BD/MN

#### **SENATE STATE OF MINNESOTA** NINETY-SECOND SESSION

#### S.F. No. 2393

DATE	D-PG	OFFICIAL STATUS
4/12/2021	2264	Introduction and first reading
		Referred to Human Services Reform Finance and Policy
		See First Special Session 2021, HF33, Art. 14, Sec. 3-6

1.1	A bill for an act
1.2	relating to human services; allocating funding for early learning scholarships and
1.3	child care assistance; modifying child care assistance funding priorities for eligible
1.4	families; adjusting allocation formula for basic sliding fee child care assistance
1.5	program; modifying definition of eligible child for early learning scholarship
1.6	program; establishing the retaining early educators through attaining incentives
1.7	now grant program; modifying certain early educator incentive programs;
1.8	establishing COVID-19 public health support funds for child care programs;
1.9	directing the commissioner of human services to evaluate the parent aware program;
1.10	requiring reports; allocating funds from the American Rescue Plan Act of 2021;
1.11	appropriating money; amending Minnesota Statutes 2020, sections 119B.03,
1.12	subdivisions 4, 6; 124D.142; 124D.165, subdivision 2; 136A.128, subdivisions 2,
1.13	4; proposing coding for new law in Minnesota Statutes, chapter 119B.
1.14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.15	Section 1. Minnesota Statutes 2020, section 119B.03, subdivision 4, is amended to read:
1.16	Subd. 4. Funding priority. (a) First priority for child care assistance under the basic
1.17	sliding fee program must be given to eligible non-MFIP families who do not have a high
1.18	school diploma or commissioner of education-selected high school equivalency certification
1.19	or who need remedial and basic skill courses in order to pursue employment or to pursue
1.20	education leading to employment and who need child care assistance to participate in the
1.21	education program. This includes student parents as defined under section 119B.011,
1.22	subdivision 19b. Within this priority, the following subpriorities must be used:
1.23	(1) child care needs of minor parents;
1.20	(1) this the needs of miller parents,
1.24	(2) child care needs of parents under 21 years of age; and
1.25	(3) child care needs of other parents within the priority group described in this paragraph.

- (b) Second priority must be given to parents who have completed their MFIP or DWP
   transition year, or parents who are no longer receiving or eligible for diversionary work
   program supports families in which at least one parent is a veteran, as defined under section
   197.447.
- 2.5 (c) Third priority must be given to <u>eligible</u> families who are eligible for portable basic
  2.6 sliding fee assistance through the portability pool under subdivision 9 do not meet the
  2.7 specifications of paragraph (a), (b), (d), or (e).
- 2.8 (d) Fourth priority must be given to families in which at least one parent is a veteran as
   2.9 defined under section 197.447 who are eligible for portable basic sliding fee assistance
   2.10 through the portability pool under subdivision 9.
- 2.11 (e) Fifth priority must be given to eligible families receiving services under section
- 2.12 <u>119B.011</u>, subdivision 20a, if the parents have completed their MFIP or DWP transition
  2.13 year or if the parents are no longer receiving or eligible for DWP supports.
- 2.14 (e) (f) Families under paragraph (b) (e) must be added to the basic sliding fee waiting
- 2.15 list on the date they begin the complete their transition year under section 119B.011,
- subdivision 20, and must be moved into the basic sliding fee program as soon as possible
  after they complete their transition year.
- 2.18 **EFFECTIVE DATE.** This section is effective July 1, 2021.
- 2.19 Sec. 2. Minnesota Statutes 2020, section 119B.03, subdivision 6, is amended to read:
- 2.20 Subd. 6. Allocation formula. The <u>allocation component of basic sliding</u> fee state and 2.21 federal funds shall be allocated on a calendar year basis. Funds shall be allocated first in 2.22 amounts equal to each county's guaranteed floor according to subdivision 8, with any 2.23 remaining available funds allocated according to the following formula:
- (a) One-fourth of the funds shall be allocated in proportion to each county's total
  expenditures for the basic sliding fee child care program reported during the most recent
  fiscal year completed at the time of the notice of allocation.
- 2.27 (b) Up to one-fourth of the funds shall be allocated in proportion to the number of families 2.28 participating in the transition year child care program as reported during and averaged over 2.29 the most recent six months completed at the time of the notice of allocation. Funds in excess 2.30 of the amount necessary to serve all families in this category shall be allocated according 2.31 to paragraph (f) (e).

# 3.1 (c) Up to one-fourth of the funds shall be allocated in proportion to the average of each 3.2 county's most recent six months of reported first, second, and third priority waiting list as 3.3 defined in subdivision 2 and the reinstatement list of those families whose assistance was 3.4 terminated with the approval of the commissioner under Minnesota Rules, part 3400.0183, 3.5 subpart 1. Funds in excess of the amount necessary to serve all families in this category 3.6 shall be allocated according to paragraph (f).

3.7 (d) (c) Up to one-fourth one-half of the funds shall be allocated in proportion to the 3.8 average of each county's most recent six 12 months of reported waiting list as defined in 3.9 subdivision 2 and the reinstatement list of those families whose assistance was terminated 3.10 with the approval of the commissioner under Minnesota Rules, part 3400.0183, subpart 1. 3.11 Funds in excess of the amount necessary to serve all families in this category shall be 3.12 allocated according to paragraph (f) (e).

