
Report to
The Vermont Legislature

Specific Home- And Community-Based Service Provider Rate Study Report
In Accordance with Act 185 of 2022, Sec. E.334

Submitted to: **The House Committee on Human Services**
The House Committee on Appropriations
The Senate Committee on Health and Welfare
The Senate Committee on Appropriations

Submitted by: **Andrea De La Bruere, Commissioner**
Department of Vermont Health Access

Prepared by: **Pat Jones, Deputy Director of Payment Reform**
Department of Vermont Health Access

Report Due Date: **February 15th, 2023**

STATUTORY CHARGE AND INTRODUCTION

STATUTORY LANGUAGE:

Act 185 of 2022, Sec. E.334:

SPECIFIC HOME- AND COMMUNITY-BASED SERVICE PROVIDER RATE STUDY; REPORT

(a) The Department of Vermont Health Access, in collaboration with the Department of Disabilities, Aging, and Independent Living, shall conduct a rate study of the Medicaid reimbursement rates paid for adult day, adult day rehabilitation, personal care, and homemaker services.

(b) On or before February 15, 2023, the Department of Vermont Health Access shall report the results of its rate study to the House Committees on Human Services and on Appropriations and the Senate Committees on Health and Welfare and on Appropriations.

INTRODUCTION:

This document constitutes the required report from the Department of Vermont Health Access (DVHA) and the Department of Disabilities, Aging, and Independent Living (DAIL), as required by the statutory language. The report consists of three sections:

1. A summary of the process used for three rate studies: one study encompassing adult day and adult day rehabilitation services; the second study encompassing personal care and homemaker services provided by Home Health Agencies that are a part of the Choices for Care program; and the third study (completed in late 2021 and early 2022) encompassing Assistive Community Care Services (ACCS) and Enhanced Residential Care (ERC). The ACCS and ERC study was not required but is included because it addresses related residential community services delivered to the same population.
2. A summary of the results of the required studies, as well as the ACCS and ERC study.
3. An Appendix that includes detailed results for the Adult Day, Choices for Care, and ACCS and ERC rate studies.

SUMMARY OF RATE STUDY PROCESS

DVHA engaged a contractor, the Burns & Associates division of Health Management Associates (HMA-Burns), to conduct each rate study. DVHA and DAIL worked together with HMA-Burns to:

- Develop and plan the approach to the studies,
- Determine how to effectively engage providers,
- Schedule and conduct planning meetings and provider meetings,
- Create and review initial rate model designs for provider feedback,
- Design provider surveys to obtain additional information,
- Conduct the surveys,
- Refine the rate models based on provider survey results and provider feedback, and
- Finalize the rate models and associated fiscal impact if the new rate models were adopted.

For each study, HMA-Burns described to providers the purpose of the data that was being requested on their costs and how this data would be used to inform assumptions incorporated into new rate models under development.

For the Choices for Care Home Health Agency services study, the provider association and the State team agreed to use a slightly abbreviated process. In lieu of a formal provider survey, the impacted providers were given drafts of new rate models for the services under review. The assumptions built into each rate model were highlighted and reviewed. Then the providers offered feedback on the initial assumptions in the rate models. The services in this rate study included not only the required

personal care services and homemaker services, but also respite/companionship services. DAIL and DVHA included respite and companionship services in the study because these services are often provided by the same staff and sometimes within the same visit. Including all direct care services in the study provided for a more comprehensive review.

