

CSA Service Categories and Definitions

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Purpose of document: This document delineates service categories for localities to use in reporting and receiving state reimbursement for expenditures under the Children’s Services Act.

Publication Version Control: This chart contains a history of this publication’s revisions.

Version	Date	Comments
Original	June, 2008	Adopted by State Executive Council June 12, 2008
Revision 1	June, 2010	
Revision 2	March, 2011	Effective: July 1, 2011
Revision 3	December, 2011	Technical edits
Revision 4	April, 2016	Technical edits; Effective: July 1, 2016

COMMUNITY-BASED SERVICES (50% of local base match rate)

Community-Based Services: Community services provided to youth while living at home, in the home of extended family, in a regular foster family home, or in an independent living arrangement. This category includes community services provided to the youth’s planned permanent caregiver in the family home or home community. *(It does not include payments for family foster care basic or enhanced maintenance, family foster care basic activities, independent living stipends, or independent living arrangements. These payments are reported under the categories specific to those services.)*

Community Transition Services: Community transition services provided directly to the planned permanent caregiver (e.g., parents, relatives and foster families) of youth in congregate/residential placements for the primary purpose of preparing the planned permanent caregiver and youth for the youth’s discharge and transitioning from a residential/congregate care setting to the family’s home. The settings for these services are primarily in the planned permanent caregiver’s home and home community, but may also be in the residential care setting or its local community if provided directly to the planned permanent caregiver with the primary purpose of helping transition the youth home.

Intensive In-home Services: Services provided to youth and their families when the youth are living at home. Intensive in-home services are provided typically, but not solely, in the residence of a youth who is at risk of being removed from the home or who is being transitioned home from an out-of-home placement. These services may include crisis intervention/treatment; individual and family counseling; life, parenting, and communication skills; and 24-hour per day emergency response. By delivering the service in the home, clinicians are able to address family system issues and support parents in effective behavioral techniques.

Intensive Care Coordination: Services conducted by an intensive care coordinator, as defined under the State Executive Council guidelines, for youth who are at risk of entering or who are placed in residential care. *(Community-based services provided concurrent to Intensive Care Coordination are to be reported in the community-based services category.)*

EDUCATION SERVICES & FOSTER CARE SERVICES (Local base match rate)

Special Education Private Day Placement: Educational services for students with disabilities receiving special education and related services in a private day school in accordance with the placement decision in the IEP. *(Non-IEP services provided to a youth in a private day placement are to be reported as Community-based services or as Wrap-Around Services for Students with Disabilities, as determined appropriate by the FAPT and specified in the IFSP.)*

Wrap-Around Services for Students with Disabilities: Non-IEP services in the IFSP and approved by the FAPT provided to a student with a disability and/or the student's family which are necessary to keep the student out of a more restrictive placement. Wrap-around services are non-residential and are provided outside of the school setting in the home and community 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. The wrap-around services may be provided to a student who is placed in a public school setting, a private day school, or being transitioned back to the community from a residential educational program or from a juvenile correction center.

Family Foster Care Maintenance and Activities Payments: Payments for basic maintenance for foster care youth who are living in a local agency foster home. The families are receiving foster care maintenance payments consistent with Title IV-E definitions (i.e. room, board, daily basic supervision, school supplies, youth's personal incidentals, the basic clothing allowance, child care and/or travel costs) and the youth do not meet requirements for Title IV-E funding. This category also includes the enhanced maintenance payment (determined by the VEMAT) for additional daily supervision. *(Community-based services provided directly to the child and/or biological/adoptive family should be reported in the Community Based Services category. Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities. The Foster Care Supplemental Clothing Allowance is reported as a Community Based Service).*

Specialized Foster Care: This category has been retired.

