

Staffed Residential Rate Assessment

Do not enter any information in filled cells. Filled cells will auto populate once all tabs are completed.		COUNTY	REGION
CLIENT NAME		P1 CLIENT ID	BIRTHDATE
NAME OF AGENCY		HOUSE NAME	P1 PROVIDER ID NUMBER
ADDRESS OF HOME	CITY	STATE	ZIP CODE
<input type="checkbox"/> Client entering/exiting program		Effective date	START DATE
ADMINISTRATIVE & COMMUNITY INCLUSION COSTS			
ADMINISTRATIVE COSTS - DDA POLICY 6.22		DAILY RATE	AMOUNT PER MONTH
Administrative rate per month (Policy 6.22 - Attachment B)			\$0.00
Client transportation assessment amount		\$0.00	\$0.00
Damage allowance (if needed)		\$5.70	\$173.38
TOTAL ADMINISTRATIVE COSTS			\$173.38
Comments:			
TOTAL COMMUNITY INCLUSION COST			\$171.00
TRAINING & CONSULTATION COSTS			
CONSULTANT	HOURS PER MONTH	HOURLY RATE	SUBTOTAL
Mandatory Training (RCW 74.39A): Direct/Lead Staff	0.00	\$0.00	\$0.00
Mandatory Training (RCW 74.39A): Program Manager	0.00	\$0.00	\$0.00
TOTAL MANDATORY TRAINING (RCW 74.39A) COSTS			\$0.00
Consultant (Please list credentials)		\$0.00	\$0.00
			\$0.00
TOTAL OTHER TRAINING & CONSULTING COSTS			\$0.00
TOTAL TRAINING / CONSULTANT COSTS			\$0.00
STAFF COSTS			
STAFF COSTS (TAXES AND BENEFITS)	HOURS PER MONTH	HOURLY RATE	SUBTOTAL
Direct care staff (School)	0.00	\$0.00	\$0.00
Direct care staff (Non-School)	0.00	\$0.00	\$0.00
Lead/Supervisor Hours	0.00	\$0.00	\$0.00
Program Manager Hours	0.00	\$0.00	\$0.00
TOTAL STAFF COSTS			\$0.00
Comments (Specify):			
TOTAL ADMINISTRATIVE & COMMUNITY INCLUSION, TRAINING & CONSULTATION, & STAFFING COSTS		\$11.32	\$344.38
FUNDING SOURCE (SELECT ONE)		DAILY RATE	MONTHLY RATE
BASIC EXPENSES			
BASIC EXPENSES - DDA POLICY 6.22			AMOUNT PER MONTH
Rent (based upon signed lease agreement)			
Food			
Utilities (Power, Water, Garbage, Phone, etc.) Average of actual costs			
TOTAL BASIC EXPENSES		SA215	\$0.00
		DAILY RATE	MONTHLY RATE
TOTAL CLIENT RATE		\$11.32	\$344.38
		DAILY RATE	MONTHLY RATE



DEVELOPMENTAL DISABILITIES ADMINISTRATION STAFFED RESIDENTIAL RATE PROPOSAL

Do not enter any information in filled cells. Filled cells will auto populate once all tabs are completed.				COUNTY 0	REGION 0
CLIENT NAME 0		P1 CLIENT ID 0	DATE OF BIRTH 1/0/00	AGE	
NAME OF AGENCY 0		HOUSE NAME 0		P1 PROVIDER ID NUMBER 0	
ADDRESS OF HOME 0		CITY 0	STATE 0	ZIP CODE 0	START DATE 1/0/00
INDIVIDUAL(S) SERVED AT THIS SITE		ADMINISTRATION	INDIVIDUAL(S) SERVED AT THIS SITE		ADMINISTRATION
1 0			2		
3			4		
5			6		

DIRECT SERVICE HOURS

Time	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday	Totals
	School Days	Non-School Days	School Days	Non-School Days	School Days	Non-School Days	School Days	Non-School Days	School Days	Non-School Days			
6am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
10am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
10pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
11pm	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
12am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5am	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Direct Service Hours Per Day	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

