November 2026 Caseload Estimating Conference

RI Department of Human Services

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Caseload Testimony

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November 2026 Caseload Conference
Rhode Island Department of Human Services

The members of the Caseload Estimating Conference have requested that the Department of Human Services (DHS) provide written answers to various questions in addition to the presentation of their estimates. Red text highlights the start of a question throughout the narrative.

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Rhode Island Works Program (RIW)

RI Works is Rhode Island's name for the federal Temporary Assistance for Needy Families (TANF) program. Authorized under Public Law 104-193 in 1996 (the welfare reform legislation "Personal Responsibility and Work Opportunity Reconciliation Act" or PRWORA), the TANF program is a block grant to states to achieve the following purposes:

- Assisting needy families so that children can be cared for in their own homes
- Reducing the dependency of needy parents by promoting job preparation, work, and marriage
- Preventing out-of-wedlock pregnancies
- Encouraging the formation and maintenance of two-parent families

States create their own programs within the parameters of TANF. RIGL § 40-5.2 authorizes RI Works. It was previously known as the Family Independence Program (FIP) when enacted in 1997. In 2008, it was revised as the RI Works program to align with the TANF employment goals and policies and to help recipient families become employed and self-sufficient. The goal of RI Works is to eliminate or reduce the harmful effects of poverty on families and children by fostering employment and opportunity as a means to economic independence (RIGL § 40-5.2-6 (a)); and to eliminate the stigma of welfare by promoting a philosophy and a perception that the purpose of welfare is to eliminate or reduce the harmful effects of poverty on families and children by promoting work opportunities for all Rhode Island residents (RIGL § 40-5.2-6 (c)).

All activities and services provided through the RI Works program are intended to promote stability and economic progress for families through the provision of supportive services, the development of employment skills, and intensive work readiness services. The RI Works program supports adult family members to work by offering the following benefits and services:

- **Cash Assistance** is provided to families experiencing poverty that meets certain regulations
- **Comprehensive Assessment and Service Planning** for families receiving cash assistance
- **Child Care Assistance** is provided to support the family, when needed
- **Employment Supports** which include assistance with job training, adult education, and obtaining employment at livable wages
- **Food Assistance** is provided by the Supplemental Nutrition Assistance Program (SNAP)
- **Transportation** reimbursement and/or bus passes are available to support preparation for employment
- Parents are strongly encouraged to apply for **healthcare** while on RI Works

The TANF Block Grant is the funding source for RI Works. In order to draw Rhode Island's $94.7 million federal grant, the State is required to maintain an historic level of investment in programs that serve low-income families. This investment is called Maintenance of Effort (MOE), and these

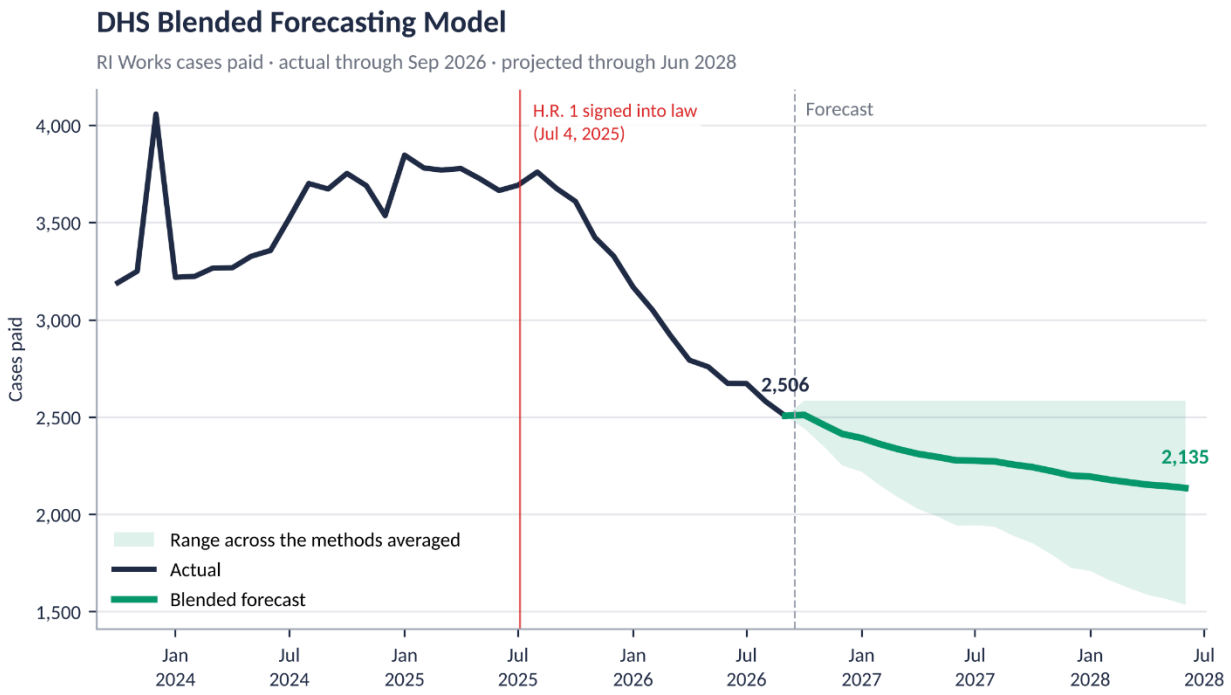
expenditures are calculated each fiscal year and must be at least 80 percent of historic "qualified" state expenditures under the former Aid to Families with Dependent Children (AFDC) Program. In Rhode Island; 80 percent MOE is $64.4 million.

RI Works Trends

The RI Works program has seen a decrease in participation during SFY26. Current data suggests this decline in caseload appears to be continuing. DHS analyzed data for participants exiting Rhode Island Works and found some minor trends. The sample data demonstrated consistency with census data. There was an increase in cases closing for "child aged out". RI Kids Count reported the birth rate in RI has decreased 18% from 2002 to 2022, minimizing the population of possible RI Works participants. More specifically, the rate of newborns added to open RI Works cases dropped by 9% from calendar year 2024 to 2025. In the sample size, 11.69% of the cases exited due to moving out of state.

Program and Operations staff initiated a review of hardship cases over the last year to determine barriers and provide services. The initiative included the collection of documents confirming hardship eligibility. Hardship cases dropped by approximately 300 during this initiative. The percentage of the caseload of hardship cases currently is 7.0%. The Department expects this number to remain flat moving forward.

The RIW cases count has decreased overall by 15% when comparing September 2026 to March 2026. This is an average month-over-month decline of 2.6%. The September persons count of 5,828 reflects a 16% decrease from March 2026 (6,922). It is not clear how long the rapid decline in cases will continue. An increase in state minimum wage taking effect January 1, 2027 may also impact caseload. The Department's projections are a plain average blend of three models. The first of these is a straight-line of the three-month average of 2,586. The second is a dampened monthly seasonal pattern that uses exponential smoothing to weigh recent months more heavily than older ones. The third uses the downward trend from the last twelve months but applies it only to the caseload above a floor. The floor was defined as caseload of 2,283, which was the post-COVID low of September 2021. Once blended, the projected SFY 2028 caseload falls below this September 2021 floor. Caseload data from December 2023 was considered an outlier and was excluded from projection calculations.



RI Works families face multiple barriers to stabilization, usually for multiple generations. The result is chronic issues needing additional specialized services to help the family stabilize and become self-sufficient. Two of the newest providers were onboarded via the 2024 RFP for RI Works. One of these, Revive Therapeutics added behavioral health support to address the specific barriers associated with the issues experienced by deep poverty and insecurities. This agency has been introducing their contracted services to each field office via in-person meetings and providing monthly office hours for staff support.

The goal is to target cases that have not exited the program to employment due to behavioral health concerns and provide staff with direction. The second, Sin-cere Multiservice is an agency that specializes in financial literacy with a targeted audience with very low income. The agency has success with enrolling the eligible population in classes, developing small business plans, credit repair and protection. In December of 2025, a new class was added for high school students on Saturdays. The financial literacy class currently has a waiting list.

RI Works families have reported significant barriers related to housing security. DHS implemented a Housing Stability Pilot (HSP) in January of 2025 that helps prevent eviction and helps resolve housing issues that have families to be separated or to resolve specific cases of homelessness. The HSP is implemented via the contracted providers for RI Works. DHS has continued to see this program grow with increased applications submitted by over 30 agencies throughout the state. For FFY2026, HSP provided assistance to 725 families, 2,465 individuals, and 60% are children. The assistance included 70% in rental arrears, 28.9% move-in cost and 1.1% in mortgage assistance for Rhode Islanders. The FFY2026 expenditure for assistance totaled $3,337,315.

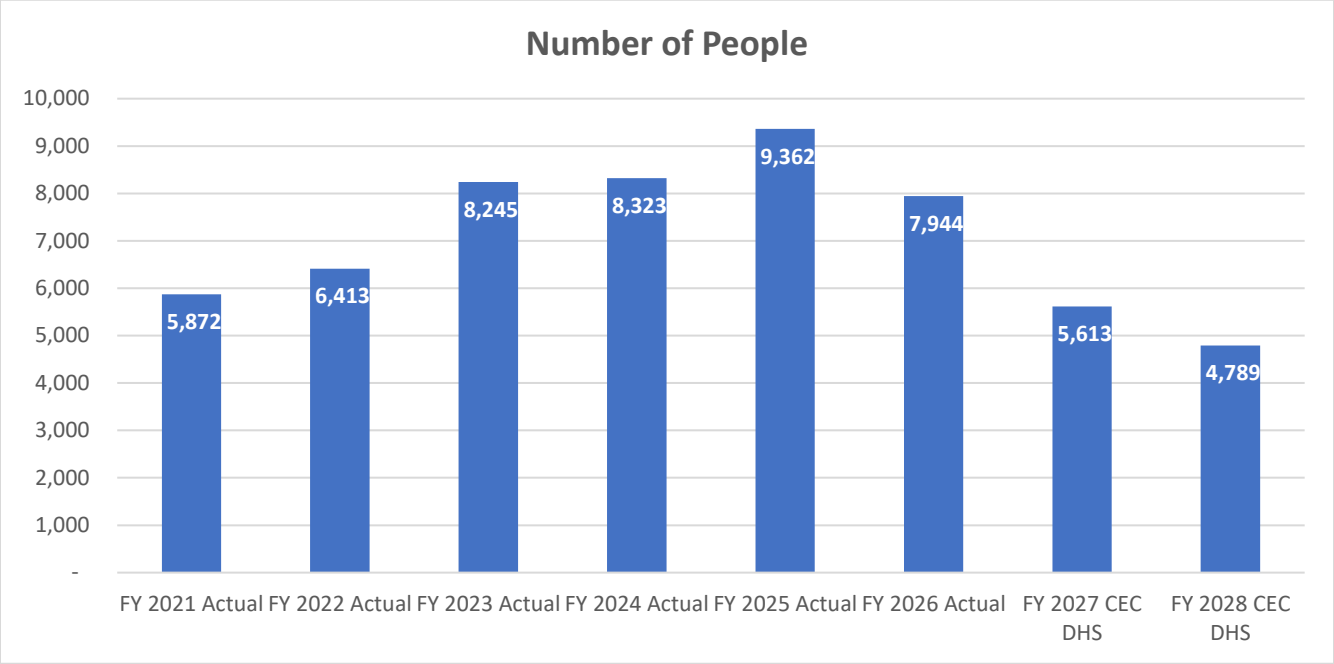
RI Works State Legislative Changes

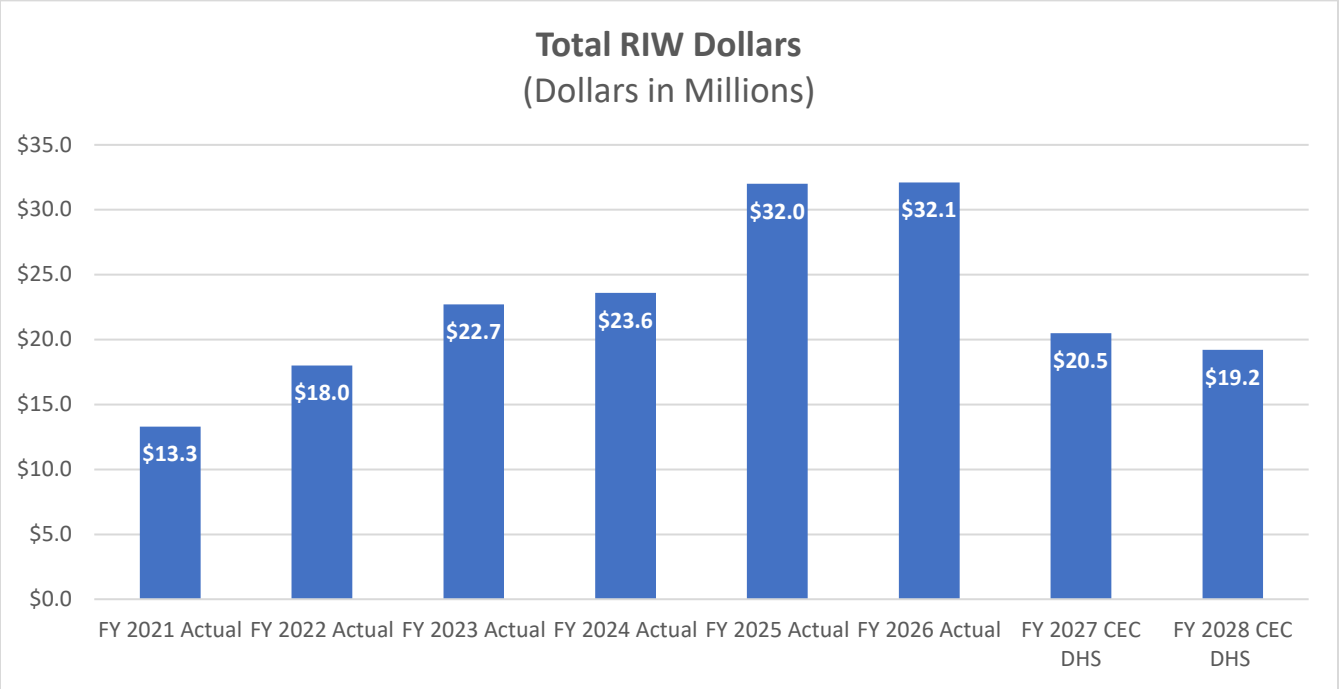
RI Works had three (3) legislative changes with an effective date of July 1, 2024. The monthly benefit amount was increased by 20 percent, the Earned Income Disregard increased from $300 to $525, and the Full Family Sanction was removed. Due to the need to update the electronic system, RIBridges, the changes were made retroactively for the first two (2) months. Families were notified of the changes in July, however, the benefits were provided in August 2024 for both the benefit increase and the increase in the Earned Income Disregard. Case closings due to sanctions were suppressed, meaning cases were not closed due to a Full Family Sanction, but the benefit amount was decreased to only include the number of children in the household included on the case.

In July and August 2025, there was a caseload increase of five percent. Post-legislative changes, DHS is seeing an average cost-per-case from August through September, of approximately $737, an increase from the $611 benefit in the prior months. These increases allow more families to access the program and receive a higher benefit amount.

Cases with a sanction status appear to increase slightly in May 2026 since the removal of the full family sanction and then leveled. However, the number is not higher than before the change.

Prior to the benefit increase in July 2024, the RI Works caseload was stable, with only marginal average month-over-month increases. As previously stated, the increase did cause a large increase in August caseload, but the increase since then flattened and has declined.





TANF Federal Law Changes

ACF has confirmed changes based on the Fiscal Responsibility Act detailed below.

Four Key Portions of FRA:

1) Work Participation Rate Changes effective 2025
    a) Caseload Reduction Credit (CRC) Reset to 2015
    b) Elimination of Small Checks Scheme
2) Focus on Work Outcomes:
    a) Outcomes-Based Reporting
        a) Work outcomes for TANF exiters
        b) Secondary School Diploma

1.a. The change to the caseload reduction credit (CRC) altered the year of comparison from Federal FY 2005 to Federal FY 2015, effective date of October 1, 2025, affecting the report submitted December 31, 2026. DHS has less CRC applied to the WPR penalty to help reduce the federally required percentages of 50 percent for one-parent families and 90 percent for two-parent families. ACF stated the single-parent WPR requirement has risen to approximately 22 percent, to be confirmed when ACF calculates the 2026 figures. DHS will know the full impact of these changes after FY26 data is analyzed usually in the following calendar year.

1.b. Rhode Island is not affected by the elimination of small checks. Changes will be effective in Federal FY 2026.

2. DHS has already been utilizing "Work Outcomes" according to WIOA since 2018. The FRA will collect data in a pilot, utilizing WIOA and other metrics. Outcome-based reporting is already completed through the WIOA and active contract management for TANF.

DHS selected the Public Consulting Group from an RFP process completed in 2024. PCG is assisting in the MOE calculation, WPR calculation, and the CRC calculation to improve process and outcomes.

Question 1) Please provide a profile of current 1-parent, 2-parent, and child-only cases by demographics (such as age and residence) and by duration of benefits.

Answer: Please see the following tables and charts for summarized data on RI Works participants.

Household Breakdown	
Households with 1 parent	61.25%
Households with 2 parents	3.47%
Households with child-only cases	35.28%

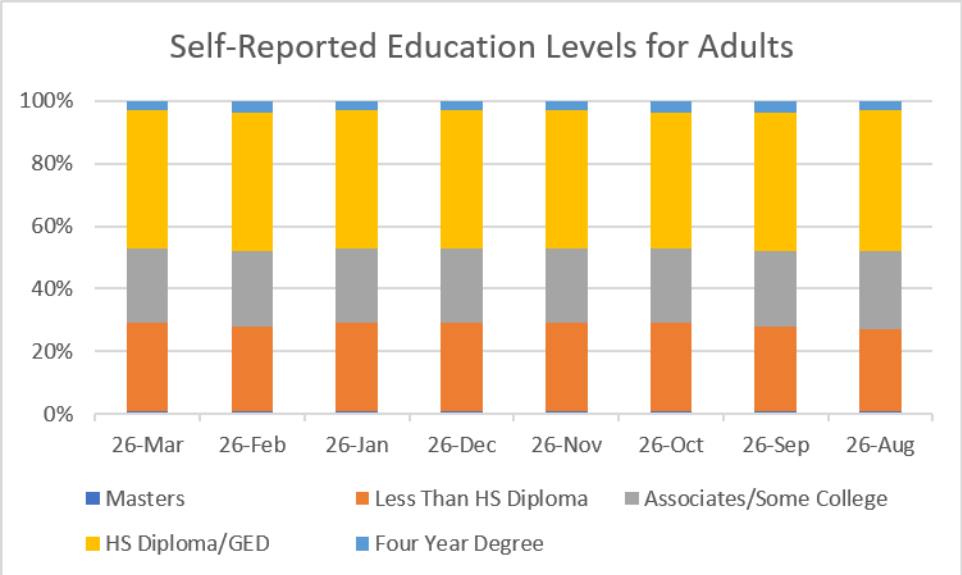
Race and Ethnicity	
American Indian or Alaskan Native, Non-Hispanic	1.50%
Asian, Non-Hispanic	1.24%
Black or African American, Non-Hispanic	20.72%
Native Hawaiian or Other Pacific Islander, Non-Hispanic	0.28%
White, Non-Hispanic	29.81%
Hispanic, including Mexican, Puerto Rican, and Cuban	36.43%
Unable to Determine the Ethnicity or Race	10.02%

Recipients per Household	
1 individual	22.9%
2 individuals	39.1%
3 individuals	22.8%
4+ individuals	15.2%

Months on RI Works (Case Counts)					
	0-24	25-48	49-60	>60	Total
Single-Parent	796	469	164	248	1677
Two-Parent	50	29	8	8	95
Total	**846**	**498**	**172**	**256**	**1772**

Year	Median Duration of Benefits
2022	30
2023	28
2024	25
2025	22
2026	20

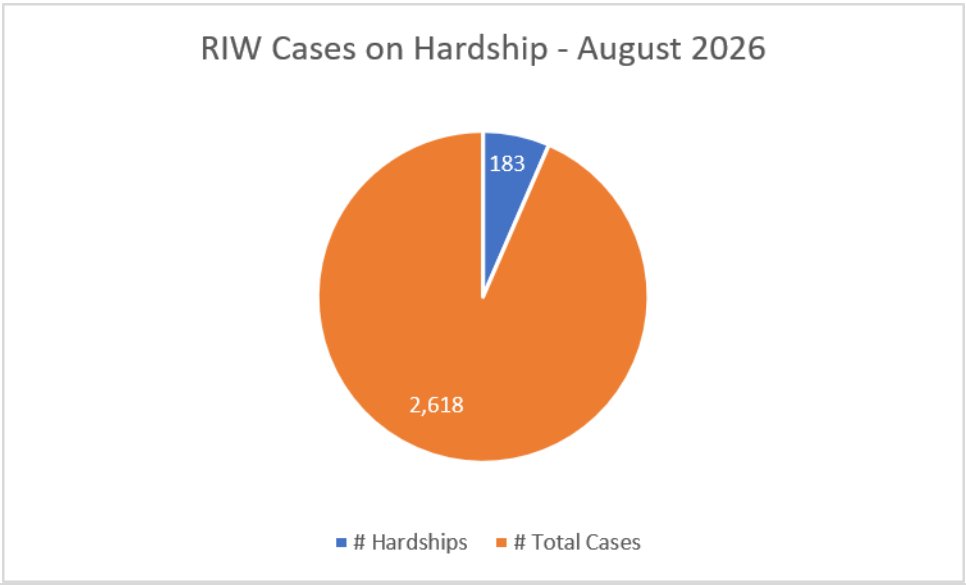
Self-Reported Education Levels for Adults	
Less Than 8th Grade	2%
8th Grade	1%
9th Grade	4%
10th Grade	6%
11th Grade	12%
12th Grade or GED Completed	45%
Some College, Not Graduated	21%
Two Year Degree	4%
Four Year Degree	3%
Post Four Year Degree	1%
Unknown	0%

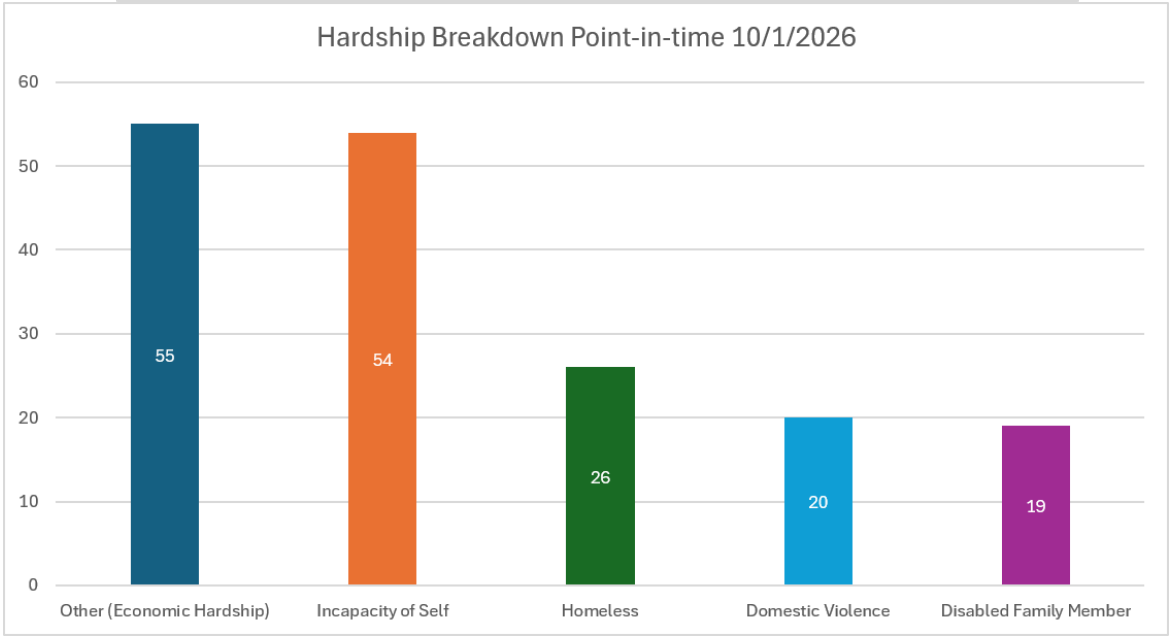


Rhode Island Works Cases/Individuals by City/Town		
City/Town	**Cases**	**Individuals**
Barrington	10	25
Bristol	19	39
Burrillville	21	55
Central Falls	116	275
Charlestown	4	11
Coventry	34	77
Cranston	134	318
Cumberland	32	70
East Greenwich	8	21
East Providence	102	238
Exeter	3	9
Foster	2	6
Glocester	2	3
Hopkinton	4	7
Jamestown	5	10
Johnston	39	100
Lincoln	29	61
Little Compton	0	0
Middletown	27	71
Narragansett	3	7
Newport	91	242
North Kingstown	25	63
North Providence	49	116
North Smithfield	12	28
Pawtucket	352	806
Portsmouth	10	26
Providence	982	2365
Richmond	3	10
Scituate	8	22
Smithfield	11	29
South Kingstown	13	33
Tiverton	16	37
Warren	22	47
Warwick	77	195
West Greenwich	1	1
West Warwick	82	195
Westerly	11	24
Woonsocket	320	816
Unknown	9	22
Total	**2688**	**6462**

Question 2) Please provide a current profile of hardship cases by similar criteria as listed above and for the past five years.

Answer: Hardship extensions are available to families reaching time limits. There are five criteria in DHS regulations for hardship extensions. Currently, hardship extensions are granted for six-month increments. Cases classified as "hardship" cannot have employment plan exemptions, cannot be "between plans", and cannot be under sanction.





The number of hardships as a percentage of the total caseload remains below the federal statutory ceiling of 20 percent. Rhode Island's hardship cases constitute approximately seven percent of the state caseload. Rhode Island's hardship cases are now counted only after a case

exceeds 60 months on the RI Works benefit. RI Works vendors continue additional programming to target the cases exceeding 60 months on their state time clock. There are no hardship cases that are child-only. Hardship cases can be summarized by municipality and reason for case extension.

