

Below is the MCH/CYSHCN documentation that should be included in the Special Provisions section of any state contract you have with any of your MCH/CYSHCN agencies—consolidated, statewide, or other. DPH, Bureau of Operations (BOO) will include the match requirement, profile ID and amount of the contract and match in the CARS payment section as well.

Local MCH/CYSHCN Match

Federal Maternal and Child Health regulations require the state to provide 75% match. Contracts must include match as indicated below:

- Local organizations are required to provide local match in an amount not less than 75% of the requested grant funds. Tribal agencies, federally designated community health centers and migrant health centers are exempt from this requirement.
- Local match is the value of local agency efforts in furthering the objectives of the MCH Program. Such efforts may be in the form of program costs incurred and not borne by the grant, program income, or in-kind contributions. An organization may not claim as match any costs used to match any other federal grant, award, or contract. No federal dollars may be used for match of this grant except Title XIX and Title XX reimbursements received by the organization for services when such are used to further the objectives of the MCH Program.
- An organization may count as match any local expense which meets the qualifications outlined above and which contributes to the project. For example, the local share of staff costs pertinent to the project, and the value of supplies purchased with local funds and used in the project, may be used as match.
- An organization may also use as match any local share which meets the qualifications outlined above and which consists of effort on the organization's part to pursue the objectives of the MCH Program. For example, if an organization receives funds for a child health program, it may count as match not only the local effort which is directly pertinent to the child health program, but local effort devoted to any other relevant maternal and child health activity.

Contractees will comply with year-end program reporting requirements set by the State of Wisconsin MCH/CYSHCN Program including documentation of 75% local match (\$0.75 local contribution for every \$1.00 federal), including program income, and report through the CARS system on the DHS/DES F-00642 Community AIDS Reporting System (CARS) Expenditure Report form in the current net expense column using profile 193002. The original DHS/DES F-00642 form is e-mailed to CARS (dhs600rcars@wi.gov) with a copy to the State MCH/CYSHCN Contract Administrator/Negotiator.

Reference: Public Health Service (PHS) Grants Policy Statement, U.S. DHHS, 4/1/94