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Social Services Proposals

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COMMITTEE ON FINANCE
UNITED STATES SENATE

RUSSELL B. LONG, *Chairman*



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SOCIAL SERVICES PROPOSALS: BACKGROUND AND SUMMARY

Legislation in 1972

Rapid rise in Federal funds for social services.—Like Federal matching for welfare payments, Federal matching for social services prior to fiscal year 1973 was mandatory and open-ended. Every dollar a State spent for social services was matched by three Federal dollars. In 1971 and 1972 particularly, States made use of the Social Security Act's open-ended 75 percent matching to increase at a rapid rate the amount of Federal money going into social services programs.

The Federal share of social services was about three-quarters of a billion dollars in fiscal year 1971, about \$1.7 billion in 1972, and was projected to reach an estimated \$4.7 billion for fiscal year 1973. Faced with this projection, the Congress enacted a limitation on Federal funding as a provision of the State and Local Fiscal Assistance Act of 1972.

Federal funds for social services limited in 1972.—Under the provision in the 1972 legislation, Federal matching for social services to the aged, blind, and disabled, and for services provided under the program of aid to families with dependent children was subjected to a State-by-State dollar limitation, effective beginning fiscal year 1973. Each State is limited to its share of \$2.5 billion based on its proportion of population in the United States.

Services necessary to enable AFDC recipients to participate in the work incentive program are not subject to the limitation described above; they continue, as under prior law, with 90 percent Federal matching and with funding of these services limited to the amounts appropriated.

1973 Regulations Limiting Social Services Programs

In 1973, the Department of Health, Education, and Welfare proposed to completely revamp the regulations governing the operations of the social services program. In part, these regulations were intended to implement the 1972 legislation which had limited funding to \$2.5 billion and had imposed certain other requirements. However, the HEW proposals went far beyond what was called for by the legislation. In addition to imposing a number of new administrative and procedural requirements on the State welfare departments, the HEW regulations would have changed the basic nature of the social services program by greatly curtailing the types of services which could be provided and by restricting eligibility for services to those individuals who were actually on welfare or who had incomes which were quite close to the welfare eligibility level.

Before the new regulations could become effective, legislation was enacted prohibiting their implementation since the extensive nature of the proposed changes clearly required legislative rather than administrative resolution.

Senate Action on Social Services in 1973 and 1974

In late 1973, the issue of revisions in the social services program was considered by the Committee on Finance. The legislation reported to the Senate by the committee would have retained the requirements of prior law which obligated the States to provide services to welfare recipients to help them attain self-sufficiency. However, the bill would have specifically eliminated any Federal restrictions on the types of social services which States could provide or any limits on the income of individuals applying for services. In other words, to the extent any State had an allocation of Federal social services funds exceeding what was needed to meet its obligations to welfare recipients, the State would have been free under the 1973 Finance Committee bill to use those funds for whatever services to whatever individuals the State found appropriate.

The Senate approved the committee's revenue-sharing approach with two amendments. One of the amendments would have specifically required that certain Federal standards be met in the case of any child care services supported by Federal social services funds. The second amendment would have required States to provide at least three types of services (determined by the States) for the aged, blind, and disabled.

Subsequent to Senate passage of the bill, the House of Representatives declined to meet in conference on the legislation during the remainder of 1973 and during 1974. Toward the end of 1974, however, the House passed a separate social services bill. The Finance Committee substituted its revenue-sharing approach to services for the House bill and the Senate again agreed to the committee proposal. The conference agreement reached on this matter, however, largely followed the House approach except that the Senate floor amendment requiring three types of services for the aged, blind, and disabled was adopted, as was the Senate version of child care standards (which were somewhat less stringent than those in the House bill).

The Social Services Amendments of 1974

The conference agreement reached at the end of 1974 on social services legislation was enacted as Public Law 93-647, the Social Services Amendments of 1974. This legislation removed social services programs from their prior close connection with cash public assistance programs and set up a separate social services title in the Social Security Act—title XX. In general, the new law represented a compromise between the earlier administration approach of narrowly limiting the types of services which could be provided and the types of individuals to whom they could be

provided and the approach in the Senate bill which would have left these decisions almost entirely to the States.

Types of services.—The new title XX social services law sets forth five goals which the program is supposed to serve:

- (1) achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency,
- (2) achieving or maintaining self-sufficiency, including reduction or prevention of dependency,
- (3) preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families,
- (4) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care, or
- (5) securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

The law specifically provides, however, that the decision as to whether a given service actually does serve one of the goals is a matter for State determination and not subject to review by the Department of Health, Education, and Welfare. However, the new law contains a listing of certain types of services which are specifically ineligible for Federal funding under the program. These include construction of facilities, cash benefits, medical and institutional services except in certain circumstances, and certain types of educational services.

Eligibility for services.—The regulations issued by the Department of Health, Education, and Welfare in 1973 would have established firm income limitations on social services programs so that services could have been provided only to actual welfare recipients or to individuals with incomes quite close to the welfare level. The Senate bill would have left to the States the determination of what income limits, if any, to impose on service recipients who were not eligible for welfare. Title XX adopted the approach of setting absolute income limitations (except for referral services and protective services) on services to nonwelfare recipients, but it set these limits at much higher levels. The new law permits States to provide social services only to individuals with incomes below 115 percent of State median income (relative to family size), and fees must be charged for services to individuals with incomes above 80 percent of State median income (relative to family size).

Program administration.—Prior to 1974 social services programs were part of the cash public assistance programs. These programs were administered by the States through their welfare departments (or through local welfare departments under State supervision). The State developed a plan for each program which it submitted to the Department of Health, Education,

and Welfare. A plan once approved remained in force, although amendments to it could be made from time to time.

The new title XX social services program departs substantially from this traditional welfare model. While the new title XX requires State plans to include many of the elements of assistance plans under other titles (e.g. appeal procedures, merit personnel systems, disclosure safeguards), it departs from past practice by requiring each State to redevelop its plan annually. The present statute requires public notification of the plan contents, a period for the acceptance of comments, and specifies the items to be covered (e.g. types of services to be provided, categories of individuals to be served, geographic availability of services, etc.). HEW regulations expand upon these provisions by requiring States to publish descriptions of the plan in display advertisements in the newspaper having widest circulation in each geographic area of the State, the establishment of toll-free telephone service to answer inquires on the plan, and similar requirements designed to assure wide public availability.

Limitation on funding.—The new title XX social services program retains the overall \$2.5 billion annual limit on social services funding as enacted in 1972. This is allocated among the States on the basis of population and unused amounts are not reallocated. (Under the 1974 legislation, provision was made for a portion of any unused funds to be made available to the territories with these limits: Puerto Rico—\$15 million, Guam and the Virgin Islands—\$0.5 million each).

The Question of Group Eligibility

Under the social services programs as they existed prior to the 1974 amendments, States sometimes provided certain services to members of groups without requiring an individual determination of eligibility. For example, services provided through a senior citizen center would be made available to all elderly persons without any requirement that the individual demonstrate that he was a welfare recipient or that his income was below a certain level. Similarly, a family planning clinic might be established to serve all residents of a low-income neighborhood, and the services would be provided without individual income determinations.

The 1974 Senate approach to services would have left States free to continue such practices as they found appropriate. The legislation which was enacted, however, specifically requires that services be provided only to persons with incomes below certain limits. This requirement can be complied with only if the income of those served is, in fact, determined. The regulations originally issued by the Department of Health, Education, and Welfare, therefore, required that when the title XX program became effective on October 1, 1975, States would have to determine the income eligibility of recipients.

Because of objections raised by various groups and particularly by the aged, the Department subsequently modified this regulation to permit

States which had been making group eligibility determinations in the quarter prior to the October 1, 1975 effective date to defer coming into compliance with the law until March 31, 1976. Then, in February of 1976, the Department again modified this regulation to permit States which had come into compliance with the new law to revert to noncompliance if they had used group eligibility determinations in any of the three quarters preceding October 1, 1975. Again, the Department said that it would permit noncompliance only through March 31, 1976.

