



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: RESIDENTIAL PROGRAMS REIMBURSEMENT SYSTEM POLICY 6.04

Table of Contents

	<u>Page</u>
<u>AUTHORITY</u>	1
<u>PURPOSE</u>	1
<u>SCOPE</u>	1
<u>DEFINITIONS</u>	1
<u>POLICY</u>	5
<u>PROCEDURES</u>	5
I. REPORTING	5
A. Cost Reports	5
B. Due Date of Report	6
C. Completing Reports and Maintaining Records	6
D. Report Certification	7
E. Improperly Completed or Late Reports	8
II. REIMBURSABLE COSTS	8
A. Reimbursable Costs Definition	8
B. Depreciable Assets	8
C. Equipment and Building Expenses	9
D. Reporting Depreciable Assets	9
E. Interest	11
F. Donations and Contributions	11
G. Related Organization/Party Costs	11

H.	Joint Program Costs	12
I.	Transportation Costs	12
J.	Instruction and Support Services	13
K.	Fringe Benefits.....	14
III.	RATE SETTING PRINCIPLES/PROCEDURES/STANDARDS	14
A.	Rate Setting Principles.....	14
B.	Reimbursement Cost Centers.....	14
C.	Instruction and Support Service Cost Center Rate	14
D.	Indirect Client Support/Administrative, and Non-ISS Rates.....	16
E.	Rate Setting Procedures	17
IV.	RATE ADJUSTMENTS.....	18
A.	Adjustments	18
B.	Request Procedure	19
V.	NOTIFICATION	20
A.	Rate Notification Requirements and Effective Dates	20
B.	Public Review and Disclosure	20
VI.	CLIENT-SPECIFIC RESIDENTIAL STAFF ADD-ON	20
A.	Procedures.....	20
B.	Authorization	20
C.	Reimbursement	21
D.	Settlement	21
VII.	SETTLEMENT.....	21
A.	Settlement Definition.....	21
B.	Settlement Determination	22
C.	Administrative Staff Hours Counted as ISS for Settlement Purposes	23
D.	Programs Combined for Settlement.....	23
E.	Cost Shifts.....	24
F.	Settlement Process	24
G.	Optional Two-Year Settlement Process.....	25
VIII.	SUPPLEMENTAL PAYMENTS	26
A.	Supported Living Client Evaluation	26
B.	Summer Program	26

C.	Tuition Reimbursement for Group Home and Group Training Home Contractors	26
IX.	BILLING AND PAYMENT	27
A.	Billing Procedure	27
B.	Vacancy Payments for Group Homes and Group Training Homes.....	27
C.	Charges to Clients	29
D.	Cost of Care Adjustment for Supported Living Programs.....	29
E.	Payment.....	30
F.	Suspension of Payment	30
	<u>EXCEPTIONS</u>	31
	<u>SUPERSESSSION</u>	31
	ATTACHMENT A	
	Summer Program Request	33
	Summer Program Budget.....	33
	Individual Summer Program Plan.....	34
	ATTACHMENT B	
	Supported Living - Indirect Client Support / Administrative Rate Table	35
	ATTACHMENT C	
	Group Home and Group Training Home Non-ISS Rate Standard Tables.....	36
	ATTACHMENT D	
	Client Transportation Assessment – Supported Living	42
	ATTACHMENT E	
	Residential Staff Schedule Reporting	43
	ATTACHMENT F	
	Staff Add-On Request.....	47



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: RESIDENTIAL PROGRAMS REIMBURSEMENT SYSTEM POLICY 6.04

Authority: Chapter 71A RCW
Chapter 388-101 WAC

PURPOSE

This policy establishes procedures and criteria for cost reporting, rate setting, and the settlement process for Division of Developmental Disabilities (DDD) contracted residential programs.

SCOPE

- This policy in its entirety applies to DDD contracted certified residential programs, which includes (Supported Living (SL), Group Homes (GH), and Group Training Homes (GTH).
- Section VI only of this policy applies to Licensed Staffed Residential Programs (LSR) for Children and Youth.

DEFINITIONS

Administrative Staff means owners, officers or employees of the contractor, including executive directors, administrators, accountants, bookkeepers, clerical support and/or secretaries whose primary job functions require a majority of time for administrative, management and/or operational support. Administrative staff may also include corporate staff whose time is allocated to the contractor.

Arm's-Length Transaction means a transaction resulting from good faith bargaining between a buyer and seller who hold adverse positions in the market place. Arm's-length transactions are presumed to be objective transactions between disinterested parties (meaning neither the buyer nor the seller has a financial incentive to buy or sell at a price more or less than market value).

Client means a person who has a developmental disability and is:

1. Eligible under RCW 71A.10.020; and
2. Authorized by DDD to receive residential services described in Chapter 388-101 WAC.

Client-Specific Staff Add-On means a staffing increase above and beyond the individual instruction and support hours required and allowed in the standard rate provision of a contract, enabling a contractor to increase the individual instruction and support hours provided to a specific client.

Contract means a contract between the department and a contractor for certified community residential services to clients as described in Chapter 388-101 WAC.

Contractor means an entity contracting with the department to provide certified community residential services to clients as described in Chapter 388-101 WAC.

Cost-of-Care Adjustment means a reimbursement adjustment intended to cover the necessary costs of non-variable staff support and administration to provide services to residents during a time when their residence is temporarily not at full capacity.

Department means the Department of Social and Health Services (DSHS) and its employees.

Division means the DSHS Division of Developmental Disabilities and its employees.

Fringe benefits means benefits provided at the employer's expense to all employees who qualify. These may include sick leave, health insurance, paid vacation, holiday pay, retirement plan, and other benefits.

Full Time Equivalent (FTE) means a total of 2,080 hours (52 weeks x 40 hours) worked by one or more employees during a twelve-month period.

Group Home (GH) Program is included within the meaning of residential services described in Chapter 388-101 WAC and contract provisions. For purposes of this policy, "Group Training Home" is synonymous with "Group Home."

Group Training Home (GTH) means a certified non-profit residential program as per RCW 71A22.020.

Housing Costs for Overnight Coverage means the costs of providing an apartment unit or other dwelling used by staff when working 24-hour or longer duty shifts. The costs incurred by the program for these housing costs are client support costs, and not to be reported as Instruction and Support Services compensation.

Indirect Client Support Costs (ICS) include Maintenance/Repair expense for client's housing, Client Transportation Expenses and non-Instruction and Support Services Housing Costs for Overnight Coverage.

Instruction and Support Services (ISS) Staff means employees (including counselors, instructors and/or trainers) of the contractor whose primary job function is the provision of instruction and support services to clients. ISS staff shall include employees (e.g., program managers and supervisors) of the contractor whose primary job function is the supervision of ISS staff.

Instruction and Support Services (ISS) means client services required by Chapter 388-101 WAC and contract provisions. ISS are provided by staff designated as ISS staff (see definition above). ISS may also be provided by the administrator as described in this policy and by other administrative personnel (such as bookkeepers, accountants or maintenance workers) if the provision of ISS is included in their job description.

ISS Hours include:

- On the job hours worked by staff designated as ISS staff, including related training time.
- For staff that perform both administrative functions and ISS, the agency may include that portion of the employee's hours that are dedicated to ISS functions.
- The administrator's hours worked as ISS as allowed under Section VII.C. of this policy.
- For cost reporting purposes, sleep hours may be counted as ISS for staff who are required to sleep over and are on duty in close proximity and are available to respond immediately in person at all times.
- Call back hours for ISS employees who are required to carry pagers or otherwise be on call outside of their normal work hours. The maximum number of hours that may be counted as ISS are the accumulation of hours per shift for those occurrences from the time a call was received until the employee has been able to return to his/her previous activities, rounded up to the nearest hour.
- The division may request verification of hours (e.g., time sheets, etc.) for all staff for which ISS hours are claimed.

ISS Staff Compensation for reporting purposes on the annual cost report includes:

- ISS staff salaries, wages, stipends and other compensation for staff that are designated as ISS, and prorated for those staff whose time is split between ISS and administrative functions;

- Employer paid payroll taxes relating the actual allowable ISS hours worked; for proprietary contractors, the portion of the Business and Occupation (B & O) tax applicable to the revenue received for ISS reimbursement may be included as payroll tax.
- Fringe benefits paid by the employer for ISS staff (prorated for those staff whose time is split between ISS and administrative functions);
- Staff lodging paid by the contractor and as defined in this section; and
- As provided for in Section VII.C.2. of this policy, compensation for the administrator time used performing ISS duties; for settlement purposes, compensation allowed at the benchmark compensation rate for contractors providing Supported Living (SL) services.

MA (Non-MSA) and MSA Counties: MSA means Metropolitan Statistical Area - A large population nucleus, together with adjacent communities that have a high degree of economic and social integration with that nucleus.

MSA: Metropolitan Statistical Area: Relatively freestanding MAs that are not closely associated with other MAs. These areas typically are surrounded by non-metropolitan counties.

A MSA must include at least:

- One city with 50,000 or more inhabitants; or
- A Census Bureau-defined urbanized area (of at least 50,000 inhabitants) and a total metropolitan population of at least 100,000.

For purposes of determining reimbursement rates as stated in this policy, Counties recognized as MSA counties in Washington are Asotin, Benton, Chelan, Clark, Cowlitz, Douglas, Franklin, Island, King, Kitsap, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Whatcom and Yakima.

Note: King County is recognized as having unique characteristics relative to other MSA counties for purposes of determining reimbursement rates as stated in this policy.

Related Organization is either an entity, which is under common ownership, and/or control with, has control of, or is controlled by, the contractor. An entity is deemed to "control" another entity if one entity has a five (5) percent or greater ownership interest in the other; or if an entity has the capacity (whether or not exercised) derived from a financial or other relationship to influence directly or indirectly the activities of the other.

Related Party is a spouse; natural parent, child or sibling; adopted child or adoptive parent; stepparent, stepchild, stepbrother, stepsister; father-in-law, mother-in-law, son-in-law, daughter-in-law; grandparent or grandchild; uncle, aunt, nephew, niece or cousin of the contractor.

Residential Services Program means a contractor's Group Home and Group Training Home or Supported Living (SL) residential program providing services in accordance with Chapter 388-101 WAC and contract provisions.

Staff Lodging means supported living programs that provide the primary residence for a staff person as a part of their compensation package and may include the cost of the residence as ISS cost for cost reporting purposes. Staff lodging does not include the cost of maintaining a residential unit for the use of overnight staff when it is not their primary residence. The reporting of staff lodging cost for this purpose must be consistent with Internal Revenue Service (IRS) rules for reporting housing to employees as income.

Supported Living (SL) is included within the meaning of residential services as described in Chapter 388-101 WAC and contract provisions.

POLICY

- A. Contractors shall report costs of operations for purposes of providing data to the division and to determine any settlements due.
- B. The division shall:
 - 1. Set standard rates for each cost center for programs covered within this policy;
 - 2. Describe allowable costs and specify the reporting requirements;
 - 3. Describe the rate setting methodology and principles that apply to programs;
 - 4. Describe the settlement process as it applies to residential programs;
 - 5. Describe the summer program requirements and payment procedures; and
 - 6. Provide information on billing and payment requirements and procedures.

PROCEDURES

I. REPORTING

A. Cost Reports

- 1. In order for a contractor to receive payments under the residential reimbursement system, the contractor must submit an annual DDD cost report covering the completed calendar year.
- 2. If a contractor terminates from the residential program, the former contractor shall submit a final annual report covering the period the

contract was in effect during the calendar year. The final annual report shall be used for determining a settlement for the final period.

B. Due Date of Report

1. The cost report shall be submitted on or before March 31 of the year following the calendar year covered in the report.
2. Cost Report Extension Provisions
 - a. A thirty (30) day extension beyond the date specified above will be granted to contractors upon written notification to the Office of Rates Management that the additional time is required to complete the report. The notification shall include a brief explanation of the circumstances that require the extension. An approval from the department will not be required for this thirty (30) day extension.
 - b. The department, upon a written request setting forth reasons for the necessity of an extension beyond the thirty (30) day extension specified above, may grant an additional thirty (30) day extension for submitting the cost report. The request must be written and received by the Office of Rates Management prior to the due date as specified in 1. and 2.a. above. The Office of Rates Management will respond to this request within ten (10) working days from the date of receipt.

C. Completing Reports and Maintaining Records

1. Reports shall be completed in accordance with instructions provided by the department. If no specific instruction covers a situation, generally accepted accounting principles shall be followed.
2. The department may analyze the submitted cost report and financial statement of each contractor to determine if the information is correct, complete, and reported in conformance with generally accepted accounting principles and the requirements of this contract and those policies, rules and regulations referenced therein. If the analysis finds that the cost report or financial statements are incorrect or incomplete, the division may make adjustments to the reported information.
3. A schedule of adjustments shall be provided to contractors in writing and shall include an explanation for the adjustments and dollar amounts of the adjustments.

- a. If a contractor disagrees with an adjustment made under this section, the contractor shall, in writing, identify specifically the grounds for his/her contention that the adjustment is erroneous and include any documentation that supports the contractor's position.
 - b. If the contractor wishes to challenge the division's determination of the contractor's contention from subsection a., the contractor may request an administrative review pursuant to Chapter 388-101 WAC and/or the dispute clause as described in the general terms and conditions of the contract.
4. Contractors shall submit a single cost report that includes all business activities related to the cost of providing contracted services.
 5. Facilities with joint residential program costs shall allocate and report shared costs to each residential program in accordance with allocation policies prescribed or approved by the department.
 6. If a contractor fails to maintain records adequate for audit purposes or fails to allow inspection of such records by authorized personnel, the department may suspend all or part of subsequent payments due under the contract until compliance is forthcoming. Upon compliance, the department shall resume contract payments and shall release suspended payments pursuant to the contractor's contract.
 7. Contractors shall maintain cost reports and records adequate for audit purposes. If, at the end of the contract retention period as specified in the work order, there are unresolved audit questions, the report will be retained until such questions are resolved.

D. Report Certification

1. Each required report shall be accompanied by a certification signed on behalf of the contractor responsible to the department during the report period. If the contractor files a federal income tax return, the certification shall be executed by the person normally signing this return. If the report is prepared by someone other than an employee of the contractor, a separate statement shall be included with the certification signed by the individual preparing the report and indicating his/her status with the contractor.
2. If a contractor knowingly files a report containing false information, such action constitutes cause for termination of the contractor's contract with

the department. Contractors filing false reports may be referred for prosecution under applicable statutes.

E. Improperly Completed or Late Reports

1. An annual cost report must be completed in accordance with applicable department regulations and instructions. An annual cost report deficient in any of these respects may be returned in whole or in part to the contractor for proper completion.
2. If a report is not properly completed or is not received by the division on or before the due date of the report, including any approved extensions, all or a part of any payments due under the contract may be held by the department until the improperly completed or delinquent report is properly completed and received by the division.

II. REIMBURSABLE COSTS

A. Reimbursable Costs Definition

Reimbursable costs are documented costs that are necessary, ordinary and related to the provision of client support, training and activities as prescribed in Chapter 388-101 WAC and contract.

B. Depreciable Assets

The following costs shall be reported as depreciable assets:

1. Expenditures for equipment, furnishings or vehicles with historical acquisition cost in excess of \$5,000 per unit and a useful life of more than one (1) year from the date of purchase;
2. Expenditures for equipment or furnishings with historical acquisition value of less than \$300 per unit if the item was acquired in a group purchase where the total acquisition cost exceeded \$5,000 and has a useful life of more than one (1) year from the date of purchase;
3. Expenditures for building, land and/or leasehold improvements which are in excess of \$5,000 and which extend the useful life of the asset; and
4. Expenditures for assets as described above with historical acquisition value less than \$5,000 may be reported as depreciable assets, or expensed in the year they were purchased.

C. Equipment and Building Expenses

The following costs shall be reported as expenses:

1. Those expenditures for equipment, furnishings, or building, land, or leasehold improvements not subject to classification as a depreciable asset; and
2. Repairs (damages) or maintenance (upkeep) costs that do not extend the useful life or increase the value of the building, equipment, furnishings or vehicles.

D. Reporting Depreciable Assets

1. Depreciable assets may include the following:
 - a. *Building* - The basic structure or shell and additions.
 - b. *Fixed Equipment* - Attachments to the building such as wiring, plumbing, and heating system.
 - c. *Movable Equipment* - Such items as furnishings, beds, stoves, refrigerators, silverware, and dishes.
 - d. *Vehicles* - Such items as automobiles or vans used to transport residents to activities, training, or work.
 - e. *Land Improvements* - Such items as paving, on-site sewer and water lines, parking areas, shrubbery, fences, government assets, etc., where replacement is the responsibility of the Group Home and Group Training Home.
 - f. *Leasehold Improvement* - Improvements and additions made by the lessee (contractor) to the leased property, which become the property of the lessor after the expiration of the lease.
2. Land is not a depreciable asset. Land includes the cost of such items as off-site sewer and water lines, the cost of permanent roadways, curbs and sidewalks, and utility hookups.

3. Depreciable assets shall be reported as follows:
- a. The base used to calculate depreciation shall be:
 - (i) The historical cost to the contractor in acquiring the asset or capitalized expense from an unrelated organization less the estimated salvage value, if any; or
 - (ii) The fair market value of the donated or inherited asset or asset purchased with restricted donation at the time of donation or death less goodwill and salvage value, if any; or
 - (iii) Assets or capitalized expenses acquired from a related organization, which shall not exceed the lower of cost to the related organization or the cost of comparable assets purchased elsewhere.
 - b. The lives used to calculate depreciation expenses shall be:
 - (i) Building - Not less than thirty (30) years.
 - (ii) Building Improvements - The remaining useful life of the building as modified by the improvement.
 - (iii) Other Assets - Lives no shorter than guideline lives published by the IRS or by the American Hospital Association.
 - (iv) Lives shall be measured from the date of the most recent arm's-length acquisition of the asset.
 - c. The depreciation expense methodology used shall be acceptable by generally accepted accounting principles, and the IRS methodology for the asset class being depreciated.
 - d. Changes in depreciation methodology during the life of the asset must be disclosed on the annual cost report.

E. Interest

1. Interest is defined as necessary and ordinary interest for working capital and capital indebtedness, which must be incurred for a financial need related to resident care, training, and activities.
2. Interest cost shall be at a rate not in excess of what a prudent borrower would have to pay at the time of the loan in an arm's-length transaction in the financial market.
3. Interest paid to a related organization shall not be reported in excess of the cost to the related organization of obtaining the use of the funds.

F. Donations and Contributions

1. Donations or contributions are classified as:
 - a. Restricted - Grants, gifts, income from endowments in the form of purchasing power which must be used only for specific purposes designated by the donor. Items whose nature restricts its use, such as food, supplies, equipment, vehicles or building space.
 - b. Unrestricted: Grants, gifts, and income from endowments in the form of cash or purchasing power given to the facility without restriction by the donor.
 - c. Volunteer time and donated consultant time.
2. Donations or contributions are reported as follows:
 - a. The value of a restricted donation/contribution shall not be reported as an expense on the cost report.
 - b. The value of an unrestricted donation/contribution shall be reported in the expense account for which it was used through the contractor's normal recording of transactions.
 - c. The value of the volunteer/donated time shall not be reported as an expense on the cost report.

G. Related Organization/Party Costs

1. Costs of services, facilities, and supplies furnished by related organizations to the contractor shall be reported at the lower of the costs to

the related organization or the price of comparable services, facilities or supplies purchased elsewhere.

2. The cost of a related party lease shall be reported based on the lower of actual ownership cost (i.e., interest, depreciation, taxes, and insurance) to the related party or the arm's-length lease to the related party.

H. Joint Program Costs

1. Joint program costs are defined as expenses benefiting more than one program, or one program and any other entity.
2. Costs shall be allocated in accordance with cost reporting instructions.

