

Aligned Action Agenda: Adopt the Kids Can't Wait Campaign and the Empire State Campaign for Child Care Priorities

Liftoff WNY is a leadership member of the Kids Can't Wait Coalition that focuses on devoting more resources to strengthen the Early Intervention (EI) and Preschool Special Education (PSE) systems and eliminating inequities and expanding timely access to a full range of effective supports for young children.

- 1. Increase rates for all Early Intervention providers and evaluators by 11% to move New York State closer to meeting the needs of young children in New York with developmental delays or disabilities. To help achieve this goal, the State can use the new Covered Lives assessment, signed into law in December 2021, which requires private health insurance companies to contribute \$40 million to the Early Intervention program. At a time when EI providers are paid less than they were in the 1990s and children are going without needed services, the State should use this funding to increase EI provider rates instead of merely using it to save money for the State and counties. Unfortunately, the Executive Budget does not include any rate increase for EI providers.
- 2. Provide an 11% increase for preschool special education programs and school-age classrooms serving children with significant disabilities (4410 and 853 classrooms) for the 2022-23 school year, as Governor Hochul has committed to doing through administrative action.
- 3. Ensure sufficient long-term resources for EI and PSE and reduce disparities in both programs by:
 - a) Allocating \$1.72 million to **design a new preschool special education tuition rate-setting methodology** and discontinuing the annual reconciliation process to provide interim relief while the rate-setting methodology is redesigned, allowing providers the flexibility to manage resources across a five-year period, as recommended by the Board of Regents; and
 - b) Conducting a comprehensive assessment of the methodology used to determine payment for all Early Intervention evaluations, services and service coordination and re-setting rates accordingly (S.5676/A.6579).
- 4. Ensure that expansions in New York's child care assistance provide equal access and needed support for families with children with disabilities with enhanced rates and supports for providers serving children with disabilities so that children with disabilities are not turned away from child care programs.
- 5. Require that the Bureau of Early Intervention publish an annual report disaggregated by race/ethnicity with data by county, about referrals, assessments, enrollment, and timely receipt of services.
- 6. Include \$250,000 in the SFY23 budget for implementation of the health care workforce data legislation passed by the legislature and signed by Governor Hochul (A.3050/S.3543). This should be an annual appropriation to fund regular collection and release of health workforce data, including EI providers, to inform and approve health planning and access and emergency preparedness.

Liftoff joins the Empire State Campaign for Child Care (ESCCC) in calling for the creation of a high-quality, free, equitable and universal child care system that meets the needs of all children and families and includes strong supports for workers and providers by 2026. The statewide ESCCC campaign has been dedicated to achieving equitable access to quality child care in New York State since 2017.

The Empire State Campaign for Child Care calls on the governor and the legislature to **take immediate steps to** address the child care crisis by committing \$5 billion in the FY23 budget, and passing the Universal Child Care Act, S7595(Brisport)/ A8623(Hevesi) to finally put us on the path to a transformative, fully funded and permanent system of child care in New York.

There are three main components of the Empire State Campaign for Child Care's framework for universal child care, all of which must be implemented simultaneously to guard against destabilizing the child care sector or inadvertently harming New York families as we transition to universal child care.

- 1. New York provides truly universal child care with access for all children from birth to age thirteen by: Guaranteed access to subsidies for all families; no activity requirements; no immigration status requirement; Parent choice of modality – family-based, center-based, or legally exempt child care; High-quality, culturallyresponsive care; Meeting the needs of all children, including children with disabilities, those experiencing trauma, multi-lingual learners, families experiencing homelessness or in transitional housing; Making care available during non-traditional hours; Ultimately proving care that is free for all families with no means testing, but during the phase-in period, allowing for a sliding scale family contribution for families with income higher than 75% of the state median income. Costs for year one: \$3 billion
- 2. New York immediately raises workforce wages while moving toward the goal of pay parity with public school teachers by: Establishing a workforce stabilization fund to directly raise wages among participating programs during the period New York is transitioning to a model that provides funds to child care providers based on the true costs of care; Helping providers of all modalities immediately access federal funds to continue the successful stabilization grant program during this period of transition; and During the phase-in period, paying entry level staff at least a living wage, with more experienced staff compensated at a proportionately higher rate. All compensation will increase progressively over the course of the transition period. Costs for year one: \$1.4 billion
- 3. New York transitions to a payment rate model based on a "cost estimation model" that accounts for geography and quality, and assumes all child care staff are paid at parity with elementary school teachers by: Establishing a transitional reimbursement rate structure based on the results of the forthcoming OCFS market rate survey, or the existing survey, whichever results in higher rates; and Setting reimbursement rates at the 90th percentile of market rates in each region to ensure that per child amounts are sufficient to avoid disrupting the child care sector during this transition Costs: \$600 million