Months on RI Works					
	0-24	25-48	49-60	>60	Total
Single-Parent	796	469	164	248	1677
Two-Parent	50	29	8	8	95
Total	**846**	**498**	**172**	**256**	**1772**

Year	Median Duration of Benefits
2022	30
2023	28
2024	25
2025	22
2026	20

Hardship Cases by City/Town					
City/Town	**2022**	**2023**	**2024**	**2025**	**2026**
Barrington	0	2	3	7	4
Bristol	0	1	2	4	2
Burrillville	0	1	5	10	1
Central Falls	52	21	32	37	5
Charlestown	0	0	0	0	0
Coventry	4	2	6	6	4
Cranston	15	11	31	29	5
Cumberland	15	6	10	10	4
East Greenwich	15	0	0	0	0
East Providence	15	15	24	32	6
Exeter	15	0	0	1	0
Foster	0	1	3	2	1
Glocester	2	0	0	0	0
Hopkinton	2	1	2	2	0
Jamestown	8	0	0	0	0
Johnston	29	6	9	13	3
Lincoln	31	1	7	4	1
Little Compton	0	1	1	1	1
Middletown	19	6	18	14	5
Narragansett	0	0	0	1	0
New Shoreham	0	0	0	0	0
Newport	95	23	41	50	9
North Kingstown	9	4	9	10	2
North Providence	23	9	18	21	3
North Smithfield	0	1	1	2	1
Pawtucket	132	33	88	106	30
Portsmouth	1	2	4	5	1
Providence	537	141	320	388	73
Richmond	0	0	0	1	0
Scituate	11	3	3	0	0
Smithfield	11	3	7	8	0
South Kingstown	2	1	2	3	1
Tiverton	0	4	7	5	1
Warren	0	3	4	3	1
Warwick	32	11	21	19	5
West Greenwich	3	0	0	0	0
West Warwick	24	5	25	30	2
Westerly	0	1	1	1	0
Woonsocket	170	48	95	102	25
Other/Multiple City	2	0	0	68	0
Total	**1,274**	**367**	**800**	**859**	**196**

Question 3) Please provide for the past five years how many parents are currently without a plan due to:

a. Exemption from employment planning
b. Being between plans
c. Sanction—by month, the number of parents sanctioned for not complying with work requirements in FY2027 and FY2028

Answer: RI Works employment plans are a required component for the eligible adult to maintain an open case. RI Works participants cannot have an open case without an employment plan. A system enhancement that was implemented in the fall of 2024 sends out system-generated notices earlier to inform parents the employment plan was expiring and provide direction to remedy. Programmatically, DHS has vendors send notices ensuring customers know their case is in danger of closing if they are noncompliant with required activities as detailed in their employment plan.

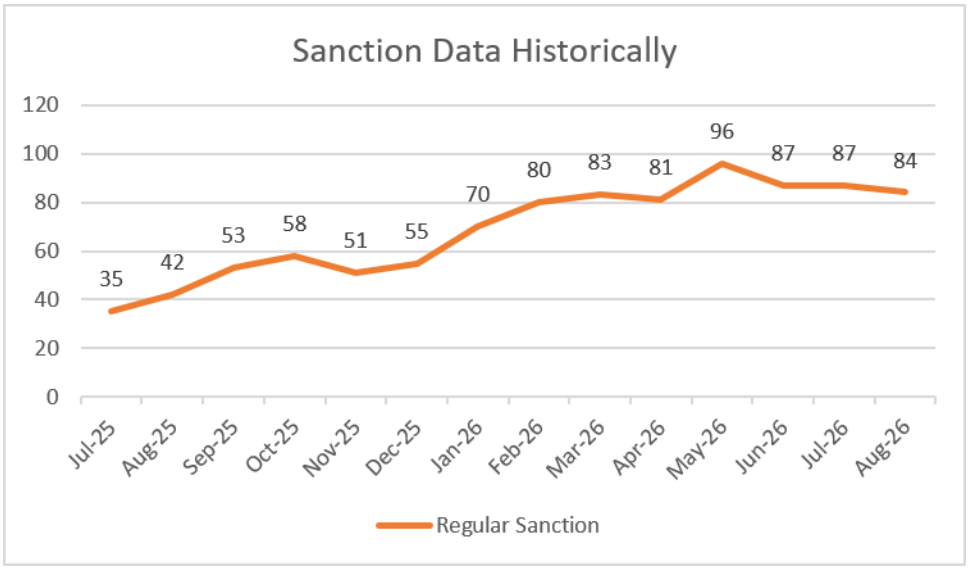
143 cases are currently active with exemptions.

Exemptions	Yearly Data
2021	121
2022	147
2023	155
2024	234
2025	239
2026	143

69 cases are currently active without a plan.

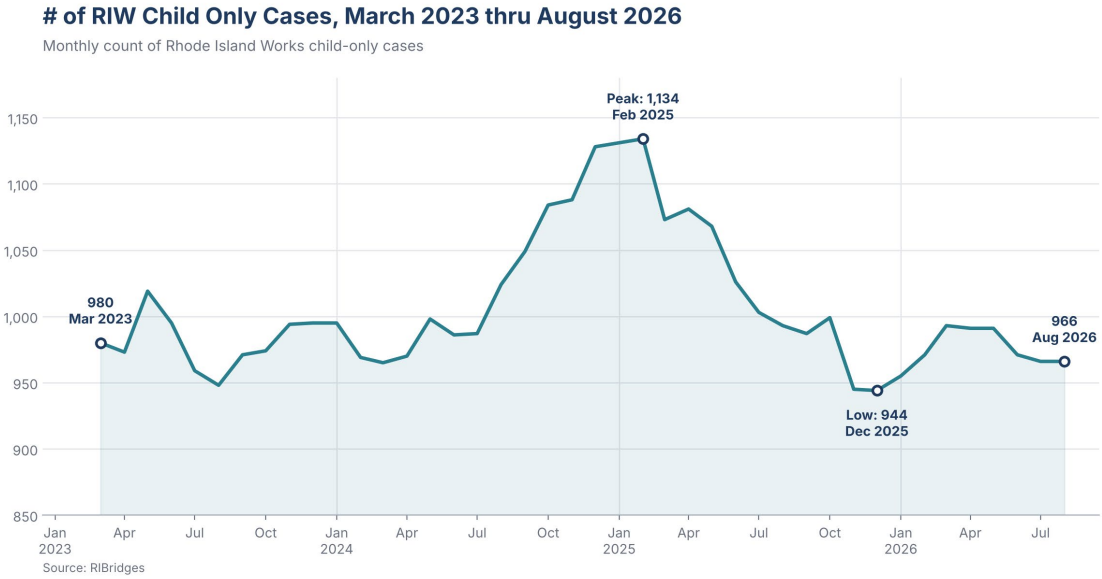
Between Plans	Yearly Data
2021	95
2022	66
2023	101
2024	26
2025	42
2026	69

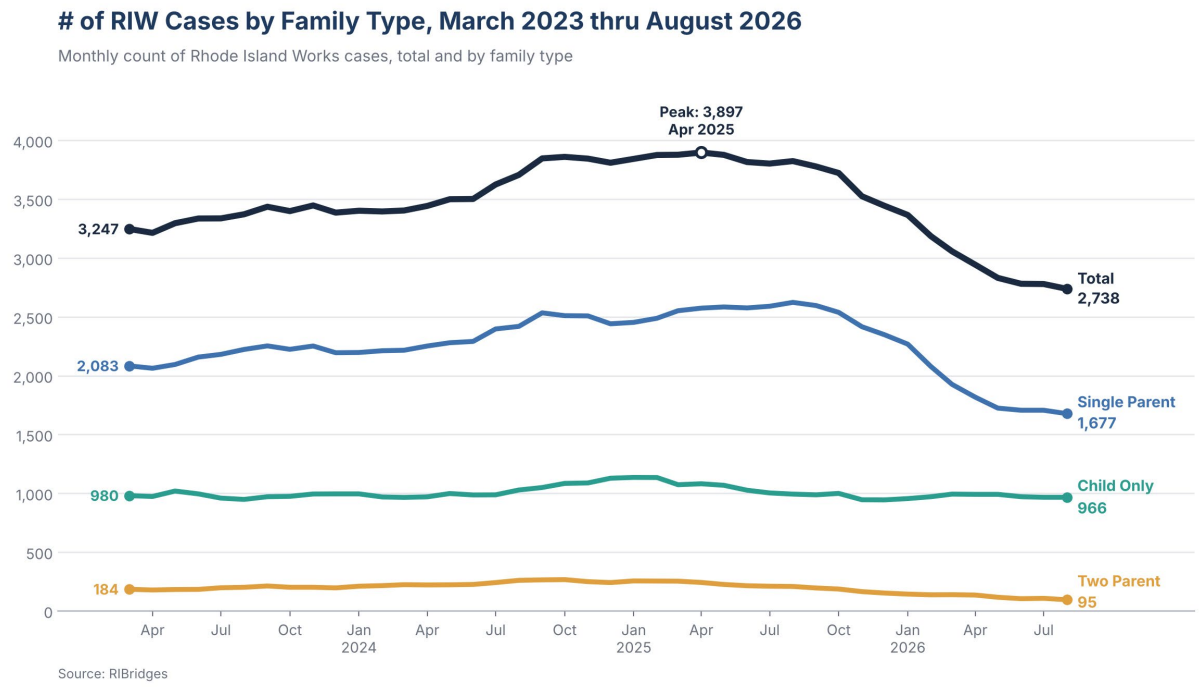
Effective July 1, 2024, R.I. General Law removed the full family sanction. The result is the case will remain open with a decrease in the monthly benefit amount. The benefit amount is based on the number of children and compliant adults, minus the amount owed to any adults under sanction status. The benefit amount will always support the number of eligible children in the household. The statutory change means that cases will remain open to RI Works under sanction status.



Question 4) How many child-only cases are included in the estimate for FY 2027 and FY 2028? How many families receive the payment(s)? Please include data from the last five years.

Answer: Currently the child-only cases are at 33.3 percent for a total of 996 cases, this was true for both July and August 2026. The projections for SFY 2027 and SFY 2028 assume child-only cases make up the same proportion of total caseload throughout the period. The average child-only caseload for SFY 2026 was 979. The average child-only caseload for SFY 2025 was 1,073. The average child-only caseload for SFY 2024 was 977. The average child-only caseload for SFY 2023 was 972. The average child-only caseload for SFY 2022 was 949. Additional detail is available in graphs below.





Question 5 [first part]) Please update FY2027 and FY2028 TANF block grant estimates. After adjusting for these estimates, please include the TANF balance and report any plans for its use in the out years.

Answer: The TANF carryforward amount is projected to continue to decrease as a result of increased spending and investments made beginning in FY2024. The out years' forecast is slightly less aggressive than previous testimony due to projected reductions in both the RIW and CCAP caseload estimates. Carryforward projections incorporate current caseload estimates for RIW and CCAP caseload and increases in vendor contracts supporting the TANF population. For FY2027, TANF is projected to support the CCAP caseload with $37.7 million. The enacted budget is currently showing at $41 million, but $37.7 million would more accurately reflect the last cash array from the May Caseload Estimating Conference.

-see next page-

2026 & 2027 TANF Budget							
Appropriation	Agency	LIS Name	FY26 Final Enacted Budget	FY26 Actual Expenditures	FY27 Enacted Budget	FY27 Expenditures as of 9/30/26 (WORKDAY)	Description of the Services Funded by TANF
26015	079	TANF/EA-CM Program-Federal Share	1,708,386	854,661	1,517,727	325,281	DCYF for TANF eligible youth to be served
26083	079	TANF/EA-CW Program-Federal Share	8,846,328	6,714,127	8,870,884	2,116,196	DCYF for TANF eligible youth to be served
26084	079	TANF/SSBG Grant	500,163	723,010	500,163	-	DCYF for TANF eligible youth to be served
26085	079	TANF - HCBS	1,300,558	1,678,923	1,300,558	-	DCYF for TANF eligible youth to be served
26102	079	TANF - SSBG Transfer	2,001,007	1,748,581	2,001,007	-	DCYF for TANF eligible youth to be served
26130	079	TANF - DCYF Hoteling	687,500	583,896	687,500	809,107	DCYF Hoteling for TANF eligible youth to be served
26134	079	TANF - DCYF Hoteling SSBG Transfer	3,558,587	1,231,876	3,558,587	-	DCYF Hoteling for TANF eligible youth to be served
24081	075	DHS Home Visiting Coop	200,000	2,956	200,000	-	RIDOH for RIW parents in the Family Visiting
24644	075	IAA-FF First Connections DHS TANF	-	81,564	-	88,271	RIDOH for RIW parents in the Family Visiting
23225	069	Early Head Start Supplemental Support	3,001,200	2,566,583	3,001,200	438,273	Funding of head start care with TANF funds
23080	069	FIP CM and Work Programs	15,306,000	17,705,573	15,406,000	1,605,410	Contracted vendors engaging in direct services for RIW parents
23081	069	FIP Administration	6,774,510	8,475,661	6,147,131	1,353,321	Administrative funds for DHS
23083	069	UHIP - TANF Federal Allocation	-	202,690			Administrative funds for UHIP
23134	069	FIP/TANF - Regular	29,396,396	31,698,207	24,317,728	5,948,156	Cost for TANF/RIW benefits to families
23135	069	AFDC Catastrophic Aid	200	-	1,000	-	Costs for families who have experienced a catastrophic event like fire or flood
23136	069	Child Care - TANF Funds	35,978,857	35,248,045	41,176,808	3,966,238	Funding of low income child care with TANF funds
23137	069	RIPTA Transportation Benefit	397,564	395,715	325,710	-	Funding of bus passes for RIW parents
32085	072	Project Opportunity	1,400,000	1,246,658	1,400,000	-	Adult Education (ABE, ESL, GED)
22189	028	RIBridges - Federal TANF (EOHHS)	869,691	772,073	1,360,258	120,317	Administrative funds for UHIP
22191	028	RIBridges - Federal TANF Non-IAPD (EOHHS)	914,825	968,248	305,388	51	Administrative funds for UHIP
			$ 112,841,772	$ 112,899,049	$ 112,077,649	$ 16,770,620	

Fiscal Year	Awarded	Expensed	Planned Expenses	Cumulative Carry Forward	Federal Reports
SFY 2020	$94,294,105	$ 85,644,437	$ -	$ 15,800,878	
SFY 2021	$94,608,671	$ 69,204,618	$ -	$ 41,204,931	
SFY 2022	$95,675,713	$ 60,891,460	$ -	$ 75,989,184	
SFY 2023	$94,708,016	$ 73,061,447	$ -	$ 97,635,753	
SFY 2024	$93,842,484	$ 83,200,376	$ -	$ 108,277,861	
SFY 2025	$94,708,016	$ 109,880,343	$ -	$ 93,105,534	$102
SFY 2026	$94,708,016	$ 112,899,049	$ -	$ 74,914,501	
SFY 2027	$94,708,016	$ 16,770,620	$ 95,898,414	$ 56,953,483	
SFY 2028	$94,700,000	$ -	$ 112,077,649	$ 39,575,834	
SFY 2029	$94,700,000	$ -	$ 112,077,649	$ 22,198,185	
SFY 2030	$94,700,000	$ -	$ 112,077,649	$ 4,820,536	

Question 5 [second part]) Please indicate how the state will meet its maintenance of effort (MOE) requirement and identify which MOE items are state costs and which are in-kind contributions.

Answer: DHS seeks MOE from both state agencies and other philanthropic agencies statewide. MOE is calculated using the methods provided by a previous vendor. DHS exceeded the MOE requirement by $2.6M in 2025.

State Costs:	$60,288,579
In-kind:	$6,729,627
Total:	$67,018,206

For FY2020 and future years, DHS has been instructed by ACF to calculate MOE differently by removing a provision previously allowed due to a prior law grandfathering it. The grandfathering has expired. This significantly reduces the amount of allowable expenditures and MOE allowed from DCYF Residential and the Office of Postsecondary Commissioner. DHS is working on utilizing other avenues to collect the MOE.

TANF Maintenance of Effort (MOE)

The TANF Maintenance of Effort (MOE) is a requirement that a state must spend at least a specified amount of state funds for benefits and services for families in need each year. A broad array of benefits and services for low-income families with children can count toward satisfying a state's MOE obligation. A state may count any state funds used for TANF program services or any funds that meet the federal TANF purposes as TANF MOE toward the required $64.4 million benchmark.

Federal law allows six types of expenditures that can be counted toward MOE requirements:

1. Cash assistance
2. Child care assistance
3. Educational activities designed to increase self-sufficiency
4. Job training and work
5. Any other use of funds reasonably calculated to accomplish a TANF purpose

6. Administrative costs in connection with other allowable purposes

The consequences for not meeting the MOE are that the TANF grant will be reduced the following year on a dollar-for-dollar basis, and the state will be required to expend additional state funds in its TANF program to the amount by which the state fell short of meeting the MOE.

	FFY 2022 Reported to ACF	FFY 2023 Reported to ACF	FFY 2024 Reported to ACF	FFY 2025 Reported to ACF	FFY 2026 Projected to ACF
RIW Admin - DHS	$3,855,901	$4,829,497	$5,289,294	$4,280,450	$4,280,450
Child Care MOE DHS	$5,351,126	$5,321,207	$5,321,126	$5,297,111	$5,297,111
Emergency Assistance - DCYF	$1,131,567	$1,734,050	$1,817,429	$685,529	$685,529
DCYF Other	$15,774,162	$25,201,254	$18,272,718	$16,157,651	$16,157,651
DEFRA (Child Support Pass-Thru)	$217,814	$232,095	$280,233	$316,846	$500,000
RIDE Adult Ed	$1,050,000	$1,151,165	$1,131,644	$279,456	$1,000,000
CAP Agencies (Leg. Grants)	$210,180	$210,960	$226,200	$144,776	$144,776
Head Start	$1,190,000	$1,188,618	$1,190,000	$1,137,045	$1,137,045
SSI	$2,228,503	$2,209,901	$2,227,599	$0	$0
GWB-DLT Youth Work Readiness	$754,407	$966,433	$848,968	$653,236	$653,236
Earned Income Tax Credit	$19,364,568	$18,656,693	$20,439,680	$20,368,600	$20,368,600
Property Tax Relief Program (Circuit E	$121,851	$164,945	$150,108	$139,972	$139,972
DCYF Residential	$4,174,996	$3,624,546	$5,163,737	$6,862,503	$6,862,503
Weatherization	$5,159,377	$7,284,662	$7,954,370	$3,965,404	$3,965,404
Rhode Island Food Bank	$2,900,173	$3,537,371	$940,955	$2,319,075	$2,319,075
Community Organizations (Listed Bel	$2,172,515	$2,242,561	$2,387,124	$4,410,552	$4,410,552
OPC / Promise	$4,389,791	$4,138,215	$4,141,348	$0	$0
Total	$70,046,931	$82,694,173	$77,782,533	$67,018,207	$67,921,905

-see next page-

The tables below show MOE expenditures by category and community organizations:

	FFY 2022 Reported to ACF	FFY 2023 Reported to ACF	FFY 2024 Reported to ACF	FFY 2025 Reported to ACF	FFY 2026 Projected to ACF
Roman Catholic Diocese or Providence	$111,513	$51,243	$45,752	$57,797	$57,797
The Salvation Army	$0	$0	$0	$0	$0
United Way of Rhode Island	$0	$284,688	$302,587	$825,302	$825,302
Boys and Girls Club	$1,000,000	$1,000,000	$1,000,000	$1,915,733	$1,915,733
Rhode Island Foundation	$466,077	$236,913	$327,311	$746,997	$600,000
SStarbirth	$41,999	$50,386	$55,045	$3,909	$3,909
Crossroads	$87,227	$175,871	$134,376	$59,486	$59,486
Dorcas International Institute	$12,720	$220,680	$106,231	$393,653	$393,653
Non-Violence Institute	$1,080	$0	$0	$0	$0
RI Coalition Against Domestic Violence	$390,329	$149,625	$171,341	$258,332	$258,332
Com CAP	$8,566	$5,971	$6,876	$7,866	$7,866
Genesis Center	$53,004	$67,184	$237,605	$141,475	$141,475
Total	$2,172,515	$2,242,561	$2,387,124	$4,410,552	$4,263,555

Question 6) Please provide the "all families" and "two-parent families" work participation rate for FY2027, along with a work participation rate target. Please include data for the past five years.

Answer:

- FY2021 Required all families: Required 0.0 percent (met; 6.5 percent)
  Required 2-parent families: Required 26.3 percent (not met; 8.0 percent)
- FY2022 Required all families: Required 0.0 percent (met; 7.6 percent)
  Required 2-parent families: Required 15.2 percent (not met; 8.6 percent)
- FY2023 Required all families: Required 0.0 percent (met; 11.6 percent).
  Required 2-parent families: Required 14.5 percent (not met; 12.9 percent)
- FY2024 required all families: Required 0.0 percent (met; 11.3 percent)
  Required 2-parent families: Required 19.3 percent (met; 19.5 percent)
- FY2025 Required all families: Required 0.0 percent (met; 11.0 percent)
  Required 2-parent families: Required 18.9 percent (met; 19.3 percent)
- FY2026 and FY2027 data are not yet available. While the final FY27 required rate will not be known until ACF calculates the applicable caseload reduction credit and excess MOE, DHS's operational target is to meet or exceed the federally required rate one established.

Work Participation Rate (WPR) Overview

RI Works parents are required to participate in employment preparation activities and must do so for a minimum number of hours per week on average for the month, per federal TANF regulations. The required minimum hours differ based on the age of the youngest child and whether there is a second parent in the household.

- Parents whose youngest child is under the age of six must participate for a minimum of 20 hours per week.
- Parents whose youngest child is six or older must participate for a minimum of 30 hours per week.
- Two-parent families must participate for a minimum of 35 hours per week.

Not all RI Works parents are required to participate in employment-related activities. Some are exempt for reasons including being disabled, caring for a child under the age of one, caring for a disabled child or family member, or being in the third trimester of pregnancy and medically unable to work. Others are exempt because they are "child-only" cases where the payment is entirely for the child(ren), and the parents or caretaker relatives do not receive a cash payment for themselves (e.g., parent on SSI or children in kinship care).

Unless exempt, parents receiving a cash payment are required to comply with an employment plan. Parents can be sanctioned if they are not meeting the minimum required employment plan hours without good cause. If parents can provide good cause for a failure to comply with their employment plans, then their case will not be sanctioned.

Federal Work Participation Rate (WPR) data is derived from a quarterly data interface that is reviewed by the Administration for Children and Families (ACF). The State cannot currently calculate WPR. Instead, ACF provides the State with feedback based on data submissions. For FFY2024 Rhode Island met the required WPR for two-parent families for the first time and again in 2025.

Question 7) Please provide an update on the status of current or potential federal penalties associated with the work participation rate.

Answer: ACF confirmed there are no pending penalties on September 4, 2026.

Question 8) Please provide an update on field office operations and any staffing challenges and any impact on enrollment from those challenges.

Answer: DHS field office operations continue to focus on maintaining access through in-person, telephone, and online services while balancing workload and improving accuracy. SNAP Connect is fully implemented statewide, supporting telephone interviews and reducing reliance on office visits. Appointment-based services, walk-in access at designated locations, and dedicated processing time continue to support application processing and customer assistance.

Recent facility disruptions have required temporary changes to service delivery. Pawtucket and Shepard remain under a remote customer service model while pest treatment and monitoring continue. Telephone appointments and access through other DHS locations help maintain customer support during these disruptions. DHS continues coordinating inspections, treatment, and preventive measures to support a safe return to in-person services.

Staffing remains a significant operational challenge, particularly in eligibility processing and customer-facing positions. DHS currently has 804 authorized positions, of which 686 are filled and 118 remain vacant. Additionally, 77 employees are on medical leave (either continuous or intermittent), or their case is pending review, further reducing available staffing capacity. These payroll data are current as of September 30, 2026. Vacancies, employee absences, and the time required to recruit, onboard, and train new employees affect the Department's ability to respond to workload demands. DHS continues active recruitment and recently onboarded a cohort of 17 Eligibility Technicians, with additional hiring and training planned. Targeted overtime, workload balancing, dedicated processing time, and coordination with labor and DOA HR remain important strategies for maintaining operations while new staff develop proficiency.

DHS continues to manage substantial caseload demands across SNAP, Medicaid, Child Care, and other assistance programs. As reflected in draft September 2026 reporting, DHS had approximately 6,932 pending applications, including 2,830 overdue, of which 2,230 were awaiting state action. The largest concentrations of overdue work involve Medicaid applications, particularly Undetermined Medical, Medicare Premium Payment, and Complex Medicaid cases. In August, DHS provided SNAP benefits to approximately 72,000 households and processed approximately 78% of new SNAP applications timely. These figures underscore the importance of maintaining sufficient processing capacity while implementing changes designed to improve long-term performance.

The Department's integrated eligibility system adds complexity as federal SNAP and Medicaid policy changes require training and operational adjustments across the eligibility workforce. DHS is advancing its One-Touch Processing Model to strengthen first-touch accuracy, obtain necessary verification earlier, and reduce repeated case handling and unnecessary customer contacts. While these improvements may temporarily increase processing time as staff adapt to new practices, they are intended to reduce workflow inefficiencies, improve timeliness, and support more consistent eligibility determinations.

These operational and staffing challenges can affect processing speed and customer access; however, the information currently available does not establish a measurable enrollment decline attributable specifically to staffing constraints. SNAP enrollment has declined during the implementation of federal H.R. 1 changes, with participating households decreasing from approximately 86,300 in August 2025 to 72,000 in August 2026, a reduction of approximately 16.6%. Changes to federal work requirements, utility allowance rules, and noncitizen eligibility are affecting SNAP participation and benefit levels, although the overall decline cannot be

attributed exclusively to these changes. DHS continues monitoring enrollment trends, application and renewal activity, processing timeliness, and cases awaiting state or customer action to distinguish federal policy impacts from operational barriers and direct resources where they are most needed.

