This document is a draft copy of the Renewal Application for OPWDD's Comprehensive Home and Community Based Services Waiver. Once approved by the Centers of Medicare and Medicaid Services (CMS), this application will be effective October 1, 2014 through September 30, 2019. A full copy of the Renewal application can be viewed here.

Most of the provisions included in this draft Agreement were already established in the most recent Amendment to the Waiver (Amendment 07). A copy of Amendment 07 was approved in September 2015 and is available on the OPWDD website. Amendment 07 can be viewed at this site: http://www.opwdd.ny.gov/node/6216.

Important changes in the Renewal include an update to the Home and Community Based Services Transition Plan. The Renewal also implements a new fee methodology for Respite Services in 2016 and describes a multi-year transition process. OPWDD and DOH will continue to work with stakeholders regarding the Respite transition. The Renewal also proposes a new methodology for providing funding to agencies that are serving people with high staffing needs. This funding would be made available until such time as an agency's cost reporting reflected the costs of serving this individual. Also, the Renewal integrates changes needed to reflect care management provided by the Fully Integrated Duals Advantage Plan for Individuals with Intellectual and Developmental Disabilities (FIDA-IDD). The FIDA-IDD is a voluntary managed care opportunity for Individuals with IDD who are eligible for both Medicare and Medicaid and live in a nine-county Downstate area. More Information is available at this link: http://www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/care_management/FIDA_IDD

OPWDD invites the public to comment on the Renewal Application by e-mail from Wednesday, December 23, 2015 through March 4, 2016. Comments may be submitted to peoplefirstwaiver@opwdd.ny.gov.

**Please note: The highlighted information throughout the document indicates the selection of a specific check box or circle.*

Application for a §1915(c) Home and Community-Based Services Waiver

PURPOSE OF THE HCBS WAIVER PROGRAM

The Medicaid Home and Community-Based Services (HCBS) waiver program is authorized in §1915(c) of the Social Security Act. The program permits a State to furnish an array of home and community-based services that assist Medicaid beneficiaries to live in the community and avoid institutionalization. The State has broad discretion to design its waiver program to address the needs of the waiver's target population. Waiver services complement and/or supplement the services that are available to participants through the Medicaid State plan and other federal, state and local public programs as well as the supports that families and communities provide.

The Centers for Medicare & Medicaid Services (CMS) recognizes that the design and operational features of a waiver program will vary depending on the specific needs of the target population, the resources available to the State, service delivery system structure, State goals and objectives, and other factors. A State has the latitude to design a waiver program that is cost-effective and employs a variety of service delivery approaches, including participant direction of services.

Request for a Renewal to a §1915(c) Home and Community-Based Services Waiver

1. Major Changes

The Office for People With Developmental Disabilities (OPWDD) waiver renewal for 2014-19 continues the implementation of the fiscal reforms approved in prior amendments to the waiver. This application also lays out the State's plan for implementing an HCBS setting transition plan. In addition, this renewal integrates the Fully Integrated Duals Advantage Plan for Individuals with Intellectual and Developmental Disabilities (FIDA-IDD). The FIDA-IDD is a Duals Demonstration Plan that will begin voluntary enrollment of eligible individuals on April 1, 2016.

Application for a §1915(c) Home and Community-Based Services Waiver

1. Request Information (1 of 3)

A. The **State** of **New York** requests approval for a Medicaid home and community-based services (HCBS) waiver under the authority of §1915(c) of the Social Security Act (the Act).

B. Program Title (*optional - this title will be used to locate this waiver in the finder*):
NYS OPWDD Comprehensive Renewal Waiver

C. Type of Request: renewal

Requested Approval Period:*(For new waivers requesting five year approval periods, the waiver must serve individuals who are dually eligible for Medicaid and Medicare.)*

○ **3 years** ◉ **5 years**

Original Base Waiver Number: NY.0238
Waiver Number:NY.0238.R
Draft ID: NY.021.0

D. Type of Waiver *(select only one):*

Regular Waiver

E. Proposed Effective Date of Waiver ***(mm/dd/yy)***

10/01/14

1. Request Information (2 of 3)

F. Level(s) of Care. This waiver is requested in order to provide home and community-based waiver services to individuals who, but for the provision of such services, would require the following level(s) of care, the costs of which would be reimbursed under the approved Medicaid State plan (*check each that applies*):

☐ **Hospital**

Select applicable level of care

○ **Hospital as defined in 42 CFR §440.10**
If applicable, specify whether the State additionally limits the waiver to subcategories of the hospital level of care:

○ **Inpatient psychiatric facility for individuals age 21 and under as provided in42 CFR §440.160**

Nursing Facility

Select applicable level of care

○ **Nursing Facility as defined in 42 CFR 440.40 and 42 CFR 440.155**
If applicable, specify whether the State additionally limits the waiver to subcategories of the nursing facility level of care:

Institution for Mental Disease for persons with mental illnesses aged 65 and older as provided in 42 CFR §440.140

Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) (as defined in 42 CFR §440.150)

If applicable, specify whether the State additionally limits the waiver to subcategories of the ICF/IID level of care:

1. Request Information (3 of 3)

G. Concurrent Operation with Other Programs. This waiver operates concurrently with another program (or programs) approved under the following authorities

Select one:

- **Not applicable**
- **Applicable**

Check the applicable authority or authorities:

- **Services furnished under the provisions of §1915(a)(1)(a) of the Act and described in Appendix I**
- **Waiver(s) authorized under §1915(b) of the Act.**

  Specify the §1915(b) waiver program and indicate whether a §1915(b) waiver application has been submitted or previously approved:

  Specify the §1915(b) authorities under which this program operates *(check each that applies):*

  - **§1915(b)(1) (mandated enrollment to managed care)**
  - **§1915(b)(2) (central broker)**
  - **§1915(b)(3) (employ cost savings to furnish additional services)**
  - **§1915(b)(4) (selective contracting/limit number of providers)**
- **A program operated under §1932(a) of the Act.**

  Specify the nature of the State Plan benefit and indicate whether the State Plan Amendment has been submitted or previously approved:
- **A program authorized under §1915(i) of the Act.**
- **A program authorized under §1915(j) of the Act.**
- **A program authorized under §1115 of the Act.**

  Specify the program:

H. Dual Eligiblity for Medicaid and Medicare.

Check if applicable:

- **This waiver provides services for individuals who are eligible for both Medicare and Medicaid.**

2. Brief Waiver Description

Brief Waiver Description. *In one page or less*, briefly describe the purpose of the waiver, including its goals, objectives, organizational structure (e.g., the roles of state, local and other entities), and service delivery methods.

Purpose, Goals, and Objectives:

The New York State Office for People with Developmental Disabilities (NYS-OPWDD) HCBS Waiver was initiated in 1991 creating a new service provision model that encouraged increased use of community resources to meet the needs and enrich the lives of persons with developmental disabilities. The initial goal of the waiver was to serve more people with a wider range of community-based services that were more individualized and less expensive than institutional care. This goal continues to be a central focus of OPWDD's waiver which today continues to provide the framework within which individualization and "putting people first" have been put into practice.

Waiver participants, their families, the non-profit provider community and state authorities continue to collaborate to create a person-centered service environment that is innovative and focused on community resources and self-direction principles.

OPWDD's customers have made it clear that they want a "life, not a "program" and a real life is based on four primary person centered outcomes that support OPWDD's mission of "helping people lead richer lives". An important goal of OPWDD's HCBS waiver is to facilitate these outcomes for participants:

a) to live in the home of their choice;
b) to work or engage in activities that contribute to the community;
c) to have meaningful relationships; and

d) to have good health.

OPWDD's 2014 HCBS waiver renewal continued to build on this foundation to provide participants with a life that offers person centered and individualized alternatives and to enable people to lead more typical lives in their communities. The HCBS waiver renewal continued to offer more choice, control and community membership through currently approved waiver services and service modifications.

Waiver Organizational Structure:

OPWDD is the waiver's operating agency and works with the New York State Department of Health (DOH), the single state Medicaid agency. As the single state Medicaid agency, DOH maintains oversight responsibility as expressly identified in a memorandum of understanding (MOU) between OPWDD and DOH described in Appendix A, Waiver Administration and Operation. OPWDD has a central office in Albany, and Regional Offices (formerly known as Developmental Disability Services Offices-DDSOs) which are geographically dispersed throughout New York State. OPWDD Regional Offices play a central role in the HCBS waiver by continuing to provide direct waiver residential and day services where needed and to oversee and provide assistance to non-profit organizations that serve waiver enrollees in their geographic catchment areas.

OPWDD is supported by more than 500 non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, and organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.
Providers range from relatively small organizations that provide one or two services to large agencies that are authorized to provide every waiver service and support hundreds of people.

Services are delivered in various ways in accordance with the needs of the waiver participants. Approximately 50 percent of waiver enrollees live in their own home or family home where they receive services that enable them to live as independently as possible and work or engage in meaningful activities in their communities. Many of the participants have intermittent waiver supports such as staff that come to their residence a few days or hours per week. Other participants have greater needs. They may have 24/7 staffing in a certified residence and use an intensive day service such as day habilitation five days per week.

Wherever a person lives, works or interacts with the community, OPWDD uses the waiver with natural supports and community-based resources to allow the participant to be as independent, and when possible as self-directing, as he or she can possibly be.

The renewal will include necessary changes to implement a FIDA-IDD. The FIDA-IDD (Fully Integrated Duals Advantage for Individuals with Intellectual and Developmental Disabilities) is a purely voluntary managed care plan that will be operational in 2016 in nine Down-state counties.

3. Components of the Waiver Request

The waiver application consists of the following components. *Note: Item 3-E must be completed.*

A. **Waiver Administration and Operation. Appendix A** specifies the administrative and operational structure of this waiver.

B. **Participant Access and Eligibility. Appendix B** specifies the target group(s) of individuals who are served in this waiver, the number of participants that the State expects to serve during each year that the waiver is in effect, applicable Medicaid eligibility and post-eligibility (if applicable) requirements, and procedures for the evaluation and reevaluation of level of care.

C. **Participant Services. Appendix C** specifies the home and community-based waiver services that are furnished through the waiver, including applicable limitations on such services.

D. **Participant-Centered Service Planning and Delivery. Appendix D** specifies the procedures and methods that the State uses to develop, implement and monitor the participant-centered service plan (of care).

E. **Participant-Direction of Services.** When the State provides for participant direction of services, **Appendix E** specifies the participant direction opportunities that are offered in the waiver and the supports that are available to participants who direct their services. (*Select one*):

- (●) **Yes. This waiver provides participant direction opportunities.** *Appendix E is required.*
- ( ) **No. This waiver does not provide participant direction opportunities.** *Appendix E is not required.*

F. **Participant Rights. Appendix F** specifies how the State informs participants of their Medicaid Fair Hearing rights and other procedures to address participant grievances and complaints.

G. **Participant Safeguards. Appendix G** describes the safeguards that the State has established to assure the health and welfare of waiver participants in specified areas.

H. **Quality Improvement Strategy. Appendix H** contains the Quality Improvement Strategy for this waiver.

I. **Financial Accountability. Appendix I** describes the methods by which the State makes payments for waiver services, ensures the integrity of these payments, and complies with applicable federal requirements concerning payments and federal financial participation.

J. **Cost-Neutrality Demonstration. Appendix J** contains the State's demonstration that the waiver is cost-neutral.

4. Waiver(s) Requested

A. **Comparability.** The State requests a waiver of the requirements contained in §1902(a)(10)(B) of the Act in order to provide the services specified in **Appendix C** that are not otherwise available under the approved Medicaid State plan to individuals who: (a) require the level(s) of care specified in Item 1.F and (b) meet the target group criteria specified in **Appendix B**.

B. **Income and Resources for the Medically Needy.** Indicate whether the State requests a waiver of §1902(a)(10)(C)(i)(III) of the Act in order to use institutional income and resource rules for the medically needy *(select one)*:

- ○ **Not Applicable**
- ○ **No**
- ◉ **Yes**

C. **Statewideness.** Indicate whether the State requests a waiver of the statewideness requirements in §1902(a)(1) of the Act *(select one)*:

- ◉ **No**
- ○ **Yes**

If yes, specify the waiver of statewideness that is requested *(check each that applies)*:

☐ **Geographic Limitation.** A waiver of statewideness is requested in order to furnish services under this waiver only to individuals who reside in the following geographic areas or political subdivisions of the State.
Specify the areas to which this waiver applies and, as applicable, the phase-in schedule of the waiver by geographic area:

☐ **Limited Implementation of Participant-Direction.** A waiver of statewideness is requested in order to make *participant-direction of services* as specified in **Appendix E** available only to individuals who reside in the following geographic areas or political subdivisions of the State. Participants who reside in these areas may elect to direct their services as provided by the State or receive comparable services through the service delivery methods that are in effect elsewhere in the State.
Specify the areas of the State affected by this waiver and, as applicable, the phase-in schedule of the waiver by geographic area:

5. Assurances

In accordance with 42 CFR §441.302, the State provides the following assurances to CMS:

A. **Health & Welfare:** The State assures that necessary safeguards have been taken to protect the health and welfare of persons receiving services under this waiver. These safeguards include:

1. As specified in **Appendix C**, adequate standards for all types of providers that provide services under this waiver;
2. Assurance that the standards of any State licensure or certification requirements specified in **Appendix C** are met for services or for individuals furnishing services that are provided under the waiver. The State assures that these requirements are met on the date that the services are furnished; and,
3. Assurance that all facilities subject to §1616(e) of the Act where home and community-based waiver services are provided comply with the applicable State standards for board and care facilities as specified in **Appendix C**.

B. **Financial Accountability.** The State assures financial accountability for funds expended for home and community-based services and maintains and makes available to the Department of Health and Human Services (including the Office of the Inspector General), the Comptroller General, or other designees, appropriate financial records documenting the cost of services provided under the waiver. Methods of financial accountability are specified in **Appendix I**.

C. **Evaluation of Need:** The State assures that it provides for an initial evaluation (and periodic reevaluations, at least annually) of the need for a level of care specified for this waiver, when there is a reasonable indication that an individual might need such services in the near future (one month or less) but for the receipt of home and community-based services under this waiver. The procedures for evaluation and reevaluation of level of care are specified in **Appendix B**.

D. Choice of Alternatives: The State assures that when an individual is determined to be likely to require the level of care specified for this waiver and is in a target group specified in **Appendix B**, the individual (or, legal representative, if applicable) is:

1. Informed of any feasible alternatives under the waiver; and,
2. Given the choice of either institutional or home and community-based waiver services. **Appendix B** specifies the procedures that the State employs to ensure that individuals are informed of feasible alternatives under the waiver and given the choice of institutional or home and community-based waiver services.

E. **Average Per Capita Expenditures:** The State assures that, for any year that the waiver is in effect, the average per capita expenditures under the waiver will not exceed 100 percent of the average per capita expenditures that would have been made under

the Medicaid State plan for the level(s) of care specified for this waiver had the waiver not been granted. Cost-neutrality is demonstrated in **Appendix J**.

F. **Actual Total Expenditures:** The State assures that the actual total expenditures for home and community-based waiver and other Medicaid services and its claim for FFP in expenditures for the services provided to individuals under the waiver will not, in any year of the waiver period, exceed 100 percent of the amount that would be incurred in the absence of the waiver by the State's Medicaid program for these individuals in the institutional setting(s) specified for this waiver.

G. **Institutionalization Absent Waiver:** The State assures that, absent the waiver, individuals served in the waiver would receive the appropriate type of Medicaid-funded institutional care for the level of care specified for this waiver.

H. **Reporting:** The State assures that annually it will provide CMS with information concerning the impact of the waiver on the type, amount and cost of services provided under the Medicaid State plan and on the health and welfare of waiver participants. This information will be consistent with a data collection plan designed by CMS.

I. **Habilitation Services.** The State assures that prevocational, educational, or supported employment services, or a combination of these services, if provided as habilitation services under the waiver are: (1) not otherwise available to the individual through a local educational agency under the Individuals with Disabilities Education Act (IDEA) or the Rehabilitation Act of 1973; and, (2) furnished as part of expanded habilitation services.

J. **Services for Individuals with Chronic Mental Illness.** The State assures that federal financial participation (FFP) will not be claimed in expenditures for waiver services including, but not limited to, day treatment or partial hospitalization, psychosocial rehabilitation services, and clinic services provided as home and community-based services to individuals with chronic mental illnesses if these individuals, in the absence of a waiver, would be placed in an IMD and are: (1) age 22 to 64; (2) age 65 and older and the State has not included the optional Medicaid benefit cited in 42 CFR §440.140; or (3) age 21 and under and the State has not included the optional Medicaid benefit cited in 42 CFR § 440.160.

6. Additional Requirements

Note: Item 6-I must be completed.

A. **Service Plan**. In accordance with 42 CFR §441.301(b)(1)(i), a participant-centered service plan (of care) is developed for each participant employing the procedures specified in **Appendix D**. All waiver services are furnished pursuant to the service plan. The service plan describes: (a) the waiver services that are furnished to the participant, their projected frequency and the type of provider that furnishes each service and (b) the other services (regardless of funding source, including State plan services) and informal supports that complement waiver services in meeting the needs of the participant. The service plan is subject to the approval of the Medicaid agency. Federal financial participation (FFP) is not claimed for waiver services furnished prior to the development of the service plan or for services that are not included in the service plan.

B. **Inpatients**. In accordance with 42 CFR §441.301(b)(1)(ii), waiver services are not furnished to individuals who are in-patients of a hospital, nursing facility or ICF/IID.

C. **Room and Board**. In accordance with 42 CFR §441.310(a)(2), FFP is not claimed for the cost of room and board except when: (a) provided as part of respite services in a facility approved by the State that is not a private residence or (b) claimed as a portion of the rent and food that may be reasonably attributed to an unrelated caregiver who resides in the same household as the participant, as provided in **Appendix I**.

D. **Access to Services**. The State does not limit or restrict participant access to waiver services except as provided in **Appendix C**.

E. **Free Choice of Provider**. In accordance with 42 CFR §431.151, a participant may select any willing and qualified provider to furnish waiver services included in the service plan unless the State has received approval to limit the number of providers under the provisions of §1915(b) or another provision of the Act.

F. **FFP Limitation**. In accordance with 42 CFR §433 Subpart D, FFP is not claimed for services when another third-party (e.g., another third party health insurer or other federal or state program) is legally liable and responsible for the provision and payment of the service. FFP also may not be claimed for services that are available without charge, or as free care to the community. Services will not be considered to be without charge, or free care, when (1) the provider establishes a fee schedule for each service available and (2) collects insurance information from all those served (Medicaid, and non-Medicaid), and bills other legally liable third party insurers. Alternatively, if a provider certifies that a particular legally liable third party insurer does not pay for the service(s), the provider may not generate further bills for that insurer for that annual period.

G. **Fair Hearing:** The State provides the opportunity to request a Fair Hearing under 42 CFR §431 Subpart E, to individuals: (a) who are not given the choice of home and community-based waiver services as an alternative to institutional level of care specified for this waiver; (b) who are denied the service(s) of their choice or the provider(s) of their choice; or (c) whose services are denied, suspended, reduced or terminated. **Appendix F** specifies the State's procedures to provide individuals the opportunity to request a Fair Hearing, including providing notice of action as required in 42 CFR §431.210.

H. Quality Improvement. The State operates a formal, comprehensive system to ensure that the waiver meets the assurances and other requirements contained in this application. Through an ongoing process of discovery, remediation and improvement, the State assures the health and welfare of participants by monitoring: (a) level of care determinations; (b) individual plans and services delivery; (c) provider qualifications; (d) participant health and welfare; (e) financial oversight and (f) administrative oversight of the waiver. The State further assures that all problems identified through its discovery processes are addressed in an appropriate and timely manner, consistent with the severity and nature of the problem. During the period that the waiver is in effect, the State will implement the Quality Improvement Strategy specified in **Appendix H**.

I. Public Input. Describe how the State secures public input into the development of the waiver:
OPWDD is committed to ensure that waiver participants, their families, the non-profit provider community and State authorities continue to collaborate to create a person-centered service environment that "helps people lead richer lives". Central to this collaboration is ensuring that public input is secured and factored into service design. As a result, OPWDD continuously engages in public outreach with persons receiving services, their families and other stakeholders to provide ample opportunity for these stakeholders to engage in meaningful dialogue regarding OPWDD's services. The following outlines OPWDD's public outreach related to the 2014 waiver renewal:
In addition to two rounds of public comment (May 2014 and February 2015) surrounding The HCBS Transition Plan, as described more fulfilling in those sections of this waiver application, OPWDD has the following standing committees for stakeholder outreach on changes to the waiver.

