



November 2025 Caseload Estimating Conference

RI Department of Human Services
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Caseload Testimony

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November 2025 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 denoting the start of a question and response is highlighted throughout the document.

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Update On Cybersecurity Breach

Question: Please provide an update related to the RI Bridges data breach including, but not limited to:

- a. The effect on the normal cycle of redeterminations including;
 - i. How backlogs are paced over the remaining months.
 - ii. Impacts to costs
 - iii. Any discrepancies or outliers in reported data provided to Conferees

- b. The effect on cash assistance programs including;
 - i. Including how backlogs are paced over the remaining months
 - ii. Impacts to costs
 - iii. Any discrepancies or outliers in reported data provided to Conferees

Answer: Please see narrative below.

System Recovery and Operational Resiliency

Following the cybersecurity incident, DHS transitioned quickly to paper-based processing and manual workarounds to ensure benefit continuity for customers. With the system now fully restored, DHS resumed prioritizing the efficient and timely delivery of public benefits.

The Rhode Island Department of Human Services (DHS) demonstrated strong operational resiliency due to consistent improvement efforts over the past year. Initiatives such as Technology Adoption Days, IVR enhancements, and SNAP Connect provided the flexibility needed to pivot effectively during the breach and maintain service delivery.

As system stability returned, DHS continued expanding self-service capabilities, including hands-on Customer Portal assistance on Wednesdays. These sessions helped customers navigate online tools more confidently, reducing dependency on paper-based processes.

The SNAP Connect pilot, launched in April for Pawtucket residents, operated successfully. SNAP Connect allows customers to complete interviews or renewals at their convenience, strengthening DHS's commitment to accessibility and efficiency.

In June, the SNAP Connect process expanded beyond the Pawtucket catchment area to include residents in Warwick and Woonsocket. In September, SNAP Connect expanded to include Wakefield and Middletown, and by the end of October, DHS will have extended the service to Providence, achieving full operational integration of SNAP Connect statewide.

This initiative, along with other system enhancements, collectively aims to improve customer service by reducing abandonment rates, promoting one-touch processing, and achieving an average wait time of 30 minutes or less across all queues. The average wait time for an interview is currently just under seven minutes. DHS remains committed to excellence in service delivery through optimized processes, workforce training, and innovative technological solutions.

DHS continues to monitor system performance and remains committed to transparency and continuous improvement.

Additional information on SNAP Connect is available at <https://dhs.ri.gov/SNAPconnect>.

Effect on Redeterminations (Renewals)

The cybersecurity breach temporarily disrupted system operations, requiring DHS to implement a paper-based processing model and redistribute scheduled redeterminations to maintain compliance and workload balance. The totals below were reported in the last caseload update, and as of this reporting there are no remaining backlogs resulting from the disruption.

SNAP Renewals

- **Redistributed Cases:**
 - December 2024 & January 2025 cohorts (5,773 total) moved to February 2025
 - February 2025 cohort (4,939 total) redistributed across March–May
- **Resulting Monthly Caseloads:**
 - February: 5,773 | March: 6,464 | April: 6,772 | May: 5,509
- **Current Monthly Caseload:** 3,932

RI Works (RIW) Renewals

- **Redistributed Cases:**
 - December 2024 & January 2025 cohorts (223 total) moved to February
 - February 2025 cohort (146 total) redistributed across March–May
- **Monthly Caseloads:**
 - February: 223 | March: 327 | April: 349 | May: 326
- **Current Monthly Caseload:** 229

Child Care Assistance Program (CCAP) Renewals

- **Redistributed Cases:**
 - December 2024–January 2025 cohort (1,053 total) moved to February
 - February 2025 cohort (435 total) redistributed across March–May
- **Monthly Caseloads:**
 - March: 1,017 | April: 660 | May: 719
- **Current Monthly Caseload:** 487

This pacing strategy enabled DHS to remain compliant with federal redetermination timelines and flatten volume fluctuations. No additional carryover into June occurred.

Caseload Processing Averages

Following the restoration of RIBridges and ongoing operational enhancements, DHS improved average processing times across all programs compared to pre-breach reporting (November 2024).

Program	Federal Timeliness Standard	Average Days (Post-Restoration)
Expedited SNAP	7 Days	8
Non-Expedited SNAP	30 Days	12.5
Cash Assistance (RIW/GPA)	30 Days	14
Medicaid MAGI	30 Days	15
Complex Medical	45 Days	14
Long Term Care (LTSS)	90 Days	63

Discrepancies or Outliers in Reported Data

During the outage, manual paper processing caused short-term reporting delays and minor reconciliation variances.

- **RIW Supportive Services payments** for the second half of December benefits were issued on EBT cards on January 24, 2025, rather than as paper checks.
- Due to authorization timing and month-end cutoffs, those payments were not reflected in January financial reports but were fully reconciled in February.
- Following this installment, payments returned to standard check issuance.
- Despite the transition, DHS maintained compliance with federal timeliness standards for expedited SNAP and standard eligibility determinations.

Data integrity continued improving as full system automation resumed and manual backlog entries were cleared.

Effect on Cash Assistance Programs (RIW, GPA, SSP)

Cash assistance programs, including RI Works and GPA, continued uninterrupted under the temporary paper model.

- RIW redeterminations were redistributed consistent with SNAP and CCAP pacing.
- GPA processing continued on schedule without redistribution.
- All benefit payments across SNAP, RIW, and CCAP were issued on time, maintaining compliance with federal standards.
- CCAP payments were based on enrollment for 10 weeks (five batch payments), resulting in an estimated temporary increase of approximately \$1.4 million in expenditures.

Backlog Pacing and Resolution

The structured redistribution plan effectively mitigated the backlog by spreading workloads from February through May 2025. DHS projected that all backlogs would be cleared by the end of May 2025, with no significant surges or carryover into June. Those projections proved accurate, and regular monthly caseloads have since resumed.

DHS continues to monitor system performance and remains committed to transparency and continuous improvement.

Federal Changes Impact:

Question: Please provide information related to current and anticipated federal changes and programmatic impacts including;

1. Layoffs and Office closures related to the Department of Health and Human Services (HHS), Administration for Children and Families (ACF), and Food and Nutrition Services (FNS)

Answer: Please see narrative below.

DHS actively monitors federal changes through the HHS Federal Policy and Impact Monitoring and Assessment Initiative, coordinated by the Executive Office of Health and Human Services. This structure allows for cross-agency tracking of anticipated federal policy shifts affecting non-Medicaid programs.

Federal staffing reductions (furloughs) at HHS/ACF/FNS did not come to us as formal “layoff/closure” notices, but shutdown-driven staff shortages at federal agencies delayed awards and routine processing, which is the key operational impact we are experiencing downstream.

Modernization efforts—including SNAP Connect, Technology Adoption Days, and expanded self-service options—are key parts of the agency’s strategy to enhance accessibility, improve operational resilience, and respond to shifting federal dynamics.

No DHS layoffs or office closures have been implemented. DHS instead paused overtime, tightened discretionary purchasing, and increased cash-flow monitoring while maintaining operations.

Rhode Island Works (RIW) Program

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 TANF's 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 meet 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 includes assistance with job training, adult education and obtaining employment at livable wages
- **Food Assistance** is provided by 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 **health care** 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.

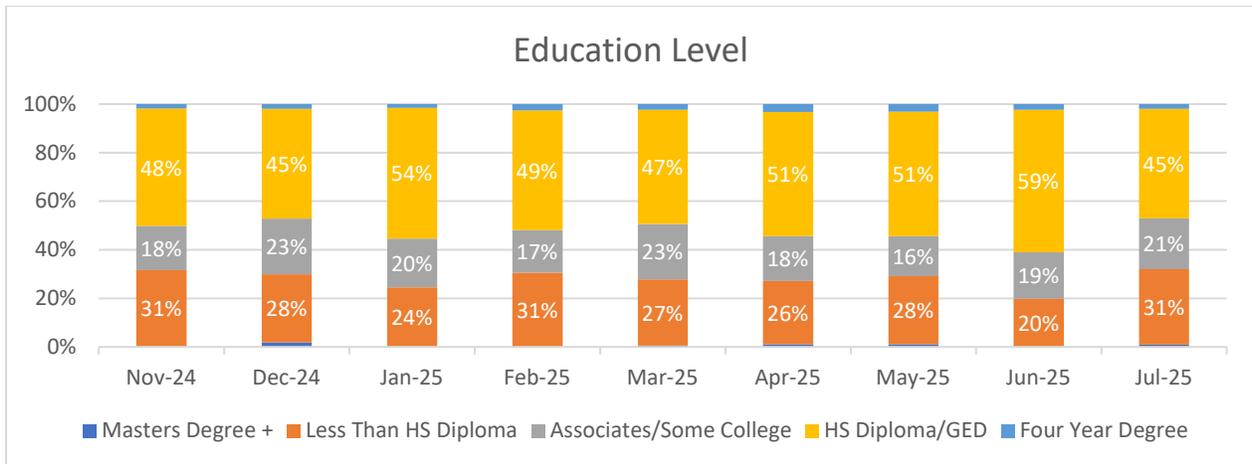
Profile of RI Works

Household Breakdown	
Households with 1 parent	68.6%
Households with 2 parents	5.4%
Households with child-only cases	26%

Race and Ethnicity	
American Indian or Alaskan Native, Non-Hispanic	1.38%
Asian, Non-Hispanic	0.98%
Black or African American, Non-Hispanic	22.19%
Native Hawaiian or Other Pacific Islander, Non-Hispanic	0.23%
White, Non-Hispanic	28.89%
Hispanic, including Mexican, Puerto Rican, and Cuban	22.44%
Unable to Determine the Ethnicity or Race	23.89%

Recipients per Household	
1 individual	18.44%
2 individuals	36.93%
3 individuals	24.83%
4+ individuals	19.79%

Education Levels	Self-Reported Education Levels for Adults	
	Less Than 8th Grade	2%
	8th Grade	2%
	9th Grade	5%
	10th Grade	9%
	11th Grade	13%
	12th Grade or GED Completed	45%
	Some College, Not Graduated	17%
	Two Year Degree	3%
	Four Year Degree	2%
	Post Four Year Degree	1%
	Unknown	1%



City/Town	City/Town	Cases	Individuals
	Barrington		16
Bristol		21	52
Burrillville		25	63
Central Falls		158	411
Charlestown		3	8
Coventry		45	104
Cranston		173	420
Cumberland		48	118
East Greenwich		13	27
East Providence		123	298
Exeter		4	11
Foster		4	11
Glocester		5	9
Hopkinton		6	14
Jamestown		3	8
Johnston		65	163
Lincoln		31	72
Little Compton		1	2
Middletown		50	143
Narragansett		5	14
Newport		121	344
North Kingstown		37	101
North Providence		77	186
North Smithfield		13	32
Pawtucket		500	1267
Portsmouth		15	44
Providence		1426	3729

City/Town	Cases	Individuals
Scituate	3	6
Smithfield	19	57
South Kingstown	15	40
Tiverton	19	51
Warren	22	50
Warwick	113	288
West Greenwich	2	3
West Warwick	125	319
Westerly	20	50
Woonsocket	450	1191
Unknown	14	30
Total	3,795	9,803

City/Town	2021	2022	2023	2024	2025
Barrington	0	0	2	3	5
Bristol	0	0	1	2	3
Burrillville	0	0	1	5	8
Central Falls	29	52	21	32	33
Charlestown	0	0	0	0	0
Coventry	0	4	2	6	6
Cranston	7	15	11	31	32
Cumberland	7	15	6	10	8
East Greenwich	7	15	0	0	0
East Providence	7	15	15	24	27
Exeter	7	15	0	0	0
Foster	0	0	1	3	2
Glocester	0	2	0	0	0
Hopkinton	0	2	1	2	2
Jamestown	0	8	0	0	0
Johnston	13	29	6	9	12
Lincoln	20	31	1	7	6
Little Compton	0	0	1	1	1
Middletown	23	19	6	18	16
Narragansett	0	0	0	0	1

Hardships City/Town Yr	City/Town	2021	2022	2023	2024	2025
	Newport	62	95	23	41	44
	North Kingstown	7	9	4	9	13
	North Providence	2	23	9	18	24
	North Smithfield	0	0	1	1	2
	Pawtucket	105	132	33	88	101
	Portsmouth	0	1	2	4	5
	Providence	524	537	141	320	346
	Richmond	0	0	0	0	0
	Scituate	0	11	3	3	3
	Smithfield	4	11	3	7	8
	South Kingstown	0	2	1	2	4
	Tiverton	0	0	4	7	6
	Warren	0	0	3	4	5
	Warwick	42	32	11	21	24
	West Greenwich	0	3	0	0	0
	West Warwick	4	24	5	25	28
	Westerly	0	0	1	1	1
	Woonsocket	74	170	48	95	99
	Other/Multiple City	2	2	0	0	0
Total	946	1,274	367	800	798	

Question: 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.

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

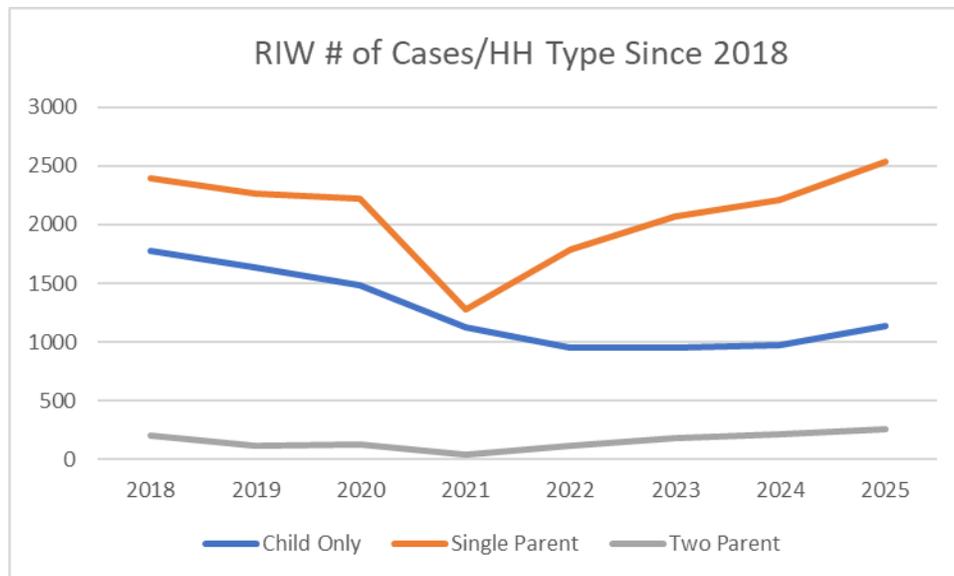
Answer: Please see charts above and below.

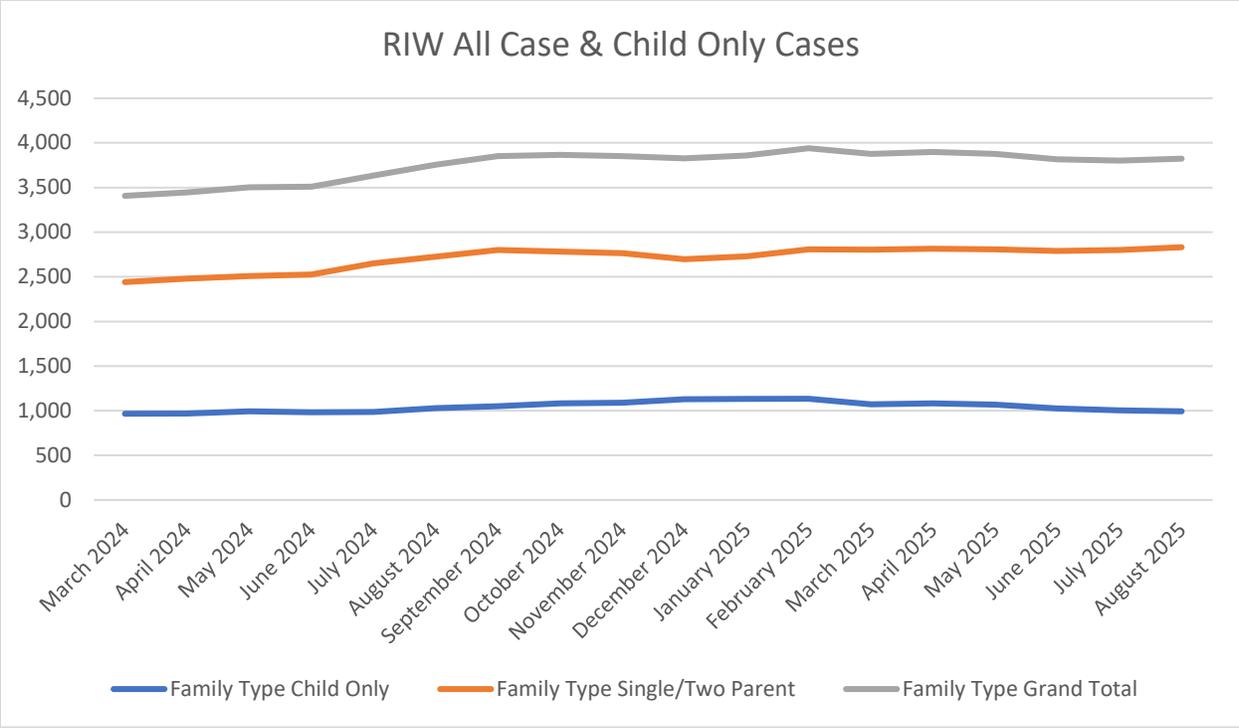
Family Type		Months on RI Works				Total
		0-24	25-48	49-60	>60	
	Single-Parent	1120	672	613	218	2623
	Two-Parent	161	34	10	3	208
	Total	1281	706	623	221	2831

Duration of Benefits	Year	Median Duration of Benefits
	2021	44
	2022	36
	2023	36
	2024	42
	2025	27

Question: How many child-only cases are included in the estimate for FY 2026 and FY 2027? How many families receive the payment(s)? Please include data for the last five years.

Answer: Currently the child only cases are at 26.1 percent for a total of 993 cases. Please see graphs below.





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

a. Exemption from employment planning

Answer: 239 cases are **currently active with exemptions**

Exemptions	Yearly Data
2020	300
2021	121
2022	147
2023	155
2024	234
2025	239

b. Being between plans

Answer: 42 cases are **currently active without a plan***

*System improvement active in October 2024 to address.

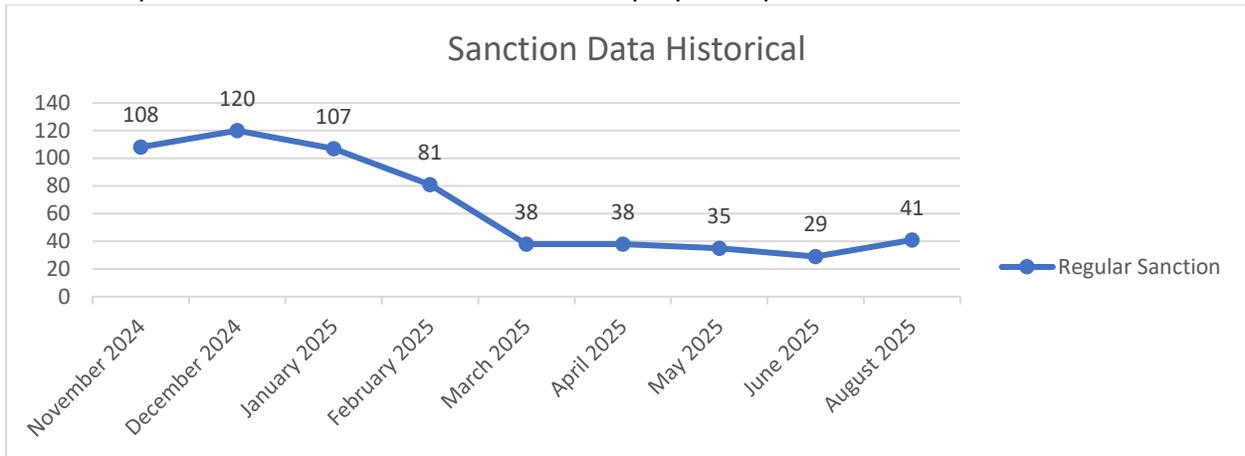
Between Plans	Yearly Data
2020	78
2021	95
2022	66
2023	101
2024	26
2025	42

c. Sanction—by month, the number of parents sanctioned for not complying with work requirements in FY2025 and FY2026 – please see chart below.

Answer: Please see graphs and charts below.

- From July 1, 2024, state law removed the full family sanction. The result is the case will remain open with a decrease in the monthly benefit amount based. 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. The number of sanction cases have not increased above the level prior to the change.
- 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 last year was to send out system generated notices earlier to inform parents the employment plan was expiring and providing direction to remedy. Programmatically we having 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.



RI Works Trends

The Rhode Island Works program remains stable with a small increase in SFY25. Due to changes in the RI Works statute last year, additional increases to RI works are expected to continue for SFY 2026 and SFY 2027 but at a slower rate.

