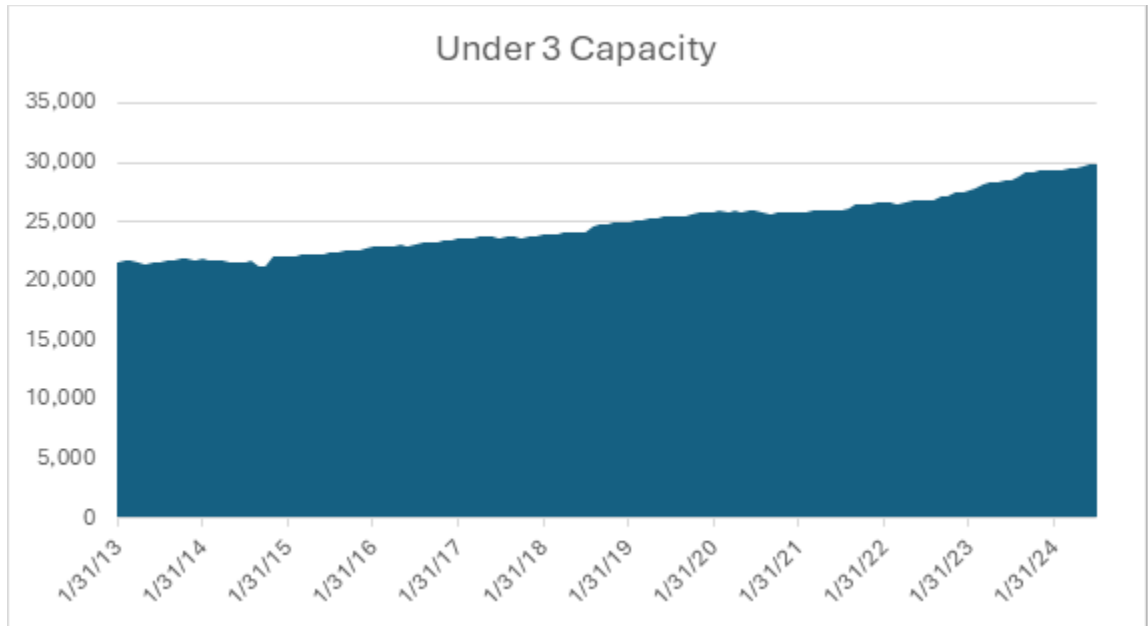


OFA Questions – Appropriations Committee Work Group

1. Provide plan and back-up data for the Universal Pre-K endowment. **Please see attached spreadsheet detailing supply, demand, rate increases, infrastructure, etc.**
 - a. How will infant/toddler care be addressed? **Infant and toddler care is addressed as part of this proposal by an increase in rates. As rates increase for Early Start CT programs serving preschool, rates will parallelly increase for infant/toddler programs. Additionally, in our state child care subsidy program, Care 4 Kids (C4K), we anticipate about \$79 Million currently used for preschool-aged children, that could be freed up for additional infant and toddler access to the Care 4 Kids program. Programs will also be able to apply for Early Start CT infant and toddler spaces as part of the RFP process in 2027.**
2. Provide a breakout of how many new slots are being supported under the Governor’s budget by program, if any. **A total of 12,449 new slots are estimated to be added between SFY 27 and SFY 32. Additionally, 7,500 current slots are estimated to be expanded from part day to school day.**
 - SFY 26: 700 Smart Start and 700 Early Start CT Slots
 - SFY 27: 1,500 new Smart Start slots.
 - SFY 28: 1,349 new Early Start CT Preschool Expansion slots.
 - SFY 29: 1,800 new Early Start CT Preschool Expansion slots.
 - SFY 30: 3,600 new Early Start CT Preschool Expansion slots.
 - SFY 31: 2,400 new Early Start CT Preschool Expansion slots.
 - SFY 32: 1,800 new Early Start CT Preschool Expansion slots.
3. Provide the statewide need (or what OEC perceives the need to be) for infant/toddler slots and Pre-K slots, the number of slots currently existing, and how many of those slots are filled.

	State Funded Slots	Monthly Attendance	Estimated Need*
Infant Toddler	2,946	2,626	20,000
Pre-K (Includes Public Schools)	39,523	31,584	58,800
<i>*The Blue Ribbon Panel Report determined statewide unmet need for Infant Toddler was 17,000.</i>			
<i>*Pre-K need is estimated at using the total pre-k population estimated to be eligible for the Governor's Pre-K endowment.</i>			



4. Provide definition of “active” family, cost/user data, and total cost of Sparkler app
 Sparkler is a critical component to a systems approach of supporting the early screening and detection of young children’s development. Sparkler provides the hands-on tools and information families need to support a child’s developmental milestones. The app provides different opportunities for family engagement. These “actions” are defined as completed play activities, engagement with classroom/child care teachers/ home visitors/ early interventionists/ other community providers through the ‘chat’ feature of the application and completed developmental screenings.