Under the program of Aid to Families with Dependent Children, regulations require that eligibility be redetermined once every six months. The March 31, 1976 cutoff date in the group eligibility regulation seems to have been chosen by the Department on the basis of analogy since it is six months after the October 1, 1975 effective date of title XX. However, there is no statutory basis for allowing group eligibility determinations before but not after March 31, 1976.

The States which use group eligibility are: Hawaii, Illinois, Iowa, Michigan, Minnesota, New York, Oregon, and Pennsylvania.

H.R. 12455 (extension of regulations).—On March 16, 1976, the House of Representatives passed H.R. 12455. This bill would extend the operation of the departmental regulations beyond March 31 and up to September 30, 1976. This would allow States which are now providing social services on a group eligibility basis to continue to do so for an additional 6 months. The House report indicates an intention to pass additional legislation before the expiration of that period. While the House report does not specifically indicate what that further legislation will be, it seems likely that it will involve some form of further relief from the current law requirements.

Alternative proposals.—Since there appears to be no intention under the House bill ever to fully enforce the existing law mandate for individual income determinations as a condition of Federal social services funding, the committee may wish to consider a permanent revision in this requirement.

One approach to permanent revisions is contained in S. 2157, introduced by Senator Javits, which would permanently permit group eligibility decisions for certain types of services provided to the aged. This approach would eliminate the problem as it affects the group apparently most strongly interested in this change. However, there are other types of services which are provided on a group eligibility basis (e.g. family planning). States might want to modify this proposal to permit other specified services to be exempted from individual income tests.

Another approach would be to permit all States wishing to provide social services on a group eligibility basis to do so. This is the approach employed in the social services revision bill which has been submitted to Congress by the administration. This proposal was introduced by Senator Curtis as S. 3061.

If the committee wishes, the question of whether Federal income limits should be continued at all could be considered. The approach taken by the committee and the Senate in 1973 and 1974 would have left the decision of setting eligibility limits and determining whether those limits were met entirely to State option. Since the question of eligibility for services is one of the central issues involved in social services policy, the committee might wish to consider whether other changes in the program should be made. The major alternatives to the present law approach are the revenue-sharing approaches contained in the administration proposal and in the 1973 and 1974 Senate bills. The Administration bill would eliminate State matching requirements, require that child care meet State instead of Federal standards, remove all requirements relating to fees for services, and increase the amount of Federal funds which must be targeted toward welfare and other low-income families. The approach in the 1973-1974 Finance Committee bills would retain State matching requirements and Federal standards for child care services. Otherwise it would allow States complete flexibility as to the type of services to be provided and the eligibility requirements to be imposed. These two approaches are compared with present law in the table on page 9.

Regulations governing eligibility determinations.—On April 2, 1976, the Department of Health, Education, and Welfare issued revised regulations for the social services program which eliminate requirements that applicants for services provide sufficient information and documentation to “lead a reasonable person to conclude” that they meet the eligibility requirements. Instead, the new regulations authorize the States to employ whatever eligibility determination procedures they wish, “including a declaration method.” The April 2 regulations also delete a requirement that applications for services be made subject to penalty for perjury and substitute a requirement that applicants certify that they are giving correct information.

While the new HEW regulations do not permit group eligibility determinations, they do authorize States to use a much less rigorous eligibility determination procedure than was previously required.

Child Care

Earlier this year, the committee approved legislation which would retain the basic child care standards in the social services statute but would ease their implementation by providing additional funding at a rate of \$250 million per year and by granting certain waivers in the case of facilities serving only a few federally funded children. The bill also proposed to provide added tax credit incentives for the employment of welfare recipients in child care jobs. In addition, the bill contained a section making permanent some temporary social services provisions related to the treatment of drug addicts and alcoholics.

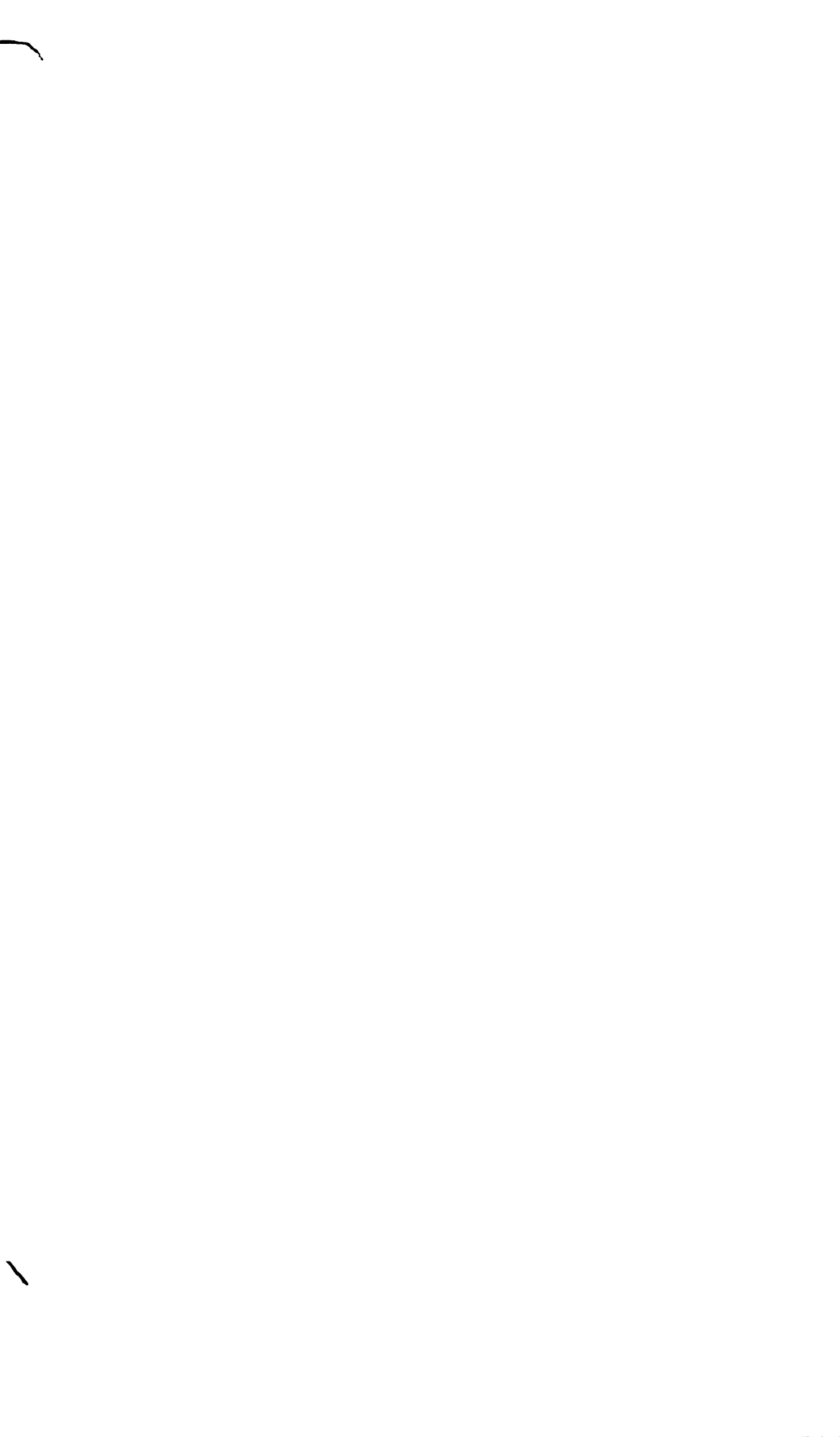
The bill as reported by the Committee was approved by the Senate. The provisions of the Senate bill were essentially accepted by the House of Representatives but, for reasons related to the Congressional budget process, on a temporary basis only—through September 30, 1976. This modified bill was vetoed by the President and the veto was sustained in the Senate on May 5 by a vote of 60 to 34.

