MONTANA DEVELOPMENTAL DISABILITIES PROGRAM MANUAL OF SERVICE RATES AND PROCEDURES OF REIMBURSEMENT FOR HCBS 1915c 0208 & 0667 WAIVER PROGRAMS

Effective July 1, 2016

SCOPE: This manual applies to all contracted staff and service providers that serve DDP individuals under the Medicaid Home and Community-Based Services (HCBS) Waiver programs, and other non-Medicaid programs.

PROGRAM OVERVIEW: Home and Community-Based Services (HCBS) are designed to support people with developmental disabilities in integrated and inclusive community settings. As such, HCBS provide alternatives to or prevent institutionalization. HCBS developmental disabilities waiver services differ from Montana Medicaid State Plan services in both their delivery and reimbursement philosophy. Specifically, HCBS residential habilitation and day/work services are considered long-term care services and involve both active training as well as health and safety monitoring and support. The balance of training and health / safety supports is based upon an individual plan of care (IFSP or PSP). Services are provided in accordance with individual's plan of care which specify the services for each person.

The HCBS provider reimbursement schedule defines the rates and units of service for each HCBS waiver category. As such the HCBS Waiver Reimbursement services are intended to accomplish three purposes:

1. ensure that people have fair and equitable access to services;
2. ensure that providers are fairly and equitably reimbursed for delivering those services; and
3. ensure that services purchased by people are delivered in sufficient amounts and at acceptable quality standards.

STATEMENT OF POLICY: The HCBS Waiver Reimbursement policy defines the amount of financial reimbursement for each HCBS service and consists of the following:

1. Direct Care Staff Time is the Billable Unit for most HCBS services (see table #1). Most provider reimbursement is based upon the amount of direct care staff time delivered to or on behalf of the HCBS individual by the provider. In order to meet the conditions for payment, the HCBS individual must be Medicaid eligible, enrolled, attend, and receive a HCBS Waiver Service; and the direct care staff must be actively employed and present to provide the HCBS Waiver Service. In addition, the service provided must be consistent with the individual's plan of care.

2. Direct care staff is defined to be those staff whose primary responsibility is the day to day, hands-on, direct support of people with disabilities, training and instruction, and assistance with and management of activities of daily living. In addition, substitute direct care can be provided for short, specific periods of time by staff whose primary duties may be other than direct care when regular direct care staff are absent and not in billable status, as long as staff training requirements for that service are met.

3. Billable units for most HCBS services are defined as either 15 minutes, hourly, daily, or monthly. Table 1 defines the applicable billable unit and associated financial reimbursement rate for each HCBS service. These rates are the costs for a single unit of service. The following definitions apply:

    - The term "15 minutes" refers to fifteen minutes of staff time spent with or on behalf of an HCBS individual. For this definition, fifteen minutes is considered to be no less than 8 minutes or no more than 22 minutes. Minutes cannot be combined over different days. Partial units are not allowed.
    - The term "Hours" refers to one hour of direct care staff time spent with or on behalf of an HCBS individual. For this definition, an hour is 60 minutes. Partial hours are allowed. Hours cannot be combined over different days for hourly payment units.
    - The term "Daily" refers to services provided in that day. For this definition, a day rate is derived individually based on hours in each person's Individual Cost Plan or staff ratios. A day is also defined as direct care activities which occur between the hours of 12:00 a.m. and 11:59 p.m.
    - The term "Month" refers to a single month billing unit. For services using this billable unit, reimbursement is made at a fixed monthly amount for care hours provided to those people enrolled in their service for that month. Monthly rates are used when individual support needs can vary widely on a daily basis. For services billed by this monthly unit: if an individual "ports" from one service provider to another mid-month, each provider may receives the appropriate pro-rated amount of the monthly fee for that month. Partial units are allowed.

4. For selected services, the following additional billable unit definitions apply:
    - Congregate situations – in those instances when several people in the same setting are supported by shared staff, the billable units are each person's share of the daily authorized direct care staff hours, as determined by their ICP.
    - Supported Employment Follow Along - the monthly rate is organized into three tiers which reflect different amounts of employment support staff's time and contacts.
    - Supported Living - the "base" and "flex" levels are monthly rates based on the amount of support needed in two ranges, and an hourly rate is used for individuals needing more than 45 hours of support per month, or for children (also receiving WCCM services), or when a monthly unit is cost prohibitive.

<u>STANDARD RATES AND STANDARDIZED COST CENTERS:</u> All provider reimbursement rates consist of four cost centers. These cost centers are:

1. *Direct care Staff Compensation:* By direction from the Montana State Legislature, direct care compensation rates were originally established at the 35th percentile of Montana market value as described by compensation data collected by Hayes compensation studies, Health and Hospital compensation studies, and the U.S. Bureau of Labor Statistics. Job classifications used for Personal Support Workers are staff that perform at least 85% of the typical duties of a developmental disabilities attendant with a high school degree and no special training. Typical classifications include child care workers, home health care aides, nursing home aides, hospital orderlies, and assisted living workers. Job classifications used for Habilitation Workers are staff that perform at least 85% of the duties of a developmental disabilities attendant with an Associate Arts degree or

Certified Nursing Assistant credentials, or special training. Typical classifications include nursing home assistants, vocational trainers, behavior assistants, special education teachers' aides.

2. *Employee-Related Expenses*: Employment related expenditures refer to the benefits package that is offered to all employees who are involved in the care and services provided to the person with disabilities. These costs can be categorized into two groups:

    - Discretionary Costs - Discretionary costs are those associated with benefits provided at the discretion of the employer and are not mandated by local, state, or federal governments. Such benefits may include (but are not limited to) health insurance, profit sharing, and retirement benefits or stock options.
    - Non-Discretionary - Non-discretionary costs are those related to employment expenditures that are mandated by local, State, and Federal governments and are not optional to the employer. Such expenditures include (but are not limited to) FICA, FUTA, SUTA and workers' compensation insurance. Employee-related expenses vary for people who are self-employed and agency employees. Employer agencies bear the financial responsibility for workers' compensation, while self-employed workers are required to pay all federal income taxes.

3. *Program Supervision and Indirect Expenses*: Program Related costs are costs that have been assigned or cost allocated to DDP that are not Direct Care Wages; are not Direct Care Employee Related Expenses (DC ERE); and are not General & Administrative Costs (G&A). ***In other words Program Related costs are all the other DDP costs that are left after DDP costs are assigned or cost allocated to DC Wages, DC ERE, and G&A.*** Program Related costs can include but are not limited to the following:

    - Training costs for all staff.
    - Supervision of direct care staff (salary and benefits) and all other supervision costs (salary, benefits, and office costs) other than the CEO, CFO, & HRO.
    - Qualified professionals, registered records technicians, and all other program and support staff and professionals (salary, benefits, and office costs) except for the CEO, CFO, & HRO.
    - Transportation costs for all staff except CEO, CFO, & HRO.

4. *General & Administrative Expenses*: General and Administrative costs are costs that have been assigned or cost allocated to DDP that are management and operating costs at the upper level of the provider organization and include but are not limited to the following:

    - Executive Director's (CEO) salary and benefits and the costs of supporting the office of the CEO such as but not limited to phone, computer, and travel.
    - Chief Financial Officer's (CFO) salary and benefits and the costs of supporting the office of the CFO such as but not limited to phone, computer, and travel.
    - Human Resources Officer's (HRO) salary and benefits and the costs of supporting the office of the HRO such as, but not limited to phone, computer, and travel.

- The appropriate portion of insurance costs, depreciation, interest, taxes, etc that have been cost allocated to CEO, CFO, & HRO activities.