By the end of 2024, **28,197 parents/caregivers** had created accounts in Sparkler, some with one child and some with multiple children. The total number of CT children served by the end of 2024 was **32,103**. More than **14,000 of those parent accounts actively used the app** to access screening, play activities, tips for adults, messaging, and connection with their programs/providers in the year. **18,472 screenings were completed** in the year.

Sparkler does not charge OEC per child. Rather, OEC pays Sparkler to provide the app to all families and the dashboard to all providers, as well as a team of family & community engagement specialists, custom technology development, and additional support. The budget covers the following activities:

1. **Activity 1:** Developmental Screening and ASQ Integration
2. **Activity 2:** Family and Community Engagement
3. **Activity 3:** Tech Integration and Customization
4. **Activity 4:** Content Development
5. **Activity 5:** Support and project management

5. Provide percentage increase for all rate increases in the Governor's budget

- a. Early Start CT – 4% rate increase for state-funded programs
- b. C4K – 11% for Child Care Centers, Group Child Care Homes and Family Child Care Homes and 6% for Unlicensed Relative Providers
- c. Birth 2 Three – The current rates are \$120 per hour for a professional (P) and \$84 per hour for a paraprofessional (PP). Please note the proposed rate is a tiered rate structure taking effect July 1, 2026.

Current Rate	Proposed Rate	% Change
P: \$120	P3: \$167	39.2%
P: \$120	P2: \$152	26.7%
P: \$120	P1: \$142	18.3%
PP: \$84	PP2: \$99	17.9%
PP: \$84	PP1: \$89	5.9%

*Disclaimer: There are other variables that impact the rates as explained in detail on the Birth to Three website Birth to Three fee schedule: [State Rates & DSS Information - Birth23.org](#).

6. Provide back up on the \$1.8 million allocated for the Universal Nurse Home Visiting Program

- a. How much has already been spent for the pilot in Bridgeport? Approximately \$3,105,517 has been spent on Bridgeport Hospital pilot. Of the funds that have been spent \$1,000,000 was from PDG B-5 Renewal Grant, \$1,503,542 was from the Community Health Worker Program, and \$601,975 was from ARPA Universal Nurse Home Visiting funding.
- b. What is the purpose of the \$1.8 million? The purpose of the \$1.8 million is to provide a “bridge of funding” for all 3 current universal nurse home visiting sites (Bridgeport Hospital/St. Vincents Hospital/ Eastern CT). The funding allows all 3 sites to continue their current operations (1-3 home visits with a registered nurse and access to a Community Health Worker to help link them to appropriate community resources and programs) through the end of the state fiscal year. Current funding ends 12/31/2026. This would fund the hospital sites to 6/30/2027. Prior to that date, a sustainability study will be completed that will guide ongoing funding leveraging state and federal funds.

7. Provide information on Tri-Share. Funding for the Tri-Share program is being provided to continue the program that was funded with \$1.8M in ARPA funds. If this funding is not provided - at least \$450,000 would need to be provided in FY 27 to comply with the requirements of PA 24-91 for the timeframe of January 1, 2026, through June 30, 2026.

- a. How long has the pilot been running? A contract with LEARN was fully executed on 1/16/25. LEARN is in the process of signing an MOA with their first participating employer, Little Learners, and expect to begin providing Tri-share funds to employees by March 1, 2025.
- b. How many people are being served? Currently, LEARN is signing an MOA with one employer, no employees (families) have been served yet. We expect the first employees (families) to be served starting March 1, 2025.
- c. What is the plan for the pilot going forward?
 - i. Is there a plan for expansion to other areas of the state? The current legislation limits participation to New London County.
 - ii. Is there a plan to include other businesses? Yes, LEARN is actively partnering with CBIA to recruit new businesses.
- d. What is the allocation in the Governor's budget supporting? This allocation will keep tri-share going over the 2nd year of the two-year budget with funding for child care and administration. This will cover 1/3 of a child's tuition which is set based on the hours and program to be at the cost of care.

