

## **SERVICE DETAIL COLLECTION FORMS**

Because the rate study contemplated changes in service requirements and unit types for some services, it is necessary to gather information about existing vendorization to identify the appropriate rate model to be used as the benchmark for the calculated rate increase.

The form includes a record for each vendorization and subcode. Where feasible, fields have been prepopulated although certain prepopulated fields can be revised as needed (for example, if a subcode has been assumed to be an hourly rate, but is actually a daily rate, the Regional Center or vendor should make the appropriate update).

### ***All Service Codes***

*Column A: Service Code* – This field lists the service code and cannot be revised.

*Column B: Regional Center* – This field lists the Regional Center and cannot be revised.

*Columns C and D: Vendor ID and Vendor Name* – These fields list the vendor and cannot be revised.

*Column E: Subcode* – This pre-populated information is obtained from the DDS Rates File and cannot be revised when populated.

*Column F: Rate* – This pre-populated information is obtained from DDS Rates file and cannot be revised.

**GROUP 1 SERVICE CODES (DISTRIBUTED 11/15/21)**

***Service Code 025 – Tutor Services***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

*Column J: % of Hours for Adults with Post-Secondary - Staff with Bachelor's* – Report percent of service hours delivered to adults who are in post-secondary education and delivered by staff with at least a bachelor's degree in the field in which they are tutoring.

*Column K: % of Hours for Adults with Post-Secondary - Staff with Non-Bachelor's* – Report percent of service hours delivered to adults who are in post-secondary education and delivered by staff without a bachelor's degree in the field which they are tutoring.

*Column L: % of Hours for Other than Adults with Post-Secondary - Staff with Bachelor's* – Report percent of service hours delivered to adults that are not in post-secondary education or children and delivered by staff with at least a bachelor's degree.

*Column M: % of Hours for Other than Adults with Post-Secondary - Staff with Non-Bachelor's* – Report percent of service hours delivered to adults that are not in post-secondary education or children and delivered by staff with a degree lower than Bachelor's.

***Service Code 062 – Personal Assistance***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 073 - Parent Coordinator Supported Living Program***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 091 - In-Home/Mobile Day Program***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 093 - Parent-Coordinated Personal Assist Service***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 109 – Program Support Group-Residential***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

*Column J: Staff Qualification* – Use the drop-down list to report the qualification of staff providing services. If the subcode is used to provide services delivered by staff who have different qualifications, report the qualification that applies to the largest proportion of billed services.

***Service Code 110 – Program Support Group-Day Service***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

*Column J: Staff Qualification* – Use the drop-down list to report the qualification of staff providing services. If the subcode is used to provide services delivered by staff who have different qualifications, report the qualification that applies to the largest proportion of billed services.

***Service Code 111 – Program Support Group-Other Services***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

*Column J: Staff Qualification* – Use the drop-down list to report the qualification of staff providing services. If the subcode is used to provide services delivered by staff who have different qualifications, report the qualification that applies to the largest proportion of billed services.

***Service Code 520 - Independent Living Program***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 645 - Mobility Training Services Agency***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 650 - Mobility Training Services Specialist***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 680 – Tutor***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

*Column J: % of Hours for Adults with Post-Secondary - Staff with Bachelor's* – Report percent of service hours delivered to adults that are in post-secondary education and delivered by staff with at least Bachelor's degree.

*Column K: % of Hours for Adults with Post-Secondary - Staff with Non-Bachelor's* – Report percent of service hours delivered to adults that are in post-secondary education and delivered by staff with a degree lower than Bachelor's.

*Column L: % of Hours for Other than Adults with Post-Secondary - Staff with Bachelor's* – Report percent of service hours delivered to adults that are not in post-secondary education or children and delivered by staff with at least Bachelor's degree.

*Column M: % of Hours for Other than Adults with Post-Secondary - Staff with Non-Bachelor's* – Report percent of service hours delivered to adults that are not in post-secondary education or children and delivered by staff with a degree lower than Bachelor's.

***Service Code 950 - Supported Employment-Group***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

***Service Code 952 – Supported Employment, Individual***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: % of Hours that are Job Development* – Report percent of service hours delivered as job development.