Maintaining access and improving accuracy remain linked priorities. DHS has established the Office of Program Integrity to strengthen oversight, coordinate quality improvement, and connect findings from case reviews to training, operational practices, and system improvements. Progress includes continued implementation of the SNAP Payment Error Rate Improvement Plan, targeted training and supervisor coaching, shelter verification monitoring, and preparations to onboard five additional quality assurance reviewers in October. This work is building a more consistent approach to preventing errors, identifying issues earlier, and reducing redundant effort that contributes to processing delays.

DHS is also advancing readiness for Medicaid changes under H.R. 1 occurring in January 2027, in coordination with EOHHS and system partners. Preparations include aligning policy and verification guidance, reviewing customer and staff workflows, identifying system changes, and planning training, communications, and workload capacity. DHS is reviewing the readiness assessment and implementation roadmap and validating workforce, labor, facility, and system dependencies before finalizing implementation decisions. These federal changes are expected to increase eligibility and renewal workloads, making workforce capacity and operational readiness particularly important to maintaining timely determinations and continuity of coverage for eligible customers.

Call center modernization is also moving through procurement. Together, these initiatives reflect DHS's continued commitment to maintaining customer access, strengthening payment accuracy, reducing avoidable processing delays, and building the workforce and technology capacity needed to sustain operations under changing federal requirements.

Question 9) Please provide the basis for the agency's projection for transportation costs. Please provide a five-year history, including current fiscal year-to-date, for the actual number of bus passes issued and the utilization rate.

Answer: Projected transportation costs are calculated by a presumed usage rate of total RI Works persons multiplied by the adjusted cost of the monthly bus pass. The Department saw modest fluctuation in the percent of persons on RI Works who are currently utilizing their bus pass option from MTM for the last couple of years. Taking the average over SFY2024 through SFY2026, DHS projects usage of 5.3 percent for the remainder of FY2027. Trends over the past five years have significantly dropped the transportation costs, including increased use of virtual training and virtual participation hours. The RIPTA voucher program is largely for ADA and expanded paratransit. This population is unlikely to affect the RI Works transportation costs.

Period	Source	Transportation Expenditures	Monthly Bus Passes Issued	Utilization Rate
SFY 2028	Department Projection	$214,748	2,603	5.29%
SFY 2027	Department Projection	$273,323	3,313	5.29%
SFY 2026	Actuals	$379,748	4,603	4.83%
SFY 2025	Actuals	$535,013	6,485	5.77%
SFY 2024	Actuals	$434,866	5,271	5.28%
SFY 2023	Actuals	$416,609	5,050	5.10%
SFY 2022	Actuals	$435,429	5,278	6.86%

Question 10) Please identify the strategies the RI Works Program is preparing its beneficiaries for in workforce readiness.

a. Please identify the industries in which the RI Works Program beneficiaries receive workforce development.

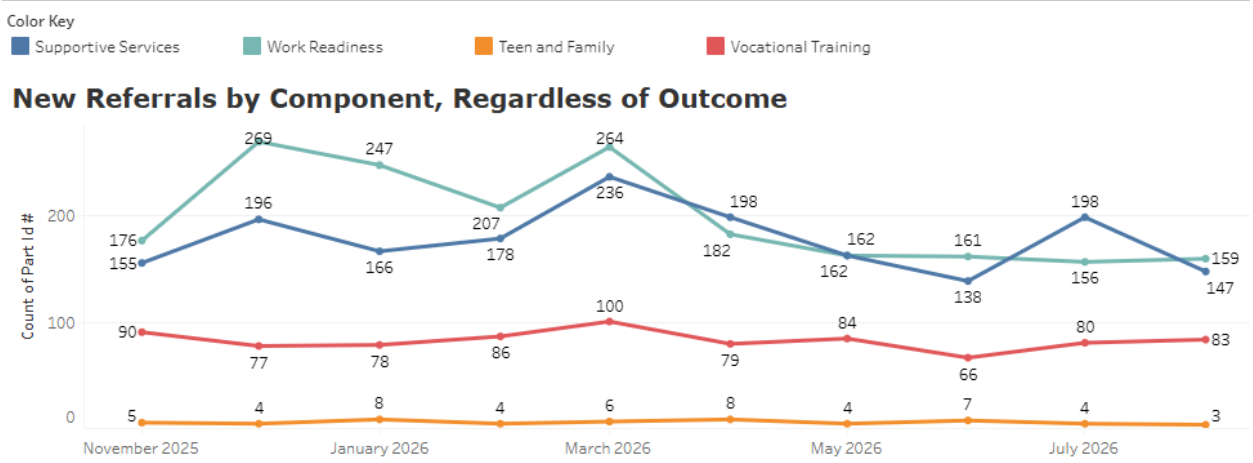
Answer: Working with RI Works parents includes wraparound supportive services, adult education, vocational training, and job readiness. Depending on the parent or caretaker's education or work history, the RI Works vendors create a family goal and employment goal. Goals are updated with every new employment plan. Working with this population often means mitigating multi-generational barriers to longtime sustaining employment. In order to ensure success, the RI Works vendors must monitor labor market statistics in critical fields, ensuring job availability and wages high enough to sustain a family.

RI Works participants have completed a variety of vocational trainings that include the following industries:

Healthcare-related jobs are the highest demand, including LPN, CNA, Patient Care Tech, Phlebotomy, Medical Assistant, Dental Assistant, Billing and Coding, and Registered Nurse. Other demand industries include Early Childhood Education, Business Management, Graphic Design, Cosmetology, Massage Therapy, Culinary Arts, Computer Programming, and CDL Training.

RI Works Contracted Vendors

There are three original contracted vendors that support the RI Works customers with basic services. These vendors provide support to customers through the four program components: Supportive Services, Youth Services, Vocational Training and Job Readiness, Employment & Retention. The programs provided to RI Works families streamline supportive services, education and/or training programs with the goal of stabilizing families. The vendors' programs result in more parents being engaged in work activities that would be reflected in higher wages and assisting them in obtaining successful employment outcomes.



The contracts are based on performance metrics that incentivize the vendors to assist parents in obtaining long-term employment at a living wage. DHS will continue to request vendors to provide extensive data to DHS on a monthly basis so that progress and trends can be tracked and changes can be put into effect as needed.

DHS utilized the Grant Management System to solicit new RI Works vendors in 2024, providing a broader array of services that focused on key areas. A subpopulation of RI Works families need specialized support to become work-ready. As mentioned previously, a vendor has been added to focus on mental health barriers specific to employment. This vendor will also provide consultation for DHS staff on mental health interventions. Another vendor will focus on personalized financial literacy that includes credit repair and small business plan development and teen classes. New vendors were also selected on their ability to reach specialized populations facing barriers to accessing services. These selections were based on location and subject matter expertise, such as those with immigration barriers, those experiencing homelessness, underserved populations, and those with unidentified barriers.

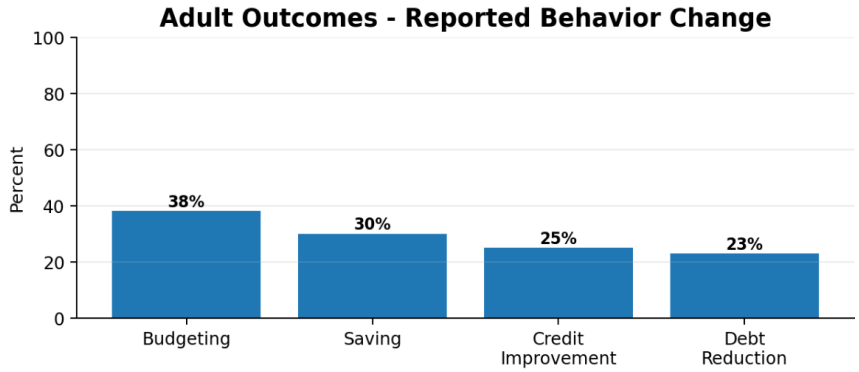
Additionally, as mentioned above, DHS has added a pilot across the larger supportive contracts to address housing instability through the Housing Stability Pilot (HSP). HSP is used to mitigate the effects of trauma and stress related to housing insecurity, allowing RI Works participants to focus on work readiness. HSP is a homeless prevention program that is assisting low-income families who meet eligibility criteria. The short-term assistance is being used to prevent evictions and assist in establishing housing for participants.

Since the rollout of these prior contracts, two important new or expanded services have been implemented:

Financial Literacy helps to ensure that RI Works families become more aware of financial issues on their path to self-sufficiency. DHS requires all service vendors to integrate financial literacy into their curricula. This is accomplished by having all RI Works customers referred to a financial

literacy vendor so they may receive the specialized services. Currently, classes are offered by DHS's primary providers and a specialized provider, Sin-cere Multiservice. Parents who have attended this series have requested services for their children in RI Works households. The agency is piloting a program for adolescents, with referrals from the parent. The financial literacy classes are on Saturdays.

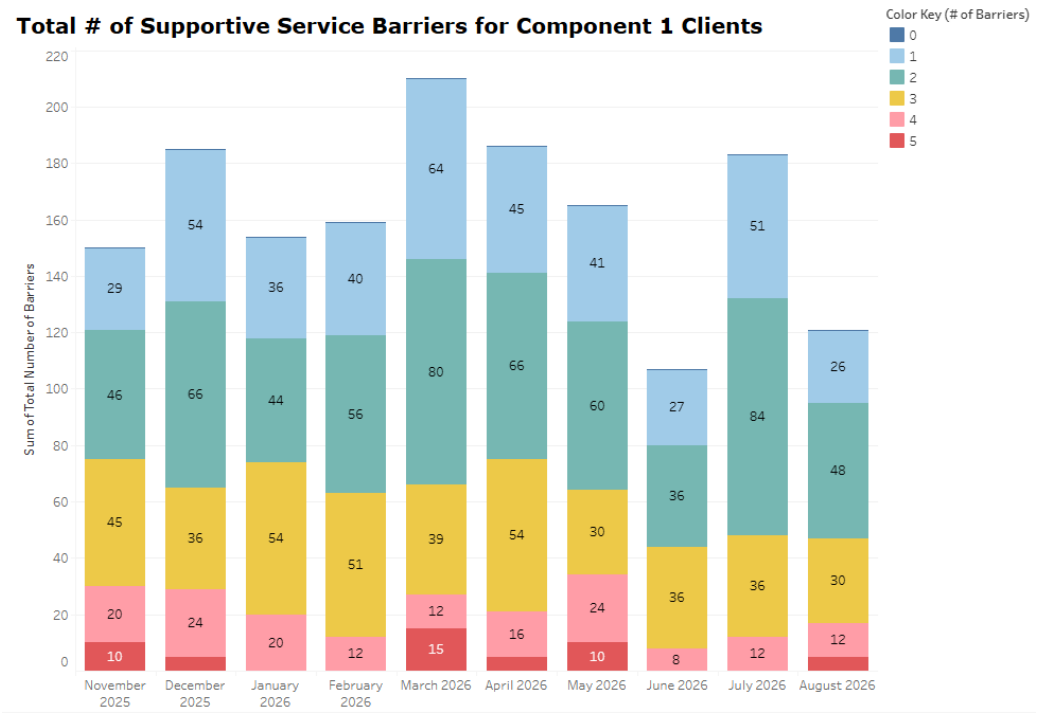
Sin-cere Multiservice Data

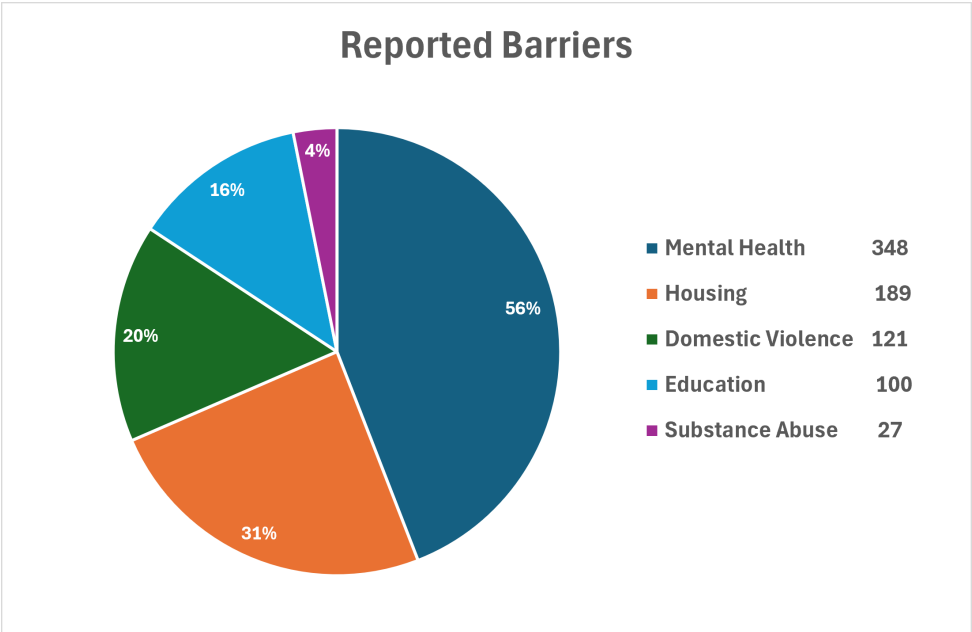


- ***Supportive Services*** to assist RI Works families in resolving barriers and issues that may be hindering them from becoming employed and on a path to self-sufficiency.

  The most common problems faced by RI Works customers include:

  - Mental Health Challenges
  - Unstable Housing/Homelessness
  - Domestic Violence/Intimate Partner Violence
  - Low Educational Attainment
  - Unaddressed Disabilities
  - Substance Use Disorder





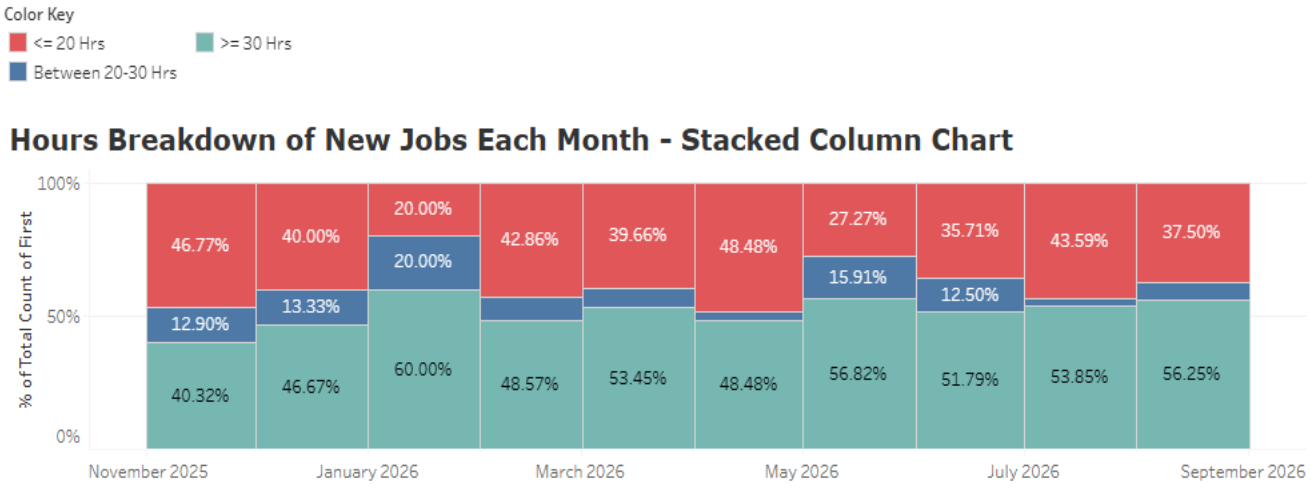
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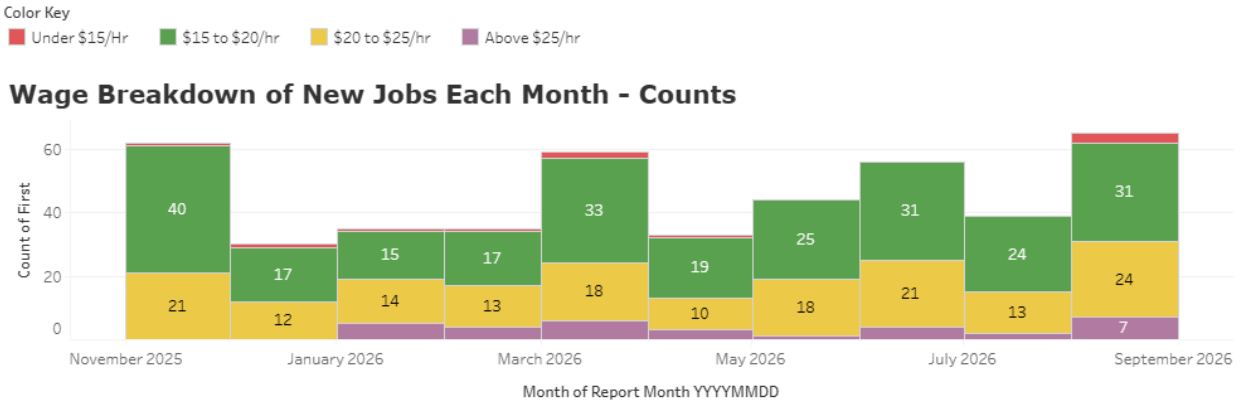
RI Works staff analyze vendor data monthly and can provide immediate feedback to vendors who are either struggling or are highly effective in working with RI Works families. The completion of vocational training programs can have a significant effect on obtaining long-term, sustainable employment.

RI Works vendors prepare customers for employment by providing assistance with resumes and cover letters, interview skills, and counsel on appropriate workplace behavior. RI Works vendors also make referrals for customers to acquire appropriate attire for interviews and work. There are

multiple work-readiness strategies pursuant to 45 CFR 261.2, including subsidized employment, paid or unpaid work experience, on-the-job training, job search and job readiness activities, and community service. All RI Works customers are required to attend financial literacy counseling to prepare parents for budgeting their future income and are referred to Sincere Multiservice for financial literacy classes. When a customer is placed at a training site or employed, vendors provide job coaching, including performance feedback, to customers and also support employers in order to assure an effective match and maximize job retention.

In the past year, 574 parents have entered employment, and 32 participated in a work experience activity, including both subsidized and unsubsidized work experience. The average wage for these job placements was $19.21 per hour. Forty percent of job placements are for wages at or over $20 per hour. In the past year, 311 customers retained employment for at least six months, and 511 customers achieved the benchmark of earning over $4,000 in the fifth quarter after the start of their employment plans, following WIOA standards. Vendors were paid more than $639,700 in performance payments due to job retention. Not all fifth quarter retention incentives have been paid yet due to delays in verification and billing. Additionally, in the past year, 174 participants have completed their vocational training program. A total of 194 RI Works parents have participated in vocational training programs this past year.





Child Care Assistance Program (CCAP)

The Starting Right Child Care Assistance Program (CCAP) advances three essential goals:

(1) Promoting the healthy development and school readiness of Rhode Island's children.
(2) Providing equal access to quality learning environments to all early learners.
(3) Supporting income-eligible parents to work, pursue education, or engage in job training to achieve long-term economic stability.

Research consistently shows that access to high-quality early care and education is a critical economic driver. It supports workforce participation, strengthens family self-sufficiency, and lays a strong foundation for lifelong learning for young children.

Eligibility and Access
CCAP eligibility is determined through two primary pathways:

1. **Rhode Island Works (RIW):** Families participating in RIW who require child care to meet employment and training requirements are eligible for CCAP benefits with no co-payment.

2. **Income-Based Eligibility:** Families earning up to 261% of the Federal Poverty Level (FPL) (~61% of the State Median Income or $71,305 for a family of three) who meet all eligibility requirements receive CCAP benefits, and based on their income level, may be assigned a family share or copay. To promote continuity of care and workforce stability, families whose income rises above this initial threshold can continue receiving support through Transitional Child Care until their income reaches 300% of FPL (~70% of SMI or $81,960 for a family of three). Families contribute on a graduated co-payment scale, from 0% for those at or below 100% FPL to a maximum of 7% of income for those between 150%–300% FPL. In alignment with national standards, the Department of Human Services (DHS) lowered the co-pay cap from 14% to 7% as of January 1, 2022. The 2024 CCDF Rule currently requires states to maintain this 7% cap, ensuring affordability and equity.

    - Effective January 1, 2027, the entry income limit will increase from 261% to 285% of the Federal Poverty Level (FPL) (~67% of the State Median Income or $77,862 for a family of three). The exit limit will increase from 300% FPL to 325% FPL (~76% of the State Median Income or $88,790 for a family of three).

Current		1/1/2027	
261%	$71,305	285%	$77,862
300%	$81,960	325%	$88,790

Strengthening Rhode Island's Early Care and Education System

The Office of Child Care (OCC) continuously monitors the state's child care sector—tracking CCAP enrollment trends, licensed provider capacity, and quality improvements within the state's evidence-based framework. Recognizing that a stable child care system is vital to Rhode Island's economy, DHS provides strategic support to:

- Sustain small business child care providers;
- Strengthen the early educator workforce;
- Expand access to high-quality early learning for children and families.

Further details on DHS initiatives to support and sustain the early childhood care and education infrastructure are outlined below and can be provided upon request.

Caseload Projections and Trends

An average of 6,010 children received Child Care Assistance Program (CCAP) benefits each week in State Fiscal Year (SFY) 2026, representing a 0.1% decrease in the average weekly caseload compared with SFY 2025. Caseload trends varied by age group, with the average number of infants served decreasing by 8.1% and toddlers by 6.0%. In contrast, the average number of preschool-aged children served increased by 4.4%, while the number of school-aged children served increased slightly by 0.2%.

The Department is already seeing an increase in infant and toddler CCAP enrollment during the first months of SFY27, reversing the declining trend observed in previous fiscal years. Rhode Island continues to experience strong demand for child care services as evidenced by the increased caseload numbers over the last six months alone; however, the current system continues to be under significant strain. Currently, the state's child care sector is navigating two interconnected challenges. First, demographic trends in Rhode Island have shifted notably over the past several years. Both statewide and nationally, birth rates have been declining. Many women are choosing to delay childbirth and are having fewer children overall. Recent analyses indicate that Rhode Island has among the lowest birth rates for younger women in the country. Despite this trend, the Department has observed an increase in CCAP enrollment among infants, which coincides with continued increases in reimbursement rates for this age group.

Despite declining birth rates, demand for child care remains high. The more significant challenge lies in affordability. Although important progress has been made in expanding eligibility for subsidized child care, particularly through increases to the entry-level Federal Poverty Level (FPL) threshold, these gains have not kept pace with rising inflation and the overall cost of living in Rhode Island.

As a result, the current subsidy structure presents barriers for many working families, particularly single-parent households. According to the most recent findings from the Economic Progress Institute, a single parent with two children (preschool and school age) living in Rhode Island would have to earn a minimum of $91,234 to meet the most basic needs of the family. When compared with the current entry income limit of 261% FPL or $71,305 (and the upcoming

increased limit of 285% FPL or $77,862), this leaves families with income levels between $71,305 and $91,234 unable to afford child care and unable to qualify for CCAP. For a two-parent household with two children (preschool and school age), the EPI estimates earnings of $100,575 are required to meet the family's most basic needs. When compared with the current entry income limit of 261% FPL or $86,130 (and the upcoming increased limit of 285% FPL or $94,050), this leaves families with income levels between $86,130 and $100,574 unable to afford child care and unable to qualify for CCAP. Note that the discrepancy in both examples would be even greater for families with children in the more costly care categories of infant or toddler.

Number of Children by Provider Type

	# of Children	# of Providers
Family Based	1,498	338
Center Based	4,512	332
Total	6,010	670

Based on average in SFY26

Number of Children by Age Grouping

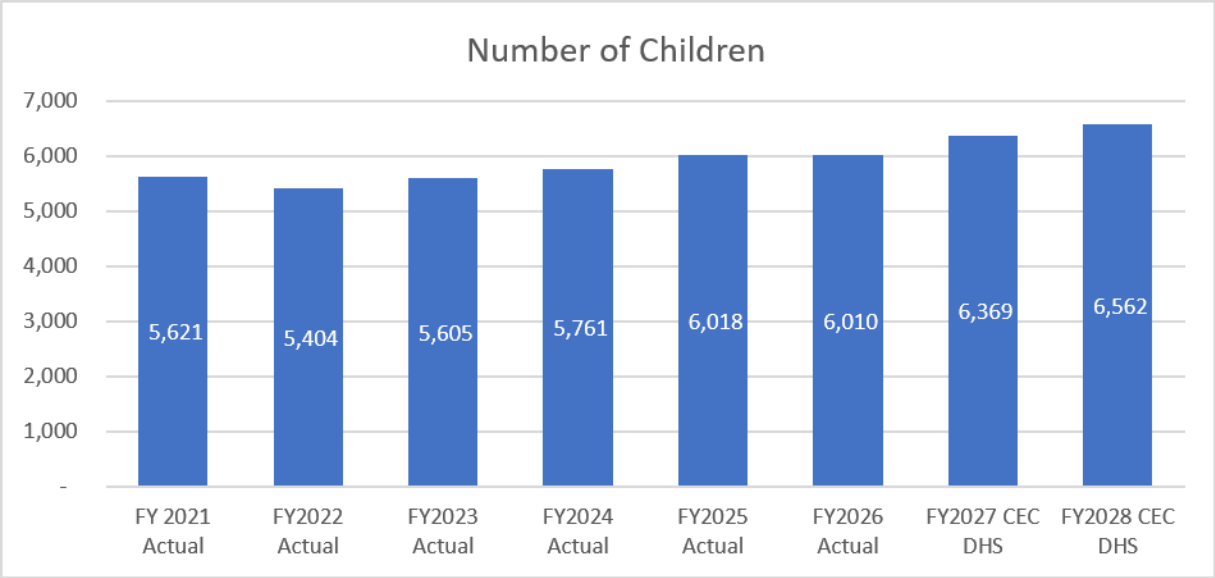
Category	# of Children	% of Total
Infant	530	8.8%
Toddler	1079	17.9%
Preschool	2469	41.1%
School Age	1933	32.2%
Total	6010	100%

Based on average in SFY26

In SFY 2026, the number of providers serving children through the Child Care Assistance Program (CCAP) increased by 3.6%, bringing the total to 670 providers. Both family-based and center-based providers experienced growth. Family-based providers increased by four, bringing the total to 338, while center-based providers increased by 19, bringing the total to 332. Despite this growth in provider participation, the number of children served by family-based providers increased by only 0.2%, while center-based providers experienced a 0.2% decrease in the number of children served over the same period.

