Yes	Yes	Yes	No
Missouri	No	Varies ³⁵	Varies ³⁶	Varies ³⁵	Varies ³⁵	No
Montana	Yes	Yes	Yes	Yes	Yes	No
Nebraska	No ⁵	No ⁵	No ⁵	Yes	Yes ³⁷	No
Nevada	Yes	No ⁵	Yes	Yes	Yes ³⁸	No
New Hampshire	Yes	Yes	Yes	Yes	Yes	No
New Jersey	Yes	Yes	Yes	Yes	Yes	No
New Mexico	Yes	Yes	Yes	Yes	Yes	No
New York	Yes	Yes	Yes	Yes	Yes	Yes ³⁹
No. Mariana Islands	Yes	Yes	Yes	Yes	Yes	No
North Carolina	No ⁴⁰	No ⁴⁰	No ⁴⁰	Yes	Yes	No ⁴⁰
North Dakota	Yes	Yes	Yes	Yes	Yes	No
Ohio	No	No	No	Yes	Yes	No
Oklahoma	Yes	No ⁵	No	Yes	Yes ⁴¹	No
Oregon	No ⁴²	No ⁴²	No ⁴²	Yes	Yes	No ⁴³
Pennsylvania	Yes	Yes	Yes	Yes	Yes	No
Puerto Rico	Yes	Yes	Yes	Yes	Yes	Yes
Rhode Island	No	No	Yes	Yes	Yes	No
South Carolina	No	No	No	Yes	Yes	No
South Dakota	Yes	No	Yes	Yes	Yes	No
Tennessee	Yes	Yes	Yes	Yes	Yes	Varies ⁴⁴
Texas	Yes ⁴⁵	No ⁵	Yes ⁴⁵	Yes	Yes ⁴⁶	No
Utah	Yes	No ⁴⁷	No ⁴⁷	Yes	Yes	No
Vermont	No	No	Varies ⁴⁸	Yes	Yes	No

Table 19. Information That Must Be Verified with Documentation When Applying for CCDF Subsidies, 2020¹

State/Territory*	Applicant Identity	Household Composition	Applicant's Relationship to Child	Employment ²	Income	Child's Immunization Record ³
Virgin Islands	Yes	Yes	Yes	Yes	Yes	Yes ⁴⁹
Virginia	Yes	No	No	Yes	Yes ⁵⁰	Varies ⁵¹
Washington	Yes	Yes ⁵²	Yes	Yes	Yes	No
West Virginia	Yes ⁵³	No ⁵	No	Yes ⁵³	Yes ⁵³	Yes ⁵³
Wisconsin	Yes	No	No	No ⁵⁴	No ⁵⁴	No ⁵⁵
Wyoming	Yes	No	Yes	Yes	Yes	No

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ When the applicant is required to submit documentation, it is counted as verification. If the applicant is only required to make a verbal or written statement, it is not counted as verification for the purposes of the CCDF Policies Database. Information about the types of documentation required is not included here, but additional details may be available in the full CCDF Policies Database. For information on policies for essential workers during the COVID-19 pandemic, see the full CCDF Policies Database.

² This variable captures whether the family must verify employment, and may include documentation of the parent's work schedule or hours of employment.

³ This variable captures whether information must be verified with the lead agency at the time of application. In many cases, the provider is required to maintain immunization records. While not captured here, this information can be found in the full database detail.

⁴ The agency may require verification if the caseworker has reason to believe the client provided incorrect information, or to verify information about a parent's spouse if the parent indicates they are married but does not list his or her spouse.

⁵ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.

⁶ Applicants with current or prior cash assistance cases or SNAP cases are exempt from identification verification since their information is already in the system.

⁷ Verification is not required for natural, step, or adoptive parents.

⁸ Applicants who have an open cash assistance, SNAP, or medical assistance case in the system are not required to provide documentation of income, if the income amount displayed in the system is within \$50 of the stated income amount on the child care application.

⁹ While not required for eligibility, the agency attempts to verify a valid Social Security Number for every household member for identification purposes.

¹⁰ If the family has an open TANF or SNAP case, the state has the option of re-verifying income information or using income information available from the state information system, unless it is over 45 days old.

¹¹ Policy coded for Non-CalWORKs Alternative Payment Program.

¹² Policy coded for Non-CalWORKs Alternative Payment Program. Income is not verified for cases where eligibility is not based on income.

¹³ Relationship verification is only required when the caretaker is not related to the child.

¹⁴ A verbal or written statement by a person outside the household, who is knowledgeable about the household's circumstances, is sufficient to verify income.

¹⁵ Applicants are only required to submit immunization records for non-school-age children if the child is receiving care from a qualified exempt provider who is unrelated to the child and providing care outside of the child's home.

¹⁶ The agency may require verification if the child is in unregulated care and the caseworker has reason to believe the client provided incorrect information.

- ¹⁷ As long as families meet the minimum hours of work required for eligibility, families are eligible for full-time traditional care. Families are not required to verify that the timeframe that child care is requested matches the timeframe during which the parent is working. Non-traditional child care still requires verification of the parent or guardian's schedule.
- ¹⁸ Families experiencing homelessness are granted a 60-day grace period.
- ¹⁹ Applicants experiencing homelessness, as verified by a Department of Children and Families certified homeless shelter may be permitted to enroll even if they are unable to provide the required documentation of eligibility.
- ²⁰ Each applicant must self-certify that household size is true and correct. If the state suspects fraud, the applicant may be required to provide additional documentation.
- ²¹ Families experiencing domestic violence, homelessness, or natural disaster are granted a 90-day grace period.
- ²² Documentation is not required if the child attends a regulated child care program, attends public school, or receives TANF benefits. Documentation is required for non-school-age children in informal child care settings.
- ²³ Foster parents do not have to verify their income when applying for a subsidy for their foster child.
- ²⁴ Immunization does not have to be verified for children attending school.
- ²⁵ The agency uses information available in the state systems to verify household composition. If a child's identity is not found in the system, the agency may request documentation from the parent.
- ²⁶ Documentation to verify the identity of other children and adult members in the unit is required.
- ²⁷ The relationship to the child does not have to be verified, except for foster parents applying for care for a foster child.
- ²⁸ Applicants receiving protective child care services, participating in the TANF work program, or receiving TANF are not required to verify income.
- ²⁹ Documentation is required to verify the identity of all adults in the household.
- ³⁰ Proof of current immunization is required unless the child is enrolled in another entity that requires an immunization record.
- ³¹ Verification of an immunization record can be postponed for 90 days when an applicant is experiencing homelessness. In addition, the immunization requirement does not apply if the applicant submits a written statement objecting to immunization based on religious grounds, or a written statement is received from a physician stating that the immunization procedure is inadvisable or contraindicated for medical reasons.
- ³² Immunization records do not have to be verified if the child has a medical condition that contraindicates immunization, or the parent has an objection to immunization based on religious grounds. Parents that object to immunization or medical examination, or both, on religious grounds must provide a written health history of the child and sign a statement indicating that the child is in good health and free from any communicable diseases to the best of their knowledge and belief.
- ³³ Verification of income is not required for protective services families.
- ³⁴ With the exception of parental relationship, household composition does not need to be verified unless questionable.
- ³⁵ Due to the COVID-19 health emergency, a client statement may be accepted as documentation for verification if the client is unable to obtain the requested documentation due to the COVID-19 pandemic, and their statement of income, job loss, reduced hours, or other need is determined to be reasonable by the caseworker.
- ³⁶ Parents must complete a specific form to verify their relationship to the child and provide documentation (birth certificates, marriage licenses, etc.) upon request. Due to the COVID-19 health emergency, a client statement may be accepted as documentation for verification if the client is unable to obtain the requested documentation due to the COVID-19 pandemic, and their statement of income, job loss, reduced hours, or other need is determined to be reasonable by the caseworker.
- ³⁷ A declaration from the client is acceptable regarding unearned income, unless the client has a history of program abuse.
- ³⁸ TANF cash assistance case referrals from the department do not have to verify income. The income statement on the referral form is accepted.
- ³⁹ With the exception of school-age children, the child's immunization must be verified in order for child care to be approved. A provider may provide care to a child not yet immunized if the immunizations are in process and the caretaker can give specific appointment dates for receiving the immunizations. In some cases, a medical exemption may be issued by a physician on an annual basis.
- ⁴⁰ When documentation is not available, a client statement may be used as verification.

- ⁴¹ Income is not verified for caretakers who are not legally and financially responsible for the child. Adopted families do not have to verify income when the child was adopted through the state's department of human services or a federally recognized Indian tribe, the parent has an adoption assistance agreement, both the adoptive parent and child reside in the state, and the child is age five or younger.
- ⁴² Anything questionable that affects eligibility or benefit level must be verified.
- ⁴³ Anything questionable that affects eligibility or benefit level must be verified. Parents who have not immunized their child or are not up to date on their child's immunizations will need to show proof that they have started the process or obtained an exemption.
- ⁴⁴ Documentation is not required for children placed in licensed care. License-exempt providers must have verification of current immunization status and recent physical examination for each child unless a verifiable exclusion is on file.
- ⁴⁵ COVID-19 essential workers are only required to verify the legal immigration status of their child.
- ⁴⁶ Families who qualify as homeless are considered to be income eligible without verification of actual income.
- ⁴⁷ The agency may require verification if the caseworker has reason to believe the client provided incorrect information. Verification is required for specified relatives and legal guardian caretakers.
- ⁴⁸ If the applicant is not the biological, adoptive, or foster parent of the child for whom he or she is requesting a child care subsidy, it must be verified through court documentation that the primary caretaker is the legal guardian.
- ⁴⁹ Children in foster care, protective services, or experiencing homelessness are granted a three-month grace period to acquire all mandated immunizations.
- ⁵⁰ The local agency should accept a parent's written statement that he or she has no income unless there is reason to doubt the statement.
- ⁵¹ If the child is already enrolled in another program that requires immunization records, the documentation does not have to be verified. If the family is experiencing homelessness, the child may be conditionally approved for care for up to 90 days.
- ⁵² Families must provide the name and address of both parents except when they have an open child support case, when providing this information may result in serious physical or emotional harm to anyone in the household, when one parent provides a statement under penalty of perjury that the other parent's information is unknown, or when the information can be verified through current available systems.
- ⁵³ Families are permitted to submit all verification documents via fax, mail, drop box, email, smart phone pictures, text, or other forms of electronic submission due to the COVID-19 pandemic.
- ⁵⁴ During the COVID-19 public health crisis, applicants can self-declare employment and income and do not need to submit documentation.
- ⁵⁵ In addition to the required verification, caseworkers may require verification if the applicant submits questionable or contradictory information.

Table 20. Child Support Enforcement Requirements for Families, 2020²

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

Table 20. Child Support Enforcement Requirements for Families, 2020²

State/Territory*	If Families Must Comply with Child Support Enforcement Requirements	Exemption for: Reasonable Fear of Harm to Child	Exemption for: Reasonable Fear of Harm to Caregiver	Exemption for: Child Conceived as Result of Rape or Incest	Exemption for: Pending Legal Proceedings	Exemption for: Parent being Counseled on Adoption	Exemption for: Child Conceived through Use of Donor	Exemption for: Other Reason
Massachusetts	No	NA	NA	NA	NA	NA	NA	NA
Michigan	Yes	Yes	Yes	Yes	Yes	Yes ¹¹	Yes	Yes ¹²
Minnesota	Yes ¹³	Yes	Yes	Yes	Yes ¹⁴	Yes ¹⁵	No	No
Mississippi	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Missouri	No	NA	NA	NA	NA	NA	NA	NA
Montana	Yes	Yes	Yes	Yes	Yes ¹⁴	Yes ¹⁶	No	Yes ¹⁷
Nebraska	Yes ¹⁸	Yes ¹⁹	Yes ¹⁹	Yes ²⁰	Yes ²⁰	Yes ²⁰	Yes ²⁰	Yes ²⁰
Nevada	No	NA	NA	NA	NA	NA	NA	NA
New Hampshire	No	NA	NA	NA	NA	NA	NA	NA
New Jersey	No	NA	NA	NA	NA	NA	NA	NA
New Mexico	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes ²¹
New York	No	NA	NA	NA	NA	NA	NA	NA
No. Mariana Islands	No	NA	NA	NA	NA	NA	NA	NA
North Carolina	No	NA	NA	NA	NA	NA	NA	NA
North Dakota	No	NA	NA	NA	NA	NA	NA	NA
Ohio	No	NA	NA	NA	NA	NA	NA	NA
Oklahoma	No	NA	NA	NA	NA	NA	NA	NA
Oregon	No	NA	NA	NA	NA	NA	NA	NA
Pennsylvania	No	NA	NA	NA	NA	NA	NA	NA
Puerto Rico	No	NA	NA	NA	NA	NA	NA	NA
Rhode Island	No	NA	NA	NA	NA	NA	NA	NA
South Carolina	No	NA	NA	NA	NA	NA	NA	NA
South Dakota	Yes	Yes	Yes	Yes	Yes ²²	Yes	Yes	Yes

Table 20. Child Support Enforcement Requirements for Families, 2020²

State/Territory*	If Families Must Comply with Child Support Enforcement Requirements	Exemption for: Reasonable Fear of Harm to Child	Exemption for: Reasonable Fear of Harm to Caregiver	Exemption for: Child Conceived as Result of Rape or Incest	Exemption for: Pending Legal Proceedings	Exemption for: Parent being Counseled on Adoption	Exemption for: Child Conceived through Use of Donor	Exemption for: Other Reason
Tennessee	No	NA	NA	NA	NA	NA	NA	NA
Texas	No	NA	NA	NA	NA	NA	NA	NA
Utah	No	NA	NA	NA	NA	NA	NA	NA
Vermont	Yes	Yes ²³	Yes ²³	Yes	Yes	Yes	Yes	Yes ²³
Virgin Islands	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Virginia	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes ²⁴
Washington	No	NA	NA	NA	NA	NA	NA	NA
West Virginia	No	NA	NA	NA	NA	NA	NA	NA
Wisconsin	No ²⁵	NA	NA	NA	NA	NA	NA	NA
Wyoming	No	NA	NA	NA	NA	NA	NA	NA

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² Information about the types of documentation required is not included here, but additional details may be available in the full CCDF Policies Database.

³ A child support statement is required at application.

⁴ Families in the TANF program are required to comply with child support enforcement requirements.

⁵ Counties have the option to require cooperation with child support enforcement at application or redetermination.

⁶ An exemption exists if the county requires cooperation with child support enforcement.

⁷ Counties that choose to require cooperation with child support enforcement may designate conception through use of a donor as a reason for exemption.

⁸ Teen parents attending high school are not required to comply with child support enforcement. Counties that choose to require cooperation with child support enforcement can define other reasons for exemption.

⁹ Exemptions may be provided if there is substantial and credible proof indicating the custodial parent cannot provide the minimum information regarding the non-custodial parent.

¹⁰ Employed non-parent caretaker relatives who receive a child-only TANF benefit for children needing care are required to cooperate with child support.

¹¹ An exemption is allowed as long as the counseling has not gone on for more than three months.

¹² Teen or minor parents acting as the adult case member are not subject to child support enforcement requirements.

¹³ If the client is found to not be in compliance with child support enforcement requirements during the 12-month continuous eligibility period, the client can continue to receive child care assistance. The client must be cooperating with child support at redetermination.

- ¹⁴ An exemption may be provided if legal proceedings for the adoption of the child are pending before a court of competent jurisdiction.
- ¹⁵ An exemption is provided if the parent is currently being assisted by a public or licensed private social service agency to resolve the issues of whether to keep the child or place the child for adoption.
- ¹⁶ An exemption is provided if the parent is planning to relinquish or has relinquished the child to a public or licensed social agency for the purpose of adoption.
- ¹⁷ An exemption may be provided if the parental rights to the child have been terminated by a court of competent jurisdiction, any situation that makes cooperation with child support requirements detrimental to the child, or if the parent who is applying for child care assistance is under the age of 18.
- ¹⁸ No child support sanctions for failure to cooperate will be imposed on participants in the state's TANF work program so that they may continue to participate in the work program.
- ¹⁹ The client may be exempt from child support enforcement requirements if cooperation could cause a serious risk of harm from the noncustodial parent.
- ²⁰ The state child support enforcement unit can choose to provide an exemption for this reason.
- ²¹ Clients are exempt from complying with child support enforcement if they are receiving TANF, they are already receiving child support or financial support from the non-resident parent, there is a joint custody agreement where neither parent is ordered to pay support, parental rights have been terminated, the parent is a foster parent or an adoptive parent and provides proof of a single parent adoption, a parent is temporarily absent from the household, or the client is a teen parent, grandparent, or guardian.
- ²² Exemptions for pending legal proceedings are decided on a case-by-case basis by supervisory staff.
- ²³ If a client is escaping an abusive situation and does not want to pursue child support, a waiver may be granted.
- ²⁴ Exemptions are provided for TANF cases in which all included children are on the TANF grant.
- ²⁵ During the COVID-19 public health crisis, applicants are automatically granted good cause for noncooperation with the Child Support Agency.

Table 21. Redetermination Requirements, 2020 ²

State/Territory*	Redetermination Period (in months) ³	If New Documentation is Required During Redetermination	Minimum Number of Days of Advance Notice Regarding an Adverse Subsidy Change ⁴	Minimum Number of Days of Advance Notice Regarding a Subsidy Termination
Alabama	12 ⁵	Yes	10 ⁶	90 ⁷
Alaska	12	Yes	10 ⁸	10 ⁸
American Samoa	6	Yes ⁹	NA ¹⁰	--- ¹
Arizona	12	Yes	NA ¹¹	10
Arkansas	12 ¹²	Yes	10	10 ¹³
California	12	Yes	14 ¹⁴	14 ¹⁴
Colorado	12 ¹⁵	Yes ¹⁶	15	15
Connecticut	12	Yes	10	10 ¹⁷
DC	12 ¹⁸	Yes	15	15
Delaware	12	Yes ¹⁹	10	Other ²⁰
Florida	12 ²¹	Yes	10 ²²	Other ²³
Georgia	12 ²⁴	Yes	14	14
Guam	12 ²⁵	Yes ²⁶	15	15
Hawaii	6	Yes	10 ²⁷	10 ²⁸
Idaho	12	Yes	Other ²⁹	Other ³⁰
Illinois	12	Yes	10 ³¹	10 ³¹
Indiana	12 ³²	Yes	10 ³³	10 ³³
Iowa	12 ³⁴	Yes	10	10
Kansas	12	Yes	10 ³⁵	10 ³⁶
Kentucky	12	Yes	10 ³⁷	Other ³⁸
Louisiana	12 ³⁹	Yes	5 ⁴⁰	5 ⁴¹
Maine	12 ⁴²	Yes ⁴²	12	12
Maryland	12	Yes	5 ⁴³	5 ⁴³
Massachusetts	12 ⁴⁴	Yes	14	14 ⁴⁵
Michigan	12	Yes ⁴⁶	11 ⁴⁷	11 ⁴⁷
Minnesota	12 ⁴⁸	Yes	15 ⁴⁹	15
Mississippi	12 ⁵⁰	Yes	14	14 ⁵¹
Missouri	12	Yes	Other ⁵²	10
Montana	12	Yes ⁵³	15 ⁵⁴	15 ⁵⁴
Nebraska	18 ⁵⁵	Yes ⁵⁶	10 ⁵⁷	10 ⁵⁷
Nevada	12 ⁵⁸	Yes ⁵⁸	10 ⁵⁹	10
New Hampshire	12	Yes	10 ⁶⁰	Other ⁶¹
New Jersey	12	Yes	10	10
New Mexico	12	Yes	14	14
New York	12 ⁶²	Yes	10 ⁶³	10

Table 21. Redetermination Requirements, 2020 ²

State/Territory*	Redetermination Period (in months) ³	If New Documentation is Required During Redetermination	Minimum Number of Days of Advance Notice Regarding an Adverse Subsidy Change ⁴	Minimum Number of Days of Advance Notice Regarding a Subsidy Termination
No. Mariana Islands	12	Yes	10	10
North Carolina	12 ⁶⁴	Yes ⁶⁵	10	Other ⁶⁶
North Dakota	12	Yes	NA ¹⁰	Other ⁶⁷
Ohio	12 ⁶⁸	Yes	15 ⁶⁹	15 ⁶⁹
Oklahoma	12	Yes	10 ⁷⁰	Effective on the date of notification
Oregon	12	Yes	10	10
Pennsylvania	12	Yes	10	10
Puerto Rico	12	Yes ⁷¹	NA ¹⁰	NA ¹⁰
Rhode Island	12 ⁷²	Yes	10 ⁷³	10 ⁷³
South Carolina	12	Yes	10	90 ⁷⁴
South Dakota	12	Yes	10	10
Tennessee	12 ⁷⁵	Yes	10	Other ⁷⁶
Texas	12 ⁷⁷	Yes	15	15
Utah	12	Yes	1 ⁷⁸	Other ⁷⁹
Vermont	12	Yes ⁸⁰	30	30 ⁸¹
Virgin Islands	12	Yes	30 ⁸²	Other ⁸³
Virginia	12	Yes ⁸⁴	10	10
Washington	12	Yes	10	90 ⁸⁵
West Virginia	12	Yes	13 ⁸⁶	13 ⁸⁷
Wisconsin	12 ⁸⁸	Yes ⁸⁹	Other ⁹⁰	Other ⁹¹
Wyoming	12	Yes	Other ⁹²	Retroactive to date of change in eligibility status

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² The policies shown here are the policies that were in effect on October 1, 2020. If the state extended eligibility periods for families due for redetermination in October 2020, the policy is footnoted. If the state extended eligibility periods in other months, this information can be found in the full CCDF Policies Database. Special redetermination policies for families of essential workers are captured in the full CCDF Policies Database.

³ The redetermination period is how often the family's eligibility must be reviewed in order to continue receiving care.

⁴ An adverse subsidy change is a reduction that does not result in a loss of the family's subsidy.

⁵ The redetermination period may be shorter than 12 months if the parent's authorized activity will last fewer than 12 months or if the parent fails to comply with program requirements. Families with healthcare workers and first responders who qualify for child care assistance as a protective services group during the COVID-19 pandemic may have a redetermination period shorter than 12 months.

- ⁶ Individuals will be notified within 10 days unless advance notification requirements do not apply or a parent signs a written statement waiving the right to an advance notice.
- ⁷ At redetermination, if a family's income is above 85 percent of the state median income, they can receive three months of services before becoming ineligible. Families who become ineligible for other reasons have a 10-day grace period before termination of services.
- ⁸ The agency must give a written notice to a family at least 10 days before taking any action that would adversely affect their benefit, including during their certification period.
- ⁹ Participants must provide documentation to verify income, identity, and household composition during redetermination.
- ¹⁰ There is no requirement for notification.
- ¹¹ The benefit cannot be reduced during the 12-month eligibility period. Changes take place at the beginning of each 12-month eligibility period. Copayment increases or unit decreases resulting from redetermination are not considered negative actions and do not require a 10-day advance notice.
- ¹² Redeterminations are suspended due to the COVID-19 pandemic.
- ¹³ A family found ineligible to continue receiving services during redetermination will be given a 10-day advance notice that assistance will be discontinued at the end of the 10-day period. If a family is found to have income over 85 percent of state median income, child care will be discontinued on the day of discovery.
- ¹⁴ If notification is mailed, the number of days is extended to 19 days.
- ¹⁵ If children receiving care are also enrolled in a Head Start or Early Head Start program, their redetermination period will be aligned with the Head Start or Early Head Start program year. This may result in a redetermination period that is longer than 12 months, though the redetermination period cannot be shorter than 12 months.
- ¹⁶ Verification of employment, income, household composition, immunization, participation in a training program, the parent's schedule if requesting non-traditional hour care, and residency if the family has moved, are required at redetermination.
- ¹⁷ Eligibility ends on the last day of the month in which the notice of adverse action expires.
- ¹⁸ Families whose 12-month eligibility expires during the public health emergency will remain eligible for subsidized child care until the District government resumes in-person operations. Families will receive a notice in the mail with a request to come in and recertify after the public health emergency is lifted.
- ¹⁹ An interview is also required at redetermination and may be completed in person or by phone.
- ²⁰ At redetermination, if a family's income is above 185 percent but below 200 percent of the Federal Poverty Guidelines, they can receive 12 months of services before becoming ineligible. Families remain eligible for the full 12 months, even if the family's income exceeds 200 percent of the Federal Poverty Guidelines, but remains below 85 percent of the state median income.
- ²¹ Redetermination for families in TANF must be completed every six months.
- ²² Individuals are given 10 days notice prior to a decrease in benefits or other adverse action. If a family is removed from the program due to lack of funds, a notice is sent at least two weeks prior to disenrollment.
- ²³ The grace period is 10 working days from the date the client receives the notice. If the family's income exceeds 85 percent of state median income, services will be discontinued two weeks (14 calendar days) from the date of the notice, as long as the two-week period does not extend beyond the family's authorized eligibility period.
- ²⁴ If the parent is not meeting state-approved activity requirements at their annual redetermination as a result of circumstances related to COVID-19, the lack of an activity will not impact eligibility.
- ²⁵ Eligibility periods can be extended for up to 6 months beyond the typical 12-month eligibility period during the COVID-19 public health emergency.
- ²⁶ Verification of employment, child support statements, school schedule, and immunization records must be submitted for redetermination as applicable.
- ²⁷ Families are given timely notice of 10 days prior to an adverse action. Changes that result in higher benefits will take effect the first of the month following the month in which the change is reported. Timely notice is not required when the family requests that services end or when funds are not available.
- ²⁸ Families are given timely notice of 10 days prior to an adverse action.
- ²⁹ Families must be notified if they are in a phase-out period and notified of the amount of assistance, they will receive in the phase-out period.
- ³⁰ Families who are no longer eligible for assistance and who have an income between 130 and 150 percent the Federal Poverty Guidelines qualify for a phase-out period. Families in the phase-out period receive 12 months of continued benefits and qualify for 75 percent of the standard child care assistance payment. Families in the phase-out period pay the full copayment plus the additional 25 percent remaining from the assistance payment.
- ³¹ Individuals are given 10 calendar days notice when benefits are cancelled. Changes to copayments are implemented on the first of the month following notification of the change.

- ³² Redetermination is required at least every 53 weeks. At redetermination, if a family's income exceeds the eligibility threshold due to a temporary fluctuation in income that is expected to last for 8 weeks or less, the family will be allowed an additional 13 weeks to update their income.
- ³³ The rule applies to adverse actions, including a denial or termination of services, increased fees, or reduction of services.
- ³⁴ Families are certified for a period of 12 months, except when the applicant meets one of two criteria at the time of application. If the child who will be receiving care will turn 13 within 6 months after the end of a 12-month certification period, then the family is certified for a period of up to 18 months. For families attending post-secondary education, if the 24-month funding limit will be reached within 6 months after the end of a 12-month period, then the family is certified for a period of up to 18 months.
- ³⁵ Notification of a reduction in benefits must be mailed at least 10 days before the effective date of the action. Notices must be mailed no later than the 21st of the month in 31-day months or the 20th of the month in 30-day months as these actions take effect on the first day of a month.
- ³⁶ Notification of termination of benefits must be mailed at least 10 days before the effective date of the action. Closure notices must be mailed no later than the 20th of the month in 31-day months or the 19th of the month in 30-day months to be considered timely since the effective date of action for closures is always the last day of the month.
- ³⁷ Changes that increase benefits do not require advance notice. Changes that decrease benefits require 10 days notice.
- ³⁸ A 90-day phase out period from the end of services is required to end subsidies in all cases except when income exceeds 85 percent of the state median income.
- ³⁹ Households with children between the ages of 3 and 4 are certified for 24 months.
- ⁴⁰ Notification is required within five work days.
- ⁴¹ A grace period of five working days is given.
- ⁴² Full redetermination is done at 12 months. At six months, the family must indicate that the information on file is still correct. Families with cases eligible for redetermination are extended by 90 days to allow additional time to provide documentation.
- ⁴³ The family is entitled to five working-days notice, which does not include state holidays.
- ⁴⁴ Families due for redetermination will have their eligibility automatically extended for six months due to COVID-19.
- ⁴⁵ The last date of service will be the proposed end date listed on the notification. If the family's subsidy is being terminated for failure to pay fees, excessive absences, or failure to submit documentation for redetermination, the action will take effect 14 days after the notice is given to the parent.
- ⁴⁶ For income eligible families, income must be verified at redetermination. For TANF recipients participating in a One Stop Service Center activity, the state employment information system must be checked for approved hours of participation at redetermination.
- ⁴⁷ A timely notice is mailed at least 11 days before an intended negative action takes effect. For an increase in benefits, notice is sent to the client at the same time an action takes effect.
- ⁴⁸ Redetermination of eligibility for some high school students under the age of 21 may be deferred beyond 12 months, not to exceed 24 months, to the end of the student's school year.
- ⁴⁹ Adverse changes go into effect 15 days after notification. Families receive notification of non-adverse changes as well, but these go into effect as soon as possible.
- ⁵⁰ When disaster or emergency conditions have been declared, the agency may waive the redetermination requirement during the declared emergency and issue a temporary certificate for 90 days. The agency may renew the temporary certificate for additional 30-day periods on a case-by-case basis.
- ⁵¹ A two-week notice is provided if the family becomes income-ineligible or fails to submit required materials.
- ⁵² An increase in the copayment takes effect the month after notice is sent. A decrease in the copayment takes effect in the month notice is sent.
- ⁵³ Parents must verify their employment or training program if the participant has changed jobs or it is a new semester. If the participant has not changed jobs, he or she must submit a work verification form, completed and signed by each employer. If a family member cannot obtain work verification, the family member may submit the last two months of consecutive wage stubs. Verification of child support must also be included.
- ⁵⁴ Parents who are subject to an adverse action (denial, suspension, reduction, or termination of the subsidy, or a repayment demand from the state) are entitled to mailed written notification 15 calendar days prior to the adverse action.
- ⁵⁵ Redetermination must be conducted at least once every 18 months, but not more than once every 12 months.
- ⁵⁶ The parent must complete a new application reflecting his or her current situation.
- ⁵⁷ For termination or reduction of services, the client must be given 10 days notice. If fraud has been verified, notice of termination or reduction of services must be provided no later than the effective date of the action. No notice is required if the client did not complete the redetermination process at the end of the service period.
- ⁵⁸ Families with cases ending in March, April, May, or June 2020 are given an additional eligibility period without need for documentation.

- ⁵⁹ The 10-day grace period is not required if the only eligible child leaves the household, the household moves out of state, or the household requests a reduction or termination.
- ⁶⁰ Notification varies. If the benefits will be decreased, the family is given notice 10 calendar days prior to the action. If the family moves from a lower income eligibility level to a higher income eligibility level or if there is a change in the expected copayment, the family is notified, but a 10-day notice is not required.
- ⁶¹ If during redetermination, it is determined that the client is no longer eligible for the subsidy, the action will take effect 10 calendar days after the notice of the decision. If the client's eligibility period ended, the termination will take effect immediately. If the client's income is greater than 220 percent but less than or equal to 250 percent of the Federal Poverty Guidelines at redetermination, the client will receive a 12-month graduated phase-out period.
- ⁶² Policy coded for New York City. Districts may allow families who are not receiving public assistance, and who would otherwise need to have their eligibility for child care assistance redetermined within the period of the disaster recovery, an additional 30 days to complete such redetermination. Districts must continue to provide child care services to such families during the extended redetermination period. If additional waiver periods are approved, cases may be extended for additional 30-day increments beyond the initial 30 days. Cases may only be extended for a maximum total of 90 days regardless of how many waiver periods are approved.
- ⁶³ Ten days notice is required if benefits will be reduced or the change will force the family to find different child care arrangements. Timely notice of 10 days is not required when benefits will increase. Local districts must provide written notice 30 days in advance if changes in funding to reduce district caseloads result in adverse action for families.
- ⁶⁴ The eligibility period is extended for 12 months for families with cases ending in March, April, May, or June 2020.
- ⁶⁵ Participants in the SNAP program do not have to provide new income documentation at redetermination.
- ⁶⁶ Notice must be provided at least 10 working days prior to the effective date of the termination of services when services end during the 12-month eligibility period. If there are less than 10 days left in the eligibility period, the notice is only until the end of the current eligibility period. If, at redetermination, the family's income is below 85 percent of the state median income but above the redetermination income threshold, services will continue for an additional 90 days. Services may also continue for 90 days if there is a temporary change in a family's need for child care.
- ⁶⁷ At redetermination, if a family's income exceeds 60 percent of the state median income but is under 85 percent of the state median income and they are otherwise eligible, they can receive benefits for a 12-month phase-out period.
- ⁶⁸ The eligibility period extends to the Saturday after the last day of the 12th month of eligibility.
- ⁶⁹ When the department is proposing to reduce or terminate benefits, notice is sent no less than 15 days prior to the date of the proposed action.
- ⁷⁰ If there is an increase in benefits, advance notice is not required. If there is a decrease in benefits, advance notice of 10 days is generally required.
- ⁷¹ Participants must provide updated documentation on activities, income, and identity.
- ⁷² The eligibility period cannot be less than 12 months. Benefits must be redetermined through the recertification process prior to the end of the 12-month period. The eligibility period may be extended due to COVID-19.
- ⁷³ Families must be notified at least 10 days prior to the effective date of a change that results in a reduction, suspension, or discontinuance of the subsidy.
- ⁷⁴ The change will take effect the first Monday following the 90th day after the change occurred. If the participant obtains employment or begins school or training during the 90-day period, he or she must submit documentation in order for eligibility to be redetermined. If the participant is eligible, the termination will be overturned and the participant will be authorized for the child care services for which the family was originally authorized.
- ⁷⁵ Eligibility periods are extended due to the COVID-19 pandemic.
- ⁷⁶ At redetermination, if a family is ineligible due to a child-only TANF grant ending, income above eligibility thresholds, or a failure to meet work or education requirements, their eligibility will end after a 90-day phase-out period. If eligibility ends due to a guardian failing to cooperate with redetermination or if the only child receiving assistance leaves the household or ages out, services will be terminated after 10 days.
- ⁷⁷ The eligibility period may be extended due to the COVID-19 pandemic.
- ⁷⁸ The department must provide at least one day advance notice on most negative actions.
- ⁷⁹ If there is adequate time to take action on a reported change and provide adequate notice, the change will become effective on the first day of the month following the change. If there is not adequate time, the change will become effective on the first day of the second month following the change.
- ⁸⁰ Participants are required to provide current documentation of income, service need, residence, citizenship or legal alien status, and any change in family relationships prior to the authorization end date.
- ⁸¹ Families must be notified no later than one month before eligibility ends.

- ⁸² If adjustments are made to the amount paid to the provider, both the parent and provider are notified at least one month in advance.
- ⁸³ All enrolled applicants who are found to be ineligible are notified by mail with a letter of warning, a second letter of suspension, and a third and final letter of discharge.
- ⁸⁴ Redetermination is conducted in the same manner as initial determination, except the parent does not have to submit new documentation to verify a child's citizenship.
- ⁸⁵ At redetermination, if a family's income is above 200 percent but below 220 percent of the Federal Poverty Guidelines, they can receive three months of services before becoming ineligible. Families who become ineligible for other reasons have a 10-day grace period before termination of services.
- ⁸⁶ The family must be notified at least 13 days prior to termination of services or any other negative action. Copayment increases resulting from redetermination are not considered negative actions and do not require a 13-day notice.
- ⁸⁷ Most negative actions cannot take place until 13 days after the client has been notified.
- ⁸⁸ The recipient may complete an early renewal after the start of the 11th month and prior to the end of the 12-month eligibility period if he or she has stated his or her consent to complete an early renewal in order to align the child care subsidy eligibility period with the eligibility period of another income assistance program.
- ⁸⁹ Documentation verifying approved activities and income for all parents and guardians in the household and school schedules is required for redetermination.
- ⁹⁰ Subsidy changes will take effect on the first of the following month in which the change was reported.
- ⁹¹ Subsidy changes will take effect at the end of the month in which the change was reported.
- ⁹² For adverse actions, adequate notice must be received by the family no later than the date the benefits would have been received. Notice is not required when benefits are increased.

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2020

State/Territory*	Within How Many Days the Individual Must Notify the Agency of Changes	If Changes in Employment Must Be Reported	If Changes in Income Must Be Reported	If Changes in Household Composition Must Be Reported
Alabama	10	Yes	Yes, all changes	Yes
Alaska	10	No ¹	Yes, if income exceeds eligibility limit ²	Yes ³
American Samoa	10	Yes	Yes, changes of \$25 or more	Yes
Arizona	5	Yes	Yes, all changes	Yes
Arkansas	10	Yes ⁴	Yes, if income exceeds eligibility limit ⁵	Yes ⁶
California	30	No	Yes, if income exceeds eligibility limit ⁷	No
Colorado	Other ⁸	Yes ⁹	Yes, if income exceeds eligibility limit ⁵	No ¹⁰
Connecticut	10	Yes ¹¹	Yes, if income exceeds eligibility limit	Yes ¹²
DC	10	Yes	Yes, if income exceeds eligibility limit ¹³	Yes
Delaware	10	Yes	Yes, if income exceeds eligibility limit ¹⁴	Yes
Florida	10	Yes	Yes, if income exceeds eligibility limit	Yes
Georgia	10	Yes ¹⁵	Yes, if income exceeds eligibility limit ¹⁶	Yes
Guam	10	Yes ¹⁷	Yes, changes of \$25 or more	Yes
Hawaii	10	No	Yes, if income exceeds eligibility limit ¹⁸	Yes
Idaho	Other ¹⁹	Yes	Other ²⁰	Yes
Illinois	10 ²¹	Yes	Yes, all changes	Yes
Indiana	10	Yes ²²	Yes, if income exceeds eligibility limit ²³	Yes ²⁴
Iowa	10	Yes ²⁵	Yes, if income exceeds eligibility limit ²⁶	Yes ²⁷
Kansas	10	No	Yes, if income exceeds eligibility limit ²⁸	No
Kentucky	10	Yes	Yes, all changes	Yes
Louisiana	10	Yes	Yes, if income exceeds eligibility limit ²⁹	Yes
Maine	10	Yes	Yes, changes of \$100 or more monthly	Yes

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2020

State/Territory*	Within How Many Days the Individual Must Notify the Agency of Changes	If Changes in Employment Must Be Reported	If Changes in Income Must Be Reported	If Changes in Household Composition Must Be Reported
Maryland	10	Yes	Yes, all changes	Yes
Massachusetts	30	Yes	Yes, changes over a certain amount ³⁰	Yes
Michigan	10	No	Yes, if income exceeds eligibility limit ³¹	Yes
Minnesota	10	Yes ³²	Yes, changes over a certain amount ³³	Yes
Mississippi	10	Yes	Yes, all changes	Yes
Missouri	10	Yes	Yes, if income exceeds eligibility limit ³⁴	Yes
Montana	10 ³⁵	Yes ³⁶	Yes, if income exceeds eligibility limit ³⁰	No
Nebraska	10	Yes ³⁷	Yes, if income exceeds eligibility limit ²	Yes ³
Nevada	10	Yes	Yes, all changes	Yes
New Hampshire	10	Yes	Yes, if income exceeds eligibility limit	Yes ³⁸
New Jersey	10	Yes	Yes, if income exceeds eligibility limit ⁵	Yes
New Mexico	5	Yes ³⁹	No	Yes
New York	Other ⁴⁰	Yes	Yes, all changes	Yes
No. Mariana Islands	10	Yes	Yes, all changes	Yes
North Carolina	10 ⁴¹	Yes ⁴²	Yes, if income exceeds eligibility limit ⁴³	No
North Dakota	10	Yes ⁴⁴	Yes, if income exceeds eligibility limit ⁴⁵	Yes ⁴⁶
Ohio	10	Yes ⁴⁷	Yes, if income exceeds eligibility limit ⁴⁷	Yes ⁴⁷
Oklahoma	10	No	Yes, if income exceeds eligibility limit	No
Oregon	10	Yes ⁴⁸	Yes, if income exceeds eligibility limit ⁴⁹	Yes
Pennsylvania	10	No	Yes, if income exceeds eligibility limit ²	No
Puerto Rico	10	Yes	Yes, all changes	Yes
Rhode Island	10	Yes	Yes, if income exceeds eligibility limit ⁵⁰	Yes
South Carolina	10	Yes	Yes, all changes	Yes

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2020

State/Territory*	Within How Many Days the Individual Must Notify the Agency of Changes	If Changes in Employment Must Be Reported	If Changes in Income Must Be Reported	If Changes in Household Composition Must Be Reported
South Dakota	10	Yes ⁵¹	Yes, if income exceeds eligibility limit	Yes ⁵²
Tennessee	10 ⁵³	Yes	Yes, all changes	Yes
Texas	14	Yes ⁵⁴	Yes, if income exceeds eligibility limit ⁵⁵	Yes
Utah	10 ⁵⁶	No	Yes, if income exceeds eligibility limit ⁵⁷	Yes ⁵⁸
Vermont	10	Yes	Yes, all changes	Yes
Virgin Islands	10 ⁵⁹	No ⁶⁰	Yes, if income exceeds eligibility limit ⁶¹	Yes
Virginia	10	No ⁶²	Yes, if income exceeds eligibility limit ⁶³	Yes
Washington	10 ⁶⁴	No ⁶⁵	Yes, if income exceeds eligibility limit	Yes ⁶⁶
West Virginia	5	Yes	No ⁶⁷	Yes
Wisconsin	10	Yes	Yes, if income exceeds eligibility limit ²	Yes
Wyoming	10	Yes	Yes, all changes	Yes

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

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

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

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

⁵ Participants must report and verify changes in income that exceed 85 percent of the state median income within 10 calendar days of the change.

⁶ The client must report any change that may affect eligibility.

⁷ Participants who are certified for assistance based on income eligibility must report and verify changes in income that exceed 85 percent of the state median income within 30 days of the change. Families with parents receiving CalWORKs cash aid at the time of a transfer from CalWORKs Stage 1 to CalWORKs Stage 2 continue to be categorically eligible for services based on their cash aid and are not obligated to report if their income exceeds 85 percent of state median income during the 12-month eligibility period, as the basis for eligibility is not income.

⁸ Participants must report and verify changes in income that exceed 85 percent of the state median income within 10 calendar days of the change. If the parent or caretaker is no longer in his or her qualifying activity, the change must be reported in writing within four calendar weeks.

⁹ If the parent or caretaker is no longer in his or her qualifying activity, the change must be reported in writing within four calendar weeks.

¹⁰ A change in household composition that would result in an increase in income above 85 percent of the state median income has to be reported.

¹¹ Families must report non-temporary changes in an approved work, education, or training activity.

- ¹² The family must report if a child receiving a subsidy is removed from the household.
- ¹³ Participants must report changes in income that exceed 85 percent of the state median income within 10 calendar days of the change.
- ¹⁴ A family must only report a change in income that results in the family's monthly income exceeding 85 percent of the state median income for the household size.
- ¹⁵ Parents are usually required to report changes in employment. However, parents who permanently lose their employment or stop attending an education or training program due to matters related to COVID-19 can continue child care services at the current level through the end of their current certification period. The parent does not need to report this permanent loss in activity.
- ¹⁶ Changes in income have to be reported when income exceeds 85 percent of the state median income.
- ¹⁷ Clients must report a change in their source of income.
- ¹⁸ Changes in income only need to be reported when monthly gross income and the source of household income is in excess of 85 percent of the state median income.
- ¹⁹ Parents must report changes by the 10th day of the month following the month in which the change occurred.
- ²⁰ Changes in income must be reported when the household's total gross income exceeds either 130 percent of the Federal Poverty Guidelines, 85 percent of state median income, or the graduated phase-out income limit as defined in the child care state plan.
- ²¹ Clients must report changes that may affect eligibility within 10 days of the change. Clients must report a job loss or a break in activity within 30 days to maintain eligibility through grace period provisions.
- ²² Only loss of employment must be reported.
- ²³ Changes in income have to be reported when income exceeds 85 percent of the state median income. When adding a household member with income, proof of current income for all CCDF household members must be provided.
- ²⁴ When adding an adult family member, the applicant must provide proof of identity and proof of service need. When adding an adult family member with income, income must be verified for all members. When adding a family member who is a child, the applicant must provide proof of identity and date of birth.
- ²⁵ Changes in employment must be reported when employment ends, and the applicant is not starting a new job.
- ²⁶ Changes in income must be reported only if the family's gross monthly income exceeds 85 percent of the state median income.
- ²⁷ Applicants must report if no child eligible for child care assistance remains in the home.
- ²⁸ Only changes in income that cause the family's gross monthly income to exceed 85 percent of the state median income must be reported.
- ²⁹ Changes in income must be reported only if the change would cause countable income to exceed 85 percent of the state median income.
- ³⁰ Families must report changes in monthly gross income above 85 percent of the state median income.
- ³¹ Increases in income must be reported if the change will result in income exceeding 85 percent of the state median income. Changes in income may be reported if the change would positively affect the department payment or authorized hours.
- ³² Most families do not need to report changes in their activity schedule, unless they stop their activity permanently. Families that request care with more than one provider per child, families that request care from a legal non-licensed (LNL) provider, and families with a parent employed by a licensed child care center must continue reporting all changes in their activity schedule.
- ³³ Participants must report changes in income that exceed 85 percent of the state median income. If income goes above 85 percent of the state median income, eligibility will end.
- ³⁴ Participants must report a change in gross monthly income that exceeds 85 percent of state median income for their family size.
- ³⁵ Parents must report a change in provider within one business day.
- ³⁶ Families must report a loss of employment, end of school, or end of training activity.
- ³⁷ A family only has to report a non-temporary job loss.
- ³⁸ Families must report and verify within 10 calendar days if a parent of a child in the assistance group moves into the household, if an individual residing in the household becomes a parent of a child in the assistance group, or if a parent adopts a child during the 12-month eligibility period.
- ³⁹ Clients must notify the department of changes that affect the need for care, which include but are not limited to any non-temporary change in activity.
- ⁴⁰ The client must report changes immediately.
- ⁴¹ Recipients must report changes to the state within 10 business days from the date of the change.
- ⁴² Only non-temporary changes in the status of a child's parent as working or attending a job training or educational program must be reported.
- ⁴³ Changes in income must be reported when a family's income exceeds 85 percent of the state median income.
- ⁴⁴ Families must report a non-temporary loss of allowable activities.

- ⁴⁵ Families must report a change in income if it causes the household's monthly gross income, minus court-ordered child and spousal support paid, to exceed the highest income level for the household size.
- ⁴⁶ Households are not required to report changes in household size except when there is no longer an eligible child in the household. Changes to household composition which are reported timely will only cause the household's benefits to increase or remain the same. Benefits will not be decreased due to a change in household size during the eligibility period unless the change involves the exit of an eligible child.
- ⁴⁷ Changes must be reported if they affect eligibility.
- ⁴⁸ Participants must report a loss of employment and the return to employment during a period of job search.
- ⁴⁹ Increases in income above the continuing eligibility threshold must be reported.
- ⁵⁰ Increases in income must be reported if the change will result in income exceeding 85 percent of the state median income. In addition to reporting changes in income, changes in the family's resources must be reported if the family's resources exceed \$1,000,000.
- ⁵¹ Only permanent changes in employment must be reported.
- ⁵² Household composition changes must be reported if a parent not previously included in the family unit returns to the home.
- ⁵³ At risk child-only, Transitional Child Care, and Smart Steps families are not required to report changes during the eligibility period. All other families have to report changes within 10 days.
- ⁵⁴ Employment changes that are non-temporary must be reported.
- ⁵⁵ Non-temporary changes in income that cause the family's income to exceed 85 percent of the state median income must be reported.
- ⁵⁶ These reporting requirements do not apply to TANF families. TANF families are only required to report changes in providers when care is being provided at no cost; changes to participation in activities that would result in the family no longer needing child care; and changes to parents' or children's schedules that result in the family no longer needing child care.
- ⁵⁷ Changes in income have to be reported when gross income exceeds 85 percent of the state median income.
- ⁵⁸ A change must be reported when a child receiving care moves out of the home.
- ⁵⁹ The parent must notify the department of any change in family circumstances immediately but not later than 10 days from the occurrence.
- ⁶⁰ Families are encouraged to report changes that increase the amount of care authorized, such as an increase in work hours. They may also report changes that decrease the copayment, such as job loss.
- ⁶¹ Families are encouraged to voluntarily report changes in income, but will not receive a decrease in subsidy if their income does not exceed 85 percent of the state median income.
- ⁶² Changes in employment including schedule, employer, and income may be voluntarily reported. Changes in employment must be reported only if it would cause the family's gross monthly income to exceed 85 percent of state median income.
- ⁶³ Changes to the family's gross monthly income that cause the total amount to exceed 85 percent of the state median income must be reported within 10 calendar days. Families must also report if they no longer have income.
- ⁶⁴ A change in providers must be reported within five days.
- ⁶⁵ Changes in employment must be reported only if the new income exceeds the eligibility limit, or if the change increases the number of hours of authorized care.
- ⁶⁶ Families must report changes in household composition if the household size increases.
- ⁶⁷ Income changes reported prior to redetermination will not affect eligibility unless the parent asks for a redetermination in order to reduce parent fees when income decreases.

Table 23. Maximum Hours Approved for Child Care Subsidies, 2020²

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

Table 23. Maximum Hours Approved for Child Care Subsidies, 2020²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid by the Subsidy	If Rest Hours are Paid by the Subsidy ⁴
Hawaii	No maximum	NA	Yes, other amount ¹⁹	Yes, no explicit maximum/at caseworker's discretion ²⁰
Idaho	No maximum	NA	Yes, 12 hours monthly ²¹	No
Illinois	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ²²	Yes, 8 hours daily ²³
Indiana	No maximum	NA	Yes, 10 hours weekly ²⁴	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ²⁵
Iowa	Varies ²⁶	No difference	Yes, no explicit maximum/at caseworker's discretion ²⁷	Yes, other amount ²⁸
Kansas	240 per month ²⁹	No difference	Yes, 1 hour daily ³⁰	Yes, 6 hours daily ³¹
Kentucky	18 per day	No difference	Yes, no explicit maximum/at caseworker's discretion ³²	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ³³
Louisiana	No maximum	NA	Yes, 1 hour daily	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ³⁴
Maine	50 per week ³⁵	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily ³⁶
Maryland	No maximum	NA	Yes, 1 hour daily ³⁷	Yes, no explicit maximum/at caseworker's discretion
Massachusetts	50 per week ³⁸	30 per week	Yes, 5 hours weekly ³⁹	Yes, other amount ⁴⁰

Table 23. Maximum Hours Approved for Child Care Subsidies, 2020²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid by the Subsidy	If Rest Hours are Paid by the Subsidy ⁴
Michigan	45 per week ⁴¹	No difference ⁴²	Yes, 5 hours weekly ⁴³	Yes, 8 hours daily
Minnesota	60 per week ⁴⁴	No difference	Yes, 2 hours daily	Yes, no explicit maximum/at caseworker's discretion ⁴⁵
Mississippi	No maximum	NA	No	No
Missouri	No maximum	NA	Yes, 2 hours daily ⁴⁶	Yes, 8 hours daily ⁴⁷
Montana	20 per day ⁴⁸	No difference	Yes, no explicit maximum/at caseworker's discretion ⁴⁹	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ⁵⁰
Nebraska	60 per week ⁵¹	No difference	Yes, no explicit maximum/at caseworker's discretion ¹⁸	Yes, 8 hours daily
Nevada	14 per day ⁵²	No difference	Yes, 2 hours daily	Yes, 8 hours daily ⁵³
New Hampshire	No maximum	NA	Yes, 1 hour daily ⁵⁴	Yes, no explicit maximum/at caseworker's discretion ⁵⁵
New Jersey	No maximum	NA	No ⁵⁶	Yes, no explicit maximum/at caseworker's discretion ⁵⁷
New Mexico	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁵⁸	No
New York	No maximum	NA	Yes, 2 hours daily ⁵⁹	Yes, 8 hours daily ⁶⁰
No. Mariana Islands	9 per day	No difference	Yes, 1 hour daily	Yes, 9 hours daily, if the subsidy is not needed during work hours
North Carolina	23 per day	No difference	Yes, no explicit maximum/at caseworker's discretion ⁶¹	Yes, no explicit maximum/at caseworker's discretion ⁶²

Table 23. Maximum Hours Approved for Child Care Subsidies, 2020²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid by the Subsidy	If Rest Hours are Paid by the Subsidy ⁴
North Dakota	No maximum	NA	Yes, other amount ⁶³	Yes, 6 hours daily
Ohio	No maximum	NA	Yes, 4 hours daily ⁶⁴	Yes, 8 hours daily
Oklahoma	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁶⁵	Yes, 8 hours daily, if the subsidy is not needed during work hours ⁶⁶
Oregon	323 per month	No difference	Yes, other amount ⁶⁷	Yes, 5 hours daily ⁶⁸
Pennsylvania	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁶⁹
Puerto Rico	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	No
Rhode Island	No maximum	NA	Yes, 1 hour daily ⁷⁰	No
South Carolina	No maximum	NA	Yes, 1 hour daily ⁷⁰	Yes, no explicit maximum/at caseworker's discretion ⁷¹
South Dakota	210 per month	No difference	Yes, no explicit maximum/at caseworker's discretion ⁷²	Yes, 8 hours daily ⁷³
Tennessee	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily
Texas	18 per day	No difference	Yes, no explicit maximum/at caseworker's discretion	No ⁷⁴
Utah	172 per month	No difference	No	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ⁷⁵
Vermont	No maximum	NA	Yes, 2 hours daily	Yes, 8 hours daily

Table 23. Maximum Hours Approved for Child Care Subsidies, 2020²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid by the Subsidy	If Rest Hours are Paid by the Subsidy ⁴
Virgin Islands	No maximum	NA	No	No
Virginia	60 per week ⁷⁶	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁷⁷
Washington	16 per day	No difference	Yes, 1 hour daily ⁷⁸	Yes, 8 hours daily
West Virginia	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ¹⁸	Yes, 8 hours daily ⁷⁹
Wisconsin	75 per week ⁸⁰	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁸¹
Wyoming	16 per day ⁸²	No difference	Yes, 1 hour daily	No

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² This table captures policies for the maximum amount of care that may be approved, and states may approve families at lower amounts of time.

³ The column captures the maximum amount of care that may be authorized for parents working part time. It does not capture the general definition of part-time care.

⁴ Rest hours apply for individuals with work shifts that cross over midnight. In this case, states may choose to pay for subsidized care while the parent rests during the day.

⁵ Reasonable travel time cannot exceed eight hours per week or the applicant's actual travel time.

⁶ Travel time is allowed for up to an hour before and an hour after the eligible activity. However, if the parent uses public transportation, or travels more than 30 miles from the provider, he or she may seek authorization to increase the allowed travel time up to one and a half hours before and one and a half hours after the activity.

⁷ Sleep time is limited to eight hours before or after the parent works a night shift that requires a minimum of six work and travel hours between 8 pm and 6 am.

⁸ Families are authorized for a maximum of 23 full-day units of care per month.

⁹ If a parent is participating in fewer than 20 hours of authorized activities per week, he or she can be authorized for a maximum of 11 full-day or 23 part-day units of care per month. A part-day unit is defined as less than six hours per day.