*Column J: % of Hours that are Job Coaching* – Report percent of service hours delivered as job coaching.

***Service Code 954 - Rehab Work Activity Program***

*Column G: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column H: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column I: Staffing Ratio* – Use the drop-down list to report the staff-to-participant ratio.

**GROUP 2 SERVICE CODES (DISTRIBUTED 12/1/21)**

***Service Code 055 – Community Integration Training Program***

***Service Code 063 – Community Activities Support Services***

*Note: Since these service codes may be used to provide a variety of services that crosswalk to different rate models, many of the questions to be addressed will depend on the service being delivered as reported in Column J.*

*Column G: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column H: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column I: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column J: Service Type* – Using the drop-down list, report the type of service performed from the following options:

- Day Program – These programs generally provide habilitative services to groups of individuals in a center-based or community-based environment (or a mix of both) similar to community-based day programs delivered through service codes such as 505 and 510.
- Supported Employment – These programs generally provide job coaching services to individuals at their worksite or short-term job development services with a goal of competitive integrated employment similar to services delivered through service code 952.
- Home or Community-Based 1:1 Services – These programs generally provide one-to-one habilitative services to individuals in their homes and communities although services may occasionally be provided to small groups (such as siblings or roommates) similar to supported living or independent living services.
- Other Services – This includes all programs that are not covered by the three previous options, including tailored day services, Project SEARCH, etc.

**If “Other Services” is selected in Column J**

*Column K: Description of Other Services* – Provide a brief one-to-two sentence description of the activities performed.

**If “Day Program” is selected in Column J**

*Column L: Day Program Type* – Using the drop-down list, report the type of program. In order to qualify as a behaviorally- or medically-focused day program, ALL of the following criteria must be met:

1. The staff-to-participant ratio cannot exceed three participants per staff person based on the approved program design or, if not defined in the program design, based on the determination of staffing ratios outlined in 17 CCR §56756(i).
2. The program must primarily serve individuals with significant behavioral or medical needs. To meet this requirement a majority of program participants (at least 50 percent) must have a behavioral support plan, individual health care plan/ restricted health condition care plan, or similar plan that addresses a participant’s significant behavioral or medical needs.
3. The program must include the substantial involvement of a professional-level staff to review, implement, and train direct care staff on the participants’ treatment plans. For behavioral programs, this staff must be a qualified behavior modification professional (behavior analyst, assistant behavior analyst, LCSW, LMFT, or psychologist). For medical programs, this staff must be a registered nurse, physician, nurse practitioner, or physician’s assistant. For the purposes of this criterion, “substantial involvement” means the staff person must be devoted at least quarter-time (10 hours per week) to the oversight of the program.

*Column M: % of Hours Provided in Community* – Using the drop-down list, report the percentage (to the closest 10 percentage points) of service hours provided in the community (rather than in a center- or facility-based environment).

*Column N: Staffing Ratio in Community* – Use the drop-down list to report the average staff-to-participant ratio for services provided in the community based on the determination of staffing ratios outlined in 17 CCR §56756(i). If the program does not provide any services in the community, this field can be left blank.

*Column O: Staffing Ratio in Center/Facility* – Use the drop-down list to report the average staff-to-participant ratio for services provided in a center/ facility based on the determination of staffing ratios outlined in 17 CCR §56756(i). If the program does not provide any services in a center/ facility, this field can be left blank.

**If “Supported Employment” is selected in Column J**

*Column P: % of Hours that are Job Development* – Report the percentage of service hours that were associated with Job Development. The values reported in Columns P and Q should sum to 100 percent.

*Column Q: % of Hours that are Job Coaching* – Report the percentage of service hours that were associated with Job Coaching. The values reported in Columns P and Q should sum to 100 percent.