3.13 (e) (d) The amount necessary to serve all families in paragraphs (b), (c), and (d) (c) shall
3.14 be calculated based on the basic sliding fee average cost of care per family in the county
3.15 with the highest cost in the most recently completed calendar year.

- 3.16 (f) (e) Funds in excess of the amount necessary to serve all families in paragraphs (b), 3.17 (c), and (d) (c) shall be allocated in proportion to each county's total expenditures for the 3.18 basic sliding fee child care program reported during the most recent fiscal year completed 3.19 at the time of the notice of allocation.
- 3.20 EFFECTIVE DATE. This section is effective January 1, 2022. The 2022 calendar year
   3.21 shall be a phase-in year for the allocation formula in this section using phase-in provisions
   3.22 determined by the commissioner of human services.

## 3.23 Sec. 3. [119B.195] RETAINING EARLY EDUCATORS THROUGH ATTAINING 3.24 INCENTIVES NOW (REETAIN) GRANT PROGRAM.

- 3.25 <u>Subdivision 1.</u> Establishment; purpose. The retaining early educators through attaining
   3.26 incentives now (REETAIN) grant program is established to provide competitive grants to
- 3.27 incentivize well-trained child care professionals to remain in the workforce. The overall
- 3.28 goal of the REETAIN grant program is to create more consistent care for children over time.
- 3.29 Subd. 2. Administration. The commissioner shall administer the REETAIN grant
- 3.30 program through a grant to a nonprofit with the demonstrated ability to manage benefit
- 3.31 programs for child care professionals. Up to ten percent of grant money may be used for
- 3.32 administration of the grant program.

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4.1	Subd. 3.	Application. Appl	icants must apply	for the REETAIN grant	program using
4.2				by the commissioner.	<u> </u>
4.3	Subd. 4.	Eligibility. (a) To b	be eligible for a gr	ant, an applicant must:	
4.4	<u>(1)</u> be lice	ensed to provide cl	nild care or work f	for a licensed child care	program;
4.5	<u>(2) work</u>	directly with child	ren at least 30 hou	rs per week;	
4.6	<u>(3) have v</u>	worked in the appl	icant's current pos	ition for at least 12 mon	<u>iths;</u>
4.7	(4) agree	to work in the earl	y childhood care a	and education field for a	t least 12 months
4.8	upon receivir	ng a grant under th	is section;		
4.9	<u>(5) have a</u>	a career lattice step	of five or higher;		
4.10	<u>(6)</u> have a	a current members	hip with the Minn	esota quality improvem	ent and registry
4.11	<u>tool;</u>				
4.12	(7) not be	a current teacher e	ducation and com	pensation helps scholars	hip recipient; and
4.13	<u>(8) meet a</u>	any other requirem	ents determined b	y the commissioner.	
4.14	(b) Grant	recipients must sig	gn a contract agree	eing to remain in the ear	ly childhood care
4.15	and education	n field for 12 mont	ths.		
4.16	<u>Subd. 5.</u>	<mark>Grant awards.</mark> Gr	ant awards must b	e made annually and ma	ay be made up to
4.17	an amount fo	r each recipient de	etermined by the c	ommissioner. Grant rect	pients may use
4.18	grant money	for program suppl	ies, training, or pe	ersonal expenses.	
4.19	<u>Subd. 6.</u>	<b>Report.</b> By Januar	y 1 of each year, t	he commissioner must r	eport to the
4.20	legislative co	mmittees with juri	sdiction over child	care about the number	of grants awarded
4.21	to recipients,	and outcomes of t	he grant program	since the last report.	
4.22	Sec. 4. Min	inesota Statutes 20	20, section 124D.	142, is amended to read	:
4.23	124D.142	2 QUALITY RAT	ING AND IMPR	OVEMENT SYSTEM	[.
4.24	Subdivisi	on 1. System esta	<mark>blished.</mark> <del>(a)</del> There	is established a quality	rating and
4.25	improvement	system (QRIS) fra	mework <u>, known a</u>	s Parent Aware, to ensur	e that Minnesota's
4.26	children have	e access to high-qu	ality early learning	g and care programs in a	range of settings
4.27	so that they a	re fully ready for ki	ndergarten <del>by 202</del>	0. Creation of a standard	s-based voluntary
4.28	quality rating	and improvement	system includes:		
4.29	<u>Subd. 2.</u>	System componen	ts. The standards-	based, voluntary quality	y rating and
4.30	improvement	t system includes:			

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as introduced

5.1 (1) quality opportunities in order to improve the educational outcomes of children so
5.2 that they are ready for school. The:

- 5.3 (2) a framework shall be based on the Minnesota quality rating system rating tool and
   5.4 a common set of child outcome and program standards and informed by evaluation results;
- 5.5 (2)(3) a tool to increase the number of publicly funded and regulated early learning and 5.6 care services in both public and private market programs that are high quality-;

5.7 (4) voluntary participation that ensures that if a program or provider chooses to participate, 5.8 the program or provider will be rated and may receive public funding associated with the 5.9 rating<del>. The state shall develop a plan to link future early learning and care state funding to</del> 5.10 the framework in a manner that complies with federal requirements; and

5.11 (3)(5) tracking progress toward statewide access to high-quality early learning and care
5.12 programs, progress toward the number of low-income children whose parents can access
5.13 quality programs, and progress toward increasing the number of children who are fully
5.14 prepared to enter kindergarten.