The expectation is that the caseload will continue to increase as additional families learn they are eligible due to the benefit increase of 20%, increased Earned Income Disregard, and the removal of the Full Family Sanction. The Department estimates the caseload will have a slight increase of .2% per month for the next 21 months; this is based on actual expenditures over the past 12 months.

RI Works families face multiple barriers to stabilization, usually for multiple generations. The result is chronic trauma needing additional specialized services to help the family stabilize and become self-sufficient. Two of the new providers were onboarded via last year's RFP for RI Works. One adding additional behavioral health support to address the specific barriers associated with chronic trauma experienced by deep poverty and insecurities. This agency has been introducing their contracted services to each field office via in-person meetings over the last nine months. The goal is to target cases that have not exited the program to employment due to behavioral health concerns. The second agency specializes in financial literacy with a targeted audience of very low income. The agency has success with enrolling our population in classes, developing small business plans, credit repair and protection. The feedback from participants has been overwhelmingly positive.

RI Works families have reported significant barriers related to housing security. DHS has implemented a Housing Stability Pilot (HSP) that helps prevent eviction and helps resolve housing issues that have caused the family to be separated or resolve homelessness. The HSP is implemented via the contracted providers for RI Works. We have continued to see this program

grow with increased application packets being submitted by over 30 agencies throughout the state.

RI Works Recent Legislative Changes

RI Works had three (3) legislative changes that had an effective date of July 1, 2024. The monthly benefit amount was increased by 20 percent, the Earned Income Disregard was increased from \$300 to \$525, and the Full Family Sanction was removed. Due to the need to update the electronic system, RIBridges, to implement the changes, 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 the months of July and August, 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. The increases allow more families to access the program and receive a higher benefit amount. Cases with a sanction status continue to appear stable since the removal of the full family sanction.

-see next page-

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

Answer: As of September 2025, DHS reported 1,480 pending applications across all programs, with the majority awaiting state action. This represents a seven percent decrease from the prior reporting period and a significant improvement from October 2024, when more than 6,500 SNAP cases were pending. The largest concentrations of overdue applications remain in Medicaid Complex (416), Undetermined Medical (376), Expedited SNAP (152), and LTSS (152).

Field Office Operations

Field operations continue to evolve under the DHS modernization and realignment strategy.

- The Holden Street Regional Office remains the primary walk-in location, featuring expanded staffing and a Document Scanning Center to streamline intake.
- The Shepard Building continues its appointment-only model, offering structured scheduling, reduced wait times, and dedicated Processing Wednesdays (now Technology Adoption Days) for focused casework. Between August 3 and August 31, 2025, DHS staff completed an average of 356 tasks weekly during these dedicated processing days

These adjustments have enabled more consistent case processing and improved access to services while maintaining compliance with federal timeliness standards.

Staffing Levels and Challenges

Between July 7 and September 5, 2025, DHS added a net gain of two filled positions, with 27 total hiring actions during the reporting period (seven new hires and 20 lateral or promotional appointments). In total, DHS has completed 124 hires in 2025, including 44 new staff and 81 lateral or promotional placements.

- **Current FTE Snapshot:**
 - 708 employees on payroll (of 779 total authorized positions).
 - 82 staff members on continuous or intermittent medical leave.
 - 64 of 71 vacant positions are in active recruitment.

The Department continues to pilot and strengthen its light duty transition initiative with DOA's Disability Management Unit to assist staff returning from medical leave. Despite absences, field operations remain stable, with no office closures or service interruptions.

Training investments have also strengthened workforce capacity. Since early 2025, DHS delivered over 105 hours of in-person training, with more than 11,900 course completions recorded in the Rhode Island Learning Center, covering SNAP, Medicaid, CRM, fraud prevention, and customer service modules.

Call Center and Customer Contact

Call Center performance has continued to improve, with an average wait time of 20 minutes to speak with a staff member—down from 26 minutes earlier in the year.

- 49 dedicated Call Center staff manage inbound customer calls.
- 38 additional Eligibility Technicians support the SNAP Connect interview lines, fielding an average of 14 calls per day with a 24-minute average handle time, including time spent taking action in the worker portal

The SNAP Connect initiative remains a key driver of performance improvement, allowing customers to complete interviews at their convenience and reducing abandonment rates. The average wait time for an interview through SNAP Connect remains under seven minutes, and the program has expanded to Warwick, Woonsocket, Wakefield, Middletown, and will reach Providence by the end of October 2025.

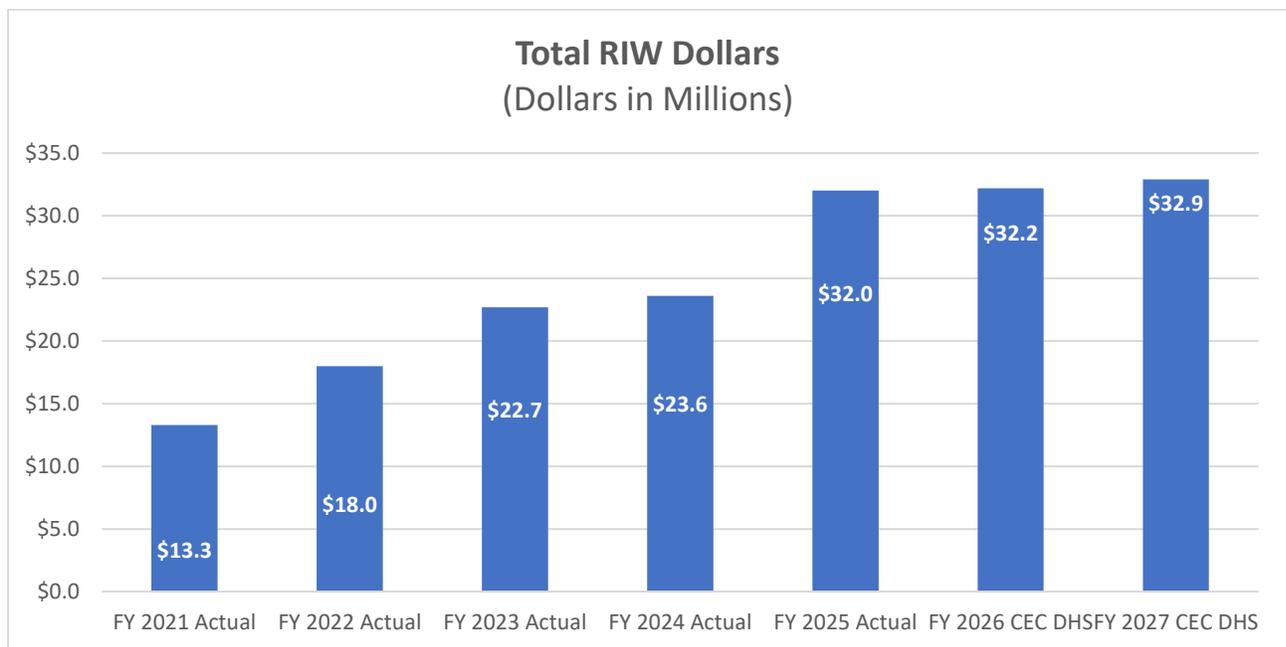
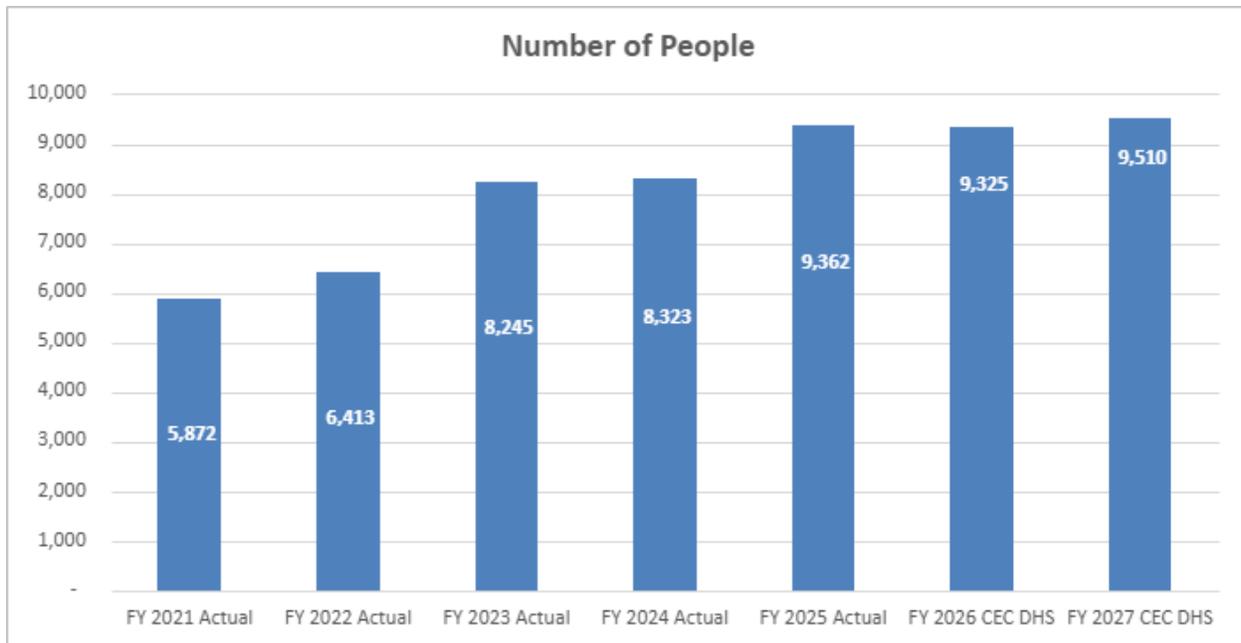
Impact on Enrollment and Service Delivery

While staff vacancies and leave balances continue to present operational challenges, DHS has effectively mitigated enrollment impacts through its hybrid service delivery model, expanded digital tools, and restructured field operations.

- Application timeliness has stabilized across programs, with the average processing time meeting or nearing federal standards in all categories.
- DHS's continued emphasis on Technology Adoption Days, SNAP Connect, and workforce cross-training has enabled sustained improvements in productivity and customer access.

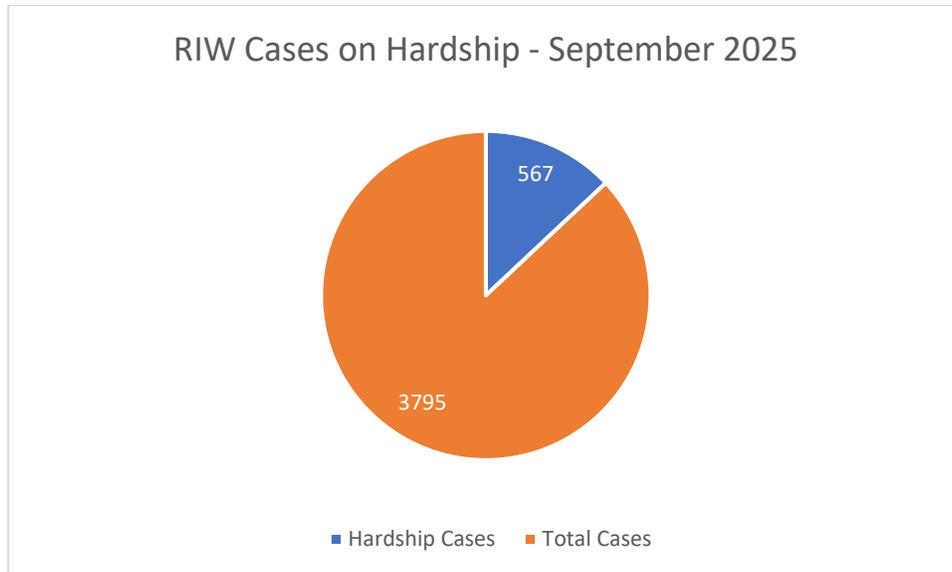
DHS continues to monitor staffing, caseloads, and field operations closely and remains committed to transparency and continuous improvement in service delivery.

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 uptick in August caseload, but the increase since then has once again been marginal. The DHS November Caseload estimate for SFY26 uses a .2 percent increase month over month. The SFY27 projection continues the same .2 percent. Community agencies have partnered with DHS to provide support to families applying for RI works, which is a factor in the increase in growth rates.



Hardships Extensions

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 14.94 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.

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.

Question: Please provide the “all families” and “two-parent families” work participation rate for FY 2026, along with a work participation rate target. Please include data for the past five years.

Answer:

- FY 2020 Required all families: Required 0.0 percent (met 6.8 percent)
Required 2-parent families: Required 27.6 percent (not met 7.3 percent)
- FY 2021 Required all families: Required 0.0 percent (met 6.5 percent)
Required 2-parent families: Required 26.3 percent (not met 8.0 percent)
- FY 2022 Required all families: Required 0.0 percent (met 7.6 percent)
Required 2-parent families: Required 15.2 percent (not met 8.6 percent)
- FY 2023 Required all families: Required 0.0 percent (met 11.6).
Required 2-parent families: Required 14.5 percent (not met 12.9 percent)
- FY 2024 required all families: Required 0.0 percent (met 11.3)
Required 2-parent families: Required 19.3 percent (met 19.5)

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 FFY 2024 Rhode Island met the two-parent families required WPR for the first time.

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

Answer: Through discussions with the Administration for Children and Families (ACF), DHS agreed to the reduced TANF block grant by \$865,532 to resolve all prior work participation rate penalties per an ACF letter dated December 5, 2024.

ACF confirmed there are no pending penalties.

2025 & 2026 TANF Budget								
Line Seq	Appropriation	Agency	LIS Name	FY25 Final Enacted Budget	FY25 Actual Expenditures	FY26 Enacted Budget	FY26 Expenditures as of 9/30/25 (WORKDAY)	Description of the Services Funded by TANF
2025105	26015	079	TANF/EA-CM Program-Federal Share	868,375	1,429,751	885,164	305,802	DCYF for TANF eligible youth to be served
2075106	26083	079	TANF/EA-CW Program-Federal Share	6,637,962	8,189,287	6,903,696	1,907,506	DCYF for TANF eligible youth to be served
2075145	26084	079	TANF/SSBG Grant	300,000	421,036	300,000	-	DCYF for TANF eligible youth to be served
2075148	26085	079	TANF - HCBS	1,072,692	1,301,144	1,070,174	-	DCYF for TANF eligible youth to be served
2075150	26102	079	TANF - SSBG Transfer	2,534,033	1,494,518	2,888,732	-	DCYF for TANF eligible youth to be served
2075155	26130	079	TANF - DCYF Hoteling	985,765	(1,003,913)	640,943	-	DCYF Hoteling for TANF eligible youth to be served
2075156	26134	079	TANF - DCYF Hoteling SSBG Transfer	5,765,967	308,587	5,411,268	-	DCYF Hoteling for TANF eligible youth to be served
2170182	24081	075	DHS Home Visiting Coop	200,000	36,421	200,000	-	RIDOH for RIW parents in the Family Visiting
2255108	23225	069	Early Head Start Supplemental Support	3,001,200	2,966,686	3,001,200	539	Funding of head start care with TANF funds
2275116	23080	069	FIP CM and Work Programs	11,736,550	12,764,313	14,106,000	950,089	Contracted vendors engaging in direct services for RIW parents
2275121	23081	069	FIP Administration	6,129,322	5,329,587	7,002,946	2,158,380	Administrative funds for DHS
2275177	23082	069	TANF - Subsidized Employment Enhancement	200,000	134,148	200,000	-	Contract to provide services to homeless families
2275186	23083	069	UHIP - TANF Federal Allocation	763,412	648,707	49,525	(31,738)	Administrative funds for UHIP
2275202	23084	069	UHIP - Non lapd TANF Federal	273,393	47,160	-	-	Administrative funds for UHIP
2400101	23134	069	FIP/TANF - Regular	34,197,226	33,674,970	37,063,000	8,920,570	Cost for TANF/RIW benefits to families
2400107	23135	069	AFDC Catastrophic Aid	1,000	600	1,200	-	Costs for families who have experienced a catastrophic event like fire or flood
2400112	23136	069	Child Care - TANF Funds	38,859,429	36,574,507	45,952,869	1,695,768	Funding of low income child care with TANF funds
2400114	23137	069	RIPTA Transportation Benefit	511,093	549,738	536,064	-	Funding of bus passes for RIW parents
2725162	32085	072	Project Opportunity	1,350,000	1,353,238	1,350,000	-	Adult Education (ABE, ESL, GED)
Total				\$ 115,387,419	\$ 106,220,486	\$ 127,562,781	\$ 15,906,915	

Question: Please update FY2026 and FY2027 TANF block grant estimates. Include the balance of any unspent funds from prior years and report any plans for its use.

Answer: The TANF carryforward amount is projected to continue to decrease as a result of increased spending and investments made beginning in FY24. The outyears’ forecast is in line with previous testimony and incorporate revised RIW contract spending and November revised estimates for RIW and CCAP caseload and increases in projected contracts supporting the TANF population. For FY26 and FY27, TANF is projected to support CCAP caseload with \$41.3 million and \$48.4 million, respectively.

Fiscal Year	Awarded	Expensed	Planned Expenses	Cumulative Carry Forward
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	\$ 72,545,481	\$ -	\$ 98,151,719
SFY 2024	\$93,842,484	\$ 83,406,354	\$ -	\$ 108,587,849
SFY 2025	\$94,708,016	\$ 106,220,486	\$ -	\$ 97,075,379
SFY 2026	\$94,700,000	\$ 15,906,915	\$ 106,917,436	\$ 68,951,028
SFY 2027	\$94,700,000	\$ -	\$ 128,645,418	\$ 35,005,611
SFY 2028	\$94,700,000	\$ -	\$ 111,299,226	\$ 18,406,385
SFY 2029	\$94,700,000	\$ -	\$ 111,299,226	\$ 1,807,159

Question: Transportation: Please provide the basis for the agency projection for transportation costs? What is the utilization for bus passes and how has it changed in the last five years?

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. We have not seen a fluctuation in the 5.5 percent of persons on RI Works are currently utilizing their bus pass option from MTM for the last couple of years. DHS has seen no change and is continuing to project a usage at 5.5 percent for the remainder of FY 2026. Trends over the past five years have significantly dropped the transportation costs, both the increased virtual training with virtual participation hours. The RIPTA voucher program will be largely for ADA and expanded paratransit, this population is unlikely to affect the RI Works transportation costs. There are multiple programs offered by other programs that support shared populations.

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.

[-see next page-](#)

Question: 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 \$13.4M in 2024.

State Costs: \$60,378,124

In-kind: \$15,317,566

For FY 2020 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. The grandfathering has ended. This significantly reduces the amount of allowable expenditures and MOE allowed from DCYF Residential. DHS is working on utilizing other avenues to collect the MOE.