REIMBURSEMENT RATE GEOGRAPHICAL FACTORS: In addition to the standardized cost centers, geographical factors are applied for residential habilitation, day services and some work services; economy-of-scale factors are applied to residential habilitation. These factors are as follow:

1. *Geographical factor*: Geographical cost adjustment factors consider annual median wage, cost of rent, and unemployment. Based upon these factors, geographical cost adjustments are provided for residential and day/work providers in the following counties:
    - Medium = 1.84% add-on: Beaverhead, Park, Blaine, Lake, Hill, Ravalli, Madison, Dawson, Lincoln, Custer.
    - High = 4.48% add-on: Gallatin, Missoula, Yellowstone, Lewis & Clark, Stillwater, Jefferson, Fallon, Flathead, Rosebud, Big Horn, Powell, Richland, Silver Bow, Sweet Grass, Toole, Cascade, Musselshell, Glacier.
    - All other counties have no geographic factor adjustment.

2. *Economy-of-Scale factor*: Economy-of-scale factors are used to adjust provider reimbursement for general & administrative (G&A) and program-related (PR) costs for agencies of different sizes. Specifically, these cost factors are adjusted for group home providers as follows:
    - Small = Providers offering community home services in one (1) to six (6) sites within the region – no adjustment.
    - Medium = Providers offering community home services in seven (7) to seventeen (17) sites within the region – 2% reduction in G&A and 2% reduction in PRE.
    - Large = Providers offering community home services in eighteen (18) or more sites within the region – 4% reduction in PRE and 2% reduction in G&A.
    - SMALL Agency = Specific economy of scale factors are applied to very small providers of Supported Living, Residential Training Supports, Job Preparation, Retirement Services, and Day Supports & Activities services.

DEVELOPMENTAL DISABILITIES PROGRAM
RATES OF REIMBURSEMENT FOR HCBS 1915C 0208 & 0667 WAIVER PROGRAMS

EFFECTIVE JULY 1, 2016

The following service references should be used in conjunction with the Approved Waivers and other DDP documents including but not limited to the Qualified Provider Standards, DDP Provider Contract, A.R.M.s, Career Plan, PSP, IFSP, and Cost Plan.

Table #1: Service Reference Information & Clarifications, Billable Units, and Reimbursement Rates

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Residential Community Home (small / no geographic factor)	**Residential habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities. Rates for this service are for providers offering between **one (1) to six (6) sites** in a region, and which the sites are located in counties not eligible for a geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$21.26** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (medium / no geographic	**Residential Habilitation: 0208 waiver definition**		The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans	The daily rate calculation is: ICP daily staff hours X **$20.49** (hourly rate for direct care staff)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
factor)	With exception: Rates for this service are for providers offering between **seven (7) to seventeen (17) sites** in a region, and which the sites are located in counties not eligible for a geographic adjustment.	Daily	(ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (large / no geographic factor	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering **eighteen (18) or more sites** in a region, and which the sites are located in counties not eligible for a geographic adjustment	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours **$19.97** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (small / medium geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering between **one (1) to six (6) sites** in a region which the sites are	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any	The daily rate calculation is: ICP daily staff hours X **$21.65** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	located in counties which are eligible for a medium geographic adjustment.		residential habilitation services.	receive residential habilitation services
Residential Community Home (medium / medium geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering between **seven (7) to seventeen (17) sites** in a region which the sites are located in counties which are eligible for a medium geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$20.86** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (large / medium geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering **eighteen (18) or more sites** in a region which the sites are located in counties which are eligible for a medium geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$20.34** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Residential Community Home (small / high geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering between one (1) to six (6) sites in a region, and which the sites are located in counties which are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$22.21** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (medium / high geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering between **seven (7) to seventeen (17) sites** in a region, and which the sites are located in counties which are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$21.42** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Residential Community Home (large / high geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for providers offering eighteen (18) or more sites in a region, and which the sites are located in counties which are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$20.87** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (Medically Intensive / no geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for sites where 24/7 LPN or RN are required on site and located counties not eligible for a geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$27.14** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (Medically Intensive/	**Residential Habilitation: 0208 waiver definition**		The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by	The daily rate calculation is: ICP daily staff hours X **$27.63** (hourly rate for direct care staff)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Medium geographic factor)	With exception: Rates for this service are for sites where 24/7 LPN or RN are required on site and located in counties that are eligible for a medium geographic adjustment.	Daily	their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (Medically Intensive / high geographic factor	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for sites where 24/7 LPN or RN are required on site and located in counties that are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$28.35** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services
Residential Community Home (Children's Group Home / no geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for Children's Group Home sites in counties that are eligible for no geographic	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate)	The daily rate calculation is: ICP daily staff hours X **$23.15** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	adjustment.		for each day they receive any residential habilitation services.	for each day they receive residential habilitation services
Community Home (Children's Group Home / medium geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for Children's Group Home sites in counties that are eligible for a medium geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$23.58** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services.
Residential Community Home (Children's Group Home / high geographic factor)	**Residential Habilitation: 0208 waiver definition** With exception: Rates for this service are for Children's Group Home sites in counties that are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for each person as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any residential habilitation services.	The daily rate calculation is: ICP daily staff hours X **$24.19** (hourly rate for direct care staff) Each person is responsible to pay for their share of authorized hours as defined in their ICP for each day they receive residential habilitation services