(b) In planning a statewide quality rating and improvement system framework in
paragraph (a), the state shall use evaluation results of the Minnesota quality rating system
rating tool in use in fiscal year 2008 to recommend:

5.18 (1) a framework of a common set of child outcome and program standards for a voluntary
 5.19 statewide quality rating and improvement system;

5.20 (2) a plan to link future funding to the framework described in paragraph (a), clause (2);
5.21 and

5.22 (3) a plan for how the state will realign existing state and federal administrative resources
5.23 to implement the voluntary quality rating and improvement system framework. The state
5.24 shall provide the recommendation in this paragraph to the early childhood education finance
5.25 committees of the legislature by March 15, 2011.

- (c) Prior to the creation of a statewide quality rating and improvement system in paragraph
  (a), the state shall employ the Minnesota quality rating system rating tool in use in fiscal
  year 2008 in the original Minnesota Early Learning Foundation pilot areas and additional
  pilot areas supported by private or public funds with its modification as a result of the
- 5.30 evaluation results of the pilot project.
- 5.31 Subd. 3. Evaluation. (a) By February 1, 2022, the commissioner of human services
   5.32 must arrange an independent evaluation of the quality rating and improvement system's
   5.33 effectiveness and impact on:

6.1(1) children's progress toward school readiness;6.2(2) the quality of the early learning and care system supply and workforce; and6.3(3) parents' ability to access and use meaningful information about early learning and6.4care program quality.6.5(b) The evaluation must be performed by a staff member from another agency or a6.6consultant. An evaluator must have experience in program evaluation and must not be6.7regularly involved in implementation of the quality rating and improvement system.6.8(c) The evaluation findings, along with the commissioner's recommendations for6.9revisions, potential future evaluation must:6.10over early childhood programs by December 31, 2024.6.12(d) At a minimum, the evaluation must:6.13(1) analyze the effectiveness of the quality rating and improvement system, including6.14but not limited to reviewing:6.15(i) whether quality indicators and measures used in the quality rating and improvement6.16guality; and6.17(2) perform evidence-based assessments of children's developmental gains in ways that6.18(ii) patterns or differences in observed quality of participating carly learning and care6.19programs compared to programs at other quality rating and improvement system star rating6.20(2) perform evidence-based assessments of children's developmental gains in ways that6.21(2) perform evidence-based assessments of children's developmental gains among children6.22(3) analyze the extent to which differences in developmental gains amon		04/06/21	REVISOR	BD/MN	21-03979	as introduced
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6.13(i) whether quality indicators and measures used in the quality rating and improvement6.13system are consistent with evidence and research findings on early learning and care program6.16quality; and6.17quality; and6.18(ii) patterns or differences in observed quality of participating early learning and care6.19programs compared to programs at other quality rating and improvement system star rating6.20levels and accounting for other factors;6.21(2) perform evidence-based assessments of children's developmental gains in ways that6.22are appropriate for children's linguistic and cultural backgrounds and are aligned with the6.23state early childhood indicators of progress;6.24(3) analyze the extent to which differences in developmental gains among children6.25correspond to the star ratings of the early learning and care programs, providing disaggregated6.26findings by:6.27(i) children's demographic factors, including geographic area, family income level, and6.28racial and ethnic groups;6.29(ii) type of provider, including family child care providers, child care centers, Head Start6.30and Early Head Start, and school-based early childhood providers; and6.31(iii) any other categories identified by the commissioner, in consultation with the	6.13	(1) analy	ze the effectivenes	s of the quality rat	ing and improvement sys	stem, including
<ul> <li>system are consistent with evidence and research findings on early learning and care program</li> <li>quality; and</li> <li>(ii) patterns or differences in observed quality of participating early learning and care</li> <li>programs compared to programs at other quality rating and improvement system star rating</li> <li>levels and accounting for other factors;</li> <li>(2) perform evidence-based assessments of children's developmental gains in ways that</li> <li>are appropriate for children's linguistic and cultural backgrounds and are aligned with the</li> <li>state early childhood indicators of progress;</li> <li>(3) analyze the extent to which differences in developmental gains among children</li> <li>correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>findings by:</li> <li>(i) children's demographic factors, including geographic area, family income level, and</li> <li>racial and ethnic groups;</li> <li>(ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>and Early Head Start, and school-based early childhood providers; and</li> <li>(iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.14	but not limit	ed to reviewing:			
6.17quality; and6.18(ii) patterns or differences in observed quality of participating early learning and care6.19programs compared to programs at other quality rating and improvement system star rating6.20levels and accounting for other factors;6.21(2) perform evidence-based assessments of children's developmental gains in ways that6.22are appropriate for children's linguistic and cultural backgrounds and are aligned with the6.23state early childhood indicators of progress;6.24(3) analyze the extent to which differences in developmental gains among children6.25correspond to the star ratings of the early learning and care programs, providing disaggregated6.26findings by:6.27(i) children's demographic factors, including geographic area, family income level, and6.28racial and ethnic groups;6.29(ii) type of provider, including family child care providers, child care centers, Head Start6.30and Early Head Start, and school-based early childhood providers; and6.31(iii) any other categories identified by the commissioner, in consultation with the	6.15	(i) wheth	er quality indicator	rs and measures us	sed in the quality rating a	nd improvement