When the child care legislation was under consideration by the committee, a motion was made by Senator Packwood to amend the bill to provide for the elimination of Federal child care staffing requirements. This motion was defeated on a vote of 9 to 9. During Senate consideration of the measure, Senator Packwood offered an amendment which was similar to his motion in committee except that the floor amendment would also have eliminated any requirement that the additional funding be used for child care services. Under the amendment, the additional funding and the provisions related to tax credits for hiring welfare recipients would have been retained.

A more detailed description of the bill as previously approved by the committee and the Senate is printed on page 23.

CHILD CARE CENTER STAFFING REQUIREMENTS UNDER LAW AND HEW REGULATION

Age of child	Maximum number of children per staff member	
Under 6 weeks.....	1	Required by regulation.
6 weeks to 3 years.....	4	Required by regulation.
3 to 4 years.....	5	Required by law.
4 to 6 years.....	7	Required by law.
6 to 9 years.....	15	} Maximum number allowed by law (though Secretary of HEW may lower the maxi- mum number of children per staff member, thus in- creasing the staff required).
10 to 14 years.....	20	



Appendix A

**Comparison of Social Services Provisions: Present Law, 1974 Senate
Bill, Administration Proposal (S. 3061)**



Comparison of Social Services Provisions: Present Law, 1974 Senate Bill, Administration Proposal

Present law

1974 Senate bill

Administration proposal (S. 3061)

1. Authorization

Provides for Federal matching for State expenditures for social services up to an annual ceiling of \$2,500,000,000.

Authorizes open-ended Federal matching for personnel training or retraining related to the provision of services.

Same as present law.

Provides for Federal payments to the States of their full allotments under the \$2,500,000,000 ceiling for social services.

Includes within this ceiling State expenditures for personnel training and retraining directly related to the provision of services under the title. However, a savings clause is provided for States which exceed their ceiling in fiscal year 1976.

Same as present law.

Services are authorized under title XX of the Social Security Act--Grants to States for Services

Services for families are authorized as part of the AFDC program under title IV-A of the Social Security Act; services for the aged, blind, disabled are authorized under title VI.

2. Allotment to States

Provides for allocation of funds (within \$2,500,000,000 ceiling) among the States on the basis of State population. Amounts certified by States as in excess of their needs are available for reallocation to Puerto Rico (\$15,000,000), Guam (\$500,000) and the Virgin Islands (\$500,000).

Same as present law, except provides that funds not used by the States within their original allotment under the \$2,500,000,000 ceiling will be reallocated in the following way: any such excess funds will first be used to provide funding to Puerto Rico, Guam, and the Virgin Islands (on the basis of population). Remaining funds will be reallocated to States needing them in proportion to relative population.

Provides for allotment of the full \$2,500,000,000 amount to the States on the basis of State population. Authorizes a separate appropriation of \$15,000,000 for Puerto Rico, and \$500,000 each for Guam and the Virgin Islands.

Comparison of Social Services Provisions: Present Law, 1974 Senate Bill, Administration Proposal—Con.

Present law	1974 Senate bill	Administration proposal (S. 3061)
3. Federal Matching		
<p><i>Matching formula.</i> Provides 75 percent Federal matching for social services (including the costs of personnel engaged in the delivery of social services); provides 90 percent Federal matching for family planning services and supplies. (Federal matching is subject to the above limit of \$2,500,000,000.) States must provide matching funds.</p>	<p><i>Matching formula.</i> Same as present law.</p>	<p><i>Matching formula.</i> Provides Federal funds without any requirement for State matching.</p>
<p><i>Matching limitation.</i> Provides that an amount equal to 50 percent of Federal funds used by a State must be used for services to persons receiving or eligible to receive AFDC, SSI (including State supplementary payments), or Medicaid.</p>	<p><i>Matching limitation.</i> Provides for State determination as to distribution of funds. (However, States must provide certain required services to AFDC and SSI recipients.)</p>	<p><i>Matching limitation.</i> Same as present law except that 75 (rather than 50) percent of Federal funds must be used for services to designated recipient groups. Adds to these groups individuals whose income is below the poverty line.</p>
4. Eligibility for Services		
<p>In addition to persons receiving cash assistance, other individuals may be provided services at State option if their income does not exceed 115 percent of the State median income for a family of 4, adjusted for family size. There are no income eligibility requirements for information and referral services, or for protective services. There is no provision for group eligibility.</p>	<p>Provides for State determination of who is eligible for services, although certain services must be provided to AFDC recipients and 3 types of services must be provided to SSI recipients.</p>	<p>Generally, the same as present law except adds a provision allowing a State to provide a service without individual determinations of eligibility if it concludes that substantially all of the persons who receive the service meet the 115 percent income limitation requirement. Factors to be considered are the geographic area in which the service is provided, the characteristics of the community to which it is provided, the nature of the service, the conditions (other than income) of eligibility to receive it, or other factors. The State must conduct an annual survey to determine the proportion of individuals the cost of whose services is creditable toward meeting the requirement that 75 percent of funds be used for welfare recipients and others with low income.</p>

5. Fees for Services

08-000-70-3
Provides that fees must be charged for services to nonwelfare recipients with incomes below the 115 percent of State median income level but above 80 percent of State median income or above 100 percent of national median income. To the extent permitted by HEW regulations, fees may be charged for services to welfare recipients and to persons with incomes below these levels.

Has no provision for fees for services generally, but retains prior law requirement that States are to provide for payment of fees for child care services in cases where families are able to pay part or all of the cost of care.

Deletes the provisions in present law relating to fees for services (i.e. eliminates both requirements and limitations).

6. Kinds of Services

Provides for services directed at the goal of (1) achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency, (2) achieving or maintaining self-sufficiency, including reduction or prevention of dependency, (3) preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating, or reuniting families, (4) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care, or (5) securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

Services may include but are not limited to child care services, protective services for children and adults, services for children and adults in foster care, services related to the management and maintenance of the home, day care services for adults, transportation services, training and related services, employment services, information, referral and

Requires that State plans provide for specified services for each child and relative who receives AFDC (as was required in law prior to title XX).

Also requires States to provide at least 3 types of services for recipients of SSI.

Provides otherwise that States may provide such social services as each State determines to be appropriate for meeting any of the following goals: (1) self-support goal, (2) family-care or self-care goal, (3) community-based care goal, and (4) institutional care goal. Services include day care services for children, child care services for children with special needs, services for children in foster care, protective services for children, family planning services, protective services for adults, services for adults in foster care, homemaker services, chore services, home delivery or congregate meals, day care services for adults, health related services, home management and other functional educational services, housing improvement services, a full range of legal services, transpor-

Same as present law, but eliminates the requirement that the State plan must provide for at least 1 service directed at each of the 5 goals, and that 3 types of services must be provided to SSI recipients.

Comparison of Social Services Provisions: Present Law, 1974 Senate Bill, Administration Proposal—Con.

Present law	1974 Senate bill	Administration proposal (S. 3061)
6. Kinds of Services—Con.		
<p>counseling services, the preparation and delivery of meals, health support services, appropriate combinations of services designed to meet the special needs of children, the aged, the mentally retarded, the blind, the emotionally disturbed, the physically handicapped, and alcoholics and drug addicts.</p>	<p>tation services, educational and training services for adult family members and services to assist children to obtain education and training to their fullest capacities, employment services or training leading to employment, information and referral services, special services for the mentally retarded, special services for the blind, services for alcoholism and drug addiction, special services for the emotionally disturbed, special services for the physically handicapped, and any other services which the State finds appropriate to meeting the 4 listed goals.</p>	<p>Restricts the Secretary from denying payment with respect to any expenditure on the ground that it is not an expenditure for the provision of a social service or is not an expenditure for the provision of a service directed at one of the specified goals.</p> <p>State plans must provide for at least 1 service directed at each of the 5 goals, and for at least 3 types of services for SSI recipients.</p>
<p>Restricts the Secretary from denying payment with respect to any expenditure on the ground that it is not an expenditure for the provision of a social service or is not an expenditure for the provision of a service directed at one of the specified goals.</p> <p>State plans must provide for at least 1 service directed at each of the 5 goals, and for at least 3 types of services for SSI recipients.</p>	<p>Provides that except for the mandated services for recipients of cash assistance, States are not to be restricted in determining what services they will make available, and in determining what constitutes a social service.</p>	<p>Repeals the prohibitions in present law relating to medical and remedial care; education services; services to inpatients or residents of hospitals, skilled nursing facilities, intermedicare care facilities and foster family homes; and medicare-eligible services.</p>

7. Prohibited Expenditures

Prohibits Federal matching for: medical or remedial care (other than family planning) unless it is an integral but subordinate part of an allowable service; educational services customarily provided by the State without cost and without regard to income; services to in-

Leaves the States complete discretion to determine which types of expenditures constitute services eligible for matching.