***Service Code 505 – Activity Center***

***Service Code 510 – Adult Development Center***

***Service Code 525 – Social Recreation Program***

*Column G: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column H: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column I: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column J: Day Program Type* – Using the drop-down list, report the type of program. In order to qualify as a behaviorally- or medically-focused day program, ALL of the following criteria must be met:

1. The staff-to-participant ratio cannot exceed three participants per staff person based on the approved program design or, if not defined in the program design, based on the determination of staffing ratios outlined in 17 CCR §56756(i).
2. The program must primarily serve individuals with significant behavioral or medical needs. To meet this requirement a majority of program participants (at least 50 percent) must have a behavioral support plan, individual health care plan/ restricted health condition care plan, or similar plan that addresses a participant’s significant behavioral or medical needs.
3. The program must include the substantial involvement of a professional-level staff to review, implement, and train direct care staff on the participants’ treatment plans. For behavioral programs, this staff must be a qualified behavior modification professional (behavior analyst, assistant behavior analyst, LCSW, LMFT, or psychologist). For medical programs, this staff must be a registered nurse, physician, nurse practitioner, or physician’s assistant. For the purposes of this criterion, “substantial involvement” means the staff person must be devoted at least quarter-time (10 hours per week) to the oversight of the program.

*Column K: % of Hours Provided in Community* – Using the drop-down list, report the percentage (to the closest 10 percentage points) of service hours provided in the community (rather than in a center- or facility-based environment).

*Column L: Staffing Ratio in Community* – Use the drop-down list to report the average staff-to-participant ratio for services provided in the community based on the determination of staffing ratios outlined in 17 CCR §56756(i). If the program does not provide any services in the community, this field can be left blank.

*Column M: Staffing Ratio in Center/Facility* – Use the drop-down list to report the average staff-to-participant ratio for services provided in a center/ facility based on the determination of staffing ratios outlined in 17 CCR §56756(i). If the program does not provide any services in a center/ facility, this field can be left blank.

***Service Code 515 – Behavior Management Program***

*Column G: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column H: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column I: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column J: % of Hours Provided in Community* – Using the drop-down list, report the percentage (to the closest 10 percentage points) of service hours provided in the community (rather than in a center- or facility-based environment).

*Column K: Staffing Ratio in Community* – Use the drop-down list to report the average staff-to-participant ratio for services provided in the community based on the determination of staffing ratios outlined in 17 CCR §56756(i). If the program does not provide any services in the community, this field can be left blank.

*Column L: Staffing Ratio in Center/Facility* – Use the drop-down list to report the average staff-to-participant ratio for services provided in a center/ facility based on the determination of staffing ratios outlined in 17 CCR §56756(i). If the program does not provide any services in a center/ facility, this field can be left blank.

***Service Code 896 – Supported Living Services***

*Column G: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column H: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column I: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column J: Staffing Ratio*– Use the drop-down list to report the typical staff-to-participant ratio.

*Column K: Staff Qualification* – Use the drop-down list to report the type of staff who provide the majority of services.

***Service Code 905 – Residential Facility Service Adults, Owner Operated***

***Service Code 910 – Residential Facility Service Children, Owner Operated***

***Service Code 915 – Residential Facility Service Adults, Staff Operated***

***Service Code 920 – Residential Facility Service Children, Staff Operated***

*Note: Since these services are primarily reimbursed based on a standard statewide fee schedule (which can be updated without further information), data collection is limited to the supplemental services that certain Regional Centers have established in addition to the standard monthly rates.*

*Column G: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column H: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column I: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column J: Service Type* – Using the drop-down list, report the primary service being provided. If “Other” is selected, provide detail in Column K; otherwise, proceed to Column L.

*Column K: Description of Other Services* – For responses of “Other” in Column J, provide a brief one-to-two sentence description of the activities performed.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

**GROUP 3 SERVICE CODES (DISTRIBUTED 12/19/21)**

***Service Code 108 - Parenting Support Services***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*Column M: % of Hours by Staff with Bachelor's* – Report percent of service hours delivered by staff with at least a bachelor’s degree in a public health or education field. For the purposes of this criterion, years of relevant experience can be substituted for years of education on a two-to-one basis. For example, the requirement will be deemed to be met if an individual has eight years of relevant experience without any higher education, or four years of relevant experience with two years of higher education.

***Service Code 113 - DSS Licensed Residential Facility***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: ARFPSHN* – Use the drop-down list to indicate whether the home is licensed as an Adult Residential Facility for Persons with Special Health Care Needs [ARFPSHN]) (indicate “Yes” if the home is an ARFPSHN).

*Column L: Vendored Home Capacity* – Report the number of residents for which the home is vendored.

