



CHILD CARE SCHOLARSHIP INCOME ELIGIBILITY LEVELS (Effective July 10, 2017)

	TIER 1												TIER 2	
Family Size	Step 1		Step 2		Step 3		Step 4		Step 5		Step 6		Step 7-GPO Redetermination Only	
	≤ 100% of FPG		≤ 120% of FPG		≤ 140% of FPG		≤ 160% of FPG		≤ 190% of FPG		≤ 220% of FPG		≤ 250% of FPG	
	MONTHLY	YEARLY	MONTHLY	YEARLY	MONTHLY	YEARLY	MONTHLY	YEARLY	MONTHLY	YEARLY	MONTHLY	YEARLY	MONTHLY	YEARLY
1	\$1,005.00	\$12,060.00	\$1,206.00	\$14,472.00	\$1,407.00	\$16,884.00	\$1,608.00	\$19,296.00	\$1,910.00	\$22,914.00	\$2,211.00	\$26,532.00	\$2,513.00	\$30,150.00
2	\$1,354.00	\$16,240.00	\$1,624.00	\$19,488.00	\$1,895.00	\$22,736.00	\$2,166.00	\$25,984.00	\$2,572.00	\$30,856.00	\$2,978.00	\$35,728.00	\$3,384.00	\$40,600.00
3	\$1,702.00	\$20,420.00	\$2,042.00	\$24,504.00	\$2,383.00	\$28,588.00	\$2,723.00	\$32,672.00	\$3,234.00	\$38,798.00	\$3,744.00	\$44,924.00	\$4,255.00	\$51,050.00
4	\$2,050.00	\$24,600.00	\$2,460.00	\$29,520.00	\$2,870.00	\$34,440.00	\$3,280.00	\$39,360.00	\$3,895.00	\$46,740.00	\$4,510.00	\$54,120.00	\$5,125.00	\$61,500.00
5	\$2,399.00	\$28,780.00	\$2,878.00	\$34,536.00	\$3,358.00	\$40,292.00	\$3,838.00	\$46,048.00	\$4,557.00	\$54,682.00	\$5,277.00	\$63,316.00	\$5,996.00	\$71,950.00
6	\$2,747.00	\$32,960.00	\$3,296.00	\$39,552.00	\$3,846.00	\$46,144.00	\$4,395.00	\$52,736.00	\$5,219.00	\$62,624.00	\$6,043.00	\$72,512.00	\$6,867.00	\$82,400.00
7	\$3,095.00	\$37,140.00	\$3,714.00	\$44,568.00	\$4,333.00	\$51,996.00	\$4,952.00	\$59,424.00	\$5,881.00	\$70,566.00	\$6,809.00	\$81,708.00	\$7,738.00	\$92,850.00
8	\$3,444.00	\$41,320.00	\$4,132.00	\$49,584.00	\$4,821.00	\$57,848.00	\$5,510.00	\$66,112.00	\$6,543.00	\$78,508.00	\$7,576.00	\$90,904.00	\$8,609.00	\$103,300.00
+ person	\$349.00	\$4,180.00	\$418.00	\$5,016.00	\$488.00	\$5,852.00	\$558.00	\$6,688.00	\$662.00	\$7,942.00	\$767.00	\$9,196.00	\$871.00	\$10,450.00

Tier 1 (Steps 1-6) is used for initial eligibility determination only.

Tier 2 (Step 7) is Graduated Phase Out (GPO) and is used only at redetermination. Step 7 cannot be used at initial eligibility.

Key:

FPG = Federal Poverty Guidelines

Family Size = Total Number of Family Members in Household

Income = Gross Income Before Taxes and Expenses (all income is counted, child support etc.)

Step = Used to Calculate Cost Share

FAMILY COST SHARE

- The cost share is the amount the Department has determined that families owe their child care provider as their contribution towards the cost of child care.
- The family's cost share is based on a percentage of the family's gross income, and the percentage used is based on the income Step level by which the family became eligible for NH Child Care Scholarship. This means the cost share will be different for each family.
- The Department will subtract the cost share from either the provider's rate to private pay families or the NH Weekly Standard Rate, whichever is less.
- The payment rate based on the cost share becomes effective the Monday following the change. The chart below lists the percentages by Step level used in the cost share determination process:

Family Eligibility and Cost Share		
Tier 1		
Step	Eligibility Limits	Percent of Family Income Assigned to Cost Share
1	≤ 100% FPL	4.75 %
2	>100% FPG≤120% FPG	7.5 %
3	>120% FPG≤140% FPG	10.0 %
4	>140% FPG≤160% FPG	12.5 %
5	>160% FPG≤190% FPG	14.0 %
6	>190% FPG≤220% FPG	17.0 %
Tier 2 Graduate Phase Out (GPO)		
7	>220% FPG≤250% FPG	20.0 %

State Median Income (SMI)		
Family Size	85% SMI MONTHLY	85% SMI YEARLY
1	\$3,702	\$44,420
2	\$4,841	\$58,087
3	\$5,980	\$71,755
4	\$7,119	\$85,422
5	\$8,257	\$99,090
6	\$9,396	\$112,757
7	\$9,610	\$115,320
8	\$9,824	\$117,883
A family with income over 85% of the State Median Income (SMI) is not eligible for Child Care Scholarship.		

COST SHARE AND CO-PAY

- Families with more than one child eligible for NH Child Care Scholarship will have the family cost share amount divided equally among all the eligible children linked to enrolled providers. This family cost share, once it is divided by the number of children in the family, is then referred to as the child's cost share.
- Co-pay is the difference between the provider's charge and the NH Weekly Standard Rate. It only occurs when the provider's charge is greater than the NH Weekly Standard Rate. The provider may choose whether to charge families for this difference. Families are responsible for paying this difference, if charged, to the provider in addition to their cost share.
- There is no co-payment when the provider's charge is less than the NH Weekly Standard Rate.