# **Regional Center Services Rates Overview**

# **Background**

Regional centers coordinate the provision of more than 150 separate services to support the needs of people with developmental disabilities. The types of services include:

- <u>Services that support the choice of living arrangement</u> Depending on the individual's needs this could range from intermittent support a few hours a week to 24 hour support in a person's own home or a licensed community care facility.
- <u>Services that support community participation</u> These services include transportation, employment and community integration.
- <u>Services that support skill development</u> These services include assistance with activities of daily living and behavior management.
- <u>Health related services</u> These services include specialized therapeutic services and health services that may not be available through health insurance coverage.
- **Family support services** These services include respite and trainings.

These very broad categories do not represent an exhaustive list of services and the services may not always be exclusive to a particular category. For instance, some specific services may provide support for a person to live in their own home and that support also includes assistance with activities of daily living.

The document *"Rate Methodologies and Service Codes,"* contains a listing of all the distinct services regional centers may provide. The provider qualifications for these services are outlined in State regulations. Through the vendorization process, regional centers are responsible for verifying that a provider meets all of the requirements and standards specified in regulations. Applicants who meet the specified requirements and standards are assigned a service code which identifies the type of service they have been approved to provide.

## How are service rates set?

The methodology to establish rates for services is based on the type of service vendors have been approved to provide. Below is an explanation of the various rate setting methodologies and the applicable services for each methodology.

## • Department of Developmental Services (DDS) set rates

Some service rates are set by DDS either through cost statements, rate schedules, by statute or the rate is set in regulation.

Rates set by cost statement (See Attachment A for rates): Providers of the services below have individualized rates set by DDS within an upper and lowerlimit. As noted in the "Rates Actions History" document, rates for these services have been frozen, with limited exceptions, since 2003. As a result, all new providers receive the "temporary payment rate" and adjustments to permanent rates are only allowed in limited circumstances (e.g. changes in law, to protect health and safety, etc.) This methodology applies to services commonly called "community-based day programs," respite agencies and work activity programs.

Service code	Service Name
505	Activity Center
510	Adult Development Center
515	Behavior Management Program
520	Independent Living Program
525	Social Recreation Program
805	Infant Development Program
862	In-Home Respite Services Agency
954	Work Activity Program (see Attachment C for rates)

<u>Rates set by the Alternative Residential Model (ARM) (See Attachment B for</u> <u>rates):</u> Providers of many community care facilities have rates established using the attached schedule based on the amount of support/service needed by the residents.

Service code	Service Name
905	Residential Facility Serving Adults-Owner Operated
910	Residential Facility Serving Children - Owner Operated
915	Residential Facility Serving Adults - Staff Operated
920	Residential Facility Serving Children-Staff Operated

<u>Rates set in law (See Attachment C for rates)</u>: The hourly rates for all supported employment providers are established in law.

Service code	Service Name
950	Supported Employment-Group
952	Supported Employment-Individual

Rates set in regulation: Rates for the services below are set in State regulation

- **864** In-Home Respite Worker \$11.88 per hour
- **420** Respite Service-Family Member \$11.88 per hour
- 465 Participant-Directed Respite Service \$11.88 per hour
- 475 Community-Based Training Service \$13.47 per hour.
- **490** Financial Management Services (Fiscal Employer Agent) a maximum of \$45.00 per consumer per month for one Participant-

Directed Service; or a maximum of \$70.00 per consumer per month for two or three Participant-Directed Services; or a maximum of \$95.00 per consumer per month for four or more Participant-Directed Services.

491 - Financial Management Services - Co-Employer – \$95.00 per month

## • Rates established by Medi-Cal for the same service

If a service is also provided under the Medi-Cal program, then regional center may provider no more than the rate established by Medi-Cal for the same service. Listed below are a few of the regional center services with rates that also have rates established by Medi-Cal (for example, the hourly reimbursement rate for a Registered Nurse is \$31.94 per hour.)

