

**Department of Human Services  
Division of Developmental Disabilities**

**COMMUNITY PROGRAMS: FY08 RATE TABLE - EFFECTIVE OCTOBER 1, 2007**

Rates Reflecting 2.5% COLA on State Spending (see also Notes 2 and 3)

Division of Developmental Disabilities, Bureau of Community Reimbursement (DDD, BCR)

DDD PROGRAM NAME	Program Code	FY2008 Per Unit Rate	FY2008 Annual Rate	HCB Medicaid Waiver	Service Unit Type	FY2008 Unit / \$\$\$ Maximum / Minimum	FY2008 Prior Approval
<b>CHILDREN'S SERVICES - PURCHASE OF SERVICE (POS)</b>							
Children's Group Homes (CGH)	17D	varies	varies	Y	24-Hr Day	365(6) days per FY	Yes
Child Care Institutions (CCI)	19D	varies	varies	N	24-Hr Day		Yes
CCI (LTC Campus Facilities) Last COLA Eff 1/1/06	19D	varies	varies	N	24-Hr Day		Yes
<b>DAY PROGRAMS - POS</b>							
Developmental Training (1)	31U	\$10.39	\$11,427	Y	Client Hour	115 Hrs per Month ; 1,100 Hrs per FY any day program combination	Yes
Developmental Training - Advance & Reconcile (1)	31A	\$10.39	\$11,427	Y	Client Hour		Yes
Regular Work	38U	\$10.39	\$11,427	N	Client Hour		Yes
Supported Emp. (Group) No Job Coach	36G	\$11.63	\$12,790	Y	Client Hour		Yes
Supported Emp. (Group) Job Coach	39G	\$11.63	\$12,790	Y	Client Hour		Yes
Supported Emp. (Indiv.) No Job Coach	36U	\$13.03	\$14,337	Y	Client Hour		Yes
Supported Emp. (Indiv.) Job Coach	39U	\$13.03	\$14,337	Y	Client Hour		Yes
Adult Day Care	35U	\$8.68	\$9,548	Y	Client Hour		Yes
Other Day Program	30U	\$10.39	\$11,427	N	Client Hour		Yes
At-Home Day Program	37U	\$10.39	\$11,427	Y	Client Hour		Yes
SODC DT	31S	varies	varies	N	Client Hour		
<b>DAY PROGRAMS - GRANT</b>							
Client & Family Support	160	N/A	Annual Grant	N	Client Hour/Day		
Vocational Development	320	N/A	Annual Grant	N	Client Hour		
Regular Work	380	N/A	Annual Grant	N	Client Hour		
Supported Employment	390	N/A	Annual Grant	N	Client Hour		
<b>OTHER - GRANTS</b>							
Special Projects - Diagnostic/Evaluation	150	N/A	Annual Grant	N	N/A		
Epilepsy	250	N/A	Annual Grant	N	N/A		
Dental	400	N/A	Annual Grant	N	N/A		
Leisure Time	430	N/A	Annual Grant	N	N/A		
Special Projects	450	N/A	Annual Grant	N	N/A		
Pre-Admission Screening (PAS) - Case Coordiantion	500	N/A	Annual Grant	N	Client Hour		
PAS-Bogard	781	N/A	Annual Grant	N	N/A		
PAS - Case Coordiantion Non-Waiver	780	N/A	Annual Grant	N	N/A		
Group Respite	880	N/A	Annual Grant	N	Client Hour		
<b>ADULT RESIDENTIAL SUPPORTS</b>							
Special Home Placement (SHP) - No new authorizations	41D	\$42.23	\$15,415	N	24-Hr Day	365(6) days per FY	N/A
Supported Living Arrangements (SLA) - No new authorizations	42D	varies	varies	N	Client Day		N/A
Community Integrated Living Arrangement (CILA) - Individual Rate Model	60D	varies	varies	Y	Client Day		Yes
POS CILA - No new authorizations	61D	varies	varies	Y	24-Hr Day		N/A
POS Hourly CILA - No new authorizations	65H	varies	Annual Allocation	Y	Client Hour		N/A
Community Living Facility (CLF) 16 or fewer	67D	varies	varies	Y	24-Hr Day		Yes
	67D	varies	varies	N	24-Hr Day		Yes
Home/Individual Placement (HIP) - No new authorizations	68D	varies	varies	N	24-Hr Day		N/A