<ul> <li>(ii) patterns or differences in observed quality of participating early learning and care</li> <li>programs compared to programs at other quality rating and improvement system star rating</li> <li>levels and accounting for other factors;</li> <li>(2) perform evidence-based assessments of children's developmental gains in ways that</li> <li>are appropriate for children's linguistic and cultural backgrounds and are aligned with the</li> <li>state early childhood indicators of progress;</li> <li>(3) analyze the extent to which differences in developmental gains among children</li> <li>correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>findings by:</li> <li>(i) children's demographic factors, including geographic area, family income level, and</li> <li>racial and ethnic groups;</li> <li>(ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>and Early Head Start, and school-based early childhood providers; and</li> <li>(iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.16	system are co	onsistent with evide	ence and research f	indings on early learning a	and care program
<ul> <li>6.19 programs compared to programs at other quality rating and improvement system star rating</li> <li>6.20 levels and accounting for other factors;</li> <li>6.21 (2) perform evidence-based assessments of children's developmental gains in ways that</li> <li>6.22 are appropriate for children's linguistic and cultural backgrounds and are aligned with the</li> <li>6.23 state early childhood indicators of progress;</li> <li>6.24 (3) analyze the extent to which differences in developmental gains among children</li> <li>6.25 correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>6.26 findings by:</li> <li>6.27 (i) children's demographic factors, including geographic area, family income level, and</li> <li>6.28 racial and ethnic groups;</li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.17	quality; and				
<ul> <li>levels and accounting for other factors;</li> <li>(2) perform evidence-based assessments of children's developmental gains in ways that</li> <li>are appropriate for children's linguistic and cultural backgrounds and are aligned with the</li> <li>state early childhood indicators of progress;</li> <li>(3) analyze the extent to which differences in developmental gains among children</li> <li>correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>findings by:</li> <li>(i) children's demographic factors, including geographic area, family income level, and</li> <li>racial and ethnic groups;</li> <li>(ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>and Early Head Start, and school-based early childhood providers; and</li> <li>(iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.18	(ii) patter	ms or differences i	n observed quality	of participating early lea	rning and care
<ul> <li>(2) perform evidence-based assessments of children's developmental gains in ways that</li> <li>are appropriate for children's linguistic and cultural backgrounds and are aligned with the</li> <li>state early childhood indicators of progress;</li> <li>(3) analyze the extent to which differences in developmental gains among children</li> <li>correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>findings by:</li> <li>(i) children's demographic factors, including geographic area, family income level, and</li> <li>racial and ethnic groups;</li> <li>(ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>and Early Head Start, and school-based early childhood providers; and</li> <li>(iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.19	programs con	mpared to program	ns at other quality r	ating and improvement s	ystem star rating
<ul> <li>are appropriate for children's linguistic and cultural backgrounds and are aligned with the</li> <li>state early childhood indicators of progress;</li> <li>(3) analyze the extent to which differences in developmental gains among children</li> <li>correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>findings by:</li> <li>(i) children's demographic factors, including geographic area, family income level, and</li> <li>racial and ethnic groups;</li> <li>(ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>and Early Head Start, and school-based early childhood providers; and</li> <li>(iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.20	levels and ac	counting for other	factors;		
<ul> <li>6.23 state early childhood indicators of progress;</li> <li>6.24 (3) analyze the extent to which differences in developmental gains among children</li> <li>6.25 correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>6.26 findings by:</li> <li>6.27 (i) children's demographic factors, including geographic area, family income level, and</li> <li>6.28 racial and ethnic groups;</li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.21	<u>(2) perfor</u>	rm evidence-based	assessments of ch	ildren's developmental ga	ains in ways that
<ul> <li>6.24 (3) analyze the extent to which differences in developmental gains among children</li> <li>6.25 correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>6.26 findings by:</li> <li>6.27 (i) children's demographic factors, including geographic area, family income level, and</li> <li>6.28 racial and ethnic groups;</li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.22	are appropria	ate for children's li	nguistic and cultur	ral backgrounds and are a	ligned with the
<ul> <li>6.25 correspond to the star ratings of the early learning and care programs, providing disaggregated</li> <li>6.26 findings by:</li> <li>6.27 (i) children's demographic factors, including geographic area, family income level, and</li> <li>6.28 racial and ethnic groups;</li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.23	state early cl	nildhood indicators	s of progress;		
<ul> <li>6.26 <u>findings by:</u></li> <li>6.27 (i) children's demographic factors, including geographic area, family income level, and</li> <li>6.28 <u>racial and ethnic groups;</u></li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 <u>and Early Head Start, and school-based early childhood providers; and</u></li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.24	(3) analy	ze the extent to wh	nich differences in	developmental gains amo	ong children
<ul> <li>6.27 (i) children's demographic factors, including geographic area, family income level, and</li> <li>6.28 racial and ethnic groups;</li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.25	correspond to	o the star ratings of	the early learning a	nd care programs, providi	ng disaggregated
<ul> <li>6.28 racial and ethnic groups;</li> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.26	findings by:				
<ul> <li>6.29 (ii) type of provider, including family child care providers, child care centers, Head Start</li> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.27	(i) childre	en's demographic f	factors, including §	geographic area, family ir	come level, and
<ul> <li>6.30 and Early Head Start, and school-based early childhood providers; and</li> <li>6.31 (iii) any other categories identified by the commissioner, in consultation with the</li> </ul>	6.28	racial and et	hnic groups;			
6.31 (iii) any other categories identified by the commissioner, in consultation with the	6.29	(ii) type o	of provider, includi	ng family child car	e providers, child care cer	nters, Head Start
	6.30	and Early He	ead Start, and scho	ol-based early chi	ldhood providers; and	
6.32 commissioners of health and education or entity performing the evaluation;	6.31	(iii) any o	other categories ide	entified by the con	nmissioner, in consultatio	on with the
	6.32	commissione	ers of health and ea	ducation or entity	performing the evaluation	<u>1;</u>

Sec. 4.