Activity	Amount
LEARN	\$230,621
Amount to go to programs for 1/3 of cost	\$1,569,379

8. Provide a breakdown of programs provided and children served at CCDC
Capitol Child Development Center is licensed with a capacity of 75 children, 37 of which are infant/toddler. CCDC currently has 18 Full Day/Full Year Preschool Priority School Readiness spaces and 13 Child Day Care Full Day Infant and Toddler Spaces. The remainder of the spaces in the program are not state funded.
9. Provide the number of current Care4Kids slots and how this number has changed since the last biennial budget

SFY	# of Paid Children	# of Paid Families
SFY 2019	15,575	10,608
SFY 2020	15,861	11,041
SFY 2021	15,715	10,719
SFY 2022	18,465	13,077
SFY 2023	19,881	14,309
SFY 2024	20,289	14,461
SFY 2025 (to 2/15/25)	22,897	16,317

From 2020 – 2023, CCDF CRRSA and ARPA funding was allocated to increase access to Care 4 Kids by raising eligibility from 50% to 60% SMI as of July 1, 2021. These funds were also allocated to increase access by activity, by passing

legislation to include families enrolled in Adult Ed, Workforce Training, and Higher Education (up to bachelor's degree) as of July 1, 2021. The impact of increasing access can be seen in the rise in caseload between SFY21 and SFY22.

The enrollment management Waitlist launched March 1, 2023, as a means to provide a lever to control for enrollment based upon budgetary constraints.

Legislation passed July 1, 2023, created the Care 4 Kids Protective Services Category and launched November 1, 2023, expanding protected eligibility to families experiencing housing insecurity, children in foster care, and first year adoption. Protected services category expanded in legislation July 1, 2024, to include first year of subsidized guardianship. These populations do not go to waitlist; rather upon verification of eligibility they immediately receive their 12-month Care 4 Kids certificate and pay no family fee. This further increased caseload, which was capped at 18,500 to remain within available appropriations.

An additional \$18.9M in State ARPA funds was allocated in Spring 2024 was used to clear all families off the waitlist in May 2024 to ensure safe, summer care. Clearing the waitlist increased the Care 4 Kids caseload just under 23,000. Care 4 Kids caseload is currently capped at 23,000 children to stay within available appropriations.

- a. Is there a waiting list? If so, how many are on the waiting list? **Yes, 1,005 families are on the waitlist as of 3/5/2025.**

10. Provide a detailed breakdown of the costs associated with the two studies under the Start Early initiative.

The Office of Early Childhood submits a report pursuant to C.G.A Sec. 10-510 (P.A. 22-118, Sec. 459). The Act requires the Office of Early Childhood to establish and administer the Start Early - Early Child Development Initiative. This Public Act requires this to be a five-year program. The Governor's budget includes funds for the fifth year of the study. Sec. (e) requires the OEC to submit an annual report to the Education Committee. The language follows:

(e) The office shall develop an annual report concerning the data and outcome measures for the initiative. The report shall include, but need not be limited to, achievement of the elements outlined in the Connecticut Early Learning and Development Standards as reported in the accompanying assessment tool. The office may develop recommendations for modifications to the early education system based on an evaluation of such data and outcome measures. Not later than January 1, 2023, and annually thereafter, the office shall submit, in accordance with the provisions of section 11-4a of the general statutes, such report and any such

recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to education.

TMW Center for Early Learning + Public Health (TMW)

The Connecticut Office of Early Childhood has partnered with the TMW Center for Early Learning Public Health to conduct a three-year research project that will allow the state to measure and enhance the quality of its child care and early learning programs and offer personalized support to its early childhood workforce. The study utilizes a new measurement tool, Luet, developed by the TMW Center—an affordable device that captures and analyzes information about a child’s audio environment using sensors and machine learning—to uncover the classroom and educator characteristics that most positively impact child outcomes. Those findings will serve as the foundation for an evidence-based, professional development model that leverages this new technology to help Connecticut’s early childhood educators maximize their impact. Ultimately, the insights and professional development program generated by this research will ensure that more children have equitable access to high-quality child care environments and more early educators have the support needed to prepare children for success in school and life.

University of Connecticut-Early Start Connecticut Family Support Study

The University of Connecticut has implemented an Early Start Intervention study that includes family support teams to support families, teachers, and programs to improve the quality of children’s home and early care environments.

Comprehensive services for families include the option of working with a family support person or navigator to connect families with additional needed services (Early Intervention, education/job training, housing, financial) and support for parenting (e.g., parent education groups). Support was provided for teachers through mental health consultants available in the classrooms. The goal of the study is to analyze the impact of the early intervention and supports of continued educational and school success.

- a. When were the studies started and what have been the current expenditures to date for the two studies?

Both studies started in the first quarter of 2024. They are funded with state ARPA funds as follows:

(f) The office may use a portion of the funds allocated pursuant to the provisions of Section 602 of Subtitle M of Title IX of the American Rescue Plan Act of 2021, P.L. 117-2, as amended from time to time, for administrative expenses related to the initiative, including, but not limited to,

entering into an agreement with a third party to manage the program; the design, collection and analysis of required data on outcome measures as prescribed by the office; and the development of data collection and evaluation tools for continuous program evaluation.