- The Commissioner's Developmental Disabilities Advisory Council established by New York Mental Hygiene Law 13.05 and comprised of self-advocates, family members, provider representatives, and other stakeholders; the Self-Advocacy Association of New York State; provider associations and provider councils, the Statewide Family Support Services Committee; the County and Local Mental Hygiene Directors; and the Real Choice Systems Committee. The DDAC which began in this iteration in Spring of 2012, is a workgroup that meets quarterly and is designed to oversee and guide the development of the new waiver and assist OPWDD and its stakeholders define the system reforms the waiver will achieve. The DDAC has specific subcommittees that have responsibility for particular areas, including self-direction and managed care implementation.
- The Joint Advisory Council (JAC), effective in April 2013, is a quarterly workgroup that focuses on ensuring care improvement for individuals and their families with a thoughtful transition to the new path for receiving services. OPWDD and DOH Commissioner, individuals, and their families are informed on the design of MC models that will provides services to IDD individuals.
- The Transformation Panel, which began in February 2015, is a group chaired by the OPWDD Commissioner that meets monthly with individuals, families, and professionals in the field to discuss shared goals identified by CMS and NYS that will improve opportunities for IDD individuals in areas of employment, integrated living, and self-direction of services.

Additionally, information has been made available to the public through the following formats:

- Guidance Documents regarding waiver services that are available on the website
- Information Line (866-946-9733) is available 24/7 for inquiries, complaints, and general information.
- People First News Newsletter which is also available on the website, is updated quarterly since July of 2014 to share news, programs, events, and stories from the field to the OPWDD community.
- Regular presentations by OPWDD Senior Management and Waiver Unit staff regarding changes to the waiver and service updates affected by the waiver changes to various stakeholders throughout the year.

In addition, OPWDD has published the full version of the OPWDD Comprehensive Waiver application on its website. This includes a formal 30-day public comment period prior to submission. The application is available at:
http://www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/HCBS_waiver_services.

J. Notice to Tribal Governments. The State assures that it has notified in writing all federally-recognized Tribal Governments that maintain a primary office and/or majority population within the State of the State's intent to submit a Medicaid waiver request or renewal request to CMS at least 60 days before the anticipated submission date is provided by Presidential Executive Order 13175 of November 6, 2000. Evidence of the applicable notice is available through the Medicaid Agency.

K. Limited English Proficient Persons. The State assures that it provides meaningful access to waiver services by Limited English Proficient persons in accordance with: (a) Presidential Executive Order 13166 of August 11, 2000 (65 FR 50121) and (b) Department of Health and Human Services "Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons" (68 FR 47311 - August 8, 2003). **Appendix B** describes how the State assures meaningful access to waiver services by Limited English Proficient persons.

7. Contact Person(s)

A. The Medicaid agency representative with whom CMS should communicate regarding the waiver is:

Last Name:

Smith

First Name:

Priscilla

Title:

Director, Waiver Management Unit, Office of Health Insurance Programs

Agency:

NYS Department of Health

Address:

1 Commerce Plaza

Address 2:

Suite 1208

City:

Albany

State: **New York**

Zip:

12210

Phone:

(518) 486-5890 **Ext:** ☐ **TTY**

Fax:

(518) 473-1764

E-mail:

pxs07@health.state.ny.us

B. If applicable, the State operating agency representative with whom CMS should communicate regarding the waiver is:

Last Name:

Marlay

First Name:

Kate

Title:

Deputy Director, Division of Person Centered Supports

Agency:

Office for People with Developmental Disabilities (OPWDD)

Address:

44 Holland Ave.

Address 2:

City:

Albany

State: **New York**

Zip:

12229

Phone:

(518) 402-4250 **Ext:** ☐ **TTY**

Fax:

(518) 473-0054

E-mail:

katherine.marlay@opwdd.ny.gov

8. Authorizing Signature

This document, together with Appendices A through J, constitutes the State's request for a waiver under §1915(c) of the Social Security Act. The State assures that all materials referenced in this waiver application (including standards, licensure and certification requirements) are ***readily*** available in print or electronic form upon request to CMS through the Medicaid agency or, if applicable, from the operating agency specified in Appendix A. Any proposed changes to the waiver will be submitted by the Medicaid agency to CMS in the form of waiver amendments. Upon approval by CMS, the waiver application serves as the State's authority to provide home and community-based waiver services to the specified target groups. The State attests that it will abide by all provisions of the approved waiver and will continuously operate the waiver in accordance with the assurances specified in Section 5 and the additional requirements specified in Section 6 of the request.

Signature: Jason A. Helgerson

State Medicaid Director or Designee

Submission Date: TBD

Note: The Signature and Submission Date fields will be automatically completed when the State Medicaid Director submits the application.

Last Name: Helgerson

First Name: Jason

Title: NYS Medicaid Director

Agency: New York State Department of Health

Address: 1 Commerce Plaza - Suite 1211

Address 2:

City: Albany

State: **New York**

Zip: 12210

Phone: (518) 474-3018 **Ext:** ☐ **TTY**

Fax:
(518) 486-1346

E-mail:
jah23@health.state.ny.us

Attachments

Attachment #1: Transition Plan
Check the box next to any of the following changes from the current approved waiver. Check all boxes that apply.

- ☐ **Replacing an approved waiver with this waiver.**
- ☐ **Combining waivers.**
- ☐ **Splitting one waiver into two waivers.**
- ☐ **Eliminating a service.**
- ☐ **Adding or decreasing an individual cost limit pertaining to eligibility.**
- ☐ **Adding or decreasing limits to a service or a set of services, as specified in Appendix C.**
- ☐ **Reducing the unduplicated count of participants (Factor C).**
- ☐ **Adding new, or decreasing, a limitation on the number of participants served at any point in time.**
- ☐ **Making any changes that could result in some participants losing eligibility or being transferred to another waiver under 1915 (c) or another Medicaid authority.**
- ☐ **Making any changes that could result in reduced services to participants.**

Specify the transition plan for the waiver:

OPWDD is working diligently with stakeholders and other state agencies on a transition plan governing the federal Home and Community Based Services (HCBS) settings rule, and this is described in Attachment #2 of this renewal application (effective 10/1/2014).

As established in Amendment 07 of this Waiver Agreement, this Renewal eliminates Consolidated Supports and Services (CSS). This was accomplished on October 1, 2014 and involved individual's CSS services transitioning to a compliant methodology for self-direction.

Attachment #2: Home and Community-Based Settings Waiver Transition Plan
Specify the state's process to bring this waiver into compliance with federal home and community-based (HCB) settings requirements at 42 CFR 441.301(c)(4)-(5), and associated CMS guidance.
Consult with CMS for instructions before completing this item. This field describes the status of a transition process at the point in time of submission. Relevant information in the planning phase will differ from information required to describe attainment of milestones.
To the extent that the state has submitted a statewide HCB settings transition plan to CMS, the description in this field may reference that statewide plan. The narrative in this field must include enough information to demonstrate that this waiver complies with federal HCB settings requirements, including the compliance and transition requirements at 42 CFR 441.301(c)(6), and that this submission is consistent with the portions of the statewide HCB settings transition plan that are germane to this waiver. Quote or summarize germane portions of the statewide HCB settings transition plan as required.
Note that Appendix C-5 HCB Settings describes settings that do not require transition; the settings listed there meet federal HCB setting requirements as of the date of submission. Do not duplicate that information here.
Update this field and Appendix C-5 when submitting a renewal or amendment to this waiver for other purposes. It is not necessary for the state to amend the waiver solely for the purpose of updating this field and Appendix C-5. At the end of the state's HCB settings transition process for this waiver, when all waiver settings meet federal HCB setting requirements, enter "Completed" in this field, and include in Section C-5 the information on all HCB settings in the waiver.

The following outlines the specific actions New York State OPWDD will take or has taken to assure full compliance with 42 CFR 441.301 c (4)-(5), "Home and Community-Based Settings" that was effective on March 17, 2014. OPWDD is also working with the New York State Department of Health and other New York State agencies on the State's overall Transition Plan scheduled for resubmittal to CMS in early 2016. The Statewide Transition Plan can be found at:
http://www.health.ny.gov/health_care/medicaid/redesign/hcbs_statewide_transition_plan_final.htm and will contain this information upon its revision.

OPWDD's transition plan efforts are fully integrated with the actions that will be outlined in the early 2016 resubmission of the NYS Transition Plan and therefore OPWDD does not have a stand-alone waiver specific transition plan.

OUTREACH AND PUBLIC COMMENT: OPWDD conducted substantial public outreach on HCBS settings transition which included formal public comment periods. The following is the stakeholder outreach and public input that has been reflected in the remediation actions incorporated in the Statewide Plan:

- May 2, 2014: OPWDD posted its initial waiver specific plan with a thirty day public comment period through June 3, 2014.
- February 13, 2015: OPWDD revised its waiver specific transition plan to include non-residential settings. The document was posted to OPWDD website, and emailed to all distribution lists and distributed to MSCs to distribute.
- February 18, 2015: Notice of opportunity for public comment published in NYS Register. Comments accepted through e-mail, regular mail, phone call, or through public webinars.
- February 23, February 24, and March 10, 2015: Public webinars held and teleconference.

The summaries of public comment and responses are located on OPWDD's website.
In addition to the above, OPWDD continues to conduct a significant amount of public outreach and training (over 53 sessions between January

2015 and October 2015) as well as operating stakeholder work groups including: (1) HCBS Settings Steering Committee; (2) Heightened Scrutiny Subgroup; and (3) Non-residential/Day Settings Subgroup. Each work group is comprised of people supported, parents and other advocates, provider representatives, other groups such as SANYS and Parent to Parent and state staff. See the following link for more information: http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/stakeholder-workgroup-resources. A detailed outreach chart is also available upon request.

SYSTEMIC ASSESSMENT:

A. Regulations and Policies:

- OPWDD has conducted a "cross walk" of its regulations and guidance. A side-by-side comparison was made to the Federal HCBS regulation to determine which documents complied, were non-compliant, or were silent in regard to the HCBS Settings Rule and Person-Centered Planning.
- A timeline of regulatory revisions has been developed and is in process.
- OPWDD person centered planning regulations that mirror the federal rules become effective on November 1, 2015.
- ADM #2014-04 addresses expectations of certified residential settings that aligns with the HCBS settings rules. This guidance was developed by the HCBS settings stakeholder work group and OPWDD's HCBS settings regulations will be based upon this work. The ADM can be found at http://www.opwdd.ny.gov/node/5760.
- New development: OPWDD is working to implement a policy where all new residential development will be no more than 4-6 unrelated individuals unless approved by the Commissioner based on evidence that a larger size is needed to support medical/clinical/behavioral needs. In addition, no new settings triggering heightened scrutiny will be developed.

B. On-site Residential Assessment:

OPWDD conducted an on-site residential assessment beginning 11/1/2014-9/30/2015 of a valid sample of IRAs/CRs and people residing in them to determine baseline compliance with the HCBS settings rules. OPWDD based its residential assessment on the ADM and the Assessment Tools developed in conjunction with the stakeholder groups mentioned above (i.e. ADM 2014-04; Part I Person Centered Review; Part II Site Review; and interpretative guidelines document). The CMS exploratory questions were the foundation for this development. As of 10/21, the data is in process of being analyzed. Based on preliminary data extrapolated across all settings thus far indicates the following estimates:

- 1,188 IRAs/CRs out of 5,942 fully comply with requirements;
- 3,684 out of 5,942 will require modifications
- 1,070 require heightened scrutiny

During 2016-17 survey cycle, OPWDD will be visiting each certified IRA/CR and day setting (over 7,000 sites) to determine which settings are subject to heightened scrutiny.

C. Development of Guidance and Tools for Providers:

The following guidance and tools have been developed to date in conjunction with the stakeholder groups outlined above. All can be found on the HCBS Settings Toolkit Web Page: http://www.opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit

☐ Administrative Memorandum Number 2014-04, "HCBS Settings Preliminary Transition Plan Implementation" for certified residential settings

☐ Part I: Person Centered Review Assessment Tool for certified residential settings

☐ Part II: Site Review Assessment Tool for certified residential settings

☐ Guidance Document for Assessment Tool Administration for certified residential settings

☐ Strengths and Risks Inventory Tool (can be used in delivery of all waiver supports and services)

☐ Communication to Providers on the HCBS Heightened Scrutiny Process and Requirements

Additional tools and information will be developed based upon the results of the on-site assessments and other relevant information on what is needed in the field. For example, the following are planned:

- Guidance for Day Habilitation providers on meeting HCBS settings expectations
- Rights/modifications training curriculum being developed. Roll out anticipated in early/mid 2016.
- Development of an Occupancy Agreement Template for providers to meet this requirement
- Multi-media materials for people supported and their circle of support to be developed on HCBS settings rule rights and forums for people supported to learn about these rights and how to advocate (all finalized in early 2017 if not sooner).

D. Day Settings (Non-residential) Remediation:

OPWDD recognizes that programmatic changes will be necessary for Day Habilitation and Prevocational services/settings to achieve full compliance with the settings requirements. OPWDD has already made substantial progress through its "New York State Plan to Increase Competitive Employment Opportunities for People with Developmental Disabilities, (Final Approved Plan-May 1, 2014)". This Plan was approved by CMS and is incorporated into this Transition Plan by reference. It can be accessed on OPWDD's website: http://www.opwdd.ny.gov/opwdd_services_supports/employment_for_people_with_disabilities/draft-plan-increase-employment-opps
OPWDD has a preliminary plan to develop programmatic guidance that complies with the rules and plans to incorporate a review of non-residential settings HCBS standards effective October 1, 2016 in its ongoing monitoring by surveyors.

E. Incorporation of Council on Quality and Leadership Personal Outcome Measures (POMS)

- OPWDD has partnered with CQL to offer Personal Outcome Measure Work Shops to OPWDD state operations service delivery staff and OPWDD DQI surveyors. The CQL POMs approach aligns with HCBS settings rules and there is frequent reference to these rules during the workshops. By undergoing the POMs workshops, staff are being prepared to deliver supports in accordance with individual preferences and outcomes and to review the quality of supports delivered through the waiver based on the degree to which people have choice, autonomy, and their personal outcomes addressed. Information regarding the validity and reliability of CQL POMs as well as the cross walk of CQL POMs to HCBS Settings Requirements can be found at the following link: http://hcbsadvocacy.org/national-resources/ See "CQL Toolkit for States-CMS Crosswalk". In addition, through this partnership with CQL, OPWDD now has four CQL certified trainers and 2 certified interviewers to help build capacity within OPWDD's staffing to meet the intent of the new rules. As of October 2015, 274 state OPWDD staff have been trained. These workshops will continue to be offered through December

2017. At the end of this period, all DQI survey staff will have had the training so that they have the skills to assess HCBS settings compliance based upon each person's experience in the setting.

- In addition, approximately 35 agencies are accredited and/or have chosen to undergo CQL accreditation with many more agencies expressing interest.

PROVIDER LEVEL REMEDIATION

F. CQL POMs and CQL Accreditation: As OPWDD has publically embraced the Council on Quality and Leadership's (CQL) Personal Outcome Measures (POMs) as the person centered quality of life measurement (see: http://www.opwdd.ny.gov/node/4867), 35 provider agencies to date have chosen to seek CQL Accreditation and another 5 are in process as of August 2015 . Many more are administering CQL POMs within their waiver programs and agencies and these numbers are growing. Information regarding CQL accreditation and the validity and reliability of CQL POMs and the utility of these mechanisms for HCBS settings compliance can be found at the following link: http://hcbsadvocacy.org/national-resources/ See "CQL Toolkit for States-CMS Crosswalk".

G. HCBS Settings Assessment Reports: In December 2015/January 2016, OPWDD will be providing each of the provider agencies that had sites and/or people included in the HCBS Settings Assessment residential sample with an aggregated report of the results of the Assessment. These reports will have site specific information for each setting by operating certificate. In the communication to providers about these reports, OPWDD is preparing information to providers for how to use the HCBS Settings Assessment Reports in agency quality Improvement and compliance activities.

H. Bi-annual DQI Provider Training: OPWDD holds DQI Provider Training twice per year, approximately every 6 months. HCBS settings standards and training for providers is included as a standing agenda topic. Trainings in 2015 were held on May 8, 2015 and October 14, 2015.

I. Provider Association Monthly Meetings and outreach: OPWDD has monthly meetings with its provider associations who in turn deliver this information to their member agencies. HCBS settings standards and remediation is covered in this meeting practically every month. In addition. These provider associations hold meetings with their agencies where OPWDD representatives frequently attend to provide training and information on HCBS settings.

J. Ongoing Monitoring:

- Beginning in October 2016, HCBS waiver providers and certified settings in the HCBS waiver will be reviewed annually for HCBS Settings Compliance.
- In addition, OPWDD will review a sample of waiver participants including people who do not receive services in certified settings through a Person Centered Review Tool. Sample selection will be statistically valid where possible. OPWDD may also choose to identify individuals to be part of a sample to ensure representativeness of the service population based on certain criteria as well as employ other generally accepted sampling strategies. The Person Centered Review tool is intended to assess compliance with federal PCP requirements as well as HCBS settings standards, such as choice of living arrangement including non-disability specific settings.
- Through survey/certification activity, a determination will be made whether each HCBS Standard is met or not met. Based on each review, an exit conference form will be generated for each provider setting that identifies areas of HCBS settings compliance that are not yet met for the provider to act upon.
- The data from these surveys will be compiled within a database, such that compliance information will available to OPWDD and allow for monitoring progress towards compliance.
- Effective October 1, 2018, OPWDD will enforce the HCBS settings. Provider agencies will be expected to make corrections and attest to OPWDD, including the Division of Quality Improvement, that a correction has been made. For each standard not met noted on exit conference form (i.e., non-systemic deficiencies) a provider agency has 30 days to implement corrective action. -For systemic or pervasive areas of non-compliance, an agency will be issued a statement of deficiencies and must submit a Plan of Corrective Action (POCA), which is also subject to approval and verification by OPWDD.
- For non-compliance with HCBS Settings that is deemed to be egregious, pervasive and systemic (e.g., repeat deficiencies, immediate risk to health and safety, rights violations, etc.), provider agencies will receive a 45-day letter requiring a POCA to be implemented.
- Providers/settings that are unresponsive will be referred to OPWDD Regional Offices, DDROs, and Division of Quality Improvement for technical assistance, for additional referral and possible consideration for OPWDD's Early Alert Committee (see : http://www.opwdd.ny.gov/opwdd_services_supports/service_providers/early_alert) , or for other monitoring/remedial action deemed to be appropriate by OPWDD.
- Failure of an agency to achieve compliance within timeframes determined by OPWDD, and consistent with CMS guidance, may result in the suspension of waiver funding. Other remedial action may include fines, change of auspice, and revocation of operating certificates.

Additional Needed Information (Optional)

Provide additional needed information for the waiver (optional):

Not applicable.

Appendix A: Waiver Administration and Operation

1. **State Line of Authority for Waiver Operation.** Specify the state line of authority for the operation of the waiver (*select one*):

○ **The waiver is operated by the State Medicaid agency.**

Specify the Medicaid agency division/unit that has line authority for the operation of the waiver program *(select one)*:

○ **The Medical Assistance Unit.**

Specify the unit name:

(Do not complete item A-2)

○ **Another division/unit within the State Medicaid agency that is separate from the Medical Assistance Unit.**

Specify the division/unit name. This includes administrations/divisions under the umbrella agency that has been identified as the Single State Medicaid Agency.

(Complete item A-2-a).

◉ **The waiver is operated by a separate agency of the State that is not a division/unit of the Medicaid agency.**

Specify the division/unit name:
New York State Office for People with Developmental Disabilities (OPWDD)

In accordance with 42 CFR §431.10, the Medicaid agency exercises administrative discretion in the administration and memorandum of understanding that sets forth the authority and arrangements for this policy is available through the Medicaid agency to CMS upon request. *(Complete item A-2-b).*

Appendix A: Waiver Administration and Operation

2. **Oversight of Performance.**

a. **Medicaid Director Oversight of Performance When the Waiver is Operated by another Division/Unit within the State Medicaid Agency.** When the waiver is operated by another division/administration within the umbrella agency designated as the Single State Medicaid Agency. Specify (a) the functions performed by that division/administration (i.e., the Developmental Disabilities Administration within the Single State Medicaid Agency), (b) the document utilized to outline the roles and responsibilities related to waiver operation, and (c) the methods that are employed by the designated State Medicaid Director (in some instances, the head of umbrella agency) in the oversight of these activities:
As indicated in section 1 of this appendix, the waiver is not operated by another division/unit within the State Medicaid agency. Thus this section does not need to be completed.

b. **Medicaid Agency Oversight of Operating Agency Performance.** When the waiver is not operated by the Medicaid agency, specify the functions that are expressly delegated through a memorandum of understanding (MOU) or other written document, and indicate the frequency of review and update for that document. Specify the methods that the Medicaid agency uses to ensure that the operating agency performs its assigned waiver operational and administrative functions in accordance with waiver requirements. Also specify the frequency of Medicaid agency assessment of operating agency performance:

The New York State (NYS) Department of Health (DOH) is the Single State Medicaid Agency (SMA) and as such has oversight for the supervision of the Medical Assistance Program under Title XIX of the Social Security Act. Appointed by Governor A. Cuomo, Jason Helgerson is the Director of the Office of Health Insurance Programs (OHIP) and the State Medicaid Director. In this capacity he is the signatory for all 1915(c) Home and Community Based Services (HCBS) Waiver programs for New York State (NYS), including the Office For People With Developmental Disabilities (OPWDD) HCBS Waiver. The State Medicaid Director has final authority for the oversight of all aspects of the Medicaid (MA) program in NYS.

