An Act To Provide Stable Funding and Support for Child Care Providers

Reference to the Committee on Health and Human Services suggested and ordered printed.

Presented by Senator MILLETT of Cumberland.
Cosponsored by Representative GATTINE of Westbrook and
Senator: BREEN of Cumberland, Representatives: DUNPHY of Old Town, PIERCE of
Falmouth.
Be it enacted by the People of the State of Maine as follows:

Sec. 1. 22 MRSA §3731, sub-§§1-A, 2-B and 5 are enacted to read:

1-A. Continuity of care. "Continuity of care" means programming and policies that ensure children and families are consistently engaged in high-quality early learning experiences through stable relationships with providers of child care services who are sensitive and responsive to children's signals and needs.

2-B. Infant. "Infant" means a child 6 weeks of age to under 13 months of age.

5. Toddler. "Toddler" means a child 13 months of age to 36 months of age.

Sec. 2. 22 MRSA §3737, sub-§3-A is enacted to read:

3-A. Graduated quality differential rates. The graduated quality differential rates that the department is required to pay for child care services under subsection 3 include:

A. Fifteen percent for step 2 child care services other than for infants or 25% for step 2 child care services for infants;

B. Twenty percent for step 3 child care services other than for infants or 30% for step 3 child care services for infants; and

C. Twenty-five percent for step 4 child care services other than for infants or 35% for step 4 child care services for infants.

Sec. 3. 22 MRSA §3737, sub-§4, as enacted by PL 2017, c. 412, §1, is amended to read:

4. Child care rates. The department shall establish payment rates for child care services that are up to the 75th percentile of local market rates for the various categories of child care services. The payment rates for child care services for children with special needs and infants may be higher than the 75th percentile of local market rates.

Sec. 4. 22 MRSA §3737, sub-§§5 and 6 are enacted to read:

5. Use of contract to improve supply of care for infants, toddlers and preschool children. The department shall distribute child care funds through contracts with providers of child care services at step 3 and step 4 under subsection 3 to increase the availability of care for infants, toddlers and preschool children up to 4 years of age. The contracts must prioritize continuity of care and stable settings for infants, toddlers and preschool children up to 4 years of age but may support children in another age group. To qualify for a contract, a provider of child care services under this subsection must have appropriate training in child development, child trauma, adverse childhood experience, child protective services and working with children with disabilities. The department shall ensure that contracts are granted to providers of child care services under this subsection that prioritize the following at-risk populations:

A. Infants, toddlers and preschool children up to 4 years of age receiving or who have received child protective services;
B. Infants with disabilities or those referred by the Child Development Services
System as defined in Title 20-A, section 7001, subsection 1-A;

C. Infants whose parents are participating in a substance use disorder treatment
program;

D. Infants whose parents are or have been homeless in the preceding 6 months; and

E. Infants in geographic areas of the State where parents have few opportunities to
secure high-quality infant care.

6. Shared services. The department shall create a program to support providers of
child care services in sharing administrative and program services and costs to make the
providers more efficient and financially sustainable and to improve the providers' ability
to deliver high-quality child care services.

SUMMARY

This bill amends the child care services provisions in the following ways:

1. It establishes graduated quality differential rates for steps 2 to 4 in the 4-step child
care quality rating system currently required by law;

2. It requires that contracts with providers of child care services prioritize infants,
toddlers and preschool children up to 4 years of age in a variety of ways; and

3. It directs the Department of Health and Human Services to develop a shared
services program for providers of child care services to realize efficiencies and achieve
financial sustainability by sharing administrative and program services and costs.