TO: Commissioners of Community Social Services

DATE: December 17, 1993

SUBJECT: Child Care: Market Rate Survey of Providers

SUGGESTED DISTRIBUTION: Directors of Services Directors of Income Maintenance Accounting Supervisors Child Care Supervisors and Staff Staff Development Coordinators


ATTACHMENTS: Attachment A-Dear Provider Letter (Available on-line)
Attachment B-Survey Instructions (Available on-line)
Attachment C-Market Rate Survey (Not available on-line)

FILING REFERENCES

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DSS-329EL (Rev. 9/89)
The purpose of this Informational Letter (INF) is to solicit input from social services districts regarding the market rate survey which the Department will be conducting.

The federal Family Support Act of 1988 (FSA) required the Department to establish child care market rates. In addition, the federal regulations implementing the FSA prescribe that the Department must review the local market rates at least once every two years and, if appropriate, make adjustments to such rates to reflect changes in the cost of child care services. The current market rates became effective on December 31, 1992.

The federal rules prescribe that market rates be established at the 75th percentile of actual provider charges and must differentiate by type of provider, age of child and full-time vs. part-time. In order to collect the data necessary to review the market rates, the Department will survey all registered family day care providers; licensed group family day care providers; licensed day care centers; and registered school-aged child care programs. The responses to this survey will be reviewed and adjustments to the current local market rates will be made where appropriate.

The attachments to this INF provide social services districts with a copy of the survey and instructions to providers which were used to solicit information for the most recent market rate review. Social services districts are encouraged to make recommendations for changes in the way market rates are applied and calculated, as well as the way that information is solicited from providers. In order to be considered during the development of the next market rate survey, such recommendations should be submitted no later than January 31, 1994. Comments or suggestions may be sent on-line to User ID SVC101 or mailed to:

Ms. Susan Duchnycz  
New York State Department of Social Services  
Bureau of Early Childhood Services  
40 North Pearl Street 11-B  
Albany, New York 12243-0001

If you have questions regarding this survey, please call Susan Duchnycz, Bureau of Early Childhood Services at (518) 474-9324. Ms. Duchnycz may also be contacted on-line, User ID SVC101.

Frank Puig  
Deputy Commissioner  
Division of Services and Community Development
Dear Child Care Provider:

WE NEED YOUR HELP. Enclosed is a survey which will be used to determine the local market rates for day care in New York State. IT IS VERY IMPORTANT THAT YOU RESPOND TO THIS SURVEY.

You may recall completing a similar survey two years ago. State law requires that the local market rates be evaluated every two years. The information you provide will be used to establish the maximum rates which your county department of social services can pay for child care services for low income families in your area. These rates are critical to the ability of low income families in the state to secure quality care for their children.

The survey should not take a lot of your time. We are under very short timeframes so we ask that you take the time to answer the survey and mail it to us today.

If you have questions regarding how to complete the survey you may call Joseph De Lucia, Bureau of Early Childhood Services at 1-800-342-3715, extension 4-9324 or (518) 474-9324. Thank you for taking time to complete and mail this survey.

Sincerely,

Jo Ann Friedell
Director
Bureau of Early Childhood Services

Attachments
SURVEY INSTRUCTIONS

Please type or print your answers.

IF YOU HAVE MORE THAN ONE PERMIT PLEASE COMPLETE A SEPARATE SURVEY FOR EACH PROGRAM.

# 1: Name/Address
Permit # - Fill in the number which is listed on your permit or registration to operate.

County # - Fill in the code for the county in which your program is located. A list of county codes is enclosed for your reference.

Contact person - List the individual whom we should call if we have questions regarding your survey responses.

# 2: Type of Program
Circle the number under the type of program which your permit or registration authorizes you to operate.

# 3: Number of Child Care Slots
Enter the number of children you currently have enrolled in each age group.

# 4: Rates
For each of the categories (full-time, part-time, evening, and weekend) listed, please indicate the amount you charge for each of the age groups. Disregard any categories and age groups which do not apply to your program.

If you do not normally charge rates for the time period (weekly, hourly, etc.) requested in the survey, indicate what you would need to charge if you did charge on that basis.

If you charge on a sliding rate scale based on family income, indicate the amount you would need to charge if everyone paid the same rate.

# 5: Special Needs
This section is intended to collect information on the availability and cost of child care for children with special needs.

YOU MAY RETURN THE SURVEY IN THE ENVELOPE PROVIDED. IF THE ENVELOPE HAS BEEN MISPLACED, PLEASE MAIL THE SURVEY TO THE ADDRESS LISTED ON THE FRONT OF THE SURVEY FORM. THANK YOU VERY MUCH FOR YOUR COOPERATION!