Although provider participation increased in SFY 2026, growth in the number of children served did not keep pace. However, since the last caseload report, the Department has observed an increase in CCAP enrollments, reflecting a change from the decline experienced during SFY 2026. It is important to note that provider participation alone does not guarantee access to care for CCAP-eligible families. CCAP participation gives providers access to quality improvement initiatives, such as WAGE$ and TEACH scholarships, that may otherwise be unavailable. However, some providers elect to participate in the subsidy program during the application process but subsequently do not enroll children receiving CCAP or limit the number of subsidized children they accept.

This dynamic appears to be influenced, in part, by the difference between CCAP reimbursement rates and private-pay tuition rates. When reimbursement rates are significantly lower than the tuition providers can receive from privately paying families, providers may have a financial incentive to prioritize private-pay enrollment. Additionally, high-quality programs often maintain waitlists, which may allow them to be more selective in enrollment decisions. Together, these factors can limit access to high-quality early learning environments for families who rely on CCAP.

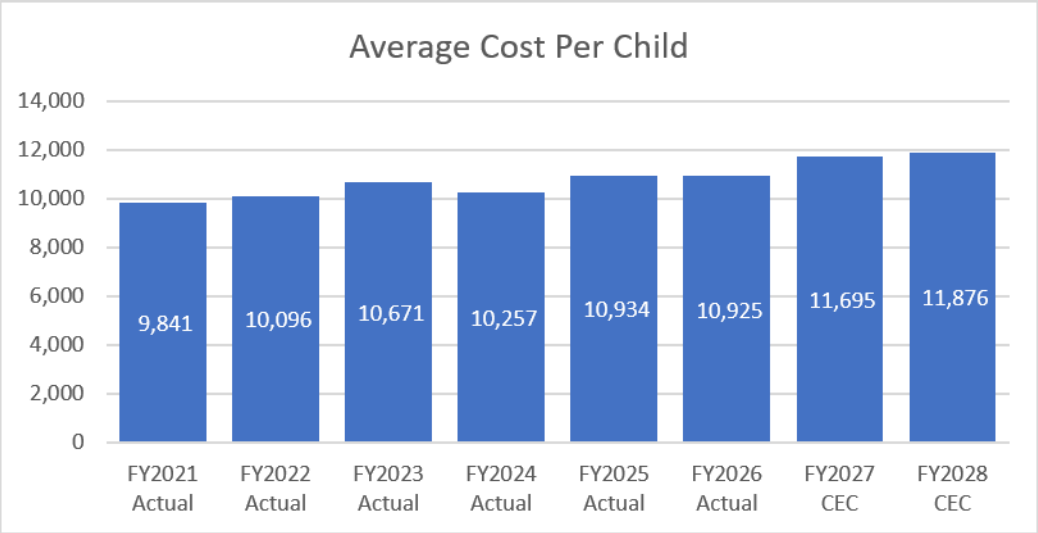


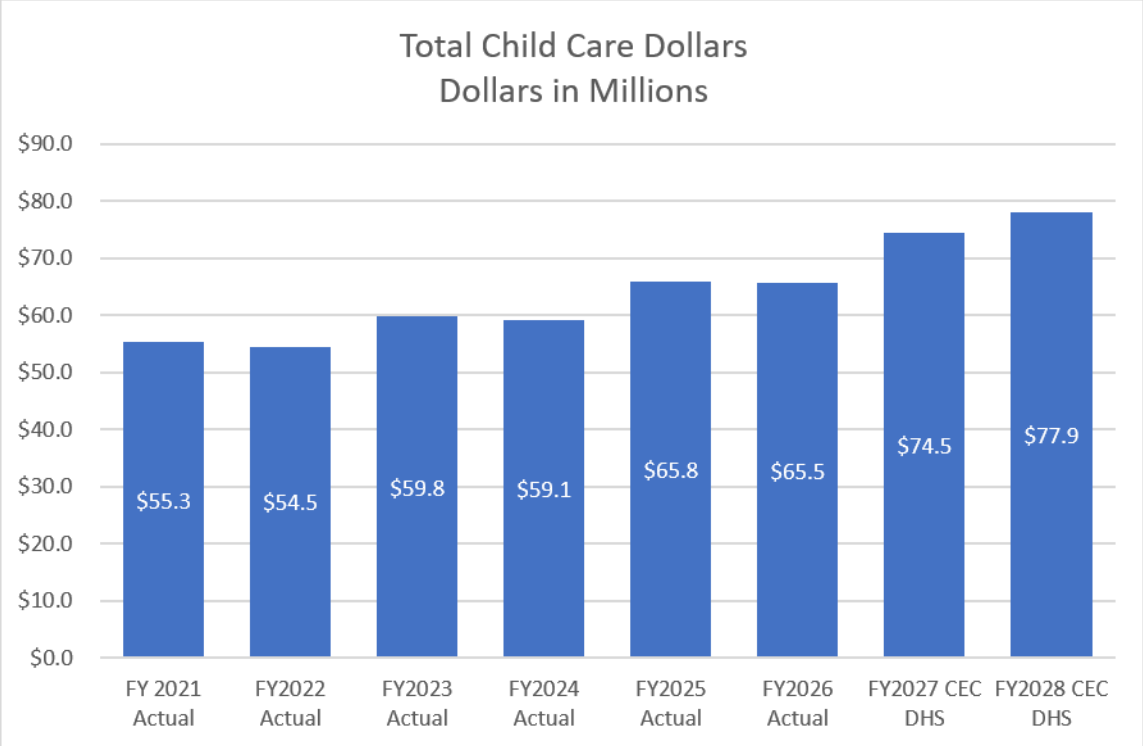
During SFY2026, following implementation of enrollment-based payments in CCAP, the average caseload initially increased from 6,029 to a peak of 6,264 children before fluctuating and declining to 5,922 several batches later. Although the initial increase was consistent with a potential impact from the transition to enrollment-based payments, the subsequent decline indicates that the increase was not sustained. Enrollment-based payment changes the basis for provider reimbursement but does not independently drive continued caseload growth. Changes in family eligibility, program entries and exits, provider enrollment patterns, and seasonal trends may also influence caseload levels.

In SFY2027, the first six payment batch cycles reflected an unusually high batch-over-batch caseload growth rate compared with prior years. The Department attributed a portion of this increase to back-billing for children whose services had not been paid in earlier periods. To avoid overestimating future caseload growth based on these atypical results, the Department adopted a more conservative projected growth rate of 0.1% per batch cycle, reflecting the average batch-over-batch growth rate from the first batch of SFY2026 through Batch 9 of SFY2027.

CCAP State Legislative Changes

In addition to anticipated baseline caseload growth, the SFY2027 projection incorporates the expected impact of policy changes effective January 1, 2027, including the expansion of the CCAP initial eligibility income limit to 285% of the Federal Poverty Level (FPL) and the transitional eligibility limit to 325% FPL. These changes are expected to increase program participation, and the associated caseload impacts have been incorporated into the projection.





The per-child cost stabilized in SFY2026. Although infant reimbursement rates increased by 20% under the SFY2026 budget, infants accounted for only 8.8% of total caseload costs, limiting the impact of the rate increase on overall per-child costs.

Total subsidy expenditures are projected to increase by 13.4% in SFY2027, primarily driven by growth in the number of children served. In addition to normal caseload growth, projected expenditures reflect enrollment-based provider payments, child care educators and staff in DHS-licensed programs accessing both available benefits, and anticipated increases in participation resulting from policy changes above effective January 1, 2027.

In SFY2028, total subsidy expenditures are projected to increase by an additional 4.6%, reaching $77.9 million. This increase reflects continued caseload growth and the ongoing impact of the January 1, 2027 CCAP eligibility expansions.

Projected separately are the projections for the FY27 and FY28 CCAP for Child Care Staff Pilot, the extended pilot offering CCAP benefits to subsidize the cost of child care for eligible early childhood educators and staff working in DHS licensed programs.

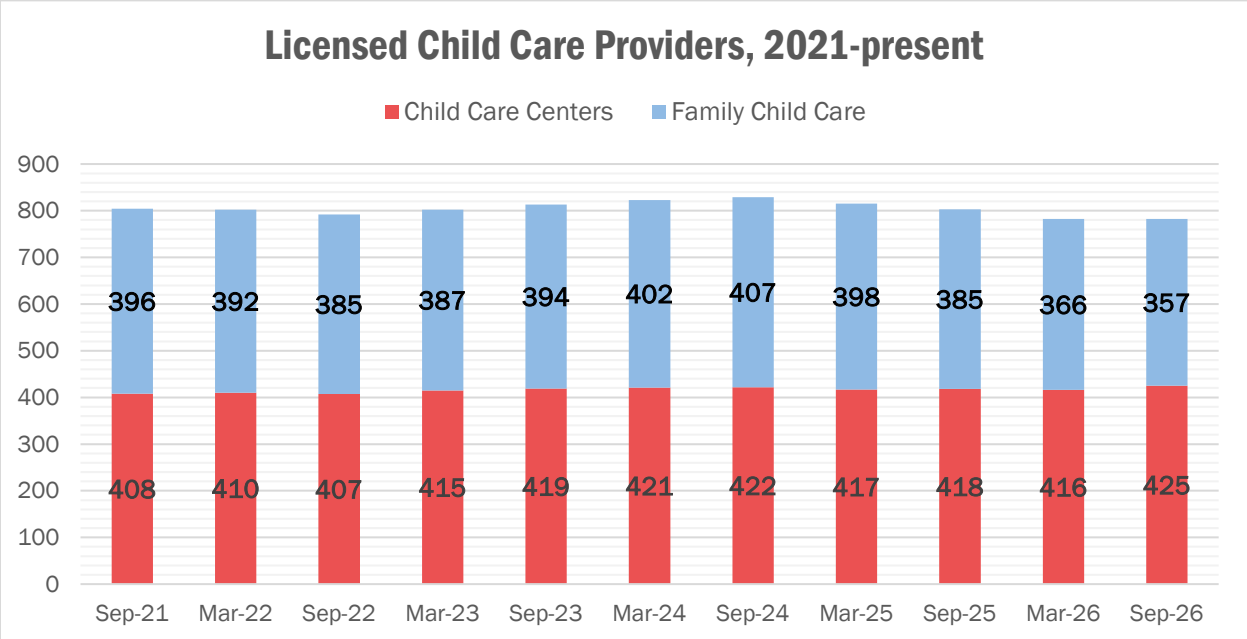
	FY2027	
	Average # of Children	Amount
Base	6,369	$74,480,837
Child Care for Child Care Workers	214	$ 959,206
	6,583	$75,440,043

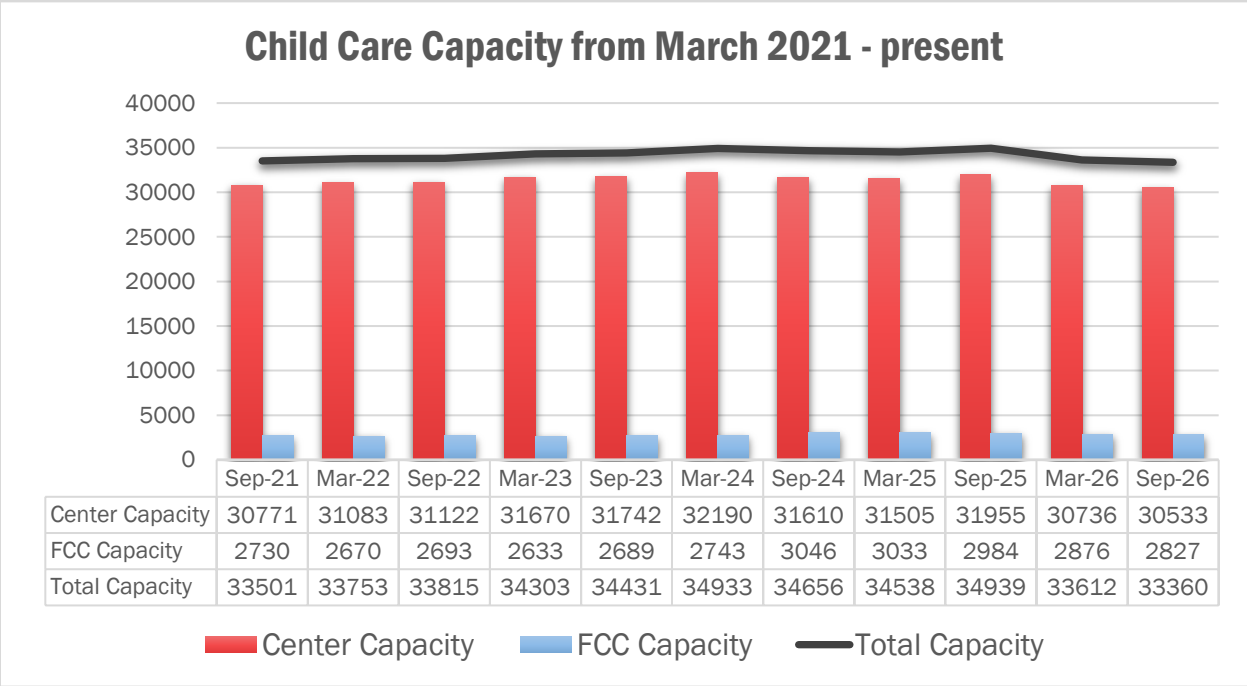
	FY2028	
	Average # of Children	Amount
Base	6,562	$77,935,319
Child Care for Child Care Workers	238	$ 943,162
	6,800	$78,878,481

Question 1) Please provide the total number of licensed child care providers and the number of child care slots in the state, including the providers that do not participate in the CCAP program for the last five years.

a. Please provide the number of children enrolled in CCAP by age group, provider type, and star rating, including the newly separate infant category.
b. Please provide updated data since the previous conference on the impact of DHS strategies to bolster FCCP seats including the most recent number of FCCPs considering expansion and future plans or strategies.
c. Please, if possible, provide a child-to-staff ratio.

Answer: Since the previous testimony, the Department has experienced an overall decline in child care capacity, while the total number of licensed child care programs has remained stable over the past six months. During this period, there was a shift in the composition of the child care system, with an increase of nine child care centers and a corresponding decrease of nine family child care programs. Further details regarding program openings and closures are provided later in this document.





	Sep-21	Mar-22	Sep-22	Mar-23	Sep-23	Mar-24	Sep-24	Mar-25	Sep-25	Mar-26	Sep-26
Center Capacity	30771	31083	31122	31670	31742	32190	31610	31505	31955	30736	30533
FCC Capacity	2730	2670	2693	2633	2689	2743	3046	3033	2984	2876	2827
Total Capacity	33501	33753	33815	34303	34431	34933	34656	34538	34939	33612	33360

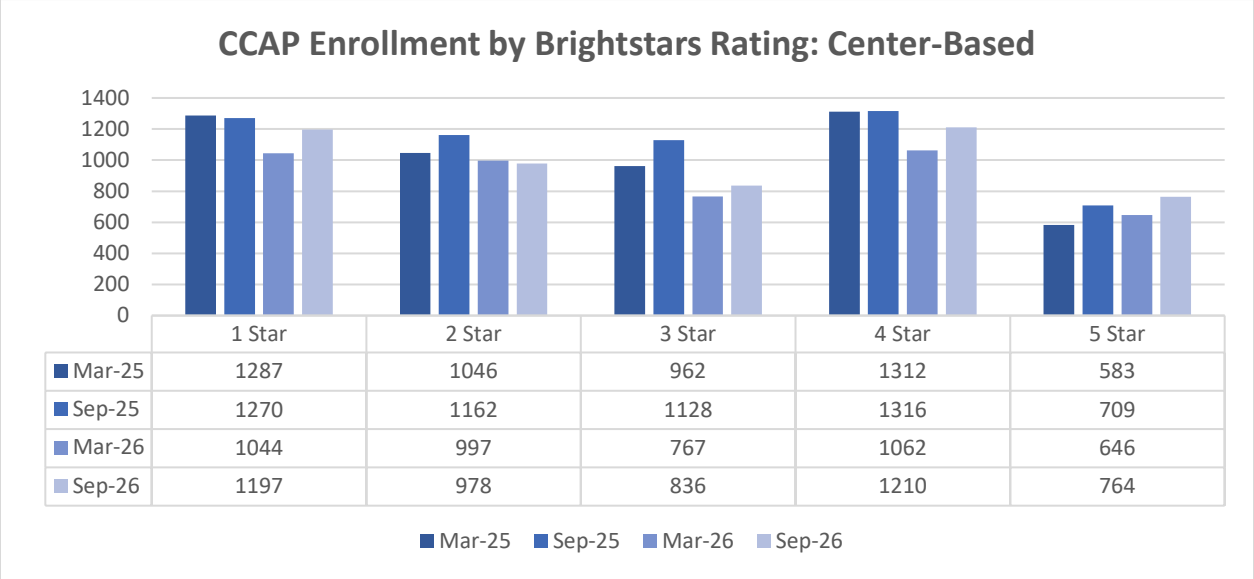
In the charts below, CCAP enrollment is broken down by provider type (center and family child care [FCC]) and age group (Infant, Toddler, Preschool and School-Age). There are several trends the Department is seeing in the data over the last six (6) months in both center-based care and family child care.

Center-based CCAP enrollment has fluctuated over the past 18 months, with a notable increase during the most recent six-month period. Total center-based enrollment decreased from 5,190 children in March 2025 to 4,985 in September 2026, a net decrease of 205 children, or

approximately four percent. However, enrollment increased by 469 children, or 10.4 percent, between March 2026 and September 2026, indicating a significant recovery following the decline observed between September 2025 and March 2026.

The distribution of enrollment by BrightStars rating also shows a notable shift toward higher-rated programs. Five-star center enrollment increased from 583 children in March 2025 to 764 in September 2026, an increase of 181 children, or 31 percent. As a result, the share of center-based CCAP enrollment in five-star programs increased from approximately 11 percent to 15 percent over the period. Enrollment in four-star programs also increased substantially between March and September 2026, rising by 148 children, or nearly 14 percent. While enrollment across several ratings remains below March 2025 levels, the recent increase in overall center-based enrollment, particularly among four- and five-star programs, indicates a continued shift in CCAP enrollment toward higher-rated center-based providers.

Center-Based Care - CCAP Enrollment by BrightStars Rating - September 2026						
Age Group	**1 Star**	**2 Star**	**3 Star**	**4 Star**	**5 Star**	**TOTAL**
Infant	56	100	44	92	40	332
Toddler	160	168	115	186	118	747
Preschoolers	486	431	385	498	416	2216
School-Age	495	279	292	434	190	1690
TOTAL	**1197**	**978**	**836**	**1210**	**764**	**4985**



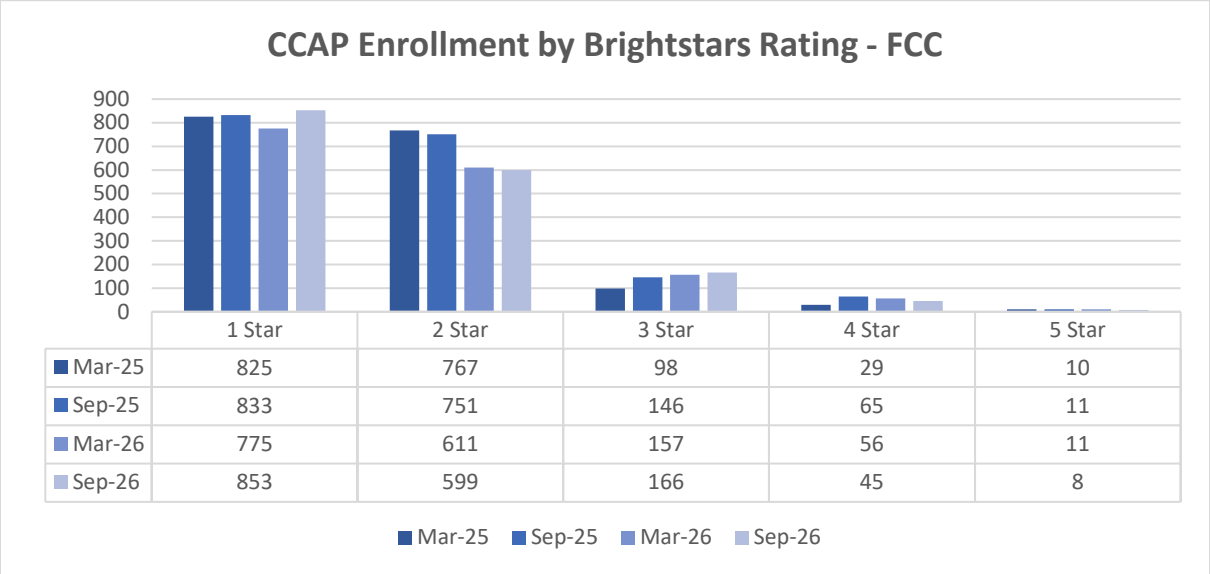
The next set of charts shows that CCAP enrollment among family child care providers has remained relatively stable overall, while the distribution of enrollment by BrightStars rating has shifted over the past 18 months. Total FCC CCAP enrollment decreased from 1,729 children in

March 2025 to 1,671 in September 2026, a net decrease of 58 children, or approximately 3.4 percent. However, enrollment increased by 61 children between March and September 2026, indicating that enrollment fluctuated over the period rather than following a consistent downward trend.

There has been a significant change in the distribution of enrollment across quality ratings. Enrollment in two-star FCC programs declined from 767 children in March 2025 to 599 in September 2026, a decrease of 168 children, or approximately 22 percent. At the same time, enrollments in three-, four- and five-star FCC programs increased overall from 137 children to 219 children, an increase of 82 children, or nearly 60 percent. This represents a shift in CCAP enrollment toward higher-rated FCC programs, particularly three-star programs, which increased from 98 to 166 enrolled children over the same period.

While one-star programs continue to account for a substantial share of FCC enrollment, the data indicates that the composition of CCAP enrollment within the FCC provider community is changing, with fewer children enrolled in two-star programs and more children enrolled in higher-rated programs.

The two charts tell a complementary story about how CCAP enrollment is distributed across Rhode Island's child care system. Among family child care providers, the most noteworthy shift is away from two-star programs and toward three-star programs, while center-based enrollment shows a stronger shift toward the highest-rated providers, particularly five-star centers. Together, the data suggests that while overall enrollment has fluctuated, CCAP enrollment is increasing among higher-rated providers across both settings, with the specific pattern differing between family child care and center-based care. The increase in CCAP enrollment among higher-rated providers is driven, in part, by improvements in BrightStars ratings among existing providers. Over the past six months, 25 programs have increased their star rating, contributing to the shift in CCAP enrollment toward higher-quality programming.



	1 Star	2 Star	3 Star	4 Star	5 Star
Mar-25	825	767	98	29	10
Sep-25	833	751	146	65	11
Mar-26	775	611	157	56	11
Sep-26	853	599	166	45	8

Family Child Care - CCAP Enrollment by BrightStars Rating – September 2026						
Age Group	**1 Star**	**2 Star**	**3 Star**	**4 Star**	**5 Star**	**TOTAL**
Infant	98	53	24	4	0	**179**
Toddler	165	121	31	9	1	**327**
Preschool	327	239	65	25	5	**661**
School-Age	263	186	46	7	2	**504**
TOTAL	**853**	**599**	**166**	**45**	**8**	**1671**

The Department continues to see evidence that the Orientation and First Steps process is supporting more providers in successfully completing the application and licensure process. Not only are providers successfully becoming licensed, but the quality of programs at initial licensure is exceeding what has been historically observed.

In addition, the Department has invested in supporting currently licensed family child care providers in strengthening their programs and achieving and maintaining basic health and safety standards. This work includes the development of targeted micro-trainings addressing observed trends in non-compliance, on-site technical assistance and coaching, and ongoing assessment of the needs of family child care providers. These efforts provide support to family child care programs that may have previously been at risk of closure, helping them remain operational while also improving basic health and safety practices and overall program quality. Rather than focusing solely on identifying non-compliance, DHS is increasingly providing child care providers with targeted resources and support to address identified concerns and build sustainable improvements within their programs.

RISES has further strengthened these efforts by streamlining the licensing, renewal, and program-change processes. This has made it easier for family child care providers to navigate the licensing system, maintain their licenses, and make necessary updates to their programs as their needs change. Together, these initiatives support family child care providers not only in becoming licensed, but in successfully maintaining licensure and continuously improving the quality and safety of their programs.

CCAP enrollment increased across all provider types from 6,133 children in March 2026 to 6,662 children in September 2026, an increase of 529 children (8.6%). The increase occurred across most BrightStars ratings, with the largest percentage growth among five-star programs, where enrollment increased by 17.5%. Enrollment also increased in four-star programs by 12.2% and three-star programs by 8.3%, while two-star enrollment remained relatively stable, declining by 1.7 percent. This continues to demonstrate growth in CCAP enrollment among higher-rated providers, consistent with the trends reflected in the Department's other enrollment data.

The data also demonstrates continued demand for full-time care. Nearly two-thirds of all CCAP enrollments in both March and September 2026 were full-time. Full-time enrollment increased by 359 children (9.1%), with particularly notable growth among school-age children, which increased by 21.1%. There was also significant growth in preschool enrollment among children receiving less-than-full-time care, including a 46.8% increase in half-time preschool enrollment. Overall, the data indicates that the growth in CCAP enrollment is occurring across age groups and provider types, while enrollment continues to trend toward higher-rated providers.