Repeals the prohibitions in present law relating to medical and remedial care; education services; services to inpatients or residents of hospitals, skilled nursing facilities, intermedicare care facilities and foster family homes; and medicare-eligible services.

patients or residents of hospitals, skilled nursing facilities, intermediate care facilities, prisons, or foster family homes except under specified circumstances; cash payments as a service; and medicare-eligible services. The law also prohibits, under all circumstances, matching for costs of purchasing, construction, or making major modifications in land, buildings, or equipment.

Retains the prohibitions for most services in prisons, for cash payments as a service, and for costs relating to construction of facilities.

8. Child Care Standards

Requires in the case of care in the child's home, standards established by the State which are reasonably in accord with recommended standards of national standard-setting organizations concerned with the home care of children. In the case of care provided outside the home, the care must meet the 1968 Federal Interagency Day Care Requirements, except that: educational services are recommended but not required, staffing standards for children under 3 are prescribed by the Secretary, and child-staff ratios for school-age children are less stringent than those provided in the Requirements.

Similar to present law.

Eliminates the requirements in present law relating to standards for child care and provides instead that (1) in-home care must meet published standards which are in effect within the State, and (2) an entity providing out-of-home care must be licensed or registered by the State and required to conform to published standards in effect in the State. Such standards must have provisions related to admission policies safety, sanitation, and protection of civil rights. A State plan must also provide for the establishment or designation of a State authority to be responsible for the enforcement of standards and licensing requirements.

If a State program for services includes child day care services the State plan must provide for the establishment or designation of a State authority which shall be responsible for establishing and maintaining standards for such services which are reasonably in accord with recommended standards of national organizations concerned with standards for such services, including standards related to admission policies, safety, sanitation and protection of civil rights.

No comparable provision.

Comparison of Social Services Provisions: Present Law, 1974 Senate Bill, Administration Proposal—Con.

Present law	1974 Senate bill	Administration proposal (S. 3061)
8. Child Care Standards—Con.		
<p>The Secretary is required to submit to the Senate and House, during the first 6 months of 1977, an evaluation of the appropriateness of the present law requirements with recommendations for modification. After 90 days he may make such modifications as he determines appropriate.</p>	<p>No comparable provision.</p>	<p>Retains the provision in present law for evaluation by the Secretary of the appropriateness of the child care standards currently provided in law. Provides, however, that instead of recommending and implementing changes in those requirements the Secretary shall submit a model law or standards recommended for adoption by the States.</p>
9. Maintenance-of-Effort		
<p>Requires that a State may not spend less for social services than it spent for services in fiscal year 1973 or 1974, whichever is less. No State, however, is required to spend more than is needed to entitle it to its full allotment of Federal funds under the \$2,500,000,000 annual limit.</p>	<p>Requires that any increase in Federal funding used by a State to purchase social services from public agencies other than the welfare agency must result in an increase in the level of services and not represent the purchase of the same services previously purchased with State funds.</p>	<p>Eliminates the maintenance-of-effort provision in present law.</p>
10. State Reporting Requirements		
<p>Requires States to make such reports concerning their use of Federal social services funds as the Secretary by regulation may provide. For non-compliance the Secretary can terminate payment to the State. As an alternative, he may impose a reduction of 3 percent in payments.</p>	<p>Provides that the Secretary shall require the States to make reports concerning the use of social services funds, which shall be the basis of the Secretary's annual reports to the Congress.</p>	<p>Retains the provisions in present law for State reporting and for termination of payments in case of failure to comply. Amends present law to allow the Secretary to impose a penalty of up to 3 percent reduction in payments instead of a flat 3 percent.</p>

11. Requirements Relating to State Administration

Requires each State to have a plan with provisions relating to fair hearings, use or disclosure of information, designation of an appropriate agency to administer the services program, establishment and maintenance of personnel standards on a merit basis, no durational residency or citizenship requirements, standard-setting authorities for care provided in institutions, foster homes, and other child care facilities and arrangements. Also requires that the services program must be in effect in each subdivision of the State.

State plans must be approved by the Secretary. As a penalty for noncompliance, HEW may terminate payments to the State or, as an alternative, impose a reduction of 3 percent in payments for parts of the plan with respect to which there is a finding of noncompliance.

A State plan for services must provide that it shall be in effect in all political subdivisions of the State; for the establishment or designation of a single State agency to administer the plan or to supervise the administration of the plan; for the establishment and maintenance of personnel standards on a merit basis; for fair hearings; and for the training and use of paid subprofessional staff and the use of volunteers.

If in the administration of the plan a State fails to comply with required provisions the Secretary is to withhold payments (or payments may be limited to parts of the plan not affected by the failure) until he is satisfied that there is no longer failure to comply.

Retains the State plan requirements in present law, but eliminates the requirement for approval of the plan by the Secretary. Requires instead that each State shall have procedures, not subject to the authority of the agency administering the plan, for the continuing determination of the State's compliance with its plan, and for periodically reporting on that compliance to the chief executive officer of the State and the Secretary.

Each State must certify annually that it has complied with each provision of the plan, inform the Secretary of any substantial failure to comply, and submit to the Secretary for his approval the procedures to be used by the State for determining its own compliance with the plan.

If HEW finds noncompliance with the requirements, it may terminate payments to the States or, as an alternative, impose a reduction of up to 3 percent in payments for each part of the plan with respect to which there is a finding of noncompliance.

If the Secretary disapproves or finds that the State has substantially failed to comply with the certification procedures he shall terminate payments until he is satisfied that there will no longer be failure to comply.

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12. Personnel Standards

Requires States to use such methods relating to the establishment and maintenance of personnel standards on a merit basis as are found by the Secretary to be necessary for the proper and efficient operation of the program.

Same as present law.

Requires States to provide assurance that the hiring, employment, and retention of personnel engaged in the administration of the social services program will be consistent with the merit principles in sec. 2 of the Intergovernmental Personnel Act of 1970.

Comparison of Social Services Provisions: Present Law, 1974 Senate Bill, Administration Proposal—Con.

Present law	1974 Senate bill	Administration proposal (S. 3061)
13. State Audit and Assessment Requirements		
No provision requiring State audit and assessment procedures.	Same as present law.	<p>A State plan must provide, consistent with the Secretary's regulations, for (1) an annual audit of expenditures conducted by an auditor of the State not under the control of the agency engaged in administering the services program, or by a certified public accountant or auditing firm, (2) an annual assessment of the implementation of the plan, and (3) an annual report, which is to be published, of that audit and assessment.</p> <p>The plan must also provide that the Secretary and the Comptroller General of the United States shall have access, for the purpose of audit and examination, to any documents or records which may be related to the use of social services funds.</p>
14. Social Services Plans		
Requires the governor of each State (or other official if provided by State law) to publish and make generally available a proposed comprehensive annual services program plan at least 90 days before the beginning of the State's "services program year" (i.e. either the State or Federal fiscal year). Public comment must be accepted for 45 days. Thereafter and before the start of the services year, the Governor must publish a final annual services plan with an explanation of how and why it differs from the proposed plan.	Requires State plans for services under titles VI and IV-A of the Social Security Act, as in effect prior to title XX. The plans must be approved by the Secretary. Once approved, they remain in force permanently but may be revised by the State with the approval of the Secretary. Also requires that States compile and make public, at least 45 days before the start of a fiscal year, a list of the social services to be provided during that year. The notice must indicate the types of services, anticipated expenditures for each type of	Generally the same as present law, but allows the Secretary to waive compliance with requirements as to the number of days in which any action must be taken if there is good cause. Also extends the planning requirements to services not assisted under the title XX program, and adds a requirement for consultation with State, local, and other public and private agencies and organizations in the State concerned with social services. Amends the requirement that a final plan must include an explanation of how and why it differs

Any amendment to a final comprehensive services program plan must be published with at least 30 days allowed for public comment.