I. Transportation Costs

1. Transportation costs are defined as:
 - a. Ordinary and necessary transportation of clients for training and activities.
 - b. Ordinary and necessary transportation of employees for program administration and operation.
 - c. Ordinary and necessary travel of employees for in-service training and education.
2. The following costs shall be reported:
 - a. The costs of operating vehicles limited to automobiles, vans, pickup trucks or buses that are used for the purposes defined in this section, including maintenance, repairs and operation. A mileage log shall be maintained detailing the usage of each vehicle not used one hundred (100) percent for the purposes defined in this section.
 - b. The costs of public transportation for clients, volunteers and staff, which are for the purposes defined in this section.
 - c. The costs of mileage reimbursement of employees and volunteers using their personal vehicle for actual mileage for the purposes defined in this section.

- d. Commuting between an employee's residence and their primary place of employment shall not be included as transportation. If a vehicle is used by any staff for travel that is not defined above, these shall be fringe benefit costs for that employee.
3. The contractor shall not seek or accept additional compensation from or on behalf of a client for any or all contracted residential services except:
 - a. The contractor shall notify DDD in writing when the client contributes toward his/her costs for transportation.
 - b. Costs incurred by the contractor associated with this provision are unallowable costs and shall not be reported on the annual cost report.

J. Instruction and Support Services

1. ISS compensation for performance of ISS duties by an individual shall be reported as ordinary compensation for necessary services actually performed.
2. Compensation is ordinary when it is within a reasonable amount usually paid to an individual with necessary qualifications for similar services within the same or comparable programs.
3. A service is necessary if it would have had to be performed by another person if the individual in question had not performed it.
4. The reported ISS compensation for an individual staff must not exceed the reasonable amount criteria per item 2 above.
5. The division may request job descriptions for employees to verify the primary duties of the positions. Paid hours worked and payroll costs charged to ISS for cost reporting purposes must be verifiable in the agency's records. The number of ISS paid hours reported for any individual employee or owner of an agency must not exceed 3,120 hours per year (designated live-in staff are exempt from this limitation). ISS staff shall also include contracted personnel whose job function is the provision of instruction and support services.

K. Fringe Benefits

Fringe benefits provided at the employer's expense may include sick leave, health insurance, paid vacation, holiday pay, retirement plan, as well as other benefits, to all employees who qualify.

III. RATE SETTING PRINCIPLES/PROCEDURES/STANDARDS

A. Rate Setting Principles

1. Rates established under the provisions of this contract shall be only for SL or GH and GTH programs holding applicable state licenses and certified to provide residential services in accordance with applicable state laws, regulations, and contract provisions.
2. Rates shall be set prospectively.
3. Rates are payments for costs that are necessary, ordinary, and related to the provision of residential program instruction and support as prescribed in Chapter 388-101 WAC and the residential services contract.
4. Rates shall be set in accordance with state legislative appropriation.
5. Rates shall be the contractor's maximum compensation within each cost center.

B. Reimbursement Cost Centers

A contractor's rate shall consist of the following cost centers:

1. Instruction and Support Service Cost Center; and
2. Indirect Client Support/Administrative Cost Center (SL Programs), or
3. Non-ISS Cost Center (GH and GTH Programs)

C. Instruction and Support Service Cost Center Rate

1. The ISS cost center rate will reimburse for salaries, wages, fringe benefits, and payroll taxes related to instruction and support staff (see Definitions section for ISS staff included). Payroll taxes for purposes of this section shall include the amount of B & O tax expense incurred by the agency for the reporting period that is applicable to the revenue received from the department relating to ISS cost center reimbursement.

2. Establishing the ISS cost center rate for residential services programs:
 - a. The residential services program ISS number of hours per client day are determined in order to be in compliance with the provisions of Chapter 388-101 WAC, the division's program objectives and individual client needs.
 - b. For establishing instruction and support service cost center rates, one of three compensation rates will be utilized for instruction and support staff. The ISS compensation rate shall be applicable to the county (MSA, Non-MSA or King) in which the clients are served and shall be based upon state legislative appropriation. Exceptions to the single rate may be made when professional/licensed staff are used.
 - c. Contractors will submit a staffing schedule using *Residential Staff Schedule Reporting* (see Attachment E for sample) to their DDD Resource Manager (RM) for clients who are assessed as support levels 3b, 4, 5 and 6 as required by Chapter 388-101 WAC. The RM may also request a staffing schedule for clients assessed at levels 1, 2 or 3a. Refer to Chapter 388-828 WAC for the determination of levels of support.
 - d. For rates effective July 1, 2007 in:
 - (i) Non-MSA counties, the ISS compensation rate shall be \$15.18 per hour for salaries, wages, payroll taxes, and fringe benefits.
 - (ii) MSA counties, the ISS compensation rate shall be \$15.49 per hour for salaries, wages, payroll taxes, and fringe benefits.
 - (iii) King County, the ISS compensation rate shall be \$16.11 per hour for salaries, wages, payroll taxes, and fringe benefits.
 - e. For rates effective July 1, 2008 in:
 - (i) Non-MSA counties, the ISS compensation rate shall be \$15.48 per hour for salaries, wages, payroll taxes, and fringe benefits.

- (ii) MSA counties, the ISS compensation rate shall be \$15.80 per hour for salaries, wages, payroll taxes, and fringe benefits.
- (iii) King County, the ISS compensation rate shall be \$16.43 per hour for salaries, wages, payroll taxes, and fringe benefits.

D. Indirect Client Support/Administrative; and Non-ISS Rates

1. Each agency operating a residential program shall have a designated administrator (388-101 WAC).
2. Supported Living Programs Specific:

The Indirect Client Support/Administrative, cost center rate will reimburse for administrative staff and general management including but not limited to, corporate fees and allocated costs, accounting and bookkeeping; required transportation not otherwise reimbursed; maintenance supplies and purchased services; housekeeping supplies and purchased services; food and dietary supplies; utilities, insurance and taxes; and, lease, interest and depreciation costs related to reimbursable assets used in the residential program.

3. Group Home and Group Training Home Programs Specific:
 - a. The non-ISS cost center rate component compensates for all non-ISS activities including administration, business expenses, facility capital and maintenance expenses, activities supplies and client transportation.
 - b. A standardized Non-ISS cost center rate table (see Attachment C, *GH and GTH Non-ISS Rate Table*) is used to determine the Non-ISS rate for GHs and GTHs. The standardized rate is determined from a formula based on:
 - (i) The ISS hours per client day, including any professional service hours (e.g., nurse); and
 - (ii) The number of clients residing in the GH and GTH.
4. The RA or designee will provide a contractor with a status report of a pending rate proposal within thirty (30) days after receipt of the proposal

and of any documentation necessary to support the proposal. The department's response to the request will be in writing.

E. Rate Setting Procedures

For clients newly referred for SL or GH and GTH services, or transferring from another contractor:

1. SL Services

- a. Indirect Client Support/Administrative rates for all non-ISS cost components, except for those listed in "i through iii" below, are standardized. The ISS hours per client day, including any professional service hours (e.g., nurses), are used to determine the administrative rate (see Attachment B, *SL Indirect Client Support/Administrative Rate Table*). The rates for the following indirect client support cost components are not included in the Administrative Rate Table, and are calculated as described below.
 - i. Housing costs for overnight coverage models (not part of ISS staff compensation): For programs that have these costs, the rate will be calculated on actual expected costs. An itemized budget sufficient to determine anticipated cost attributable to individual clients will be required for review and approval by DDD.
 - ii. Transportation Costs: The transportation assessment (see Attachment D) will be used to predict the transportation cost for each client and provide the corresponding rate.
 - iii. Maintenance and Repair of Client's Housing: A rate may be established to compensate for expenses incurred if a client has behaviors that may cause frequent (e.g., weekly or more often) damage to their home. Rates established for this purpose are unique situations and are subject to review and approval by DDD.
- b. That portion of the Indirect Client Support/Administrative rate that is attributed to Client Transportation, Housing Cost for Overnight Coverage, and Maintenance and Repair of client housing may be reviewed and adjusted as necessary to reflect anticipated necessary and reasonable costs for these cost components.

2. GH and GTH Services
 - a. The rate for all non-ISS cost center activities is standardized. The standardized rate is derived from a formula based on factors as described in part C of this section.
 - b. For clients who reside in a GH or GTH in which one or more clients use wheelchairs, the appropriate (non-MSA, MSA or King County) GH and GTH Non-ISS Rate Standard schedules for “Clients who Use Wheelchairs” is used. The rates in these schedules are enhanced to reflect the higher cost of transportation and facility maintenance cost.
3. For purposes of this section, a contractor that provides services in multiple regions is considered a separate contractor in each region.

IV. RATE ADJUSTMENTS

A. Adjustments

1. Rates may be adjusted in accordance with state legislative appropriation as described herein.
2. ISS Rate Component: Rates may be adjusted for changes in staffing in order to be in compliance with the provisions of Chapter 388-101 WAC, the residential program contract, and/or program policies.
3. When ISS hours are adjusted for clients in service during the 2007-2009 contract period, the contractor’s weighted average ¹ Indirect Client Support/Administrative (SL) or Non-ISS (GH and GTH) rate will not decrease, nor will the contractor’s weighted average administrative or non-ISS rate increase above the standard rate.
4. Indirect Client Support/Administrative (SL) and Non-ISS (GH and GTH) rates that are currently below the standard will be adjusted according to legislative funding and direction.
5. Clients who receive an adjustment to their ISS hours, or who reside in a GH and GTH that has a change in the number of residents, may have an

¹ The Weighted Average Administrative rate is derived by calculating an agency’s current daily administrative rate revenue ((sum of the number of clients @ each current administrative rate) divided by the total number of clients) e.g., (4 * \$25.00 + 3 * \$40 + 5 * \$30) = \$370 / 12 clients = \$30.83 = Weighted Average Administrative Rate.

adjustment to the Indirect Client Support/Administrative (SL); or Non-ISS rate (GH and GTH) for the new ISS hours only.

See worksheets [Administrative Rate Adjustment Worksheet For When ISS Hours Are Adjusted \(5/25/2007\)](#) and [Group Home Non-ISS Rate Adjustment Worksheet \(5/25/2007\)](#). These worksheets are in Excel format and are available on the DDD Internet site at: http://www1.dshs.wa.gov/ddd/res_provider_resources.shtml.

6. **Rate Setting Process (applies only to those clients who are in the agency's contract as of July 1, 2008):**

When the rate setting process for all clients served by the contractor have been completed:

- a. An adjustment to the contracted ISS hours will be made for all clients to match the hours as determined through the rate setting process.
- b. Adjustments to the administrative component of rates will follow the same criteria as described for rate adjustments in section 5 above. However, the contractor's total average administrative rate will not change as a result of rate adjustments for individual clients. See also Exhibit B of the residential contract.

7. All new clients referred to the agency will have their daily rate determined using the DDD Residential Rate Calculator.

B. **Request Procedure**

1. A contractor may request an adjustment to a client's current daily rate at any time if the client's need changes or if there is a change in the household configuration.
2. Each request must be in writing and must include a detailed proposal for staffing needs and the factors requiring a change in current staffing. The staffing needs proposal must also include a staff coverage schedule using the *Residential Staff Schedule Reporting* (see Attachment E).

V. NOTIFICATION

A. Rate Notification Requirements and Effective Dates

1. The department will notify each contractor in writing of his/her reimbursement rate.
2. The department will issue a rate notification document as Exhibit B of the Residential Program Services contract, which identifies the rate components and total rate for each client served by the contractor.
3. Unless otherwise specified in the notification, rate adjustments resulting from a contractor request shall be effective the first day of the month in which the rate is issued.

B. Public Review and Disclosure

1. The department will provide all interested members of the public with an opportunity to review and comment on proposed rate setting methodology.
2. The department will make information regarding the department's rate setting methodology and rates available to the public.

VI. CLIENT-SPECIFIC RESIDENTIAL STAFF ADD-ON

A. Procedures

1. A client-specific staff add-on may be authorized whenever a client's safety and well-being are seriously threatened and/or when a client is at risk of losing residential support services.
2. A contractor requesting staff add-on hours shall, upon request, submit a Staff Add-On Request (see Attachment F for sample) to the RM that demonstrates the contractor has used, or will use, all of the ISS hours included in his/her residential services contract and submit a staffing schedule indicating how the additional hours will be provided.

B. Authorization

1. The contractor shall request staff add-on authorization from the specific client's Case Resource Manager (CRM). In emergency situations, the original request may be verbal but shall be followed up in writing on the next working day. In non-emergency situations, the request shall be

submitted in writing prior to approval. The request will include documentation of circumstances and justification of need.

2. The contractor shall submit the request for a residential staff standardized add-on form (see Attachment F for sample) to the RM. The CRM, his/her supervisor, and the responsible RM shall evaluate the need for the staff add-on.
3. If after discussion with the contractor, a viable alternative is not identified, the RM will forward the vendor's request, including the contractor's documentation of the circumstances, and a recommendation for approval or disapproval to the RA or designee. If approved, the staff add-on will be authorized through the standard SSPS process.
4. A staff add-on is intended to be a temporary arrangement for a period of time up to ninety (90) days. If the need for the add-on appears to continue beyond the ninety (90) day period, the need for a continued add-on or a contract change will be evaluated.

C. Reimbursement

Reimbursement for staff add-ons will be for the number of additional staff hours authorized and actually provided by the contractor and will be reimbursed at the ISS benchmark rate in effect during the period the add-on hours were provided.

D. Settlement

Staff add-on reimbursements will be subject to the settlement provisions of this policy.

VII. SETTLEMENT

A. Settlement Definition

1. The settlement shall be for under utilization of contracted and paid service hours and dollars in the instruction and support service cost center. The settlement shall also correct for billing or payment errors.
2. Settlements shall be based on department payment system(s) reports, the contractor's financial reports, and/or other department-specified reports or documents.
3. The provisions of section VII will apply to the settlement calculation for the entire calendar year in which the contract becomes effective.

4. A settlement as described in this section is considered an overpayment as defined in DSHS Administrative Policy 10.02, *Overpayments and Debts for Providers and Vendors*:

“Overpayments and debts: is any department payment or benefit to a vendor or provider in excess of the amount the provider or vendor was entitled to by law, rule, or contract.”

B. Settlement Determination

The contractor shall refund the greater of:

1. All amounts of ISS cost center rate reimbursement in excess of the allowable instruction and support service costs as defined in this policy, and as reported in the contractor’s annual cost report and/or department-specified documents.
2. The total annual reimbursed hours for ISS and professional/licensed staff minus actual total annual paid hours worked as reported in the contractor’s annual cost report and/or department-specified documents, multiplied by the weighted average reimbursement wage rate for ISS staff in effect during the settlement period.
3. Contractors not using all of their contracted ISS hours must provide information as to why the hours were not used and document the attempts to provide those hours. A plan to prevent future occurrences must be submitted.

Beginning January 1, 2009, agencies that are above the administrative rate standard for the reporting year will be required to return the administrative dollars associated with unused contracted ISS hours as determined by DDD.

The contractor may elect to have a two-year option for the administrative rate settlement following the same criteria and procedures as described in item G of this section.

4. When submitting a cost report that includes a settlement, a contractor that has had extraordinary ISS costs during the year may request to apply those extraordinary costs toward the settlement. The agency making the request may submit narrative justification and a breakdown of associated costs to enable the division to analyze the request.

C. Administrative Staff Hours Counted as ISS for Settlement Purposes

1. GH and GTH program administrators may provide ISS hours.
2. SL and combined programs (GH, GTH and SL):
 - a. For residential services programs that have twenty (20) or fewer FTE employees that support clients during the settlement period, settlements may include the program administrator's hours worked in an ISS staff capacity. The cost that may be applied in the settlement computation is the total hours worked as ISS staff multiplied by the benchmark compensation rate in effect during the period that the hours were worked.
 - b. For residential services programs that have more than twenty (20) FTE employees that support clients during the settlement period, settlements may not include administrator's hours worked in an ISS staff capacity in their settlement computation.
 - c. The hourly rate allowed for the administrator's cost shall not exceed the contractor's instruction and support staff compensation rate as specified in the contractor's contract and rate notification.
 - d. An exception to item "b" above may be requested by any contractor. A copy of the approved exception to policy (ETP) must accompany the annual cost report if the administrative hours are reported as ISS for settlement purposes.

D. Programs Combined for Settlement

1. Contractors that have contracts with the division for the operation of multiple residential programs within a single region may collapse those contracts into a single contract for any combination of GH and GTH and SL programs. The single contract will identify the type(s) of residential program(s) and all applicable rates.
2. Programs combined under a single contract will be treated as a single entity for purposes of the settlement provisions of this policy. The contractor may combine the total reimbursement for ISS hours and compensation amounts subject to settlement per the contract, and the combined total of paid ISS hours and compensation into a single settlement calculation.

E. Cost Shifts

Contracts that have Indirect Client Support/Administrative cost center costs greater than their Indirect Client Support/Administrative cost center reimbursement may submit a request to shift the excess cost to reduce a settlement for the period. All cost shifts are subject to approval of the RA, whose decision may be appealed to the Division Director.

1. Indirect Client Support/Administrative cost center costs will not include that portion of the program administrator's hours and compensation that may be charged against the ISS cost component under the provisions of this policy.
2. For purposes of this section, allowable administrative costs including administrative staff salaries or other compensation (excluding payroll taxes and health benefits) shall not exceed six (6) percent over the level reported in the contractor's cost report, adjusted for increases in capacity from the previous year. If market conditions cause an increase in administrative costs exceeding six (6) percent from the previous year, the costs and conditions may be documented by the contractor and will be considered by the division.
3. It is recommended that the agency requesting a cost shift submit relevant documentation to enable the division to analyze the request.
4. The division may request additional information and documentation it deems necessary from the contractor to evaluate the Indirect Client Support/Administrative loss cost shift request.
5. A contractor whose weighted average administrative rate was at or above the administrative rate standard during the reporting period will not be considered for settlement relief through the cost shift process.
6. An Indirect Client Support/Administrative Loss Cost Shift request resulting from ISS hours not provided shall be reviewed with the assistance of the central office Rates and Reimbursement section. The RA or designee may examine the contractor's records as necessary to assess the reasonableness of the proposed cost shift.

F. Settlement Process

The division will determine a settlement amount for each calendar year.

1. The contractor shall pay a settlement overpayment amount, or shall commence repayment in accordance with a schedule determined by the department, within thirty (30) days after receiving departmental notification of the overpayment amount. If a settlement determination is contested, the contractor shall pay or commence repayment within thirty (30) days after such proceedings are concluded.
2. The department will pay any amount due the contractor as a result of errors in billing or payment disclosed on the settlement within thirty (30) days after issuance of departmental notification of the amount due the contractor.
3. If the contractor does not refund the overpayment or any installment when due, or after the final decision from any administrative or judicial remedy sought by the contractor regarding the amount due, the department may withhold payments from current billings until the overpayment is refunded.
4. A proposed settlement may be revised by the department on the basis of audit findings or DDD certification evaluation findings.

G. Optional Two-Year Settlement Process

1. The contractor may elect to have an optional two (2) year settlement. These settlements shall allow a collaborative process in order to minimize settlements due.
2. Contractors will indicate on their first year cost report whether or not they wish to participate in the optional two (2) year settlement process. Contractors may initiate the planning process with the region during the first year if preliminary data indicates that a settlement will materialize.
3. Information derived from the first year's cost report will be used to develop a joint plan for use of the unspent ISS dollars to be followed during the second year of the settlement period. These funds will be used to increase service capacity or extend services to additional people. Funds retained through this process would be expended on direct supports rather than agency administration costs.
4. A joint plan will be produced by June 15th of the second settlement year. If no plan is agreed upon by this date, the first year settlement amount is due according to the provisions of the previous settlement section.

VIII. SUPPLEMENTAL PAYMENTS

A. Supported Living (SL) Client Evaluation

1. If the division refers a client to an SL program and additional costs are incurred by the program in order to ascertain whether or not to accept the referred client, the division may reimburse the contractor for these additional costs.
2. The division may reimburse the contractor \$20.00 per hour for the additional costs associated with the referral as negotiated with the RA or designee.
3. The contractor must obtain prior authorization by submitting a written request for payment to the division's Field Services office. If the request is approved, the Field Services office will issue written notification authorizing payment.