*Column M: Number of Direct Care Staff Hours per Week* – Report the typical number of direct care staff hours provided within the home on a weekly basis as determined by agreement between the vendor and the Regional Center. Do not include any hours provided and reimbursed under a separate service code (e.g., 109 for supplemental staffing).

*Column N: Home Administrator Qualifications* – For ARFPSHNs only, use the drop-down list to indicate whether the home administrator is a registered nurse.

*Column O: Number of Annual Consultant Hours Provided to Home Residents* – Report the total number of consultant hours provided to home residents on an annual basis. For the purposes of this question, “consultants” must meet the requirements of 17 CCR § 56040 (e.g., behavior analysts; occupational,

physical, or speech therapists; dieticians; etc.). Do not include any hours provided and reimbursed under a separate service code.

*Column P: Annual Rent/Mortgage Cost* – Report the total annual mortgage (principal and interest) or rental expense for the home. Do not include any other costs such as insurance, property taxes, or maintenance.

*Column Q: Annual Property Taxes*– Report the total annual property tax expense for the home.

***Service Code 115 - Specialized Therapeutic Services (Consumers 3 to 20)***

***Service Code 116 - Early Start Specialized Therapeutic Services***

***Service Code 117 - Specialized Therapeutic Services (Consumers 21 and Older)***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Primary Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*Column M: % of Hours Provided in the Home/Community* – Using the drop-down list, report the percentage (to the closest 10 percentage points) of service hours provided in individuals’ homes or in the community (rather than in a clinic- or office-based environment).

*% of Services Delivered by: (note the totals reported in Columns N through U should sum to 100 percent)*

*Column N: Therapists/Audiologists/RNs/Psychologist* – Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Physical Therapist, Occupational Therapist or Speech Language Pathologist
- Individuals licensed as an Audiologist
- Individuals licensed as Registered Nurses
- Individuals licensed as a Psychologist

*Column O: Therapy Assistants/Dieticians* – Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Physical Therapy Assistant (PTA), Certified Occupational Therapy Assistant (COTA) or Speech Language Pathology Assistant (SLPA)
- Individuals registered as a Dietician

*Column P: Social Workers/Family Therapists*– Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Social Worker
- Individuals registered as a Marriage and Family Therapist

*Column Q: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column R: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column S: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column T: All Others with Master’s Degree* – Report the percentage of service hours provided by staff who have a master’s degree, but who do not have any of the professional licenses/ certifications covered by the preceding categories.

*Column U: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

### ***Service Code 605 - Adaptive Skills Trainer***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Primary Staffing Ratio*– Use the drop-down list to report the typical staff-to-participant ratio.

*Column M: % of Hours Provided in Home/Community* – Using the drop-down list, report the percentage (to the closest 10 percentage points) of service hours provided in individuals’ homes or in the community (rather than in a clinic- or office-based environment).

*% of Services Delivered by: (note the totals reported in Columns N through U should sum to 100 percent)*

*Column N: Therapists/Audiologists/RNs/Psychologist* – Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Physical Therapist, Occupational Therapist or Speech Language Pathologist
- Individuals licensed as an Audiologist
- Individuals licensed as Registered Nurses
- Individuals licensed as a Psychologist

*Column O: Therapy Assistants/Dieticians* – Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Physical Therapy Assistant (PTA), Certified Occupational Therapy Assistant (COTA) or Speech Language Pathology Assistant (SLPA)
- Individuals registered as a Dietician

*Column P: Social Workers/Family Therapists*– Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Social Worker
- Individuals registered as a Marriage and Family Therapist

*Column Q: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column R: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column S: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column T: All Others with Master's Degree* – Report the percentage of service hours provided by staff who have a master's degree, but who do not have any of the professional licenses/ certifications covered by the preceding categories.

*Column U: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

### ***Service Code 805 - Infant Development Program***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Primary Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*Column M: % of Hours Provided in Home/Community* – Using the drop-down list, report the percentage (to the closest 10 percentage points) of service hours provided in individuals' homes or in the community (rather than in a clinic- or office-based environment).