The timeline for each study was as follows:

- For ACCS and ERC services: Initial engagement with providers on November 15, 2021; survey released to providers on December 14, 2021; meeting with providers on survey results and new rate models on October 11, 2022. A listing of ACCS and ERC providers can be found here: [RCH List By County \(vermont.gov\)](#). [ALR List by County \(vermont.gov\)](#)
- For Adult Day and Adult Day Rehabilitation Services: Initial engagement with providers on September 15, 2022; meeting with providers on October 14, 2022 to review survey tool; follow-up meeting with providers on November 18, 2022 to review survey results; meeting with providers on December 15, 2022 to review new rate model; meeting with providers to obtain additional feedback on new rate model on January 9, 2023. A listing of Adult Day providers can be found here: [Adult Day Contact Information August 2022.pdf \(vermont.gov\)](#).
- For Choices for Care Personal Care, Homemaker and Respite/Companionship services: Initial engagement with Home Health Agency providers on October 12, 2022; receipt of feedback from providers on draft rate models in mid-December; follow-up meeting with providers on January 5, 2023 to review changes to rate models based on provider feedback. A listing of Choices for Care Home Health Agency providers can be found here: [Home-Health-And-Hospice-Directory.pdf \(vermont.gov\)](#)

SUMMARY OF STUDY RESULTS

KEY ELEMENTS IN ALL RATE STUDIES

For all services examined, rate models were built in a similar manner, incorporating transparency with respect to the assumptions used in each rate model. Key elements in every rate model included the following:

- Delineation of staffing categories that directly support clients, the staff members' annual salaries, and the employee benefit costs for these staff members;
- Where applicable, the annual salaries and employee benefit costs of non-administrative staff members who support the direct care workers (e.g., supervisors);
- An accounting of the time that staff are being paid but are not directly supporting clients (e.g., time receiving training, time traveling from one client's home to another, and paid time off);
- Costs other than salaries and employee benefits that are directly related to delivering the service; and
- Administrative costs incurred by the provider.

For the surveys released to providers for Adult Day/Adult Day Rehabilitation and community residential (ACCS and ERC) services, providers were asked about each of these costs in order to inform the assumptions in each rate model. HMA-Burns typically used the median value reported across all providers for a specific cost element as the basis for the assumptions in the rate model.

It should be noted, however, that for staff personnel costs, the salary assumptions used were not reflective of past or present salaries. Providers in each rate study commented on pressures to attract staff in the current workforce environment. Therefore, the salary costs used were the estimates that each provider gave for what they expect to pay in 2023 to attract new staff.

ADULT DAY AND ADULT DAY REHABILITATION SERVICES

Adult day services are community-based non-residential services designed to assist adults with physical and/or cognitive support needs to remain as active in their communities as possible by maximizing their level of health and independence and ensuring their optimal functioning. Adult day centers provide a safe, supportive environment where participants can receive a

range of professional health, social and therapeutic services, and families/caregivers are provided with respite. Vermont has 11 adult day centers.

The rate paid for Adult Day and Adult Day Rehabilitation is the same for all consumers who receive the service. Providers usually deliver this service up to nine hours per day each weekday excluding holidays. The rate paid per client per hour was \$16.40 as of July 2018. In each subsequent July with the exception of 2020, the rate was increased: 2.0% in July 2019, 0% in July 2020, 3.0% in July 2021, and 8.0% in July 2022. The current rate is \$18.60 per client per hour.

Ten out of 11 current providers responded to the survey. Based on the findings from the survey, DAIL and DVHA built a rate model that assumes, on average, one direct care staff person working with up to four clients at a time. The rate model factors in the costs of these staff members as well as an administrator and kitchen staff. The model also includes the costs of the facility where the Adult Day program is held; program costs for food, recreation, and medication; and additional costs for administrative expenses. When combined, this sums to \$16.95 per client per hour in 2023 dollars. However, DAIL and DVHA scaled up this rate to \$21.33 per client per hour under the assumption that providers are incurring costs but have vacancies 15% of the time (either because clients sometimes do not attend as scheduled or because some clients do not stay for all nine hours of programming each day).

The rate of \$21.33 per client per hour represents a 15% increase over the current rate. In addition to relying on information from the provider survey in the rate model, DAIL and DVHA accepted additional input from providers on most of the assumptions for costs in the rate model, particularly assumptions related to staffing. However, the providers did not agree that the 15% vacancy rate was sufficient (they believe the assumption should be a higher vacancy rate). A higher vacancy rate would increase the rate per hour.