Service code	Service Name
702	Adult Day Health Center
706	Audiology
707	Speech Pathology
715	Dentistry
725	Durable Medical Equipment Dealer
742	Licensed Vocational Nurse
744	Registered Nurse
765	Pharmaceutical Services
772	Physical Therapy
773	Occupational Therapy
780	Psychiatrist
856	Home Health Aide
930	Intermediate Care Facility (ICF/DD-H)
935	Intermediate Care Facility (ICF/DD-N)
940	Nursing Facility

## • Usual and Customary Rates

Many services funded by regional centers are from providers whose business includes serving people other than those with developmental disabilities. In instances where at least 30% of a provider's customers are not regional center consumers or their families, then the rate the regional center may pay for the service is the rate the provider regularly charges the general public. These services include, but are not limited to, the following:

Service code	Service Name	
008	Sports Club	
042	Repair Services	
051	Personal Emergency Response	
627	Diaper Service	
630	Driver Trainer	

642	Interpreter
643	Translator
691	Art Therapist
694	Recreational Therapist
720	Dietary Services
851	Child Day Care
895	Transportation-Public/Rental Car Agency/Taxi

## • Rates established by the California Department of Social Services

Out-of-home respite services (service code 868) that are provided in facilities with rates established by the Department of Social Services will have their respite rate set based on the rate set by the Department of Social Services.

### • Rates set by regional center mileage reimbursement

The following transportation services have rates that can be set based on what the regional center reimburses its own employees for travel.

Service code	Service Name
425	Transportation-Family Member
470	Participant-Directed Transportation Family Member
890	Transportation-Auto Driver

• Rates set through negotiation between the regional center and the provider

If none of the other methods for establishing a service rate apply, then the service rate is determined through negotiation between the regional center and the provider. Beginning in July 2008, an "upper limit" was established for new providers of services with negotiated rates. This limit was set as the median of all rates in place at that time for each service. See attachment D for median rates. Services with rates set through negotiation include, but are not limited to, the following:

Service code	Service Name
055	Community Integration Training Program
113	Specialized Residential Facility
117	Specialized Therapeutic Services
605	Adaptive Skills Trainer
612	Behavior Analyst
613	Associate Behavior Analyst
620	Behavior Management Consultant
691	Art Therapist
875	Transportation Company
896	Supported Living Services

In some cases, multiple methodologies may be applicable for some services, depending on the type of service and the provider's specific situation. In these cases, the determination of which rate setting method is appropriate is based on;

- 1. whether or not the provider already has an established rate for the service (e.g. by Medi-Cal or a usual and customary rate,) or
- 2. if the service rates are established by DDS (e.g. community-based day programs or the service rate is set in statute or regulation.)

If neither one of these are applicable, then the rate is established through negotiation between the regional center and provider, in which case the maximum rate can be no more the regional center median or the statewide median, whichever is lower.

## COMMUNITY-BASED DAY PROGRAMS AND IN-HOME RESPITE AGENCIES

# ALLOWABLE RANGE OF RATES and TEMPORARY PAYMENT RATES

Service Category	Staff Ratio	Lower Limit	Upper Limit	Temporary Payment Rate	
	Daily Ra	ates		•	
Activity Center (505)	1:8	\$26.83	\$46.91	\$36.39	
	1:7	28.52	46.20	36.54	
	1:6	32.68	56.76	45.09	
Adult Dev. Center (510)	1:4	36.14	66.94	53.86	
	1:3	45.43	69.22	58.87	
		·	·		
Behavior Management (515)	1:3	49.97	83.49	72.42	
	Hourly R	Rates		•	
Independent Living (520)	1:3	10.64	16.54	14.31	
	1:2	17.45	22.68	20.66	
	1:1	22.42	43.00	31.62	
		·	·		
Social Recreation (525)	1:10	13.12	24.74	16.36	
	T				
Infant Development (805)	1:3	28.66	48.34	38.72	
	1:2	42.58	73.65	59.17	
	1:1	60.07	108.05	78.29	
In-Home Respite (862) (eff. 7/1/14)	1:1	15.92	22.44	19.29	
In-Home Respite (862) (eff. 1/1/15)	1:1	16.85	23.75	20.41	
	1	1			

## FISCAL YEAR 2014-15

# DEPARTMENT OF DEVELOPMENTAL SERVICES COMMUNITY CARE FACILITY RATES EFFECTIVE JANUARY 1, 2014 AND EFFECTIVE JULY 1, 2014

Service Level	Monthly Payment Rate Per Consumer Effective <b>1/01/2014</b> *	Monthly Payment Rate Per Consumer Effective <b>7/01/2014</b> *	
1	\$1003	\$1003	
2-Owner	\$1,910	\$2,035	
2-Staff	\$2,146	\$2,271	
3-Owner	\$2,194	\$2,355	
3-Staff	\$2,502	\$2,663	
4A	\$2,941	\$3,108	
4B	\$3,134	\$3,316	
4C	\$3,326	\$3,523	
4D	\$3,567	\$3,779	
4E	\$3,825	\$4,047	
4F	\$4,082	\$4,323	
4G	\$4,386	\$4,647	
4H	\$4,707	\$4,991	
41	\$5,159	\$5,477	

The Personal and Incidental (P&I) expenses effective with the January 1, 2014 SSI/SSP payment standard increased from \$129.00 to \$130.00.

