

representative of all programs across the state of Rhode Island.

The finalized 2018 Market Rate Survey will be shared at a number of public venues to solicit additional feedback from key stakeholders and community partners. Namely, the Early Learning Council, All Provider Meeting and the Permanent Legislative Commission on Child Care.

### 4.3 Setting Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF funds. The Lead Agency must re-evaluate its payment rates at least every 3 years.

**4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.**

Effective Date: 07/01/2019

a) Infant (6 months), full-time licensed center care in the most populous geographic region

Rate \$ 198.48 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 4th

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region

Rate \$ 182.14 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 41st

c) Toddler (18 months), full-time licensed center care in the most populous geographic region

Rate \$ 198.48 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 10th

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region

Rate \$ 182.14 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 53rd

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 165.75 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 11th

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 163.95 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 35th

g) School-age child (6 years), full-time licensed center care in most populous geographic region

Rate \$ 146.26 per weekly unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 99th

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 155.20 per weekly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 96th

i) Describe how part-time and full-time care were defined and calculated.

Full-time care is defined as thirty (30) hours per week or more.

Three quarter time care is defined as twenty (20) to twenty-nine (29) hours per week.

Half time care is defined as ten (10) to nineteen (19) hours per week.  
Quarter time care is defined as zero (0) to nine (9) hours per week.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 07/01/2018

k) Identify the most populous area of the state used to complete the responses above.  
Providence County represents 74.2% of the respondents to the Market Rate Survey.

l) Provide the citation or link, if available, to the payment rates.

<http://www.dhs.ri.gov/Regulations/218-RICR-20-00-04ChildCareAssistanceProgram.pdf>

m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

N/A

**4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).**

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

Effective Date: 07/01/2019

Differential rate for *non-traditional hours*.

Describe:

N/A

Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

N/A

Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

Tiered rates of reimbursement are applied to infant/toddler and preschool rates for center-based providers based on a provider's quality rating, as defined by the state's quality rating improvement system, BrightStars.

On July 1, 2019, family child care providers were phased in to receive tiered reimbursement rates for infant/toddlers in their care. These rates are based on a provider's quality rating, as defined by the state's quality rating improvement system, BrightStars.

Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

N/A

Differential rate for *higher quality*, as defined by the state/territory.

Describe:

The Lead Agency (DHS) implemented Tiered Reimbursement Rates for center-based providers serving infants/toddlers and preschoolers effective July 1, 2018 as outlined in Article 15 of the State of Rhode Island's approved budget. Rates for center-based providers are directly tied to their quality rating, as defined by the state's quality rating improvement system, BrightStars.

For infant/toddler care, tier one shall be reimbursed two and one-half percent (2.5%) above the FY 2018 weekly amount, tier two shall be reimbursed five percent (5%) above the FY 2018 weekly amount, tier three shall be reimbursed thirteen percent (13%) above the FY 2018 weekly amount, tier four shall be reimbursed twenty percent (20%) above the FY 2018 weekly amount and tier five shall be reimbursed thirty-three percent (33%)

above the FY 2018 weekly amount. The tier five rates for centers reflects the 67th percentile for infants, and 79th for toddlers.

For pre-school reimbursement rates, the tier one shall be reimbursed two and one-half (2.5%) percent above the FY 2018 weekly amount, tier two shall be reimbursed five percent (5%) above the FY 2018 weekly amount, tier three shall be reimbursed ten percent (10%) above the FY 2018 weekly amount, tier four shall be reimbursed thirteen percent (13%) above the FY 2018 weekly amount, and tier five shall be reimbursed twenty-one percent (21%) above the FY 2018 weekly amount.

On July 1, 2019 the Lead Agency (DHS) implemented Tiered Reimbursement Rates for family child care providers serving infants/toddlers as outlined in Article 13 (formerly Article 15) in the State of Rhode Island's approved budget. Rates for family child care providers are directly tied to their quality rating, as defined by the state's quality rating improvement system, BrightStars.

Other differential rates or tiered rates.

Describe:

N/A

Tiered or differential rates are not implemented.

#### 4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

**4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):**

Effective Date: 10/01/2018

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.