

POLICY 4.5.6

LOCAL MATCH RATES

4.5.6.1 Purpose

To provide guidance to local Children's Services Act (CSA) programs about local match rates for specific services.

4.5.6.2 Authority

- A. Section [2.2-2648.D.3](#) of the Code of Virginia requires the State Executive Council to "provide for the establishment of interagency programmatic and fiscal policies developed by the Office of Children's Services, which support the purposes of the Children's Services Act (§ [2.2-5200](#) et seq.), through the promulgation of regulations by the participating state boards or by administrative action, as appropriate."
- B. Section [2.2-2648.D.9](#) of the Code of Virginia requires the State Executive Council to "provide administrative support and fiscal incentives for the establishment and operation of local comprehensive service systems."
- C. [Item 268, Paragraph C.2 of the Appropriation Act](#) states, "All localities are required to appropriate a local match for the base year funding consisting of the actual aggregate local match rate based on actual total 1997 program expenditures for the Children's Services Act. This local match rate shall also apply to all reimbursements from the state pool of funds in this Item and carry-forward expenditures submitted before September 30 each year for the preceding fiscal year, including administrative reimbursements under paragraph C.4. in this Item."
- D. [Item 268, Paragraph C.3.a of the Appropriation Act](#) states, "...Notwithstanding the provisions of C.2. of this Item, beginning July 1, 2008, the local match rate for community-based services for each locality shall be reduced by 50 percent."
- E. [Item 268, Paragraph C.3.b of the Appropriation Act](#) states, "Localities shall review their caseloads for those individuals who can be served appropriately by community-based services and transition those cases to the community for services. Beginning July 1, 2009, the local match rate for non-Medicaid residential services for each locality shall be 25 percent above the fiscal year 2007 base. Beginning July 1, 2011, the local match rate for Medicaid residential services for each locality shall be 25 percent above the fiscal year 2007 base."

Adopted: June 12, 2008

Effective: June 12, 2008

Revised: month, 2026

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- F. [Item 268, Paragraph C.3.e of the Appropriation Act](#) states, “The local match rate for all non-Medicaid services provided in the public schools after June 30, 2011, shall equal the fiscal year 2007 base.”

4.5.6.3 Definitions

“Community-based services match rate” means a locality’s match rate for community-based services, which is 50% of the base local match rate.

“Base local match rate” means each locality’s basic match rate for special education and foster care services determined by the Appropriation Act.

“Residential/congregate care services match rate” means a locality’s match rate for services that place a child outside of the family home in licensed facilities or emergency shelters, which is 25% above the base local match rate.

4.5.6.4 Service Placement Types and Corresponding Match Rates

The following service placement types have been assigned to the corresponding match rate.

A. Community-Based Services Match Rate (50% of base local match rate)

1. Community-Based Services: Services provided to youth living in community settings (i.e., family home, kinship placement, agency resource [foster] home, or independent living arrangement) and their planned permanent caregiver(s). Community-based services include but are not limited to Intensive In-Home services, Intensive Care Coordination, mentoring, case support/utilization review, and other treatment and related services/interventions. Per-diem payments made to private providers for the supervision and services of an IL arrangement are reported in this category.

Exception: Services provided to youth residing in a Treatment Foster Care placement are at the base local match rate.

2. Community Transition Services: Services provided directly to the caregiver(s) (e.g., parents, kin, fictive kin, and foster families) of youth in residential placements or treatment foster care for the primary purpose of preparing the caregiver and youth for discharge to home.

B. Education, Foster Care, and Crisis Services Match Rate (base local match rate)

1. Special Education Private Placement (day or residential): Educational services for students with disabilities receiving special education and related services in a licensed private special education day or residential school in accordance with their Individualized Education Program (IEP).