\*Includes the SSI/SSP pass through effective January 1, 2014.

# Work Activity Program (WAP) Service Code 954 Upper Limits for WAP Effective 7/1/2006

Small vendors:	0 to 30 consumers \$58.86 per consumer per day			
Medium vendors:	31 to 100 consumers	\$42.30 per consumer per day		
Large vendors: 101 or more consumers		\$31.50 per consumer per day		
Statewide average:	Temporary Rate	\$35.29 per consumer per day		

# Supported Employment Programs (SEP) Service Codes 950 & 952 Effective 10/1/2008

The hourly rate shall be \$30.82 as per Welfare and Institutions Code 4860 (a) (1).

Revised 11/13/2008

sc	Unit	Modality	2011 SWM Rates	2011 SWM Rates w/ 4.25% Payment Reduction
017		am - Eval and Intervention		
	Hourly	Individual	\$ 41.02	,
	Monthly	Individual	\$ 2,789.69	
	Mileage		\$ 0.32	\$ 0.31
020		n / Set-up expenses	<b>A</b> 0.004.40	¢ 0.000.00
004		Individual-Community Placement Plan	\$ 3,094.43	\$ 2,962.92
021		Indification & Adaptation THERE ARE NO STATEWIDE MEDIAN RATES FOR 1	HIS SERVICE	
025	Tutor	Tutor	PENDING	PENDING
028	Socializat	tion training Program	PENDING	PENDING
020		Individual	\$ 25.74	\$ 24.65
		Hourly - INDIVIDUAL ASSESSMENT	\$ 25.74 \$ 42.50	
	Hourly		\$ 42.30 \$ 27.02	
	Daily	Individual	\$ 100.78	
		Asessment - Session	\$ 140.00	
		Assessment - Bourly (up to 10 sessions) 90 minutes	\$ 140.00 \$ 77.12	
		Assessment/hour up to 2 hours	\$ 75.00	
		Per incident-Evaluation	\$ 125.94	
034		anagement	φ 120.04	φ 120.00
004		Individual	\$ 25.00	\$ 23.94
	,	Individual	\$ 38.64	
048		rent Support Intervention Training	φ 30.04	φ 07.00
0.0	Hourly		\$ 53.26	\$ 51.00
	Hourly	Consultant	\$ 82.94	
	Hourly	Hourly Assessment	\$ 94.14	
	Hourly	Individual - BCBA	\$ 93.64	
	Hourly	Supervision 1 hour	\$ 93.80	
	Hourly	Behavioral intervention	\$ 40.20	\$ 38.50
	Hourly	Hourly Program Manager	\$ 119.79	+
	Monthly	Individual	\$ 1,874.60	
	Mileage		\$ 0.34	\$ 0.33
	Other	Session-Out of Office	\$ 9.55	\$ 9.14
	Other	Assessment Up to 16 hrs	\$ 1,200.00	\$ 1,149.00
		Blended/RT/Tutor Consultant	PENDING	PENDING
		Individual Regular - Tutor	PENDING	PENDING
		Individual Regular - Lead Tutor	PENDING	PENDING
		Hourly Lead Tutor	PENDING	PENDING
		Hourly Behaviior intervention Technician	PENDING	PENDING
		Hourly tutor	PENDING	PENDING
		Hourly blended rt/tutor-consult	PENDING	PENDING
		Hourly Behavioral Aide	PENDING	PENDING
051	Personal	Emergency Response System		
	,	Individual	\$ 31.91	\$ 30.55
055		ity Integration Training Program	•	
		Individual	\$ 23.25	
<b>├</b> ───┤	Hourly	Evaluation	\$ 58.59	
<b>├</b> ───┤	Hourly	Group	\$ 14.44	
	Hourly	1:2 staffing	\$ 13.82	
<b>├</b> ───┤	Hourly	1:3 staffing	\$ 12.92 (* 14.00	
	Hourly	1:4 or 1:6 staffing	\$ 14.02	
<b>├</b> ───┤	Daily	Individual	\$ 75.46	
	Daily		\$ 67.14 \$ 64.52	
	Daily		\$ 64.52	
	Daily		\$ 130.01 \$ 90.15	
	Daily		\$ 80.15 \$ 81.04	
	Daily			
1	Monthly	Individual	\$ 290.03	\$ 277.70
	Mileage		\$ 0.33	\$ 0.32