¹⁰ For services based on employment, travel hours cannot exceed half of the daily hours authorized for approved activities, up to a maximum of four hours per day. For services based on training towards a vocational goal, travel cannot exceed half of the weekly hours authorized for training, up to a maximum of four hours per day.

¹¹ If the parent is employed any time between 10 pm and 6 am, maximum rest hours cannot exceed the number of hours authorized for employment and travel between those hours.

¹² Child care for eligible activities includes reasonable transportation time to and from the child care location and the eligible activity. Authorization for care is based on the child's verified need, not on the parent's activity schedule.

¹³ Authorization for care is based on the child's verified need, not on the parent's activity schedule.

¹⁴ There is also a maximum of 12 hours per day and of 65 hours per week.

¹⁵ Travel time is limited to a maximum of one hour per day unless the parent verifies that additional time is needed.

- ¹⁶ Care is not authorized between 11 pm and 7 am if the child care provider is a person who resides in the same home as the child, unless the child is younger than 3 or has special needs.
- ¹⁷ Travel time may be approved for 1.5 hours each way.
- ¹⁸ The amount of time approved for travel varies on a case-by-case basis.
- ¹⁹ Travel time is authorized in accordance with the amount of care or child care rate payments the family qualifies for: full-time, two-thirds care, one-third care, or casual care.
- ²⁰ Rest hours are approved on a case-by-case basis.
- ²¹ Care is authorized for 12 hours per month, or 3 hours per week.
- ²² The amount of travel time must be reasonable based on the parent's situation and is determined on a case-by-case basis.
- ²³ If a parent works five hours or more during the third shift (defined as the hours from 11 pm to 7 am), care may be authorized during daytime hours in order for the parent to sleep if all other income and eligibility requirements are met and if the child for whom care is requested is age six or under, or during days when a school-age child is not attending school. Care can be authorized only on days that follow an overnight work schedule.
- ²⁴ Care is paid for as needed to cover actual travel time to and from an activity that confers need for child care. Authorized travel time per week may not exceed 10 hours for full-time care and 5 hours for part-time care.
- ²⁵ The amount of rest hours authorized must correspond with the family's documented service need.
- ²⁶ Families may be approved for two half-day units of service, up to five hours each, in a 24-hour period. With supervisory approval, up to four half-day units of service, up to five hours each, may be approved in a 24-hour period.
- ²⁷ Care is authorized for travel time between the child care provider's location and the parent's place of employment or school. There is no limit on travel time.
- ²⁸ Care for sleep during daytime hours may be authorized if the parent works at least six hours between 8 pm and 6 am and there is no other parent in the home or the other parent meets the need for service during the daytime hours. If the parent requests care for both work time and sleep time, one half-day unit may be approved. If the parent requests care only for the sleep time, two half-day units may be approved.
- ²⁹ A maximum of 240 hours per month is the suggested guideline, but additional hours may be approved on a case-by-case basis with approval from the caseworker's supervisor.
- ³⁰ Child care authorization must accommodate commuting time. The state suggests a maximum of 30 minutes of travel time each way. More time may be approved on a case-by-case basis.
- ³¹ Sleep time may be approved when the majority of hours are worked between 9 pm and 7 am. The state recommends a maximum of six hours of sleep time per day be approved.
- ³² Child care authorization must accommodate commuting time.
- ³³ Care is authorized for non-work hours as long as the amount of child care assistance does not exceed the amount of assistance that would be granted during employment. There is no maximum for the number of rest hours, but care is generally not approved for more than eight hours per day.
- ³⁴ If the parent works nights and does not receive child care paid for by the subsidy program while working, payments can be made for sleep time.
- ³⁵ Exceptions can be approved on a case-by-case basis by the department supervisor.
- ³⁶ Children cannot remain in care longer than 18 hours within a 24-hour period.
- ³⁷ More time can be allowed if the client produces documentation of need for more travel time.
- ³⁸ Applicants who participate in approved activities for at least 30 hours each week are eligible to receive up to 50 hours of care each week at any one placement.
- ³⁹ Before travel time may be added to an applicant's service need, the applicant must establish a minimum of at least 20 hours in an approved activity. For the purposes of establishing the minimum 20 hours of service need, the travel time is not an approved activity. Up to five hours each week may be authorized for travel time.
- ⁴⁰ Parents working at least 30 hours per week will be authorized for full-time care and parents working between 20 and 30 hours per week will be authorized for part-time care. Care for rest hours can count towards the amount of authorized care.
- ⁴¹ The maximum number of hours of care that can be authorized is 90 hours biweekly per child. A child may be authorized for any of the following increments: 20, 40, 60, 80, or 90 hours of care biweekly.
- ⁴² The maximum number of hours of care that can be authorized is 90 hours biweekly per child. At eligibility determination, verified valid need hours are added to travel hours and rounded up to either 20, 40, 60, 80 or 90 hours of authorized care per biweekly period.
- ⁴³ Ten hours are approved per biweekly pay period for each approved activity. Clients who require over ten hours per pay period for each approved activity must provide documentation supporting the need and the local office must approve the additional hours.

- ⁴⁴ The maximum number of hours of care allowed is 120 per child every two weeks. The maximum payment to an individual unlicensed provider is 50 hours per week. The maximum payment to an individual licensed provider or license exempt center is the maximum weekly rate.
- ⁴⁵ Care is authorized for non-work hours as long as the amount of child care assistance does not exceed the amount of assistance that would be granted during employment.
- ⁴⁶ Travel time is authorized based on the reasonable need of the parent, but cannot exceed one hour each way, from the child care provider to work, job training, or other activity, and from work, job training, or other activity to the child care provider. More than two hours may be approved for parents traveling to more than one eligible activity in a day.
- ⁴⁷ Care may be authorized if the parent works any part of a shift that is between 10 pm and 6 am.
- ⁴⁸ When care is provided for more than 12 but less than 18 hours per day, the full-day rate multiplied by 1.25 will be paid. When the authorization and corresponding authorization plan specify service exceeding 18 but less than 20 hours of care during a calendar day, the full-day rate multiplied by 1.5 will be paid.
- ⁴⁹ Child care is requested by the parent or referring agency based on the child's need. Child care is limited to 50 hours per week.
- ⁵⁰ A parent may choose to have child care during either work hours or rest time. The parent cannot, however, choose to have child care during both work and rest time.
- ⁵¹ The state has both a weekly limit and a daily limit. The daily limit is 18 hours of care and it must comply with the 60-hour weekly limit.
- ⁵² A child in care for more than 14 hours in a 24-hour period may be referred to child protective services.
- ⁵³ Care is authorized for clients who work midnight shifts when there is no other parent or caretaker available during that period. Rest hours are only allowed for parents of non-school-age children unless they are on summer or track break.
- ⁵⁴ One hour of standard commute time is available per each unique day that a parent is participating in an approved activity. The highest number of days is used when the participant has a regular fluctuating schedule. The number of days of approved travel does not change when the parent works an occasional extra day or days.
- ⁵⁵ Rest hours (not to exceed the number of hours worked) may be covered if the individual worked any four hours of the previous day between 10 pm and 6 am and the child would otherwise be without supervision.
- ⁵⁶ Travel time to and from the provider is covered for TANF recipients, up to 90 minutes each way between the provider and the parent's work activity.
- ⁵⁷ Full-time care is approved for families that meet the minimum work hour requirement. The amount of care approved may be used to cover work activities and sleep time as needed.
- ⁵⁸ Clients and caseworkers should negotiate a reasonable amount of study and travel time during the application or recertification process.
- ⁵⁹ Districts may authorize up to one hour of travel time each way as requested by the applicant. If the amount of travel time requested by the applicant is greater than one hour each way, then districts must request additional documentation as appropriate to determine if the amount of travel time requested is a reasonable estimate.
- ⁶⁰ Districts must provide child care assistance, if needed, to enable an employed parent or caretaker who is eligible for and in receipt of such assistance, and works non-traditional hours, to obtain up to eight hours of sleep, if the person has a child who is under the age of 6 and not in school for a full day. Districts have the option to expand coverage in their child and family services plan to enable other employed parents or caretakers who work non-traditional hours to obtain up to eight hours of sleep. The hours allowed for sleep are in addition to the hours approved for work and travel time, as needed.
- ⁶¹ Travel time is factored in when determining hours of care needed. The amount of travel time approved is determined on a case-by-case basis.
- ⁶² If a parent who works third shifts needs to sleep during the day, care may be approved during the day to help support the family.
- ⁶³ For all activities except searching for a job, an additional 25 percent can be added to the caretaker's allowable weekly activity hours to allow for travel and break time.
- ⁶⁴ Travel time is paid for up to four hours round trip.
- ⁶⁵ The amount of travel time that is authorized depends on what is reasonable for the client.
- ⁶⁶ Night work hours are defined as the hours between 11 pm and 7 am. Care may be authorized for a maximum of eight hours plus reasonable travel time.
- ⁶⁷ The system adds 25 percent to work hours to account for travel and meal time.
- ⁶⁸ Care is authorized if the caretaker works an overnight shift and care is necessary for both work and sleep hours. This would ordinarily not apply during the school year for school-age children. Sleep hours cannot be authorized for two-parent households.
- ⁶⁹ Care is authorized for sleep time upon completion of an overnight shift. The caseworker determines the amount of time approved based on the amount of time needed. There is no maximum for the number of rest hours that may be approved, but care is generally approved for either a full-time or part-time unit.

⁷⁰ Additional travel time may be authorized if there is a documented need.

⁷¹ The state may approve up to full-time care if needed.

⁷² Supplemental hours are generally calculated at 25 percent of the time spent working or in school (an additional 10 supplemental hours are added for time between classes for parents who are students). For school-age children, supplemental hours are calculated at 30 percent. Supplemental hours include travel time. When needed, more or less travel time may be approved depending on the location of the provider and the applicant's place of employment.

⁷³ Child care for sleep time is limited to eight hours per day if the applicant works at least six hours between the hours of 6 pm and 8 am.

⁷⁴ Policy coded for Gulf Coast Region.

⁷⁵ Care is authorized for non-work hours as long as the amount of child care assistance does not exceed the amount of actual work hours.

⁷⁶ If a client's employment requires him or her to work more than 60 hours some weeks, but the total amount of care for the month does not exceed 60 hours a week, payment will be made.

⁷⁷ Care can be authorized in situations where the parent works non-traditional hours and must sleep for some of the hours while the children are awake. The total number of hours covered cannot exceed that which would have been needed for work only.

⁷⁸ Thirty minutes each way is authorized by default. Caseworkers may approve more time on a case-by-case basis.

⁷⁹ Parents who work at night may be approved for a maximum of eight additional hours of sleep time. However, children cannot remain in care longer than 18 hours within a 24-hour period.

⁸⁰ Parents authorized for self-employment may not exceed 50 hours per week for related self-employment work. Travel time cannot be added on top of the 50 hours, but can be included as long as the authorization does not exceed 50 hours. Child care assistance is authorized for the number of hours the parent is involved in self-employment activities for the first 12 months of self-employment. Following the first 12 months of self-employment, the number of hours authorized for self-employment is calculated by the weekly self-employment income divided by the state minimum wage. Foster Care, court-order kinship care, and subsidize guardianship families are exempt from the limits on self-employment authorization. Instead they must submit an activity schedule to determine the authorized hours for self-employment activities.

⁸¹ Parents who work third shift may request an authorization for child care for sleep time based on the parent's need to sleep in order to remain employed. The local agency will determine a reasonable number of authorized hours based on the parent's request. The same family may also request child care for the hours of employment. The maximum hours approved for child care subsidies cannot exceed 75 hours per week.

⁸² Child care may be authorized for more than 16 hours if overnight travel is required for the parent to maintain or accept employment.

Table 24. Care During Breaks in Activities, 2020

State/Territory*	If Care May be Approved for School Breaks for Parents who are Students ²	If Care May be Approved for Maternity Leave ³
Alabama	Yes, 90 days	Yes, 90 days
Alaska	Yes, 3 months ⁴	Yes, 3 months ⁴
American Samoa	--- ¹	--- ¹
Arizona	Yes, 3 months	Yes, 3 months
Arkansas	Yes, through the end of the eligibility period	Yes, 6 weeks
California	Yes, through the end of the eligibility period ⁵	Yes, through the end of the eligibility period ⁵
Colorado	Yes, 3 months	Yes, 12 weeks
Connecticut	Yes, 3 months	Yes, through the end of the eligibility period
DC	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Delaware	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Florida	Yes, 3 months	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return
Georgia	Yes, through the end of the eligibility period ⁶	Yes, through the end of the eligibility period ⁶
Guam	Yes, 90 days	Yes, 90 days
Hawaii	Varies ⁷	Yes, 6 weeks, if job will be available upon return
Idaho	Yes, 3 months	Yes, 3 months
Illinois	Yes, 90 days ⁸	Yes, 90 days
Indiana	Yes, 16 weeks ⁹	Yes, 16 weeks
Iowa	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Kansas	Yes, 3 months ¹⁰	Yes, 3 months
Kentucky	Yes, 3 months ¹¹	Yes, 3 months
Louisiana	Yes, through the end of the eligibility period ¹²	Yes, through the end of the eligibility period ¹²
Maine	Yes, paid for entire break ¹³	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return
Maryland	Yes, 90 days	Yes, 90 days
Massachusetts	Yes, 180 days ¹⁴	Yes, 180 days ¹⁴
Michigan	Yes, through the end of the eligibility period ¹⁵	Yes, through the end of the eligibility period ¹⁵
Minnesota	Varies ¹⁶	Varies ¹⁷

Table 24. Care During Breaks in Activities, 2020

State/Territory*	If Care May be Approved for School Breaks for Parents who are Students ²	If Care May be Approved for Maternity Leave ³
Mississippi	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Missouri	Yes, paid for entire break ¹⁸	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return ¹⁹
Montana	Yes, through the end of the eligibility period ²⁰	Yes, 3 months ²¹
Nebraska	Yes, 3 months	Yes, 3 months
Nevada	No	No
New Hampshire	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
New Jersey	Varies ²²	Yes, 3 months ²³
New Mexico	Yes, 3 months	Yes, 3 months
New York	Yes, 4 weeks ²⁴	No ²⁵
No. Mariana Islands	Yes, 90 days	Yes, 90 days
North Carolina	Yes, 90 days ²⁶	Yes, 90 days ²⁷
North Dakota	Yes, paid for entire break ²⁸	Yes, 3 months
Ohio	Yes, paid for entire break ²⁹	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return ³⁰
Oklahoma	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Oregon	Yes, paid for entire break, if child will lose slot in child care program	Yes, 3 months ³¹
Pennsylvania	Yes, through the end of the eligibility period ³²	Yes, through the end of the eligibility period ³²
Puerto Rico	Yes, 2 months	Yes, 3 months ³³
Rhode Island	Yes, paid for entire break	Yes, 3 months, if job will be available upon return ³⁴
South Carolina	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
South Dakota	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Tennessee	Yes, 90 days ³⁵	Yes, 90 days
Texas	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Utah	Yes, through the end of the eligibility period ³⁶	Yes, through the end of the eligibility period
Vermont	Yes, 3 months	Yes, 12 weeks ³⁷
Virgin Islands	Yes, 60 days	Yes, 60 days ³⁸
Virginia	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period

Table 24. Care During Breaks in Activities, 2020

State/Territory*	If Care May be Approved for School Breaks for Parents who are Students ²	If Care May be Approved for Maternity Leave ³
Washington	Yes, 14 days	Yes, through the end of the eligibility period
West Virginia	Yes, 15 days ³⁹	No ⁴⁰
Wisconsin	Yes, through the end of the eligibility period	Yes, 3 months
Wyoming	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² School breaks include summer, holidays, or other periods of time when classes are not in session for parents who are students. This variable does not capture school breaks for the family's children. This variable also does not capture grace periods when a family is determined no longer eligible for a subsidy (see Table 21).

³ Maternity leave applies to working parents or guardians who are temporarily not working due to the birth of a child. This table does not capture policies for parents who are physically incapacitated (see the full database for more detail). This variable also does not capture grace periods when a family is determined no longer eligible for a subsidy (see Table 21).

⁴ For temporary breaks in eligible activities, care is approved for up to three months.

⁵ Policy coded for Non-CalWORKs Alternative Payment Program.

⁶ Parents are not required to report a change in activity requirement that is temporary. Parents also have the option to request that care be suspended for up to 12 weeks per eligibility period during school breaks or maternity leave.

⁷ Care during school breaks may or may not be authorized depending on the amount of care the family qualifies for (full-time, two-thirds care, one-third care, or casual care).

⁸ Child care eligibility may also be extended up to 30 calendar days from the date of graduation so the parent may seek employment.

⁹ Care may be approved during breaks in school for up to 16 weeks, provided the applicant plans to return to school at the end of the break.

¹⁰ Care is authorized for school breaks as long as the parent remains enrolled and is expected to return at the end of the break.

¹¹ Care may be approved during school breaks for teen parents. Care may be approved for school breaks up to three months or until the end of the eligibility period.

¹² For temporary breaks in eligible activities, care is approved until the end of the eligibility period.

¹³ A student must be enrolled for benefits to continue. During summer breaks, teen parents may continue to receive benefits if they are taking summer classes or are engaged in an approved employment activity.

¹⁴ Care is authorized for up to 180 days due to any temporary change including: any time-limited absence from an approved activity due to an illness or need to care for a family member; any interruption in work for a seasonal worker who is not working between regular work seasons; any semester or holiday work for student parents; any reduction in work, training, or education hours, as long as the parent is still participating in the approved activity; any cessation of an approved activity due to the COVID-19 emergency; any other cessation of an approved activity that does not exceed 180 days; and any change in residency within the state.

¹⁵ Care may continue through school breaks or maternity leave if it occurs during the 12-month eligibility period.

¹⁶ Care is approved during temporary school breaks during the 12-month eligibility period. For families that request care with more than one provider per child, from a legal non-licensed (LNL) provider, or where a parent in the family is employed by a licensed child care center, if the break is expected to last 15 calendar days or less, care continues to be approved during the break period. In these cases, if education is the only authorized activity, then care will be suspended for breaks lasting longer than 15 days. If the break lasts longer than 15 days and there is another authorized activity, the number of hours authorized for care will be reduced.

¹⁷ Care is approved during temporary breaks, including maternity or paternity leave, during the 12-month eligibility period. For families that request care with more than one provider per child, from a legal non-licensed (LNL) provider, or where a parent in the family is employed by a licensed child care center, the family's authorized care may be suspended following a 15-day notice when the parents have a temporary break in their work or school activity.

¹⁸ Care may be authorized as long as the break is temporary and the parent plans to return to school.

- ¹⁹ Thirty-day child care extensions during breaks in eligible activities are limited to two per calendar year.
- ²⁰ For temporary breaks in eligible school activities, care is approved until the end of the eligibility period.
- ²¹ For temporary breaks in eligible activities, care is approved for up to three months for maternity leave.
- ²² Care is authorized for up to three months for any temporary cessations in education or training activity, including student holidays or school breaks. Only one temporary cessation is allowed per 12-month eligibility period, allowing for only one school break per eligibility period.
- ²³ Care will be authorized for up to three months for a time-limited absence from work for family or medical leave. Care will only be authorized for one three-month period of leave per 12-month eligibility period.
- ²⁴ Policy coded for New York City. Districts have the option to provide child care services during a break in approved activities for a period not to exceed two weeks, or one month if child care arrangements would otherwise be lost. For TANF families, this policy is not optional. There is no maximum number of breaks per year. Districts have the option to extend breaks in activities during the COVID-19 pandemic to allow for increased absences in accordance with approved waivers.
- ²⁵ Districts may elect to pay for child care services if a parent or caretaker is physically or mentally incapacitated. A district may choose to include a mother who is physically incapacitated after the birth of her child under the definition of incapacitated.
- ²⁶ Students can receive 90 days of continued service during breaks from school or holidays. Continuation of services may be extended beyond 90 days if the agency determines such an extension is warranted.
- ²⁷ Child care services are continued for medical and maternity leave lasting up to 90 days. Continuation of services may be extended beyond 90 days if the agency determines such an extension is warranted.
- ²⁸ Care is paid for a caretaker who has a non-temporary school break if the provider charges for time during the break.
- ²⁹ If the caretaker plans to return to school following the break, a scheduled school break is considered an approved activity. If the caretaker does not plan to return, child care can be authorized for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ³⁰ If employment is available upon return, maternity leave is considered an approved activity, and the length of time approved for leave is determined by the employer. If employment is not available upon return, child care can be authorized for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ³¹ Medical verification is required to extend maternity leave beyond three months.
- ³² Parents are not required to report a change in activity during the eligibility period but have the option to request that care be suspended during a break in activity. At redetermination, if a parent has an activity to return to within 92 days of the redetermination date, presumptive eligibility may be granted.
- ³³ Care is authorized for maternity leave that is in accordance with the employer's policies, for a maximum of three months.
- ³⁴ Care may be authorized during approved leave from work for a maximum of three months. Absences beyond three months must be reported and may affect eligibility.
- ³⁵ Parents may receive 90 days of coverage to bridge gaps in eligible activities. Additionally, for teen parents, care continues during all official school breaks with no work requirements.
- ³⁶ While on a break from education, parents may choose not to use their months against the 24-month training limit.
- ³⁷ Reasonable time off is allowed to care for dependent children in instances such as death, illness, birth, or adoption. The parent must have received full-time child care services for at least a year.
- ³⁸ Care may be authorized for 60 days.
- ³⁹ If a school break exceeds 45 days, the client must select another activity in order to continue receiving child care assistance. The agency will only pay for care for 15 days of the school break period.
- ⁴⁰ Care is not authorized for maternity or paternity leave, but it can be authorized for physician-ordered bed rest.

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Alabama	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ²	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Alaska	Subsidy guaranteed	Priority over other children, subsidy not guaranteed ³	Income equal to or less than 55 percent of the state median income	Subsidy guaranteed	Subsidy guaranteed ⁴	Same priority as other CCDF-eligible children	Subsidy guaranteed
American Samoa	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ⁵	Income at or below 50 percent of the state median income	NA ⁶	NA ⁶	NA ⁶	Priority over other children, subsidy not guaranteed
Arizona	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ⁷	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Arkansas	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
California ⁸	Varies ⁹	Priority over other children, subsidy not guaranteed ⁹	Income ranked in order among eligible applicants ⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁰

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Colorado	Priority over other children, subsidy not guaranteed	Varies ¹¹	Income below 130 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Subsidy guaranteed	Varies ¹²
Connecticut	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income below 50 percent of the state median income	Priority over other children, subsidy not guaranteed ¹³	Priority over other children, subsidy not guaranteed ¹⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
DC	Subsidy guaranteed	Subsidy guaranteed	Income at or below 130 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
Delaware	Subsidy guaranteed	Subsidy guaranteed	Income below 40 percent of the Federal Poverty Guidelines prior to or after allowable deductions ¹⁵	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
Florida	Same priority as other CCDF-eligible children ¹⁶	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ¹⁷	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁸

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Georgia	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Total gross income below 50 percent of the current Federal Poverty Guidelines	Varies ¹⁹	Priority over other children, subsidy not guaranteed	Varies ²⁰	Priority over other children, subsidy not guaranteed
Guam	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Subsidy guaranteed	Priority over other children, subsidy not guaranteed
Hawaii	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ²¹	Income below 100 percent of the Federal Poverty Guidelines	Varies ²²	Priority over other children, subsidy not guaranteed ²¹	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ²¹
Idaho	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Illinois	Subsidy guaranteed	Subsidy guaranteed	Working families whose monthly incomes are at or below 185 percent of the most current Federal Poverty Guidelines	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA ²⁴

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Indiana	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Varies ²⁵	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed
Iowa	Varies ²⁶	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines ²⁷	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
Kansas	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ²⁸	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Kentucky	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed ²⁹	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Louisiana	Subsidy guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ³⁰	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ³¹
Maine	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Gross income at or below 100 percent of the Federal Poverty Guidelines	Same priority as other CCDF-eligible children	NA ³²	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Maryland	Varies ³³	Priority over other children, subsidy not guaranteed	Income less than or equal to the minimum amount listed for the applicant's family size in the state's fee schedule	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA ³⁴
Massachusetts	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ³⁵	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed ³⁶
Michigan	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Minnesota	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ³⁷	Subsidy guaranteed	Same priority as other CCDF-eligible children	NA ³⁴
Mississippi	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 50 percent of the state median income	Subsidy guaranteed	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Subsidy guaranteed
Missouri	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 15 percent of the state median income	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Montana	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Lower income, relative to family size	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ³⁸	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Nebraska	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Nevada	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 130 percent of the Federal Poverty Guidelines where the family is considered at-risk	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
New Hampshire	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed ³⁹	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁴⁰
New Jersey	Priority over other children, subsidy not guaranteed ⁴¹	Priority over other children, subsidy not guaranteed ⁴¹	Income at or below 150 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Priority over other children, subsidy not guaranteed ⁴¹	Subsidy guaranteed

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
New Mexico	Priority over other children, subsidy not guaranteed ⁴²	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed ⁴³	Same priority as other CCDF-eligible children	Subsidy guaranteed
New York	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Established by districts, set at or below 200 percent of the state income standard which defines the upper income level for families with very low income	Subsidy guaranteed ⁴⁴	Subsidy guaranteed ⁴⁴	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ⁴⁵
No. Mariana Islands	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below the 85 percent of the state median income	NA ⁶	NA ⁶	NA ⁶	Same priority as other CCDF-eligible children
North Carolina	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
North Dakota	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ³⁴

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Ohio	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Oklahoma	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Oregon	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁴⁶	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁴⁷
Pennsylvania	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ⁴⁸	Subsidy guaranteed ⁴⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Puerto Rico	Priority over other children, subsidy not guaranteed ⁵⁰	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed ⁵¹	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Rhode Island	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
South Carolina	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income below 55 percent of the state median income	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
South Dakota	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Priority over other children, subsidy not guaranteed ⁵²			
Tennessee	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Texas	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ⁵³	Subsidy guaranteed ⁵⁴	Subsidy guaranteed	Priority over other children, subsidy not guaranteed
Utah	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Vermont	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Virgin Islands	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income below 85 percent of the state median income	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Virginia	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ⁵⁵

Table 25. Priority Policies for Different Groups, 2020¹

State/Territory*	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families at Risk of Becoming Dependent on TANF	Children Under CPS
Washington	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed ^{5,6}	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
West Virginia	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Wisconsin	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
Wyoming	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 150 percent of the Federal Poverty Guidelines	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Written policies for prioritizing groups when funds are limited are captured. All groups may be served when funds are not limited. These policies are often used when a waiting list is in place. An entry of "Priority over other children, subsidy not guaranteed" indicates priority is given for the group of children, but when funds are limited the children may not be guaranteed a subsidy. For information about priority policies for essential workers during the COVID-19 pandemic, see the full CCDF Policies Database.

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

³ Parents who are working or attending school (if subsidies have been paid for full-time student status for less than five years) receive first priority and parents who are looking for work or attending school (if subsidies have been paid for full-time student status for five years or more) receive second priority. Within the priority groups, families are admitted to the program based on income ranking, with priority going in order from the lowest ranking to the highest ranking.

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

⁵ Within the very low-income priority group, single-parent households are given first priority and two-parent households are given second priority.

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

⁷ There are varying priority levels depending on income.

⁸ All families who meet eligibility and need requirements and who were previously enrolled in emergency child care prior to June 30, 2020, have priority for enrollment into ongoing subsidized child care over any other family on the waitlist.

- ⁹ Policy coded for Non-CalWORKs Alternative Payment Program. Among families who are eligible for child care subsidies based on income, families are admitted to the program according to income ranking, with priority going in order from the lowest ranking to the highest ranking. If two or more families have the same income rank, families with children with exceptional needs are admitted first.
- ¹⁰ First priority is given to children receiving child protective services and then to children at risk of abuse, neglect, or exploitation.
- ¹¹ Whether or not the subsidy is guaranteed may vary depending on whether enrollment at the county level is suspended or partially suspended. If a county chooses to partially suspend enrollment, the county must develop policies for which groups of applicants are given priority. Statewide, priority is given to applicants with very low income (below 130 percent of the Federal Poverty Guidelines), families experiencing homelessness, and children of teen parents. The county may assign additional priority groups.
- ¹² Counties have the option of prioritizing children in foster care.
- ¹³ The policy applies to parents receiving TANF who are employed or in an approved activity.
- ¹⁴ Families with working parents whose cash assistance benefits were discontinued in the past five years receive second priority.
- ¹⁵ Deductions include housing-related expenses such as rent, mortgage, insurance, property taxes, monthly utility expenses, telephone expenses, and unreimbursed medical costs.
- ¹⁶ A child who has special needs, has been determined eligible as a student with a disability, has a current individual education plan with a school district, and is not younger than three years of age but not yet eligible for admission to kindergarten is given priority.
- ¹⁷ This priority is given to children who have not yet started kindergarten and are not enrolled concurrently in Pre-K and Head Start.
- ¹⁸ This priority is given to children under the age of nine who are not enrolled concurrently in Pre-K and Head Start.
- ¹⁹ Applicants participating in TANF job search or work activities are given priority.
- ²⁰ Families are considered at risk of becoming dependent on TANF if they have completed TANF orientation, been determined income-eligible for TANF, and have been referred for employment services.
- ²¹ Families with the least amount of monthly income are given first priority within the priority group.
- ²² If the family receives TANF and is considered very low-income with income below 100 percent of the Federal Poverty Guidelines, the family falls into priority group three and is given priority over other families.
- ²³ All CCDF-eligible children receive the same priority.
- ²⁴ The state's child welfare and protection agency pays for child care provided for child protective services and foster care. To ensure continuity of care, families with CPS cases that are transitioning out of the state system are eligible to receive an additional six months of child care through the Child Care Assistance Program. Families receive six months of child care services regardless of participation in eligible activities.
- ²⁵ The subsidy is guaranteed for families in the TANF work program. Families receiving TANF but not in the work program are prioritized but not guaranteed a subsidy. If CCDF program funding is not available to serve an eligible TANF work program family, other families must be terminated to release funding. Families with higher incomes who have received CCDF assistance for a longer period of time are the first to be terminated when funds are unavailable for families with higher priority.
- ²⁶ Children with special needs are given priority if the family's income is below 200 percent of the Federal Poverty Guidelines and the parents are working at least 28 hours per week.
- ²⁷ Priority for families with very low-income is limited to parents who are working or participating in an education or training program in aggregate of 28 hours per week, under age 21 participating in an education program that will lead to a high school diploma or its equivalent, or under age 21 and participating in an approved training or education program.
- ²⁸ Families participating in work programs and receiving TANF or SNAP benefits are provided child care benefits without being placed on a waiting list.
- ²⁹ Applicants are given priority if they are working or participating in work preparation activities.
- ³⁰ Families receiving TANF and participating in the TANF work program are given priority.
- ³¹ Children are guaranteed subsidized child care if it is part of the approved family services plan.
- ³² Families transitioning off TANF are eligible for care under a separate Transitional Child Care Program.
- ³³ Primary consideration within each priority group is given to children with special needs or those displaying evidence of homelessness.
- ³⁴ Child protective services child care is not provided under the state's primary child care subsidy program.
- ³⁵ If families have a referral with the department that administers TANF, they are given immediate access to child care without having to be placed on a waiting list.

- ³⁶ The state's department for children and families may authorize care on a case-by-case basis for families with active protective needs documented in a supported report of abuse or neglect within the previous 12 months or when there is a determination of need to begin or continue supportive child care at a supervisory progress review.
- ³⁷ In addition to TANF cash assistance, families in the four-month TANF diversionary work program can receive care for those four months.
- ³⁸ When a family transitions from TANF cash assistance and receives a TANF work support payment, it is still considered a TANF family until the end of the month in which the work support payment was received.
- ³⁹ Children are given priority if TANF assistance ended within the past 92 calendar days.
- ⁴⁰ Children whose preventive or protective child care service has closed within the past 92 calendar days are given priority.
- ⁴¹ Priority for subsidies is ranked according to three income-based tiers, A, B, and C. Tier A is given first priority and consists of families with income at or below 150 percent of the Federal Poverty Guidelines, followed by Tier B for families with income from 151 to 175 percent of the Federal Poverty Guidelines, and finally, Tier C for families with income from 176 to 200 percent of the Federal Poverty Guidelines. Priority is given according to tier and then to each of the priority categories within each tier.
- ⁴² Children with special needs are prioritized within the very low income priority group and the income group above 100 and at or below 200 percent of the Federal Poverty Guidelines priority group, but do not make up their own priority group.
- ⁴³ Families must have received TANF benefits for at least one month in the last 12 months and have their TANF cases closed at least in part due to increased earnings or a loss of earned income disregards.
- ⁴⁴ State policy guarantees subsidized care for TANF families participating in work activities, families who are eligible for public assistance and choose to receive child care assistance in lieu of public assistance, and families transitioning off of TANF who are engaged in work.
- ⁴⁵ Policy coded for New York City. Eligibility and priority are determined at the district level.
- ⁴⁶ Families must have received TANF benefits for at least one month within the last three months.
- ⁴⁷ Families working with a protective services caseworker may be eligible for child care assistance if it prevents the child from being removed from his or her home, allows the child to be returned home, or allows the child to be placed with a relative or adult with whom the child or family has an established relationship.
- ⁴⁸ Families participating in TANF employment and training activities are guaranteed subsidies.
- ⁴⁹ The subsidy is guaranteed if the family is applying within 183 days of transitioning off of TANF.
- ⁵⁰ Children with special needs as certified by the health department or department of education are given priority regardless of whether they meet the income requirements.
- ⁵¹ The policy applies to parents receiving TANF who are employed.
- ⁵² The child must be under court supervision.
- ⁵³ Subsidies are guaranteed for families enrolled in the TANF work program and other TANF applicants eligible for child care assistance.
- ⁵⁴ Assistance is guaranteed for families eligible for at-risk child care if they received child care through the TANF employment and training program and their TANF was denied or voluntarily ended within the last 12 months due to employment or an earnings increase.
- ⁵⁵ The priority for children in protective services also includes children in foster care prevention.
- ⁵⁶ Families applying for or receiving TANF are given first priority. Families receiving TANF and working to cure a sanction are given second priority.

Table 26. Priority Policies for Different Groups (continued), 2020¹

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

Table 26. Priority Policies for Different Groups (continued), 2020¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
DC	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Subsidy guaranteed	Subsidy guaranteed ¹¹	Same priority as other CCDF-eligible children
Delaware	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ¹²	Same priority as other CCDF-eligible children	Subsidy guaranteed ¹³	Same priority as other CCDF-eligible children
Florida	Priority over other children, subsidy not guaranteed ¹⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁵	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Georgia	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁶	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Guam	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Hawaii	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ¹⁷	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Idaho	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Illinois	NA ¹⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ²⁰	Same priority as other CCDF-eligible children
Indiana	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2020¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Iowa	Same priority as other CCDF-eligible children ²¹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children ²²	Priority over other children, subsidy not guaranteed ²²	Same priority as other CCDF-eligible children
Kansas	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Kentucky	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Varies ²³	Priority over other children, subsidy not guaranteed ²⁴	Same priority as other CCDF-eligible children
Louisiana	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Maine	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Maryland	NA ¹⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Massachusetts	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Michigan	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Minnesota	NA ¹⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ²⁵	Priority over other children, subsidy not guaranteed ²⁶

Table 26. Priority Policies for Different Groups (continued), 2020¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Mississippi	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Varies ²⁷	Priority over other children, subsidy not guaranteed ²⁷	Priority over other children, subsidy not guaranteed ²⁸
Missouri	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Montana	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Nebraska	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Nevada	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
New Hampshire	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ²⁹
New Jersey	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ³⁰	Priority over other children, subsidy not guaranteed ³⁰	Priority over other children, subsidy not guaranteed ³⁰	Same priority as other CCDF-eligible children
New Mexico	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
New York	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2020¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
No. Mariana Islands	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
North Carolina	Priority over other children, subsidy not guaranteed ³¹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children ³²	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children ³¹	Same priority as other CCDF-eligible children
North Dakota	NA ³³	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Ohio	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Oklahoma	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Oregon	Subsidy guaranteed ³⁴	Varies ³⁵	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Pennsylvania	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Puerto Rico	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Rhode Island	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
South Carolina	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2020¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
South Dakota	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ³⁶	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Tennessee	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Texas	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed			
Utah	NA ³⁷	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Vermont	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Virgin Islands	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Virginia	Same priority as other CCDF-eligible children ³⁸	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Washington	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ³⁹	Same priority as other CCDF-eligible children
West Virginia	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸
Wisconsin	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸	NA ¹⁸

Table 26. Priority Policies for Different Groups (continued), 2020¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Wyoming	Same priority as other CCDF-eligible children						

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Written policies for prioritizing groups when funds are limited are captured. All groups may be served when funds are not limited. These policies are often used when a waiting list is in place. An entry of "Priority over other children, subsidy not guaranteed" indicates priority is given for the group of children, but when funds are limited the children may not be guaranteed a subsidy. For information about priority policies for essential workers during the COVID-19 pandemic, see the full CCDF Policies Database.

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

³ If the family is classified as child protective services due to homelessness resulting from a natural disaster, the family is given priority as long as funds are available.

⁴ Families with a minor parent are considered to have special needs and given priority over other families.

⁵ To receive priority, the child's biological parent must require child care assistance in order to serve in the military. For two-parent households, the second parent must also be engaged in a qualifying activity.

⁶ In order to receive priority, the family must be residing in a homeless shelter.

⁷ All families who meet eligibility and need requirements and who were previously enrolled in emergency childcare prior to June 30, 2020, have priority for enrollment into ongoing subsidized childcare over any other family on the waitlist.

⁸ Counties have the option of prioritizing children in foster care.

⁹ Whether or not the subsidy is guaranteed may vary depending on whether enrollment at the county level is suspended or partially suspended. If a county chooses to partially suspend enrollment, the county must develop policies for which groups of applicants are given priority. Statewide, priority is given to applicants with very low income (below 130 percent of the Federal Poverty Guidelines), families experiencing homelessness, and children of teen parents. The county may assign additional priority groups.

¹⁰ Priority applies to parents under the age of 20 who attend high school. All parents receiving cash assistance, including teen parents, are in the highest priority group.

¹¹ All parents under age 26 in high school or GED activities are included in this category.

¹² Families experiencing homelessness are provided care for up to three months or until they find suitable living arrangements.

¹³ Participants may be attending middle school, high school, adult basic education classes, GED classes, or a similar program approved by the state department of education.

¹⁴ This priority is given to children under the age of nine who are not enrolled concurrently in Pre-K and Head Start. Eligible children enrolled concurrently in Pre-K and Head Start are given last priority.

¹⁵ Families must have a documented referral from a certified homeless shelter or domestic violence shelter. This priority is given to children under the age of nine who are not enrolled concurrently in Pre-K and Head Start.

¹⁶ Children in state-funded Pre-K programs are given priority for before-and-after care. Children enrolled in privately funded Pre-K programs are not given priority and are treated the same as other CCDF-eligible children.

¹⁷ If the family is employed, experiencing homelessness, and has income less than 100 percent of the Federal Poverty Guidelines, the family is given priority over other families.

- ¹⁸ All CCDF-eligible children receive the same priority.
- ¹⁹ Foster child care is not provided under the state's primary child care subsidy program.
- ²⁰ In order to be eligible for a priority service group, teen parents must be enrolled full time in elementary school, high school, or GED classes to obtain a high school degree or its equivalent. Teen parents who are in school retain priority through age 19.
- ²¹ Only non-licensed relative foster families receive child care through the CCDF program.
- ²² First priority is given to minor parents working towards a high school diploma or its equivalent. Second priority is given to minor parents who are participating in an approved training program if the family's income is below 100 percent of the Federal Poverty Guidelines.
- ²³ If the teen parent is a TANF recipient, or attending high school or pursuing a general equivalency degree (GED), he or she is given priority over others.
- ²⁴ Families with teen parents are given priority over other children if the teen parents are attending high school or pursuing a general equivalency degree (GED).
- ²⁵ Parents under age 18 are given priority over parents age 18 to 20 within this group. This group is eligible for child care assistance under the TANF program if the teen parent in school is under 21 years old, pursuing a high school or general equivalency diploma, not a TANF participant, and lives in a county that has a waiting list. The teen parent is placed in the first priority group for the waiting list.
- ²⁶ Priority is given to families in which at least one parent in the assistance unit is a veteran.
- ²⁷ Teen parents must generally be enrolled full time in high school or attending a full-time educational program. If the teen parent has been legally emancipated from their parent, the teen parent must either meet the work requirement or be enrolled full-time in an education or training program.
- ²⁸ Children of parents deployed in the Mississippi National Guard or Reserve qualify for this priority status at up to 85 percent of the state median income.
- ²⁹ A child receiving child care subsidies with a single parent who is placed on orders or deployed for military service and will be out of the state for more than 30 days is exempt from the wait list if the child's legal guardian is determined eligible.
- ³⁰ Priority for subsidies is ranked according to three income-based tiers, A, B, and C. Tier A is given first priority and consists of families with income at or below 150 percent of the Federal Poverty Guidelines, followed by Tier B for families with income from 151 to 175 percent of the Federal Poverty Guidelines, and finally, Tier C for families with income from 176 to 200 percent of the Federal Poverty Guidelines. Priority is given according to tier and then to each of the priority categories within each tier.
- ³¹ Counties have local options for how to prioritize these families when they have a waiting list in place.
- ³² Children in Pre-K are only eligible for wraparound care. Counties have local options for how to prioritize these families when they have a waiting list in place.
- ³³ All CCDF-eligible children receive the same priority. Children in licensed foster care are not eligible. Children in unlicensed foster care settings are eligible under the same requirements as other families.
- ³⁴ A child involved with protective services may be eligible for child care assistance if it allows the child to be placed with a relative or adult with whom the child or family has an established relationship.
- ³⁵ The subsidy is guaranteed if the child is in a Head Start contracted slot. If the child is not in a contracted slot, the subsidy is not guaranteed.
- ³⁶ When a family experiencing homelessness applies for the subsidy, the family can receive care for up to 30 days while the application is reviewed and verified. At the end of 30 days, if the family is eligible they will continue to receive the subsidy. If the family is ineligible, their case will be closed but the care received would not be considered an overpayment.
- ³⁷ Foster care parents are not eligible for child care benefits for their foster children. This includes the child of a teen parent in foster care.
- ³⁸ Child care for foster children is not provided under the state's primary child care subsidy program. A foster child may receive CCDF funding if a local department maintains custody of the child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.
- ³⁹ Teen parents who are not living with a parent or guardian and are attending high school full time with an on-site child care center receive priority.

IV. Family Copayments

Each State/Territory sets its own policies for family payments, often termed “copayments,” within the broader federal guidelines on sliding fee scales.⁵⁹ Copayment amounts often vary by family size, income, number of children in care, and a variety of other factors. The family’s copayment is applied toward the maximum amount the State/Territory will pay to the provider, also known as the “reimbursement rate” (discussed in more detail in section V below).

Under the federal guidelines, States/Territories may choose to waive copayments in some cases.⁶⁰ Across the States/Territories, copayment exemptions vary based on the family’s income, participation in another assistance program, or other characteristics, such as the special needs of a child.

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

States/Territories use a variety of methods to calculate copayments, including a flat dollar amount, percent of income, and percent of the price of care or maximum rate, and the amounts and percentages usually vary across state-established income bands. Some States/Territories use a combination of approaches, such as using a flat dollar amount for lower-income families while using a percentage, capped at a predetermined amount, for higher-income families. Additionally, States/Territories may set a minimum copayment for all families and may adjust copayments based on the number of children in care or the amount or type of care needed.

Copayment Exemptions (Tables 27 and 28)

Many programs exempt at least some families from paying any copayment (in other words, these families receive child care for free). One commonly used exemption is to exempt all families living in poverty from having to pay a copayment; States/Territories that use this exemption may use the current poverty guidelines or an earlier year’s guidelines. States/Territories may also choose to exempt families receiving

⁵⁹ Under federal CCDF guidelines, States/Territories must establish and periodically revise a sliding fee scale based on income and family size; other factors may also be considered. Federal policy does not establish maximum copayments, but HHS/ACF documents have suggested that copayments of no more than 10 percent of family income would generally be considered affordable.

⁶⁰ Federal guidelines allow States/Territories to waive copayments for families with income at or below the Federal Poverty Guidelines or for families in need of protective services. How States/Territories define families in need of protective services varies and may include such groups as families with teen parents or foster children. As stated earlier, when State/Territory policies appear to conflict with federal guidelines, it is assumed that State/Territory dollars are used to fund those aspects of the program.

benefits or services from certain other programs. Table 27 shows whether each State/Territory exempts families from paying copayments when the family has income below the poverty guidelines, receives one of several benefits or services, or meets certain characteristics. Highlights for 2020 include:

- Sixteen States/Territories exempt all families with income below 100 percent of the Federal Poverty Guidelines from paying copayments, with the year of the poverty guidelines used by these States/Territories ranging from 2013 to 2020 (the current guidelines as of October 1, 2020).
- Three States (Maryland, Michigan, and Oklahoma) exempt SSI recipients from paying copayments.
- Two States (Pennsylvania and Texas) fully exempt participants in the SNAP Employment and Training program from paying copayments, while two more States (Kansas and Virginia) allow exemptions for SNAP Employment and Training program participants in some situations.
- Seven States have some type of copayment exemption for families with teen parents. In some of these cases, the teen parent must be attending school.
- One State (Missouri) has established copayment exemptions for families with children with special needs.
- Thirty-eight States/Territories allow copayment exemptions for families with CPS cases in some or all circumstances, while 34 States/Territories have a copayment exemption for families with foster children. In the case of foster care and child protective services cases, it is common for States/Territories to allow for a copayment exemption on a case-by-case basis, as determined by the family's caseworker in the CPS or foster care program.

Table 28 focuses on the extent to which families associated in some way with the TANF program are exempt from paying copayments. Subsets of TANF families examined in the table include families receiving TANF who have versus do not have earned income, "child-only" TANF families (cases when the parents or guardians are not considered part of the TANF assistance unit), families transitioning out of the TANF program, families applying for TANF benefits, and families at risk of becoming dependent on TANF.⁶¹ Key findings from 2020 include:

- Twenty States exempt all families currently receiving TANF from paying copayments.

⁶¹ The TANF program excludes parents or guardians from the assistance unit for five reasons: when the child is living with non-parent relative caretakers (usually grandparents) and they are either not allowed to be in the assistance unit or they choose not to be included; when the parents are ineligible due to immigrant status (for instance, the parents are undocumented immigrants but the children are citizens); when the parents receive SSI; when the parents have been excluded from the unit due to a sanction; and, in a small number of States, when the parents have been excluded from the unit after reaching a time limit.

- Eight States have some type of copayment exemption for families transitioning off TANF, while 14 States/Territories have established copayment exemptions for families in the process of applying for TANF benefits.
- Two States (North Dakota and Vermont) have established copayment exemptions for families at risk of becoming dependent on TANF.

In response to the COVID-19 pandemic, several States/Territories waived copayments for all families for some period of time. If the copayments were waived for all families as of October 1, 2020, this policy is reflected in tables 32-34. Footnotes to the tables show if the policies were adopted in response to the pandemic. Information about copayments prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁶²

Copayment Administration (Table 29)

Copayment policies regarding how and what families are expected to pay also vary across the States/Territories. Table 29 provides policies for who collects the copayment, whether families are expected to pay providers for any charges that exceed the maximum reimbursement rate (the amount States/Territories will pay the provider, described in more detail in section V), and what families are required to pay for absences, including days the child is out sick, days the family is on vacation, and days the provider is not open due to approved closings, such as national holidays. When the child is absent from care, the State/Territory may require the parent to still pay the provider a copayment or pay both the standard copayment and the amount the State/Territory would reimburse providers (the entire price of care). Highlights from 2020 include:

- All but three States/Territories (California, the Northern Mariana Islands, and Puerto Rico) require all copayments to be paid to the provider. Additionally, American Samoa does not require families to make copayments.
- Twelve States do not allow providers to charge families the difference when the price of care is higher than the maximum reimbursement rate. In some States/Territories, the parents may be asked to pay the difference only under certain circumstances or only for certain types of

⁶² For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

providers. (Tables 36 through 38 give State/Territory maximum rates for different types of providers.)

- In a majority of States/Territories, the family continues to pay the same copayment when the child is ill or on vacation. In two States (Oklahoma and West Virginia), parents are not required to pay any copayment for days the child is absent due to the child being ill or on family vacation.
- A majority of the States/Territories require the parent to pay the regular copayment for days when the child care provider is closed. Five States/Territories (Guam, Nebraska, Ohio, Oklahoma, and West Virginia) do not require parents to pay a copayment for days the provider is closed, while three States (Georgia, New Hampshire, and South Dakota) require parents to pay the entire price of care.

As noted above, in response to the COVID-19 pandemic, several States/Territories waived copayments for all families for some period of time. If the copayments were waived for all families as of October 1, 2020, this policy is reflected in tables 32-34. Footnotes to the tables show if the policies were adopted in response to the pandemic. Information about copayments prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁶³

Copayment Calculation (Table 30)

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

⁶³ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

income.⁶⁴ When States/Territories set copayments as a percentage of the price of child care, the percentage varies depending on family income.⁶⁵

Table 30 shows each State's/Territory's basic computation method and indicates if each State/Territory uses a different income definition for computing copayments or has a minimum copayment policy.⁶⁶ Key findings from 2020 include:

- In 34 States/Territories, copayments are specific dollar amounts based on set income ranges. In twelve States, copayments are specific percentages of family income based on set income ranges. In five States/Territories, copayments are a percentage of the price of child care or of the maximum reimbursement rate. In four States, the copayment is calculated using a more complex formula, such as using a combination of dollar amounts and percentages.
- Only New York uses different income definitions for establishing eligibility versus copayments. New York's copayment calculation uses only the portion of income that exceeds the poverty guideline.
- Ten States have explicitly defined minimum copayment amounts for all families, which may supersede the minimum copayment produced by the established fee schedule. Minimum copayments are expressed as monthly dollar amounts (ranging from \$1 per month in Illinois to \$27 per month in Oregon), weekly dollar amounts (ranging from \$3 per week in New York City to \$5 per week in Pennsylvania), or a percentage of the price of care (five percent of the price of care in Nevada). In these States, if the standard formula (such as a percentage of income) would result in a copayment lower than the State statutory minimum, the family instead pays the State statutory minimum copayment.

Copayment Adjustments (Table 31)

Three issues that may affect copayments are the number of children receiving subsidized care, whether care is full time or part time, and whether care is being provided for a child with special needs. If a State/Territory computes copayments using dollar amounts that vary with family income level or as a

⁶⁴ Most States now only require families to report changes in income if their new income exceeds the eligibility limit. In these States, if the copayment amount is based on a percentage of income, the family's copayment would only change if the family chose to report a decrease in income.

⁶⁵ The CCDF Final Rule no longer allows States/Territories to set copayments as a percentage of the price of care. As the remaining States/Territories update their policies, this information will be reflected in the CCDF Policies Database and future tables.

⁶⁶ Some States/Territories waived copayments for a period of time during the COVID-19 pandemic. If the copayments were waived, and the minimum copayment policy shown in this table did not apply, for all families as of October 1, 2020, this policy is reflected in tables 32-34.

percentage of family income, the State/Territory must determine whether to vary the copayments based on the number of children in care, the hours of child care, or the need for special-needs care. Table 31 describes these policies.

Highlights from 2020 concerning copayments for families with more than one child in care include:

- In 28 States/Territories, the copayment is a dollar amount or percentage of income and is family-level; it does not vary depending on the number of children in the family who are receiving subsidized child care.
- In eight States/Territories, the copayment is a dollar amount or percentage of income and is per-child; the family's copayment equals the per-child copayment multiplied by the number of children receiving subsidized child care.
- In five States/Territories with a copayment equal to a dollar amount or percentage of income, the copayment is adjusted by a set percentage when more than one child is in care. Rather than paying the same amount for each child, the family pays a lower fee for the additional children in care. In these States/Territories, the copayment for the second child ranges from 50 percent of the one-child copayment to 75 percent of the one-child copayment. Copayment adjustments for the third child in care range from 25 percent of the one-child copayment to 50 percent of the one-child copayment.
- In nine States, the copayment is adjusted for additional children in care, and the amount of the adjustment varies by family income range.
- Five States/Territories set copayments as a percent of the maximum reimbursement rate or price of care. These States/Territories do not establish separate policies for copayment adjustments based on the number of children in care; in general, the higher price of care for more children will result in a higher copayment.

Highlights from 2020 concerning part-time care and care for children with special needs include:

- Among the States/Territories that compute copayments as a dollar amount or a percentage of family income, more than half make no adjustment to the copayment when the child is in care part time. Among the States/Territories that do adjust the copayment for part-time care, the adjustments range from 50 to 75 percent of the full-time copayment.
- Three States/Territories (Mississippi, Missouri, and South Dakota) make some type of adjustment to the copayment for children with special needs. Missouri does not require any copayment for children with special needs, Mississippi asks families with children with special needs to pay only

\$10 per month, and South Dakota caps the copayment at 10 percent of the family's gross monthly income.

As noted above, in response to the COVID-19 pandemic, several States/Territories waived copayments for all families for some period of time. If the copayments were waived for all families as of October 1, 2020, this policy is reflected in tables 32-34. Footnotes to the tables show if the policies were adopted in response to the pandemic. Information about copayments prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁶⁷

Copayment Amounts (Tables 32, 33, and 34)

After determining income level and family size, each family in need of care (and not exempt from copayments) is assigned a copayment amount. The amounts vary greatly across States/Territories. In some States, copayments also vary across counties or regions. Tables 32, 33, and 34 provide copayments for select family sizes and income levels. For the States in which copayments vary in different areas of the State, the copayments shown in the tables are for the most populous area of the State.

The three tables each focus on a different family situation. Table 32 shows copayments for a single-parent family with a two-year-old child, table 33 looks at a single-parent family with a two-year-old and a four-year-old, and table 34 gives copayments for a two-parent family with a two-year-old and a four-year-old. For each family makeup, the table shows the monthly copayment in each program for several different annual earnings levels.

The copayments in the tables are the result of applying each State's/Territory's detailed copayment policies to each hypothetical family situation; copayments that are expressed by the State/Territory in hourly, daily, or weekly terms are all converted to monthly terms for cross-State/Territory comparability. The tables all assume that the children are in center-based child care for eight hours per day, five days per week; none of the children have special needs; all income is earned income; the earnings are received evenly over the year; and that the parents receive applicable State/Territory earned income disregards. In States/Territories that base the copayment on a percentage of the price of care, the maximum reimbursement rate is used to calculate the copayment amount. Finally, for purposes of noting when a

⁶⁷ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

family at a particular earnings level is no longer eligible for the subsidy, the table assumes the family is just beginning to receive subsidies. (In other words, the initial eligibility thresholds are used rather than the continuing eligibility thresholds.) Further assumptions made for each table are noted below.

