

I. STATEMENT OF POLICY

STEP participants are categorically eligible. For Homeless LICC cases and STEP participants the child care costs charged by the provider are paid at 100%, not to exceed the state maximum rate.

The agency pays a flat rate of authorized low-income child care costs that are charged by the provider. The scale below is used to determine the flat rate that the agency will pay, based on the household's monthly income and the household size. The difference between the amount that the agency pays and the total amount charged by the provider must be paid by the participant. The provider is responsible for collecting this difference. The Participant Required Co-Pay (shown below) represents the portion of the state's flat rate that the participant must contribute, in addition to any other provider charges.

No. in HH	2	3	4	5	Participant Required Co-pay
	0-1602	0-1789	0-2171	0-2519	\$0
	1603-2185	1790-2440	2172-2961	2520-3435	\$2
	2186-2403	2441-2684	2962-3257	3436-3778	\$3
	ABOVE 2403	ABOVE 2684	ABOVE 3257	ABOVE 3778	Not Eligible

No. in HH	6	7	8	9	Participant Required Co-pay
	0-2866	0-2931	0-2997	0-3061	\$0
	2867-3908	2932-3997	2998-4086	3062-4175	\$2
	3909-4299	3998-4397	4087-4495	4176-4592	\$3
	ABOVE 4299	ABOVE 4397	ABOVE 4495	ABOVE 4592	Not Eligible

No. in HH	10	11	12	Participant Required Co-pay
	0-3127	0-3192	0-3224	\$0
	3128-4264	3193-4353	3225-4396	\$2
	4265-4690	4354-4788	4397-4836	\$3
	ABOVE 4690	ABOVE 4788	ABOVE 4836	Not Eligible