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Supported Living Hourly / no geographic factor	**Residential habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities. Rates for this hourly service are for services delivered in counties not eligible for a geographic adjustment for children (receiving WCCM), adults needing an average of more than 45.1 hours of supported living services per month, for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.	Direct care Staff Hour	Based upon the amount of time direct care staff provides supports to individuals	**$22.46**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Supported Living Hourly / medium geographic factor	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities Rates for this service are for services delivered in counties which are eligible for a medium geographic adjustment, for children (receiving WCCM), adults needing an average of more than 45.1 hours of supported living services per month, for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.	Direct care Staff Hour	Based upon the amount of time direct care staff provides supports to individuals.	**$22.87**
Supported Living Hourly / High geographic factor	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities Rates for this service are for services delivered in counties which are eligible for a high geographic adjustment, for children (receiving WCCM), adults needing an average of more 45.1 hours of supported living services per month, for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.	Direct care Staff Hour	Based upon the amount of time direct care staff provides supports to individuals.	**$23.47**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Supported Living Hourly / Rural Remote	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities Rates for this service are for services delivered in remote locations that take at least 80 miles round trip (from the closest provider location) to access the service, for children (receiving WCCM), adults needing an average of more than 45.1 hours of supported living services per month for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.	Direct care Staff Hour	Based upon the amount of time direct care staff provides supports to individuals.	**$24.37**
Supported Living Flex	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities Rates for this service are for individuals with supported living needs that vary significantly each month (between thirty-one (31.0) to forty-five (45.0) hours of support) and must include at least TWO face-to-face contacts during the hours provided. There is no geographic adjustment.	Enrollment Month	Based upon the amount of time direct care staff provide support for individuals.	**$1010.65**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Supported Living Base	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities Rates for this service are for individuals with supported living needs that vary significantly each month (between one (1) and thirty (30.99) hours of support) and must include at least ONE face-to-face contact during the hours provided. There is no geographic adjustment.	Enrollment Month	Based upon the amount of time direct care staff provide support for individuals.	**$673.76**
Supported Living (SMALL Agency/ no geographic factor)	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities Rates for this service are for very small providers who support less than 10 individuals, who employ 12 or fewer direct care staff, and whose Director routinely provides some of the direct support hours every week. Rates for this service are for services delivered in counties not eligible for a geographic adjustment, for children (receiving WCCM), adults needing an average of more than 45.1 hours of supported living services per month for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.	Direct Care Staff Hour	Based upon the amount of time direct care staff provides support to individuals.	**$29.73**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Supported Living (SMALL Agency/ medium geographic factor	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities. Rates for this service are for very small providers who support less than 10 individuals, who employ 12 or fewer staff, and whose Director routinely provides some of the direct support hours every week. Rates for this service are for services delivered in counties eligible for a medium geographic adjustment, for children (receiving WCCM), adults needing an average of more than 45.1 hours of supported living services per month for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.	Direct Care Staff Hour	Based upon the amount of time direct care staff provides support to individuals.	**$30.29**
Supported Living (SMALL Agency/ high geographic factor	**Residential Habilitation: 0208 waiver definition** ***Clarifications of waiver definition:*** "Support" includes general care giving activities such as assistance with daily living activities, meal preparation, laundry, transportation, supervision, community integration, and may include meetings or phone calls on behalf of the individual in service. One or more staff activities providing support, training or actions specified in the individual's plan of care constitutes billable activities. Rates for this service are for very small providers who support less than 10 individuals, who employ 12 or fewer staff, and whose Director routinely provides some of the direct support hours every week. Rates for this service are for services delivered in counties eligible for a high geographic adjustment, for children (receiving	Direct Care Staff Hour	Based upon the amount of time direct care staff provides support to individuals.	**$31.07**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	WCCM), adults needing an average of more than 45.1 hours of supported living services per month for adults if remote monitoring services will be provided concurrently with hourly supported living, or can be applied in any situation where monthly units would be cost prohibitive.			
Residential Training Supports (no geographic factor)	Residential Training Supports: 0208 waiver definition Rates for this service are for services delivered in counties not eligible for a geographic adjustment and for individuals receiving adult foster supports.	Direct Care Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$22.32**
Residential Training Supports (medium geographic factor)	Residential Training Supports: 0208 waiver definition Rates for this service are for services delivered in counties eligible for a medium geographic adjustment and for individuals receiving adult foster supports.	Direct Care Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$22.73**
Residential Training Supports (high geographic factor)	Residential Training Supports: 0208 waiver definition Rates for this service are for services delivered in counties eligible for a high geographic adjustment and for individuals receiving adult foster supports.	Direct Care Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$23.32**
Residential Training Supports (SMALL Agency/ no geographic factor)	Residential Training Supports: 0208 waiver definition Rates for this service are for very small providers who support less than 10 DD individuals, who employ 12 or fewer direct care staff, and whose Director routinely provides some of the direct support hours every week. Rates for this service are for services delivered in counties not eligible for a geographic adjustment, and for individuals receiving adult foster support services.	Direct Care Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$29.58**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Residential Training Supports (SMALL Agency/ medium geographic factor)	Residential Training Supports: 0208 waiver definition Rates for this service are for very small providers who support less than 10 DD individuals, who employ 12 or fewer direct care staff, and whose Director routinely provides some of the direct support hours every week. Rates for this service are for services delivered in counties eligible for a medium geographic adjustment, and for individuals receiving adult foster support services.	Direct Care Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$30.13**
Residential Training Supports (SMALL Agency/ High geographic factor)	Residential Training Supports: 0208 waiver definition Rates for this service are for very small contracting providers who support less than 10 DD individuals, who employ 12 or fewer direct care staff, and whose Director routinely provides some of the direct support hours every week. Rates for this service are for services delivered in counties eligible for a medium geographic adjustment, and for individuals receiving adult foster support services.	Direct Care Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$30.91**
Adult Foster Support (Low Supervision)	Adult Foster Support: 0208 waiver definition For AFS programs, supervision requirements are intended for those times the individual is in the adult foster home. LOW SUPERVISION means that AFS parents must be aware of the location of the person. Such supervision is considered "point-to-point" and focuses on ensuring that the person is in the setting or situation as defined by their plan of care. No physical assistance is required. The individual does not have any health or behavioral needs that require attention. Examples of LOW SUPERVISION could include but not be limited to: • Knowledge of individual's presence and schedule during the day. • Reminders to individuals of daily schedule of activities and outings. Few or no prompts/reminders are necessary. • Backup assistance when primary transportation supports are	Enrollment Month	When the foster home is considered the primary residence on record for the month.	**$719.68** per month.

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	temporarily not available. LOW SUPERVISION focuses on "point-to-point" supervision to ensure that the individual is in the location. Individuals who can safely engage with their environment AND DO NOT need assistance with activities of daily living would be examples of LOW SUPERVISION needs.			
Adult Foster Support (Moderate Supervision)	Adult Foster Support: 0208 waiver definition For AFS programs, supervision requirements are intended for those times the individual is in the adult foster home. MODERATE SUPERVISION means that AFS parents must be aware of the location of the person and available to physically assist when needed. The individual does not have any health or behavioral needs that require constant attention. Examples of MODERATE SUPERVISION could include but not be limited to: • Observing when an individual leaves or enters the home • Prompting to encourage individuals to complete daily living skills and routine personal hygiene • Assistance in accessing transportation and community-inclusion opportunities. MODERATE SUPERVISION focuses on "on-site" supervision to ensure that the individual is in the location and appropriately engaged in relevant and safe activities. Individuals who can safely engage with their environment BUT NEED assistance with activities of daily living would be examples of MODERATE SUPERVISION needs.	Enrollment Month	When the foster home is considered the primary residence on record for the month.	**$1264.32** per month.

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Adult Foster Support (Enhanced Supervision)	Adult Foster Support: 0208 waiver definition For AFH programs, supervision requirements are intended for those times the individual is in the adult foster home ENHANCED SUPERVISION means that AFS parents must be able to observe the person at all times and available to physically assist when needed. For ENHANCED SUPERVISION to be required, the individual must have a health, behavior, or functional limitation need that requires constant attention. Examples of ENHANCED SUPERVSION could include but not be limited to: • Observing the individual at all times when in the home • Physically assisting individuals to complete daily living skills and routine personal hygiene • Physical assistance to participate in transportation and community-inclusion opportunities. ENHANCED SUPERVISION focuses on "line-of-sight" supervision to ensure that the individual is in the location and appropriately engaged in relevant and safe activities. Individuals that wander away from the AFS, are not able to interact safely with their environment, or who engage in nuisance behavior are examples ENHANCED SUPERVISION needs.	Enrollment month	When the foster home is considered the primary residence on record for the month.	**$2161.98** per month.
Adult Foster Support (Intensive Supervision)	Adult Foster Support: 0208 waiver definition For AFH programs, supervision requirements are intended for those times the individual is in the adult foster home. INTENSE SUPERVISION means that AFS parents must be able to physically intervene with the person at all times in order to ensure health and safety. For INTENSE SUPERVISION to be required, the individual must have a health, behavior, or functional limitation need that requires constant attention, and represents a serious threat to health and safety. Examples of INTENSE SUPERVSION could include but not be limited to: • Being in close proximity to the individual at all times when in the home	Enrollment Month	When the foster home is considered the primary residence on record for the month.	**$4471.70** per month.

