

UAW/UMass Health & Welfare Trust Fund Childcare Reimbursement Summary Post-Doctoral Unit, Fall 2020 Period

Applicant Information Total applications: 9
Total eligible applicants: 9

Total amount budgeted for this period: approx. \$20,472. The fall period has 4 months (Sept-Dec) and if we prorate the 2020-21 annual budget of \$61,415 for PD childcare reimbursements, this results in a budgeted amount of \$20,472 for fall.

Period for Reimbursement: The Trust Fund is currently reimbursing for Fall 2020 (Sept-Dec).

Determining PD Eligibility: Applicants were cross-checked against the Sept and Dec 2020 Postdoc monthly employee file sent by HR. Using this file, FTEs were verified to be 50% FTE or greater and working in the unit during the period.

Determining Childcare Costs: These costs were reported by applicants and were confirmed by checking submitted receipts.

Determining Eligible Care: Applicants were eligible if they provided the name, license number and receipts for a licensed provider of infant, toddler or pre-school care (in a group or home setting), a licensed and/or school based after-school care or camp care provider for school-aged children, organizational/center based extracurricular activities (i.e. excludes private lessons), tutoring, homework assistance and online instructional programming or FFN provider fees according to specified requirements.

Determining Level of Subsidy: We utilized documented adjusted gross income (AGI) from 2019 federal income tax returnsⁱ to determine income. Eligible applicants were sorted by family size and income according to the Commonwealth of Massachusetts EEC Financial Assistance Parent Co-Payment Table. This is the same table used by the University's Center for Early Education and Care in the subsidized classroom. CEEC uses this table in the following way: those families who meet the \$6.50 daily fee level and under are designated as able to pay \$1 per hour at CEEC and the Trust Fund already subsidizes that slot at 100%, resulting in the family paying \$0. Those families who meet the \$12.50 daily fee level and under are designated as able to pay \$2 per hour at CEEC and the Trust Fund already subsidizes that slot at 100%, resulting in the family paying \$0.

Any eligible applicant who met the above criteria (income levels 1-11) was prioritized for the highest possible reimbursement of their childcare expenses for this period (up to 100%). For remaining applicants whose income levels are above 11, the total amount paid for childcare is reduced by a flat expected parent co-payment (see the flat copayment chart attached).ⁱⁱ The Trust Fund typically reduces an applicant's total reported costs by this expected parent copay. For this period, the Trust Fund has elected not to assess the expected parent copayment due to COVID-19.

In addition, any childcare costs submitted for reimbursement by eligible applicants are automatically reduced by any GSS, CCAMPIS or GEO Childcare Fund amounts awarded to the applicant's household during the same period. When there is a GSS or CCAMPIS award and there are multiple children in the household, the GSS/CCAMPIS award is divided across all children.

For this period, the Trust Fund is able to reimburse all PD applicants in levels 1-28 at 100%.

ⁱ In the case of applicants who have not filed any US tax returned to date, we require documentation of income using a special form. For applicants whose home country has a tax treaty with the US resulting in an artificially low AGI, we require a completed IRS AGI calculator to be used to arrive at an approximate AGI.

ⁱⁱ In the case where a household has multiple children in childcare and for whom they are submitting receipts, we calculate an expected parent co-payment for all children for whom receipts are submitted.



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Commonwealth of Massachusetts
Department of Early Education and Care (EEC)

EEC FINANCIAL ASSISTANCE

PARENT CO-PAYMENT TABLE

Parent Co-Payment Schedule is used to determine the parent's co-payment once the family is determined to be eligible and is being enrolled in an early education and care program.

Step 2: Use This Form to Determine Parent Co-Payment

1. Find the column with the family's size written at the top.
2. Read down the column until you come to the correct income bracket.
3. Then read directly across to the right until you are under the "Daily Fee" column.