Table 32 provides monthly copayments for a two-person family. In addition to the assumptions noted above, the table also assumes the family consists of one parent and one child, and the child is 24 months old. (The age of the child most commonly affects copayments that are based on a percentage of the price of care or maximum reimbursement rate.) Key findings from 2020 include:

- Copayments for a two-person family with \$15,000 in annual earnings range from \$0 per month in 30 States/Territories to \$125 per month in North Carolina. The median monthly copayment across the States/Territories for a family with those characteristics is \$0. A two-person family at this income level does not qualify for subsidized care in one State/Territory (Puerto Rico).
- Copayments for a two-person family with \$20,000 in annual earnings range from \$0 per month in 20 States/Territories to \$173 per month in Kentucky. The median monthly copayment across the States/Territories is \$46. In one State/Territory (Puerto Rico), a two-person family at this income level does not qualify for subsidized care.
- Copayments for a two-person family with \$25,000 in annual earnings range from \$0 per month in 18 States/Territories to \$292 per month in Montana. The median monthly copayment across the States/Territories is \$51. In nine States/Territories, a two-person family at this income level does not qualify for subsidized care.
- Copayments for a two-person family with \$30,000 in annual earnings range from \$0 per month in 12 States/Territories to \$350 per month in New Hampshire. Across the States/Territories, the median monthly copayment is \$100. In 21 States/Territories, a two-person family at this income level does not qualify for subsidized care.

Table 33 provides monthly copayments for a three-person family. In addition to the assumptions used for all the copayment amount tables, the table assumes the family consists of one parent and two children, ages 24 months and 48 months. Key findings from 2020 include:

- Copayments for a three-person family with \$15,000 in annual earnings range from \$0 per month in 33 States/Territories to \$138 per month in Missouri. The median monthly copayment across the States/Territories is \$0.
- Copayments for a three-person family with \$20,000 in annual earnings range from \$0 per month in 30 States/Territories to \$230 per month in Missouri. The median monthly copayment is \$0. A

three-person family at this income level does not qualify for subsidized care in one State/Territory (Puerto Rico).

- Copayments for a three-person family with \$25,000 in annual earnings range from \$0 per month in 19 States/Territories to \$238 per month in Kentucky. The median monthly copayment across the States/Territories is \$64. A three-person family at this income level does not qualify for subsidized care in one State/Territory (Puerto Rico).
- Copayments for a three-person family with \$30,000 in annual earnings range from \$0 per month in 18 States/Territories to \$326 per month in Nevada. Across the States/Territories, the median monthly copayment is \$76. In eight States/Territories, a three-person family at this income level does not qualify for subsidized care.

Table 34 provides monthly copayments for a four-person family. This table uses the same basic assumptions as the other copayment amount tables, and it also assumes the family consists of two parents and two children, ages 24 months and 48 months. Highlights from 2020 include:

- Copayments for a four-person family with \$25,000 in annual earnings range from \$0 per month in 30 States/Territories to \$230 per month in Missouri. The median monthly copayment is \$0. A four-person family at this income level does not qualify for subsidized care in one State/Territory (Puerto Rico).
- Copayments for a four-person family with \$30,000 in annual earnings range from \$0 per month in 20 States/Territories to \$282 per month in Kentucky. Across the States/Territories, the median monthly copayment is \$65. A four-person family at this income level does not qualify for subsidized care in one State/Territory (Puerto Rico).
- Copayments for a four-person family with \$35,000 in annual earnings range from \$0 per month in 19 States/Territories to \$350 per month in Montana. The median monthly copayment is \$79. In seven States/Territories, a four-person family at this income level does not qualify for subsidized care.
- Copayments for a four-person family with \$40,000 in annual earnings range from \$0 per month in 17 States/Territories to \$461 per month in Vermont. The median monthly copayment is \$95. In 13 States/Territories, a four-person family at this income level does not qualify for subsidized care.

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

In response to the COVID-19 pandemic, several States/Territories waived copayments for all families for some period of time. If the copayments were waived for all families as of October 1, 2020, this policy is reflected in these tables, with a copayment of \$0. The table footnotes explain the policy for waiving the copayments during the pandemic. Information about copayments prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁶⁸

Changes in Copayment Policies from 2019 to 2020

From 2019 to 2020, three States/Territories made changes to policies related to copayment administration. Montana and Nebraska changed their policies for what families pay for absences due to illness or vacation, with both states now continuing to provide subsidies in most cases, with the families only responsible for the copayment. New York City lowered its minimum copayment from \$15 weekly to \$3 weekly. An additional eight States/Territories updated the year of the poverty guidelines used when exempting families with income below poverty from paying copayments.

Although there were relatively few changes in copayment administration, there were many changes in copayment amounts. From 2019 to 2020, there were changes in copayment amounts captured in the tables in 39 States/Territories, with the majority of States/Territories that implemented changes decreasing their copayment. For example, copayment amounts for a two-person family with \$15,000 in annual earnings increased in 4 States/Territories and decreased in 12. Copayment amounts for a two-person family with \$20,000 in annual earnings changed in 26 States/Territories, increasing in 6 and decreasing in 20. Copayment amounts for a two-person family with \$25,000 in annual earnings increased in 2 States/Territories and decreased in 20. Two-person families with \$25,000 were newly eligible in three States/Territories (Georgia, Iowa, and Michigan).⁶⁹ Copayment amounts for a two-person family with \$30,000 in annual earnings increased in 2 States/Territories and decreased in 19. In Michigan, two-person families at this income level were not eligible in 2019, but they were eligible in 2020.

From 2019 to 2020, copayment amounts for a three-person family with \$15,000 in annual earnings changed in 19 States/Territories, increasing in 3 and decreasing in 16. Copayments for a three-person

⁶⁸ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

⁶⁹ Because the annual income amounts used for these tables have been held constant across the report series, some increases in the number of States/Territories allowing eligibility at a particular nominal income level may be due to States/Territories increasing their eligibility limits in proportion to the degree of inflation.

family with \$20,000 in annual earnings increased in 4 States/Territories and decreased in 13. Copayment amounts for a three-person family with \$25,000 in annual earnings changed in 23 States/Territories from 2019 to 2020, increasing in 5 and decreasing in 18. Copayments for a three-person family with \$30,000 in annual earnings changed in 25 States/Territories, increasing in 2 and decreasing in 23. In two States/Territories (Michigan and Nevada), three-person families at this income level were not eligible in 2019, but they were eligible in 2020.

From 2019 to 2020, copayments for a four-person family with \$25,000 in annual earnings changed in 18 States/Territories, increasing in 5 and decreasing in 13. Copayments for a four-person family with \$30,000 in annual earnings increased in 3 States/Territories and decreased in 22. Copayments for a four-person family with \$35,000 in annual earnings increased in 5 States/Territories and decreased in 20. In Michigan, four-person families at this income were not eligible in 2019, but they were eligible in 2020. Copayments for a four-person family with \$40,000 in annual earnings increased in 1 State/Territory and decreased in 22. In three States/Territories (Georgia, Michigan, and the Northern Mariana Islands), four-person families at this income level were not eligible in 2019, but they were eligible in 2020.

The large number of States/Territories lowering their copayments in 2020 is in part due to many States/Territories waiving copayments during the COVID-19 pandemic. For more information on the additional States/Territories that waived copayments in response to the pandemic prior to October 1, but had reverted to standard policies by October 1, see the full CCDF Policies Database.⁷⁰

⁷⁰ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Table 27. Copayment Exemptions, 2020²

State/Territory*	Exempt if Income Under 100 Percent of the Federal Poverty Guidelines ³	Year of Poverty Guidelines Used for Exemption	Exempt if SSI Recipients	Exempt if Family with a Foster Child	Exempt if SNAP E&T Participants	Exempt if Teen Parents	Exempt if Family with a Child with Special Needs	Exempt if Family with CPS Case
Alabama	Yes	2017	No	No	No	No	No	Varies ⁴
Alaska	No	NA	No	No	No	No	No	No
American Samoa	Yes ⁵	--- ¹	NA ⁶	NA ⁵	NA ⁷	NA ⁵	NA ⁵	NA ⁵
Arizona	No	NA	No	Yes	No	No	No	Yes
Arkansas	No	NA	No	Yes	No	Varies ⁸	No	Yes
California	No ⁹	NA	No	No ¹⁰	NA ¹¹	No	No	Varies ¹²
Colorado	No ¹³	NA	No	Varies ¹⁴	NA ¹¹	Varies ¹⁵	No	Varies ¹⁴
Connecticut	No	NA	No	Varies ¹⁶	No	No	No	No
DC	Yes	2019	No	Yes	No	Yes	No	Yes
Delaware	No ¹⁷	NA	No	No	No ¹⁸	Varies ¹⁹	No	Yes
Florida	No ²⁰	NA	No	Varies ²⁰	NA ¹¹	No	No	Varies ²⁰
Georgia	No ²¹	NA	No	Yes	No	Varies ²²	No	Varies ²³
Guam	Yes	2013	No ²⁴	Yes	No	No	No	Yes
Hawaii	No ²⁵	NA	No	Yes	No	No	No	Yes
Idaho	No	NA	No	Yes	No	No	No	No
Illinois	No	NA	No	NA ²⁶	No	No	No	NA ²⁷
Indiana	Yes	2020	No	Yes ²⁸	No	No	No	Yes ²⁹
Iowa	Yes	2018	No	No ³⁰	No	No	No	Yes
Kansas	No ³¹	NA	No ³²	Yes ³³	Varies ³⁴	No	No	Yes ³⁵
Kentucky	No ³⁶	NA	No	No	No	No	No	Varies ³⁷
Louisiana	No	NA	No	Yes	No	No	No	Yes ³⁸
Maine	No	NA	No	No	No	No	No	No
Maryland	No	NA	Yes	NA ²⁶	No	No	No	NA ²⁷
Massachusetts	No	NA	No	Yes	No	No	No	Yes

Table 27. Copayment Exemptions, 2020²

State/Territory*	Exempt if Income Under 100 Percent of the Federal Poverty Guidelines ³	Year of Poverty Guidelines Used for Exemption	Exempt if SSI Recipients	Exempt if Family with a Foster Child	Exempt if SNAP E&T Participants	Exempt if Teen Parents	Exempt if Family with a Child with Special Needs	Exempt if Family with CPS Case
Michigan	Yes	2020	Yes	Yes	No	No	No	Yes
Minnesota	No ³⁹	NA	No	NA ²⁶	No	No	No	NA ²⁷
Mississippi	No	NA	No	No	No	No	No	No
Missouri	No ⁴⁰	NA	No	Yes	No	No	Yes	Yes
Montana	No	NA	No	No	No	No	No	Yes
Nebraska	Yes	2020	No	Varies ⁴¹	No	No	No	Varies ⁴¹
Nevada	No	NA	No	Yes	No	No	No	Yes
New Hampshire	No	NA	No	Varies ⁴²	No	No	No	Varies ⁴²
New Jersey	Yes	2019	No	Yes ⁴³	NA ¹¹	No	No	Varies ⁴⁴
New Mexico	No	NA	No	Yes	No	No	No	Yes
New York	No	NA	No	Yes	No	No	No	Yes ⁴⁵
No. Mariana Islands	No	NA	No	No	NA ⁷	No	No	No
North Carolina	No	NA	No	Yes	No	No	No	Yes
North Dakota	No ⁴⁶	NA	No	No ⁴⁷	No	Varies ⁴⁸	No	NA ²⁷
Ohio	Yes	2020	No	No	No	No	No	Yes
Oklahoma	Yes	2018	Yes ⁴⁹	Yes	No	No	No	Varies ⁵⁰
Oregon	No	NA	No	No	No	No	No	No
Pennsylvania	No	NA	No	No	Yes	No	No	No
Puerto Rico	No ⁵¹	NA	No ²⁴	Yes	NA ⁷	No	No	Yes
Rhode Island	Yes	2020	No	No	No	No	No	No
South Carolina	No	NA	No	Yes ⁵²	No	No	No	Varies ⁵³
South Dakota	Yes ⁵⁴	2020	No	Yes	No	No	No	No
Tennessee	No	NA	No	Yes	No	No	No	Yes
Texas	No	NA	No	Yes	Yes	No	No	Yes ⁵⁵
Utah	Yes	2020	No	NA ⁵⁶	No	No	No	No

Table 27. Copayment Exemptions, 2020²

State/Territory*	Exempt if Income Under 100 Percent of the Federal Poverty Guidelines ³	Year of Poverty Guidelines Used for Exemption	Exempt if SSI Recipients	Exempt if Family with a Foster Child	Exempt if SNAP E&T Participants	Exempt if Teen Parents	Exempt if a Child with Special Needs	Exempt if Family with CPS Case
Vermont	No	NA	No	Yes	No	No	No	Yes ⁵⁷
Virgin Islands	Yes	2019	No ²⁴	Yes	No	No	No	Yes
Virginia	No ⁵⁸	NA	No	No ⁵⁹	Varies ⁶⁰	No	No	No
Washington	No	NA	No	Varies ⁶¹	No	No	No	Varies ⁶¹
West Virginia	No	NA	No	Yes	No	No	No	Varies ⁶²
Wisconsin	No	NA	No	Yes	No	Varies ⁶³	No	Yes
Wyoming	Yes	2020	No	No	No	No	No	No

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² Federal CCDF policies allow for copayments to be waived for all or a subset of families whose incomes are at or below the Federal Poverty Guidelines or for children who are in need of protective services. States may choose to use state funds to waive copayments for families who do not meet the federal guidelines. If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, tables 32-34 reflect this policy. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database.

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

⁴ The parental fee is not required unless the referral from the child protective services department specifically indicates that the parental fee requirement applies.

⁵ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

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

⁷ The nutrition assistance program does not have an employment and training program.

⁸ Parents attending high school full time are exempt from copayments.

⁹ Families with income below 40 percent of state median income are not assessed a copayment.

¹⁰ In counties participating in the Emergency Child Care Bridge Program for Foster Children, relative caretakers, foster families, or parenting youth in foster care are eligible to receive a six-month payment or voucher for child care services.

¹¹ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.

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

¹³ In some cases, due to financial hardship, the family may find it difficult to pay the parental fee. In these cases, the parental fee can be reduced to the hardship fee of \$5. Counties determine what constitutes a hardship and when a parental fee can be reduced. To reduce a client's fee, the hardship reason must be documented in the case file and written approval

must be obtained from the county director. A reduction of a parental fee is a temporary reduction for up to six months, although hardship awards may be extended if conditions causing hardship persist.

¹⁴ Protective services cases may have a parent fee if the child has income. The county may choose to waive the child's income on a case-by-case basis thus resulting in no copayment.

¹⁵ Teen households where all parents are in junior high, high school, or obtaining their GED, and for whom payment of the parental fee would produce a hardship, do not have to pay a parental fee.

¹⁶ If the family is applying only for the foster child, there is no copayment, as the foster child is considered a family of one with no income.

¹⁷ Families with income at or below 70 percent of the Federal Poverty Guidelines are not assessed a copayment.

¹⁸ Exemptions are limited to caretakers who are SNAP recipients (not SNAP E&T participants) caring for a child who receives TANF or general assistance, where the adult requesting the child care is not the child's natural or adoptive parent.

¹⁹ Exemptions are limited to teen parents age 18 and younger attending high school or its equivalent.

²⁰ Reduced fees or copayment exemptions are decided on a case-by-case basis.

²¹ Families with a gross applicable income at or below 10 percent of the Federal Poverty Guidelines are exempt from paying a copayment.

²² Minor parents, under 18 years old, are exempt.

²³ Families with open child protective services cases are not exempt from copayments. Children in foster care are exempt from the copayment.

²⁴ Recipients of Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled are not exempt.

²⁵ Families with income below 50 percent of the 2004 Federal Poverty Guidelines are exempt from copayments.

²⁶ Foster child care is not provided under the state's primary child care subsidy program.

²⁷ Child protective services child care is not provided under the state's primary child care subsidy program.

²⁸ Income is not counted, and therefore no copayment is assigned, for families receiving care for foster children.

²⁹ Income is not counted, and therefore no copayment is assigned, for families receiving care for children in child protective services.

³⁰ Only non-licensed relative foster families receive child care through the CCDF program.

³¹ Employed families with income below 70 percent of the Federal Poverty Guidelines are not assigned a copayment.

³² If the only child who needs child care assistance is an SSI recipient, only the child's non-exempt income is counted.

³³ Families with foster children are exempt from copayments for the care of the foster children even if the foster family's own children are included.

³⁴ SNAP E&T clients are exempt from copayments if the household consists of a single parent who is unemployed or two parents with only one parent employed.

³⁵ If a family is receiving services for a social service reason, they may be eligible for the state's primary child care subsidy program and are exempt from copayments.

³⁶ Families whose monthly income is below \$900, regardless of family size, pay no copayment.

³⁷ The department may choose to waive the copayment for child protective services cases, but not all child protective services cases are exempt from copayments. If the court orders the family to pay a specified copayment, that amount is paid in place of the standard copayment.

³⁸ Children under protective services are eligible regardless of income when the child care services are necessary in order to maintain the children in their own home and when the need for care meets the eligibility policy for the protective services program.

³⁹ Families with income below 75 percent of the Federal Poverty Guidelines are exempt from copayments.

⁴⁰ Families whose income is below 25 percent of the state median income pay only \$1 annually.

⁴¹ The family pays no copayment if the service is supportive of the family case plan and the caseworker determines it is in the best interest of the family to pay no copayment.

⁴² Exemption from copayments for foster care and child protective services cases is determined on a case-by-case basis.

⁴³ There is no copayment for a child under department child protective services supervision who is in a paid foster placement. Families who provide foster care are exempt from copayments for foster children. If there are other children in the household receiving child care subsidies, the household income and size is calculated excluding foster children.

⁴⁴ Case managers may waive or reduce copayments on a case-by-case basis if the determined copayment amount will cause undue hardship to a child protective services family.

- ⁴⁵ Policy coded for New York City. Copayment exemptions for child protective services cases vary by district. Failure to pay a fee or family share cannot be a basis for denial or discontinuance of services for protective services.
- ⁴⁶ The state may choose to waive the copayment requirement for families with very low income.
- ⁴⁷ Children in licensed foster care are not eligible. Children in unlicensed foster care settings are eligible under the same requirements as other families.
- ⁴⁸ Teen parents are exempt from copayments if they are participating in the Crossroads program, a program to assist with child care costs for parents through age 20 who have primary responsibility for the care of their children and who are in high school or working on their GED.
- ⁴⁹ There is no copayment for the child receiving SSI, but the SSI income is considered when determining the copayment assigned for other children in the household.
- ⁵⁰ Child protective services cases may or may not be exempt from the copayment depending on the family's circumstances.
- ⁵¹ Families with income below 50 percent of the state median income are exempt from copayments.
- ⁵² The family is exempt from the copayment requirement, but may be asked to pay the difference between what the provider charges and the maximum reimbursement rate.
- ⁵³ If a child is part of an open child protective services case and is living outside the home with a relative or other designated caretaker, the caretaker is exempt from copayments.
- ⁵⁴ Families with income below 160 percent of the Federal Poverty Guidelines are exempt from copayments.
- ⁵⁵ Families are exempt unless the child protective services agency assigns a copayment.
- ⁵⁶ Foster child care is not provided under the state's primary child care subsidy program. This includes the child of a teen parent in foster care.
- ⁵⁷ Children in protective services living with a foster parent are exempt from copayments. The subsidy program will make full payment for child care services delivered to children in protective services in cases where the Family Services worker has determined the need for services. If a child care provider is not approved to provide specialized services at the time of the child's enrollment, the provider must be approved for specialized services within 30 days.
- ⁵⁸ Families with all children enrolled in Head Start and Early Head Start whose income falls at or below 100 percent of the Federal Poverty Guidelines are exempt from copayments. Families that include children not in Head Start are required to pay a copayment. For SNAP E&T participants, if income falls at or below 100 percent of the Federal Poverty Guidelines, the family is exempt from copayments.
- ⁵⁹ There is a separate program for foster child care subsidies. A foster child may receive CCDF funding if a local department maintains custody of a child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.
- ⁶⁰ For SNAP E&T participants, if income falls at or below 100 percent of the Federal Poverty Guidelines, the family is exempt from copayments.
- ⁶¹ Child protective services and foster children can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they are not exempt from copayments unless they received a referral from child welfare services or child protective services through a family assessment response.
- ⁶² Families are not exempt unless the child protective services worker waives the fee as part of an approved safety or treatment plan.
- ⁶³ Teen parents who participate in the state's program to assist school-age children in TANF families with attending and completing school are exempt from the copayment. Teen parents who are under the age of 20 years old and are enrolled in high school or its equivalent have their copayment set at the lowest copayment level. All other teen parents have their copayment set at the regular copayment level.

Table 28. Copayment Exemptions for TANF Families, 2020¹

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

Table 28. Copayment Exemptions for TANF Families, 2020¹

State/Territory*	All Current TANF Families ²	TANF Families with No Earned Income	TANF Families with Earned Income	Child-Only TANF Families	Families Transitioning Off TANF ³	TANF Applicants	Families at Risk of Becoming Dependent on TANF ³
Michigan	Yes	Yes	Yes	Yes	Yes	Yes ¹⁶	No
Minnesota	No	No	No	No	No	No	No
Mississippi	Yes	Yes	Yes	Yes	No	No	No
Missouri	No ¹⁷	No ¹⁷	No	No	No	No	No
Montana	No	No	No	No	No	No	No
Nebraska	Yes	Yes	Yes	Yes	No	Yes	No
Nevada	No	Yes ¹⁸	Yes ¹⁸	No	No	No	No
New Hampshire	No	No	No	No	No	No	No
New Jersey	No	Yes	No	Yes	No	No	No
New Mexico	No	No	No	No	No	No	No
New York	Yes ¹⁹	Yes	Yes	Yes	No	Yes ²⁰	No
No. Mariana Islands	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴
North Carolina	No	No	No	Yes ²¹	No	No	No
North Dakota	No ²²	Yes ²²	Yes ²²	Varies ²³	Varies ²⁴	No	Yes ²²
Ohio	No	No	No	NA ²⁵	No	No	No
Oklahoma	Yes	Yes	Yes	Yes	No	Yes	No
Oregon	Yes	Yes	Yes	Yes	Yes ²⁶	No	No
Pennsylvania	No	Yes ²⁷	No	NA ²⁵	No	No	No
Puerto Rico	No	Yes	No	No	No	No	No
Rhode Island	Yes	Yes	Yes	Yes	No	Yes	No
South Carolina	No	Yes ²⁸	Yes ²⁸	No	No	Yes	No
South Dakota	Yes	Yes	Yes	Yes	No	No	No
Tennessee	Yes	Yes	Yes	Yes	No	No	No
Texas	No ²⁹	Yes	No	No	No	No	No
Utah	No	Yes	Yes	NA ²⁵	Yes	Yes	No

Table 28. Copayment Exemptions for TANF Families, 2020¹

State/Territory*	All Current TANF Families ²	TANF Families with No Earned Income	TANF Families with Earned Income	Child-Only TANF Families	Families Transitioning Off TANF ³	TANF Applicants	Families at Risk of Becoming Dependent on TANF ³
Vermont	Yes ³⁰	Yes ³⁰	Yes ³⁰	Yes ³⁰	No ³⁰	No ³⁰	Yes ³⁰
Virgin Islands	No	Yes ³¹	No	No	No	Yes ³¹	No
Virginia	Yes	Yes	Yes	Yes	No	No	No
Washington	No	No	No	No	No	No	No
West Virginia	No	No	No	No	No	No	No
Wisconsin	No	No	No	No	No ³²	No	No
Wyoming	No	No	No	No	No	No	No

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Federal CCDF policies allow for copayments to be waived for all or a subset of families whose incomes are at or below the Federal Poverty Guidelines or for children who are in need of protective services. States may choose to use state funds to waive copayments for families who do not meet the federal guidelines. States coded "yes" above waive copayments, or assign a \$0 copayment for the specified group. If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, tables 32-34 reflect this policy. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database.

² An entry of "Yes" indicates all TANF families, including TANF families with no earnings, TANF families with earnings, and TANF families with child-only cases, are exempt from paying a copayment.

³ How states define families transitioning off of TANF or families at risk of becoming dependent on TANF may vary.

⁴ This territory or outlying area does not have a TANF program.

⁵ Families receiving transitional child care are exempt from copayments beyond the third child in the family.

⁶ TANF participants enrolled in activities other than paid employment are not required to pay a parental fee.

⁷ In some cases, due to financial hardship, the family may find it difficult to pay the parental fee. In these cases, the parental fee can be reduced to the hardship fee of \$5.

⁸ Copayments are waived for families who receive a part of their TANF grant amount while transitioning off of TANF. Copayments are not waived for families who are transitioning off of TANF and no longer receiving a part of their TANF grant amount.

⁹ TANF applicants who are required to participate in the employment and training program and are not working are exempt from copayments.

¹⁰ Reduced fees or copayment exemptions are decided on a case-by-case basis.

¹¹ TANF families and families with pending TANF cases pay no copayment. They are responsible for any amount the provider charges above the market rate.

¹² Employed non-parent caretaker relatives who receive a child-only TANF benefit for children needing care are exempt if cooperating with child support.

¹³ TANF families are required to pay any amount above what the agency pays, which is 100 percent of the maximum rate.

¹⁴ Families transitioning off TANF are eligible for care under a separate Transitional Child Care Program.

¹⁵ Families with authorization from the department that administers TANF are exempt from copayments.

¹⁶ Families are exempt from copayments if child care will be needed to attend TANF activities.

¹⁷ If the family's only income is TANF income, the family pays only \$1 annually.

¹⁸ Only TANF recipients in the New Employees of Nevada (NEON) program are eligible to receive referrals for child care subsidies without a copayment.

¹⁹ Families receiving temporary assistance pay no copayment, unless they are repaying an overpayment. In New York City, families who choose to receive child care in lieu of temporary assistance pay \$15 per week full time, or \$9 per week part time. In other districts, these families pay the minimum copayment of \$1 per week.

²⁰ TANF applicants who meet work requirements are not required to pay a copayment.

²¹ Children with no countable income residing with an adult other than their parents are exempt. TANF income is not countable income.

²² The family is responsible for paying any amount that is over the allowable maximum child care amount.

²³ If the TANF caretaker is ineligible, a copayment may be assessed. The TANF caretaker is always responsible for paying any amount that is over the allowable maximum child care amount.

²⁴ Families transitioning off TANF are exempt from copayments as long as the authorized activity for subsidy eligibility is not completed by a TANF recipient who receives SSI, is a disqualified alien, or is an ineligible non-legally responsible caretaker. The family is still responsible for paying any amount that is over the allowable maximum child care amount.

²⁵ Child-only TANF families are not served under the state's primary child care subsidy program.

²⁶ Families transitioning off TANF will pay the minimum copayment amount, \$27, for three months.

²⁷ TANF families that are not working but in the employment and training program are exempt.

²⁸ The family is exempt from the copayment requirement, but may be asked to pay the difference between what the provider charges and the maximum reimbursement rate.

²⁹ Only TANF work program participants are exempt from copayments.

³⁰ TANF recipients and TANF applicants in the diversion program are assigned no copayment and receive services at 100 percent of the established subsidy rate. The families are responsible for paying for fees and services that exceed the established subsidy rate.

³¹ Copayments are waived for TANF and other families with income below the Federal Poverty Guidelines.

³² Families transitioning off of a TANF work program are assigned the minimum copayment based on 65 percent of the Federal Poverty Guidelines instead of the family's actual income level for the remainder of their eligibility period.

Table 29. Copayment Administration, 2020¹

State/Territory*	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ²	What the Family Pays for Absences Due to Illness	What the Family Pays for Absences Due to Vacation	What the Family Pays for Absences Due to Approved Closings
Alabama	Provider	Always	Copayment	Copayment	Copayment
Alaska	Provider	Always	Varies ³	Varies ³	Varies ³
American Samoa	NA ⁴	Sometimes ⁵	NA ⁴	NA ⁴	NA ⁴
Arizona	Provider	Always ⁶	Varies ⁷	Varies ⁷	Varies ⁷
Arkansas	Provider	Sometimes ⁸	Copayment ⁹	Copayment ⁹	Copayment ⁹
California	Other ¹⁰	Always	Copayment	Copayment	Copayment
Colorado	Provider	Never ¹¹	Copayment ¹²	Copayment ¹²	Copayment ¹²
Connecticut	Provider	Always ¹³	Copayment	Copayment	Copayment
DC	Provider	Never	Copayment ¹⁴	Copayment ¹⁵	Copayment ¹⁶
Delaware	Provider	Sometimes ¹⁷	Copayment ¹⁸	Copayment ¹⁸	Copayment ¹⁹
Florida	Provider	Always	Copayment ²⁰	Copayment ²⁰	Copayment ²¹
Georgia	Provider	Sometimes ²²	Copayment	Varies ²³	Entire cost of care ²⁴
Guam	Provider	Always	Copayment ²⁵	Copayment ²⁵	No copayment ²⁶
Hawaii	Provider	Always	Copayment	Copayment	Copayment
Idaho	Provider	Always	Copayment	Copayment	Copayment
Illinois	Provider	Sometimes ²⁷	Varies ²⁸	Varies ²⁸	Copayment
Indiana	Provider	Always ²⁹	Copayment	Copayment	Copayment
Iowa	Provider	Never ³⁰	Copayment ³¹	Copayment ³¹	Copayment ³¹
Kansas	Provider ³²	Always ³³	Varies ³³	Varies ³³	Varies ³³
Kentucky	Provider	Always	Copayment ³⁴	Copayment ³⁴	Copayment ³⁴
Louisiana	Provider	Always	Copayment ³⁵	Copayment ³⁵	Copayment ³⁵
Maine	Provider	Never	Copayment	Copayment	Copayment
Maryland	Provider	Always	Copayment	Copayment	Copayment
Massachusetts	Provider	Never ³⁶	Copayment	Copayment ³⁷	Copayment ³⁸

Table 29. Copayment Administration, 2020¹

State/Territory*	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ²	What the Family Pays for Absences Due to Illness	What the Family Pays for Absences Due to Vacation	What the Family Pays for Absences Due to Approved Closings
Michigan	Provider	Always	Copayment ³⁹	Copayment ³⁹	Copayment ³⁹
Minnesota	Provider	Always ⁴⁰	Copayment ⁴¹	Copayment ⁴¹	Copayment
Mississippi	Provider	Always	Copayment ⁴²	Copayment ⁴²	Copayment
Missouri	Provider	Always	Copayment	Copayment	Copayment
Montana	Provider	Always	Copayment ⁴³	Copayment ⁴³	Varies ³
Nebraska	Provider	Never ⁴⁴	Copayment ⁴⁵	Copayment ⁴⁵	No copayment
Nevada	Provider	Always	Copayment ⁴⁶	Copayment ⁴⁶	Copayment
New Hampshire	Provider	Always ⁴⁷	Copayment ⁴⁸	Copayment ⁴⁸	Entire cost of care
New Jersey	Provider	Always	Copayment	Copayment	Copayment
New Mexico	Provider	Never ⁴⁹	Copayment	Copayment ⁵⁰	Copayment
New York	Provider ⁵¹	Always	Copayment ⁵²	Copayment ⁵³	Copayment ⁵⁴
No. Mariana Islands	Other ⁵⁵	Always	Copayment	Copayment	Copayment
North Carolina	Provider	Always ⁵⁶	Copayment ⁵⁷	Copayment ⁵⁷	Copayment ⁵⁷
North Dakota	Provider	Always ⁵⁸	Varies ⁵⁹	Varies ⁵⁹	Varies ⁶⁰
Ohio	Provider	Never	Varies ⁶¹	Varies ⁶¹	No copayment
Oklahoma	Provider	Never ⁶²	No copayment ⁶³	No copayment ⁶³	No copayment
Oregon	Provider	Sometimes ⁶⁴	Copayment ⁶⁵	Copayment ⁶⁵	Copayment
Pennsylvania	Provider	Always ⁴⁷	Copayment ⁶⁶	Copayment ⁶⁶	Copayment
Puerto Rico	Other ⁶⁷	Always	Copayment	Copayment	Copayment
Rhode Island	Provider	Never	Copayment ⁶⁸	Copayment ⁶⁸	Copayment
South Carolina	Provider	Always	Copayment	Copayment	Copayment
South Dakota	Provider	Always	Copayment	Copayment	Entire cost of care
Tennessee	Provider	Always ⁶⁹	Copayment	Copayment	Copayment
Texas	Provider	Sometimes ⁷⁰	Copayment	Copayment	Copayment
Utah	Provider	Always ⁷¹	Copayment	Copayment	Copayment

Table 29. Copayment Administration, 2020¹

State/Territory*	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ²	What the Family Pays for Absences Due to Illness	What the Family Pays for Absences Due to Vacation	What the Family Pays for Absences Due to Approved Closings
Vermont	Provider	Always	Copayment ⁷²	Copayment ⁷³	Copayment ⁷⁴
Virgin Islands	Provider	Always	Copayment	Copayment	Copayment
Virginia	Provider	Sometimes ⁷⁵	Varies ⁷⁶	Varies ⁷⁶	Varies ⁷⁶
Washington	Provider	Never	Copayment	Copayment	Copayment
West Virginia	Provider	Never ⁷⁷	No copayment	No copayment	No copayment
Wisconsin	Provider	Always ⁷⁸	Copayment	Copayment	Copayment ⁷⁹
Wyoming	Provider	Always	Copayment ⁸⁰	Copayment ⁸⁰	Copayment ⁸⁰

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, tables 32-34 reflect this policy. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database.

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

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

⁴ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁵ American Samoa waives the copayment for all eligible families. However, if a family chooses a provider that charges more than the territory's maximum reimbursement rate, the family may be asked to pay the difference.

⁶ If the family uses a provider that charges higher rates, the provider may require the family to pay the difference.

⁷ What the parent is required to pay depends on the provider's written policy.

⁸ The parent is not required to pay the difference unless the provider has received state quality accreditation of level two or higher. Those providers have the option of charging a parent the difference between the county-determined rate and the established rate the provider charges for equal services. Foster care and TANF families are exempt from paying the difference.

⁹ Absences beyond the maximum number allowed are the responsibility of the parent.

¹⁰ At the discretion of the local agency, copayments may be collected by either the provider or the local agency.

¹¹ Parents cannot be asked to pay more than the amount the county pays unless the parent chooses to have the child participate in optional activities, owes late fees, fails to give adequate notice of withdrawal from services to the provider, or has absences beyond the maximum number allowed by the county.

¹² Parental fees are not usually pro-rated for partial months of service. Counties may choose to pro-rate a parent fee on a case-by-case basis. Absences beyond the maximum number allowed by the county are the responsibility of the parent. Parents can request additional absences for illness if they have a note from a doctor.

¹³ The parent is responsible for all costs not paid by the state on behalf of the parent.

- ¹⁴ Excused absences may be approved for up to 15 days in a month. The family must provide documentation to the provider, and the provider then must submit the documentation with the monthly attendance report.
- ¹⁵ A child may be absent for vacation for up to 15 days per year. The parent or guardian must notify the provider in writing of plans to be absent.
- ¹⁶ Providers are approved to close for 11 designated holidays every year as well as the President's Inauguration Day every four years. Licensed child care centers and licensed family child care providers are allowed to be closed for four days per year for professional development. Child care facilities may also be closed and still paid for care whenever public schools close due to inclement weather.
- ¹⁷ Families are only asked to pay the difference when using a Purchase of Care Plus provider.
- ¹⁸ The family will lose eligibility for the child care subsidy if they accrue 10 or more unexplained absences in a month.
- ¹⁹ The state only reimburses for six holidays per year.
- ²⁰ The agency pays for three unexcused absences per month per child and up to seven additional absences with documentation of extraordinary circumstances.
- ²¹ The agency pays for 12 recognized holidays per year.
- ²² For children with special needs and children in state custody, the subsidy can be reimbursed up to the full amount of the provider's published rate.
- ²³ Parents are required to pay the copayment for days the child is absent from care when the facility is open for the purpose of providing child care services. Care may be suspended for vacation, extended illness, or other extenuating circumstances. Suspension of care cannot extend beyond three weeks per eligibility period for absences taken for a vacation.
- ²⁴ The provider cannot bill the subsidy program for days the facility is not open for the purpose of providing child care services.
- ²⁵ Absences are reimbursed for a maximum of 10 days.
- ²⁶ The family pays no copayment if the child is absent less than 10 days in a row.
- ²⁷ Providers under the certificate program may require parents to pay the difference. Site-contracted providers cannot ask parents to pay the difference.
- ²⁸ Child care centers and licensed child care homes are paid based on eligible days if attendance at the provider exceeds 80 percent for all eligible days. For child care centers and licensed child care homes that have less than 80 percent attendance on eligible days and license-exempt providers, payments are made based on days of attendance and families may be required to pay the difference.
- ²⁹ The parent assumes responsibility for paying the difference unless the caregiver is willing to accept a lower rate of reimbursement.
- ³⁰ Providers cannot request additional payment from families except for late fees, activity fees, or the cost of care if the family uses care beyond the amount approved by the agency.
- ³¹ Payments may be made to providers for four absences per month.
- ³² The state agency pays the child care benefit directly to the parent.
- ³³ The parent and provider contract outlines the parent's responsibilities for making payments to the provider. The provider may choose to charge the parent the difference between the maximum reimbursement rate and the provider rate. What the parent pays for absences is dependent on the provider's policies, as outlined in the parent and provider contract.
- ³⁴ Payments may be made to providers for five absences per child, per month without verification. Providers can be paid for up to 10 holidays or closings per year, and the provider can choose which 10 holidays are paid.
- ³⁵ Payments may be made to providers for five absences per child, per month without verification. What the family pays depends on the provider's policies.
- ³⁶ Families cannot be asked to pay the difference from the provider rate. The family may be required to pay the difference for optional services the family chooses to use or fees for late pick-ups.
- ³⁷ A maximum of two weeks is allowed for vacation.
- ³⁸ For each event requiring a program to close for emergency purposes, parents may be charged copayments for up to two days. Parents are not responsible for copayments for days the program is closed due to a provider's illness, vacation, or other closings that are not pre-approved by the agency.
- ³⁹ The state will reimburse the provider for up to 360 hours if the child is absent, the child would have regularly been in the care of the provider that day, and the provider charges all parents for absences.
- ⁴⁰ Payment of the difference is not a condition of child care eligibility.

⁴¹ There is no change in the copayment for child absences except when absent days exceed 10 consecutive days, up to a total of 25 absent days in a calendar year, excluding holidays. In this case, the parents must pay the entire cost of care. Exemptions may be made for documented medical conditions or if one parent is under the age of 21, does not have a high school or general equivalency diploma, and attends a school district with child care and other supportive services. From March 13, 2020 through June 27, 2021 or for three biweekly billing periods after the end of the peacetime emergency, whichever is earlier, exemptions are also made for additional days when children are absent beyond the limit if the family or provider requests an exemption from the absent day limit due to COVID-19.

⁴² Children are allowed up to five paid unexcused absence days per month.

⁴³ If a child attends 85 percent or more of the monthly authorized time, the state will pay the provider the entire authorized amount. This policy covers occasional absences, such as illness or vacation. Families are still responsible for paying the copayment for absent days.

⁴⁴ Providers are not allowed to charge the parent the difference between what the agency pays and the provider's private pay rate, except late fees for parents who fail to pick their child up on time and care provided to foster children and children receiving guardianship or adoption subsidies.

⁴⁵ The agency will pay the full authorized amount for the times that the child is absent on a scheduled day, up to five times per month.

⁴⁶ When a household's child care subsidy payment is based on actual attendance, the child is allowed 21 days per calendar year to be absent from care. When a household's subsidy payment is based on the family's approved schedule, there is no limit to the amount of allowed absences.

⁴⁷ If the provider chooses to charge the family for the difference between the provider's rate and the maximum reimbursement rate, the family is required to pay the difference.

⁴⁸ Each child is given a determined monthly allotment of absentee hours based on their authorized service level. Families are given zero hours per child per month for part-time care, 13 hours per child per month for half-time care, and 21 hours per child per month for full-time care. Parents are responsible for paying for care when the absentee allotment hours have been exhausted.

⁴⁹ The copayment for a child cannot exceed the monthly provider reimbursement rate. If this situation arises, the copayment may be reduced by the amount it exceeds the monthly provider reimbursement rate.

⁵⁰ If a child is absent for five consecutive scheduled days without a reason such as illness, sudden death, or family medical emergency, payment may discontinue to the provider and the client will remain eligible for the remainder of the eligibility period.

⁵¹ Policy coded for New York City. Each district determines how the copayment is collected. The district may choose to have either the provider or the district collect the copayment.

⁵² Policy coded for New York City. New York City usually requires that families continue to pay a copayment during absences, but elected to waive the copayment and increase the number of absences allowed during the COVID-19 pandemic. Local districts choose whether to pay for temporary absences, routine absences, or absences caused by extenuating circumstances. Districts have the option to waive copayments and increase the number of allowable absences during the pandemic.

⁵³ Policy coded for New York City. New York City usually requires that families continue to pay a copayment during absences, but elected to waive the copayment during the COVID-19 pandemic. Local districts choose whether to pay for breaks in activities. New York City usually pays for a period not to exceed four weeks when child care arrangements would otherwise be lost. Districts have been allowed to extend breaks in activities during the COVID-19 pandemic to allow for increased absences in accordance with approved waivers.

⁵⁴ Policy coded for New York City. New York City usually requires that families continue to pay a copayment during absences and program closures, but elected to waive the copayment and increase the number of closures allowed during the COVID-19 pandemic. Local districts choose whether to pay for temporary absences, routine absences, or absences caused by extenuating circumstances. The agency can continue to reimburse providers for absences due to center closings up to five days per year. Districts have the option to waive copayments and increase the number of allowable closures during the pandemic.

⁵⁵ All copayments are made directly to the CNMI treasury.

⁵⁶ If the parent selects a provider who charges more than the maximum reimbursement rate, the parent is responsible for paying the difference. The local purchasing agency cannot require the parent to pay the difference between the maximum reimbursement rate and the provider's rate and must allow the parent to select a different provider if the parent is unwilling to pay the difference.

⁵⁷ Payment for subsidized child care service is typically based on enrollment but in some instances may be based on attendance. Payment will be based on attendance when the child has been absent for more than 10 days in a month, the provider charges on the basis of attendance, or if the provider has an unpaid closure.

⁵⁸ The agency may pay for registration fees that are required by the provider to enroll a child in the child care setting.

- ⁵⁹ Up to 40 hours per calendar month can be reimbursed for a child who is absent from the child care setting for any reason when the provider requires payment of the absence.
- ⁶⁰ Up to 40 hours per calendar month can be reimbursed for a child who is absent from the child care setting for any reason when the provider requires payment of the absence. More than 40 hours per month can be reimbursed for closures due to inclement weather, state and national emergencies, or other emergencies determined by the department.
- ⁶¹ Families are charged the weekly copayment if there is any service that week. If the cost of service for the week is lower than the weekly copayment, the family is only required to pay the cost of service. They do not pay anything if the child did not attend at all for the week.
- ⁶² Allowable extra charges by the provider are limited to registration fees, transportation fees, late fees, and charges for time not approved by the agency. The family may be asked to pay additional costs if the family failed to correctly use the EBT card to document service. The family cannot be charged for time covered by the agency if the EBT card was correctly used, even if the time exceeds the usual amount for full-time care.
- ⁶³ Providers cannot charge parents for absences unless the family failed to correctly record time and attendance using the EBT card during the month of service, thus causing the provider to lose the absent day payment.
- ⁶⁴ Parents may be responsible for paying the difference when the provider's rate exceeds the maximum reimbursement rate.
- ⁶⁵ The agency will pay the provider for up to five days per month when a child is absent from care if the child was scheduled to be in care on the absent days and the provider held the slot open for the child, the provider bills for the time the child was absent, and it is the provider's policy to bill all families for absent days. The agency will not pay for more than five consecutive absent days that overlap from one month to the next if the child does not return during that next month. The agency will pay all certified center providers for all of the days that a child is absent if the child was scheduled to be in care on the absent days as long as the child attended the center at least one day during the calendar month. This policy does not apply to TANF recipients.
- ⁶⁶ The state will pay for a maximum of 40 days of absences in a state fiscal year.
- ⁶⁷ Providers may be paid in two ways. Contract providers collect the copayment, while the agency deducts the amount of the copayment from the voucher for providers receiving payment through a voucher.
- ⁶⁸ Payments may be made to providers for five absences per month.
- ⁶⁹ Parents are responsible for paying the difference in cost when providers charge more than the state reimbursement rate, as long as the provider notifies the parent of the difference in cost and the parent agrees in writing to pay the difference.
- ⁷⁰ The local board may develop a policy that prohibits providers from charging the difference between their published rate and the reimbursement rate. Providers are prohibited from charging families who are exempt from copayments.
- ⁷¹ If the child care subsidy is less than the amount charged by the provider selected, the parent is responsible to pay the difference.
- ⁷² Approved relative child care providers are not reimbursed for child sick days, vacation days, or days when the provider is closed.
- ⁷³ Absences for vacation are reimbursed for a maximum of 10 days per fiscal year. Approved relative child care providers are not reimbursed for child sick days, vacation days, or days when the provider is closed.
- ⁷⁴ Absences for days the provider is closed are reimbursed for a maximum of 15 days per fiscal year. Approved relative child care providers are not reimbursed for child sick days, vacation days, or days when the provider is closed.
- ⁷⁵ Parents who choose a provider with a rate above the maximum reimbursement rate are responsible for payment of any additional amount, unless the local department elects to pay additional child care costs with local funding. Child care subsidy funds may be used to pay up to a \$100 annual registration fee. No child care subsidy funds may be used to pay provider activity fees.
- ⁷⁶ Copayments for absences are based on provider enrollment, provider attendance practices, and local department payment policies.
- ⁷⁷ Allowable extra charges by the provider are limited to registration fees, transportation fees, late fees, and charges for time not approved by the agency.
- ⁷⁸ What the family pays depends on the provider's policies.
- ⁷⁹ The agency will pay for up to one week of provider shutdown per year.
- ⁸⁰ Payment is approved for one absent day per month.

Table 30. Copayment Calculation, 2020¹

State/Territory*	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ²
Alabama	Dollar amount	Same as for determining eligibility	NA ³
Alaska	Dollar amount	Same as for determining eligibility	\$20 monthly
American Samoa	NA ⁴	NA ⁴	NA ⁴
Arizona	Dollar amount	Same as for determining eligibility	NA
Arkansas	Percent of child care cost or maximum reimbursement rate	Same as for determining eligibility	NA
California	Dollar amount	Same as for determining eligibility	NA
Colorado	Percent of income ⁵	Same as for determining eligibility	\$5 monthly ⁶
Connecticut	Percent of income	Same as for determining eligibility	NA
DC	Dollar amount	Same as for determining eligibility	NA
Delaware	Percent of income	Same as for determining eligibility	NA
Florida	Dollar amount	Same as for determining eligibility	NA
Georgia	Percent of income	Same as for determining eligibility	NA
Guam	Percent of child care cost or maximum reimbursement rate	Same as for determining eligibility	NA
Hawaii	Percent of child care cost or maximum reimbursement rate ⁷	Same as for determining eligibility	NA
Idaho	Dollar amount	Same as for determining eligibility	NA
Illinois	Dollar amount	Same as for determining eligibility	\$1 monthly
Indiana	Percent of income ⁸	Same as for determining eligibility	NA
Iowa	Dollar amount	Same as for determining eligibility	NA
Kansas	Dollar amount	Same as for determining eligibility	NA
Kentucky	Dollar amount	Same as for determining eligibility	NA

Table 30. Copayment Calculation, 2020¹

State/Territory*	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ²
Louisiana	Dollar amount	Same as for determining eligibility	NA
Maine	Percent of income	Same as for determining eligibility	NA
Maryland	Dollar amount	Same as for determining eligibility	NA
Massachusetts	Dollar amount	Same as for determining eligibility	NA
Michigan	Dollar amount	Same as for determining eligibility	NA
Minnesota	Dollar amount	Same as for determining eligibility	NA
Mississippi	Dollar amount	Same as for determining eligibility	\$10 monthly
Missouri	Dollar amount ⁹	Same as for determining eligibility	NA ¹⁰
Montana	Percent of income ¹¹	Same as for determining eligibility	\$10 monthly
Nebraska	Percent of income	Same as for determining eligibility	NA
Nevada	Percent of child care cost or maximum reimbursement rate	Same as for determining eligibility	5 percent of cost of care ¹²
New Hampshire	Percent of income	Same as for determining eligibility	NA
New Jersey	Dollar amount	Same as for determining eligibility	NA
New Mexico	Dollar amount	Same as for determining eligibility	NA
New York	Dollar amount	Varies ¹³	\$3 weekly ¹⁴
No. Mariana Islands	Dollar amount	Same as for determining eligibility	NA
North Carolina	Percent of income	Same as for determining eligibility	NA
North Dakota	Dollar amount ¹⁵	Same as for determining eligibility	NA
Ohio	Other ¹⁶	Same as for determining eligibility	NA
Oklahoma	Dollar amount	Same as for determining eligibility	NA
Oregon	Other ¹⁷	Same as for determining eligibility	\$27 monthly ¹⁸
Pennsylvania	Dollar amount	Same as for determining eligibility	\$5 weekly

Table 30. Copayment Calculation, 2020¹

State/Territory*	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ²
Puerto Rico	Dollar amount	Same as for determining eligibility	NA
Rhode Island	Percent of income	Same as for determining eligibility	NA
South Carolina	Dollar amount	Same as for determining eligibility	NA
South Dakota	Other ¹⁹	Same as for determining eligibility	NA
Tennessee	Dollar amount	Same as for determining eligibility	NA
Texas	Dollar amount	Same as for determining eligibility	NA
Utah	Dollar amount	Same as for determining eligibility	NA
Vermont	Percent of child care cost or maximum reimbursement rate	Same as for determining eligibility	NA
Virgin Islands	Dollar amount	Same as for determining eligibility	NA
Virginia	Percent of income	Same as for determining eligibility	NA
Washington	Other ²⁰	Same as for determining eligibility	\$15 monthly
West Virginia	Dollar amount	Same as for determining eligibility	NA
Wisconsin	Dollar amount ²¹	Same as for determining eligibility	NA
Wyoming	Dollar amount	Same as for determining eligibility	NA

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, tables 32-34 reflect this policy. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database.

² The minimum copayment applies when there is a statutory minimum that may override the copayment found in the state's copayment formula or fee schedule. The minimum is not derived from the lowest copayment found on the fee schedule.

³ Families whose income falls below the lowest copayment income range do not have to pay a fee.

⁴ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁵ Families pay a percentage of their income for the first child in care, plus a dollar amount for each additional child in care.

⁶ Families with financial hardship can have their fee reduced to no less than \$5. The copayment can be waived for families with teen parents, where both parents are in high school or obtaining their GED and paying the fee would produce a hardship.

⁷ The copayment is either a percentage of the maximum child care rate or child care cost, whichever is less.

⁸ The copayment amount varies according to the number of years a family has been receiving assistance. The percentage of monthly income required as a copayment for a particular income category increases by one percentage point for each year the family receives assistance.

⁹ If an applicant is already receiving child care and his or her income increases to between 139 percent and 165 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 1. The applicant will pay 25 percent of the cost of care, after the sliding fee dollar amount. If an applicant is already receiving child care and his or her income increases to between 166 percent and 190 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 2. The applicant will then pay 50 percent of the cost of care, after the sliding fee dollar amount. If an applicant is already receiving child care and his or her income increases to between 191 percent and 215 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 3. The applicant will pay 75 percent of the cost of care, after the sliding fee dollar amount.

¹⁰ Families whose only income is TANF income and families whose income is below 25 percent of the state median income pay \$1 annually.

¹¹ Families with incomes up to the first threshold pay a \$10 copayment. All other families pay the listed percent of income as a copayment.

¹² Families must pay a minimum five percent copayment unless they receive TANF, are experiencing homelessness, or have a foster care or child protective services case.

¹³ In order to determine the copayment, the amount of income over the state income standard is used in the calculation. The copayment calculation is a percentage of the income that exceeds the state income standard.

¹⁴ Policy coded for New York City. In New York City the minimum copayment is \$3 per week for full-time care and \$1 per week for part-time care. Other districts require a minimum copayment of \$1 per week. Districts have the option to waive copayments during the pandemic. New York City elected to waive the copayment during the COVID-19 pandemic.

¹⁵ The amount paid to the provider is rounded down to the nearest dollar.

¹⁶ Caseworkers use a desk guide to show families their expected copayment. The state calculates the family's copayment by dividing the family's annual income by 100 percent of the Federal Poverty Guidelines. The family's poverty level is then rounded up to the nearest five percent, multiplied by 100 percent of the Federal Poverty Guidelines, divided by 12, and rounded up to the nearest whole number to get the maximum monthly income. The maximum monthly income is then multiplied by a copayment multiplier that varies depending on the family's poverty level, rounded to the nearest whole dollar, multiplied by 12, and divided by the number of weeks in the current state fiscal year to get the family's weekly copayment.

¹⁷ The copayment is calculated by a mathematical formula that gradually increases the copayment as family income increases. Workers calculate copayment amounts by entering a family's monthly income and family size into a web tool.

¹⁸ Families whose income is at or below 50 percent of the Federal Poverty Guidelines pay either 1.5 percent of their countable income or \$27, whichever is greater. The minimum copayment can be waived to \$0 if a family chooses to use a quality-star-rated child care provider.

¹⁹ Households with income at or below 160 percent of the Federal Poverty Guidelines pay \$0 monthly. Households with income above 160 percent of the Federal Poverty Guidelines calculate copayments by subtracting 160 percent of the Federal Poverty Guideline from their income and then dividing this number by two for a 50 percent reduction. Either this resulting amount or 12 percent of their income is the expected monthly copayment, whichever is less. Copayment amounts are rounded down to the closest whole dollar.

²⁰ Families with income up to 137.5 percent of the Federal Poverty Guidelines pay a flat dollar amount based on income. For families with income above 137.5 percent of the Federal Poverty Guidelines, the state subtracts 137.5 percent of the Federal Poverty Guidelines from countable income up to 200 percent of the Federal Poverty Guidelines, multiplies the amount by 0.50, and then adds \$65.

²¹ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Families with five or more children in care pay the same copayment, regardless of the number of additional children in care.

