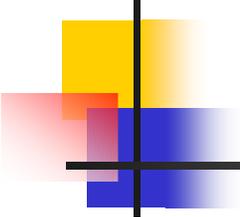


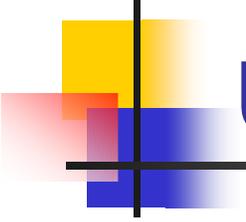
Attendance Based Reimbursement

Department of Developmental
Services



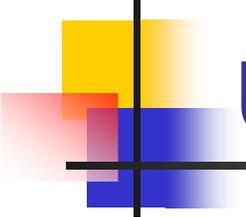
Presentation

- Utilization
- Attendance Based Reimbursement



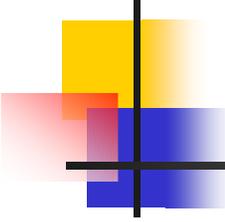
Utilization of Services

- Fee for Service Providers will be reimbursed based on the utilization of the service by the individual.
- Rates for Individualized programs (SEI, Individualized Home Supports and Individualized Day Programs, etc.) are based on an hourly rate that takes into account staff availability, travel and indirect time.
- Rates for Group Day programs have been adjusted to account for the continued staffing requirements when an individual is absent.



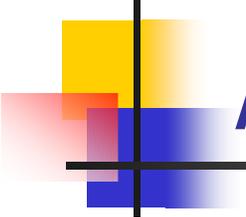
Utilization of Services

- All day rates have been adjusted to compensate providers for a certain amount of days that the person does not attend program.
- From the 260 weekdays in a year. DSO and Sheltered Employment rates are adjusted an additional 35 days to account for holiday, sick and vacation time.
- GSE rates are adjusted the same 35 days plus an additional 5 days to account for the new contract requirement of providing individuals with at least 5 paid vacation days per year.



Attendance Based Reimbursement

- On July 1, 2009 all day providers will be reimbursed based on actual attendance.
- Utilizing the new web based attendance program, DDS will calculate the monthly amount and reimburse providers through the normal electronic fund transfers or check process.
- In order to maintain a positive cash flow and enable the provider to adequately plan for future expenditures, the first payment will be based on an estimated number of days in attendance for the month for each individual. (1/12 of 225)
- Thereafter, the payment will be based on the estimated monthly amount adjusted by the previous months actual attendance.



Attendance Based Reimbursement

- There will be a transition period where provider payments will take into account historical funding levels so as not to create a precipitous change in funding
- A floor will be established to protect providers with historically low funding from losses due to low utilization until they reach a payment at the level of the rates
- A ceiling will be established to assure that providers with historically high funding do not benefit from both a transition factor and high utilization