	Current Rate Per Hour	Rate Per Hour From Study	Percent Increase	Estimated Total Required to Fund Increase
Adult Day Health	\$18.60	\$21.33	15%	\$1,060,807

CHOICES FOR CARE HOME HEALTH SERVICES

Choices for Care is a long-term care services program providing care and support to Vermonters at least 18 years old who require nursing home level of care. The program includes home-based services offered by 10 designated Home Health Agencies throughout the state. For most of the last five years, DAIL has set three different rates for personal care, homemaker, and respite/companionship services delivered by home health agencies. In the state fiscal year beginning in July 2019, each rate was increased 2.0% from the prior year. Rates were increased 0% in July 2020, 3.0% in July 2021, and 8.0% in July 2022. An exception is that effective December 1, 2021, the rate for homemaker services actually increased 40% to align it with the rate for personal care services. The current rate for both personal care and homemaker services is \$33.32 per hour; for respite/companionship services, it is \$26.72 per hour (services are billed to and paid by Medicaid in 15-minute increments).

The nine member agencies of VNAs of Vermont and Bayada of Vermont provided feedback on the draft rate models developed by HMA-Burns for DVHA and DAIL.

The rate of \$50.40 for personal care and homemaker represents a 51% increase over the current rate. The rate of \$50.40 for respite/companionship services represents an 89% increase over the current rate. The decision was made to align the rates across these services as they are often provided by the same staff. The final model incorporated recommendations from the VNAs of Vermont and Bayada regarding staffing, wage, and technology cost assumptions. DAIL and DVHA did not incorporate

stakeholder suggestions about additional costs for offsetting bad debt, provider tax obligations, or increased administrative assumptions.

	Current Rate Per Hour	Rate Per Hour from Study	Percent Increase	Estimated Total Required to Fund Increase
Total for Choices for Care				\$8,122,646
Personal Care Service alone	\$33.32	\$50.40	51%	\$6,055,146
Homemaker Service alone	\$33.32	\$50.40	51%	\$664,342
Respite/Companionship Service alone	\$26.72	\$50.40	89%	\$1,403,158

ASSISTIVE COMMUNITY CARE SERVICES AND ENHANCED RESIDENTIAL CARE SERVICES

In SFY 2021, there were more than 90 providers that delivered Assistive Community Care Services. This service provides a community-based residential alternative to a nursing facility. The service is paid on a per diem basis and includes a basic set of services for residential supports. A subset of the providers also delivered Enhanced Residential Care (ERC) services (69 providers in SFY 2021). The ERC service, a service under Choices for Care, is also paid on a per diem basis as an add-on to the ACCS per diem. This service is paid by DAIL, and there are three different per diem rates based on a clinical assessment of the residents' needs.

The ACCS per diem rate was \$42.25 in SFY 2019 and has grown modestly up to \$47.25 per day effective July 1, 2022. The three ERC per diem rates increased at the same rate as other services administered by DAIL in the last four years (2.0% in July 2019, 0% in July 2020, 3.0% in July 2021, and 8.0% in July 2022).

There were 29 out of 96 ACCS providers who responded to the cost survey that was released (representing 52% of annual payments). There were 24 out of 69 ERC providers who responded to the survey (representing 46% of annual payments). Among the ACCS providers, 17 respondents had larger facilities (30 or more residents) while 12 respondents were smaller facilities (fewer than 30 residents).

Based on survey responses, DAIL and DVHA agreed to the following staffing assumptions by level:

	ACCS	ERC Level 1	ERC Level 2	ERC Level 3
Target for 1:1 time with residents each day	0 hours	3.0 hours	4.0 hours	5.0 hours
Assumption of total staff hours per resident per day	1.8 hours	3.0 hours	4.1 hours	5.2 hours
Of total hours above, hours delivered by Personal Care Aides or RNs	1.3 hours	2.5 hours	3.6 hours	4.8 hours

Using these staffing assumptions along with other costs reported by providers to deliver this service, the rates resulting from the rate study are significantly higher than the current rates.