GROSS MONTHLY INCOME								PARENT CO-PAYMENT				FEE LEVEL
Family of Two	Family of Three	Family of Four	Family of Five	Family of Six	Family of Seven	Family of Eight	Family of Nine	Daily Fee	Weekly Fee	Daily Fee SACC Blended	Weekly Fee SACC Blended	
\$ 0-971	\$ 0-1180	\$ 0-1421	\$ 0-1663	\$ 0-1905	\$ 0-2146	\$ 0-2387	\$ 0-2630	\$ -	\$ -	\$ -	\$ -	1
\$ 972-1095	\$ 1181-1260	\$ 1422-1499	\$ 1664-1739	\$ 1906-1980	\$ 2147-2205	\$ 2388-2450	\$ 2631-2675	\$ 2.00	\$ 10.00	\$ 1.20	\$ 6.00	2
\$ 1096-1219	\$ 1261-1340	\$ 1500-1575	\$ 1740-1825	\$ 1981-2080	\$ 2206-2315	\$ 2451-2575	\$ 2676-2775	\$ 3.00	\$ 15.00	\$ 1.80	\$ 9.00	3
\$ 1220-1380	\$ 1341-1420	\$ 1576-1675	\$ 1826-1900	\$ 2081-2180	\$ 2316-2550	\$ 2576-2700	\$ 2776-2825	\$ 4.50	\$ 22.50	\$ 2.70	\$ 13.50	4
\$ 1381-1457	\$ 1421-1529	\$ 1676-1799	\$ 1901-2087	\$ 2181-2380	\$ 2551-2675	\$ 2701-2800	\$ 2826-2940	\$ 5.50	\$ 27.50	\$ 3.30	\$ 16.50	5
\$ 1458-1540	\$ 1530-1675	\$ 1800-1900	\$ 2088-2150	\$ 2381-2500	\$ 2676-2800	\$ 2801-2900	\$ 2941-3050	\$ 6.50	\$ 32.50	\$ 3.90	\$ 19.50	6
\$ 1541-1634	\$ 1676-1760	\$ 1901-2000	\$ 2151-2260	\$ 2501-2650	\$ 2801-2900	\$ 2901-3000	\$ 3051-3125	\$ 7.50	\$ 37.50	\$ 4.50	\$ 22.50	7
\$ 1635-1725	\$ 1761-1850	\$ 2001-2175	\$ 2261-2435	\$ 2651-2800	\$ 2901-3000	\$ 3001-3100	\$ 3126-3242	\$ 8.00	\$ 40.00	\$ 4.80	\$ 24.00	8
\$ 1726-1843	\$ 1851-1931	\$ 2176-2250	\$ 2436-2550	\$ 2801-3000	\$ 3001-3100	\$ 3101-3200	\$ 3243-3340	\$ 8.50	\$ 42.50	\$ 5.10	\$ 25.50	9
\$ 1844-1986	\$ 1932-2414	\$ 2251-2874	\$ 2551-3333	\$ 3001-3793	\$ 3101-3879	\$ 3201-3966	\$ 3341-4052	\$ 9.00	\$ 45.00	\$ 5.40	\$ 27.00	10
\$ 1987-2186	\$ 2415-2476	\$ 2875-3130	\$ 3334-3550	\$ 3794-3900	\$ 3880-4030	\$ 3967-4100	\$ 4053-4125	\$ 12.50	\$ 62.50	\$ 7.50	\$ 37.50	11
\$ 2187-2286	\$ 2477-2676	\$ 3131-3340	\$ 3551-3800	\$ 3901-4000	\$ 4031-4132	\$ 4101-4199	\$ 4126-4249	\$ 15.00	\$ 75.00	\$ 9.00	\$ 45.00	12
\$ 2287-2429	\$ 2677-2876	\$ 3341-3550	\$ 3801-4100	\$ 4001-4199	\$ 4133-4350	\$ 4200-4499	\$ 4250-4599	\$ 16.50	\$ 82.50	\$ 9.90	\$ 49.50	13
\$ 2430-2573	\$ 2877-3076	\$ 3551-3760	\$ 4101-4363	\$ 4200-4500	\$ 4351-4700	\$ 4500-4799	\$ 4600-4899	\$ 17.50	\$ 87.50	\$ 10.50	\$ 52.50	14