*% of Services Delivered by: (note the totals reported in Columns L through Q should sum to 100 percent)*

*Column N: Early Intervention Specialist* – Report the percentage of service hours provided by an Early Intervention Specialist. For the purposes of this question, Early Intervention Specialists must meet one of the following:

- Possess a current California Educational Specialist Credential or Added Authorization in Early Childhood Special Education (ECSE) granted by the California Commission on Teacher Credentialing or a California University Certificate in Early Intervention.
- Have at least eight years of experience providing early intervention services.
- Possess a bachelor's degree in child development or a related field. For the purposes of this requirement, two years of early intervention experience can substitute for one year of education (for example, the requirement will be deemed to be met if an individual has two years of higher education and four years of relevant experience).

*Column O: Early Intervention Assistants* – Report the percentage of service hours provided by an Early Intervention Assistants. For the purposes of this question, Early Intervention Assistants must meet one of the following:

- Possess a California Community College Early Intervention Assistant Certificate
- Equivalent of associate teacher California Child Development permit (12 units)
- Have at least four years of experience providing early intervention services.
- Possess an associate's degree in child development or a related field. For the purposes of this requirement, two years of early intervention experience can substitute for one year of education (for example, the requirement will be deemed to be met if an individual has one years of higher education and two years of relevant experience).

*Column P: Therapists/Audiologists/RNs/Psychologist* – Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Physical Therapist, Occupational Therapist or Speech Language Pathologist
- Individuals licensed as an Audiologist
- Individuals licensed as Registered Nurses
- Individuals licensed as a Psychologist



*Column Q: Therapy Assistants/Dieticians* – Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Physical Therapy Assistant (PTA), Certified Occupational Therapy Assistant (COTA) or Speech Language Pathology Assistant (SLPA)
- Individuals registered as a Dietician

*Column R: Social Workers/Family Therapists*– Report the percentage of service hours provided by any combination of the following:

- Individuals licensed as a Social Worker
- Individuals registered as a Marriage and Family Therapist

*Column S: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column T: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column U: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column V: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

### ***Service Code 860 - Homemaker Services***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

### ***Service Code 862 - In-Home Respite Services***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio*– Use the drop-down list to report the typical staff-to-participant ratio.

*Column M: % of Hours Provided Using EOR Service Delivery Model* – Report the percentage of service hours delivered through an employer of record (EOR) model. If not otherwise defined in the applicable program design, for the purposes of this question, an EOR model is one in which the service participant or their family member is responsible for most employment-related functions, including selecting, scheduling, and supervising the worker while the agency is responsible for administrative tasks such as performing background checks, ensuring the worker has required training such as CPR and first aid, and managing payroll and withholdings. The totals reported in Columns M and N should sum to 100 percent.

*Column N: % of Hours Provided Using Agency Service Delivery Model* – Report the percentage of service hours delivered through an agency model. For the purposes of this question, an agency model is one in which the agency is responsible for both employment-related functions and administrative tasks. The totals reported in Columns M and N should sum to 100 percent.

#### ***Service Code 864 - In-Home Respite Worker***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio*– Use the drop-down list to report the typical staff-to-participant ratio.

#### ***Service Code 875 - Transportation Company***

##### ***Service Code 880 - Transportation-Additional Component***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

**Column K: Average Units per Trip** – For services that are billed based on 15-minute, hourly, or mileage rates, report the average number of units per trip. For example, if the vendorization has an hourly rate and the typical trip takes 15 minutes, you would report 0.25 (as the typical trip is a quarter-unit). A “trip” is defined as one-way transit for a single individual so if six individuals are transported on a route, six trips would be counted.

**Column L: Average Trips per Unit** – For services that are not billed based on trip, 15-minute, hourly, or mileage rates, report the average number of trips per unit. For example, if the vendorization has a weekly rate and the vendor provides 10 trips per week, you would report 10. A “trip” is defined as one-way transit for a single individual so if three individuals are transported on a route, three trips would be counted.

**Column M: % of Trips for Non-Ambulatory Service** – Report the percentage of trips provided to individuals who are non-ambulatory. For the purposes of this question, “non-ambulatory” means a person who requires physical assistance to enter or exit the vehicle. It includes, but is not limited to, those persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs. The totals reported in Columns M and N should sum to 100 percent.