In addition, DOH Administrative Directives and General Information System messages have been issued to provide ongoing guidance regarding the MA Program administration, including eligibility determination, system management provider reimbursement, monitoring, and corrective actions to LDSSs. DOH also issues the monthly newsletter, MA Update, to announce major policy changes and other important MA related information. The MA Update is available on the DOH website: http://www.health.ny.gov/health_care/medicaid/program/update/main.htm.

Administration and operation of the OPWDD HCBS Waiver is delegated to OPWDD through a Memorandum of Understanding (MOU) that states the respective roles and responsibilities of each agency. This interagency MOU is reviewed/revised as needed and available to CMS upon request. The current MOU was signed on 8/6/2013 and strengthens the Single State Medicaid Agency's oversight.

DOH responsibilities include:

’-Submit all reports including the CMS 372 Annual Report and technical amendments to CMS;
•-Provide information and directives regarding MA policies and procedures concerning the waiver to the local departments of social services (LDSS);
•-Review applications of voluntary waiver service providers recommended by OPWDD. If qualified, issue Medicaid Provider numbers and enroll providers in Medicaid/eMedNY;
•-Maintain, upgrade, and monitor systems/processes for qualified providers to bill MA for authorized waiver services and design system edits to assure and accommodate appropriate coding/ billing practices;
•-Pay qualified providers of waiver services for those services authorized by OPWDD;
•-Assure financial accountability for funds expended for waiver services, provide for an independent fiscal audit of the waiver program, maintain and make available to CMS, the Office of the State Comptroller or other designees, the appropriate financial records documenting the cost of services provided under the waiver, including independent audits;
•-Oversee OPWDD's annual review of Individual Service Plans (ISP) in accordance with the assurances set forth by CMS; perform annual fiscal review of a statistically valid sample of ISPs according to established procedure;
•-Perform ISP Inter-rater Reliability Review by selecting a subset of ISPs to validate that the OPWDD review process was performed as required and that the CMS assurances have been met.

OPWDD responsibilities include:
•-Timely determinations regarding applicant HCBS Waiver enrollment requests in accordance with its procedures;
•-Issuance of Notice of Decisions (NODs), on a form approved by DOH, to individuals whose enrollment has been approved, denied, suspended or terminated; and include notices of the right to a local conference with OPWDD and/or a fair hearing as required by State and Federal regulations;
•-Establish standards for providers of waiver services, approve these providers for participation in the waiver, and forward to DOH agency specific recommendations for MA provider agreements;
•-Determine payment levels for waiver services, as approved by the NYS Division of Budget;
•-Submit to DOH data and reports on a statistically valid sample of ISPs for individuals enrolled in the HCBS Waiver;
•-Provide reports and updates to DOH as requested, i.e. established Critical Incident Management Notification Process.

OPWDD maintains the successful day-to-day operation of the HCBS Waiver, while DOH, as the oversight agency, is responsible for evaluating OPWDD’s performance in accomplishing its operational and administrative functions.

Multiple divisions within DOH, especially within the Office of Health Insurance Programs (OHIP), work together to maintain and to monitor the complex intra-agency operating systems that support operation of the OPWDD HCBS Waiver, as described in Table A.7. These include:

•Waiver Expenditures Managed Against Approved Levels/Waiver Enrollment Managed Against Approved Limits: DOH's Division of Administration, Fiscal Management Group (FMG) is primarily responsible for the fiscal accountability and integrity of payments for waiver services (See Appendix I). FMG monitors OPWDD's expenditures by querying data stored in systems maintained by the OHIP Division of Systems. eMedNY provides detailed breakouts of waiver expenditures by category of service, based on a claims date of payment and as such, payments are calculated and made on an ongoing basis through this system. FMG is responsible for the submission of quarterly expenditure projection reports to CMS, along with the submission of actual expenditure reports following the end of each fiscal quarter. In addition, FMG performs monthly tracking of OPWDD HCBS Waiver expenditures. Monthly and quarterly reports are a part of the public record and are accessible to OPWDD, Division of Budget and the LDSS or local department of social services (county government). Specific MA inquiries which are beyond the scope of prefabricated MARS reports are addressed via ad-hoc queries run against OHIP Data Mart and/or eMedNY Medicaid Data Warehouse. In the event fiscal inconsistencies or concerns are identified, FMG contacts OPWDD to clarify and resolve issues. Ultimately, the DOH’s aggregate reporting infrastructure is reviewed and audited by State, federal and independent auditors for accuracy and fiscal integrity.

•Participant Waiver Enrollment: OHIP Division of Eligibility and Marketplace Integration (formerly the Division of Coverage and Enrollment) serves as a liaison to the LDSS with respect to MA eligibility policies. The Division of Eligibility and Marketplace Integration responds to questions raised by LDSS in relation to MA applicants/recipients who are either seeking MA enrollment or are currently enrolled in the OPWDD HCBS Waiver. This division also monitors the specific coverage codes on file for MA enrolled Waiver participants that permit MA payment of Waiver services through periodic case record reviews of local districts’ Medicaid population. In cases where waiver services are not being paid due to lack of proper coding, this division communicates the need for corrective actions to the LDSS so that coding errors may be corrected.

•Prior Authorization of Waiver Services/Utilization Management/Establishment of a Statewide Methodology: OHIP Division of Systems (DOS)- DOH has a long-established and well-defined process of review and oversight of changes to HCBS waiver services by OPWDD or similar stakeholders for considered implementation within eMedNY. This process, which leverages industry-standard Software Development Life Cycle (SDLC) methodologies, is known as the Evolution Project (EP) process. Before becoming an EP, a change request is first carefully reviewed by DOH policy staff in conjunction with other appropriate DOH staff (i.e. relevant program and fiscal areas) . After the preliminary review and approval has been completed and a prioritization ranking assigned, a communique is transmitted by DOS to the State’s Fiscal Agent requesting that an EP be initiated. This initiation process includes the development of a Functional Requirements Document (FRD) in collaboration with applicable stakeholders, subsequently followed by a Project Design Document (PDD). Extensive design, testing, and revision continue until it is demonstrated that the programmatic and edit logic achieves the desired functionality. The OHIP DOS includes the eMedNY system and the Welfare Management System (WMS) system which coordinate the continued system support to effect the necessary computer changes to insure that eligible individuals are receiving the correct services and that the appropriate Medicaid providers bill correctly for the correct Medicaid services. eMedNY handles the computer process for the Medicaid billing aspects of the Waiver and WMS maintains the MA recipient eligibility system. One component of the system is the WMS Restriction/Exception (R/E) subsystem which restricts client abusers and supports system exceptions. (One of its main functions is to develop, test, and implement the necessary system programming via specifications or edit restrictions to ensure that eligible OPWDD HCBS Waiver recipients receive appropriate services from a qualified Medicaid provider).

•Qualified Provider Enrollment/Execution of Medicaid Provider Agreements/Numbers: Division of Health Plan Contracting and Oversight uploads qualified providers into eMedNY, the Medicaid Management Information System. OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues waiver provider agreements that allow participation in the waiver program and provide the application for eMedNY. Division of Health Plan Contracting and Oversight then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and System For Award Management (SAM) on the providers board members and managing employees. If found to be appropriate, the Division of Health Plan Contracting and Oversight then issues a provider number to enroll the voluntary provider in the NYS Medicaid program. In addition to provider enrollment, the Division of Health Plan Contracting and Oversight updates and performs maintenance on all qualified waiver provider files. The Division of Finance and Rate Setting add rates which are approved by the Division of Budget and activate or terminate provider numbers based on provider specific review findings and interacts with the waiver provider community concerning file discrepancies. Billing and reimbursement issues are handled by Computer Science Corporate.

Rules, Policies, Procedures, and Information Development Governing the Waiver Program: DOH reviews MA regulatory and operational functions for the OPWDD HCBS waiver in consultation with other DOH Divisions including the Division of Legal Affairs as needed.

•Quality Assurance and Quality Improvement Activities/Review of Participant Service Plans/Level of Care Evaluations: OHIP Division of Program Development and Management (DPDM), Waiver Management Unit (WMU) serves as the clearinghouse for many of OPWDD HCBS Waiver activities involving Medicaid (MA). The WMU coordinates all Waiver oversight functions, including the development and update of MA policies that impact the Waiver; oversight of the annual ISP Review of a statistically valid sample generated by DOH and conducted by OPWDD; completion of the ISP Inter Rater Reliability Review, limited ISP fiscal review, and targeted ISP reviews as required; submission of the annual CMS 372 reports; monitoring of potential computer system changes through the Evolution Project Process.

In cooperation with CMS and OPWDD, the WMU continues to improve its collection of relevant quality assurance data and comprehensive trend analyses. Additionally, the WMU uses the Medicaid Update when required to communicate critical MA policy and coverage information to all MA providers. This document is published monthly on the DOH website.

Finally, the WMU shares all HCBS Waiver oversight activities and quality improvement strategies with the State Medicaid Director. .

Appendix A: Waiver Administration and Operation

3. **Use of Contracted Entities.** Specify whether contracted entities perform waiver operational and administrative functions on behalf of the Medicaid agency and/or the operating agency (if applicable) (*select one*):

   ○ **Yes. Contracted entities perform waiver operational and administrative functions on behalf of the Medicaid agency and/or operating agency (if applicable).**
   Specify the types of contracted entities and briefly describe the functions that they perform. *Complete Items A-5 and A-6.:*

   ◉ **No. Contracted entities do not perform waiver operational and administrative functions on behalf of the Medicaid agency and/or the operating agency (if applicable).**

Appendix A: Waiver Administration and Operation

4. **Role of Local/Regional Non-State Entities.** Indicate whether local or regional non-state entities perform waiver operational and administrative functions and, if so, specify the type of entity (*Select One*):

   ◉ **Not applicable**

   ○ **Applicable** - Local/regional non-state agencies perform waiver operational and administrative functions.
   Check each that applies:

   ☐ **Local/Regional non-state public agencies** perform waiver operational and administrative functions at the local or regional level. There is an **interagency agreement or memorandum of understanding** between the State and these agencies that sets forth responsibilities and performance requirements for these agencies that is available through the Medicaid agency.

   Specify the nature of these agencies and complete items A-5 and A-6:

   ☐ **Local/Regional non-governmental non-state entities** conduct waiver operational and administrative functions at the local or regional level. There is a contract between the Medicaid agency and/or the operating agency (when authorized by the Medicaid agency) and each local/regional non-state entity that sets forth the responsibilities and performance requirements of the local/regional entity. The **contract(s)** under which private entities conduct waiver operational functions are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

   Specify the nature of these entities and complete items A-5 and A-6:

Appendix A: Waiver Administration and Operation

5. **Responsibility for Assessment of Performance of Contracted and/or Local/Regional Non-State Entities.** Specify the state agency or agencies responsible for assessing the performance of contracted and/or local/regional non-state entities in conducting waiver operational and administrative functions:

Appendix A: Waiver Administration and Operation

6. **Assessment Methods and Frequency.** Describe the methods that are used to assess the performance of contracted and/or local/regional non-state entities to ensure that they perform assigned waiver operational and administrative functions in accordance with waiver requirements. Also specify how frequently the performance of contracted and/or local/regional non-state entities is assessed:

Appendix A: Waiver Administration and Operation

7. **Distribution of Waiver Operational and Administrative Functions.** In the following table, specify the entity or entities that have responsibility for conducting each of the waiver operational and administrative functions listed (*check each that applies*):
In accordance with 42 CFR §431.10, when the Medicaid agency does not directly conduct a function, it supervises the performance of the function and establishes and/or approves policies that affect the function. All functions not performed directly by the Medicaid agency must be delegated in writing and monitored by the Medicaid Agency. *Note: More than one box may be checked per item.*
Ensure that Medicaid is checked when the Single State Medicaid Agency (1) conducts the function directly; (2) supervises the delegated function; and/or (3) establishes and/or approves policies related to the function.

Function	Medicaid Agency	Other State Operating Agency
Participant waiver enrollment	☐	☐
Waiver enrollment managed against approved limits	☐	☐
Waiver expenditures managed against approved levels	☐	☐
Level of care evaluation	☐	☐
Review of Participant service plans	☐	☐
Prior authorization of waiver services	☐	☐
Utilization management	☐	☐
Qualified provider enrollment	☐	☐
Execution of Medicaid provider agreements	☐	☐
Establishment of a statewide rate methodology	☐	☐
Rules, policies, procedures and information development governing the waiver program	☐	☐
Quality assurance and quality improvement activities	☐	☐

Appendix A: Waiver Administration and Operation

Quality Improvement: Administrative Authority of the Single State Medicaid Agency

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

a. **Methods for Discovery: Administrative Authority**
The Medicaid Agency retains ultimate administrative authority and responsibility for the operation of the waiver program by exercising oversight of the performance of waiver functions by other state and local/regional non-state agencies (if appropriate) and contracted entities.

i. **Performance Measures**

For each performance measure the State will use to assess compliance with the statutory assurance, complete the following. Performance measures for administrative authority should not duplicate measures found in other appendices of the waiver application. *As necessary and applicable, performance measures should focus on:*

- Uniformity of development/execution of provider agreements throughout all geographic areas covered by the waiver
- Equitable distribution of waiver openings in all geographic areas covered by the waiver
- Compliance with HCB settings requirements and other new regulatory components (for waiver actions submitted on or after March 17, 2014)

Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
A.i.1: Number and percent of required OPWDD Individualized Service Plans (ISPs)/Life Plans (LPs) reviewed for the annual DOH ISP/LP Review sample that was completed annually by OPWDD.

Data Source (Select one):
Record reviews, on-site
If 'Other' is selected, specify:

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = 5%
Other Specify:	✓ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
A.i.2: The percentage of reportable abuse/neglect incidents where appropriate corrective actions/safeguards were taken by the provider as verified by OPWDD.

Data Source (Select one):
Other
If 'Other' is selected, specify:

IRMA (Incident Report and Management Application)

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	**Weekly**	☐ **100% Review**
☐ **Operating Agency**	**Monthly**	**Less than 100% Review**
Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =
Other Specify:	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	Other Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
State Medicaid Agency	**Weekly**
Operating Agency	**Monthly**
Sub-State Entity	**Quarterly**
Other Specify:	**Annually**
	Continuously and Ongoing
	Other Specify:

Performance Measure:
A.i.3: Number and percent of ISPs/LPs reviewed by OPWDD DQI that were validated by the DOH Inter-rater reliability review (IRR) ISP/LP review.

Data Source (Select one):
Record reviews, on-site
If 'Other' is selected, specify:

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
State Medicaid Agency	**Weekly**	**100% Review**
Operating Agency	**Monthly**	**Less than 100% Review**
Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =

Other Specify:	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	☐ **Other** Specify: Specify: Annually, DOH selects & reviews a subset of ISPs from the corresponding larger, annual DOH ISP sample. The IRR sample is representative of the entire population.
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
A.i.4: Number and percent of deficiencies identified in the DOH ISP/LP review conducted by OPWDD DQI that were remediated by OPWDD.

Data Source (Select one):
Record reviews, on-site
If 'Other' is selected, specify:

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	**Monthly**	☐ **Less than 100% Review**
Sub-State Entity	**Quarterly**	☐ **Representative Sample** Confidence Interval = 5%
Other Specify:	☐ **Annually**	**Stratified** Describe Group:

	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
A.i.5: Number and percent of deficiencies identified in the DOH ISP/LP Fiscal Review that were remediated by OPWDD.

Data Source (Select one):
Record reviews, off-site
If 'Other' is selected, specify:

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = 5%
Other Specify:	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	**Weekly**
☐ **Operating Agency**	**Monthly**
Sub-State Entity	**Quarterly**
Other Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
A.i.6: Number and percent of potential waiver providers who were recommended by OPWDD for enrollment in NYS Medicaid that are subsequently enrolled in the Medicaid Program.

Data Source (Select one):
Provider performance monitoring
If 'Other' is selected, specify:

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:

	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
A.i.7: Number and percent of OPWDD waiver service providers on Early Alert where the decision to sanction, terminate, and/or take other appropriate corrective action was implemented appropriately and timely by OPWDD.

Data Source (Select one):
On-site observations, interviews, monitoring
If 'Other' is selected, specify:

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.

Changes to Administrative Authority functions have been implemented to strengthen and broaden the scope of DOH oversight of the OPWDD HCBS Waiver, especially in the areas of health/welfare, qualified providers, and service plans to assure that SMA oversight is current, timely, and reflects OPWDD's present reform initiatives.

As part of its oversight responsibility, DOH provides assurances to CMS as outlined in the HCBS Waiver agreement. At a minimum, the monitoring responsibilities and activities include verifying that:
- Necessary safeguards have been taken to assure the health and welfare of waiver participants;
-Evaluations and periodic re- evaluations of individual waiver service plans have been provided as needed and required;
-Choice of HCBS Waiver or institutional care has been offered to all waiver participants;
-A formal quality assurance system is provided and accurately reflects the waiver status of individuals and providers; -Average per capita expenditures have been appropriately recorded and billed as waiver services and do not exceed the amount that would have been incurred without the waiver;
-Annual waiver reports and technical amendment(s), where applicable, are submitted to CMS with information about program costs and services. Oversight discovery activities include the following:

1. DOH oversight of OPWDD's annual review of a statistically valid sample of ISPs/LPs: The annual review of a statistically valid, representative sample of ISPs/LPs, previously completed by DOH, is conducted by OPWDD DQI. The ISP/LP review time frame has been adjusted to align with the current waiver year. DOH oversight activities will ensure that OPWDD is correctly using the agreed upon review tool and that OPWDD DQI surveyor ISP/LP reviews are accurate, complete, and executed as per the agreed upon process. OPWDD tracks individual deficiencies identified in this ISP/LP review, monitors both individual and systemic remediation activities related to these deficiencies, and reports these finding to DOH semi- annually and more frequently as requested by DOH. DOH will continue to select a statistically valid representative sample annually of individuals enrolled in the HCBS waiver using established Raosoft formula. The selected sample will be forwarded to OPWDD DQI at the beginning of the waiver year (i.e. by October 1). DQI will complete the review, using the established review tool and timeline agreed upon both agencies. OPWDD DQI will develop and provide a semiannual report for DOH that summarizes: 1. the ISP Review results, 2.OPWDD Performance metrics related to the ISP/LP review and 3. Identified trends observed by each assurance category. (See Appendix D 2 a&b). Findings are reported in the 372 under performance measure FAa1 as described in Appendix I.

2. Annual DOH ISP/LP Medicaid Claims review (Fiscal review) of waiver services documented in the ISP/LP: DOH will continue to perform the Medicaid billing validation review for a subset of the DOH statistically valid sample. Deficiencies identified by DOH will be monitored to assure that appropriate remediation is completed by OPWDD within an established time frame.

3. Annual DOH ISP/LP inter rater reliability (IRR) review: DOH will annually select a percentage of ISPs/LPs from the larger DOH statistically valid sample to conduct the IRR review. ISPs/LPs in the IRR will be reviewed independently by both DOH and OPWDD DQI. DOH will use the applicable portions of the DQI MSC Review Tool used by DQI so that the results can be compared and validated. In addition, deficiencies identified by DQI and/or DOH will be monitored to assure that appropriate remediation is completed.

4. Timely CMS 372 Report submission: The fiscal portion of the CMS 372 report, which includes data regarding waiver services and cost neutrality, is prepared, reviewed, and approved for fiscal accountability by various units within the DOH, including the Bureau of Budget Management (Fiscal Management Group or FMG). Results from both the quality portion

(ISP review) and fiscal portion review are combined to complete the CMS 372 report which is then submitted to DOH executive staff for final approval prior to submission to CMS.

5. Establishment of a process and time frame for the interagency Critical and Significant Event (CSE) Notification system. The Director of the Incident Management Unit (or designee) provides notification to the DOH WMU within 24 hours of receipt of the CSE or on the next business day for individuals enrolled in the HCBS Waiver. DOH logs and tracks all incidents reported in the Critical and Significant Events Tracking Log. DOH meets internally every month, and as needed, to monitor, analyze and trend reported incidents. As part of the interagency quarterly meeting standing agenda, DOH discusses incident related issues with OPWDD.

6. DOH reviews the OPWDD Monthly Report for status of plans of correction and trending adverse actions especially for those HCBS Waiver providers placed on the OPWDD Early Alert system.

7. DOH and OPWDD adhere to an interagency process for monitoring OPWDD Waiver providers. OPWDD informs DOH when: 1.Voluntary waiver provider is recommended by OPWDD for enrollment in NYS Medicaid; 2.Voluntary waiver provider who is currently enrolled in NYS Medicaid has been approved to amend waiver service provision;3.When OPWDD terminates a voluntary waiver service provider, the DOH Bureau of Provider Enrollment notifies the DOH WMU in writing when providers are denied MA enrollment or are disenrolled from MA.

8. DOH coordinates, monitors, tracks, approves and evaluates all OPWDD evolution projects related to OPWDD's HCBS Waiver.

continued in section App A-QIS b.i below

b. Methods for Remediation/Fixing Individual Problems

i. Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.