	SC	Unit	Modality	2011 SWM Rates		2011 SWM Rates w/ 4.25% Payment Reduction
	056		plinary Assessment Svc			
			Individual	\$ 66.01		63.20
		Hourly	Per case, per incident	\$ 143.32		137.23
		Hourly	Behavioral intervention prevention program Assessment	\$ 75.00 \$ 97.50	\$	71.81
		Hourly Hourly	Autism Interdisciplinary Assessment Individual-Community Placement Plan	\$ 97.50 \$ 110.01	\$ \$	93.36 105.33
-		Monthly		\$ 500.00	э \$	478.75
-		Mileage	Per Mile	\$ 0.34	φ \$	0.33
		Other	Per incident feeding assessment	\$ 607.00	\$	581.20
		Other	Per incident nutritional assessments	\$ 200.00	\$	191.50
		Other	Session Feeding Eval/ind	\$ 332.32	\$	318.20
		Other	Assessment (Flat rate)	\$ 267.59	\$	256.22
				\$ 712.50	\$	682.22
				\$ 120.00	\$	114.90
	062		Assistance	•	Ť	
			Individual	\$ 14.10	\$	13.51
		Hourly	Group	\$ 10.96	\$	10.49
		Hourly	Group-sibling (two consumers)	\$ 10.73		10.27
		Hourly	Group-sibling (three consumes)	\$ 16.30	\$	15.61
		Daily	Individual	\$ 47.00	\$	45.00
		Weekly	Individual	\$ 250.00	\$	239.38
		Monthly	Individual	\$ 2,500.00	\$	2,393.75
		Mileage		\$ 0.32	\$	0.31
		Other	Per incident evaluation	\$ 412.00	\$	394.49
	063		ity Activities Support Services			
		,	Individual	\$ 21.10		20.20
			Evaluation	\$ 31.81	\$	30.46
			Group-1:02:00 AM	\$ 19.04		18.24
				\$ 102.30	\$	97.95
		Daily	Group-1:2 service	\$ 101.75		97.43
		Monthly	Individual	\$ 750.01	\$	718.13
		Mileage		\$ 0.34		0.33
	070		Session Community Activities Support Services	\$ 59.64	\$	57.11
	072		tor of Volunteers THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SE	RVICE		
	073		pordinated Supported Living Program	¢ 15.09	¢	14.44
			Individual	\$ 15.08 \$ 4,102.08		3,927.74
	077		Coordinated Home Based Intervention Program for Autistic Children	φ 4,102.00	Ф	3,921.14
	0//		Individual	\$ 13.00	¢	12.45
			Individual	\$ 465.25		445.48
	084		Nympics THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SERVICE	ψ 405.25	ψ	440.40
			ervention Facility/Bed			
			Individual	\$ 800.00	\$	766.00
			Individual-Community Placement Plan	\$ 505.16		483.69
			Individual	\$ 4,841.50		4,635.74
	091		Mobile/Day Program	, .,	Ť	.,
			Individual	\$ 25.25	\$	24.18
			Individual	\$ 67.05		64.20
	093		oord Personal Assist Svc			
			Individual	\$ 12.00	\$	11.49
			Individual	\$ 96.09		92.01
			Individual	\$ 1,071.51	\$	1,025.97
	094		Arts Program			
			Individual	\$ 36.05		34.52
			Individual	\$ 66.82	\$	63.98
			Individual	\$ 154.50	\$	147.93
			Session evaluation unspecified	\$ 206.01	\$	197.25
	096	Geriatric				
			Individual	\$ 3,000.00	\$	2,872.50

