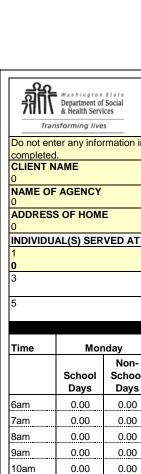
Do not enter any information in filled cells.	Filled cells will auto popul	late once all tabs are completed	COUNTY	REGION
CLIENT NAME	Timod cone tim date popu	P1 CLIENT ID	BIRTHDATE	AGE
				_
NAME OF AGENCY	HOUSE NAME		P1 PROVIDER ID NUMBE	ER
ADDRESS OF HOME	CITY	STATE	ZIP CODE	START DATE
☐ Client entering/exiting program			Effective date	
	ADMINISTRAT	IVE & COMMUNITY INCLUSION	COSTS	•
ADMINISTRATIVE COSTS - DDA POLICY 6.			DAILY RATE	AMOUNT PER MONTI
Administrative rate per month (Policy 6.22 - At	tachment B)			\$0.00
Client transportation assessment amount			\$0.00	\$0.00
Damage allowance (if needed)			\$5.70	\$173.38
TOTAL ADMINISTRATIVE COSTS				\$173.38
	TD 410	WAS A CONSULTATION COSTS		
	TRAIN	ING & CONSULTATION COSTS	LIQUIDI VIDATE	OUDTOTAL
		HOURS PER MONTH	HOURLY RATE	SUBTOTAL \$0.00
CONSULTANT  Mandatory Training (RCW 74.39A): Direct/Lea  Mandatory Training (RCW 74.39A): Program N	d Staff	HOURS PER MONTH 0.00	\$0.00	\$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N	d Staff Manager	HOURS PER MONTH		
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N	d Staff Manager	HOURS PER MONTH 0.00	\$0.00	\$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3	d Staff Manager	HOURS PER MONTH 0.00	\$0.00 \$0.00	\$0.00 \$0.00 <b>\$0.00</b>
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3	d Staff Manager 9A) COSTS	HOURS PER MONTH 0.00	\$0.00 \$0.00	\$0.00 \$0.00 <b>\$0.00</b> \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH 0.00	\$0.00 \$0.00	\$0.00 \$0.00 <b>\$0.00</b> \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program I TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH  0.00  0.00  STAFF COSTS	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program I TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS)	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH  0.00  0.00  STAFF COSTS  HOURS PER MONTH	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School)	d Staff Manager 9A) COSTS COSTS	STAFF COSTS HOURS PER MONTH  0.00  0.00  STAFF COSTS HOURS PER MONTH  0.00	\$0.00 \$0.00 \$0.00 HOURLY RATE \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School)	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH  0.00  0.00  STAFF COSTS  HOURS PER MONTH	\$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School) Direct care staff (Non-School) Lead/Supervisor Hours	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH	\$0.00 \$0.00 \$0.00 HOURLY RATE \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School) Direct care staff (Non-School) Lead/Supervisor Hours Program Manager Hours	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH	\$0.00 \$0.00 \$0.00 \$0.00 HOURLY RATE \$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 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School) Direct care staff (Non-School) Lead/Supervisor Hours Program Manager Hours TOTAL STAFF COSTS	d Staff Manager 9A) COSTS COSTS	HOURS PER MONTH	\$0.00 \$0.00 \$0.00 \$0.00 HOURLY RATE \$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  \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School) Direct care staff (Non-School) Lead/Supervisor Hours Program Manager Hours TOTAL STAFF COSTS  Comments (Specify):	d Staff  Manager  9A) COSTS  COSTS  TS	HOURS PER MONTH	\$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 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Mandatory Training (RCW 74.39A): Direct/Lea Mandatory Training (RCW 74.39A): Program N TOTAL MANDATORY TRAINING (RCW 74.3 Constultant (Please list credentials)  TOTAL OTHER TRAINING & CONSULTING TOTAL TRAINING / CONSULTANT COS  STAFF COSTS (TAXES AND BENEFITS) Direct care staff (School) Direct care staff (Non-School) Lead/Supervisor Hours Program Manager Hours TOTAL STAFF COSTS  Comments (Specify):	d Staff  Manager  9A) COSTS  COSTS  TS	HOURS PER MONTH	\$0.00 \$0.00 \$0.00 \$0.00 HOURLY RATE \$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  \$0.00 \$0.00 \$0.00 \$0.00

TOTAL ADMINISTRATIVE & COMMUNITY INCLUSION,			
TRAINING & CONSULTATION, & STAFFING COSTS		\$11.32	\$344.38
	FUNDING SOURCE (SELECT ONE)	DAILY RATE	MONTHLY RATE
ВА	SIC 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	\$0.00
	FUNDING SOURCE	DAILY RATE	MONTHLY RATE
TOTAL CLIENT RATE		\$11.32	\$344.38
		DAILY RATE	MONTHLY RATE
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 COUNTY REGION 0 DATE OF BIRTH P1 CLIENT ID AGE 1/0/00 HOUSE NAME P1 PROVIDER ID NUMBER CITY STATE ZIP CODE START DATE 0 1/0/00 0 INDIVIDUAL(S) SERVED AT THIS SITE ADMINISTRATION INDIVIDUAL(S) SERVED AT THIS SITE ADMINISTRATION DIRECT SERVICE HOURS