Expenditures to date:

TMW University of Chicago	
Direct Expenses	
Staffing and Wages (18 FTE, 9PTE and 4.75 PTE)	\$1,175,081.00
Fringe Benefits	\$260,367.29
Contractual Services	
Contractual Harris Data Fellows gztechventures Ideas2IT MHub Chien Lin Huang	\$632,151.00
Staff Travel Reimbursement	\$49,835.22
Mileage Reimbursement	\$4,371.00
Outreach/Program Supplies specific to CT classrooms implementation, teacher feedback formative testing. Device parts, components and assembly, tablets, charging stations, other classroom supplies and measurement materials.	\$30,378.40
Other materials Cloud service (AWS) expense, servers, storage and other software	\$93,150.52
Other Final incentives will be paid for Pilot 1 in the month of December. Incentives paid to- childcare sites, teachers and families in 1b classrooms who complete program deliverables are paid incentives. 1A teachers/focus groups also received gift cards.	\$2,802.25
Printing and Advertising Marketing, talent recruitment and shipping materials	\$47,550.00
Total	\$2,295,686.68

UCONN School of Education	
Direct Expenses	
Staffing and Wages	\$222,454.28
Fringe Benefits	\$29,632.12
Contractual Services	\$671,540.16

Staff Travel Reimbursement	\$263.31
Materials and Supplies Food	\$2,698.59
Materials and Supplies-Other Materials	\$104.20
Other Expenses (training, printing/binding, technology costs, and educational supplies)	\$79,940.54
Indirect Expenses	\$201,326.58
Total	\$1,207,959.78

11. Provide an explanation of how a reduction in funding for GAP payments will affect providers

The General Assistance Payment (GAP) payment is intended to reimburse the non-billable time to Birth to Three programs that support children with an Individualized Family Service Plan (IFSP) of less than 9 hours per month with at least one service delivered in that month. In a fee-for-service model, it is important to supplement the cost of services for children with low service delivery hours. With an increase in rates the agency expects that the deduction will not have a substantial impact to providers. OEC will continue to support programs directly through GAP with appropriated funds as proposed in the Governor's budget.

12. Provided an explanation of the differences between the current B23 rate structure and the proposed tiered rate structure.

The current Medicaid fee schedule used for Birth to Three billing of commercial insurance and Medicaid includes two tiers: professional and paraprofessional. Currently, contracted programs are reimbursed at \$120 per hour for a professional and \$84 per hour for a paraprofessional. The proposed tiered rate structure adds three more tiers to the fee schedule. As proposed in the Public Consulting Group (PCG) rate study cost analysis report, the tiers would include an advanced professional, professional with training, professional for the professional levels, paraprofessional with training, and paraprofessional for the paraprofessional levels.

a. Explain how providers will be kept whole

The Governor's recommended budget includes additional tiers to support the comprehensive system of personnel development, which is a significant part of the Individuals with Disabilities Education Act (IDEA), Part C. This structure allows for programs to compensate their staff fairly while incentivizing quality, research-informed, evidence-based practices. Further, it will allow programs to compensate staff and potentially increase salaries as staff further their knowledge base and become trained and certified in

early intervention practices, like service coordination. The proposed rate structure is anticipated to provide fiscal stability to the field.

13. Provide a list of Pre-K funding by town for the last three FYs and include FY 25
 - a. Child Day Care – see attached spreadsheet
 - b. School Readiness – see attached spreadsheet
 - c. State Head Start – see attached spreadsheet
 - d. Care Kids – see attached spreadsheet
 - e. Federal Head Start: Federal Head Start funding flows directly from the Federal government to the local program level. The State does not administer this funding. In FFY25, \$83,584,047 was provided to Head Start and Early Head Start grant recipients in Connecticut.
 - f. Smart Start – see attached spreadsheet
14. Explain whether B23 annualization of rates bring providers current?

The rate study conducted by Public Consulting Group (PCG) determined the cost of delivering early intervention by completing a time study/cost analysis and included market research. The analysis entailed the costs of operations, training, and nonbillable time, such as report writing or travel time. The rate study recommended rates in demonstrating best practices in early intervention and included a budget impact model. There were two options proposed in the report. One of those options, which is reflected in the Governor's recommended budget, included additional tiers to support the comprehensive system of personnel development, which is a significant part of the Individuals with Disabilities Education Act (IDEA), Part C. This structure allows for programs to compensate their staff fairly while incentivizing quality, research-informed, evidence-based practices. Further, it will allow programs to compensate staff and potentially increase salaries as staff further their knowledge base and become trained and certified in early intervention practices, like service coordination.