	Current Per Diem Rate	Per Diem Rate from Study	Percent Increase	Estimated Total Required to Fund Increase
ACCS Only	\$47.25	\$84.66	79%	\$13.0 million
ERC Level 1 (includes ACCS rate above)	\$114.81	\$129.99	13%	\$8.7 million for all three ERC levels combined
ERC Level 2 (includes ACCS rate above)	\$123.24	\$168.43	37%	
ERC Level 3 (includes ACCS rate above)	\$131.71	\$210.81	60%	

More detailed information on the rate models can be found in the Appendix, below.

APPENDIX: RATE MODELS

Rate Model for Adult Day Health

blue cells are input assumptions		
green cells are calculation fields		
Assumption for Number of Days Open in the Year		253
Assumption for Number of Maximum Clients Each Day	(1)	28
Assumption for Maximum Hours per Client Each Day	(2)	9
Maximum Client Hours Served Per Day	(3) = (1)*(2)	252
Program Requirement for Staff-to-Client Ratio	1 staff: 7 clients, therefore, 4 staff needed for 28 clients	
Assumption for Staff-to-Client Ratio	1 staff: 4 clients, therefore, 7 staff needed for 28 clients	
SECTION 1: DIRECT STAFF	Assumption is 100% time with clients	7 staff

SECTION 1: DIRECT STAFF THAT WORK WITH CLIENTS

Registered Nurse (40-hour week)	Salary	(4)	\$37.00
	Expressed as an Annual Salary	(5) = (4)*2080	\$76,960
	Employee Benefits Percentage	(6)	39.8%
	Hourly Cost with Employee Benefits	(7) = (4)*(1+(6))	\$51.73
	Assumption of Hours Required for Week	(8)	40.00
	Total Costs for Staff Level for Year	(9) = (7)*(8)	\$107,590
Master's Level Social Worker (40-hour week)	Salary	(10)	\$33.00
	Expressed as an Annual Salary	(11) = (10)*2080	\$68,640
	Employee Benefits Percentage	(12)	41.9%
	Hourly Cost with Employee Benefits	(13) = (10)*(1+(12))	\$46.83
	Assumption of Hours for Week	(14)	40.00
	Total Costs for Staff Level for Year	(15) = (13)*(14)	\$97,400
Activities Coordinator (40-hour week)	Salary	(16)	\$25.00
	Expressed as an Annual Salary	(17) = (16)*2080	\$52,000
	Employee Benefits Percentage	(18)	47.9%
	Hourly Cost with Employee Benefits	(19) = (16)*(1+(18))	\$36.98
	Assumption of Hours for Week	(20)	40.00
	Total Costs for Staff Level for Year	(21) = (19)*(20)	\$76,908
Direct Care Workers (4 total workers 40-hour week)	Salary	(22)	\$20.00
	Expressed as an Annual Salary	(23) = (22)*2080	\$41,600
	Employee Benefits Percentage	(24)	54.2%
	Hourly Cost with Employee Benefits	(25) = (22)*(1+(24))	\$30.84
	Assumption of Hours for Week	(26)	160.00
	Total Costs for Staff Level for Year	(27) = (25)*(26)	\$256,589
Total Direct Staff Costs	Direct Labor Costs at Facility, Annual	(28) = (9)+(15)+(21)+(27)	\$538,487
	Total Client Hours at Full Capacity	(29) = (3) * 253 days	63,756
	Direct Labor Costs Per Client Per Hour	(30) = (28) / (29)	\$8.45