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7.1	(4) analyze the accessibility for providers to participate in the quality rating and
7.2	improvement system, including ease of application and supports for a provider to receive
7.3	or improve a rating, and provide disaggregated findings by geographic area and type of
7.4	provider, including family child care providers, child care centers, Head Start and Early
7.5	Head Start, and school-based early childhood providers; and
7.6	(5) analyze the availability of providers participating in the quality rating and
7.7	improvement system to families, and provide disaggregated findings by geographic area
7.8	and type of provider, including family child care providers, child care centers, Head Start
7.9	and Early Head Start, and school-based early childhood providers.
7.10	Sec. 5. Minnesota Statutes 2020, section 124D.165, subdivision 2, is amended to read:
7.11	Subd. 2. Family eligibility. (a) For a family to receive an early learning scholarship,
7.12	parents or guardians must meet the following eligibility requirements:
7.13	(1) have an eligible child; and
7.14	(2) have income equal to or less than 185 percent of federal poverty level income in the
7.15	current calendar year, or be able to document their child's current participation in the free
7.16	and reduced-price lunch program or Child and Adult Care Food Program, National School
7.17	Lunch Act, United States Code, title 42, sections 1751 and 1766; the Food Distribution

7.18 Program on Indian Reservations, Food and Nutrition Act, United States Code, title 7, sections

7.19 2011-2036; Head Start under the federal Improving Head Start for School Readiness Act

of 2007; Minnesota family investment program under chapter 256J; child care assistance
programs under chapter 119B; the supplemental nutrition assistance program; or placement
in foster care under section 260C.212.

7.23 (b) An "eligible child" means a child who has not yet enrolled in kindergarten and is:

(1) at least three but not yet <u>five six</u> years of age on September 1 of the current school
year;

(2) a sibling from birth to age <u>five six</u> of a child who has been awarded a scholarship
under this section provided the sibling attends the same program as long as funds are
available;

(3) the child of a parent under age 21 who is pursuing a high school degree or a courseof study for a high school equivalency test; or

7.31 (4) homeless, in foster care, or in need of child protective services.

8.1 (c) A child who has received a scholarship under this section must continue to receive
8.2 a scholarship each year until that child is eligible for kindergarten under section 120A.20
8.3 and as long as funds are available.

(d) Early learning scholarships may not be counted as earned income for the purposes
of medical assistance under chapter 256B, MinnesotaCare under chapter 256L, Minnesota
family investment program under chapter 256J, child care assistance programs under chapter
119B, or Head Start under the federal Improving Head Start for School Readiness Act of
2007.

(e) A child from an adjoining state whose family resides at a Minnesota address as
assigned by the United States Postal Service, who has received developmental screening
under sections 121A.16 to 121A.19, who intends to enroll in a Minnesota school district,
and whose family meets the criteria of paragraph (a) is eligible for an early learning
scholarship under this section.

8.14 Sec. 6. Minnesota Statutes 2020, section 136A.128, subdivision 2, is amended to read:

8.15 Subd. 2. Program components. (a) The nonprofit organization must use the grant for:
8.16 (1) tuition scholarships up to \$5,000 \$10,000 per year for courses leading to the nationally

8.17 recognized child development associate credential or college-level courses leading to an
8.18 associate's <u>degree</u> or bachelor's degree in early childhood development and school-age care;
8.19 and

8.20 (2) education incentives of a minimum of \$100 \$250 to participants in the tuition
8.21 scholarship program if they complete a year of working in the early care and education
8.22 field.

(b) Applicants for the scholarship must be employed by a licensed early childhood or 8.23 child care program and working directly with children, a licensed family child care provider, 8.24 employed by a public prekindergarten program, or an employee in a school-age program 8.25 exempt from licensing under section 245A.03, subdivision 2, paragraph (a), clause (12). 8.26 8.27 Lower wage earners must be given priority in awarding the tuition scholarships. Scholarship recipients must contribute at least ten percent of the total scholarship and must be sponsored 8.28 by their employers, who must also contribute ten at least five percent of the total scholarship. 8.29 Scholarship recipients who are self-employed must contribute 20 percent of the total 8.30 scholarship. 8.31

