

HOUSE OF REPRESENTATIVES

EIGHTY-SEVENTH SESSION

H. F. No. 2097

02/08/2012 Authored by Peppin and Quam

The bill was read for the first time and referred to the Committee on Health and Human Services Reform

02/16/2012 By motion, recalled and re-referred to the Committee on Health and Human Services Finance

03/29/2012 Adoption of Report: Pass as Amended and Read Second Time

1.1 A bill for an act
1.2 relating to human services; modifying child care accreditation provisions;
1.3 amending Minnesota Statutes 2010, section 119B.13, subdivision 3a.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2010, section 119B.13, subdivision 3a, is amended to
1.6 read:

1.7 Subd. 3a. **Provider rate differential for accreditation.** A family child care
1.8 provider or child care center shall be paid a 15 percent differential above the maximum
1.9 rate established in subdivision 1, up to the actual provider rate, if the provider or center
1.10 holds a current early childhood development credential or is accredited. For a family
1.11 child care provider, early childhood development credential and accreditation includes
1.12 an individual who has earned a child development associate degree, a child development
1.13 associate credential, a diploma in child development from a Minnesota state technical
1.14 college, or a bachelor's or post baccalaureate degree in early childhood education from
1.15 an accredited college or university, or who is accredited by the National Association
1.16 for Family Child Care or the Competency Based Training and Assessment Program.
1.17 For a child care center, accreditation includes accreditation ~~by~~ that meets the following
1.18 criteria: the accrediting organization must demonstrate the use of standards that promote
1.19 the physical, social, emotional, and cognitive development of children. The accreditation
1.20 standards shall include, but are not limited to, positive interactions between adults and
1.21 children, age-appropriate learning activities, a system of tracking children's learning,
1.22 use of assessment to meet children's needs, specific qualifications for staff, a learning
1.23 environment that supports developmentally appropriate experiences for children, health
1.24 and safety requirements, and family engagement strategies. The commissioner of human

2.1 services, in conjunction with the commissioners of education and health, will develop an
2.2 application and approval process based on the criteria in this section and any additional
2.3 criteria. The process developed by the commissioner of human services must address
2.4 periodic reassessment of approved accreditations. The commissioner of human services
2.5 must report the criteria developed, the application, approval, and reassessment processes,
2.6 and any additional recommendations by February 15, 2013, to the chairs and ranking
2.7 minority members of the legislative committees having jurisdiction over early childhood
2.8 issues. The following accreditations shall be recognized for the provider rate differential
2.9 until an approval process is implemented: the National Association for the Education of
2.10 Young Children, the Council on Accreditation, the National Early Childhood Program
2.11 Accreditation, the National School-Age Care Association, or the National Head Start
2.12 Association Program of Excellence. For Montessori programs, accreditation includes
2.13 the American Montessori Society, Association of Montessori International-USA, or the
2.14 National Center for Montessori Education.