B. Summer Program

1. DDD may provide summer program funding for clients through age 21 who are in division-contracted residential programs, currently enrolled in school, and whose local public schools do not offer summer programs. The division may make funding available for this program, to the extent funds are available, for such purposes in the division's biennial appropriation. The summer program funded by the division is not to be interpreted as a substitute for the programs offered by the contractor during evening and weekend hours.
2. Residential program contractors who serve students may develop a summer program plan and budget, using a format approved by the division (see Attachment A, *Summer Program Request*) for each eligible person based on the individual's needs, available community resources, and funding. The contractor will submit the proposed plan to the regional office for approval.
3. The regional office will notify the contractor in writing of the approval and the amount to be authorized. Unless a special fee-for-service rate has been approved in writing by the RA, payment to the contractor will be at the standard fee-for-service (see Attachment A, *Summer Program Request*). Summer program payments will be authorized and paid through the DSHS Social Service Payment System (SSPS).

4. The contractor's expenditure of funds received through this supplemental payment will be limited to the purchase of the following services and/or materials: summer program fees (e.g., park, swimming pools, etc.), and transportation, staff and supplies (equipment costing \$1,000 or more and having a useful life of more than one (1) year may not be purchased). All ISS hours and related costs funded through summer program supplemental payments are not to be reported by the contractor as a reimbursable expense and are not subject to settlement provisions.
- C. Tuition Reimbursement For Group Home (GH) and Group Training Home (GTH) Contractors
1. The division may reimburse GH and GTH contractors for the cost of tuition incurred to provide mandated training for ISS staff.
 2. Nurse delegation costs may be authorized when it is necessary to train ISS staff to act as nursing assistants under the nurse delegation act, whether or not the contractor employs or contracts with professional/licensed staff.

IX. BILLING AND PAYMENT

A. Billing Procedure

1. A contractor shall bill the department each month by completing and returning the service invoice provided by the department. The service invoice shall be completed and submitted in accordance with instructions issued by the department.
2. A contractor shall not bill the department for services provided to a resident until a department authorization form relating to the resident has been received. At that time the contractor may bill for provided services retroactive to the date the resident was admitted or became eligible.

B. Vacancy Payments for Group Homes and Group Training Homes

1. Condition for Reimbursement of Program Vacancies

The division shall reimburse a contractor for program vacancies resulting from:

- a. Client movements from the GH and GTH, including trial and permanent placements that are authorized by the division;

Note: GH and GTH social and medical leaves are reimbursed pursuant to DDD Policy 6.12, *Residential Reporting Requirements, Including Abuse/Neglect Reporting*.

- b. Participating client terminations from the program that are authorized by the division;
- c. Emergencies wherein a GH or a GTH client or participating tenant leaves the contractor's program without prior notification to the division; and
- d. A written schedule approved by the appropriate RA or designee for the initial phase-in for client placements for new program contractors.

2. Approval for Payment

When there is a potential paid vacancy, the division shall consider with the contractor whether a paid vacancy, rate redistribution or downsizing is most appropriate. When filling a vacancy is approved, approval for program vacancies shall be as follows:

- a. Payment for vacancies must be approved in writing by the RA. The written approval shall be sent to the contractor.
- b. Payment for each authorized vacancy shall not exceed 31 days.
- c. Payment for vacancies may be re-approved by the RA or designee for a period not to exceed 31 days. Each re-approved vacancy authorization shall not exceed 31 days.
- d. Each vacancy authorization may be approved for a maximum of three (3) months. Vacancy authorizations beyond three (3) months may be approved by exception by the RA.

3. Payment for program vacancies shall be as follows:

- a. The contractor shall be reimbursed for authorized vacancies at the rate paid to the contractor for authorized clients.
- b. Payment for authorized vacancies shall begin the last day that a terminated client was authorized for the program. Payment for authorized vacancies shall end the day before a new client is

authorized for the program, or the ending date of the authorized vacancy.

- c. Payment for authorized vacancies for the phase-in of clients for a new program contractor shall begin with the first day that the first client moves into the program and shall continue pursuant to the approved written schedule.

C. Charges to Clients

1. The department will notify a contractor of the amount each GH and GTH client is required to pay for care provided under the contract and the effective date of such required contribution. It is the contractor's responsibility to collect the authorized cost of care from the client.
2. If a contractor receives documentation showing a change in the income or resources of a GH and GTH client that will mean a change in his/her contribution toward the cost of care, this shall be reported in writing to the DDD regional office within 72 hours. If necessary, appropriate corrections shall be made in the next monthly billing, and a copy of documentation supporting the change shall be attached.
3. The contractor shall accept the reimbursement rate established by the department as full compensation for all services under the contract. The contractor shall not seek or accept additional compensation from or on behalf of a client for any or all contracted residential services. The RA or designee may grant exceptions to this policy based on assessment of individual client resources and needs, whereby individual clients may contribute toward or provide for their individual transportation costs. This request for exception and the approval shall be in writing.

D. Cost of Care Adjustment for Supported Living Programs

1. The cost of care adjustment applies to existing or new SL programs.
2. The cost of care adjustment may not exceed the cost of care per client when the program is operating at full capacity.
3. A cost of care adjustment may be authorized under the following circumstances:
 - a. As part of a resident "phase-in" process when a new program is being developed or an existing program is being expanded;

- b. In an existing SL program when a client shares support hours with other clients and moves out, either permanently or temporarily, and there is no other client available to move in immediately, or the client's home must be maintained until his/her return. When there is a potential cost of care adjustment, the division shall consider with the contractor whether a cost of care adjustment, rate redistribution or downsizing is most appropriate.
4. The contractor will submit an application for the cost of care adjustment using [DSHS 06-124, Cost of Care Adjustment Request](#).
5. Each cost of care adjustment authorization may be approved for a maximum of three (3) months. Cost of care adjustments beyond three (3) months may be approved by exception by the RA. Special consideration will be given to agencies in which no referral has been made within the three (3) months.

E. Payment

1. The department will reimburse a contractor for services rendered under the residential services contract and billed in accordance with department instructions.
2. The amount paid will be computed using the appropriate rate assigned to the contractor.
3. For each GH and GTH client, the department will pay an amount equal to the appropriate rate(s), multiplied by the number of authorized and provided days of service each rate was in effect, less the amount the client is required to pay for his/her care.
4. For each SL client, the department will pay an amount equal to the appropriate rate(s), multiplied by the number of authorized and provided days of service each rate was in effect.

F. Suspension of Payment

1. Payments to a contractor may be withheld by the department in each of the following circumstances:
 - a. A required report is not properly completed and filed by the contractor within the appropriate time period, including any approved extensions. Payments will be released as soon as a properly completed report is received.

- b. Auditors or other authorized department personnel in the course of his/her duties are refused access to the residential services program or are not provided with existing appropriate records. Payments will be released as soon as such access or records are provided.
 - c. A refund in connection with an annual settlement or rate adjustment is not paid by the contractor when due. The amount withheld will be limited to the unpaid amount of the refund.
 - d. Payment for the final thirty (30) days of service under a contract will be held pending final settlement when the contract is terminated.
2. No payment will be withheld until written notification of the suspension is given to the contractor, stating the reason therefore.

EXCEPTIONS

Exceptions to this policy may be approved by the Division Director or her designee based upon information submitted on DSHS 05-010, *Rule Exception Request*.

SUPERSESSSION

DDD Policy 6.04
Issued July 1, 2007

DDD Policy 6.04
Issued July 1, 2006

DDD Policy 6.04
Issued September 1, 2005

DDD Policy 6.04
Issued November 1, 2003

DDD Policy 6.04
Issued January 1, 2002

DDD Policy 6.04
Issued April 13, 2000

DDD Policy 6.04
Issued June 8, 1999

DDD Policy 6.04
Issued June 11, 1997

DDD Policy 6.04
Issued December 4, 1995

DDD Policy 6.02
Issued December 30, 1993

DDD Policy 6.05
Issued September 1, 1993

Policy Directive 534
Issued January 14, 1986

Approved: /s/ Linda Rolfe Date: July 1, 2008
Director, Division of Developmental Disabilities

Attachment A - *Summer Program Request/Summer Program Budget/Individual Summer Program Plan*

Attachment B – *Supported Living – Indirect Client Support/Administrative Rate Table*

Attachment C – *Group Home and Group Training Home – Non-ISS Rate Tables*

Attachment D – *Client Transportation Assessment – Supported Living*

Attachment E – *Residential Staff Schedule Reporting*

Attachment F – *Staff Add-On Request (Sample)*

ATTACHMENT A
Summer Program Request / Individual Summer Program Plan

SUMMER PROGRAM REQUEST

General Instructions: Certified agencies providing residential services to school-age clients of the Division of Developmental Disabilities may apply for financial assistance from the division to support summer program activities when local school programs do not operate. In making a request for supplemental payment, the contractor should complete the following application and submit it to the regional Resource Manager.

Agency Name: _____
Mailing Address: _____
Administrator: _____
Anticipated Program Start Date: _____ End Date: _____
Number of School-Aged Persons to Participate: _____

SUMMER PROGRAM BUDGET

A. Request for standard fee-for-service rate of \$284.44 per person:
_____ Number of persons x _____ Number of months (max. of 3) x \$853.32 =
\$ _____ TOTAL FUNDS REQUESTED.

B. Request for special fee-for-service: Complete this budget plan:

Additional staff hours needed _____ x benchmark rate	_____
Public/purchased transportation	_____
Staff mileage reimbursement	_____
Vehicle operations	_____
Summer program supplies	_____
Activity/admission fees	_____
Other (specify)	_____
TOTAL FUNDS REQUESTED	\$ _____

=====FOR REGIONAL USE ONLY=====

Total amount APPROVED	\$ _____
Rate per person per month to be AUTHORIZED	\$ _____

APPROVED:

Field Services Administrator _____
Date

ATTACHMENT A
Summer Program Request / Individual Summer Program Plan

ATTACHMENT A
Summer Program Request / Individual Summer Program Plan

INDIVIDUAL SUMMER PROGRAM PLAN

Person	Birth Date	DDD Case #	Agency
--------	------------	------------	--------

Summer Program Start Date	Summer Program End Date
---------------------------	-------------------------

Give a brief description of planned activities:

Month: _____

Month: _____

Month: _____

We have reviewed this plan and agree it is appropriate to the person's needs, given available community resources and funding.

Agency Representative	Date
-----------------------	------

Assigned Field Services Staff	Date
-------------------------------	------

ATTACHMENT B
Supported Living - Indirect Client Support/Administrative Rate Tables

ISS Hour Range at least but less than		Non-Community Protection Programs			Community Protection Programs		
		Admin. Rate - Non-MSA County	Admin. Rate - MSA County	Admin. Rate - King County	Admin. Rate - Non-MSA County CPP	Admin. Rate - MSA County CCP	Admin. Rate - King County CPP
0.00	0.50	\$9.17	\$9.36	\$10.03	\$10.27	\$10.48	\$11.23
0.50	1.00	\$11.40	\$11.62	\$12.46	\$12.77	\$13.03	\$13.97
1.00	1.50	\$13.65	\$13.91	\$14.92	\$15.28	\$15.59	\$16.72
1.50	2.00	\$15.65	\$15.96	\$17.11	\$17.53	\$17.88	\$19.17
2.00	2.50	\$17.69	\$18.05	\$19.35	\$19.82	\$20.21	\$21.67
2.50	3.00	\$19.95	\$20.35	\$21.82	\$22.35	\$22.80	\$24.44
3.00	3.50	\$22.21	\$22.64	\$24.28	\$24.88	\$25.37	\$27.20
3.50	4.00	\$24.34	\$24.82	\$26.61	\$27.26	\$27.80	\$29.81
4.00	4.50	\$26.20	\$26.72	\$28.64	\$29.35	\$29.93	\$32.09
4.50	5.00	\$27.83	\$28.37	\$30.40	\$31.16	\$31.77	\$34.07
5.00	5.50	\$29.22	\$29.78	\$31.93	\$32.72	\$33.35	\$35.76
5.50	6.00	\$30.40	\$30.99	\$33.21	\$34.04	\$34.70	\$37.21
6.00	6.50	\$31.38	\$32.00	\$34.29	\$35.15	\$35.83	\$38.42
6.50	7.00	\$32.20	\$32.83	\$35.18	\$36.05	\$36.76	\$39.42
7.00	7.50	\$32.85	\$33.49	\$35.90	\$36.79	\$37.52	\$40.22
7.50	8.00	\$33.36	\$34.02	\$36.45	\$37.36	\$38.10	\$40.84
8.00	8.50	\$33.74	\$34.40	\$36.85	\$37.79	\$38.53	\$41.30
8.50	9.00	\$34.07	\$34.74	\$37.22	\$38.15	\$38.90	\$41.70
9.00	9.50	\$34.31	\$34.98	\$37.47	\$38.41	\$39.17	\$41.99
9.50	10.00	\$34.50	\$35.18	\$37.67	\$38.62	\$39.38	\$42.21
10.00	10.50	\$34.67	\$35.35	\$37.86	\$38.82	\$39.58	\$42.42
10.50	11.00	\$34.83	\$35.51	\$38.04	\$39.00	\$39.75	\$42.62
11.00	11.50	\$34.97	\$35.66	\$38.19	\$39.16	\$39.92	\$42.80
11.50	12.00	\$35.13	\$35.81	\$38.35	\$39.32	\$40.10	\$42.98
12.00	12.50	\$35.30	\$35.99	\$38.55	\$39.51	\$40.29	\$43.19
12.50	13.00	\$35.47	\$36.16	\$38.74	\$39.71	\$40.49	\$43.41
13.00	13.50	\$35.66	\$36.36	\$38.96	\$39.93	\$40.71	\$43.64
13.50	14.00	\$35.84	\$36.54	\$39.15	\$40.12	\$40.90	\$43.84
14.00	14.50	\$36.01	\$36.72	\$39.33	\$40.30	\$41.09	\$44.05
14.50	15.00	\$36.17	\$36.88	\$39.51	\$40.48	\$41.28	\$44.25
15.00	15.50	\$36.44	\$37.15	\$39.80	\$40.75	\$41.56	\$44.56
15.50	16.00	\$36.65	\$37.37	\$40.05	\$41.00	\$41.81	\$44.81
16.00	16.50	\$36.88	\$37.61	\$40.30	\$41.26	\$42.06	\$45.09
16.50	17.00	\$37.24	\$37.97	\$40.70	\$41.68	\$42.50	\$45.55
17.00	17.50	\$37.81	\$38.55	\$41.30	\$42.30	\$43.13	\$46.24
17.50	18.00	\$38.37	\$39.12	\$41.92	\$42.94	\$43.79	\$46.93
18.00	18.50	\$38.93	\$39.68	\$42.54	\$43.57	\$44.42	\$47.63
18.50	19.00	\$39.50	\$40.28	\$43.18	\$44.23	\$45.10	\$48.35
19.00	19.50	\$40.12	\$40.90	\$43.83	\$44.91	\$45.78	\$49.09
19.50	20.00	\$40.76	\$41.56	\$44.53	\$45.62	\$46.51	\$49.85
20.00	20.50	\$41.38	\$42.19	\$45.21	\$46.31	\$47.21	\$50.60
20.50	21.00	\$41.98	\$42.81	\$45.85	\$46.97	\$47.89	\$51.33
21.00	21.50	\$42.57	\$43.40	\$46.48	\$47.62	\$48.54	\$52.03
21.50	22.00	\$43.13	\$43.98	\$47.09	\$48.23	\$49.18	\$52.72
22.00	22.50	\$43.68	\$44.53	\$47.70	\$48.86	\$49.82	\$53.40
22.50	23.00	\$44.20	\$45.07	\$48.30	\$49.46	\$50.44	\$54.06
23.00	23.50	\$44.73	\$45.61	\$48.87	\$50.05	\$51.04	\$54.68
23.50	24.00	\$45.25	\$46.14	\$49.42	\$50.61	\$51.61	\$55.30
24.00	24.50	\$45.75	\$46.65	\$49.95	\$51.16	\$52.16	\$55.87
24.50	25.00	\$46.23	\$47.13	\$50.46	\$51.68	\$52.69	\$56.47
25.00	& over	\$46.69	\$47.61	\$50.95	\$52.17	\$53.20	\$57.04