A.i.1-A.i.2: Quality Assurance & Improvement Administrative Integrity: DOH monitors timelines to assure the integrity of the joint OPWDD/DOH quality management process by monitoring that ISPs are reviewed for accuracy and timeliness and the annual CMS 372 report is complete, contains all required elements, and submitted as required. DOH will work with OPWDD in the event that critical elements of the ISP review and/or completion/submission of the CMS 372 report requires revision.

The DOH WMU has an established Policy & Process in place for OPWDD Notification to DOH of Critical Significant Events and Incidents. The Policy assures that DOH remains vigilant of emerging issues that pertain to the safety, health and welfare of persons enrolled in the HCBS waiver.

DOH is responsible for:
- review and monitor of all incident reports received from OPWDD
- tracking, analyzing, and evaluation of all identified incident investigations reported to DOH
- fostering effective communication between OPWDD and DOH

The DOH WMU has designated staff that review and track all reports received and as needed, monitor investigations through outcome. The DOH WMU team meets monthly (or as needed) to review, analyze and trend reports received and if necessary request supporting information from OPWDD. The DOH WMU team provides incident related feed-back to OPWDD during the quarterly inter-agency meeting (or as needed).

If a situation arises that DOH is not satisfied with OPWDD remediation activity or timeliness of corrective actions regarding a specific incident, DOH will:
- Advise OPWDD in writing that documentation of completion of corrective action is required within 2 weeks (10 business days).
- Inform OPWDD that they are granted one additional week (5 business days) if OPWDD fails to respond or meet the designated (2 week completion date) deadline.
- Apprise key OHIP management for further recommendation if OPWDD fails to meet the final deadline.

A.i.2: Quality Assurance & Improvement, Health and Welfare: DOH will review aggregate reports compiled by OPWDD DQI regarding health and welfare performance measure outcomes. DOH will analyze these reports and require that OPWDD verify that remediation and follow-up activities have been completed in the agreed upon timeframe.

A.i.3 - A.i.4: Service Planning and Level of Care - Oversight of ISP Review: DOH's Strategy for Remediation for the annual ISP reviews: OPWDD's DQI is required to report performance measure outcomes to DOH semi- annually. The report findings and individual remediation activities are discussed at the quarterly meetings. Additionally, all deficiencies identified in the DOH IRR review are shared with OPWDD along with recommendations for improvements to the review process or protocols. OPWDD's response to these reports will occur within the timeframe agreed upon by both agencies. DOH may also periodically request additional operational and Quality Improvement Strategy reports to augment the review process.

A.i.5 .: Financial Integrity: Following each DOH annual fiscal review, identified deficiencies, trends, and recommendation for improvements will be provided to OPWDD in a Statement of Discovery (SOD) report. OPWDD will respond to the SOD report and provide evidence of remediation of identified deficiencies in the timeframe agreed upon by both agencies. DOH will also provide CMS with both the SOD report and OPWDD's responses. DOH may also periodically request additional operational and Quality Improvement Strategy reports as a result of the review process. Additional fiscal oversight is performed by outside agencies, such as the Office of the Medicaid Inspector General (OMIG), the Office of the State Comptroller (OSC), and by the State's Single Independent Auditors, KPMG LLP.

A.i.6 - A.i.7: Qualified Provider Integrity: DOH will require OPWDD to verify that individual remediation of provider specific deficiencies that emerge from DOH tracking activities described in the previous section, have been addressed and completed within an appropriate timeframe. In addition, DOH reviews aggregate reports of provider specific performance measure outcomes compiled semi annually by OPWDD DQI. DOH will analyze these reports, obtain additional information from OPWDD DQI as needed, and verify that remediation has been addressed by OPWDD.

****

Continued from section App A-QIS.a.ii above

9. DOH and OPWDD maintain a standing interagency quarterly meeting that includes a comprehensive quality monitoring agenda that addresses reports and trends in the areas of health and welfare, incident management, qualified providers, service plans, fiscal accountability, level of care assurances, as well as any follow up to required remediation and QI strategies.

ii. Remediation Data Aggregation

Remediation-related Data Aggregation and Analysis (including trend identification)

Responsible Party*(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify: Semi-annually

c. Timelines

When the State does not have all elements of the Quality Improvement Strategy in place, provide timelines to design methods for discovery and remediation related to the assurance of Administrative Authority that are currently non-operational.

○ **No**

◉

Appendix B: Participant Access and Eligibility

B-1: Specification of the Waiver Target Group(s)

a. Target Group(s). Under the waiver of Section 1902(a)(10)(B) of the Act, the State limits waiver services to one or more groups or subgroups of individuals. Please see the instruction manual for specifics regarding age limits. *In accordance with 42 CFR §441.301 (b)(6), select one or more waiver target groups, check each of the subgroups in the selected target group(s) that may receive services under the waiver, and specify the minimum and maximum (if any) age of individuals served in each subgroup:*

Target Group	Included	Target SubGroup	Minimum Age	Maximum Age	
				Maximum Age Limit	No Maximum Age Limit
☐ Aged or Disabled, or Both - General					
		Aged			

Target Group	Included	Target SubGroup	Minimum Age	Maximum Age	
				Maximum Age Limit	No Maximum Age Limit
☐					
		Disabled (Physical)			
		Disabled (Other)			
Aged or Disabled, or Both - Specific Recognized Subgroups					
		Brain Injury			
		HIV/AIDS			
		Medically Fragile			
		Technology Dependent			
☐ Intellectual Disability or Developmental Disability, or Both					
	☐	Autism	0		☐
	☐	Developmental Disability	0		☐
	☐	Intellectual Disability	0		☐
☐ Mental Illness					
	☐	Mental Illness			
	☐	Serious Emotional Disturbance			

b. Additional Criteria. The State further specifies its target group(s) as follows:

Not applicable. Note: There is no minimum or maximum age requirement for participation in OPWDD's comprehensive waiver.

c. Transition of Individuals Affected by Maximum Age Limitation. When there is a maximum age limit that applies to individuals who may be served in the waiver, describe the transition planning procedures that are undertaken on behalf of participants affected by the age limit *(select one):*

- ◉ **Not applicable. There is no maximum age limit**
- ○ **The following transition planning procedures are employed for participants who will reach the waiver's maximum age limit.**

Specify:

Appendix B: Participant Access and Eligibility

B-2: Individual Cost Limit (1 of 2)

a. Individual Cost Limit. The following individual cost limit applies when determining whether to deny home and community-based services or entrance to the waiver to an otherwise eligible individual *(select one)*. Please note that a State may have only ONE individual cost limit for the purposes of determining eligibility for the waiver:

- ◉ **No Cost Limit.** The State does not apply an individual cost limit. *Do not complete Item B-2-b or item B-2-c.*
- ○ **Cost Limit in Excess of Institutional Costs.** The State refuses entrance to the waiver to any otherwise eligible individual when the State reasonably expects that the cost of the home and community-based services furnished to that individual would exceed the cost of a level of care specified for the waiver up to an amount specified by the State. *Complete Items B-2-b and B-2-c.*

The limit specified by the State is *(select one)*

- ○ **A level higher than 100% of the institutional average.**

Specify the percentage:

- **Other**

  Specify:

Institutional Cost Limit. Pursuant to 42 CFR 441.301(a)(3), the State refuses entrance to the waiver to any otherwise eligible individual when the State reasonably expects that the cost of the home and community-based services furnished to that individual would exceed 100% of the cost of the level of care specified for the waiver. *Complete Items B-2-b and B-2-c.*

Cost Limit Lower Than Institutional Costs. The State refuses entrance to the waiver to any otherwise qualified individual when the State reasonably expects that the cost of home and community-based services furnished to that individual would exceed the following amount specified by the State that is less than the cost of a level of care specified for the waiver.

Specify the basis of the limit, including evidence that the limit is sufficient to assure the health and welfare of waiver participants. Complete Items B-2-b and B-2-c.

The cost limit specified by the State is *(select one)*:

- **The following dollar amount:**

  Specify dollar amount:

  The dollar amount *(select one)*

  - **Is adjusted each year that the waiver is in effect by applying the following formula:**

    Specify the formula:

  - **May be adjusted during the period the waiver is in effect. The State will submit a waiver amendment to CMS to adjust the dollar amount.**

- **The following percentage that is less than 100% of the institutional average:**

  Specify percent:

- **Other:**

  Specify:

Appendix B: Participant Access and Eligibility

B-2: Individual Cost Limit (2 of 2)

Answers provided in Appendix B-2-a indicate that you do not need to complete this section.

b. Method of Implementation of the Individual Cost Limit. When an individual cost limit is specified in Item B-2-a, specify the procedures that are followed to determine in advance of waiver entrance that the individual's health and welfare can be assured within the cost limit:

c. Participant Safeguards. When the State specifies an individual cost limit in Item B-2-a and there is a change in the participant's condition or circumstances post-entrance to the waiver that requires the provision of services in an amount that exceeds the cost limit in order to assure the participant's health and welfare, the State has established the following safeguards to avoid an adverse impact on the participant *(check each that applies)*:

- ☐ **The participant is referred to another waiver that can accommodate the individual's needs.**
- ☐ **Additional services in excess of the individual cost limit may be authorized.**

Specify the procedures for authorizing additional services, including the amount that may be authorized:

☐ **Other safeguard(s)**

Specify:

Appendix B: Participant Access and Eligibility

B-3: Number of Individuals Served (1 of 4)

a. **Unduplicated Number of Participants.** The following table specifies the maximum number of unduplicated participants who are served in each year that the waiver is in effect. The State will submit a waiver amendment to CMS to modify the number of participants specified for any year(s), including when a modification is necessary due to legislative appropriation or another reason. The number of unduplicated participants specified in this table is basis for the cost-neutrality calculations in Appendix J:

Table: B-3-a

Waiver Year	Unduplicated Number of Participants
Year 1	74,121
Year 2	77,268
Year 3	79,308
Year 4	81,671
Year 5	82,760

b. **Limitation on the Number of Participants Served at Any Point in Time.** Consistent with the unduplicated number of participants specified in Item B-3-a, the State may limit to a lesser number the number of participants who will be served at any point in time during a waiver year. Indicate whether the State limits the number of participants in this way: *(select one)*:

- ◉ **The State does not limit the number of participants that it serves at any point in time during a waiver year.**
- ○ **The State limits the number of participants that it serves at any point in time during a waiver year.**

The limit that applies to each year of the waiver period is specified in the following table:

Table: B-3-b

Waiver Year	Maximum Number of Participants Served At Any Point During the Year
Year 1	
Year 2	
Year 3	
Year 4	
Year 5	

Appendix B: Participant Access and Eligibility

B-3: Number of Individuals Served (2 of 4)

c. **Reserved Waiver Capacity.** The State may reserve a portion of the participant capacity of the waiver for specified purposes (e.g., provide for the community transition of institutionalized persons or furnish waiver services to individuals experiencing a crisis) subject to CMS review and approval. The State *(select one)*:

- ◉ **Not applicable. The state does not reserve capacity.**
- ○ **The State reserves capacity for the following purpose(s).**

Specify:

Reserved capacity for individuals moving from Development Centers (DCs) and Intermediate Care Facilities for Individuals with Developmental Disabilities (ICF/IDD) into HCBS waiver settings.

Waiver Year	
Year 1	N/A
Year 2	1,294
Year 3	1,435
Year 4	1,851
Year 5	944

Appendix B: Participant Access and Eligibility

B-3: Number of Individuals Served (3 of 4)

d. Scheduled Phase-In or Phase-Out. Within a waiver year, the State may make the number of participants who are served subject to a phase-in or phase-out schedule *(select one)*:

- (●) **The waiver is not subject to a phase-in or a phase-out schedule.**
- ( ) **The waiver is subject to a phase-in or phase-out schedule that is included in Attachment #1 to Appendix B-3. This schedule constitutes an intra-year limitation on the number of participants who are served in the waiver.**

e. Allocation of Waiver Capacity.

Select one:

- (●) **Waiver capacity is allocated/managed on a statewide basis.**
- ( ) **Waiver capacity is allocated to local/regional non-state entities.**

Specify: (a) the entities to which waiver capacity is allocated; (b) the methodology that is used to allocate capacity and how often the methodology is reevaluated; and, (c) policies for the reallocation of unused capacity among local/regional non-state entities:

f. Selection of Entrants to the Waiver. Specify the policies that apply to the selection of individuals for entrance to the waiver:

OPWDD's waiver capacity is allocated and managed on a statewide basis. OPWDD receives funding through legislative appropriation, which includes resources for existing services and for new or expanded services. OPWDD's HCBS waiver is constructed to ensure a sufficient number of HCBS opportunities to maximize the number of individuals served through available state appropriation during each funding cycle. HCBS enrollment levels are calculated to approximate the number of new HCBS enrollments that could be afforded by anticipated legislative appropriation.

Individuals seeking supports and services from OPWDD may request entry in OPWDD's system from many points including approaching the local Regional Office directly or a provider agency. The Regional Offices assists individuals who indicate a need for services by utilizing OPWDD's tools for assessing individual needs and service planning. This process includes the determination of developmental disability and Level of Care evaluation process outlined in Appendix B-6 (f) as well as the development of a Preliminary Individualized Service Plan (see Appendix D for more information). Once eligibility for OPWDD services is established, individuals are provided with opportunities for supports and services that meet the individual's needs and valued outcomes (as a first step) and then resources (including HCBS waiver services) are identified and offered thereafter to meet those needs.

This individualized planning and delivery process maintains each person's access to local, state, and federal programs, while subordinating eligibility and funding decisions to choices determined through the person-centered planning process. These efforts ensure the provision of sustainable supports and services for individuals across the full continuum of needs and challenges.

If, through this person-centered planning process, an individual chooses to apply for HCBS waiver services, the individual must first meet the following criteria for enrollment:

1. Have mental retardation or a developmental disability in accordance with the definition found at New York State Mental Hygiene Law Section 1.03 (22),

2. Be Medicaid eligible,

3. Be eligible for ICF/DD level of care. Please see the section describing the Level of Care evaluation process.

4. Reside in an appropriate living arrangement (and/or be residing in an appropriate living arrangement once enrolled in the HCBS waiver) as per OPWDD's waiver regulations.

The process for waiver enrollment is then coordinated and facilitated through the individual's local regional office.

In accordance with OPWDD's CMS approved waiver (2009-2014), OPWDD continues to prioritize participant needs on a statewide basis as follows:

Priority 1: Any of the following (i.e., emergencies):

--Abusive or neglectful situation constituting imminent risk of harm
--Imminent danger to self
--Imminent danger to others
--Homeless or in imminent danger of becoming homeless

Priority II: Any of the following (i.e., urgency/emergency prevention)

--Aging or failing health of caregiver/no alternate caregiver available
--Living situation presents a significant risk of neglect or abuse
--Medical/physical condition requires care not available in present situation
--Presents an increasing risk to self or others
--Affected by court or legislative mandate requiring residential placement

Priority III: This priority group includes all who present a need but there is no danger to the health and safety of the individual or his/her caregiver (i.e. considered not urgent). Factors to consider include:

--Compatibility of the individual with available services
--Compatibility with the other individuals in a shared living arrangement
--Relative need for supports for daily living

Appendix B: Participant Access and Eligibility

B-3: Number of Individuals Served - Attachment #1 (4 of 4)

Answers provided in Appendix B-3-d indicate that you do not need to complete this section.

Appendix B: Participant Access and Eligibility

B-4: Eligibility Groups Served in the Waiver

a.

1. **State Classification.** The State is a *(select one)*:
   - (●) **§1634 State**
   - ( ) **SSI Criteria State**
   - ( ) **209(b) State**

2. **Miller Trust State.**
   Indicate whether the State is a Miller Trust State *(select one)*:
   - (●) **No**
   - ( ) **Yes**

b. Medicaid Eligibility Groups Served in the Waiver. Individuals who receive services under this waiver are eligible under the following eligibility groups contained in the State plan. The State applies all applicable federal financial participation limits under the plan. *Check all that apply*:

Eligibility Groups Served in the Waiver (excluding the special home and community-based waiver group under 42 CFR §435.217)

- [ ] **Low income families with children as provided in §1931 of the Act**
- [ ] **SSI recipients**
- [ ] **Aged, blind or disabled in 209(b) states who are eligible under 42 CFR §435.121**
- [ ] **Optional State supplement recipients**
- [ ] **Optional categorically needy aged and/or disabled individuals who have income at:**

  Select one:

  - ( ) **100% of the Federal poverty level (FPL)**
  - ( ) **% of FPL, which is lower than 100% of FPL.**

  Specify percentage: [ ]

- [ ] **Working individuals with disabilities who buy into Medicaid (BBA working disabled group as provided in §1902(a)(10)(A)(ii)(XIII)) of the Act)**
- [ ] **Working individuals with disabilities who buy into Medicaid (TWWIIA Basic Coverage Group as provided in §1902(a)(10)(A)(ii)(XV) of the Act)**
- [ ] **Working individuals with disabilities who buy into Medicaid (TWWIIA Medical Improvement Coverage Group as provided in §1902(a)(10)(A)(ii)(XVI) of the Act)**

- [ ] **Disabled individuals age 18 or younger who would require an institutional level of care (TEFRA 134 eligibility group as provided in §1902(e)(3) of the Act)**
- [ ] **Medically needy in 209(b) States (42 CFR §435.330)**
- [ ] **Medically needy in 1634 States and SSI Criteria States (42 CFR §435.320, §435.322 and §435.324)**
- [ ] **Other specified groups (include only statutory/regulatory reference to reflect the additional groups in the State plan that may receive services under this waiver)**

Specify:

Infants and Children under Age 19 (42 CFR 435.118);

Mandatory Coverage of Parents and other Caretaker Relatives (42 CFR 435.110);

Optional Coverage of Parents and other Caretaker Relatives (42 CFR 435.220);

Adult Group (covers non-pregnant individuals age 19 – 64, not enrolled in Medicare) (42 CFR 435.119);

Children who qualify under 1902(a)(10)(A)(i)(II)(aa) (Deemed SSI eligible);

Children who qualify for State adoption assistance (42 CFR 435.227);

Children for whom an adoption agreement is in effect or foster care maintenance payments are being made under Title IV-E (42 CFR 435.145);

Individuals who qualify under 1902(a)(10)(A)(i)(II)(bb)(Qualified Severely Impaired); and

Disabled Adult Children (DAC) beneficiaries who are eligible under 1634(c) of the Social Security Act.

Special home and community-based waiver group under 42 CFR §435.217) *Note: When the special home and community-based waiver group under 42 CFR §435.217 is included, Appendix B-5 must be completed*

- (●) **No. The State does not furnish waiver services to individuals in the special home and community-based waiver group under 42 CFR §435.217.** *Appendix B-5 is not submitted.*
- ( ) **Yes. The State furnishes waiver services to individuals in the special home and community-based waiver group under 42 CFR §435.217.**

Select one and complete Appendix B-5.

- ( ) **All individuals in the special home and community-based waiver group under 42 CFR §435.217**
- ( ) **Only the following groups of individuals in the special home and community-based waiver group under 42 CFR §435.217**

Check each that applies:

- [ ] **A special income level equal to:**

Select one:

- ( ) **300% of the SSI Federal Benefit Rate (FBR)**
- ( ) **A percentage of FBR, which is lower than 300% (42 CFR §435.236)**

Specify percentage: [ ]

- ( ) **A dollar amount which is lower than 300%.**

Specify dollar amount: [ ]

- [ ] **Aged, blind and disabled individuals who meet requirements that are more restrictive than the SSI program (42 CFR §435.121)**
- [ ] **Medically needy without spend down in States which also provide Medicaid to recipients of SSI (42 CFR §435.320, §435.322 and §435.324)**
- [ ] **Medically needy without spend down in 209(b) States (42 CFR §435.330)**

☐ **Aged and disabled individuals who have income at:**

Select one:

○ **100% of FPL**
○ **% of FPL, which is lower than 100%.**

Specify percentage amount:

☐ **Other specified groups (include only statutory/regulatory reference to reflect the additional groups in the State plan that may receive services under this waiver)**

Specify:

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (1 of 7)

In accordance with 42 CFR §441.303(e), Appendix B-5 must be completed when the State furnishes waiver services to individuals in the special home and community-based waiver group under 42 CFR §435.217, as indicated in Appendix B-4. Post-eligibility applies only to the 42 CFR §435.217 group.

a. **Use of Spousal Impoverishment Rules.** Indicate whether spousal impoverishment rules are used to determine eligibility for the special home and community-based waiver group under 42 CFR §435.217:

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (2 of 7)

Note: The following selections apply for the time periods before January 1, 2014 or after December 31, 2018

b. **Regular Post-Eligibility Treatment of Income: SSI State.**

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (3 of 7)

Note: The following selections apply for the time periods before January 1, 2014 or after December 31, 2018

c. **Regular Post-Eligibility Treatment of Income: 209(B) State.**

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (4 of 7)

Note: The following selections apply for the time periods before January 1, 2014 or after December 31, 2018

d. **Post-Eligibility Treatment of Income Using Spousal Impoverishment Rules**

The State uses the post-eligibility rules of §1924(d) of the Act (spousal impoverishment protection) to determine the contribution of a participant with a community spouse toward the cost of home and community-based care if it determines the individual's eligibility under §1924 of the Act. There is deducted from the participant's monthly income a personal needs allowance (as specified below), a community spouse's allowance and a family allowance as specified in the State Medicaid Plan. The State must also protect amounts for incurred expenses for medical or remedial care (as specified below).