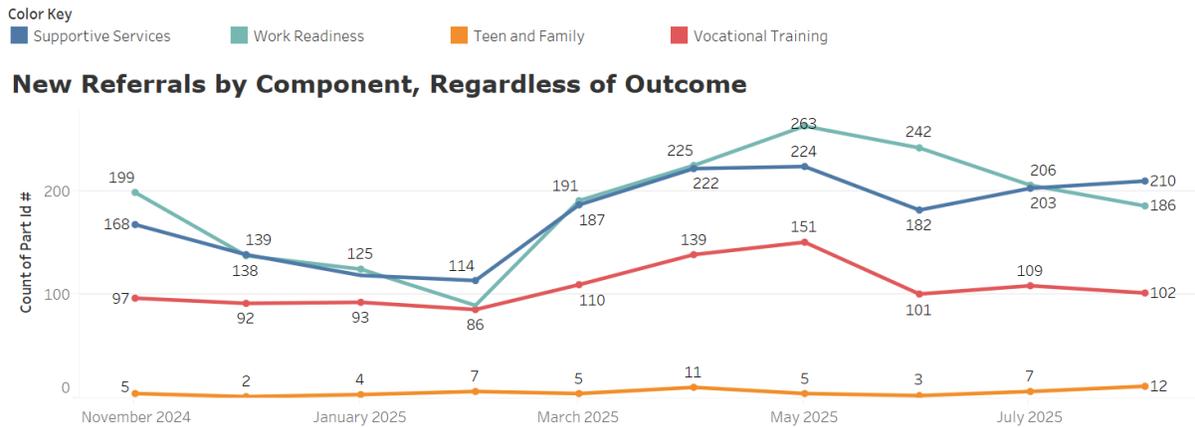
	FFY 2021 Reported to ACF	FFY 2022 Reported to ACF	FFY 2023 Reported to ACF	FFY 2024 Reported to ACF	FFY 2025 Projected to ACF
RIW Admin - DHS	\$4,740,191	\$3,855,901	\$4,829,497	\$5,289,294	\$5,000,000
Child Care MOE DHS	\$5,351,126	\$5,351,126	\$5,321,207	\$5,321,126	\$4,000,000
Emergency Assistance - DCYF	\$1,635,450	\$1,131,567	\$1,734,050	\$1,817,429	\$1,800,000
DCYF Other	\$16,084,231	\$15,774,162	\$25,201,254	\$18,272,718	\$18,000,000
DEFRA (Child Support Pass-Thru)	\$208,803	\$217,814	\$232,095	\$280,233	\$280,000
RIDE Adult Ed	\$1,050,000	\$1,050,000	\$1,151,165	\$1,131,644	\$1,100,000
CAP Agencies (Leg. Grants)	\$287,820	\$210,180	\$210,960	\$226,200	\$220,000
Head Start	\$1,190,000	\$1,190,000	\$1,188,618	\$1,190,000	\$1,190,000
SSI	\$2,472,240	\$2,228,503	\$2,209,901	\$2,227,599	\$2,200,000
GWB-DLT Youth Work Readiness	\$442,080	\$754,407	\$966,433	\$848,968	\$840,000
Earned Income Tax Credit	\$15,963,386	\$19,364,568	\$18,656,693	\$20,439,680	\$20,400,000
Property Tax Relief Program (Circuit Breaker)	\$120,234	\$121,851	\$164,945	\$150,108	\$120,000
DCYF Residential	\$2,982,641	\$4,174,996	\$3,624,546	\$5,163,737	\$5,000,000
Weatherization	\$6,979,035	\$5,159,377	\$7,284,662	\$7,954,370	\$7,900,000
Rhode Island Food Bank	\$3,218,941	\$2,900,173	\$3,537,371	\$940,955	\$900,000
Community Organizations (Listed Below)	\$2,338,768	\$2,172,515	\$2,242,561	\$2,387,124	\$2,346,000
OPC / Promise	\$0	\$4,389,791	\$4,138,215	\$4,141,348	\$0
Total	\$65,064,947	\$70,046,931	\$82,694,173	\$77,782,533	\$71,296,000

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

	FFY 2021 Reported to ACF	FFY 2022 Reported to ACF	FFY 2023 Reported to ACF	FFY 2024 Reported to ACF	FFY 2025 Projected to ACF
Roman Catholic Diocese of Providence	\$25,036	\$111,513	\$51,243	\$45,752	\$40,000
The Salvation Army	\$0	\$0	\$0	\$0	\$0
United Way of Rhode Island	\$310,145	\$0	\$284,688	\$302,587	\$300,000
Boys and Girls Club	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Rhode Island Foundation	\$480,709	\$466,077	\$236,913	\$327,311	\$300,000
SStarbirth	\$35,363	\$41,999	\$50,386	\$55,045	\$55,000
Crossroads	\$390,104	\$87,227	\$175,871	\$134,376	\$175,000
Dorcas International Institute	\$24,170	\$12,720	\$220,680	\$106,231	\$100,000
Non-Violence Institute	\$0	\$1,080	\$0	\$0	\$0
RI Coalition Against Domestic Violence	\$2,427	\$390,329	\$149,625	\$171,341	\$170,000
Com CAP	\$70,814	\$8,566	\$5,971	\$6,876	\$6,000
Genesis Center	\$0	\$53,004	\$67,184	\$237,605	\$200,000
Total	\$2,338,768	\$2,172,515	\$2,242,561	\$2,387,124	\$2,346,000

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. 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.

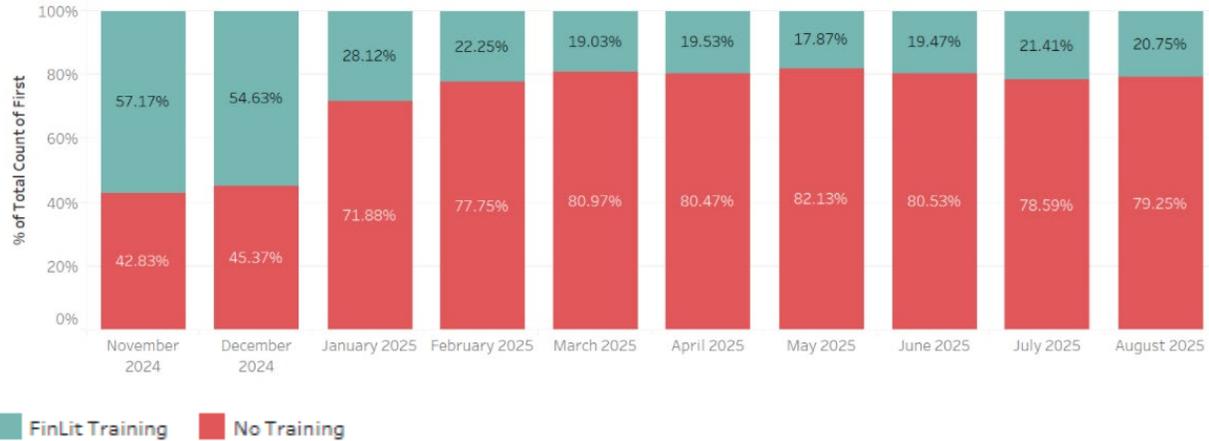
Additionally, as referenced, DHS has added a pilot across the larger supportive contracts to address housing instability through the Housing Stability Pilot (HSP). HSP is used to mitigate the effects of trauma and stress related to housing insecurity, allowing RI Works participants to focus on work readiness. 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 past contracts, two very important new or expanded services have been implemented:

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

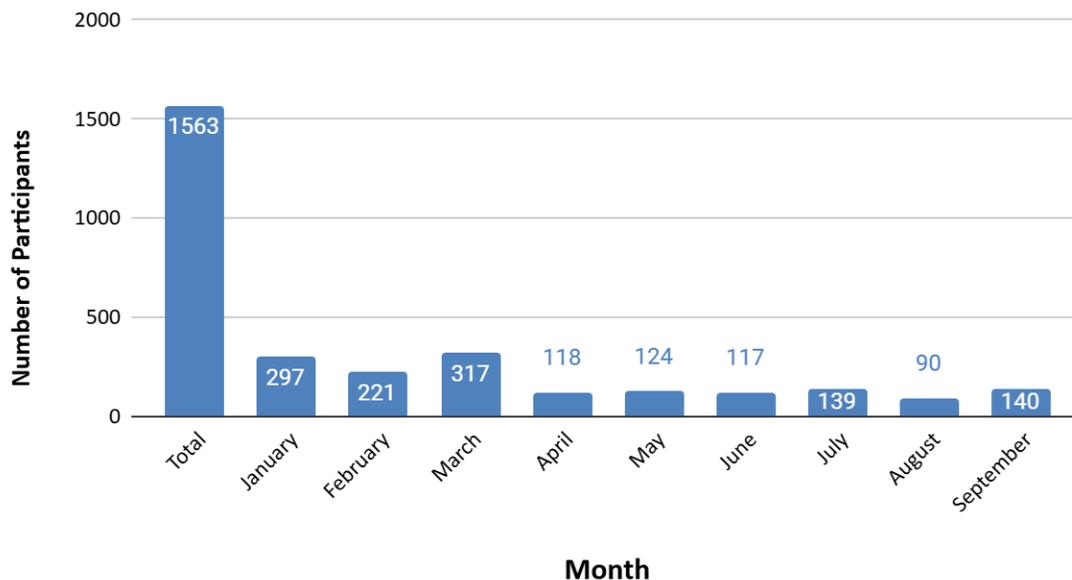
new financial literacy vendor so they may receive the specialized services. Currently, classes are offered by our primary providers and our new specialized provider, Sincere Multiserve. Parents who have attended this series have requested services for their children, in RI Works households. The agency will be piloting a program for adolescents, with referrals from the parent. The financial literacy classes will be after school and on weekends.

Financial Literacy: CCAP and Equus Participants



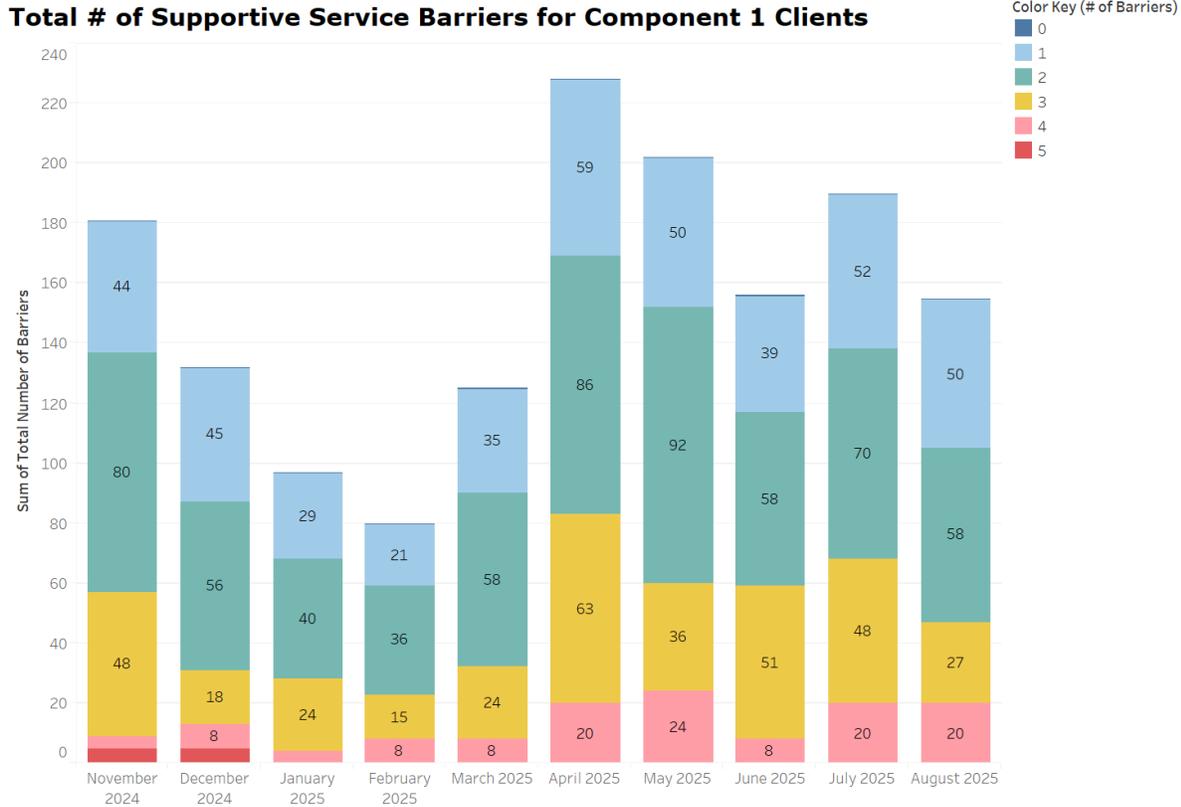
Sincere Multiservice Data

Smart Money Moves Participation by Month (Jan–Sept 2025)



- 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 Education Attainment
- Unaddressed Disabilities
- Substance Use Disorder



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

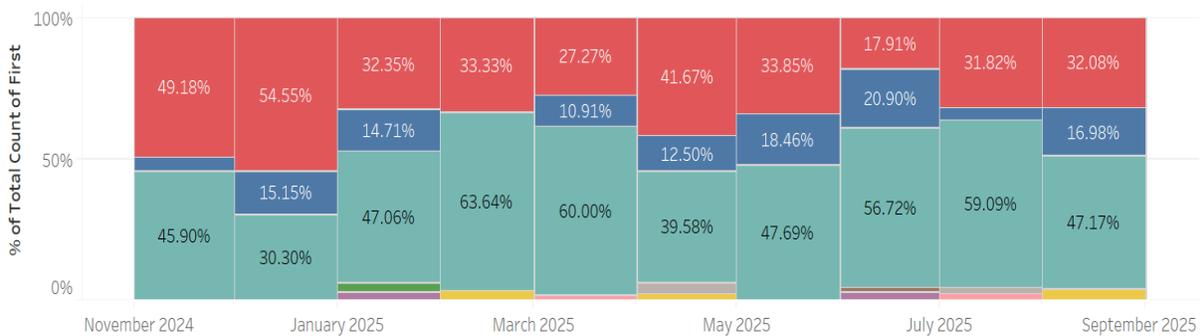
RI Works vendors prepare customers for employment by providing assistance with resumes and cover letters, interview skills, and counsel on appropriate workplace behavior. RI Works vendors also make referrals for customers to acquire appropriate attire for interviews and work. There are multiple work-readiness 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. 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, 616 parents have entered employment, and 51 participated in a work experience activity, including both subsidized and unsubsidized work experience. The average wage for these job placements was \$18.61 per hour. Thirty-three percent of job placements are for wages at, or over \$20 per hour. In the past year, 282 customers retained employment for at least six months, and 999 customers achieved the benchmark of earning over \$4,000 in the 5th quarter after the start of their employment plans, following WIOA standards. Vendors were paid more than \$370,150 in performance payments due to job retention. (Not all 5th quarter retention incentives have been paid yet due to delays in verification and billing). Additionally, in the past year, 113 participants have completed their Vocational Training Program. A total of 306 RI Works parents have participated in vocational training programs this past year.

Color Key

- <= 20 Hrs
- >= 30 Hrs
- 20 to 25
- 25.00
- 40.00
- Between 20-30 Hrs
- 10.00
- 20-38
- 32.00
- up to 20

Hours Breakdown of New Jobs Each Month - Stacked Column Chart



Question: 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:

Approximately 70% are Healthcare related, including LPN, C.N.A., Patient Care Tech, Phlebotomy, Medical Assistant, Dental Assistant, Billing and Coding, and Registered Nurse. The other 30% of industries include: Early childhood Education, Business Management, Graphic Design, Cosmetology, Massage Therapy, Culinary Arts, Computer Programming, and CDL Training.

Color Key

■ Under \$15/Hr
 ■ \$15 to \$20/hr
 ■ \$20 to \$25/hr
 ■ Above \$25/hr

Wage Breakdown of New Jobs Each Month - Counts



Federal Law Changes

ACF has confirmed they are moving forward with changes based on the Fiscal Responsibility Act detailed below.

Changes from the Fiscal Responsibility Act

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 exits.
 - b) Secondary School Diploma

1.a. The change to the caseload reduction credit (CRC) will alter the year of comparison from Federal FY 2005 to Federal FY 2015, planned effective date of October 1, 2025, with the report due by December 31, 2025. DHS will have 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 has predicted the single-parent WPR requirement will rise from zero to 11 percent after the FRA's implementation to the CRC.

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.

Child Care Assistance Program (CCAP)

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

- Promoting the healthy development and school readiness of Rhode Island’s children.
- Providing equal access to quality learning environments to all early learners.
- 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:

- **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.
- **Income-Based Eligibility:** Families earning up to 261% of the Federal Poverty Level (FPL) (~66% of State Median Income or \$69,557 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 (~76% of SMI or \$79,950 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 seven percent 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 now formally requires states to maintain this 7% cap, ensuring affordability and equity.

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 supports to:

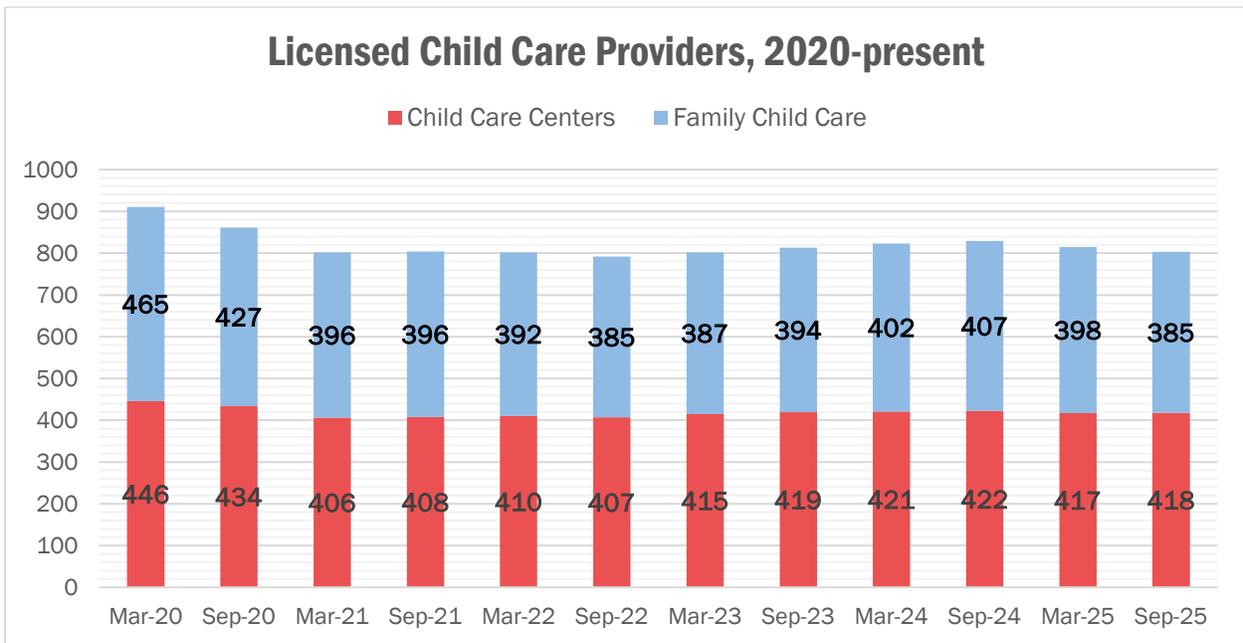
- Sustain small business child care providers;
- Strengthen the early educator workforce;
- Expand access to high-quality early learning for children and families.

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.

Question: 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.

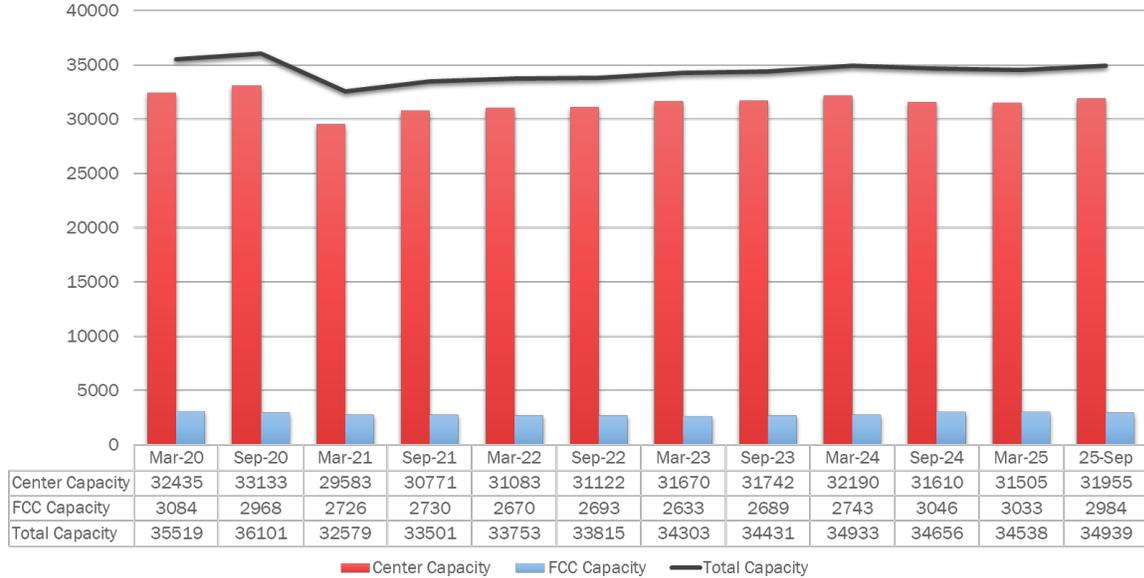
- a. Please provide the number of children enrolled in CCAP by age group, provider type, and star rating, including the newly separate infant category.
- b. Please provide updated data since the previous conference on the impact of DHS strategies to bolster FCCP seats including the most recent number of FCCPs considering expansion and future plans or strategies.
- c. Please provide any relevant updates regarding the Office of the Auditor General August 2025 audit finding on State of Rhode Island Child Care Provider Compliance with Health and Safety Standards.
- d. Please provide an update to the federal awards received or anticipated for activities in response to the COVID-19 PHE, or other stimulus funding, as well as any planned uses and how much of each award will be used for such activity. Please provide spend to date and available balance for each award by item (planned use).
- e. Please, if possible, provide a child to staff ratio.

Answer: See the narrative and tables below.



Since the previous testimony, DHS has maintained overall child care capacity. While Rhode Island gained one child care center and lost 13 family child care programs, the State experienced a net increase of approximately 400 seats. Further details on program openings and closures are provided later in this document.