Rate Model for Adult Day Health

blue cells are input assumptions

green cells are calculation fields

SECTION 2: INDIRECT PROGRAM STAFF

Administrator or Program Coordinator	Salary	(31)	\$44.00
	Expressed as an Annual Salary	(32) = (31)*2080	\$91,520
	Employee Benefits Percentage	(33)	37.2%
	Hourly Cost with Employee Benefits	(34) = (31)*(1+(33))	\$60.37
	Assumption of Hours for Week	(35)	40.00
	Annual Cost with Employee Benefits	(36) = (34)*(35)	\$125,565
Kitchen Staff (2 40-hour week workers)	Salary	(37)	\$18.00
	Expressed as an Annual Salary	(38) = (37)*2080	\$37,440
	Employee Benefits Percentage	(39)	57.6%
	Hourly Cost with Employee Benefits	(40) = (37)*(1+(39))	\$28.37
	Assumption of Hours for Week	(41)	80.00
	Hourly Cost with Employee Benefits	(42) = (40)*(41)	\$118,011
Total Indirect Labor Costs	Direct Labor Costs at Facility, Annual	(43)	\$243,576
	Total Annual Client Days at Full Capacity	(44) = (3) * 253 days	63,756
	Indirect Labor Costs Per Client Per Hour	(45) = (43) / (44)	\$3.82

SECTION 3: FACILITY COSTS

Facility Costs	Assumption of Square Footage	(46)	8,400
	Cost Per Square Foot, Mortgage or Rent	(47)	\$11.00
	Total Annual Building Mortgage or Rent	(48) = (46) * (47)	\$92,400
	Total Annual Costs for Building Utilities	(49)	\$9,492
	Total Annual Costs for Repairs & Maintenance	(50)	\$7,560
	Total Annual Facility Costs	(51) = (48)+(49)+(50)	\$109,452
	Total Annual Client Days at Full Capacity	(52) = (3) * 253 days	63,756
	Facility Costs Per Client Per Hour	(53) = (51) / (52)	\$1.72

SECTION 4: PROGRAM EXPENSES

Program Costs excluding Admin	Costs Per Client Hour for Food	(54)	\$1.16
	Costs Per Client Hour for Recreation	(55)	\$0.26
	Costs Per Client Hour for Medication	(56)	\$0.08
	Program Costs Per Client Per Hour	(57) = (54)+(55)+(56)	\$1.51
Non-Administrative	TOTAL LABOR, FACILITY & PROGRAM Per Hour	(58) = (30)+(45)+(53)+(57)	\$15.50

SECTION 5: ADMINISTRATIVE EXPENSES

Administrative	Assumption for Administrative Expenses	(59)	17.0%
	Administrative Costs Per Client Per Hour	(60) = (58) * (59)	\$2.63
Final Rate 85% Full Capacity Assumption	Total Costs Per Client Per Hour, 100% Fill Rate	(61) = (58) + (60)	\$18.13
			85%
	Rate if Clients Attend at 85% of Full Capacity		\$21.33
	Current Rate Per Hour		\$18.60
	Percent Difference: Model vs Current Rate		15%