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (5 of 7)

Note: The following selections apply for the five-year period beginning January 1, 2014

e. Regular Post-Eligibility Treatment of Income: §1634 State - 2014 through 2018.

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (6 of 7)

Note: The following selections apply for the five-year period beginning January 1, 2014

f. Regular Post-Eligibility Treatment of Income: 209(B) State - 2014 through 2018.

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-5: Post-Eligibility Treatment of Income (7 of 7)

Note: The following selections apply for the five-year period beginning January 1, 2014

g. Post-Eligibility Treatment of Income Using Spousal Impoverishment Rules - 2014 through 2018.

The State uses the post-eligibility rules of §1924(d) of the Act (spousal impoverishment protection) to determine the contribution of a participant with a community spouse toward the cost of home and community-based care. There is deducted from the participant's monthly income a personal needs allowance (as specified below), a community spouse's allowance and a family allowance as specified in the State Medicaid Plan. The State must also protect amounts for incurred expenses for medical or remedial care (as specified below).

Answers provided in Appendix B-4 indicate that you do not need to submit Appendix B-5 and therefore this section is not visible.

Appendix B: Participant Access and Eligibility

B-6: Evaluation/Reevaluation of Level of Care

As specified in 42 CFR §441.302(c), the State provides for an evaluation (and periodic reevaluations) of the need for the level(s) of care specified for this waiver, when there is a reasonable indication that an individual may need such services in the near future (one month or less), but for the availability of home and community-based waiver services.

a. Reasonable Indication of Need for Services. In order for an individual to be determined to need waiver services, an individual must require: (a) the provision of at least one waiver service, as documented in the service plan, and (b) the provision of waiver services at least monthly or, if the need for services is less than monthly, the participant requires regular monthly monitoring which must be documented in the service plan. Specify the State's policies concerning the reasonable indication of the need for services:

i. Minimum number of services.

The minimum number of waiver services (one or more) that an individual must require in order to be determined to need waiver services is: 1

ii. Frequency of services. The State requires (select one):

- ○ **The provision of waiver services at least monthly**
- ◉ **Monthly monitoring of the individual when services are furnished on a less than monthly basis**

If the State also requires a minimum frequency for the provision of waiver services other than monthly (e.g., quarterly), specify the frequency:

Not applicable.

b. Responsibility for Performing Evaluations and Reevaluations. Level of care evaluations and reevaluations are performed (*select one*):

- ○ **Directly by the Medicaid agency**
- ○ **By the operating agency specified in Appendix A**
- ○ **By an entity under contract with the Medicaid agency.**

  Specify the entity:

- ◉ **Other**

  Specify:

  The Initial LOC is the responsibility of the Operating Agency's regional offices, although a family or individual may be assisted by a voluntary agency to gather the necessary information (see C below for qualifications of individuals performing initial evaluations).

  Re-evaluations are typically completed by the Medicaid Service Coordinator (MSC-targeted case management) or Plan of Care Support Services (PCSS) provider (the service coordinator is responsible to ensure the timely completion of the LOC redetermination). As of October 2015, only not-for-profit agencies deliver MSC or PCSS services. Prior to October 2015, the OPWDD Regional Office and non-for-profit agencies served as MSC providers. For individuals enrolled in managed care, the FIDA-IDD care manager is responsible for completing LOC redeterminations.

c. Qualifications of Individuals Performing Initial Evaluation: Per 42 CFR §441.303(c)(1), specify the educational/professional qualifications of individuals who perform the initial evaluation of level of care for waiver applicants:

The initial LOC must be completed by a professional with at least one year of experience in conducting assessments or developing plans of care for people with developmental disabilities. Initial LOCs are reviewed by a physician and include the assessments conducted by "qualified practitioners" who may administer and interpret standardized measures of intelligence and adaptive behavior. A qualified professional is a person with a directly relevant master's degree or doctoral level education in psychology, who has training and supervised experience in the use and interpretation of such measures consistent with the recommendations contained in the respective test manuals for measures and with the requirements of ERA /APA/NCME (1999) standards for test administration and use and interpretation of individual test results.

d. Level of Care Criteria. Fully specify the level of care criteria that are used to evaluate and reevaluate whether an individual needs services through the waiver and that serve as the basis of the State's level of care instrument/tool. Specify the level of care instrument/tool that is employed. State laws, regulations, and policies concerning level of care criteria and the level of care instrument/tool are available to CMS upon request through the Medicaid agency or the operating agency (if applicable), including the instrument/tool utilized.

The OPWDD level of care instrument for the HCBS Waiver uses the same assessment criterion as the level of care instrument used for ICF/DD. The same instrument is used for both initial evaluations and re-evaluations. The level of care instrument with instructions is available on the OPWDD website at the following location: http://www.opwdd.ny.gov/node/869 . The level of care instrument does not limit participation by individuals with certain conditions or diagnoses.

The criteria appearing in the level of care instrument are:

1. Evidence of a developmental disability,
2. Disability manifested before age 22,
3. Evidence of a severe behavior problem (not required),
4. Health care need (not required),
5. Adaptive behavior deficit in one or more of the following areas: communication, learning, mobility, independent living or self-direction.

The applicant must have functional limitations that demonstrate a substantial handicap. For most applicants over the age of eight, the substantial handicap must be determined using a nationally normed and validated, comprehensive measure of adaptive behavior, administered by a qualified professional. For applicants over the age of eight who have an IQ of 60 or lower, the presence of a substantial handicap may be assessed and confirmed through clinical observation or interview rather than standardized testing.

For children (birth through eight) with a developmental delay, but no specific diagnosis, provisional eligibility may be confirmed based on clinical judgement by use of criteria based on 20 CFR, Appendix 1 to Subpart P of Part 404 regarding SSI eligibility, and determination of functional limitations in motor development, cognition and communication or social function. Consistent with Section 200.1 (mm)(1) of NYS Education Department regulations, substantial handicap associated with delay can be documented by the results of an evaluation that indicates:

- A 12-month delay in one or more functional areas, or
- A 33% delay in one functional area, or a 25% delay in each of two functional areas; or
- If appropriate, standardized instruments are administered yielding a score of 2.0 deviations below mean in one functional area or a score of 1.5 standard deviations below the mean in each of two functional areas.

Additional information on this process is contained within OPWDD policy guidance. Any future changes to this process/requirements will be contained within OPWDD policy guidance.

e. **Level of Care Instrument(s).** Per 42 CFR §441.303(c)(2), indicate whether the instrument/tool used to evaluate level of care for the waiver differs from the instrument/tool used to evaluate institutional level of care *(select one)*:

- (●) **The same instrument is used in determining the level of care for the waiver and for institutional care under the State Plan.**
- ( ) **A different instrument is used to determine the level of care for the waiver than for institutional care under the State plan.**

Describe how and why this instrument differs from the form used to evaluate institutional level of care and explain how the outcome of the determination is reliable, valid, and fully comparable.

f. **Process for Level of Care Evaluation/Reevaluation:** Per 42 CFR §441.303(c)(1), describe the process for evaluating waiver applicants for their need for the level of care under the waiver. If the reevaluation process differs from the evaluation process, describe the differences:

The initial stage of the Level of Care process begins when a person and/or family contact one of the state-operated Regional Offices to request services. In 2001, the OPWDD Eligibility Advisory "DETERMINING ELIGIBILITY FOR SERVICES: SUBSTANTIAL HANDICAP AND DEVELOPMENTAL DISABILITY" was issued to the field. The primary purpose of this policy advisory was to establish fair and consistent criteria by which the presence of developmental disability or substantial handicap could be confirmed by a Regional Office. This advisory provides detailed information regarding establishment of qualifying conditions, demonstration of substantial handicap via use of standardized adaptive behavior scales, age of onset of qualifying diagnoses and accompanying substantial handicaps, and expectations regarding indefinite continuation of the developmental disability (DD). A three-step eligibility review process has since been established by OPWDD to ensure careful and consistent review of all applications received. The general process for the first stage of the LOC process is as follows:

Step One Determinations: Requests for a DD determination are submitted to the local Regional Office that contains the county in which the applicant resides. In Step One, an intake worker and intake coordinator are involved as well as a masters-level or licensed psychologist and other clinical staff, if needed. The person or party who is requesting the eligibility determination is expected to provide the clinical information needed to make a determination. Once a complete documentation packet is received including all necessary psychological testing/evaluations as indicated in the eligibility advisory guidelines, the local Regional Office Eligibility Determination coordinator(s) makes a decision on eligibility for OPWDD services. If the individual is found eligible based on the criteria contained within the eligibility guidelines, the Regional Office notifies the party that requested the determination so that appropriate services and/or referrals for services may begin. If not found eligible at Step One, the individual's eligibility must be reviewed at Step Two.

Step Two Determinations: In Step Two DD Determinations the local Regional Office Director or their designee, and a second, licensed psychologist are involved in the determination at a minimum. Many Regional Offices now use a committee review process for Step Two determinations. They review the same information that was received and reviewed in Step One, as well as the decision rendered and reasons for said decision. If needed, those involved in the Step Two review can ask for additional clinical and/or historical information. The criteria for determinations of OPWDD eligibility at Step One and Step Two of the process are exactly the same, and are clearly delineated in the advisory guidelines. The final eligibility determination at Step Two is made by the Regional Office Director or their Designee, in conjunction with input from clinical/psychology staff and/or eligibility committee members. If the individual is found eligible, the Regional Office notifies the party that requested the determination so that appropriate services and/or referrals for services may begin. If the individual is found ineligible, the Regional Office provides the requesting party with a list of the materials or reports that were reviewed and a statement of the reasons for denial. In addition, if the individual is found ineligible, the opportunity to have eligibility reviewed by a third step review process is made known to the requesting party, in addition to other options (i.e., face to face meeting, fair hearing if applicable).

Step Three Determinations: Step Three DD Determinations can be requested by the individual and/or their advocate through the local Regional Office that made the original negative determination of eligibility (i.e., at the first and second levels of review). Upon the receipt of the complete documentation packet from the local Regional Offices, Third Step Review committees review the information to determine eligibility and then notify the local Regional Office of its recommendations. The purpose of the Third Step Review Committee is to review the clinical information submitted from the Regional Office and to make an independent eligibility determination on the basis of this paperwork in accordance with the criteria that was set forth in the OPWDD Eligibility Advisory issued on August 10, 2001, which parallels the language contained in Mental Hygiene Law (14 NYCRR 1.03 (22)). The Regional Office Director considers the recommendations from the Third Step Review committees and makes a final decision regarding eligibility or ineligibility.

In order to ensure consistent decision-making when it comes to determining eligibility for OPWDD services, the types and quality of information used must adhere to specific and standardized criteria (i.e., such as those established by many professional associations and health-care organizations). These practices are consistent with those established by a number of other state and federally funded programs (i.e., Social Security Administration, State Education) to ensure that determinations of eligibility for services follow clearly defined parameters so as to avoid inconsistent decision-making and to promote equity and fairness in those determinations rendered. The Eligibility guidelines and processes were established to ensure the definition set forth in MHL 1.03 (22) was met so as to avoid labeling any individual who truly did not meet the definition for Developmental Disability.

The DD Eligibility Determination process is the first step in completing the Initial Level of Care (LOC) evaluation for an individual seeking waiver services through OPWDD. In those cases where the individual is determined eligible for OPWDD services and has indicated they want some type of HCBS Waiver service and has a reasonable need for this type of waiver service that is not available from other sources (e.g. State Education or Early Intervention), the clinical information gathered for the DD Eligibility Determination process is conveyed to the regional office staff responsible for completing initial LOC determinations. This professional uses the clinical information supporting the DD determination to complete the LOC form (i.e. psychological evaluation(s), medical or specialty report(s), psychosocial history), and also verifies NYS residency of the applicant and need for waiver services. After all preliminary screening is completed the Regional Office staff works with the person and family to identify specific types of services needed, and the frequency and scope of those services.
It is the responsibility of the participant's Medicaid Service Coordinator (MSC-targeted case management) or Plan of Care Support Services (PCSS) coordinator or FIDA-IDD care manager to ensure that the annual Level of Care redetermination process is completed. For individuals enrolled in a managed care FIDA-IDD, the FIDA-IDD care manager is responsible to ensure the LOC redetermination process is completed. It must also be reviewed and approved by a Qualified Intellectual Disability Professional (QIDP) who is familiar with the participant's functional level. During this process the most recent psychological evaluation, psychosocial history and medical history is reviewed to determine if the information is still accurate. By definition, a developmental disability is expected to continue indefinitely and pose a lifelong handicap to the individual and as such the psychological evaluation and psychosocial history profiles of individuals served through the waiver generally show little change. If there is any question as to the Level of Care needed by an individual currently authorized for services, a physician would be consulted during the Level of Care process.

The process and information outlined in Appendix B-6 reflects the current OPWDD policy and practices articulated in OPWDD's guidance documents. These policies may undergo revisions in the future and any such changes will be appropriately reflected in OPWDD's guidance documents.

g. Reevaluation Schedule. Per 42 CFR §441.303(c)(4), reevaluations of the level of care required by a participant are conducted no less frequently than annually according to the following schedule *(select one)*:

- ○ **Every three months**
- ○ **Every six months Every**
- ○ **twelve months**
- ◉ **Other schedule**

Specify the other schedule:

OPWDD requires an annual level of care redetermination (i.e., every 12 months) for all waiver participants to ensure that the person continues to meet the ICF/DD level of care. However, from an OPWDD audit perspective, OPWDD allows an additional one month time period to obtain the reviewers (i.e., Qualified Mental Retardation Professional or physician or physician's assistant or nurse practitioner if so authorized by a physician) approval signature on the redetermination form.

h. Qualifications of Individuals Who Perform Reevaluations. Specify the qualifications of individuals who perform reevaluations *(select one)*:

- ○ **The qualifications of individuals who perform reevaluations are the same as individuals who perform initial evaluations.**
- ◉ **The qualifications are different.**

Specify the qualifications:

The initial LOC must be completed by a professional with at least one year of experience in conducting assessments or developing plans of care for people with developmental disabilities. Initial LOCs are reviewed by a physician and include the assessments conducted by "qualified practitioners" who may administer and interpret standardized measures of intelligence and adaptive behavior. A qualified professional is a person with a directly relevant master's degree or doctoral level education in psychology, who has training and supervised experience in the use and interpretation of such measures consistent with the recommendations contained in the respective test manuals for measures and with the requirements of ERA /APA/NCME (1999) standards for test administration and use and interpretation of individual test results.

It is the responsibility of the service coordinator to ensure the timely completion of the LOC redetermination process. For individuals enrolled in a managed care FIDA-IDD, the FIDA-IDD care manager is responsible to ensure the completion of the LOC redetermination. The annual LOC redetermination must be reviewed and approved by a Qualified Intellectual Disability Professional (QIDP) who is familiar with the participant's functional level or a physician (or physician's assistant or nurse practitioner if so authorized by a physician).

i. Procedures to Ensure Timely Reevaluations. Per 42 CFR §441.303(c)(4), specify the procedures that the State employs to ensure timely reevaluations of level of care *(specify):*

It is a function of the MSC or PCSS service coordinator to ensure the timely completion of the LOC redetermination. For individuals enrolled in a managed care FIDA-IDD, the FIDA-IDD care manager must ensure the timely completion of LOC redeterminations. OPWDD's Division of Quality Improvement (DQI) conducts annual MSC surveys and this survey includes a review of the timeliness of the LOC redetermination for a sample of participant records. The timely LOC reevaluation is also reviewed for a sample of participants during the annual DOH-ISP/LP review.

j. Maintenance of Evaluation/Reevaluation Records. Per 42 CFR §441.303(c)(3), the State assures that written and/or electronically retrievable documentation of all evaluations and reevaluations are maintained for a minimum period of 3 years as required in 45 CFR §92.42. Specify the location(s) where records of evaluations and reevaluations of level of care are maintained:

The OPWDD record retention standard for all major written and/or electronic records/documents related to service provision, including the level of care, exceeds the federal minimum of 3 years. The level of care documentation is kept in the participant's

clinical record in a paper or electronic format maintained by the service coordination agency, and must be retrievable upon request by the state or other appropriate authority.

Appendix B: Evaluation/Reevaluation of Level of Care

Quality Improvement: Level of Care

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

a. Methods for Discovery: Level of Care Assurance/Sub-assurances

The state demonstrates that it implements the processes and instrument(s) specified in its approved waiver for evaluating/reevaluating an applicant's/waiver participant's level of care consistent with level of care provided in a hospital, NF or ICF/IID.

i. Sub-Assurances:

a. ***Sub-assurance: An evaluation for LOC is provided to all applicants for whom there is reasonable indication that services may be needed in the future.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of initial ICF/DD Level of Care (LOC) determination forms present in sampled MSC records where the initial LOC was completed prior to the receipt of waiver services (Percentage=number of initial LOC forms present in the MSC record where the initial LOC was completed prior to the receipt of waiver services/total MSC records sampled).

Data Source (Select one):
Other
If 'Other' is selected, specify:
Division of Quality Improvement (DQI) Medicaid Service Coordination reviews

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/-5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

b. ***Sub-assurance: The levels of care of enrolled participants are reevaluated at least annually or as specified in the approved waiver.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of LOC redetermination forms present in the sampled MSC records that were re-evaluated within the previous 365 days.

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI MSC Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/-5%
Other Specify:	**Annually**	**Stratified** Describe Group:

	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

c. ***Sub-assurance: The processes and instruments described in the approved waiver are applied appropriately and according to the approved description to determine participant level of care.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of LOC redeterminations in sampled MSC records that meet waiver requirements for appropriate forms and processes (Percentage=number of LOC redeterminations that met requirements/total LOC redeterminations reviewed).

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI MSC Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample**

☐	☐	☐ Confidence Interval = +/-5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.
The operating agency (OPWDD) conducts discovery activities for LOC determinations during the annual joint DOH/OPWDD ISP/LP review. The operating agency also conducts discovery activities for LOC determinations through Division of Quality Improvement (DQI) review activities, which involve the annual statewide sampling of MSC records to review initial and reevaluations of LOC determinations.

b. Methods for Remediation/Fixing Individual Problems

i. Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.
Individual problems found for each of the three sub-assurances result in a letter from OPWDD describing the error that was found and requiring a response indicating the specific problem has been corrected. Error rates of greater than 10% result in a memo and/or e mail notices to the field citing the error trends found in the recent sample and advising all agencies to use their internal quality assurance process to determine if they have made similar errors.

If individual deficiencies are found they are documented on Exit Conference Form and the provider for care coordination review must remediate within 30 days and send attestation that they did so. If deficiencies are found that rise to the level of egregious, systemic, or pervasive, the provider/ will receive a Statement of Deficiency (SOD) requiring a Plan of Corrective Action (POCA). OPWDD verifies that the POCA has been implemented.

ii. Remediation Data Aggregation
Remediation-related Data Aggregation and Analysis (including trend identification)

☐ ☐

Responsible Party*(check each that applies):*	Frequency of data aggregation and analysis*(check each that applies):*
State Medicaid Agency	Weekly

Responsible Party*(check each that applies):*	Frequency of data aggregation and analysis*(check each that applies):*
☐ Operating Agency	Monthly
Sub-State Entity	Quarterly
Other Specify:	☐ Annually
	Continuously and Ongoing
	Other Specify:

c. **Timelines**
When the State does not have all elements of the Quality Improvement Strategy in place, provide timelines to design methods for discovery and remediation related to the assurance of Level of Care that are currently non-operational.

- (●) **No**
- ( ) **Yes**

Please provide a detailed strategy for assuring Level of Care, the specific timeline for implementing identified strategies, and the parties responsible for its operation.

Appendix B: Participant Access and Eligibility

B-7: Freedom of Choice

Freedom of Choice. *As provided in 42 CFR §441.302(d), when an individual is determined to be likely to require a level of care for this waiver, the individual or his or her legal representative is:*

i. informed of any feasible alternatives under the waiver; and
ii. given the choice of either institutional or home and community-based services.

a. **Procedures.** Specify the State's procedures for informing eligible individuals (or their legal representatives) of the feasible alternatives available under the waiver and allowing these individuals to choose either institutional or waiver services. Identify the form(s) that are employed to document freedom of choice. The form or forms are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

All applicants for services who the Regional Office has determined to have a developmental disability and may qualify for either ICF/DD or HCB services must be verbally informed of the choice they may make between the two types of Medicaid funded programs. After this discussion has occurred, but before enrollment, the person, his/her advocate, or his/her legal representative must sign form "HCBS Form 02.03.97 (3/97)" that indicates the person has been informed of the two options of either ICF/DD or HCBS and has chosen HCBS. The form also states the person's choice of service coordinator and the right to choose waiver service providers they prefer. The form must be signed by the applicant, family/advocate, service coordinator and a Regional Office representative.

b. **Maintenance of Forms.** Per 45 CFR §92.42, written copies or electronically retrievable facsimiles of Freedom of Choice forms are maintained for a minimum of three years. Specify the locations where copies of these forms are maintained.