sc	Unit	Modality	20	11 SWM Rates		2011 SWM Rates w/ 4.25% Payment Reduction
101						
		Individual	\$	57.50		55.06
	Monthly	Individual	\$	500.00	\$	478.75
102	Individua	Resident Housing Coordinators Or Family Training		PENDING		PENDING
102		Individual	\$	40.21	\$	38.50
		Autism Services	\$	77.50	\$	74.21
		AT Assessment	\$	81.89		78.41
	Hourly	Group	\$	25.02		23.96
	Daily	Individual	\$	65.00	\$	62.24
	Daily	Group	\$	437.92	\$	419.30
	Weekly	Individual	\$	110.01	\$	105.33
	Monthly	Individual	\$	805.00	\$	770.79
	Mileage		\$	0.33	\$	0.32
	Other		\$	356.66		341.50
		Assessment	\$	250.01	\$	239.38
402		Session ed Health, Treatment and Training Services	\$	72.50	\$	69.42
103		Individual	\$	36.00	\$	34.47
	,	Individual	э \$	240.00		229.80
		Individual	\$	1,822.50		1,745.05
	Monthly		\$	5,323.00		5,096.77
	Mileage		\$			0.46
	Other	Dental treatment-Hygiene	\$	450.01	\$	430.88
104	Environm	ental Accessibility THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS S			-	
106		ed Recreational Therapy				
		Individual	\$	40.00	\$	38.30
	Hourly	Evaluation	\$	61.80		59.17
	Hourly	Group	\$		\$	64.10
	,	Individual	\$	26.11	\$	25.00
	,	Individual	\$			143.63
		Individual	\$	104.78	\$	100.33
407		Session	\$	30.00	\$	28.73
107		nal Services Individual	\$	52.55	\$	50.32
	,	Individual	э \$	59.00		56.49
108		Support Services	Ψ	33.00	Ψ	50.43
100		Individual	\$	37.00	\$	35.43
	,	Group	\$	32.50		31.12
109		ental Residential	Ť			-
		Individual	\$	12.00	\$	11.49
	,	2:1 ratio	\$	25.92		24.82
		GROUP (1:3)	\$	13.67		13.09
		Individual	\$	71.51		68.47
L		Individual	\$	1,899.50	\$	1,818.77
110		ental Day Services Program Support	<b>^</b>	10.55	<u> </u>	11.15
		Individual	\$	12.00		11.49
		Individual - Regular 2:1	\$ ¢	43.08 21.86		41.25
		Individual Group 1:3	\$ \$	48.84		20.93 46.77
		Individual	ъ \$	2,053.16		1,965.91
111		ental Program Support (Other)	Ψ	2,033.10	ψ	1,303.91
		Individual	\$	12.17	\$	11.66
		Group	\$	8.01		7.67
		Individual	\$	16.54		15.84
		Individual	\$	1,000.00		957.50
112		ication Aides				
	Hourly	Individual	\$	52.50		50.27
	Monthly	Individual	\$	7,175.61	\$	6,870.65
	Mileage		\$	0.49		0.47

SC	Unit	Modality	20	11 SWM Rates		2011 SWM Rates w/ 4.25% Payment Reduction
113		nsed Residential Facility-Hab				
		Individual	\$	305.07		292.10
		Group-Regular 3-Bed	\$	543.78		520.67
		Individual 4-Bed Facility	\$	430.01		411.73
		Individual 5-Bed Facility	\$	834.33		798.88
		Individual 6-Bed Facility	\$	386.70		370.27
	Daily		\$	401.66		384.59
		Individual 4-Bed Facility	\$	487.98	\$	467.24
		Individual	\$	7,870.38		7,535.88
	Monthly	3 beds	\$	9,221.26		8,829.36
	Monthly		\$	9,024.32		8,640.79
ł	Monthly	5-bed	\$	6,802.53	\$	6,513.43
	Monthly		\$	7,542.65		7,222.09
ł	Monthly		\$	2,544.66		2,436.51
		Individual-Community Placement Plan	\$	8,615.26		8,249.12
ł		3-Bed Facility 4-Bed Facility	\$ \$	9,775.99 8,103.07	\$ \$	9,360.51 7,758.69
	Monthly		ծ \$	21,164.61	ֆ Տ	20,265.11
	Monthly	Group-Community Placement Plan	φ	21,104.01	φ	20,205.11
ł	Monthly		\$	18,341.15	\$	17,561.66
ł		CPP-4-BED	ծ \$	17,682.75	ֆ \$	16,931.24
114		sidential Facility (Health)	φ	17,002.75	φ	10,931.24
114		Individual	\$	235.00	\$	225.01
		Individual-Community Placement Plan	\$	388.35		371.85
		Individual	\$	3,932.73	\$	3,765.59
115		erapeutic Svcs (age3-20)	Ψ	0,002.10	Ψ	0,700.00
		Individual	\$	88.77	\$	85.00
		Individual-Community Placement Plan	\$	128.54		123.08
		Individual	\$	100.00		95.75
	,	Variable	\$	59.24		56.72
116		rt SpecI Therapeutic Svcs				
		Individual	\$	90.01	\$	86.18
	Hourly	Individual Regular - Speech, PT & OT	\$	71.07	\$	68.05
		Assessment	\$	100.00	\$	95.75
	Hourly	Occupational therapy	\$	90.50	\$	86.66
	Hourly	Physical Therapy	\$	90.01	\$	86.18
	Hourly	Speech Therapy	\$	90.01	\$	86.18
	Hourly	HRLY-IND. BILINGUAL SPEECH	\$	103.75	\$	99.34
	Hourly	PT in home including mileage	\$	100.79		96.51
	,	1:2 ratio	\$	62.50		59.85
	Hourly	HRLY-GRP-SPEECH(1:3)	\$	60.00		57.45
	Hourly	OT group	\$	48.75		46.68
]	Monthly	Individual	\$	225.00		215.44
	Mileage		\$	0.50		0.48
		ASSESSMENT (FLAT RATE)-SPEECH	\$	280.00		268.10
		ASSESSMENT (FLAT RATE)-PT	\$	285.00	\$	272.89
		Per incident	\$	237.64		227.55
		All: OT evaluation - per item	\$	283.80		271.74
		Per ncident Speech evaluation individ	\$	273.83		262.19
		Per incident OT individual	\$	210.01	\$	201.08
		Per incident OT/PT eval + mileage	\$	312.50	\$	299.22
117		ed Therapeutic Services	•	400.05	¢	404 70
ł			\$	106.25		101.73
ł		Individual	\$ ¢	169.84 205.83		162.62
	wontny	Individual	\$	205.83	Φ	197.08
405	Day Caro	-Family Member				