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Indiv Serv & Support Advocacy (ISSA)	50D	\$40.01	\$1,000	Y - Admin.	Client Hour	25 Hrs per FY; unless a written extension request is submitted to and approved by DHS/DDD	
<b>OTHER SERVICES</b>							
Related Support - No new authorizations	73D	varies	varies	N	Client Day	365(6) days per FY	N/A
In-Home Respite Services	87D						
Level 1 - Staff with bachelor's degree or equivalent experience w/DD	L1	\$16.66	Annual Respite Allocation	N	Client Hour	No more than 10 Hrs per day; maximum of 360 Hrs per FY of any combination of 87D staff level; unless a written extension request is submitted to and approved by DHS/DDD	No
Level 2 - Staff with associate's degree or equivalent experience w/DD	L2	\$12.48	Annual Respite Allocation	N	Client Hour		No
Level 3 - Staff @ least 18 yrs old: with high school diploma or GED or equivalent experience w/DD	L3	\$9.76	Annual Respite Allocation	N	Client Hour		No
Residential Respite / Out-of-Home Respite	89D	varies	Annual Respite Allocation	N	24-Hr Day	60 days per FY per individual with all 89D providers; unless a written extension request is submitted to and approved by DHS/DDD	No
<b>LONG TERM CARE (LTC) (2)</b>							
ICFDD (Includes SNFPED/SLC)		varies	varies				
Exceptional Care		varies	varies				
ICFDD-DT		varies	varies				
<b>THERAPIES</b>							
Physical Therapy	52P	\$37.00	\$1,924	Y	Client Hour	26 Hrs/FY per therapy type; unless documentation is submitted to and approved by DHS/DDD for 52 Hrs/FY	Yes
Occupational Therapy	52O	\$37.00	\$1,924	Y	Client Hour		Yes
Speech Therapy	52S	\$37.00	\$1,924	Y	Client Hour		Yes
Behavior Intervention and Treatment	56U						
Level 1 - Licensed Professional - Statewide Rate	L1	\$77.86	\$5,139	Y	Hour	66 Hrs per FY; any combination of treatment level; must be a licensed Psychologist or BCBA	Yes
Level 2 - Other Credentials or No Level Specified - Statewide Rate	L2	\$62.28	\$4,110	Y	Hour	66 Hrs per FY; any combination of treatment level; other approved credentials	Yes
Group Counseling	57G	\$10.19	\$611	Y	Client Hour	60 Hrs per FY; any combination of behavior therapy/counseling	Yes
Individual Counseling	57U	\$30.57	\$1,834	Y	Client Hour		Yes
Group Therapy	58G	\$12.74	\$764	Y	Client Hour		Yes
Individual Therapy	58U	\$38.21	\$2,292	Y	Client Hour		Yes
<b>STAFF TRAINING</b>	N/A	varies	varies	Y - Admin.	Hour	varies	

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<b>HOME-BASED SUPPORTS</b>							
HBS Service Facilitator (children & adults)	55A	\$40.01	Annual \$\$	Y	Hour	Actual Hrs provided; approximately 2 Hrs/Month or 24 Hrs per FY; subject to individual's Monthly Maximum	Yes
HBS Training for Unpaid Caregivers (children & adults)	55B	varies	Annual \$\$	Y	Event	Actual Hrs provided per FY; subject to the individual's Monthly Maximum	Yes
HBS Counseling for Unpaid Caregivers (children & adults)	55C	\$30.57	Annual \$\$	Y	Hour		Yes
HBS Personal Support (children & adults)	55D	varies	Annual \$\$	Y	Hour		Yes
HBS Nursing - Registered Nurse (adults only)	55N	\$31.90	Annual \$\$	Y	Hour	365 Hrs per FY; any combination of nursing; subject to the individual's Monthly Maximum	Yes
HBS Nursing - Licensed Practical Nurse (adults only)	55P	\$28.90	Annual \$\$	Y	Hour		Yes
HBS Transportation (adults only)	55T	Milage \$0.38/mile	Annual \$\$	Y	Events/Milage	Transportation of the individual; not for Day Program attendance; actual expense or miles per event; any combination not to exceed \$500 per month; subject to the individual's Monthly Maximum	Yes
HBS Emergency Home Response (adults only)	55W						
Level 1 - System Installation	L1	\$30.75	\$31	Y	Event	1 installation per FY per individual; subject to the individual's Monthly Maximum	Yes
Level 2 - Monthly Rate for Monitoring	L2	\$28.70	Annual \$\$	Y	Event	1 per month per individual; subject to the individual's Monthly Maximum	Yes
<b>OTHER SUPPORTS AND SERVICES</b>							
Crisis Services (Adult HBS only)	53C	varies	varies	Y	Hour	Separate DHS/DDD approval per emergency situation; for 60 consecutive days or 2	Yes
Adaptive Equipment	53E	varies	varies	Y	Event	\$15,000 over 5 years for any combination 53E, 53H, 53V & 53T	Yes
Assistive Technology	53T	varies	varies	Y	Event		Yes
Transitional Staff (No new authorizations)	53S	\$12.86	varies	Y	Hour	Unexpended Hrs approved prior to FY08; phasing-out during FY08 and terminating effective 6/30/2008	N/A
Temporary Intensive Staffing - Day (DT only)	53D	\$12.86	varies	Y	Hour	Individually requested Hrs approved by DHS/DDD	Yes
Temporary Intensive Staffing - Residential (60D only)	53R	\$12.86	varies	Y	Hour		Yes

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Minor Home Accessibility Modification	53H	varies	varies	Y	Event	\$5,000 per address for permanent modification to rental property and \$7,500 for new construction. \$15,000 over 5 years for any combination 53E, 53H, 53V & 53T	Yes
Minor Vehicle Accessibility Modification	53V	varies	varies	Y	Event	\$15,000 over 5 years for any combination 53E, 53H, 53V & 53T	Yes
Family Assist Prog (FAP) - DD & MH-Child	69	N/A	Annual \$\$	N	Month	Monthly stipend equal to SSI through the month of the individual's 18th birthday	Yes
Service Facilitation - HBSS MH Adults	69B	\$40.01	\$1,921	N	Hour	48 Hrs per FY	Yes
Service Facilitation - FAP DD & MH-Child	69Y	\$40.01	\$800	N	Hour	20 Hrs per FY	Yes
<b>SPECIALIZED SERVICES - Bogard</b>	75. . .76	varies	varies	N	varies	varies	varies

**NOTE:**

- (1) Published Day Program (31A/31U) base rates do not include add-on rates or 1:1 staff (53D).  
Both must be requested based on the individual's needs and approved in writing prior to delivering the service.
- (2) DD Long Term Care rates are not increased 10-1-07.
- (3) Bogard Specialized Services (75 . . .76 series) have negotiated rates and are not increased 10-1-07.

**Staff Wage Table**

Eff. 10/1/2007	Wage + Fringe
DSP	\$12.86
QMRP	\$18.14
Supervisor	\$16.08
LPN	\$17.31
RN	\$21.52
Dietician	\$30.81

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