

**State of Maryland Residential Child Care (RCC) Program  
Class Rate Application  
State Fiscal Year 2026 (July 1, 2025 - June 30, 2026)**

All providers seeking a State Fiscal Year (SFY) 2026 rate for a Residential Child Care (RCC) program must submit the Class Rate Application (this form). The person completing this form must have the authority to sign on behalf of the program and organization. **A separate form must be completed for each licensed RCC program site.** Sections 1, 2, 3, and 5 of this form must be completed by all providers. Any program seeking to provide services in Class 1, 1b, 2, 2b, or 6 must also complete Section 4 of this form.

**SECTION 1: PROGRAM INFORMATION**

*Instructions:* Complete the information below for the RCC Program.

**Parent Organization:**

**RCC Program Name:**

**RCC Program Site Address:**

**RCC Program Site License Capacity:**

**RCC Licensing Agency:**

**Name & Title of the person completing this form:**

**Email Address & Phone Number:**

**SECTION 2: GENERAL CONDITIONS AND REQUIREMENTS**

*Instructions:* Initial next to each of the general conditions for SFY26 RCC Class Rates.

*As the individual with the authority to sign on behalf of the organization for this program, I understand that:*

1. Representatives of the State are authorized to investigate all aspects of program operations, to inspect the facility and records, and to make any investigations necessary concerning the circumstances surrounding this application. I understand that if the program receives a rate and class designation, the State's representatives can make announced and unannounced visits to investigate complaints received and to determine continuing compliance.
  
2. The program must maintain compliance with the minimum requirements for the class selected below. The program must maintain documentation to demonstrate compliance with the minimum requirements for the class selected, which must be

provided to the State of Maryland or its designee upon request. I will notify my program's contracting agency within one (1) business day of any violations issued by a governmental regulatory agency to the program and any issues that could adversely affect the program meeting the class requirements. I will notify my program's contracting agency within seven (7) business days of any other issue that would adversely affect the program meeting the class requirements. I will participate in the development and implementation of a corrective action plan, if required and necessary, and understand that my status as a provider within the class may be revoked if the program does not continue to maintain all quality standards.

3. The program must continue to meet all requirements for the license (statutory, regulatory, and contractual).

4. The program must participate in the data collection and reporting process as specified by the State, which includes providing monthly performance data to DHS, DJS, and/or their contracted partner on the measures and in the format specified.

5. The class rate is comprehensive and covers all room, board, maintenance, recreational, and daily living costs to support the child as well as all behavioral health clinical or therapeutic services. Costs covered by the Managed Care Organizations (MCOs) under the Maryland Medical Assistance Program are not included in this rate. Specialized assessment or diagnostic services may be covered outside of the rate, consistent with eligibility for reimbursement and with prior approval from the child's placing agency. The child's MCO will continue to be responsible for covering the physical health, dental care, and primary behavioral health needs of the child, along with authorized speech, physical, or occupational therapies. There may be rare exceptions when the child's placing agency will approve reimbursement to the provider for costs outside of the rate, such as transportation costs associated with highly specialized treatment for a particular condition or to meet the cultural or linguistic needs of the child. The State will not pay for one-on-one services for children who have been admitted into the RCC, except in those settings where the one-on-one add-on rate is permitted (as noted in the appendix), and only with prior approval from the placing agency. The provider will be expected to manage individualized services and supports to children served using the rate provided.

6. This rate will not be effective until notice has been provided by the IRC.

7. Regardless of class, the program must maintain at least two awake staff always.

**SECTION 3: CLASS SELECTION**

**Instructions:** Check the box for the Class and Rate that you are requesting for your RCC program site for SFY 2026. For descriptions, please see the Appendix. Select *only one class* for each RCC program site.

Selection	Class	Description	Total Per Diem Rate
	0	Pre-QRTP (No Clinical Services)	\$446.46
	99	I/DD Legacy Program (No Clinical Services)	\$624.85
	1	Serve Youth with Significant Behavioral Health Service Needs (6+ Beds)	\$762.08
	1b	Serve Youth with Significant Behavioral Health Service Needs (5 or Fewer Beds)	\$832.43
	2	Serve Youth with Intensive or Specialty Behavioral Health Service Needs (6+ Beds)	\$919.41
	2b	Serve Youth with Intensive or Specialty Behavioral Health Service Needs (5 or Fewer Beds)	\$1,016.14
	3	Serve Youth with High Intensity I/DD Service Needs (No Behavioral Health Services)	\$1,353.16
	4	Serve Youth Needing High Intensity Medically Fragile Services	\$1,629.00
	5	Serve Youth Who Have Experienced/At-Risk for Commercial Sexual Exploitation	\$2,056.56
	6	Serve Youth with the Highest Intensity Behavioral Health and Intensive I/DD Service Needs	\$2,162.79

**SECTION 4: CLASS-SPECIFIC REQUIREMENTS SELECTION - CLASSES 1/1b, 2/2b, and 6.**

**Instructions:** Only complete if you are requesting a rate for Class 1, 1b, 2, 2b, or 6. **For all other classes, skip to Section 5.**

**State of Maryland QRTP Status:**

My program is approved as a QRTP and will maintain its QRTP status for the fiscal year, including continuing to meet all associated programmatic and reporting requirements.