**Column N: % of Trips for Ambulatory Service** – Report the percentage of trips provided to individuals who do not meet the definition of non-ambulatory above. The totals reported in Columns M and N should sum to 100 percent.

#### ***Service Code 882 - Transportation-Assistant***

**Column I: Valid Rate** – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

**Column J: Unit Type** – Use the drop-down list to select the appropriate billing unit of service.

**Column K: Average Hours per Unit** – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

#### ***Service Code 883 - Transportation-Broker***

**Column I: Valid Rate** – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

**Column J: Unit Type** – Use the drop-down list to select the appropriate billing unit of service.

**Column K: Average Trips per Unit** – Report the average number of trips per unit. For example, if the vendorization has a weekly rate and the vendor provides 10 trips per week, you would report 10. A “trip” is defined as one-way transit for a single individual so if three individuals are transported on a route, three trips would be counted.

*Column L: % of Trips for Non-Ambulatory Service* – Report the percentage of trips provide to individuals who are non-ambulatory. For the purposes of this question, “non-ambulatory” means a person who requires physical assistance to enter or exit the vehicle. It includes, but is not limited to, those persons who depend upon mechanical aids such as crutches, walkers, and wheelchairs. The totals reported in Columns L and M should sum to 100 percent.

*Column M: % of Trips for Ambulatory Service*– Report the percentage of trips provided to individuals who do not meet the definition of non-ambulatory above. The totals reported in Columns L and M should sum to 100 percent.

**GROUP 4 SERVICE CODES (DISTRIBUTED 12/26/21)**

***Service Code 048 - Client/ Parent Support Intervention Training***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*% of Services Delivered by: (note the totals reported in Columns M through Q should sum to 100 percent)*

*Column M: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column N: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column O: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column P: Behavior Technician-Paraprofessional* – Report the percentage of service hours provided by staff who meet the qualifications outlined at 17 CCR § 54342: a high school diploma with 30 hours of competency-based training designed by a certified behavior analyst and six months experience working with individuals with I/DD OR an associate’s degree in a relevant field and six months experience working with individuals with I/DD.

*Column Q: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

***Service Code 420 - Voucher Respite***

***Service Code 465 – Participant-Directed Respite Services***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

***Service Code 475 – Participant-Directed Community-Based Training Services***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

***Service Code 612 – Behavior Analyst***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*% of Services Delivered by: (note: although all billed services should be provided by behavior analysts, it has been stated that may not occur in all instances so these fields provide an opportunity to report who is providing services; the totals reported in Columns M through Q should sum to 100 percent)*

*Column M: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column N: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column O: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column P: Behavior Technician-Paraprofessional* – Report the percentage of service hours provided by staff who meet the qualifications outlined at 17 CCR § 54342: a high school diploma with 30 hours of competency-based training designed by a certified behavior analyst and six months experience working with individuals with I/DD OR an associate’s degree in a relevant field and six months experience working with individuals with I/DD.

*Column Q: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

***Service Code 613 – Associate Behavior Analyst***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*% of Services Delivered by: (note: although all billed services should be provided by associate behavior analysts, it has been stated that may not occur in all instances so these fields provide an opportunity to report who is providing services; the totals reported in Columns M through Q should sum to 100 percent)*

*Column M: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column N: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column O: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column P: Behavior Technician-Paraprofessional* – Report the percentage of service hours provided by staff who meet the qualifications outlined at 17 CCR § 54342: a high school diploma with 30 hours of competency-based training designed by a certified behavior analyst and six months experience working with individuals with I/DD OR an associate’s degree in a relevant field and six months experience working with individuals with I/DD.

*Column Q: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

***Service Code 615 – Behavior Management Assistant***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*% of Services Delivered by: (note: although all billed services should be provided by behavior management assistants, it has been stated that may not occur in all instances so these fields provide an opportunity to report who is providing services; the totals reported in Columns M through Q should sum to 100 percent)*

*Column M: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column N: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column O: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column P: Behavior Technician-Paraprofessional* – Report the percentage of service hours provided by staff who meet the qualifications outlined at 17 CCR § 54342: a high school diploma with 30 hours of competency-based training designed by a certified behavior analyst and six months experience working with individuals with I/DD OR an associate’s degree in a relevant field and six months experience working with individuals with I/DD.