CCAP Children Enrolled by BrightStars Rating, Time and Age Category
March 2026 to September 2026

Brightstars Rating	1		2		3		4		5		Total	
Full Time	March 2026	Sept 2026	March 2026	Sept 2026	March 2026	Sept 2026	March 2026	Sept 2026	March 2026	Sept 2026	March 2026	Sept 2026
Infants	124	139	113	138	54	64	66	84	29	36	**387**	463
Toddlers	243	280	259	257	142	136	146	171	96	100	**887**	946
Preschoolers	517	618	538	483	307	318	337	343	208	205	**1910**	1970
School-Age	347	443	159	134	72	100	187	203	6	56	**776**	940
¾ Time												
Infants	20	15	18	15	5	4	7	12	9	4	**59**	50
Toddlers	41	43	31	32	12	9	15	22	14	14	**113**	120
Preschoolers	99	140	134	115	44	80	80	109	78	101	**435**	545
School-Age	254	202	189	199	105	109	157	145	77	74	**784**	729
Half Time												
Infants	1	0	0	0	0	0	0	0	0	0	**1**	0
Toddlers	0	2	1	0	1	0	1	2	2	3	**5**	7
Preschoolers	44	49	35	70	48	47	38	67	66	106	**231**	339
School-Age	116	108	118	124	122	113	75	88	55	60	**486**	494
¼ Time												
Infants	0	0	0	0	0	0	0	0	0	0	**0**	0
Toddlers	0	0	0	0	0	0	0	0	0	2	**0**	2
Preschoolers	3	3	2	2	6	5	4	3	12	9	**27**	22
School-Age	8	4	8	8	6	16	5	5	5	2	**32**	35
Grand Total	**1,817**	**2,046**	**1,605**	**1,577**	**924**	**1,001**	**1,118**	**1,254**	**657**	**772**	**6,133**	**6,662**

Total Licensed Child Care Participation in BrightStars by Provider Type – September 2026			
Star Rating	**Center-Based**	**Family Child Care**	**Total**
1-Star	103	187	290
2-star	62	115	177
3-star	64	18	82
4-star	65	9	74
5-star	63	3	66
Total	**357**	**332**	**689**

Percentage of CCAP Children Enrolled in 4- and 5- Star Programs								
Sep-22	Feb-23	Sep-23	Feb-24	Sep-24	Feb-25	Sep-25	Feb-26	Sep-26
26%	26%	23%	23%	26%	28%	28%	29%	30%

Enrollment trends from April through September 2026, noted below, indicate a shift in the composition of the caseload toward younger children. Infant enrollment increased substantially across both center-based and family child care settings, likely due to the increase in the infant rate, while toddler enrollment showed more modest growth. In contrast, preschool and school-age enrollments declined, with the most significant decrease occurring among center-based school-age enrollments. Enrollment increased through August in both care settings before declining in September, suggesting a shift at the start of the typical school year.

CCAP Enrollment Trends (Center-Based)	Infant Enrollments	**Toddler Enrollments**	Preschool Enrollments	SA Enrollments	Total Enrollments
April 2026	179	605	2166	1918	4868
May 2026	200	626	2166	1828	4820
June 2026	211	637	2272	2119	5239
July 2026	233	643	2213	2029	5118
August 2026	287	682	2334	2093	5396
September 2026	282	661	2038	1641	4622
Trend: Apr-Sept	103	56	-128	-277	-246

CCAP Enrollment Trends (Family Child Care)	Infant Enrollments	**Toddler Enrollments**	Preschool Enrollments	SA Enrollments	Total Enrollments
April 2026	110	303	710	515	1638
May 2026	129	304	711	488	1632
June 2026	139	305	719	498	1661
July 2026	156	311	719	499	1685
August 2026	177	328	732	511	1747
September 2026	170	310	635	486	1601
Trend: Apr-Sept	60	7	-75	-29	-37

The Department is not yet able to calculate a precise staff-to-child ratio for actively enrolled children and staff across the early childhood education (ECE) system. However, ongoing progress in data collection and integration has strengthened the Department's reporting capabilities. DHS can currently report on licensed child care capacity by age group using program licensing data. Additionally, RISES data now allows the Department to identify the number of educators who have attested to working with specific age groups. Together, these data sources provide a high-level assessment of whether the current pool of registered, active educators is sufficient to support the number of children who could be served within licensed capacity. Additionally, RISES Release 6 will introduce quarterly enrollment reporting for licensed child care programs, further strengthening the Department's ability to assess enrollment and workforce capacity and moving toward a more accurate understanding of staffing relative to the number of children served across the ECE system.

Based on currently available RISES data as of October 2026, estimated staff-to-child ratios are as follows:

Infant Staff to Child Ratio	**1 teacher for every 5 children**
Toddler Staff to Child Ratio	**1 teacher for every 7 children**
Preschool (including Pre-K) Staff to Child Ratio	**1 teacher for every 8 children**
School Age Staff to Child Ratio	**1 teacher for every 20 children**

Compared with estimates reported six months ago, the most recent data indicates higher staff-to-child ratios for infants, toddlers, and school-age children, while the preschool ratio has improved. The average number of children per educator increased from 3 to 5 for infants, 4 to 7 for toddlers, and 7 to 20 for school-age children. In contrast, the preschool ratio decreased from 9 to 8 children per educator.

These findings point to potential workforce shortages in infant, toddler, and school-age care across Rhode Island and align with anecdotal reports from the provider community regarding challenges recruiting and retaining qualified educators. The most pronounced change is in school-age care, where the average number of children per educator has nearly tripled over the past six months.

Together, these trends raise concerns about the availability of educators to support child care access, particularly for age groups already facing workforce challenges.

While the Department cannot yet calculate a precise statewide staff-to-child ratio based on actively enrolled children and available staff, current data provides an important indicator of potential gaps in workforce capacity. Planned enhancements to RISES, including quarterly enrollment reporting through Release 6, will strengthen the Department's ability to assess educator availability relative to enrollment and better inform statewide child care capacity planning. It is important to note that these estimates are based on educator-reported age-group assignments and may not fully capture how programs deploy staff across classrooms. In particular, the school-age ratio may overstate the extent of workforce shortages, as school-age classrooms serving children before and after school are often staffed by educators who also work in other classrooms, as well as by floaters. Because the current data does not account for these shared staffing arrangements, the school-age ratio should be interpreted with caution and may not accurately reflect the number of educators available to support school-age care.

It is important to note that a reported staff-to-child ratio exceeding regulatory requirements does not necessarily indicate that a program is operating out of compliance. These estimates are based on available workforce data and may not fully account for staff who work across multiple classrooms or serve in floating roles. With RISES becoming mandatory effective October 1, the Department will continue to monitor program data and work with providers to ensure educators are accurately associated with their actual roles and age-group assignments in the system. These efforts will improve data accuracy and strengthen the Department's ability to assess workforce capacity and identify potential gaps across Rhode Island's early childhood education system.

Question 2) Please fill out the DHS excel file for the FY 2027 and FY 2028 estimates by fund source and line sequence.

- **a.** For the Child Care Development Block grant
  - **i.** Do the general revenues meet or exceed the required match? If required match is exceeded, please explain why.
  - **ii.** Please include the balance of any unspent funds from prior years and report any plans for use.
  - **iii.** Provide an update on the State's compliance with Child Care Development Fund (CCDF) rule changes and include any impact on spending and general revenue match for FY 2027 and FY 2028. Please include the effects of the most recent revision of the final rule for prospective payments based on enrollment rather than attendance.

Answer: Please see Appendix A along with the narrative and tables below.

This next table outlines Child Care and Development Block Grant (CCDBG) funding available as of October 1, 2026.

November 2026			
CCDBG Funding			
Fiscal Year	Mandatory	Matching	Discretionary
FFY2026 Available	$0	$0	$2,227,318
FFY2027 Available	$6,633,774	$6,054,473	$19,287,150

In addition to providing child care subsidies, the Department invests discretionary funding in initiatives that strengthen Rhode Island's early childhood system. These investments support the BrightStars Quality Rating and Improvement System, expanded technical assistance and professional development, and workforce development opportunities for early childhood educators. Discretionary funding also supports CCAP administrative and system costs, payment practices under the Family Child Care Collective Bargaining Agreement (CBA), and the Rhode Island Start Early System (RISES).

The balance of unspent funds carried forward from prior years has declined significantly since the end of the COVID-19 public health emergency. At the same time, rising costs associated with quality contracts have prompted the Department to complete a comprehensive review of its investments to evaluate effectiveness, identify opportunities to improve efficiency, and ensure that expenditures deliver measurable benefits to children, families, and early childhood educators. The Department's review analyzed data from the past three to five years to assess the effectiveness of quality initiatives in strengthening child care quality and supply across Rhode Island. Based on this review, the Department has identified planned changes to its investments, with an emphasis on measurable outcomes, sustainable improvements, and long-term value for the state's early childhood system.

To support eligible child care services and providers while maximizing the use of available federal resources, the Department is proposing a 20% transfer of Temporary Assistance for Needy Families (TANF) funds to the Child Care and Development Fund (CCDF), consistent with the Department's historical practice prior to 2019. Federal rules permit states to transfer up to 30% of their TANF block grant to CCDF and the Social Services Block Grant, subject to applicable limitations. The proposed 20% transfer is intended to support eligible child care expenditures and help the Department meet applicable federal discretionary spending requirements while maintaining its existing quality contract commitments.

The Department will use available carryforward funds and additional resources in accordance with applicable grant requirements and established priorities. Planned expenditures will reflect the findings of the quality-contract review, projected CCAP needs, provider support requirements, and opportunities to maximize the effectiveness of available funding. The Department will also validate projected expenditures against applicable CCDF direct service and

other spending requirements to ensure that its funding strategy supports the Department's objectives while maintaining fiscal accountability and compliance.

The matching funds requirement under CCDF is based on the Federal Medical Assistance Percentage (FMAP). The FMAP is projected to decrease from 57.81% in FFY2027 to 57.08% in FFY2028. This decrease will result in a slight increase in the state's matching share for eligible expenditures in SFY2028, adding to the Department's need to strategically manage available resources and plan for anticipated program costs.

November 2026 Caseload		
General Revenue	**SFY27**	**SFY28**
Maintenance of Effort (MOE)	$5,321,126	$5,321,126
State Match	$4,433,095	$4,519,178
General Revenue Total	**$9,754,221**	**$9,840,304**

General revenues are budgeted to meet the required state matching obligation, with an additional $30,000 level-funded annually to reflect the state's continued commitment to the program. In light of the anticipated increase in the state's matching share in SFY2028, the Department will continue to monitor projected matching requirements and manage available resources accordingly. The DHS Cash Array Excel file, which provides estimates by fund source and appropriation for SFY2027 and SFY2028, is included with the caseload conference documents as Appendix A.

CCDF Federal Rule Changes

The May 2026 federal final rule, *Restoring Flexibility in the Child Care and Development Fund (CCDF)* rescinded four specific requirements established under the 2024 CCDF Final Rule, effective July 13, 2026. The rescinded provisions include:

- the federal requirement limiting family copayments to seven percent of family income;
- requirements related to the use of grants or contracts for direct child care services;
- the requirement that providers be paid prospectively;
- and the requirement that provider payments be based on enrollment rather than attendance.

Although these provisions are no longer federally mandated, states retain the flexibility to continue policies they have implemented in response to the 2024 rule.

Rhode Island had already implemented two of the requirements prior to the 2026 rule change. The Department implemented the seven percent family copayment cap in 2022 and expanded its existing absence policy in March 2026 to meet the federal requirement for enrollment-based payments under § 98.45(m)(2). With the issuance of the May 2026 final rule, the Department was able to conclude its federal waiver related to implementation of the 2024 requirements and is no longer required to demonstrate that the remaining two provisions will be implemented by

2028. The Department will continue to assess the implications of the restored federal flexibility and will consider these provisions as part of the development of Rhode Island's next CCDF State Plan, which is due in July 2027.

Question 3) Please provide an update on the disenrollment trends.

Answer: Providers are required to disenroll children who no longer attend their program or when DHS or a parent requests disenrollment. If a second provider enrolls a child who is enrolled elsewhere, the system disenrolls the child from the existing provider or flags an error to prevent duplicate enrollments. Over the six-month period from March 2026 to October 2026, the system logged 4,480 family disenrollments (6,738 children). Of those, 1,723 families (2,254 children) did not re-enroll with another provider during that six-month period. Of those who disenrolled and did not re-enroll with another provider, approximately 80 families (124 children) were disenrolled because their benefits were terminated.

Currently, there is no mechanism for tracking disenrollment reasons other than termination of benefits or failure to recertify. While other reasons for disenrollment are not currently tracked in our system, family reasons for disenrolling may include no longer needing care, for example: fluctuation in parent employment, seasonal need for summer care ending in August, age up to Kindergarten, entry into state Pre-K, changing to a provider that better meets a family's needs, moving away from an area or out of state, finding alternative non-licensed care, or aging out of subsidy eligibility.

Providers have until the beginning of the school year to adjust enrollments for school-age children in their care for the fall schedule (which prevents providers from enrolling school-age children during regular school hours) and those not adjusted are auto-disenrolled. The Office of Child Care sends multiple reminders to providers prior to disenrolling these school-age children and a reminder to re-enroll if the school-age children are attending in the fall.

With the implementation of payment based on enrollment, providers receive payment for up to four weeks of absence for a child enrolled in their program. If another provider enrolls the child, for example, a parent makes a change in their choice of provider, the system is designed to disenroll the child from the initial program to avoid duplicate enrollments. DHS continuously reminds providers of the importance of ensuring a child is enrolled in the CCAP Provider Portal during the first week the child attends their program. Using the new payment based on enrollment rules, this is even more important. Payment is made to the provider who has the child enrolled and no duplicate payments will be made. Providers are still required to disenroll a child if a family or DHS requests disenrollment or they know that the family does not plan to return to care.

Question 4) Please provide an update to the part-time and permanent closure trends for providers. Are there any new providers that have been or are waiting to be licensed? Please provide the underlying assumptions the Department is utilizing to assess the financial health and stability of child care providers. Please note any changes since the May conference, including details on rates being paid, assumed capacity (including seats and staff lost), and any other impacts on providers.

Answer:
Child care provider openings and closures continue to be active across the state. While the preceding charts reflect a net change of zero in the overall number of providers, this figure does not reflect the level of activity occurring within the child care market. Providers continue to open and close regularly, resulting in ongoing changes to the composition and availability of child care programs despite the stable overall provider count.

	Provider Opening and Closings in Child Care March 2026 – September 2026		
	Openings	Closings	+/-
Family Child Care providers	14	**23**	-9
Center providers	23	**14**	9
Total	37	**37**	**0**

While the overall number of providers may appear relatively stable when viewed on a net basis, the ongoing turnover among providers reflects continued movement within the child care market and changes in the availability and composition of child care capacity across the state.
Of the 14 center-based program closures, the reasons are as follows:

- Six (6) closed due to space no longer being available.
    - Three (3) moved enrolled children to another location to reduce the risk of disruption of care
- Five (5) were opened under new ownership/vendor with no disruption to care
- One (1) closed due to building issues that the landlord was not willing to address
- One (1) closed due to enrollment issues
- One (1) closed due to staffing issues
    - Any enrolled children were moved across the street to where the program also had a licensed child care program.

The Department continues to observe increases in ownership transitions, particularly involving acquisitions by larger national child care providers. This shift presents both opportunities and considerations for the child care system. On one hand, larger national chains often bring greater financial stability, administrative capacity, and access to capital, which can support facility improvements, staff recruitment, and operational consistency. These organizations may also implement in-house compliance systems and professional development structures that can

strengthen program quality and regulatory adherence. However, these transitions may present challenges.

Changes in ownership can lead to shifts in program culture, staffing, and pricing structures, which may impact continuity of care for children and families. In some cases, there may be reduced flexibility to meet unique community needs compared to locally operated programs. Additionally, workforce impacts—such as changes in compensation, benefits, or organizational structure—can affect staff retention and overall program stability.

Given these dynamics, the Department continues to monitor ownership trends closely to better understand their implications for access, affordability, and quality across the child care landscape.

During this reporting period, the reasons for family child care program closures are as follows:

- Seven (7) closed due to retirement
    - These providers were each operating for more than 20 years
- Five (5) providers cited personal reasons as their reason for closure
- Three (3) reported closing due to no longer being interested in operating a child care program
    - One of these closed during their first six months of operation and had no enrollment at the time of closure
- Two (2) closed due to non-compliance with regulations
    - One was due to changes to the home after approval of the license that did not align with regulations and posed imminent risk to children
    - One moved to another home without informing DHS
- One (1) closed due to moving and not being ready to open at new location
    - This provider has a new application started to resume care at new location
- One (1) provider moved out of the state
- One (1) closed to open a child care center
- One (1) closed due to not renewing and not responding to DHS requests regarding operation
- One (1) informed DHS that they did not intend to renew their license but did not specify a reason why
- One (1) closed due to accepting a position at a child care center as an assistant director

These trends highlight both workforce attrition driven by an aging provider base and operational challenges impacting smaller, home-based programs. Family Child Care providers play a critical role in Rhode Island's early childhood system, particularly in supporting infants and toddlers and families working non-traditional hours or with transportation needs. As such, maintaining an accurate understanding of the active supply of family care, while also supporting provider retention, remains a key priority for the Department.

The Department has continued to observe an increase in the number of prospective providers preparing to open new programs as a result of increased accessibility to RISES. Currently, provider progress through the licensing pipeline is being tracked through several initiatives:

Pipeline Initiative	Enrolled	Completed
English Orientation for FCCs	41	37
Spanish Orientation for FCCs	49	42
English First Steps for FCCs	21	8
Spanish First Steps for FCCs	20	11
English Orientation for Centers	30	24
Spanish Orientation for Centers	1	1
English First Steps for Centers	21	13
Spanish First Steps for Centers	0	0
TOTALS	**183**	**136**

Of these, 14 Family Child Care applications and two (2) center-based applications have been formally submitted and are currently under review by the Department.

Question 5) What percentage of the families eligible for the state subsidized program have children enrolled in one of the child care settings? Please provide any data on the number of families not using the benefit.

Answer: From March 2026 to September 2026, approximately 5,731 families (9,667 children) were approved for CCAP benefits, enrolled with a CCAP provider and billed for benefit services. There are 3,448 families (4,380 children) in RIBridges who requested and were approved for CCAP benefits, but who have not enrolled with a CCAP provider or billed for CCAP benefit services. This equates to approximately 34% of approved cases not utilizing the benefit. This could be for several reasons such as parent employment patterns, including flexibility to work remotely, challenges finding providers with available slots depending on the age of the children and/or the desired location, or because of reduced capacity related to staffing shortages.

Currently, there is no mechanism for tracking a parent's reason for not using their CCAP certificate. Reasons may include no longer needing child care, using alternate child care such as family/friends, difficulty finding CCAP approved providers with openings that meet the family and child's needs, choosing a provider that is not CCAP approved.

Question 6) Please provide updated assumptions for child care assistance for individuals enrolled in either URI, RIC or CCRI for FY2027 and FY2028.

Answer: The FY 2023 enacted budget authorized Child Care Assistance for College. CCAP for College provides the support parents need to advance their education, professional skills and marketability in the workforce by providing child care subsidies that allow them to pursue a degree at one of Rhode Island's public higher education institutions (Community College of RI

(CCRI), Rhode Island College (RIC) or the University of Rhode Island (URI)). Parents may be enrolled full-time or part-time in combination with work hours to meet the required activity hours. For families, higher education is an important step on a parent's path to economic success and financial stability, and this program can provide the security of knowing their children can attend the quality child care program of their choosing, allowing them to focus on their higher education.

The number of children enrolled and paid in SFY2026 is 212 children, with an average of 87 children paid per batch. The average cost per batch in SFY2026 was $35,531 with the total cost of subsidies in SFY2026 totaling $949,796. The total number of CCAP providers who enrolled children approved for benefits under CCAP for College was 124, with an average of 53 providers per batch period submitting for payment. Family-based providers accounted for 16% serving CCAP for College children, while 84% were served in center-based programs.

DHS anticipates continued steady demand with increased awareness resulting from partnerships with CCRI, RIC and URI as well as the recent expansion of eligibility beyond associate and bachelor's degrees to include any degree program. The program allows eligible students enrolled in degree programs at CCRI, RIC and URI to combine part-time work hours with part-time college credit hours to meet the approved activity requirements to support the schedule and needs of student parents. SFY2027 is expected to see the number of children served per batch period increase to 95 at a cost of $1,037,299, while SFY2028 will see the number of children rise to 104 at a cost of $1,111,016.

Question 7) Please provide updated data and assumptions on the Child Care Pilot in which childcare educators and administrative staff receive free child care including:

- **a.** Enrollment and expenses, by month.
- **b.** Details regarding enrollees by occupation and CCAP status
- **c.** Details regarding applicants that were denied enrollment in the pilot.

Answer: See narrative and table below.

The following metrics are as of September 22, 2026. The initial pilot application was open from August 23, 2023, to July 31, 2024. The SFY27 state budget extended the program through July 31, 2030, with payments continuing through 2032 for 24-month certification periods approved in 2030.

Effective August 1, 2025, all new and renewal pilot applicants were required to apply for regular CCAP using the DHS application process and to submit the decision notice from DHS as part of their pilot application. Participants determined eligible for regular CCAP have had their subsidy paid through the traditional program, and the pilot has covered their assigned copay, if any. Participants denied regular CCAP because of income over 261% FPL may be eligible for subsidy payment through the pilot, provided their income is not over 300% FPL.

The requirement to first apply for regular CCAP benefits ensures participants who are eligible for these benefits receive support through the CCAP program and ensures a complete review of eligibility through the Bridges system, including interfaces with relevant state systems. This requirement has resulted in a significant decline in pilot applications. In addition, a mid-certification verification of continued employment in a licensed early childhood program was implemented in July 2026. Pilot participants who are no longer employed in a licensed program at the 12-month point of their 24-month certification period will lose their pilot benefit.

The requirement to first apply for traditional CCAP has resulted in more applicants receiving CCAP benefits through this avenue rather than the pilot and has resulted in a reduction of pilot applicants overall. Families who did not submit a renewal application for the pilot were surveyed to determine why they did not reapply. Responses included a range of reasons that are included further in the testimony.

Application Status

As of September 22, 2026, a total of 1,600 applications were received for the CCAP for Child Care Pilot across the life of the pilot. Of these, 67.38% (1,078 applications) were approved, meaning the applicant met all eligibility requirements and one or more children in their household are eligible to receive the CCAP for Child Care benefits.

Application Status	Child Care Center	Family Child Care Home	Grand Total	Percent of Total
Approved	1026	52	1078	67.38%
Approved- Active	161	1	162	10.13%
Approved- Closed	865	51	916	57.25%
Denied	236	17	253	15.81%
Canceled	237	21	258	16.13%
In Review	11		11	0.69%
Grand Total	1510	90	1600	100%

Currently, 162 of the approved applicants have an “Approved - Active” application. This means they may actively use their child care benefit as their household is still within their benefit period. 916 households have an “Approved - Closed” application, meaning their household may no longer use their child care benefit as their benefit period has closed.

As of September 22, 2026, one family child care provider is actively approved for the pilot. This applicant has participated in Year 1, 2, and 3; they are currently 12 months into their 24-month benefit period.

Application Status	Original Eligibility Regulations				Revised Eligibility Regulation				Grand Total
	Year 1	Year 2			Year 3		Year 4		
	Initial Pilot App	New App	Renewal App	Blank	Ext. New App	Ext. Renewal App	Ext. New-Year 4	Ext. Renewal-Year 4	
Approved-Active						1			1
Approved-Closed	23	10	18						51
Canceled	9	4	2	1	1	4			21
Denied	3	2	2		3	6		1	17
In Review									
Grand Total	**35**	**16**	**22**	**1**	**4**	**11**		**1**	**90**

As of September 22, 2026, there were 161 actively approved Center-based educators participating in the pilot. Of these, 151 submitted their application in Year 3, so they will not be expected to reapply for the pilot until Year 5 (as they were approved for a 24-month benefit).

There were 11 households approved for the pilot in Year 4; 3 of these families had not participated in previous years. In these tables, the category "Blank" reflects applicants who utilized the initial application form instead of the extended pilot application. These were cancelled and the applicants reapplied using the correct form.

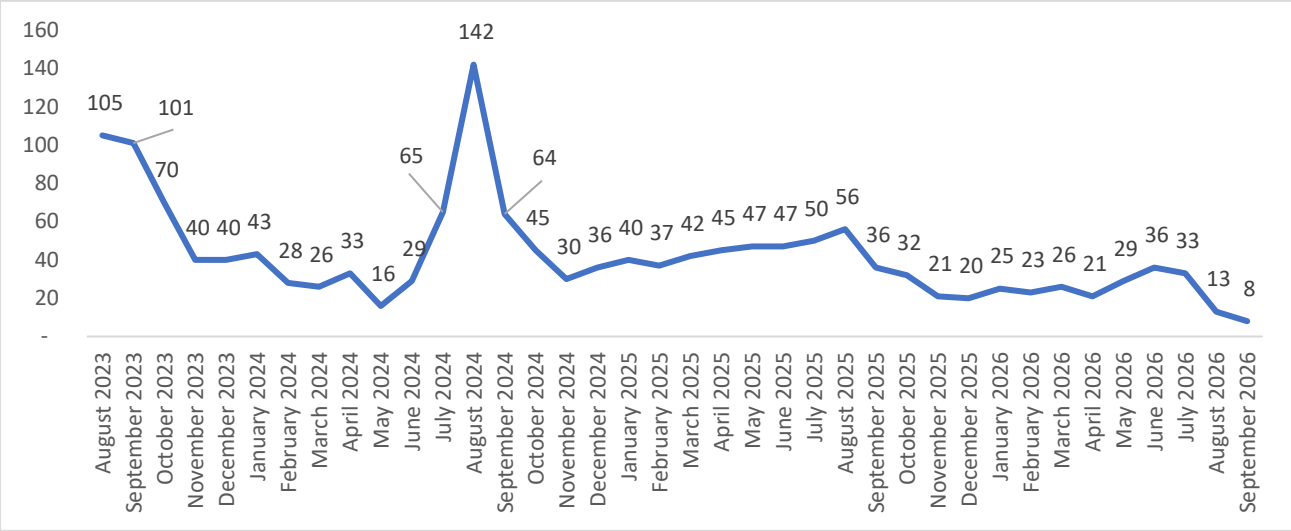
Application Status	Original Eligibility Regulations				Revised Eligibility Regulation				Grand Total
	Year 1	Year 2			Year 3		Year 4		
	Initial Pilot App	New App	Renewal App	Blank	Ext. New App	Ext. Renewal App	Ext. New-Year 4	Ext. Renewal-Year 4	
Approved-Active					33	118	3	7	161
Approved-Closed	412	199	237		3	14			865
Canceled	62	44	27	13	25	66			237
Denied	87	43	25		23	55	2	1	236
In Review					1	3	6	1	11
Grand Total	**561**	**286**	289	**13**	**85**	**256**	**11**	**9**	**1510**

Applications Over Time

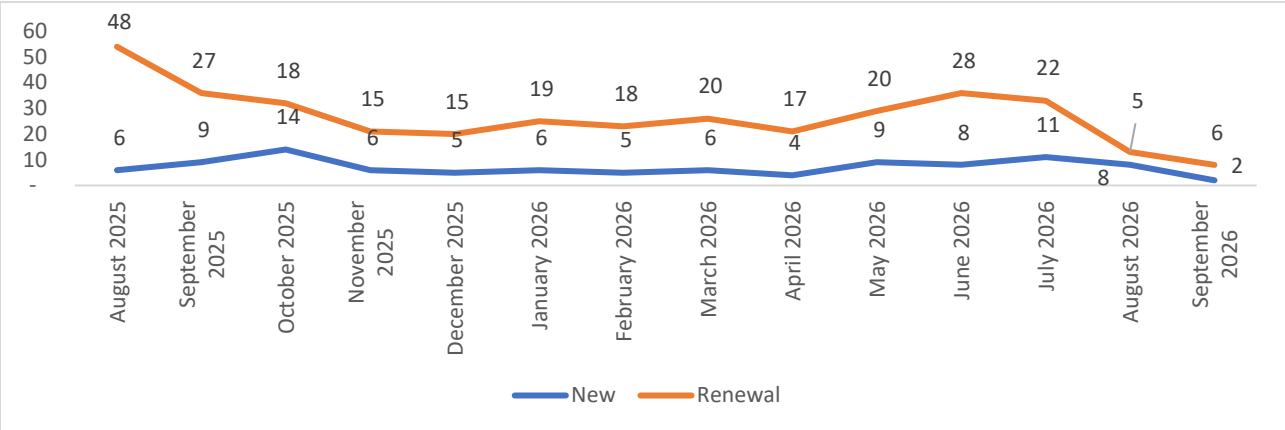
In the initial year of the pilot, application rates were high at the onset of the program and steadily declined throughout the rest of the year. When the pilot was renewed in August 2024, there was a significant uptick in applications. In August 2024 applications reached their peak at 142 submitted in a month.