Rate Model for Choices for Care Services Delivered by Home Health Agencies

		Choices for Care
	green cells are calculation fields	Includes Personal Care, Homemaker, and Respite
Unit of Service		per 15 min
Current Billing Code		Billing Codes 072,073,095
Direct Care Position	Salary of Staff Person	(1) \$21.00
	Expressed as an Annual Salary	(2) = (1)*2080 \$43,680
	Employee Benefits Percentage	(3) 47.2%
	Hourly Cost with Employee Benefits, before Productivity Assumption	(4) = (1)*(1+(3)) \$30.92
	<i>Assumptions for Client-Facing Time</i>	
	Total Hours	(5) 40.00
	- Travel Time to/from Clients (non-billable)	(6) 4.00
	- Coordination and Collateral Contacts (non-billable)	(7) 1.00
	- One-on-One Time with Supervisor	(8) 0.50
	- Training	(9) 0.50
	"Billable" Hours	(10) = (5) - (6)to(9) 34.00
Productivity Adjustment for Client-Facing Time	(11) = (5) / (10) 1.18	
Direct Staff Cost After Productivity Adjustment, per Billable Hour	(12) = (4) * (11) \$36.49	
Supervisor Position	Salary of Supervisor	(13) \$36.00
	Expressed as an Annual Salary	(14) = (13)*2080 \$74,880
	Employee Benefits Percentage	(15) 36.0%
	Hourly Cost with Employee Benefits	(16) = (13)*(1+(15)) \$48.96
	- Hours of Supervision Per Staff Person Per Week	(17) 0.5
	Supervisor Position Cost per Staff Person Per Week	(18) = (16) * (17) \$24.48
	Billable Hours per Staff Person Per Week	(19) 34.0
Supervisor Cost per Client per Hour	(20) = (18) / (19) \$0.72	
Scheduler Position	Salary of Scheduler	(21) \$22.00
	Expressed as an Annual Salary	(22) = (21)*2080 \$45,760
	Employee Benefits Percentage	(23) 46.0%
	Hourly Cost with Employee Benefits	(24) = (21)*(1+(23)) \$32.12
	Expressed as an Annual Salary	(25) \$66,810
	Assumption for Number of Staff that Scheduler Supports	(26) 15
Billable Hours for All Client-Facing Staff for Year	(27)=(26)*(10)*52 wks 26,520.0	
Scheduler Cost per Client per Hour	(28) = (25) / (27) \$2.52	
EVV Costs	EVV costs per client-facing staff per month	(29) \$45.00
	Assumption for Number of Client-Facing Staff	(30)=(26) 15
	Annual EVV Costs	(31)=(29)*(30)*12 mo \$8,100
	Billable Hours for All Client-Facing Staff for Year	(32)=(30)*(10)*52 wks 26,520.0
EVV Cost per Client per Hour	(33) = (31) / (32) \$0.31	
Mileage Reimburse	Number of Miles Driven Per Week	(34) 140.0
	Federal Mileage Reimbursement	(35) \$0.655
	Rate Mileage Costs Per Week	(36)=(34)*(35) 91.7
	Costs Per Billable Hours Per Week	(37) = (36) / (10) \$2.70
Program	Hours of Training for Each Staff Member Per Year	(38) 12
	Hourly Cost to Administer Training	(39) \$50.00
	Training Costs	(40) = (38)*(39) \$600.00
	Billable Hours per Year	(41) = (10) * 52 weeks 1,768.0
Training Cost per Client per Hour	(42) = (40) / (41) \$0.34	
	TOTAL COSTS BEFORE ADMIN	(43) = (12)+(20)+(28)+(33)+(37)+(42) \$43.07
Admin	Assumption for Administrative Expenses	(44) 17.0%
	Administrative Costs Per Client Per Hour	(45) = (43) * (44) \$7.33
	Rate Per Client Hour	(46) = (43) + (45) \$50.40
	Rate Per Client Per 15 Minutes	Hourly Rate / 4 \$12.60
	Current Rate Per 15 Minutes	\$8.33
	Percent Difference: Model vs Current Rate	51.2%

