

ELIGIBILITY SPECIALISTS SURVEY 2020

This brief provides results and recommendations that came out of a survey of caseworkers (referred to as specialists) who help families seeking or receiving the child care subsidy, i.e. the Child Development and Care (CDC) assistance. The survey asked about the effects of recent policy changes, the needs of clients, challenges, and suggestions for improvement. The policy changes examined for this study included:

- *12-month eligibility*, which extended the length of child care subsidy program eligibility to a continuous 12 months
- *Graduated exit* to reduce the subsidy gradually as a family's income increases
- *Delinked provider assignment* to allow for subsidy approval without naming a child care provider
- *Provider rate increases* for all provider types
- *Income eligibility* threshold increase to 130% of Federal Poverty Level

The survey is part of a larger study of the effects of child care assistance program policy changes that is being carried out by Public Policy Associates, Inc. (PPA) in partnership with the Michigan Department of Education (MDE) and the Michigan Department of Health and Human Services (MDHHS).

Recommendations

The following recommendations are presented for consideration to the MDE and MDHHS leadership. They were developed by PPA with support from study team members from the MDE and the MDHHS.

- Consider policy or program changes to increase child care provider supply and those providing non-traditional hours for subsidy families, especially in East-Central Michigan.
- Develop or improve informational materials for clients or providers that explain billing, eligibility requirements, income limits, and finding a provider.
- Seek to make it easier for clients to complete paperwork or report income changes. Consider client barriers to, convenience of, and time it takes to complete the processes.
- Ensure that policy changes are effectively implemented across all areas.

The recommendations are based on the results of the analyses of survey responses from specialists that work with clients regarding the CDC program, as presented below.

This brief was prepared under a grant from the U.S. Department of Health and Human Services, Administration for Children and Families. For more information, contact Colleen Graber at [517-485-4477](tel:517-485-4477) or cgraber@publicpolicy.com.

Results

Specialists perceive all the policy changes as important, especially the change to income eligibility

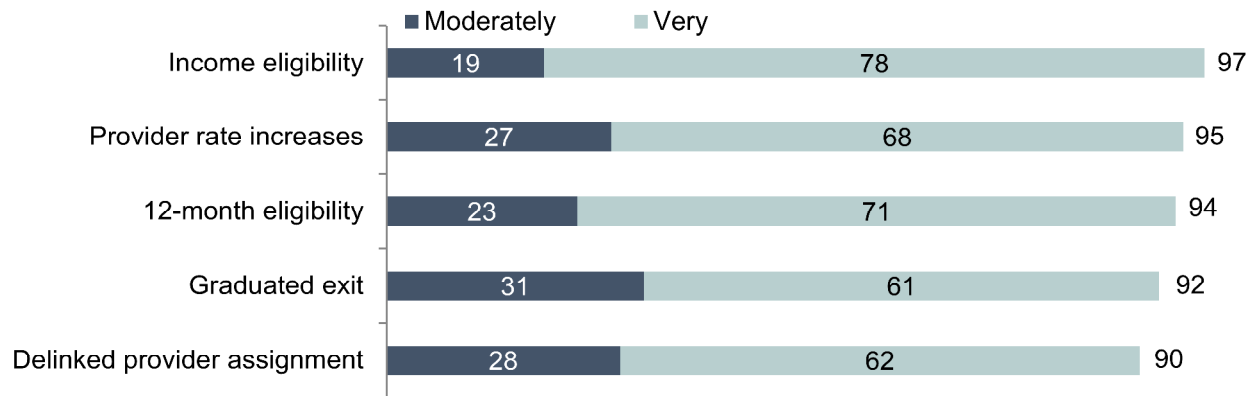


Figure 1. Percentage of specialists who rated policy changes as moderately or very important for their CDC assistance clients

Large majorities of specialists agreed or strongly agreed that the policy changes, taken together, had increased their ability to improve the health and safety of children (79%) and helped clients achieve financial stability (80%) (goals of MDHHS). A majority also reported that they thought the changes had made it easier for families to access stable, high-quality care.

More informational materials for specialists, clients, and providers would strengthen program

A majority of specialists thought more communication materials was vital for strengthening the program. Specialists thought it important to improve informational resources for specialists, clients, and providers. Specialists asked for materials focused on explaining billing, eligibility requirements and income limits, and finding a provider. Respondents in East-Central Michigan were especially in need of more information about helping clients find a provider.

Specialists saw the need for expanded access to child care

Despite the positive perceptions of the policy changes, nearly two-thirds (62%) of specialists thought that clients still had a difficult time finding child care, with a majority citing the need for improving client access to providers (52%). Here there were stark regional differences, with East-Central Michigan being more likely to cite this as a key factor (71%).

Specialists thought that access to high-quality child care could be improved by increasing the supply of providers and provider payments and/or finding ways to increase the availability of non-traditional hours care.

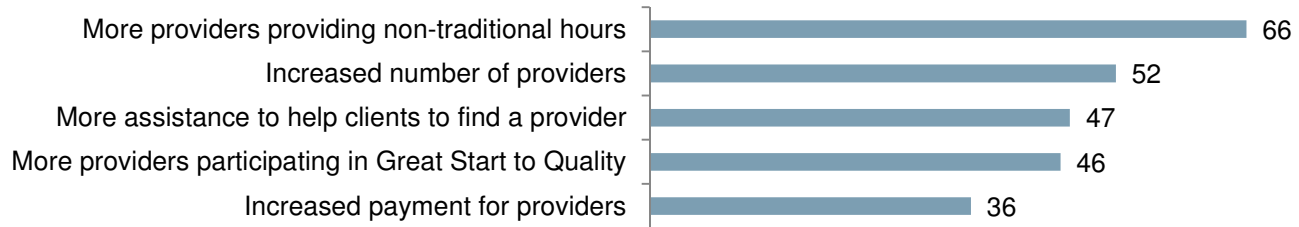


Figure 2. Strategies for improving access to high-quality child care, by percentage of specialists selecting

Client paperwork and reporting income changes are obstacles

Many specialists said the biggest obstacle to delivering the subsidy was clients not turning in their program paperwork (37%). However, perceptions about the biggest challenges to clients varied widely by specialist background. Clients failing to report income changes and completely filling out forms also appear to be challenges for specialists. Only 21 percent stated that their clients reported income changes in a timely manner. Processing applications is a challenge for newer specialists.

Methods

The survey was developed through a collaborative, iterative process where the survey was drafted, pre-piloted, and then piloted with feedback provided and refinements made between each step. Feedback from the MDHHS study team and specialists were instrumental in developing the survey. The final survey was disseminated to all MDHHS specialists in March 2020 and remained open for two months. The survey had a response rate of 32 percent (1,044 out of 3,238 specialists). Only specialists that work with clients regarding the CDC program were included in the analysis (897 or 86% of respondents). It should be noted that there could be important differences between those who did and did not respond to the survey; for example, the specialists who responded could have a more positive view of the CDC program leading them to complete the survey.