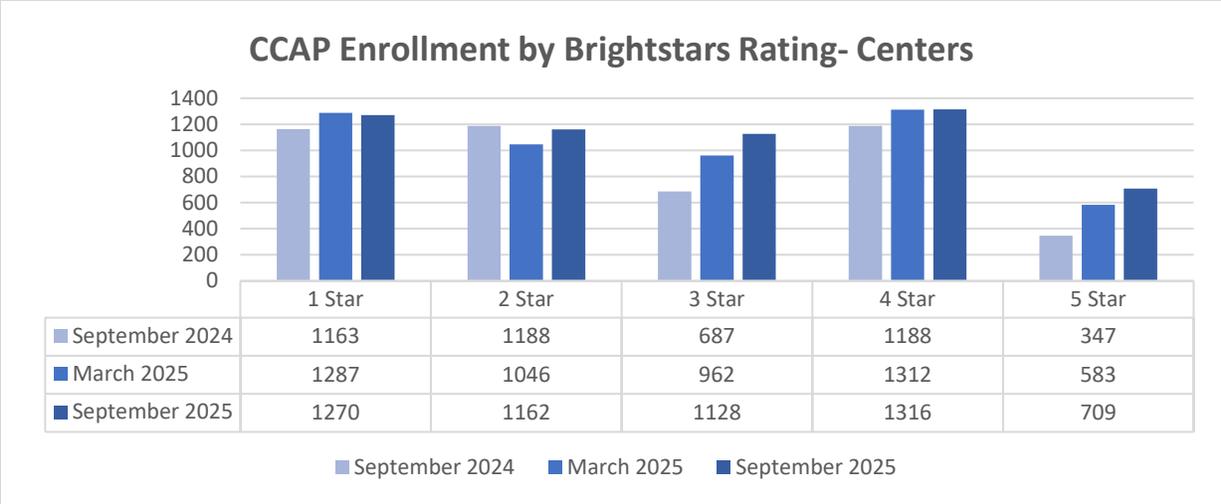
Child Care Capacity from March 2020 - present



In the charts below, CCAP enrollment is broken down by provider type (center and family child care) and age group (Infant/Toddler, Preschool and School-Age). The charts show that more than 45% of 7,391 CCAP participating children are enrolled in programs with high BrightStars quality ratings of 3, 4 or 5-stars. As the first chart shows, there are currently more CCAP-participating children enrolled in 4-star center-based programs than there are in 1, 2, or 3-star center-based programs. Not only is there an increase in CCAP enrollment over the last year of more than 1,000 children, but families are also enrolling children in higher quality programming. The graphs on the next page provide some examples of the increases in enrollment in quality programming. There are several trends in the data over the last year in both center-based care and family child care.

For centers, the trends we are seeing include:

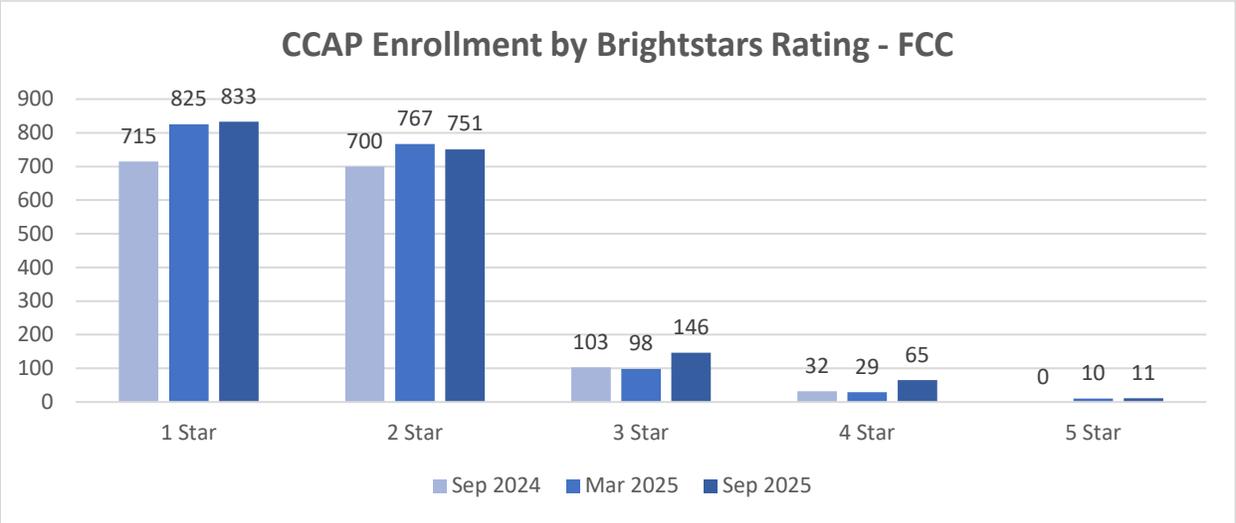
- Total CCAP enrollment increase of 22% (from 4,573 to 5,585).
- Enrollment in 5-star programs doubled in the last year (from 347 to 709)
- 4-star centers consistently had the highest enrollments all year.



For Family Child Care:.

- Overall enrollment increased from 1,550 to 1,806, which was a 16% increase over the last year.
- While 4-star and 5-star still represent a small number of enrollments, 4-star enrollment has nearly doubled (from 32 to 65) in the last year, and 5-star enrollment emerged over the last year, having zero for a number of years, and now 11.

Family Child Care - CCAP Enrollment by BrightStars Rating - September 2025						
Age Group	1 Star	2 Star	3 Star	4 Star	5 Star	TOTAL
Infant	234	152	36	19	2	443
Toddler	30	49	8	5	0	92
Preschoolers	343	314	61	29	7	754
School-Age	226	236	41	12	2	517
TOTAL	833	751	146	65	11	1806



DHS works closely with its training and technical assistance hub, the Center for Early Learning Professionals (CELP), to support applicants throughout the licensing process. Together, DHS and CELP have developed an easily accessible online orientation that outlines the steps and requirements to become a licensed provider, available on both the CELP and DHS websites.

Additionally, DHS has created a dedicated webpage to educate the public on how to open a family child care program or child care center. DHS also collaborates with local zoning boards to assist family child care providers seeking to expand their programs and advocates on their behalf in accordance with local zoning ordinances. This work will continue as needed to support providers and expand access to quality child care.

The chart below illustrates CCAP enrollment growth across all programs from September 2024 to September 2025, regardless of BrightStars rating, highlighting a notable increase in participation in high-quality programs. Overall CCAP enrollment rose by 17%, from 6,123 to 7,393 children. The most significant growth occurred in 5-Star programs, which increased by 52% (from 347 to 720 enrollments). Three-Star and 4-Star programs followed, with enrollment increases of 38% and 12%, respectively. Overall, enrollment in high-quality programs (BrightStars 3–5) grew by 30%, meaning 991 more children are now enrolled in the highest quality care available in Rhode Island. The chart also separates infant and toddler enrollment counts for 2025, which were combined in 2024.

CCAP Children Enrolled by Bright Stars Rating, Time and Age Category												
September 2024 to September 2025												
Brightstars Rating	1		2		3		4		5		Total	
Full Time	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025	2024	2025
Infants and Toddlers	438	--	506	--	196	--	246	--	57	--	1,443	--
Infants	--	98	--	91	--	58	--	38	--	28	--	313
Toddlers	--	348	--	323	--	190	--	174	--	101	--	1,136
Preschoolers	583	725	620	725	219	447	366	481	87	297	1,875	2,675
School-Age	306	584	207	437	34	377	171	400	10	134	728	1,932
¼ Time												
Infants and Toddlers	56	--	51	--	17	--	28	--	5	--	157	--
Infants	--	14	--	9	--	5	--	5	--	2	--	35
Toddlers	--	47	--	31	--	18	--	18	--	8	--	122
Preschoolers	142	93	100	98	73	43	118	77	48	63	481	374
School-Age	223	117	165	103	143	72	173	109	64	44	768	445
Half Time												
Infants and Toddlers	0	--	4	--	0	--	1	--	4	--	9	--
Infants	--	0	--	0	--	0	--	0	--	2	--	2

Toddlers	--	2	--	1	--	2	--	0	--	7	--	12
Preschoolers	45	27	78	37	31	28	50	25	40	26	244	143
School-Age	80	36	130	47	70	27	56	49	25	5	361	164
¼ Time												
Infants and Toddlers	0	--	0	--	0	--	1	--	1	--	2	--
Infants	--	0	--	0	--	0	--	0	--	1	--	1
Toddlers	--	0	--	0	--	0	--	0	--	0	--	0
Preschoolers	3	2	6	0	3	2	5	2	6	2	23	8
School-Age	2	1	21	8	4	5	5	3	0	0	32	17
Grand Total	1,878	2,094	1,888	1,910	790	1,274	1,220	1,381	347	720	6,123	7,379

Total Licensed Child Care Participation in BrightStars by Provider Type – September 2025			
Star Rating	Center-Based	Family Child Care	Total
1-Star	100	198	298
2-star	68	129	197
3-star	61	16	77
4-star	68	9	77
5-star	58	3	61
Total	355	355	710

Percentage of CCAP Children Enrolled in 4- and 5-Star Programs								
Dec 2020	Dec 2021	Sept 2022	Feb 2023	Sept 2023	Feb 2024	Sept 2024	Feb 2025	Sept 2025
21%	24%	26%	26%	23%	23%	26%	28%	28%

The charts below show enrollment trends by age group over the past 12 months from September 2024 through August 2025. Total enrollments are relatively steady with small increases for both center-based programs (net increase 80 enrollments) and family child care programs (net increase 107 enrollments). In center-based programs, the biggest change over time is a net reduction of 121 preschool-aged enrollments and a net increase of 135 school-aged children. Family child care programs saw small increases across all age groups with a net increase of 36 infant/toddler, 44 preschoolers and 27 school-aged enrollments.

CCAP Enrollment Trends (Center-Based)	Infant/Toddler Enrollments	Preschool Enrollments	SA Enrollments	Total Enrollments
Sep-24	1002	2508	1846	5356
Oct-24	1059	2482	1825	5366
Nov-24	1110	2551	1874	5535
Dec-24	1129	2521	1852	5502
Jan-25	1180	2526	1860	5566
Feb-25	1182	2499	1832	5513
Mar-25	869	2423	1914	5206
Apr-25	925	2442	1937	5304
May-25	986	2397	1854	5237
Jun-25	1005	2514	2173	5692
Jul-25	1025	2428	2025	5478
Aug-25	1068	2387	1981	5436
Sept 24-Sept 25 trend	66	-121	135	80

CCAP Enrollment Trends (Family Child Care)	Infant/Toddler Enrollments	Preschool Enrollments	SA Enrollments	Total Enrollments
Sep-24	490	694	478	1662
Oct-24	508	690	479	1677
Nov-24	528	675	473	1676
Dec-24	533	661	462	1656
Jan-25	572	682	468	1722
Feb-25	595	697	467	1759
Mar-25	466	727	514	1707
Apr-25	463	728	509	1700
May-25	469	723	506	1698
Jun-25	481	737	507	1725
Jul-25	567	751	503	1821
Aug-25	526	738	505	1769
Sept 24-Sept 25 trend	36	44	27	107

DHS is not yet able to provide a staff-to-child ratio for active children and staff within the ECE community, though continued progress has been made in this area since the last caseload report. DHS can, however, share information on the system’s overall capacity using licensed program data, along with the number of CCAP-enrolled children, both of which are included in this caseload. It is important to note that the CCAP enrollment figures represent only a portion of the early childhood population, as many families pay privately for care across more than 800 programs statewide. Currently, there is no mechanism to capture private pay attendance or

enrollment in our systems. However, DHS is exploring options to allow programs to self-report enrollment in a future release of the RI Start Early System (RISES).

The workforce registry went live in February 2024 with about 2,500 employees voluntarily making a profile into the system within the first month of launch, which was a little more than 50% of the current workforce. As of March 2025, there are 7,305 with the ability to collect significant data on the early educators to inform future decision making.

Workforce Registry Participants – Early Childhood Staff			
March 2024	September 2024	March 2025	September 2025
2,504	4,926	7,305	9,372*

It is important to note that all Workforce Registry applicants are not necessarily active in a program. An educator can create a workforce registry account as they are applying, or while they are opening a program. The Department has **6,985 educators currently actively working in a program.*

The Child Care Licensing Unit has been diligently implementing several recommendations identified in the 2025 audit, *State of Rhode Island Child Care Provider Compliance with Health and Safety Standards*.

By the end of this calendar year, all child care staff will be required to participate in the State’s workforce registry. This initiative will enable DHS to remotely review staff files at any time, eliminating the need to wait for onsite visits to verify compliance. The new RISES system also provides verifiable documentation confirming that DHS has reviewed the most recent background checks and credential updates.

Licensors will be able to generate comprehensive staff reports prior to visits to ensure all personnel meet regulatory requirements. During monitoring visits, licensors will confirm staff identification onsite. All individuals in regulatory roles—those responsible for hiring and overseeing staff—must receive DHS approval before assuming those responsibilities.

Additionally, DHS now requires the submission of current staff schedules as part of center license renewals and requests identification during monitoring visits to verify that all employees meet applicable requirements. In response to audit findings related to family child care providers and assistants, DHS continues to receive and review all background checks for family child care providers, assistants, and household members prior to approval. These records are maintained in the RISES system, and DHS is actively supporting providers to ensure that all documentation remains current.

All new programs are now required to complete their applications entirely within the RISES system, ensuring that every staff member’s licensing file is complete and compliant. The RISES platform also enhances DHS’s ability to identify and analyze trends in noncompliance. This data can be sorted by provider type and shared with the Professional Development and

Technical Assistance Hub to inform targeted training and capacity-building efforts where they are most needed.

In the coming months, DHS will initiate a regulatory review process in response to the audit findings. Once promulgated, the updated regulations will require all providers and staff working with children to enroll in the workforce registry within one month. This will ensure that staff records are available to DHS at all times.

The regulatory updates will also strengthen DHS’s response to noncompliance by establishing a clearly defined, regulation-based continuum of monitoring and enforcement—from initial observation of noncompliance through potential program closure. While current statute authorizes DHS to issue fines as part of this continuum, the revised regulations will formalize this process, ensuring both transparency and a documented legal foundation for enforcement actions.

Federal Funding and Initiatives to Support Child Care Recovery

The State has been in receipt of pandemic response federal funding of approximately \$125 million dollars specifically dedicated to child care programming since March 2020. All CRRSA CCDF, CARES CCDF and ARPA Stabilization have been spent as of September 30, 2023. ARPA CCDF had a liquidation deadline of September 30, 2024. All funds have been liquidated.

DHS received ARPA SFRF (State Fiscal Recovery Funds) that are still being utilized for the child care sector. The projects, allocations, and spending to date is outlined below.

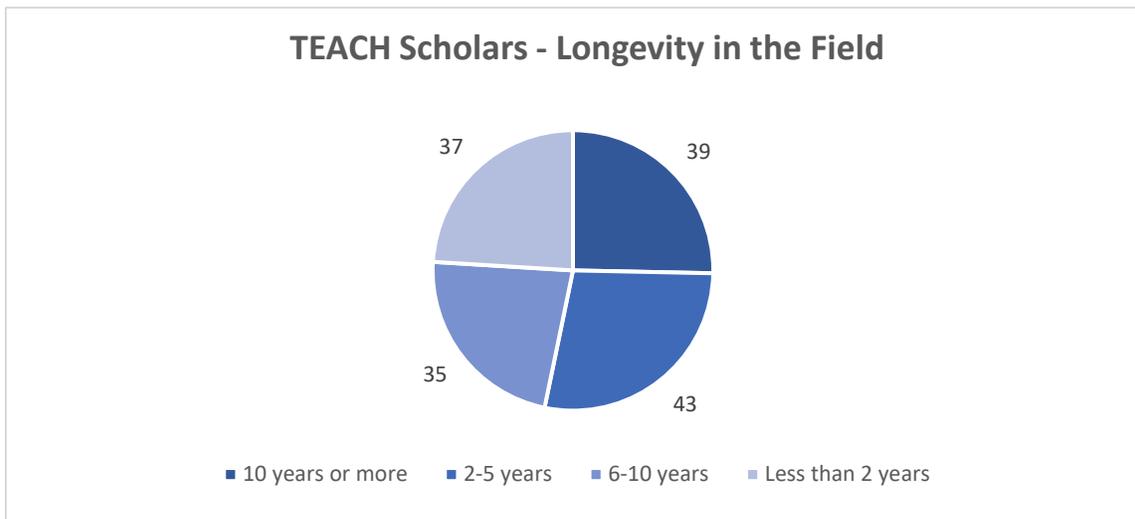
Project	Completion Date	Allocation	DHS spend to date as of September 2025
Child Care Family Provider Support	Completed	\$455,957	\$455,957
Child Care Retention Bonuses	Completed	\$37,398,404	\$37,398,404
Child Care Workforce Registry	Completed	\$1,000,000	\$1,000,000
Program Quality Improvement Grants	December 2025	\$1,145,639	\$1,116,215
TEACH Early Educator Scholarship	March 2026	\$2,000,000	\$1,123,857
TOTAL SFRF DOLLARS		\$42,000,000	\$40,089,089

The TEACH SFRF funding enabled the Department to expand and support three new pathways for Rhode Island educators. Including these SFRF-funded opportunities, TEACH now supports the following pathways, with the current number of educators in each pathway as of September 30.

- **Associate degree** at the Community College of Rhode Island (25 scholarships)
- **Bachelor’s Degree** at Rhode Island College (20 scholarships) and the University of Rhode Island (14 scholarships)

- **CDA Scholarships** for Family Child Care Providers and Center-Based Teachers (26 educators total)
- **Infant/Toddler Certificate** (16 credits) for Family Child Care Providers and Center-Based Teachers (37 educators total)
- **Master’s Degree** at Rhode Island College (13 educators)
- **Post-Baccalaureate Program** at the University of Rhode Island and Rhode Island College (14 educators)
- **3–6 Credit Completion Model** at state institutions to help educators complete unfinished degrees (5 educators)

TEACH has successfully supported 39 veteran educators (with more than 10 years in the field) in advancing along the quality continuum. Currently, 101 sponsoring child care employers participate in TEACH, supporting educators who collectively serve 9,954 children across Rhode Island.



With SFRF funding ending in March 2026 for this project, DHS is currently working through projections for supporting the current employees through their respective programs and determining how many new educators can be supported on a continual basis using CCDF funding.

Question: Please fill out the DHS excel file for the FY 2026 and FY 2027 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. Update the state’s compliance with Child Care Development Fund (CCDF) rule changes and include any impact on spending and general revenue match for FY 2026 and FY 2027.

Answer: See the narrative and tables below.

Fiscal Year	Mandatory	Matching	Discretionary
FFY2025 Remaining	\$0	\$0	\$10,211,390
FFY2026 Estimated	\$6,633,774	\$6,054,473	\$19,718,236
FFY2027 Estimated	\$6,633,774	\$6,054,473	\$19,718,236

The table above outlines Child Care and Development Block Grant (CCDBG) funding available for SFY26 and SFY27. All remaining mandatory and matching funds from FFY2025 were fully expended during the first quarter of SFY26. FFY2025 discretionary funds were used throughout SFY25 and will continue to support expenditures in SFY26.

In addition to providing child care subsidies, DHS invests discretionary funding in initiatives that strengthen early care and education quality, expand workforce development opportunities for current and aspiring providers, and cover CCAP administrative and system costs, as well as Family Child Care Collective Bargaining Agreement (CBA) payment practices.

Discretionary funds also support the Rhode Island Start Early System (RISES)—the state’s online data infrastructure advancing long-term early learning goals such as universal RI Pre-K and expanded access to high-quality child care.

To sustain the LearnERS program beyond December 2025 (when SFRF funding ends), DHS executed a new contract that scales down participation and cohort size, ensuring long-term sustainability within discretionary funding levels. As prior funding sources are reallocated to support these and other initiatives, a continued decline in discretionary carryforward is anticipated.

The FFY2026 FMAP rate is 57.50% with an increase in FFY2027 to 57.81%. This increase will result in a slight decrease to the State’s matching requirement in SFY27.

November 2025 Caseload

General Revenue	SFY26	SFY27
Maintenance of Effort (MOE)	\$5,321,126	\$5,321,126
State Match	\$4,530,270	\$4,433,095
General Revenue Total	\$9,851,396	\$9,754,221

General revenues are budgeted to meet the required match, with an additional \$30,000 level funded every year as a sign of the State’s commitment to contribute to the program. The State has seen small increases to the FMAP rates in recent years which have resulted in lower general revenue match requirements. The DHS Cash Array excel file for FY2026 and FY2027 estimates by fund source and line sequence is included with the caseload documents as Appendix A.

The 2024 CCDF Final Rule will have an impact on agency spending and any potential state match as we move into SFY26 and SFY27. The rule went into effect on April 30, 2024. Rhode Island was approved for a temporary waiver for an extension of up to two years to come into compliance. Rhode Island has already implemented many of the required changes, including the cap on family co-payments at seven percent of income, posting current information online about the scale for parent co-payments, and expanding sustainable payment practices.

Rhode Island requested, and was approved for, a waiver for the following rule changes:

- § 98.45(m)(1) — Pay providers prospectively
- § 98.45(m)(2) — Use enrollment-based payment
- § 98.16(z), § 98.30(b)(1), and § 98.50(a)(3) — Some grants or contracts for direct services for infants and toddlers, children with disabilities, and children in underserved geographic areas

The 2024 CCDF Final Rule requires states pay providers before or at the time of service. Currently, Rhode Island pays providers in bi-weekly batch payments after services have been provided and attendance has been submitted. There will be a substantial fiscal impact for implementing a system to pay providers prospectively, to monitor payments and to implement a systematized recoupment process based on disenrollments/non-attendance when prospective payment has been issued.