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	• Physically intervening with individuals in situations where self or others are at high risk. • Providing one-to-one supervision with limited capacity to leave the individual unattended INTENSE SUPERVISION focuses on "arms-length" supervision where the AFS parent is physically able to intervene immediately when needed. Individuals who engage in self-injurious behavior, behaviors that risk physical harm to people or property, or serious seizure episodes are examples of INTENSE SUPERVISION needs.			
Caregiver Training and Support	Caregiver Training and Support: 0208 waiver definition CTS – If CTS is delivered during a month, at least ONE contact with the caregiver must be provided during the invoiced hours for that month. At least 6 of the monthly contacts per year must be a visual contact (video conferencing or in-person) with both the caregiver and individual present. A CTS contact can occur on the same day as a contact for Waiver Children's Case Management. The waiver cannot be billed for any equipment or software required for or associated with video conferencing capability.	Staff Hour	Based upon the amount of time qualified staff provide support or training for unpaid caregivers.	**$52.60**
Behavioral Support Services	Behavioral Support Services: 0208 waiver definition	Staff Hour	Based upon the amount of time qualified staff provide support for individuals.	**$58.75**
Assisted Living	Assisted Living: 0208 waiver definition Assumes 24/7 care, and day or work services cannot be reimbursed concurrently with assisted living.	Day	Based on each day a client is in attendance	1:1-1:3 staff ratio = Enhanced: **$191.25** 1:4-1:8 staff ratio= Moderate: **$143.44**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Personal Care	Personal Care: 0208 waiver definition **Cannot receive this service simultaneously with Personal Supports	Direct care Staff Hour	Based upon the amount of time direct care staff provide support for the individual	**$20.17**
Homemaker	Homemaker : 0208 waiver definition **Cannot receive this service simultaneously with Personal Supports	Direct care Staff Hour	Based upon the amount of time direct care staff provide support for the individual or based on 3rd party fee (house cleaning business for example)	**$20.17**
Adult Companion	Adult Companion: 0208 waiver definition **Clarification of waiver definition – if the setting already provides for 24/7 care, then the additional provision of adult companion cannot be used, usually in a licensed setting or in a 24/7 supported living situation. Adult companion can be a component of 24/7 support if other hours of support are decreased (eg: instead of 24 hours of res hab, you have 12 hours of companion and 12 hours of res hab). **Cannot receive this service simultaneously with Personal Supports	Direct Care Staff Hour	Based upon the amount of time direct care staff provide support for the individual	**$20.17**
Respite	Respite: 0208 & 0667 waiver definitions	Direct care Staff Hour or agreement	Based upon the amount of time direct care staff provide support for the individual or based on 3rd party fee or supports provided to the person (daycare for example)	Not to exceed **$15.22/hr** or monthly fee.
Individual Employment Support	Supported Employment – Individual Employment Support: 0208 waiver definition	Staff Hour	Based upon the amount of time qualified staff provide support for the individual	**$37.88**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Co-Worker Support	Supported Employment – Co-Worker Support: 0208 waiver definition	Daily	For each day the individual participates at their community place of work	**$10.40**
Follow Along Support	Supported Employment - Follow Along: 0208 waiver definition **For billing purposes,** a **face-to-face contact** involves direct observation and communication with the individual for the purpose of implementing their personal supports plan / individual career plan. **For the BASE rate**, individuals receive up to 10.5 hours of follow along support per month including at least one (1) contact either with the individual or employer per month regarding their employment. **For TIER #1,** individuals receive between 10.6 to 21.9 hours of follow along support per month with at least 2 face-to-face contacts per month during the hours provided. **For TIER #2**, Consumers receive between 22 to 31.9 hours of follow along support per month with at least 4 face-to-face contacts per month during the hours provided. Individuals who require in excess of 32 hours per month of follow along support are considered **EXCEPTION**, and their Level of support is based upon the assessment(s) of needs and are hourly. Hourly can also be applied in any situation where monthly units would be cost prohibitive, and hourly should be applied for all self direct employer authority.	Enrollment Month or Hourly	Based upon the amount of time direct care staff provide support for the individual for follow along support	**Base = $397.74** **Tier 1 = $795.48** **Tier 2 = $1174.28** **Exceptional Rate = $37.88 per hour**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Small Group Employment Support – no geographic factor	Supported Employment – Small Group Employment Support: 0208 waiver definition Rates for this service are for provider services which are located in counties which are not eligible for a geographic adjustment. **This rate is not available for any small group employment self direct service delivery. Use the high geographic factor as the maximum rate for all small group employment support self direct options	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.17** (program support rate)
Small Group Employment Support – medium geographic factor	Supported Employment – Small Group Employment Support: 0208 waiver definition Rates for this service are for provider services which are located in counties which eligible for a medium geographic adjustment. **This rate is not available for any small group employment self direct service delivery. Use the high geographic factor as the maximum rate for all small group employment support self direct options	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily attendance rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.31** (program support rate)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Small Group Employment Support – high geographic factor	Supported Employment – Small Group Employment Support: 0208 waiver definition Rates for this service are for provider services which are located in counties which eligible for a high geographic adjustment. **Agency with Choice is the only self direct option for small group employment. Use only this as the maximum rate for all small group employment supports in self direct. Services must be delivered in a community setting.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily attendance rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.50** (program support rate)
Day Supports & Activities– no geographic factor	Day Supports & Activities: 0208 waiver definition Rates for this service are for provider services which are located in counties which are not eligible for a geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.17** (program support rate)
Day Supports & Activities- medium geographic	Day Supports & Activities: 0208 waiver definition		The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by	The daily attendance rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
factor	Rates for this service are for providers services which are located in counties which are eligible for a medium geographic adjustment.	Daily	their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	Each person will pay their share of program support depending on their planned attendance at **$7.31** (program support rate)
Day Supports & Activities- high geographic factor	Day Supports & Activities: 0208 waiver definition Rates for this service are for providers services which are located in counties which are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily attendance rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.50** (program support rate)
SMALL Day Supports & Activities – no geographic factor	Day Supports & Activities: 0208 waiver definition Rates for this service are for small providers (under 25 people in the DD day program) services which are located in counties which are not eligible for a geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate)	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.56** (program

