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## Legislative Agenda - Spring 2019/FY2020

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### Increase and protect early childhood funding which:

- **Increases, at a minimum, the Early Childhood Block Grant (ECBG) by \$150 million**, funds that will make services available to more children while also ensuring those children facing greater challenges have more opportunities to attend comprehensive, school-day-length programs.
- **Doubles funding (\$16.9m to \$33.8m) for voluntary home visiting programs** (Parents Too Soon and Healthy Families budget lines—Department of Human Services) to expand access to these evidence-based programs, particularly during the prenatal period.
- **Increases, at a minimum, funding for Early Intervention (EI) by \$25 million** in order to reduce waiting lists through increased provider rates and expand eligibility for children exposed to lead. EI provides services for infants and toddlers with developmental delays.
- **Protect funding for the Child Care Assistance Program (CCAP)** to ensure the 35,000-40,000 families who lost access to the program since 2015 return, as well as supporting investment in programs so providers can continue to improve quality and increase staff compensation.

**Support HR87 and SR85, \$250 million in early childhood capital funds for new and improved facilities.** A \$45 million Early Childhood Capital Grant (ECCG) program in 2011 generated applications from 225 programs for a total \$550 million in funding requests. Demand has increased in subsequent years as political gridlock and the budget impasse delayed improvements to existing projects and prevented new capital spending.

**Support HB2191 and SB1316, legislation to increase reimbursement rates for all EI providers.** Providers have not seen an increase to their reimbursement rates in 11 years. In addition, a *differentiated increase for developmental therapists* (DTs) is needed because the current reimbursement rate for DTs is much lower than the rate at which other professionals providing onsite services are able to bill.

**Support HB3567 and SB1679, legislation to expand eligibility for CCAP.** To allow more low-wage working families to enter the program, income eligibility should be increased to 200% of the Federal Poverty Level (FPL).

**Advance efforts, including SB1909, to connect the early childhood system with infant/maternal mortality reduction strategies.** Improve access to home visiting and doula services as well as opportunities for universal supports following all births as key elements of a comprehensive approach to combat the racial disparities in rates of infant/maternal mortality and morbidity. Strategies must also include extending Medicaid eligibility, efforts to reduce the impact of implicit bias within healthcare and hospital settings, and economic alternatives for new parents such as paid leave.

**Advance and support efforts to grow and strengthen the early childhood workforce in a range of settings.** Connect proposals to improve the overall teacher shortage to the early childhood workforce – across the pipeline from child care licensing credentials through teacher licensure.