ATTACHMENT C
Group Home and Group Training Home Non-ISS Rate Standard Tables

Client Mobility		There are no clients in GH who use a wheelchair										County Type								
ISS Hour Range		Number of Residents in Group Home or Group Training Home																		
at least	but less than	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
0.00	0.50	\$40.96	\$35.07	\$32.13	\$30.36	\$29.18	\$28.34	\$27.71	\$27.22	\$26.83	\$26.51	\$26.24	\$26.01	\$25.82	\$25.65	\$25.50	\$25.37	\$25.25	\$25.15	\$25.06
0.50	1.00	\$43.19	\$37.30	\$34.36	\$32.59	\$31.41	\$30.57	\$29.94	\$29.45	\$29.06	\$28.74	\$28.47	\$28.24	\$28.05	\$27.88	\$27.73	\$27.60	\$27.48	\$27.38	\$27.29
1.00	1.50	\$45.44	\$39.55	\$36.61	\$34.84	\$33.66	\$32.82	\$32.19	\$31.70	\$31.31	\$30.99	\$30.72	\$30.49	\$30.30	\$30.13	\$29.98	\$29.85	\$29.73	\$29.63	\$29.54
1.50	2.00	\$47.44	\$41.55	\$38.61	\$36.84	\$35.66	\$34.82	\$34.19	\$33.70	\$33.31	\$32.99	\$32.72	\$32.49	\$32.30	\$32.13	\$31.98	\$31.85	\$31.73	\$31.63	\$31.54
2.00	2.50	\$49.48	\$43.59	\$40.65	\$38.88	\$37.70	\$36.86	\$36.23	\$35.74	\$35.35	\$35.03	\$34.76	\$34.53	\$34.34	\$34.17	\$34.02	\$33.89	\$33.77	\$33.67	\$33.58
2.50	3.00	\$51.74	\$45.85	\$42.91	\$41.14	\$39.96	\$39.12	\$38.49	\$38.00	\$37.61	\$37.29	\$37.02	\$36.79	\$36.60	\$36.43	\$36.28	\$36.15	\$36.03	\$35.93	\$35.84
3.00	3.50	\$54.00	\$48.11	\$45.17	\$43.40	\$42.22	\$41.38	\$40.75	\$40.26	\$39.87	\$39.55	\$39.28	\$39.05	\$38.86	\$38.69	\$38.54	\$38.41	\$38.29	\$38.19	\$38.10
3.50	4.00	\$56.13	\$50.24	\$47.30	\$45.53	\$44.35	\$43.51	\$42.88	\$42.39	\$42.00	\$41.68	\$41.41	\$41.18	\$40.99	\$40.82	\$40.67	\$40.54	\$40.42	\$40.32	\$40.23
4.00	4.50	\$57.99	\$52.10	\$49.16	\$47.39	\$46.21	\$45.37	\$44.74	\$44.25	\$43.86	\$43.54	\$43.27	\$43.04	\$42.85	\$42.68	\$42.53	\$42.40	\$42.28	\$42.18	\$42.09
4.50	5.00	\$59.62	\$53.73	\$50.79	\$49.02	\$47.84	\$47.00	\$46.37	\$45.88	\$45.49	\$45.17	\$44.90	\$44.67	\$44.48	\$44.31	\$44.16	\$44.03	\$43.91	\$43.81	\$43.72
5.00	5.50	\$61.01	\$55.12	\$52.18	\$50.41	\$49.23	\$48.39	\$47.76	\$47.27	\$46.88	\$46.56	\$46.29	\$46.06	\$45.87	\$45.70	\$45.55	\$45.42	\$45.30	\$45.20	\$45.11
5.50	6.00	\$62.19	\$56.30	\$53.36	\$51.59	\$50.41	\$49.57	\$48.94	\$48.45	\$48.06	\$47.74	\$47.47	\$47.24	\$47.05	\$46.88	\$46.73	\$46.60	\$46.48	\$46.38	\$46.29
6.00	6.50	\$63.17	\$57.28	\$54.34	\$52.57	\$51.39	\$50.55	\$49.92	\$49.43	\$49.04	\$48.72	\$48.45	\$48.22	\$48.03	\$47.86	\$47.71	\$47.58	\$47.46	\$47.36	\$47.27
6.50	7.00	\$63.99	\$58.10	\$55.16	\$53.39	\$52.21	\$51.37	\$50.74	\$50.25	\$49.86	\$49.54	\$49.27	\$49.04	\$48.85	\$48.68	\$48.53	\$48.40	\$48.28	\$48.18	\$48.09
7.00	7.50	\$64.64	\$58.75	\$55.81	\$54.04	\$52.86	\$52.02	\$51.39	\$50.90	\$50.51	\$50.19	\$49.92	\$49.69	\$49.50	\$49.33	\$49.18	\$49.05	\$48.93	\$48.83	\$48.74
7.50	8.00	\$65.15	\$59.26	\$56.32	\$54.55	\$53.37	\$52.53	\$51.90	\$51.41	\$51.02	\$50.70	\$50.43	\$50.20	\$50.01	\$49.84	\$49.69	\$49.56	\$49.44	\$49.34	\$49.25
8.00	8.50	\$65.53	\$59.64	\$56.70	\$54.93	\$53.75	\$52.91	\$52.28	\$51.79	\$51.40	\$51.08	\$50.81	\$50.58	\$50.39	\$50.22	\$50.07	\$49.94	\$49.82	\$49.72	\$49.63
8.50	9.00	\$65.86	\$59.97	\$57.03	\$55.26	\$54.08	\$53.24	\$52.61	\$52.12	\$51.73	\$51.41	\$51.14	\$50.91	\$50.72	\$50.55	\$50.40	\$50.27	\$50.15	\$50.05	\$49.96
9.00	9.50	\$66.10	\$60.21	\$57.27	\$55.50	\$54.32	\$53.48	\$52.85	\$52.36	\$51.97	\$51.65	\$51.38	\$51.15	\$50.96	\$50.79	\$50.64	\$50.51	\$50.39	\$50.29	\$50.20
9.50	10.00	\$66.29	\$60.40	\$57.46	\$55.69	\$54.51	\$53.67	\$53.04	\$52.55	\$52.16	\$51.84	\$51.57	\$51.34	\$51.15	\$50.98	\$50.83	\$50.70	\$50.58	\$50.48	\$50.39
10.00	10.50	\$66.46	\$60.57	\$57.63	\$55.86	\$54.68	\$53.84	\$53.21	\$52.72	\$52.33	\$52.01	\$51.74	\$51.51	\$51.32	\$51.15	\$51.00	\$50.87	\$50.75	\$50.65	\$50.56
10.50	11.00	\$66.62	\$60.73	\$57.79	\$56.02	\$54.84	\$54.00	\$53.37	\$52.88	\$52.49	\$52.17	\$51.90	\$51.67	\$51.48	\$51.31	\$51.16	\$51.03	\$50.91	\$50.81	\$50.72
11.00	11.50	\$66.76	\$60.87	\$57.93	\$56.16	\$54.98	\$54.14	\$53.51	\$53.02	\$52.63	\$52.31	\$52.04	\$51.81	\$51.62	\$51.45	\$51.30	\$51.17	\$51.05	\$50.95	\$50.86
11.50	12.00	\$66.92	\$61.03	\$58.09	\$56.32	\$55.14	\$54.30	\$53.67	\$53.18	\$52.79	\$52.47	\$52.20	\$51.97	\$51.78	\$51.61	\$51.46	\$51.33	\$51.21	\$51.11	\$51.02
12.00	12.50	\$67.09	\$61.20	\$58.26	\$56.49	\$55.31	\$54.47	\$53.84	\$53.35	\$52.96	\$52.64	\$52.37	\$52.14	\$51.95	\$51.78	\$51.63	\$51.50	\$51.38	\$51.28	\$51.19
12.50	13.00	\$67.26	\$61.37	\$58.43	\$56.66	\$55.48	\$54.64	\$54.01	\$53.52	\$53.13	\$52.81	\$52.54	\$52.31	\$52.12	\$51.95	\$51.80	\$51.67	\$51.55	\$51.45	\$51.36
13.00	13.50	\$67.45	\$61.56	\$58.62	\$56.85	\$55.67	\$54.83	\$54.20	\$53.71	\$53.32	\$53.00	\$52.73	\$52.50	\$52.31	\$52.14	\$51.99	\$51.86	\$51.74	\$51.64	\$51.55
13.50	14.00	\$67.63	\$61.74	\$58.80	\$57.03	\$55.85	\$55.01	\$54.38	\$53.89	\$53.50	\$53.18	\$52.91	\$52.68	\$52.49	\$52.32	\$52.17	\$52.04	\$51.92	\$51.82	\$51.73
14.00	14.50	\$67.80	\$61.91	\$58.97	\$57.20	\$56.02	\$55.18	\$54.55	\$54.06	\$53.67	\$53.35	\$53.08	\$52.85	\$52.66	\$52.49	\$52.34	\$52.21	\$52.09	\$51.99	\$51.90
14.50	15.00	\$67.96	\$62.07	\$59.13	\$57.36	\$56.18	\$55.34	\$54.71	\$54.22	\$53.83	\$53.51	\$53.24	\$53.01	\$52.82	\$52.65	\$52.50	\$52.37	\$52.25	\$52.15	\$52.06
15.00	15.50	\$68.23	\$62.34	\$59.40	\$57.63	\$56.45	\$55.61	\$54.98	\$54.49	\$54.10	\$53.78	\$53.51	\$53.28	\$53.09	\$52.92	\$52.77	\$52.64	\$52.52	\$52.42	\$52.33
15.50	16.00	\$68.44	\$62.55	\$59.61	\$57.84	\$56.66	\$55.82	\$55.19	\$54.70	\$54.31	\$53.99	\$53.72	\$53.49	\$53.30	\$53.13	\$52.98	\$52.85	\$52.73	\$52.63	\$52.54
16.00	16.50	\$68.67	\$62.78	\$59.84	\$58.07	\$56.89	\$56.05	\$55.42	\$54.93	\$54.54	\$54.22	\$53.95	\$53.72	\$53.53	\$53.36	\$53.21	\$53.08	\$52.96	\$52.86	\$52.77
16.50	17.00	\$69.03	\$63.14	\$60.20	\$58.43	\$57.25	\$56.41	\$55.78	\$55.29	\$54.90	\$54.58	\$54.31	\$54.08	\$53.89	\$53.72	\$53.57	\$53.44	\$53.32	\$53.22	\$53.13
17.00	17.50	\$69.60	\$63.71	\$60.77	\$59.00	\$57.82	\$56.98	\$56.35	\$55.86	\$55.47	\$55.15	\$54.88	\$54.65	\$54.46	\$54.29	\$54.14	\$54.01	\$53.89	\$53.79	\$53.70
17.50	18.00	\$70.16	\$64.27	\$61.33	\$59.56	\$58.38	\$57.54	\$56.91	\$56.42	\$56.03	\$55.71	\$55.44	\$55.21	\$55.02	\$54.85	\$54.70	\$54.57	\$54.45	\$54.35	\$54.26
18.00	18.50	\$70.72	\$64.83	\$61.89	\$60.12	\$58.94	\$58.10	\$57.47	\$56.98	\$56.59	\$56.27	\$56.00	\$55.77	\$55.58	\$55.41	\$55.26	\$55.13	\$55.01	\$54.91	\$54.82
18.50	19.00	\$71.29	\$65.40	\$62.46	\$60.69	\$59.51	\$58.67	\$58.04	\$57.55	\$57.16	\$56.84	\$56.57	\$56.34	\$56.15	\$55.98	\$55.83	\$55.70	\$55.58	\$55.48	\$55.39
19.00	19.50	\$71.91	\$66.02	\$63.08	\$61.31	\$60.13	\$59.29	\$58.66	\$58.17	\$57.78	\$57.46	\$57.19	\$56.96	\$56.77	\$56.60	\$56.45	\$56.32	\$56.20	\$56.10	\$56.01
19.50	20.00	\$72.55	\$66.66	\$63.72	\$61.95	\$60.77	\$59.93	\$59.30	\$58.81	\$58.42	\$58.10	\$57.83	\$57.60	\$57.41	\$57.24	\$57.09	\$56.96	\$56.84	\$56.74	\$56.65
20.00	20.50	\$73.17	\$67.28	\$64.34	\$62.57	\$61.39	\$60.55	\$59.92	\$59.43	\$59.04	\$58.72	\$58.45	\$58.22	\$58.03	\$57.86	\$57.71	\$57.58	\$57.46	\$57.36	\$57.27
20.50	21.00	\$73.77	\$67.88	\$64.94	\$63.17	\$61.99	\$61.15	\$60.52	\$60.03	\$59.64	\$59.32	\$59.05	\$58.82	\$58.63	\$58.46	\$58.31	\$58.18	\$58.06	\$57.96	\$57.87
21.00	21.50	\$74.36	\$68.47	\$65.53	\$63.76	\$62.58	\$61.74	\$61.11	\$60.62	\$60.23	\$59.91	\$59.64	\$59.41	\$59.22	\$59.05	\$58.90	\$58.77	\$58.65	\$58.55	\$58.46
21.50	22.00	\$74.92	\$69.03	\$66.09	\$64.32	\$63.14	\$62.30	\$61.67	\$61.18	\$60.79	\$60.47	\$60.20	\$59.97	\$59.78	\$59.61	\$59.46	\$59.33	\$59.21	\$59.11	\$59.02
22.00	22.50	\$75.47	\$69.58	\$66.64	\$64.87	\$63.69	\$62.85	\$62.22	\$61.73	\$61.34	\$61.02	\$60.75	\$60.52	\$60.33	\$60.16	\$60.01	\$59.88	\$59.76	\$59.66	\$59.57
22.50	23.00	\$75.99	\$70.10	\$67.16	\$65.39	\$64.21	\$63.37	\$62.74	\$62.25	\$61.86	\$61.54	\$61.27	\$61.04	\$60.85	\$60.68	\$60.53	\$60.40	\$60.28	\$60.18	\$60.09
23.00	23.50	\$76.52	\$70.63	\$67.69	\$65.92	\$64.74	\$63.90	\$63.27	\$62.78	\$62.39	\$62.07	\$61.80	\$61.57	\$61.38	\$61.21	\$61.06	\$60.93	\$60.81	\$60.71	\$60.62
23.50	24.00	\$77.04	\$71.15	\$68.21	\$66.44	\$65.26	\$64.42	\$63.79	\$63.30	\$62.91	\$62.59	\$62.32	\$62.09	\$61.90	\$61.73	\$61.58	\$61.45	\$61.33	\$61.23	\$61.14
24.00	24.50	\$77.54	\$71.65	\$68.71	\$66.94	\$65.76	\$64.92	\$64.29	\$63.80	\$63.41	\$63.09	\$62.82	\$62.59	\$62.40	\$62.23	\$62.08	\$61.95	\$61.83	\$61.73	\$61.64
24.50	25.00	\$78.02	\$72.13	\$69.19	\$67.42	\$66.24	\$65.40	\$64.77	\$64.28	\$63.89	\$63.57	\$63.30	\$63.07	\$62.88	\$62.71	\$62.56	\$62.43	\$62.31	\$62.21	\$62.12
25.00	& over	\$78.48	\$72.59	\$69.65	\$67.88	\$66.70	\$65.86	\$65.23	\$64.74	\$64.35	\$64.03	\$63.76	\$63.53	\$63.34	\$63.17	\$63.02	\$62.89	\$62.77	\$62.67	\$62.58

ATTACHMENT C
Group Home and Group Training Home Non-ISS Rate Standard Tables

Client Mobility		County Type																		
One of more clients in GH use a wheelchair		NON-MSA																		
ISS Hour Range		Number of Residents in Group Home or Group Training Home																		
at least	but less than	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
0.00	0.50	\$41.45	\$35.56	\$32.62	\$30.85	\$29.67	\$28.83	\$28.20	\$27.71	\$27.32	\$27.00	\$26.73	\$26.50	\$26.31	\$26.14	\$25.99	\$25.86	\$25.74	\$25.64	\$25.55
0.50	1.00	\$43.68	\$37.79	\$34.85	\$33.08	\$31.90	\$31.06	\$30.43	\$29.94	\$29.55	\$29.23	\$28.96	\$28.73	\$28.54	\$28.37	\$28.22	\$28.09	\$27.97	\$27.87	\$27.78
1.00	1.50	\$45.93	\$40.04	\$37.10	\$35.33	\$34.15	\$33.31	\$32.68	\$32.19	\$31.80	\$31.48	\$31.21	\$30.98	\$30.79	\$30.62	\$30.47	\$30.34	\$30.22	\$30.12	\$30.03
1.50	2.00	\$47.93	\$42.04	\$39.10	\$37.33	\$36.15	\$35.31	\$34.68	\$34.19	\$33.80	\$33.48	\$33.21	\$32.98	\$32.79	\$32.62	\$32.47	\$32.34	\$32.22	\$32.12	\$32.03
2.00	2.50	\$49.97	\$44.08	\$41.14	\$39.37	\$38.19	\$37.35	\$36.72	\$36.23	\$35.84	\$35.52	\$35.25	\$35.02	\$34.83	\$34.66	\$34.51	\$34.38	\$34.26	\$34.16	\$34.07
2.50	3.00	\$52.23	\$46.34	\$43.40	\$41.63	\$40.45	\$39.61	\$38.98	\$38.49	\$38.10	\$37.78	\$37.51	\$37.28	\$37.09	\$36.92	\$36.77	\$36.64	\$36.52	\$36.42	\$36.33
3.00	3.50	\$54.49	\$48.60	\$45.66	\$43.89	\$42.71	\$41.87	\$41.24	\$40.75	\$40.36	\$40.04	\$39.77	\$39.54	\$39.35	\$39.18	\$39.03	\$38.90	\$38.78	\$38.68	\$38.59
3.50	4.00	\$56.62	\$50.73	\$47.79	\$46.02	\$44.84	\$44.00	\$43.37	\$42.88	\$42.49	\$42.17	\$41.90	\$41.67	\$41.48	\$41.31	\$41.16	\$41.03	\$40.91	\$40.81	\$40.72
4.00	4.50	\$58.48	\$52.59	\$49.65	\$47.88	\$46.70	\$45.86	\$45.23	\$44.74	\$44.35	\$44.03	\$43.76	\$43.53	\$43.34	\$43.17	\$43.02	\$42.89	\$42.77	\$42.67	\$42.58
4.50	5.00	\$60.11	\$54.22	\$51.28	\$49.51	\$48.33	\$47.49	\$46.86	\$46.37	\$45.98	\$45.66	\$45.39	\$45.16	\$44.97	\$44.80	\$44.65	\$44.52	\$44.40	\$44.30	\$44.21
5.00	5.50	\$61.50	\$55.61	\$52.67	\$50.90	\$49.72	\$48.88	\$48.25	\$47.76	\$47.37	\$47.05	\$46.78	\$46.55	\$46.36	\$46.19	\$46.04	\$45.91	\$45.79	\$45.69	\$45.60
5.50	6.00	\$62.68	\$56.79	\$53.85	\$52.08	\$50.90	\$50.06	\$49.43	\$48.94	\$48.55	\$48.23	\$47.96	\$47.73	\$47.54	\$47.37	\$47.22	\$47.09	\$46.97	\$46.87	\$46.78
6.00	6.50	\$63.66	\$57.77	\$54.83	\$53.06	\$51.88	\$51.04	\$50.41	\$49.92	\$49.53	\$49.21	\$48.94	\$48.71	\$48.52	\$48.35	\$48.20	\$48.07	\$47.95	\$47.85	\$47.76
6.50	7.00	\$64.48	\$58.59	\$55.65	\$53.88	\$52.70	\$51.86	\$51.23	\$50.74	\$50.35	\$50.03	\$49.76	\$49.53	\$49.34	\$49.17	\$49.02	\$48.89	\$48.77	\$48.67	\$48.58
7.00	7.50	\$65.13	\$59.24	\$56.30	\$54.53	\$53.35	\$52.51	\$51.88	\$51.39	\$51.00	\$50.68	\$50.41	\$50.18	\$49.99	\$49.82	\$49.67	\$49.54	\$49.42	\$49.32	\$49.23
7.50	8.00	\$65.64	\$59.75	\$56.81	\$55.04	\$53.86	\$53.02	\$52.39	\$51.90	\$51.51	\$51.19	\$50.92	\$50.69	\$50.50	\$50.33	\$50.18	\$50.05	\$49.93	\$49.83	\$49.74
8.00	8.50	\$66.02	\$60.13	\$57.19	\$55.42	\$54.24	\$53.40	\$52.77	\$52.28	\$51.89	\$51.57	\$51.30	\$51.07	\$50.88	\$50.71	\$50.56	\$50.43	\$50.31	\$50.21	\$50.12
8.50	9.00	\$66.35	\$60.46	\$57.52	\$55.75	\$54.57	\$53.73	\$53.10	\$52.61	\$52.22	\$51.90	\$51.63	\$51.40	\$51.21	\$51.04	\$50.89	\$50.76	\$50.64	\$50.54	\$50.45
9.00	9.50	\$66.59	\$60.70	\$57.76	\$55.99	\$54.81	\$53.97	\$53.34	\$52.85	\$52.46	\$52.14	\$51.87	\$51.64	\$51.45	\$51.28	\$51.13	\$51.00	\$50.88	\$50.78	\$50.69
9.50	10.00	\$66.78	\$60.89	\$57.95	\$56.18	\$55.00	\$54.16	\$53.53	\$53.04	\$52.65	\$52.33	\$52.06	\$51.83	\$51.64	\$51.47	\$51.32	\$51.19	\$51.07	\$50.97	\$50.88
10.00	10.50	\$66.95	\$61.06	\$58.12	\$56.35	\$55.17	\$54.33	\$53.70	\$53.21	\$52.82	\$52.50	\$52.23	\$52.00	\$51.81	\$51.64	\$51.49	\$51.36	\$51.24	\$51.14	\$51.05
10.50	11.00	\$67.11	\$61.22	\$58.28	\$56.51	\$55.33	\$54.49	\$53.86	\$53.37	\$52.98	\$52.66	\$52.39	\$52.16	\$51.97	\$51.80	\$51.65	\$51.52	\$51.40	\$51.30	\$51.21
11.00	11.50	\$67.25	\$61.36	\$58.42	\$56.65	\$55.47	\$54.63	\$54.00	\$53.51	\$53.12	\$52.80	\$52.53	\$52.30	\$52.11	\$51.94	\$51.79	\$51.66	\$51.54	\$51.44	\$51.35
11.50	12.00	\$67.41	\$61.52	\$58.58	\$56.81	\$55.63	\$54.79	\$54.16	\$53.67	\$53.28	\$52.96	\$52.69	\$52.46	\$52.27	\$52.10	\$51.95	\$51.82	\$51.70	\$51.60	\$51.51
12.00	12.50	\$67.58	\$61.69	\$58.75	\$56.98	\$55.80	\$54.96	\$54.33	\$53.84	\$53.45	\$53.13	\$52.86	\$52.63	\$52.44	\$52.27	\$52.12	\$51.99	\$51.87	\$51.77	\$51.68
12.50	13.00	\$67.75	\$61.86	\$58.92	\$57.15	\$55.97	\$55.13	\$54.50	\$54.01	\$53.62	\$53.30	\$53.03	\$52.80	\$52.61	\$52.44	\$52.29	\$52.16	\$52.04	\$51.94	\$51.85
13.00	13.50	\$67.94	\$62.05	\$59.11	\$57.34	\$56.16	\$55.32	\$54.69	\$54.20	\$53.81	\$53.49	\$53.22	\$52.99	\$52.80	\$52.63	\$52.48	\$52.35	\$52.23	\$52.13	\$52.04
13.50	14.00	\$68.12	\$62.23	\$59.29	\$57.52	\$56.34	\$55.50	\$54.87	\$54.38	\$53.99	\$53.67	\$53.40	\$53.17	\$52.98	\$52.81	\$52.66	\$52.53	\$52.41	\$52.31	\$52.22
14.00	14.50	\$68.29	\$62.40	\$59.46	\$57.69	\$56.51	\$55.67	\$55.04	\$54.55	\$54.16	\$53.84	\$53.57	\$53.34	\$53.15	\$52.98	\$52.83	\$52.70	\$52.58	\$52.48	\$52.39
14.50	15.00	\$68.45	\$62.56	\$59.62	\$57.85	\$56.67	\$55.83	\$55.20	\$54.71	\$54.32	\$54.00	\$53.73	\$53.50	\$53.31	\$53.14	\$52.99	\$52.86	\$52.74	\$52.64	\$52.55
15.00	15.50	\$68.72	\$62.83	\$59.89	\$58.12	\$56.94	\$56.10	\$55.47	\$54.98	\$54.59	\$54.27	\$54.00	\$53.77	\$53.58	\$53.41	\$53.26	\$53.13	\$53.01	\$52.91	\$52.82
15.50	16.00	\$68.93	\$63.04	\$60.10	\$58.33	\$57.15	\$56.31	\$55.68	\$55.19	\$54.80	\$54.48	\$54.21	\$53.98	\$53.79	\$53.62	\$53.47	\$53.34	\$53.22	\$53.12	\$53.03
16.00	16.50	\$69.16	\$63.27	\$60.33	\$58.56	\$57.38	\$56.54	\$55.91	\$55.42	\$55.03	\$54.71	\$54.44	\$54.21	\$54.02	\$53.85	\$53.70	\$53.57	\$53.45	\$53.35	\$53.26
16.50	17.00	\$69.52	\$63.63	\$60.69	\$58.92	\$57.74	\$56.90	\$56.27	\$55.78	\$55.39	\$55.07	\$54.80	\$54.57	\$54.38	\$54.21	\$54.06	\$53.93	\$53.81	\$53.71	\$53.62
17.00	17.50	\$70.09	\$64.20	\$61.26	\$59.49	\$58.31	\$57.47	\$56.84	\$56.35	\$55.96	\$55.64	\$55.37	\$55.14	\$54.95	\$54.78	\$54.63	\$54.50	\$54.38	\$54.28	\$54.19
17.50	18.00	\$70.65	\$64.76	\$61.82	\$60.05	\$58.87	\$58.03	\$57.40	\$56.91	\$56.52	\$56.20	\$55.93	\$55.70	\$55.51	\$55.34	\$55.19	\$55.06	\$54.94	\$54.84	\$54.75
18.00	18.50	\$71.21	\$65.32	\$62.38	\$60.61	\$59.43	\$58.59	\$57.96	\$57.47	\$57.08	\$56.76	\$56.49	\$56.26	\$56.07	\$55.90	\$55.75	\$55.62	\$55.50	\$55.40	\$55.31
18.50	19.00	\$71.78	\$65.89	\$62.95	\$61.18	\$60.00	\$59.16	\$58.53	\$58.04	\$57.65	\$57.33	\$57.06	\$56.83	\$56.64	\$56.47	\$56.32	\$56.19	\$56.07	\$55.97	\$55.88
19.00	19.50	\$72.40	\$66.51	\$63.57	\$61.80	\$60.62	\$59.78	\$59.15	\$58.66	\$58.27	\$57.95	\$57.68	\$57.45	\$57.26	\$57.09	\$56.94	\$56.81	\$56.69	\$56.59	\$56.50
19.50	20.00	\$73.04	\$67.15	\$64.21	\$62.44	\$61.26	\$60.42	\$59.79	\$59.30	\$58.91	\$58.59	\$58.32	\$58.09	\$57.90	\$57.73	\$57.58	\$57.45	\$57.33	\$57.23	\$57.14
20.00	20.50	\$73.66	\$67.77	\$64.83	\$63.06	\$61.88	\$61.04	\$60.41	\$59.92	\$59.53	\$59.21	\$58.94	\$58.71	\$58.52	\$58.35	\$58.20	\$58.07	\$57.95	\$57.85	\$57.76
20.50	21.00	\$74.26	\$68.37	\$65.43	\$63.66	\$62.48	\$61.64	\$61.01	\$60.52	\$60.13	\$59.81	\$59.54	\$59.31	\$59.12	\$58.95	\$58.80	\$58.67	\$58.55	\$58.45	\$58.36
21.00	21.50	\$74.85	\$68.96	\$66.02	\$64.25	\$63.07	\$62.23	\$61.60	\$61.11	\$60.72	\$60.40	\$60.13	\$59.90	\$59.71	\$59.54	\$59.39	\$59.26	\$59.14	\$59.04	\$58.95
21.50	22.00	\$75.41	\$69.52	\$66.58	\$64.81	\$63.63	\$62.79	\$62.16	\$61.67	\$61.28	\$60.96	\$60.69	\$60.46	\$60.27	\$60.10	\$59.95	\$59.82	\$59.70	\$59.60	\$59.51
22.00	22.50	\$75.96	\$70.07	\$67.13	\$65.36	\$64.18	\$63.34	\$62.71	\$62.22	\$61.83	\$61.51	\$61.24	\$61.01	\$60.82	\$60.65	\$60.50	\$60.37	\$60.25	\$60.15	\$60.06
22.50	23.00	\$76.48	\$70.59	\$67.65	\$65.88	\$64.70	\$63.86	\$63.23	\$62.74	\$62.35	\$62.03	\$61.76	\$61.53	\$61.34	\$61.17	\$61.02	\$60.89	\$60.77	\$60.67	\$60.58
23.00	23.50	\$77.01	\$71.12	\$68.18	\$66.41	\$65.23	\$64.39	\$63.76	\$63.27	\$62.88	\$62.56	\$62.29	\$62.06	\$61.87	\$61.70	\$61.55	\$61.42	\$61.30	\$61.20	\$61.11
23.50	24.00	\$77.53	\$71.64	\$68.70	\$66.93	\$65.75	\$64.91	\$64.28	\$63.79	\$63.40	\$63.08	\$62.81	\$62.58	\$62.39	\$62.22	\$62.07	\$61.94	\$61.82	\$61.72	\$61.63
24.00	24.50	\$78.03	\$72.14	\$69.20	\$67.43	\$66.25	\$65.41	\$64.78	\$64.29	\$63.90	\$63.58	\$63.31	\$63.08	\$62.89	\$62.72	\$62.57	\$62.44	\$62.32	\$62.22	\$62.13
24.50	25.00	\$78.51	\$72.62	\$69.68	\$67.91	\$66.73	\$65.89	\$65.26	\$64.77	\$64.38	\$64.06	\$63.79	\$63.56	\$63.37	\$63.20	\$63.05	\$62.92	\$62.80	\$62.70	\$62.61
25.00	& over	\$78.97	\$73.08	\$70.14	\$68.37	\$67.19	\$66.35	\$65.72	\$65.23	\$64.84	\$64.52	\$64.25	\$64.02	\$63.83	\$63.66	\$63.51	\$63.38	\$63.26	\$63.16	\$63.07