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
			for each day they receive any day/work services	support rate)
SMALL Day Supports & Activities - medium geographic factor	Day Supports & Activities: 0208 waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are eligible for a medium geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.72** (program support rate)
SMALL Day Supports & Activities - high geographic factor	Day Supports & Activities: 0208 waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.94** (program support rate)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Retirement Services/ no geographic factor	Retirement Services – 0208 Waiver definition Rates for this service are for provider services which are located in counties which are not eligible for a geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.17** (program support rate)
Retirement Services/ medium geographic factor	Retirement Services – 0208 Waiver definition Rates for this service are for provider services which are located in counties which eligible for a medium geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services.	The daily attendance rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.31** (program support rate)
Retirement Services/ high geographic factor	Retirement Services – 0208 Waiver definition Rates for this service are for provider services which are located in counties which eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans	The daily attendance rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
			(ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	Each person will pay their share of program support depending on their planned attendance at **$7.50** (program support rate)
SMALL Retirement Services/ no geographic factor	Retirement Services – 0208 Waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are not eligible for a geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.56** (program support rate)
SMALL Retirement Services/ medium geographic factor	Retirement Services – 0208 Waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are eligible for a medium geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.72** (program support rate)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
SMALL Retirement Services/ high geographic factor	Retirement Services – 0208 Waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are eligible for a high geographic adjustment.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.94** (program support rate)
Job Discovery	Job Discovery/Job Preparation – 0208 Waiver definition **Job Discovery cannot exceed 40 hours per year and is a 1:1 service.	Hourly	Based upon the amount of time qualified staff provide support for the individual	**$37.88**
Job Preparation/ no geographic factor	Job Discovery/Job Preparation – 0208 Waiver definition Rates for this service are for provider services which are located in counties which are not eligible for a geographic adjustment. ***This rate is not available for any job preparation self direct service delivery. Use the high geographic factor as the maximum rate for all job preparation self direct options.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.17** (program support rate)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Job Preparation/ medium geographic factor	Job Discovery/Job Preparation – 0208 Waiver definition Rates for this service are for provider services which are located in counties which eligible for a medium geographic adjustment. ***This rate is not available for any job preparation self direct service delivery. Use the high geographic factor as the maximum rate for all job preparation self direct options.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily attendance rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.31** (program support rate)
Job Preparation/ high geographic factor	Job Discovery/Job Preparation – 0208 Waiver definition Rates for this service are for provider services which are located in counties which eligible for a high geographic adjustment. ***Only 1:1 ratio is allowed for this service in either self direct option. Use only this maximum rate for all job preparation self direct service options. Services must be delivered in a community setting.	Daily Hourly for Self Direct	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily attendance rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$7.50** (program support rate) **$22.89/hour self direct**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
SMALL Job Preparation/ no geographic factor	Job Discovery/Job Preparation – 0208 Waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are not eligible for a geographic adjustment. ***This small agency rate is not available for any self direct service delivery.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$14.73** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.56** (program support rate)
SMALL Job Preparation/ medium geographic factor	Job Discovery/Job Preparation – 0208 Waiver definition Rates for this service are for small provider (under 25 people in DD day program) services which are located in counties which are eligible for a medium geographic adjustment. ***This small agency rate is not available for any self direct service delivery.	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs). Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	The daily rate is: ICP daily staff hours X **$15.00** (attendance hourly rate for direct care staff) Each person will pay their share of program support depending on their planned attendance at **$8.72** (program support rate)
SMALL Job Preparation/ high geographic factor	Job Discovery/Job Preparation – 0208 Waiver definition Rates for this service are for small provider (under 25 people in DD	Daily	The amount billed per person per day is based on the average amount of time direct care staff provide support for the individual as defined by their Individual Cost Plans (ICPs).	The daily rate is: ICP daily staff hours X **$15.39** (attendance hourly rate for direct care staff) Each person will pay

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	day program) services which are located in counties which are eligible for a high geographic adjustment. ***This small agency rate is not available for any self direct service delivery.		Each person is responsible to pay for their percentage share of staff (their daily rate) for each day they receive any day/work services	their share of program support depending on their planned attendance at **$8.94** (program support rate)
Remote Monitoring Equipment	Remote Monitoring: 0208 Waiver definition	Per Month	Per monthly Lease agreement. Maximum monthly amount is per individual per month and cannot exceed maximum amount	**$312.12**
Remote Monitoring	Remote Monitoring: 0208 Waiver definition	Client Hour	Based on each individual and hours they are remotely monitored per specifications in their plan of care and cannot exceed maximum amount.	**$8.09**
Waiver Children's Case Management (WCCM)	Waiver Children's Case Management: 0208 & 0667 waiver definitions WCCM – If WCCM is provided in a month, at least ONE **visual** contact with the individual in service must be made during the invoiced hours for that month. At least 6 of the contacts per year must be in-person, face to face with both the individual and their parent/guardian present. Video conferencing is acceptable to meet the remainder of the 6 monthly visual contacts per year, but is limited to no more than 2 consecutive months in a row. Video conferencing can also be used as an additional, ongoing service delivery method if deemed appropriate. The waiver cannot be billed for any equipment or software required for or associated with	15 minutes	Based on case management services by qualified staff	**$17.38**

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	video conferencing capability. A WCCM contact can be provided on the same day as a CTS contact.			
Children's Autism Training(CAT)	Children's Autism Training: 0667 waiver definition	Hourly	Based upon the amount of time qualified staff provide support for the individual.	**$25.90**
Program Design & Monitoring	Program Design & Monitoring: 0667 waiver definition PDM must provide a minimum of ONE **visual** contact per month with the individual in service. At least 6 of the monthly contacts per year must be in-person, face to face with both the individual and the CAT staff present. Video conferencing is acceptable to meet the remainder of the 6 monthly visual contacts per year, but is limited to no more than 2 consecutive months in a row. Video conferencing can also be used as an additional, ongoing service delivery method if deemed appropriate. The waiver cannot be billed for any equipment or software required for or associated with video conferencing capability.	Hourly	Based upon the amount of time qualified staff provide support for the individual.	**$58.75**
Community Transition Services	Community Transition Services: 0208 waiver definition	Cost	Based on actual cost and cannot exceed $3000 per individual.	Actual cost.
Individual Goods and Services	Individual Goods and Services: 0208, & 0667 waiver definitions	Cost	Based on actual cost	Actual cost.

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Personal Emergency Response System (PERS)	PERS: 0208 waiver definition	Cost	Based on actual cost	Actual cost.
Live-in Caregiver	Live-in Caregiver: 0208 waiver definition	Cost	Daily based on calculation of room & board (see waiver Appx I:6)	Varies
Personal Supports	Personal Supports: 0208 waiver definition **Cannot receive this simultaneously with Personal Care, Adult Companion, or Homemaker.	Hourly	Based upon the amount of time qualified staff provide support for the individual	**$20.17**
Supports Brokerage	Supports Broker: 0208 waiver definition **This service is only applicable if a person is self directing one or more of their services with employer authority.	Hourly	Based upon the amount of time qualified staff provide support for the individual	**$29.13**
Transportation	Transportation: 0208 & 0667 waiver definitions DDP uses the term Mileage Reimbursement for transportation provided to the individual by persons not employed by a contracted qualified provider agency. Only miles with the individual present are billable. Mileage Reimbursement can be utilized for a variety of non-medical reasons, per activities related to the disability and as described in the plan of care. "Commute" to or from work/day: Individual's average based on miles from their residence. A monthly amount will be invoiced for each month a ride to work/day, from work/day, or roundtrip is	Per mile, per week,	Mileage reimbursement is based on actual miles the individual was transported Commute is defined as a ride to, from, or round trip from the person's residence to a day service, a job discovery/job preparation activity or site, a job in the community, or an	Mileage reimbursement – based on actual miles at 38 cents per mile Commute – based on individual miles and 91 cents for individual rides, or 45.5 cents for group rides

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
	provided to each individual. This allocation is for commute transportation provided by a contracted qualified provider agency. Day Integration: A set monthly amount per 30.6 miles. One unit can be invoiced if one ride for integration as part of a work (SE) or day activity is given per month. This allocation is for day integration transportation provided by a contracted qualified provider agency, and the individual must have DDP funded day or work services to receive this allocation. Residential Integration: A set weekly amount per 22.95 miles. Will be invoiced each week if one ride for integration as part of a DDP residential service activity or transportation to assist in being an active community participant is given per week. This allocation is for transportation provided by a contracted qualified provider agency. Transportation Other is for **non-transport costs** such as licensure, insurance, other costs (see waiver definition) associated with an individual's dependence on the use of a personal vehicle owned by the person. **rate adjustments are applied to individual allocations for those who require specialized vans with wheelchair lifts in order for transportation to be delivered, and for individuals who participate in group rides vs. individual rides ***activities and anticipated frequency associated with transportation should be specified in the plan of care	per month, or per item/ fee	activity regarding a supported employment service. Day Integration is a ride to, from, or round trip as part of a supported employment or day activity service Residential Integration is a ride to, from, or round trip as part of a residential or community activity. Transportation Other is per fee/item. Provider is allowed to use 3rd party transportation such as bus passes, taxi, etc. See ICP and invoice toolboxes on the website.	Day Integration – monthly amount per 30.6 miles at 38 cents per mile Residential Integration – weekly amount per 22.95 miles at 38 cents per mile
Private Duty Nursing	Private Duty Nursing: 0208 waiver definition	Hour	Based upon the amount of time of nurse services	(LPN) **$30.44** **$35.84** (RN)