HCBS Form 02.03.97 (3/97) must permanently be kept in the enrollment section of the person's Service Coordination Record. It must be retrievable within 24 hours upon demand from an authorized state or federal agency.

Appendix B: Participant Access and Eligibility

B-8: Access to Services by Limited English Proficiency Persons

Access to Services by Limited English Proficient Persons. Specify the methods that the State uses to provide meaningful access to the waiver by Limited English Proficient persons in accordance with the Department of Health and Human Services "Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons" (68 FR 47311 - August 8, 2003):

It is the policy of OPWDD to provide effective communication to any person, family member, or designee in receipt of or seeking services. OPWDD Language Access Policy and Procedures has a mechanism for providing interpretation/translation, filing complaints, staff training,

and monitoring.

At the point of contact staff is trained to assess language access needs and provide interpretation via telephone or in-person. OPWDD materials are translated into Spanish, Russian, Chinese, Haitian (Creole), Urdu, Yiddish, Italian, and Korean. Additional translation requests follow the process identified in the OPWDD Language Access Policy and Procedures. OPWDD staff is trained annually for effective communication. People are informed of their rights for effective communication by the translated Website, at the point of admission and through Rights and Responsibilities 14 NYCRR 633.4. OPWDD assessment tools have been updated to require communication needs for individuals, family members or designees.

• Title VI of the Civil Rights Act of 1964
• N.Y.S. Mental Hygiene Law §13.09(e)
• 14 NYCRR 633.4(a)(15) Meeting the communication needs of non-English speaking persons seeking or receiving services

Voluntary provider agencies under the auspices of OPWDD are required to adhere to the above laws and statues as they relate to effective communication. OPWDD allows agencies to access its telephonic interpretation service and its translated documents to benefit individuals and families who speak a language other than English. OPWDD modification to current assessment tools is also applicable to provider agencies. Providers will be required to capture language spoken by individuals, family members, or designees. To ensure compliance with said laws and regulations, OPWDD will be requiring that voluntary provider agencies in the receipt of Waiver funding have an Effective Communication Policy and Procedure. The Effective Communication Policy and Procedure should identify a process for the following:
1. Training staff about Cultural and Linguistic Competence;
2. Service provision that includes interpretation/translation; and,
3. Mechanisms for determining the communication needs of the service area and individuals accessing services.

Appendix C: Participant Services

C-1: Summary of Services Covered (1 of 2)

a. Waiver Services Summary. *List the services that are furnished under the waiver in the following table. If case management is not a service under the waiver, complete items C-1-b and C-1-c:*

Service Type	Service		
Statutory Service	**Day Habilitation**		
Statutory Service	**Live-in Caregiver (42 CFR §441.303(f)(8))**		
Statutory Service	**Prevocational Services**		
Statutory Service	**Residential Habilitation**		
Statutory Service	**Respite**		
Statutory Service	**Supported Employment (SEMP)**		
Supports for Participant Direction	**Community Transition Services**		
Supports for Participant Direction	**Fiscal Intermediary (FI) formerly Agency with Choice/Financial Management Services (AWC/FMS)**		
Supports for Participant Direction	**Individual Directed Goods and Services**		
Supports for Participant Direction	**Support Brokerage**		
Other Service	**Assistive Technology - Adaptive Devices**		
Other Service	**Community Habilitation**		
Other Service	**Environmental Modifications (Home Accessibility)**		
Other Service	**Family Education and Training**		
Other Service	**Intensive Behavioral Services**		
Other Service	**Pathway to Employment**		
Other Service	**Plan of Care Support Services**		

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Statutory Service

Service:

Day Habilitation

Alternate Service Title (if any):

HCBS Taxonomy:

Category 1:

04 Day Services | 04020 day habilitation

Category 2:

15 Non-Medical Transportation | 15010 non-medical transportation

Category 3:

Category 4:

Service Definition *(Scope):*
Assistance with acquisition, retention or improvement in self-help, socialization and adaptive skills including communication, travel and adult education that regularly takes place in a non-residential setting, separate from the person's private residence or other residential arrangement. Activities and environments are designed to foster the acquisition of skills, appropriate behavior, greater independence, community inclusion, relationship building, self-advocacy and informed choice.

Day Habilitation services may also be used to provide support retirement activities. As some people get older they may no longer desire to work and may need supports to assist them in meaningful retirement activities in their communities. This might involve altering schedules to allow for more rest time throughout the day, support to participate in hobbies, clubs and/or other senior related activities in their communities.

There were two main categories of Day Habilitation Services for service dates prior to 10/1/2015: Individual Day Habilitation (a one-to-one, individual-to-worker provided service with an hourly unit of service) and Group Day Habilitation (delivered in a group setting). The Individual Day Habilitation methodology will 'sunset' effective 9/30/2015. Group Day Habilitation services are furnished 4 or more hours per day on a regularly scheduled basis for 1 or more days per week or less frequently as specified in the participant's service plan. Meals provided as part of these services shall not constitute a "full nutritional regimen" (3 meals per day).

A supplemental version of both Individual (available to participants through 9/30/2015) and Group Day Habilitation is available for individuals who do not reside in a certified 24/7 location. This supplemental Day Habilitation is provided outside the 9-3 weekday time period, and includes late afternoon, evenings, and weekends. None of the services can be delivered at the same time.

All Day Habilitation services (Individual, Group and Supplemental services) have the same service description and focus on enabling the participant to attain or maintain his or her maximum functional level and shall be coordinated with any physical, occupational or speech therapies in the service plan. In addition, Day Habilitation services may serve to reinforce skills, behaviors or lessons taught in other settings.

When the transportation cost is included in the provider's day habilitation rate, the day habilitation program is responsible for "to and from" transportation and transportation involved in delivering day habilitation services. There is no separate Medicaid billing for transportation to and from a Day Habilitation service.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
Group DH , Individual DH, and supplemental GDH/IDH cannot be billed as overlapping services. Supplemental services are not available to individuals residing in certified residential settings, because the residence is paid for staffing on weekday evenings and anytime on weekends.

OPWDD has established a maximum daily amount of services that are available to individuals based upon their residence. Individuals residing in certified settings are limited to a maximum of six hours of non-residential services (or its equivalent) which must commence no later than 3 pm on weekdays.

Effective with service dates of 7/1/14 Day Habilitation services will not include funding for direct, hands-on physical therapy, occupational therapy, speech therapy, nutrition, or psychology services. In addition, effective 7/1/14 only nutrition services directly related to the habilitation service and psychology services that support the person's need for behavioral supports in the service setting will be included in the rate for the Day Habilitation Service. Between 7/1/14 and 12/31/15 , any instances where agencies' service provision does not comply with these requirements, will be addressed in the compliance process described in Addendum A.12. OPWDD will be eliminating waiver funding for direct hands-on therapies in Day Habilitation programs effective 1/1/16.

Federal Financial Participation (FFP) will be claimed for Individual Day Habilitation (including Supplemental Individual Day Habilitation) from 7/1/14 through the end date of Individual Day Habilitation service provision on 9/30/15.

The rate paid to a Day Habilitation provider of service may be a "Special Populations Funding" rate for an individual who has been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver. This higher rate is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting. The supports that are funded may include additional behavioral planning and staff training, and/or higher staffing ratios to support individuals whose need for supervision or for physical support exceeds that of the IDD population at large. Special Populations Funding will be in effect through June 30, 2017.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Statutory Service
Service Name: Day Habilitation

Provider Category:
Agency

Provider Type:
non-profit organization or state

Provider Qualifications

License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:
• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
• Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167).
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32)

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance

with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Statutory Service

Service:

Live-in Caregiver (42 CFR §441.303(f)(8))

Alternate Service Title (if any):

HCBS Taxonomy:

Category 1:

07 Rent and Food Expenses for Live-In Caregiver | 07010 rent and food expenses for live-in caregiver

Category 2:

Category 3:

Category 4:

Service Definition *(Scope):*
Live-in Caregiver is an unrelated care provider who resides in the same household as the waiver participant and provides supports to address the participant's physical, social, or emotional needs in order for the participant to live safely and successfully in his or her own home. The Live-in Caregiver must be unrelated to the participant by blood or marriage to any degree.

Payment for this service will cover the additional costs of rent and food that can be reasonably attributed to an unrelated live-in personal caregiver who resides in the same household as the waiver participant. Room and board includes rent, utilities and food. The method for determining the amount paid is specified in Appendix I-6.

Payment will not be made directly to the live-in caregiver. In some cases, payment will be made to a provider agency that will in turn transfer the appropriate amount of funds to the participant. The payment will consist of the total calculated monthly amount associated with the Live-in Caregiver. In addition to a participant, a Fiscal Intermediary (FI) Agency is another payee of Live-in Caregiver expenses. The FI is able to make payments for the Live-in Caregiver's portion of the rent, utilities and food expenses. The FI will make direct rent or utility payments to the landlord or utility company. Food expenses will be reimbursed after the presentation of a receipt that is approved by the participant or their designee. At the end of the calendar year, the FI agency follows procedures for reconciliation of Medicaid receipts against payments from participant accounts. The total service cost for Live-in Caregiver in and of itself does not include any administrative charges by a provider.

The participant must reside in their own home or leased residence. Payment will not be made when the participant lives in the caregiver's home, in a residence that is owned or leased by the provider of Medicaid services, in a Family Care home, or any other residential arrangement where the participant is not directly responsible for the residence.

The need for Live-in Caregiver will be documented in the participant's plan of care.
Specify applicable (if any) limits on the amount, frequency, or duration of this service: No limits will be applied to the service rendered by the live-in caregiver to the enrollee.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible**
- ☐ **Person Relative**
- ☐ **Legal**

Guardian Provider
Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization, state, or self-directed with fiscal employer agent

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Statutory Service
Service Name: Live-in Caregiver (42 CFR

§441.303(f)(8)) Provider Category:
Agency

Provider Type:
non-profit organization, state, or self-directed with fiscal employer agent
Provider Qualifications
License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non- profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:

- Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
- Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
- Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
- Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
- Rehab Counselor (14 NYCRR Part 679.99)
- Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
- Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
- Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
- Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167).
- Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32)

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider

Qualifications Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of

individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Statutory Service

Service:

Prevocational Services

Alternate Service Title (if any):

HCBS Taxonomy:

Category 1:

04 Day Services | 04010 prevocational services

Category 2:

15 Non-Medical Transportation | 15010 non-medical transportation

Category 3:

Category 4:

Service Definition *(Scope):*

Prevocational Services are those services that provide learning and work experiences, including volunteering, where participants can develop general, non-job-task-specific strengths and skills that contribute to employability in paid employment in integrated community settings. Services are expected to occur over a defined period of time which is determined based upon a person-centered planning process, and with specific outcomes to be achieved, as determined by the individual and their service and supports planning team through an ongoing person-centered planning process.

Individuals receiving prevocational services must have employment-related goals in their person centered services and supports plan; the general habilitation activities must be designed to support such employment goals. Competitive, integrated employment in the community for which an individual is compensated at or above minimum wage is considered to be the optimal outcome of prevocational services.

Prevocational services should enable each individual to attain the highest level of work in the most integrated

setting and with the job matched to the individual's interests, strengths, priorities, abilities and capabilities, while following applicable federal wage guidelines from the U.S. Department of Labor. Services are intended to develop and teach general skills. Examples include, but are not limited to: ability to communicate effectively with supervisors, co-workers and customers; generally accepted community workplace conduct and dress; ability to follow directions; ability to attend to and complete tasks; punctuality and attendance; appropriate behaviors in and outside the workplace; workplace problem solving skills and strategies; mobility training; career planning; proper use of job-related equipment and general workplace safety.

Services include activities that are not primarily directed at teaching skills to perform a particular job, but at underlying habilitative goals (e.g., attention span, motor skills, interpersonal relations with co-workers and supervisors) that are associated with building skills necessary to perform work and optimally to perform competitive, integrated employment.

Prevocational services do not include vocational services provided in facility based work settings that are not integrated settings in the general community workforce.

Beginning July 1, 2015 there will be two separate types of prevocational services: Site Based Prevocational Services and Community Prevocational Services. Site based prevocational services are prevocational services that are delivered in OPWDD certified non-residential facilities. Community prevocational services are prevocational services that are delivered in the most integrated setting appropriate to the needs of the individual, except under limited circumstances specified in the regulations (e.g. when service delivery in the community may jeopardize the health and safety of individuals).

Documentation must be maintained in the file of each individual receiving this service that the service is not available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.)

The service may be provided in the community or a worksite (where the person makes less than 50% of the minimum or prevailing wage) to introduce the participant to the world of work, use of transportation options and adult education resources that will contribute to learning about employment. Transportation costs may be part of an agency rate depending upon the needs of the individual(s) and the availability of public transportation.

Each provider of Prevocational services is surveyed annually by the OPWDD Division of Quality Improvement. Part of the survey is an assessment of the prevocational nature of the service. DQI and the OPWDD Bureau of Waiver Management work collaboratively to make the determination of the prevocational, or vocational, intent of the service.

Community Prevocational Services will be reimbursed at an hourly fee and Site Based Prevocational Services will be reimbursed at a daily fee.

The rate paid to a Prevocational Services provider of service may be a "Special Populations Funding" rate for an individual who has been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver. This higher rate is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting. The supports that are funded may include additional behavioral planning and staff training, and/or higher staffing ratios to support individuals whose need for supervision or for physical support exceeds that of the IDD population at large. Special Populations Funding will be in effect through June 30, 2017.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

OPWDD has established a maximum daily amount of services that are available to individuals based upon their residence. Individuals residing in certified settings are limited to a maximum of six hours of non-residential services (or its equivalent) which must commence no later than 3 pm on weekdays. The exception to this time of day restriction is employment services, as many individuals have jobs where supports are required on weekday evenings and weekends.

Service Delivery Method *(check each that applies)*:

☐ **Participant-directed as specified in Appendix E**

☐ ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

☐ **Legally Responsible**

☐ **Person Relative**

☐ **Legal Guardian Provider Specifications:**

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Statutory
Service Service Name:
Prevocational Services

Provider Category:
Agency

Provider Type:
non-profit organization or state

Provider Qualifications License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.
OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non- profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:
• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159) • Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Statutory Service

Service:

Residential Habilitation

Alternate Service Title (if any):

HCBS Taxonomy:

Category 1:

02 Round-the-Clock Services | 02011 group living, residential habilitation

Category 2:

15 Non-Medical Transportation | 15010 non-medical transportation

Category 3:

Category 4:

Service Definition *(Scope):*
Individually tailored supports that assist with the acquisition, retention or improvement in skills related to living in the community. These supports include adaptive skill development, assistance with activities of daily living (hands-on), community inclusion and relationship building, training and support for independence in travel, transportation, adult educational supports, social skills, leisure skills, self-advocacy and informed choice skills, and appropriate behavior development that assists the participant to reside in the most integrated setting appropriate to his/her needs. Residential habilitation services are provided to individuals living in the following certified locations: Supervised Individualized Residential Alternatives (Supervised IRAs), Supportive Residential Alternatives (Supportive IRAs), and Family Care Residences. The services included in the residential habilitation rate for these settings are described below.

Nursing supervision of direct care staff and coordination of residents' health care needs, including prescriptions, medication administration and medication administration training and oversight, coordinating needed medical appointments, follow-up reports from medical appointments, follow-up and interface with hospital staff regarding Emergency Room visits and other hospitalizations .

Professional services of a Registered Nurse or Licensed Practical Nurse, delivered in the residence, may be accessed using State Plan Nursing, under the following conditions:
• The service is ordered by a physician and prior authorized by the Department of Health based upon the health care needs of the person that cannot be met with residential staffing alone (both Direct Support Professionals & clinicians who work for the Residential Habilitation service provider); and

• The Registered Nurse or Licensed Practical Nurse who delivers the State Plan Nursing service is not employed by the agency providing the Residential Habilitation service to the person.

Supervised IRAs: In addition to habilitation, protective oversight, and supervision services delivered at the residence, the Medicaid residential habilitation rate for Supervised IRA homes shall reimburse the additional services and supplies outlined below. Since funding for these services and supplies is included in the residential habilitation rate, there will be no separate Medicaid billing of equivalent State Plan or waiver services on behalf of Supervised IRA residents:
• Program-related transportation, including transportation to and from recreational and community inclusion activities.
• Non-emergency transportation to and from all outpatient medical, dental, and clinical service appointments required by residents.
• Habilitation, protective oversight, and supervision services promoting community inclusion, socialization, and recreational activities outside of the premises during weekday evenings and anytime on weekends There is an exception for supported employment, prevocational services, and pathway to employment provided at an integrated work or volunteer site located in the community and not in setting that is certified by OPWDD. An exception is also allowed for community habilitation or personal care services that are provided at the resident's place of integrated, competitive employment.

The services of personal care attendants, home health aides in the residence on weekdays or in the residence or in other locations on weekday evenings or anytime on weekends (unless related to employment as noted above).

Supportive IRAs: In addition to habilitation, protective oversight, and supervision services delivered at the residence, the Medicaid residential habilitation rate for Supportive IRA homes shall reimburse the additional services outlined below. Since funding for these services is included in the residential habilitation rate, there will be no separate Medicaid billing of equivalent State Plan or waiver services on behalf of Supportive IRA residents:
• Program-related transportation, including transportation to and from recreational and community inclusion activities.
• Non-emergency transportation to and from all outpatient medical, dental, and clinical service appointments required by residents.
• Habilitation, protective oversight, and supervision services promoting community inclusion, socialization, and recreational activities outside of the premises during weekday evenings and anytime on weekends. There is an exception of supported employment, prevocational services, and pathway to employment provided at an integrated work or volunteer site located in the community and not in setting that is certified by OPWDD. An exception is also allowed for community habilitation or personal care services that are provided at the resident's place of integrated, competitive employment.
• Services of personal care attendants and home health aides in the residence on weekdays or in the residence and in other locations on weekday evenings or anytime on weekends (unless related to employment as noted above).

Family Care Homes: In addition to habilitation, protective oversight, and supervision services delivered at the residence, the Medicaid residential habilitation rate for Family Care Homes shall reimburse the additional services outlined below. Since funding for these services is included in the residential habilitation rate, there will be no separate Medicaid billing of equivalent State Plan or waiver services on behalf of Family Care Home residents:
• Program-related transportation, including transportation to and from recreational and community inclusion activities.
• Habilitation, protective oversight, and supervision services promoting community inclusion, socialization, and recreational activities outside of the premises during weekday evenings and anytime on weekends. There is an exception for supported employment, prevocational services, and pathway to employment provided at an integrated work or volunteer site located in the community and not in setting that is certified by OPWDD. An exception is also allowed for community habilitation or personal care services that are provided at the resident's place of integrated, competitive employment.
• Services of personal care attendants and home health aides in the residence during weekdays or in the residence and in other locations on weekday evenings or anytime on weekends (unless related to employment as noted above).

Payment is not made for the cost of room and board, including the cost of building maintenance, upkeep and improvement. The method by which the costs of room and board are excluded from payment for Residential Habilitation is specified in Appendix I-5. Payment is not made, directly or indirectly, to members of the individual's immediate family, except as provided in Appendix C-2.

The rate paid to a Residential Habilitation provider of service may be a "Special Populations Funding" rate for an individual who has been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver. This higher rate is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting. The supports that are funded may include additional behavioral planning and staff training, and/or higher staffing ratios to support individuals whose need for supervision or for physical support exceeds that of the IDD population at large. Special Populations Funding will be in effect through June 30, 2017.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

With the implementation of Community Habilitation (see Appendix C), Residential Habilitation services will be limited to individuals who reside in provider-managed or OPWDD certified residential settings including family care.

Effective with service dates of 7/1/14 Residential Habilitation services will not include funding for direct, hands-on physical therapy, occupational therapy, speech therapy, nutritional or psychological services. In addition, effective 7/1/14 only nutrition services directly related to the habilitation service and psychology services that support the person's need for behavioral supports in the service setting will be included in the rate for the Residential Habilitation Service. Between 7/1/14 and 12/31/15, any instances where agencies' service provision does not comply with these requirements, will be addressed in the compliance process described in Addendum A.12.

After 10/1/2015, the Residential Habilitation provider is responsible for the payment of all Aide Services provided in the Residence: personal care services, home health aide services, homemaker services, and consumer directed personal assistance programs. In addition, after 10/1/2015 Supportive IRAs and CRs and Family Care Homes are responsible for the reimbursement of residents' Supplemental Group Day Habilitation. Residents of Supportive IRAs and CRs and Family Care Home can continue to receive Community Habilitation on weekday evenings and anytime on weekends however, the service must be reimbursed by the Residential Habilitation provider.

