

Voluntary Placement Agreements (VPA) Fact Sheet

Custody relinquishment and the development of VPAs

Prior to 2003, Maryland families with a child with a serious mental illness or developmental disability were relinquishing full custody of their child to the state so that the child could get needed services that the family could not themselves access or afford. They could be advised to do this by a therapist, hospital, DSS, DJS, or advocate. Their child would become a ward of the state. Parents would lose all parental rights and be placed on a registry for child abuse and neglect. A 2003 Maryland Report estimated that there were approximately 200 custody relinquishments per year in Maryland.¹ This practice was happening across the country.

2003 - SB 458, CH 250, established “Voluntary Placement Agreements,” which prohibited an LDSS from seeking legal custody of a child under a VPA if the child had a developmental disability or a mental illness, and the purpose of the VPA was to obtain treatment or care related to the child’s disability that the parent was unable to provide. DHS would have physical custody only. Over the years, requirements and processes were put into place by DHS for families to access a VPA.

Reasons families apply for a VPA

The cost for Residential Treatment Centers (RTCs) and for the educational component of an RTC stay are prohibitive for most families.² Therefore a family will apply for a VPA to cover most of the cost in these circumstances:

- A child is not Medicaid-eligible, and the family’s private insurance will not cover a Maryland RTC, or only cover a few days
- A child is Medicaid-eligible, but will be entering a facility that is not covered by Maryland Medicaid
- A child is Medicaid-eligible and will be entering a facility that is covered by Maryland Medicaid, but the child does not have a non-public school placement on their IEP that would cover the education cost

VPAs in other states

In 2018, 40 other states had statutes on VPAs. The statutes in 11 states explicitly address VPAs developed to meet the treatment needs of a child with a developmental disability or serious mental illness.³ In many states, VPAs can be used to access intensive community-based services or lower levels of residential care. This is not the case in Maryland.

¹ Custody Relinquishment and Access to Services for Children Final Report. GOC (2003).

[https://mlsd.ent.sirsi.net/client/en_US/default/search/detailnonmodal/ent:\\$002f\\$002fSD_ILS\\$002f0\\$002fSD_ILS:38917/one](https://mlsd.ent.sirsi.net/client/en_US/default/search/detailnonmodal/ent:$002f$002fSD_ILS$002f0$002fSD_ILS:38917/one)

² For example, in FY26, Maryland’s private RTCs cost on average \$310,000/year, and in addition, the education cost was on average \$105,000/year.

³ Annette Jones. Voluntary Placements in Child Welfare: A Comparative Analysis of State Statutes (2018).

<https://www.sciencedirect.com/science/article/abs/pii/S0190740918300215>.