Service / Number of Sites / Geographic Factor	Service Definition Reference Information & Clarifications	Billable Unit	Definition of Unit	Maximum Payment Rate Per Unit of Service (rounded)
Environmental Modifications	Environmental Modifications: 0208 & 0667 waiver definitions	Item	Based upon cost per item.	Actual cost.
Adaptive Equipment	Adaptive Equipment: 0208 & 0667 waiver definitions	Item	Based upon cost per item.	Actual cost.
Speech Therapy	Speech Therapy: 0208, 0667 waiver definitions	Hour	Based upon the amount of time of direct contact with exception noted in definition	**$56.88**
Psychological and Counseling Services	Psychological Services: 0208 waiver definition	Hour	Based upon the amount of time	**$136.59**
Physical Therapy	Physical therapy: 0208, 0667 waiver definitions	Hour	Based upon the amount of time	**$92.88**
Occupational Therapy	Occupational therapy: 0208, 0667 waiver definitions	Hour	Based upon the amount of time	**$92.88**
Nutritionist	Nutritionist services: 0208 waiver definition	Hour	Based upon the amount of time	**$60.44**
Meal Services	Meals: 0208 waiver definition	Per Meal	Based upon the number of meals	**$5.62**

Table # 2 below provides additional information about each waiver service defined above. It includes the additional contract expectations of providers, and clarifies the documentation requirements. Consistent and clear documentation is crucial to demonstrate that services billed for were provided to the individual and that services are resulting in progress toward or achievement of outcomes. Support checklists/shift notes or logs are required for most services as detailed below. A "support checklist" is defined as "notes summarizing staff and the individual's activities including daily living, activities related to the individual's plan of care outcomes, and notes describing other significant events that occurred, if any." Support checklists must be dated, signed and kept in the individual's file. The frequency is either daily or monthly, and frequency is specified for each service type below.

Table #2: Documentation Expectations by Service & Administrative Rule Reference/Authority

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Residential Community Home ALL	Contractors shall meet licensing requirements and provide sufficient numbers of daily staff and materials to meet individual plans of care. For community homes, this shall include awake staff on all shifts	Daily	- Individual Plan of Care; - Daily staff support checklist (shift notes); - individual's attendance records; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan. -Medical group home placements must be approved by the DDP	Assessment of medical or behavior conditions and need for service in plan of care; support checklists (shift notes) describing the activities and support provided; evidence of individual's participation; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation	Daily staff and individuals' attendance records. Daily staff schedules and individuals' assignments. **Daily** support checklists (shift notes). Monthly invoice	Applicable rules 37.34.101 through 37.34. 3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
	where individuals are present. For supported living, contractors shall provide 24 hour on-call staff support.		Medical Director		amount per person.	
Supported Living hourly ALL hourly	Same as above	Direct care Staff Hour	- Individual Plan of Care; - Checklist/log showing the individual and staff presence; - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing dates, times and hours provided and showing whether it was face to face or on behalf of the individual; evidence of the individual's enrollment; evidence of direct care staff's assignment of duties; evidence of direct care staff compensation.	Daily staff checklist/log of activities with or on behalf of each person in service for each day service is provided; Checklist also shows times and hours of service provided; Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34. 3005, 0208 Waiver
Supported Living ALL monthly	Same as above	Enrollment Month	Same as above	Same as above	- Monthly summary of daily staff checklist/logs of activities with or on behalf of the individual for each day service is provided; --- Checklist also shows times and hours of service provided; - Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34. 3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
					-note of at least two face-to-face contacts with the person	
Supported Living ALL SMALL Agency	Same as above	Direct Care Staff Hour	- Individual Plan of Care; - Checklist/log showing individual and staff presence; - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing dates, times and hours provided and showing whether it was face to face or on behalf of the individual; evidence of individual's enrollment; evidence of direct care staff's and agency director's assignment of duties; evidence of direct care staff compensation.	Daily staff checklist/log of activities with or on behalf of each person in service for each day service is provided; Checklist also shows times and hours of service provided by direct care staff and agency director(s); Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Residential Training Support ALL	Same as above	Support Hour	- Individual Plan of Care; - Checklist/log showing the individual and foster family participation; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing days; evidence of individual's enrollment; evidence of direct care staff's and agency director's (if applicable) assignment of duties; evidence of provider's compensation.	Daily staff checklist/log of activities with each person in service for each day service is provided; Start and stop time (shift notes). Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Adult Foster Support ALL	Same as above	Enrollment month	- Individual Plan of Care; - Checklist/log showing the individual's and foster parent participation; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing days; evidence of individual's enrollment; evidence of foster support provider's compensation.	Daily foster parent support notes and individual's attendance records. Daily foster parent support schedule and service individual's assignments. **Daily** support checklists . Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Caregiver Training and Support	Employees shall meet minimum waiver requirements and contractors shall provide sufficient numbers of staff and materials to meet individual plans of care.	Support Hour	- Individual Plan of Care; - Checklist/log showing unpaid caregiver and staff presence; -notes indicating activities on behalf of caregiver and length of time -Invoice or Receipt for registration fees - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing days services are provided; indicate method of monthly contact (phone, visual, face to face, etc) and whether activities are directly with or behalf of the caregiver; evidence of direct care staff's assignment of duties; evidence of staff's compensation.	Daily staff checklist/log of activities with unpaid caregiver for each person in service for each day service is provided; Checklist also shows times and hours of service provided Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Behavioral Support Services	Contractor shall meet minimum	Support	- Individual Plan of Care; - Checklist/log showing individual and staff presence;	Assessment of medical or behavior conditions & need for service in plan of	Daily staff checklist/log of activities with or on behalf of each person in service for each	Applicable rules 37.34.101