For service dates after 10/1/2015, the Residential Habilitation provider is responsible for the payment and provision of nutrition and psychology services to residents in Supervised IRAs and CRs. Nutritional services that are related to Residential Habilitation include meal planning and monitoring, assessment of dietary needs and weight changes, development of specialized diets, diet education, and food safety and sanitation. Psychology services such as behavioral assessment and intervention planning, delivery and review or monitoring of behavioral interventions and behavioral support services that are directly related to Residential Habilitation. These services must be provided by Licensed Psychologists, Licensed Clinical Social Workers or Behavioral Intervention Specialists.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Statutory Service
Service Name: Residential Habilitation

Provider Category:

Agency

Provider Type:

non-profit organization or state

Provider Qualifications

License *(specify)*:

Certificate *(specify)*:

Other Standard *(specify)*:

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver

services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:
• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
• Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements, including physical plant and fire safety.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Statutory Service

Service:

Respite

Alternate Service Title (if any):

HCBS Taxonomy:

Category 1:

09 Caregiver Support | 09011 respite, out-of-home

Category 2:

09 Caregiver Support | 09012 respite, in-home

Category 3:

Category 4:

Service Definition *(Scope):*
Services provided to participants unable to care for themselves that are furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the participant. Respite care is not furnished or provided for the purpose of compensating relief or substitute staff in certified community residences.

Respite services are provided in the following locations: individual's home or place of residence or any other non-certified community location; Family Care home; Medicaid certified ICF/DD; Individualized Residential Alternative (IRA) or Community Residence (CR); and free-standing Respite facility under the auspices of OPWDD.

Federal financial participation will not be claimed for the cost of room and board except when provided as part of respite care in a facility approved by the State that is not a private residence.

Individuals who self-direct their Community Habilitation, Respite and Supported Employment services with budget authority, may be eligible for "Special Populations Funding" if they have been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver. As described in Appendix E, the eligible individual's budget may be increased up to the level of the Special Populations Funding and therefore could be used to fund self-directed, "self-hired" staff who deliver Respite. The rate paid for the self-directed services follows the same limitations as are in place for all Individuals who exercise budget authority. The higher PRA funding is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting. The supports that are funded may include higher staffing ratios to support individuals whose need for supervision or for physical support exceeds that of the IDD population at large. Special Populations Funding will be in effect through June 30, 2017.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

Service Delivery Method *(check each that applies)*:

- ☐ ☐ **Participant-directed as specified in Appendix E**
- ☐ ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ ☐ **Relative**
- ☐ **Legal Guardian Provider**

Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Statutory
Service Service Name:
Respite

Provider Category:
Agency

Provider Type:
non-profit organization or state

Provider Qualifications License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non- profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:

- Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
- Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
- Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
- Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
- Rehab Counselor (14 NYCRR Part 679.99)
- Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
- Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
- Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
- Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
- Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

For provider that bill waiver services directly through eMedNY, OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:
NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:
Statutory Service

Service:
Supported Employment

Alternate Service Title (if any):
Supported Employment (SEMP)

HCBS Taxonomy:

Category 1:
03 Supported Employment

SubCategory 1:
03010 job development

Category 2:
03 Supported Employment

Sub-Category 2:
03021 ongoing supported employment, individual

Category 3:
03 Supported Employment

Sub-Category 3:
03022 ongoing supported employment, group

Category 4:

Service Definition *(Scope):*
Supported Employment (SEMP) services are the ongoing supports to participants who, because of their disabilities, need on-going support to obtain and maintain a job in competitive or customized employment, or self-employment, in an integrated work setting in the general workforce for which an individual is compensated at or above the minimum wage. The outcome of this service is paid employment at or above minimum wage in an integrated setting in the general workforce, in a job that meets personal and career goals; as such, career planning is also an allowable service. Supported employment services can be provided through many different service models. Some of these models can include evidence-based supported employment or customized employment for individuals with significant disabilities.

Supported employment services may be provided individually or in groups of two (2) to eight (8) workers with disabilities. Group employment may include training activities and employment services provided in regular business, industry and community settings. Examples include mobile crews and other business-based workgroups employing small groups of workers with disabilities in employment in the community. Supports provided to a group must be provided in a manner that promotes integration into the workplace and interaction between participants and people without disabilities in those workplaces.

Supported employment services may include any combination of the following services: vocational/job-related discovery or assessment, person-centered employment planning, job placement, job development, negotiation with prospective employers, job analysis, job carving, training and systematic instruction, job coaching, benefits support, training and planning, transportation, asset development and career advancement services, and other workplace support services including services not specifically related to job skill training that enable the waiver participant to be successful in integrating into the job setting.

SEMP services may also include services and supports that assist the participant in achieving self-employment through the operation of a business including home-based self-employment. However, Medicaid funds are not used to defray the expenses associated with starting up or operating a business. Assistance for self-employment may include: (a) aiding the participant to identify potential business opportunities; (b) assistance in the development of a business plan, including potential sources of business financing and other assistance in developing and launching a business; (c) identification of the supports that are necessary in order for the participant to operate the business; and (d) ongoing assistance, counseling and guidance once the business has been launched.

Beginning July 1, 2015 SEMP services will consist of two distinct phases: Intensive SEMP and Extended SEMP which can be provided on an individual or group basis. Intensive SEMP services include job development and/or intensive job coaching. An individual is eligible for Intensive SEMP if he or she is not employed or has been employed for less than 365 days. If an individual is not employed, the service provider must document, in a format prescribed by OPWDD, the individual's need for Intensive SEMP services, including information on how the services will assist the individual in obtaining employment. Extended SEMP services include ongoing job coaching and career development services for individuals who are employed. An individual is eligible for Extended SEMP if he or she is employed in an integrated workplace and earning at least minimum wage.

Individuals receiving supported employment services may also receive prevocational and or day habilitation.

Individuals who are self-directing their SEMP services, using 'self-hired' staff paid by the Fiscal Intermediary, will have claims submitted for hourly service provision. The maximum rate of the self-hired service will be no higher than the corresponding CH fee identified in addendum A to this waiver application. Beginning July 1, 2015 SEMP will be reimbursed at an hourly rate. For individuals who are self-directing their SEMP services using 'self-hired' staff, the maximum payment rate allowed will be adjusted to the new fees that take effect July 1, 2015.

Documentation must be maintained indicating that Supported Employment services are not available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.). Federal financial participation cannot be claimed for incentive payments, subsidies, or unrelated vocational training expenses such as the following:
1. Incentive payments made to an employer to encourage or subsidize the employer's participation in supported employment; or
2. Payments that are passed through to users of supported employment services.

Supported employment supports do not include vocational services provided in facility based work settings or other similar types of vocational services furnished in specialized facilities that are not a part of general community workplaces.

Supported employment supports do not include volunteering. Such volunteer learning and un-paid training activities that prepare a person for entry into the paid workforce are addressed through pre-vocational and pre-employment services.

Supported employment supports do not include payment for supervision, training, support and adaptations typically available to other workers without disabilities filling similar positions in the business.

Personal care/assistance may be a component part of the supported employment services, but may not comprise the entirety of the service.

Individuals receiving supported employment services may also receive prevocational, day habilitation, and Pathway to Employment. A participant's service plan may include two or more types of non-residential habilitation services. However, different types of non-residential habilitation are not billed during the same period of time.

Individuals who self-direct their Community Habilitation, Respite and Supported Employment services with budget authority,

may be eligible for "Special Populations Funding" if they have been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver. As described in Appendix E, the eligible individual's budget may be increased up to the level of the Special Populations Funding and therefore could be used to fund self-directed, "self-hired" staff who deliver Supported Employment). The rate paid for the self-directed services follows the same limitations as are in place for all Individuals who exercise budget authority. The higher PRA funding is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting. The supports that are funded may include higher staffing ratios or additional staffing hours to support individuals whose need for supervision or for physical support exceeds that of the IDD population at large. Special Populations Funding will be in effect through June 30, 2017.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

OPWDD has established limits in regulation regarding the maximum number of hours of day service that a person can receive based upon where he/she resides. These limits are outlined in 14 NYCRR 635-10.5 and for individuals residing in non-certified settings limit services to no more than 1.5 units of service per day (or its equivalent in hourly unit services) or roughly 8-9 hours of service. Individuals residing in certified settings are limited to the equivalent of six hours of services which can be received only on weekdays beginning prior to 3 pm, except in the instance of non-site-based employment services which can also be received in the evening/weekend within the hourly limit.

Beginning on 7/1/15, Intensive SEMP services are limited to 365 days from the date of enrollment or 250 hours whichever comes first.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Statutory Service
Service Name: Supported Employment (SEMP)

Provider Category:

Agency

Provider Type:

non-profit organization or state

Provider Qualifications

License *(specify)*:

Certificate *(specify)*:

Other Standard *(specify)*:

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials

stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:
• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
• Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Supports for Participant Direction

The waiver provides for participant direction of services as specified in Appendix E. Indicate whether the waiver includes the following supports or other supports for participant direction.

Support for Participant Direction:

Information and Assistance in Support of Participant Direction

Alternate Service Title (if any):

Community Transition Services

HCBS Taxonomy:

Category 1:

16 Community Transition Services

16010 community transition services

Category 2:

Sub-Category 2:

Category 3:

Category 4:

Service Definition *(Scope):*
Community Transition Services are non-recurring set-up expenses for individuals who are transitioning from an institutional or other provider-operated living arrangement to a living arrangement in a private residence in the community where the person is directly responsible for his or her own living expenses. Allowable expenses are those reasonable and necessary to enable a person to establish a basic household. Items purchased are the property of the individual receiving the service. The service must be identified in the plan of care. The service is administered by a Fiscal Intermediary (FI) agency for billing purposes, even if this is the only self-directed service that the person accesses.

Allowable items include: (a) security deposits that are required to obtain a lease on an apartment or home; (b) essential household furnishings including furniture, window coverings, food preparation items, and bed/bath linens; (c) set-up fees or deposits for utility or service access, including telephone, electricity, heating and water; (d) services necessary for the individual's health and safety such as pest eradication and one-time cleaning prior to occupancy; (e) moving expenses.

Items NOT allowable include monthly rental or mortgage expenses, food, regular utility charges, and/or items that are intended for purely diversion or recreational purposes such as televisions, cable television access, video games, stereos and/or DVD players.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
This service is a one-time reimbursement of actual expenses not to exceed $3,000. This service may not be used to pay for furnishing living arrangements that are owned or leased by a waiver provider where the provision of these items and services are inherent to the service they are already providing.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Supports for Participant Direction
Service Name: Community Transition Services

Provider Category:
Agency

Provider Type:
non-profit organization or state

Provider Qualifications

License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services

are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the NYS Department of Education.

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Supports for Participant Direction

The waiver provides for participant direction of services as specified in Appendix E. Indicate whether the waiver includes the following supports or other supports for participant direction.

Support for Participant Direction:

Financial Management Services

Alternate Service Title (if any):

Fiscal Intermediary (FI)

HCBS Taxonomy:

Category 1:

12 Services Supporting Self-Direction	12010 financial management services in support of self-directi

Category 2:

12 Services Supporting Self-Direction	12020 information and assistance in support of self-direction

Category 3:

Category 4:

Service Definition *(Scope):*

Effective 10/1/14, the Fiscal Intermediary (FI) service is evolved from the Financial Management Services (FMS) from the previous waiver.

Any individual eligible for HCBS waiver services may self-direct some or all of his/her services. The person self-directing receives an individualized portable budget that is directed by the individual pursuant to an approved plan.

If an individual chooses to self-hire their own staff, the employer of record must be either the Fiscal Intermediary or once the "common law employer" status is implemented, the individual or family may act in this capacity. In addition to using a Fiscal Intermediary to pay staff that the person "self-hires" an individual must choose an FI agency if the following services are included in their budget in order to provide for appropriate billing and claiming: Individual Directed Goods and Services, Live-in Caregiver, Support Brokerage, or Community Transition Services.

The most typical set of tasks that the FI supports the individual self-directing is with billing and payment of approved goods and services, fiscal accounting and reporting, ensuring Medicaid and corporate compliance, and general administrative supports.

For individuals that choose to self-direct some or all of their services, the individual has the option of choosing the level of FI supports that fall under three levels of service:

• Level 1 – There are no self-hired staff in the individual's budget; FI supports the individual with billing and payment of approved goods and services.
• Level 2 – The Individual/family is the employer of record; FI supports the individual with services including but not limited to training related to his/her employer responsibilities, staff management, and other related tasks. (When available in the future)
• Level 3 - FI is the employer of record; the FI assists the individual with self-hiring staff which includes but is not limited to providing and supporting hiring and discharge practices for self-direct staff, verifying staff citizenship status, completing required background checks, arranging for back-up staffing, and other related tasks.

If the individual chooses to be the employer of record, the FI supports includes the provision of training to the individual on his/her employer responsibilities by providing the participant with orientation and support in areas of staff hiring (including assistance with job descriptions), staff management, performance evaluations, staff conflict resolution, and reviewing federal Department of Labor information and agency employment policies with the individual.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
Under self-hired model, the maximum rate that can be paid is limited to the rate paid to provider agencies as noted in Addendum A (Rate Setting).

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Supports for Participant Direction
Service Name: Fiscal Intermediary (FI)

Provider Category:
Agency

Provider Type:
non-profit organization

Provider Qualifications

License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

FI services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the NYS Department of Education.

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services, the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity The FIDA-IDD is also responsible for verifying appropriate credentials for professional staff delivering waiver services and compliance with all applicable state and federal regulations and requirements.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Supports for Participant Direction

The waiver provides for participant direction of services as specified in Appendix E. Indicate whether the waiver includes the following supports or other supports for participant direction.

Support for Participant Direction:

Other Supports for Participant Direction

Alternate Service Title (if any):

Individual Directed Goods and Services

HCBS Taxonomy:

Category 1:

17 Other Services | 17010 goods and services

Category 2:

Category 3:

Sub-Category 3:

Category 4:

Sub-Category 4:

Service Definition *(Scope):*
Available only for services provided 10/1/14 or later, Individual Directed Goods and Services (IDGS) are services, equipment or supplies not otherwise provided through this waiver or through the Medicaid State Plan that addresses an identified need in an individual's service plan, which includes improving and maintaining the individual's opportunities for full membership in the community. Individuals who choose to self-direct their services with budget authority may receive IDGS as a waiver service. Individuals may manage their IDGS budget, as described in their individualized service plan, to fully purchase or put funds towards their personal fiscal resources to purchase items or services which meet the following criteria:
• Are related to a need or goal identified in the State-approved person-centered care plan;
• Are for the purpose of increasing independence or substituting for human assistance, to the extent the expenditures would otherwise be made for that human assistance;
• Promote opportunities for community living integration and inclusion;
• Are able to be accommodated without compromising the participant's health or safety; and,
• Are provided to, or directed exclusively toward, the benefit of the participant.

Service Eligibility Criteria:
• Available for individuals who are self-directing services

Services provided in non-integrated settings cannot be funded with IDGS, or in other settings that OPWDD determines do not comport with federal regulations governing home and community based settings. Additional information regarding the service can be found in Addendum C of this waiver, this Addendum describes the types of purchases/services that can be paid for within the IDGS budget, the specifications of these goods/services and the pricing parameters for each purchased item/service.

The individual directed budget must be preapproved on an annual basis by OPWDD or the FIDA-IDD and only those goods and services reflected on the approved budget are available for purchase through this service. A maximum monthly stipend will be made available to the individual for whom funds can be saved or accumulated for the purchase of goods and services within the approved budget year. The annual budget allocation may only be adjusted (increased or decreased) when changes have occurred regarding the member's assessed needs and may only exceed the maximum annual limit when authorized by the Commissioner of OPWDD or their designee. Review of the budget is required annually.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:

The billing for this service is limited to $32,000 per year per person not to exceed a person's Personal Resource Allocation (PRA). Limits to specific subcategories of IDGS are identified in Addendum A. 11 to this waiver.

Service Delivery Method *(check each that applies)*:

☐ ☐ **Participant-directed as specified in**
☐ **Appendix E** **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

☐ **Legally Responsible**
☐ **Person Relative**
☐ **Legal**
Guardian Provider
Specifications:

Provider Category	Provider Type Title
Agency	Fiscal Intermediary

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Supports for Participant Direction Service Name: Individual Directed Goods and Services

Provider Category:
Agency

Provider Type:
Fiscal Intermediary
Provider Qualifications License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver wavier services, the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non- profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the NYS Department of Education.

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications Entity Responsible for Verification:
For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements and all other applicable requirements.

Frequency of Verification:
NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Supports for Participant Direction

The waiver provides for participant direction of services as specified in Appendix E. Indicate whether the waiver includes the following supports or other supports for participant direction.

Support for Participant Direction:

Other Supports for Participant Direction

Alternate Service Title (if any):

Support Brokerage

HCBS Taxonomy:

Category 1:

12 Services Supporting Self-Direction

Sub-Category 1:

12020 information and assistance in support of self-direction

Category 2:

Sub-Category 2:

Category 3:

Sub-Category 3:

Category 4:

Sub-Category 4:

Service Definition *(Scope):*
Support Brokerage is available as a standalone service to individuals who self-direct their services with budget authority.

Support Brokers assist waiver participants (or the participant's family or representative as appropriate) to self-direct and manage some or all of their waiver services. Support Brokerage does not duplicate or replace the State Plan targeted case management service of Medicaid Service Coordination (MSC; see Appendix C) and differs from MSC in terms of intensity, frequency, and scope. The MSC identifies services, helps the participant make an informed choice of service providers, refers the person/family to the service chosen, and maintains and updates the plan of care. The Support Broker then takes the person beyond just the referral by becoming involved with the participant in the day-to-day management of those services and provides support and training to participants and their families regarding the ongoing decisions and tasks associated with participant direction.

The Support Broker provides assistance and practical skills training to the participant in the areas of: understanding and managing the responsibilities involved with self-direction; developing daily implementation of and managing the self-directed plan and budget; monitoring expenditures; negotiating terms and service arrangements with providers in the self-directed plan and budget; employer responsibilities such as recruiting, supervising, and training of participant-hired staff; service documentation requirements to ensure agreement with program and Medicaid standards; risk assessment, planning and ensuring safeguards are identified and met; developing and maintaining the Circle of Support and facilitating Circle of Support meetings.
The extent of the assistance provided is determined by the participant and specified in a written agreement between the participant and Support Broker. The broker service also needs to be reflected as part of the person centered plan (e.g. Individualized Service Plan). The participant has the authority to choose among qualified support brokers.

A participant may receive Support Brokerage and MSC concurrently as long as those services do not duplicate each other. In those instances where nominal overlapping is likely to occur the participant's service plan will clearly delineate service responsibilities.

An agency providing Support Brokerage may provide other services; however an individual Support Broker is not permitted to provide other waiver services to a participant they serve.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization, state or self-directed with the FI or person employed by the FIDA-IDD

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Supports for Participant Direction
Service Name: Support Brokerage

Provider Category:
Agency
Provider Type:
non-profit organization, state or self-directed with FI or person employed by the FIDA-IDD
Provider Qualifications
License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
All potential Support Brokers participate in a specialized two-day Broker training (Broker Training Institute) developed by OPWDD and complete specific courses. These additional courses are: Person Centered Planning for Brokers (Introduction to Person Centered Planning and Advanced Person Centered Planning), Self-Direction Budget Template and , Self- advocacy/Self-determination. These trainings are standardized statewide. All brokers are expected to remain actively involved with a local Support Brokerage Learning Network. Active participation includes attendance in 12 hours of annual training.

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: nonprofit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.
If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education.

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:
For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:
NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:
Other Service

As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.

Service Title:
Assistive Technology - Adaptive Devices

HCBS Taxonomy:

Category 1:

14 Equipment, Technology, and Modifications | 14031 equipment and technology

Category 2:

14 Equipment, Technology, and Modifications | 14020 home and/or vehicle accessibility adaptations

Category 3:

Category 4:

Service Definition *(Scope):*
Assistive Technology - Adaptive Devices means an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of participants.
Assistive Technology - Adaptive Device service means a service that directly assists a participant in the selection, acquisition, or use of an assistive technology device. The devices and services must be documented in the participant's individualized service plan (ISP)/ life plan (LP) as being essential to the person's habilitation, ability to function, or safety and essential to avoid or delay institutionalization.

Assistive Technology - Adaptive Device Services include:
A. the evaluation of the assistive technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the participant in the customary environment of the participant;
B. services consisting of purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for the participants;
C. services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
D. coordination and use of necessary therapies, interventions, or services with assistive technology devices, such as therapies, interventions, or services associated with other services in the service plan;
E. training or technical assistance for the participant, or, where appropriate, the family members, guardians, advocates or authorized representatives of the participant; and
F. training or technical assistance for professionals or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of participants.