After initial review of the substantial system, program, and policy changes prospective payments will require, including potential negative impacts to family choice and enrollment practices, the Office of Child Care has put further development on hold until there is confirmation from the current administration that this practice will remain a requirement under the 2024 CCDF Rule. The State currently has a waiver through August 31, 2026.

The 2024 CCDF Final Rule requires states to implement enrollment-based provider payments. Rhode Island currently pays providers based on child attendance with flexibility in the attendance

policy. Provided a child attends a portion of the payment week, a provider can be paid for that week.

Additionally, our current practice states that if a child is not absent for more than two weeks in a row (and provided the family has provided an adequate absent notice) a provider can be paid for up to two weeks of absence.

To meet the federal requirement of payment based on enrollment, restrictions around weekly attendance and family notice will be revised with a target date of March 2026. Changes will include flexibility for up to four weeks of consecutive absence without impacting provider payment. Absent notices signed by parents will only be required in situations where a family has special circumstance requiring absence beyond four weeks (such as an extended illness/hospitalization) and will be approved by DHS on a case-by-case basis.

Payment will not be made beyond four weeks of absence without this approval. Providers will still be required to submit attendance for tracking purposes, but payments will be based on the child's enrollment and not on attendance for a maximum of four weeks. Duplicate payments are not allowed per the federal guidelines, and it will be the responsibility of the provider to ensure children are enrolled in the first week of care to be paid for that week.

The final rule also requires states to provide child care services through grants or contracts to increase the supply and quality of child care for infants and toddlers, children with disabilities, and children in underserved geographic areas. Currently, Rhode Island does not have a system to contract with providers to serve specific populations but is working through the request for proposal (RFP) process to pilot contracted slots by the summer of 2026. Rhode Island is in receipt of Preschool Development Grant funding that will support piloting the grants and contracts as required by the CCDF final rule.

Question: Please provide an update on the disenrollment trends.

Answer: See narrative below.

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 12-month period from September 2024 through September 2025, the system logged 4,279 disenrollments. Of those, 1,689 did not re-enroll with another provider during that 12-month period. Of those who disenrolled and did not re-enroll with another provider, 1,034 were disenrolled because their benefits terminated. Of those that terminated, approximately 589 terminated for failure to return their recertification packet.

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.

Currently, children who are absent with no parental notice submitted are considered non-attending for the week and providers do not receive payment. If a child is absent with no notice for 10 consecutive days, providers are asked to confirm with the family the intent to return or disenroll the child from their program. In any case, under the current attendance-based payment policy, providers will not receive payment for the child showing absent without notice.

Question: 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 November conference, including details on rates being paid, assumed capacity (including seats and staff lost), and any other impacts on providers.

Answer: See table and narrative below.

Openings and closures of child care providers were active since last caseload. There were 37 openings of programs and 49 closures.

	Provider Opening and Closings in Child Care April 2025-September 2025		
	Openings	Closings	+/-
Family Child Care providers	16	29	-13
Center providers	21	20	1
Total	37	49	-12

Considering the number of program openings and closures over the past six months, DHS is providing additional context regarding current trends in the child care landscape.

Program Closures

An analysis of recent closures reveals several emerging and evolving trends.

Center-Based Programs

Of the 20 center-based program closures, 13 have either reopened or are in the process of reopening. Ten (10) programs have already resumed operations, either under new ownership or following a location change. None of these programs remained closed for more than a few weeks, and most reopened the next day under new management. This reflects a growing trend across the state in which developers and larger national organizations are acquiring individual programs and reopening them under new leadership. Three additional programs are in the process of reopening, either in newly constructed facilities or renovated spaces following significant construction.

- Two centers closed due to building lease issues—an increasingly common factor. Two additional centers closed following decisions by the Diocese to discontinue school operations. The remaining closures were attributed to owner retirements.

Family Child Care Programs

The factors contributing to family child care program closures differ from those affecting center-based programs. As noted in previous reports, Rhode Island’s family child care community consists largely of long-standing providers, many of whom have operated for over 20 years and are now approaching retirement. As DHS transitions to a more technology-driven licensing system, some providers have opted to retire rather than adapt to new processes.

- Of the family child care closures during this period, 18 were the result of providers choosing to retire or leave the field due to changing priorities.
 - Three (3) closures were due to Department of Children, Youth, and Families (DCYF) involvement that prohibited continued operation.
 - Two (2) providers closed their family child care programs to open center-based programs.
 - Two (2) providers relocated out of state.
 - The remaining closures were attributed to individual circumstances, including illness, family responsibilities, or challenges with enrollment.

New Program Openings

The implementation of the RISES licensing system of record has streamlined and expedited the licensure process, enabling providers to move more efficiently through the approval pipeline. As a result, DHS has observed an increase in the number of prospective providers preparing to open new programs.

At present, provider progress through the licensing pipeline is being tracked through several initiatives:

- **Family Child Care:** 50 participants are enrolled in the *First Steps* program.
- **Center-Based Programs:** 15 participants are enrolled in the corresponding center-based readiness program.

Of these, 10 Family Child Care applications and six (6) center-based applications have been formally submitted and are currently under review by the Department.

Caseload Projections and Trends

An average of 6,018 children were served in the CCAP each week in SFY2025. This represents a 4.5% increase in the average number of children served since last state fiscal year. During this fiscal year, the number of school-age children served increased by 7.4%. In addition, this period saw an increase of 5.2% in toddler children served and a 3.8% increase in preschool children served.

Infant children served declined since last fiscal year by 3.4%. DHS is continually looking for ways to support the infant sector, as the ratios are lower, and it is much more costly to support infant classrooms. The 20% increase in the infant rate should help increase the desire for providers to support more infant care, and the Department is utilizing Preschool Development Grant funding to pilot additional ways to support the infant and toddler sector, understanding the importance of a pipeline for a sustainable child care business.

Number of Children by Age Grouping

Category	# of Children	% of Total
Infant	577	9.6%
Toddler	1147	19.1%
Preschool	2364	39.3%
School Age	1930	32.1%
Total	6018	100%

Based on average in SFY25

Number of Children by Provider Type

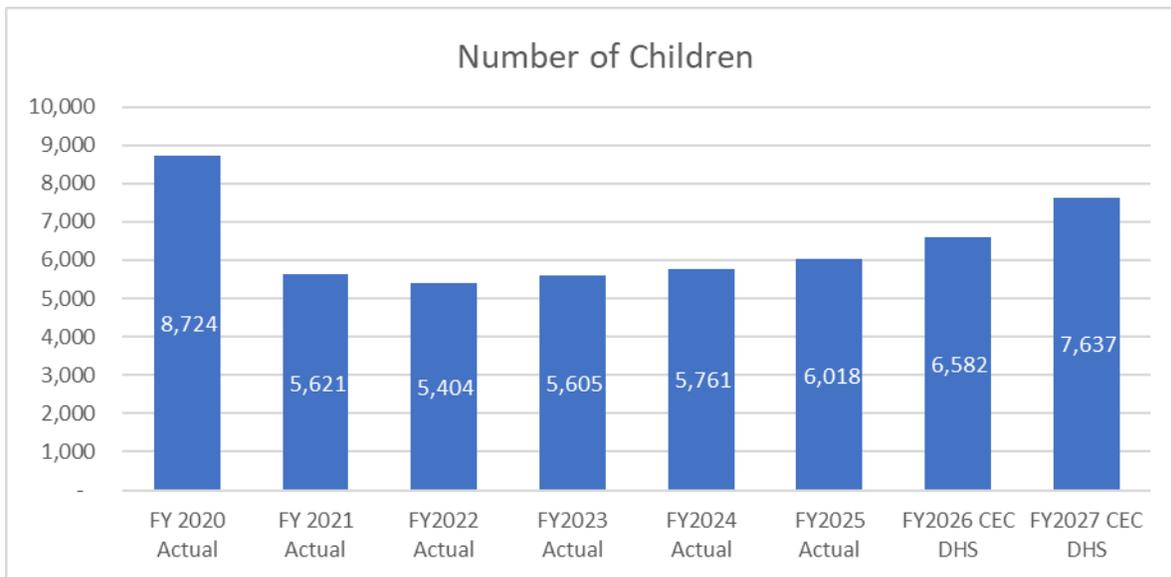
	# of Children	# of Providers
Family Based	1,495	334
Center Based	4,523	313
Total	6,018	647

Based on average in SFY25

The number of providers who serve CCAP children has slightly decreased in SFY25 compared to SFY24. At the end of SFY24, there were 656 providers serving CCAP children compared to just 647 at the end of SFY25. Both family-based and center-based providers serving CCAP children declined in SFY25; however, the number of children served by both provider types increased with family-based children increasing by 7.2% and children served in center-based providers increasing by 3.6%.

Both center-based and family-based care capacity, inclusive of CCAP children, has increased over the last year but is beginning to stabilize as providers also retire and close programs. This decline in growth of providers who service CCAP children highlights the need for support in this sector and the importance of the agency’s work.

In general, families utilize child care subsidy programs for relatively short periods of time but frequently return to the subsidy program after they exit. The overall number of children enrolled in child care throughout FY25 is 32.8% higher than the average amount of children enrolled in any given pay period.



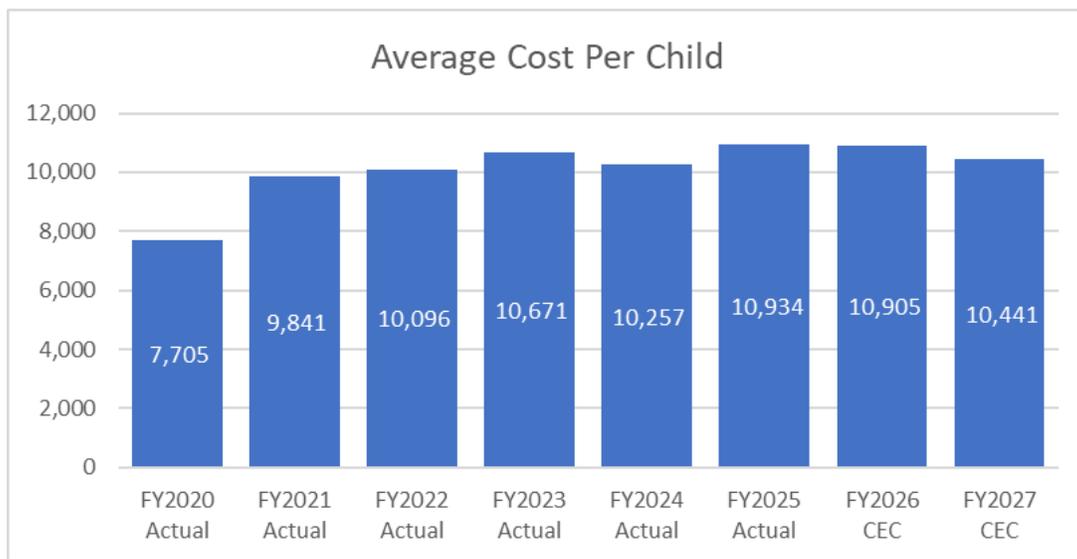
DHS experienced a slightly lower growth rate during the first five batches of SFY26 compared to the same period in SFY25. Specifically, the batch-over-batch growth rate declined by 0.3%, whereas previous years have typically shown modest but steady increases during this timeframe. This anomaly prompted a deeper analysis comparing the final five batches of SFY25 to the first five batches of SFY26, which revealed a growth rate of 0.3%—more consistent with historical trends. Overall, this batch-over-batch growth is projected to bring the total growth rate for SFY26 to 3.8% compared to SFY25 before additional considerations are applied to the forecast.

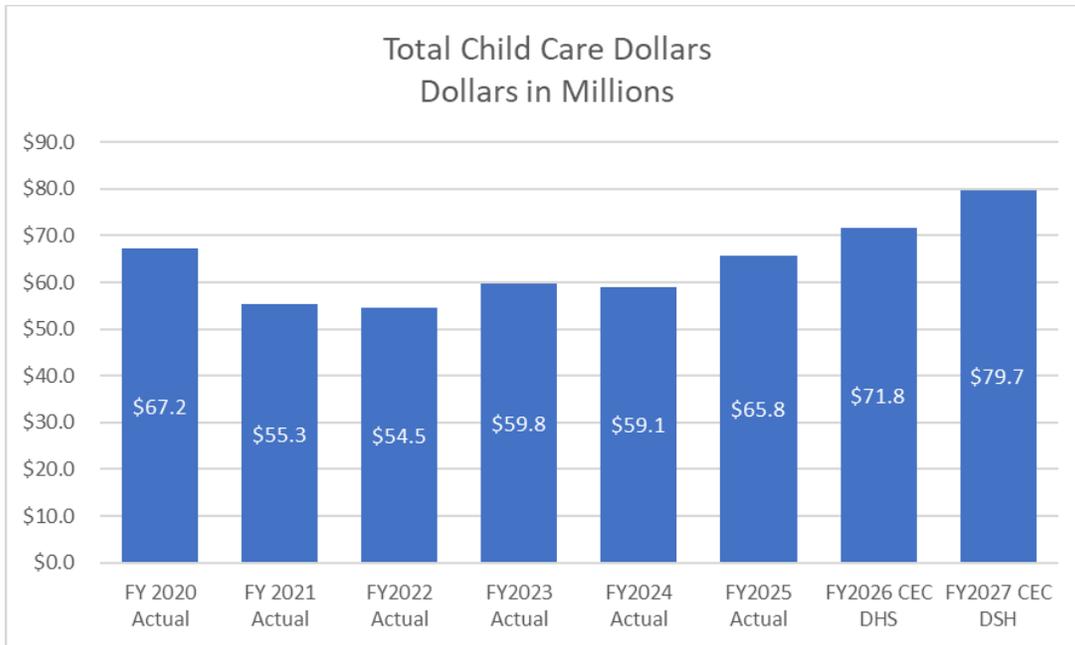
With the expiration of the waiver to the 2024 CCDF Final Rule in April, DHS will implement enrollment-based provider payments in the March RIBridges release. This programmatic change is expected to further increase the SFY26 growth rate. On average, approximately 385 children are absent during each batch period; prior to this policy shift, providers did not receive payment for these absences. Implementation of the 2024 CCDF Final Rule will ensure continuity of care by providing payment to providers for eligible absences, helping to preserve child care slots and program stability.

Additionally, changes to the Child Care for Child Care Staff Program will impact CCAP caseloads. This benefit supports eligible early childhood educators and staff employed by DHS-licensed programs. The SFY26 state budget extended the program for an additional three years.

However, effective August 1, 2025, all new and renewal pilot applicants must first apply for regular CCAP using the DHS application process. Participants determined eligible for CCAP will have their subsidy paid through the traditional program, while the pilot will cover any copay requirements. Approximately 381 current pilot participants are expected to transition to traditional CCAP, with their copays supported by the pilot program. An additional 126 new educators and staff are anticipated to enroll by the end of SFY26.

Taken together, these programmatic changes—along with normal caseload trends—are projected to increase the overall CCAP caseload by approximately 9.4% in SFY26.





After a significant increase to the per-child cost in SFY25 due to the legislated 5% center-based increase and the 2.5% family-based increase negotiated in the collective bargaining agreement, the per child cost is expected to stabilize in SFY26. With the cost of infants being only 5.4% of total caseload costs, the 20% increase to infant rates legislated in the SFY26 budget has had very little impact to the cost per child rate. However, the cost of subsidies is expected to increase in SFY26 by 9.1% as a result of the increase in the number of children due to enrollment-based provider payments and educators and staff working in DHS licensed child care utilizing both benefits.

The impact to the budget to include pilot children transitioning to CCAP is 3.3% or \$2.4 million. Families utilizing this benefit will transition when their pilot certification expires. While a total of 381 kids will transition by the end of SFY26, the average number of children transitioning by batch is 18. These children represent eight percent of the SFY26 total caseload.

Projected separately are the projections for the FY26 and FY27 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 and those currently on the pilot transitioning to traditional CCAP. Also projected separately is the impact of moving to enrollment-based payment.

	FY2026	
	Average # of Children	Amount
Base	6,582	\$ 71,775,054
Pilot Children Transition - Tuition Only	528	\$2,385,204
Enrollment vs. Attendance	385	\$1,291,757
Child Care for Child Care Workers	630	\$ 4,227,950
	7,212	\$ 76,003,004

	FY2027	
	Average # of Children	Amount
Base	7,637	\$ 79,735,216
Pilot Children Transition - Tuition Only	582	\$2,827,498
Enrollment vs. Attendance	447	\$1,435,234
Child Care for Child Care Workers	630	\$ 3,159,052
	8,267	\$ 82,894,268

Question: 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: See narrative below.

There are approximately 4,171 families (6,264 children) who have requested and been approved for CCAP benefits who have enrolled with a CCAP provider and billed for benefit services. There are 295 families (485 children) in RIBridges who have requested and been approved for CCAP benefits but who have not enrolled with a CCAP provider or billed for CCAP benefit services.

This equates to approximately seven percent of all 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.

Question: Please provide updated assumptions for child care assistance for individuals enrolled in either URI, RIC or CCRI for FY2026 and FY2027?

Answer: See narrative below.

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 or 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.

From September 2024 through September 2025, 119 families representing 221 children were approved for CCAP benefits through CCAP for College. In September 2025 there were 95 active cases with 177.

The number of children enrolled and paid through SFY25 is 129, with an average of 42 children paid per batch. The average cost per batch through SFY25 was \$18,017 with the cost of subsidies for FY25 totaling \$468,445. The total number of CCAP providers who enrolled children approved for benefits under CCAP for College was 90, with an average of 30 providers per batch period submitting for payment. 23.3% of these providers were family child providers and 76.7% were center-based providers.

DHS anticipates continued small but steady demand with increased awareness resulting from partnerships with CCRI, RIC and URI as well as increased marketing efforts. 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. FY26 is expected to see the number of children served per batch period increase to 70 at a cost of \$635,932. At this time, this estimate is also used for FY27.

Question: 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 30, 2025. The initial pilot application was open from August 23, 2023- July 31, 2024. The pilot was renewed for an additional year, starting August 1, 2024- July 31, 2025. The pilot extension began on August 1, 2025, and will continue through July 2028.

Application Status

As of September 30, 2025, a total of 1,313 applications have been received for the CCAP for Child Care Pilot across the life of the pilot. Of these, 71.40% (937 applications) have been 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.

Applications received by month since the start of the pilot are charted below.

Month Year	Pilot Application	New	Renewal	(blank)*	Extension New	Extension Renewal	Grand Total
August 2023	105						105
September 2023	101						101
October 2023	70						70
November 2023	40						40
December 2023	40						40
January 2024	43						43
February 2024	28						28
March 2024	26						26
April 2024	33						33
May 2024	16						16
June 2024	29						29
July 2024	65						65
August 2024		35	95	12			142
September 2024		32	30	2			64
October 2024		23	22				45
November 2024		13	17				30
December 2024		16	20				36
January 2025		28	12				40
February 2025		23	14				37
March 2025		25	17				42
April 2025		26	19				45
May 2025		29	18				47
June 2025		26	21				47
July 2025		26	24				50
August 2025			2		6	48	56
September 2025					10	26	36
Grand Total	596	302	311	14	16	74	1,313

**The blank applications were cancelled, and the applicant resubmitted (this occurred when we changed the application from year 1 to year 2)*

Currently, only 368 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. 569 households have an “approved-closed” application; meaning their household may no longer use their child care benefit as their benefit period has closed because they either did not renew, or their renewal was denied.

Application Status	Child Care Center	Family Child Care Home	Grand Total	Percent of Total
Approved	885	52	937	71.4%
<i>Approved- Active</i>	352	16	368	28.0%
<i>Approved- Closed</i>	533	36	569	43.3%
Denied	158	8	166	12.6%
Canceled	152	16	168	12.8%
In Review	37	5	42	3.2%
Grand Total	1,232	81	1,313	100%

As of September 30, 2025, there were 16 approved family child care providers actively participating in the pilot. Of these, eight are using their first year of benefits (under a “New application”), seven are using their second year of benefits (under a “Renewal application”), and one is utilizing their third year of benefits (under an “Extension Renewal application”).

Application Status	Year 1 Initial Pilot Year	Year 2 Pilot Year			Year 3 Pilot Extension		Grand Total
	Initial Pilot App	New App	Renewal App	Blank	Ext. New App	Ext. Renewal App	
Approved- Active		8	7			1	16
Approved- Closed	23	2	11				36
Canceled	9	4	2	1			16
Denied	3	2	2			1	8
In Review					2	3	5
Grand Total	35	16	22	1	2	5	81

As of September 30, 2025, there were 352 actively approved Center-based educators participating in the pilot. Of these, 158 submitted their renewal application and are now utilizing their second year of pilot benefits, while 35 submitted their extension renewal and are utilizing their third year of pilot benefits.

