Illinois Legislative Agenda

SPRING 2021 / FISCAL YEAR 2022



Grow, strengthen the state's early care and education system through a Fiscal Year 2022 budget that:

- Increases, at a minimum, funding for the Early Childhood Block Grant (ECBG) by \$50 million (9.2%), with a significant portion of these funds (\$30 million) to be used for increased workforce compensation. Early childhood teachers remain woefully undercompensated, particularly those working in community-based settings. This increased investment would allow the Illinois State Board of Education (to raise salaries for infant/toddler teachers in center-based programs (\$15 million); increase salaries for home visitors working in the state's Prevention Initiative program (\$7 million); and increase salaries for Preschool for All (PFA) teachers working in child care centers to achieve parity with school-based staff (\$7-\$13 million). Increased funding can also support specific activities in response to the COVID-19 pandemic.
- Increases, at a minimum, funding for the Early Intervention (EI) program by \$25 million (21.6%). The EI program has a growing caseload, which means waitlists for families in some parts of the state. There are also groups of eligible children the system is not reaching with services successfully. Increased funds will accommodate the state's growing caseload; improve provider reimbursement rates (\$5-10 million); extend services for children who turn age 3 over the summer (\$1-2 million); maintain telehealth as an approved service delivery model beyond the COVID-19 crisis; decrease caseloads and increase salaries for service coordinators; create infrastructure to implement reflective supervision and practice-based coaching for providers; and support innovative service delivery models aimed at enhancing engagement of families who experience the greatest disparities to access; among other improvements.
- Increases, at a minimum, funding for voluntary home visiting programs (Parents Too Soon and Healthy Families budget lines—Department of Human Services) by \$4 million (23.7%). These budget lines have not received an increased appropriation in well over a decade. A sizeable portion of this investment (\$2.3 million) would be used to increase wages for home visitors to the state's recommended salary levels. Funds would also be used expand access to services, particularly during the prenatal period, and to support COVID-19-related expenditures.
- Invest significant state and federal funds into the Child Care Assistance Program (CCAP). In Fiscal Year 2021, emergency federal child care funds helped stabilize payments to providers serving children through the CCAP program, despite dramatically reduced enrollment. Illinois also directed a significant amount of its federal COVID-19 relief fund dollars to child care providers to cover the costs associated with reopening their programs during the pandemic. In Fiscal Year 2022, providers should be granted the resources needed to protect the children and families they serve, their staff and the lives of their own families. State and federal investments should be used to help providers stay in business. Funding should also be used to increase staff compensation; to increase reimbursement rates targeted to ages and regions furthest below market rate; to provide co-payment relief for families; to increase funding for Infant/Early Childhood Mental Health Consultation (I/ECMHC); to conduct outreach and provide targeted coaching and access to financial supports in a way that prioritizes increasing the diversity of the teacher pipeline; and to support specific activities in response to the COVID-19 pandemic. We believe state and federal funds should prioritize support for infant and toddler family and center-based care.

Support legislation to expand the Medicaid program to cover evidence-based home visiting, doula services. Parents deserve access to quality services that keep them and their children healthy. Too many families, particularly Black, Latinx and poor families, do not receive the types of early care and education interventions proven to support

Black, Latinx and poor families, do not receive the types of early care and education interventions proven to support successful births and proper child development. By expanding Medicaid to cover these important interventions, the state can expand home visiting and doula capacity and coordinate services and supports for children and families from the prenatal through early childhood periods.

Support legislation to maintain telehealth in the Early Intervention (EI) program. Each year over 23,000 young children are found eligible to receive EI services. Access to telehealth within the EI program has been a lifeline for families and providers alike during the COVID-19 pandemic. In many instances, telehealth can support service provision while shortening wait times for certain therapies. There are also examples where teletherapy helps engage families better than in-person visits. This legislation would ensure that telehealth remains an option for delivery of all EI services beyond the current public health emergency.

Support legislation to create the Family and Medical Leave Insurance Program. Robust paid family leave polices afford parents the opportunity in the first weeks of life to focus on their role as a parent and on the well-being of their child, particularly when affordable, quality infant care is in low supply and licensed child care is not available until a baby is 6 weeks old.