Proposed and final plans and amendments must be approved by the Governor or other official specified in State law. Federal matching is to be denied for services not provided in accordance with approved plans.

The annual plan must include the objectives to be achieved; services to be provided; categories of individuals to be served; geographic areas in which services are to be provided; a description of planning, evaluation and reporting activities; sources of resources to be used; a description of the organizational structure through which the program is administered; a description of how the services will be coordinated with plans under other titles of the Social Security Act and other programs for the provision of human services; estimated expenditures under the program; and a description of the steps taken to assure that the needs of all residents and all geographic areas were taken into account in developing the plan.

service, and the criteria for determining eligibility for each type. The report may be modified at any time.

State plans must provide for the coordination of planning and delivery of services with programs under the Older Americans Act, the Developmental Disabilities Act, the Comprehensive Employment and Training Act, and others.

from the proposed plan to require instead a summary of the comments received, the disposition thereof, and an explanation.

15. Limitation on HEW Regulatory Authority

Provides that HEW regulations must be published at least 60 days before the start of the State program year in which they are to become effective.

No specific provision. (However, the bill contains specific language that the provisions of the social services titles are not to be construed in such a way as to limit State flexibility in the operation of its services program.)

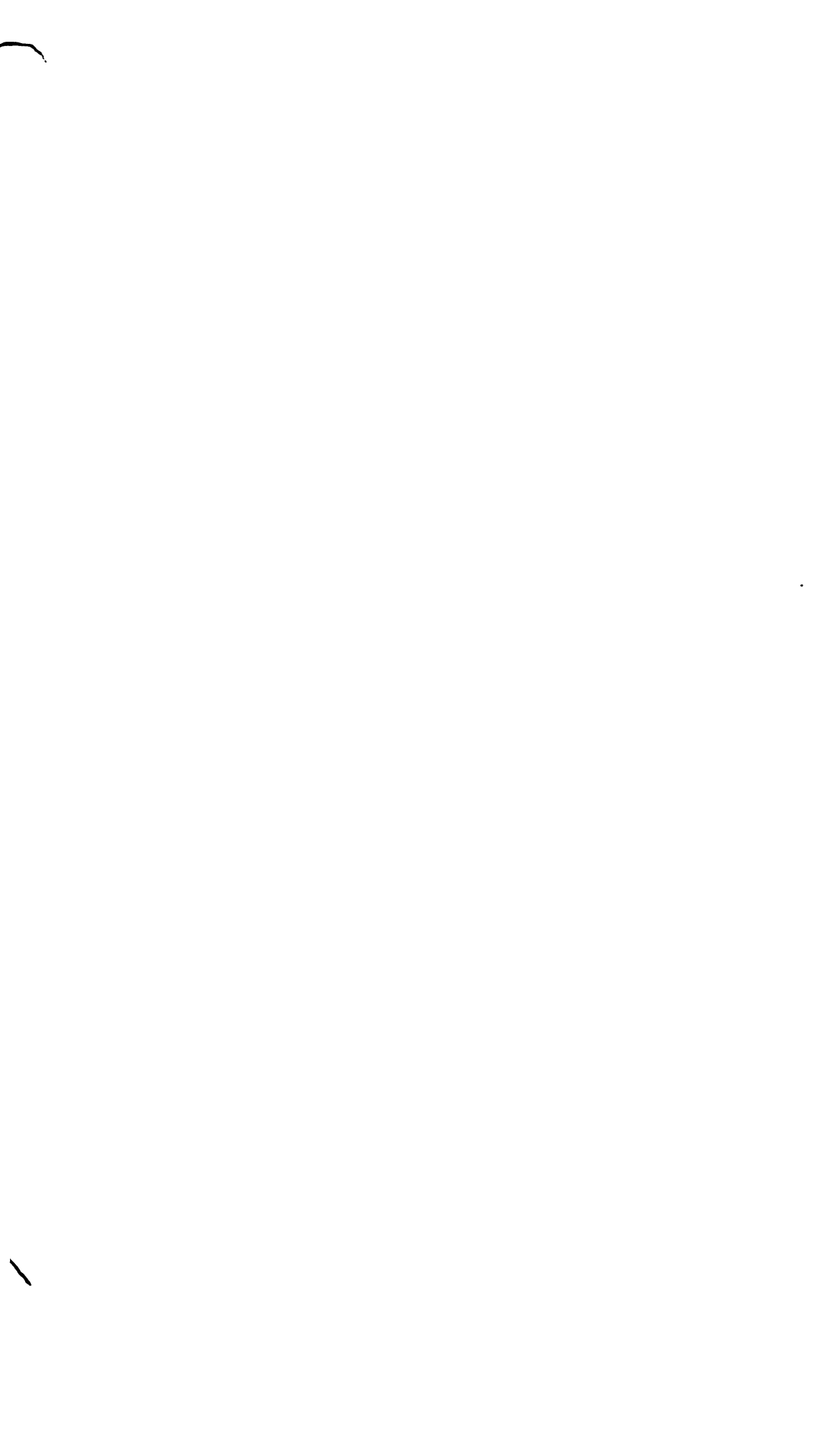
Repeals the present law limitation.

Comparison of Social Services Provisions: Present Law, 1974 Senate Bill, Administration Proposal—Con.

Present law	1974 Senate bill	Administration proposal (S. 3061)
16. Nondiscrimination		
No specific provision.	No specific provision.	The prohibitions of title VI of the Civil Rights Act against the exclusion from participation in, the denial of benefits to, or the subjection to discrimination of any person on the ground of race, color, or national origin as they apply to social services are expanded to also prohibit discrimination on the basis of sex.

Appendix B

Description of Senate Child Care Bill (H.R. 9803)



DESCRIPTION OF CHILD CARE BILL (H.R. 9803), AS PASSED BY THE SENATE

Earlier this year, the Committee on Finance recommended and the Senate approved legislation which would retain the basic Federal child care standards in the new social services legislation but would provide additional Federal funding to assist States in meeting those standards, would increase tax incentives for hiring welfare recipients in child care jobs, and would permit waiver of the Federal standards in certain instances. This bill was permanent as passed by the Senate but, for procedural reasons related to the Congressional Budget Act, the House agreed to the legislation (with some modifications) on a temporary basis through September 30, 1976. This bill was vetoed by the President, and, on May 5, 1976, the Senate sustained the veto by a vote of 60 to 34.

Additional Federal Funding for Child Care

The Social Services Amendments of 1974 require that child care services funded under the social services program meet certain minimum Federal standards with respect to staffing and other matters. Though compliance with these standards will increase the cost of providing child care services in many States, the 1974 legislation did not increase the \$2.5 billion limitation on Federal social services funding which was imposed in 1972. To help States meet the costs of complying with these standards, the bill would provide for increasing the maximum allowable funding under the program by \$250 million per year. The new funding would be available only for child care and would be available to match State expenditures on an 80 percent matching basis (as compared with 75 percent for most other social services programs). Until fiscal year 1978, 20 percent of the additional Federal funding provided by the bill would be reserved for allocation by the Department of Health, Education, and Welfare to those States determined to have particular funding problems related to complying with Federal child care standards. (See table 3, page 28.)