**SECTION 5: ATTESTATION AND SIGNATURE**

**I hereby attest that the information contained in this application, including the attachments, are truthful and correct under penalty of perjury. Falsification of application information is grounds for denial or revocation of a class and rate designation. An application may be withdrawn at any time the applicant so desires. This application must be signed by an individual legally responsible for the operation of the residential child care facility.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**APPENDIX**

Additional, minimum requirements for each provider for State Fiscal Year 2026 (July 1, 2025 - June 30, 2026):

Class	Direct Care Staffing Ratio (Staff : Youth)		Other Requirements (other than standard requirements; all programs must maintain 2 awake staff always)	Able to request add-on rate?			Total Per Diem Rate
	Awake	Asleep		1:1 Staff	1:1 Nurse	EBP*	
<b>0: Pre-QRTP</b>	1:6	1:7	N/A	Yes	No	No	\$446.46
<b>99: I/DD Legacy</b>	1:3	1:4	N/A	Yes	No	No	\$624.85
<b>1: Serve Youth with Significant Behavioral Health Service Needs (Class 1 or 1b)</b>	1:4	1:5	<ul style="list-style-type: none"> <li>• Serve children with significant behavioral health service needs</li> <li>• 1:10 ratio of care manager to youth</li> <li>• Provide minimum of 8 hours of clinical, behavioral health, allied, and/or expressive therapies or interventions weekly (averaged per month)</li> <li>• Meet Maryland's requirements for QRTPs^</li> </ul>	Yes	No	Yes	\$762.08 (Class 1)  \$832.43 (Class 1b)
<b>2: Serve Youth with Intensive or Specialty Behavioral Health Service Needs (Class 2 or 2b)</b>	1:3	1:4	<ul style="list-style-type: none"> <li>• Serve children with intensive and/or specialty behavioral health service needs</li> <li>• Maintain 1 floater, direct care staff outside of ratio during awake hours</li> <li>• 1:8 ratio of care manager to youth</li> <li>• Provide minimum of 8 hours of clinical, behavioral health, allied, and/or expressive therapies or interventions weekly (averaged per month)</li> <li>• Clinical/behavioral health supervisors have at least 2 years of experience providing similar services and/or working with this population (preferred for all clinicians)</li> <li>• Direct care staff have specialized training, qualifications, and/or experience in working with the specific population of children and youth served or complete specialized training within 180 days of employment</li> <li>• Meet Maryland's requirements for QRTPs^</li> </ul>	Yes	No	Yes	\$919.41 (Class 2)  \$1,016.14 (Class 2b)

Class	Direct Care Staffing Ratio (Staff : Youth)		Other Requirements (other than standard requirements; all programs must maintain 2 awake staff always)	Able to request add-on rate?			Total Per Diem Rate
	Awake	Asleep		1:1 Staff	1:1 Nurse	EBP*	
3: Serve Youth with High Intensity I/DD Service Needs (No Behavioral Health Services)	1:1	1:1	<ul style="list-style-type: none"> <li>• Serve children with high intensity intellectual and/or developmental disability service needs</li> <li>• Maintain 1 floater, direct care staff outside of ratio during awake hours</li> <li>• Provide transportation to any clinical or behavioral health services required. (Not required to provide the services directly.)</li> <li>• Direct care staff have specialized training, qualifications, and/or experience in working with the specific population of children and youth served or complete specialized training within 180 days of employment</li> </ul>	No	No	No	\$1,353.16
4: Serve Youth Needing High Intensity Medically Fragile Services	1:1	1:1	<ul style="list-style-type: none"> <li>• Serve children with high intensity medically fragile service needs</li> <li>• 24/7 nursing services provided to meet the physical health needs of children and youth served</li> <li>• Direct care staff have specialized training, qualifications, and/or experience in working with the specific population of children and youth served or complete specialized training within 180 days of employment</li> <li>• Provide transportation to any clinical or behavioral health services required. (Not required to provide the services directly.)</li> </ul>	No	Yes	No	\$1,629.00