In August 2025, when the pilot was extended and the revised eligibility requirements were implemented, there was a small increase in applications. However, submission rates decreased toward the end of 2025 and into 2026, averaging 24 applications monthly.

The application submission rate dropped again in August 2026. This may be partly explained by the impact of the 24-month benefit period, meaning applicants who had annually been applying until August 2025 are not expected to reapply until August 2027.



When the pilot was renewed in August 2024 and extended in August 2025, there was a spike in renewal applications received. Throughout most of the renewal year (Year 2: August 2024-July 2025), more new applications were received monthly (meaning more first-time applicants were applying for the pilot than returning applications). In the extension year (Year 3: August 2025-Present), it has been more common to receive a renewal application than a new application.



Renewal Applications – Year 1 to Year 2

In Year 1 (Initial Pilot Year), 435 applicants were approved to participate. In Year 2 of the pilot, 464 applicants were approved to participate. Approved pilot participants were able to reapply for additional benefits up to 30 days prior to the expiration of their pilot benefit.

As of September 22, 2026, 286 (65.75%) of approved applicants from Year 1 submitted a renewal application in Year 2 (280 applicants) or Year 3 (6 applicants).

Approved Applicant Submitted a Renewal App?	Count	Percent
No	149	34.25%
Yes	286	65.75%
Total	**435**	**100.00%**

Most renewal applications (88.81%) were approved for Year 2, with only 7% being denied. The most common denial reason is that the household was over the 300% FPL threshold.

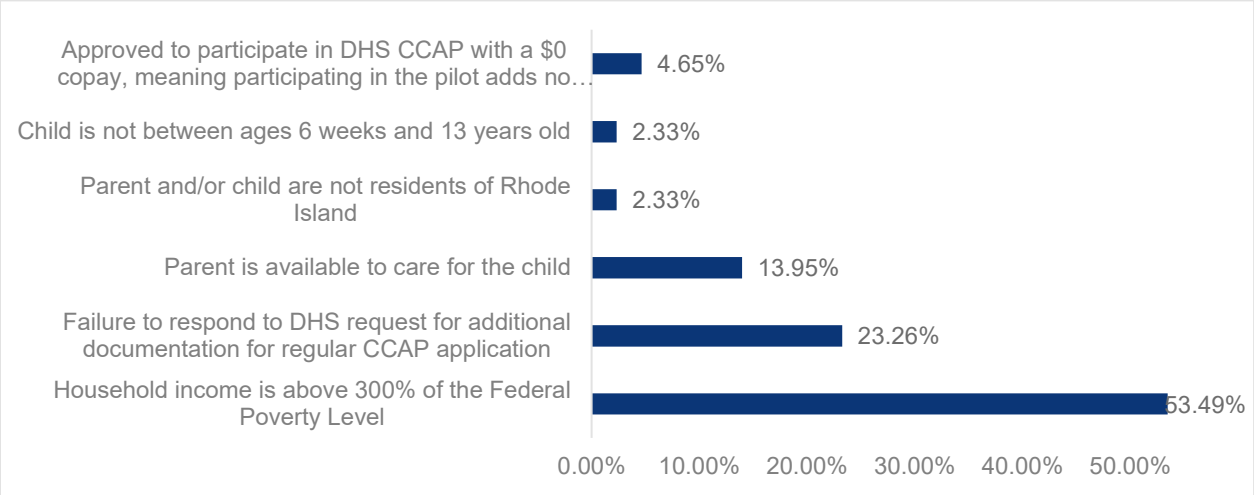
Outreach was conducted to better understand why applicants may not be submitting a renewal application. While most did not respond to outreach, nearly a quarter of respondents (24.16%, or 36 applicants) reported they no longer work in child care.

Renewal Applications – Year 2 to Year 3 Extension of Pilot

In Year 2 of the pilot (from August 1, 2024- July 31, 2025), 464 applicants were approved to participate. All applicants would be eligible to reapply beginning in Year 3 (as they had a 12-month benefit). As of September 22, 2026, 220 applicants (47.41%) have submitted a renewal application.

Approved Applicant Submitted a Renewal App?	Count	Percent
No	244	52.59%
Yes	220	47.41%
Grand Total	464	100.00%

Approximately 60% of renewal applications have been approved. Another 16.81% of submitted renewals were canceled, while 20% were denied. Currently, 2.73% are still in the review process. The most common reason an application was denied was due to household income (53.49%). As the updated eligibility requirements include a completed CCAP application and decision, failure to respond to a DHS request for additional documentation for the regular CCAP application can result in a denial of pilot benefits. This is the second most common reason applications were denied (23.26%).



Outreach was done to better understand why those eligible may not have submitted a renewal application.

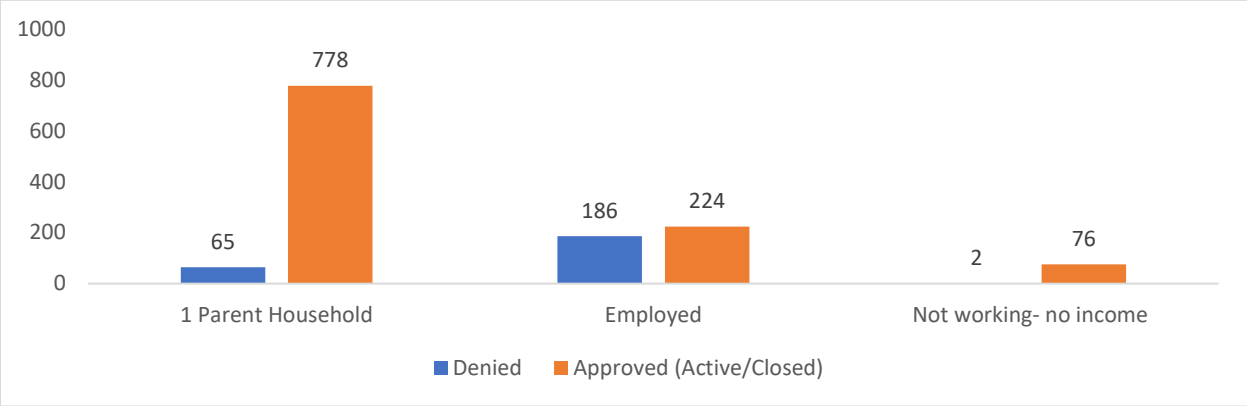
Reason for non-renewal	Count of Applicants
Unresponsive to outreach	165
I no longer work in child care	25
I didn't want to apply for regular CCAP.	20
I have submitted a renewal application	6
I no longer needed the pilot benefits	6
I am having trouble applying for regular CCAP.	6
I haven't submitted a renewal application, but still plan to do so	4
Unreachable Contact Information	5
I didn't know I had to submit a renewal application	3
I was approved for regular CCAP with a $0 copay, so the pilot provides no additional benefit.	2
Other	2

Denied Applications

Approximately 15.81% of applications received to date have been denied. Of the denied applications, the majority were from early educators working in a child care center (93.2%). The most common reason an application was denied was failing to meet the household income requirement for the pilot.

Denial Reason	Total Percent (n=253)	Percent Under Original Eligibility Regulations (n=162)	Percent Under Revised Eligibility Regulations (n=91)
Parents and/or children are not residents of Rhode Island	3.95%	5.56%	1.10%
Not currently working in a DHS licensed child care program at least 20 hours a week	6.72%	9.26%	2.20%
Household income is above 300% of the Federal Poverty Level	67.98%	78.40%	49.45%
Child is not between ages 6 weeks and 13 years old	1.98%	2.47%	1.10%
Earnings are less than the required state minimum wage, as required by CCAP regulations	0.79%	0.62%	1.10%
Approved to participate in DHS CCAP with a $0 copay, meaning participating in the pilot adds no additional benefit for your family.	2.77%	3.09%	2.20%
Have not shown proof that your child is a US citizen or qualified immigrant	0.40%	0.62%	
Failure to respond to DHS request for additional documentation for regular CCAP application	8.70%		24.18%
Parents are available to care for the child	5.93%		16.48%
Improperly approved for CCAP, failed to resolve case	0.79%		2.20%

Most denied applications were two-parent households, where both parents were working, and were denied for being over the income requirement. In the following section, "Approved" includes both "Approved-Active" and "Approved-Closed" applications.



The following data represents all applications, unless specifically noted as Approved (Approved-Active and Approved-Closed) or Denied.

Applicant Roles

The most common job titles for pilot applicants are outlined in the table below:

All Applications (n=1600)	Approved Applications (n=1078)	Denied Applications (n= 253)
Preschool Lead Teacher (11%)	Toddler Lead Teacher (11.8%)	Infant Lead Teacher (10.3%)
Toddler Assistant Teacher (10.9%)	Toddler Assistant Teacher (11.6%)	Preschool Lead Teacher (8.7%)
Toddler Lead Teacher (10.6%)	Preschool Assistant Teacher (11%)	Preschool Assistant Teacher (7.9%)
Preschool Assistant Teacher (10.4%)	Preschool Lead Teacher (10.8%)	Toddler Lead Teacher (7.9%)

Most applicants represent a one-parent household (64%). Among approved applications, the representation of a one-parent household increases to 72.2%.

The most common household sizes among applicants are as follows:

- 3-person household: 32.23%
- 2-person household: 29.18%
- 4-person household: 18.81%

Among approved applications (1078), two-person households (36.17%) and three-person households (33.28%) were most common.

Income

The majority of all applicants (69.44%) report a household income of $50,000 or less. Similarly, 74.12% of approved applicants (both Active and Closed) report an estimated household income of $50,000 or less.

	All Applicants		Approved Applicants	
Income Category	**Count**	**Percent**	**Count**	**Percent**
Under $25,000	407	25.44%	133	12.34%
$25,001-$50,000	704	44.00%	666	61.78%
$50,001-$75,000	195	12.19%	171	15.86%
$75,001-$100,000	161	10.06%	86	7.98%
$100,001-$125,000	80	5.00%	17	1.58%
$125,001+	36	2.25%	5	0.46%
Not yet calculated	17	1.06%		
Grand Total	**1600**	**100.00%**	**1,078**	**100%**

Race, Ethnicity and Gender

Applicants (1,600) for the CCAP for Child Care pilot most frequently identify as:

- White (63.19%)
- Black or African American (11.94%)
- Other (9.19%)

The majority identify as non-Hispanic (62.19%), followed by Hispanic or Latino (35.50%). Overwhelmingly, applicants identify as women (98.1%).

Education

For the majority of applicants (63.88%), a high school diploma or GED is their highest level of education. More than a third (35.25%) hold a college degree of some level (from Associates to Ph.D.).

Highest Level of Education	Count	Percent
Middle School	14	0.88%
High school diploma or GED	1022	63.88%
Associate degree	241	15.06%
Bachelor's degree	233	14.56%
Master's degree	68	4.25%
Ph.D. or professional degree	22	1.38%
Grand Total	**1600**	**100.00%**

Approved Children

As of September 22, 2026, a total of 1,618 children have been approved to participate in the pilot.

Of these, about 15% are categorized as "Approved-Active" (count: 256), meaning they are still within their pilot benefit period. Most approved children (84.18%) are "Approved-Closed" (count: 1,362) meaning their pilot benefit period has closed.

Children approved to participate in the pilot are most commonly Preschool Age (37.58%).

Age Category	Approved-Active	Approved-Closed	Total Approved	Total Approved Percent
Infant	24	81	105	6.49%
Infant/Toddler[1]		137	137	8.47%
Toddler	42	289	331	20.46%
Preschool	104	504	608	37.58%
School Age	86	351	437	27.01%
Grand Total	**256**	**1362**	**1618**	**100.00%**

Of the 256 children with an active approval, 73.05% are enrolled in a CCAP approved program. Most children (133) are enrolled full time.

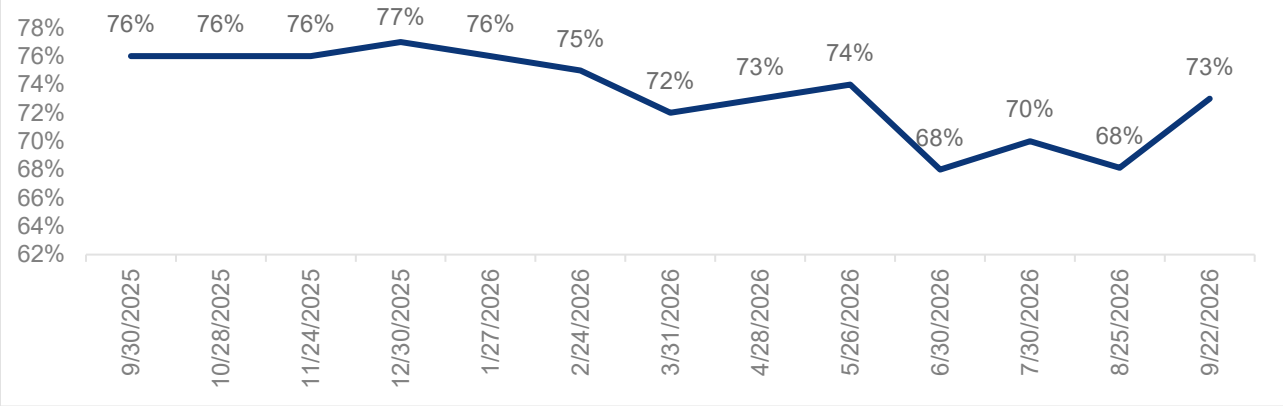
Enrollment Hours	Count	Percent
Enrolled	**187**	**73.05%**
Full Time (30+ hours weekly)	133	51.95%
Three Quarter Time (20-29 hours weekly)	29	11.33%
Half Time (10-19 hours weekly)	17	6.64%
Quarter Time (9 hours or less)	8	3.13%
No Active Enrollment	**69**	**26.95%**
Grand Total	**256**	**100.00%**

[1] As of July 1, 2025, approved children were categorized as "Infant" or "Toddler". Prior to July 1, 2025, the age group was a combined category "Infant/Toddler".

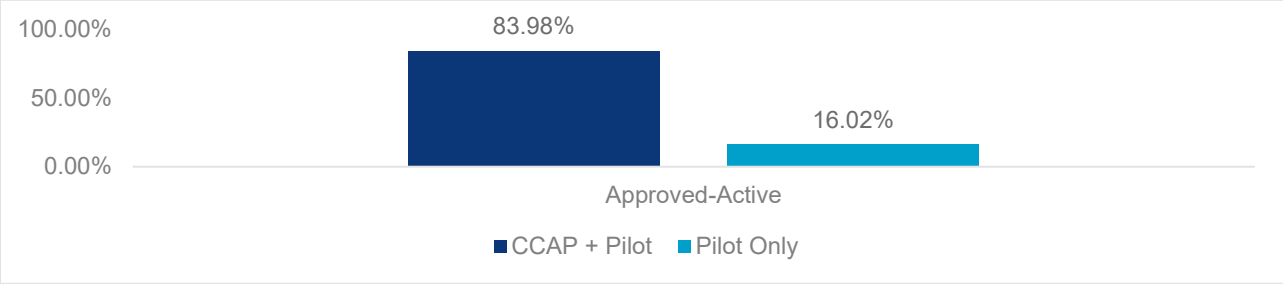
When comparing the count of approved pilot children in September 2025 to September 2026, there is a drop of nearly 300 children participating. The enrollment rate of Approved-Active children remained fairly consistent, in the mid-70% range.

Date	Enrolled Children	Total Approved- Active Pilot Children	Enrollment Rate
9/26/2023	103	190	54.21%[2]
9/24/2024	452	606	74.58%
9/23/2025	433	562	77.04%
9/22/2026	187	256	73.05%

In the last year (September 2025- September 2026), the enrollment rate ranged from 68% (June 2026 and August 2026) to 77% (December 2025). On average, the enrollment rate is 73%.



Approved children are enrolled across 92 DHS licensed, CCAP participating programs; four of these (4.35%) are Family Child Care Homes and 88 are Child Care Centers. Of the current Approved-Active children, 83.98% are also participating in regular CCAP.



The increased percentage of children participating in regular CCAP is likely due to the revised eligibility requirement to meet all regular CCAP requirements (except for income), which went into effect in August 2025. Prior to August 2025, 35.48% of approved children also participated

[2] By September 2023, the pilot had been operating approximately one-month which likely accounts for the low enrollment rate, as parents and providers were becoming familiar with the pilot.

in regular CCAP. After August 2025, this rate increased to 82.81%. To note, the count of children approved after August 2025 is 285 children, while the count of children approved prior to August 2025 was 1,333.

Expenses

As of September 2026, $11,236,080 has been disbursed as payments to CCAP programs, of which, $10,450,610 has been adjusted onto the caseload accounts.

Paid through September 2026			
Type	**Copay Only**	**Tuition**	**Total**
Pilot - > 261% FPL	$ 250,404	$ 327,000	$ 577,404
CCAP Eligible - < 261% FPL	$ 1,740,716	$ 8,072,463	$ 9,813,179
Currently CCAP	$ 845,497	$ -	$ 845,497
Total	**$ 2,836,617**	**$ 8,399,463**	**$ 11,236,080**

SFY24			SFY25			SFY26			SFY27		
July	$ -	0	July	$ 439,212	457	July	$ 277,773	263	July	$ 143,817	240
August	$ -	0	August	$ 334,362	380	August	$ 385,790	480	August	$ 82,727	236
September	$ 14,161	38	September	$ 371,301	416	September	$ 365,819	266	September	$ 48,821	142
October	$ 69,440	98	October	$ 355,729	400	October	$ 354,425	453	October		
November	$ 172,483	178	November	$ 397,673	412	November	$ 300,294	331	November		
December	$ 265,385	229	December	$ 567,087	429	December	$ 384,051	375	December		
January	$ 279,655	263	January	$ 368,622	424	January	$ 236,972	286	January		
February	$ 308,571	289	February	$ 367,156	414	February	$ 268,590	322	February		
March	$ 334,335	324	March	$ 390,948	429	March	$ 182,566	245	March		
April	$ 316,182	318	April	$ 404,766	446	April	$ 176,821	253	April		
May	$ 342,616	347	May	$ 437,150	458	May	$ 190,485	246	May		
June	$ 459,518	376	June	$ 675,260	687	June	$ 165,516	229	June		
	$ 2,562,347	**246**		**$ 5,109,265**	**446**		**$ 3,289,103**	**312**		**$ 275,365**	**206**
Per Child Cost		**$ 10,416**			**$ 11,456**			**$ 10,528**			**$ 1,337**

Based on current enrollment, recent application trends, and approval rates, it is estimated that the pilot will support approximately 1,042 children throughout the life of the project with a projected cost of $16,395,048.

Full Pilot Forcast			
Type	**Copay Only**	**Tuition**	**Total**
Pilot - > 261% FPL	$ 1,489,737	$ 1,945,432	$ 3,435,170
CCAP Eligible - < 261% FPL	$ 1,740,716	$ 8,072,463	$ 9,813,179
Currently CCAP	$ 3,146,699	$ -	$ 2,947,799
Total	**$ 6,377,152**	**$ 10,017,896**	**$ 16,395,048**

Participants have been categorized for financial analysis in three ways.

- Pilot: Both copay and tuition paid
- CCAP Eligible: Both copay and tuition paid until current certificate expires, then paid through traditional subsidy process; paying copay only on pilot

- Currently CCAP: Tuition paid through traditional subsidy process; paying copay only

As of September 2026, the pilot program has 256 active approved children, of whom 195 have associated program costs. Of these, 154 children with associated costs are enrolled in licensed child care programs. Thirty-five of these children have family incomes exceeding the traditional CCAP eligibility threshold and receive full tuition assistance through the pilot, without a copayment deduction. The January 2027 expansion of CCAP eligibility is not expected to immediately affect the payment status of these participants, as their earliest recertification dates fall in SFY2028.

The remaining 119 children with associated costs who are enrolled in licensed child care are also enrolled in traditional CCAP. For these participants, the pilot program covers only the required family copayment.

An additional 61 children have active approved status but currently generate no program costs. Of these, 33 are enrolled in licensed child care and receive traditional CCAP with no required family copayment. They remain enrolled in the pilot in the event their copayment status changes and pilot assistance becomes necessary.

All pilot participants eligible for traditional CCAP have been enrolled in that program. Accordingly, pilot expenditures for participants eligible for traditional CCAP are limited to required family copayments, while participants who are not eligible for traditional CCAP receive assistance at the applicable full tuition rate.

Current Enrollment Forecast - September 2026			
Type	**Copay Only**	**Tuition**	**Total**
Pilot - > 261% FPL	$ 1,096,090	$ 1,431,372	$ 2,527,462
CCAP Eligible - < 261% FPL	$ -	$ -	$ -
Currently CCAP	$ 2,102,302	$ -	$ 2,102,302
Total	**$ 3,198,392**	**$ 1,431,372**	**$ 4,629,764**

Based on recent application trends and approval rates, approximately 90 additional children are projected to enter the pilot over the remaining project period. The projected cost of these additional participants reflects the anticipated distribution among those requiring no payment, those requiring full-rate tuition assistance, and those receiving copayment assistance through the pilot. Total projected expenditures over the life of the project are estimated at $16,395,048.

Future Enrollment Forecast			
Type	**Copay Only**	**Tuition**	**Total**
Pilot - > 261% FPL	$ 143,244	$ 187,060	$ 330,304
CCAP Eligible - < 261% FPL	$ -	$ -	$ -
Currently CCAP	$ 198,900		
Total	**$ 342,144**	**$ 187,060**	**$ 529,204**

Prior to the policy change requiring pilot participants to enroll in traditional CCAP, participant income levels allowed TANF to support approximately 83% of total program costs. As participants transition to CCAP—many qualifying with zero copay—the overall funding mix shifts, and TANF's share is expected to decline going forward. In addition, utilizing CCDF would better align program expenditures with the existing CCAP financial reporting structure and provide a more straightforward and transparent approach to tracking, reconciling, and reporting federal expenditures.

	Total	TANF	CCAP
SFY24	$ 2,562,347	$2,224,117	$ 338,230
SFY25	$ 5,109,265	$4,434,842	$ 674,423
SFY26	$ 3,289,103	$2,405,948	$ 883,155
SFY27	$ 959,206	$ -	$ 959,206
SFY28	$ 943,162	$ -	$ 943,162
SFY29	$ 978,206	$ -	$ 978,206
SFY30	$ 1,013,250	$ -	$1,013,250
SFY31	$ 933,268	$ -	$ 933,268
SFY32	$ 579,911	$ -	$ 579,911
SFY33	$ 27,329	$ -	$ 27,329
	$16,395,048	**$9,064,907**	**$7,330,141**

Question 8) Please provide an update regarding the Wage$ program, including, but not limited to,

a. Number of total applicants
b. Reasons for denial
c. Demographic Breakdown of applicants
d. Updated grant status and funding commitments

Answer: With support from Federal Preschool Development Grant (PDG) funds, Rhode Island piloted the *Step Up to WAGE$* model to strengthen the state's early childhood care and education (ECCE) workforce from May 2023 through January 2025. *Step Up to WAGE$* is an education-based salary supplement initiative designed to support educators working with infants and toddlers in licensed child care centers or family child care homes.

The initial budget supported approximately three payment rounds:

- **Round 1:** 271 applicants received awards, representing 135 unique early childhood programs across Rhode Island.
- **Round 2:** 231 participants remained eligible and received payment.
- **Round 3:** 225 participants met continuing eligibility and were paid.

In total, $3,558,392 was distributed directly to qualifying educators employed at 123 programs statewide. Since inception, *Step Up to WAGE$* recipients have collectively provided care for approximately 6,619 children.