Tax Credit for Employing Welfare Recipients in Child Care

The bill was designed to encourage States to meet the Federal child care staffing requirements by employing welfare recipients. It broadened in several respects the present tax credit of 20 percent of the wages paid to a welfare recipient or former welfare recipient (with a maximum annual credit of \$1,000 per employee). For child care providers, it made the tax

credit available through 1980 and provided that it will be available on a refundable basis so as to benefit all providers, including public and non-profit providers and those with little or no tax liability. (The temporary version of the legislation agreed to by the House of Representatives and subsequently vetoed would have eliminated the provision for providing the tax credit on a refundable basis to non-profit and public providers. Instead, the vetoed bill would have allowed States to make an equivalent grant to such providers out of the new social services funding made available by the bill.) The bill also authorized States to use some of the additional social services funding provided by the bill to match the tax credit in such a way as to provide full Federal funding of the costs of hiring welfare recipients as child care employees up to a maximum salary of \$5,000 per year.

Waiver of Standards in Certain Cases

The bill modified the child care standards to permit State welfare agencies to waive the Federal staffing requirements in the case of child care centers and group day care homes which meet State standards if the children receiving federally funded care represent no more than 20 percent of the total number of children served (or, in the case of a center, there are no more than 5 such children), provided that it is infeasible to place the children in a facility which does meet the Federal requirements.

Modification of Family Day Care Home Requirements

The 1974 law incorporates a requirement that a family day care home serve no more than 6 children including the family day care mothers' own children under age 14. The Senate bill modified this requirement so that the family day care mother's own children would be counted only if they are under age 6.

Social Services for Addicts and Alcoholics

The Senate bill would also have made permanent certain changes in the social services statute, as it pertains to services for addicts and alcoholics, which had been adopted in Public Law 94-120 on a temporary basis (through January 31, 1976).

One of these changes makes explicit certain confidentiality requirements in the case of services provided to addicts and alcoholics. Another change clarifies that the entire rehabilitative process must be considered in determining whether medical services provided to addicts and alcoholics can be funded as being an integral part of a social services program. A third change allows funding of a 7-day detoxification period even though social services funding is generally not available to institutionalized persons.

Appendix C

Tables

TABLE 1.—ESTIMATED FEDERAL SHARE OF STATE EXPENDITURES FOR SOCIAL SERVICES FOR FISCAL YEAR 1977

[In millions]

	Full allocation under \$2.5 billion limit ¹	Amount to be used by State ²
Total.....	\$2,500.000	\$2,368.568
Alabama.....	42.300	36.335
Alaska.....	3.975	3.975
Arizona.....	25.450	10.470
Arkansas.....	24.375	18.787
California.....	247.250	247.250
Colorado.....	29.525	29.525
Connecticut.....	36.525	36.525
Delaware.....	6.775	6.775
District of Columbia.....	8.550	8.550
Florida.....	95.675	95.675
Georgia.....	57.725	57.725
Guam.....		.553
Hawaii.....	10.025	10.025
Idaho.....	9.450	9.450
Illinois.....	131.650	131.650
Indiana.....	63.025	38.284
Iowa.....	33.775	33.775
Kansas.....	26.850	21.536
Kentucky.....	39.700	39.700
Louisiana.....	44.525	44.525
Maine.....	12.375	12.375
Maryland.....	48.425	48.425
Massachusetts.....	68.600	68.600
Michigan.....	107.575	107.575
Minnesota.....	46.325	46.325
Mississippi.....	27.475	7.732
Missouri.....	56.500	30.942
Montana.....	8.700	8.700
Nebraska.....	18.250	18.250
Nevada.....	6.775	3.356

TABLE 1.—ESTIMATED FEDERAL SHARE OF STATE EXPENDITURES FOR SOCIAL SERVICES FOR FISCAL YEAR 1977—Con.

[In millions]

	Full allocation under \$2.5 billion limit ¹	Amount to be used by State ²
New Hampshire.....	\$9.550	\$9.550
New Jersey.....	86.700	86.700
New Mexico.....	13.275	13.275
New York.....	214.200	214.200
North Carolina.....	63.425	52.175
North Dakota.....	7.525	5.669
Ohio.....	126.975	126.975
Oklahoma.....	32.050	32.050
Oregon.....	26.800	26.800
Pennsylvania.....	139.975	139.975
Puerto Rico.....		18.282
Rhode Island.....	11.075	11.075
South Carolina.....	32.925	32.925
South Dakota.....	8.075	8.075
Tennessee.....	48.825	39.774
Texas.....	142.500	142.500
Utah.....	13.875	13.875
Vermont.....	5.550	5.550
Virgin Islands.....		.533
Virginia.....	58.050	39.746
Washington.....	41.100	41.100
West Virginia.....	21.175	16.144
Wisconsin.....	54.000	54.000
Wyoming.....	4.250	4.250

¹ The State allocations are determined annually on a population basis.

² HEW has estimated, for budget purposes, that in fiscal year 1977 the States have underestimated their use of reimbursable funds by \$31,432,000, which brings their budget request to \$2,400,000,000.

Source: U S. Department of Health, Education, and Welfare.

TABLE 2.—FEDERAL INCOME LIMITS ON ELIGIBILITY FOR SOCIAL SERVICES (FISCAL 1977—FAMILY OF 4)¹

	Maximum income level for services	
	If no fee is charged ² (80 percent of median income)	If a fee is charged (115 percent of median income)
Alabama.....	\$10,244	\$14,726
Alaska.....	³ 14,747	22,273
Arizona.....	12,184	17,515
Arkansas.....	9,512	13,674
California.....	12,745	18,321
Colorado.....	12,503	17,973
Connecticut.....	13,181	18,947
Delaware.....	12,185	17,516
District of Columbia.....	12,074	17,357
Florida.....	11,830	17,006
Georgia.....	10,933	15,716
Hawaii.....	13,655	19,629
Idaho.....	11,260	16,186
Illinois.....	13,080	18,803
Indiana.....	11,582	16,650
Iowa.....	11,497	16,527
Kansas.....	11,516	16,554
Kentucky.....	10,011	14,391
Louisiana.....	10,080	14,490
Maine.....	10,042	14,435
Maryland.....	13,320	19,148
Massachusetts.....	12,504	17,975
Michigan.....	12,939	18,600
Minnesota.....	12,634	18,161
Mississippi.....	9,250	13,296
Missouri.....	11,016	15,836
Montana.....	10,949	15,739
Nebraska.....	10,691	15,369
Nevada.....	12,286	17,661
New Hampshire.....	11,189	16,084
New Jersey.....	13,382	19,236
New Mexico.....	9,714	13,694
New York.....	12,135	17,444
North Carolina.....	10,546	15,160
North Dakota.....	12,004	17,256

TABLE 2.—FEDERAL INCOME LIMITS ON ELIGIBILITY FOR SOCIAL SERVICES (FISCAL 1977—FAMILY OF 4)¹—Con.

	Maximum income level for services	
	If no fee is charged ² (80 percent of median income)	If a fee is charged (115 percent of median income)
Ohio.....	\$12,097	\$17,389
Oklahoma.....	10,116	14,542
Oregon.....	12,010	17,265
Pennsylvania.....	11,591	16,662
Rhode Island.....	11,523	16,565
South Carolina.....	10,444	15,013
South Dakota.....	10,259	14,748
Tennessee.....	10,230	14,706
Texas.....	11,139	16,013
Utah.....	11,202	16,103
Vermont.....	10,516	15,117
Virginia.....	12,104	17,400
Washington.....	12,321	17,711
West Virginia.....	10,055	14,454
Wisconsin.....	12,318	17,708
Wyoming.....	11,866	17,058

¹ The median income levels are adjusted each year by HEW using data supplied by the Census Bureau. The national median income level was raised from \$13,801 for fiscal 1976 to \$14,747 for fiscal 1977.

² States may impose fees subject to HEW regulation but need not. About half the States do so.

³ 100 percent of national median income. The income limit for services without a fee is 100 percent of the national median income where that amount is lower than 80 percent of State median income. (80 percent of Alaska State median income is \$15,494.)

Source: U.S. Department of Health, Education, and Welfare.