*Column Q: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

***Service Code 616 – Behavior Technician-Paraprofessional***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.



*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

*% of Services Delivered by: (note: although all billed services should be provided by behavior technicians/ paraprofessionals, it has been stated that may not occur in all instances so these fields provide an opportunity to report who is providing services; the totals reported in Columns M through Q should sum to 100 percent)*

*Column M: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column N: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column O: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column P: Behavior Technician-Paraprofessional* – Report the percentage of service hours provided by staff who meet the qualifications outlined at 17 CCR § 54342: a high school diploma with 30 hours of competency-based training designed by a certified behavior analyst and six months experience working with individuals with I/DD OR an associate’s degree in a relevant field and six months experience working with individuals with I/DD.

*Column Q: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

### ***Service Code 620 – Behavior Management Consultant***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

% of Services Delivered by: (note: although all billed services should be provided by behavior management consultants, it has been stated that may not occur in all instances so these fields provide an opportunity to report who is providing services; the totals reported in Columns M through Q should sum to 100 percent)

*Column M: Behavior Analysts* – Report the percentage of service hours provided by behavior analysts.

*Column N: Associate Behavior Analysts/ Behavior Management Assistants* – Report the percentage of service hours provided by any combination of the following:

- Associate Behavior Analysts
- Behavior Management Assistants

*Column O: Behavior Management Consultants* – Report the percentage of service hours provided by behavior management consultants.

*Column P: Behavior Technician-Paraprofessional* – Report the percentage of service hours provided by staff who meet the qualifications outlined at 17 CCR § 54342: a high school diploma with 30 hours of competency-based training designed by a certified behavior analyst and six months experience working with individuals with I/DD OR an associate’s degree in a relevant field and six months experience working with individuals with I/DD.

*Column Q: All Others* – Report the percentage of service hours provided by staff not covered by any of the preceding categories.

***Service Code 635 – Independent Living Specialists***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Hours per Unit* – For services that are not billed on a 15-minute or hourly basis, report the typical number of hours provided per member per unit. For example, if the billing unit is daily, report the average number of hours of service that a participant receives per day.

*Column L: Staffing Ratio* – Use the drop-down list to report the typical staff-to-participant ratio.

***Service Code 900 - Enhanced Behavioral Supports Home Facility Component***

***Service Code 901 - Enhanced Behavioral Supports Home***

*Note: Since each EBSH is funded through the combination of service codes 900 and 901 and the rate models allocate costs across the two codes somewhat differently, the service detail collection forms consider the service codes together.*

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Monthly Rate* – For rates that are not monthly or convertible to month (for example, daily or weekly), report the average monthly rate. This would apply, for example, if the rate is established as a \$1.00 unit with the total number of \$1.00 units determined for each individual.

*Column L: Rate Includes SSI* – Use the drop-down list to indicate whether the payment rate is inclusive of individuals’ SSI or similar state or federal benefits (that is, does the rate include SSI rather than a separate payment from such benefits either through a different subcode or service code 400?).

*Column M: Vendored Home Capacity* – Report the number of residents for which the home is vendored.

*Column N: Home Occupancy* – Report the number of residents currently residing in the home.

*Column O: Number of Direct Care Staff Hours per Week* – Report the current number of direct care staff hours provided within the home on a weekly basis based on the residents currently residing in the home as reported in Column M. Do not include any hours provided and reimbursed under a separate service code (e.g., 109 for supplemental staffing).

*Column P: Hours by RBT* – For the direct care staff hours reported in Column O, report the percentage of hours provided by staff who currently qualify as registered behavior technicians (RBT).

*Column Q: Home Administrator Qualifications* – Use the drop-down list to indicate whether the home administrator is a board certified behavior analyst (BCBA).

*Column R: Number of Annual Consultant Hours Provided to Home Residents* – Report the total number of consultant hours provided to home residents on an annual basis. For the purposes of this question, “consultants” must meet the requirements of 17 CCR § 59050 (e.g., occupational, physical, or speech therapists; dietitians; etc.). Do not include any hours provided and reimbursed under a separate service code. Do not include BCBA consultant hours that are reported in the next column.