Administrative Rate Worksheet. Refer to Policy 6.22 Attachment B to determine standardized daily administrative rate.					
Staff	Yearly Hours	Average Monthly Hours	Average Hours/Week	Daily Hours	
Direct Service Hours - School	0	0.00	0.00	0.00	
Direct Service Hours - Non-School	0	0.00	0.00	0.00	
Average Daily Direct Service Hours (120 school days and 245 non-school days)					0.00
NON-DIRECT ISS HOURS					# of Clients
Lead/Supervisor	0.00	0.00	0.00	0.00	0.00
Program Manager	0.00	0.00	0.00	0.00	0.00
TOTAL DAILY HOURS	Total Daily Hours used to determine Administrative Rate per Policy 6.22			0.00	0.00

DSHS 10-326 REV 02/2020

DEVELOPMENTAL DISABILITIES ADMINISTRATION STAFFED RESIDENTIAL RATE PROPOSAL

Do not enter any information in filled cells. Filled cells will auto populate once all tabs are completed.				COUNTY 0	REGION 0
CLIENT NAME 0		P1 CLIENT ID NUMBER 0		DATE OF BIRTH 1/0/00	AGE
NAME OF AGENCY 0		HOUSE NAME 0			
ADDRESS OF HOME 0		CITY 0	STATE 0	ZIP CODE 0	START DATE 1/0/00

RATE APPROVAL

	PRINT NAME	SIGNATURE	DATE
VPS RESOURCE MANAGER			
VPS COORDINATOR			
VPS HQ PROGRAM MANAGER			

CC TO BUDGET MANAGEMENT STAFF

	NAME	DATE NOTIFIED
REGIONAL RESOURCE MANAGER ADMINISTRATOR		
HEADQUARTERS RESIDENTIAL SUPERVISOR		

**Notification via SharePoint site*

Licensed Staffed Residential Administrative Rate Table

ISS Hour Range		January 1, 2020 Admin. Rate - Non-MSA County	January 1, 2020 Admin. Rate - MSA County	January 1, 2020 Admin. Rate - King County
at least	but less than			
0.00	0.50	\$10.41	\$10.62	\$11.38
0.50	1.00	\$12.94	\$13.19	\$14.14
1.00	1.50	\$15.49	\$15.79	\$16.93
1.50	2.00	\$17.76	\$18.11	\$19.42
2.00	2.50	\$20.08	\$20.49	\$21.96
2.50	3.00	\$22.64	\$23.10	\$24.77
3.00	3.50	\$25.21	\$25.70	\$27.56
3.50	4.00	\$27.63	\$28.17	\$30.20
4.00	4.50	\$29.74	\$30.33	\$32.51
4.50	5.00	\$31.59	\$32.20	\$34.50
5.00	5.50	\$33.16	\$33.80	\$36.24
5.50	6.00	\$34.50	\$35.17	\$37.69
6.00	6.50	\$35.62	\$36.32	\$38.92
6.50	7.00	\$36.55	\$37.26	\$39.93
7.00	7.50	\$37.28	\$38.01	\$40.75
7.50	8.00	\$37.86	\$38.61	\$41.37
8.00	8.50	\$38.29	\$39.04	\$41.82
8.50	9.00	\$38.67	\$39.43	\$42.24
9.00	9.50	\$38.94	\$39.70	\$42.53
9.50	10.00	\$39.16	\$39.93	\$42.76
10.00	10.50	\$39.35	\$40.12	\$42.97
10.50	11.00	\$39.53	\$40.30	\$43.18
11.00	11.50	\$39.69	\$40.47	\$43.35
11.50	12.00	\$39.87	\$40.64	\$43.53
12.00	12.50	\$40.07	\$40.85	\$43.75
12.50	13.00	\$40.26	\$41.04	\$43.97
13.00	13.50	\$40.47	\$41.27	\$44.22
13.50	14.00	\$40.68	\$41.47	\$44.44
14.00	14.50	\$40.87	\$41.68	\$44.64
14.50	15.00	\$41.05	\$41.86	\$44.84
15.00	15.50	\$41.36	\$42.17	\$45.17
15.50	16.00	\$41.60	\$42.41	\$45.46
16.00	16.50	\$41.86	\$42.69	\$45.74
16.50	17.00	\$42.27	\$43.10	\$46.19
17.00	17.50	\$42.91	\$43.75	\$46.88
17.50	18.00	\$43.55	\$44.40	\$47.58
18.00	18.50	\$44.19	\$45.04	\$48.28
18.50	19.00	\$44.83	\$45.72	\$49.01
19.00	19.50	\$45.54	\$46.42	\$49.75
19.50	20.00	\$46.26	\$47.17	\$50.54