ATTACHMENT C

Group Home and Group Training Home Non-ISS Rate Standard Tables

Client Mobility		County Type																		
There are no clients in GH who use a wheelchair		MSA																		
ISS Hour Range		Number of Residents in Group Home or Group Training Home																		
at least	but less than	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
0.00	0.50	\$41.70	\$35.70	\$32.70	\$30.89	\$29.69	\$28.83	\$28.19	\$27.69	\$27.29	\$26.96	\$26.69	\$26.45	\$26.26	\$26.09	\$25.93	\$25.80	\$25.68	\$25.58	\$25.49
0.50	1.00	\$43.96	\$37.96	\$34.96	\$33.15	\$31.95	\$31.09	\$30.45	\$29.95	\$29.55	\$29.22	\$28.95	\$28.71	\$28.52	\$28.35	\$28.19	\$28.06	\$27.94	\$27.84	\$27.75
1.00	1.50	\$46.25	\$40.25	\$37.25	\$35.44	\$34.24	\$33.38	\$32.74	\$32.24	\$31.84	\$31.51	\$31.24	\$31.00	\$30.81	\$30.64	\$30.48	\$30.35	\$30.23	\$30.13	\$30.04
1.50	2.00	\$48.30	\$42.30	\$39.30	\$37.49	\$36.29	\$35.43	\$34.79	\$34.29	\$33.89	\$33.56	\$33.29	\$33.05	\$32.86	\$32.69	\$32.53	\$32.40	\$32.28	\$32.18	\$32.09
2.00	2.50	\$50.39	\$44.39	\$41.39	\$39.58	\$38.38	\$37.52	\$36.88	\$36.38	\$35.98	\$35.65	\$35.38	\$35.14	\$34.95	\$34.78	\$34.62	\$34.49	\$34.37	\$34.27	\$34.18
2.50	3.00	\$52.69	\$46.69	\$43.69	\$41.88	\$40.68	\$39.82	\$39.18	\$38.68	\$38.28	\$37.95	\$37.68	\$37.44	\$37.25	\$37.08	\$36.92	\$36.79	\$36.67	\$36.57	\$36.48
3.00	3.50	\$54.98	\$48.98	\$45.98	\$44.17	\$42.97	\$42.11	\$41.47	\$40.97	\$40.57	\$40.24	\$39.97	\$39.73	\$39.54	\$39.37	\$39.21	\$39.08	\$38.96	\$38.86	\$38.77
3.50	4.00	\$57.16	\$51.16	\$48.16	\$46.35	\$45.15	\$44.29	\$43.65	\$43.15	\$42.75	\$42.42	\$42.15	\$41.91	\$41.72	\$41.55	\$41.39	\$41.26	\$41.14	\$41.04	\$40.95
4.00	4.50	\$59.06	\$53.06	\$50.06	\$48.25	\$47.05	\$46.19	\$45.55	\$45.05	\$44.65	\$44.32	\$44.05	\$43.81	\$43.62	\$43.45	\$43.29	\$43.16	\$43.04	\$42.94	\$42.85
4.50	5.00	\$60.71	\$54.71	\$51.71	\$49.90	\$48.70	\$47.84	\$47.20	\$46.70	\$46.30	\$45.97	\$45.70	\$45.46	\$45.27	\$45.10	\$44.94	\$44.81	\$44.69	\$44.59	\$44.50
5.00	5.50	\$62.12	\$56.12	\$53.12	\$51.31	\$50.11	\$49.25	\$48.61	\$48.11	\$47.71	\$47.38	\$47.11	\$46.87	\$46.68	\$46.51	\$46.35	\$46.22	\$46.10	\$46.00	\$45.91
5.50	6.00	\$63.33	\$57.33	\$54.33	\$52.52	\$51.32	\$50.46	\$49.82	\$49.32	\$48.92	\$48.59	\$48.32	\$48.08	\$47.89	\$47.72	\$47.56	\$47.43	\$47.31	\$47.21	\$47.12
6.00	6.50	\$64.34	\$58.34	\$55.34	\$53.53	\$52.33	\$51.47	\$50.83	\$50.33	\$49.93	\$49.60	\$49.33	\$49.09	\$48.90	\$48.73	\$48.57	\$48.44	\$48.32	\$48.22	\$48.13
6.50	7.00	\$65.17	\$59.17	\$56.17	\$54.36	\$53.16	\$52.30	\$51.66	\$51.16	\$50.76	\$50.43	\$50.16	\$49.92	\$49.73	\$49.56	\$49.40	\$49.27	\$49.15	\$49.05	\$48.96
7.00	7.50	\$65.83	\$59.83	\$56.83	\$55.02	\$53.82	\$52.96	\$52.32	\$51.82	\$51.42	\$51.09	\$50.82	\$50.58	\$50.39	\$50.22	\$50.06	\$49.93	\$49.81	\$49.71	\$49.62
7.50	8.00	\$66.36	\$60.36	\$57.36	\$55.55	\$54.35	\$53.49	\$52.85	\$52.35	\$51.95	\$51.62	\$51.35	\$51.11	\$50.92	\$50.75	\$50.59	\$50.46	\$50.34	\$50.24	\$50.15
8.00	8.50	\$66.74	\$60.74	\$57.74	\$55.93	\$54.73	\$53.87	\$53.23	\$52.73	\$52.33	\$52.00	\$51.73	\$51.49	\$51.30	\$51.13	\$50.97	\$50.84	\$50.72	\$50.62	\$50.53
8.50	9.00	\$67.08	\$61.08	\$58.08	\$56.27	\$55.07	\$54.21	\$53.57	\$53.07	\$52.67	\$52.34	\$52.07	\$51.83	\$51.64	\$51.47	\$51.31	\$51.18	\$51.06	\$50.96	\$50.87
9.00	9.50	\$67.32	\$61.32	\$58.32	\$56.51	\$55.31	\$54.45	\$53.81	\$53.31	\$52.91	\$52.58	\$52.31	\$52.07	\$51.88	\$51.71	\$51.55	\$51.42	\$51.30	\$51.20	\$51.11
9.50	10.00	\$67.52	\$61.52	\$58.52	\$56.71	\$55.51	\$54.65	\$54.01	\$53.51	\$53.11	\$52.78	\$52.51	\$52.27	\$52.08	\$51.91	\$51.75	\$51.62	\$51.50	\$51.40	\$51.31
10.00	10.50	\$67.69	\$61.69	\$58.69	\$56.88	\$55.68	\$54.82	\$54.18	\$53.68	\$53.28	\$52.95	\$52.68	\$52.44	\$52.25	\$52.08	\$51.92	\$51.79	\$51.67	\$51.57	\$51.48
10.50	11.00	\$67.85	\$61.85	\$58.85	\$57.04	\$55.84	\$54.98	\$54.34	\$53.84	\$53.44	\$53.11	\$52.84	\$52.60	\$52.41	\$52.24	\$52.08	\$51.95	\$51.83	\$51.73	\$51.64
11.00	11.50	\$68.00	\$62.00	\$59.00	\$57.19	\$55.99	\$55.13	\$54.49	\$53.99	\$53.59	\$53.26	\$52.99	\$52.75	\$52.56	\$52.39	\$52.23	\$52.10	\$51.98	\$51.88	\$51.79
11.50	12.00	\$68.15	\$62.15	\$59.15	\$57.34	\$56.14	\$55.28	\$54.64	\$54.14	\$53.74	\$53.41	\$53.14	\$52.90	\$52.71	\$52.54	\$52.38	\$52.25	\$52.13	\$52.03	\$51.94
12.00	12.50	\$68.33	\$62.33	\$59.33	\$57.52	\$56.32	\$55.46	\$54.82	\$54.32	\$53.92	\$53.59	\$53.32	\$53.08	\$52.89	\$52.72	\$52.56	\$52.43	\$52.31	\$52.21	\$52.12
12.50	13.00	\$68.50	\$62.50	\$59.50	\$57.69	\$56.49	\$55.63	\$54.99	\$54.49	\$54.09	\$53.76	\$53.49	\$53.25	\$53.06	\$52.89	\$52.73	\$52.60	\$52.48	\$52.38	\$52.29
13.00	13.50	\$68.70	\$62.70	\$59.70	\$57.89	\$56.69	\$55.83	\$55.19	\$54.69	\$54.29	\$53.96	\$53.69	\$53.45	\$53.26	\$53.09	\$52.93	\$52.80	\$52.68	\$52.58	\$52.49
13.50	14.00	\$68.88	\$62.88	\$59.88	\$58.07	\$56.87	\$56.01	\$55.37	\$54.87	\$54.47	\$54.14	\$53.87	\$53.63	\$53.44	\$53.27	\$53.11	\$52.98	\$52.86	\$52.76	\$52.67
14.00	14.50	\$69.06	\$63.06	\$60.06	\$58.25	\$57.05	\$56.19	\$55.55	\$55.05	\$54.65	\$54.32	\$54.05	\$53.81	\$53.62	\$53.45	\$53.29	\$53.16	\$53.04	\$52.94	\$52.85
14.50	15.00	\$69.22	\$63.22	\$60.22	\$58.41	\$57.21	\$56.35	\$55.71	\$55.21	\$54.81	\$54.48	\$54.21	\$53.97	\$53.78	\$53.61	\$53.45	\$53.32	\$53.20	\$53.10	\$53.01
15.00	15.50	\$69.49	\$63.49	\$60.49	\$58.68	\$57.48	\$56.62	\$55.98	\$55.48	\$55.08	\$54.75	\$54.48	\$54.24	\$54.05	\$53.88	\$53.72	\$53.59	\$53.47	\$53.37	\$53.28
15.50	16.00	\$69.71	\$63.71	\$60.71	\$58.90	\$57.70	\$56.84	\$56.20	\$55.70	\$55.30	\$54.97	\$54.70	\$54.46	\$54.27	\$54.10	\$53.94	\$53.81	\$53.69	\$53.59	\$53.50
16.00	16.50	\$69.95	\$63.95	\$60.95	\$59.14	\$57.94	\$57.08	\$56.44	\$55.94	\$55.54	\$55.21	\$54.94	\$54.70	\$54.51	\$54.34	\$54.18	\$54.05	\$53.93	\$53.83	\$53.74
16.50	17.00	\$70.31	\$64.31	\$61.31	\$59.50	\$58.30	\$57.44	\$56.80	\$56.30	\$55.90	\$55.57	\$55.30	\$55.06	\$54.87	\$54.70	\$54.54	\$54.41	\$54.29	\$54.19	\$54.10
17.00	17.50	\$70.89	\$64.89	\$61.89	\$60.08	\$58.88	\$58.02	\$57.38	\$56.88	\$56.48	\$56.15	\$55.88	\$55.64	\$55.45	\$55.28	\$55.12	\$54.99	\$54.87	\$54.77	\$54.68
17.50	18.00	\$71.46	\$65.46	\$62.46	\$60.65	\$59.45	\$58.59	\$57.95	\$57.45	\$57.05	\$56.72	\$56.45	\$56.21	\$56.02	\$55.85	\$55.69	\$55.56	\$55.44	\$55.34	\$55.25
18.00	18.50	\$72.02	\$66.02	\$63.02	\$61.21	\$60.01	\$59.15	\$58.51	\$58.01	\$57.61	\$57.28	\$57.01	\$56.77	\$56.58	\$56.41	\$56.25	\$56.12	\$56.00	\$55.90	\$55.81
18.50	19.00	\$72.62	\$66.62	\$63.62	\$61.81	\$60.61	\$59.75	\$59.11	\$58.61	\$58.21	\$57.88	\$57.61	\$57.37	\$57.18	\$57.01	\$56.85	\$56.72	\$56.60	\$56.50	\$56.41
19.00	19.50	\$73.24	\$67.24	\$64.24	\$62.43	\$61.23	\$60.37	\$59.73	\$59.23	\$58.83	\$58.50	\$58.23	\$57.99	\$57.80	\$57.63	\$57.47	\$57.34	\$57.22	\$57.12	\$57.03
19.50	20.00	\$73.90	\$67.90	\$64.90	\$63.09	\$61.89	\$61.03	\$60.39	\$59.89	\$59.49	\$59.16	\$58.89	\$58.65	\$58.46	\$58.29	\$58.13	\$58.00	\$57.88	\$57.78	\$57.69
20.00	20.50	\$74.53	\$68.53	\$65.53	\$63.72	\$62.52	\$61.66	\$61.02	\$60.52	\$60.12	\$59.79	\$59.52	\$59.28	\$59.09	\$58.92	\$58.76	\$58.63	\$58.51	\$58.41	\$58.32
20.50	21.00	\$75.15	\$69.15	\$66.15	\$64.34	\$63.14	\$62.28	\$61.64	\$61.14	\$60.74	\$60.41	\$60.14	\$59.90	\$59.71	\$59.54	\$59.38	\$59.25	\$59.13	\$59.03	\$58.94
21.00	21.50	\$75.74	\$69.74	\$66.74	\$64.93	\$63.73	\$62.87	\$62.23	\$61.73	\$61.33	\$61.00	\$60.73	\$60.49	\$60.30	\$60.13	\$59.97	\$59.84	\$59.72	\$59.62	\$59.53
21.50	22.00	\$76.32	\$70.32	\$67.32	\$65.51	\$64.31	\$63.45	\$62.81	\$62.31	\$61.91	\$61.58	\$61.31	\$61.07	\$60.88	\$60.71	\$60.55	\$60.42	\$60.30	\$60.20	\$60.11
22.00	22.50	\$76.87	\$70.87	\$67.87	\$66.06	\$64.86	\$64.00	\$63.36	\$62.86	\$62.46	\$62.13	\$61.86	\$61.62	\$61.43	\$61.26	\$61.10	\$60.97	\$60.85	\$60.75	\$60.66
22.50	23.00	\$77.41	\$71.41	\$68.41	\$66.60	\$65.40	\$64.54	\$63.90	\$63.40	\$63.00	\$62.67	\$62.40	\$62.16	\$61.97	\$61.80	\$61.64	\$61.51	\$61.39	\$61.29	\$61.20
23.00	23.50	\$77.95	\$71.95	\$68.95	\$67.14	\$65.94	\$65.08	\$64.44	\$63.94	\$63.54	\$63.21	\$62.94	\$62.70	\$62.51	\$62.34	\$62.18	\$62.05	\$61.93	\$61.83	\$61.74
23.50	24.00	\$78.48	\$72.48	\$69.48	\$67.67	\$66.47	\$65.61	\$64.97	\$64.47	\$64.07	\$63.74	\$63.47	\$63.23	\$63.04	\$62.87	\$62.71	\$62.58	\$62.46	\$62.36	\$62.27
24.00	24.50	\$78.99	\$72.99	\$69.99	\$68.18	\$66.98	\$66.12	\$65.48	\$64.98	\$64.58	\$64.25	\$63.98	\$63.74	\$63.55	\$63.38	\$63.22	\$63.09	\$62.97	\$62.87	\$62.78
24.50	25.00	\$79.47	\$73.47	\$70.47	\$68.66	\$67.46	\$66.60	\$65.96	\$65.46	\$65.06	\$64.73	\$64.46	\$64.22	\$64.03	\$63.86	\$63.70	\$63.57	\$63.45	\$63.35	\$63.26
25.00	& over	\$79.95	\$73.95	\$70.95	\$69.14	\$67.94	\$67.08	\$66.44	\$65.94	\$65.54	\$65.21	\$64.94	\$64.70	\$64.51	\$64.34	\$64.18	\$64.05	\$63.93	\$63.83	\$63.74