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9.1	Sec. 7. Mir	nnesota Statutes 20	20, section 136A	128, subdivision 4, is am	ended to read:
9.2	Subd. 4	Administration. A	nonprofit organi	zation that receives a gra	nt under this
9.3	section may	use <del>five</del> ten percen	t of the grant amo	ount to administer the pro	gram.
9.4			<u>HEALTH SUPP</u>	ORT FUNDS FOR CH	ILD CARE
9.5	<b>PROGRAM</b>	<u>18.</u>			
9.6	Subdivisi	on 1. Public healt	h support funds.	(a) The commissioner of	f human services
9.7	shall distribu	te COVID-19 publ	lic health support	funds to eligible child ca	re programs to
9.8	support the h	igher costs to oper	ate safely as define	ned by state and federal p	ublic health
9.9	guidance, inc	luding but not limit	ted to efforts to cre	ate smaller and consistent	child groupings,
9.10	screening pro	ocedures, quarantir	ne periods, cleanin	ng and sanitation, additio	nal sick leave,
9.11	substitute tea	chers, supports for	distance learning	and incentive pay, and ot	her public health
9.12	measures that	t prevent transmiss	sion of COVID-1	9 and protect families and	<u>l staff.</u>
9.13	<u>(b)</u> The c	ommissioner shall	distribute monthl	y base grant awards unde	er subdivision 4
9.14	for a distribu	tion period beginn	ing June 2021 unt	il either December 2021,	until one month
9.15	following the	e end of the peacet	ime emergency de	eclared in response to the	COVID-19
9.16	pandemic, or	until funds are no	longer available,	whichever is sooner.	
9.17	<u>(c)</u> The co	ommissioner shall	distribute monthly	v bonus grant payments u	nder subdivision
9.18	5 for a distril	oution period begir	nning June 2021 t	hrough September 30, 20	23.
9.19	Subd. 2.	Eligible programs	s. (a) The followin	ng programs are eligible t	o receive public
9.20	health suppo	rt funds under this	section:		
9.21	<u>(1)</u> family	y and group family	day care homes l	icensed under Minnesota	Rules, chapter
9.22	<u>9502;</u>				
9.23	(2) child	care centers license	ed under Minnesc	ta Rules, chapter 9503;	
9.24	(3) certifi	ed license-exempt	child care centers	under Minnesota Statute	es, chapter 245H;
9.25	and				
9.26	(4) triball	ly licensed child ca	re programs.		
9.27	(b) Progr	ams must not be:			
9.28	(1) the su	bject of a finding of	of fraud;		
9.29	(2) prohil	oited from receivin	g public funds un	der Minnesota Statutes, s	section 245.095;
9.30	or				

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10.1	(3) under	revocation, susper	nsion, temporary	immediate suspension, c	or decertification,
10.2	regardless of	whether the action	n is under appeal.		
10.3	(c) Public	e health support fur	nds under this sec	tion must be made avail	able to all eligible
10.4	programs on	a noncompetitive	basis.		
10.5	Subd. 3.	Requirements to 1	eceive public he	alth support funds. (a)	To receive funds
10.6	under this see	ction, an eligible pr	ogram must com	olete a monthly application	on for COVID-19
10.7	public health	support funds, att	esting and agreein	ng in writing that the pro	gram has been
10.8	operating and	d serving children	during each mont	h's funding period. An a	pplicant program
10.9	must further	attest and agree in	writing that the p	rogram intends to remai	n operating and
10.10	serving child	ren through the ren	mainder of each n	nonth's funding period. I	Exceptions to this
10.11	operating rec	quirement are:			
10.12	(1) servic	e disruptions that a	are necessary due	to public health guidand	ce to protect the
10.13	safety and he	alth of children an	d child care prog	rams issued by the Cente	ers for Disease
10.14	Control and	Prevention, commi	ssioner of health,	commissioner of human	n services, or a
10.15	local public l	health agency; and			
10.16	(2) planne	ed temporary closu	res for provider v	acation and holidays for	up to three weeks
10.17	over the dura	ution of the funding	g months from Jur	ne 1, 2021, to December	31, 2021, but not
10.18	sequentially.				
10.19	Temporary c	losures must be rej	ported to the Depa	artment of Human Servi	ces using a form
10.20	prescribed by	y the commissioner	. For licensed and	certified centers, only te	emporary closures
10.21	of the entire	program need to be	reported; classroo	om closures or other oper	ating adjustments
10.22	do not need t	to be reported.			
10.23	(b) Provid	ders who close peri	manently for any	reason are subject to reco	overy of funds for
10.24	any period of	f time after program	n closure. Perma	nent closures must be re	ported to the
10.25	Department	of Human Services	s using a form pre	scribed by the commissi	ioner.
10.26	(c) Notwi	ithstanding paragra	phs (a) and (b), i	f the commissioner deter	rmines that the
10.27	temporary or	permanent closure	e of one program	is undertaken to ensure	the continued
10.28	availability o	of services to child	en by another pro	ogram, the commissione	r may issue the
10.29	closed progra	am's public health	support funds to t	he program that has agr	eed to accept the
10.30	children prev	viously cared for by	y the closed progr	am whether or not all th	e children choose
10.31	to go to the re	emaining program a	nd whether or not	the remaining program is	already receiving
10.32	public health	support funds.			
10.33	<u>(d)</u> To rec	ceive funds under t	his section, an eli	gible program must:	