Table 31. Other Copayment Calculation Policies, 2020¹

State/Territory*	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Alabama	Copayment is per child	Copayment is per child	50% of full-time copayment	25 hours weekly	No adjustment
Alaska	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
American Samoa	NA ²	NA ²	NA ²	NA ²	NA ²
Arizona	Copayment is per child	Copayment is per child	50% of full-time copayment	Less than 6 hours daily	No adjustment
Arkansas	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA ³	No adjustment
California	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	50% of full-time copayment ⁴	Less than 130 hours monthly ⁵	No adjustment
Colorado	Varies ⁶	Varies ⁶	55% of full-time copayment	Less than 5 hours daily ⁷	No adjustment
Connecticut	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
DC	Varies ⁸	NA ⁸	50% of full-time copayment	5 hours daily	No adjustment
Delaware	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment ⁹

Table 31. Other Copayment Calculation Policies, 2020¹

State/Territory*	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Florida	50% of one child copayment ¹⁰	50% of one child copayment ¹⁰	50% of full-time copayment ¹¹	Less than 6 hours daily ¹¹	No adjustment ¹¹
Georgia	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Guam	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Hawaii	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Idaho	Copayment is per child	Copayment is per child	50% of full-time copayment	24 hours weekly	No adjustment
Illinois	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment ¹²	NA	No adjustment
Indiana	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Iowa	Varies ¹³	Varies ¹³	50% of full-time copayment ¹⁴	5 hours daily ¹⁴	No adjustment
Kansas	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Kentucky	Varies ¹⁵	Varies ¹⁵	No adjustment	NA	No adjustment

Table 31. Other Copayment Calculation Policies, 2020¹

State/Territory*	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Louisiana	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Maine	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Maryland	Varies ¹⁶	Varies ¹⁶	67% of full-time copayment ¹⁷	Less than 6 hours daily ¹⁷	No adjustment
Massachusetts	50% of one child copayment ¹⁸	25% of one child copayment ¹⁸	50% of full-time copayment	Less than 6 hours daily ¹⁹	No adjustment
Michigan	Copayment is per child ²⁰	Copayment is per child ²⁰	No adjustment	NA	No adjustment
Minnesota	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Mississippi	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	50% of full-time copayment	Less than 6 hours daily	\$10 monthly
Missouri	Copayment is per child	Copayment is per child	Other ²¹	Less than 5 hours daily	No copayment
Montana	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment ²²	NA	No adjustment

Table 31. Other Copayment Calculation Policies, 2020¹

State/Territory*	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Nebraska	Copayment is family level, does not vary by number of children in care ²³	Copayment is family level, does not vary by number of children in care ²³	No adjustment	NA	No adjustment
Nevada	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
New Hampshire	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
New Jersey	75% of one child copayment	NA ²⁴	50% of full-time copayment	Less than 6 hours daily	No adjustment
New Mexico	50% of one child copayment ²⁵	25% of one child copayment ²⁵	75% of full-time copayment ²⁶	29 hours weekly ²⁶	No adjustment
New York	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	61% of full-time copayment ²⁷	Less than 30 hours weekly ²⁷	No adjustment
No. Mariana Islands	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
North Carolina	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	75% of full-time copayment ²⁸	31 hours weekly	No adjustment
North Dakota	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment

Table 31. Other Copayment Calculation Policies, 2020¹

State/Territory*	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Ohio	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Oklahoma	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Oregon	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Pennsylvania	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Puerto Rico	50% of one child copayment	NA ²⁴	No adjustment	NA	No adjustment
Rhode Island	Copayment is family level, does not vary by number of children in care ²⁹	Copayment is family level, does not vary by number of children in care ²⁹	No adjustment	NA	No adjustment
South Carolina	Copayment is per child ³⁰	Copayment is per child ³⁰	No adjustment	NA	No adjustment
South Dakota	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	Other ³¹
Tennessee	Varies ³²	Varies ³²	50% of full-time copayment	Less than 20 hours weekly	No adjustment
Texas	Varies ³³	Varies ³³	No adjustment	NA	No adjustment

Table 31. Other Copayment Calculation Policies, 2020¹

State/Territory*	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Utah	Varies ³⁴	Varies ³⁴	No adjustment	NA	No adjustment
Vermont	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Virgin Islands	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Virginia	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Washington	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
West Virginia	Copayment is per child ³⁵	Copayment is per child ³⁵	No adjustment ³⁶	NA	No adjustment
Wisconsin	Varies ³⁷	Varies ³⁷	No adjustment	NA	No adjustment
Wyoming	Copayment is per child	Copayment is per child	50% of full-time copayment ³⁸	Less than 5 hours daily	No adjustment

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, tables 32-34 reflect this policy. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database.

² American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

³ Part-time care is defined as less than three hours per day. Half-time care is defined as between three and five total hours per day.

⁴ The part-time copayment is generally half of the full-time copayment. If there is more than one child in care, the full-time versus part-time copayment is determined according to the child who is in care for the greatest number of hours.

- ⁵ The fee is determined based on the number of hours of care certified for the month. Contractors cannot recalculate fees based on a child's actual attendance.
- ⁶ Families pay a percentage of their income for the first child in care, plus a dollar amount for each additional child in care. The dollar amount is the same for each additional child in the family and varies based on family income.
- ⁷ Part-time care is defined as an average of less than 13 full-time or equivalent units of care per month. A part-time unit is defined as less than five hours of care in a day. Part-time units are converted to equivalent full-time units using a factor of 0.55.
- ⁸ The copayment amount for two or more children in care is calculated by adding a daily dollar amount onto a daily base rate for one child in care. The base rate and additional fee are determined by income level. The copayment is applied to the two youngest children receiving care when there are multiple children in the family. No additional copayment is required when there are more than two children.
- ⁹ The copayment is based on a percent of gross family income. Families with children with special needs pay the same percent as families with children without special needs.
- ¹⁰ Policy coded for Miami-Dade County. The copayment is computed for the youngest child when more than one child is receiving care.
- ¹¹ Policy coded for Miami-Dade County.
- ¹² If all of the children in care are school age and approved for part-day care for any month September through May, the copayment will be reduced by one half for that month.
- ¹³ The copayment amount is determined by the number of children in care. Once the copayment level is determined, the copayment is not paid per child, but paid only for the child receiving the most units of care. If there are two children in care, the family pays a copayment that is 50 cents higher per day (25 cents per half day) than the amount if only one child is in care, except for the first income level, where the copayment remains zero. For a third child in care the copayment is \$1 higher per day (50 cents per half day) than the copayment for one child in care, except for the first income level where the copayment remains zero. The family is charged the same rate for more than three children as for three children.
- ¹⁴ Copayments are based on a half-day rate, multiplied by two to calculate the full-day rate. Part-time care of up to five hours uses the half-day rate. If the hours of care needed exceed five, two or more units of care are used and the half-day rate is multiplied by the number of daily units of care used.
- ¹⁵ The copayment is family level and varies depending on the number of children in care. Two different fee scales are provided, one for families with one child in care and one for families with two or more children in care. Families with two or more children in care pay the same copayment, regardless of the number of additional children in care.
- ¹⁶ A separate copayment schedule is provided for additional children in care. The adjustment for the second child in care is the same as the adjustment for the third child in care.
- ¹⁷ There are two levels of part-time care: care for three hours or less per day, and care for more than three but less than six hours per day. Care for more than three but less than six hours per day is charged a copayment of 66.67 percent of the full-time rate. Care for three hours or less per day is charged a copayment of 33.33 percent of the full-time rate.
- ¹⁸ The full copayment is applied to the oldest child receiving care. The adjusted copayment of 50 percent of the full copayment is applied to the second oldest child receiving care.
- ¹⁹ A half day is fewer than six hours.
- ²⁰ The copayment is calculated per child. The total copayment cannot exceed a family limit. The family limit for the copayment varies based on family income.
- ²¹ Half-time care is defined as care lasting from three hours up to five hours. The half-time care copayment is a dollar amount ranging from 65 to 70 percent of the full-time copayment depending on the family's income level. An additional part-time copayment ranging from 45 to 50 percent of the full-time care copayment, depending on the family's income level, is used for care provided up to three hours per day.
- ²² If the month's cost of child care is less than the monthly copayment, the family is obligated to pay only the cost of care, not the full copayment indicated on the child care authorization plan.
- ²³ The copayment amount is equal to 7 percent of the household's gross income and does not vary with the number of children in care, the amount of care they need, or the provider type.
- ²⁴ No additional copayment is required when there are more than two children in care.
- ²⁵ The copayment for each additional child is half the copayment of the previously counted child. For example, the copayment for the third child will be half the second child's copayment.
- ²⁶ The adjustment for part-time care varies depending on the amount of care used. For care provided 8 to 29 hours per week, the adjustment is 75 percent of the full-time rate. For care provided 7 hours or less per week, the adjustment is 25 percent of the full-time rate. For cases with split custody or where a child may have two providers and care is provided 8 to 19 hours per week, the adjustment is 50 percent of the full-time rate.

²⁷ Policy coded for New York City.

²⁸ If the child is in care for an average of 18 through 31 hours per week, the part-time copayment is 75 percent of the full-time copayment. If the child is in care for an average of 17 hours or less per week, the part-time copayment is 50 percent of the full-time copayment. If the child requires part-time care during the school year and full-time care during the summer, care is calculated using a blended rate. When care is received at the blended rate, the copayment is 83 percent of the full-time copayment. The copayment applies to the entire eligibility period.

²⁹ The copayment is applied to the cost of care for the child that receives services at the highest rate.

³⁰ A percentage discount is established by the provider for families with multiple children receiving care from the same provider. It is applied to all children except the youngest.

³¹ Copayments for care for children with advanced special needs are capped at 10 percent of gross monthly income.

³² The copayment is a family fee that increases with each additional child in care. Separate fee schedules are provided based on the number of children in care. The fee schedules are provided up to family size 20 and for up to 10 children in care.

³³ Policy coded for the Gulf Coast Region. For multiple children receiving child care assistance, there is an additional per child fee that depends on the household income.

³⁴ The copayment is a family fee that increases by one percent of income with each additional child in care, up to three children. The copayment does not increase for four or more children in care. Separate fee schedules are provided based on the number of children in care.

³⁵ The copayment amount is the same for each child. Copayments are capped at three children. If more than three children are in care, the copayment is assessed for the youngest three children.

³⁶ Partial days of care are converted into full days for purposes of copayments and reimbursement.

³⁷ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Families with five or more children in care pay the same copayment, regardless of the number of additional children in care.

³⁸ Part-time care is provided for less than five hours a day. The copayment for part-time care is 50 percent of the daily full-time copayment.

Table 32. Copayment Amounts for a Single Parent with a Two-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
Alabama	0	89	Not eligible	Not eligible
Alaska ²	0	0	0	0
American Samoa ³	0	0	0	0
Arizona	43	65	65	Not eligible
Arkansas ²	0	0	0	0
California ⁴	64	64	64	64
Colorado ⁵	12	116	145	175
Connecticut	25	67	125	150
DC	0	29	52	81
Delaware ²	0	0	0	0
Florida ⁶	0	0	0	Not eligible
Georgia ⁷	62	116	145	Not eligible
Guam ²	0	0	0	Not eligible
Hawaii ²	0	0	0	0
Idaho	40	100	Not eligible	Not eligible
Illinois	41	90	146	176
Indiana ⁸	0	100	Not eligible	Not eligible
Iowa ²	0	0	0	Not eligible
Kansas	18	63	141	186
Kentucky	87	173	238	Not eligible
Louisiana ²	0	0	0	Not eligible
Maine	75	133	188	250
Maryland ⁹	22	36	85	143
Massachusetts ²	0	0	0	0
Michigan	0	33	33	65
Minnesota	4	46	61	100
Mississippi ²	0	0	0	0
Missouri ¹⁰	115	115	Not eligible	Not eligible
Montana	25	133	292	Not eligible
Nebraska	0	117	Not eligible	Not eligible
Nevada ¹¹	42	84	Not eligible	Not eligible
New Hampshire	59	125	260	350
New Jersey ¹²	0	41	51	64
New Mexico ²	0	0	0	0
New York ¹³	0	0	0	0

Table 32. Copayment Amounts for a Single Parent with a Two-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
No. Mariana Islands ²	0	0	Not eligible	Not eligible
North Carolina	125	167	208	250
North Dakota	69	69	138	200
Ohio	0	139	Not eligible	Not eligible
Oklahoma ²	0	0	0	0
Oregon ²	0	0	0	0
Pennsylvania	82	130	173	230
Puerto Rico	Not eligible	Not eligible	Not eligible	Not eligible
Rhode Island	0	33	104	200
South Carolina ¹⁴	26	26	48	Not eligible
South Dakota ⁷	0	0	0	50
Tennessee ²	0	0	0	Not eligible
Texas ¹⁵	120	170	220	270
Utah ²	0	0	0	0
Vermont ¹⁴	0	0	33	165
Virgin Islands	0	48	48	Not eligible
Virginia ¹⁶	62	99	144	223
Washington	65	65	119	327
West Virginia	108	146	184	Not eligible
Wisconsin ¹⁷	79	157	243	289
Wyoming	0	19	38	139

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of one parent and one child. The child is 24 months old and does not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. All income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (\$15,000) is approximately equal to full-time full-year pay at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided. If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, the policy is reflected here with a copayment of \$0 and a footnote. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database. For states that waived copayments as of October 1, 2020, detailed copayment amounts prior to the pandemic can be found in the full CCDF Policies Database.

² Copayments are waived due to the COVID-19 pandemic.

³ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

- ⁴ Copayments are waived for families where all children in the family who are enrolled in care remain at home for that month, either for distance learning because of closure of the facility, where all currently enrolled children are not able to receive in-person services due to a public health order, or for families sheltering in place.
- ⁵ Copayment amounts based on income eligibility thresholds for Denver and Tier 1 child care center rates.
- ⁶ Copayment amounts for Miami-Dade County. Copayments are waived due to the COVID-19 pandemic.
- ⁷ Copayment amounts are rounded down to the closest whole dollar.
- ⁸ Copayment amounts based on first year of assistance.
- ⁹ Copayment amounts for center care in the Baltimore City Region.
- ¹⁰ Copayments are calculated using a multiplier of 23 days per month.
- ¹¹ Copayment amounts based on licensed one-star center reimbursement rates for Clark County. Copayments are calculated using a multiplier of 22 days per month to convert daily reimbursement rates to monthly reimbursement rates.
- ¹² Upon request, families are eligible to have their copayment waived, if they have experienced job loss or lost wages due to COVID-19.
- ¹³ Copayments are waived due to the COVID-19 pandemic. Policy coded for NYC. Districts have the option to waive copayments during the COVID-19 pandemic.
- ¹⁴ Copayments are calculated using a multiplier of 4.33 weeks per month.
- ¹⁵ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.
- ¹⁶ Copayment amounts based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.
- ¹⁷ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

Table 33. Copayment Amounts for a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
Alabama	0	0	178	Not eligible
Alaska ²	0	0	0	0
American Samoa ³	0	0	0	0
Arizona	43	87	130	130
Arkansas ²	0	0	0	0
California ⁴	64	64	64	64
Colorado ⁵	12	16	160	190
Connecticut	25	33	83	100
DC	0	0	40	70
Delaware ²	0	0	0	0
Florida ⁶	0	0	0	0
Georgia ⁷	62	83	145	175
Guam ²	0	0	0	0
Hawaii ²	0	0	0	0
Idaho	80	80	200	Not eligible
Illinois	23	70	114	168
Indiana ⁸	0	0	125	Not eligible
Iowa ²	0	0	0	0
Kansas	0	22	79	138
Kentucky	108	152	238	303
Louisiana ²	0	0	0	0
Maine	63	100	167	225
Maryland ⁹	36	36	62	103
Massachusetts ²	0	0	0	0
Michigan	0	0	65	65
Minnesota	0	4	54	76
Mississippi ²	0	0	0	0
Missouri ¹⁰	138	230	230	Not eligible
Montana	25	50	167	325
Nebraska	0	0	146	Not eligible
Nevada ¹¹	81	81	163	326
New Hampshire	59	79	156	250
New Jersey ¹²	0	0	71	81
New Mexico ²	0	0	0	0
New York ¹³	0	0	0	0

Table 33. Copayment Amounts for a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
No. Mariana Islands ²	0	0	0	Not eligible
North Carolina	125	167	208	250
North Dakota	43	85	85	170
Ohio	0	0	175	Not eligible
Oklahoma ²	0	0	0	0
Oregon ²	0	0	0	0
Pennsylvania	69	113	160	208
Puerto Rico ²	0	Not eligible	Not eligible	Not eligible
Rhode Island	0	0	42	125
South Carolina ¹⁴	52	52	52	95
South Dakota ⁷	0	0	0	0
Tennessee ²	0	0	0	0
Texas ¹⁵	85	160	225	290
Utah ²	0	0	0	0
Vermont ¹⁴	0	0	62	308
Virgin Islands	0	0	48	48
Virginia ¹⁶	62	82	124	173
Washington	15	65	65	71
West Virginia	119	152	184	238
Wisconsin ¹⁷	46	137	198	274
Wyoming	0	0	38	76

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of one parent and two children. The children are 24 and 48 months old and do not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. All income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (\$15,000) is approximately equal to full-time full-year pay at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided. If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, the policy is reflected here with a copayment of \$0 and a footnote. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database. For states that waived copayments as of October 1, 2020, detailed copayment amounts prior to the pandemic can be found in the full CCDF Policies Database.

² Copayments are waived due to the COVID-19 pandemic.

³ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁴ Copayments are waived for families where all children in the family who are enrolled in care remain at home for that month, either for distance learning because of closure of the facility, where all currently enrolled children are not able to receive in-person services due to a public health order, or for families sheltering in place.

- ⁵ Copayment amounts based on income eligibility thresholds for Denver and Tier 1 child care center rates.
- ⁶ Copayment amounts for Miami-Dade County. Copayments are waived due to the COVID-19 pandemic.
- ⁷ Copayment amounts are rounded down to the closest whole dollar.
- ⁸ Copayment amounts based on first year of assistance.
- ⁹ Copayment amounts for center care in the Baltimore City Region.
- ¹⁰ Copayments are calculated using a multiplier of 23 days per month.
- ¹¹ Copayment amounts based on licensed one-star center reimbursement rates for Clark County. Copayments are calculated using a multiplier of 22 days per month to convert daily reimbursement rates to monthly reimbursement rates.
- ¹² Upon request, families are eligible to have their copayment waived, if they have experienced job loss or lost wages due to COVID-19.
- ¹³ Copayments are waived due to the COVID-19 pandemic. Policy coded for NYC. Districts have the option to waive copayments during the COVID-19 pandemic.
- ¹⁴ Copayments are calculated using a multiplier of 4.33 weeks per month.
- ¹⁵ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.
- ¹⁶ Copayment amounts based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.
- ¹⁷ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

Table 34. Copayment Amounts for a Two Parent Household with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000	Families with Annual Earnings of \$35,000	Families with Annual Earnings of \$40,000
Alabama	0	178	Not eligible	Not eligible
Alaska ²	0	0	0	0
American Samoa ³	0	0	0	0
Arizona	87	130	130	130
Arkansas ²	0	0	0	0
California ⁴	64	64	64	94
Colorado ⁵	20	165	219	248
Connecticut	83	100	117	200
DC	0	40	59	83
Delaware ²	0	0	0	0
Florida ⁶	0	0	0	Not eligible
Georgia ⁷	104	175	204	233
Guam ²	0	0	0	0
Hawaii ²	0	0	0	0
Idaho	80	200	Not eligible	Not eligible
Illinois	84	137	202	237
Indiana ⁸	0	150	Not eligible	Not eligible
Iowa ²	0	0	0	Not eligible
Kansas	27	95	166	249
Kentucky	195	282	325	347
Louisiana ²	0	0	0	0
Maine	125	200	263	333
Maryland ⁹	36	62	103	201
Massachusetts ²	0	0	0	0
Michigan	0	65	65	130
Minnesota	4	65	87	111
Mississippi ²	0	0	0	0
Missouri ¹⁰	230	230	230	Not eligible
Montana	83	200	350	Not eligible
Nebraska	0	175	Not eligible	Not eligible
Nevada ¹¹	81	163	326	Not eligible
New Hampshire	99	188	292	417
New Jersey ¹²	0	70	79	93
New Mexico ²	0	0	0	0
New York ¹³	0	0	0	0

Table 34. Copayment Amounts for a Two Parent Household with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000	Families with Annual Earnings of \$35,000	Families with Annual Earnings of \$40,000
No. Mariana Islands ²	0	0	0	0
North Carolina	208	250	292	333
North Dakota	101	101	202	202
Ohio	0	193	Not eligible	Not eligible
Oklahoma ²	0	0	0	0
Oregon ²	0	0	0	0
Pennsylvania	152	195	238	282
Puerto Rico	Not eligible	Not eligible	Not eligible	Not eligible
Rhode Island	0	50	146	267
South Carolina ¹⁴	52	52	95	95
South Dakota ⁷	0	0	0	0
Tennessee ²	0	0	0	0
Texas ¹⁵	160	225	290	360
Utah ²	0	0	0	0
Vermont ¹⁴	0	46	231	461
Virgin Islands	0	48	Not eligible	Not eligible
Virginia ¹⁶	103	148	202	264
Washington	65	65	65	231
West Virginia	119	152	173	Not eligible
Wisconsin ¹⁷	149	185	258	304
Wyoming	0	0	38	76

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of two parents and two children. The children are 24 and 48 months old and do not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. Both parents are working at least 30 hours per week and all income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (\$25,000) is approximately equal to full-year pay for two parents each working 30 hours per week at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided. If copayments were waived for all families during the COVID-19 pandemic, and this policy was in effect on October 1, 2020, the policy is reflected here with a copayment of \$0 and a footnote. For more information on copayments that were waived prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database. For states that waived copayments as of October 1, 2020, detailed copayment amounts prior to the pandemic can be found in the full CCDF Policies Database.

² Copayments are waived due to the COVID-19 pandemic.

³ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

- ⁴ Copayments are waived for families where all children in the family who are enrolled in care remain at home for that month, either for distance learning because of closure of the facility, where all currently enrolled children are not able to receive in-person services due to a public health order, or for families sheltering in place.
- ⁵ Copayment amounts based on income eligibility thresholds for Denver and Tier 1 child care center rates.
- ⁶ Copayment amounts for Miami-Dade County. Copayments are waived due to the COVID-19 pandemic.
- ⁷ Copayment amounts are rounded down to the closest whole dollar.
- ⁸ Copayment amounts based on first year of assistance.
- ⁹ Copayment amounts for center care in the Baltimore City Region.
- ¹⁰ Copayments are calculated using a multiplier of 23 days per month.
- ¹¹ Copayment amounts based on licensed one-star center reimbursement rates for Clark County. Copayments are calculated using a multiplier of 22 days per month to convert daily reimbursement rates to monthly reimbursement rates.
- ¹² Upon request, families are eligible to have their copayment waived, if they have experienced job loss or lost wages due to COVID-19.
- ¹³ Copayments are waived due to the COVID-19 pandemic. Policy coded for NYC. Districts have the option to waive copayments during the COVID-19 pandemic.
- ¹⁴ Copayments are calculated using a multiplier of 4.33 weeks per month.
- ¹⁵ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.
- ¹⁶ Copayment amounts based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.
- ¹⁷ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

V. Policies for Providers

Each CCDF program includes extensive policies related to child care providers. These policies operate within the context of a State's/Territory's broader policies concerning child care licensing and regulation. However, some policies related to providers are specific to the CCDF program. These include how the State/Territory agency implementing CCDF-subsidized care pays the provider, whether the provider is paid during closings or child absences, the maximum reimbursement rates that will be paid by the State/Territory for CCDF-subsidized care, and rules for unlicensed providers who are outside the scope of a State's/Territory's broader child care regulations but who must meet certain standards to be paid through the subsidy system.

Provider Payments and Closings

The State/Territory agencies that implement CCDF-subsidized care may choose to pay providers directly, pay parents who then must pay providers, or handle provider payments in another way. States/Territories also set their own policies for whether providers are paid for days they are closed; examples of reasons for provider closings include federal holidays, inclement weather, provider illness, and provider vacation. Additionally, States/Territories determine whether providers continue to receive payments even if the children receiving the child care subsidy are absent from care.

Table 35 shows how providers are paid, if providers are paid when they are closed, and whether providers are paid for days the children are not in care. Findings from 2020 include:

- In 47 States/Territories, the provider is paid directly. In Hawaii, Kansas, and Wisconsin, the agency provides the money to the parents who are then responsible for paying their child care providers. Some States have varying payment requirements depending on the type of care. For example, in Minnesota, if care is provided in the child's home, the agency pays the parent, who then pays the provider.
- In 47 States/Territories, providers may receive payment on days they are closed; States/Territories may limit the number of days providers can be paid for closures or limit the policy to certain types of providers (e.g., licensed providers).
- In 55 States/Territories, providers may be paid for days children are absent; the policies often vary based on the type of provider.

Under CCDBG reauthorization, States/Territories are required to provide assurance that they will, "to the extent practicable, implement enrollment and eligibility policies that support the fixed costs of

providing child care services by delinking provider reimbursement rates from an eligible child's occasional absences due to holidays or unforeseen circumstances such as illness.”⁷¹ As States/Territories implement policy changes in response to this requirement, the changes will be captured in the full CCDF Policies Database and future years' tables.

In response to the COVID-19 pandemic, several States/Territories modified their policies for paying for provider closings and child absences. Policies that were in place as of October 1, 2020 are reflected in the tables. Footnotes to the tables show if the policies were adopted in response to the pandemic. Information about payment policies prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁷²

Reimbursement Rates

Each CCDF program determines the maximum amounts that will be paid to child care providers—often referred to as “maximum reimbursement rates,” or “provider payments” —although officially termed “payment rates” in the CCDBG Act and Final Rule. While the terms “maximum reimbursement rates” and “payment rates” are sometimes used interchangeably, “payment rate” is a more general term that includes not only payment on a reimbursement basis, but also alternative payment practices. We continue to use the term “maximum reimbursement rate” in this report to be consistent with the underlying CCDF Policies Database.

The States/Territories establish these rates by conducting market rate surveys of child care prices throughout each State/Territory.⁷³ Maximum rates affect not only providers but also families. For families, the maximum rates may establish the highest-priced care that the family can obtain with the subsidy, without paying an additional cost beyond the copayment. (Table 29 shows whether States/Territories may require a family to pay the difference between the maximum reimbursement rate and the provider's full rate.)

States/Territories are expected to set base reimbursement rates at a level sufficient for child care providers to meet health and safety, quality, and staffing requirements established for CCDF providers.

⁷¹ The Child Care and Development Block Grant Act of 2014 is available at <https://www.congress.gov/113/plaws/publ186/PLAW-113publ186.pdf> (PDF).

⁷² For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). “Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021.” OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

⁷³ States/Territories may choose to use alternative methodologies to the market rate survey (pending OCC approval), as outlined in their CCDF plans.

Within each State/Territory, rates may differ based on several factors, including provider type, amount of care (full-time, part-time, before-and-after, or summer care), and the age of the child. States/Territories may also provide higher rates for providers who qualify for increased payments based on meeting additional criteria beyond the basic licensing requirements (i.e., higher quality ratings), which can be referred to as a “tiered approach.” When States/Territories use this tiered approach, the general rate for providers who do not qualify for the additional payments is termed the “base rate” for the purposes of these tables, and the rate for the highest tiered providers is termed the “highest rate.” The tables show the maximum reimbursement rates for providers who qualify at the base rate and providers who qualify at the highest rate. States/Territories may also use higher rates for care provided during non-traditional hours or care for children with special needs, although those are not reflected in the tables.

Tables 36 through 38 show the maximum base and maximum highest/tiered reimbursement rates for three basic types of providers: child care centers, family child care homes, and in-home child care providers. The full CCDF Policies Database also captures the reimbursement rates for group child care homes although these are not shown in the tables. While States/Territories may use different terminology for categorizing different types of providers, for the purposes of the CCDF Policies Database, the four types of providers are defined as follows⁷⁴:

- Child care centers are usually licensed, non-residential child care facilities that typically care for a larger number of children at one time than residentially based facilities.
- Family child care homes are residential child care programs that are typically licensed or otherwise accredited.
- Group child care homes are similar to family child care homes but are usually allowed to care for more children at the same time than a family child care home. Many States/Territories consider all child care homes as one group and do not use this category. (Rates for group child care homes are not included in the tables but can be found in the full CCDF Policies Database.)
- In-home child care usually refers to unlicensed care provided in the child’s home. In some cases, the State/Territory also refers to unlicensed care provided in the provider’s home as in-home care and provides two different in-home rates. In these cases, the table captures the rates for care

⁷⁴ States/Territories often define provider types differently, so broad definitions were developed to allow State/Territory policies to be categorized consistently. These definitions vary slightly from the definitions used by the Office of Child Care (OCC). In particular, the definitions used by OCC include the distinction that family child care homes are programs with one provider and group homes are programs with two or more providers. However, this level of detail is not always available in the caseworker manuals used for the CCDF Policies Database. Additional detail about provider types included in the full database may assist users in linking specific States’/Territories’ provider types with the definitions used in the administrative data. The ACF-800 reporting instructions for States/Territories provide the provider definitions used by OCC: <https://www.acf.hhs.gov/occ/resource/acf-800-reporting-instructions-definitions>.

provided in the home of the child. States/Territories vary widely on the amount of oversight and credentials required for in-home providers.

Each of the three tables shows the maximum reimbursement rate for a child at four different ages: infant (11 months, just before the 1st birthday), toddler (35 months, just before the 3rd birthday), preschool (59 months, just before the 5th birthday), and school-age before-and-after care (84 months, exactly 7 years old). The ages are precise to allow for comparison across States/Territories, since different States/Territories use different numbers of age categories and define terms such as “toddler” or “preschool” in somewhat different ways.

States/Territories express their maximum rates in varying terms (e.g., daily or monthly); most States/Territories use more than one metric, with rules for how to determine the maximum rate in different situations. For example, a State/Territory may use a daily rate when child care is provided for less than a certain number of days per week but use a weekly or monthly rate in other cases. The tables all assume that the 11-, 35-, and 59-month-old children are all in full-time care and that the 7-year-old is in before-and-after care. For all States/Territories and each of the four ages, maximum reimbursement rates are shown in monthly terms, even if a State/Territory computes the rates in hourly, daily, or weekly terms. The tables assume that the younger children are in care for eight hours per day and five days a week, and that the school-age child requires before-and-after care for a total of four hours per day and five days a week. Rates are computed assuming that children do not have special needs and that they receive care during traditional hours.

Finally, it is very common for maximum rates to vary across different sub-areas of a State. A State/Territory may have only a few different sets of maximum rates or dozens of different sets of maximum rates. In States where rates vary by locality, the tables show the information for the most populous region or county, with a footnote indicating the location used.

The tables reflect the maximum rates for providers who qualify for the base rates and providers who qualify for the highest tiered or accredited rates for each provider type and age group. In the case of center care and family child care homes, the base rates reflect the reimbursement rates for licensed child care providers. For States/Territories that do not provide reimbursement rates for licensed providers, the rates for registered or certified providers are used. For in-home child care providers, the base rates reflect the rates for unlicensed providers, unless a State/Territory only allows licensed providers to participate in the subsidy program, in which case the base rates will reflect the amounts paid to licensed in-home providers. For all provider types, for States/Territories with tiered reimbursement rates, the highest rates reflect the highest tiered or accredited rates available for that age group and provider type. For States/Territories that do not use tiered reimbursement rates, the highest rates are identical to the base rates. As noted above, States/Territories may use tiered reimbursement rates for different reasons, such as

for providers who complete additional training requirements. However, the tiers are not always defined in the States'/Territories' caseworker manuals, and so for the purposes of the CCDF Policies Database, the tiers are not categorized according to a common definition. The table footnotes provide the name of the base and highest tiers for States/Territories that use tiered rates.

In response to the COVID-19 pandemic, some States/Territories paid a higher rate for providers who remained open during the pandemic. If the higher rate was paid as of October 1, 2020, this policy is reflected in tables 36-38. Footnotes to the tables show if the policies were adopted in response to the pandemic. Information about reimbursement rates prior to October 1, including policies prior to and in response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁷⁵

Maximum Reimbursement Rates for Licensed Child Care Centers (Table 36)

Table 36 shows the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of child care centers. Findings from 2020 include:

- Monthly base rates for infant care in child care centers range from \$200 in American Samoa to \$2,000 in Hawaii. The median monthly base rate is \$875.
- Monthly base rates for toddler care in child care centers range from \$180 in American Samoa to \$1,634 in Connecticut. The median monthly base rate is \$791.
- Monthly base rates for preschool care in child care centers range from \$180 in American Samoa to \$1,505 in Virginia. The median monthly base rate is \$698.
- Monthly base rates for school-age before-and-after care in child care centers range from \$54 in American Samoa to \$924 in Virginia. The median monthly base rate is \$389.
- For the rates shown in the table, 34 States/Territories use higher tiered or accredited rates in addition to their base rates for care provided for at least some age groups in child care centers.

⁷⁵ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Maximum Reimbursement Rates for Licensed Family Child Care Homes (Table 37)

Table 37 shows the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of family child care homes. Findings from 2020 include:

- Monthly base rates for infant care in family child care homes range from \$200 in American Samoa to \$1,527 in Massachusetts. The median monthly base rate is \$645.
- Monthly base rates for toddler care in family child care homes range from \$180 in American Samoa to \$1,161 in Connecticut. The median monthly base rate is \$582.
- Monthly base rates for preschool care in family child care homes range from \$180 in American Samoa to \$1,127 in Washington. The median monthly base rate is \$550.
- Monthly base rates for school-age before-and-after care in family child care homes range from \$54 in American Samoa to \$774 in Virginia. The median monthly base rate is \$347.
- For the rates shown in the table, 31 States/Territories use higher tiered or accredited rates in addition to their base rates for care provided for at least some age groups in family child care homes.

Maximum Reimbursement Rates for In-Home Child Care (Table 38)

Table 38 captures the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of in-home child care providers. Findings from 2020 include:

- Monthly base rates for infant care for in-home child care providers range from \$195 in South Carolina to \$1,571 in Iowa. The median monthly base rate is \$420.
- Monthly base rates for toddler care for in-home child care providers range from \$180 in American Samoa to \$1,571 in Iowa. The median monthly base rate is \$402.
- Monthly base rates for preschool care for in-home child care providers range from \$180 in American Samoa to \$1,571 in Iowa. The median monthly base rate is \$357.
- Monthly base rates for school-age before-and-after care for in-home child care providers range from \$54 in American Samoa to \$785 in Iowa. The median monthly base rate is \$226.
- For the rates shown in the table, 11 States/Territories use higher tiered or accredited rates in addition to their base rates for care provided for at least some age groups by in-home providers.
- In several States, the policies for the rates paid to in-home providers involve a requirement that they be paid at least the State minimum wage.

Changes in Reimbursement Rate Policies from 2019 to 2020

Several States/Territories made changes to their provider payment policies between 2019 and 2020. Delaware, Georgia, Guam, New Hampshire, and Rhode Island began paying providers for days they are closed. New York and Oregon began paying all providers for days they are closed, changing from their previous policy of only paying certain providers. South Dakota began paying licensed and regulated providers for days they are closed. Nebraska began paying providers for days the children are absent. Montana, New York, North Carolina, and Rhode Island began paying all providers for days children are absent, changing from the previous policy of only paying certain providers. South Dakota previously only paid licensed providers for days children are absent; the state now also allows payments for regulated providers. Guam began paying providers directly, rather than having parents pay the providers. Additionally, in response to the COVID-19 pandemic, several States/Territories expanded the number closures and child absences that are covered, with some moving to paying based on enrollment and others increasing the number of days they will reimburse providers.

For the age groups and rates shown in the tables, center child care reimbursement rates changed in 24 States/Territories in between October 2019 and October 2020. Twenty-three States/Territories increased one or more of the base or highest rates shown for non-school-age children, with a median increase of \$98 per month. Seventeen States/Territories increased one or more of the base or highest school-age rates for before-and-after care, with a median increase of \$50 per month. Two States (Delaware and New Jersey) lowered one or more of the base or highest school-age before-and-after care rates. For the family child care home reimbursement rates shown in the tables, 24 States/Territories increased one or more of the base or highest rates shown for non-school-age children, with a median increase of \$67. Eighteen States/Territories increased one or more of the base or highest school-age rates for before-and-after care, with a median increase of \$41 per month. One State (Delaware) lowered the base school-age before-and-after care rates. For the in-home rates shown in the tables, fifteen States/Territories increased one or more of the base or highest rates shown for non-school-age children, with a median increase of \$34. Fourteen States/Territories increased one or more of the base or highest school-age rates for before-and-after care, with a median increase of \$63 per month. Some of the rate increases between 2019 and 2020 were in response to the COVID-19 pandemic.

Policies for Unlicensed Home-Based Child Care Providers

To ensure the health and safety of children whose care is paid for through CCDF, States/Territories must establish minimum health and safety policies regarding physical premises, infectious diseases, and training. Many CCDF child care providers are licensed by the State/Territory in which they provide care and therefore must meet all requirements (regarding facility safety, staff training requirements,

employee/volunteer criminal history checks, and so on) that are imposed by the license. However, some providers are not licensed, such as most in-home care providers, relative providers, some family child care homes, and religiously exempt child care centers. These providers are often referred to as “unlicensed providers,” “legally unregulated providers,” or “providers legally operating without regulation,” and each State/Territory establishes policies for these providers within the framework of the federal requirements (these providers are referred to as “unlicensed home-based providers” throughout the remainder of this report and the tables).

States/Territories vary considerably on the requirements they place on unlicensed home-based providers. There are differences across States/Territories in the requirements for background checks and training, the minimum age requirements for providers, and the rules for which individuals are allowed to provide CCDF-subsidized care (e.g., relatives living in the home). These policies also vary greatly within States/Territories based on who is providing care (a non-relative or a relative) or where care is provided (in the child’s home or outside of the child’s home). Tables 39a through 42 review these types of policies. Tables 39a, 40a, and 41a capture policies about *non-relative* providers. Tables 39b, 40b, and 41b capture policies about *relative* providers. (Appendix D provides more detail about the state-specific provider types to which the policies apply.)

Differences in policies for providers providing care in the child’s home or outside of the child’s home can be found in the footnotes. The policies described in this report reflect the requirements as of October 1, 2020. Under CCDBG reauthorization, some requirements for unlicensed home-based providers are standardized across the States/Territories. These standardized requirements are noted throughout.⁷⁶

In response to the COVID-19 pandemic, several States/Territories modified their policies for unlicensed home-based providers. This included waiving some requirements for a certain period of time or carrying out some trainings and inspections virtually.⁷⁷ Policies that were in place as of October 1, 2020 are reflected in the tables. Footnotes to the tables show if the policies were adopted in response to the pandemic. Information about provider policies prior to October 1, including policies prior to and in

⁷⁶ For additional information on the provider requirements, see “Implications of Child Care and Development Block Grant Reauthorization for State Policies: Changes to Requirements for Legally Unregulated Child Care Providers” available from https://ccdf.urban.org/sites/default/files/ccdbgreauthandproviders_508compliance.pdf (PDF).

⁷⁷ For federal guidelines on policies in response to the COVID-19 pandemic, see “Office of Child Care COVID-19 Resources” available at <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

response to the pandemic, can be found in the full CCDF Policies Database and special COVID-19 project report.⁷⁸

Unlicensed Home-Based Provider Background Check Requirements (Table 39a and 39b)

States/Territories may require unlicensed home-based providers to have some sort of background check or screening. Relative providers who only care for related children may be exempt from the requirements at the States'/Territories' discretion.⁷⁹ If care is provided in the home of the provider instead of the home of the child, States/Territories may require others in the home to have background checks as well. For example, a State/Territory may require all members of the provider's household over the age of 18 to be screened, while another State/Territory may require any person who might have access to the children while they are in care to be screened.

Table 39a describes the background checks to which *non-relative* unlicensed home-based providers are subject if they wish to receive CCDF payments. Findings from 2020 include:

- Nine States do not allow non-relative unlicensed providers to provide care through the subsidy program.
- Of the States/Territories where non-relative unlicensed home-based providers are allowed to provide care, 41 States/Territories require criminal history background checks for the provider and other staff members or people in the home. Five States/Territories require criminal history background checks for only the provider. One State/Territory (Maine) does not require criminal history background checks for relative unlicensed home-based providers.
- The types of background checks required across States/Territories for non-relative unlicensed home-based providers include state criminal history checks with fingerprinting (29 States/Territories), state sex offender registry checks (43 States/Territories), state child abuse and neglect registry checks (43 States/Territories), state checks for any State the provider or staff member resided in during the last five years (27 States/Territories), National Crime Information

⁷⁸ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

⁷⁹ For additional information on relative provider background check requirements, see <https://childcareta.acf.hhs.gov/ccdf-fundamentals/criminal-background-checks>.

Center and/or National Sex Offender Registry checks (32 States/Territories), and Next Generation Identification FBI fingerprint checks (25 States/Territories).

Table 39b describes the background checks to which *relative* unlicensed home-based providers are subject if they wish to receive CCDF payments. Findings from 2020 include:

- North Carolina does not allow relative unlicensed home-based providers to provide care through the subsidy program.
- Forty-three States/Territories require criminal history background checks for the provider and other staff members or people in the home. Seven States/Territories require criminal history background checks for only the provider. Five States/Territories do not require criminal history background checks for relative unlicensed home-based providers.
- The types of background checks required across States/Territories for relative unlicensed home-based providers include state criminal history checks with fingerprinting (27 States/Territories), state sex offender registry checks (45 States/Territories), state child abuse and neglect registry checks (45 States/Territories), state checks for any State the provider or staff member resided in during the last five years (24 States/Territories), National Crime Information Center and/or National Sex Offender Registry checks (29 States/Territories), and Next Generation Identification FBI fingerprint checks (22 States/Territories).

With the reauthorization of the CCDBG, States/Territories are required to conduct comprehensive background checks at least every five years for all license-exempt providers, as well as anyone who might have unsupervised access at any point to the children receiving subsidies. These criminal background checks must include a State criminal and sex offender registry check using fingerprints, a State child abuse and neglect registry check, National Crime Information Center and National Sex Offender Registry check, and an FBI fingerprint check using the Next Generation Identification System. State/Territory searches must include the current State of residence and any State the individual lived in over the last five years. States/Territories were able to receive waivers from the Administration for Children and Families, Office of Child Care to delay implementation of the background check policies through September 30, 2018 (additional requirements, including milestone requirements, to receive waivers beyond September 2018 were outlined in the CCDF Plan Preprint). States/Territories may have received additional temporary

waivers in response to the COVID-19 pandemic.⁸⁰ Although a State/Territory may be listed as not requiring background checks, they may have received a waiver related to the requirements. As States/Territories implement the background check requirements, these policy changes will be reflected in the CCDF Policies Database and future tables.

Unlicensed Home-Based Provider Training Requirements (Table 40a and 40b)

States/Territories are required to ensure that child care providers undergo minimum health and safety training, even if they are unlicensed. Relatives who provide CCDF-funded care are not covered by the federal health and safety requirements but may still face State/Territory requirements. The types of pre-service and orientation trainings States/Territories are required to include range from pediatric CPR and Shaken Baby Syndrome training to child safety classes and child nutrition classes. Certain types of provider training may make an in-home provider eligible to receive higher reimbursement rates.

Table 40a focuses on two aspects of training: whether States/Territories require *non-relative* unlicensed home-based providers to be trained in CPR and first aid. Findings from 2020 include:

- Twenty-nine States/Territories require only the provider to complete CPR training, three States/Territories require at least one person on site to be trained in CPR, and eight States/Territories require the provider and others on site to be trained in CPR.
- Twenty-seven States/Territories require the provider to complete first aid training, two States/Territories require at least one person on site to have first aid training, and eight States/Territories require the provider and others on site to have first aid training.

Table 40b shows the CPR and first aid training requirements for *relative* unlicensed home-based providers. Findings from 2020 include:

- Twenty-five States/Territories require only the provider to complete CPR training, three States/Territories require at least one person on site to be trained in CPR, and six States/Territories require the provider and others on site to be trained in CPR.

⁸⁰ With the creation of CCDF state plans beginning with 2019, States/Territories were required to meet the national FBI fingerprint check, state criminal history check, state sex offender registry check, and state child abuse and neglect registry check by September 30, 2018. For more information, see the FY 2019-2021 State/Territory Plan Preprint available from the Office of Child Care: <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2018-02>. For federal guidelines on policies in response to the COVID-19 pandemic, see “Office of Child Care COVID-19 Resources” available at <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

- Twenty-three States/Territories require only the provider to have first aid training, two States/Territories require at least one person on site to have first aid training, and six States/Territories require the provider and others on site to have first aid training.

With the CCDBG reauthorization, States/Territories must establish pre-service or orientation training and ongoing training requirements that address health and safety standards and are appropriate for the type of provider. The law specifies subject areas for training, and States/Territories have the flexibility to include additional subject areas determined necessary to protect the health and safety or promote the development of children in care. Additionally, some States/Territories have historically only required that someone on site when care is being provided have completed all State/Territory required trainings, rather than requiring all providers to be certified. Under the new regulations, all providers have to complete all State/Territory required trainings.⁸¹ This area of health and safety training requirements is one of several policy areas where States/Territories may have received temporary waivers in response to the COVID-19 pandemic.⁸² As States/Territories implement the training requirements, these policy changes will be reflected in the CCDF Policies Database and future tables.

Unlicensed Home-Based Provider Health and Safety Requirements (Table 41a and 41b)

States/Territories are required to ensure that child care providers meet applicable requirements to protect the health and safety of the children served, even if they are unlicensed. Requirements must address infectious disease prevention and control, as well as building and physical premises safety among other requirements. Some States/Territories require providers to comply with a list of health and safety requirements through a self-completed checklist, while others require providers to undergo home visits or inspections with certain frequency.

Table 41a focuses on two aspects of health and safety requirements: if *non-relative* unlicensed home-based providers are required to comply with a list of health and safety standards and if home visits or inspections are required after the initial requirement has been met. Findings from 2020 include:

- Fourteen States/Territories require non-relative unlicensed home-based providers to comply with a list of health and safety standards through a self-completed checklist, and another twenty-five

⁸¹ For additional information on provider requirements, see CCDF Regulations 45 CFR Part 98 available from <https://www.federalregister.gov/documents/2016/09/30/2016-22986/child-care-and-development-fund-ccdf-program>.

⁸² For federal guidelines on policies in response to the COVID-19 pandemic, see "Office of Child Care COVID-19 Resources" available at <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

States/Territories require a home-visit or inspection to confirm the provider is complying with the list of health and safety standards.

- Twenty-seven States/Territories require the non-relative unlicensed home-based provider to have at least annual home visits or inspections after the initial requirement has been met. Six States/Territories require the provider to have home visits or inspections randomly or as needed, but the frequency is not specified.

Table 41b shows the health and safety requirements for *relative* unlicensed home-based providers. Findings from 2020 include:

- Eighteen States/Territories require relative unlicensed home-based providers to comply with a list of health and safety standards through a self-completed checklist, and another 20 States/Territories require a home-visit or inspection to confirm the provider is complying with the list of health and safety standards.
- Twenty-one States/Territories require relative unlicensed home-based providers to have at least annual home visits or inspections after the initial requirement has been met. Five States/Territories require the provider to have home visits or inspections randomly or as needed, but the frequency is not specified.

Under CCDBG reauthorization, all States/Territories are required to have licensing inspectors (or qualified monitors designated by the State/Territory agency) perform annual inspections of non-relative license-exempt providers' facilities to ensure they are following health, safety, and fire standards. Additionally, States/Territories have to demonstrate how the licensing exemptions for unlicensed providers will not endanger the health and safety of the children in the program. This area of health and safety requirements is one of several policy areas where States/Territories may have received temporary waivers in response to the COVID-19 pandemic.⁸³ As States/Territories implement the health and safety requirements, these policy changes will be reflected in the CCDF Policies Database and future tables.

Provider Policies: Who May Provide Care (Table 42)

Under the CCDBG reauthorization, providers are defined as an unrelated individual who is licensed, regulated, or registered with the State/Territory and is 18 years of age or older. A relative provider is an

⁸³ For federal guidelines on policies in response to the COVID-19 pandemic, see "Office of Child Care COVID-19 Resources" available at <https://www.acf.hhs.gov/occ/training-technical-assistance/office-child-care-covid-19-resources>.

individual 18 years of age or older who is related to all children in care.⁸⁴ Table 42 describes who may be authorized to provide care under each State's/Territory's child care subsidy program, based on the person's age and his or her relationship to the child. Findings from 2020 include:

- In the 31 States/Territories that allow out of state providers to provide care through the subsidy program, 30 require the provider to be licensed in the State where care is provided.
- Most States/Territories require providers to be at least 18 years of age. Alabama and Nebraska require the provider to be at least 19, Connecticut requires the provider to be at least 20, and Georgia, Rhode Island, and South Carolina require that the provider be at least 21.
- All States/Territories except Mississippi allow relatives living outside of the home of the child to provide care, regardless of setting. In Mississippi, relatives living outside of the home are only allowed to provide care in the child's home, and only when the child has special needs that require in-home care.
- States/Territories differ in their rules concerning relatives who live in the same home as the child. For instance, 30 States/Territories allow relatives living in the home to provide care if they are not counted as part of the family assistance unit, while only five States allow some types of relatives included in the assistance unit to provide care.

Changes in Provider Policies from 2019 to 2020

Several States/Territories made changes to their policies for unlicensed home-based providers between 2019 and 2020. Many changes were in response to the COVID-19 pandemic.

Seventeen States/Territories temporarily waived some or all of their background check requirements for non-relative providers as of October 1, 2020. Sixteen States temporarily waived some or all background checks for relative providers. New York began requiring National Crime Information Center background checks for non-relative providers.

Several States/Territories also made changes to their CPR and first aid training requirements for providers. Idaho began requiring CPR and first aid training for the provider and others onsite, rather than only requiring training for the provider. Connecticut, Illinois, Maine, and Nebraska no longer required relative providers to complete CPR and first aid training. Virginia began requiring CPR and first aid training specifically for the provider, rather than requiring it for one person on site, which might not have been the provider. Virginia's policy change was in response to the COVID-19 pandemic. Additionally, in response to

⁸⁴ More information on provider definitions and requirements is available from ACF: <https://childcareta.acf.hhs.gov/ccdf-fundamentals/licensing-and-exemptions>.

the pandemic, South Carolina temporarily waived the training requirements for relative and non-relative providers, Texas temporarily waived the training requirements for non-relative providers, Arizona provided extensions for non-relative providers to meet the training requirements, and Idaho and Minnesota allowed for online trainings.

Finally, several States/Territories also made changes to their health and safety inspection requirements. New York continued to require inspections for all unlicensed home-based providers, and Utah continued to require inspections for non-relative providers, but both States began only requiring the inspections as needed rather than at set intervals of time. Illinois no longer required relative providers to complete initial or ongoing inspections. Several States also made temporary changes in response to the COVID-19 pandemic. Eight States waived the requirements that providers certify or complete an initial inspection showing they are in compliance with health and safety standards. Additionally, Minnesota waived the requirement for relative providers. An additional two States (Iowa and South Carolina) continued to require providers to complete a health and safety checklist, but waived the follow-up inspection requirements. Oregon and Utah conducted inspections virtually.

The policies shown in the tables are those that were in effect on October 1, 2020. For more information on the additional States/Territories that waived or modified their policies for unlicensed home-base providers in response to the pandemic prior to October 1, see the full CCDF Policies Database.⁸⁵

⁸⁵ For more information about States'/Territories' policies in response to the pandemic, see: Kwon, Danielle, Kelly Dwyer, and Sarah Minton (2022). "Appendix to the 2020 CCDF Policies Database Book of Tables: Child Care Subsidy Policies in Response to the COVID-19 Pandemic from January 2020 to March 2021." OPRE Report 2022-152. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Table 35. Provider Payment Policies, 2020

State/Territory*	Who Pays the Provider	If Providers are Paid for Days the Provider is Closed	If Providers are Paid for Days Children are Absent
Alabama	Agency pays provider directly	Yes, all providers ²	Yes, licensed providers ³
Alaska	Agency pays provider directly ⁴	No	Other ⁵
American Samoa	Agency pays provider directly	--- ¹	Yes, all providers ⁶
Arizona	Agency pays provider directly	No	Yes, all providers ⁷
Arkansas	Agency pays provider directly	Yes, all providers ⁸	Yes, all providers ⁹
California	Agency pays provider directly	Yes, all providers ¹⁰	Yes, all providers ¹¹
Colorado	Agency pays provider directly	Yes, all providers ¹²	Yes, all providers ¹³
Connecticut	Agency pays provider directly	Yes, all providers	Yes, all providers
DC	Agency pays provider directly	Yes, all providers	Yes, all providers ¹⁴
Delaware	Agency pays provider directly	Yes, all providers ¹⁵	Yes, all providers ¹⁵
Florida	Agency pays provider directly	Yes, all providers ¹⁶	Yes, all providers ¹⁶
Georgia	Agency pays provider directly	Yes, all providers ¹⁷	Yes, all providers ¹⁷
Guam	Agency pays provider directly	Yes, all providers ¹⁸	Yes, all providers ¹⁸
Hawaii	Agency gives money to parents, who then pay the providers ¹⁹	Yes, all providers	Yes, all providers ²⁰
Idaho	Agency pays provider directly	Yes, all providers ²¹	Yes, all providers ²²
Illinois	Agency pays provider directly ²³	No ²⁴	Yes, licensed and regulated providers ²⁴
Indiana	Other ²⁵	Yes, all providers ²⁶	Yes, all providers ²⁷
Iowa	Agency pays provider directly	Yes, all providers ²⁸	Yes, all providers ²⁸
Kansas	Agency gives money to parents, who then pay the providers	Yes, all providers ²⁹	Yes, all providers ²⁹
Kentucky	Agency pays provider directly	Yes, licensed and regulated providers ³⁰	Yes, licensed and regulated providers ³¹

Table 35. Provider Payment Policies, 2020

State/Territory*	Who Pays the Provider	If Providers are Paid for Days the Provider is Closed	If Providers are Paid for Days Children are Absent
Louisiana	Agency pays provider directly	Yes, all providers ³²	Yes, all providers ³²
Maine	Agency pays provider directly	Yes, all providers	Yes, all providers ³³
Maryland	Agency pays provider directly	Yes, licensed and regulated providers ³⁴	Yes, licensed providers ³⁵
Massachusetts	Agency pays provider directly	Yes, all providers	Yes, all providers ³⁶
Michigan	Other ³⁷	Yes, all providers ³⁸	Yes, all providers ³⁹
Minnesota	Other ⁴⁰	Yes, all providers ⁴¹	Yes, licensed providers and unlicensed centers ⁴²
Mississippi	Agency pays provider directly	Yes, all providers ⁴³	Yes, licensed providers ⁴⁴
Missouri	Agency pays provider directly ⁴⁵	Yes, all providers ⁴⁶	Yes, all providers ⁴⁶
Montana	Agency pays provider directly	No	Yes, all providers ⁴⁷
Nebraska	Agency pays provider directly	No	Yes, all providers ⁴⁸
Nevada	Agency pays provider directly	Yes, all providers ⁴⁹	Yes, all providers ⁵⁰
New Hampshire	Agency pays provider directly	Yes, all providers ⁵¹	Yes, all providers ⁵²
New Jersey	Agency pays provider directly ⁵³	Yes, all providers	Yes, all providers ⁵⁴
New Mexico	Other ⁵⁵	Yes, all providers ⁵⁶	Yes, all providers ⁵⁷
New York	Agency pays provider directly ⁵⁸	Yes, all providers ⁵⁹	Yes, all providers ⁵⁹
No. Mariana Islands	Agency pays provider directly	Yes, all providers	Yes, all providers
North Carolina	Agency pays provider directly	Yes, all providers ⁶⁰	Yes, all providers ⁶⁰
North Dakota	Other ⁶¹	Yes, all providers ⁶²	Yes, all providers ⁶³
Ohio	Agency pays provider directly	Yes, all providers ⁶⁴	Yes, all providers ⁶⁵
Oklahoma	Agency pays provider directly	No	Yes, licensed providers ⁶⁶
Oregon	Agency pays provider directly	Yes, all providers ⁶⁷	Yes, all providers ⁶⁸
Pennsylvania	Other ⁶⁹	Yes, regulated providers ⁷⁰	Yes, all providers ⁷¹
Puerto Rico	Agency pays provider directly	Yes, all providers ⁷²	Yes, all providers ⁷²

Table 35. Provider Payment Policies, 2020

State/Territory*	Who Pays the Provider	If Providers are Paid for Days the Provider is Closed	If Providers are Paid for Days Children are Absent
Rhode Island	Agency pays provider directly	Yes, all providers ⁷³	Yes, all providers ⁷⁴
South Carolina	Agency pays provider directly	Yes, all providers ⁷⁵	Yes, all providers ⁷⁶
South Dakota	Agency pays provider directly	Yes, licensed and regulated providers ⁷⁷	Yes, licensed and regulated providers ⁷⁷
Tennessee	Agency pays provider directly	Yes, all providers ⁷⁸	Yes, all providers ⁷⁹
Texas	Agency pays provider directly ⁸⁰	Yes, licensed and regulated providers ⁸¹	Yes, licensed and regulated providers ⁸¹
Utah	Agency pays provider directly	Yes, all providers ⁸²	Yes, all providers ⁸²
Vermont	Agency pays provider directly	Yes, licensed and regulated providers ⁸³	Yes, licensed and regulated providers ⁸⁴
Virgin Islands	Agency pays provider directly	No	No ⁸⁵
Virginia	Agency pays provider directly	Yes, licensed and regulated providers ⁸⁶	Yes, licensed providers ⁸⁶
Washington	Agency pays provider directly	Yes, licensed providers	Yes, licensed providers
West Virginia	Agency pays provider directly	Yes, all providers ⁸⁷	Yes, all providers ⁸⁸
Wisconsin	Agency gives money to parents, who then pay the providers	Yes, all providers ⁸⁹	Yes, all providers ⁹⁰
Wyoming	Agency pays provider directly	No	Yes, all providers ³²

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² The provider is paid for pre-established center closing days.