Application Status	Year 1 Initial Pilot Year	Year 2 Pilot Year			Year 3 Pilot Extension		Grand Total
	Initial Pilot App	New App	Renewal App	Blank	Ext. New App	Ext. Renewal App	
Approved- Active	2	155	158		2	35	352
Approved- Closed	410	44	79				533
Canceled	62	44	27	13		6	152
Denied	87	43	25			3	158
In Review					12	25	37
Grand Total	561	286	289	13	14	69	1232

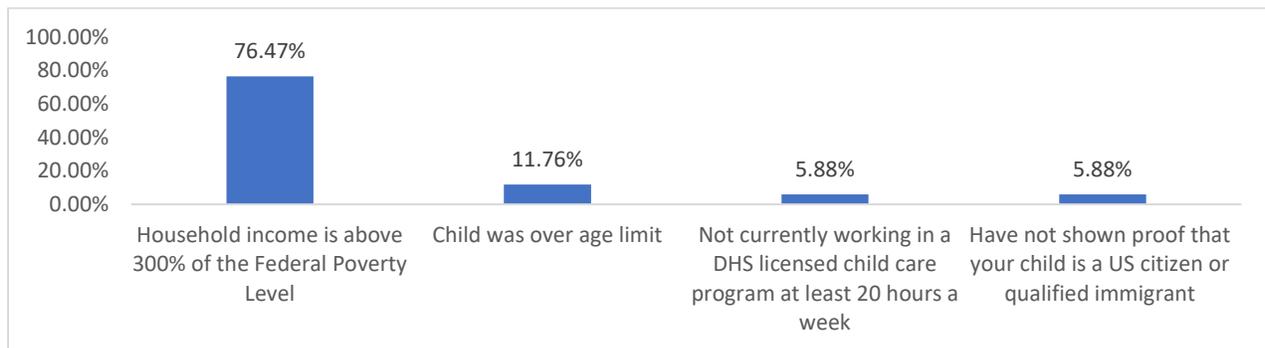
Renewal Applications – Year 1 to Year 2

Renewal of benefits will be reviewed by cohorts by approval year. 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 30, 2025, 280 (64.37%) of approved applicants from Year 1 submitted a renewal application in Year 2.

Approved Applicant Submitted a Renewal App?	Count	Percent
No	155	35.63%
Yes	280	64.37%
Total	435	100.00%

Most renewal applications (90%) were approved for Year 2, with only 6.79% being denied. The most common denial reason is the household was over the 300% FPL threshold.



Outreach was conducted to better understand why applicants may not be submitting a renewal application. Of the 155 non-renewals, 65% did not respond to outreach and another 23% no longer worked 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. As of September 30, 2025, applicants with benefits expiring in August, September or October 2025 are eligible to reapply for Year 3 of benefits. Of the 183 applicants eligible to submit a renewal application, only 71 have.

Approved Applicant Submitted a Renewal App?	Count	Percent
Not yet applied, but eligible	112	24.14%
Yes	71	15.30%
Not yet eligible to submit renewal	281	60.56%
Grand Total	464	100.00%

More than half (53%) of renewal applications have been approved. Nearly 40% are still in the review process, while seven percent were submitted and subsequently cancelled (due to applicant request to withdraw application or failure to provide documentation within 30 days).

Outreach was done to better understand why those eligible may not have submitted a renewal application. Outreach will continue through August 2026 to better understand non-renewal reasons.

Reason for Non-Renewal	Count of Applicants
Unresponsive to outreach	98
I have submitted a renewal application	4
Other	3
I didn't know I had to submit a renewal application	2
I didn't want to apply for regular CCAP	2
I no longer needed the pilot benefits	1
No longer working in child care	1
I haven't submitted a renewal application, but still plan to do so	1

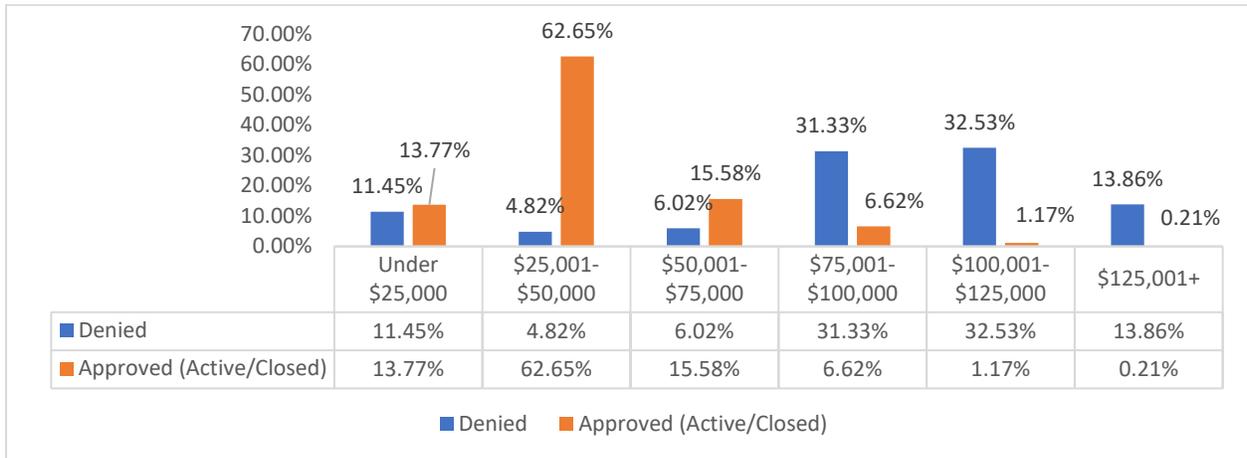
Denied Applications

Approximately 12.6% of applications received to date have been denied. Of the denied applications, the majority were from early educators working in a child care center (95.2%). The most common reason an application was denied was failure to meet the household income requirement for the pilot.

Denial Reason	Percent
Household income is above 300% of the Federal Poverty Level	78.92%
Not currently working in a DHS licensed child care program at least 20 hours a week	7.83%
Parent and/or child are not residents of Rhode Island	5.42%
DHS records show currently approved to participate in DHS CCAP with a \$0 copay, meaning participating in the pilot adds no additional benefit for your family.	3.01%
Child is not between ages 6 weeks and 13 years old	2.41%
Other	2.40%

Most denied applications (129 of 166) 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.

When considering household income, nearly half (46.39%) of denied applications represented a household income of more than \$100,000; only 1.39% of approved applications represented this household income bracket.



Applicant Demographics

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 are outlined in the table below:

All Applications (n=1313)	Approved Applications (n=937)	Denied Applications (n= 166)
Toddler Assistant Teacher (11.2%)	Toddler Assistant Teacher (11.63%)	Infant Lead Teacher (10.84%)
Preschool Lead Teacher (10.74%)	Toddler Lead Teacher (11.42%)	Toddler Assistant Teacher (10.84%)
Toddler Lead Teacher (10.36%)	Preschool Lead Teacher (10.57%)	Director (9.04%)
Preschool Assistant Teacher (10.21%)	Preschool Assistant Teacher (10.46%)	Preschool Assistant Teacher/ Preschool Lead Teacher (both at 9.04%)

Most applicants represent a one-parent household (67%). Among approved applications, the representation of a one-parent household increases to 73.2%.

In two-parent households, the second parent is more likely to be employed than not working (80.6% vs 19.4%, across all 1,313 applications).

The most common household size among applicants are as follows:

- 3-person household: 33.05%
- 2-person household: 29.7%
- 4-person household: 18.2%

Among approved applications (937), two-person households (36.61%) and three-person households (33.72%) were most represented.

Income

The majority of all applicants (68.39%) are earning an estimated income of \$50,000 or less. Similarly, 76.42% of approved applicants (both active and closed) are earning an estimated income of \$50,000 or less.

Income Category	All Applicants		Approved Applicants	
	Count	Percent	Count	Percent
Under \$25,000	284	21.63%	129	13.77%
\$25,001-\$50,000	614	46.76%	587	62.65%
\$50,001-\$75,000	159	12.11%	146	15.58%
\$75,001-\$100,000	116	8.83%	62	6.62%
\$100,001-\$125,000	65	4.95%	11	1.17%
\$125,001+	25	1.90%	2	0.21%
Not yet calculated	50	3.81%		
Grand Total	1,313	100.00%	937	100.00%

Race, Ethnicity and Gender

Applicants (1,313) for the CCAP for Child Care pilot most frequently identify as:

- White (62.68%)
- Black or African American (11.81%)
- Other (9.75%)

The majority identify as non-Hispanic (62.22%), followed by Hispanic or Latino (35.57%). Overwhelmingly, applicants identify as women.

Education

For most applicants (64.27%), a high school diploma or GED is their highest level of education.

Highest Level of Education	Count	Percent
Middle School	11	0.84%
High school diploma or GED	837	63.75%
Associate degree	202	15.38%
Bachelor's degree	190	14.47%
Master's degree	57	4.34%
Ph.D. or professional degree	16	1.22%
Grand Total	1313	100.00%

Approved Children

As of September 30, 2025, a total of 1,386 children¹ have been approved to participate in the pilot.

Of these, 40.78% are categorized as “approved-active” (count: 558), meaning they are still within their pilot benefit period. Most approved children (59.2%) are “approved-closed” (count: 828), meaning their pilot benefit period has closed.

Children approved to participate in the pilot are most commonly preschool age (36.94%).

Age Category	Approved-Active	Approved-Closed	Total Approved	Total Approved Percent
Infant	70	24	94	6.78%
Infant/Toddler ²	-	137	137	9.88%
Toddler	138	157	295	21.28%
Preschool	212	300	512	36.94%
School Age	138	210	348	25.11%
Grand Total	558	828	1386	100.00%

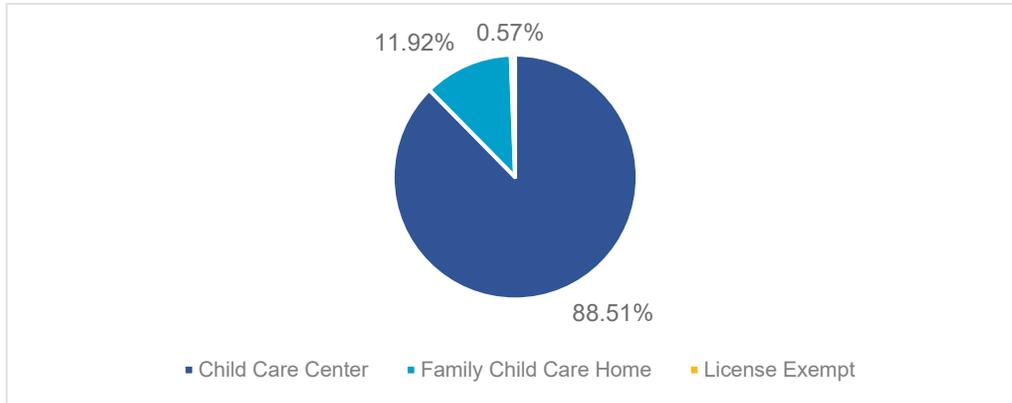
Of the 558 children with an active approval, 85% are enrolled in a CCAP program. Most children are enrolled full time (count: 373).

Enrollment Hours	Count	Percent
Enrolled	479	85.84%
Full Time (30+ hours weekly)	373	66.8%
Three Quarter Time (20-29 hours weekly)	91	16.3%
Half Time (10-19 hours weekly)	9	1.6%
Quarter Time (9 hours or less)	6	1.1%
No Active Enrollment	79	14.15%
Grand Total	558	100.0%

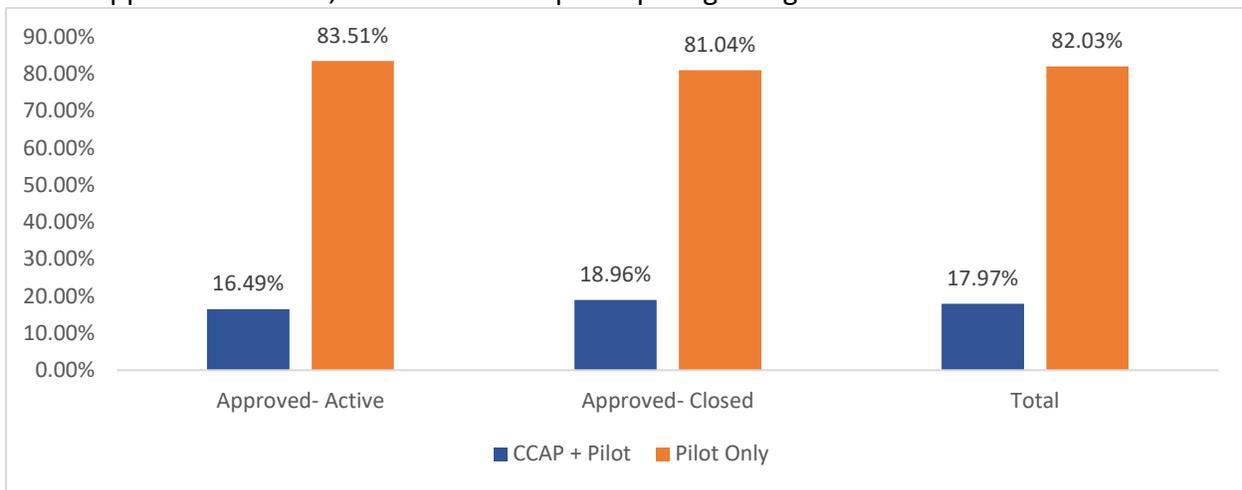
Approved children are enrolled across 174 DHS licensed, CCAP participating programs; 19 of these are Family Child Care Homes, 1 is License-Exempt, and 154 are Child Care Centers.

¹ This number excludes 34 children who are approved for the Pilot and also approved for CCAP with a \$0 copay and no payments have ever been issued a pilot payment.

² 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”.



Of the approved children, 17.97% are also participating in regular CCAP.



When reviewing monthly enrollment trends over the life of the program, the chart below reflects point-in-time counts based on the specific date the data was extracted. It is important to note that these figures represent the number of children enrolled as of the end of each month and may not align precisely with the number of children for whom payments were issued during that same month. Variances occur for several reasons, including instances where an enrolled child at month's end is not paid until the following month.

Date	Enrolled Children	Total Approved Pilot Children	Enrollment Rate
8/30/2024	455	634	71%
9/24/2024	452	606	74.50%
10/29/2024	432	588	73.40%
11/26/2024	455	589	77.20%
12/30/2024	454	589	77%
1/30/2025	449	581	77.20%
2/25/2025	467	615	75.90%
3/25/2025	478	617	77.40%
4/29/2025	495	634	78%
5/28/2025	514	662	77.60%
6/24/2025	545	677	80.50%
7/28/2025	543	681	79.74%
8/26/2025	513	644	79.66%
9/30/2025	424	558	75.99%

Expenses

As of September 2025, \$8,700,994 has been disbursed as payments to CCAP programs. Of which, \$7,671,612 has been adjusted on to the caseload accounts.

Paid Through September 2025			
Type	Copay Only	Tuition	Total
Pilot	\$132,431	\$146,702	\$279,133
CCAP Eligible	\$1,440,733	\$6,495,145	\$7,935,878
Currently CCAP	\$485,983	-	\$485,983
Total	\$2,059,147	\$6,641,847	\$8,700,994

SFY24			SFY25			SFY26		
July	\$ -	0	July	\$ 439,212	457	July	\$ 277,773	263
August	\$ -	0	August	\$ 334,362	380	August	\$ 385,790	480
September	\$ 14,161	38	September	\$ 371,301	416	September	\$ 365,819	266
October	\$ 69,440	98	October	\$ 355,729	400	October	\$ -	-
November	\$ 172,483	178	November	\$ 397,673	412	November	\$ -	-
December	\$ 265,385	229	December	\$ 567,087	429	December	\$ -	-
January	\$ 279,655	263	January	\$ 368,622	424	January	\$ -	-
February	\$ 308,571	289	February	\$ 367,156	414	February	\$ -	-
March	\$ 334,335	324	March	\$ 390,948	429	March	\$ -	-
April	\$ 316,182	318	April	\$ 404,766	446	April	\$ -	-
May	\$ 342,616	347	May	\$ 437,150	458	May	\$ -	-
June	\$ 459,518	376	June	\$ 675,260	687	June	\$ -	-
	\$2,562,347	246		\$5,109,265	446		\$ 1,029,382	336
Per Child Cost	\$ 10,416		\$ 11,456			\$ 3,061		

Based on current enrollment, recent application trends, and approval rates, it is estimated that the pilot will support approximately 1,173 unique children at a projected cost of \$21,864,065. It is difficult to arrive at an accurate average cost per child based on the entire life of the program due to a variety of reasons. Primarily, shifting the tuition cost of children who are eligible for traditional CCAP off the pilot will reduce the average cost from the first two years. Additionally, only 55% of approved children (1,386) have incurred a cost (768 unique children paid to date). Finally, a child typically only stays on the program for an average of 33 weeks.

Full Pilot Forecast			
Type	Copay Only	Tuition	Total
Pilot	\$915,911	\$1,095,160	\$2,011,071
CCAP Eligible	\$11,055,390	\$7,629,848	\$18,685,238
Currently CCAP	\$1,167,757	-	\$1,167,757
Total	\$13,139,057	\$8,725,008	\$21,864,065

As of September 2025, there are 495 children currently enrolled in the program. Of which, 436 are eligible for traditional CCAP, 38 are copay only (already on CCAP), and 21 are fully supported by the pilot (FPL > 261%). During SFY26, it is expected that 382 CCAP eligible children will transfer their cost of tuition to traditional CCAP. During SFY26, it is expected that 382 CCAP eligible children will transfer their cost of tuition to traditional CCAP. This program will continue to pay for these children at a much lower cost as the program will pay for only the families required copayment. The future enrollment forecast factors in the remaining 54 children transitioning in SFY27.

Participants have been categorized for financial analysis in three ways. Below reflect the current enrollment percentages by category:

- Pilot: Both copay and tuition paid – 8%
- CCAP Eligible: Both copay and tuition paid until current certificate expires, then paid through traditional subsidy process; paying copay only on pilot– 84%
- Currently CCAP: Tuition paid through traditional subsidy process; paying copay only – 8%

Current Enrollment Forecast - September 2025			
Type	Copay Only	Tuition	Total
Pilot	\$366,565	\$374,503	\$741,068
CCAP Eligible	\$6,133,127	\$1,541,297	\$7,674,424
Currently CCAP	\$712,196	-	\$712,196
Total	\$7,211,888	\$1,915,801	\$9,127,688

Based on application and approval data, it is expected an additional 135 children will be approved to participate in the pilot program. Out of the 135 children, the pilot will pay tuition and copay for nine children. The other 126 children will have their tuition paid through traditional CCAP. The family copayment associated with these children will be paid through the pilot program.

It is expected that the number of children will stabilize in SFY27 and remain at current levels through SFY28. As 24-month certificates expire, we will begin seeing child levels decrease with the last of the pilot children leaving the program in SFY31.

Future Enrollment Forecast			
Type	Copay Only	Tuition	Total
Pilot	\$425,295	\$583,138	\$1,008,343
CCAP Eligible	\$3,571,720	-	\$3,571,720
Currently CCAP	-	-	\$-
Total	\$3,996,925	\$583,138	\$4,580,063

Finally, based on current FPL levels of participants, it is expected that TANF can support 87% of the total cost.

	Total	TANF	CCDBG
SFY24	\$2,562,347	\$2,224,117	\$338,280
SFY25	\$5,109,625	\$4,434,842	\$674,423
SFY26	\$4,227,950	\$3,669,861	\$558,089
SFY27	\$3,159,052	\$2,742,057	416,995
SFY28	\$3,159,052	\$2,742,057	416,995
SFY29	\$2,357,712	\$2,046,494	\$311,218
SFY30	\$1,172,443	\$1,017,680	\$154,762
SFY31	\$116,244	\$100,900	\$15,344
	\$21,864,065	\$18,978,009	\$2,886,057

Question: Please provide an update regarding the Step Up to Wage\$ pilot program including, but not limited to,

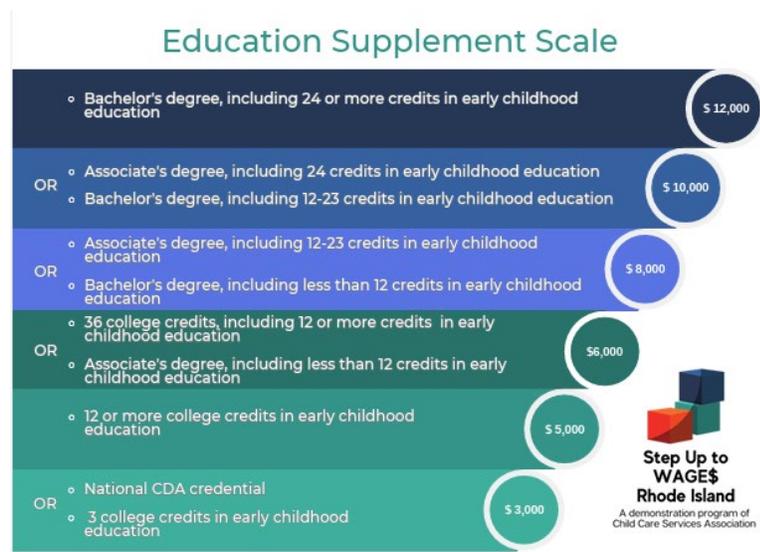
- a. Number of total applicants
- b. Reasons for denial
- c. Demographic Breakdown of applicants
- d. Updated grant status and funding commitments
- e. Funds supporting the program, including the Preschool Development Grant

Answer: See narrative below.