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11.1	(1) conti	nue to comply with	all other require	ments listed in the applica	ation for 2021
11.2		public health suppo		ments listed in the upprice	
					41 <b>C</b> 1- 4-
11.3				thly award periods, and u	
11.4 11.5	COVID-19.		peacetime emerg	gency declared by the gov	ernor relating to
11.5		-			
11.6				<b>rams.</b> (a) An eligible fami	
11.7	program ma	iy receive up to \$1,2	200 in monthly p	ublic health support funds	9 <b>.</b>
11.8	<u>(b) An e</u>	ligible licensed chil	d care center ma	y receive up to \$8,500 in 1	monthly public
11.9	health suppo	ort funds.			
11.10	<u>(c)</u> An e	ligible certified chil	d care center ma	y receive up to \$3,000 in a	monthly public
11.11	health suppo	ort funds.			
11.12	<u>(d) The c</u>	commissioner of hu	man services shal	l calculate monthly base p	ayment amounts
11.13	that are base	ed upon the changin	g needs of provid	lers to comply with public	health guidance
11.14	but do not e	exceed the amounts	in paragraphs (a)	to (c).	
11.15	Subd. 5.	Bonus payment to	o programs. (a) A	An eligible child care prov	ider may receive
11.16	a monthly b	onus payment if the	e provider meets	one or both of the followi	ng criteria:
11.17	<u>(1) the p</u>	orogram currently op	perates or begins	to operate in an area of th	e state with a
11.18	documented	l shortage of child c	are providers bas	sed on the current licensed	l capacity in the
11.19	area compar	red to the estimated	number of childre	en under age six with both	parents working;
11.20	or				
11.21	<u>(2) the p</u>	rogram serves child	lren from familie	s that qualify for the child	l care assistance
11.22	program une	der Minnesota Statu	tes, section 119B	.03 or 119B.05, children f	rom families that
11.23	qualify for e	early learning schol	arships under Mi	nnesota Statutes, section	124D.165, or
11.24	children wit	th disabilities or wh	o are otherwise in	n need of special assistance	e or support.
11.25	<u>(b)</u> The a	amount of a provide	er's bonus payme	nt may be multiplied by a	factor to be
11.26	determined	by the commission	er of human servi	ices that corresponds with	the program's
11.27	star rating in	n the Parent Aware	program under M	linnesota Statutes, section	124D.142.
11.28	(c) The c	commissioner of hu	man services sha	Il determine the amounts	of each type of
11.29	bonus paym	nent in paragraph (a	). The amount for	r a bonus payment under j	paragraph (a),
11.30	clause (1), s	hall be proportiona	te to the number	of children served by the	program. The
11.31	amount for a	a bonus payment une	der paragraph (a).	clause (2), shall be based	upon the number
11.32	of program	slots filled by child	ren that meet the	criteria. The multiplication	on factor under
11.33	paragraph (l	b) shall be tiered ba	sed upon the pro	gram's star rating in the qu	uality rating and

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improvement system under Minnesota Statutes, section 124D.142, with a four-star rating
receiving the highest multiplication factor.

#### 12.3 Sec. 9. CHILD CARE AND DEVELOPMENT BLOCK GRANT ALLOCATION; 12.4 TRANSFER FUNDS FOR EARLY LEARNING SCHOLARSHIPS.

12.5 The commissioner of human services shall allocate \$73,000,000 in fiscal year 2022 and

- 12.6 \$73,000,000 in fiscal year 2023 from the amount Minnesota received under the American
- 12.7 Rescue Plan Act for the child care and development block grant, to be transferred to the
- 12.8 commissioner of education for the early learning scholarship program under Minnesota
- 12.9 Statutes, section 124D.165. For purposes of expending federal resources, the commissioner
- 12.10 of human services shall consult with the commissioner of education to ensure that the
- 12.11 transferred resources are deployed to support prioritized groups of children, including but
- 12.12 not limited to the groups identified in Minnesota Statutes, section 124D.165, while identifying
- 12.13 and implementing any other necessary changes to maintain compliance with the federal
- 12.14 child care and development block grant requirements.

#### 12.15 Sec. 10. <u>CHILD CARE AND DEVELOPMENT BLOCK GRANT ALLOCATION;</u> 12.16 CHILD CARE ASSISTANCE PROGRAM BASIC SLIDING FEE WAITING LIST.

- 12.17 The commissioner of human services shall allocate up to \$33,000,000 in fiscal year 2022
- 12.18 and up to \$33,000,000 in fiscal year 2023 from the amount Minnesota received under the
- 12.19 American Rescue Plan Act for the child care and development block grant, for the basic
- 12.20 sliding fee child care assistance program waiting list under Minnesota Statutes, section
- 12.21 <u>119B.03</u>, subdivision 2.

## 12.22 Sec. 11. <u>CHILD CARE AND DEVELOPMENT BLOCK GRANT ALLOCATION;</u> 12.23 PARENT AWARE PROGRAM EVALUATION.

12.24The commissioner of human services shall allocate \$1,650,000 in fiscal year 2022 from12.25the child care and development block grant funds in the federal fund for the Parent Aware12.26program evaluation in section 4.