20.00	20.50	\$46.97	\$47.89	\$51.31
20.50	21.00	\$47.65	\$48.59	\$52.04
21.00	21.50	\$48.32	\$49.26	\$52.75
21.50	22.00	\$48.95	\$49.92	\$53.45
22.00	22.50	\$49.58	\$50.54	\$54.14
22.50	23.00	\$50.17	\$51.15	\$54.82
23.00	23.50	\$50.77	\$51.77	\$55.47
23.50	24.00	\$51.36	\$52.37	\$56.09
24.00	24.50	\$51.93	\$52.95	\$56.69
24.50	25.00	\$52.47	\$53.49	\$57.27
25.00	& over	\$52.99	\$54.04	\$57.83

Staffed Residential Rate Assessment Instructions

Page 1:

Select the county where the client will be residing
Select the region where the client will be residing
Enter the client's name
Enter the client's date of birth
Enter the name of licensed agency identified within the contract
Enter the name of the house where the client will be residing
Enter the client's provider one ID number
Enter the address of home where the client will be residing
Enter start date in which payment of rate will begin
Enter the name of client entering/exiting the program and date.

Administrative and Community Inclusion Costs

The daily Administrative rate is based on the number of Instruction and Support Services (ISS) hours and Non-ISS hours utilizing the the Administrative Rate Table as outlined by attachment contained in DDA Policy 6.22, Residential Programs and Reimbursement System. The total number of ISS and Non-Direct ISS hours is found under "total daily hours" on page 2 of this form. Entering the administrative daily rate will auto-populate a monthly amount.

Client transportation assessment is determined by completing the DDA Client Transportation Assessment Form. This will provide a daily amount paid to the licensed provider for transportation. Entering the daily rate will auto-populate a monthly amount.

Damage Allowance is estimated at up to \$5.70/day. There must be documentation of a history of property destruction/damages to reimburse the maximum amount. Entering the daily rate will auto-populate a monthly amount.

Add any additional relevant comments regarding the information above.

Total Community Inclusion Costs

Community Inclusion funds are to be utilized to allow the client to participate in community activities based upon DDA Policy 6.22

Training and Consultation Costs

1163 Training is the funds that the Department reimburses the licensed provider for staff training requiren These funds are calculated by the number of ISS hours per day per person X rate = \$ amount.

Consultant expenses may be calculated into the daily rate when consultation occurs based on DDA Policy 6.22. These costs are for those professionals that are employees or sub-contractors of the agency.

Staff Costs

Direct/Lead/Program Manager hours per month are determined by completing the residential staff schedu on page 2. Hours will auto-populate to page 1. Standardized reimbursement rates are set by the legislati which the client resides. This amount auto-poulates when county is selected.

The total of all Administrative, Community Inclusion, Training/Consultation Costs and Staffing costs will at a total daily and monthly rate. RM should select appropraite funding source.

Basic Expenses

The basic expenses outlines these costs incurred for rent, food, and utilities. Maximum thresholds are ou for all 3 components in DDA Policy 6.22.

Staff Schedule - Page 2:

Staffed Residential Rate Assessment Instructions

Demographic information will auto-populate by completing page 1 demographics.

Individuals Served at This Site

Enter names of all clients residing in the home. If the client is served through Department of Children, Youth and Families select DCYF after their name. If the client is served by DDA, select DDA after their name.

Direct Service Hours

Enter staff hours identified to work with the individual child from 6am-5am Monday – Sunday. If the child's needs warrant 1:1 staffing, place 1.0 next to the time the staff will be working with the child. If the child will be sharing staff with another client, place .5 next to the time the client will be sharing staff. Totals will auto-populate in the right columns. Daily Direct Service Hours per day and Direct Service Hours for School and Non-school will auto-populate. Hours will be reviewed and approved by VPS Coordinator.

Lead hours must be divided equally among the number of clients supported in the home. The Program hours must be divided among the total number of clients supported by the provider throughout the sub-re

Total Daily Hours will auto-populate. This information is used to compute administrative rate per month located on page 1.

Staff Signatures and Expenses - Page 3:

Demographic information will auto-populate by completing page 1 demographics.
Approval of rate confirmed through signature and date of VPS Resource Manager.
Approval of rate confirmed through signature and date of VPS Coordinator
Approval of rate confirmed through signature and date of VPS Program Manager.