Rate Models for Assistive Community Care Services & Enhanced Residential Care

			ACCS Only	ERC Tier 1	ERC Tier 2	ERC Tier 3
Current Billing Code			098	098 & 092	098 & 093	098 & 094
Assumption for Number of Residents in Home			16	16	16	16
			(1)			
House Manager	Salary	(2)	\$20.54	\$20.54	\$20.54	\$20.54
	Expressed as an Annual Salary	(3) = (2) *2080	\$42,723	\$42,723	\$42,723	\$42,723
	Employee Benefits Percentage	(4)	49.1%	49.1%	49.1%	49.1%
	Hourly Cost with Employee Benefits	(5) = (2)+(1+(4))	\$30.63	\$30.63	\$30.63	\$30.63
	Assumption of Hours for Week	(6)	40.00	40.00	40.00	40.00
	Total Costs for Staff Level for Week	(7) = (5) * (6)	\$1,225.01	\$1,225.01	\$1,225.01	\$1,225.01
Personal Care Aide	Salary	(8)	\$16.05	\$16.05	\$16.05	\$16.05
	Expressed as an Annual Salary	(9) = (8) *2080	\$33,378	\$33,378	\$33,378	\$33,378
	Employee Benefits Percentage	(10)	56.6%	56.6%	56.6%	56.6%
	Hourly Cost with Employee Benefits	(11) = (8)+(1+(10))	\$25.13	\$25.13	\$25.13	\$25.13
	Assumption of Hours for Week	(12)	133.28	258.72	370.72	492.80
	Total Costs for Staff Level for Week	(13) = (11) * (12)	\$3,349.33	\$6,501.64	\$9,316.20	\$12,384.08
Registered Nurse	Salary	(14)	\$45.02	\$45.02	\$45.02	\$45.02
	Expressed as an Annual Salary	(15) = (14) *2080	\$93,642	\$93,642	\$93,642	\$93,642
	Employee Benefits Percentage	(16)	32.6%	32.6%	32.6%	32.6%
	Hourly Cost with Employee Benefits	(17) = (14)+(1+(16))	\$59.70	\$59.70	\$59.70	\$59.70
	Assumption of Hours for Week	(18)	16.00	24.00	32.00	40.00
	Total Costs for Staff Level for Week	(19) = (17) * (18)	\$955.14	\$1,432.72	\$1,910.29	\$2,387.86
Support Coordinator	Salary	(20)	\$34.57	\$34.57	\$34.57	\$34.57
	Expressed as an Annual Salary	(21) = (20) *2080	\$71,903	\$71,903	\$71,903	\$71,903
	Employee Benefits Percentage	(22)	36.9%	36.9%	36.9%	36.9%
	Hourly Cost with Employee Benefits	(23) = (20)+(1+(22))	\$47.32	\$47.32	\$47.32	\$47.32
	Assumption of Hours for Week	(24)	7.38	9.23	11.08	14.77
	Total Costs for Staff Level for Week	(25) = (23) * (24)	\$349.47	\$436.84	\$524.21	\$698.95
Total Labor	Hours at Residential Facility, Weekly	(26) = (6)+(12)+(18)+(24)	196.66	331.95	453.80	587.57
	Average Hours Per Client Per Week	(27) = (26) / (1)	12.3	20.7	28.4	36.7
	Average Hours Per Client Per Day	(28) = (27) / 7 days	1.8	3.0	4.1	5.2
	Labor Costs at Residential Facility, Weekly	(29) = (7)+(13)+(19)+(25)	\$5,879	\$9,596	\$12,976	\$16,696
	Average Cost Per Client Per Week	(30) = (29) / (1)	\$367	\$600	\$811	\$1,043
	Labor Costs Per Client Per Day	(31) = (30) / 7 days	\$52.49	\$85.68	\$115.85	\$149.07
	Weighted Average Labor Cost Per Hour	(32) = (29) / (26)	\$29.89	\$28.91	\$28.59	\$28.42