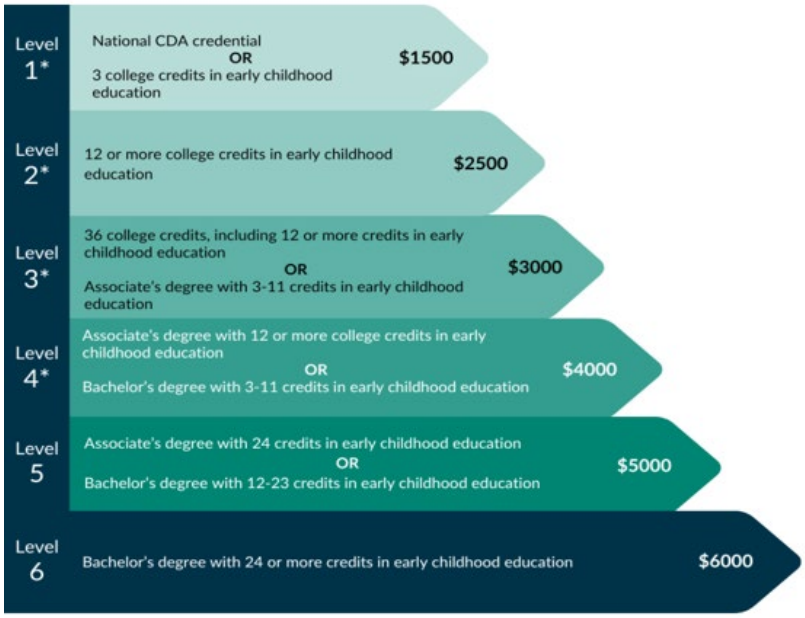
Attrition among participants occurred over the course of the funding cycles. Of the initial 271 recipients, 64 became ineligible for subsequent payments, primarily due to wage increases that placed them above the $23 per hour eligibility cap.

Transition to WAGE$ Implementation

Building on the success of the pilot, WAGE$ officially launched statewide on October 1, 2025. The transition from *Step Up To Wage$* to WAGE$ was required due to the nature of the pilot program, which is meant to be transitional. While *Step Up To Wage$* is designed to be a time-limited program where participants only receive the benefit for a set period before either moving to WAGE$ or exiting the program, WAGE$ is set up as a longer-term (if possible) salary supplement program that focuses on retention.

As part of the transition, the Department made the determination to lower payment amounts. Several factors informed the decision to reduce payment amounts from *Step Up To Wage$.* The primary objective was to expand the number of educators who could be supported within the available funding. During the period when pandemic retention bonuses (PRBs) were in place, these payments were broadly distributed across the workforce and overlapped with WAGE$, minimizing disparities between those who did and did not receive additional compensation.

However, following the conclusion of PRBs, only a small percentage of the workforce remained eligible for WAGE$ payments. Given that these programs are designed to directly support workforce retention, it became clear that a broader distribution of funds would have a greater overall impact. As a result, we determined that reducing individual payment amounts would allow us to reach more educators and better support the stability and sustainability of the early childhood workforce. The updated award structure is shown below.



*Temporary Level of Education: Participants must advance to a higher level as noted on the scale in order to remain eligible. Deadlines are shared with individual participants as applicable.

The Department received 608 applications through the application portal in total. This includes 528 center-based applications and 80 Family Child Care providers. The application portal is still open; educators can apply at any time.

So far, 289 applicants have been paid under Child Care Wage$, which includes 246 center-based educators and 43 family child care providers. The applicants and total payments per month are detailed below.

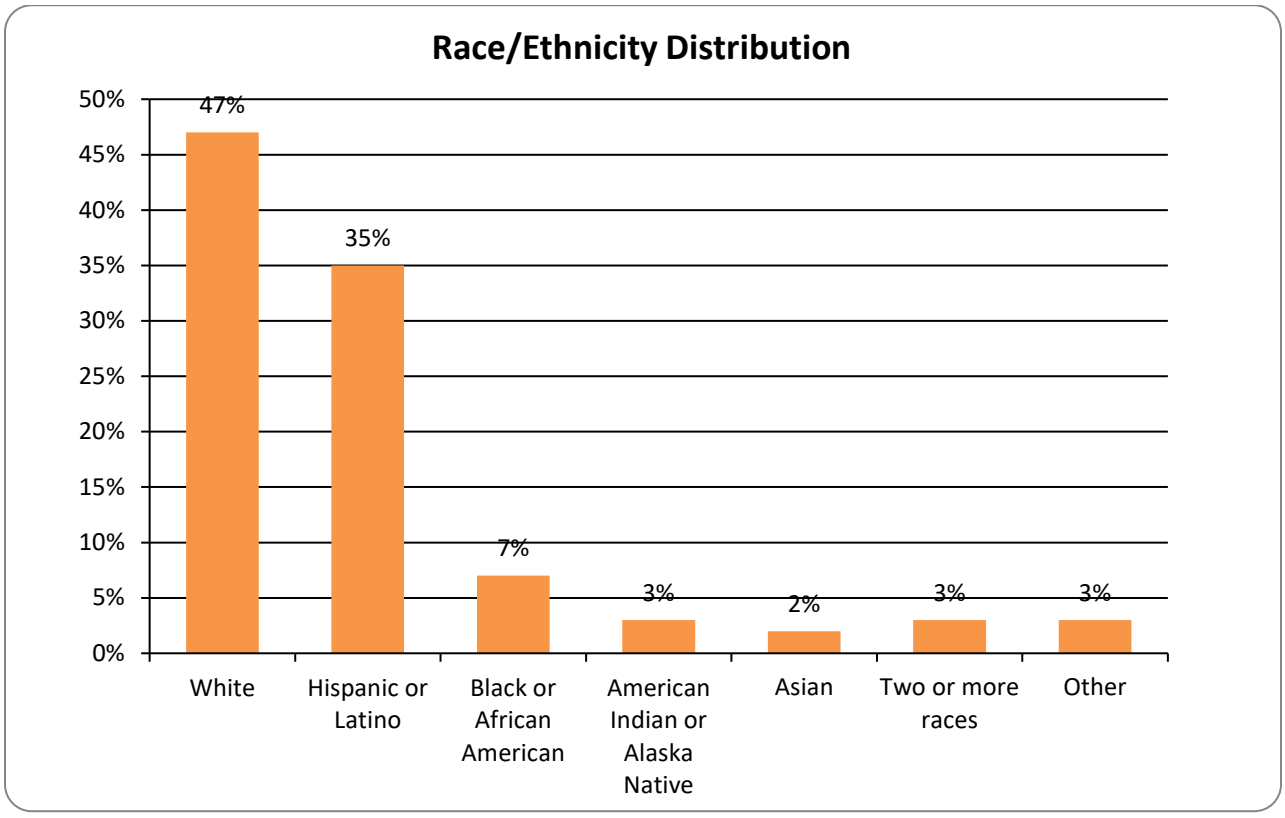
Month	# of Applicants awarded	Total payments
November 2025	47	$79,750
December 2025	66	$95,188
January 2026	55	$85,688
February 2026	33	$48,750
March 2026	86	$140,625
April 2026	No payments awarded	
May 2026	1 1st payment, (41 2nd payments)	$73,837
June 2026	60 2nd payments	$96,438
July 2026	1 1st payment, (40 2nd payments)	$68,500
TOTAL	**289 applicants**	**$688,776**

265 educators remain active and employed at their respective programs.

Of the current awardees, 98% are female educators. Among the 265 active awardees, 21% received a Level 5 award. This level corresponds to individuals who hold either an associate's

degree with at least 24 credits in Early Childhood Education (ECE) or a bachelor's degree with 12–23 ECE credits. A detailed breakdown of awardees by education level, as well as by race, is provided in the charts below.

Award Level	Percent	# of people	Credential Description
Level 1	27%	70	CDA or 3 ECE credits
Level 2	18%	48	12 or more ECE credits
Level 3	16%	42	36 college credits incl. 12+ ECE credits OR Associate's with 3–11 ECE credits
Level 4	8%	22	Associates with 12+ ECE credits OR Bachelor's with 3–11 ECE credits
Level 5	21%	56	Associates with 24+ ECE credits OR Bachelor's with 12–23 ECE credits
Level 6	10%	27	Bachelors with 24+ ECE credits
Total	**100%**	**265**	



WAGE$ continues to be fully funded through Rhode Island's Preschool Development Grant (PDG). To date, a total of $6,663,000 has been allocated to this initiative. Of this amount, $1.5 million has been allocated to the contract for Year 3. This is the final year of RI's Preschool Development

Grant. The most recent Notice of Funding Opportunity (for which RI was not eligible due to being a current award recipient) was a one-year award cycle with a technology focus. The Department does not expect a no-cost extension or another multi-year funding opportunity to sustain this model. Should PDG funding continue to be allocated federally, the Department anticipates being eligible to apply for the next round of funding. The focus of that round is not yet known. Informal guidance continues to be that it will be a one-year award rather than the three-year award the Department has previously received.

Question 9) Please provide any information on contract negotiations with SEIU on behalf of the family child care providers and potential program impacts for FY2027 and FY2028.

Answer: Negotiations between the State and SEIU 1199, representing Family Child Care providers, remain ongoing. Formal negotiations commenced on June 6, 2025, and several complex issues remain under active discussion. Consistent with standard labor relations practices, the Department cannot disclose confidential bargaining positions, fiscal proposals, or potential settlement terms while negotiations remain ongoing.

The outcome of negotiations could have fiscal and programmatic implications for FY2027 and FY2028; however, the scope and nature of any such impacts cannot be determined until negotiations are concluded and any resulting agreement is finalized and approved through the applicable State processes. The Department continues to administer the program under the existing statutory, regulatory, and budgetary framework pending the outcome of negotiations.

Question 10) Please provide an update to the May Caseload Conference testimony for the youth summer camp licensing. Have the new summer camp regulations been promulgated?

Answer: The new youth summer camp regulations have not yet been promulgated but are progressing through the final stages of the regulatory process.

The regulations were posted for public comment on July 20, 2026, with a public hearing held on August 4, 2026. The public comment period closed on August 19, 2026, with 77 comments received.

The Department carefully reviewed the substantial public input received and worked diligently to incorporate appropriate feedback into the revised regulations and to provide responses to the comments submitted. The Department submitted the updated regulations, along with responses to the public comments, to ORR for pre-review on September 24, 2026. ORR provided comments on September 30, 2026, to which DHS responded on October 2, 2026. ORR subsequently cleared the regulations for submission on October 5, 2026, and DHS submitted the regulations for review on October 6, 2026.

As of October 8, 2026, the regulations remain under final review and have not yet been formally promulgated. Following promulgation, the Department also plans to establish a stakeholder

group to facilitate continued collaboration and review of the youth summer camp regulatory framework and to inform future amendments and regulatory development as needed.

Question 11) Please discuss any potential impacts of pending federal actions, including the following proposed regulatory changes:

- Child Care and Development Funds
- Public Charge Revision
- Head Start

Answer: The Department is monitoring several pending federal actions that may have implications for Rhode Island's child care and early care and education systems.

With respect to the proposed changes to the Child Care and Development Fund (CCDF), the federal rule is intended to reduce administrative burden and provide states with greater flexibility in administering child care programs. The proposed rule remains under federal review and has not yet been formally issued or finalized, and the Department has not identified a specific adverse impact to CCAP at this time. Once the rule is finalized, the Department will assess any necessary changes to CCAP policies, procedures, and the CCDF State Plan. The next CCDF State Plan is due in July 2027, and the Department will use the planning process beginning in spring 2027 to evaluate the implications of any federal changes and incorporate them, as appropriate, into Rhode Island's plan.

The Department is also monitoring the recent federal public charge revision for potential downstream impacts on child care access. While the federal action does not change eligibility requirements for CCAP, it may create fear or uncertainty among immigrant families about whether receiving child care assistance could affect their immigration status or future applications. This could result in eligible families declining to apply for or discontinuing CCAP, despite remaining eligible under Rhode Island requirements. This could reduce access to child care and, in turn, affect parents' ability to maintain employment or participate in education and training. The Department will continue to monitor implementation of the federal policy and provide accurate information to families and stakeholders as additional federal guidance becomes available.

Finally, the Department is monitoring the NPRM regarding changes to the Head Start Program Performance Standards and its potential implications for Rhode Island's mixed-delivery early care and education system. While the proposed changes are intended to reduce administrative burden, eliminate duplicative requirements, and provide greater flexibility to Head Start programs, the Department is concerned that eliminating or reducing certain federal standards could result in fewer comprehensive services being available to children and families. Of particular concern are proposed changes that would reduce federal requirements related to program structure, service duration, developmental screening and assessment, mental health, health coordination, family engagement, and services for children with disabilities. Because Head

Start serves a significant number of Rhode Island children and families with complex needs, reductions in these services could create additional barriers for vulnerable children and families and may have large standing effects on the broader child care system.

The Department is also concerned that changes to the HSPPS could shift responsibilities that are currently supported through the federal Head Start framework to state systems. Rhode Island has invested significantly in its child care licensing system, BrightStars, the Rhode Island Early Learning and Development Standards, early intervention, special education, and other family-serving systems; however, these systems do not fully replicate the comprehensive and coordinated services provided through Head Start. If Head Start programs reduce or discontinue services, the state could experience increased referrals and demand for developmental, behavioral health, disability, health, and family-support services, as well as additional coordination and administrative responsibilities for child care and other state agencies.

The Department is therefore assessing not only the potential effect on Head Start programs themselves, but also whether the proposed changes could result in an unfunded shift of responsibilities to traditional early childhood programs, which are already stretched for funding. The Department will continue to monitor the federal rulemaking process and does support appropriate flexibility while ensuring that changes do not create gaps in services or undermine the quality and coordination of Rhode Island's existing early childhood system.

State Supplemental Payment Program (SSP)

Supplemental Security Income (SSI) is a federal program that provides monthly cash payments to individuals in need. SSI is for people who are 65 or older, as well as those who are blind or individuals with a disability of any age, including children. To qualify for SSI, individuals must also have little or no income and few resources. DHS administers the State supplemental portion of monthly SSI benefits to eligible residents of Rhode Island. The Social Security Administration (SSA) sends the federal portion of SSI benefits. DHS issues a separate payment for the State Supplemental Payment (SSP).

Question 1) Please provide the number of SSI recipients in each category (persons, personal needs allowance, assisted living).

	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Actual	FY 2027 Enacted	FY 2027 Nov CEC DHS	FY 2028 Nov CEC DHS
SSP							
Persons	31,630	30,900	30,835	30,483	30,550	30,477	30,484
Cost / Person	$ 44	$ 45	$ 45.04	$ 45.09	$ 45.50	$ 45.11	$ 45.14
Cash Payments	$ 16,508,974	$ 16,571,658	$ 16,666,156	$ 16,493,294	$ 16,680,300	$ 16,497,810	$ 16,512,573
Transaction Fees	$ 56,033	$ 59,000	$ 63,000	$ 66,000	$ 72,000	$ 70,000	$ 72,000
Total Dollars	**$16,565,007**	**$16,630,658**	**$16,729,156**	**$16,559,294**	**$16,752,300**	**$16,567,810**	**$16,584,573**

As of September 2026, there are a total of 30,457 SSP recipients: 29,419 individual/couple payments, 673 personal needs allowance payments, and 365 assisted living payments. More detail can be found in Appendix A.

Over the last 12 months, the SSP caseload has remained relatively flat. While the number of applications and approvals are increasing, so are case closures. This has resulted in mostly neutral month-over-month growth. The FY2027 and 2028 projections factor in zero growth for individual payments, personal needs allowance and assisted living payments. These assumptions bring the average number of persons to 30,477 and 30,484 for FY2027 and FY2028, respectively.

The administrative transaction fee increased to $66,000 for FY2026. Per the Federal SSA and based on the projected caseload, the transaction fee is estimated at $70,000 for FY2027 and $72,000 for FY2028. The cost per person is not calculated to include transaction fees.

The total moving costs were $316,872 in FY2026. DHS estimates the cost of $308,367 and $351,983, respectively, for FY2027 and FY2028. The annual amounts assume a monthly cost based on the last 12 months of actual expenses.

Question 2) Please provide the number of individuals residing in a non-Medicaid funded assisted living facility and receiving the $206 payment and the total cost for FY 2027 and FY 2028.

Answer: Consistent with 218-RICR-20-00-5.5, each month the Department may issue payments of $206 for individuals residing in assisted living facilities not eligible to receive Title XIX funding under the Social Security Act. As of March 2026, there are no SSI recipients within a non-Medicaid funded assisted living facility. LTSS staff worked with Medicaid-eligible facilities to get their residences enrolled in LTSS and are now billing at a tier reimbursement equal to or more than the $206 payment.

The FY 2026 total of $206 is based on spending through March 2026. The Department does not anticipate any additional payments for FY2027 and FY2028.

	FY25 Total	FY 2026 Total	FY 2027 DHS Projected	FY 2028 DHS Projected
Bristol Assisted Living	$10,918	$0	$0	$0
Charlesgate	$10,918	$0	$0	$0
Community Care Alliance	$25,132	$0	$0	$0
Franciscan Missionaries	$21,424	$206	$0	$0
Total	**$68,392**	**$206**	**$0**	**$0**

General Public Assistance Program (GPA)

The General Public Assistance program (GPA) is intended as a program of last resort for the neediest individuals in the State. GPA Bridge provides a small cash benefit to adults aged 18 and over who have very limited income and resources and have an illness or medical condition that keeps them from working while they await an SSI determination.

To qualify, an individual must earn less than $327 a month and cannot qualify for federal assistance programs other than the Supplemental Nutrition Assistance Program (SNAP). In addition, GPA Burial provides funeral, cremation, and burial services. Rhode Island General Laws § 40-6-3.10 sets the basic funeral allowance payment at $900.00 and 218-RICR-20-00-3.4 sets maximum allowances for burial and cremation expenses.

Question 1) For FY2027 and FY2028, please provide an estimate of the expenses for the program, including the burial assistance program.

Answer: As of September 2026, there are 640 GPA Bridge cases. This is 73 cases fewer than the May 2026 DHS projection for the month of September 2026. Applications received are up since the May Caseload Estimating Conference, averaging 190 per month compared to 158 per month. The approval rate has increased from 15% to 19%.

The current projection uses growth of 0.20% month-over-month, consistent with the average growth rate seen in SFY26. This gives rise to the number of cases reaching an average of 702 in SFY27 and 713 in SFY28 at a cost of $1,340,951 and $1,337,058, net of recoveries, respectively. The total cost for GPA Burials during FY2026 was $631,363, providing services to 599 decedents, including 150 burials. This amount is slightly less than the $650,000 in the FY 2026 Final Enacted Budget. Through September 2026, the cost of GPA Burials is $124,599 for 122 decedents.

The Department expects costs-per-burial to increase during FY2027. The Catholic Cemeteries is the primary provider of cemetery plots for this program. Beginning in fall 2026, the Catholic Cemeteries requires funeral homes to topically embalm the decedent and maintain the individual in a body bag prior to placing the individual in a container. The new requirement by the Catholic Cemeteries will generate costs for additional mileage, supplies, and labor. Catholic Cemeteries advised DHS that should the funeral home indicate that these procedures have been followed, and in fact they have not, that funeral home will no longer be permitted to bury any individual at the Catholic Cemeteries. The Department projects additional spending of $25,000 in FY2027 and $37,500 in FY2028 for this change in practice, for GPA Burial subtotals of $650,000 in FY2027 and $662,500 in FY2028.

	FY 2024 Actual	FY 2025 Actual	FY 2026 Actual	FY 2027 Enacted	FY 2027 Nov CEC DHS	FY 2028 Nov CEC DHS
GPA						
Persons - Bridge	533	632	706	718	702	713
Cost / Person	$140	$136.03	$143.35	$162.00	$159.18	$156.27
Cash Payments - Bridge	$880,734	$1,031,616	$1,214,429	$1,395,792	$1,340,951	$1,337,058
Burials	$647,057	$606,386	$631,363	$625,000	$650,000	$662,500
Total Dollars	**$1,527,791**	**$1,638,002**	**$1,845,792**	**$2,020,792**	**$1,990,951**	**$1,999,558**

Appendix A: Caseload Projections

-see next pages-

Department of Human Services
Public Assistance Caseloads & Expenditures
November 2026 Caseload

	FY 2024 Actuals	FY 2025 Actuals	FY 2026 Actuals	FY 2027 Enacted	FY 2027 November CEC DHS	FY 2028 November CEC DHS
TANF / RI Works						
Persons	8,323	9,362	7,944	6,600	5,613	5,194
Cost / Person	$ 236	$ 285.04	$ 287.00	$ 286.84	$ 281.84	$ 284.91
Cash Payments	$ 23,555,525	$ 32,023,400	$ 27,357,291	$ 22,717,728	$ 18,982,193	$ 17,756,712
Supportive Services	$ 881,289	$ 952,401	$ 914,367	$ 1,000,000	$ 766,697	$ 755,092
Clothing - Children	$ 655,800	$ 699,169	$ 717,008	$ 600,000	$ 470,896	$ 356,796
PEAF/SNAP	$ 298,277	$ -	$ 2,688,769	$ -	$ 81	$ -
Catastrophic	$ 1,600	$ 600	$ -	1,000	$ 200	$ 200
Transportation	$ 434,866	$ 549,738	$ 379,748	$ 325,710	$ 283,739	$ 282,795
Total Dollars	**$ 25,827,357**	**$ 34,225,308**	**$ 32,057,183**	**$ 24,644,438**	**$ 20,503,805**	**$ 19,151,595**
Child Care						
Subsidies	6,100	6,464	6,386	6,937	6,583	6,800
Cost / Subsidy (Annual)	$ 10,107	$ 10,970	$ 10,612	$ 10,761	$ 11,460	$ 11,599
Total Dollars	**$ 61,651,009**	**$ 70,907,547**	**$ 67,764,348**	**$ 74,649,057**	**$ 75,440,043**	**$ 78,878,481**
SSP						
Persons	30,900	30,835	30,483	30,550	30,477	30,484
Cost / Person	$ 45	$ 45.04	$ 45.09	$ 45.50	$ 45.11	$ 45.14
Cash Payments	$ 16,571,658	$ 16,666,156	$ 16,493,294	$ 16,680,300	$ 16,496,383	$ 16,512,263
Trans. Fees	$ 59,000	$ 63,000	$ 66,000	$ 72,000	$ 70,000	$ 72,000
Total Dollars	**$ 16,630,658**	**$ 16,729,156**	**$ 16,559,294**	**$ 16,752,300**	**$ 16,566,383**	**$ 16,584,263**
GPA						
Persons Total - Bridge	533	632	706	718	702	713
Cost / Person	$ 140	$ 136.03	$ 143.35	$ 162.00	$ 159.07	$ 156.24
Cash Payments - Bridge	$ 879,114	$ 1,031,616	$ 1,214,429	$ 1,395,792	$ 1,340,951	$ 1,337,058
Burials	$ 648,676	$ 606,387	$ 631,363	$ 625,000	$ 650,000	$ 662,500
Total Dollars	**$ 1,527,790**	**$ 1,638,003**	**$ 1,845,792**	**$ 2,020,792**	**$ 1,990,951**	**$ 1,999,558**
Grand Total Dollars	**$ 105,636,814**	**$ 123,500,014**	**$ 118,226,618**	**$ 118,066,587**	**$ 114,501,182**	**$ 116,613,898**

Note: Prior year actuals include adjustment and accrual entries for consistency with state accounting records.