Adopted: June 12, 2008

Effective: June 12, 2008

Revised: month, 2026

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2. Special Education Transition Services: IEP-directed educational services delivered in public schools to students with disabilities who were previously placed in approved private special education programs for at least six months. These services may be reimbursed for no more than 12 out of the 15 calendar months from the date they are initiated.
3. Wrap-Around Services for Students with Disabilities: Non-IEP services that are directed by an Individual Family Services Plan (IFSP) and provided to a student with a disability and/or the student's family. These services are focused on keeping the student out of a more restrictive placement. They are provided outside of the school setting when the needs associated with the student's disability extend beyond the school setting and threaten the student's ability to be maintained in the home, community, or school setting. Wrap-around services may be provided to a student placed by their IEP in a public school or private day school or during the transition to the community from a residential educational program or a juvenile correction center.
4. Family Foster Care Basic and Enhanced Maintenance and Activities Payments: Payments for basic and enhanced maintenance for youth in foster care who do not meet requirements for Title IV-E funding and are living in local agency resource homes. The Virginia Department of Social Services (VDSS) VEMAT process determines enhanced maintenance payments. Payments in this category are consistent with Title IV-E definitions: "Maintenance means payments made on behalf of a child in foster care to cover the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance for a child, and reasonable travel for the child to visit with family or other caretakers and to remain in his or her previous school placement."

Exception: The Foster Care supplemental clothing allowance is at the community-based services match rate.
5. Treatment Foster Care: Payment for services and treatment, including community-based services, for children living in a foster home where a trained foster parent provides care through a licensed child-placing agency or a local agency's defined treatment foster care program.
6. Independent Living Stipend: The standard statewide payment rate made for the care and support of youth in foster care who are between the ages of 16 and 17 and placed in independent living status. These payments may be made directly to the youth, or if the youth is living with an individual to whom the youth pays rent, the costs may be paid to that individual. The method of payment must be in a written agreement signed by the youth. This payment cannot be made from Title IV-E funds and must be made from CSA pool funds.

Adopted: June 12, 2008

Effective: June 12, 2008

Revised: month, 2026

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7. Independent Living Arrangement: The monthly maintenance payment for youth in foster care who are 18 – 21 years of age and have been placed by the local DSS or licensed child-placing agency in a living arrangement in which the child does not have daily substitute parental supervision (e.g., college dormitory, individual apartment, apartments licensed by child-placing agencies). **This category does not include group homes or residential treatment facilities.**
8. Psychiatric Hospital/Residential Crisis Stabilization Unit: Acute psychiatric care in a licensed or free-standing psychiatric hospital, or a crisis stabilization unit for 24 hours or more. This category includes all services provided to the youth while staying in the psychiatric hospital/crisis unit.
9. Congregate Care Educational Services: Educational services provided to youth who are placed in a residential setting for non-educational purposes or who have an IEP written for residential educational services.

C. Residential/Congregate Care Services Match Rate (25% above base local match rate)

1. Temporary Care Facility and Services: Placement of youth in licensed facilities or emergency shelters that serve groups of youth and are specifically approved to provide a range of services, as needed, on an individual basis, not to exceed 90 days. Includes all services provided to youth while they are living in the temporary care facility.
2. Group Home: Placement of youth in a Therapeutic Group Home licensed by the Department of Behavioral Health and Developmental Services (DBHDS), or a Children's Residential Facility licensed by the VDSS, or a group home certified by the Department of Juvenile Justice. This category includes all services provided to youth while living in the group home.

Exception: Educational services provided in the residential setting are considered congregate care educational services (base local match rate). With exceptions (e.g., group home-based assessment and diagnostic program), it is expected that youth in group homes will attend public school or an IEP-determined private day school.

3. Residential Facility: Placement of youth in licensed residential programs that provide 24-hour supervised care (e.g., secure residential treatment facilities, campus-style residential programs, sponsored residential programs). This category includes all services provided to youth while living in the residential program. This category does not include secure detention facilities.

Exception: Educational services provided in the residential setting are considered congregate care educational services (base local match rate).

Adopted: June 12, 2008

Effective: June 12, 2008

Revised: month, 2026

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4.5.6.5 *Policy Review*

This policy will be subject to periodic review by the State Executive Council for Children's Services.

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Adopted: June 12, 2008

Effective: June 12, 2008

Revised: month, 2026

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