ATTACHMENT C

Group Home and Group Training Home Non-ISS Rate Standard Tables

Client Mobility		County Type																		
One of more clients in GH use a wheelchair		MSA																		
ISS Hour Range		Number of Residents in Group Home or Group Training Home																		
at least	but less than	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
0.00	0.50	\$42.19	\$36.19	\$33.19	\$31.38	\$30.18	\$29.32	\$28.68	\$28.18	\$27.78	\$27.45	\$27.18	\$26.94	\$26.75	\$26.58	\$26.42	\$26.29	\$26.17	\$26.07	\$25.98
0.50	1.00	\$44.45	\$38.45	\$35.45	\$33.64	\$32.44	\$31.58	\$30.94	\$30.44	\$30.04	\$29.71	\$29.44	\$29.20	\$29.01	\$28.84	\$28.68	\$28.55	\$28.43	\$28.33	\$28.24
1.00	1.50	\$46.74	\$40.74	\$37.74	\$35.93	\$34.73	\$33.87	\$33.23	\$32.73	\$32.33	\$32.00	\$31.73	\$31.49	\$31.30	\$31.13	\$30.97	\$30.84	\$30.72	\$30.62	\$30.53
1.50	2.00	\$48.79	\$42.79	\$39.79	\$37.98	\$36.78	\$35.92	\$35.28	\$34.78	\$34.38	\$34.05	\$33.78	\$33.54	\$33.35	\$33.18	\$33.02	\$32.89	\$32.77	\$32.67	\$32.58
2.00	2.50	\$50.88	\$44.88	\$41.88	\$40.07	\$38.87	\$38.01	\$37.37	\$36.87	\$36.47	\$36.14	\$35.87	\$35.63	\$35.44	\$35.27	\$35.11	\$34.98	\$34.86	\$34.76	\$34.67
2.50	3.00	\$53.18	\$47.18	\$44.18	\$42.37	\$41.17	\$40.31	\$39.67	\$39.17	\$38.77	\$38.44	\$38.17	\$37.93	\$37.74	\$37.57	\$37.41	\$37.28	\$37.16	\$37.06	\$36.97
3.00	3.50	\$55.47	\$49.47	\$46.47	\$44.66	\$43.46	\$42.60	\$41.96	\$41.46	\$41.06	\$40.73	\$40.46	\$40.22	\$40.03	\$39.86	\$39.70	\$39.57	\$39.45	\$39.35	\$39.26
3.50	4.00	\$57.65	\$51.65	\$48.65	\$46.84	\$45.64	\$44.78	\$44.14	\$43.64	\$43.24	\$42.91	\$42.64	\$42.40	\$42.21	\$42.04	\$41.88	\$41.75	\$41.63	\$41.53	\$41.44
4.00	4.50	\$59.55	\$53.55	\$50.55	\$48.74	\$47.54	\$46.68	\$46.04	\$45.54	\$45.14	\$44.81	\$44.54	\$44.30	\$44.11	\$43.94	\$43.78	\$43.65	\$43.53	\$43.43	\$43.34
4.50	5.00	\$61.20	\$55.20	\$52.20	\$50.39	\$49.19	\$48.33	\$47.69	\$47.19	\$46.79	\$46.46	\$46.19	\$45.95	\$45.76	\$45.59	\$45.43	\$45.30	\$45.18	\$45.08	\$44.99
5.00	5.50	\$62.61	\$56.61	\$53.61	\$51.80	\$50.60	\$49.74	\$49.10	\$48.60	\$48.20	\$47.87	\$47.60	\$47.36	\$47.17	\$47.00	\$46.84	\$46.71	\$46.59	\$46.49	\$46.40
5.50	6.00	\$63.82	\$57.82	\$54.82	\$53.01	\$51.81	\$50.95	\$50.31	\$49.81	\$49.41	\$49.08	\$48.81	\$48.57	\$48.38	\$48.21	\$48.05	\$47.92	\$47.80	\$47.70	\$47.61
6.00	6.50	\$64.83	\$58.83	\$55.83	\$54.02	\$52.82	\$51.96	\$51.32	\$50.82	\$50.42	\$50.09	\$49.82	\$49.58	\$49.39	\$49.22	\$49.06	\$48.93	\$48.81	\$48.71	\$48.62
6.50	7.00	\$65.66	\$59.66	\$56.66	\$54.85	\$53.65	\$52.79	\$52.15	\$51.65	\$51.25	\$50.92	\$50.65	\$50.41	\$50.22	\$50.05	\$49.89	\$49.76	\$49.64	\$49.54	\$49.45
7.00	7.50	\$66.32	\$60.32	\$57.32	\$55.51	\$54.31	\$53.45	\$52.81	\$52.31	\$51.91	\$51.58	\$51.31	\$51.07	\$50.88	\$50.71	\$50.55	\$50.42	\$50.30	\$50.20	\$50.11
7.50	8.00	\$66.85	\$60.85	\$57.85	\$56.04	\$54.84	\$53.98	\$53.34	\$52.84	\$52.44	\$52.11	\$51.84	\$51.60	\$51.41	\$51.24	\$51.08	\$50.95	\$50.83	\$50.73	\$50.64
8.00	8.50	\$67.23	\$61.23	\$58.23	\$56.42	\$55.22	\$54.36	\$53.72	\$53.22	\$52.82	\$52.49	\$52.22	\$51.98	\$51.79	\$51.62	\$51.46	\$51.33	\$51.21	\$51.11	\$51.02
8.50	9.00	\$67.57	\$61.57	\$58.57	\$56.76	\$55.56	\$54.70	\$54.06	\$53.56	\$53.16	\$52.83	\$52.56	\$52.32	\$52.13	\$51.96	\$51.80	\$51.67	\$51.55	\$51.45	\$51.36
9.00	9.50	\$67.81	\$61.81	\$58.81	\$57.00	\$55.80	\$54.94	\$54.30	\$53.80	\$53.40	\$53.07	\$52.80	\$52.56	\$52.37	\$52.20	\$52.04	\$51.91	\$51.79	\$51.69	\$51.60
9.50	10.00	\$68.01	\$62.01	\$59.01	\$57.20	\$56.00	\$55.14	\$54.50	\$54.00	\$53.60	\$53.27	\$53.00	\$52.76	\$52.57	\$52.40	\$52.24	\$52.11	\$51.99	\$51.89	\$51.80
10.00	10.50	\$68.18	\$62.18	\$59.18	\$57.37	\$56.17	\$55.31	\$54.67	\$54.17	\$53.77	\$53.44	\$53.17	\$52.93	\$52.74	\$52.57	\$52.41	\$52.28	\$52.16	\$52.06	\$51.97
10.50	11.00	\$68.34	\$62.34	\$59.34	\$57.53	\$56.33	\$55.47	\$54.83	\$54.33	\$53.93	\$53.60	\$53.33	\$53.09	\$52.90	\$52.73	\$52.57	\$52.44	\$52.32	\$52.22	\$52.13
11.00	11.50	\$68.49	\$62.49	\$59.49	\$57.68	\$56.48	\$55.62	\$54.98	\$54.48	\$54.08	\$53.75	\$53.48	\$53.24	\$53.05	\$52.88	\$52.72	\$52.59	\$52.47	\$52.37	\$52.28
11.50	12.00	\$68.64	\$62.64	\$59.64	\$57.83	\$56.63	\$55.77	\$55.13	\$54.63	\$54.23	\$53.90	\$53.63	\$53.39	\$53.20	\$53.03	\$52.87	\$52.74	\$52.62	\$52.52	\$52.43
12.00	12.50	\$68.82	\$62.82	\$59.82	\$58.01	\$56.81	\$55.95	\$55.31	\$54.81	\$54.41	\$54.08	\$53.81	\$53.57	\$53.38	\$53.21	\$53.05	\$52.92	\$52.80	\$52.70	\$52.61
12.50	13.00	\$68.99	\$62.99	\$59.99	\$58.18	\$56.98	\$56.12	\$55.48	\$54.98	\$54.58	\$54.25	\$53.98	\$53.74	\$53.55	\$53.38	\$53.22	\$53.09	\$52.97	\$52.87	\$52.78
13.00	13.50	\$69.19	\$63.19	\$60.19	\$58.38	\$57.18	\$56.32	\$55.68	\$55.18	\$54.78	\$54.45	\$54.18	\$53.94	\$53.75	\$53.58	\$53.42	\$53.29	\$53.17	\$53.07	\$52.98
13.50	14.00	\$69.37	\$63.37	\$60.37	\$58.56	\$57.36	\$56.50	\$55.86	\$55.36	\$54.96	\$54.63	\$54.36	\$54.12	\$53.93	\$53.76	\$53.60	\$53.47	\$53.35	\$53.25	\$53.16
14.00	14.50	\$69.55	\$63.55	\$60.55	\$58.74	\$57.54	\$56.68	\$56.04	\$55.54	\$55.14	\$54.81	\$54.54	\$54.30	\$54.11	\$53.94	\$53.78	\$53.65	\$53.53	\$53.43	\$53.34
14.50	15.00	\$69.71	\$63.71	\$60.71	\$58.90	\$57.70	\$56.84	\$56.20	\$55.70	\$55.30	\$54.97	\$54.70	\$54.46	\$54.27	\$54.10	\$53.94	\$53.81	\$53.69	\$53.59	\$53.50
15.00	15.50	\$69.98	\$63.98	\$60.98	\$59.17	\$57.97	\$57.11	\$56.47	\$55.97	\$55.57	\$55.24	\$54.97	\$54.73	\$54.54	\$54.37	\$54.21	\$54.08	\$53.96	\$53.86	\$53.77
15.50	16.00	\$70.20	\$64.20	\$61.20	\$59.39	\$58.19	\$57.33	\$56.69	\$56.19	\$55.79	\$55.46	\$55.19	\$54.95	\$54.76	\$54.59	\$54.43	\$54.30	\$54.18	\$54.08	\$53.99
16.00	16.50	\$70.44	\$64.44	\$61.44	\$59.63	\$58.43	\$57.57	\$56.93	\$56.43	\$56.03	\$55.70	\$55.43	\$55.19	\$55.00	\$54.83	\$54.67	\$54.54	\$54.42	\$54.32	\$54.23
16.50	17.00	\$70.80	\$64.80	\$61.80	\$59.99	\$58.79	\$57.93	\$57.29	\$56.79	\$56.39	\$56.06	\$55.79	\$55.55	\$55.36	\$55.19	\$55.03	\$54.90	\$54.78	\$54.68	\$54.59
17.00	17.50	\$71.38	\$65.38	\$62.38	\$60.57	\$59.37	\$58.51	\$57.87	\$57.37	\$56.97	\$56.64	\$56.37	\$56.13	\$55.94	\$55.77	\$55.61	\$55.48	\$55.36	\$55.26	\$55.17
17.50	18.00	\$71.95	\$65.95	\$62.95	\$61.14	\$59.94	\$59.08	\$58.44	\$57.94	\$57.54	\$57.21	\$56.94	\$56.70	\$56.51	\$56.34	\$56.18	\$56.05	\$55.93	\$55.83	\$55.74
18.00	18.50	\$72.51	\$66.51	\$63.51	\$61.70	\$60.50	\$59.64	\$59.00	\$58.50	\$58.10	\$57.77	\$57.50	\$57.26	\$57.07	\$56.90	\$56.74	\$56.61	\$56.49	\$56.39	\$56.30
18.50	19.00	\$73.11	\$67.11	\$64.11	\$62.30	\$61.10	\$60.24	\$59.60	\$59.10	\$58.70	\$58.37	\$58.10	\$57.86	\$57.67	\$57.50	\$57.34	\$57.21	\$57.09	\$56.99	\$56.90
19.00	19.50	\$73.73	\$67.73	\$64.73	\$62.92	\$61.72	\$60.86	\$60.22	\$59.72	\$59.32	\$58.99	\$58.72	\$58.48	\$58.29	\$58.12	\$57.96	\$57.83	\$57.71	\$57.61	\$57.52
19.50	20.00	\$74.39	\$68.39	\$65.39	\$63.58	\$62.38	\$61.52	\$60.88	\$60.38	\$59.98	\$59.65	\$59.38	\$59.14	\$58.95	\$58.78	\$58.62	\$58.49	\$58.37	\$58.27	\$58.18
20.00	20.50	\$75.02	\$69.02	\$66.02	\$64.21	\$63.01	\$62.15	\$61.51	\$61.01	\$60.61	\$60.28	\$60.01	\$59.77	\$59.58	\$59.41	\$59.25	\$59.12	\$59.00	\$58.90	\$58.81
20.50	21.00	\$75.64	\$69.64	\$66.64	\$64.83	\$63.63	\$62.77	\$62.13	\$61.63	\$61.23	\$60.90	\$60.63	\$60.39	\$60.20	\$60.03	\$59.87	\$59.74	\$59.62	\$59.52	\$59.43
21.00	21.50	\$76.23	\$70.23	\$67.23	\$65.42	\$64.22	\$63.36	\$62.72	\$62.22	\$61.82	\$61.49	\$61.22	\$60.98	\$60.79	\$60.62	\$60.46	\$60.33	\$60.21	\$60.11	\$60.02
21.50	22.00	\$76.81	\$70.81	\$67.81	\$66.00	\$64.80	\$63.94	\$63.30	\$62.80	\$62.40	\$62.07	\$61.80	\$61.56	\$61.37	\$61.20	\$61.04	\$60.91	\$60.79	\$60.69	\$60.60
22.00	22.50	\$77.36	\$71.36	\$68.36	\$66.55	\$65.35	\$64.49	\$63.85	\$63.35	\$62.95	\$62.62	\$62.35	\$62.11	\$61.92	\$61.75	\$61.59	\$61.46	\$61.34	\$61.24	\$61.15
22.50	23.00	\$77.90	\$71.90	\$68.90	\$67.09	\$65.89	\$65.03	\$64.39	\$63.89	\$63.49	\$63.16	\$62.89	\$62.65	\$62.46	\$62.29	\$62.13	\$62.00	\$61.88	\$61.78	\$61.69
23.00	23.50	\$78.44	\$72.44	\$69.44	\$67.63	\$66.43	\$65.57	\$64.93	\$64.43	\$64.03	\$63.70	\$63.43	\$63.19	\$63.00	\$62.83	\$62.67	\$62.54	\$62.42	\$62.32	\$62.23
23.50	24.00	\$78.97	\$72.97	\$69.97	\$68.16	\$66.96	\$66.10	\$65.46	\$64.96	\$64.56	\$64.23	\$63.96	\$63.72	\$63.53	\$63.36	\$63.20	\$63.07	\$62.95	\$62.85	\$62.76
24.00	24.50	\$79.48	\$73.48	\$70.48	\$68.67	\$67.47	\$66.61	\$65.97	\$65.47	\$65.07	\$64.74	\$64.47	\$64.23	\$64.04	\$63.87	\$63.71	\$63.58	\$63.46	\$63.36	\$63.27
24.50	25.00	\$79.96	\$73.96	\$70.96	\$69.15	\$67.95	\$67.09	\$66.45	\$65.95	\$65.55	\$65.22	\$64.95	\$64.71	\$64.52	\$64.35	\$64.19	\$64.06	\$63.94	\$63.84	\$63.75
25.00	& over	\$80.44	\$74.44	\$71.44	\$69.63	\$68.43	\$67.57	\$66.93	\$66.43	\$66.03	\$65.70	\$65.43	\$65.19	\$65.00	\$64.83	\$64.67	\$64.54	\$64.42	\$64.32	\$64.23