³ Informal care providers are only reimbursed for actual days of child care. Providers are reimbursed for absences only if the provider collects such reimbursement from private-pay parents. Providers are reimbursed for five absences in a month. If the child has a documented mental or physical illness, the provider is reimbursed for an additional five days in the month.

⁴ Unregulated in-home care providers are hired by the eligible family, which receives money from the state to pay for care.

⁵ Providers are paid at a full- or part-month rate based on a range of the child's actual attendance. Providers are paid for the required 10 business-day notice when care ends regardless of if the child actually attends unless both parties have signed a mutual agreement waiving the 10 business-day notice.

⁶ Providers are paid the full monthly rate of 20 days as long as a child attends at least 13 days.

⁷ In response to the pandemic, providers are paid based on January 2020 enrollment.

⁸ Providers are paid for observed holidays or days the center is closed due to inclement weather.

⁹ Foster care and child protective services cases are exempt from absent day limits. Providers are eligible to be paid beyond the number of normally allowable absent days by filling out a waiver request due to the COVID-19 pandemic.

- ¹⁰ Providers are reimbursed for a maximum of 10 non-operational days per fiscal year. Effective September 1, 2020 through June 30, 2021, providers will be paid for up to 14 COVID-19 related non-operational days, in addition to the current non-operational days.
- ¹¹ Providers that remain open during the COVID-19 emergency will be paid based on their certified need regardless of attendance. Families certified for a variable schedule and license-exempt providers will be reimbursed based on the maximum authorized hours of certified need.
- ¹² Counties have the option to pay for holidays. The policy must be approved by the State Department.
- ¹³ Absences are paid for a minimum number of days based on the provider's quality tier and the age of the children in care.
- ¹⁴ Payment is authorized for the provider for up to five days of unexcused absences and 15 days of excused absences for a child per month.
- ¹⁵ Providers that remain closed after July 6, 2020 or are closed for non-pandemic related reasons are paid based on attendance. Providers that are open are paid based on enrollment.
- ¹⁶ Providers are reimbursed for 16 absences or closures due to the COVID-19 pandemic.
- ¹⁷ In response to the pandemic, all providers are paid for any child with an active scholarship who received care at least once since March 1, 2020. This applies to open and closed providers.
- ¹⁸ All child care providers are paid based on enrollment for the duration of the public health emergency due to COVID-19.
- ¹⁹ The agency pays families through direct deposit into a checking account or on the family's EBT card.
- ²⁰ Providers are paid for full-time care for any caretakers impacted by any federal, state, or county declared emergency proclamation related to a man-made or natural disaster, or public health pandemic situation.
- ²¹ Providers may be paid for days they are closed if they also bill private-pay parents for those days.
- ²² Providers may be paid for days children are absent if they also bill private-pay parents for those days. If child care arrangements would otherwise be lost, providers may be paid for up to one month for a child's absence, as long as the child plans to return.
- ²³ Payments are processed by the local resource and referral agency and issued directly to the provider from the lead agency.
- ²⁴ Licensed and license-exempt child care center providers are paid for days the child is absent if the child is in attendance for at least 80 percent of the days the child is eligible for care. License-exempt home-based providers are only paid for the days the child attends care.
- ²⁵ With the exception of nanny care, the agency pays the provider directly. In the case of nanny care, defined as care in the child's home by a nonresident, the subsidy payment is made to the parent who is responsible for paying the provider.
- ²⁶ Providers are reimbursed for up to six holidays per year, provided the child was in attendance in the 21 days prior to the holiday. Providers are also reimbursed for up to five inclement weather closings per year when there was a travel advisory in their county.
- ²⁷ Providers are paid for up to 20 absences per year. For a child with special health situations (i.e. prolonged illness or injury), the treating physician must document the child's needs for treatment or recuperation. With special approval, this prescribed time may result in absences in excess of 20 days.
- ²⁸ All providers are paid based on enrollment due to COVID-19.
- ²⁹ Benefits continue to be paid to families regardless of attendance so families can continue to pay providers during the COVID-19 pandemic.
- ³⁰ Providers can be paid for up to 10 holidays per calendar year, with the holidays chosen by the provider.
- ³¹ Licensed providers and certified family care homes may be paid for a maximum of five absences per month. Absences beyond five days may be approved with documentation when there is a death in the family, illness of the child or parent, court order, or natural disaster. Registered providers are not paid for absences.
- ³² Providers are paid based on enrollment due to the COVID-19 pandemic.
- ³³ Providers can be paid for excused absences, including holidays, vacations, inclement weather, illnesses, or family emergencies. The amount of hours allowed for excused absences is based on the child's enrollment; children receiving full-time care are eligible for 200 hours of excused absences, and children receiving part-time care are eligible for 150 hours of excused absences.
- ³⁴ Family homes and child care centers are paid for six predetermined holidays per year. Family homes and centers are also paid for the days when the provider is closed for an official weather emergency or voluntary closure as long as it does not exceed two consecutive weeks annually and the provider gives two weeks written notice. Informal providers are not paid for holidays in which the provider is closed, but can be paid for holidays that are documented as worked. Informal providers are paid for voluntary closures.
- ³⁵ Family homes and child care centers are paid for an absent child up to 60 days in one year.
- ³⁶ In response to the COVID-19 pandemic, providers will be paid for all children who have confirmed enrollment, even if the child is not attending. The provider must be engaged with the family at least twice a month. This engagement can be a verbal check-in by the provider to keep open communication with the parent and to provide educational supports for the children.
- ³⁷ All payments are mailed or direct deposited directly to the provider, except in the case of license-exempt-related (family) and license-exempt-unrelated (friend and neighbor) providers, for which payment is mailed to the parent or guardian.

³⁸ Providers are paid for days a child is absent, is reasonably expected to return, and would normally have been in care, regardless of the reason for the absence. The number of absence hours for which a provider may be paid is capped at 360 hours per fiscal year and limited to no more than 10 days of absences when no care is provided.

³⁹ Providers are paid for days children would normally have been in attendance, limited to 360 hours per fiscal year.

⁴⁰ The agency pays the provider directly unless care is provided in the child's home, in which case the payment is made to the parent.

⁴¹ Providers are paid only for days the center is closed for holidays. Providers cannot be paid for provider vacation days, provider sick days, or any other days that child care is not available. Providers that closed temporarily due to COVID-19 may be paid for up to four weeks.

⁴² All licensed providers and license-exempt centers may be paid for days children are absent. The subsidy will not be provided after 10 consecutive days of absences or up to 25 days in a calendar year per child. Children with a medical condition or children whose parents or siblings have a medical condition documented by a qualified medical professional may exceed the limits. Children may be exempt from the absent day limits if at least one parent is under the age of 21, does not have a high school or general equivalency diploma, and is a student in a district or program that provides or arranges child care, parenting support, social services support, career and employment supports, and academic supports. The exemption must be approved by the county. If the provider fails to accurately mark a child absent on any day that the child does not attend care, that day is considered an overpayment regardless of whether the child reached or is exempt from the absent day limits for the year. Providers are paid for additional days when children are absent beyond the limit if the family or provider requests an exemption from the absent day limit due to COVID-19.

⁴³ Providers may elect to observe up to 11 holidays a year. If the governor allows more than one day in observance of a holiday, the providers must be allowed these extra days.

⁴⁴ A child may be allowed up to five paid unexcused absence days per month. Child care providers are paid for a full month for up to five absent days. If a child is absent for more than five days, the child care provider will be paid on a daily basis. No documentation is needed for these absences. Absences are considered excessive whenever a child is absent from a child care center for 60 consecutive days or more. When disaster or emergency conditions have been declared, providers may be paid based on the number of children enrolled regardless of attendance, as long as the child attended at least one day in the first month of the declared emergency.

⁴⁵ Parents may pay the provider directly and be reimbursed for authorized child care services if children are in protective services, residing out of state, and the out-of-state child care provider is unwilling to accept direct payment.

⁴⁶ The provider is paid for up to five absences or holidays per month for children authorized to attend 20 or more units of care per month. The provider is paid for up to three absences or holidays per month for children authorized to attend 2 to 19 units of care per month. A holiday is any day the provider is closed during normal operating hours, including legal and local holidays, inclement weather, or a provider vacation.

⁴⁷ In response to the pandemic, if a child attends 85 percent or more of the monthly authorized time, the entire authorized amount is paid. This policy covers occasional absences, such as illness or vacation. Providers can also be paid for a two-week quarantine of a child.

⁴⁸ All providers, licensed and license exempt are able to bill the full authorized amount for the times that the child is absent on a scheduled day, up to five times per month. Providers that are open, staffed, and licensed may be paid for days when an eligible child does not receive care from the provider because the child's parent or legal caretaker keeps the child home or is unable to utilize care due to the COVID-19 emergency. Providers will be paid in accordance with the child's regular attendance schedule and current child care subsidy authorization. No extra hours or days will be allowed for absent child billings. This policy will terminate 30 days after the COVID-19 state of emergency is lifted.

⁴⁹ Licensed providers are paid based on the previous month's enrollment if they are ordered to close by a government agency in response to the pandemic.

⁵⁰ When a child's subsidy payment is based on actual attendance, the provider can be reimbursed for up to 21 absences per year with written authorization from the parent. When a child's subsidy payment is based on the parent's approved schedule, there is no limit to the amount of allowed absences for which providers are reimbursed.

⁵¹ Providers may be paid for designated closures on the following days: Thanksgiving Day, Christmas Day, New Year's Day, 12 hours of staff development per calendar year, 12 hours of program closures per calendar year, federal or state declared disaster closure days.

⁵² Each child is given a determined annual allotment of absentee hours based on their authorized service level. Parents are responsible for paying the child care provider for any hours of child care services when the child's attendance falls below the approved service level and the child's absentee allotment has been exhausted.

⁵³ The provider must complete and sign an agreement, along with a parent signature, before payment can be received.

⁵⁴ If children are present at least 80 percent of the service period, full payment is rendered. If the child is absent more than five days due to illness, a physician's note is required in order to receive payment.

- ⁵⁵ The agency pays all licensed providers and registered home providers directly. For in-home providers, the agency pays the parent, who then pays the provider.
- ⁵⁶ Providers are paid if they are closed for up to five days. If the child receives care from a different provider while the original provider is closed, the payment will go to the provider who cares for the child while the original provider is closed. All child care providers are paid based on enrollment for the duration of the public health emergency due to COVID-19.
- ⁵⁷ Payment is based upon the child's enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance. Child care providers must notify the department within three business days after the fifth day of non-attendance if the child is disenrolled or is absent for five consecutive scheduled days. If authorized child care has not been used for five consecutive scheduled days without a reason such as illness, sudden death, or family medical emergency, payment may discontinue to the provider and the client will remain eligible for the remainder of the eligibility period. All child care providers are paid based on enrollment for the duration of the public health emergency due to COVID-19.
- ⁵⁸ Policy coded for New York City. Payments may be made either to the parent or the provider, as determined by each district.
- ⁵⁹ Policy Coded for New York City. Districts have the option to expand the maximum total number of days that providers are paid on behalf of a child already in receipt of subsidy who is temporarily absent from care due to the effects of COVID-19, or the maximum total number of days that providers are paid for being closed due to the effects of COVID-19. This includes, but is not limited to, instances where children are absent from care due to the parent or caretaker being furloughed or working from home as a result of the disaster emergency, children are kept home as a precautionary measure to limit exposure to COVID-19, children are temporarily absent due to illness or official quarantine, programs are closed due to exposure to COVID-19, due to low enrollment as a result of the disaster emergency, or as a precautionary measure to reduce the spread of COVID-19.
- ⁶⁰ Payment for services is typically based on enrollment. Providers are paid based on attendance if the child has been absent more than 10 days, the provider charges on the basis of attendance, or if the provider has an unpaid closure.
- ⁶¹ The provider chooses who will be paid. The agency may pay the provider directly or the provider may request the payment be issued to the family.
- ⁶² In response to the pandemic, providers are paid for closures if the closure was verified by the state.
- ⁶³ Up to 40 hours per calendar month can be reimbursed for a child who is absent from the child care setting for any reason when the provider requires payment of the absence.
- ⁶⁴ A provider may be paid for two professional development days in a fiscal year, defined as July 1st through June 30th of the following year. The two days cannot be utilized in two consecutive days or two consecutive months. A provider may also be paid for up to 21 pandemic days per fiscal year. A pandemic day is a day the provider is closed in response to the COVID-19 pandemic. This does not apply to In-Home Aides.
- ⁶⁵ Providers are reimbursed for up to twenty absent days per child during each six-month period that care is provided.
- ⁶⁶ If the child in care is authorized for weekly units of care and the child attends a minimum of 15 days during the month, the provider can be reimbursed for absences. In-home providers are not paid the weekly rate.
- ⁶⁷ Providers are paid in the event of a temporary shutdown due to COVID-19.
- ⁶⁸ Providers are paid up to one month after a child who was scheduled to attend is no longer in care due to COVID-19.
- ⁶⁹ The agency pays the provider directly with the exception of in-home care; the agency gives the payment to the parent if care is provided in the child's own home.
- ⁷⁰ Regulated providers are paid for up to 15 closure days per fiscal year.
- ⁷¹ Providers are paid for a maximum of 40 days of absence for each child during the state's fiscal year. If absences exceed 40 days for a child, the parent or caretaker is responsible for paying the provider for all additional absences.
- ⁷² Providers are paid for service, unless service is provided for less than the 80 percent monthly service requirement.
- ⁷³ All providers that are closed due to mandated closure by the Department of Health were paid based on enrollment due to COVID-19.
- ⁷⁴ All providers were paid based on enrollment due to COVID-19.
- ⁷⁵ The provider must also bill private-pay parents for the days the center is closed.
- ⁷⁶ When a child is absent for two consecutive weeks (Monday through Friday), but returns on any day of the third week, the provider can continue to bill and be paid for that time period for the child.
- ⁷⁷ During the COVID-19 pandemic, licensed and registered providers may be paid for unlimited absent hours for the time the child is not in care for a reason related to COVID-19, including if the child care program is closed to address program needs related to COVID-19; a family has chosen to keep their child home out of precaution or because the parent is not currently working due to COVID-19; the family is quarantined at home due to exposure to COVID-19 or a COVID-19 illness.
- ⁷⁸ Providers are paid for approved state holidays if the provider is closed.
- ⁷⁹ Providers may be paid for up to five days per month for days a child is absent from care.
- ⁸⁰ Payment is made to providers either by the Local Workforce Development Board or the Board's designated contractor.

⁸¹ Policy coded for Gulf Coast Region. Absences are not required to be reported due to COVID-19, and attendance standards are waived.

⁸² Providers are paid prospectively. Providers retain their full monthly payment as long as the child received care for at least eight hours in the month. Providers must report a child has not attended for eight hours within ten days of learning of the change or by the 25th of the month, whichever is sooner.

⁸³ Approved relative child care providers are not reimbursed for days the provider is closed.

⁸⁴ Licensed and registered providers are reimbursed for days children are absent. Approved relative child care providers are not reimbursed for days children are absent.

⁸⁵ The provider is not paid for days the child was absent due to vacation or if the parent stopped sending the child.

⁸⁶ Licensed providers are paid for up to 36 absent days per fiscal year. Licensed providers, certified preschools, voluntarily registered family day homes, and religiously exempt child day centers may be paid up to 10 holidays identified by the state, if the provider charges the general public for those holidays. The department does not pay for holidays when an unlicensed family day home or local government approved recreation program is closed.

⁸⁷ Providers that are closed due to the COVID-19 pandemic are paid based on the number of approved days for each child that is enrolled. Providers are reimbursed for the number of approved days listed on the child's certificate up to a maximum of 22 days.

⁸⁸ Providers that are open during the COVID-19 pandemic are paid based on enrollment rather than attendance. If a child cannot attend, the provider may still bill for the child for the number of approved days listed on the child's certificate up to a maximum of 22 days. For children who attend, the provider is paid the full number of days they actually provide care, which can exceed 22 days in a month.

⁸⁹ The agency will pay for up to one week of provider shutdown per year.

⁹⁰ Providers are paid based on a child's expected attendance based on the parent's schedule at the beginning of the month.

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Alabama ²	650	719	598	659	598	659	249	275
Alaska ³	980	980	850	850	755	755	400	400
American Samoa	200	200	180	180	180	180	54	54
Arizona ⁴	884	1,061	796	955	693	832	412	494
Arkansas ⁵	835	928	794	881	663	740	473	527
California ⁶	1,594	1,594	1,124	1,124	1,124	1,124	502	502
Colorado ⁷	1,208	1,701	1,083	1,576	915	1,170	354	655
Connecticut ⁸	1,634	1,716	1,634	1,716	1,049	1,102	486	510
DC ⁹	1,418	2,035	1,418	2,035	1,059	1,332	469	469
Delaware ¹⁰	845	1,326	687	1,059	687	1,059	326	511
Florida ¹¹	674	808	570	684	530	636	356	427
Georgia ¹²	650	910	624	874	537	752	303	425
Guam	675	675	575	575	570	570	390	390
Hawaii ¹³	2,000	2,000	1,200	1,500	1,200	1,500	800	800
Idaho ¹⁴	790	790	650	650	650	650	471	471
Illinois ¹⁵	1,103	1,103	929	929	776	776	388	388
Indiana ¹⁶	1,070	1,499	966	1,352	763	1,066	399	559
Iowa ¹⁷	737	949	737	949	639	810	264	325
Kansas ¹⁸	712	712	508	508	508	508	197	197
Kentucky ¹⁹	585	607	585	607	542	542	325	325
Louisiana ²⁰	550	550	523	523	484	484	363	363
Maine ²¹	1,313	1,313	1,209	1,209	1,122	1,122	487	487
Maryland ²²	958	1,379	659	830	659	830	438	551
Massachusetts ²³	1,847	1,902	1,291	1,726	1,291	1,291	712	712

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Michigan ²⁴	745	1,005	529	789	529	789	256	386
Minnesota ²⁵	1,322	1,586	1,018	1,222	1,018	1,222	650	780
Mississippi ²⁶	600	600	600	600	550	550	305	305
Missouri ²⁷	829	995	638	766	638	766	267	320
Montana ²⁸	866	866	866	866	758	758	758	758
Nebraska ²⁹	975	1,001	919	975	849	929	520	572
Nevada ³⁰	924	1,056	836	924	792	880	704	836
New Hampshire ³¹	1,083	1,083	990	990	854	854	385	385
New Jersey ³²	994	1,194	690	914	690	914	317	317
New Mexico ³³	721	1,271	590	1,140	491	841	327	515
New York ³⁴	1,759	1,759	1,365	1,365	1,252	1,252	672	672
No. Mariana Islands ³⁵	425	425	425	425	340	340	170	170
North Carolina ³⁶	963	1,194	937	1,120	881	1,035	443	475
North Dakota	840	840	790	790	720	720	477	477
Ohio ³⁷	910	1,278	815	1,144	713	1,001	269	378
Oklahoma ³⁸	575	1,127	511	941	506	695	340	462
Oregon ³⁹	1,415	1,415	1,404	1,404	1,060	1,060	641	641
Pennsylvania ⁴⁰	925	1,211	792	1,072	725	924	506	576
Puerto Rico ⁴¹	379	379	379	379	369	369	288	288
Rhode Island ⁴²	1,116	1,183	1,116	1,183	848	1,127	475	796
South Carolina ⁴³	802	888	802	888	702	789	325	355
South Dakota ⁴⁴	728	728	728	728	659	659	334	334
Tennessee ⁴⁵	765	920	520	624	520	624	258	310
Texas ⁴⁶	909	1,181	783	1,090	714	1,009	458	698

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Utah ⁴¹	936	936	765	765	689	689	620	620
Vermont ⁴⁷	860	1,204	827	1,158	711	996	364	509
Virgin Islands	300	300	300	300	300	300	150	150
Virginia ⁴⁸	1,763	1,763	1,505	1,505	1,505	1,505	924	924
Washington ⁴⁹	1,939	2,327	1,466	1,759	1,466	1,759	501	602
West Virginia ⁵⁰	640	720	600	680	560	640	250	290
Wisconsin ⁵¹	1,189	1,561	1,076	1,413	921	1,209	405	531
Wyoming ⁴¹	650	650	573	573	542	542	336	336

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹The rates represent the maximum reimbursement rates for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time center based child care. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, when hourly, daily, or weekly rates were provided, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate. If rates were increased due to the COVID-19 pandemic, and this policy was in effect on October 1, 2020, the policy is reflected here with a footnote explaining the rate increase. For more information on rates that were increased prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database. For states that increased rates as of October 1, 2020, detailed rates prior to the pandemic can be found in the full CCDF Policies Database.

² Base rates are center reimbursement rates with no star rating for the Birmingham Region. Highest rates are star 5 center reimbursement rates for the Birmingham region.

³ Center reimbursement rates for Anchorage.

⁴ Licensed center reimbursement rates for District 1.

⁵ Base rates are Better Beginnings quality incentive star level 1 rates for centers in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for centers in urban areas. These rates reflect that providers accepting child care vouchers during the COVID-19 pandemic were paid an additional \$10 per child for infant and toddlers, an additional \$7 for preschool children, and \$5 for school age children.

⁶ Center reimbursement rates for Los Angeles. Before-and-after care rates reflect monthly part-time rates.

⁷ Base rates are tier one center reimbursement rates for Denver. Highest rates are tier five center reimbursement rates for Denver.

- ⁸ Base rates are licensed center reimbursement rates for the Southwest Region. Highest rates are licensed accredited center reimbursement rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁹ Base rates are developing or preliminary child development center reimbursement rates. Highest rates are high quality child development center reimbursement rates. Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.
- ¹⁰ Center reimbursement rates for New Castle.
- ¹¹ Base rates are licensed or exempt center reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal center reimbursement rates for the Miami-Dade Coalition. Before-and-after care rates reflect part-time, before- or after-school rates for school-age children.
- ¹² Base rates are center rates with no additional star rating for Zone 1. Highest rates are three-star center rates for Zone 1.
- ¹³ Base rates are licensed center reimbursement rates. Highest rates are licensed accredited center reimbursement rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ¹⁴ Center reimbursement rates for Cluster 3, which includes Boise County. Rates are determined based on the parent's qualifying activity hours and are authorized up to the full-time rate for before-and-after care if the provider charges full-time rates for the amount of care provided.
- ¹⁵ Licensed day care center reimbursement rates for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁶ Base rates are licensed center reimbursement rates for Marion. Highest rates are licensed, Paths to QUALITY level 4 center reimbursement rates for Marion.
- ¹⁷ Base rates are basic care center rates. Highest rates are Quality Rating System level 5 center rates. Center-based providers that remained open during the COVID-19 pandemic were eligible to receive an additional \$2,000 per month. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ¹⁸ Center reimbursement rates for Sedgwick County.
- ¹⁹ Base rates are licensed type II center rates for Jefferson County. Highest rates are licensed type I center rates for Jefferson County. Providers participating in the All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ Base rates are one star Type III and Class M center rates. Highest rates are five star Type III and Class M center rates. The state authorizes a maximum 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In addition to the rates shown, lump sum bonus payments are issued after the end of each calendar quarter to child care centers based on the center's star rating and a percentage of all child care subsidy payments received by the center during the prior quarter. Five star-rated centers are paid a lump sum equal to 20 percent of the total amount of child care subsidy payments received.
- ²¹ Licensed center reimbursement rates for Cumberland County.
- ²² Base rates are unaccredited licensed center reimbursement rates for Baltimore City. Highest rates are level 5 center reimbursement rates for Baltimore City.
- ²³ Base rates are reimbursement rates for centers with no additional rating in Region 4. Highest rates are QRIS level 2 and above center reimbursement rates for Region 4.
- ²⁴ Base rates are licensed blank-star and one-star child care center reimbursement rates. Highest rates are licensed five-star child care center reimbursement rates.
- ²⁵ Base rates are unaccredited center reimbursement rates for Hennepin County. Highest rates are 4-star Parent Aware center reimbursement rates for Hennepin County.
- ²⁶ Licensed child care center reimbursement rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ²⁷ Base rates are licensed center reimbursement rates for St. Louis County. Highest rates are licensed accredited center reimbursement rates for St. Louis County. Rates were calculated using a multiplier of 22 days per month.
- ²⁸ Rates were calculated using a multiplier of 21.65 to convert full-time daily rates to monthly rates. In response to the COVID-19 pandemic, school-age rates were raised to match the rates for preschool-age children.
- ²⁹ Base rates are unaccredited center reimbursement rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited center reimbursement rates for the entire state.

- ³⁰ Base rates are 1-Star licensed center reimbursement rates for Clark County. Highest rates are 5-Star licensed center reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.
- ³¹ Licensed center reimbursement rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. School age children are only eligible for half-time service during the school year and are allowed full-time service during scheduled school breaks.
- ³² Base rates are licensed child care center reimbursement rates. Highest rates are Grow NJ Kids 5-Star rated provider rates.
- ³³ Base rates are licensed center reimbursement rates. Highest rates are FOCUS 5-Star center or New Mexico Children, Youth, and Family Department approved national accreditation reimbursement rates. Providers that remain open during the pandemic are paid an additional \$250 per child in care. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ³⁴ Licensed or registered day care center reimbursement rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁵ A maximum of three hours of care per day is approved for after school programs.
- ³⁶ Base rates are licensed 3-Star center reimbursement rates for Mecklenburg County. Highest rates are licensed 5-Star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time summer care rate.
- ³⁷ Base rates are licensed center reimbursement rates for Franklin County. Highest rates are licensed 5-Star center reimbursement rates for Franklin County.
- ³⁸ Base rates are one-star center reimbursement rates. Highest rates are three-star center reimbursement rates. Before-and-after care rates are blended rates for a traditional school year. The multiplier for converting maximum daily rates to maximum monthly rates is 23. Beginning April 1, 2020, in response to the COVID-19 pandemic, all providers are paid an additional \$5 per day per child, as reflected in the rates shown here.
- ³⁹ Certified center reimbursement rates for Group Area A.
- ⁴⁰ Base rates are Star 1 center reimbursement rates for Philadelphia. Highest rates are Star 4 center reimbursement rates for Philadelphia.
- ⁴¹ Licensed center reimbursement rates.
- ⁴² Base rates are for 1 Star licensed centers. Highest rates are for 5 Star centers, with rates at the 90th percentile. Due to Covid-19, all providers not previously rated as 5 Star will be paid the 5 Star rate (as reflected in the base rates). All providers previously rated as 5 Star will be paid the ninetieth percentile rates (as reflected in the highest rates). Providers participating in the state's quality rating system star 3 or above are eligible to receive a once yearly incentive payment of \$500.
- ⁴³ Base rates are level C licensed center reimbursement rates for urban counties. Highest rates are level A+ highest achieving center reimbursement rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.
- ⁴⁴ Licensed day care center reimbursement rates for Minnehaha County.
- ⁴⁵ Base rates are reimbursement rates for centers with no star rating for the Top Tier counties. Highest rates are three-star center reimbursement rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁶ Base rates are licensed center rates for the Gulf Coast Region. Highest rates are licensed 4-Star center rates for the Gulf Coast Region. Providers are paid a 25 percent enhanced rate due to the COVID-19 pandemic, as reflected in the amounts shown here.
- ⁴⁷ Base rates are licensed Early Childhood Program reimbursement rates. Highest rates are licensed 5-Star Early Childhood Program reimbursement rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁸ Level 2 center reimbursement rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁴⁹ Base rates are licensed level 1 center reimbursement rates for Region 4. Highest rates are Early Achievers level 5 licensed center reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 days per month. School-age before-and-after care rates are authorized at 30 half day units when care is provided for five days per week.
- ⁵⁰ Base rates are tier 1 center reimbursement rates. Highest rates are tier 3 center reimbursement rates. Rates were calculated using a multiplier of 20 days per month.
- ⁵¹ Base rates are licensed 2-Star center rates for Milwaukee. Highest rates are licensed 5-Star center rates for Milwaukee. The state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Alabama ²	542	598	520	572	520	572	238	262
Alaska ³	704	704	650	650	545	545	301	301
American Samoa	200	200	180	180	180	180	54	54
Arizona ⁴	607	728	563	676	542	650	368	442
Arkansas ⁵	835	928	794	881	663	740	473	527
California ⁶	927	927	867	867	867	867	525	525
Colorado ⁷	775	1,127	650	1,083	650	1,083	313	536
Connecticut ⁸	1,161	1,242	1,161	1,242	899	962	550	589
DC ⁹	1,093	1,512	1,093	1,512	668	936	364	364
Delaware ¹⁰	563	872	521	810	521	810	253	414
Florida ¹¹	581	698	512	615	502	602	333	400
Georgia ¹²	542	758	520	728	455	637	238	334
Guam	675	675	575	575	570	570	390	390
Hawaii ¹³	950	950	800	800	800	800	600	600
Idaho ¹⁴	618	618	555	555	555	555	488	488
Illinois ¹⁵	837	837	780	780	710	710	355	355
Indiana ¹⁶	563	789	542	758	433	607	334	468
Iowa ¹⁷	562	607	562	607	542	596	234	271
Kansas ¹⁸	534	534	451	451	451	451	225	225
Kentucky ¹⁹	542	542	542	542	520	520	303	303
Louisiana ²⁰	550	550	523	523	484	484	363	363
Maine ²¹	953	953	867	867	802	802	455	455
Maryland ²²	702	906	576	738	576	738	386	494
Massachusetts ²³	1,527	1,573	924	952	924	924	555	571

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Michigan ²⁴	598	858	511	771	511	771	247	377
Minnesota ²⁵	737	884	650	780	650	780	433	520
Mississippi ²⁶	436	436	435	435	398	398	190	190
Missouri ²⁷	447	536	408	490	408	490	216	259
Montana ²⁸	650	650	650	650	606	606	606	606
Nebraska ²⁹	650	737	650	693	650	693	390	394
Nevada ³⁰	704	814	693	770	660	748	660	748
New Hampshire ³¹	771	771	758	758	758	758	260	260
New Jersey ³²	670	703	527	550	527	550	263	275
New Mexico ³³	567	817	464	714	412	662	305	493
New York ³⁴	867	867	849	849	802	802	498	498
No. Mariana Islands ³⁵	425	425	425	425	340	340	170	170
North Carolina ³⁶	740	799	743	773	699	727	386	404
North Dakota ³⁷	640	640	620	620	600	600	500	500
Ohio ³⁸	621	872	623	875	535	751	287	403
Oklahoma ³⁹	575	1,024	511	943	488	727	338	462
Oregon ⁴⁰	1,254	1,254	1,140	1,140	1,000	1,000	563	563
Pennsylvania ⁴¹	747	1,033	658	939	619	818	440	509
Puerto Rico	310	310	310	310	305	305	236	236
Rhode Island ⁴²	972	972	972	972	743	743	527	527
South Carolina ⁴³	585	620	585	620	542	576	325	360
South Dakota ⁴⁴	537	537	537	537	494	494	260	260
Tennessee ⁴⁵	581	697	469	563	469	563	323	387
Texas ⁴⁶	736	1,034	688	961	636	915	444	681

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Utah ³⁷	700	700	650	650	610	610	575	575
Vermont ⁴⁷	595	834	579	810	496	695	273	382
Virgin Islands	300	300	300	300	300	300	150	150
Virginia ⁴⁸	1,182	1,182	1,075	1,075	1,075	1,075	774	774
Washington ⁴⁹	1,353	1,623	1,127	1,352	1,127	1,352	609	731
West Virginia ⁵⁰	500	580	440	520	440	520	200	240
Wisconsin ⁵¹	948	1,244	860	1,130	788	1,035	366	481
Wyoming ⁵²	554	554	542	542	500	500	318	318

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ The rates represent the maximum reimbursement rate for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time care in a family child care home. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, when hourly, daily, or weekly rates were provided, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate. The rates shown are for family child care home providers. States may also use separate rates for group child care home providers; rates for group child care home providers can be found in the full detail of the CCDF Policies Database. If rates were increased due to the COVID-19 pandemic, and this policy was in effect on October 1, 2020, the policy is reflected here with a footnote explaining the rate increase. For more information on rates that were increased prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database. For states that increased rates as of October 1, 2020, detailed rates prior to the pandemic can be found in the full CCDF Policies Database.

² Base rates are family day care home reimbursement rates with no star rating for the Birmingham Region. Highest rates are star 5 family day care home reimbursement rates for the Birmingham region.

³ Family home care rates for Anchorage.

⁴ Certified child care group home reimbursement rates for District 1.

- ⁵ Base rates are Better Beginnings quality incentive star level 1 rates for family child care homes in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for family child care homes in urban areas. These rates reflect that providers accepting child care vouchers during the COVID-19 pandemic were paid an additional \$10 per child for infant and toddlers, an additional \$7 for preschool children, and \$5 for school age children.
- ⁶ Licensed family child care home rates for Los Angeles. Before-and-after care rates reflect monthly part-time rates.
- ⁷ Base rates are tier one home reimbursement rates for Denver. Highest rates are tier five home reimbursement rates for Denver.
- ⁸ Base rates are licensed family day care home rates for the Southwest Region. Highest rates are licensed accredited family child care home rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁹ Base rates are developing or preliminary child development home reimbursement rates. Highest rates are high quality child development home reimbursement rates. Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.
- ¹⁰ Licensed family child care home rates for New Castle.
- ¹¹ Base rates are licensed family child care home reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal family child care home rates for the Miami-Dade Coalition. Before-and-after care rates reflect part-time, before- or after-school rates for school-age children.
- ¹² Base rates are family child care home rates with no additional star rating for Zone 1. Highest rates are three-star family child care home rates for Zone 1.
- ¹³ Licensed family child care home rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ¹⁴ Family child care home rates for Cluster 3, which includes Boise County. Rates are determined based on the parent's qualifying activity hours and are authorized up to the full-time rate for before-and-after care if the provider charges full-time rates for the amount of care provided.
- ¹⁵ Licensed family day care home rates for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁶ Base rates are licensed family child care home rates for Marion. Highest rates are licensed, Paths to QUALITY level 4 family child care home rates for Marion.
- ¹⁷ Base rates are registered Child Development Home category A and B basic registered rates. Highest rates are registered Child Development Home category A and B Quality Rating System level 5 rates. Home-based providers that remained open during the COVID-19 pandemic were eligible to receive an additional \$500 per month. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ¹⁸ Licensed family child care home rates for Sedgwick County.
- ¹⁹ Certified family child care home rates for Jefferson County. Providers participating in the All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ The state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In response to the COVID-19 pandemic, family child care home and in-home providers are paid the same rates as for center-based care.
- ²¹ Licensed family child care home rates for Cumberland County.
- ²² Base rates are unaccredited licensed family child care home rates for Baltimore City. Highest rates are level 5 family child care home rates for Baltimore City.
- ²³ Base rates are reimbursement rates for non-systems family child care homes with no additional rating in Region 4. Highest rates are QRIS level 2 and above non-systems family child care home rates for Region 4. For family child care settings, before-and-after care for school-age children is calculated as 60 percent of the full-time rate.
- ²⁴ Base rates are licensed blank-start and one-star family home reimbursement rates. Highest rates are licensed five-star family home reimbursement rates.
- ²⁵ Base rates are licensed unaccredited family child care rates for Hennepin County. Highest rates are licensed 4-star Parent Aware family child care rates for Hennepin County.
- ²⁶ Family child care home reimbursement rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ²⁷ Base rates are licensed family home rates for St. Louis County. Highest rates are licensed accredited family home rates for St. Louis County. Rates were calculated using a multiplier of 22 days per month.
- ²⁸ Rates were calculated using a multiplier of 21.65 to convert full-time daily rates to monthly rates. In response to the COVID-19 pandemic, school-age rates were raised to match the rates for preschool-age children.

- ²⁹ Base rates are licensed family child care home I and II rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited family child care home rates for the entire state.
- ³⁰ Base rates are 1-Star licensed family child care home reimbursement rates for Clark County. Highest rates are 5-Star licensed family child care home reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.
- ³¹ Licensed family child care home rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. School age children are only eligible for half-time service during the school year and are allowed full-time service during scheduled school breaks.
- ³² Base rates are registered family child care home rates. Highest rates are accredited family child care home rates.
- ³³ Base rates are licensed family child care home rates. Highest rates are FOCUS 5-Star family child care home or New Mexico Children, Youth, and Family Department approved national accreditation reimbursement rates. Providers that remain open during the pandemic are paid an additional \$250 per child in care. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ³⁴ Registered family day care home rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁵ A maximum of three hours of care per day is approved for after school programs.
- ³⁶ Base rates are licensed 3-Star center reimbursement rates for Mecklenburg County. Highest rates are licensed 5-Star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time summer care rate.
- ³⁷ Licensed family child care home rates.
- ³⁸ Base rates are licensed Type B family child care home rates for Franklin County. Highest rates are licensed 5-Star family child care home rates for Franklin County.
- ³⁹ Base rates are one-star child care home rates. Highest rates are three-star child care home rates. Before-and-after care rates are blended rates for a traditional school year. The multiplier for converting maximum daily rates to maximum monthly rates is 23. Beginning April 1, 2020, in response to the COVID-19 pandemic, all providers are paid an additional \$5 per day per child, as reflected in the rates shown here.
- ⁴⁰ Certified family child care home rates for Group Area A.
- ⁴¹ Base rates are Star 1 family child care home rates for Philadelphia. Highest rates are Star 4 family child care home rates for Philadelphia.
- ⁴² Due to Covid-19, all providers will be paid the Step 4, Star 5 rate for infants and toddlers. They will be paid the Step 4 rate for preschool and school age children. Providers participating in the state's quality rating system star 3 or above are eligible to receive a once yearly incentive payment of \$500.
- ⁴³ Base rates are level C licensed family child care home rates for urban counties. Highest rates are level B+ licensed family child care home rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.
- ⁴⁴ Regulated family child care home rates for Minnehaha County.
- ⁴⁵ Base rates are reimbursement rates for family child care homes with no additional rating for the Top Tier counties. Highest rates are three-star family child care home rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁶ Base rates are licensed family child care home rates for the Gulf Coast Region. Highest rates are licensed 4-Star family child care home rates for the Gulf Coast Region. Providers are paid a 25 percent enhanced rate due to the COVID-19 pandemic, as reflected in the amounts shown here.
- ⁴⁷ Base rates are registered family child care home rates. Highest rates are registered 5-Star family child care home rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁸ Level 2 licensed family day home rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁴⁹ Base rates are level 1 licensed family child care home reimbursement rates for Region 4. Highest rates are Early Achievers level 5 licensed family child care home reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 days per month.
- ⁵⁰ Base rates are tier 1 family child care home rates. Highest rates are tier 3 family child care home rates. Rates were calculated using a multiplier of 20 days per month.

⁵¹ Base rates are licensed 2-Star family child care home rates for Milwaukee. Highest rates are licensed 5-Star family child care home rates for Milwaukee. The state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

⁵² Licensed family setting rates.

Table 38. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Alabama ²	217	217	217	217	217	217	108	108
Alaska ³	521	521	492	492	440	440	258	258
American Samoa	200	200	180	180	180	180	54	54
Arizona ⁴	227	477	227	477	227	477	130	286
Arkansas ⁵	835	928	794	881	663	740	473	527
California ⁶	649	649	607	607	607	607	230	230
Colorado ⁷	325	325	325	325	325	325	156	156
Connecticut ⁸	632	632	632	632	632	632	378	378
DC ⁹	307	307	307	307	189	189	98	98
Delaware ¹⁰	563	563	521	521	521	521	253	253
Florida ¹¹	581	697	512	615	502	602	333	400
Georgia ¹²	412	412	368	368	325	325	217	217
Guam	675	675	575	575	570	570	390	390
Hawaii ¹³	400	400	350	350	350	350	312	312
Idaho ¹⁴	618	618	555	555	555	555	488	488
Illinois ¹⁵	385	385	385	385	385	385	192	192
Indiana ¹⁶	1,257	1,257	1,257	1,257	1,257	1,257	628	628
Iowa ¹⁷	1,571	1,571	1,571	1,571	1,571	1,571	785	785
Kansas ¹⁸	419	419	419	419	419	419	210	210
Kentucky ¹⁹	282	282	282	282	260	260	130	130
Louisiana ²⁰	550	550	523	523	484	484	363	363
Maine ²¹	667	667	607	607	561	561	318	318
Maryland ²²	420	420	347	347	347	347	230	230
Massachusetts ²³	352	352	352	352	352	352	211	211

Table 38. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Michigan ²⁴	303	520	303	459	303	459	152	230
Minnesota ²⁵	400	461	354	407	354	407	155	179
Mississippi ²⁶	436	436	435	435	398	398	190	190
Missouri ²⁷	330	396	286	343	286	343	264	317
Montana ²⁸	552	552	552	552	515	515	515	515
Nebraska ²⁹	1,560	1,560	1,560	1,560	1,560	1,560	780	780
Nevada ³⁰	506	506	440	440	418	418	396	396
New Hampshire ³¹	540	540	530	530	530	530	182	182
New Jersey ³²	404	404	314	314	314	314	157	157
New Mexico ³³	290	290	275	275	252	252	189	189
New York ³⁴	563	607	550	594	520	563	325	347
No. Mariana Islands ³⁵	425	425	425	425	340	340	170	170
North Carolina ³⁶	740	799	743	773	699	727	386	404
North Dakota ³⁷	350	420	330	390	322	382	186	222
Ohio ³⁸	1,508	1,508	1,508	1,508	1,508	1,508	754	754
Oklahoma ³⁹	529	529	471	471	450	450	316	316
Oregon ⁴⁰	651	800	625	750	586	730	298	458
Pennsylvania ⁴¹	283	283	271	271	251	251	222	222
Puerto Rico	310	310	310	310	305	305	236	236
Rhode Island ⁴²	437	450	437	450	260	267	191	197
South Carolina ⁴³	195	195	195	195	182	182	95	95
South Dakota ⁴⁴	329	329	329	329	329	329	165	165
Tennessee ⁴⁵	409	409	310	310	310	310	181	181
Texas ⁴⁶	329	329	286	286	245	245	143	143

Table 38. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2020¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Utah ⁴⁷	349	349	315	315	298	298	273	273
Vermont ⁴⁸	345	345	345	345	288	288	169	169
Virgin Islands	300	300	300	300	300	300	150	150
Virginia ⁴⁹	1,032	1,032	946	946	946	946	602	602
Washington ⁵⁰	456	456	456	456	456	456	234	234
West Virginia ⁵¹	400	400	360	360	360	360	180	180
Wisconsin ⁵²	1,109	1,109	1,109	1,109	1,109	1,109	555	555
Wyoming ⁴⁷	335	335	335	335	335	335	168	168

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ The rates represent the maximum reimbursement rate for in-home providers. For states that have tiered reimbursement systems, the base rates reflect the base in-home rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time in-home child care. If rates vary for types of in-home care, the rates for care provided in the home of the child were used. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate. If rates were increased due to the COVID-19 pandemic, and this policy was in effect on October 1, 2020, the policy is reflected here with a footnote explaining the rate increase. For more information on rates that were increased prior to October 1, 2020 as a result of the pandemic, see the full CCDF Policies Database. For states that increased rates as of October 1, 2020, detailed rates prior to the pandemic can be found in the full CCDF Policies Database.

² One star plus in-home child care rates.

³ Approved in-home child care rates for Anchorage.

⁴ Base rates are in-home rates for non-certified relative providers. Highest rates are First Thing's First Quality First four star certified in-home child care rates for District 1.

⁵ Base rates are Better Beginnings quality incentive star level 1 rates for registered child care family homes in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for registered child care family homes in urban areas. These rates reflect that providers accepting child care vouchers during the COVID-19 pandemic were paid an additional \$10 per child for infant and toddlers, an additional \$7 for preschool children, and \$5 for school age children.

⁶ In-home rates for TrustLined and Relative providers in Los Angeles. Before-and-after care rates reflect monthly part-time rates.

⁷ In-home rates for Denver.

- ⁸ Unlicensed in-home child care rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁹ Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.
- ¹⁰ In-home child care rates for New Castle.
- ¹¹ Informal providers cannot provide care through the subsidy program in the Miami-Dade Coalition. All providers must be licensed. Base rates are licensed home reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal home rates for the Miami-Dade Coalition. Before-and-after care rates reflect part-time, before- or after-school rates for school-age children.
- ¹² In-home child care rates for Zone 1.
- ¹³ License-exempt in-home child care rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ¹⁴ In-home child care rates for Cluster 3, which includes Boise County. Rates are determined based on the parent's qualifying activity hours and are authorized up to the full-time rate for before-and-after care if the provider charges full-time rates for the amount of care provided.
- ¹⁵ License-exempt in-home child care rates. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate will vary each month, depending on the number of eligible days.
- ¹⁶ In-home child care rates for Marion. The rate reflects the federal minimum wage and is divided by the number of children in care.
- ¹⁷ The in-home rate is not per child; it is the maximum amount paid for all children in the family receiving in-home care. In-home care is paid at the minimum wage amount. Home-based providers that remained open during the COVID-19 pandemic were eligible to receive an additional \$500 per month. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ¹⁸ Relative in-home care rates.
- ¹⁹ Registered in-home child care rates for Jefferson County.
- ²⁰ The state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In response to the COVID-19 pandemic, family child care home and in-home providers are paid the same rates as for center-based care.
- ²¹ License-exempt in-home child care rates for Cumberland County.
- ²² Informal child care provider rates for Baltimore City.
- ²³ Rates for care provided in the child's home. For family child care settings and informal child care settings, before-and-after care for school-age children is calculated as 60 percent of the full-time rate.
- ²⁴ Base rates are level 1 license-exempt in-home child care rates. Highest rates are level 2 license-exempt in-home child care rates.
- ²⁵ Base rates are unaccredited legal-non-licensed provider rates for Hennepin County. Highest rates are accredited in-home legal-non-licensed child care rates for Hennepin County.
- ²⁶ In-home provider reimbursement rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ²⁷ Registered in-home rates for St. Louis County. Rates calculated using a multiplier of 22 days per month.
- ²⁸ Family, Friend, and Neighbor rates. Rates were calculated using a multiplier of 21.65 to convert full-time daily rates to monthly rates. In response to the COVID-19 pandemic, school-age rates were raised to match the rates for preschool-age children.
- ²⁹ In-home providers must be paid at least the federal minimum wage. The minimum wage rate is generally provided for the first three children in care. The provider may be reimbursed at a different rate for any additional children in care. As a guide, the caseworker may use the hourly rate for a license-exempt family child care home.
- ³⁰ Unlicensed informal child care rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.
- ³¹ Rates for license-exempt child care providers. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. School age children are only eligible for half-time service during the school year and are allowed full-time service during scheduled school breaks.
- ³² In-home child care rates for informal or relative approved homes.
- ³³ Registered in-home child care rates. Providers that remain open during the pandemic are paid an additional \$250 per child in care. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.

- ³⁴ Base rates are legally-exempt informal child care rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond. Highest rates are legally-exempt, enhanced informal child care rates for Group 5 counties.
- ³⁵ A maximum of three hours of care per day is approved for after school programs.
- ³⁶ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the 3-Star to 5-Star levels. Base rates are licensed 3-Star center reimbursement rates for Mecklenburg County. Highest rates are licensed 5-Star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time summer care rate.
- ³⁷ Base rates are approved relative care rates. Highest rates are registered in-home child care rates.
- ³⁸ In-home child care aide rates for Franklin County.
- ³⁹ The multiplier for converting maximum daily rates to maximum monthly rates is 23. Beginning April 1, 2020, in response to the COVID-19 pandemic, all providers are paid an additional \$5 per day per child, as reflected in the rates shown here. In response to the COVID-19 pandemic, in-home care for essential workers is reimbursed at a rate of \$25 a day per child regardless of the child's age.
- ⁴⁰ Base rates are standard family in-home child care rates for Group Area A. Highest rates are registered family in-home child care rates for Group Area A. The state uses a multiplier of 4.3 to convert weekly rates to monthly rates for part-time care provided by standard in-home providers.
- ⁴¹ In-home relative provider rates for Philadelphia. Parents are required to make sure in-home providers are paid minimum wage.
- ⁴² Base rates are step 1 legally license-exempt provider rates. Highest rates are step 4 legally license-exempt provider rates.
- ⁴³ In-home child care rates for urban counties.
- ⁴⁴ Unregulated in-home child care rates.
- ⁴⁵ Unregulated authorized child care rates for the Top Tier counties. Care provided in the child's home is not allowed unless the provider also lives in the home and proof is submitted that the home belongs to the provider. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁶ Unregulated relative care provider rates for the Gulf Coast Region.
- ⁴⁷ License-exempt in-home child care rates.
- ⁴⁸ Approved relative child care provider rates. Rates were calculated using a multiplier of 4.3 weeks per month.
- ⁴⁹ In-home child care rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁵⁰ Rates for in-home providers are calculated using a multiplier that assumes 4.3 weeks per month. Part-time rates for in-home providers are calculated using a multiplier that assumes 20.5 hours per week. Rates for in-home providers are rounded up to the closest whole dollar.
- ⁵¹ Rates were calculated using a multiplier of 20 days per month.
- ⁵² Certified in-home child care rates. When in-home care is provided for 15 or more hours per week, the minimum wage must be paid, regardless of the number of children in care. The state calculates monthly rates by multiplying the state hourly minimum wage by 153 hours per month.

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Alabama	NA ³	NA	NA	NA	NA	NA	NA
Alaska	NA ³	NA	NA	NA	NA	NA	NA
American Samoa	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	No ⁴
Arizona	Yes, for the provider only ⁵	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
Arkansas	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	No	No	No ⁴
California	Yes, for the provider only ⁶	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	No	No
Colorado	Yes, for provider and others ⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Connecticut	NA ³	NA	NA	NA	NA	NA	NA
DC	Yes, for provider and others	No	No	Yes, for provider and others	No	No	Yes, for provider and others
Delaware	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No	No	No
Florida	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Georgia	Yes, for provider and others ⁸	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Guam	Yes, for provider and others ⁹	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Hawaii	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ⁴
Idaho	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Illinois	Yes, for the provider only ¹⁰	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only
Indiana	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
Iowa	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No ⁴
Kansas	NA ³	NA	NA	NA	NA	NA	NA
Kentucky	Yes, for provider and others	No ⁴	Yes, for provider and others ¹¹	Yes, for provider and others	Yes, for provider and others ¹¹	Yes, for provider and others	No ⁴
Louisiana	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ⁴

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Maine	No ¹²	NA	NA	NA	NA	NA	NA
Maryland	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ¹³	No	Yes, for provider and others
Massachusetts	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	No ¹³	Yes, for provider and others ¹⁴	No ⁴
Michigan	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only
Minnesota	Yes, for provider and others ¹⁵	No ¹⁶	Yes, for provider and others	Yes, for provider and others	No ¹⁶	No ¹⁶	No ¹⁶
Mississippi	Yes, for provider and others ¹⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Missouri	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Montana	Yes, for provider and others ¹⁸	No ⁴	Yes, for provider and others	Yes, for provider and others	No ¹³	No	No ⁴
Nebraska	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹⁹	Yes, for provider and others	No	No
Nevada	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
New Hampshire	Yes, for provider and others	No ⁴	No	No	Yes, for provider and others ²⁰	No	No ⁴
New Jersey	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
New Mexico	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
New York	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
No. Mariana Islands	Yes, for provider and others	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ²¹	NA	NA	NA	NA	NA	NA
North Dakota	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for the provider only	Yes, for provider and others	No
Ohio	Yes, for the provider only ²²	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only ²³	Yes, for the provider only
Oklahoma	NA ³	NA	NA	NA	NA	NA	NA
Oregon	Yes, for provider and others	No ²⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ²⁴
Pennsylvania	NA ³	NA	NA	NA	NA	NA	NA

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Puerto Rico	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Rhode Island	NA ³	NA	NA	NA	NA	NA	NA
South Carolina	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
South Dakota	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
Tennessee	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Texas	Yes, for provider and others	No ²⁵	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No ²⁵
Utah	Yes, for provider and others ²⁶	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Vermont	NA ³	NA	NA	NA	NA	NA	NA
Virgin Islands	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Virginia	Yes, for provider and others	No ²⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ²⁷

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Washington	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
West Virginia	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No ¹³	Yes, for provider and others	Yes, for provider and others
Wisconsin	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ²⁸
Wyoming	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ²⁹	Yes, for provider and others	Yes, for provider and others

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² States shown as not requiring one or more types of background checks may have received a waiver from the Administration for Children and Families, Office of Child Care to delay implementing background check requirements.

³ All non-relative home-based providers must be licensed in order to participate in the subsidy program.

⁴ The fingerprinting requirement is waived due to the COVID-19 pandemic.

⁵ This policy applies to care provided in the child's home. The provider and others are subject to background checks if care is provided in the provider's home.

⁶ Individual providers exempt from licensure must be registered on TrustLine, with the exception of grandparents, aunts, and uncles.

⁷ This policy applies to care provided in the child's home. The provider and household members age 18 and older are subject to background checks if care is provided in the providers home.

⁸ All adults in the home and 17 years of age or older must achieve a satisfactory criminal record check determination prior to authorization of the subsidy.

⁹ Providers must complete a police clearance and court clearance in order to provide care through the subsidy program.

¹⁰ This policy applies to care provided in the child's home. If the child care facility operates in a family home, the provider and all household members age 13 and over are subject to background checks.