\$ 2574-2717	\$ 3077-3277	\$ 3761-3970	\$ 4364-4607	\$ 4501-4966	\$ 4701-4998	\$ 4800-5099	\$ 4900-5149	\$ 19.00	\$ 95.00	\$ 11.40	\$ 57.00	15
\$ 2718-2860	\$ 3278-3477	\$ 3971-4180	\$ 4608-4851	\$ 4967-5444	\$ 4999-5549	\$ 5100-5650	\$ 5150-5699	\$ 20.50	\$ 102.50	\$ 12.30	\$ 61.50	16
\$ 2861-3004	\$ 3478-3677	\$ 4181-4490	\$ 4852-5095	\$ 5445-5939	\$ 5550-6074	\$ 5651-6209	\$ 5700-6344	\$ 22.00	\$ 110.00	\$ 13.20	\$ 66.00	17
\$ 3005-3132	\$ 3678-3869	\$ 4491-4606	\$ 5096-5342	\$ 5940-6079	\$ 6075-6217	\$ 6210-6355	\$ 6345-6494	\$ 23.00	\$ 115.00	\$ 13.80	\$ 69.00	18
\$ 3133-3322	\$ 3870-4104	\$ 4607-4885	\$ 5343-5667	\$ 6080-6433	\$ 6218-6595	\$ 6356-6743	\$ 6495-6887	\$ 24.00	\$ 120.00	\$ 14.40	\$ 72.00	19
\$ 3323-3410	\$ 4105-4210	\$ 4886-5012	\$ 5668-5812	\$ 6434-6615	\$ 6596-6765	\$ 6744-6915	\$ 6888-7066	\$ 25.00	\$ 125.00	\$ 15.00	\$ 75.00	20
\$ 3411-3549	\$ 4211-4380	\$ 5013-5214	\$ 5813-6047	\$ 6616-6883	\$ 6766-7039	\$ 6916-7195	\$ 7067-7350	\$ 26.00	\$ 130.00	\$ 15.60	\$ 78.00	21
\$ 3550-3685	\$ 4381-4551	\$ 5215-5418	\$ 6048-6285	\$ 6884-7153	\$ 7040-7314	\$ 7196-7477	\$ 7351-7639	\$ 27.00	\$ 135.00	\$ 16.20	\$ 81.00	22
\$ 3686-3908	\$ 4552-4828	\$ 5419-5747	\$ 6286-6666	\$ 7154-7586	\$ 7315-7758	\$ 7478-7932	\$ 7640-8103	\$ 28.00	\$ 140.00	\$ 16.80	\$ 84.00	23
\$ 3909-4885	\$ 4829-6035	\$ 5748-7184	\$ 6667-8333	\$ 7587-9483	\$ 7759-9698	\$ 7933-9915	\$ 8104-10129	\$ 29.00	\$ 145.00	\$ 17.40	\$ 87.00	24
\$ 4886-5150	\$ 6036-6325	\$ 7185-7550	\$ 8334-8750	\$ 9484-9950	\$ 9699-10300	\$ 9916-10400	\$ 10130-10650	\$ 32.00	\$ 160.00	\$ 19.20	\$ 96.00	25
\$ 5151-5400	\$ 6326-6625	\$ 7551-7900	\$ 8751-9200	\$ 9951-10400	\$ 10301-10750	\$ 10401-10900	\$ 10651-11150	\$ 35.00	\$ 175.00	\$ 21.00	\$ 105.00	26
\$ 5401-5650	\$ 6626-6925	\$ 7901-8250	\$ 9201-9550	\$ 10401-10950	\$ 10751-11150	\$ 10901-11400	\$ 11151-11650	\$ 38.00	\$ 190.00	\$ 22.80	\$ 114.00	27
\$ 5651-5849	\$ 6925-7225	\$ 8251-8601	\$ 9551-9978	\$ 10951-11353	\$ 11151-11611	\$ 11401-11869	\$ 11651-12126	\$ 41.00	\$ 205.00	\$ 24.60	\$ 123.00	28