ATTACHMENT C

Group Home and Group Training Home Non-ISS Rate Standard Tables

Client Mobility		County Type																		
There are no clients in GH who use a wheelchair		KING																		
ISS Hour Range		Number of Residents in Group Home or Group Training Home																		
at least	but less than	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
0.00	0.50	\$42.93	\$36.81	\$33.75	\$31.91	\$30.68	\$29.81	\$29.15	\$28.64	\$28.24	\$27.90	\$27.62	\$27.38	\$27.19	\$27.01	\$26.85	\$26.72	\$26.59	\$26.49	\$26.40
0.50	1.00	\$45.36	\$39.24	\$36.18	\$34.34	\$33.11	\$32.24	\$31.58	\$31.07	\$30.67	\$30.33	\$30.05	\$29.81	\$29.62	\$29.44	\$29.28	\$29.15	\$29.02	\$28.92	\$28.83
1.00	1.50	\$47.82	\$41.70	\$38.64	\$36.80	\$35.57	\$34.70	\$34.04	\$33.53	\$33.13	\$32.79	\$32.51	\$32.27	\$32.08	\$31.90	\$31.74	\$31.61	\$31.48	\$31.38	\$31.29
1.50	2.00	\$50.01	\$43.89	\$40.83	\$38.99	\$37.76	\$36.89	\$36.23	\$35.72	\$35.32	\$34.98	\$34.70	\$34.46	\$34.27	\$34.09	\$33.93	\$33.80	\$33.67	\$33.57	\$33.48
2.00	2.50	\$52.25	\$46.13	\$43.07	\$41.23	\$40.00	\$39.13	\$38.47	\$37.96	\$37.56	\$37.22	\$36.94	\$36.70	\$36.51	\$36.33	\$36.17	\$36.04	\$35.91	\$35.81	\$35.72
2.50	3.00	\$54.72	\$48.60	\$45.54	\$43.70	\$42.47	\$41.60	\$40.94	\$40.43	\$40.03	\$39.69	\$39.41	\$39.17	\$38.98	\$38.80	\$38.64	\$38.51	\$38.38	\$38.28	\$38.19
3.00	3.50	\$57.18	\$51.06	\$48.00	\$46.16	\$44.93	\$44.06	\$43.40	\$42.89	\$42.49	\$42.15	\$41.87	\$41.63	\$41.44	\$41.26	\$41.10	\$40.97	\$40.84	\$40.74	\$40.65
3.50	4.00	\$59.51	\$53.39	\$50.33	\$48.49	\$47.26	\$46.39	\$45.73	\$45.22	\$44.82	\$44.48	\$44.20	\$43.96	\$43.77	\$43.59	\$43.43	\$43.30	\$43.17	\$43.07	\$42.98
4.00	4.50	\$61.54	\$55.42	\$52.36	\$50.52	\$49.29	\$48.42	\$47.76	\$47.25	\$46.85	\$46.51	\$46.23	\$45.99	\$45.80	\$45.62	\$45.46	\$45.33	\$45.20	\$45.10	\$45.01
4.50	5.00	\$63.30	\$57.18	\$54.12	\$52.28	\$51.05	\$50.18	\$49.52	\$49.01	\$48.61	\$48.27	\$47.99	\$47.75	\$47.56	\$47.38	\$47.22	\$47.09	\$46.96	\$46.86	\$46.77
5.00	5.50	\$64.83	\$58.71	\$55.65	\$53.81	\$52.58	\$51.71	\$51.05	\$50.54	\$50.14	\$49.80	\$49.52	\$49.28	\$49.09	\$48.91	\$48.75	\$48.62	\$48.49	\$48.39	\$48.30
5.50	6.00	\$66.11	\$59.99	\$56.93	\$55.09	\$53.86	\$52.99	\$52.33	\$51.82	\$51.42	\$51.08	\$50.80	\$50.56	\$50.37	\$50.19	\$50.03	\$49.90	\$49.77	\$49.67	\$49.58
6.00	6.50	\$67.19	\$61.07	\$58.01	\$56.17	\$54.94	\$54.07	\$53.41	\$52.90	\$52.50	\$52.16	\$51.88	\$51.64	\$51.45	\$51.27	\$51.11	\$50.98	\$50.85	\$50.75	\$50.66
6.50	7.00	\$68.08	\$61.96	\$58.90	\$57.06	\$55.83	\$54.96	\$54.30	\$53.79	\$53.39	\$53.05	\$52.77	\$52.53	\$52.34	\$52.16	\$52.00	\$51.87	\$51.74	\$51.64	\$51.55
7.00	7.50	\$68.80	\$62.68	\$59.62	\$57.78	\$56.55	\$55.68	\$55.02	\$54.51	\$54.11	\$53.77	\$53.49	\$53.25	\$53.06	\$52.88	\$52.72	\$52.59	\$52.46	\$52.36	\$52.27
7.50	8.00	\$69.35	\$63.23	\$60.17	\$58.33	\$57.10	\$56.23	\$55.57	\$55.06	\$54.66	\$54.32	\$54.04	\$53.80	\$53.61	\$53.43	\$53.27	\$53.14	\$53.01	\$52.91	\$52.82
8.00	8.50	\$69.75	\$63.63	\$60.57	\$58.73	\$57.50	\$56.63	\$55.97	\$55.46	\$55.06	\$54.72	\$54.44	\$54.20	\$54.01	\$53.83	\$53.67	\$53.54	\$53.41	\$53.31	\$53.22
8.50	9.00	\$70.12	\$64.00	\$60.94	\$59.10	\$57.87	\$57.00	\$56.34	\$55.83	\$55.43	\$55.09	\$54.81	\$54.57	\$54.38	\$54.20	\$54.04	\$53.91	\$53.78	\$53.68	\$53.59
9.00	9.50	\$70.37	\$64.25	\$61.19	\$59.35	\$58.12	\$57.25	\$56.59	\$56.08	\$55.68	\$55.34	\$55.06	\$54.82	\$54.63	\$54.45	\$54.29	\$54.16	\$54.03	\$53.93	\$53.84
9.50	10.00	\$70.57	\$64.45	\$61.39	\$59.55	\$58.32	\$57.45	\$56.79	\$56.28	\$55.88	\$55.54	\$55.26	\$55.02	\$54.83	\$54.65	\$54.49	\$54.36	\$54.23	\$54.13	\$54.04
10.00	10.50	\$70.76	\$64.64	\$61.58	\$59.74	\$58.51	\$57.64	\$56.98	\$56.47	\$56.07	\$55.73	\$55.45	\$55.21	\$55.02	\$54.84	\$54.68	\$54.55	\$54.42	\$54.32	\$54.23
10.50	11.00	\$70.94	\$64.82	\$61.76	\$59.92	\$58.69	\$57.82	\$57.16	\$56.65	\$56.25	\$55.91	\$55.63	\$55.39	\$55.20	\$55.02	\$54.86	\$54.73	\$54.60	\$54.50	\$54.41
11.00	11.50	\$71.09	\$64.97	\$61.91	\$60.07	\$58.84	\$57.97	\$57.31	\$56.80	\$56.40	\$56.06	\$55.78	\$55.54	\$55.35	\$55.17	\$55.01	\$54.88	\$54.75	\$54.65	\$54.56
11.50	12.00	\$71.25	\$65.13	\$62.07	\$60.23	\$59.00	\$58.13	\$57.47	\$56.96	\$56.56	\$56.22	\$55.94	\$55.70	\$55.51	\$55.33	\$55.17	\$55.04	\$54.91	\$54.81	\$54.72
12.00	12.50	\$71.45	\$65.33	\$62.27	\$60.43	\$59.20	\$58.33	\$57.67	\$57.16	\$56.76	\$56.42	\$56.14	\$55.90	\$55.71	\$55.53	\$55.37	\$55.24	\$55.11	\$55.01	\$54.92
12.50	13.00	\$71.64	\$65.52	\$62.46	\$60.62	\$59.39	\$58.52	\$57.86	\$57.35	\$56.95	\$56.61	\$56.33	\$56.09	\$55.90	\$55.72	\$55.56	\$55.43	\$55.30	\$55.20	\$55.11
13.00	13.50	\$71.86	\$65.74	\$62.68	\$60.84	\$59.61	\$58.74	\$58.08	\$57.57	\$57.17	\$56.83	\$56.55	\$56.31	\$56.12	\$55.94	\$55.78	\$55.65	\$55.52	\$55.42	\$55.33
13.50	14.00	\$72.05	\$65.93	\$62.87	\$61.03	\$59.80	\$58.93	\$58.27	\$57.76	\$57.36	\$57.02	\$56.74	\$56.50	\$56.31	\$56.13	\$55.97	\$55.84	\$55.71	\$55.61	\$55.52
14.00	14.50	\$72.23	\$66.11	\$63.05	\$61.21	\$59.98	\$59.11	\$58.45	\$57.94	\$57.54	\$57.20	\$56.92	\$56.68	\$56.49	\$56.31	\$56.15	\$56.02	\$55.89	\$55.79	\$55.70
14.50	15.00	\$72.41	\$66.29	\$63.23	\$61.39	\$60.16	\$59.29	\$58.63	\$58.12	\$57.72	\$57.38	\$57.10	\$56.86	\$56.67	\$56.49	\$56.33	\$56.20	\$56.07	\$55.97	\$55.88
15.00	15.50	\$72.70	\$66.58	\$63.52	\$61.68	\$60.45	\$59.58	\$58.92	\$58.41	\$58.01	\$57.67	\$57.39	\$57.15	\$56.96	\$56.78	\$56.62	\$56.49	\$56.36	\$56.26	\$56.17
15.50	16.00	\$72.95	\$66.83	\$63.77	\$61.93	\$60.70	\$59.83	\$59.17	\$58.66	\$58.26	\$57.92	\$57.64	\$57.40	\$57.21	\$57.03	\$56.87	\$56.74	\$56.61	\$56.51	\$56.42
16.00	16.50	\$73.20	\$67.08	\$64.02	\$62.18	\$60.95	\$60.08	\$59.42	\$58.91	\$58.51	\$58.17	\$57.89	\$57.65	\$57.46	\$57.28	\$57.12	\$56.99	\$56.86	\$56.76	\$56.67
16.50	17.00	\$73.60	\$67.48	\$64.42	\$62.58	\$61.35	\$60.48	\$59.82	\$59.31	\$58.91	\$58.57	\$58.29	\$58.05	\$57.86	\$57.68	\$57.52	\$57.39	\$57.26	\$57.16	\$57.07
17.00	17.50	\$74.20	\$68.08	\$65.02	\$63.18	\$61.95	\$61.08	\$60.42	\$59.91	\$59.51	\$59.17	\$58.89	\$58.65	\$58.46	\$58.28	\$58.12	\$57.99	\$57.86	\$57.76	\$57.67
17.50	18.00	\$74.82	\$68.70	\$65.64	\$63.80	\$62.57	\$61.70	\$61.04	\$60.53	\$60.13	\$59.79	\$59.51	\$59.27	\$59.08	\$58.90	\$58.74	\$58.61	\$58.48	\$58.38	\$58.29
18.00	18.50	\$75.44	\$69.32	\$66.26	\$64.42	\$63.19	\$62.32	\$61.66	\$61.15	\$60.75	\$60.41	\$60.13	\$59.89	\$59.70	\$59.52	\$59.36	\$59.23	\$59.10	\$59.00	\$58.91
18.50	19.00	\$76.08	\$69.96	\$66.90	\$65.06	\$63.83	\$62.96	\$62.30	\$61.79	\$61.39	\$61.05	\$60.77	\$60.53	\$60.34	\$60.16	\$60.00	\$59.87	\$59.74	\$59.64	\$59.55
19.00	19.50	\$76.73	\$70.61	\$67.55	\$65.71	\$64.48	\$63.61	\$62.95	\$62.44	\$62.04	\$61.70	\$61.42	\$61.18	\$60.99	\$60.81	\$60.65	\$60.52	\$60.39	\$60.29	\$60.20
19.50	20.00	\$77.43	\$71.31	\$68.25	\$66.41	\$65.18	\$64.31	\$63.65	\$63.14	\$62.74	\$62.40	\$62.12	\$61.88	\$61.69	\$61.51	\$61.35	\$61.22	\$61.09	\$60.99	\$60.90
20.00	20.50	\$78.11	\$71.99	\$68.93	\$67.09	\$65.86	\$64.99	\$64.33	\$63.82	\$63.42	\$63.08	\$62.80	\$62.56	\$62.37	\$62.19	\$62.03	\$61.90	\$61.77	\$61.67	\$61.58
20.50	21.00	\$78.75	\$72.63	\$69.57	\$67.73	\$66.50	\$65.63	\$64.97	\$64.46	\$64.06	\$63.72	\$63.44	\$63.20	\$63.01	\$62.83	\$62.67	\$62.54	\$62.41	\$62.31	\$62.22
21.00	21.50	\$79.38	\$73.26	\$70.20	\$68.36	\$67.13	\$66.26	\$65.60	\$65.09	\$64.69	\$64.35	\$64.07	\$63.83	\$63.64	\$63.46	\$63.30	\$63.17	\$63.04	\$62.94	\$62.85
21.50	22.00	\$79.99	\$73.87	\$70.81	\$68.97	\$67.74	\$66.87	\$66.21	\$65.70	\$65.30	\$64.96	\$64.68	\$64.44	\$64.25	\$64.07	\$63.91	\$63.78	\$63.65	\$63.55	\$63.46
22.00	22.50	\$80.60	\$74.48	\$71.42	\$69.58	\$68.35	\$67.48	\$66.82	\$66.31	\$65.91	\$65.57	\$65.29	\$65.05	\$64.86	\$64.68	\$64.52	\$64.39	\$64.26	\$64.16	\$64.07
22.50	23.00	\$81.20	\$75.08	\$72.02	\$70.18	\$68.95	\$68.08	\$67.42	\$66.91	\$66.51	\$66.17	\$65.89	\$65.65	\$65.46	\$65.28	\$65.12	\$64.99	\$64.86	\$64.76	\$64.67
23.00	23.50	\$81.77	\$75.65	\$72.59	\$70.75	\$69.52	\$68.65	\$67.99	\$67.48	\$67.08	\$66.74	\$66.46	\$66.22	\$66.03	\$65.85	\$65.69	\$65.56	\$65.43	\$65.33	\$65.24
23.50	24.00	\$82.32	\$76.20	\$73.14	\$71.30	\$70.07	\$69.20	\$68.54	\$68.03	\$67.63	\$67.29	\$67.01	\$66.77	\$66.58	\$66.40	\$66.24	\$66.11	\$65.98	\$65.88	\$65.79
24.00	24.50	\$82.85	\$76.73	\$73.67	\$71.83	\$70.60	\$69.73	\$69.07	\$68.56	\$68.16	\$67.82	\$67.54	\$67.30	\$67.11	\$66.93	\$66.77	\$66.64	\$66.51	\$66.41	\$66.32
24.50	25.00	\$83.36	\$77.24	\$74.18	\$72.34	\$71.11	\$70.24	\$69.58	\$69.07	\$68.67	\$68.33	\$68.05	\$67.81	\$67.62	\$67.44	\$67.28	\$67.15	\$67.02	\$66.92	\$66.83
25.00	& over	\$83.85	\$77.73	\$74.67	\$72.83	\$71.60	\$70.73	\$70.07	\$69.56	\$69.16	\$68.82	\$68.54	\$68.30	\$68.11	\$67.93	\$67.77	\$67.64	\$67.51	\$67.41	\$67.32