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
	waiver training & education requirements	Hour	-notes indicating activities on behalf of the individual and length of time - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	care; support checklists /log showing dates, times and hours provided **and** showing whether it was face to face or on behalf of the individual; staff compensation.	day service is provided; Checklist also shows times and hours of service provided Monthly invoice amount per person	through 37.34.3005, 0208 Waiver
Assisted Living	Contractors shall provide sufficient, qualified numbers of staff and materials to meet individual plans of care on all shifts where individuals are present.	Daily	- Individual Plan of Care; - Checklist/log showing the individual and staff presence; - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions and need for treatment in plan of care; support checklists (shift notes) describing the activities and support provided; evidence of individual's participation; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation;	Daily staff and individual's attendance records. Daily staff schedules and individual's assignments. **Daily** support checklists (shift notes). Monthly invoice amount per person	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Personal Care	Contractor shall provide sufficient qualified direct care staff to meet individual plans of care. Staff must be present and engaged with the individual	Direct care Staff Hour	- Individual Plan of Care that shows current need; - Provider staffing schedule; - Staff contact notes; - Provider payroll records.	Assessment of medical or behavior conditions and need for treatment in plan of care; staff contact notes; evidence of individual's participation; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation	- Staff contact records & attendance documentation per visit showing hours dates, and activities performed for the service. - Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Homemaker	Contractor shall provide sufficient qualified direct care staff to meet individual plans of care.	Direct care Staff Hour or 3rd party fee	- Individual Plan of Care that documents current need; - Staff contact notes; - Individual's attendance records; -Provider staffing schedule; - Provider payroll records. -Evidence of agreement with 3rd party cleaning service if applicable	Assessment of medical or behavior conditions and need for treatment in plan of care; staff contact notes; evidence of individual's participation; evidence of direct care staff presence; evidence of direct care staff compensation. -Invoice from 3rd party company when applicable	Staff records and attendance documentation per visit showing hours, dates, and activities of service. Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Adult Companion	Contractor shall provide sufficient qualified direct care staff to meet individual plans of care.	Direct care Staff Hour	- Individual Plan of Care that documents current need; - Staff contact notes; - Individual's attendance records; -Provider staffing schedule; - Provider payroll records.	Assessment of medical or behavior conditions and need for treatment; staff contact notes; evidence of individual's participation; evidence of direct care staff presence; evidence of direct care staff compensation.	Staff records and attendance documentation per visit showing hours of service and activities. Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Respite	Contractor shall provide sufficient qualified direct care staff to meet individual plans of care. Staff must be present and engaged with individuals.	Direct care Staff Hour or fee by 3rd party	- Individual Plan of Care that documents current need; - Individual's attendance records; - Provider staffing schedule; - Provider payroll records - Evidence of agreement including monthly enrollment fee with 3rd party	Evidence of a record/log that documents each respite visit with a date, start and end time, and the individual's and provider names; evidence of respite worker's wage compensation.	Staff contact records and attendance documentation showing hours of service per event. Monthly invoice amount per person. -Monthly 3rd party fee - negotiated rate not to exceed $14.90 per hour.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Individual Employment Support	Employees shall meet minimum waiver requirements and contractors shall provide sufficient numbers of staff and materials to meet individual plans of care and career plans.	Staff Hour	- Individual Plan of Care; - Checklist/log showing the individual's and staff presence; - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	Assessment of disabling conditions and documentation of anticipated outcomes for day or employment support in the plan of care; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.); evidence of individual's participation; staff support checklist/log showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.	Employment Specialist notes and attendance; documentation per activities with or on behalf of the individual in service; Monthly invoice amount per person	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Co-Worker Support	Employees shall meet minimum waiver requirements	Daily	Individual Plan of Care; - Checklist/log showing the individual 's presence; - Co-worker's payroll records; - Monthly invoice as compared to cost plan.	Assessment of disabling conditions and documentation of anticipated outcomes for day or employment supports in the plan of care; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C.	-Daily checklist noting person's participation at work - Daily verification of co-worker's presence -Brief description of activities performed by Co-Worker	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
				1401 et seq.); evidence of individual's participation; staff support checklist/log showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.	-Monthly invoice amount per person	
Follow Along Support	Contractor must provide sufficient qualified staff to meet individual plans of care and career plans.	Enrollment Month	- Individual Plan of Care; - Career Plan; Individual attendance records; - Staff log of activities; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan.	Assessment of disabling conditions and documentation of anticipated outcomes for day or employment support in the plan of care; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.); evidence of individual's participation; Staff log of activities with or on behalf of each individual showing dates, times and hours spent on each contact, and defining if it was face to face or "on behalf" of-the individual	Employment Specialist notes and attendance documentation per activities with or on behalf of the individual in service; Monthly invoice amount per person. *(Contact requirements vary, e.g.* ***Base = 1*** *contact/month with the individual or employer;* ***Tier 1*** *= at least 2 face to face contacts/month; and* ***Tier 2*** *= at least 4 face to face contacts/ month).*	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Small Group Employment Support - ALL	Contractor must provide sufficient qualified staff to meet individual plans of care and career plans	Daily	- Individual Plan of Care; - Individual attendance records; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan.	Assessment of disabling conditions and need for day or employment support; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.); evidence of individual's participation; staff support checklist/log showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.	Daily staff and individual's attendance records. Daily staff schedules and individual assignments. **Daily staff support checklist/log.** Monthly invoice amount per person	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Day Supports & Activities - ALL	Contractor must provide sufficient qualified staff and materials to meet individual plans of care. Direct care staff time involves both direct engagement with the person as well as training, monitoring, and preparation time.	Daily	- Individual Plan of Care; - Individual attendance records; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan.	Assessment of disabling conditions and documentation of anticipated outcomes for day or employment support in the plan of care; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.); evidence of individual participation; staff support checklist/log	Daily staff and individual attendance records. Daily staff schedules and individual assignments. **Daily staff support checklist/log.** Monthly invoice amount per person	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
				showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.		
Retirement Services - ALL	Contractor must provide sufficient qualified staff and materials to meet individual plans of care. Direct care staff time involves both direct engagement with the person as well as training, monitoring, and preparation time.	Daily	- Individual Plan of Care; - Individual attendance records; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan.	Assessment of disabling conditions and need or choice to receive adult day health supports; evidence of individual's participation; staff support checklist/log showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.	Daily staff and individual's attendance records. Daily staff schedules and individual assignments. **Daily staff support checklist/log.** Monthly invoice amount per person	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Job Discovery	Contractor must provide sufficient qualified staff to meet individual plans of care and career plans	Daily	- Individual Plan of Care; - Individual attendance records; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan.	Assessment of disabling conditions and documentation of anticipated outcomes for day or employment support in the plan of care; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.); evidence of	Daily staff checklist/log of activities with each person in service for each day service is provided; Checklist also shows times and hours of service provided	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
				individual's participation; staff support checklist/log showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.	Monthly invoice amount per person	
Job Preparation - ALL	Contractor must provide sufficient qualified staff and materials to meet individual plans of care. Direct care staff time involves both direct engagement with the person as well as training and monitoring	Daily	- Individual Plan of Care; - Individual attendance records; - Provider staffing schedule; - Provider payroll records; - Invoice as compared to cost plan.	Assessment of disabling conditions and documentation of anticipated outcomes for day or employment support in the plan of care; documentation that the service is not available or is no longer available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.); evidence of consumer participation; staff support checklist/log showing activities; evidence of direct care staff presence and assignment of duties; evidence of direct care staff compensation.	Daily staff and individual attendance records. Daily staff schedules and service individual assignments. **Daily staff support checklist/log.** Monthly invoice amount per person	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Remote Monitoring Equipment	Contractor shall provide sufficient materials to meet	Varies per lease	Individual Plan of Care; -signed consent forms - Record of rental/lease	Lease of equipment must be tied to plan of care;	-Terms of lease agreement, receipt, - monthly invoice from cost plan	Applicable rules 37.34.101 through 37.34.3005,

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
	individual plans of care.		agreement	Evidence of approval and item or service delivery.		0208 Waiver
Remote Monitoring	Contractor shall provide sufficient materials and staff to meet individual plans of care.	Client Hour	Individual Plan of Care -details of hours/times /days the monitoring will occur (schedule); -signed consent forms -staff schedules	Assessment of medical or behavior conditions & need for service per plan of care; checklists /log showing dates, times and hours person is monitored; evidence of staff compensation.	Daily log indicating times and hours each individual was monitored. Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Waiver Children's Case Management (WCCM)	Same as waiver service definition. Contractor must provide sufficient qualified staff to develop, maintain, and track progress toward meeting outcomes in individual plans of care.	15 minutes	Case Management log/notes -individual attendance, Case Management agency payroll records, invoice as compared to cost plan.	Assessment of individual, notes indicating progress in relationship to IFSP, case management checklists/log showing dates, times, and hours provided and whether activities are with or on behalf of the individual; document method of monthly contacts (face-to-face or video conference for example),; evidence of individual participation, evidence of compensation to Case Management employee.	Daily staff checklist/log of activities with or on behalf of each person in service for each day service is provided; Checklist also shows times and hours of service provided; Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Children's Autism Training (CAT)	Contractor must provide sufficient qualified staff to develop, maintain, and		- Individual Plan of Care; - Checklist/log showing individual and staff presence; - Provider staffing	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing dates, times and hours provided;	Daily staff checklist/log of activities with each person in service for each day service is provided;	Applicable rules 37.34.101 through 37.34.3005, 0667 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
	track progress toward meeting outcomes in plans of care	Direct care Staff Hour	schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	evidence of individual's participation; evidence of direct care staff's assignment of duties; evidence of direct care staff compensation.	Checklist also shows times and hours of service provided; Monthly invoice amount per person.	
Program Design & Monitoring	Contractor must provide sufficient qualified staff to develop, maintain, and track progress toward meeting outcomes in plans of care	Direct care Staff Hour	- Individual Plan of Care; - Checklist/log showing individual and staff presence; - Provider staffing schedule; - Provider payroll records; - Monthly invoice as compared to cost plan.	Assessment of medical or behavior conditions & need for service in plan of care; support checklists /log showing dates, times and hours provided and whether activities are with or on behalf of the person; document method of monthly contact (face to face or video conferencing for example), evidence of direct care staff compensation.	Daily staff checklist/log of activities with or on behalf of each person in service for each day service is provided; Checklist also shows hours of service provided; Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0667 Waiver
Community Transition Services		Item cost or Fee	- Individual Plan of Care; - Inventory records; - One-time purchases & all fees cannot exceed $3,000 total	Purchase must be tied to the individual and assessed need at time of placement Evidence of department approval and item delivery.	Current Inventory records, purchase agreement, receipt, or invoice of item(s)	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Individual Goods and Services		Item cost or Fee	- Individual Plan of Care; - Inventory records; - Annual purchases cannot	Purchase must be tied to habilitation objective;		