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Commonwealth of Massachusetts Department of Early Education and Care (EEC)

PARENT CO-PAYMENT TABLE

Step 2: Determining Parent Co-Payment (for families larger than nine)

1. Find the column with the family's size written at the top.
 2. Read down the column until you come to the correct income bracket.
 3. Then read directly across to the right until you are under the "Daily Fee" column.
- This will show you the parent co-pay pertaining to that family size and income.

GROSS MONTHLY INCOME			PARENT CO-PAYMENT				FEE LEVEL
Family of Ten	Family of Eleven	Family of Twelve	Daily Fee	Weekly Fee	Daily Fee SACC Blended	Weekly Fee SACC Blended	
\$ 0-2871	\$ 0-3113	\$ 0-3355	\$ -	\$ -	\$ -	\$ -	1
\$ 2872-2925	\$ 3114-3165	\$ 3356-3425	\$ 2.00	\$ 10.00	\$ 1.20	\$ 6.00	2
\$ 2926-3025	\$ 3166-3275	\$ 3426-3550	\$ 3.00	\$ 15.00	\$ 1.80	\$ 9.00	3
\$ 3026-3125	\$ 3276-3375	\$ 3551-3650	\$ 4.50	\$ 22.50	\$ 2.70	\$ 13.50	4
\$ 3126-3225	\$ 3276-3375	\$ 3651-3750	\$ 5.50	\$ 27.50	\$ 3.30	\$ 16.50	5
\$ 3226-3325	\$ 3376-3475	\$ 3751-3850	\$ 6.50	\$ 32.50	\$ 3.90	\$ 19.50	6
\$ 3326-3425	\$ 3476-3575	\$ 3851-3950	\$ 7.50	\$ 37.50	\$ 4.50	\$ 22.50	7
\$ 3426-3525	\$ 3576-3675	\$ 3951-4050	\$ 8.00	\$ 40.00	\$ 4.80	\$ 24.00	8
\$ 3526-3625	\$ 3676-3775	\$ 4051-4150	\$ 8.50	\$ 42.50	\$ 5.10	\$ 25.50	9
\$ 3626-4138	\$ 3776-4224	\$ 4151-4310	\$ 9.00	\$ 45.00	\$ 5.40	\$ 27.00	10
\$ 4139-4210	\$ 4225-4300	\$ 4311-4400	\$ 12.50	\$ 62.50	\$ 7.50	\$ 37.50	11
\$ 4211-4325	\$ 4301-4400	\$ 4401-4500	\$ 15.00	\$ 75.00	\$ 9.00	\$ 45.00	12
\$ 4326-4650	\$ 4401-4725	\$ 4501-4825	\$ 16.50	\$ 82.50	\$ 9.90	\$ 49.50	13
\$ 4651-4950	\$ 4726-5025	\$ 4826-5125	\$ 17.50	\$ 87.50	\$ 10.50	\$ 52.50	14
\$ 4951-5200	\$ 5026-5275	\$ 5126-5350	\$ 19.00	\$ 95.00	\$ 11.40	\$ 57.00	15
\$ 5201-5750	\$ 5276-5825	\$ 5351-5900	\$ 20.50	\$ 102.50	\$ 12.30	\$ 61.50	16
\$ 5751-6400	\$ 5826-6475	\$ 5901-6550	\$ 22.00	\$ 110.00	\$ 13.20	\$ 66.00	17
\$ 6401-6550	\$ 6476-6625	\$ 6551-6700	\$ 23.00	\$ 115.00	\$ 13.80	\$ 69.00	18
\$ 6551-7034	\$ 6626-7181	\$ 6701-7327	\$ 24.00	\$ 120.00	\$ 14.40	\$ 72.00	19
\$ 7035-7150	\$ 7182-7300	\$ 7328-7450	\$ 25.00	\$ 125.00	\$ 15.00	\$ 75.00	20
\$ 7151-7500	\$ 7301-7650	\$ 7451-7800	\$ 26.00	\$ 130.00	\$ 15.60	\$ 78.00	21
\$ 7501-7700	\$ 7651-7775	\$ 7801-7925	\$ 27.00	\$ 135.00	\$ 16.20	\$ 81.00	22
\$ 7701-8275	\$ 7776-8448	\$ 7926-8620	\$ 28.00	\$ 140.00	\$ 16.80	\$ 84.00	23
\$ 8276-10344	\$ 8448-10560	\$ 8621-10775	\$ 29.00	\$ 145.00	\$ 17.40	\$ 87.00	24
\$ 10345-10856	\$ 10561-11080	\$ 10776-11300	\$ 32.00	\$ 160.00	\$ 19.20	\$ 96.00	25
\$ 10857-11365	\$ 11081-11600	\$ 11301-11840	\$ 35.00	\$ 175.00	\$ 21.00	\$ 105.00	26
\$ 11366-11875	\$ 11601-12125	\$ 11841-12370	\$ 38.00	\$ 190.00	\$ 22.80	\$ 114.00	27
\$ 11876-12387	\$ 12126-12645	\$ 12371-12903	\$ 41.00	\$ 205.00	\$ 24.60	\$ 123.00	28