	DIRECT SERVICE HOURS												
Time	Mor	nday	Tues	sday	Wedn	esday	Thur	rsday	Frie	day	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
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.							
Average Monthly   Average							
Yearly Hours	Hours	Hours/Week	Daily Hours				
0	0.00	0.00	0.00				
0	0.00	0.00	0.00				
		Yearly Hours  Average Monthly Hours  0 0.00	Yearly Hours Average Monthly Hours/Week  0 0.00 0.00				

Average Daily Direct Service Hours (120 school days and 245 non-school days)						
NON-DIRECT ISS HOURS						
Lead/Supervisor	0.00					
Program Manager	0.00	0.00	0.00	0.00	0.00	
TOTAL DAILY HOURS	0.00	0.00				
DSHS 10-326 REV 02/2020						

DEVELOPMENTAL DISABILITIES ADMINISTRATION STAFFED RESIDENTIAL RATE PROPOSAL  Transforming lives									
				COUNTY	REGION				
Do not enter any information in filled cells. Fille	d cells will auto popula	ate once all tabs are cor	mpleted	0	0				
Do not enter any information in filled cells. Filled cells will auto populate once all tabs are completed.  CLIENT NAME  P1 CLIENT ID NUMBER  DATE OF BIRTH  1/0/00									
NAME OF AGENCY	NAME OF AGENCY HOUSE NAME								
ADDRESS OF HOME	CITY 0	STATE 0	ZIP CODE 0	START DATE 1/0/00					
		RATE APPROVAL		·	•				
	PRINT NAME		SIGNATU	RE	DATE				
VPS RESOURCE MANAGER									
VPS COORDINATOR									
VPS HQ PROGRAM MANAGER									
	СС ТО В	UDGET MANAGEME	ENT STAFF						
		N	AME		DATE NOTIFIED				
REGIONAL RESOURCE MANAGER ADMINISTRATOR									
HEADQUARTERS RESIDENTIAL SUPERVISOR			-						

\*Notification via SharePoint site

DSHS 10-326 REV 02/2020

Licensed Staffed Residential Adminitrative Rate Table						
ISS Hou	ır Range	January 1, 2020	January 1, 2020	January I,		
	ht laaa	January 1, 2020	January 1, 2020	2020 Admin.		
	but less	Admin. Rate -	Admin. Rate -	Rate - King		
at least	than	Non-MSA County	MSA County	County		
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	4.50 5.00	\$29.74 \$21.50	\$30.33	\$32.51		
	5.00	\$31.59	\$32.20	\$34.50		
5.00	5.50	\$33.16 \$24.50	\$33.80	\$36.24		
5.50	6.00	\$34.50	\$35.17	\$37.69		
6.00	6.50 7.00	\$35.62	\$36.32 \$37.26	\$38.92 \$39.93		
6.50		\$36.55				
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 \$42.97		
10.00	10.50	\$39.35 \$30.53	\$40.12			
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 \$41.27	\$43.97		
13.00 13.50	13.50 14.00	\$40.47 \$40.68	\$41.27 \$41.47	\$44.22 \$44.44		
	14.00	\$40.68 \$40.87	\$41.47 \$41.68			
14.00 14.50	15.00	\$40.87 \$41.05	\$41.68 \$41.86	\$44.64 \$44.84		
15.00 15.50	15.50 16.00	\$41.36 \$41.60	\$42.17 \$42.41	\$45.17 \$45.46		
15.50	16.00 16.50	\$41.60	\$42.41 \$42.60	\$45.46 \$45.74		
16.00	16.50	\$41.86 \$42.27	\$42.69 \$42.10			
16.50 17.00	17.00 17.50	\$42.27 \$42.91	\$43.10 \$43.75	\$46.19 \$46.88		
17.50			\$44.40			
	18.00 18.50	\$43.55 \$44.10		\$47.58 \$48.28		
18.00	18.50	\$44.19	\$45.04 \$45.72	\$48.28		
18.50	19.00	\$44.83 \$45.54	\$45.72 \$46.42	\$49.01 \$40.75		
19.00	19.50	\$45.54 \$46.26	\$46.42 \$47.17	\$49.75 \$50.54		
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	<b>25</b> .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 schedulon page 2. Hours will auto-populate to page 1. Standardized reimbursement rates are set by the legislative 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 appropriate funding source.

#### **Basic Expenses**

The basic expenses outlines these costs incurred for rent, food, and utilities. Maximum thresholds are outline 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, Yo 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 amonth 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.