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 pilot was implemented as a demonstration project in partnership with Early Years (formerly the Child Care Services Association, CCSA), a national leader in advancing access to affordable, high-quality early care and education through workforce and community support.

The *Step Up to WAGE\$* model serves as an on-ramp to the evidence-based Child Care WAGE\$® Program, preparing states to implement the model effectively. Research consistently demonstrates that high staff turnover and insufficient compensation negatively impact the quality of early childhood education. To address these challenges and to improve compensation stability for Rhode Island’s child care workforce, DHS launched this pilot program.



Program Eligibility and Participation

The initial pilot (known as “*Step Up to WAGE\$*”) concluded in spring 2025. To qualify for participation, educators were required to meet both program-specific and state-defined eligibility criteria. Eligible participants:

- Earned \$23 per hour or less;
- Worked with infants and toddlers in a licensed early childhood setting for at least 10 hours per week; and
- Held an education level aligned with the *Step Up to WAGE\$* Supplement Scale, detailed above.

Applications opened to the provider community on May 15, 2023, and closed in January 2025. During this period, 609 applications were received, with acceptance limited due to budgetary constraints. Of these applicants, 44% were awarded funding in the first payment round, while 56% were not funded due to limited resources or ineligibility upon final review.

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, \$2,389,451 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.

Information about ineligibility determination can be found in the table below.

Ineligibility Criteria	# of Participants	% of Participants
Over Income	16	34.8%
Participant Request	2	4.3%
Left Center	23	50.0%
Employed less than 10 hours weekly	2	4.3%
Position Change	1	2.2%
Center Closure	1	2.2%
Laid Off	1	2.2%
Total	46	100.0%

Program Impact

Workforce Retention and Compensation

The *Step Up to WAGE\$* pilot demonstrated measurable improvements in educator retention, education advancement, and compensation.

- The program achieved a 94% retention rate among participants.
- 93% of recipients reported that the wage supplement reduced financial stress.
- 89% stated that the supplement enabled them to meet essential financial obligations, and
- 82% reported feeling more valued and recognized for their contributions to the early education field.

Professional Growth and Education

Among active participants:

- 10% submitted documentation verifying completion of additional coursework during program participation.
- 8% advanced to a higher level on the *Step Up to WAGE\$* Supplement Scale due to newly attained educational credentials.

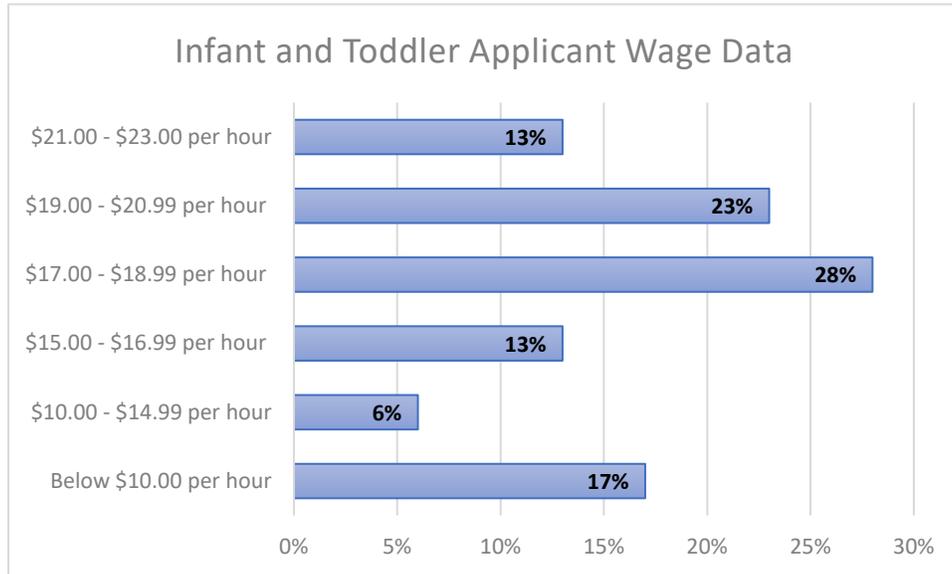
Education Levels	Number of Active Participants	Percentage of Active Participants
3 ECE Hours	18	8%
CDA	35	15%
12 ECE Hours	40	17%
36 Gen Ed Hours – including 12 in ECE	27	12%
Associate’s degree with < 12 ECE Hours	7	3%
Associate’s degree with > 12 ECE Hours	12	5%
Associate’s degree with > 24 ECE Hours	45	20%
Bachelor’s Degree with < 12 ECE Hours	12	5%
Bachelor’s Degree with > 12 ECE Hours	9	4%
Bachelor’s Degree with > 24 ECE Hours	21	9%
Master’s Degree with > 24 ECE Hours	5	2%
TOTAL:	231	100%

Infant and Toddler Workforce Enhancement

The FY23 Enacted State Budget (Article 10) directed the Rhode Island Department of Education (RIDE), the Department of Human Services (DHS), and the Children’s Cabinet to develop an expansion plan for Rhode Island Pre-K, targeting 5,000 seats by 2028. The plan emphasized the need for dedicated funding to strengthen the infant and toddler care infrastructure.

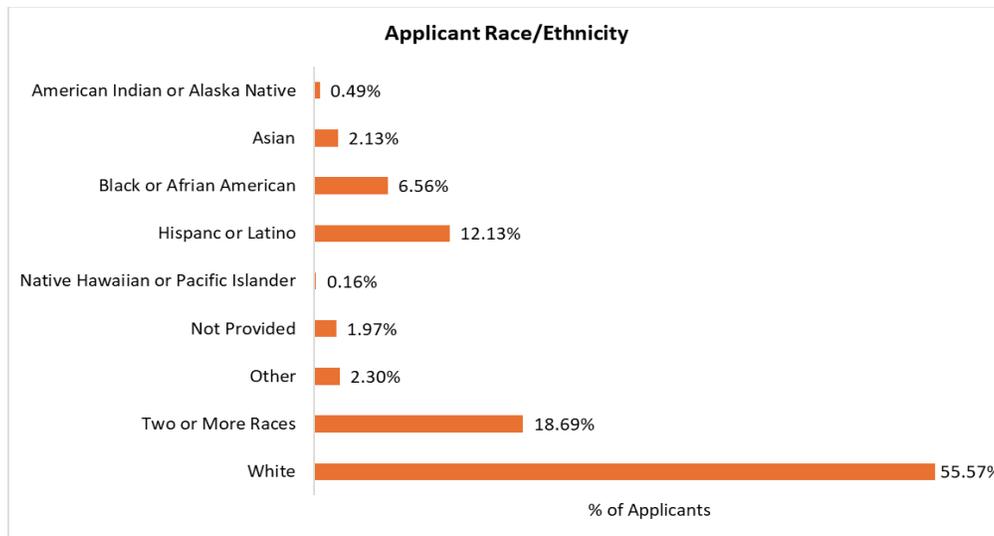
Recognizing the essential role and comparatively lower wages of infant and toddler educators, DHS—following the conclusion of pandemic-era retention bonuses—used unspent federal PDG funds to authorize an additional round of *Step Up to WAGE\$* payments for this sector.

From May through August 2025, DHS provided one-time bonuses totaling \$796,706 to 285 educators (including lead teachers, assistant teachers, and family child care providers) drawn from the initial program’s waitlist. Due to the one-time nature of this payment, retention data were not collected for this cohort.

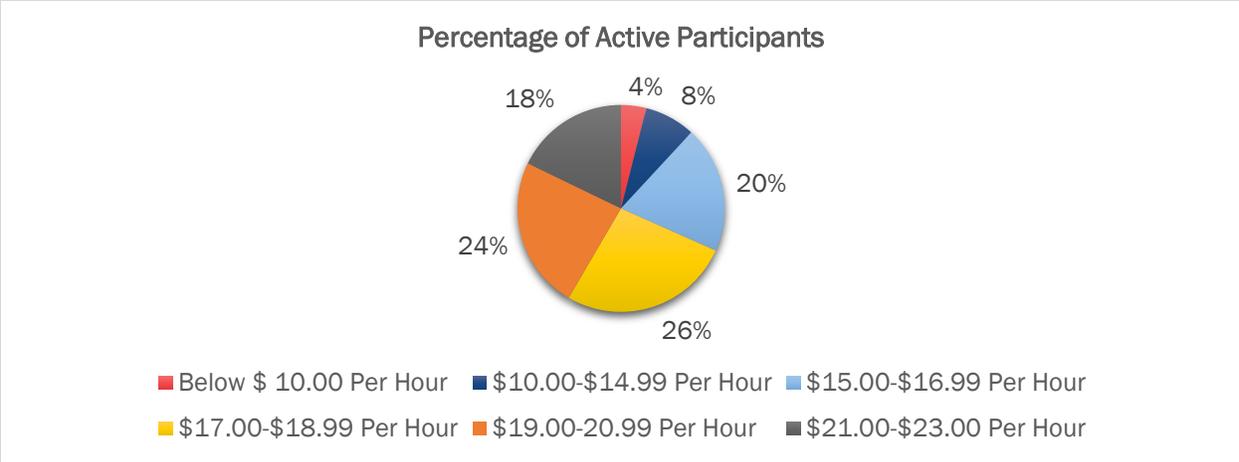


Applicant Demographics:

Demographic information is collected for applicants and confirmed for awarded participants through the eligibility criteria confirmation process. Per request, race/ethnicity information for applicants can be found below. Additional information re: awarded participants is also included.



Hourly compensation levels for awarded (active) participants.



Transition to WAGE\$ Implementation

Building on the success of the pilot, WAGE\$ officially launched statewide on October 1, 2025. As of October 6, DHS received 376 applications, with an estimated 60% from prior *Step Up to WAGE\$* participants. The first payment rounds are scheduled to be issued before the end of the calendar year.

A full evaluation of program impacts and outcomes will be available in spring 2026.

Funding for WAGE\$

The Step Up to WAGE\$ initiative, along with the subsequent WAGE\$ program, is fully funded through the Preschool Development Grant. To date, a total of \$4,163,000 has been expended on this project. An additional \$1,000,000 is anticipated from Year 2 of our three-year grant award, for which an updated notice of award has been received. At this time, it remains unclear whether funding for Year 3 of the award will be provided.

Question: Please provide any information on contract negotiations with SEIU on behalf of the family child care providers and potential program impacts for FY2026 and FY2027.

Answer: See narrative below.

Negotiations between the State and SEIU 1199 remain in the preliminary stages. In accordance with standard labor relations practice, specific details regarding potential fiscal proposals cannot be disclosed, as all discussions are being conducted confidentially. Formal negotiations commenced on June 6, 2025, and three sessions have been held to date—on June 26, July 9, and July 30.

There have been substantial requests for information from both parties, and the next phase of discussions will proceed once all requested materials have been disseminated and reviewed. It is anticipated that the next negotiation session will be scheduled before the end of October.

Question: 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: See narrative below.

The summer camp regulations have not yet been promulgated. When the initial legislation was enacted, it was anticipated that once regulations were finalized, DHS could begin licensing youth summer camps interested in accepting CCAP subsidies. To do so, DHS needed to ensure compliance with all federal requirements to guarantee a safe environment for CCAP participants, as the legislation specifically referenced the use of Child Care Development Fund (CCDF) dollars. Without meeting these requirements, CCAP funds could not be utilized.

While advancing this work, DHS identified conflicts between the draft regulations and statutes governing other state agencies. For example, DHS must ensure that child abuse and neglect reporting and investigations occur under the same standards as center- and family-based providers. However, DCYF determined that its current statutory authority does not extend to summer camps. DHS is now collaborating with DCYF to propose statutory changes during the current budget cycle to grant this authority.

Once the statutory updates are enacted, DHS will resume the promulgation process. A pre-review of the draft regulations has already been completed, and community feedback has been incorporated—positioning the regulations to advance quickly once the statutory changes are finalized.

State Supplemental Payment (SSP) Program

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 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. The DHS issues a separate payment for the State Supplemental Payment (SSP).

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

Answer: Please see narrative and chart below.

	FY 2022 Actual	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Enacted	FY 2026 November CEC DHS	FY 2027 November CEC DHS
SSP							
Persons	32,695	31,630	30,900	30,835	30,757	30,503	30,484
Cost / Person	\$ 44	\$ 44	\$ 45	\$ 45.04	\$ 45.00	\$ 45.17	\$ 45.14
Cash Payments	\$ 17,366,916	\$ 16,508,974	\$ 16,571,658	\$ 16,666,156	\$ 16,608,780	\$ 16,533,846	\$ 16,512,573
Transaction Fees	\$ 55,000	\$ 56,033	\$ 59,000	\$ 63,000	\$ 72,000	\$ 72,000	\$ 72,000
Total Dollars	\$17,421,916	\$16,565,007	\$16,630,658	\$16,729,156	\$16,680,780	\$16,605,846	\$16,584,573

As of September 2025, there are a total of 30,484 SSP recipients. 29,441 individual/couple payments, 679 personal needs allowance payments, and 364 assisted living payments. More detail can be found in Appendix A.

Over the last 12 months the SSP caseload has remained relatively flat. This is primarily due to the number of applications and approvals offsetting the number of cases coming off the caseload. The FY2026 and 2027 projections factors in zero growth for individual payments, personal needs allowance and assisted living payments. These assumptions bring the average number of persons to 30,503 and 30,484 for FY 2026 and FY 2027, respectively.

The administrative transaction fee increased to \$63,000 for FY2025. Per the federal SSA and based on the projected caseload, the transaction fee is estimated at \$72,000 for FY2026 and \$72,000 for FY2027. The cost per person is not calculated to include transaction fees.

Total moving costs were \$306,658 in FY2025. DHS estimates the cost of \$279,439 and \$288,000 respectively, for FY2026 and FY2027. The annual amounts assume a monthly cost based on the last 12 months of actual expenses.

Question: 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 2026 and FY 2027.

Answer: Each month DHS issues cash payments of \$206 for individuals in AL facilities. As of September 2025, there are two individuals within one AL facility. LTSS staff worked with Medicaid eligible facilities to get their residences enrolled in LTSS and are now billing on tier reimbursement equal to or more than the \$206 payment.

The FY2026 projection of \$4,944 is based on year-to-date expenses through September plus a projected average of two individuals for the remaining AL facility.

	FY 2025 Q1	FY 2025 Q2	FY 2025 Q3	FY 2025 Q4	FY25 Total	FY 2026 Q1	FY 2026 DHS Projected	FY 2027 DHS Projected
Bristol Assisted Living	\$5,768	\$5,150	\$0	\$0	\$10,918	\$0	\$0	\$0
Charlesgate	\$2,266	\$4,326	\$4,326	\$0	\$10,918	\$0	\$0	\$0
Community Care Alliance	\$8,446	\$9,064	\$7,622	\$0	\$25,132	\$0	\$0	\$0
Franciscan Missionaries	\$7,004	\$6,798	\$6,386	\$1,236	\$21,424	\$1,236	\$4,944	\$4,944
Total	\$23,484	\$25,338	\$18,334	\$1,236	\$68,392	\$1,236	\$4,944	\$4,944

The number of quarterly cases in each facility is shown below. DHS cost projections align with its methodology for the cash payments in both FY2026 and FY2027.

	FY 2025 Q1	FY 2025 Q2	FY 2025 Q3	FY 2025 Q4	FY 2025 Average DHS	FY 2026 Average DHS Projected	FY 2027 Average DHS Projected
Bristol Assisted Living	9	8	0	0	4	0	0
Charlesgate	4	7	7	0	4	0	0
Community Care Alliance	14	15	12	0	10	0	0
Franciscan Missionaries	11	11	10	2	9	2	2
Total	38	41	30	2	28	2	2

General Public Assistance (GPA) Program

The General Public Assistance (GPA) program is intended as a program of last resort for the neediest individuals in the State. GPA 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 other federal assistance programs other than Supplemental Nutrition Assistance Program (SNAP). In addition, the program provides supplemental assistance for funerals and burials.

As of September 2025, there are 734 GPA Bridge cases. This is 37 cases fewer than the May 2025 DHS projection for the month of September 2025. Applications received are down slightly over the last five months since the May CEC, averaging 197 per month compared to 203 per month. However, the approval rate was up from 23% to 29%.

The current projection uses growth of 1.5% month over month, consistent with both the last six- and 12-month average growth rate. This gives rise to the number of cases reaching an average of 773 in SFY26 and 912 in SFY27 at a cost of \$1,509,576 and \$1,828,961 each year, net of recoveries, respectively.

Question: For FY 2026 and FY 2027, please provide an estimate of the expenses for the program, including burial assistance program.

Answer: Please see below.

The total cost for GPA burials during FY 2025 was \$606,386 providing 603 burials. This amount is slightly less than the \$650,000 FY 2026 Final Enacted. Through September 2025, the cost of GPA burials is \$133,706 for 168 decedents. Based on the average of FY2024 and FY2025, the FY 2026 and FY 2027 GPA burial costs are estimated at \$625,000.

	FY 2023 Actual	FY 2024 Actual	FY 2025 Actual	FY 2026 Enacted	FY 2026 Nov CEC DHS	FY 2027 Nov CEC DHS
GPA						
Persons - Bridge	352	533	632	780	773	912
Cost / Person	\$154	\$140	\$136.03	\$169.00	\$162.74	\$167.12
Cash Payments - Bridge	\$651,968	\$880,734	\$1,031,616	\$1,581,840	\$1,509,576	\$1,828,961
Burials	\$586,422	\$647,057	\$606,386	\$650,000	\$625,000	\$625,000
Total Dollars	\$1,238,390	\$1,527,791	\$1,638,002	\$2,231,840	\$2,134,576	\$2,453,961



Appendix A

Rhode Island Department of Human Services

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**Department of Human Services
Public Assistance Caseloads & Expenditures
November 2025 Caseload**

	FY 2024 Actual*	FY 2025 Actual*	FY 2026 Enacted	FY 2026 November CEC DHS	FY 2027 November CEC DHS
TANF / RI Works					
Persons	8,323	9,362	9,875	9,325	9,510
Cost / Person	\$ 236	\$ 285.04	\$ 298.00	\$ 288.18	\$ 288.00
Cash Payments	\$ 23,555,525	\$ 32,023,400	\$ 35,313,000	\$ 32,247,749	\$ 32,866,560
Supportive Services	\$ 881,289	\$ 952,401	\$ 1,000,000	\$ 967,559	\$ 985,336
Clothing - Children	\$ 655,800	\$ 697,782	\$ 750,000	\$ 701,518	\$ 715,000
PEAF	\$ 298,277	\$ -	\$ -	\$ -	\$ -
Catastrophic	\$ 1,600	\$ 600	\$ 1,200	\$ 800	\$ 1,000
Transportation	\$ 434,866	\$ 549,738	\$ 536,064	\$ 500,179	\$ 517,832
Total Dollars	\$ 25,827,357	\$ 34,223,921	\$ 37,600,264	\$ 34,417,805	\$ 35,085,728
Child Care					
Subsidies	6,100	6,464	6,818	7,212	8,267
Cost / Subsidy (Annual)	\$ 10,107	\$ 10,970	\$ 11,956	\$ 10,539	\$ 10,027
Total Dollars	\$ 61,651,009	\$ 70,907,547	\$ 81,516,008	\$ 76,003,004	\$ 82,894,268
SSP					
Persons	30,900	30,835	30,757	30,503	30,484
Cost / Person	\$ 45	\$ 45.04	\$ 45.00	\$ 45.17	\$ 45.14
Cash Payments	\$ 16,571,658	\$ 16,666,156	\$ 16,608,780	\$ 16,533,846	\$ 16,512,573
Trans. Fees	\$ 59,000	\$ 63,000	\$ 72,000	\$ 72,000	\$ 72,000
Total Dollars	\$ 16,630,658	\$ 16,729,156	\$ 16,680,780	\$ 16,605,846	\$ 16,584,573
GPA					
Persons Total - Bridge	533	632	780	773	912
Cost / Person	\$ 140	\$ 136.03	\$ 169.00	\$ 162.74	\$ 167.12
Cash Payments - Bridge	\$ 879,114	\$ 1,031,616	\$ 1,581,840	\$ 1,509,576	\$ 1,828,961
Burials	\$ 648,676	\$ 606,387	\$ 650,000	\$ 625,000	\$ 625,000
Total Dollars	\$ 1,527,790	\$ 1,638,003	\$ 2,231,840	\$ 2,134,576	\$ 2,453,961
Grand Total Dollars	\$ 105,636,814	\$ 123,498,627	\$ 138,028,892	\$ 129,161,231	\$ 137,018,530

* Note: Prior year actuals includes adjustment in cost per person/subsidy to agree to RIFANS.