*Column S: Number of Annual BCBA Consultant Hours Provided to Home Residents* – Report the total number of BCBA consultant hours provided to home residents on an annual basis. Do not include hours associated with the home administrator (that is, only hours provided by another BCBA would be reported here). Do not include any hours provided and reimbursed under a separate service code.

*Column T: Annual Rent/Mortgage Cost* – Report the total annual mortgage (principal and interest) or rental expense for the home. Do not include any other costs such as insurance, property taxes, or maintenance.

*Column U: Annual Property Taxes* – Report the total annual property tax expense for the home.

*Column V: Annual Mileage* – Report the number of miles traveled per year to transport individuals or otherwise support home operations (for example, staff driving to the grocery store to shop for the home). Include mileage associated both with vehicles owned/ leased by the agency and staff’s personal vehicles.

***Service Code 902 – Community Crisis Home Facility Component***

***Service Code 903 - Community Crisis Home***

*Note: Since each CCH is funded through the combination of service codes 902 and 903 and the rate models allocate costs across the two codes somewhat differently, the service detail collection forms consider the service codes together.*

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Average Monthly Rate* – For rates that are not monthly or convertible to month (for example, daily or weekly), report the average monthly rate. This would apply, for example, if the rate is established as a \$1.00 unit with the total number of \$1.00 units determined for each individual.

*Column L: Rate Includes SSI* – Use the drop-down list to indicate whether the payment rate is inclusive of individuals’ SSI or similar state or federal benefits (that is, does the rate include SSI rather than a separate payment from such benefits either through a different subcode or service code 400?).

*Column M: Vendored Home Capacity* – Report the number of residents for which the home is vendored.

*Column N: Home Occupancy* – Report the number of residents currently residing in the home.

*Column O: Number of Direct Care Staff Hours per Week* – Report the current number of direct care staff hours provided within the home on a weekly basis based on the residents currently residing in the home as reported in Column M. Do not include any hours provided and reimbursed under a separate service code (e.g., 109 for supplemental staffing).

*Column P: Hours by RBT* – For the direct care staff hours reported in Column O, report the percentage of hours provided by staff who currently qualify as registered behavior technicians (RBT).

*Column Q: Home Administrator Qualifications* – Use the drop-down list to indicate whether the home administrator is a board certified behavior analyst (BCBA).

*Column R: Number of Annual Consultant Hours Provided to Home Residents* – Report the total number of consultant hours provided to home residents on an annual basis. For the purposes of this question, “consultants” must meet the requirements of 17 CCR § 59000 (e.g., occupational, physical, or speech therapists; dieticians; etc.). Do not include any hours provided and reimbursed under a separate service code.

*Column S: Annual Rent/Mortgage Cost* – Report the total annual mortgage (principal and interest) or rental expense for the home. Do not include any other costs such as insurance, property taxes, or maintenance.

*Column T: Annual Property Taxes* – Report the total annual property tax expense for the home.

*Column U: Annual Mileage* – Report the number of miles traveled per year to transport individuals or otherwise support home operations (for example, staff driving to the grocery store to shop for the home). Include mileage associated both with vehicles owned/ leased by the agency and staff’s personal vehicles.

***Service Code 904 - Family Home Agency***

*Column I: Valid Rate* – Using the drop-down list, report whether the vendor will continue to bill for services using the subcode in column E after April 1, 2022. If “No” is selected, no further data entry is required for this record as no rate will be calculated for this vendor-subcode combination. If “Yes” is selected, complete the remaining columns.

*Column J: Unit Type* – Use the drop-down list to select the appropriate billing unit of service.

*Column K: Payment to Family Home Provider* – Report the expected monthly payment to the Family Home Provider.

*Column L: Direct Staff Hours* – Report the typical number of direct care staff hours provided by the agency to support the family home provider on a monthly basis.

*Column M: Number of Annual Consultant Hours Provided to Home Residents* – Report the total number of consultant hours provided to home residents on an annual basis. For the purposes of this question, “consultants” must meet the requirements of 17 CCR § 56040 (e.g., behavior analysts; occupational, physical, or speech therapists; dieticians; etc.). Do not include any hours provided and reimbursed under a separate service code.