- ¹¹ Background checks include the child abuse and neglect central registry, the sex offender registry, criminal records, and criminal records for any previous state of residence outside of Kentucky in the last five years.
- ¹² Background check requirements are waived due to the COVID-19 pandemic.
- ¹³ The interstate background check requirement is waived due to the COVID-19 pandemic.
- ¹⁴ The National Sex Offender Registry background check requirement is waived due to the COVID-19 pandemic. The National Crime Information Center check is still required.
- ¹⁵ A non-licensed in-home child care provider who has a household member with a criminal, child protective services, or adult protective services record may still be authorized to provide child care in the child's home, but not in the provider's home.
- ¹⁶ Due to the COVID-19 pandemic, requirements for fingerprint-based background checks, interstate criminal registry checks, NCIC/NSOR checks, and FBI criminal history checks are temporarily waived. In place of fingerprint-based background checks, the state is conducting emergency checks using name and date of birth. Following the end of the pandemic declaration, everyone who has completed an emergency check will be required to submit a new background check in order to ensure full compliance with state and federal background check requirements.
- ¹⁷ In-home providers may only be approved for children with special needs that require in-home care.
- ¹⁸ Background checks are required for the applicant and all adults living in the provider's household.
- ¹⁹ Background checks include checking a registry for child abuse and neglect and adult protective services.
- ²⁰ The state police also perform a Tri-State Criminal Background check which includes New Hampshire, Vermont, and Maine.
- ²¹ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.
- ²² The state has home-based license exempt providers: in-home aides must be certified by the county departments of job and family services.
- ²³ The National Sex Offender Registry check is completed through the public-facing registry.
- ²⁴ Background checks with fingerprints are no longer required due to COVID-19.
- ²⁵ A fingerprint check is only required if the person has lived in a different state in the last five years.
- ²⁶ In addition to the state, FBI, and sex offender registry checks, juvenile records are also checked in certain instances.
- ²⁷ If an individual has to use a hard copy fingerprint card process, due to the closure of a fingerprint site during the COVID-19 emergency, individuals will be given leniency to work pending fingerprint check results if they are supervised by another person who has a completed fingerprint check. The provider must still comply with all requirements once the emergency has passed.
- ²⁸ The FBI fingerprinting requirement is waived due to the COVID-19 pandemic.
- ²⁹ The interstate background check is waived due to the COVID-19 pandemic.

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Alabama	No	NA	NA	NA	NA	NA	NA
Alaska	Yes, for the provider only ³	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only
American Samoa	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	No ⁴
Arizona	Yes, for the provider only ³	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
Arkansas	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	No	No	No ⁴
California	No	NA	NA	NA	NA	NA	NA
Colorado	Yes, for provider and others ⁵	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Connecticut	Yes, for the provider only ⁶	Yes, for the provider only ⁶	No	Yes, for the provider only	No	No	No
DC	Yes, for provider and others	No	No	Yes, for provider and others	No	No	Yes, for provider and others
Delaware	Yes, for provider and others ⁷	Yes, for provider and others ⁸	Yes, for provider and others	No	No	No	No
Florida	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Georgia	Yes, for provider and others ⁹	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Guam	Yes, for provider and others ¹⁰	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Hawaii	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ⁴
Idaho	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Illinois	Yes, for the provider only ¹¹	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	No	No
Indiana	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
Iowa	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No ⁴
Kansas	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others ¹²	No
Kentucky	Yes, for provider and others	No ⁴	Yes, for provider and others ¹³	Yes, for provider and others	Yes, for provider and others ¹³	Yes, for provider and others	No ⁴

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Louisiana	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ⁴
Maine	No	NA	NA	NA	NA	NA	NA
Maryland	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ¹⁴	No	Yes, for provider and others
Massachusetts	Yes, for provider and others	No	Yes, for provider and others	No	No	No	No
Michigan	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Minnesota	Yes, for provider and others ¹⁵	No ¹⁶	Yes, for provider and others	Yes, for provider and others	No ¹⁶	No ¹⁶	No ¹⁶
Mississippi	Yes, for provider and others ¹⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Missouri	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Montana	Yes, for provider and others ¹⁸	No ⁴	Yes, for provider and others	Yes, for provider and others	No ¹⁴	No	No ⁴
Nebraska	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹⁹	Yes, for provider and others	No	No

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Nevada	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
New Hampshire	Yes, for provider and others	No ⁴	No	No	Yes, for provider and others ²⁰	No	No ⁴
New Jersey	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
New Mexico	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
New York	Yes, for provider and others ²¹	No	Yes, for provider and others	No ²²	No	No	No
No. Mariana Islands	Yes, for provider and others	Yes, for the provider only ²³	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ²⁴	NA	NA	NA	NA	NA	NA
North Dakota	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	Yes, for the provider only	No	No
Ohio	Yes, for the provider only ²⁵	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only ¹²	Yes, for the provider only
Oklahoma	Yes, for the provider only ²⁶	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	No	No

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Oregon	Yes, for provider and others	No ²⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ²⁷
Pennsylvania	Yes, for the provider only	No ²⁸	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only ²⁹
Puerto Rico	No ³⁰	NA	NA	NA	NA	NA	NA
Rhode Island	Yes, for provider and others	No	No	Yes, for provider and others	No	No	No
South Carolina	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
South Dakota	No	NA	NA	NA	NA	NA	NA
Tennessee	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Texas	Yes, for provider and others	No ³¹	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No ³¹
Utah	Yes, for provider and others ³²	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Vermont	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Virgin Islands	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2020²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Virginia	Yes, for provider and others	No ³³	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ³³
Washington	Yes, for provider and others	No ⁴	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
West Virginia	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No ¹⁴	Yes, for provider and others	Yes, for provider and others
Wisconsin	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ³⁴
Wyoming	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No ³⁵	Yes, for provider and others	Yes, for provider and others

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² States shown as not requiring one or more types of background checks may have received a waiver from the Administration for Children and Families, Office of Child Care to delay implementing background check requirements.

³ This policy applies to care provided in the child's home. The provider and household members age 16 and older are subject to background checks if care is provided in the provider's home.

⁴ The fingerprinting requirement is waived due to the COVID-19 pandemic.

⁵ This policy applies to care provided in the child's home. The provider and household members age 18 and older are subject to background checks if care is provided in the provider's home.

⁶ All active unlicensed relative providers have a state criminal background check conducted annually. If a crime is noted, the agency will conduct a full federal and state criminal background check with fingerprints.

- ⁷ In-home care may only be provided by relatives during non-traditional hours that are not normally offered through licensed child care providers. Relative child care is limited to evening and weekend shift work hours.
- ⁸ In response to the pandemic, staff may begin working before their fingerprinting appointment and must be supervised at all times by a person who has completed a background check. Providers must ensure that a staff member has a scheduled fingerprinting appointment with the Delaware State Police before the start of employment. No staff may be alone with children until after a completed background check.
- ⁹ All adults in the home and 17 years of age or older must achieve a satisfactory criminal record check determination prior to authorization of the subsidy.
- ¹⁰ Providers must complete a police clearance and court clearance in order to provide care through the subsidy program.
- ¹¹ This policy applies to care provided in the child's home. If the child care facility operates in a family home, the provider and all household members age 13 and over are subject to background checks.
- ¹² The National Sex Offender Registry check is completed through the public-facing registry.
- ¹³ Background checks include the child abuse and neglect central registry, the sex offender registry, criminal records, and criminal records for any previous state of residence outside of Kentucky in the last five years.
- ¹⁴ The interstate background check requirement is waived due to the COVID-19 pandemic.
- ¹⁵ A non-licensed in-home child care provider who has a household member with a criminal, child protective services, or adult protective services record may still be authorized to provide child care in the child's home, but not in the provider's home.
- ¹⁶ Due to the COVID-19 pandemic, requirements for fingerprint-based background checks, interstate criminal registry checks, NCIC/NSOR checks, and FBI criminal history checks are temporarily waived. In place of fingerprint-based background checks, the state is conducting emergency checks using name and date of birth. Following the end of the pandemic declaration, everyone who has completed an emergency check will be required to submit a new background check in order to ensure full compliance with state and federal background check requirements.
- ¹⁷ In-home providers may only be approved for children with special needs that require in-home care.
- ¹⁸ Background checks are required for the applicant and all adults living in the provider's household.
- ¹⁹ Background checks include checking a registry for child abuse and neglect and adult protective services.
- ²⁰ The state police also perform a Tri-State Criminal Background check which includes New Hampshire, Vermont, and Maine.
- ²¹ Individuals must disclose whether they have ever been convicted of a misdemeanor or felony. Disclosed convictions are then evaluated to determine if they are allowed to provide care.
- ²² Individuals must disclose any indicated report of child abuse and maltreatment.
- ²³ In response to the pandemic, providers who applied as an emergency relative child care provider were exempted from all background checks except for a police clearance and sex offender registry background check for six months.
- ²⁴ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.
- ²⁵ The state has home-based license exempt providers: in-home aides must be certified by the county departments of job and family services.
- ²⁶ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care if the caregiver is related to the children in care. This policy is coded for in-home relative care.
- ²⁷ Background checks with fingerprints are no longer required due to COVID-19.
- ²⁸ The state requires a state criminal history check for providers but does not require fingerprinting as part of the state check.
- ²⁹ In response to the pandemic, background checks with fingerprinting are waived for relative providers who do not live within 25 miles of an FBI fingerprinting site. New providers must still complete a background check with fingerprints.
- ³⁰ Relative providers are not monitored by the territory's Department of Health and Safety for routine background checks or health inspections.
- ³¹ A fingerprint check is only required if the person has lived in a different state in the last five years.
- ³² In addition to the state, FBI, and sex offender registry checks, juvenile records are also checked in certain instances.

³³ If an individual has to use a hard copy fingerprint card process, due to the closure of a fingerprint site during the COVID-19 emergency, individuals will be given leniency to work pending fingerprint check results if they are supervised by another person who has a completed fingerprint check. The provider must still comply with all requirements once the emergency has passed.

³⁴ The FBI fingerprinting requirement is waived due to the COVID-19 pandemic.

³⁵ The interstate background check is waived due to the COVID-19 pandemic.

Table 40a. Unlicensed Non-Relative Home-Based Provider Training Requirements, 2020

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Alabama	NA ¹	NA ¹
Alaska	NA ¹	NA ¹
American Samoa	Yes, for at least one person on site ²	Yes, for at least one person on site ²
Arizona	Yes, for the provider and others ³	Yes, for the provider and others ³
Arkansas	Yes, for the provider and others	Yes, for the provider and others
California	No	No
Colorado	Yes, for the provider only	Yes, for the provider only
Connecticut	NA ¹	NA ¹
DC	Yes, for the provider and others	Yes, for the provider and others
Delaware	Yes, for the provider only	Yes, for the provider only
Florida	Yes, for the provider only	Yes, for the provider only
Georgia	Yes, for the provider only ⁴	No ⁵
Guam	Yes, for at least one person on site ⁶	Yes, for at least one person on site ⁶
Hawaii	No	No
Idaho	Yes, for the provider and others ⁷	Yes, for the provider and others ⁷
Illinois	Yes, for the provider only ⁸	Yes, for the provider only ⁸
Indiana	Yes, for at least one person on site	Yes, for the provider and others ⁹
Iowa	Yes, for the provider only	Yes, for the provider only
Kansas	NA ¹	NA ¹
Kentucky	No	No
Louisiana	Yes, for the provider only	Yes, for the provider only
Maine	Yes, for the provider only	Yes, for the provider only
Maryland	Yes, for the provider only	Yes, for the provider only
Massachusetts	Yes, for the provider only ¹⁰	Yes, for the provider only ¹⁰
Michigan	Yes, for the provider only	Yes, for the provider only
Minnesota	Yes, for the provider only ¹¹	Yes, for the provider only ¹¹
Mississippi	Yes, for the provider only ¹²	Yes, for the provider only ¹²
Missouri	Yes, for the provider only	Yes, for the provider only
Montana	Yes, for the provider only	Yes, for the provider only
Nebraska	Yes, for the provider and others	Yes, for the provider and others
Nevada	Yes, for the provider only	Yes, for the provider only
New Hampshire	Yes, for the provider and others	Yes, for the provider and others
New Jersey	Yes, for the provider only	Yes, for the provider only
New Mexico	Yes, for the provider and others ¹³	Yes, for the provider and others ¹³
New York	No	No
No. Mariana Islands	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ¹⁴	NA ¹⁴
North Dakota	Yes, for the provider only	Yes, for the provider only

Table 40a. Unlicensed Non-Relative Home-Based Provider Training Requirements, 2020

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Ohio	Yes, for the provider only ¹⁵	Yes, for the provider only ¹⁵
Oklahoma	NA ¹	NA ¹
Oregon	Yes, for the provider only ¹⁶	Yes, for the provider only ¹⁶
Pennsylvania	NA ¹	NA ¹
Puerto Rico	Yes, for the provider only	Yes, for the provider only
Rhode Island	NA ¹	NA ¹
South Carolina	No ¹⁷	No ¹⁷
South Dakota	Yes, for the provider only	Yes, for the provider only
Tennessee	Yes, for the provider only	Yes, for the provider only
Texas	No ¹⁸	No ¹⁸
Utah	Yes, for the provider only	Yes, for the provider only
Vermont	NA ¹	NA ¹
Virgin Islands	Yes, for the provider only	Yes, for the provider only
Virginia	Yes, for the provider only ¹⁹	Yes, for the provider only ¹⁹
Washington	Yes, for the provider only ²⁰	No
West Virginia	No ²¹	No ²¹
Wisconsin	Yes, for the provider and others ²²	No
Wyoming	Yes, for the provider only	Yes, for the provider only

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ All non-relative home-based providers must be licensed in order to participate in the subsidy program.

² Within 60 days of authorization, at least one person on site must be certified in CPR, and at least one person on site must have current first aid training. By the end of the authorization period, at least half of the on-site staff must be certified. Providers must complete 12 additional hours of CPR and first aid training within the first six months of providing care.

³ The provider and all backup providers must have CPR and first aid training. If classes are unavailable due to the pandemic, the state may extend the time for completing the training.

⁴ CPR training for infants and toddlers must be completed prior to the provider's enrollment in the child care subsidy program.

⁵ Providers must complete ten hours of child care related health and safety training, which may include first aid training.

⁶ At least two staff members must maintain first aid and CPR training, and at least one certified staff member must be on the premises at all times children are in care.

⁷ In response to the pandemic, providers are allowed to complete CPR and first aid training online.

⁸ License-exempt providers who only care for school age children are exempt from training requirements.

⁹ The requirement applies to any individual who is employed or volunteers as a caregiver at the facility where child care is provided.

¹⁰ Providers must complete an orientation that includes first aid and CPR training. Non-relative providers must complete additional health and safety pre-service and annual trainings.

¹¹ In-person CPR and first aid training requirements for providers are temporarily waived as a result of the COVID-19 health emergency. CPR and first aid training is required, but online training can meet the requirement.

¹² In-home providers may only be approved for children with special needs that require in-home care.

¹³ Providers and others who are at least 18 years old and authorized to provide care must maintain current CPR and first aid certification.

¹⁴ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

¹⁵ The state has home-based license exempt providers: in-home aides must be certified by the county departments of job and family services.

¹⁶ All non-relative license-exempt providers must complete first aid and CPR training. Providers are also required to be first aid and CPR certified if they want to qualify for the enhanced rate. To qualify for enhanced rates, exempt centers must have at least one staff member who has first aid and CPR certification for every 20 children. Registered and certified providers must have first aid and CPR certifications.

¹⁷ Training requirements for providers are temporarily waived as a result of the COVID-19 health emergency.

¹⁸ Preservice training requirements are waived due to the COVID-19 pandemic.

¹⁹ The CPR and first aid training requirements are waived for caregivers other than the provider due to the COVID-19 emergency. For providers whose CPR, MAT, or first aid certifications expire during the state of emergency, their certifications will be extended for 90 days.

²⁰ CPR training is required within 90 days of receiving the first subsidy payment.

²¹ In-home providers must complete two hours of health and safety training. CPR and first aid training are not required, but may be included as part of the two-hour training.

²² Preservice CPR training is required for providers, substitutes, and employees or volunteers who are involved in the care or supervision of children. The training must result in a certificate of completion.

Table 40b. Unlicensed Relative Home-Based Provider Training Requirements, 2020

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Alabama	No	No
Alaska	Yes, for the provider only	Yes, for the provider only
American Samoa	Yes, for at least one person on site ¹	Yes, for at least one person on site ¹
Arizona	No	No
Arkansas	Yes, for the provider and others	Yes, for the provider and others
California	No	No
Colorado	No	No
Connecticut	No	No
DC	Yes, for the provider and others	Yes, for the provider and others
Delaware	Yes, for the provider only ²	Yes, for the provider only ²
Florida	Yes, for the provider only	Yes, for the provider only
Georgia	Yes, for the provider only ³	No ⁴
Guam	Yes, for at least one person on site ⁵	Yes, for at least one person on site ⁵
Hawaii	No	No
Idaho	Yes, for the provider and others ⁶	Yes, for the provider and others ⁶
Illinois	No	No
Indiana	Yes, for at least one person on site	Yes, for the provider and others ⁷
Iowa	Yes, for the provider only	Yes, for the provider only
Kansas	No	No
Kentucky	No	No
Louisiana	Yes, for the provider only	Yes, for the provider only
Maine	No	No
Maryland	Yes, for the provider only	Yes, for the provider only
Massachusetts	Yes, for the provider only ⁸	Yes, for the provider only ⁸
Michigan	Yes, for the provider only	Yes, for the provider only
Minnesota	Yes, for the provider only ⁹	Yes, for the provider only ⁹
Mississippi	Yes, for the provider only ¹⁰	Yes, for the provider only ¹⁰
Missouri	Yes, for the provider only	Yes, for the provider only
Montana	Yes, for the provider only ¹¹	Yes, for the provider only ¹¹
Nebraska	No	No
Nevada	Yes, for the provider only	Yes, for the provider only
New Hampshire	Yes, for the provider and others	Yes, for the provider and others
New Jersey	Yes, for the provider only	Yes, for the provider only
New Mexico	Yes, for the provider and others ¹²	Yes, for the provider and others ¹²
New York	No	No
No. Mariana Islands	Yes, for the provider only ¹³	Yes, for the provider only ¹³
North Carolina	NA ¹⁴	NA ¹⁴
North Dakota	No	No

Table 40b. Unlicensed Relative Home-Based Provider Training Requirements, 2020

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Ohio	Yes, for the provider only ¹⁵	Yes, for the provider only ¹⁵
Oklahoma	Yes, for the provider only ¹⁶	Yes, for the provider only ¹⁶
Oregon	No ¹⁷	No ¹⁷
Pennsylvania	No	No
Puerto Rico	No ¹⁸	No ¹⁸
Rhode Island	No	No
South Carolina	No ¹⁹	No ¹⁹
South Dakota	No	No
Tennessee	Yes, for the provider only	Yes, for the provider only
Texas	No	No
Utah	Yes, for the provider only	Yes, for the provider only
Vermont	Yes, for the provider only	Yes, for the provider only
Virgin Islands	Yes, for the provider only	Yes, for the provider only
Virginia	Yes, for the provider only ²⁰	Yes, for the provider only ²⁰
Washington	Yes, for the provider only ²¹	No
West Virginia	No ²²	No ²²
Wisconsin	Yes, for the provider and others ²³	No
Wyoming	Yes, for the provider only	Yes, for the provider only

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Within 60 days of authorization, at least one person on site must be certified in CPR, and at least one person on site must have current first aid training. By the end of the authorization period, at least half of the on-site staff must be certified. Providers must complete 12 additional hours of CPR and first aid training within the first six months of providing care.

² In-home care may only be provided by relatives during non-traditional hours that are not normally offered through licensed child care providers. Relative child care is limited to evening and weekend shift work hours.

³ CPR training for infants and toddlers must be completed prior to the provider's enrollment in the child care subsidy program.

⁴ Providers must complete ten hours of child care related health and safety training, which may include first aid training.

⁵ At least two staff members must maintain first aid and CPR training, and at least one certified staff member must be on the premises at all times children are in care.

⁶ In response to the pandemic, providers are allowed to complete CPR and first aid training online.

⁷ The requirement applies to any individual who is employed or volunteers as a caregiver at the facility where child care is provided.

⁸ Providers must complete an orientation that includes first aid and CPR training.

⁹ In-person CPR and first aid training requirements for providers are temporarily waived as a result of the COVID-19 health emergency. CPR and first aid training is required, but online training can meet the requirement.

¹⁰ In-home providers may only be approved for children with special needs that require in-home care.

¹¹ Policy coded for Family, Friend, and Neighbor (FFN) providers. Providers related to the children in care may also provide care as Relative Care Exempt (RCE) providers and are not required to meet the CPR and first aid training requirements.

¹² Providers and others who are at least 18 years old and authorized to provide care must maintain current CPR and first aid certification.

¹³ Providers who applied as an emergency relative child care provider were exempt from preservice, CPR, and first aid trainings for six months.

¹⁴ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

¹⁵ The state has home-based license exempt providers: in-home aides must be certified by the county departments of job and family services.

¹⁶ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care if the caregiver is related to the children in care. This policy is coded for in-home relative care.

¹⁷ Requirements for registered providers are different from certified providers. Certified providers must have some training.

¹⁸ Relative providers are not monitored by the territory's Department of Health and Safety for routine background checks or health inspections.

¹⁹ Training requirements for providers are temporarily waived as a result of the COVID-19 health emergency.

²⁰ The CPR and first aid training requirements are waived for caregivers other than the provider due to the COVID-19 emergency. For providers whose CPR, MAT, or first aid certifications expire during the state of emergency, their certifications will be extended for 90 days.

²¹ CPR training is required within 90 days of receiving the first subsidy payment.

²² In-home providers must complete two hours of health and safety training. CPR and first aid training are not required, but may be included as part of the two-hour training.

²³ Preservice CPR training is required for providers, substitutes, and employees or volunteers who are involved in the care or supervision of children. The training must result in a certificate of completion.

Table 41a. Unlicensed Non-Relative Home-Based Provider Health and Safety Requirements, 2020

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Alabama	NA ¹	NA ¹
Alaska	NA ¹	NA ¹
American Samoa	Yes, self-completed checklist ²	Yes, 1 per month ³
Arizona	Yes, completed through home visit/inspection ⁴	Yes, 2 per year ⁴
Arkansas	Yes, completed through home visit/inspection	Yes, random inspections
California	Yes, self-completed checklist ⁵	No
Colorado	Yes, completed through home visit/inspection	Yes, 1 per year
Connecticut	NA ¹	NA ¹
DC	Yes, self-completed checklist	Yes, 1 per year ⁶
Delaware	No ⁷	NA ⁷
Florida	Yes, completed through home visit/inspection	Yes, 1 per year
Georgia	Yes, completed through home visit/inspection	Yes, 1 per year ⁸
Guam	Yes, completed through home visit/inspection	Yes, 4 per year ⁹
Hawaii	Yes, self-completed checklist	No
Idaho	Yes, completed through home visit/inspection ¹⁰	Yes, 1 per year ¹⁰
Illinois	Yes, completed through home visit/inspection	Yes, 1 per year
Indiana	Yes, completed through home visit/inspection	Yes, 1 per year
Iowa	Yes, self-completed checklist	No ⁷
Kansas	NA ¹	NA ¹
Kentucky	Yes, self-completed checklist ¹¹	Yes, 1 per year
Louisiana	Yes, completed through home visit/inspection	Yes, 1 per year ¹²
Maine	Yes, self-completed checklist	Yes, 1 per year
Maryland	Yes, completed through home visit/inspection	Yes, random inspections
Massachusetts	No ¹³	NA ⁷
Michigan	Yes, completed through home visit/inspection	Yes, 1 per year
Minnesota	Yes, self-completed checklist ¹⁴	No ¹⁵

Table 41a. Unlicensed Non-Relative Home-Based Provider Health and Safety Requirements, 2020

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Mississippi	Yes, completed through home visit/inspection ¹⁶	Yes, 1 per year ¹⁷
Missouri	Yes, completed through home visit/inspection	Yes, 1 per year
Montana	No ¹³	NA ⁷
Nebraska	Yes, self-completed checklist ¹⁸	Yes, 1 per year ¹⁸
Nevada	No ⁷	NA ⁷
New Hampshire	No ⁷	NA ⁷
New Jersey	Yes, completed through home visit/inspection	Yes, 1 per year ¹⁹
New Mexico	No ⁷	NA ⁷
New York	Yes, self-completed checklist ²⁰	Yes, as needed ²¹
No. Mariana Islands	Yes, self-completed checklist	No
North Carolina	NA ²²	NA ²²
North Dakota	Yes, completed through home visit/inspection ²³	Yes, 1 per year ²⁴
Ohio	Yes, completed through home visit/inspection ²⁵	Yes, 1 per year ²⁵
Oklahoma	NA ¹	NA ¹
Oregon	Yes, completed through home visit/inspection ²⁶	Yes, 1 per year
Pennsylvania	NA ¹	NA ¹
Puerto Rico	Yes, completed through home visit/inspection	Yes, random inspections ²⁷
Rhode Island	NA ¹	NA ¹
South Carolina	Yes, self-completed checklist	No ⁷
South Dakota	Yes, completed through home visit/inspection ²⁸	Yes, 1 per year
Tennessee	Yes, completed through home visit/inspection	Yes, 1 per year
Texas	Yes, completed through home visit/inspection ²⁹	Yes, as needed ³⁰
Utah	Yes, completed through home visit/inspection ³¹	Yes, as needed ³¹
Vermont	NA ¹	NA ¹
Virgin Islands	Yes, completed through home visit/inspection	Yes, 1 per year
Virginia	Yes, completed through home visit/inspection ³²	Yes, 1 per year
Washington	No ⁷	NA ⁷

Table 41a. Unlicensed Non-Relative Home-Based Provider Health and Safety Requirements, 2020

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
West Virginia	Yes, self-completed checklist ³³	Yes, 1 per year
Wisconsin	No ⁷	NA ⁷
Wyoming	Yes, self-completed checklist	Yes, 1 per year

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ All non-relative home-based providers must be licensed in order to participate in the subsidy program.

² The provider must receive certification from the department of health verifying that minimum health and safety standards are met. In-home providers are not required to receive certification, but must still self-certify that the home is safe and that they meet the health and safety requirements. All providers must self-certify that the home is safe.

³ The provider must be certified with the department of health to initially qualify. The agency conducts routine home visits for all providers.

⁴ Home inspections at initial certification and complaint visits are conducted in person. All other monitoring visits can be completed virtually due to the COVID-19 pandemic. The third month monitoring visit for new providers may be waived.

⁵ TrustLined providers complete a Health and Safety Self-Certification Form.

⁶ The method of on-site facility inspections will be modified to include virtual inspections in response to state and federal health and safety guidance and the anticipated challenges and requirements in the post-health emergency period.

⁷ Health and safety inspections are waived due to the COVID-19 pandemic.

⁸ Random inspections occur once per federal fiscal year (October 1 through September 30) following the initial visit.

⁹ The agency inspects providers quarterly.

¹⁰ All providers must comply with health and safety requirements. All providers, except in-home child care providers caring for children in the children's home, must agree to a health and safety inspection. In-home child care providers are instead required to take training that covers the health and safety requirements.

¹¹ A checklist is not required if care is provided in the child's home.

¹² The agency will make unannounced inspections of the facility at any time during normal working hours. The inspection is not limited to the health and safety checklist.

¹³ Health and safety standards are temporarily waived due to the COVID-19 pandemic.

¹⁴ Unlicensed home-based providers who are not related to all children in their care are also subject to annual monitoring.

¹⁵ Health and safety inspections are suspended due to the COVID-19 pandemic.

¹⁶ In-home providers may only be approved for children with special needs that require in-home care.

¹⁷ The state conducts both announced and unannounced annual inspection visits for each child care provider.

¹⁸ The caseworker must assess the health and safety of the service provision at least once during the agreement period (usually one year) by observing service delivery, visiting the service facility, interviewing the provider, or interviewing a client served by the provider.

¹⁹ Unannounced inspections occur once per year.

²⁰ The provider completes an initial checklist to enroll with an enrollment agency.

²¹ Inspections are completed following any complaints.

²² Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

²³ Inspections are conducted annually at recertification.

²⁴ Providers who have been issued a correction order will be subject to additional inspections.

²⁵ The state has home-based license exempt providers: in-home aides certified and regulated by the county departments of job and family services. The county conducts at least one compliance inspection annually.

²⁶ Home visits and inspections are being completed virtually due to COVID-19.

²⁷ Unannounced inspections are carried out annually and when complaints are made.

²⁸ Providers must complete, sign, and return to the department a health and safety checklist so that both parties are aware of any unfulfilled safety standards. However, the state will not monitor nor take any responsibility for situations resulting in unfulfilled safety standards.

²⁹ The local agency ensures that there are requirements to protect the health and safety of the children, including building and physical premises safety.

³⁰ The frequency with which the agency visits a provider depends on the type of provider and the level of risk a deficiency presents to the children in care.

³¹ On-site health and safety inspections have been waived due to the COVID-19 pandemic. However, virtual inspections are completed for providers whose annual renewal inspection date or required follow-up inspection fall within the current pandemic circumstances.

³² Complaint inspections are prioritized over non-complaint inspections for unlicensed providers.

³³ Checklists are also completed by child care agency workers during monitoring visits.

Table 41b. Unlicensed Relative Home-Based Provider Health and Safety Requirements, 2020

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Alabama	No ¹	NA
Alaska	Yes, completed through home visit/inspection	Yes, 1 per year ²
American Samoa	Yes, self-completed checklist ³	Yes, 1 per month ⁴
Arizona	No	NA
Arkansas	Yes, completed through home visit/inspection	Yes, random inspections
California	No ⁵	NA
Colorado	No	NA
Connecticut	Yes, self-completed checklist ⁶	No
DC	Yes, self-completed checklist	Yes, 1 per year ⁷
Delaware	No ⁸	NA ⁸
Florida	Yes, completed through home visit/inspection	Yes, 1 per year
Georgia	Yes, completed through home visit/inspection	Yes, 1 per year ⁹
Guam	Yes, completed through home visit/inspection	Yes, 4 per year ¹⁰
Hawaii	Yes, self-completed checklist	No
Idaho	Yes, completed through home visit/inspection ¹¹	Yes, 1 per year ¹¹
Illinois	No	NA
Indiana	Yes, completed through home visit/inspection	Yes, 1 per year
Iowa	Yes, self-completed checklist	No ¹²
Kansas	Yes, self-completed checklist	No
Kentucky	Yes, self-completed checklist ¹³	Yes, 1 per year
Louisiana	Yes, completed through home visit/inspection	Yes, 1 per year ¹⁴
Maine	No	NA
Maryland	Yes, completed through home visit/inspection	Yes, random inspections
Massachusetts	No ¹⁵	NA ¹²
Michigan	Yes, completed through home visit/inspection	Yes, 1 per year
Minnesota	Yes, self-completed checklist	No
Mississippi	Yes, completed through home visit/inspection ¹⁶	Yes, 1 per year ¹⁷

Table 41b. Unlicensed Relative Home-Based Provider Health and Safety Requirements, 2020

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Missouri	Yes, completed through home visit/inspection	Yes, 1 per year
Montana	No ¹⁸	NA ¹⁸
Nebraska	No	NA
Nevada	No ¹²	NA ¹²
New Hampshire	No ¹²	NA ¹²
New Jersey	Yes, completed through home visit/inspection	Yes, 1 per year ¹⁹
New Mexico	No ¹²	NA ¹²
New York	Yes, self-completed checklist ²⁰	Yes, as needed ²¹
No. Mariana Islands	Yes, self-completed checklist	No
North Carolina	NA ²	NA ²²
North Dakota	No	NA
Ohio	Yes, completed through home visit/inspection ²³	Yes, 1 per year ²³
Oklahoma	Yes, self-completed checklist ²⁴	No
Oregon	Yes, completed through home visit/inspection ²⁵	Yes, 1 per year ²⁵
Pennsylvania	Yes, self-completed checklist	No
Puerto Rico	No ²⁶	NA ²⁶
Rhode Island	Yes, self-completed checklist	No
South Carolina	Yes, self-completed checklist	No ¹²
South Dakota	Yes, self-completed checklist ²⁷	No
Tennessee	Yes, completed through home visit/inspection	Yes, 1 per year
Texas	Yes, completed through home visit/inspection ²⁸	Yes, as needed ²⁹
Utah	Yes, completed through home visit/inspection ³⁰	Yes, as needed ³⁰
Vermont	Yes, self-completed checklist	No
Virgin Islands	Yes, completed through home visit/inspection	Yes, 1 per year
Virginia	Yes, completed through home visit/inspection ³¹	Yes, 1 per year
Washington	No ¹²	NA ¹²
West Virginia	Yes, self-completed checklist ³²	Yes, 1 per year
Wisconsin	No ¹²	NA ¹²
Wyoming	Yes, self-completed checklist	Yes, 1 per year

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ The agency may exempt relatives from some or all health and safety requirements if there are no unrelated children in care.

² The provider is responsible to provide satisfactory evidence of compliance with health and safety requirements, if requested.

³ The provider must receive certification from the department of health verifying that minimum health and safety standards are met. In-home providers are not required to receive certification, but must still self-certify that the home is safe and that they meet the health and safety requirements. All providers must self-certify that the home is safe.

⁴ The provider must be certified with the department of health to initially qualify. The agency conducts routine home visits for all providers.

⁵ Policy coded for non-CalWORKs Alternative Payment Programs. CalWORKs Stage 2 and 3 license-exempt providers are required to complete a health and safety self-certification.

⁶ The parent provider agreement form requires providers to indicate they meet a set of minimum safety requirements (e.g., have a fire extinguisher and operating smoke alarm). If providers indicate they do not meet the minimum requirements, child care arrangements are not approved through the subsidy program.

⁷ The method of on-site facility inspections will be modified to include virtual inspections in response to state and federal health and safety guidance and the anticipated challenges and requirements in the post-health emergency period.

⁸ In-home care may only be provided by relatives during non-traditional hours that are not normally offered through licensed child care providers. Relative child care is limited to evening and weekend shift work hours. Health and safety inspections are waived due to the COVID-19 pandemic.

⁹ Random inspections occur once per federal fiscal year (October 1 through September 30) following the initial visit.

¹⁰ The agency inspects providers quarterly.

¹¹ All providers must comply with health and safety requirements. All providers, except in-home child care providers caring for children in the children's home, must agree to a health and safety inspection. In-home child care providers are instead required to take training that covers the health and safety requirements.

¹² Health and safety inspections are waived due to the COVID-19 pandemic.

¹³ A checklist is not required if care is provided in the child's home.

¹⁴ The agency will make unannounced inspections of the facility at any time during normal working hours. The inspection is not limited to the health and safety checklist.

¹⁵ Health and safety standards are temporarily waived due to the COVID-19 pandemic.

¹⁶ In-home providers may only be approved for children with special needs that require in-home care.

¹⁷ The state conducts both announced and unannounced annual inspection visits for each child care provider.

¹⁸ Policy coded for Family, Friend, and Neighbor (FFN) providers. Providers related to the children in care may also provide care as Relative Care Exempt (RCE) providers and are required to submit a self-completed check-list with no annual inspections. For FFN providers, health and safety standards and inspections are temporarily waived due to the COVID-19 pandemic.

¹⁹ Unannounced inspections occur once per year.

²⁰ The provider completes an initial checklist to enroll with an enrollment agency.

²¹ Inspections are completed following any complaints.

²² Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

²³ The state has home-based license exempt providers: in-home aides certified and regulated by the county departments of job and family services. The county conducts at least one compliance inspection annually.

²⁴ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care if the caregiver is related to the children in care. This policy is coded for in-home relative care.

²⁵ Home visits and inspections are being completed virtually due to COVID-19.

²⁶ Relative providers are not monitored by the territory's Department of Health and Safety for routine background checks or health inspections.

²⁷ Providers must complete, sign, and return to the department a health and safety checklist so that both parties are aware of any unfulfilled safety standards. However, the state will not monitor nor take any responsibility for situations resulting in unfulfilled safety standards.

²⁸ The local agency ensures that there are requirements to protect the health and safety of the children, including building and physical premises safety.

²⁹ The frequency with which the agency visits a provider depends on the type of provider and the level of risk a deficiency presents to the children in care.

³⁰ On-site health and safety inspections have been waived due to the COVID-19 pandemic. However, virtual inspections are completed for providers whose annual renewal inspection date or required follow-up inspection fall within the current pandemic circumstances.

³¹ Complaint inspections are prioritized over non-complaint inspections for unlicensed providers.

³² Checklists are also completed by child care agency workers during monitoring visits.

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Alabama	License from state where care is provided ³	19	NA ⁴	No	Yes	NA ⁴	No
Alaska	NA (not eligible for subsidies)	18	NA ⁴	No	Yes	NA ⁴	No
American Samoa	---	---	NA ⁴	No	Yes	NA ⁴	No
Arizona	License from state where care is provided	18	No	Yes ⁵	Yes	NA ⁶	Yes
Arkansas	License from state where care is provided	18	No	No	Yes	NA ⁶	No
California	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes
Colorado	License from state where care is provided	18	No	Yes ⁷	Yes	NA ⁶	Yes ⁸
Connecticut	License from state where care is provided	20 ⁹	NA ⁴	Yes ¹⁰	Yes	NA ⁴	No

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
DC	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes
Delaware	NA (not eligible for subsidies)	18	NA ⁴	No	Yes	NA ⁴	No
Florida	NA (not eligible for subsidies)	18 ¹¹	Yes ¹²	Yes	Yes	Yes	Yes
Georgia	License from state where care is provided	21 ¹³	NA ⁴	Yes	Yes	NA ⁴	No
Guam	License from state where child lives and from which subsidy is paid	18	NA ⁴	Yes	Yes	NA ⁴	No
Hawaii	NA (not eligible for subsidies)	18	NA ⁴	Yes ⁵	Yes	NA ⁴	Yes
Idaho	License from state where care is provided	18	No	No	Yes	NA ⁶	No
Illinois	NA (not eligible for subsidies)	18	Yes ¹⁴	Yes ¹⁵	Yes	NA ⁶	Yes ¹⁶

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Indiana	NA (not eligible for subsidies)	18	NA ¹⁷	Yes	Yes	NA ¹⁷	No
Iowa	License from state where care is provided	18	NA ¹⁷	Yes	Yes	NA ¹⁷	Yes
Kansas	License from state where care is provided ¹⁸	18	No	No	Yes	NA ⁶	No
Kentucky	--- ¹	18	No	No	Yes	NA ⁶	No
Louisiana	NA (not eligible for subsidies)	18	No	No	Yes ¹⁹	NA ⁶	No
Maine	License from state where care is provided	18	NA ⁴	No	Yes	NA ⁴	No
Maryland	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes
Massachusetts	NA (not eligible for subsidies)	18	Yes	Yes	Yes	NA ⁶	No
Michigan	NA (not eligible for subsidies)	18	NA ⁴	Yes	Yes	NA ⁴	Yes

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Minnesota	License from state where care is provided	18	No	No	Yes	NA ⁶	No
Mississippi	NA (not eligible for subsidies)	18	No	No	No ²⁰	NA ⁶	No
Missouri	License from state where care is provided ²¹	18	NA ⁴	Yes ²²	Yes	NA ⁴	Yes
Montana	License from state where care is provided ²³	18	No	Yes	Yes	NA ⁶	Yes
Nebraska	License from state where care is provided ²⁴	19	NA ⁴	No ²⁵	Yes	NA ⁴	No ²⁵
Nevada	License from state where care is provided	18	No	No	Yes	NA ⁶	No
New Hampshire	--- ¹	18	No	No	Yes	NA ⁶	No
New Jersey	License from state where care is provided	18	Yes ²⁶	Yes	Yes	Yes	Yes

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
New Mexico	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes
New York	License from state where care is provided	18	No	Yes	Yes	NA ⁶	Yes
No. Mariana Islands	License from state where care is provided	18	NA ⁴	No	Yes	NA ⁴	Yes
North Carolina	License from state where care is provided	18	NA ⁴	Yes ²⁷	Yes ²⁷	NA ⁴	Yes ²⁷
North Dakota	License from state where care is provided ²⁸	18	No	Yes ²⁹	Yes	NA ⁶	Yes ²⁹
Ohio	License from state where care is provided ³⁰	18	NA ³¹	No	Yes	NA ³¹	No
Oklahoma	NA (not eligible for subsidies)	18	NA ⁴	No	Yes	NA ⁴	No
Oregon	NA (not eligible for subsidies)	18	No	Yes ⁵	Yes	NA ⁶	Yes

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Pennsylvania	License from state where care is provided	18	No	No	Yes	NA ⁶	No
Puerto Rico	--- ¹	18	No	No	Yes	NA ⁶	No
Rhode Island	NA (not eligible for subsidies)	21	NA ⁴	No	Yes	NA ⁴	No
South Carolina	License from state where care is provided ³²	21	NA ³³	No	Yes	No ³⁴	No
South Dakota	License from state where care is provided ³⁵	18	No	Yes ³⁶	Yes	NA ⁶	No
Tennessee	License from state where care is provided	18 ³⁷	No	No	Yes	NA ⁶	No
Texas	License from state where care is provided ³⁸	18	Yes ³⁹	Yes ³⁹	Yes	No	No
Utah	NA (not eligible for subsidies) ⁴⁰	18	No ⁴¹	No ⁴¹	Yes	NA ⁶	No

Table 42. Provider Policies: Who May Provide Care, 2020²

State/Territory*	Where Out of State Providers Must Be Licensed	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Vermont	License from state where care is provided ⁴²	18	No	Yes ⁵	Yes	NA ⁶	No
Virgin Islands	NA (not eligible for subsidies)	18	No	No	Yes	NA ⁶	No
Virginia	NA (not eligible for subsidies)	18	NA ⁴	Yes	Yes	NA ⁴	Yes
Washington	License from state where care is provided	18	No	Yes	Yes	NA ⁶	Yes
West Virginia	License from state where care is provided	18	NA ⁴	Yes	Yes	NA ⁴	Yes
Wisconsin	License from state where care is provided	18	No ⁴³	No	Yes	NA ⁶	No ⁴³
Wyoming	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

- ¹ Information not found in State's/Territory's manual.
- ² The unit refers to the group of people included in the family size for purposes of determining eligibility and copayments.
- ³ The department verifies licensure and health and safety inspection requirements for out-of-state providers with the neighboring state prior to enrollment in Alabama's CCDF program.
- ⁴ Adult non-parent relatives and non-relatives are not considered part of the assistance unit.
- ⁵ Relatives living in the home and not part of the assistance unit may provide care, with the exception of siblings, who must reside outside of the home in order to provide care.
- ⁶ Adult non-parent, non-relatives are not considered part of the assistance unit.
- ⁷ The provider cannot be a parent, a step-parent, a significant other who is taking the place of a parent, or a person in a common-law marriage with the biological parent. Siblings must be living outside of the home to provide care.
- ⁸ The provider cannot be a parent, a step-parent, a significant other who is taking the place of a parent, or a person in a common-law marriage with the biological parent.
- ⁹ Unlicensed in-home relative providers must be at least 20 years old at the beginning of their authorization period.
- ¹⁰ A relative living in the same household cannot be authorized to provide care between 11:00 pm and 7:00 am, unless the child is under 3 years old or has special needs. A sibling cannot provide care at any hour.
- ¹¹ The operator of a child care facility must be 21 years of age or older. A child care facility cannot employ a person under the age of 16 unless the person is under direct supervision and is not counted when computing the staff to child ratio.
- ¹² Informal providers, defined as persons who provide care for eligible children from only one family who are, by marriage, blood relationship, or court decree, the grandchild, great grandchild, sibling (if such provider lives in a separate residence), niece, or nephew of such provider, are not required to be licensed. However, if informal providers receive CCDF funding, they must meet the same health, safety, sanitation, screening, and inspection requirements as family day care home providers.
- ¹³ Informal providers must be 21 years of age. The director of a licensed child care program must also be 21 years of age, while lead teachers must be 18 years of age, and an assistant teacher, who cannot be left alone with children, must be 16 years of age.
- ¹⁴ The provider cannot be a parent, a step-parent, anyone in the same TANF assistance unit, a person living in the home who is a parent of the child's sibling or has a child with the applicant, or a sibling living in the home. Siblings must reside outside of the home in order to provide care.
- ¹⁵ Payments will not be made for a provider's sibling living in the same household.
- ¹⁶ A non-relative must not be a parent of the child's sibling or have a child in common with the applicant.
- ¹⁷ Relatives and non-relatives who are over age 18 are never considered part of the unit.
- ¹⁸ Out-of-state providers are required to meet the minimum requirements for child care providers and be licensed in their state of residence. Relative providers are not required to be licensed in either state.
- ¹⁹ A relative is not authorized to care for a child if it is a TANF case.
- ²⁰ Relatives may only provide care in the child's home for children with special needs who require in-home care.
- ²¹ The provider must also comply with Missouri's registration requirements.
- ²² Siblings must be living outside of the household in order to provide care.
- ²³ Out-of-jurisdiction providers must complete Montana's child care licensing paperwork and send a copy of their licensing or registration credentials. Once the state determines that the licensing or registration criteria meet or exceed Montana's standards, a for-payment-purposes-only number may be issued.
- ²⁴ Out-of-state care may be provided for foster children or children with an adoption or guardianship subsidy. The provider must meet licensing or registration requirements in the state where care is provided.
- ²⁵ Individuals living in the home can only provide care if the child has special needs.
- ²⁶ Siblings must be 18 years of age or older and live outside the home in order to provide care.
- ²⁷ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels.
- ²⁸ Providers in other states are acceptable if they are licensed and live in bordering cities.
- ²⁹ If the provider and the child live in the same home, care may be allowed only when the provider is licensed and not the caretaker of the child.

- ³⁰ An out-of-state child care provider must be located in a state that borders Ohio in order to provide care to Ohio children through the subsidy program.
- ³¹ Adult non-parent relatives and non-relatives are not considered part of the assistance unit. Regardless, the state does not permit care by anyone living in the child's own home.
- ³² The state may reimburse regulated center-based, group, or family child care providers that operate outside of the state. Primarily, this policy is applied to allow payment for child care costs for children in foster care or child protective services. However, this option can be used for all child care categories. This is only done with the prior approval of the arrangement by the designated program staff and human services worker.
- ³³ Adult non-parent relatives are not considered part of the assistance unit.
- ³⁴ Adult non-parent, non-relatives living in the home are not considered part of the assistance unit, unless they are counted in the TANF or SNAP budget.
- ³⁵ Relative providers are required to meet the same criteria as relative providers residing in South Dakota. Licensed or registered providers must be in compliance with their state's licensing requirements and provide a copy of a valid child care license or certification from the provider's state of residence. Informal and in-home providers must reside in South Dakota.
- ³⁶ Siblings must maintain a separate residence.
- ³⁷ Unregulated providers must be age 21.
- ³⁸ The out-of-state provider must agree to comply with both state-wide and local requirements, including maximum reimbursement rates, where the child lives.
- ³⁹ Relatives living in the home may only provide care if the eligible child is the child of a teen parent, an infant, a child with disabilities, or if the department determines that other arrangements are not reasonably available. Siblings of the eligible child that are over 18 may only provide care if they are not living in the household.
- ⁴⁰ Out-of-state providers are not approved for care. A caregiver who resides in another state may be approved to provide care in the child's home within the state of Utah.
- ⁴¹ An exception may be granted when a child in the home has special needs that have been documented and the provider living in the home is not a sibling of the child needing care.
- ⁴² Licensed, registered, and certified providers in other states may provide care upon receipt of appropriate documentation and subsequent review and approval by Vermont's child care agency. Uncertified providers may provide care subject to the same review and approval, but they may only provide care in the child's home in Vermont.
- ⁴³ Authorizations cannot be issued to a provider to care for a child that lives in the provider's home. Children who live with a provider who is not their parent can attend a different provider.

Appendix A. Content of the CCDF Policies Database

Table A-1. Content of the CCDF Policies Database

Variable Category/Subcategory	Description of Variables
Basic Criteria for Eligibility*	
<i>Children's Age Eligibility Requirements</i>	The age requirements for different groups of children under CCDF, including special needs children, foster children, and children under protective services.
<i>Parent/Guardian Activities that Confer Eligibility</i>	The range of activities that confer eligibility under CCDF. Activities include employment, school, training, job search, housing search, and more. Time limits for job search activities and school and work hour requirements for students are also captured.
<i>Other Eligibility Criteria</i>	Special requirements for parents, including elderly exemptions and special needs exemptions.
<i>Groups Qualifying with Different Eligibility Criteria</i>	Eligibility requirements for different groups, including TANF recipients, families transitioning off of TANF, SNAP E&T participants, CPS cases, foster care cases, and families experiencing homelessness. Time limits for families experiencing homelessness and children under protective services are also included.
<i>Ineligibility</i>	Whether families sanctioned in TANF or SNAP are ineligible for CCDF. The variables also capture how the States/Territories handle cases of applicant fraud.
Definition of Family*	
<i>Definition of Family</i>	How the family unit is defined, including the age when members are included in the unit, which family members are included based on their relationship to the recipient, when siblings are included in the unit, and treatment of adult relatives and non-relatives, step-parents, partners of the parent, relative caretakers, and multi-family households.
Income Definition*	
<i>Treatment of Various Types of Income</i>	How different types of income are treated for eligibility and copayment purposes. Types of income include TANF, SSI/SDI, self-employment, child support, SNAP benefits, foster care payments, housing assistance, lump sum income, gifts, and more.
<i>Treatment of Various Members of the Unit</i>	Whether income is counted for different members of the family unit, including children, teen parents, step-parents, non-parent adults, and parents temporarily living outside of the home.
<i>Disregards</i>	The value of earned income disregards, the amount of the disregards, limitations on the application of the disregards, and whether child support paid by a household member (for a child not living in the home) can be deducted from income.

Table A-1. Content of the CCDF Policies Database

Variable Category/Subcategory	Description of Variables
Eligibility Thresholds*	
<i>Initial Eligibility Thresholds by Family Size</i>	Initial eligibility thresholds a family must pass in order to be eligible for CCDF. Initial thresholds are captured by family size, up to a family size of 10.
<i>Continuing Eligibility Thresholds by Family Size</i>	Continuing eligibility thresholds a family must pass in order to remain eligible for CCDF. Continuing eligibility thresholds are captured by family size, up to a family size of 10.
Assets Tests*	
<i>Assets Tests</i>	The types of tests imposed on assets, including the limit on assets that are not counted against eligibility and policies for vehicle exemptions.
Copayment Exemptions*	
<i>Families Categorically Exempt from Copayments</i>	When families may be exempt from copayments. Exemptions for families living below poverty, exemptions for TANF, SSI, and SNAP recipients, and exemptions for children in foster care or child protective services are captured.
Copayment Adjustments*	
<i>Basic Copayment Calculation Method</i>	The methods for establishing the copayment, based on family size and income category, and the time increment associated with the copayment method.
<i>Families with More than One Child Receiving CCDF-Subsidized Care</i>	How copayments are calculated for families with multiple children, including the methods used to calculate the copayments, the amount of the copayments, and whether any families are exempt from additional copayments for subsequent children.
<i>Adjustments for Part-time Care</i>	How copayments are adjusted for part-time care, including a part-time care definition and a before-and-after care definition. The method for calculating the copayments and the amount of the copayments are also captured.
<i>Other Adjustments</i>	Other copayment adjustments for families with children with special needs and adjustments for other groups as defined by the States/Territories. The variables also capture whether there is a statutory minimum copayment and whether income is treated differently for eligibility and copayment purposes.
Copayment Administration*	
<i>Copayment Administration</i>	How copayments are collected, whether families are required to pay all outstanding copayments before they may change providers, whether families are required to pay the difference when providers charge more than the maximum rate, and payment requirements for days when the child is absent from care due to illness, vacation, or provider closings.
Copayment Income Thresholds*	
<i>Income Thresholds</i>	The income cutoffs defining the different copayment income categories for each family size, up to family size 10.
Copayment Amount*	
<i>Copayment Amount (Dollar Amount or Percentage)</i>	The copayment amount (a dollar amount or percentage) for each income category by family size, up to family size 10.

Table A-1. Content of the CCDF Policies Database

Variable Category/Subcategory	Description of Variables
Basic Application Criteria*	
<i>Application Process</i>	Methods for submitting an application, whether the family has the option to apply through the provider rather than the lead agency, exemptions for submitting an application, interview requirements, when coverage can begin after an application is submitted, notification requirements for eligibility, and the type of assistance families are provided when looking for a provider.
Verification*	
<i>Verification Required</i>	Verification required during the application process, including verification of identity, income, child's age, qualifying activity, absence of a parent, immunization, and the special needs of the child or parent.
<i>Child Support Enforcement Requirements</i>	The policies for complying with Child Support Enforcement Requirements, including whether verification is required and exemptions for compliance with Child Support Enforcement Requirements.
Redetermination*	
<i>Redetermination Guidelines</i>	Redetermination practices, including how often redetermination is required, redetermination for interim changes, notification requirements for redetermination, notification requirements for subsidy changes, and exemptions for redetermination.
<i>Documentation Required for Redetermination</i>	If a new application and new documentation are required for the redetermination process and how the information may be submitted to the agency.
Requirements for Reporting Changes*	
<i>Requirements for Reporting Changes</i>	When changes must be reported and what changes must be reported. This includes changes in income, address, marital status, qualifying activities, and child care providers.
Appeals*	
<i>Appeals Procedures</i>	The procedures for appealing decisions made by the lead agency. This includes the method for appeal, the agency where appeals are filed, how many appeals a person can make, and how the hearing is conducted.
<i>Service During Appeal</i>	Whether child care subsidy recipients can continue to receive care during the appeals process, if they will receive retroactive care for an appeal they win, and if they must repay the cost of care if they lose the appeal.
Terms of Authorization*	
<i>Activities Authorized for Child Care Subsidy</i>	The types of activities that may be authorized for additional hours of care, including study hours and other school activities, travel hours, rest hours, maternal/paternal leave, other absences from employment, National Guard Activities, and interim changes in eligibility. The number of hours that may be authorized for the different activities is also captured.
<i>General Maximum Hours of Coverage</i>	The maximum hours of care that can be provided under the child care subsidy.

Table A-1. Content of the CCDF Policies Database

Variable Category/Subcategory	Description of Variables
<i>Maximum Hours of Coverage for Subgroups</i>	The maximum hours of care under the child care subsidy for different groups of recipients, including part-time workers, part-time and full-time students, teen parents, and caretakers over age 65.
Priority Policies*	
<i>Priority Policies</i>	Priority policies when there are more children eligible for child care than can be served. Information includes which groups receive priority, the level of priority they receive, and if there is a time limit on their priority status.
Waiting List Policies*	
<i>Waiting List Policies</i>	Waiting list policies when there are more children eligible for child care than can be served. Information includes whether a waiting list is maintained, when eligibility is determined for placement on the list, policies for reviewing the waiting list, notification of a family's status on the waiting list, and more.
Reimbursement Rate Policies*	
<i>Definitions for Amount of Care</i>	Definitions for different amounts of care and which rate is used when families fall into more than one category for amount of care used. The definitions are used in determining reimbursement rates.
<i>Definitions for Non-School-Age Groups</i>	Definitions for different age groups when determining reimbursement rates.
Reimbursement Rates*	
<i>Reimbursement Rates</i>	Reimbursement rates based on amount of care and age group.
<i>Reimbursement Rates for Before-and-After Care</i>	Reimbursement rates for different amounts of before-and-after care.
<i>Other Reimbursement Rates</i>	Reimbursement rates for special needs care and school closings. Whether the State/Territory uses any other reimbursement rates is also captured.
Unlicensed Provider Policies*	
<i>Basic Eligibility</i>	Basic eligibility requirements for unlicensed providers, documentation of child immunizations, orientation requirements, standards for corporal punishment, and other provider information.
<i>Background Checks</i>	Criminal background check requirements, including whether the background check is required at the State/Territory or local level, exemptions, who pays for the background check, and how often background checks are required.
<i>Training</i>	CPR, first aid, and other training requirements, including who must complete the training, what exemptions are allowed, and how often the certification must be renewed.
<i>Tuberculosis Prevention Requirements</i>	TB testing requirements for providers and their household members, exemptions from TB testing, and required frequency of testing.
<i>Health and Safety Checklist Requirements</i>	Health and safety checklist requirements, including who must complete the checklist, if the items on the list are required, and how often the list must be recompleted.
Other Provider Policies*	
<i>Provider Requirements for Entering Subsidy Program</i>	Provider eligibility policies, including age requirements, required orientations, interviews, and provider agreements.