UAW/UMass Health & Welfare Trust Fund
Flat Fee Expected Parent CoPayment Chart

Color columns show expected parent copayment for a semester or summer period at income levels above 11 derived from the MA EEC Financial Assistance Parent Co-Payment Table

.75 time or more
30-40 hrs/wk care

.5 time
20-30 hrs/wk care

.25 time or less
less than 20 hrs/wk

MA EEC Weekly Rates for Parents

Income Level	Infant/Toddler/PreS	School Age		Infant/Toddler/PreS	School Age		Infant/Toddler/PreS	School Age		Infant/Toddler/PreS	School Age
12	\$75.00	\$45.00		\$562.50	\$337.50		\$375.00	\$225.00		\$187.50	\$112.50
13	\$82.50	\$49.50		\$618.75	\$371.25		\$412.50	\$247.50		\$206.25	\$123.75
14	\$87.50	\$52.50		\$656.25	\$393.75		\$437.50	\$262.50		\$218.75	\$131.25
15	\$95.00	\$57.00		\$712.50	\$427.50		\$475.00	\$285.00		\$237.50	\$142.50
16	\$102.50	\$61.50		\$768.75	\$461.25		\$512.50	\$307.50		\$256.25	\$153.75
17	\$110.00	\$66.00		\$825.00	\$495.00		\$550.00	\$330.00		\$275.00	\$165.00
18	\$115.00	\$69.00		\$862.50	\$517.50		\$575.00	\$345.00		\$287.50	\$172.50
19	\$120.00	\$72.00		\$900.00	\$540.00		\$600.00	\$360.00		\$300.00	\$180.00
20	\$125.00	\$75.00		\$937.50	\$562.50		\$625.00	\$375.00		\$312.50	\$187.50
21	\$130.00	\$78.00		\$975.00	\$585.00		\$650.00	\$390.00		\$325.00	\$195.00
22	\$135.00	\$81.00		\$1,012.50	\$607.50		\$675.00	\$405.00		\$337.50	\$202.50
23	\$140.00	\$84.00		\$1,050.00	\$630.00		\$700.00	\$420.00		\$350.00	\$210.00
24	\$145.00	\$87.00		\$1,087.50	\$652.50		\$725.00	\$435.00		\$362.50	\$217.50
25	\$160.00	\$96.00		\$1,200.00	\$720.00		\$800.00	\$480.00		\$400.00	\$240.00
26	\$175.00	\$105.00		\$1,312.50	\$787.50		\$875.00	\$525.00		\$437.50	\$262.50
27	\$190.00	\$114.00		\$1,425.00	\$855.00		\$950.00	\$570.00		\$475.00	\$285.00
28	\$205.00	\$123.00		\$1,537.50	\$922.50		\$1,025.00	\$615.00		\$512.50	\$307.50

How to use this chart

- 1) Find your income level on the MA EEC Financial Assistance Parent Co-Payment Table
- 2) Determine if your level of care is .75 time, .5 time or .25 time
- 3) Find your semester expected copayment by looking across the correct row for your income level, and down the correct column for your level of care for the age group of your child
- 4) School Age Rates are for children 5 and above