TABLE 3.—SENATE CHILD CARE BILL—ADDITIONAL ANNUAL
FEDERAL FUNDING

[In millions]

Total.....	\$250.000
Alabama.....	4.230
Alaska.....	.398
Arizona.....	2.545
Arkansas.....	2.438
California.....	24.725
Colorado.....	2.952
Connecticut.....	3.652
Delaware.....	.678
District of Columbia.....	.855
Florida.....	9.568
Georgia.....	5.772
Hawaii.....	1.002
Idaho.....	.945
Illinois.....	13.165
Indiana.....	6.302
Iowa.....	3.378
Kansas.....	2.685
Kentucky.....	3.970
Louisiana.....	4.452
Maine.....	1.238
Maryland.....	4.842
Massachusetts.....	6.860
Michigan.....	10.758
Minnesota.....	4.632
Mississippi.....	2.748
Missouri.....	5.650
Montana.....	.870
Nebraska.....	1.825
Nevada.....	.678
New Hampshire.....	.955
New Jersey.....	3.670
New Mexico.....	1.328
New York.....	21.420
North Carolina.....	6.342
North Dakota.....	.752
Ohio.....	12.698
Oklahoma.....	3.205
Oregon.....	2.680
Pennsylvania.....	13.998
Rhode Island.....	1.108

TABLE 3.—SENATE CHILD CARE BILL—ADDITIONAL ANNUAL
FEDERAL FUNDING—Continued

[In millions]

South Carolina	\$3.292
South Dakota808
Tennessee	4.882
Texas	14.250
Utah	1.388
Vermont555
Virginia	5.805
Washington	4.110
West Virginia	2.118
Wisconsin	5.400
Wyoming425

TABLE 4.—ESTIMATED DISTRIBUTION OF TITLE XX SOCIAL
SERVICES EXPENDITURES

Type of service	Percent of all title XX expenditures ¹
Day care services for children	25
Information and referral, protective services for children and protective services for adults	20
Home based services	12
Family planning	3
Transportation services	2
Day care services for adults	2
Legal services	2
Congregate/home delivered meals	1
Other ²	33

¹ Based on analysis of State plans for fiscal year 1976.

² Other services include services to alcohol and drug abusers, health and mental health services, adoption, emergency shelter, and services to the developmentally disabled and blind.

Source: U.S. Department of Health, Education, and Welfare.

TABLE 5.—CHILD CARE CENTERS: MINIMUM STAFFING REQUIREMENTS, BY AGE OF CHILDREN, UNDER STATE LICENSING REGULATIONS

	Maximum number of children per staff member ¹ if age of children is—					School age
	Under 2	2 to 3	3 to 4	4 to 5	5 to 6	
Alabama.....	5	5	10	20	20	² 22
Alaska.....	5	5	10	10	10	10
Arizona.....	³ 8	10	15	20	25	25
Arkansas.....	⁴ 6	⁵ 6	12	15	18	NS
California.....	⁴ 4	12	12	12	12	12
Colorado.....	⁵ 5	⁶ 7	10	12	15	15
Connecticut.....	⁴ 4	4	⁵ 5	⁷ 7	⁷ 7	¹⁰ 10
Delaware ¹³	⁵ 5	⁸ 8	15	20	20	25
District of Columbia.....	⁴ 4	⁴ 4	8	10	15	15
Florida ¹⁷	⁶ 6	12	15	20	25	25
Georgia.....	⁷ 7	10	15	18	20	¹⁹ 25
Hawaii.....	X	10	15	20	25	25
Idaho.....	⁵ 5	³ 3	10	10	10	NS
Illinois.....	6	8	10	²³ 10	25	25
Indiana.....	⁴ 4	5	10	12	15	20
Iowa.....	4	6	8	12	15	15
Kansas.....	³ 3	⁵ 5	10	²⁷ 10	²⁷ 10	16
Kentucky.....	6	8	10	12	15	²⁸ 15
Louisiana ²⁰	⁶ 6	12	14	16	20	25
Maine ¹²	X	⁸ 8	10	15	15	15
Maryland.....	NS	6	10	10	13	NS
Massachusetts.....	¹⁰ 10	¹⁰ 10	¹⁰ 10	¹⁰ 10	15	²⁸ 15
Michigan.....	X	¹⁰ 10	10	12	20	NS
Minnesota.....	⁴ 4	⁷ 7	10	10	10	15
Mississippi.....	NS	NS	NS	NS	NS	²⁰ X

See footnotes at end of table.

TABLE 5.—CHILD CARE CENTERS: MINIMUM STAFFING REQUIREMENTS, BY AGE OF CHILDREN, UNDER STATE LICENSING REGULATIONS—Continued

	Maximum number of children per staff member ¹ if age of children is—					School age
	Under 2	2 to 3	3 to 4	4 to 5	5 to 6	
Missouri.....	²⁰ X	5	10	10	15	15
Montana.....	NS	NS	NS	NS	NS	NS
Nebraska.....	⁴ 4	5	7	7	7	12
Nevada.....	²⁴ 4	²⁸ 8	⁴¹ 10	⁴¹ 10	⁴¹ 10	⁴⁵ 3
New Hampshire...	4	²⁴ 4	10	15	18	20
New Jersey.....	²⁰ X	²⁵ NS	²⁷ NS	²⁷ NS	²⁷ NS	²⁰ X
New Mexico.....	10	10	15	⁴⁵ 15	⁴⁵ 15	15
New York.....	⁴ 4	5	5	7	7	10
North Carolina.....	²⁰ 8	²⁰ 12	²⁰ 15	²⁰ 20	²⁰ 25	²⁰ 25
North Dakota.....	4	4	10	10	12	²¹ 12
Ohio.....	²² 8	10	15	15	20	20
Oklahoma ²³	²⁴ 4	8	12	15	15	20
Oregon.....	²⁴ 4	10	10	10	10	²⁵ 10
Pennsylvania.....	²⁰ X	²⁰ X	8	10	10	13
Rhode Island.....	²⁰ X	²⁰ X	10	15	25	NS
South Carolina.....	6	8	10	14	15	15
South Dakota.....	²¹ 1	4	5	7	7	²³ 15
Tennessee.....	²⁰ 5	8	10	15	25	²⁰ 30
Texas.....	²⁴ 4	8	12	15	18	²² 20
Utah.....	²⁰ X	10	15	15	20	²⁵ 20
Vermont.....	4	5	10	10	12	12
Virginia.....	3	10	10	10	10	10
Washington.....	²⁵ 5	²⁷ 7	10	10	10	10
West Virginia.....	4	8	10	12	15	16
Wisconsin.....	²⁰ 3	²⁰ 6	10	12	16	²⁰ 16
Wyoming.....	5	8	10	15	20	25

Footnotes on following pages.

FOOTNOTES

- ¹ 5 if 2 to 2½; 10 if 2½ to 3.
- ² 22 if 6 to 8; 25 if 8 and over.
- ³ 3 if 0 to 15 mo; 10 if 15 mo to 2 yr.
- ⁴ In infant-toddler centers.
- ⁵ 6 in infant-toddler centers; 12 if 2½ to 3 in other centers.
- ⁶ In infant centers.
- ⁷ If 6 weeks to 8 mo in infant center; or if 12 mo to 3 yr in toddler center.
- ⁸ 7 if all 2-yr-olds in toddler center; 8 if 2½ to 3 in large or small center.
- ⁹ Recommended FIDCR child/staff ratios.
- ¹⁰ If under title XX funding; 15, if 6 to 10 yr of age; 20 if 10 to 14 yr of age (FIDCR ratios).
- ¹¹ 5 if 0 to 1; 8 if 1 to 2.
- ¹² 8 if 2 to 2½; 15 if 2½ to 3.
- ¹³ In Delaware, centers receiving Federal funds have the following mandated ratios: Under 2: 5; 2 to 3: 5; 3 to 4: 5; 4 to 5: 7; 5 to 6: 7; school age: 10.
- ¹⁴ Pending issue of new infant center regulations.
- ¹⁵ 4 if 2 to 2½; 5 if 2½ to 3.
- ¹⁶ 6 if under 1 yr; 8 if 1 to 2.
- ¹⁷ Mandated ratio for handicapped children: Under 2: 4; 2 to 3: 6; 3 to 4: 8; 4 to 5: 10; 5 to 6: 14; school age: 14.
- ¹⁸ 7 if 0 to 18 mo; 10 if 18 mo to 2 yr.
- ¹⁹ 25 if 7 and over; 6 to 7 not specified.
- ²⁰ Children in this age group generally not accepted.
- ²¹ 6 if 0 to 18 mo; 8 if 18 mo to 2 yr.
- ²² 8 if 2 to 2½; 10 if 2½ to 3.
- ²³ 10 if full-day; 20 if half-day.
- ²⁴ 4 if 6 weeks-walking; 5 if walking—2.
- ²⁵ 3 if 2 weeks—nonwalking under 24 mo only; 5 if walking—2 yr.
- ²⁶ 5 if walking—2½; 7 if 2½ to 3.
- ²⁷ 10 if full-day; 12 if part-day.
- ²⁸ 15 if 6 to 8; 20 if 8 and over.
- ²⁹ 6 if nonwalking; 8 if toddlers.
- ³⁰ Centers serving 10 children with no more than 2 children under 2 yr of age have mandated child/staff ratio of 10 to 1 in all age categories.
- ³¹ 8 if 2½ to 3 yr.
- ³² In Maine, separate before and after school programs have 10 to 1 ratio in school age category.