Department of Human Services
Rhode Island Works (TANF) Caseload and Expenditures
November 2026 Caseload

Rhode Island Works SFY 2026	July	August	September	October	November	December	January	February	March	April	May	June	Total
Persons	9,279	9,497	9,313	9,053	8,605	8,314	7,867	7,340	6,922	6,562	6,345	6,225	7,944
Cases	3,711	3,772	3,688	3,622	3,432	3,338	3,182	3,061	2,936	2,805	2,768	2,680	3,250
Persons/case	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.4	2.4	2.3	2.3	2.3	2.4
Avergage cost per person	$ 292.34	$ 275.00	$ 283.00	$ 283.67	$ 276.85	$ 286.49	$ 280.42	$ 285.92	$ 294.00	$ 380.77	$ 211.42	$ 300.17	$ 287.00
Average cost per case	$ 731.00	$ 697.00	$ 714.00	$ 709.02	$ 694.14	$ 713.58	$ 693.29	$ 685.60	$ 694.00	$ 890.77	$ 484.64	$ 697.22	$ 701.56
Regular	$ 2,527,802	$ 2,448,887	$ 2,455,086	$ 2,409,547	$ 2,235,219	$ 2,234,878	$ 2,069,868	$ 1,969,076	$ 1,911,731	$ 2,350,532	$ 1,261,987	$ 1,757,819	$ 25,632,432
Two Parent	$ 184,819	$ 179,049	$ 179,502	$ 158,532	$ 147,063	$ 147,040	$ 136,183	$ 129,552	$ 124,821	$ 148,068	$ 79,497	$ 110,731	$ 1,724,857
Total	**$ 2,712,621**	**$ 2,627,936**	**$ 2,634,588**	**$ 2,568,079**	**$ 2,382,282**	**$ 2,381,919**	**$ 2,206,051**	**$ 2,098,628**	**$ 2,036,552**	**$ 2,498,600**	**$ 1,341,484**	**$ 1,868,550**	**$ 27,357,290**
Catastrophic	$ -	$ -	$-	$ -	$ -	$ -	$ -	$ -	$ -		$ 200		$ 200
SNAP	$ -	$ -	$ -	$ -	$ 2,680,996	$ 6,118	$ 614	$ 314	$ 472	$ -	$ -	$ -	$ 2,688,513
Clothing	$ -	$ 682,810	$ 18,708	$ 14,208	$ 1,114	$ 165	$ 3	$ -	$ -	$ -	$ -	$ -	$ 717,008
Supportive Services	$ 77,259	$ 82,977	$ 83,670	$ 75,612	$ 71,649	$ 75,381	$ 72,624	$ 73,233	$ 85,197	$ 63,285	$ 65,322	$ 88,158	$ 914,367
Transportation	$ 38,115	$ 39,600	$ 42,158	$ 39,848	$ 34,733	$ 30,113	$ 29,370	$ 26,895	$ 25,245	$ 25,245	$ 23,760	$ 24,668	$ 379,749
Total	**$ 2,827,995**	**$ 3,433,323**	**$ 2,779,124**	**$ 2,697,747**	**$ 5,170,773**	**$ 2,493,695**	**$ 2,308,662**	**$ 2,199,069**	**$ 2,147,466**	**$ 2,587,130**	**$ 1,430,766**	**$ 1,981,376**	**$ 32,057,125**

Rhode Island Works SFY 2027	July	August	September	*October*	*November*	*December*	*January*	*February*	*March*	*April*	*May*	*June*	*Total*
Persons	6,186	5,970	5,828	*5,805*	*5,690*	*5,579*	*5,530*	*5,454*	*5,396*	*5,343*	*5,306*	*5,264*	*5,613*
Cases	2,683	2,587	2,507	*2,511*	*2,461*	*2,413*	*2,392*	*2,359*	*2,334*	*2,311*	*2,295*	*2,277*	*2,428*
Persons/case	**2.3**	**2.3**	**2.3**	***2.3***	***2.3***	***2.3***	***2.3***	***2.3***	***2.3***	***2.3***	***2.3***	***2.3***	*2.3*
Avergage cost per person	$ 310.41	$ 219.67	$ 289.14	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 281.84*
Average cost per case	$ 715.69	$ 506.92	$ 672.16	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 658.71*	*$ 651.93*
Regular	$ 1,804,980	$ 1,232,728	$ 1,584,006	*$ 1,554,784*	*$ 1,523,825*	*$ 1,494,104*	*$ 1,481,101*	*$ 1,460,667*	*$ 1,445,188*	*$ 1,430,946*	*$ 1,421,039*	*$ 1,409,894*	*$ 17,843,261*
Two Parent	$ 115,211	$ 78,685	$ 101,107	*$ 99,242*	*$ 97,265*	*$ 95,368*	*$ 94,538*	*$ 93,234*	*$ 92,246*	*$ 91,337*	*$ 90,705*	*$ 89,993*	*$ 1,138,932*
Total	**$ 1,920,192**	**$ 1,311,413**	**$ 1,685,112**	***$ 1,654,026***	***$ 1,621,090***	***$ 1,589,472***	***$ 1,575,639***	***$ 1,553,901***	***$ 1,537,434***	***$ 1,522,283***	***$ 1,511,744***	***$ 1,499,887***	***$ 18,982,193***
Catastrophic		$ -	$ -	$ -		$ -		$ -	$ -	$ -	$ -	$ 200	$ 200
SNAP	$ 81	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 81
Clothing	$ -	$ 464,265	$ 6,631		$ -	$ -	$ -	$ -	$ -	$ -			$ 470,896
Supportive Services	$ 48,959	$ 63,693	$ 55,920	$ 70,336	$ 68,936	$ 67,591	$ 67,003	$ 66,079	$ 65,378	$ 64,734	$ 64,286	$ 63,782	$ 766,697
Transportation	$ 20,543	$ 19,553	$ 19,635	$ 26,342	$ 25,818	$ 25,314	$ 25,094	$ 24,748	$ 24,485	$ 24,244	$ 24,076	$ 23,887	$ 283,739
Total	**$ 1,989,775**	**$ 1,858,924**	**$ 1,767,298**	***$ 1,750,704***	***$ 1,715,843***	***$ 1,682,377***	***$ 1,667,736***	***$ 1,644,728***	***$ 1,627,297***	***$ 1,611,261***	***$ 1,600,106***	***$ 1,587,756***	***$ 20,503,805***

Rhode Island Works SFY 2028	*July*	*August*	*September*	*October*	*November*	*December*	*January*	*February*	*March*	*April*	*May*	*June*	*Total*
Persons	*5,366*	*5,357*	*5,316*	*5,286*	*5,239*	*5,187*	*5,173*	*5,133*	*5,104*	*5,074*	*5,057*	*5,034*	*5,194*
Cases	*2,276*	*2,272*	*2,255*	*2,242*	*2,222*	*2,200*	*2,194*	*2,177*	*2,165*	*2,152*	*2,145*	*2,135*	*2,203*
Persons/case	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	***2.4***	*2.4*
Avergage cost per person	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*	*$ 284.91*
Average cost per case	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*	*$ 671.71*
Regular	*$ 1,437,088*	*$ 1,434,562*	*$ 1,423,828*	*$ 1,415,620*	*$ 1,402,992*	*$ 1,389,101*	*$ 1,385,312*	*$ 1,374,578*	*$ 1,367,001*	*$ 1,358,793*	*$ 1,354,373*	*$ 1,348,059*	*$ 16,691,309*
Two Parent	*$ 91,729*	*$ 91,568*	*$ 90,883*	*$ 90,359*	*$ 89,553*	*$ 88,666*	*$ 88,424*	*$ 87,739*	*$ 87,255*	*$ 86,731*	*$ 86,449*	*$ 86,046*	*$ 1,065,403*
Total	***$ 1,528,817***	***$ 1,526,130***	***$ 1,514,711***	***$ 1,505,979***	***$ 1,492,545***	***$ 1,477,767***	***$ 1,473,737***	***$ 1,462,317***	***$ 1,454,257***	***$ 1,445,525***	***$ 1,440,823***	***$ 1,434,106***	***$ 17,756,712***
Catastrophic		*$ -*	*$ -*	*$ -*	*$ -*	*$ -*	*$ -*	*$ -*	*$ -*	*$ -*	*$ -*	*$ 200*	*$ 200*
Clothing	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 29,733*	*$ 356,796*
Supportive Services	*$ 65,012*	*$ 64,898*	*$ 64,412*	*$ 64,041*	*$ 63,469*	*$ 62,841*	*$ 62,670*	*$ 62,184*	*$ 61,841*	*$ 61,470*	*$ 61,270*	*$ 60,984*	*$ 755,092*
Transportation	*$ 24,348*	*$ 24,305*	*$ 24,123*	*$ 23,984*	*$ 23,770*	*$ 23,535*	*$ 23,471*	*$ 23,289*	*$ 23,161*	*$ 23,022*	*$ 22,947*	*$ 22,840*	*$ 282,795*
Total	***$ 1,647,910***	***$ 1,645,066***	***$ 1,632,979***	***$ 1,623,737***	***$ 1,609,517***	***$ 1,593,876***	***$ 1,589,610***	***$ 1,577,523***	***$ 1,568,992***	***$ 1,559,749***	***$ 1,554,772***	***$ 1,547,863***	***$ 19,151,595***

Italicized figures are projections

RI Department of Human Services
Child Care Caseload and Expenditures
November 2026 Caseload

Cycle #	2024 Total children	2024 Total subsidies	2025 Total children	2025 Total subsidies	*2026 Total children*	*2026 Total subsidies*	2027 Total children	2027 Total subsidies	*2028 Total children*	*2028 Total subsidies*
1	5,890	$ 2,371,712	6,169	$ 2,720,273	6,204	$ 2,423,470	6,464	$ 2,797,315	*6,473*	*$ 2,956,799*
2	5,907	$ 2,494,244	6,086	$ 2,693,728	6,292	$ 2,502,710	6,436	$ 2,922,457	*6,480*	*$ 2,960,028*
3	5,991	$ 2,593,424	6,002	$ 2,673,649	6,145	$ 2,567,938	6,427	$ 2,926,107	*6,487*	*$ 2,963,260*
4	5,676	$ 2,390,899	5,766	$ 2,586,096	6,100	$ 2,694,619	6,404	$ 2,954,970	*6,495*	*$ 2,966,496*
5	5,704	$ 2,266,807	5,934	$ 2,549,799	6,046	$ 3,013,918	6,352	$ 2,857,517	*6,502*	*$ 2,969,735*
6	5,494	$ 2,152,228	5,755	$ 2,415,556	5,991	$ 2,806,328	6,259	$ 2,559,048	*6,509*	*$ 2,972,978*
7	5,563	$ 2,184,816	5,825	$ 2,385,568	5,863	$ 2,798,125	6,266	$ 2,780,223	*6,516*	*$ 2,976,224*
8	5,581	$ 2,183,761	5,865	$ 2,372,308	5,966	$ 2,540,825	6,273	$ 2,783,267	*6,523*	*$ 2,979,474*
9	5,594	$ 2,192,547	5,770	$ 2,354,597	5,823	$ 2,471,007	6,280	$ 2,786,314	*6,530*	*$ 2,982,727*
10	5,816	$ 2,302,068	5,814	$ 2,352,619	5,983	$ 2,383,705	*6,286*	*$ 2,789,365*	*6,537*	*$ 2,985,984*
11	5,686	$ 2,219,436	5,687	$ 2,334,259	5,818	$ 2,426,432	*6,293*	*$ 2,792,419*	*6,544*	*$ 2,989,245*
12	5,774	$ 2,207,856	6,122	$ 2,602,526	5,685	$ 2,385,234	*6,300*	*$ 2,795,476*	*6,551*	*$ 2,992,509*
13	5,697	$ 2,241,586	6,149	$ 2,503,655	5,948	$ 2,412,058	*6,307*	*$ 2,798,537*	*6,559*	*$ 2,995,776*
14	5,626	$ 2,138,422	6,119	$ 2,665,546	5,534	$ 2,411,980	*6,314*	*$ 2,801,601*	*6,566*	*$ 2,999,048*
15	5,710	$ 2,255,129	6,046	$ 2,508,197	5,977	$ 2,351,417	*6,368*	*$ 2,911,068*	*6,573*	*$ 3,002,323*
16	5,693	$ 2,217,855	6,174	$ 2,610,394	6,054	$ 2,688,919	*6,379*	*$ 2,914,139*	*6,580*	*$ 3,005,601*
17	5,668	$ 2,181,494	5,833	$ 2,402,100	6,024	$ 2,230,508	*6,386*	*$ 2,917,213*	*6,587*	*$ 3,008,883*
18	5,794	$ 2,228,428	6,039	$ 2,505,138	6,011	$ 2,470,808	*6,393*	*$ 2,920,290*	*6,595*	*$ 3,012,169*
19	5,730	$ 2,231,161	6,089	$ 2,523,738	*6,029*	*$ 2,470,666*	*6,400*	*$ 2,923,371*	*6,602*	*$ 3,015,458*
20	5,873	$ 2,262,323	6,245	$ 2,711,306	*6,156*	*$ 2,475,301*	*6,407*	*$ 2,926,455*	*6,609*	*$ 3,018,751*
21	5,859	$ 2,243,933	6,283	$ 2,584,341	*6,264*	*$ 2,439,558*	*6,414*	*$ 2,929,543*	*6,616*	*$ 3,022,047*
22	5,894	$ 2,290,867	6,179	$ 2,547,562	*6,113*	*$ 2,520,409*	*6,421*	*$ 2,932,634*	*6,623*	*$ 3,025,347*
23	5,988	$ 2,398,454	6,224	$ 2,586,438	*6,192*	*$ 2,540,363*	*6,428*	*$ 2,935,728*	*6,631*	*$ 3,028,651*
24	5,874	$ 2,299,778	6,025	$ 2,477,889	*5,922*	*$ 2,540,639*	*6,435*	*$ 2,938,825*	*6,638*	*$ 3,031,958*
25	5,835	$ 2,226,289	6,129	$ 2,558,249	*6,008*	*$ 2,555,516*	*6,442*	*$ 2,941,927*	*6,645*	*$ 3,035,269*
26	5,868	$ 2,313,145	6,132	$ 2,572,755	*6,102*	*$ 2,532,887*	*6,449*	*$ 2,945,031*	*6,652*	*$ 3,038,583*
Total	**5,761**	**$ 59,088,662**	**6,018**	**$ 65,798,282**	***6,010***	***$ 65,655,339***	***6,369***	***$ 74,480,837***	***6,562***	***$ 77,935,319***
Average Cost Per Child		$ 10,257		$ 10,934		*$ 10,925*		*$ 11,695*		*$ 11,876*
	2.8%	-1.2%	4.5%	11.4%	*-0.1%*	*-0.2%*	*6.0%*	*13.4%*	*3.0%*	*4.6%*

Italicized Figures are projections

Provider Pilot Total children	Provider Pilot Total subsidies	2025 Total children	2025 Total subsidies	*2026 Total children*	*2026 Total subsidies*	2027 Total children	2027 Total subsidies	*2028 Total children*	*2028 Total subsidies*
246	$ 2,562,347	446	$ 5,109,265	*317*	*$ 2,778,998*	*214*	*$ 959,206*	*238*	*$ 943,162*

2024 Total children	2024 Total subsidies	2025 Total children	2025 Total subsidies	*2026 Total children*	*2026 Total subsidies*	2027 Total children	2027 Total subsidies	*2027 Total children*	*2027 Total subsidies*
6,007	$ 61,651,009	6,464	$ 70,907,547	*6,327*	*$ 68,434,337*	*6,583*	*$ 75,440,043*	*6,800*	*$ 78,878,481*
	10,263		10,970		*10,817*		*11,460*		*11,599*

Department of Human Services
Supplemental Security Income (SSI) State Supplement Program (SSP) Caseload and Expenditures
November 2026 Caseload

SSP (SFY 2026)	July	August	September	October	November	December	January	February	March	April	May	June	Total
Persons	29,579	29,527	29,441	29,424	28,933	29,269	29,389	29,308	29,566	29,540	29,770	29,433	29,432
Personal Needs Allowance	674	682	679	675	658	672	694	695	693	692	687	684	682
Assisted Living	366	370	364	366	370	376	369	372	374	371	367	370	370
Total Persons	**30,619**	**30,579**	**30,484**	**30,465**	**29,961**	**30,317**	**30,452**	**30,375**	**30,633**	**30,603**	**30,824**	**30,487**	**30,483**
Average cost per person	$ 46.19	$ 45.06	$ 44.39	$ 45.51	$ 47.48	$ 43.76	$ 46.21	$ 44.63	$ 46.68	$ 44.46	$ 44.46	$ 42.26	$ 45.09
SSP Benefit Payments	$ 1,248,009	$ 1,201,746	$ 1,211,734	$ 1,233,012	$ 1,253,261	$ 1,188,279	$ 1,243,802	$ 1,201,754	$ 1,289,751	$ 1,197,786	$ 1,222,344	$ 1,132,560	$ 14,624,038
Assisted Living	$ 135,000	$ 114,000	$ 83,000	$ 77,000	$ 97,000	$ 87,000	$ 106,000	$ 102,000	$ 84,000	$ 90,000	$ 95,000	$ 105,000	$ 1,175,000
Personal Needs Allowance	$ 31,405	$ 31,250	$ 31,905	$ 31,905	$ 30,510	$ 30,825	$ 31,905	$ 32,220	$ 31,680	$ 31,365	$ 30,915	$ 31,500	$ 377,385
Supplemental	$ -	$ 30,994	$ 26,496	$ 44,686	$ 41,766	$ 20,570	$ 25,472	$ 19,566	$ 24,408	$ 41,374	$ 22,200	$ 19,340	$ 316,872
Total Payments	**$ 1,414,414**	**$ 1,377,990**	**$ 1,353,135**	**$ 1,386,603**	**$ 1,422,537**	**$ 1,326,674**	**$ 1,407,179**	**$ 1,355,540**	**$ 1,429,839**	**$ 1,360,525**	**$ 1,370,459**	**$ 1,288,400**	**$ 16,493,295**
Transaction Costs	$ 7,000	$ 5,000	$ 5,000	$ 5,000	$ 6,000	$ 5,000	$ 6,000	$ 5,000	$ 6,000	$ 5,000	$ 5,000	$ 6,000	$ 66,000
Total	**$ 1,421,414**	**$ 1,382,990**	**$ 1,358,135**	**$ 1,391,603**	**$ 1,428,537**	**$ 1,331,674**	**$ 1,413,179**	**$ 1,360,540**	**$ 1,435,839**	**$ 1,365,525**	**$ 1,375,459**	**$ 1,294,400**	**$ 16,559,295**

SSP (SFY 2027)	*July*	*August*	*September*	*October*	*November*	*December*	*January*	*February*	*March*	*April*	*May*	*June*	*Total*
Persons	29,458	29,452	29,419	*29,439*	*29,439*	*29,439*	*29,439*	*29,439*	*29,439*	*29,439*	*29,439*	*29,439*	*29,440*
Personal Needs Allowance	672	677	673	*671*	*671*	*671*	*671*	*671*	*671*	*671*	*671*	*671*	*672*
Assisted Living	368	369	365	*365*	*365*	*365*	*365*	*365*	*365*	*365*	*365*	*365*	*366*
Total Persons	**30,498**	**30,498**	**30,457**	***30,475***	***30,475***	***30,475***	***30,475***	***30,475***	***30,475***	***30,475***	***30,475***	***30,475***	***30,477***
Average cost per person	$ 44.40	$ 45.32	$ 45.32	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.11*
SSP Benefit Payments	$ 1,224,254	$ 1,195,911	$ 1,208,641	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 1,219,000*	*$ 14,599,806*
Assisted Living	$ 99,000	$ 155,000	$ 95,000	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 1,222,000*
Personal Needs Allowance	$ 30,915	$ 31,320	$ 32,220	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 30,195*	*$ 366,210*
Supplemental	$ -	$ -	$ 44,380	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 308,367*
Total Payments	**$ 1,354,169**	**$ 1,382,231**	**$ 1,380,241**	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 1,375,527***	***$ 16,496,383***
Transaction Costs	$ 5,000.00	$ 5,000.00	$ 6,000.00	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 70,000*
Total	**$ 1,359,169**	**$ 1,387,231**	**$ 1,386,241**	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 1,381,527***	***$ 16,566,383***

SSP (SFY 2028)	*July*	*August*	*September*	*October*	*November*	*December*	*January*	*February*	*March*	*April*	*May*	*June*	*Total*
Persons	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*	*29,443*
Personal Needs Allowance	*674*	*674*	*674*	*674*	*674*	*674*	*674*	*674*	*674*	*674*	*674*	*674*	*674*
Assisted Living	*367*	*367*	*367*	*367*	*367*	*367*	*367*	*367*	*367*	*367*	*367*	*367*	*367*
Total Persons	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***	***30,484***
Average cost per person	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*	*$ 45.14*
SSP Benefit Payments	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 1,219,360*	*$ 14,632,320*
Assisted Living	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 97,000*	*$ 1,164,000*
Personal Needs Allowance	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 30,330*	*$ 363,960*
Supplemental	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 29,332*	*$ 351,983*
Total Payments	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 1,376,022***	***$ 16,512,263***
Transaction Costs	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 6,000*	*$ 72,000*
Total	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 1,382,022***	***$ 16,584,263***

Italicized figures are projections

Department of Human Services
General Public Assistance (GPA) Caseload and Expenditures
November 2026 Caseload

GPA (SFY 2026)	July	August	September	October	November	December	January	February	March	April	May	June	Total
Total Persons	**702**	**713**	**734**	**716**	**686**	**712**	**711**	**702**	**702**	**705**	**693**	**695**	**706**
Average cost per person / Bridge	$ 192.31	$ 125.95	$ 165.81	$ 170.67	$ 149.13	$ 168.93	$ 162.73	$ 181.34	$ 142.45	$ 162.27	$ 168.69	$ (73.76)	$ 143.35
Bridge Payments	$ 135,000	$ 138,000	$ 144,400	$ 139,400	$ 134,600	$ 141,800	$ 140,600	$ 139,400	$ 137,600	$ 135,900	$ 133,900	$ 140,800	$ 1,661,400
Bridge Recoveries		$ (48,197)	$ (22,699)	$ (17,199)	$ (32,298)	$ (21,525)	$ (24,899)	$ (12,099)	$ (37,598)	$ (21,499)	$ (16,999)	$ (192,060)	$ (447,072)
Total Bridge Payments	**$ 135,000**	**$ 89,803**	**$ 121,701**	**$ 122,201**	**$ 102,302**	**$ 120,275**	**$ 115,701**	**$ 127,301**	**$ 100,002**	**$ 114,401**	**$ 116,901**	**$ (51,260)**	**$ 1,214,328**
Burials	**$ -**	**$ 53,981**	**$ 79,725**	**$ 52,876**	**$ 59,925**	**$ 53,450**	**$ 41,640**	**$ 59,086**	**$ 49,425**	**$ 77,860**	**$ 45,150**	**$ 58,245**	**$ 631,363**
Total	**$ 135,000**	**$ 143,784**	**$ 201,426**	**$ 175,077**	**$ 162,227**	**$ 173,725**	**$ 157,341**	**$ 186,387**	**$ 149,427**	**$ 192,261**	**$ 162,051**	**$ 6,985**	**$ 1,845,691**

GPA (SFY 2027)	*July*	*August*	*September*	*October*	*November*	*December*	*January*	*February*	*March*	*April*	*May*	*June*	*Total*
Total Persons	**706**	**666**	**640**	***707***	***709***	***710***	***712***	***713***	***715***	***716***	***717***	***719***	***702***
Average cost per person / Bridge	$ 193.34	$ 193.39	$ 114.02	*$ 155.95*	*$ 156.02*	*$ 156.10*	*$ 156.17*	*$ 156.24*	*$ 156.31*	*$ 156.38*	*$ 156.45*	*$ 156.52*	*$ 159.07*
Bridge Payments	$ 136,500	$ 131,400	$ 127,300	*$ 135,823*	*$ 136,095*	*$ 136,367*	*$ 136,640*	*$ 136,913*	*$ 137,187*	*$ 137,461*	*$ 137,736*	*$ 138,012*	*$ 1,627,433*
Bridge Recoveries	$ -	$ (2,604)	$ (54,326)	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (286,439)*
Total Bridge Payments	***$ 136,500***	***$ 128,796***	***$ 72,974***	***$ 110,322***	***$ 110,594***	***$ 110,866***	***$ 111,139***	***$ 111,412***	***$ 111,686***	***$ 111,960***	***$ 112,235***	***$ 112,511***	***$ 1,340,951***
Burials	***$ 34,980***	***$ 42,612***	***$ 47,007***	***$ 55,600***	***$ 58,726***	***$ 58,725***	***$ 58,725***	***$ 58,725***	***$ 58,725***	***$ 58,725***	***$ 58,725***	***$ 58,725***	***$ 650,000***
Total	***$ 171,480***	***$ 171,408***	***$ 119,981***	***$ 165,922***	***$ 169,320***	***$ 169,591***	***$ 169,864***	***$ 170,137***	***$ 170,411***	***$ 170,685***	***$ 170,960***	***$ 171,236***	***$ 1,990,951***

GPA (SFY 2028)	*July*	*August*	*September*	*October*	*November*	*December*	*January*	*February*	*March*	*April*	*May*	*June*	*Total*
Total Persons	***703***	***705***	***707***	***709***	***710***	***712***	***714***	***716***	***718***	***719***	***721***	***723***	***713***
Average cost per person / Bridge	*$ 155.75*	*$ 155.84*	*$ 155.93*	*$ 156.02*	*$ 156.11*	*$ 156.20*	*$ 156.29*	*$ 156.37*	*$ 156.46*	*$ 156.55*	*$ 156.64*	*$ 156.73*	*$ 156.24*
Bridge Payments	*$ 135,054*	*$ 135,391*	*$ 135,730*	*$ 136,069*	*$ 136,409*	*$ 136,750*	*$ 137,092*	*$ 137,435*	*$ 137,778*	*$ 138,123*	*$ 138,468*	*$ 138,814*	*$ 1,643,113*
Bridge Recoveries	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (25,501)*	*$ (306,012)*
Total Bridge Payments	***$ 109,553***	***$ 109,890***	***$ 110,229***	***$ 110,568***	***$ 110,908***	***$ 111,249***	***$ 111,591***	***$ 111,934***	***$ 112,277***	***$ 112,622***	***$ 112,967***	***$ 113,313***	***$ 1,337,058***
Burials	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 55,208***	***$ 662,500***
Total	***$ 164,761***	***$ 165,099***	***$ 165,437***	***$ 165,776***	***$ 166,117***	***$ 166,458***	***$ 166,799***	***$ 167,142***	***$ 167,486***	***$ 167,830***	***$ 168,175***	***$ 168,522***	***$ 1,999,558***

Italicized figures are projections

November 2026 CEC: CASH ASSISTANCE

Fund/Agency	Appropriation	Ledger Account	Appropriation Sequence Name	FY 2027 DHS	FY 2028 DHS
CASH ASSISTANCE					
SSI					
10.069	23130	651000	Aid to the Aged, Blind or Disabled	$ 16,566,383	$ 16,584,263
			Total General Revenue	$ 16,566,383	$ 16,584,263
			TOTAL - SSI	**$ 16,566,383**	**$ 16,584,263**
TANF/RIW					
10.069	23134	651000	FIP/TANF - Regular	$ 20,219,866	$ 18,868,600
10.069	23435	651000	Catastrophic Aid	$ 200	$ 200
10.069	23137	651000	RIPTA Transportation Benefit	$ 283,739	$ 283,739
			TOTAL FF- TANF/RIW	**$ 20,503,805**	**$ 19,152,539**
			TOTAL ALL FUNDS- TANF/RIW	**$ 20,503,805**	**$ 19,152,539**
CHILD CARE					
10.069	23131	651000	Child Care - Non M.O.E.	$ 30,000	$ 30,000
10.069	23132	651000	Child Care	$ 5,321,126	$ 5,321,126
10.069	23133	651000	Child Care - Matching	$ 4,530,270	$ 4,433,095
			TOTAL GR- CHILD CARE	**$ 9,881,396**	**$ 9,784,221**
10.069	23142	651000	Child Care Mandatory (CCDF)	$ 6,633,774	$ 6,633,774
10.069	23143	651000	Child Care Matching (CCDF)	$ 6,054,473	$ 6,054,473
10.069	23139	651000	Child Care Development Block Grant (DISC)	$ 11,000,000	$ 11,000,000
10.069	23136	651000	Child Care - TANF Funds	$ 36,450,005	$ 37,661,370
			TOTAL FF- CHILD CARE	**$ 60,138,252**	**$ 61,349,617**
			TOTAL ALL FUNDS- CHILD CARE	**$ 70,019,648**	**$ 71,133,838**
GENERAL PUBLIC ASSISTANCE					
10.069	23146	651000	General Public Assistance (CEC Only)	$ 1,990,951	$ 1,990,951
			TOTAL GR- GPA CEC	**$ 1,990,951**	**$ 1,990,951**
			GRAND TOTAL GR- CEC CASH	**$ 28,438,730**	**$ 28,359,435**
			GRAND TOTAL FF- CEC CASH	**$ 80,642,057**	**$ 80,502,156**
			GRAND TOTAL AF- CEC CASH	**$ 109,080,787**	**$ 108,861,591**