**Department of Human Services
Rhode Island Works (TANF) Caseload and Expenditures
November 2025 Caseload**

Rhode Island Works SFY 2025	July	August	September	October	November	December	January	February	March	April	May	June	Total
Persons	8,965	9,409	9,225	9,507	9,296	8,892	9,704	9,645	9,533	9,567	9,429	9,175	9,362
Cases	3,554	3,731	3,688	3,769	3,702	3,547	3,873	3,799	3,787	3,804	3,749	3,689	3,724
Persons/case	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5
Average cost per person	\$ 163	\$ 363	\$ 312	\$ 283	\$ 287	\$ 293	\$ 281	\$ 286	\$ 290	\$ 284	\$ 286	\$ 286	\$ 285.04
Average cost per case	\$ 411	\$ 916	\$ 780	\$ 713	\$ 722	\$ 734	\$ 705	\$ 727	\$ 731	\$ 715	\$ 718	\$ 710	\$ 715.17
Regular	\$ 1,336,868	\$ 3,126,439	\$ 2,630,545	\$ 2,456,516	\$ 2,444,145	\$ 2,382,010	\$ 2,495,625	\$ 2,524,880	\$ 2,531,127	\$ 2,493,814	\$ 2,475,791	\$ 2,418,905	\$ 29,316,665
Two Parent	\$ 124,870	\$ 292,025	\$ 245,706	\$ 229,451	\$ 228,296	\$ 222,492	\$ 233,104	\$ 235,837	\$ 235,830	\$ 223,214	\$ 220,903	\$ 215,006	\$ 2,706,735
Total	\$ 1,461,738	\$ 3,418,464	\$ 2,876,251	\$ 2,685,967	\$ 2,672,441	\$ 2,604,502	\$ 2,728,729	\$ 2,760,717	\$ 2,766,957	\$ 2,717,028	\$ 2,696,694	\$ 2,624,050	\$ 32,023,400
Catastrophic	\$ -	\$ -	\$ -	\$ 200	\$ -	\$ -	\$ -	\$ -	\$ 200	\$ 200	\$ -	\$ -	\$ 600.00
Clothing	\$ 581,800	\$ 100,282	\$ -	\$ 15,700	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 697,782
Supportive Services	\$ 71,958	\$ 69,840	\$ 93,183	\$ 74,715	\$ 74,916	\$ 38,049	\$ -	\$ 145,101	\$ 118,635	\$ 78,447	\$ 80,292	\$ 107,265	\$ 952,401
Transportation	\$ 45,128	\$ 46,365	\$ 52,388	\$ 49,665	\$ 46,695	\$ 46,860	\$ 40,343	\$ 40,178	\$ 42,488	\$ 43,410	\$ 42,784	\$ 53,434	\$ 549,738
Total	\$ 2,160,624	\$ 3,634,951	\$ 3,021,822	\$ 2,826,247	\$ 2,794,052	\$ 2,689,411	\$ 2,769,072	\$ 2,945,996	\$ 2,928,280	\$ 2,839,085	\$ 2,819,770	\$ 2,784,749	\$ 34,223,921

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	9,238	9,257	9,275	9,294	9,313	9,331	9,350	9,369	9,387	9,325
Cases	3,711	3,772	3,688	3,695	3,703	3,710	3,718	3,725	3,732	3,740	3,747	3,755	3,725
Persons/case	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5
Average cost per person	\$ 292	\$ 277	\$ 283	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288.18
Average cost per case	\$ 731	\$ 697	\$ 714	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720.00
Regular	\$ 2,527,802	\$ 2,448,887	\$ 2,455,086	\$ 2,488,171	\$ 2,493,147	\$ 2,498,133	\$ 2,503,129	\$ 2,508,136	\$ 2,513,152	\$ 2,518,178	\$ 2,523,215	\$ 2,528,261	\$ 30,005,297
Two Parent	\$ 184,819	\$ 179,049	\$ 179,502	\$ 187,282	\$ 187,656	\$ 188,032	\$ 188,408	\$ 188,784	\$ 189,162	\$ 189,540	\$ 189,919	\$ 190,299	\$ 2,242,452
Total	\$ 2,712,621	\$ 2,627,936	\$ 2,634,588	\$ 2,675,453	\$ 2,680,803	\$ 2,686,165	\$ 2,691,537	\$ 2,696,920	\$ 2,702,314	\$ 2,707,718	\$ 2,713,134	\$ 2,718,560	\$ 32,247,749
Catastrophic	\$ -	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ 800
Clothing	\$ -	\$ 682,810.00	\$ 18,708.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 701,518
Supportive Services	\$ 77,259.00	\$ 82,977.00	\$ 83,670.00	\$ 79,765.00	\$ 79,924.00	\$ 80,084.00	\$ 80,244.00	\$ 80,405.00	\$ 80,566.00	\$ 80,727.00	\$ 80,888.00	\$ 81,050.00	\$ 967,559
Transportation	\$ 38,115.00	\$ 39,600.00	\$ 42,158.00	\$ 41,919.00	\$ 42,003.00	\$ 42,087.00	\$ 42,171.00	\$ 42,256.00	\$ 42,340.00	\$ 42,425.00	\$ 42,510.00	\$ 42,595.00	\$ 500,179
Total	\$ 2,827,995	\$ 3,433,323	\$ 2,779,124	\$ 2,797,137	\$ 2,802,930	\$ 2,808,336	\$ 2,814,152	\$ 2,819,581	\$ 2,825,420	\$ 2,830,870	\$ 2,836,732	\$ 2,842,205	\$ 34,417,805

Rhode Island Works SFY 2027	July	August	September	October	November	December	January	February	March	April	May	June	Total
Persons	9,406	9,425	9,444	9,463	9,482	9,501	9,520	9,539	9,558	9,577	9,596	9,615	9,510
Cases	3,762	3,770	3,777	3,785	3,793	3,800	3,808	3,815	3,823	3,831	3,838	3,846	3,804
Persons/case	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.50	2.5
Average cost per person	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288	\$ 288.00
Average cost per case	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720	\$ 720.00
Regular	\$ 2,519,321	\$ 2,524,360	\$ 2,529,409	\$ 2,534,468	\$ 2,539,536	\$ 2,544,616	\$ 2,549,705	\$ 2,554,804	\$ 2,559,914	\$ 2,565,034	\$ 2,570,164	\$ 2,574,570	\$ 30,565,901
Two Parent	\$ 189,626	\$ 190,006	\$ 190,386	\$ 190,766	\$ 191,148	\$ 191,530	\$ 191,913	\$ 192,297	\$ 192,682	\$ 193,067	\$ 193,453	\$ 193,838	\$ 2,300,659
Total	\$ 2,708,947	\$ 2,714,366	\$ 2,719,795	\$ 2,725,234	\$ 2,730,684	\$ 2,736,146	\$ 2,741,618	\$ 2,747,101	\$ 2,752,596	\$ 2,758,101	\$ 2,763,617	\$ 2,768,355	\$ 32,866,560
Catastrophic	\$ 200	\$ -	\$ 200	\$ -	\$ 200	\$ -	\$ 200	\$ -	\$ 200	\$ -	\$ -	\$ -	\$ 1,000
Clothing	\$ 695,000	\$ 20,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 715,000
Supportive Services	\$ 81,212	\$ 81,374	\$ 81,537	\$ 81,700	\$ 81,864	\$ 82,027	\$ 82,191	\$ 82,356	\$ 82,521	\$ 82,686	\$ 82,851	\$ 83,017	\$ 985,336
Transportation	\$ 42,680	\$ 42,765	\$ 42,851	\$ 42,937	\$ 43,023	\$ 43,109	\$ 43,195	\$ 43,281	\$ 43,368	\$ 43,454	\$ 43,541	\$ 43,628	\$ 517,832
Total	\$ 3,528,039	\$ 2,858,505	\$ 2,844,383	\$ 2,849,871	\$ 2,855,771	\$ 2,861,282	\$ 2,867,204	\$ 2,872,738	\$ 2,878,685	\$ 2,884,241	\$ 2,890,009	\$ 2,895,000	\$ 35,085,728

**RI Department of Human Services
Child Care Caseload and Expenditures
November 2025 Caseload**

Cycle #	2023	
	Total children	Total subsidies
1	5,870	\$ 2,338,018
2	5,876	\$ 2,424,001
3	5,892	\$ 2,404,087
4	5,710	\$ 2,348,194
5	5,870	\$ 2,304,555
6	5,650	\$ 2,329,917
7	5,219	\$ 1,917,013
8	5,130	\$ 1,888,798
9	5,313	\$ 2,057,909
10	5,430	\$ 2,008,052
11	5,343	\$ 1,995,049
12	5,431	\$ 1,978,401
13	5,497	\$ 2,035,899
14	5,534	\$ 2,119,504
15	5,504	\$ 2,153,968
16	5,587	\$ 5,165,806
17	5,650	\$ 2,202,104
18	5,687	\$ 2,194,655
19	5,701	\$ 2,211,396
20	5,722	\$ 2,247,284
21	5,560	\$ 2,230,260
22	5,599	\$ 2,216,395
23	5,800	\$ 2,301,674
24	5,778	\$ 2,313,991
25	5,687	\$ 2,196,302
26	5,692	\$ 2,226,951
Total	5,605	\$ 59,810,183
		10,671

2024	
Total children	Total subsidies
5,890	\$ 2,371,712
5,907	\$ 2,494,244
5,991	\$ 2,593,424
5,676	\$ 2,390,899
5,704	\$ 2,266,807
5,494	\$ 2,152,228
5,563	\$ 2,184,816
5,581	\$ 2,183,761
5,594	\$ 2,192,547
5,816	\$ 2,302,068
5,686	\$ 2,219,436
5,774	\$ 2,207,856
5,697	\$ 2,241,586
5,626	\$ 2,138,422
5,710	\$ 2,255,129
5,693	\$ 2,217,855
5,668	\$ 2,181,494
5,794	\$ 2,228,428
5,730	\$ 2,231,161
5,873	\$ 2,262,323
5,859	\$ 2,243,933
5,894	\$ 2,290,867
5,988	\$ 2,398,454
5,874	\$ 2,299,778
5,835	\$ 2,226,289
5,868	\$ 2,313,145
5,761	\$ 59,088,662
	10,257

2.8% -1.2%

Provider Pilot	
Total children	Total subsidies
246	\$ 2,562,347

2024	
Total children	Total subsidies
6,007	\$ 61,651,009
	10,263

2025	
Total children	Total subsidies
6,169	\$ 2,720,273
6,086	\$ 2,693,728
6,002	\$ 2,673,649
5,766	\$ 2,586,096
5,934	\$ 2,549,799
5,755	\$ 2,415,556
5,825	\$ 2,385,568
5,865	\$ 2,372,308
5,770	\$ 2,354,597
5,814	\$ 2,352,619
5,687	\$ 2,334,259
6,122	\$ 2,602,526
6,149	\$ 2,503,655
6,119	\$ 2,665,546
6,046	\$ 2,508,197
6,174	\$ 2,610,394
5,833	\$ 2,402,100
6,039	\$ 2,505,138
6,089	\$ 2,523,738
6,245	\$ 2,711,306
6,283	\$ 2,584,341
6,179	\$ 2,547,562
6,224	\$ 2,586,438
6,025	\$ 2,477,889
6,129	\$ 2,558,249
6,132	\$ 2,572,755
6,018	\$ 65,798,282
	10,934

4.5% 11.4%

Provider Pilot	
Total children	Total subsidies
446	\$ 5,109,265

2025	
Total children	Total subsidies
6,464	\$ 70,907,547
	10,970

2026	
Total children	Total subsidies
6,204	\$ 2,694,619
6,292	\$ 3,013,918
6,146	\$ 2,806,536
6,100	\$ 2,798,125
6,046	\$ 2,540,825
6,079	\$ 2,549,732
6,111	\$ 2,558,692
6,157	\$ 2,573,159
6,202	\$ 2,587,680
6,248	\$ 2,602,257
6,292	\$ 2,616,052
6,336	\$ 2,629,905
6,388	\$ 2,647,173
6,441	\$ 2,664,922
6,490	\$ 2,681,053
6,540	\$ 2,697,668
6,588	\$ 2,713,507
6,637	\$ 2,729,413
7,069	\$ 2,906,467
7,120	\$ 2,923,836
7,163	\$ 2,937,298
7,205	\$ 2,951,060
7,248	\$ 2,964,897
7,294	\$ 2,980,144
7,340	\$ 2,995,394
7,386	\$ 3,010,722
6,582	\$ 71,775,054
	10,905

9.4% 9.1%

Provider Pilot	
Total children	Total subsidies
630	\$ 4,227,950

2026	
Total children	Total subsidies
7,212	\$ 76,003,004
	10,539

2027	
Total children	Total subsidies
7,401	\$ 3,014,277
7,416	\$ 3,017,837
7,431	\$ 3,021,400
7,499	\$ 3,033,500
7,514	\$ 3,037,072
7,529	\$ 3,040,648
7,544	\$ 3,044,228
7,559	\$ 3,047,813
7,574	\$ 3,051,402
7,589	\$ 3,054,995
7,604	\$ 3,058,592
7,619	\$ 3,062,193
7,635	\$ 3,065,799
7,650	\$ 3,069,409
7,665	\$ 3,073,024
7,680	\$ 3,076,642
7,695	\$ 3,080,265
7,711	\$ 3,083,892
7,726	\$ 3,087,524
7,741	\$ 3,091,159
7,757	\$ 3,094,799
7,772	\$ 3,098,444
7,788	\$ 3,102,092
7,803	\$ 3,105,745
7,819	\$ 3,109,402
7,834	\$ 3,113,064
7,637	\$ 79,735,216
	10,441

16.0% 11.1%

Provider Pilot	
Total children	Total subsidies
630	\$ 3,159,052

2027	
Total children	Total subsidies
8,267	\$ 82,894,268
	10,027

Department of Human Services
General Public Assistance (GPA) Caseload and Expenditures
November 2025 Caseload

GPA (SFY 2025)	July	August	September	October	November	December	January	February	March	April	May	June	Total
Total Persons	589	602	618	600	595	584	632	657	685	665	674	683	632
Average cost per person / Bridge	\$ 157.03	\$ 129.37	\$ 167.47	\$ 153.67	\$ 185.54	\$ 178.59	\$ 153.71	\$ 179.78	\$ 147.30	\$ 164.80	\$ 168.40	\$ (199.99)	\$ 136.03
Bridge Payments	\$ 115,400	\$ 115,300	\$ 176,800	\$ 116,200	\$ 116,600	\$ 118,800	\$ 122,300	\$ 127,400	\$ 131,945	\$ 129,000	\$ 134,900	\$ (104,700)	\$ 1,299,945
Bridge Recoveries	\$ (22,904)	\$ (37,409)	\$ (16,895)	\$ (23,997)	\$ (6,199)	\$ (14,498)	\$ (24,997)	\$ (9,099)	\$ (30,896)	\$ (28,442)	\$ (21,394)	\$ (31,599)	\$ (268,329)
Total Bridge Payments	\$ 92,496	\$ 77,891	\$ 159,905	\$ 92,203	\$ 110,401	\$ 104,302	\$ 97,303	\$ 118,301	\$ 101,049	\$ 100,558	\$ 113,506	\$ (136,299)	\$ 1,031,616
Burials	\$ 28,140	\$ 53,115	\$ 33,386	\$ 96,440	\$ 44,475	\$ 27,750	\$ 71,968	\$ 71,924	\$ 53,390	\$ 50,431	\$ 44,564	\$ 30,803	\$ 606,387
Total	\$ 120,636	\$ 131,006	\$ 193,291	\$ 188,643	\$ 154,876	\$ 132,052	\$ 169,271	\$ 190,225	\$ 154,439	\$ 150,989	\$ 158,070	\$ (105,496)	\$ 1,638,003

GPA (SFY 2026)	July	August	September	October	November	December	January	February	March	April	May	June	Total
Total Persons	702	713	734	745	756	768	779	791	803	815	827	839	773
Average cost per person / Bridge	\$ 192	\$ 126	\$ 166	\$ 162	\$ 162	\$ 162	\$ 163	\$ 163	\$ 164	\$ 164	\$ 165	\$ 165	\$ 162.74
Bridge Payments	\$ 135,000	\$ 138,000	\$ 144,400	\$ 143,042	\$ 145,188	\$ 147,365	\$ 149,576	\$ 151,819	\$ 154,097	\$ 156,408	\$ 158,754	\$ 161,136	\$ 1,784,785
Bridge Recoveries	\$ (22,700)	\$ (48,200)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (275,200)
Total Bridge Payments	\$ 135,000	\$ 89,800	\$ 121,700	\$ 120,342	\$ 122,488	\$ 124,665	\$ 126,876	\$ 129,119	\$ 131,397	\$ 133,708	\$ 136,054	\$ 138,436	\$ 1,509,576
Burials	\$ -	\$ 53,981	\$ 79,725	\$ 54,590	\$ 54,574	\$ 625,000							
Total	\$ 135,000	\$ 143,781	\$ 201,425	\$ 174,932	\$ 177,078	\$ 179,255	\$ 181,466	\$ 183,709	\$ 185,987	\$ 188,298	\$ 190,644	\$ 193,010	\$ 2,134,576

GPA (SFY 2027)	July	August	September	October	November	December	January	February	March	April	May	June	Total
Total Persons	839	852	865	878	891	904	918	931	945	960	974	989	912
Average cost per person / Bridge	\$ 165	\$ 165	\$ 166	\$ 166	\$ 167	\$ 167	\$ 167	\$ 168	\$ 168	\$ 168	\$ 169	\$ 169	\$ 167.12
Bridge Payments	\$ 161,136	\$ 163,553	\$ 166,006	\$ 168,496	\$ 171,024	\$ 173,589	\$ 176,193	\$ 178,836	\$ 181,518	\$ 184,241	\$ 187,005	\$ 189,810	\$ 2,101,404
Bridge Recoveries	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (22,700)	\$ (272,400)
Total Bridge Payments	\$ 138,436	\$ 140,853	\$ 143,306	\$ 145,796	\$ 148,324	\$ 150,889	\$ 153,493	\$ 156,136	\$ 158,818	\$ 161,541	\$ 164,305	\$ 167,110	\$ 1,828,961
Burials	\$52,100	\$51,900	\$ 625,000										
Total	\$ 190,536	\$ 192,953	\$ 195,406	\$ 197,896	\$ 200,424	\$ 202,989	\$ 205,593	\$ 208,236	\$ 210,918	\$ 213,641	\$ 216,405	\$ 219,010	\$ 2,453,961

November 2025 CEC: CASH ASSISTANCE

Fund/ Agency	RIFANS Account	RIFANS NATURAL	Line Sequence	FY 2026 DHS	FY 2027 DHS
CASH ASSISTANCE					
SSI					
10.069	2385101	651120	Aid to the Aged, Blind or Disabled	\$ 16,605,846	\$ 16,584,573
			Total General Revenue	\$ 16,605,846	\$ 16,584,573
			TOTAL - SSI	\$ 16,605,846	\$ 16,584,573
TANF/RIW					
10.069	2400101	651120	FIP/TANF - Regular	\$ 33,916,826	\$ 34,566,896
10.069	2400107	651120	Catastrophic Aid	\$ 800	\$ 1,000
10.069	2400114	651120	RIPTA Transportation Benefit	\$ 500,179	\$ 517,832
			TOTAL FF- TANF/RIW	\$ 34,417,805	\$ 35,085,728
			TOTAL ALL FUNDS- TANF/RIW	\$ 34,417,805	\$ 35,085,728
CHILD CARE					
10.069	2395101	651250	Child Care - Non M.O.E.	\$ 30,000	\$ 30,000
10.069	2395102	651250	Child Care	\$ 5,321,126	\$ 5,321,126
10.069	2395103	651250	Child Care - Matching	\$ 4,530,270	\$ 4,433,095
			TOTAL GR- CHILD CARE	\$ 9,881,396	\$ 9,784,221
10.069	2400105	651250	Child Care Mandatory (CCDF)	\$ 6,633,774	\$ 6,633,774
10.069	2400106	651250	Child Care Matching (CCDF)	\$ 6,054,473	\$ 6,054,473
10.069	2400108	651250	Child Care Development Block Grant (DISC)	\$ 12,000,000	\$ 12,000,000
10.069	2400112	651250	Child Care - TANF Funds	\$ 41,433,361	\$ 48,421,800
			TOTAL FF- CHILD CARE	\$ 66,121,608	\$ 73,110,047
			TOTAL ALL FUNDS- CHILD CARE	\$ 76,003,004	\$ 82,894,268
GENERAL PUBLIC ASSISTANCE					
10.069	2405101	651120	General Public Assistance (CEC Only)	\$ 2,134,576	\$ 2,453,961
			TOTAL GR- GPA CEC	\$ 2,134,576	\$ 2,453,961
			GRAND TOTAL GR- CEC CASH	\$ 28,621,818	\$ 28,822,755
			GRAND TOTAL FF- CEC CASH	\$ 100,539,413	\$ 108,195,775
			GRAND TOTAL AF- CEC CASH	\$ 129,161,231	\$ 137,018,530