Rate Models for Assistive Community Care Services & Enhanced Residential Care

			ACCs Only	ERC Tier 1	ERC Tier 2	ERC Tier 3
Current Billing Code			098	098 & 092	098 & 093	098 & 094
Assumption for Number of Residents in Home		(1)	16	16	16	16
				ADL Level 1	ADL Level 2	ADL Level 2
Transportation	Federal Mileage Reimbursement Rate	(33)	\$0.625	0.625	0.625	0.625
	Total Miles Driven Per Week	(34)	200	200	200	200
	Weekly Transportation Costs, Non Labor	(35) = (33) * (34)	\$125.00	\$125.00	\$125.00	\$125.00
	Driver Salary	(36)	\$19.06	\$19.06	\$19.06	\$19.06
	Expressed as an Annual Salary	(37) = (36) * 2080	\$39,647	\$39,647	\$39,647	\$39,647
	Employee Benefits Percentage	(38)	50.7%	50.7%	50.7%	50.7%
	Hourly Cost with Employee Benefits	(39) = (36)+(1+(38))	\$28.72	\$28.72	\$28.72	\$28.72
	Assumption of Hours for Week Total	(40)	40.00	40.00	40.00	40.00
	Transportation Labor for Week	(41) = (39) * (40)	\$1,148.99	\$1,148.99	\$1,148.99	\$1,148.99
	Weekly Transportation Costs, Labor + Non Labor	(42) = (35) + (55)	\$1,273.99	\$1,273.99	\$1,273.99	\$1,273.99
Average Cost Per Client Per Week	(43) = (42) / (1)	\$79.62	\$79.62	\$79.62	\$79.62	
Transportation Costs Per Client Per Day	(44) = (43) / 7 days	\$11.37	\$11.37	\$11.37	\$11.37	
Program Expenses	Weighted Average Labor Cost Per Hour	(45) = (32)	\$29.89	\$28.91	\$28.59	\$28.42
	Total Annual Training Hours Given, All Staff	(46)	12	16	18	20
	Total Annual Training Costs, Staff Time to Attend	(47) = (45) * (46)	\$630	\$1,371	\$2,085	\$2,981
	Total Annual Costs to Administer Training	(48)	\$2,000	\$3,000	\$4,000	\$5,000
	Total Annual Costs for Quality Assurance	(49)	\$6,000	\$8,000	\$10,000	\$12,500
	Program Costs Per Client Per Day (excl Room & Board)	(50)	\$2.50	\$5.00	\$5.00	\$5.00
	Annual Program Costs Other than Room & Board	(51) = (50) * (53)	\$14,600	\$29,200	\$29,200	\$29,200
	Total Annual Costs for Program Expenses	(52) = (48)+(49)+(51)	\$23,230	\$41,571	\$45,285	\$49,681
	Total Annual Patient Days at Full Capacity	(53) = (1) * 365 days	5,840	5,840	5,840	5,840
Program Costs Per Client Per Day	(54) = (52) / (53)	\$3.98	\$7.12	\$7.75	\$8.51	
Non-Administrative	TOTAL LABOR, TRANSPORTATION & PROGRAM	(55) = (31) + (44) + (54)	\$67.84	\$104.17	\$134.98	\$168.95
Administrative	Assumption for Administrative Expenses	(56)	17.0%	17.0%	17.0%	17.0%
	Administrative Costs Per Client Per Day	(57) = (55) * (56)	\$11.53	\$17.71	\$22.95	\$28.72
Final Rate with Vacancy Assumption	Total Costs Per Client Per Day	(58) = (55) + (57)	\$79.38	\$121.88	\$157.93	\$197.67
	Assumption for Vacancy (1 bed unfilled each day)	(59)	93.75%	93.75%	93.75%	93.75%
	Imputed Rate to Account for Vacancy	(60) = (58) / (59)	\$84.67	\$130.01	\$168.46	\$210.85
	Rate Eff July 1, 2022- ACCS	(61)	\$47.25	\$47.25	\$47.25	\$47.25
	Rate Eff July 1, 2022- ERC	(62)	\$0.00	\$67.56	\$75.99	\$84.46
	Current Rate- Combined	(63) = (61) + (62)	\$47.25	\$114.81	\$123.24	\$131.71
	Change from Current Combined Rate	(64) = (60) - (63)	\$37.42	\$15.20	\$45.22	\$79.14
	Pct Change from Current Combined Rate	(65) = ((60)-(63))/(63)	79.2%	13.2%	36.7%	60.1%