ATTACHMENT C

Group Home and Group Training Home Non-ISS Rate Standard Tables

Client Mobility		One of more clients in GH use a wheelchair										County Type									
ISS Hour Range		Number of Residents in Group Home or Group Training Home																			
at least	but less than	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
0.00	0.50	\$43.42	\$37.30	\$34.24	\$32.40	\$31.17	\$30.30	\$29.64	\$29.13	\$28.73	\$28.39	\$28.11	\$27.87	\$27.68	\$27.50	\$27.34	\$27.21	\$27.08	\$26.98	\$26.89	
0.50	1.00	\$45.85	\$39.73	\$36.67	\$34.83	\$33.60	\$32.73	\$32.07	\$31.56	\$31.16	\$30.82	\$30.54	\$30.30	\$30.11	\$29.93	\$29.77	\$29.64	\$29.51	\$29.41	\$29.32	
1.00	1.50	\$48.31	\$42.19	\$39.13	\$37.29	\$36.06	\$35.19	\$34.53	\$34.02	\$33.62	\$33.28	\$33.00	\$32.76	\$32.57	\$32.39	\$32.23	\$32.10	\$31.97	\$31.87	\$31.78	
1.50	2.00	\$50.50	\$44.38	\$41.32	\$39.48	\$38.25	\$37.38	\$36.72	\$36.21	\$35.81	\$35.47	\$35.19	\$34.95	\$34.76	\$34.58	\$34.42	\$34.29	\$34.16	\$34.06	\$33.97	
2.00	2.50	\$52.74	\$46.62	\$43.56	\$41.72	\$40.49	\$39.62	\$38.96	\$38.45	\$38.05	\$37.71	\$37.43	\$37.19	\$37.00	\$36.82	\$36.66	\$36.53	\$36.40	\$36.30	\$36.21	
2.50	3.00	\$55.21	\$49.09	\$46.03	\$44.19	\$42.96	\$42.09	\$41.43	\$40.92	\$40.52	\$40.18	\$39.90	\$39.66	\$39.47	\$39.29	\$39.13	\$39.00	\$38.87	\$38.77	\$38.68	
3.00	3.50	\$57.67	\$51.55	\$48.49	\$46.65	\$45.42	\$44.55	\$43.89	\$43.38	\$42.98	\$42.64	\$42.36	\$42.12	\$41.93	\$41.75	\$41.59	\$41.46	\$41.33	\$41.23	\$41.14	
3.50	4.00	\$60.00	\$53.88	\$50.82	\$48.98	\$47.75	\$46.88	\$46.22	\$45.71	\$45.31	\$44.97	\$44.69	\$44.45	\$44.26	\$44.08	\$43.92	\$43.79	\$43.66	\$43.56	\$43.47	
4.00	4.50	\$62.03	\$55.91	\$52.85	\$51.01	\$49.78	\$48.91	\$48.25	\$47.74	\$47.34	\$47.00	\$46.72	\$46.48	\$46.29	\$46.11	\$45.95	\$45.82	\$45.69	\$45.59	\$45.50	
4.50	5.00	\$63.79	\$57.67	\$54.61	\$52.77	\$51.54	\$50.67	\$50.01	\$49.50	\$49.10	\$48.76	\$48.48	\$48.24	\$48.05	\$47.87	\$47.71	\$47.58	\$47.45	\$47.35	\$47.26	
5.00	5.50	\$65.32	\$59.20	\$56.14	\$54.30	\$53.07	\$52.20	\$51.54	\$51.03	\$50.63	\$50.29	\$50.01	\$49.77	\$49.58	\$49.40	\$49.24	\$49.11	\$48.98	\$48.88	\$48.79	
5.50	6.00	\$66.60	\$60.48	\$57.42	\$55.58	\$54.35	\$53.48	\$52.82	\$52.31	\$51.91	\$51.57	\$51.29	\$51.05	\$50.86	\$50.68	\$50.52	\$50.39	\$50.26	\$50.16	\$50.07	
6.00	6.50	\$67.68	\$61.56	\$58.50	\$56.66	\$55.43	\$54.56	\$53.90	\$53.39	\$52.99	\$52.65	\$52.37	\$52.13	\$51.94	\$51.76	\$51.60	\$51.47	\$51.34	\$51.24	\$51.15	
6.50	7.00	\$68.57	\$62.45	\$59.39	\$57.55	\$56.32	\$55.45	\$54.79	\$54.28	\$53.88	\$53.54	\$53.26	\$53.02	\$52.83	\$52.65	\$52.49	\$52.36	\$52.23	\$52.13	\$52.04	
7.00	7.50	\$69.29	\$63.17	\$60.11	\$58.27	\$57.04	\$56.17	\$55.51	\$55.00	\$54.60	\$54.26	\$53.98	\$53.74	\$53.55	\$53.37	\$53.21	\$53.08	\$52.95	\$52.85	\$52.76	
7.50	8.00	\$69.84	\$63.72	\$60.66	\$58.82	\$57.59	\$56.72	\$56.06	\$55.55	\$55.15	\$54.81	\$54.53	\$54.29	\$54.10	\$53.92	\$53.76	\$53.63	\$53.50	\$53.40	\$53.31	
8.00	8.50	\$70.24	\$64.12	\$61.06	\$59.22	\$57.99	\$57.12	\$56.46	\$55.95	\$55.55	\$55.21	\$54.93	\$54.69	\$54.50	\$54.32	\$54.16	\$54.03	\$53.90	\$53.80	\$53.71	
8.50	9.00	\$70.61	\$64.49	\$61.43	\$59.59	\$58.36	\$57.49	\$56.83	\$56.32	\$55.92	\$55.58	\$55.30	\$55.06	\$54.87	\$54.69	\$54.53	\$54.40	\$54.27	\$54.17	\$54.08	
9.00	9.50	\$70.86	\$64.74	\$61.68	\$59.84	\$58.61	\$57.74	\$57.08	\$56.57	\$56.17	\$55.83	\$55.55	\$55.31	\$55.12	\$54.94	\$54.78	\$54.65	\$54.52	\$54.42	\$54.33	
9.50	10.00	\$71.06	\$64.94	\$61.88	\$60.04	\$58.81	\$57.94	\$57.28	\$56.77	\$56.37	\$56.03	\$55.75	\$55.51	\$55.32	\$55.14	\$54.98	\$54.85	\$54.72	\$54.62	\$54.53	
10.00	10.50	\$71.25	\$65.13	\$62.07	\$60.23	\$59.00	\$58.13	\$57.47	\$56.96	\$56.56	\$56.22	\$55.94	\$55.70	\$55.51	\$55.33	\$55.17	\$55.04	\$54.91	\$54.81	\$54.72	
10.50	11.00	\$71.43	\$65.31	\$62.25	\$60.41	\$59.18	\$58.31	\$57.65	\$57.14	\$56.74	\$56.40	\$56.12	\$55.88	\$55.69	\$55.51	\$55.35	\$55.22	\$55.09	\$54.99	\$54.90	
11.00	11.50	\$71.58	\$65.46	\$62.40	\$60.56	\$59.33	\$58.46	\$57.80	\$57.29	\$56.89	\$56.55	\$56.27	\$56.03	\$55.84	\$55.66	\$55.50	\$55.37	\$55.24	\$55.14	\$55.05	
11.50	12.00	\$71.74	\$65.62	\$62.56	\$60.72	\$59.49	\$58.62	\$57.96	\$57.45	\$57.05	\$56.71	\$56.43	\$56.19	\$56.00	\$55.82	\$55.66	\$55.53	\$55.40	\$55.30	\$55.21	
12.00	12.50	\$71.94	\$65.82	\$62.76	\$60.92	\$59.69	\$58.82	\$58.16	\$57.65	\$57.25	\$56.91	\$56.63	\$56.39	\$56.20	\$56.02	\$55.86	\$55.73	\$55.60	\$55.50	\$55.41	
12.50	13.00	\$72.13	\$66.01	\$62.95	\$61.11	\$59.88	\$59.01	\$58.35	\$57.84	\$57.44	\$57.10	\$56.82	\$56.58	\$56.39	\$56.21	\$56.05	\$55.92	\$55.79	\$55.69	\$55.60	
13.00	13.50	\$72.35	\$66.23	\$63.17	\$61.33	\$60.10	\$59.23	\$58.57	\$58.06	\$57.66	\$57.32	\$57.04	\$56.80	\$56.61	\$56.43	\$56.27	\$56.14	\$56.01	\$55.91	\$55.82	
13.50	14.00	\$72.54	\$66.42	\$63.36	\$61.52	\$60.29	\$59.42	\$58.76	\$58.25	\$57.85	\$57.51	\$57.23	\$56.99	\$56.80	\$56.62	\$56.46	\$56.33	\$56.20	\$56.10	\$56.01	
14.00	14.50	\$72.72	\$66.60	\$63.54	\$61.70	\$60.47	\$59.60	\$58.94	\$58.43	\$58.03	\$57.69	\$57.41	\$57.17	\$56.98	\$56.80	\$56.64	\$56.51	\$56.38	\$56.28	\$56.19	
14.50	15.00	\$72.90	\$66.78	\$63.72	\$61.88	\$60.65	\$59.78	\$59.12	\$58.61	\$58.21	\$57.87	\$57.59	\$57.35	\$57.16	\$56.98	\$56.82	\$56.69	\$56.56	\$56.46	\$56.37	
15.00	15.50	\$73.19	\$67.07	\$64.01	\$62.17	\$60.94	\$60.07	\$59.41	\$58.90	\$58.50	\$58.16	\$57.88	\$57.64	\$57.45	\$57.27	\$57.11	\$56.98	\$56.85	\$56.75	\$56.66	
15.50	16.00	\$73.44	\$67.32	\$64.26	\$62.42	\$61.19	\$60.32	\$59.66	\$59.15	\$58.75	\$58.41	\$58.13	\$57.89	\$57.70	\$57.52	\$57.36	\$57.23	\$57.10	\$57.00	\$56.91	
16.00	16.50	\$73.69	\$67.57	\$64.51	\$62.67	\$61.44	\$60.57	\$59.91	\$59.40	\$59.00	\$58.66	\$58.38	\$58.14	\$57.95	\$57.77	\$57.61	\$57.48	\$57.35	\$57.25	\$57.16	
16.50	17.00	\$74.09	\$67.97	\$64.91	\$63.07	\$61.84	\$60.97	\$60.31	\$59.80	\$59.40	\$59.06	\$58.78	\$58.54	\$58.35	\$58.17	\$58.01	\$57.88	\$57.75	\$57.65	\$57.56	
17.00	17.50	\$74.69	\$68.57	\$65.51	\$63.67	\$62.44	\$61.57	\$60.91	\$60.40	\$60.00	\$59.66	\$59.38	\$59.14	\$58.95	\$58.77	\$58.61	\$58.48	\$58.35	\$58.25	\$58.16	
17.50	18.00	\$75.31	\$69.19	\$66.13	\$64.29	\$63.06	\$62.19	\$61.53	\$61.02	\$60.62	\$60.28	\$60.00	\$59.76	\$59.57	\$59.39	\$59.23	\$59.10	\$58.97	\$58.87	\$58.78	
18.00	18.50	\$75.93	\$69.81	\$66.75	\$64.91	\$63.68	\$62.81	\$62.15	\$61.64	\$61.24	\$60.90	\$60.62	\$60.38	\$60.19	\$60.01	\$59.85	\$59.72	\$59.59	\$59.49	\$59.40	
18.50	19.00	\$76.57	\$70.45	\$67.39	\$65.55	\$64.32	\$63.45	\$62.79	\$62.28	\$61.88	\$61.54	\$61.26	\$61.02	\$60.83	\$60.65	\$60.49	\$60.36	\$60.23	\$60.13	\$60.04	
19.00	19.50	\$77.22	\$71.10	\$68.04	\$66.20	\$64.97	\$64.10	\$63.44	\$62.93	\$62.53	\$62.19	\$61.91	\$61.67	\$61.48	\$61.30	\$61.14	\$61.01	\$60.88	\$60.78	\$60.69	
19.50	20.00	\$77.92	\$71.80	\$68.74	\$66.90	\$65.67	\$64.80	\$64.14	\$63.63	\$63.23	\$62.89	\$62.61	\$62.37	\$62.18	\$62.00	\$61.84	\$61.71	\$61.58	\$61.48	\$61.39	
20.00	20.50	\$78.60	\$72.48	\$69.42	\$67.58	\$66.35	\$65.48	\$64.82	\$64.31	\$63.91	\$63.57	\$63.29	\$63.05	\$62.86	\$62.68	\$62.52	\$62.39	\$62.26	\$62.16	\$62.07	
20.50	21.00	\$79.24	\$73.12	\$70.06	\$68.22	\$66.99	\$66.12	\$65.46	\$64.95	\$64.55	\$64.21	\$63.93	\$63.69	\$63.50	\$63.32	\$63.16	\$63.03	\$62.90	\$62.80	\$62.71	
21.00	21.50	\$79.87	\$73.75	\$70.69	\$68.85	\$67.62	\$66.75	\$66.09	\$65.58	\$65.18	\$64.84	\$64.56	\$64.32	\$64.13	\$63.95	\$63.79	\$63.66	\$63.53	\$63.43	\$63.34	
21.50	22.00	\$80.48	\$74.36	\$71.30	\$69.46	\$68.23	\$67.36	\$66.70	\$66.19	\$65.79	\$65.45	\$65.17	\$64.93	\$64.74	\$64.56	\$64.40	\$64.27	\$64.14	\$64.04	\$63.95	
22.00	22.50	\$81.09	\$74.97	\$71.91	\$70.07	\$68.84	\$67.97	\$67.31	\$66.80	\$66.40	\$66.06	\$65.78	\$65.54	\$65.35	\$65.17	\$65.01	\$64.88	\$64.75	\$64.65	\$64.56	
22.50	23.00	\$81.69	\$75.57	\$72.51	\$70.67	\$69.44	\$68.57	\$67.91	\$67.40	\$67.00	\$66.66	\$66.38	\$66.14	\$65.95	\$65.77	\$65.61	\$65.48	\$65.35	\$65.25	\$65.16	
23.00	23.50	\$82.26	\$76.14	\$73.08	\$71.24	\$70.01	\$69.14	\$68.48	\$67.97	\$67.57	\$67.23	\$66.95	\$66.71	\$66.52	\$66.34	\$66.18	\$66.05	\$65.92	\$65.82	\$65.73	
23.50	24.00	\$82.81	\$76.69	\$73.63	\$71.79	\$70.56	\$69.69	\$69.03	\$68.52	\$68.12	\$67.78	\$67.50	\$67.26	\$67.07	\$66.89	\$66.73	\$66.60	\$66.47	\$66.37	\$66.28	
24.00	24.50	\$83.34	\$77.22	\$74.16	\$72.32	\$71.09	\$70.22	\$69.56	\$69.05	\$68.65	\$68.31	\$68.03	\$67.79	\$67.60	\$67.42	\$67.26	\$67.13	\$67.00	\$66.90	\$66.81	
24.50	25.00	\$83.85	\$77.73	\$74.67	\$72.83	\$71.60	\$70.73	\$70.07	\$69.56	\$69.16	\$68.82	\$68.54	\$68.30	\$68.11	\$67.93	\$67.77	\$67.64	\$67.51	\$67.41	\$67.32	
25.00	& over	\$84.34	\$78.22	\$75.16	\$73.32	\$72.09	\$71.22	\$70.56	\$70.05	\$69.65	\$69.31	\$69.03	\$68.79	\$68.60	\$68.42	\$68.26	\$68.13	\$68.00	\$67.90	\$67.81	

ATTACHMENT D
Client Transportation Assessment – Supported Living

Region:		Provider:		Client:	
---------	--	-----------	--	---------	--

Residential Rates Calculator

Step 3. Transportation Rate

1. Employment (if over 300, enter actual miles)

51 to 100 ▼	<input style="width:100%;" type="text"/>	additional clients:	<input style="width:30px;" type="text" value="2"/>
-------------	--	---------------------	--

2. Community Activities (if over 100, enter actual miles)

41 to 60 ▼	<input style="width:100%;" type="text"/>	additional clients:	<input style="width:30px;" type="text" value="1"/>
------------	--	---------------------	--

2. Medical Appointments (if over 100, enter actual miles)

61 to 80 ▼	<input style="width:100%;" type="text"/>	additional clients:	<input style="width:30px;" type="text" value="0"/>	Frequency: Monthly ▼
------------	--	---------------------	--	----------------------

4. Vehicle Type:

Agency Owned/Leased Standard Cars and Vans ▼
--

5. Miles driven on client's behalf: (If over 100, enter actual miles)

1 to 20 ▼	<input style="width:100%;" type="text"/>
-----------	--

6. Vehicle Type:

Staff Owned/Leased Vehicle ▼

Current Transportation Rate:

\$0.00

Calculated Transportation Rate:

\$4.25

New Transportation Rate:

\$0.00

ADSA/DDD Client Transportation Assessment

**ATTACHMENT E
Residential Staff Schedule Reporting**

RESIDENTIAL STAFF SCHEDULE REPORTING									
1) Program/Support time WITH the client present									
a) SITE		Time	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Agency name and household address(es):		6am							
		7am							
		8am							
		9am							
		10am							
		11am							
		12pm							
		1pm							
		2pm							
		3pm							
b) Clients served in this household/cluster Name Contracted or Requested Hours		4pm							
		5pm							
		6pm							
		7pm							
		8pm							
		9pm							
		10pm							
		11pm							
		12am							
		1am							
c) Total household/cluster		0							
e) Staff time with client(s) not on the regular schedule		2am							
		3am							
		4am							
		5am							
		f) Direct Service Hours/Day		Total hours	0	0	0	0	0

The value below meet or exceed the number of hours of face-to-face support required by the person in the household with the highest need.

Total Direct Service

hours per WEEK: hours per DAY:

0 0

**ATTACHMENT E
Residential Staff Schedule Reporting**

2) Program/Support time WITHOUT the client present: Please show the utilization of these hours below.

a) Program/Support time without the client(s) present	HOURS/WEEK ALLOTTED
<i>e.g. program planning, financial management, health care management, staff management including staff hours in training or meetings away from client's home, service coordination.</i>	
	b) Total hours divide by 7 (days)
	0 0

3) Total household ISS hours:

This sum must meet or exceed the sum of the total ISS hours for all clients identified in this schedule (Section A, part c.)

4) Percentage Program/Support time without the client present:

Above 12% need additional justification from the Service provider.

The section below is for DDD Staff use only.

Resource Manager/Designee

Signature Line and Date:

_____ __ __ / __ __ / _____

Comments:

ATTACHMENT E

Residential Staff Schedule Reporting

INSTRUCTIONS FOR COMPLETING THE RESIDENTIAL STAFF SCHEDULE REPORTING FORM

1. What is the purpose of the form?

The Residential Staff Schedule Reporting form provides a standardized format for residential agencies to submit staff coverage schedules for DDD approval per WAC 388-101-3310. The schedule should reflect a snapshot of a typical week. While the daily levels may change to accommodate client needs, the intent is for the agency to describe the level of staffing that will typically be available to meet client needs.

2. Who needs to submit a Residential Staff Schedule Reporting form?

The agency providing Supported Living (SL), Group Home (GH), or Group Training Home (GTH) services is responsible for completing and submitting the form to the DDD Resource Manager per WAC 388-101-1700. This form is required for SL and GH/GTH clients:

- Receiving services at support levels 4, 5 and 6. These clients have on-duty staff 24-hours per day. Persons not requiring 24-hour staffing coverage may sometimes need to be included on a staffing schedule if they share staff with other clients who require 24-hour support. Households are not set up by levels.
- When an increase in ISS hours is being requested to meet health and welfare needs of a client, regardless of the level of support persons are receiving (include in hours).
- Any time the contracted ISS hours are adjusted. You will go through this a number of times as hours are adjusted to reflect need.
- When submitting a service proposal for potential new clients choosing SL/GH/GTH services from the agency.
- Submit to the Resource Manager prior to an RCS certification evaluation.
- Provide copy of current schedule to the Resource Manager prior to the rate-setting meeting for client(s) receiving services at support levels 4, 5 and 6.
- When household configuration changes affecting staff coverage.
- In other situations as requested by DDD.

3. Do I submit the form by household or by cluster?

The agency may submit one form for either a single household or for a cluster of households, depending on which approach best describes the level of staffing that will be available to meet client needs.

4. How do I fill out the form?

Section 1: Program/Support time WITH the client(s) present

- a. The form is designed to make auto calculations from the data entered.
- b. Enter agency name and household address(es) under Site.
- c. List names of clients and amount of total ISS hours per contract for each client in the household/cluster.
- d. Total Household/Cluster = the sum of the combined ISS hours for each client in the household/cluster.
- e. Complete the staffing schedule to show the Regularly Scheduled Staff Time with Client(s).
 - Enter the total number of staff that is regularly scheduled to work directly with clients in the household/cluster. Staff may be providing supports either within the household or in the community.
 - If staff will be shared among several households and completing a staffing schedule by household, enter the portion of a staff member that will be used by this household (e.g., 0.5 if two households share support by the same staff member).
 - If a staff person's scheduled shift ends in between the whole hour increments on the staffing schedule, enter the portion of the hour that the staff member will be present. Example: If two staff are on duty, but one employee's shift ends at 7:30 pm, enter 1.5 in the 7-8 pm time slot.
- f. Calculate staff time, if any, for employees not regularly scheduled to support clients in this household/cluster, but who will provide direct supports on an intermittent or as-needed basis. Examples: Staff time for employees who specialize in helping clients pay bills and balance checkbooks, specialized staff who attend medical appointments with clients, or staff time for job shadowing.
 - It is ok to include time when the staff member is in transit between client homes and other gaps in the work day as required by the job. Example: If a financial manager spends 40 hours supporting clients in 10 different households, staff time can be listed as 4 hours per household even though some of that time will be used for transportation from household to household.
 - **DO NOT** include staff time for employees who will perform tasks on behalf of the client without the client present (e.g., a financial manager who handles a client's finances at the office without the client present). This staff time will be accounted for in Section 2 of the Residential Staff Schedule Reporting form.

ATTACHMENT E

Residential Staff Schedule Reporting

- **DO NOT** include support hours for contracted professional services. These hours are separate from the contracted ISS hours and a separate staffing schedule can be submitted.
 - Divide the staff time calculated above by “7” and enter that amount underneath each of the days below the staffing schedule in Section 1, part e.
- g. The daily hours are totaled at the bottom of each column. At the right, the Total Household Hours by week and with a daily average are calculated. This value must meet or exceed the number of hours of face-to-face support required by the person in the household with the highest need.

Section 2: Program/Support time WITHOUT the client(s) present

Residential agencies often provide some of a client’s support while the client is not present. Examples of these tasks include program planning, financial management, health care management, staff management (including staff hours in training away from the client’s home), and service coordination. If regularly scheduled household staff will perform these duties during slow times within the household while simultaneously providing general oversight for clients, do not count the staff time here because this time is already reflected in Section 1. Section 2 should include only those tasks that the agency plans to perform on behalf of the client without the client present.

- a. List each task that will be performed for the household/cluster without the client present. Enter the weekly allotted amount of hours of staff time for each task. Tasks may be entered on the form using the category headings. Agencies do not need to report down to the individual task level.
- b. Total the weekly hours and then divide by “7” to determine average daily program/support time without the client(s) present.

Section 3: Total household ISS hours

Total household ISS hours are calculated by summing average daily hours from Section 1 and average daily hours from Section 2. This value must meet or exceed the Total Household/Cluster Contracted Hours as listed in Section 1, part c. If not, the agency must justify why it will not be using all of the hours in the contract and the Resource Manager will need to reduce the ISS hours displayed in the contract accordingly (**Not applicable during Shadow Rate period**).

Section 4: Percentage Program/Support time without the client(s) present

Percentage Program/Support time without the client(s) present is calculated by dividing the Total Household/Cluster Contracted Hours (Section 1, part c) by the Total Daily Hours of Program/Support time without the client(s) present (Section 2, part b). If this value exceeds 12%, the Resource Manager will ask the residential agency to justify why a client’s support needs are best met without the individual present.

5. Where and when do I submit the completed Residential Staff Schedule Reporting form?

The residential agency should bring a completed copy of the current form to the rate-setting meeting. The form will need to be updated if there is an adjustment in the client(s) ISS hours. Submit completed forms to the Resource Manager who works with your agency.

6. What is the process for approving residential staff schedules?

Resource Managers will review the proposed schedule for consistency with the support needs required by all persons covered by the staffing schedule and verify that the agency plans to use all of the ISS hours that will be authorized in the contract. A Resource Manager may request additional information or justification if the use of ISS hours is not clear based on the submitted Residential Staff Schedule Reporting form.

7. How will I know that the schedule has been approved?

Once the staffing schedule for a household/cluster has been reviewed and approved, the Resource Manager will sign the Residential Staff Schedule Reporting form and return the form to the SL/GH/GTH agency. The agency must retain a copy of the approved staff coverage schedule per WAC 388-101-1700. The Resource Manager will maintain a copy of the form in his/her files.

ATTACHMENT F
Staff Add-On Request (Sample)

STAFF ADD-ON REQUEST

To be completed by Requesting Agency

Client Name:

Agency:

Agency Contact Person:

Phone #:

of contracted ISS hours for this individual

of ADD-ON hours requested in previous months
month

used in previous

Why support can not be provided within contracted hours:

Alternatives to Staff ADD-On which have been tried and results:

Attachments Required:

Staffing schedule that clearly indicates both regularly scheduled hours and proposed add-on hours

Program Plan which indicates how add-on hours will be used, including specific objectives for the individual receiving add-on hours.

Start date: _____ End Date: _____ **# of hours:** _____

Submitting Agency Signature: _____ **Date:** _____

To be completed by DDD Case Manager or Resource Manager

Type of Request:

initial one time only emergency ongoing

Nature of Request: Safety Behavioral

Medical: ___ age related ___ chronic health condition ___ short term health condition

Lack of day program/vocational Other: _____

Resource Manager Recommendation: Approve Deny

Resource Manager Signature: _____ **Date:** _____

To be completed by DDD Field Services Administrator or Designee

Approve Deny

Field Services

Administrator/Designee: _____ **Date:** _____