FOOTNOTES—Continued

- ³² Admitted only upon approval of local health officer.
- ³⁴ Admitted only upon prior approval.
- ³⁵ 10 in care over 3 hr; 12 in care 3 hr or less.
- ³⁶ 10 in care over 3 hr; 13 in care 3 hr or less.
- ³⁷ 15 in care over 3 hr; 25 in care 3 hr or less.
- ³⁸ 15 if 6 to 7 in care over 3 hr; 25 if 6 to 7 in care 3 hr or less.
- ³⁹ 10 if 2½ to 3.
- ⁴⁰ 4 if 6 weeks to 16 mo; 7 if 16 mo to 2 yr.
- ⁴¹ 7 if 2 yr to 31 mo; 10 if 31 mo to 3 yr.
- ⁴² 4 if 6 weeks to 9 mo; 6 if 9 to 18 mo; 8 if 18 mo to 2 yr.
- ⁴³ 8 in infant-toddler center; 10 for 1st 20 children; 15 for excess over 20.
- ⁴⁴ 10 for 1st 20 children; 15 for excess over 20.
- ⁴⁵ 3 or 10 percent over licensed capacity, whichever is greater, if before or after school care.
- ⁴⁶ 4.8 if maximum of 24 children under 3 yr of age in care.
- ⁴⁷ 2 adults for any total group.
- ⁴⁸ 20 if in care 3 hr or less.
- ⁴⁹ 4 if under 18 mo; 5 if over 18 mo.
- ⁵⁰ If 30 or more in care; 10 if less than 30.
- ⁵¹ If 4 to 7 yr.
- ⁵² 8 if 0 to 18 mo; 10 if 18 mo to 2 yr.
- ⁵³ Recommended ratios.
- ⁵⁴ 4 if 0 to 10 mo in cribs; 6 if 10 mo to 2 yr.
- ⁵⁵ If 6 weeks to 30 mo.
- ⁵⁶ If 6 yr; 15 if over 6 yr.
- ⁵⁷ 1 if 0 to 6 mo; 3 if 6 to 18 mo; 4 if 18 mo to 2 yr.
- ⁵⁸ 15 if 6 to 10 yr; 20 if 10 to 14.
- ⁵⁹ 5 if 6 weeks to 1 yr; 6 if 1 to 2.
- ⁶⁰ If 6 to 7.
- ⁶¹ 4 if 0 to 18 mo; 6 if 18 mo to 2 yr.
- ⁶² 20 if 6 to 8; 25 if 8 or over.
- ⁶³ 20 if 6; 25 if 7 to 15.
- ⁶⁴ 5 if 1 mo to 1 yr; 7 if 1 to 2.
- ⁶⁵ 7 if 2 to 2½; 10 if 2½ to 3.
- ⁶⁶ 3 if 0 to 1; 4 if 1 to 3.
- ⁶⁷ 6 if 2 to 2½; 8 if 2½ to 3.

Source: Department of Health, Education, and Welfare. Current as of October 21, 1975.

Note: NS indicates "not specified."

TABLE 6.—STATE ESTIMATES OF INCREASE IN COST AND STAFFING FOR CHILD CARE FROM FISCAL 1975 TO FISCAL 1976

	Increased title XX costs (millions)	Increased staffing		Potential employment of welfare recipients as percent of added staffing
		For title XX children	For non-title XX children	
Total.....	\$206.3			
Alabama.....	0.6	122	(1)	(-)
Alaska.....	1.4	150	(1)	50
Arizona.....	2.6	548	(2)	20-25
Arkansas.....	0	0	0	(3)
California.....	20.7	0	0	(3)
Colorado.....	2.4	400	200	(2)
Connecticut.....	(-)	0	0	(3)
Delaware.....	.9	99	(1)	(1)
District of Columbia.....	.4	56	81	20
Florida.....	12.1	766	1,036	(2)
Georgia.....	3.8	600	(1)	80
Hawaii.....	.4	60	1,577	20
Idaho.....	1.1	(-)	(-)	(-)
Illinois.....	23.5	700	10 7,000	71
Indiana.....	1.4	215	(2)	(-)
Iowa.....	2.0	167	(1)	(-)
Kansas.....	1.5	202	303	15
Kentucky.....	1.2	400	800	(2)
Louisiana.....	2.6	509	437	100
Maine.....	.1	0	0	(-)
Maryland.....	0	0	0	(-)
Massachusetts....	5.3	600	0	100
Michigan.....	7.0	959	0	20
Minnesota.....	11.0	1,760	1,580	20
Mississippi.....	1.0	0	0	(-)
Missouri.....	2.5	1,246	(2)	5
Montana.....	.9	1,000	(1)	7-10
Nebraska.....	.3	155	(-)	100
Nevada.....	.1	160	160	(2)
New Hampshire...	.2	40	50	20

See footnotes at end of table.

TABLE 6.—STATE ESTIMATES OF INCREASE IN COST AND STAFFING FOR CHILD CARE FROM FISCAL 1975 TO FISCAL 1976—Cont.

	Increased title XX costs (millions)	Increased staffing		Potential employment of welfare recipients as percent of added staffing
		For title XX children	For non-title XX children	
New Jersey.....	3.7	92	10	100
New Mexico.....	2.2	96	0	50
New York ¹	12.0	300	0	67
North Carolina....	9.8	1,800	400	60-70
North Dakota.....	(²)	0	0	(³)
Ohio.....	(⁴)	0	0	(⁵)
Oklahoma.....	21.5	1,022	2,366	93
Oregon.....	.2	0	0	(⁶)
Pennsylvania.....	8.2	235	171	96
Rhode Island.....	.9	45	138	(⁷)
South Carolina....	2.4	308	0	25-50
South Dakota.....	.6	650	150	23
Tennessee.....	1.7	200	(⁸)	5-8
Texas.....	16.2	1,720	1,514	20-30
Utah.....	1.4	199	739	70
Vermont.....	.8	428	(⁹)	75
Virginia.....	7.8	436	1,000	50
Washington.....	4.7	1,300	(¹⁰)	(¹¹)
West Virginia.....	2.0	216	84	80-100
Wisconsin.....	2.6	234	750	50-100
Wyoming.....	.6	0	0	75

¹ Included in estimates for columns 1 and 2. Unable to show separately.

² Unable to estimate.

³ Not applicable since State estimates no additional staffing needs.

⁴ Additional employees already hired.

⁵ Unable to estimate on a multi-year basis; represents number of staff.

⁶ Estimates cover urban counties only.

⁷ Less than \$50,000.

⁸ Unable to estimate. No increased staffing but some increased cost to meet other standards and, or monitoring and reporting requirements of title XX.

⁹ Unable to estimate numbers; cost estimated at \$1,500,000.

¹⁰ Includes a need for 6,000 new family day care homes.

Source: Committee staff survey of Governors.