Think Babies Michigan Policy Agenda: 2020-2025

Vision: Michigan is a top state to have and raise a baby.

Policy Priorities:

1. Ensure that race, income or zip code does not determine a child’s destiny in Michigan.
   - Require that all state department employees and local providers (i.e. healthcare, education, child care) who serve and interact with families and young children participate in implicit bias training.
   - Require that state departments disaggregate county and city early childhood program data by race and ethnicity, publishing reports for public use.
   - Call for lawmakers to consider the disaggregated data and the impact of budget decisions on young children and families of color and to allocate targeted funding accordingly.
   - Ensure that all children under age 3 with developmental delays and/or disabilities and their families receive high-quality early intervention services, provided in compliance with federal law for minimum service requirements and based on the child’s needs and family choice.
   - Offer a postpartum check-up to all women with newborn babies.

2. Develop a statewide, cross-sector infant-toddler workforce strategy.
   - Fill child care, early intervention and home visiting workforce shortages by pursuing compensation and retention strategies that have been successfully utilized by other states, such as refundable tax credits or retention bonuses, to reduce high turnover and support small businesses.
   - Increase scholarships for credential and higher education attainment in the infant-toddler fields.

3. Expand enrollment in and access to high quality child care, early intervention, home visiting and preventative care services.
   - Increase child care subsidy entry eligibility from 130% to 185% of the federal poverty level, mirroring other public benefits like WIC and free-and reduced-price school meals.
   - Increase provider reimbursement rates, fund contracts to expand the supply of quality, affordable infant-toddler child care and incentivize shared service models at the local level to leverage opportunities to blend and braid funding and reduce administrative costs for child care providers.
   - Reduce child care deserts, especially in rural communities, by mitigating barriers in accessing high-quality license-exempt child care (“family, friend and neighbor” or “kinship” care) for both families and providers.
   - Ensure Michigan maximizes all federal and state funding for child care by augmenting the caseload consensus model and strengthening the budget process used to determine child care funding levels.
   - Increase home visiting and early intervention funding by maximizing federal funding opportunities and increasing state commitment to both services and much-needed infrastructure.

4. Strengthen how families learn about and access programs and services.
   - Fund community-based organizations and parent-led initiatives to support families in learning about and choosing early childhood services, building on existing MI Bridges Navigator system.
   - Further streamline and simplify applications for care and services and enhance existing efforts to outstation state eligibility specialists in community-based organizations and schools by expanding locations to include Michigan Works offices and public libraries and by cross-training specialists and navigators on all programs.
   - Increase parent choice and strengthen referrals through improved infrastructure (such as centralized intake) that matches available resources to community needs and collects data on program utilization.

5. Actively support efforts led by partners and allies that positively impact infants and toddlers and their families.
   - Extend postpartum Medicaid coverage, increase breastfeeding and expand access to preventative health care, including dental and behavioral health (led by the Council for Maternal and Child Health and MDHHS Title V strategic priorities).
   - Strengthen transitions between birth-to-five and K-12 and among/within early childhood programs (led by MDE, PDG-BS strategic priorities).