SC	Unit	Modality	20	011 SWM Rates		2011 SWM Rates w/ 4.25% Payment Reduction
		Modality Skills Trainer	20		-	Reduction
005		Individual	\$	41.72	¢	39.95
	Hourly		э \$	1.73		1.66
		Assessment	э \$	52.40		50.17
	Hourly		\$	15.82	э \$	15.15
	Hourly		\$	13.82	\$	13.51
	Hourly		\$	47.59	φ \$	45.57
	Hourly		\$	64.25	φ \$	61.52
	Hourly		\$	36.29	\$	34.74
	Hourly		φ \$	25.21	φ \$	24.14
	Hourly		\$	73.81	φ \$	70.68
	Daily		ф \$	101.02	\$	96.73
	Monthly	Individual	φ \$	1,592.09	φ \$	1,524.43
	Mileage		\$	0.34	\$	0.33
	Other	Session 1 1/2 hours	φ \$		φ \$	63.61
		Assessment/Evaluation	э \$	291.63		279.24
	Other		э \$	9.77	э \$	9.35
	Other	Session	э \$	61.05	э \$	58.46
	Other	Direct service by tutor	φ	PENDING	φ	PENDING
		Hourly-Paraprofessional/Behavior aide		PENDING		PENDING
		Hourly-Behavioral Aide		PENDING		PENDING
		HourlyBehavioral Aide with \$.50 share of cost		PENDING		PENDING
		Hourly-Behavioral Aide Share of cost \$1.00		PENDING		PENDING
		Hourly-Behavioral Aide Share of cost \$2.00		PENDING		PENDING
		Hourly-Behavioral Aide Share of cost \$2.00		PENDING		PENDING
612	Behavior			T ENDING		LINDING
•		Individual	\$	65.00	\$	62.24
		Supervision	\$	65.00	\$	62.24
	Hourly		\$	75.00		71.81
	Hourly	Consultant	\$	54.75	\$	52.43
	Hourly	Group sibling 1:2	\$	40.94		39.20
	Mileage		\$	0.32	\$	0.31
	Other	Out of Office visit	\$	9.49	\$	9.09
		Hourly-tutor		PENDING		PENDING
		Assistant behavior analyst; individual		PENDING		PENDING
		tutor		PENDING		PENDING
613	Associate	e Behavior Analyst				
	Hourly	Individual	\$	36.04	\$	34.51
615	Behavior	Management Assistant				
		Individual	\$	35.00	\$	33.51
	Hourly		\$	9.77	\$	9.35
	Mileage		\$	0.53		0.51
620	Behavior	Management Consultant				
	Hourly	Individual	\$	51.72	\$	49.52
	Hourly	Assessment / Evaluation	\$	50.87		48.71
		Behavior Respite	\$	29.43		28.18
				51.71	\$	49.52
		Supervision	\$			
	Hourly Hourly	Per additional Family Member	\$	1.68	\$	1.61
	Hourly	Per additional Family Member	\$ \$	1.68 962.06	\$	921.17
	Hourly Hourly Monthly Mileage	Per additional Family Member Individual	\$ \$ \$	1.68 962.06 0.35	\$	921.17 0.34
	Hourly Hourly Monthly Mileage Mileage	Per additional Family Member Individual V,Per incident Out of office	\$\$\$	1.68 962.06 0.35 9.49	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	921.17 0.34 9.09
	Hourly Hourly Monthly Mileage	Per additional Family Member Individual V,Per incident Out of office Per incident evaluation	\$ \$ \$	1.68 962.06 0.35 9.49 300.98	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	921.17 0.34 9.09 288.19
	Hourly Hourly Monthly Mileage Mileage	Per additional Family Member Individual V,Per incident Out of office	\$\$\$	1.68 962.06 0.35 9.49	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	921.17 0.34 9.09