## 12.27 Sec. 12. CHILD CARE STABILIZATION FUND ALLOCATION; COVID-19 12.28 PUBLIC HEALTH SUPPORT FUNDS FOR CHILD CARE.

- 12.29 (a) The commissioner of human services shall allocate \$..... in fiscal year 2022 from
- 12.30 the amount Minnesota received under the American Rescue Plan Act for the child care
- 12.31 stabilization fund for COVID-19 public health support funds for child care base grant awards

13.1	in section 8, subdivision 4. This is a onetime allocation available until December 31, 2021,
13.2	or until 60 days after the expiration of the peacetime emergency declared by the governor
13.3	in an executive order that relates to the infectious disease known as COVID-19, whichever
13.4	occurs earlier. Any unobligated or unexpended amounts cancel on January 1, 2022, or 60
13.5	days after the expiration of the peacetime emergency declared by the governor in an executive
13.6	order that relates to the infectious disease known as COVID-19, whichever occurs earlier.
13.7	(b) The commissioner of human services shall allocate \$ in fiscal year 2022 from
13.8	the amount Minnesota received under the American Rescue Plan Act for the child care
13.9	stabilization fund for COVID-19 public health support funds for child care bonus grant
13.10	awards in section 8, subdivision 5. This is a onetime allocation available until September
13.11	<u>30, 2023.</u>
13.12	Sec. 13. CHILD CARE STABILIZATION FUND ALLOCATION;
13.13	ADMINISTRATION AND CHILD CARE SUPPLY INCREASES.
13.14	(a) The commissioner of human services shall allocate \$32,503,300 in fiscal year 2022
13.15	from the amount Minnesota received under the American Rescue Plan Act for the child
13.16	care stabilization fund for administrative costs and to carry out activities to increase the
13.17	supply of child care.
13.18	(b) Of the amount in paragraph (a), up to \$11,000,000 is for:
13.19	(1) administrative costs to administer the child care development grants in paragraph
13.20	(c) and the COVID-19 public health support funds for child care providers in section 8;
13.21	(2) providing technical assistance and support for grant applicants;
13.22	(3) publicizing the availability of the grant programs;
13.23	(4) providing technical assistance to help child care providers understand and implement
13.24	public health guidance; and
13.25	(5) evaluating the results of the grant programs funded by the child care stabilization
13.26	fund, including but not limited to the effects on the available supply of child care, effects
13.27	on child care quality, changes in child care compensation or workforce retention, and effects
13.28	on continuity of care.
13.29	(c) Of the amount in paragraph (a), \$20,000,000 is for one grant of \$8,000,000 to the
13.30	Minnesota Initiative Foundations to identify and fund projects outside the metropolitan
13.31	area, one grant of \$8,000,000 to an intermediary entity to identify and fund projects in the
13.32	metropolitan area, and \$4,000,000 is for a competitive grant process to be administered by

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1	the Departme	ent of Human Serv	vices. Fifty percent	of grant funds must be	used for the
2				aragraph, and 50 percen	
3				e (5) of this paragraph.	
4				d for the following authority	
5	(1) facilit	ate planning proce	esses for communi	ties resulting in a comm	unity solution
6	action plan th	nat guides decisior	n making to sustain	and increase the numbe	er of quality child
7	care provider	rs in the region to	support economic	development;	
	(2) engag	e the private secto	r to invest local res	ources to support the cor	nmunity solution
	action plan a	nd ensure child ca	re is a vital compo	nent of additional region	nal economic
	development	planning process	es;		
	<u>(3) provid</u>	le high quality, loo	cally based training	g and technical assistanc	e to child care
	business own	ers through a lear	ning cohort. Acces	ss to financial and busine	ess development
	assistance mu	ust prepare child c	are businesses for	quality engagement and	improvement by
	stabilizing op	erations, leveragin	g funding from oth	er sources, and fostering	business acumen;
	(4) recruit	t child care progra	ms to participate in	n Parent Aware under Mi	nnesota Statutes,
	section 124D	.142, by providin	g targeted resource	es designed to encourage	high levels of
	participation.	The Minnesota In	itiative Foundation	s must work with local p	artners to provide
	low-cost train	ning, professional	development oppo	rtunities, and curriculun	n. The Minnesota
	Initiative Fou	indations must fur	nd, through local p	artners, an enhanced lev	el of coaching to
	rural child ca	re providers to ob	tain a quality ratin	g through Parent Aware	; and
	<u>(5)</u> fund p	proposals that mod	lify or improve a c	hild care setting that the	applicant
	demonstrates	would result in a	program improver	nent or satisfy a licensir	ng requirement.
	(d) Of the	amount in paragr	raph (a), \$500,000	in fiscal year 2022 and \$	500,000 in fiscal
	year 2023 are	for teacher educat	tion and compensat	ion helps (TEACH) prog	gram grants under
	Minnesota St	atutes, section 13	6A.128.		
	(e) Of the	amount in paragr	aph (a), \$250,000	in fiscal year 2022 and \$	250,000 in fiscal
	year 2023 are	e for retaining earl	ly educators throug	gh attaining incentives no	ow (REETAIN)
	grants under	Minnesota Statute	es, section 119B.19	<u>95.</u>	
	Sec. 14. <u>AI</u>	PROPRIATION	; EARLY LEAR	NING SCHOLARSHI	P PROGRAM.
	\$123,709	,000 in fiscal year	2022 and fiscal ye	ear 2023 is appropriated	from the general
	fund to the co	ommissioner of ed	lucation for the ear	ly learning scholarship	program under
	Minnesota St	atutes, section 12	4D.165. The base	for fiscal year 2024 and	later shall be
	\$70,700,000				

14.33 **<u>\$70,709,000.</u>** 

Sec. 14.

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#### 15.1 Sec. 15. <u>**REVISOR INSTRUCTION.</u>**</u>

- 15.2 The revisor of statutes shall renumber Minnesota Statutes, section 136A.128, in Minnesota
- 15.3 Statutes, chapter 119B. The revisor shall also make necessary cross-reference changes
- 15.4 consistent with the renumbering.