Class	Direct Care Staffing Ratio (Staff : Youth)		Other Requirements (other than standard requirements; all programs must maintain 2 awake staff always)	Able to request add-on rate?			Total Per Diem Rate
	Awake	Asleep		1:1 Staff	1:1 Nurse	EBP*	
5: Serve Youth Who Have Experienced/At-Risk for Commercial Sexual Exploitation	1:1	1:1	<ul style="list-style-type: none"> <li>• Serve children who have experienced or are at-risk for experiencing commercial sexual exploitation or human trafficking, as screened or assessed with State-identified tools, who have significant or intensive behavioral health service needs</li> <li>• Maintain 1 floater, direct care staff outside of ratio always</li> <li>• 24/7 nursing services provided to meet the physical health needs of children and youth served</li> <li>• Direct care staff have specialized training, qualifications, and/or experience in working with the specific population of children and youth served or complete specialized training within 180 days of employment</li> <li>• Must document that the youth have experienced CSE or are at-risk for CSE based on State-approved tool</li> <li>• Provide minimum of 8 hours of clinical, behavioral health, allied, and/or expressive therapies or interventions weekly (averaged per month)</li> <li>• Clinical/behavioral health supervisors have at least 2 years of experience providing similar services and/or working with this population (preferred for all clinicians)</li> </ul>	No	No	No	\$2,056.56

Class	Direct Care Staffing Ratio (Staff : Youth)		Other Requirements (other than standard requirements; all programs must maintain 2 awake staff always)	Able to request add-on rate?			Total Per Diem Rate
	Awake	Asleep		1:1 Staff	1:1 Nurse	EBP*	
6: Serve Youth with the Highest Intensity Behavioral Health and Intensive I/DD Service Needs	2:1	1:1	<ul style="list-style-type: none"> <li>• Serve children with the highest intensity behavioral health service needs and co-occurring intensive intellectual and/or developmental disability service needs</li> <li>• Maintain 1 floater, direct care staff outside of ratio during awake hours</li> <li>• 1:8 ratio of care manager to youth</li> <li>• Provide minimum of 8 hours of clinical, behavioral health, allied, and/or expressive therapies or interventions weekly (averaged per month)</li> <li>• Direct care staff have specialized training, qualifications, and/or experience in working with the specific population of children and youth served or complete specialized training within 180 days of employment</li> <li>• Clinical/behavioral health supervisors have at least 2 years of experience providing similar services and/or working with this population (preferred for all clinicians)</li> <li>• Meet Maryland's requirements for QRTPs^</li> </ul>	No	No	No	\$2,162.79
<p>*Evidence-based practices (EBPs) must be approved by DHS, DJS, or their designee. Providers must agree to provide the EBP to all youth in their program unless documented that it is clinically contrary to the treatment and care of that youth. If approval for the EBP add-on rate occurs after the start of FY26, the provider will be reimbursed with the additional rate for services provided after the date of approval. The provider must notify their contracting agency(ies) within 14 business days if they will be unable to provide the EBP for greater than 30 days; the provider will no longer receive the EBP add-on rate after this notification. The application to receive an EBP add-on rate is separate from the FY26 Class Rate Application.</p>							
<p>^To receive the rate for this class, the provider will need to document that they meet all QRTP requirements and have received a QRTP designation from the State of Maryland (Department of Human Services/Department of Juvenile Services).</p>							

**Add-on rates for SFY26:**

1:1 Staffing (Direct Care): \$31.05/hour

1:1 Nursing: \$88.14/hour

Evidence-Based Practice (EBP): \$24.25/day

<b>FY26 RCC Add-On Rates (Prior Approval Required)</b>			
<b>Type of Add-On Rate</b>	<b>FY26 Rate</b>	<b>Eligible Class</b>	
<b>1:1 Staffing</b>	<b>\$31.05/hour</b>	<b>0</b>	Pre-QRTP (No clinical Services)
		<b>99</b>	Intellectual/Developmental Disability (I/DD) Legacy Program (No Clinical Services)
		<b>1</b>	Serve Youth with Significant Behavioral Health Service Needs (6+ Beds)
		<b>1b</b>	Serve Youth with Significant Behavioral Health Service Needs (5 or Fewer Beds)
		<b>2</b>	Serve Youth with Intensive or Specialty Behavioral Health Service Needs (6+ Beds)
		<b>2b</b>	Serve Youth with Intensive or Specialty Behavioral Health Service Needs (5 or Fewer Beds)
<b>1:1 Nursing</b>	<b>\$88.14/hour</b>	<b>4</b>	Serve Youth Needing High Intensity Medically Fragile Services
<b>Evidence-Based Practice (EBP)</b>	<b>\$24.25/day</b>	<b>1</b>	Serve Youth with Significant Behavioral Health Service Needs (6+ Beds)
		<b>1b</b>	Serve Youth with Significant Behavioral Health Service Needs (5 or Fewer Beds)
		<b>2</b>	Serve Youth with Intensive or Specialty Behavioral Health Service Needs (6+ Beds)
		<b>2b</b>	Serve Youth with Intensive or Specialty Behavioral Health Service Needs (5 or Fewer Beds)