SC	Unit	Modality	2011 SWM Rates	2011 SWM Rates w/ 4.25% Payment Reduction
625		ng Services		
		Individual	\$ 56.28	
		Assessment/Evaluation	\$ 67.50	
	Hourly	Group	\$ 38.75	
	Monthly	Individual	\$ 67.67	\$ 64.80
	Mileage	Der esseien individual	\$ 0.38 \$ 55.09	\$ 0.37 \$ 52.75
		Per session individual Per incident evaluation		
		Per incident evaluation Per incident report writing	\$ 313.32 \$ 212.51	
		Session - Group Counseling	\$ 212.51 \$ 50.12	
		Session	\$ <u>50.12</u> \$ 107.71	\$ 47.99 \$ 103.14
627	Diaper Se		φ 107.71	φ 103.14
027		Per item	\$ 34.14	\$ 32.69
630	Driver Tra		ψ 34.14	ψ 52.03
000		Individual	\$ 69.23	\$ 66.29
		2 hour of drving instruction	\$ 148.39	\$ 142.09
635		ent Living Specialist	φ 140.00	φ 142.00
000		Individual	\$ 21.40	\$ 20.49
	,	Evaluation	\$ 26.63	
		Individual-Community Placement Plan	\$ 25.67	
	Monthly		\$ 1,854.64	
	Mileage		\$ 0.21	\$ 0.20
642		r	¢ 0121	ф 0. <u></u> _0
		Individual	\$ 37.50	\$ 35.91
643	Translato		• • • • • •	•
		Individual	\$ 27.91	\$ 26.73
	Mileage		\$ 0.32	\$ 0.31
		Per incident Translation - 2 hours max	\$ 66.80	
645		raining Services Agency		
	Hourly	Individual	\$ 25.28	\$ 24.21
650	Mobility T	raining Svcs Specialist		
		Individual	\$ 19.75	\$ 18.91
670		nental Specialist THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SE	RVICE	
672		nal Psychologist		
		Individual	\$ 50.44	
	Mileage		\$ 0.45	
		Session Evaluation	\$ 400.00	\$ 383.00
674		THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SERVICE		
676				
			\$ 12.60	\$ 12.07
678		of Special Education THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS	SERVICE	
680	Tutor	Tutor		
691	Art Thore	pist THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SERVICE	PENDING	PENDING
691		erapist THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SERVICE		
033		Individual	\$ 52.23	\$ 50.01
		Per incident Evaluation	\$ 52.23 \$ 144.01	
		Session Individual ongoing 1:1	\$ 46.32	
694		nal Therapist	÷ +0.02	тт.00 Ф.
00-1		Individual	\$ 26.01	\$ 24.90
720			- 20.01	- 21.00
		Individual	\$ 42.50	\$ 40.69
		Evaluation	\$ 111.38	
		Individual	\$ 704.46	
	Mileage		\$ 0.47	
		Per incident Nutritional evaluation	\$ 200.00	
		Session Feeding ongoing individual	\$ 120.00	
		ide or Assistant		
743	NURSE'S A			