Table A-1. Content of the CCDF Policies Database

Variable Category/Subcategory	Description of Variables
<i>On-site Visits</i>	Requirements for on-site visits for both licensed and unlicensed providers.
<i>Documentation</i>	The documentation providers must maintain related to attendance records. Information also includes whether States/Territories use EBT cards.
<i>Overpayments and Fraud</i>	Policies related to provider overpayments and fraud, including repayment of overpayments, appeals, and actions taken as a result of provider fraud.
<i>Provider Payments and Closings</i>	How the provider is paid, collection of copayments, how often the provider can be closed, and whether the provider is paid for days the children are not in care.
<i>Parents and Providers</i>	Whether parents employed by the provider may receive subsidized care, how much notice providers must be given before a child is removed from care, and how often parents may change providers.
<i>Provider Termination</i>	Different reasons a provider may be removed from the child care subsidy program and if providers can be reinstated once removed from the program.
Other Provider Policies: Who Is Authorized to Provide Care*	
<i>Other Provider Policies: Who Is Authorized to Provide Care</i>	Who may provide care for a child, including relatives and non-relatives living in the home and not part of the assistance unit, living in the home and part of the assistance unit, and living outside of the home.
Quality** (From October 2005 through October 2009 CCDF Plans only)	
<i>Activities that Improve Quality and Availability of Care</i>	Whether activities are provided or will be provided, including consumer education, compliance monitoring, salary improvements, and more.
Early Learning Guidelines** (From October 2005 through October 2009 CCDF Plans only)	
<i>Early Learning Guidelines</i>	The status of early learning guidelines, as reported in the CCDF Plans.
<i>Implementation of Early Learning Guidelines</i>	Implementation of early learning guidelines, including dissemination of materials, development of training curricula, partnerships with other agencies, and more.
Professional Development** (From October 2005 through October 2009 CCDF Plans only)	
<i>Professional Development</i>	Status of the States'/Territories' professional development activities. This includes what is included in the States'/Territories' plans for professional development, goals, training, and links to early learning guidelines.
<i>Availability of Professional Development Opportunities</i>	Whether professional development opportunities are available State/Territory-wide and for different types of providers.

Table A-1. Content of the CCDF Policies Database

Variable Category/Subcategory	Description of Variables
<i>Other Professional Development Policies</i>	Whether incentives are offered to encourage training, if States/Territories assess their plans, and if States/Territories assess the effectiveness of the policies.
Administration** (From October 2005 through October 2009 CCDF Plans only)	
<i>Administration</i>	Administrative information, including the name of the lead agency responsible for overseeing the child care subsidy program and the State/Territory website for child care information. Information also includes policies regarding the transfer of federal TANF funds, the use of direct federal TANF funds, whether private or pre-k funds will be used to meet the CCDF matching fund requirement, and strategies for reducing improper payments.
<i>Market Rate Survey</i>	Date of the market rate survey and whether the State/Territory uses the current survey to set reimbursement rates.
<i>Child Care Services</i>	Whether the lead agency uses grants or contracts for child care slots and whether there are any limits on the use of in-home child care.
Program Development** (From October 2005 through October 2009 CCDF Plans only)	
<i>Consultation and Coordination</i>	Plans for the States'/Territories' consultation and coordination with other agencies, including public health officials, TANF officials, Tribal organizations, and public education officials.

* Information coded primarily from caseworker materials.

** Information coded primarily from CCDF Plan.

Appendix B. Eligibility Thresholds as a Percent of Poverty Guidelines

Table B-1 shows initial and continuing eligibility thresholds for a three-person family as a percent of the 2020 Federal Poverty Guidelines. (See tables 14, 15, and 16 of Section II (Financial Eligibility Tests) in the Book of Tables for additional detail about eligibility thresholds.) Across the States/Territories, the initial eligibility threshold for a three-person family ranges from 129 percent of the Federal Poverty Guidelines (in Indiana) to 346 percent of the Federal Poverty Guidelines (in California).

Table B-1. Eligibility Thresholds for a Three-Person Family, as a Percent of the 2020 Federal Poverty Guidelines ¹

State	Initial Eligibility Threshold	Initial Threshold as Percent of Poverty Guidelines	Threshold During Eligibility	Threshold during Eligibility as Percent of Poverty Guidelines	Threshold at Redetermination	Threshold at Redetermination as Percent of Poverty Guidelines
Alabama	2,353	132%	3,077	173%	3,077	173%
Alaska	5,960	268%	5,960	268%	5,960	268%
Arizona	2,987	168%	4,718	265%	4,718	265%
Arkansas	4,130	232%	4,130	232%	4,130	232%
California	6,157	346%	6,157	346%	6,157	346%
Colorado ²	4,073	229%	5,995	337%	5,995	337%
Connecticut	4,222	237%	7,179	404%	5,489	309%
Delaware	4,444	250%	6,258	352%	6,258	352%
DC	3,349	188%	5,095	287%	3,619	204%
Florida	2,715	153%	4,384	247%	4,384	247%
Georgia	2,807	158%	4,772	268%	4,772	268%
Hawaii	3,927	192%	3,927	192%	3,927	192%
Idaho	2,353	132%	4,446	250%	2,715	153%
Illinois	3,620	204%	5,546	312%	4,073	229%
Indiana	2,299	129%	4,737	266%	4,737	266%
Iowa	2,625	148%	4,073	229%	4,073	229%
Kansas	3,349	188%	4,979	280%	4,979	280%
Kentucky	2,771	156%	4,808	270%	3,463	195%
Louisiana	2,978	167%	4,603	259%	4,603	259%
Maine	5,365	302%	5,365	302%	5,365	302%
Maryland	5,007	282%	6,547	368%	6,547	368%
Massachusetts	4,387	247%	7,457	419%	7,457	419%

Table B-1. Eligibility Thresholds for a Three-Person Family, as a Percent of the 2020 Federal Poverty Guidelines ¹

State	Initial Eligibility Threshold	Initial Threshold as Percent of Poverty Guidelines	Threshold During Eligibility	Threshold during Eligibility as Percent of Poverty Guidelines	Threshold at Redetermination	Threshold at Redetermination as Percent of Poverty Guidelines
Michigan	2,715	153%	5,336	300%	5,336	300%
Minnesota	3,423	193%	6,190	348%	4,879	274%
Mississippi	3,833	216%	3,833	216%	3,833	216%
Missouri	2,498	140%	3,892	219%	3,892	219%
Montana	2,666	150%	3,288	185%	3,288	185%
Nebraska	2,353	132%	5,371	302%	3,349	188%
Nevada	2,531	142%	4,685	263%	4,685	263%
New Hampshire	3,982	224%	6,518	367%	4,525	254%
New Jersey	3,620	204%	7,420	417%	7,420	417%
New Mexico	3,620	204%	4,525	254%	4,525	254%
New York	3,620	204%	3,620	204%	3,620	204%
North Carolina	3,555	200%	4,565	257%	4,565	257%
North Dakota	4,233	238%	5,997	257%	5,997	337%
Ohio	2,353	132%	5,430	305%	5,430	305%
Oklahoma	4,372	246%	4,372	246%	4,372	246%
Oregon	4,956	279%	4,956	279%	4,956	279%
Pennsylvania	3,620	204%	4,254	239%	4,254	239%
Rhode Island	3,258	183%	4,073	229%	4,073	229%
South Carolina	2,965	167%	4,582	258%	4,582	258%
South Dakota	3,783	213%	5,144	289%	5,144	289%
Tennessee	3,078	173%	3,078	173%	3,078	173%
Texas ³	3,620	204%	4,884	275%	4,884	275%
Utah	4,585	258%	4,585	258%	4,585	258%
Vermont	5,430	305%	5,430	305%	5,430	305%
Virginia ⁴	3,349	188%	6,226	350%	6,226	350%
Washington	3,620	204%	5,760	324%	3,982	224%
West Virginia	2,666	150%	3,288	185%	3,288	185%
Wisconsin	3,349	188%	5,468	308%	5,468	308%
Wyoming	3,168	178%	4,073	229%	4,073	229%
Average	3,582	200%	5,001	278%	4,711	263%
Median	3,555	193%	4,808	268%	4,585	258%

Source: Eligibility Thresholds are from the CCDF Policies Database October 1, 2020 data. Federal Poverty Guidelines are from the Department of Health and Human Services (<https://aspe.hhs.gov/2020-poverty-guidelines>).

¹ All numbers are rounded to whole numbers. The 2020 Federal Poverty Guidelines for a three-person family are \$21,720 annually (\$1,810 monthly) for the 48 contiguous States, \$27,150 annually (\$2,263 monthly) for Alaska, and \$24,980 annually (\$2,082 monthly) for Hawaii.

² Policy coded for Denver County. Counties may establish initial eligibility thresholds between 185 percent of the Federal Poverty Guidelines and 85 percent of the state median income.

³ Policy coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

⁴ Policy coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines.

Appendix C. Additional Redetermination Policies

In order to verify additional information from the database, States/Territories were asked to review this appendix table. Each year, the appendix will present different policies that have not previously been included in the annual verification process in order to fill in missing or incomplete information in the database. Table C-1 captures additional aspects of States'/Territories' redetermination policies that are not found in table 21 (Redetermination Requirements). The table shows whether certain families are categorically exempt from redetermination, and includes policies for TANF recipients, SNAP recipients, families with children in foster care, families with children in CPS, and other groups.

As of October 1, 2020, three States did not require TANF recipients to complete the redetermination process. No States exempted SNAP recipients from redetermination. Two States exempted families with children in foster care from redetermination. Four States did not require families with children in CPS to complete the redetermination process.

Table C-1. If Certain Families are Categorically Exempt from Redetermination, 2020 ²

State/Territory*	TANF Recipients	SNAP Recipients	Families with Children in Foster Care	Families with Child Protective Services Cases	Other Groups
Alabama	No	No	No	No	No
Alaska	No	No	No	No	No
American Samoa	NA ³	--- ¹	--- ¹	--- ¹	--- ¹
Arizona	No	No	No	No	No
Arkansas	No	No	No	No	No
California	No	No	No	No	No
Colorado	Yes	No	No	No	No
Connecticut	No	No	No	No	No
DC	No	No	No	No	No
Delaware	No	No	No	No	No
Florida	No	NA ⁴	No	No	No
Georgia	No	No	No	No	No
Guam	No	No	No	No	No
Hawaii	No	No	No	No	No
Idaho	No	No	No	No	No
Illinois	No	No	NA ⁵	NA ⁶	Yes ⁷
Indiana	No	No	No	No	No

Table C-1. If Certain Families are Categorically Exempt from Redetermination, 2020 ²

State/Territory*	TANF Recipients	SNAP Recipients	Families with Children in Foster Care	Families with Child Protective Services Cases	Other Groups
Iowa	No	No	No ⁸	No	No
Kansas	No	No	No	Yes ⁹	No
Kentucky	No ¹⁰	No	No	No ¹¹	No
Louisiana	Yes	No	No	No	No
Maine	No	No	No	No	No
Maryland	No	No	NA ⁵	NA ⁶	No
Massachusetts	No	No	No	No	No
Michigan	No ¹²	No ¹²	No	No	No
Minnesota	No	No	NA ⁵	NA ⁶	No
Mississippi	Yes	No	Yes	Yes	Yes ¹³
Missouri	No	No	No	No	No
Montana	No	No	No	No ¹⁴	No
Nebraska	No	No	No	Yes	No
Nevada	No ¹⁵	No	No	No	No
New Hampshire	No ¹⁶	No ¹⁶	No ¹⁶	No ¹⁶	No ¹⁶
New Jersey	No	No	No	No	No
New Mexico	No	No	No	No	No
New York	No	No	Yes ¹⁷	Yes ¹⁸	No
No. Mariana Islands	NA ³	No	No	No	--- ¹
North Carolina	No	No	No ¹⁹	No	No
North Dakota	No	No	No ²⁰	NA ⁶	No
Ohio	No	No	No	No	No
Oklahoma	No	No	No	No	No
Oregon	No	No ²¹	No	No	No
Pennsylvania	No ¹⁰	No ²²	No	No	No
Puerto Rico	No	--- ¹	No	No	--- ¹
Rhode Island	No	No	No	No	No
South Carolina	No	No	No	No	No
South Dakota	No	No	No	No	No
Tennessee	No	No	No	No	No
Texas	No	No	No	No	No
Utah	No	No	NA ⁵	No	No
Vermont	No	No	No	No	No
Virgin Islands	No	No	No	No	No
Virginia	No	No	No ²³	No	No
Washington	No	No	No ²⁴	No ²⁴	No

Table C-1. If Certain Families are Categorically Exempt from Redetermination, 2020 ²

State/Territory*	TANF Recipients	SNAP Recipients	Families with Children in Foster Care	Families with Child Protective Services Cases	Other Groups
West Virginia	No	No	No	No	No
Wisconsin	No	No	No	No	No
Wyoming	No	No	No	No	No

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² The general policy for categorically exempting some groups from the redetermination process are shown here. For exceptions and special policies for all families due to the COVID-19 pandemic, see the full CCDF Policies Database.

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

⁴ Child care for SNAP clients is not provided under the state's primary child care subsidy program.

⁵ Foster child care is not provided under the state's primary child care subsidy program.

⁶ Child protective services child care is not provided under the state's primary child care subsidy program.

⁷ Children in approved Head Start or Pre-K programs will maintain indefinite eligibility for child care when participation in the program is part of their current TANF services plan.

⁸ Only relative, non-licensed foster families receive child care through the CCDF program.

⁹ Formal review is not necessary for child care cases for children in foster care unless the family also receives child care for their own children as well.

¹⁰ TANF applicants must complete redetermination with the department that determined their initial eligibility.

¹¹ Child protective services applicants must complete redetermination with the department that determined their initial eligibility.

¹² Redetermination periods for families participating in multiple programs are aligned so the families do not have to complete an additional redetermination for child care.

¹³ Families in the state's home visitation program are exempt from redetermination.

¹⁴ Child protective services applicants must complete redetermination every 6 months.

¹⁵ The only requirement for TANF recipients is to obtain a new child care referral form from the TANF worker.

¹⁶ Families receiving assistance from another program in addition to child care assistance may be able to complete redetermination through a mail-in process rather than through the in-person interview process required for all other participants.

¹⁷ Policy coded for New York City. Foster parents are programmatically eligible for child care assistance without regard to income in New York City. State regulations do not require recertification for families who are programmatically eligible for child care assistance.

¹⁸ Policy coded for New York City.

¹⁹ When a child transitions to a new foster family and the child was receiving care due to the prior foster parents' need for employment or education, the new foster family's need for care should be assessed. If the new foster family does not have a need for care, the foster child will receive continued care for 90 days. If the new family declines care, the case is terminated with a 10-day notice.

²⁰ Children in licensed foster care are not eligible. Children in unlicensed foster care settings are eligible under the same requirements as other families.

²¹ When the family has a companion SNAP case in the state's simplified reporting system, the eligibility period is extended to 12 months and aligned with the SNAP recertification process. In addition, SNAP families submit an interim change report during the sixth month of the SNAP eligibility period.

²² SNAP applicants must complete redetermination with the department that determined their initial eligibility.

²³ There is a separate program for foster child care subsidies. A foster child may receive CCDF funding if a local department maintains custody of a child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.

²⁴ Child protective services and foster children can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they must meet the same requirements as other families.

Appendix D. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables

The unlicensed home-based provider policies presented in tables 39a through 41b apply to the following provider types in each State/Territory (table D-1).

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Alabama	NA ²	Home-based relative providers	NA ²	Home-based relative providers	NA ²	Home-based relative providers
Alaska	NA ²	Approved relative in-home care	NA ²	Approved relative and in-home care	NA ²	Approved relative and In-home care
American Samoa	In-home care	In-home care	In-home care	In-home care	In-home care	In-home care
Arizona	DES certified child care homes, DES certified in-home providers, Non-certified relative providers	DES certified child care homes, DES certified in-home providers, Non-certified relative providers	DES certified child care homes, DES certified in-home providers	Non-certified relative providers	DES certified child care homes, DES certified in-home providers	Non-certified relative providers
Arkansas	In-home child care provider, relative child care provider	In-home child care provider, relative child care provider	In-home child care provider, relative child care provider	In-home child care provider, relative child care provider	In-home child care provider, relative child care provider	In-home child care provider, relative child care provider
California	TrustLined providers	Relative providers	TrustLined and Relative providers	TrustLined and Relative providers	TrustLined providers	Relative providers
Colorado	In-home non-relative and relative providers	In-home non-relative and relative providers	In-home and out-of-home non-relative providers	In-home and out-of-home relative providers	In-home and out-of-home non-relative providers	In-home and out-of-home relative providers
Connecticut	NA ²	Unlicensed relative child care providers	NA ²	Unlicensed relative child care providers	NA ²	Unlicensed relative child care providers
DC	In-home care and relative care	In-home care and relative care	In-home care and relative care	In-home care and relative care	In-home care and relative care	In-home care and relative care
Delaware	In-home care providers	In-home care providers	In-home care providers	In-home care providers	In-home care providers	In-home care providers
Florida	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers
Georgia	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Guam	License-exempt family day care (relative/non-relative), license-exempt in-home care (relative/non-relative)	License-exempt family day care (relative/non-relative), license-exempt in-home care (relative/non-relative)	License-exempt family day care (relative/non-relative), license-exempt in-home care (relative/non-relative)	License-exempt family day care (relative/non-relative), license-exempt in-home care (relative/non-relative)	License-exempt family day care (relative/non-relative), license-exempt in-home care (relative/non-relative)	License-exempt family day care (relative/non-relative), license-exempt in-home care (relative/non-relative)
Hawaii	License-exempt providers					
Idaho	In-home child care, relative child care					
Illinois	Non-relative exempt from licensing (in home of child)	Relative exempt from licensing (in home of child)	Day care home exempt from licensing, non-relative exempt from licensing (in home of child)	Relative exempt from licensing (in home of provider), relative exempt from licensing (in home of child)	Day care home exempt from licensing, non-relative exempt from licensing (in home of child)	Relative exempt from licensing (in home of provider), relative exempt from licensing (in home of child)
Indiana	Legally license-exempt providers (in home, relative, nanny)					
Iowa	Nonregistered providers					
Kansas	NA ²	Relative in-home care	NA ²	Relative in-home care	NA ²	Relative in-home care
Kentucky	Registered providers					
Louisiana	Home-based providers					

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Maine	Legal, unregulated non-relative child care provider, In-home non-relative child care provider	Legal, unregulated relative child care provider, In-home relative child care provider	Legal, unregulated non-relative child care provider, In-home non-relative child care provider	Legal, unregulated relative child care provider, In-home relative child care provider	Legal, unregulated non-relative child care provider, In-home non-relative child care provider	Legal, unregulated relative child care provider, In-home relative child care provider
Maryland	Informal care	Informal care	Informal care	Informal care	Informal care	Informal care
Massachusetts	Non-relative informal caregivers	Relative informal caregivers	Non-relative informal caregivers	Relative informal caregivers	Non-relative informal caregivers, Relative informal caregivers	Non-relative informal caregivers, Relative informal caregivers
Michigan	License-exempt unrelated ³	License-exempt related ³	License-exempt unrelated ³	License-exempt related ³	License-exempt unrelated ³	License-exempt related ³
Minnesota	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non-licensed nonrelative providers	Legal-non-licensed relative providers
Mississippi	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴
Missouri	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers
Montana	Family, friend, and neighbor (FFN)	Family, friend, and neighbor (FFN)	Family, friend, and neighbor (FFN)	Family, friend, and neighbor (FFN) ⁵	Family, friend, and neighbor (FFN)	Family, friend, and neighbor (FFN) ⁵
Nebraska	In-home providers	In-home providers	Nonrelative in-home providers	Relative in-home providers	Nonrelative in-home providers	Relative in-home providers
Nevada	Family, friend, and neighbor (FFN) provider	Family, friend, and neighbor (FFN) provider	Family, friend, and neighbor (FFN) provider	Family, friend, and neighbor (FFN) provider	Family, friend, and neighbor (FFN) provider	Family, friend, and neighbor (FFN) provider

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
New Hampshire	License-exempt family provider					
New Jersey	Approved home providers (including family, friends and neighbors (FFN) and in-home providers), Registered family child care providers, Accredited home providers	Approved home providers (including family, friends and neighbors (FFN) and in-home providers), Registered family child care providers, Accredited home providers	Approved home providers (including family, friends and neighbors (FFN) and in-home providers), Registered family child care providers, Accredited home providers	Approved home providers (including family, friends and neighbors (FFN) and in-home providers), Registered family child care providers, Accredited home providers	Approved home providers (including family, friends and neighbors (FFN) and in-home providers), Registered family child care providers, Accredited home providers	Approved home providers (including family, friends and neighbors (FFN) and in-home providers), Registered family child care providers, Accredited home providers
New Mexico	Registered home					
New York	Legally-exempt child care providers					
No. Mariana Islands	License-exempt family home providers, in-home providers					
North Carolina	NA ⁶					
North Dakota	In-home child care providers; self-declared providers	Approved relative providers	In-home child care providers; self-declared providers	Approved relative providers	In-home child care providers; self-declared providers	Approved relative providers
Ohio	In-home aides (IHA)					
Oklahoma	NA ⁷	Relative in-home providers	NA ⁷	Relative in-home providers	NA ⁷	Relative in-home providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Oregon	License-exempt home-based providers, family, friend, and neighbor (FFN) provider	License-exempt home-based providers, family, friend, and neighbor (FFN) provider	Non-relative license-exempt home-based providers, family, friend, and neighbor (FFN) provider	Relative license-exempt home-based providers, family, friend, and neighbor (FFN) provider	License-exempt home-based providers, family, friend, and neighbor (FFN) provider	License-exempt home-based providers, family, friend, and neighbor (FFN) provider
Pennsylvania	NA ²	Relative provider and in-home care	NA ²	Relative provider and in-home care	NA ²	Relative provider and in-home care
Puerto Rico	Proveedor exento no familiar	Proveedor familiar	Proveedor exento no familiar	Proveedor familiar	Proveedor exento no familiar	Proveedor familiar
Rhode Island	NA ²	License-exempt child care provider	NA ²	License-exempt child care provider	NA ²	License-exempt child care provider
South Carolina	Family, friend, and neighbor (FFN) care providers, family child care home providers, group child care homes	Family, friend, and neighbor (FFN) care providers, family child care home providers, group child care homes	Family child care home providers	Family child care home providers	Family, friend, and neighbor (FFN) care providers, family child care home providers	Family, friend, and neighbor (FFN) care providers, family child care home providers
South Dakota	Family day care providers, Informal providers, and In-home providers	Relative providers	Family day care providers, Informal providers, and In-home providers	Relative providers	Family day care providers, Informal providers, and In-home providers	Relative providers
Tennessee	Unregulated provider	Unregulated provider	Unregulated provider	Unregulated provider	Unregulated provider	Unregulated provider

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Texas	Unregulated (relative care providers); registered child care homes; listed child care homes	Unregulated (relative care providers); registered child care homes; listed child care homes ⁸	Registered child care homes; listed child care homes	Unregulated (relative care providers); registered child care homes; listed child care homes ⁸	Unregulated (relative care providers); registered child care homes; listed child care homes	Unregulated (relative care providers); registered child care homes; listed child care homes ⁸
Utah	Legally license-exempt home providers	Legally license-exempt home providers	Legally license-exempt home providers	Legally license-exempt home providers	Legally license-exempt home providers	Legally license-exempt home providers
Vermont	NA ²	Approved relative child care providers	NA ²	Approved relative child care providers	NA ²	Approved relative child care providers
Virgin Islands	Approved home providers, in-home day care providers, informal care providers	Approved home providers, in-home day care providers, informal care providers	Approved home providers, in-home day care providers, informal care providers	Approved home providers, in-home day care providers, informal care providers	Approved home providers, in-home day care providers, informal care providers	Approved home providers, in-home day care providers, informal care providers
Virginia	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes
Washington	In-home and relative providers	In-home and relative providers	In-home and relative providers	In-home and relative providers	In-home and relative providers	In-home and relative providers
West Virginia	Family child care provider, informal or relative family child care provider, in-home care provider	Family child care provider, informal or relative family child care provider, in-home care provider	In-home care provider	In-home care provider	Family child care provider, informal or relative family child care provider, in-home care provider	Family child care provider, informal or relative family child care provider, in-home care provider
Wisconsin	Certified family and certified in-home providers	Certified family and certified in-home providers	Certified family and certified in-home providers	Certified family and certified in-home providers	Certified family and certified in-home providers	Certified family and certified in-home providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2020 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Wyoming	Legally exempt providers	Legally exempt providers	Legally exempt providers	Legally exempt providers	Legally exempt providers	Legally exempt providers

Source: CCDF Policies Database October 1, 2020 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ This table shows the types of providers to which the policies in tables 39a through 41b apply. If the same policies apply to both relative and non-relative providers, the entries for the non-relative (a) tables and relative (b) tables will match.

² All non-relative home-based providers must be licensed in order to participate in the subsidy program.

³ License exempt-unrelated providers are required to provide care in the child's home, whereas license exempt-related providers may provide care in the child's home or the provider's home.

⁴ In-home providers may only be approved for children with special needs that require in-home care.

⁵ Providers related to the children in care may provide care as either a Relative Care Exempt (RCE) provider or a Family, Friend, and Neighbor (FFN) provider. In cases where the policies vary between RCE and FFN providers, the policy for FFN providers is shown in the tables and the policy for RCE providers is described in the footnotes.

⁶ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

⁷ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.

⁸ Providers related to the children in care may provide care as either an unregulated provider (relative care provider), registered child care home, or a listed child care home.

Appendix E. State Policies from 2016 to 2020: Selected Policies from the CCDF Policies Database

Over time, States/Territories revise their policies, sometimes to account for funding changes or evolving policy priorities. Here, we look at selected policies for the past five years (from 2016 to 2020) across four broad policy areas. Changes between years are shown in bold in tables E-1 through E-9; in some cases, the policy change is captured in the table itself and in other cases the policy changes are captured in the tables' footnotes.

Eligibility Requirements for Families

Many States/Territories made changes to some aspect of their eligibility policies over this period. From 2016 to 2020, four States/Territories (Kansas, Kentucky, Louisiana, and New York) made changes to their policies regarding the number of hours parents or guardians must work in order to qualify for subsidies (table E-1). Twenty-two States/Territories made changes to their policies regarding eligibility during periods of job search (table E-2). Four of these (Alaska, Maryland, Mississippi, and Nebraska) began only allowing job search for continuing eligibility and no longer allowed job search at initial eligibility, four (New Jersey, Louisiana, Virgin Islands, and Wisconsin) began allowing job search after previously not considering it a qualifying activity, two (Missouri and Tennessee) began allowing job search for initial eligibility in addition to continuing eligibility, one (Utah) stopped allowing job search, and others made changes to who qualified for job search eligibility. Almost all States/Territories made changes to the monthly income eligibility thresholds from 2016 to 2020, with most of the changes resulting in higher thresholds over time (table E-3).

Reporting Changes, Redetermination, and Waiting Lists

Several States/Territories made changes in policies related to eligibility redetermination and waiting lists. Between 2016 and 2020 five States/Territories made changes to their policies regarding how many days families have to report changes in their circumstances (table E-4). Twenty-three States/Territories made changes to their redetermination periods between 2016 and 2020 (table E-5). Five of these extended the redetermination period. Other States changed the requirements for certain families, and some States/Territories allowed for temporary expansions during the COVID-19 pandemic. Three

States/Territories (Colorado, New Mexico, and the Northern Mariana Islands) changed their policies regarding waiting lists between 2016 and 2020 (table E-6).

Family Copayment Policies

Numerous States/Territories made changes to their copayment amounts between 2016 and 2020. Thirty States/Territories changed the monthly copayment amounts for a family of three (one parent or guardian and children ages 2 and 4) earning \$15,000 (table E-7), with most of the changes occurring between 2019 and 2020, when many States/Territories waived copayments for all families in response to the COVID-19 pandemic.

Provider Reimbursement Rates

Most States/Territories changed their reimbursement rates at least once between 2016 and 2020. Fifty-two States/Territories changed their reimbursement rates for toddlers in center-based care during this time period (table E-8). Forty-eight States/Territories changed their reimbursement rates for toddlers in family child care homes between 2016 and 2020 (table E-9). Almost all of these changes were increases to the reimbursement rates or beginning to use tiered reimbursement rates.

Table E-1. Minimum Work Hours Per Week Required for CCDF Eligibility, 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
Alabama	15 ²				
Alaska	No minimum				
American Samoa	20	20	20	20	20
Arizona	No minimum				
Arkansas	30	30	30	30	30
California	No minimum				
Colorado	No minimum				
Connecticut	No minimum				
DC	20	20	20	20	20
Delaware	No minimum				
Florida	20 ³				
Georgia	24 ⁴				
Guam	No minimum				
Hawaii	No minimum				
Idaho	No minimum				
Illinois	No minimum				
Indiana	No minimum				
Iowa	28 ⁵				
Kansas	28 ⁶	28 ⁶	28 ⁶	20 ⁷	20 ⁷
Kentucky	20	20 ⁸	20 ⁸	20 ⁸	20 ⁸
Louisiana	30 ⁹	30 ⁹	20 ¹⁰	20 ¹⁰	20 ¹⁰
Maine	No minimum ¹¹				
Maryland	No minimum				
Massachusetts	20	20	20	20	20
Michigan	No minimum				
Minnesota	20	20	20	20	20
Mississippi	25	25	25	25	25
Missouri	No minimum				
Montana	Other ¹²				
Nebraska	No minimum				
Nevada	No minimum				
New Hampshire	No minimum				
New Jersey	30 ¹³				
New Mexico	No minimum				
New York	20 ¹⁴	20 ¹⁴	20 ¹⁴	20	20
No. Mariana Islands	30	30	30	30	30
North Carolina	No minimum ¹⁵				

Table E-1. Minimum Work Hours Per Week Required for CCDF Eligibility, 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
North Dakota	No minimum				
Ohio	No minimum ¹⁶				
Oklahoma	No minimum ¹⁷				
Oregon	No minimum				
Pennsylvania	20 ¹⁸				
Puerto Rico	20 ¹⁹				
Rhode Island	20 ²⁰				
South Carolina	15 ²¹				
South Dakota	20 ²²				
Tennessee	30	30	30	30	30
Texas	25 ²³				
Utah	15	15	15	15	15
Vermont	No minimum				
Virgin Islands	30 ²⁴				
Virginia	No minimum				
Washington	No minimum ²⁵				
West Virginia	20	20	20	20	20
Wisconsin	No minimum				
Wyoming	No minimum				

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ This table captures whether there is an explicit policy for the minimum number of work hours required. This table does not capture work requirement differences for students or different eligibility groups, such as TANF recipients. The minimum work hour requirement for qualifying for any amount of child care assistance is captured here. This table is not intended to capture the states' definitions of full-time and part-time care.

² Each parent must participate in one or more approved activities for a minimum average of 15 hours per week. Approved activities include employment, education, and training.

³ If individuals are employed and also in school or an approved training program, they can work less than 20 hours, as long as their combined participation in approved activities is at least 20 hours per week.

⁴ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. New applicants must still meet the 24-hour requirement.

⁵ TANF recipients do not need to meet the minimum work hours requirement. For participants who are working and in school or in a training program, a minimum of 28 hours of school and work combined confers eligibility.

⁶ TANF recipients do not need to meet the minimum work hours requirement. TANF recipients who gain employment and therefore lose their cash assistance are given a two-month grace period during which they remain eligible for child care subsidies but do not have to meet the 28-hour-per-week minimum.

⁷ TANF recipients do not need to meet the minimum work hours requirement. TANF recipients who gain employment, and therefore lose their cash assistance, are not required to meet the work hours requirement for the rest of their 12-month eligibility period. If a new application is made within two months of losing TANF eligibility, the family is also exempt from meeting the minimum work hours requirement.

⁸ A single parent must work an average of 20 hours per week.

- ⁹ There is no work requirement for families in Child Protective Services. Foster parents must work or be enrolled in an educational program a minimum of 25 hours per week.
- ¹⁰ The employment and training requirements for families of children with special needs may be reduced to 15 hours per week.
- ¹¹ Applicants who are self-employed must participate in a self-employment activity a minimum average of 20 hours per week.
- ¹² The work requirement is monthly. Two-parent households must work 120 hours per month. Single parents must work 60 hours per month. Single parents attending school part time are required to work 40 hours per month. The recipient must earn at least the current applicable minimum wage to be eligible for assistance.
- ¹³ A parent or applicant is considered to be working full time if work and education or training activities combine to equal 30 hours per week.
- ¹⁴ Policy coded for New York City.
- ¹⁵ In general, there is no minimum number of hours a recipient must work to receive a subsidy. In order to receive full-time care though, a recipient must work an average of 30 hours or more per week. Part-time care is approved for any number of hours less than full time.
- ¹⁶ Both parents must be engaged in an activity and have a need for care.
- ¹⁷ Foster families must work a minimum of 20 hours per week.
- ¹⁸ Ten hours of training may be substituted for 10 hours of the 20-hour work requirement.
- ¹⁹ Parents must participate in work or another eligible activity for a minimum of 20 hours per week.
- ²⁰ Income eligible parents must work an average of at least 20 hours per week in a month.
- ²¹ TANF applicants must meet the participation requirements outlined in their TANF family plan. A parent who receives SSI may be eligible for assistance if he or she is either employed at least part time or participating in an activity that will enable him or her to become employed.
- ²² Applicants must work a minimum of 80 hours per month. Applicants must also receive a salary equivalent to the federal minimum wage.
- ²³ Policy coded for Gulf Coast Region. If individuals are employed and also in school or an approved training program, they can work less than 25 hours, as long as their combined participation in approved activities is at least 25 hours per week.
- ²⁴ A parent or applicant is considered to be working full time if work and education or training activities combine to equal 30 hours per week.
- ²⁵ When a non-TANF client is receiving care for education or training, he or she must work a minimum of 20 hours a week or 16 hours in a federal or state work study program.

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2016-2020

State/Territory*	2016	2017	2018	2019	2020
Alabama	Yes, only for continuing eligibility				
Alaska	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
American Samoa	Yes, for initial and continuing eligibility				
Arizona	Yes, only for continuing eligibility				
Arkansas	Yes, for initial and continuing eligibility				
California	Yes, for initial and continuing eligibility				
Colorado	Yes, for initial and continuing eligibility ¹	Yes, for initial and continuing eligibility			
Connecticut	Yes, only for continuing eligibility				
DC	Yes, for initial and continuing eligibility ²	Yes, for initial and continuing eligibility ²	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Delaware	Yes, for initial and continuing eligibility				
Florida	Yes, only for continuing eligibility ³				
Georgia	Yes, only for continuing eligibility ⁴	Yes, only for continuing eligibility ⁵			
Guam	No	No	No ⁶	No ⁶	No ⁶
Hawaii	Yes, for initial and continuing eligibility				
Idaho	Yes, only for continuing eligibility				

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2016-2020

State/Territory*	2016	2017	2018	2019	2020
Illinois	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷
Indiana	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Iowa	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Kansas	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility⁹	Yes, only for continuing eligibility ⁹
Kentucky	Yes, for initial and continuing eligibility ¹⁰	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Louisiana	No	No	No	No	Yes, for initial and continuing eligibility
Maine	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹
Maryland	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸
Massachusetts	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Michigan	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹²
Minnesota	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Mississippi	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility¹³
Missouri	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, for initial and continuing eligibility¹⁴
Montana	Yes, only for continuing eligibility ¹⁵	Yes, only for continuing eligibility ¹⁵	Yes, only for continuing eligibility¹⁶	Yes, only for continuing eligibility ¹⁶	Yes, only for continuing eligibility ¹⁶
Nebraska	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2016-2020

State/Territory*	2016	2017	2018	2019	2020
Nevada	Yes, for initial and continuing eligibility ¹⁷				
New Hampshire	Yes, for initial and continuing eligibility				
New Jersey	No ⁸	Yes, only for continuing eligibility ¹⁸	Yes, only for continuing eligibility ¹⁸	Yes, only for continuing eligibility ¹⁸	Yes, only for continuing eligibility ¹⁸
New Mexico	Yes, only for continuing eligibility				
New York	Yes, for initial and continuing eligibility ¹⁹				
No. Mariana Islands	Yes, for initial and continuing eligibility				
North Carolina	Yes, for initial and continuing eligibility				
North Dakota	Yes, only for continuing eligibility ²⁰	Yes, only for continuing eligibility ²¹	Yes, only for continuing eligibility ²¹	Yes, only for continuing eligibility ²¹	Yes, only for continuing eligibility ²¹
Ohio	Yes, only for continuing eligibility ²²	Yes, only for continuing eligibility ²³	Yes, only for continuing eligibility ²³	Yes, only for continuing eligibility ²³	Yes, only for continuing eligibility ²³
Oklahoma	No ²⁴	No ²⁴	No ²⁴	No ²⁴	No ²⁵
Oregon	Yes, only for continuing eligibility				
Pennsylvania	Yes, only for continuing eligibility				
Puerto Rico	Yes, only for continuing eligibility				
Rhode Island	Yes, only for continuing eligibility ²⁶	Yes, only for continuing eligibility ²⁶	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility ²⁷
South Carolina	Yes, only for continuing eligibility				
South Dakota	Yes, only for continuing eligibility ²⁸				

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2016-2020

State/Territory*	2016	2017	2018	2019	2020
Tennessee	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, for initial and continuing eligibility ²⁹
Texas	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Utah	Yes, only for continuing eligibility ³⁰	Yes, only for continuing eligibility ³⁰	Yes, only for continuing eligibility ³¹	No ³²	No ³²
Vermont	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Virgin Islands	No	No	No	Yes, only for continuing eligibility ³³	Yes, only for continuing eligibility ³³
Virginia	No ³⁴	No ³⁴	No ³⁴	No ³⁴	No ³⁴
Washington	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸	Yes, only for continuing eligibility ⁸
West Virginia	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Wisconsin	No ³⁴	No ³⁴	Yes, only for continuing eligibility ³⁵	Yes, only for continuing eligibility ³⁵	Yes, only for continuing eligibility ³⁵
Wyoming	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ Policy coded for Denver. Counties may opt out of counting job search as an approved activity for eligibility at application.

² Job search is approved if parents lose employment through no fault of their own. Job search is not approved when parents resign or are dismissed for cause.

³ For TANF clients, job search is an eligible activity for initial and continuing eligibility.

⁴ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. Job search qualifies as an initial eligibility activity for clients who receive priority due to TANF, homelessness, or domestic violence. Clients with job search as an activity for continuing eligibility can count job search hours towards their hours requirement.

⁵ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. Job search qualifies as an initial eligibility activity for clients who receive priority due to TANF, homelessness, domestic violence, or natural disaster. Clients with job search as an activity for continuing eligibility can count job search hours towards their hour requirement. Families who experience a permanent loss of employment or cannot attend an education or training program due to matters related to COVID-19 can continue child care services at the current level through the end of their current eligibility period. The family does not have to report the permanent loss of activity.

⁶ Job search is an allowable activity for families experiencing homelessness.

- ⁷ For TANF clients participating in an approved agency program, job search is an eligible activity for initial and continuing eligibility if listed in their plan.
- ⁸ For TANF clients, job search is an eligible activity for initial and continuing eligibility.
- ⁹ For TANF and SNAP work program participants, job search is an eligible activity for initial and continuing eligibility.
- ¹⁰ The parent must have lost employment or training within 90 days of application through no fault of the recipient to initially qualify for job search activities.
- ¹¹ Job search activities may be approved for a maximum of 12 weeks for current recipients who have lost work or who have completed school and are looking for work. Coverage starts on the first day of unemployment, and parents are granted up to 20 hours of care per week. Families are eligible for care during one of three breaks in eligibility (maternal/paternal leave, short-term medical leave, or job search) within a six-month period.
- ¹² For TANF work program families, job search is an eligible activity for initial and continuing eligibility if it is part of their work participation requirement.
- ¹³ Job search is typically an eligible activity for three months from the last day of employment, provided the parent notified the agency of the loss of employment within 10 days. When disaster or emergency conditions have been declared, the agency may initiate an extended period of job search at which time new redetermination dates will be set. Families will have 60 days from the day that the declared emergency has ended to complete job search activities or enroll in an approved educational program.
- ¹⁴ For TANF clients, job search is an eligible activity for initial and continuing eligibility. In response to the COVID-19 pandemic, job search is also approved for initial eligibility for non-TANF families.
- ¹⁵ For TANF recipients, job search activities are only approved for applicants who have job search in their family investment agreement or employability plan.
- ¹⁶ For TANF recipients, job search activities are only approved for applicants who have job search in their employability or service plan.
- ¹⁷ Families are not eligible for job search if the eligible child is school age (between 6 and 12 years old) or has special needs (over 13 years old). If the child is not in school due to school breaks or holidays, child care is approved during job search activities.
- ¹⁸ For TANF clients, job search is an eligible activity for initial and continuing eligibility. Non-TANF families may continue to receive child care assistance if they experience a temporary absence from work, as long as this temporary change in circumstances does not last more than three months. If the cessation in work lasts more than three months, applicants can apply for job search child care assistance for an additional three months. Families that are not engaged in work, school, or a training activity when the three-month period ends are no longer eligible for the subsidy.
- ¹⁹ Policy coded for New York City. Job search activities are defined by each district.
- ²⁰ Job search is an approved activity for initial eligibility only for TANF and Transitional Child Care families who have job search listed on their employment plan.
- ²¹ Job search is an approved activity for initial eligibility for families experiencing homelessness and for TANF and Transitional Child Care families who have job search listed on their employment plan.
- ²² When an approved activity ends, child care can be continued for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period and only one extension is permitted per year.
- ²³ When an approved activity ends, child care can be continued for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ²⁴ Job search activities are approved if they are part of a TANF work assignment.
- ²⁵ Job search activities are approved if they are part of a TANF work assignment. Eligible families who lost their job due to COVID-19 may receive a temporary child care subsidy benefit for 60 days of job search.
- ²⁶ Income-eligible parents receiving a child care subsidy may be granted a grace period not to exceed 21 days when experiencing temporary unemployment or a transition between jobs.
- ²⁷ The job search period may be extended based on the needs of the family due to COVID-19.
- ²⁸ If a person is already receiving child care assistance and suffers a loss of employment, three months of continued assistance can be granted from the last day of employment.
- ²⁹ Families that no longer meet the minimum work hour requirement at redetermination because of a change due to the COVID-19 pandemic are given a 90-day job search period. If the family meets the minimum work hour requirement during the 90-day period, the family is approved for a full 12-month eligibility period. If the family is not able to meet the minimum work hour requirement during the job search period, their eligibility will end at the end of the 90 days.
- ³⁰ Single parent clients who lose eligibility for employment-related child care due to job loss can be approved to receive child care during a job search. In order to be eligible, clients must have been working at least 15 hours per week, report the job termination within 10 days of the last day worked or the date of termination (whichever is later), and formally request continued assistance during the job search period.

³¹ Employment Support and Job Search Child Care are available to families diverted from financial assistance if otherwise eligible.

³² Effective May 31, 2019, child care assistance for job search activities is no longer available. Households already utilizing the previous program will remain eligible through the end of their current certification period.

³³ A three-month job search period is triggered if the parent or legal guardian loses his or her employment during the eligibility period. If the parent or legal guardian engages in a qualifying activity by the end of the grace period, assistance continues until the end of the 12-month eligibility period.

³⁴ Job search activities are only approved if they are part of a TANF or SNAP work program.

³⁵ Eligible parents who experience a permanent loss of employment or a permanent loss of another approved activity will be offered an opportunity to receive at least the same level of child care assistance for job search for up to three months.

Table E-3. Initial Eligibility Thresholds and Thresholds During the Eligibility Period for Family Size Three: Maximum Monthly Countable Income, 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing
Alabama ²	2,184	3,942	2,212	4,066	2,251	4,188	2,311	4,368	2,353	3,077
Alaska	4,524	-	5,156	-	5,156	-	5,156	-	5,960	-
American Samoa	3,927	-	3,927	-	3,927	-	3,927	-	3,927	-
Arizona ³	2,772	4,004	2,809	4,088	2,858	4,269	2,934	4,486	2,987	4,718
Arkansas ⁴	2,578	-	2,578	-	3,650	-	3,650	-	4,130	-
California ⁵	3,518	-	4,340	5,270	4,502	5,467	5,802	-	6,157	-
Colorado ⁶	3,780	-	3,829	-	3,896	5,428	3,999	5,685	4,073	5,995
Connecticut	3,800	6,461	3,855	6,553	3,939	6,696	4,057	6,897	4,222	7,179
DC ⁷	3,815	4,258	4,254	4,765	4,329	5,896	4,444	6,258	4,444	6,258
Delaware	3,360	-	3,404	-	3,204	-	3,289	5,647	3,349	5,095
Florida	2,520	3,913	2,553	4,025	2,598	4,063	2,666	4,171	2,715	4,384
Georgia ⁸	2,455	4,173	2,455	4,173	2,562	4,356	2,562	4,356	2,807	4,772
Guam	2,283	-	2,283	-	2,283	-	2,812	-	2,812	-
Hawaii	3,927	-	3,927	-	3,927	-	3,927	-	3,927	-
Idaho ⁹	2,184	3,822	2,213	3,822	2,252	3,946	2,311	4,184	2,353	4,446
Illinois ¹⁰	2,722	3,108	3,149	-	3,204	5,138	3,555	5,320	3,620	5,546
Indiana	2,134	4,302	2,161	4,368	2,161	4,419	2,257	4,526	2,299	4,737
Iowa ¹¹	2,436	4,718	2,468	4,778	2,511	4,835	2,578	4,989	2,625	4,073
Kansas ¹²	3,108	4,505	3,149	4,627	3,204	4,698	3,289	4,812	3,349	4,979
Kentucky	2,688	2,772	2,723	4,808	2,723	4,808	2,771	4,808	2,771	4,808
Louisiana ¹³	2,656	3,983	2,684	4,148	2,684	4,148	2,884	4,457	2,978	4,603
Maine	4,549	-	4,686	-	4,715	-	4,833	-	5,365	-
Maryland	2,499	-	2,499	6,547	5,007	6,547	5,007	6,547	5,007	6,547
Massachusetts ¹⁴	3,814	6,484	3,814	6,484	3,984	6,772	4,191	7,125	4,387	7,457

Table E-3. Initial Eligibility Thresholds and Thresholds During the Eligibility Period for Family Size Three: Maximum Monthly Countable Income, 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing
Michigan	1,990	4,069	2,213	4,705	2,213	4,705	2,213	4,705	2,715	5,336
Minnesota	3,030	4,320	3,105	4,427	3,163	5,721	3,288	5,946	3,423	6,190
Mississippi ¹⁵	2,917	-	2,917	-	3,640	-	3,640	-	3,833	-
Missouri	2,318	3,612	2,318	3,612	2,318	3,612	2,454	3,823	2,498	3,892
Montana ¹⁶	2,520	3,108	2,520	3,108	2,598	3,204	2,666	3,288	2,666	3,288
Nebraska ¹⁷	2,184	3,108	2,212	3,148	2,251	3,204	2,311	5,122	2,353	5,371
Nevada	4,104	-	4,127	-	2,366	4,260	2,471	4,544	2,531	4,685
New Hampshire	4,200	-	3,744	4,255	3,810	6,091	3,911	6,286	3,982	6,518
New Jersey ¹⁸	3,360	4,200	3,403	6,551	3,463	6,634	3,555	7,166	3,620	7,420
New Mexico	2,520	3,360	2,553	3,403	2,598	3,463	3,555	4,444	3,620	4,525
New York	3,360	-	3,403	-	3,463	-	3,555	-	3,620	-
No. Mariana Islands	2,192	-	2,192	-	2,192	-	2,192	-	2,325	-
North Carolina ¹⁹	3,348	-	3,403	4,165	3,403	4,165	3,555	4,565	3,555	4,565
North Dakota	3,727	-	3,811	-	3,881	5,498	4,085	5,787	4,233	5,997
Ohio	2,184	5,040	2,213	5,105	2,252	5,195	2,311	5,333	2,353	5,430
Oklahoma ²⁰	2,925	-	2,925	3,976	2,925	4,059	4,200	-	4,372	-
Oregon	3,108	4,200	3,149	4,315	3,204	4,405	3,288	4,847	4,956	-
Pennsylvania	3,360	3,948	3,403	3,999	3,463	4,069	3,555	5,271	3,620	4,254
Puerto Rico ²¹	1,423	-	1,423	-	1,423	-	1,511	-	1,511	-
Rhode Island	3,024	3,780	3,063	3,829	3,117	3,896	3,200	3,999	3,258	4,073
South Carolina	2,520	3,959	2,594	4,008	2,704	4,179	2,826	4,367	2,965	4,582
South Dakota ²²	2,940	-	2,978	4,801	3,031	4,801	3,716	4,947	3,783	5,144
Tennessee ²³	2,815	-	2,848	-	2,926	-	2,926	-	3,078	-
Texas ²⁴	3,360	4,243	3,403	4,315	3,463	4,456	3,555	4,663	3,620	4,884
Utah ²⁵	2,773	3,466	2,854	4,332	2,918	4,429	3,236	4,585	4,585	-

Table E-3. Initial Eligibility Thresholds and Thresholds During the Eligibility Period for Family Size Three: Maximum Monthly Countable Income, 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Initial	Higher Continuing								
Vermont	5,040	-	5,105	5,223	5,195	-	5,333	-	5,430	-
Virgin Islands	2,752	-	2,752	-	2,752	-	2,506	-	2,506	-
Virginia ²⁶	3,108	-	3,149	-	3,204	5,760	3,289	5,978	3,349	6,226
Washington ²⁷	3,348	5,058	3,404	5,161	3,464	5,239	3,556	5,460	3,620	5,760
West Virginia	2,474	3,051	2,553	3,148	2,598	3,204	2,666	3,288	2,666	3,288
Wisconsin ²⁸	3,108	3,360	3,148	3,403	3,204	5,073	3,288	5,241	3,349	5,468
Wyoming	2,940	3,780	2,978	3,829	3,030	3,896	3,111	3,999	3,168	4,073

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ Family size refers to the number of household members included in the unit for determining eligibility. States determine which household members are included in the unit. This table captures the continuing eligibility thresholds used during the family's eligibility period. Information about continuing eligibility thresholds used at the end of the eligibility period (i.e., at redetermination), can be found in the footnotes and full detail of the CCDF Policies Database. This table does not capture eligibility threshold differences between various eligibility groups, such as TANF recipients.

² In 2019, eligibility thresholds at redetermination are set at 85 percent of the state median income. At redetermination, if a family's income is above 85 percent of the state median income, they can receive three months of services at the maximum copay as a graduated phase out.

³ In 2016, 2017, and 2018 at redetermination, if the family's income exceeds 165 percent of the Federal Poverty Guidelines, but is below 85 percent of the state median income, the family will receive a graduated phase-out period of three months.

⁴ In 2020, the income threshold is waived for families with essential workers due to the COVID-19 pandemic.

⁵ In 2016, 2017, and 2018, California allows pilot counties to set the initial maximum monthly countable income threshold at 85 percent of the state median income. In 2017 and 2018, income eligibility after initial determination is 85 percent of the state median income. In 2019 and 2020, income eligibility thresholds are based on 85 percent of the state median income.

⁶ Policy coded for Denver County. In 2016, 2017, and 2018, counties could establish initial eligibility thresholds between 165 percent of the Federal Poverty Guidelines and 85 percent of state median income and continuing eligibility thresholds between 130 percent of the Federal Poverty Guidelines and 85 percent of state median income. In 2019 and 2020, counties could not set initial eligibility thresholds below 185 percent of the Federal Poverty Guidelines and the continuing eligibility threshold is set at 85 percent of state median income.

⁷ In 2016 and 2017, at redetermination, if the family's income exceeds 300 percent of the Federal Poverty Guidelines or 85 percent of the state median income, the family will receive a graduated phase-out period of three months. In 2018, 2019, and 2020, at redetermination, if the family's income exceeds 85 percent of the state median income, the family will receive a graduated phase-out period of three months. If the family's income is less than 85 percent of the state median income at the end of the three months, they will continue to receive assistance.

⁸ In 2016 and 2017, if a family's gross income exceeds 50 percent of state median income and is below 85 percent of state median income, they may receive services for up to 12 months as part of a graduated phase out.

⁹ In 2016 and 2017, if at the time of redetermination, a family's income exceeds 130 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will continue to receive benefits for three months. In 2018 and 2019, if at the time of redetermination, a family's income exceeds 150 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will continue to receive benefits for 12 months.

¹⁰ In 2016, new applications exceeding the initial eligibility thresholds by family size will not be approved unless that family receives TANF, has a child with special needs, or is a teen parent enrolled in high school or GED courses full time. A family that submits a change of information or a redetermination form will be considered income eligible based on the continuing eligibility thresholds by family size. In 2018, eligibility thresholds at redetermination are set at 200 percent of the Federal Poverty Guidelines. Families with incomes above 200 percent of the Federal Poverty Guidelines and below 85 percent of the state median income will receive graduated phase-out period of three months. In 2019 and 2020, eligibility thresholds at redetermination are set at 225 percent of the Federal Poverty Guidelines. Families with incomes above 225 percent of the Federal Poverty Guidelines and below 85 percent of the state median income will receive a graduated phase-out period of three months.

¹¹ Families requiring care for children with special needs use a different set of eligibility thresholds. If a family has children that meet the criteria for special needs and children that do not meet the criteria for special needs, the caseworker uses both sets of thresholds to determine eligibility. In 2017, 2018, and 2019, if at the time of redetermination, a family's income exceeds the initial eligibility limit but is below 85 percent of state median income, the family will remain eligible for an additional 12 months or until their income exceeds 85 percent of state median income.

¹² In 2016 and 2017, at redetermination, families may be eligible for three additional months of child care assistance if their income exceeds 185 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income. In 2020, the state will provide child care assistance to essential workers earning less than 250 percent of the Federal Poverty Guidelines for six months through the Hero Relief Program.

¹³ In 2018, 2019, and 2020, at redetermination, if the family's income exceeds 55 percent of the state median income, but is below 85 percent of the state median income, the family will receive a graduated phase-out period of 12 months.

¹⁴ Families requiring care for children with special needs use a different set of eligibility thresholds.

¹⁵ In 2020, the state uses 85 percent of the state median income to approximate a slightly higher eligibility threshold.

¹⁶ In 2016 and 2017, families with income between 150 and 185 percent of the Federal Poverty Guidelines are eligible for a six-month eligibility period. In 2018, 2019, and 2020, families with income between 150 and 185 percent of the Federal Poverty Guidelines are eligible for a 12-month eligibility period.