Treatment Foster Care: Payment for services and treatment of children who are living in a foster home where a trained foster parent provides care through a licensed child placing agency or local agency's defined treatment foster care program. The package of services included in the treatment payment rate may include: assessment; development of the case plan; home visits; referral to services; direct provision of services, treatment, and counseling for children, parents, and/or substitute care providers in their own homes or outside of their homes; respite care; parent support services; 24 hour supervision and crisis intervention; casework, case management and supervision; placement of the child; preparing and participating in judicial determination; recruitment and

training. This category includes all services, including any community-based services, provided to these children while they are living in the treatment foster home, except as provided below. *(Community-based services provided directly to the child and/or biological/adoptive family should be reported in the appropriate expenditure category, either Community Based Services or the Treatment Foster Care as detailed in the CSA Pool Fund Expenditure Categories and Definitions document. Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

Independent Living Stipend: The standard statewide payment rate made for the care and support of a youth over age 16 placed in independent living status. Covered costs are not limited to but generally include: room and board, rent, household equipment, utilities, clothing, personal care and transportation. Payment cannot be made from Title IV-E funds, but is made from CSA pool funds. 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. *(Community based services provided to these youth or their families, while the children are receiving an independent living stipend, are to be reported in the community-based services category. Educational placements and non-instructional services in the public schools provided to these children should be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

Independent Living Arrangement: Payment for foster care youth at least 16 years of age who have been placed by the local DSS board 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 apartments located in one complex where daily substitute parental supervision is provided and the programs are licensed as group homes. It does not include group homes or residential facilities. *(Community-based services provided to the youth or planned permanent caregiver should be reported in the community-based services category. Private educational placements are to be reported in the Special Education Private Day Placement category or Wraparound Services for Students with Disabilities.)*

Psychiatric Hospital/Residential Crisis Stabilization Unit: Placement of youth outside of their family home for acute care in an acute care psychiatric unit of a licensed medical hospital or licensed free-standing psychiatric hospital or a crisis stabilization unit for 24 hours or more (i.e., for crisis stabilization of harmful behaviors to self or others and/or serious mental health issues). This category includes all services provided to the youth while staying in the psychiatric hospital/crisis unit. Residential Crisis Stabilization length of stay should not exceed 15 days per incident. *(Community-based services provided directly to the youth and/or planned permanent caregiver in the family's home should be reported in the Community-based Services category.)*

Congregate Care Educational Services for Medicaid Funded Placements: 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. The youth is Medicaid eligible and placed in a Medicaid facility, but Medicaid funds cannot be used to pay for the educational services.

Congregate Care Educational Services for Non-Medicaid Funded Placements: 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. The youth is not eligible for Medicaid or is not placed in a Medicaid funded placement because appropriate Medicaid programs are not available to meet the youth's needs.

RESIDENTIAL/CONGREGATE CARE (25% above local base match rate)

Temporary Care Facility and Services: Placement of children outside of their family homes 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 children while they are living in the temporary care facility, except as specified. *(Community and community transition services provided directly to the child and/or family for the primary purpose of discharging and transitioning the child home from residential care should be reported in the appropriate community-based services category. Educational services provided in this setting should be reported in the Educational Services – Congregate Care category. Does not include secure detention facilities.)*

Group Home: Placement of children outside of their family homes in licensed residential programs that are characterized by a supervised homelike environment in a single family residence that serves groups of children (up to 8 youth) who have behavioral/emotional difficulties and/or physical or mental disabilities. Includes placement of children in apartments located in one complex where daily substitute parental supervision is provided and the programs are licensed as residential programs. Group homes may provide social, life or vocational skills training. They may provide emergency placements. Includes all services provided to children while living in the group home, except as specified. *(Community and community transition services provided directly to the child and/or family for the primary purpose of discharging and transitioning the child home from residential care should be reported in the appropriate community-based services category. Educational services provided in this setting should be reported in the Educational Services – Congregate Care category.)*

Residential Facility: Placement of youth outside of their family homes in licensed residential care programs that provide 24-hour supervised care to groups of youth (e.g., secure residential treatment facilities, campus-style residential programs, group homes on the campus of a residential facility, group homes that serve more than nine youth). Programs may provide intensive treatment services such as medication management, nursing care, occupational therapy, crisis stabilization, assessment, social skills training, group therapy, individual therapy, family therapy, etc. This category includes services provided to youth while living in the residential program (e.g., outpatient, respite care, crisis stabilization, assessment, child behavioral aides) and includes services that are provided in the residential facility and residential facility community to the youth's family. This category does not include secure detention facilities. *(Community and*

community transition services provided directly to the child and/or family for the primary purpose of discharging and transitioning the child home from residential care should be reported in the appropriate community-based services category. Educational services provided in this setting should be reported in the Educational Services – Congregate Care category.)