SC	Unit	Modality	2011 SWM Rates	2011 SWM Rates w/ 4.25% Payment Reduction
790		ic Technician		
		Individual	\$ 23.68	\$ 22.68
800		ounselor THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SERVICE		
850	Camp Ser			
	,	Individual	\$ 13.71	\$ 13.13
	Daily		\$ 111.25	-
	Daily		\$ 121.00	-
		Individual	\$ 409.39	
054		Session individual camp	\$ 377.32	\$ 361.29
851	Child Day			
955		Child Day Care	PENDING	PENDING
855	Adult Day	Individual	\$ 8.50	¢ 0.14
				-
	,	Individual		-
050			\$ 1,984.33	\$ 1,900.00
858 860		ter THERE ARE NO STATEWIDE MEDIAN RATES FOR THIS SERVICE		
860		Individual	\$ 16.70	\$ 15.99
			<b>†</b>	+
		Group-2-client Rate Group-3-client Rate	\$ 10.90 \$ 10.01	-
	,		\$ 10.01	
	,	Individual	\$ 155.00	
000	,	Individual	\$ 2,819.48	\$ 2,699.65
869	Respite F	Individual	¢ 404.00	¢ 454.07
075			\$ 161.22	\$ 154.37
875		ation Companies	¢ 00.00	\$ 19.74
			\$ 20.62	
	Hourly		\$ 12.65 \$ 25.75	
	Hourly	Group Individual	\$ 35.75 \$ 22.23	
	Daily Daily	Bus Aide	\$ 22.23 \$ 80.15	
	Daily		\$ 80.15 \$ 21.10	-
	Daily	Non-ambulatory One Way Trip	\$ 13.22	-
	,	Individual	\$ 270.33	
	Monthly Mileage	Inuividual	\$ 270.33 \$ 1.79	
	Mileage	Group - Per Mile	\$ 1.93	-
		Trip One-Way	\$ 10.54	
		Trip -TP	\$ 10.34 \$ 11.87	
880		ation-Additional Component	φ 11.07	ψ 11.37
000		Individual	\$ 20.07	\$ 19.22
	Hourly		\$ 20.07	
		Group	\$ 47.39	
	Daily	Individual	\$ 47.39 \$ 12.38	
	Daily	Wheelchair	\$ 22.93	
	Daily		\$ 3.09	
	Daily		\$ 6.55	
	Daily	SRS-1-5 miles 1-way	\$ 2.81	
	Monthly	Individual	\$ 222.01	
	Monthly	Non-ambulatory supplement	\$ 61.81	
	Mileage		\$ 1.40	
		Gas stipend per mile	\$ 0.11	
		Trip- One Way	\$ 5.66	
		Trip-Round Trip	\$ 10.92	
		Route Miles - Regular	\$ 1.80	
882		ration-Assistant	ψ 1.00	ψ 1.72
002	Hourly		\$ 9.49	\$ 9.09
	Hourly	Group	\$ 10.08	

sc	Unit	Modality	2011 SWM Rates	2011 SWM Rates w/ 4.25% Payment Reduction
883	Transport	ation Broker		
	Hourly	Individual	\$ 36.04	\$ 34.51
	Daily	Individual	\$ 22.81	\$ 21.84
	Monthly	Individual	\$ 351.13	\$ 336.21
	Monthly	0-5 miles	\$ 292.69	\$ 280.25
	Monthly	6-10 miles	\$ 352.96	\$ 337.96
	Monthly	11-15 miles	\$ 414.83	\$ 397.20
	Monthly	16-20 miles	\$ 536.96	\$ 514.14
	Monthly	21+ miles	\$ 627.37	\$ 600.71
894	Supporte	d Living Service Vendor Administration		
	Monthly	Individual	\$ 779.16	\$ 746.05
896	Supporte	d Living Service		
	Hourly	Individual	\$ 24.29	\$ 23.26
	Hourly	Evaluation/Assessment	\$ 31.16	\$ 29.84
	Hourly	Direct Support	\$ 17.06	\$ 16.34
	Hourly	Training & Habilitation	\$ 25.34	\$ 24.26
	Hourly	On call, on site, night staff	\$ 11.60	\$ 11.11
	Hourly	Awake evening/overnight	\$ 14.87	\$ 14.24
	Hourly	HD - 1:2 staffing	\$ 10.03	\$ 9.60
	Hourly	HD - 1:3 staffing	\$ 6.73	\$ 6.44
	Hourly	Individual-Community Placement Plan	\$ 28.40	\$ 27.20
	Hourly	On call, on site, night staff	\$ 12.00	\$ 11.49
	Hourly	Group	\$ 20.72	\$ 19.84
	Daily	Individual	\$ 405.80	\$ 388.56
	Monthly	Individual	\$ 4,425.32	\$ 4,237.24
	Monthly	Emergency assistance	\$ 24.21	\$ 23.18
	Monthly	Assessment	\$ 479.81	\$ 459.42
	Monthly	Moving and Planning	\$ 540.75	\$ 517.77
	Mileage		\$ 0.32	\$ 0.31