¹⁷ In 2016, 2017, and 2018, a family whose income exceeds 130 percent of the Federal Poverty Guidelines may receive subsidies for up to 24 consecutive months or until the family's income exceeds 185 percent of the Federal Poverty Guidelines, whichever occurs first. If the family's income falls to or below 130 percent of the Federal Poverty Guidelines during that time, the child care agency will re-determine the family's eligibility and eligibility is no longer time-limited. In 2019 and 2020, once a family is determined eligible and child care is authorized, they will remain eligible for care through the remainder of the eligibility period as long as their income is below 85 percent of state median income. At redetermination, if the family's income does not exceed 185 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

¹⁸ In 2017, 2018, 2019, and 2020, families with income exceeding 250 percent of the Federal Poverty Guidelines but less than 85 percent of state median income at redetermination can qualify for one additional year of graduated phase-out assistance. This period of assistance can only be granted once.

¹⁹ The eligibility thresholds shown are for non-school-age children (children through age five) and children of all ages with special needs and are set at 200 percent of the Federal Poverty Guidelines. For school-age children (children ages six through twelve), eligibility is set at 133 percent of the Federal Poverty Guidelines. In 2017 and 2018, if a family's income increases above the initial eligibility threshold but below 85 percent of the state median income, the family will be given a graduated phase-out period of 90 days. In 2019 and 2020, if a family's income increases above the initial eligibility threshold but below 85 percent of the state median income, the family will be given a graduated phase-out period of 12 months.

²⁰ In 2016, 2017, and 2018, eligibility thresholds vary based on both family size and the number of children in care. These thresholds assume a family size three has two children in care. The initial threshold for any family size with one child in care is \$2,425 per month. The initial threshold for any family size with two children in care is \$2,925 per month. The initial threshold for any family size with three or more children in care is \$3,625 per month.

²¹ At redetermination, families may be eligible for three additional months if their income exceeds 85 percent of the state median income.

²² In 2017, if at redetermination, the family's income exceeds 175 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will receive a graduated phase-out period of two months.

²³ Income thresholds are set at 60 percent of state median income. However, applicants who are working or in post-secondary education and have children who are six weeks through five years of age may qualify for the state's Smart Steps Child Care program with income up to 85 percent of state median income.

²⁴ Policies coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

²⁵ In 2016, 2017, 2018, and 2019, the thresholds used at initial eligibility are higher for children with special needs.

²⁶ Policies coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines. There is an exception for applicants that are considered not financially responsible for the child in need of care under Virginia law. For these individuals, eligibility is set at 250 percent of the Federal Poverty Guidelines, not to exceed 85 percent of state median income.

²⁷ If a family's income is greater than 200 percent but below 220 percent of the Federal Poverty Guidelines, in 2016 and 2017, they may be eligible for three months of service, and in 2018, 2019, and 2020, the family will receive a graduated phase-out period of 12 months.

²⁸ Family income cannot exceed 185 percent of the Federal Poverty Guidelines, unless the family is providing foster care, subsidized guardianship, or court-ordered kinship care while receiving the kinship benefit, in which case the natural or adoptive family's gross family income cannot exceed 200 percent of the Federal Poverty Guidelines at the time of the child's placement. In 2016 and 2017, the maximum gross income for a family to remain eligible for child care assistance is 200 percent of the Federal Poverty Guidelines. For non-court-ordered kinship care, if a family's income exceeds 200 percent of the Federal Poverty Guidelines for two consecutive months, the subsidy will be discontinued. In 2018, 2019, and 2020, the maximum gross income for a family to remain eligible for child care assistance is 85 percent of state median income.

Table E-4. Within How Many Days the Family Must Notify the Agency of Changes, 2016-2020

State/Territory*	2016	2017	2018	2019	2020
Alabama	10	10	10	10	10
Alaska	10	10	10	10	10
American Samoa	10	10	10	10	10
Arizona	5	5	5	5	5
Arkansas	10	10	10	10	10
California	5 ¹	30	30	30	30
Colorado	Other ²	Other ²	Other ²	Other ²	Other ²
Connecticut	10	10	10	10	10
DC	10	10	10	10	10
Delaware	10	10	10	10	10
Florida	10	10	10	10	10
Georgia	10	10	10	10	10
Guam	10	10	10	10	10
Hawaii	10	10	10	10	10
Idaho	Other ³	Other ³	Other ³	Other ³	Other ³
Illinois	10	10⁴	10 ⁴	10 ⁴	10 ⁴
Indiana	10	10	10	10	10
Iowa	10	10	10	10	10
Kansas	10	10	10	10	10
Kentucky	10	10	10	10	10
Louisiana	10	10	10	10	10
Maine	10	10	10	10	10
Maryland	10	10	10	10	10
Massachusetts	14	14	14	30	30
Michigan	10	10	10	10	10
Minnesota	10	10	10	10	10
Mississippi	10	10	10	10	10
Missouri	10	10	10	10	10
Montana	10 ⁵	10 ⁵	10 ⁵	10 ⁵	10 ⁵
Nebraska	10	10	10	10	10
Nevada	10	10	10	10	10
New Hampshire	10	10	10	10	10
New Jersey	10	10	10	10	10
New Mexico	5	5	5	5	5
New York	Other ⁶	Other ⁶	Other ⁶	Other ⁶	Other ⁶
No. Mariana Islands	10	10	10	10	10

Table E-4. Within How Many Days the Family Must Notify the Agency of Changes, 2016-2020

State/Territory*	2016	2017	2018	2019	2020
North Carolina	5	5	5	10 ⁷	10 ⁷
North Dakota	10	10	10	10	10
Ohio	10	10	10	10	10
Oklahoma	10	10	10	10	10
Oregon	10	10	10	10	10
Pennsylvania	10	10	10	10	10
Puerto Rico	10	10	10	10	10
Rhode Island	10	10	10	10	10
South Carolina	10	10	10	10	10
South Dakota	10	10	10	10	10
Tennessee	10	10	10	10 ⁸	10 ⁸
Texas	14	14	14	14	14
Utah	10 ⁹				
Vermont	10	10	10	10	10
Virgin Islands	10 ¹⁰				
Virginia	10	10	10	10	10
Washington	10 ¹¹				
West Virginia	5	5	5	5	5
Wisconsin	10	10	10	10	10
Wyoming	10	10	10	10	10

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ Families must report changes in income, family size, and need within five days, unless they receive care based on child protective services; risk of abuse, neglect, or exploitation; homelessness; or receipt of cash assistance.

² Participants must report and verify changes in income that exceed 85 percent of the state median income within 10 calendar days of the change. If the parent or caretaker is no longer in his or her qualifying activity, the change must be reported in writing within four calendar weeks.

³ Parents must report changes by the 10th day of the month following the month in which the change occurred.

⁴ Clients must report changes that may affect eligibility within 10 days of the change. Clients must report a job loss or a break in activity within 30 days to maintain eligibility through grace period provisions.

⁵ Parents must report a change in provider within one business day.

⁶ The client must report changes immediately.

⁷ Recipients must report changes to the state within 10 business days from the date of the change.

⁸ At risk child-only, Transitional Child Care, and Smart Steps families are not required to report changes during the eligibility period. All other families have to report changes within 10 days.

⁹ These reporting requirements do not apply to TANF families. TANF families are only required to report changes in providers when care is being provided at no cost; changes to participation in activities that would result in the family no longer needing child care; and changes to parents' or children's schedules that result in the family no longer needing child care.

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

¹¹ A change in providers must be reported within five days.

Table E-5. Redetermination Period (in months), 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
Alabama	12 ²	12 ²	12 ²	12 ²	12 ³
Alaska	6	12	12	12	12
American Samoa	6	6	6	6	6
Arizona	12	12	12	12	12
Arkansas	12	12	12	12	12 ⁴
California	12 ⁵	12	12	12	12
Colorado	12 ⁶	12 ⁶	12 ⁶	12 ⁶	12 ⁶
Connecticut	12	12	12	12	12
DC	12	12	12	12	12 ⁷
Delaware	12 ⁸	12 ⁸	12 ⁸	12 ⁹	12
Florida	12 ¹⁰	12 ¹⁰	12 ¹⁰	12 ¹⁰	12 ¹⁰
Georgia	12	12	12	12	12 ¹¹
Guam	12	12	12	12	12 ¹²
Hawaii	6	6	6	6	6
Idaho	12	12	12	12	12
Illinois	6 ¹³	6 ¹³	12	12	12
Indiana	12 ¹⁴	12 ¹⁴	12 ¹⁴	12 ¹⁴	12 ¹⁴
Iowa	12 ¹⁵	12 ¹⁶	12 ¹⁶	12 ¹⁶	12 ¹⁶
Kansas	12	12	12	12	12
Kentucky	12	12	12	12	12
Louisiana	12	12	12 ¹⁷	12 ¹⁷	12 ¹⁷
Maine	12 ¹⁸	12 ¹⁸	12 ¹⁸	12 ¹⁸	12 ¹⁸
Maryland	12	12	12	12	12
Massachusetts	12 ¹⁹	12 ¹⁹	12	12	12 ²⁰
Michigan	12	12	12	12	12
Minnesota	6 ²¹	6 ²¹	12 ²²	12 ²²	12 ²²
Mississippi	12	12	12	12	12 ²³
Missouri	12	12	12	12	12
Montana	12	12	12	12	12
Nebraska	12	18 ²⁴	18 ²⁴	18 ²⁴	18 ²⁴
Nevada	12	12	12	12	12 ²⁵
New Hampshire	12	12	12	12	12
New Jersey	12	12	12	12	12
New Mexico	12	12	12	12	12
New York	12	12	12	12	12 ²⁶
No. Mariana Islands	12	12	12	12	12
North Carolina	12	12	12	12	12 ²⁷

Table E-5. Redetermination Period (in months), 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
North Dakota	12	12	12	12	12
Ohio	12 ²⁸	12 ²⁸	12 ²⁸	12 ²⁸	12 ²⁸
Oklahoma	12	12	12	12	12
Oregon	12	12	12	12	12
Pennsylvania	12	12	12	12	12
Puerto Rico	12	12	12	12	12
Rhode Island	12 ²⁹	12 ³⁰	12 ³⁰	12 ³⁰	12 ³¹
South Carolina	12	12	12	12	12
South Dakota	12	12	12	12	12
Tennessee	12	12	12	12	12 ³²
Texas	12	12	12	12	12 ³³
Utah	12	12	12	12	12
Vermont	12	12	12	12	12
Virgin Islands	12	12	12	12	12
Virginia	12	12	12	12	12
Washington	12	12	12	12	12
West Virginia	6	6	12	12	12
Wisconsin	12	12	12	12 ³⁴	12 ³⁴
Wyoming	12	12	12	12	12

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ The redetermination period is how often the family's eligibility must be reviewed in order to continue receiving care.

² The redetermination period may be shorter than 12 months if the parent's authorized activity will last fewer than 12 months or if the parent fails to comply with program requirements.

³ The redetermination period may be shorter than 12 months if the parent's authorized activity will last fewer than 12 months or if the parent fails to comply with program requirements. Families with healthcare workers and first responders who qualify for child care assistance as a protective services group during the COVID-19 pandemic may have a redetermination period shorter than 12 months.

⁴ Redeterminations are suspended due to the COVID-19 pandemic.

⁵ If employment hours are unpredictable, redetermination must take place at least every four months. If a child is receiving care due to risk of abuse, neglect, or exploitation, eligibility is limited to six months, at which point the family must be redetermined eligible under different need criteria.

⁶ If children receiving care are also enrolled in a Head Start or Early Head Start program, their redetermination period will be aligned with the Head Start or Early Head Start program year. This may result in a redetermination period that is longer than 12 months, though the redetermination period cannot be shorter than 12 months.

⁷ Families whose 12-month eligibility expires during the public health emergency will remain eligible for subsidized child care until the District government resumes in-person operations. Families will receive a notice in the mail with a request to come in and recertify after the public health emergency is lifted.

⁸ Parents must complete an interim form every six months.

⁹ Parents must complete an interim form every six months. Redetermination may be set for a shorter period if the client provides a written statement verifying the length of time requested for care. The statement may be from the parent or caretaker, a medical

professional verifying care required for a special need, or the state verifying the length of time required to prevent child abuse or neglect.

¹⁰ Redetermination for families in TANF must be completed every six months.

¹¹ If the parent is not meeting state-approved activity requirements at their annual redetermination as a result of circumstances related to COVID-19, the lack of an activity will not impact eligibility.

¹² Eligibility periods can be extended for up to 6 months beyond the typical 12-month eligibility period during the COVID-19 public health emergency.

¹³ Families must be redetermined every six months except when parents are enrolled in an education or training program that lasts less than six months or the family has a service plan that indicates the activity lasts less than six months. Families must be redetermined every 12 months when the children are in a collaborative child care arrangement between child care and early education providers. If the participant has not worked two full pay periods at the time of application or redetermination, redetermination is required in three months.

¹⁴ Redetermination is required at least every 53 weeks. At redetermination, if a family's income exceeds the eligibility threshold due to a temporary fluctuation in income that is expected to last for 8 weeks or less, the family will be allowed an additional 13 weeks to update their income.

¹⁵ Families are certified for a period of 12 months, except when the applicant meets one of three criteria at the time of application. If the applicant is conducting a job search, then the family is certified for a period of 30 days. If the child who will be receiving care will turn 13 within 6 months after the end of a 12-month certification period, then the family is certified for a period of up to 18 months. For families attending post-secondary education, if the 24-month funding limit will be reached within 6 months after the end of a 12-month period, then the family is certified for a period of up to 18 months.

¹⁶ Families are certified for a period of 12 months, except when the applicant meets one of two criteria at the time of application. If the child who will be receiving care will turn 13 within 6 months after the end of a 12-month certification period, then the family is certified for a period of up to 18 months. For families attending post-secondary education, if the 24-month funding limit will be reached within 6 months after the end of a 12-month period, then the family is certified for a period of up to 18 months.

¹⁷ Households with children between the ages of 3 and 4 are certified for 24 months.

¹⁸ Full redetermination is done at 12 months. At six months, the family must indicate that the information on file is still correct. Families with cases eligible for redetermination are extended by 90 days to allow additional time to provide documentation.

¹⁹ Families are reassessed for eligibility every 12 months, unless the activity is scheduled to last fewer than 12 months (end of the semester for school activities), the activity is only authorized for 12 weeks (job search, maternal leave), or if the parent is newly employed (reassessed after eight weeks and then every 12 months). Families authorized by the TANF or child welfare agencies may be authorized for less than 12 months, depending on their needs. Families can request extensions for redetermination due to extraordinary circumstances such as the death or illness of a family member, a natural disaster, etc.

²⁰ Families due for redetermination will have their eligibility automatically extended for six months due to COVID-19.

²¹ Redetermination of eligibility for some high school students under the age of 21 is deferred beyond 6 months, not to exceed 12 months, to the end of the student's school year.

²² Redetermination of eligibility for some high school students under the age of 21 may be deferred beyond 12 months, not to exceed 24 months, to the end of the student's school year.

²³ When disaster or emergency conditions have been declared, the agency may waive the redetermination requirement during the declared emergency and issue a temporary certificate for 90 days. The agency may renew the temporary certificate for additional 30-day periods on a case-by-case basis.

²⁴ Redetermination must be conducted at least once every 18 months, but not more than once every 12 months.

²⁵ Families with cases ending in March, April, May, or June 2020 are given an additional eligibility period without need for documentation.

²⁶ Policy coded for New York City. Districts may allow families who are not receiving public assistance, and who would otherwise need to have their eligibility for child care assistance redetermined within the period of the disaster recovery, an additional 30 days to complete such redetermination. Districts must continue to provide child care services to such families during the extended redetermination period. If additional waiver periods are approved, cases may be extended for additional 30-day increments beyond the initial 30 days. Cases may only be extended for a maximum total of 90 days regardless of how many waiver periods are approved.

²⁷ The eligibility period is extended for 12 months for families with cases ending in March, April, May, or June 2020.

²⁸ The eligibility period extends to the Saturday after the last day of the 12th month of eligibility.

²⁹ Certification periods cannot exceed 12 months. Income eligible families are subject to redetermination every 6 to 12 months depending on employment circumstances. For those with a 12-month certification period, a 6-month interim report is required.

³⁰ The eligibility period cannot be less than 12 months. Benefits must be redetermined through the recertification process prior to the end of the 12-month period.

³¹ The eligibility period cannot be less than 12 months. Benefits must be redetermined through the recertification process prior to the end of the 12-month period. The eligibility period may be extended due to COVID-19.

³² Eligibility periods are extended due to the COVID-19 pandemic.

³³ The eligibility period may be extended due to the COVID-19 pandemic.

³⁴ The recipient may complete an early renewal after the start of the 11th month and prior to the end of the 12-month eligibility period if he or she has stated his or her consent to complete an early renewal in order to align the child care subsidy eligibility period with the eligibility period of another income assistance program.

Table E-6. If the State Uses a Waiting List When Needed, 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
Alabama	Yes	Yes	Yes	Yes	Yes
Alaska	Yes ²	Yes ²	Yes ²	Yes ²	Yes ²
American Samoa	Yes	Yes	Yes	Yes	Yes
Arizona	Yes	Yes	Yes	Yes	Yes
Arkansas	Yes	Yes	Yes	Yes	Yes
California	Yes ³	Yes ³	Yes ³	Yes ³	Yes ³
Colorado	Yes ⁴	Yes ⁴	Yes ⁴	Yes ⁵	Yes ⁵
Connecticut	Yes	Yes	Yes	Yes	Yes
DC	Yes	Yes	Yes	Yes	Yes
Delaware	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁶
Florida	Yes	Yes	Yes	Yes	Yes
Georgia	No	No	No	No	No
Guam	Yes	Yes	Yes	Yes	Yes
Hawaii	No	No	No	No	No
Idaho	No	No	No	No	No
Illinois	No	No	No	No	No
Indiana	Yes	Yes	Yes	Yes	Yes
Iowa	Yes	Yes	Yes	Yes	Yes
Kansas	Yes	Yes	Yes	Yes	Yes
Kentucky	No	No	No	No	No
Louisiana	Yes	Yes	Yes	Yes	Yes
Maine	Yes	Yes	Yes	Yes	Yes
Maryland	Yes	Yes	Yes	Yes	Yes
Massachusetts	Yes	Yes	Yes	Yes	Yes
Michigan	No	No	No	No	No
Minnesota	Yes	Yes	Yes	Yes	Yes
Mississippi	Yes	Yes	Yes	Yes	Yes
Missouri	Yes	Yes	Yes	Yes	Yes
Montana	Yes	Yes	Yes	Yes	Yes
Nebraska	No	No	No	No	No
Nevada	Yes	Yes	Yes	Yes	Yes
New Hampshire	Yes	Yes	Yes	Yes	Yes
New Jersey	Yes	Yes	Yes	Yes	Yes
New Mexico	Yes	Yes	Yes	No	No
New York	Yes ⁷	Yes ⁷	Yes ⁷	Yes ⁷	Yes ⁷
No. Mariana Islands	No	Yes	Yes	Yes	Yes
North Carolina	Yes	Yes	Yes	Yes	Yes

Table E-6. If the State Uses a Waiting List When Needed, 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
North Dakota	No	No	No	No	No
Ohio	No	No	No	No	No
Oklahoma	No	No	No	No	No
Oregon	Yes	Yes	Yes	Yes	Yes
Pennsylvania	Yes	Yes	Yes	Yes	Yes
Puerto Rico	Yes	Yes	Yes	Yes	Yes
Rhode Island	No	No	No	No	No
South Carolina	No	No	No	No	No
South Dakota	Yes	Yes	Yes	Yes	Yes
Tennessee	No	No	No	No	No
Texas	Yes	Yes	Yes	Yes	Yes
Utah	No	No	No	No	No
Vermont	No	No	No	No	No
Virgin Islands	Yes	Yes	Yes	Yes	Yes
Virginia	Yes	Yes	Yes	Yes	Yes
Washington	Yes	Yes	Yes	Yes	Yes
West Virginia	No	No	No	No	No
Wisconsin	No	No	No	No	No
Wyoming	No	No	No	No	No

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ Written policies concerning the maintenance and review of a waiting list are captured. The policies reflect whether or not states use a waiting list when funds are not available to serve all families. A state may appear on this list as having waiting list policies, even if no family is currently on the waiting list. Exemptions to the waiting list requirements are not shown in this table.

² If available funding is not sufficient to provide full program benefits for participating families, or to add new families, one or more of the following actions may be taken: terminate program benefits for participating families; limit the eligible activities required for program benefits; establish a wait list; reduce program benefits for all participating families by a percentage based on any shortfall in available funding; establish an alternative plan for the necessary or required actions.

³ Policy coded for Non-CalWORKs Alternative Payment Program. Child care agencies are required to maintain a waiting list. This requirement may be satisfied by participating in a county child care centralized eligibility list, where available.

⁴ Counties have the option to maintain a waiting list. If the county chooses to maintain a waiting list, it must develop waiting list policies and report those policies to the state agency.

⁵ Counties have the option to maintain a waiting list. If the county chooses to maintain a waiting list, it must develop waiting list policies and report those policies to the state agency. Counties also have the option to freeze enrollment.

⁶ Families are placed on a waiting list either because funds are not available or because the agency cannot match the child's need with an available provider at that time.

⁷ Districts may maintain waiting lists when funds are not available for all eligible families.

Table E-7. Copayment Amount for a Three-Person Family Earning \$15,000 Annually, with a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016	2017	2018	2019	2020
Alabama	91	91	0	0	0
Alaska ²	24	24	24	24	0
American Samoa ³	0	0	0	0	0
Arizona	43	43	43	43	43
Arkansas ⁴	0	0	0	0	0
California ⁵	0	0	0	0	64
Colorado ⁶	13	13	13	12	12
Connecticut	25	25	25	25	25
DC	48	0	0	0	0
Delaware ⁷	115	115	115	50	0
Florida ⁸	52	52	52	36	0
Georgia ⁹	138	138	62	62	62
Guam ¹⁰	0	0	0	0	0
Hawaii ¹¹	414	446	446	446	0
Idaho	80	80	80	80	80
Illinois	35	35	36	36	23
Indiana ¹²	0	0	0	0	0
Iowa ¹³	0	0	0	0	0
Kansas	22	22	22	22	0
Kentucky	108	108	108	108	108
Louisiana ¹⁴	0	0	0	0	0
Maine	63	63	63	63	63
Maryland ¹⁵	103	103	36	36	36
Massachusetts ²	65	65	65	65	0
Michigan	65	0	0	0	0
Minnesota	0	0	0	0	0
Mississippi ²	77	77	67	67	0
Missouri ¹⁶	132	132	132	132	138
Montana	13	13	25	25	25
Nebraska	0	0	0	0	0
Nevada ¹⁷	56	56	56	81	81
New Hampshire	59	59	59	59	59
New Jersey ¹⁸	0	0	0	0	0
New Mexico ²	59	59	57	56	0
New York ¹⁹	65	65	65	65	0

Table E-7. Copayment Amount for a Three-Person Family Earning \$15,000 Annually, with a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2016-2020¹

State/Territory*	2016	2017	2018	2019	2020
No. Mariana Islands ²	21	21	21	21	0
North Carolina	125	125	125	125	125
North Dakota	75	39	39	41	43
Ohio	0	0	0	0	0
Oklahoma ²	95	95	95	0	0
Oregon ²	81	81	81	81	0
Pennsylvania	74	74	74	74	69
Puerto Rico ²⁰	127	127	127	127	0
Rhode Island	0	0	0	0	0
South Carolina ²¹	95	52	52	52	52
South Dakota ⁹	0	0	0	0	0
Tennessee ²²	151	151	159	159	0
Texas ²³	85	85	85	85	85
Utah ²	0	0	0	0	0
Vermont ²⁴	0	0	0	0	0
Virgin Islands	0	0	0	0	0
Virginia ²⁵	62	62	62	62	62
Washington	15	15	15	15	15
West Virginia	108	108	119	119	119
Wisconsin ²⁶	60	57	55	58	46
Wyoming	0	0	0	0	0

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of one parent and two children. The children are 24 and 48 months old and do not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. All income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The earnings level shown (\$15,000) is approximately equal to full-time full-year pay at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided.

² In 2020, copayments are waived due to the COVID-19 pandemic.

³ American Samoa serves only families with income below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁴ In 2016 and 2017, copayment amounts are based on center rates for providers certified at Better Beginnings Star level 1 in Pulaski County. In 2018 and 2019, copayment amounts are based on rates for providers certified at Better Beginnings Star level 1 in Urban counties. In 2020, copayments are waived due to the COVID-19 pandemic.

⁵ In 2020, copayments are waived for families where all children in the family who are enrolled in care remain at home for that month, either for distance learning because of closure of the facility, where all currently enrolled children are not able to receive in-person services due to a public health order, or for families sheltering in place.

⁶ Copayment amounts based on income eligibility thresholds for Denver. In 2018, 2019, and 2020, copayment amounts are based on income eligibility thresholds for Denver and Tier 1 child care center rates. Parent fees are reduced by 20 percent if the child is attending a provider that is rated in the top three levels of the state's quality rating system.

⁷ In 2016, 2017, 2018, and 2019, copayment amounts based on center reimbursement rates for New Castle. In 2020, copayments are waived due to the COVID-19 pandemic.

⁸ Copayment amounts for Miami-Dade County. In 2020, copayments are waived due to the COVID-19 pandemic.

⁹ Copayment amounts are rounded down to the closest whole dollar.

¹⁰ In 2016, 2017, 2018, and 2019, copayment amounts based on reimbursement rates used for all providers. In 2020, copayments are waived due to the COVID-19 pandemic.

¹¹ In 2016, 2017, 2018, and 2019, copayment amounts based on reimbursement rates for licensed centers and center-based infant and toddler care. In 2020, copayments are waived due to the COVID-19 pandemic.

¹² Copayment amounts based on first year of assistance.

¹³ In 2016, 2017, 2018, and 2019, copayments are calculated using a multiplier of 22 days per month. In 2020, copayments are waived due to the COVID-19 pandemic.

¹⁴ In 2016, 2017, 2018, and 2019, copayment amounts based on center reimbursement rates. Copayments are calculated using a multiplier of 22 days per month. In 2020, copayments are waived due to the COVID-19 pandemic.

¹⁵ Copayment amounts for center care in the Baltimore City Region.

¹⁶ In 2016, 2017, 2018, and 2019, copayments are calculated using a multiplier of 22 days per month. In 2020, copayments are calculated using a multiplier of 23 days per month.

¹⁷ Copayment amounts based on licensed center reimbursement rates for Clark County. In 2018, 2019, and 2020, copayments are calculated using a multiplier of 22 days per month.

¹⁸ In 2020, upon request, families are eligible to have their copayment waived, if they have experienced job loss or lost wages due to COVID-19.

¹⁹ Copayment amounts for New York City. In 2020 in New York City, copayments are waived due to the COVID-19 pandemic. Districts have the option to waive copayments during the COVID-19 pandemic.

²⁰ In 2016, 2017, 2018, and 2019, copayment amounts are for center-based care. In 2020, copayments are waived due to the COVID-19 pandemic.

²¹ Copayments are calculated using a multiplier of 4.33 weeks per month.

²² In 2016, 2017, 2018, and 2019, copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates. In 2020, copayments are waived due to the COVID-19 pandemic.

²³ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.

²⁴ Copayment amounts based on licensed center reimbursement rates. Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

²⁵ Copayment amounts are based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.

²⁶ Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates. In 2016, for counties participating in the state's Electronic Benefit Transfer card pilot program, each family is assigned a base copayment determined by the family's monthly child care hours with an additional per-child amount determined by the monthly hours for the individual child. In 2018, 2019, and 2020, the family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

Table E-8. Maximum Licensed Center Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ²	468	468	468	468	581	637	581	637	598	659
Alaska ³	800	800	800	800	800	800	800	800	850	850
American Samoa	180	180	180	180	180	180	180	180	180	180
Arizona ⁴	576	634	576	634	576	692	796	955	796	955
Arkansas ⁵	578	664	578	664	578	664	578	664	794	881
California ⁶	889	889	1,039	1,039	1,124	1,124	1,124	1,124	1,124	1,124
Colorado ⁷	883	1,300	883	1,300	883	1,300	1,083	1,576	1,083	1,576
Connecticut ⁸	1,036	1,088	1,036	1,088	1,036	1,088	1,634	1,716	1,634	1,716
DC ⁹	1,008	1,287	1,071	1,432	1,418	2,035	1,418	2,035	1,418	2,035
Delaware ¹⁰	574	574	574	574	574	574	652	1,059	687	1,059
Florida ¹¹	450	540	518	622	518	622	518	622	570	684
Georgia ¹²	559	699	559	699	559	783	624	874	624	874
Guam	450	450	450	450	575	575	575	575	575	575
Hawaii ¹³	675	710	740	919	740	919	740	919	1,200	1,500
Idaho ¹⁴	623	623	623	623	623	623	650	650	650	650
Illinois ¹⁵	851	851	851	851	887	887	887	887	929	929
Indiana ¹⁶	906	1,270	906	1,270	906	1,270	966	1,352	966	1,352
Iowa ¹⁷	586	758	586	758	586	758	639	810	737	949
Kansas ¹⁸	468	468	468	468	468	468	508	508	508	508
Kentucky ¹⁹	542	542	542	542	542	542	585	607	585	607
Louisiana ²⁰	495	495	495	495	495	495	523	523	523	523
Maine ²¹	984	984	984	984	1,209	1,209	1,209	1,209	1,209	1,209
Maryland ²²	486	612	494	622	533	672	659	830	659	830
Massachusetts ²³	870	1,199	941	1,536	984	1,607	1,018	1,663	1,291	1,726
Michigan ²⁴	433	607	477	737	477	737	477	737	529	789

Table E-8. Maximum Licensed Center Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Minnesota ²⁵	871	1,045	871	1,045	871	1,045	871	1,045	1,018	1,222
Mississippi ²⁶	326	357	326	357	480	480	480	480	600	600
Missouri ²⁷	413	495	413	495	413	495	638	766	638	766
Montana ²⁸	662	662	662	662	866	866	866	866	866	866
Nebraska ²⁹	854	929	867	975	896	975	919	975	919	975
Nevada ³⁰	616	924	616	924	616	924	836	924	836	924
New Hampshire ³¹	888	888	909	909	909	909	909	909	990	990
New Jersey ³²	573	604	573	604	585	646	677	798	690	914
New Mexico ³³	590	1,140	590	1,140	590	1,140	590	1,140	590	1,140
New York ³⁴	1,161	1,161	1,161	1,161	1,161	1,161	1,365	1,365	1,365	1,365
No. Mariana Islands	400	400	400	400	425	425	425	425	425	425
North Carolina ³⁵	754	822	937	1,120	937	1,120	937	1,120	937	1,120
North Dakota	600	600	676	676	790	790	790	790	790	790
Ohio ³⁶	652	916	743	1,044	743	1,044	815	1,144	815	1,144
Oklahoma ³⁷	311	662	311	662	311	784	311	784	511	941
Oregon ³⁸	1,237	1,237	1,237	1,237	1,237	1,237	1,404	1,404	1,404	1,404
Pennsylvania ³⁹	772	951	772	991	792	1,010	792	1,072	792	1,072
Puerto Rico ⁴⁰	351	351	351	351	351	351	379	379	379	379
Rhode Island ⁴¹	839	839	839	839	860	1,116	860	1,116	1,116	1,183
South Carolina ⁴²	628	819	628	819	802	888	802	888	802	888
South Dakota ⁴³	685	685	685	685	702	702	702	702	728	728
Tennessee ⁴⁴	426	512	426	512	426	512	512	615	520	624
Texas ⁴⁵	613	670	613	670	626	758	626	830	783	1,090
Utah ⁴⁰	638	638	638	638	650	650	650	650	765	765
Vermont ⁴⁶	591	827	591	827	799	1,118	827	1,158	827	1,158
Virgin Islands	300	300	300	300	300	300	300	300	300	300

Table E-8. Maximum Licensed Center Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Virginia ⁴⁷	1,139	1,139	1,139	1,139	1,505	1,505	1,505	1,505	1,505	1,505
Washington ⁴⁸	805	926	853	981	853	981	1,278	1,534	1,466	1,759
West Virginia ⁴⁹	600	680	600	680	600	680	600	680	600	680
Wisconsin ⁵⁰	899	1,183	909	1,196	996	1,257	1,076	1,413	1,076	1,413
Wyoming ⁴⁰	531	531	531	531	531	531	573	573	573	573

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ For the purposes of the tables, toddlers are defined as children through 35 months of age. The rates represent the maximum reimbursement rates for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for care provided for children with special needs or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time center based child care. The child is in care for 8 hours per day, 5 days per week.

² In 2016 and 2017, rates are center reimbursement rates for the Birmingham Region. In 2018, 2019, and 2020, base rates are center rates with no star rating and highest rates are star 5 rates for the Birmingham Region.

³ Center reimbursement rates for Anchorage.

⁴ Base rates are licensed center reimbursement rates for District 1. In 2016 and 2017, highest rates are licensed accredited center reimbursement rates for District 1. In 2018, 2019, and 2020, highest rates are for First Thing's First Quality First five-star centers for District 1.

⁵ Beginning January 1, 2019, all new providers must be certified at Better Beginnings level 2 or higher. Providers already participating in the program have until July 1, 2021, to become certified at Better Beginnings Level 2 or higher. In 2016, 2017, 2018, and 2019, base rates are Better Beginnings quality incentive star level 1 rates for centers in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for centers in urban areas. For 2020, the rates reflect that providers accepting child care vouchers during the COVID-19 pandemic were paid an additional \$10 per child for infant and toddlers, an additional \$7 for preschool children, and \$5 for school age children.

⁶ Center reimbursement rates for Los Angeles.

⁷ In 2016 and 2017, base rates are reimbursement rates for centers with no additional rating in Denver. In 2018, 2019, and 2020, base rates are tier one rates for Denver. Highest rates are tier five center reimbursement rates for Denver.

⁸ Base rates are licensed center reimbursement rates for the Southwest Region. Highest rates are licensed accredited center reimbursement rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁹ In 2016 and 2017, base rates are bronze tier center reimbursement rates and highest rates are gold tier center reimbursement rates. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. In 2018, 2019, and 2020, base rates are Developing or Preliminary Child Development Center reimbursement rates and highest rates are High Quality Child Development Center reimbursement rates. Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.

¹⁰ Center reimbursement rates for New Castle.

- ¹¹ Base rates are licensed or exempt center reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal center reimbursement rates for the Miami-Dade Coalition.
- ¹² Base rates are center rates with no additional star rating for Zone 1, and highest rates are three-star center rates for Zone 1.
- ¹³ Base rates are licensed center reimbursement rates. Highest rates are licensed accredited center reimbursement rates. In 2020, the rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ¹⁴ In 2016, 2017, and 2018, reimbursement rates are for Cluster 2. In 2019 and 2020, reimbursement rates are for Cluster 3, which includes Boise County.
- ¹⁵ Licensed day care center reimbursement rates are for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁶ Base rates are licensed center reimbursement rates for Marion, and highest rates are licensed, Paths to QUALITY level four center reimbursement rates for Marion.
- ¹⁷ Base rates are basic care center rates. Highest rates are Quality Rating System level 5 center rates. In 2020, center-based providers that remained open during the COVID-19 pandemic were eligible to receive an additional \$2,000 per month. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ¹⁸ Center reimbursement rates for Sedgwick County.
- ¹⁹ In 2016, 2017, and 2018, licensed center reimbursement rates for Jefferson County. In 2019 and 2020, base rates are licensed type II center rates for Jefferson County. Highest rates are licensed type I center rates for Jefferson County. In 2016 and 2017, providers participating in the STARS for KIDS NOW program receive an initial achievement payment based on the number of children served, an annual payment based on the number of children served, and a monthly quality incentive payment per subsidized child based on the percentage of children served who are receiving subsidies and the age of the child. These payments also vary based on the STARS level, from level one through four. In 2018, 2019, and 2020 providers participating in the Kentucky All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ The state authorizes a maximum 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In addition to the rates shown, lump sum bonus payments are issued after the end of each calendar quarter to child care centers based on the center's star rating and a percentage of all child care subsidy payments received by the center during the prior quarter. Five star-rated centers are paid a lump sum equal to 20 percent of the total amount of child care subsidy payments received. In 2018, 2019, and 2020, base rates are one star Type III and Class M center rates and highest rates are five star Type III and Class M center rates.
- ²¹ Licensed center reimbursement rates for Cumberland County.
- ²² Base rates are unaccredited licensed center reimbursement rates for Baltimore City. Highest rates are level five center reimbursement rates for Baltimore City.
- ²³ In 2016, 2017, 2018, and 2019, base rates are reimbursement rates for centers with no additional rating in Region 6, and highest rates are QRIS level two and above center reimbursement rates for Region 6. In 2020, base rates are reimbursement rates for centers with no additional rating in Region 4. Highest rates are QRIS level 2 and above center reimbursement rates for Region 4.
- ²⁴ Base rates are licensed blank-star and one-star child care center reimbursement rates. Highest rates are licensed five-star child care center reimbursement rates.
- ²⁵ Base rates are unaccredited center reimbursement rates for Hennepin County, and highest rates are 4-star Parent Aware center reimbursement rates for Hennepin County.
- ²⁶ In 2016 and 2017, base rates are tier two center reimbursement rates and highest rates are tier one center reimbursement rates. In 2018, 2019, and 2020, rates are standard licensed child care center rates. In 2020, rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ²⁷ Base rates are licensed center reimbursement rates for St. Louis County. Highest rates are licensed accredited center reimbursement rates for St. Louis County. Rates were calculated using a multiplier of 22 days per month.
- ²⁸ In 2016 and 2017, rates are center reimbursement rates for the Billings Region. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. In 2018, 2019, and 2020, rates are statewide and were calculated using a multiplier of 21.65 to convert daily rates to monthly rates.
- ²⁹ Base rates are unaccredited center reimbursement rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited center reimbursement rates for the entire state.
- ³⁰ Base rates are 1-Star licensed center reimbursement rates for Clark County. Highest rates are 5-Star licensed center reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates.

- ³¹ Licensed center reimbursement rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates.
- ³² Base rates are licensed center reimbursement rates. In 2016 and 2017, highest rates are accredited center reimbursement rates. In 2018, 2019, and 2020, highest rates are Grow NJ Kids 5-star rated provider rates.
- ³³ Base rates are licensed center reimbursement rates. Highest rates are FOCUS 5-Star center or New Mexico Children, Youth, and Family Department approved national accreditation reimbursement rates. In 2020, providers that remained open during the pandemic were paid an additional \$250 per child in care. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ³⁴ Licensed or registered day care center reimbursement rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁵ Base rates are licensed 3-Star center reimbursement rates for Mecklenburg County. Highest rates are licensed 5-Star center reimbursement rates for Mecklenburg County.
- ³⁶ In 2016, base rates are licensed center reimbursement rates for Cuyahoga County, and highest rates are five-star center reimbursement rates for Cuyahoga County. In 2017, 2018, 2019, and 2020, base rates are licensed center reimbursement rates for Franklin County, and highest rates are five-star center reimbursement rates for Franklin County.
- ³⁷ In 2016 and 2017, base rates are one-star center reimbursement rates for Enhanced Areas and highest rates are three-star center reimbursement rates for Enhanced Areas. In 2018, 2019, and 2020 base rates are one-star center reimbursement rates statewide and highest rates are three-star center reimbursement rates for all counties. The multiplier for converting maximum daily rates to maximum monthly rates is 23. Beginning April 1, 2020, in response to the COVID-19 pandemic, all providers are paid an additional \$5 per day per child, as reflected in the rates shown here.
- ³⁸ Certified center reimbursement rates for Group Area A.
- ³⁹ In 2016, base rates are reimbursement rates for centers with no additional rating for Philadelphia. In 2017, 2018, and 2019, base rates are Star 1 center reimbursement rates for Philadelphia. Highest rates are Star 4 center reimbursement rates for Philadelphia.
- ⁴⁰ Licensed center reimbursement rates.
- ⁴¹ In 2016 and 2017, rates are for licensed centers. In 2018 and 2019, base rates are tier 1 licensed center reimbursement rates. Highest rates are tier 5 licensed center reimbursement rates. In 2020, base rates are for 1 Star licensed centers. Highest rates are for 5 Star centers, with rates at the 90th percentile. Due to Covid-19, all providers not previously rated as 5 Star will be paid the 5 Star rate (as reflected in the base rates). All providers previously rated as 5 Star will be paid the 90th percentile rates (as reflected in the highest rates). Providers participating in the state's quality rating system star 3 or above are eligible to receive a once yearly incentive payment of \$500.
- ⁴² Base rates are level C licensed center reimbursement rates for urban counties. Highest rates are level A+ highest achieving center reimbursement rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.
- ⁴³ Licensed center reimbursement rates for Minnehaha County.
- ⁴⁴ Base rates are reimbursement rates for centers with no star rating for the Top Tier counties. Highest rates are three-star center reimbursement rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁵ Base rates are licensed center rates for the Gulf Coast Region. Highest rates are licensed four-star center rates for the Gulf Coast Region. In 2020, providers are paid a 25 percent enhanced rate due to the COVID-19 pandemic, as reflected in the amounts shown here.
- ⁴⁶ Base rates are licensed Early Childhood Program reimbursement rates. Highest rates are licensed 5-Star Early Childhood Program reimbursement rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁷ Level 2 center reimbursement rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁴⁸ Base rates are licensed level 1 center reimbursement rates for Region 4. Highest rates are Early Achievers level 5 licensed center reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 days per month.
- ⁴⁹ Base rates are tier 1 center reimbursement rates. Highest rates are tier 3 center reimbursement rates. Rates were calculated using a multiplier of 20 days per month.

⁵⁰ Base rates are licensed two-star center rates for Milwaukee, and highest rates are licensed five-star center rates for Milwaukee. In 2016, the state used a multiplier of 4.3 to convert weekly rates to monthly rates. In 2017, the state used monthly rates. In 2018, 2019, and 2020, the state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

Table E-9. Maximum Licensed Family Child Care Home Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ²	381	381	381	381	520	572	520	572	520	572
Alaska ³	650	650	650	650	650	650	650	650	650	650
American Samoa	180	180	180	180	180	180	180	180	180	180
Arizona ⁴	433	477	433	477	433	520	563	676	563	676
Arkansas ⁵	578	664	578	664	578	664	578	664	794	881
California ⁶	741	741	846	846	867	867	867	867	867	867
Colorado ⁷	580	850	580	850	580	850	650	1,083	650	1,083
Connecticut ⁸	1,049	1,102	1,079	1,133	1,105	1,160	1,131	1,187	1,161	1,242
DC ⁹	687	860	793	974	1,093	1,512	1,093	1,512	1,093	1,512
Delaware ¹⁰	448	448	448	448	448	448	810	810	521	810
Florida ¹¹	405	486	466	559	466	559	466	559	512	615
Georgia ¹²	433	542	433	542	433	607	520	728	520	728
Guam	450	450	450	450	575	575	575	575	575	575
Hawaii ¹³	600	600	600	600	600	600	600	600	800	800
Idaho ¹⁴	555	555	555	555	555	555	555	555	555	555
Illinois ¹⁵	713	713	713	713	713	713	713	713	780	780
Indiana ¹⁶	542	758	542	758	542	758	542	758	542	758
Iowa ¹⁷	528	585	528	585	528	585	542	596	562	607
Kansas ¹⁸	383	383	383	383	383	383	451	451	451	451
Kentucky ¹⁹	477	477	477	477	477	477	542	542	542	542
Louisiana ²⁰	352	352	352	352	352	352	396	396	523	523
Maine ²¹	693	693	867	867	867	867	867	867	867	867
Maryland ²²	461	590	468	599	507	649	576	738	576	738
Massachusetts ²³	690	710	731	753	760	783	780	803	924	952
Michigan ²⁴	416	589	459	719	459	719	459	719	511	771

Table E-9. Maximum Licensed Family Child Care Home Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Minnesota ²⁵	615	738	615	738	615	738	615	738	650	780
Mississippi ²⁶	237	259	237	259	348	348	348	348	435	435
Missouri ²⁷	350	420	350	420	350	420	408	490	408	490
Montana ²⁸	574	574	574	574	650	650	650	650	650	650
Nebraska ²⁹	624	667	624	693	650	693	650	693	650	693
Nevada ³⁰	594	770	594	770	594	770	693	770	693	770
New Hampshire ³¹	725	725	725	725	725	725	725	725	758	758
New Jersey ³²	527	550	527	550	527	550	527	550	527	550
New Mexico ³³	464	714	464	714	464	714	464	714	464	714
New York ³⁴	802	802	802	802	802	802	849	849	849	849
No. Mariana Islands	400	400	400	400	425	425	425	425	425	425
North Carolina ³⁵	550	587	743	773	743	773	743	773	743	773
North Dakota ¹³	470	470	520	520	620	620	620	620	620	620
Ohio ³⁶	547	768	623	875	623	875	623	875	623	875
Oklahoma ³⁷	283	570	283	570	304	736	304	736	511	943
Oregon ³⁸	1,000	1,000	1,000	1,000	1,020	1,020	1,140	1,140	1,140	1,140
Pennsylvania ³⁹	642	821	642	861	658	877	658	939	658	939
Puerto Rico	270	270	270	270	270	270	310	310	310	310
Rhode Island ⁴⁰	736	736	736	736	762	785	789	958	972	972
South Carolina ⁴¹	498	585	498	585	585	620	585	620	585	620
South Dakota ⁴²	494	494	494	494	520	520	520	520	537	537
Tennessee ⁴³	366	439	366	439	366	439	439	525	469	563
Texas ⁴⁴	523	572	523	572	534	650	551	753	688	961
Utah ¹³	540	540	540	540	575	575	575	575	650	650
Vermont ⁴⁵	487	682	487	682	562	787	579	810	579	810

Table E-9. Maximum Licensed Family Child Care Home Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2016-2020 ¹

State/Territory*	2016		2017		2018		2019		2020	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Virgin Islands	300	300	300	300	300	300	300	300	300	300
Virginia ⁴⁶	795	795	795	795	1,075	1,075	1,075	1,075	1,075	1,075
Washington ⁴⁷	920	1,104	938	1,126	938	1,126	945	1,134	1,127	1,352
West Virginia ⁴⁸	440	520	440	520	440	520	440	520	440	520
Wisconsin ⁴⁹	723	951	731	962	802	1,012	860	1,130	860	1,130
Wyoming ¹³	488	488	488	488	488	488	542	542	542	542

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2020 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2020 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2020 data in the tables, see table I.B in the report.

¹ For the purposes of the tables, toddlers are defined as children through 35 months of age. The rates represent the maximum reimbursement rate for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for care provided for children with special needs or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time care in a family child care home. The child is in care for 8 hours per day, 5 days per week.

² In 2016 and 2017 rates are family day care rates for the Birmingham Region. In 2018, 2019, and 2020 base rates are family day care home reimbursement rates with no star rating for the Birmingham Region and highest rates are star 5 family day care home reimbursement rates for the Birmingham region.

³ Family home care rates for Anchorage.

⁴ Base rates are certified child care home rates for District 1. Highest rates are accredited family child care home rates for District 1. In 2018, 2019, and 2020 highest rates are accredited or First Thing's First Quality First five star family child care home rates for District 1.

⁵ Base rates are Better Beginnings quality incentive star level 1 rates for family child care homes in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for family child care homes in urban areas. In 2020, these rates reflect that providers accepting child care vouchers during the COVID-19 pandemic were paid an additional \$10 per child for infant and toddlers, an additional \$7 for preschool children, and \$5 for school age children.

⁶ Licensed family child care home rates for Los Angeles.

⁷ Highest rates are tier five family child care home rates for Denver. In 2016 and 2017, base rates are tier zero family child care home rates for Denver. In 2018, 2019, and 2020, base rates are tier one home rates for Denver.

⁸ Base rates are licensed family child care home rates for the Southwest Region. Highest rates are licensed accredited family child care home rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁹ In 2016 and 2017, base rates are bronze tier family child care home reimbursement rates. Highest rates are gold tier family child care home reimbursement rates. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. In 2018, 2019, and 2020, base rates are Developing or Preliminary Child Development Home reimbursement rates. Highest rates are High Quality Child Development Home reimbursement rates. Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.

¹⁰ Licensed family child care home rates for New Castle.

- ¹¹ Base rates are licensed family child care home reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal family child care home rates for the Miami-Dade Coalition.
- ¹² Base rates are family child care home rates with no additional star rating for Zone 1, and highest rates are three-star family child care home rates for Zone 1.
- ¹³ Licensed family child care home rates.
- ¹⁴ In 2016, 2017, and 2018, rates are for family child care homes in Cluster 2. In 2019 and 2020, rates are for family child care homes in Cluster 3, which includes Boise County.
- ¹⁵ Licensed family child care home rates for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁶ Base rates are licensed family child care home rates for Marion. Highest rates are licensed, Paths to QUALITY level four family child care home rates for Marion.
- ¹⁷ Base rates are registered Child Development Home category A and B basic registered rates. Highest rates are registered Child Development Home category A and B Quality Rating System level 5 rates. In 2020, home-based providers that remained open during the COVID-19 pandemic were eligible to receive an additional \$500 per month. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.
- ¹⁸ Licensed family child care home rates for Sedgwick County.
- ¹⁹ Certified family child care home rates for Jefferson County. In 2016 and 2017, providers participating in the STARS for KIDS NOW program receive an initial achievement payment, an annual payment, and a monthly quality incentive payment per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through four. In 2018, 2019, and 2020, providers participating in the All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ This state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In 2020, in response to the COVID-19 pandemic, family child care home and in-home providers are paid the same rates as for center-based care.
- ²¹ Licensed family child care home rates for Cumberland County.
- ²² Base rates are unaccredited family child care home rates for Baltimore City. Highest rates are level 5 family child care home rates for Baltimore City.
- ²³ In 2016, 2017, 2018, and 2019, base rates are reimbursement rates for systems family child care homes with no additional rating in Region 6. Highest rates are QRIS level two and above family child care home rates for Region 6. In 2020, Base rates are reimbursement rates for non-systems family child care homes with no additional rating in Region 4. Highest rates are QRIS level 2 and above non-systems family child care home rates for Region 4. For family child care settings, before-and-after care for school-age children is calculated as 60 percent of the full-time rate.
- ²⁴ Base rates are licensed blank-star and one-star family child care home reimbursement rates. Highest rates are licensed five-star family child care home reimbursement rates.
- ²⁵ Base rates are licensed unaccredited family child care home rates for Hennepin County. Highest rates are licensed 4-star Parent Aware family child care home rates for Hennepin County.
- ²⁶ In 2016 and 2017, base rates are tier two family child care home rates and highest rates are tier one family child care home rates. In 2018 and 2019, rates are for standard family child care homes. In 2020, the rates shown are family child care home reimbursement rates. The rates shown reflect temporary enhanced rates established in response to the COVID-19 pandemic.
- ²⁷ Base rates are licensed family home rates for St. Louis County. Highest rates are licensed accredited family home rates for St. Louis County. All rates were calculated using a multiplier of 22 days per month.
- ²⁸ In 2016 and 2017, rates are family child care home rates for the Billings Region. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. In 2018, 2019, and 2020, rates are statewide and were calculated using a multiplier of 21.65 to convert daily rates to monthly rates.
- ²⁹ Base rates are licensed family child care home rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited family child care home rates for the entire state.
- ³⁰ Base rates are 1-Star licensed family child care home reimbursement rates for Clark County. Highest rates are 5-Star licensed family child care home reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.
- ³¹ Licensed family child care home rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates.
- ³² Base rates are registered family child care home rates. Highest rates are accredited family child care home rates.

³³ Base rates are licensed family child care home rates. Highest rates are FOCUS 5-Star family child care home or New Mexico Children, Youth, and Family Department approved national accreditation reimbursement rates. In 2020, providers that remain open during the pandemic are paid an additional \$250 per child in care. The additional payment is considered separate from the reimbursement rates; therefore, it is not reflected in the reimbursement rates shown in the table.

³⁴ Registered family day care rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.

³⁵ Base rates are licensed 3-Star center reimbursement rates for Mecklenburg County. Highest rates are licensed 5-Star center reimbursement rates for Mecklenburg County.

³⁶ In 2016, base rates are licensed Type B home rates for Cuyahoga County, and highest rates are licensed five-star Type B home rates for Cuyahoga County. In 2017, 2018, 2019, and 2020, base rates are licensed Type B home rates for Franklin County, and highest rates are licensed 5-star Type B home rates for Franklin County.

³⁷ In 2016 and 2017, base rates are one-star family child care home reimbursement rates for Enhanced Areas. Highest rates are three-star family child care home reimbursement rates for Enhanced Areas. In 2018, 2019, and 2020, rates are statewide. Base rates are one-star child care home rates. Highest rates are three-star child care home rates. Before-and-after care rates are blended rates for a traditional school year. The multiplier for converting maximum daily rates to maximum monthly rates is 23. Beginning April 1, 2020, in response to the COVID-19 pandemic, all providers are paid an additional \$5 per day per child, as reflected in the rates shown here.

³⁸ Certified child care home reimbursement rates for Group Area A.

³⁹ In 2016, base rates are reimbursement rates for family child care homes with no additional rating for Philadelphia. In 2017, 2018, 2019, and 2020, base rates are Star 1 family child care home rates for Philadelphia. Highest rates are Star 4 family child care home rates for Philadelphia.

⁴⁰ In 2016 and 2017, rates are licensed family child care home rates. In 2018, base rates are step 1 licensed family child care home rates and highest rates are step 4 licensed family child care home rates. In 2019, base rates are step 1, star 1 licensed family child care home rates, and highest rates are step 4, star 5 licensed family child care home rates. In 2020, due to Covid-19, all providers will be paid the Step 4, Star 5 rate for infants and toddlers. They will be paid the Step 4 rate for preschool and school age children. Providers participating in the state's quality rating system star 3 or above are eligible to receive a once yearly incentive payment of \$500.

⁴¹ Base rates are level C licensed family child care home rates for urban counties. Highest rates are level B+ licensed family child care home rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.

⁴² Regulated family child care home rates for Minnehaha County.

⁴³ Base rates are reimbursement rates for family child care homes with no additional rating for the Top Tier counties. Highest rates are three-star family child care home rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁴⁴ Base rates are registered family child care home rates for the Gulf Coast Region. Highest rates are tier four family child care home rates for the Gulf Coast Region. In 2020, providers are paid a 25 percent enhanced rate due to the COVID-19 pandemic, as reflected in the amounts shown here.

⁴⁵ Base rates are registered family child care home rates. Highest rates are registered 5-Star family child care home rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁴⁶ Level 2 licensed family day home rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.

⁴⁷ Base rates are Early Achievers Level 1 licensed family child care home reimbursement rates for Region 4, and highest rates are Early Achievers Level 5 licensed family child care home reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 days per month.

⁴⁸ Base rates are tier 1 family child care home rates. Highest rates are tier 3 family child care home rates. Rates were calculated using a multiplier of 20 days per month.

⁴⁹ Base rates are licensed 2-Star family child care home rates for Milwaukee. Highest rates are licensed 5-Star family child care home rates for Milwaukee. In 2016, the state used a multiplier of 4.3 to convert weekly rates to monthly rates. In 2017, the state used a monthly rate. In 2018, 2019, and 2020, the state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

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