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
	Contractor shall provide sufficient materials to meet individual plans of care.		exceed $2,000 without additional DDP Regional Manager approval; -Provider methodology of admin fees if applicable -completed IGS Guide documenting the item or service meets waiver criteria. Depending on item, may require denial from State Plan or other sources	Evidence of approval and item or service delivery. -evidence the item or service is not available through State Plan or other sources if applicable -inventory records of purchases for each individual -registration/agreement/ invoice for service	Current Inventory records, purchase agreement, **receipt, or invoice** of item, fee, or service purchased.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Personal Emergency Response System (PERS)	Contractor shall provide sufficient materials to meet individual service plans.	Item cost or Fee	- Individual Plan of Care; - Inventory records; - Depending on item, may require documented denial from State Plan or other sources	Purchase must be tied to habilitation objective; Evidence of department approval and item or service delivery. --evidence the item or service is not available through State Plan or other sources -inventory records of purchases for each individual	Current Inventory records, purchase agreement, receipt, or invoice of item, fee, or service purchased.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Live-In Caregiver	Contractor shall ensure sufficient daily participation by live-in caregiver to meet individual service plans.	Daily	- Individual Plan of Care & service agreement -Checklist/log showing daily contact between the individual and caregiver at the residence -Monthly invoice as compared to cost plan	-Log of contact between the individual and caregiver -Evidence of compliance with responsibilities as outlined in service agreement	Daily contact logs and other activities as outlined in Plan of Care and service agreement Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Personal Supports	Employer shall schedule sufficient qualified staff to meet individual service plans.	Hourly	- Individual Plan of Care; - Checklist/log showing the individual and staff presence; - staffing schedule; - staff payroll records; - Monthly invoice as compared to cost plan.	Evidence of a record/log that documents each personal support visit and general activities with a date, start and end time, the individual's and staff names; evidence of direct care staff compensation.	Daily staff checklist/log of activities with each person in service for each day service is provided; Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Supports Brokerage	Employer shall schedule sufficient qualified staff to meet individual service plans.	Hourly	- Individual Plan of Care; - Checklist/log showing service needs of each individual - staffing schedule; - staff payroll records; - Monthly invoice as compared to cost plan.	Evidence of a record/log that documents each support broker visit and /or general activities with a date, start and end time, and showing whether it was face to face or on behalf of employer; evidence of staff compensation.	Daily checklist/log of activities with or on behalf of employer for each day service is provided; Monthly invoice amount per person.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Transportation	Same as Waiver service definition	Varies. See Table #1	- Individual Plan of Care that documents current need, activities, ride logs	logs of rides given tying to Plan objectives or activities.	Actual mileage, daily rides, weekly rides, and monthly rides depending on the type of transportation. See Table #1	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Private Duty Nursing	Same as waiver service definition.	Hour	Individual Plan of Care and nursing notes, approval by DDP Medical Director if required	Physician's order renewed annually and updated as needed; nursing care plan; treatment notes -documentation that the service is not available or is no longer available	Staff nursing notes and attendance documentation per therapeutic encounter.	Applicable rules 37.34.101 through 37.34.3005,

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
				under a program funded through state plan or other source	Current documented need.	0208 Waiver
Environmental Modifications	Same as waiver service definition.	Item	- Individual Plan of Care approval of item; - If amount exceeds $4,000.00, prior approval from the Department (usually the DDP Regional Manager) is required. -completed Mods/Equip Guide documenting the item or service meets waiver criteria. Depending on item, may require denial from State Plan or other sources	Evidence of prior DDP approval if over $4000. Evidence of delivery of modification.	Current inventory records and receipts, or invoice from contractor. -invoice for date spans of when the service or modification was provided	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Adaptive Equipment	Same as waiver service definition.	Item	Same as above	Evidence of prior DDP approval if over $4000. Evidence of delivery of equipment.	Current inventory records and receipts or invoice from contractor. -invoice for date spans of when the service or modification was provided.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Psychological and Counseling Services	Same as waiver service definition.	Hour	Individual Plan of Care that documents current need. Treatment notes.	Behavioral or mental health assessment; behavior plan; and treatment notes. documentation that the service is not available	Staff treatment notes and documentation of individual's attendance per therapeutic	Applicable rules 37.34.101 through 37.34.3005,

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
				or is no longer available under a program funded through state plan or other source	encounter.	0208 Waiver
Speech Therapy	Same as waiver service definition.	Hour	Individual Plan of Care that documents current need. Treatment notes.	ST assessment; ST care plan; and treatment notes. - documentation that the service is not available or is no longer available under a program funded through state plan or other source	Staff treatment notes and documentation of individual's attendance per therapeutic encounter.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Physical Therapy	Same as waiver service definition.	Hour	Individual Plan of Care that documents current need. Treatment notes.	PT assessment; PT care plan; and treatment notes. documentation that the service is not available or is no longer available under a program funded through state plan or other source	Staff treatment notes and documentation of individual's attendance per therapeutic encounter.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers
Occupational Therapy	Same as waiver service definition.	Hour	Individual Plan of Care that documents current need. Treatment notes.	OT care assessment; OT care plan; and treatment notes. - documentation that the service is not available or is no longer available under a program funded through state plan or other source	Staff treatment notes and documentation of individual's attendance per therapeutic encounter.	Applicable rules 37.34.101 through 37.34.3005, 0208 & 0667 Waivers

Service / Number of Sites / Geographic Factor	State Contract Requirement	Billable Unit	Type of Documentation	Content of Documentation	Frequency of Documentation	Administrative Rule Reference/ Authority
Nutrition Services	Same as waiver service definition.	Hour	Individual Plan of Care that documents current need. Treatment notes.	Dietician assessment; nutrition plan; treatment notes - documentation that the service is not available or is no longer available under a program funded through state plan or other source	Staff treatment notes and documentation of individual's attendance per therapeutic encounter.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver
Meal Services	Same as waiver service definition.	Meal	Individual Plan of Care indicating need for meal services.	Log of meals provided. documentation that the service is not available or is no longer available under a program funded through state plan or other source	Log of meals provided by date.	Applicable rules 37.34.101 through 37.34.3005, 0208 Waiver