Assistive Technology - Adaptive Devices include:
a. Direct selection communicators.
b. Alphanumeric communicators.
c. Scanning communicators.
d. Encoding communicators.
e. Speech amplifiers.
f. Electronic speech aids/devices.
g. Voice activated, light activated, motion activated and electronic devices.
h. Standing boards/frames and therapeutic equipment for the purpose of maintaining or improving the participant's strength, mobility or flexibility to perform activities of daily living.
i. Adaptive switches/devices.
j. Meal preparation and eating aids/devices/appliances.
k. Specially adapted locks.
l. Motorized wheelchairs.
m. Guide dogs, hearing dogs, service dogs (as defined in New York Civil Rights Law Article 47-b(4)and simian aids (capuchin monkeys or other trained simians that perform tasks for persons with limited mobility).
n. Portable Electric/hydraulic and manual lifts, ramps and ancillary equipment or modifications necessary to guarantee full access to, and safety in, a motor vehicle.
o. Electronic, wireless, solar-powered or other energy powered devices that demonstrate to the satisfaction of the commissioner, or designee, that the device(s) will significantly enable the participant to live, work or meaningfully participate in the community with less reliance on paid staff supervision or assistance. Such devices may include computers, observation cameras, sensors, telecommunication screens and/or telephones and/or other telecare support services/systems that enable the participant to interact with remote staff to ensure health and safety. Such devices cannot be used for the purpose of surveillance, but to support the person to live with greater independence.
p. Devices to assist with medication administration, including tele-care devices that prompt, teach or otherwise assist the participant. Repairs to such adaptive devices that will be cost-effective and approved by the regional office.
q. Portable generators necessary to support equipment or devices needed for the health or safety of the person.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
Assistive Technology - Adaptive Devices are expected to be a one-time only purchase. Replacements, repairs, upgrades, or enhancements made to existing equipment will be paid if documented as a necessity and approved by the regional office. Ongoing monitoring associated with telecare support services or other approved systems authorized under this definition may be provided if necessary for health and safety and documented to the satisfaction of the regional office Director or designee. The regional office will ensure, that where appropriate, justification from physicians, or other specialists or clinicians has been obtained.

In FFS, NYS is the provider of record for Assistive Technology for billing purposes. Services/devices are selected through a standardized bid process following the rules established by the Office of the State Comptroller. In the FIDA-IDD the plan is the payer and may contract with an approved network provider for the technology. The Assistive Technology is only billed to Medicaid once the device is delivered or the work is verified as complete; the amount billed is equal to the contract or vendor value.

Modifications to motor vehicles used by the participant will be limited to once in a five (5) year period unless the state regional office determines an equipment repair or replacement is needed sooner to ensure the person's health, safety or welfare. In instances when the vehicle's adaptive equipment must be replaced or repaired, a depreciation schedule will be used to determine the limit of the amount to be applied to the cost.

Only those devices/services not reimbursable under the State Medicaid Plan will be reimbursable under the HCBS Waiver.

Effective with claims submitted to eMedNY on or after 4/1/13 maximum expenditure for adaptive technology services for the

benefit of an individual Medicaid beneficiary may not exceed $35,000 in any consecutive two years period. If an individual requires an expenditure which exceeds the maximum expenditure amount, the Single State Medicaid Agency may submit and seek approval of an amendment to the waiver; the Single State Medicaid Agency shall provide supporting documentation as deemed necessary by CMS to support approval of the amendment. Any exceptions will be noted in Attachment 9 to Addendum A which will be included as part of the Comprehensive HCBS Waiver agreement.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	state or FIDA-IDD

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Other Service
Service Name: Assistive Technology - Adaptive Devices

Provider Category:
Agency

Provider Type:
State or FIDA-IDD

Provider Qualifications

License *(specify)*:

Certificate *(specify)*:

Other Standard *(specify)*:
OPWDD, the state operating agency, or the FIDA-IDD is the service provider. The state or FIDA-IDD, are approved Medicaid providers and contract with approved network providers.

Verification of Provider Qualifications

Entity Responsible for Verification:
OPWDD, the state operating agency, or the FIDA-IDD is the service provider.

Frequency of Verification:
All OPWDD regional offices are approved by the Department of Health (DOH) to provide any of the services included in the waiver.

The FIDA-IDD will be authorized by article 44 of the NYS Public Health Law to act as a Manage Care Entity.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:
Other Service

As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.

Service Title:

Community Habilitation

HCBS Taxonomy:

Category 1:

04 Day Services	04070 community integration

Category 2:

15 Non-Medical Transportation	15010 non-medical transportation

Category 3:

Category 4:

Service Definition *(Scope):*
Community Habilitation is similar in scope to residential habilitation supports and day habilitation supports, however, the focus of this new service is directed towards service delivery occurring largely in the community (non-certified) settings to facilitate and promote independence and community integration. Community Habilitation is defined as a face to face service in the waiver and in all guidance issued by OPWDD. Therefore, in order for a service to be billed, the staff must be with the individual. NYS-OPWDD wishes to add this service to provide another option to participants and families who wish to have their habilitation services available in a variety of every-day community settings.

Community Habilitation will offer skill training and supports as follows: adaptive skill development, assistance with activities of daily living, travel, health, adult educational supports, communication, social skills, leisure skills, money management, socially appropriate behaviors, life safety, hands-on-assistance provided by staff as necessary, professional oversight services as necessary (for example QIDP oversight), self-advocacy, informed choice, community inclusion, and relationship building. Community Habilitation may also include personal care, health care, protective oversight and supervision, and program-related transportation but these components do not constitute the entirety of the service.

Community Habilitation services are generally not vocational in nature. However, Community Habilitation services do support individuals in their attainment of life goals, including career goals. Therefore, Community Habilitation may include habilitation activities such as volunteering, learning about different types of jobs, visiting job sites and other experiences that are not long-term vocational commitments; yet the person is exposed to the world of work and the experience broadens his or her understanding of the types of employment they may wish to actively pursue in the future.

Once an individual is employed, community habilitation services may be used in a work setting to facilitate and promote independence, community inclusion, relationship building and socially appropriate behaviors. Community habilitation services cannot be used for job coaching related activities and cannot be provided at the same time as supported employment services.

Through its ongoing review of waiver services, OPWDD's DQI reviews the CH service to ensure that services are provided in accordance with the requirements.

Community Habilitation participants will be offered the opportunity to participant-direct the service as outlined in Appendix E or participants may use a provider managed service delivery model.

Individuals who self-direct their Community Habilitation, Respite and Supported Employment services with budget authority, may be eligible for “Special Populations Funding” if they have been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver. As described in Appendix E, the eligible individual’s budget may be increased up to the level of the Special Populations Funding and therefore could be used to fund self-directed, “self-hired” staff who deliver Community Habilitation. The rate paid for the self-directed services follows the same limitations as are in place for all Individuals who exercise budget authority. The higher PRA funding is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting. The supports that are funded may include higher staffing ratios to support individuals whose need for supervision or for physical support exceeds that of the IDD population at large. Special Populations Funding will be in effect through June 30, 2017.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:
Individuals living in their own home/leased residence or family home may receive Community Habilitation services at any time. People living in Family Care homes and IRAs or Community Residences may only receive Community Habilitation Services on week day days (start time prior to 3:00 pm) unless the CH service is delivered at the person’s integrated and competitive job and the CH service allows the person to maintain employment. Services may not be delivered in a certified location.

In addition to payment edits barring weekend CH for individuals receiving residential habilitation services, payment combination edits also preclude payment of CH services for residential habilitation recipients who already have a full contingent of day services on a given day.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Service Type: Other Service
Service Name: Community Habilitation

Provider Category:
Agency
Provider Type:
non-profit organization or state
Provider Qualifications
License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.
OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:
• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
• Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications
Entity Responsible for Verification:
For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.
Frequency of Verification:
NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Other Service

As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.

Service Title:

Environmental Modifications (Home Accessibility)

HCBS Taxonomy:

Category 1: 14 Equipment, Technology, and Modifications

Sub-Category 1: 14020 home and/or vehicle accessibility adaptations

Category 2:

Sub-Category 2:

Category 3:

Sub-Category 3:

Category 4:

Sub-Category 4:

Service Definition *(Scope):*
Those physical adaptations to the participant's home, required by the participant's service plan, that are necessary to ensure the health, welfare and safety of the participant or that enable the participant to function with greater independence in the home and without which the person would require institutionalization and/or more restrictive and expensive living arrangement. Adaptations include: installation of ramps, hand rails and grab-bars, widening of doorways doorways(but not hallways), modifications of bathroom facilities, installation of specialized electric and plumbing systems that are necessary to accommodate the medical equipment and supplies needed for the welfare of the recipient, lifts and related equipment, elevators when no feasible alternative is available, automatic or manual door openers/bells, modifications of the kitchen necessary for the participant to function more independently in his home, medically necessary air conditioning, Braille identification systems, tactile orientation systems, bed shaker alarm devices, strobe light smoke detection and alarm devices, small area drive-way paving for wheel-chair entrance/egress from van to home, safe environment modifications for behaviorally challenged participants require the prior review of a behavioral specialist and include window protections, reinforcement of walls, durable wall finishes, open-door signal devices, fencing, video monitoring systems and shatter-proof shower doors; and future technology devices that allow the participant to live more safely and independently to avoid possible institutional placement or placement in a more restrictive living environment, which are available at a reasonable cost in comparison to living in a more restrictive residential setting. The scope of environmental modifications will also include necessary assessments to determine the types of modifications needed.

Excluded are those adaptations or improvements to the home that are of general utility, and are not of direct medical or remedial benefit to the participant. Adaptations that add to the total square footage of the home's footprint are excluded from this benefit except when necessary to complete an adaptation (e.g., in order to improve entrance/egress to a residence or to configure a bathroom to accommodate a wheelchair). Also excluded are pools and hot tubs and associated modifications for entering or exiting the pool or hot tub. If Environmental Modifications are needed in order for the person to move into his/her new home, FFP may be claimed for work completed prior to the person's enrollment date as long as the service appears in the preliminary individualized service plan (PISP)/ life plan (LP) and work is completed within 30 days prior to the person moving into the home.

NYS is the provider of record for Environmental Modifications for billing purposes. The work is done by a contractor who is selected through a standard bid process, following the rules established by the Office of the State Comptroller. The e-mod is only billed to Medicaid once the contract work is verified as complete and the amount billed is equal to the contract value. Environmental Modifications are limited to individual or family owned or controlled homes.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
In most instances a specific type of Environmental Modification is a one-time benefit. However, in reasonable circumstances determined and approved by the State, a second modification may be considered for funding as follows: if a person moves to another home; if the current modifications are in need of repair, worn-out or unsafe; or if a participant wishes to spend considerable time with a non-cohabitating parent in their home and such modifications are required to ensure health and safety during these periods. An OPWDD memorandum dated February 21, 2012 limited to e-mods to Individual or Family Owned residences. State policy places certain limitations on environmental modifications requested when the home/apartment is a leased space, including property owner sign-off on the modification and limitations on federal/state liability for the cost of removal/replacement/repair of items in public spaces of rental properties.

Effective with claims submitted to eMedNY on or after 4/1/13 maximum expenditure for Environmental Modifications for the benefit of an individual Medicaid beneficiary may not exceed $60,000 in any consecutive five year period. If an individual requires an expenditure which exceeds the maximum expenditure amount, the Single State Medicaid Agency may submit and seek approval of an amendment to the waiver; the Single State Medicaid Agency shall provide supporting documentation as deemed necessary by CMS to support approval of the amendment. Any reimbursements in excess of the $60,000 limit will be identified in Attachment 10 to Addendum A which will be included as part of the Comprehensive HCBS Waiver agreement.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	State or FIDA-IDD

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Other Service
Service Name: Environmental Modifications (Home Accessibility)

Provider Category:
Agency

Provider Type:
State or FIDA-IDD
Provider Qualifications
License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
OPWDD, the state operating agency, or the FIDA-IDD is the service provider. The state or FIDA-IDD, are approved Medicaid providers and contract with approved network providers.

Verification of Provider Qualifications
Entity Responsible for Verification:
OPWDD, the state operating agency, or the FIDA-IDD is the service provider.
Frequency of Verification:
All OPWDD regional offices are approved by the Department of Health (DOH) to provide any of the services included in the waiver.

The FIDA-IDD will be authorized by Article 44 of the NYS Public Health Law to act as a managed care entity.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).
Service Type:
Other Service
As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.
Service Title:
Family Education and Training

HCBS Taxonomy:

Category 1: **Sub-Category 1:**

09 Caregiver Support | 09020 caregiver counseling and/or training

Category 2: **Sub-Category 2:**

Category 3:
Sub-Category 3:

Category 4:
Sub-Category 4:

Service Definition *(Scope):*

Family Education and Training (FET), is training given to families of participants enrolled in the HCBS waiver. The purpose of FET is to enhance the decision making capacity of the family unit, provide orientation regarding the nature and impact of a developmental disability on the person and his or her family, including behavioral management practices, and teach the family about service alternatives. FET is distinct from service coordination in that the purpose is to support the family unit in understanding and coping with the developmental disability. The information and knowledge imparted in FET increases the chances of creating a supportive environment at home and decreases the chances of a premature residential placement outside the home.

FET sessions may be private or in groups of families covering subject matter that enhances the ability of a family to handle the demands of nurturing a family member with a developmental disability. Personnel knowledgeable in the topics covered may conduct the sessions. Most frequently, this will be a service coordinator or behavioral specialist, but it may also include other clinicians and experts in such fields as law and finances pertaining to disabilities.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

FET has a unit of service of up to two hours in length. Two units of service will be provided per year. The regional office may authorize additional units of service for participants demonstrating extreme behavioral management needs if there is sufficient clinical data.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Other Service
Service Name: Family Education and Training

Provider Category:

Agency

Provider Type:

non-profit organization or state

Provider Qualifications

License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:

• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
• Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

FET has a unit of service of up to two hours in length. Up to two units of service will be provided per year. The Regional Office may authorize additional units of service for participants demonstrating extreme behavioral management needs if there is sufficient clinical data.

Verification of Provider Qualifications

Entity Responsible for Verification:

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable requirements.

Frequency of Verification:

Annual reviews of all provider agencies are performed by OPWDD's Division of Quality Improvement (DQI). In addition, each agency must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Other Service

As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.

Service Title:

Intensive Behavioral Services

HCBS Taxonomy:

Category 1:

10 Other Mental Health and Behavioral Services | 10040 behavior support

Category 2:

Category 3:

Category 4: **Sub-Category 4:**

Service Definition *(Scope):*
Intensive Behavioral Services is a waiver service, which is available under the following circumstances:

(1) For individuals who reside in a non-certified residential location, their own home or family home, or a family care home; and

(2) The individual or a party acting on behalf of the individual certifies through written documentation that the individual is at risk of imminent placement in a more restrictive living environment due to challenging behavioral episodes.

Intensive Behavioral Services are short-term, outcome-oriented, and of higher intensity than other behavioral interventions and are focused on developing effective behavioral management strategies to ensure health and safety and/or improve quality of life. Intensive Behavioral Services differ from services available through the State Plan as follows: the service will be available in the person's home; the service is short-term designed to achieve community stabilization; the service is of high intensity; the intent is to develop effective behavioral strategies that will be maintained, if necessary, through transitioning to other appropriate services to help the person to sustain the behavioral strategies long-term.

The components of Intensive Behavioral Services may include:

-completing the functional behavioral assessment,

-gathering information from other sources such as family, community supports or other affected service providers,

-developing an Behavior Support Plan,

-implementation and monitoring of behavioral interventions and strategies with the individual,

-collateral contacts that are for the direct benefit of the individual and enhance the effectiveness of the service,

-training of the primary caregivers and/or staff in the utilization of the behavioral interventions, and

-transitional planning with family, collateral and other agencies to refer the individual to appropriate services to maintain the behavioral strategies long-term.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
OPWDD's regional offices will authorize services if there is written documentation that substantiates that the individual is at risk of imminent placement in a more restrictive living environment due to behavioral episodes. The regional office's review to confirm that there is written documentation that substantiates the individual's risk may include the individual's ISP/LP, an intake or application form, a clinical inventory, current receipt of services, and additional supporting documentation. The risk assessment is consistently applied, but based on the person's available records different types of documents may need to be assessed.

Intensive Behavioral Services are authorized by the regional office and consists of the development of a functional behavioral assessment and behavioral support plan, and service hours to assist in implementing the behavior plan. Service hours may be authorized for up to a twelve month period and a maximum of 75 hours. Payment for the development of the person's functional behavioral assessment and behavior support plan is limited to once every three years.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Other Service
Service Name: Intensive Behavioral Services

Provider Category:

Provider Type:
non-profit organization or state
Provider Qualifications

License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
Provider agencies must demonstrate a capacity to deliver effective Intensive Behavioral Services. This demonstration of capacity must include the employment of and/or access to professional staff to deliver Intensive Behavioral services and to supervise the delivery of these services as outlined in this section.

Individuals who provide Intensive Behavioral Services, including development of the Functional Behavioral Assessment (FBA) and Behavior Support Plan (BSP) must meet required credentials and experiential requirements as follows:

-- Required Credentials: NYS Licensed Clinical Social Workers LCSW; or NYS licensed psychologists; or NYS Licensed Master Social Workers; or master's degree in psychology; or master's degree in a related human services field subject to the approval of OPWDD on a case-by-case basis.

LCSWs or NYS licensed psychologists must supervise individuals who are authorized to provide Intensive Behavioral Services as outlined above (i.e., LMSW or individuals with masters degrees). LCSWs or NYS licensed psychologists serving in a supervisory role must have at least two years of post-licensure experience in clinical supervision, and at least two years of post-licensure experience in treating or working with individuals with developmental disabilities and maladaptive or inappropriate behavior (the clinical supervision and post-licensure experience may occur concurrently). All clinical supervision must be provided in accordance with New York State requirements. If LCSWs or NYS licensed psychologists are delivering Intensive behavioral services, clinical supervision by other LCSWs or NYS licensed psychologists is not required.

All professional clinical staff persons must have the appropriate credentials stipulated by the NYS Department of Education. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Agencies providing Intensive Behavioral Services must demonstrate that they have systems in place to monitor the progress of individuals receiving Intensive Behavioral Services; to evaluate the outcome of the services; and to transition the individuals served to appropriate services to maintain their behavioral strategies. Provider outcome evaluation systems must focus on quantitative and qualitative measures of outcomes achieved.

Provider agencies must further demonstrate that they have effective clinical supervision systems and oversight controls in place that address the following:

- the number of supervisees assigned to each licensed/credentialed supervisor
- the type of supervision (in-person individual or group)
- the required frequency of supervision
- the provision of a contingent emergency supervisor if the assigned supervisor is not immediately available
- requirements for the supervisor's record or log of supervision including: the name and title of the supervisee; the date, length and location of supervision; the type of supervision; the nature of supervision (i.e., review of treatment/interventions, observations, in-service training); the signature and title of the supervisor;
- the effectiveness of supervision

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board

members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

Verification of Provider Qualifications

Entity Responsible for Verification:

For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and all other applicable policies and regulations. DQI will review to ensure that staff providing Intensive Behavioral Services meet the educational and experiential criteria in accordance with OPWDD policies.

Frequency of Verification:

NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD's Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Other Service

As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.

Service Title:

Pathway to Employment

HCBS Taxonomy:

Category 1:

03 Supported Employment | 03030 career planning

Category 2:

03 Supported Employment | 03010 job development

Category 3:

Service Definition *(Scope):*
The Pathway to Employment is a person-centered, comprehensive career planning and support service that provides assistance for participants to obtain, maintain or advance in competitive employment or self- employment.

The Pathway to Employment service will be available to individuals expressing an interest in competitive employment or self-employment including (but not limited to) individuals who receive Day Habilitation, Pre-Vocational and Supported Employment services, as well as students leaving high school.

It is a focused, time limited service that engages a participant in identifying a career direction, provides instruction and training in pre-employment skills, and develops a plan for achieving competitive, integrated employment at or above the state minimum wage. Within 12 months, or sooner, the outcome of this service is documentation of the participant's stated career objective; a detailed career plan used to guide individual employment supports; and preparation for supported employment services that assist a participant in obtaining, maintaining or advancing in competitive employment or self-employment.

Pathway to Employment participants must have competitive employment or self-employment as a stated goal in their service plans. The Pathway to Employment service will combine an individualized career planning process that identifies the person's support needs with the provision of services that will strengthen the skills needed to obtain, maintain or advance in competitive employment. Services provided under the Pathway to Employment service will be person-centered and may include; but not be limited to: vocational assessment; situational assessment; job readiness training including individualized and appropriate work-related behaviors; community experiences; pre-employment skills including tasks necessary to obtain employment based on the individualized needs of the participant; job related discovery; experiential learning in career exploration and vocational discovery; experiential learning to achieve a specific vocational outcome; assessment for use of assistive technology to increase independence in the workplace; community experiences through paid or unpaid internships, mentorships, apprenticeships, job clubs, work site visits, job placement, and other job exploration modalities; education and counseling around benefits management and employment; person-centered vocational planning; customized job development; individualized, ongoing job coaching; travel training; and behavioral interventions and supports.

The Pathway to Employment service may also provide planning for self-employment. Specific services include: identifying skills that could be used to start a business, and identifying business training and technical assistance that could be utilized in achieving self-employment goals.

Employment Related Goals: All Pathway to Employment participants will develop a specific individualized career plan with the Pathway to Employment provider for services that will focus on the individual's unique employment needs, talents, employment goals, and natural supports. At the end of Pathway to Employment, the provider in cooperation with the individual will create a formal vocational plan that will allow the individual to have a map of their career path. This Pathway to Employment career plan will outline the responsibilities of the participant and the responsibilities of the provider towards achievement of the employment goals.

It is anticipated that the majority of the Pathway to Employment service will be provided in community settings or at particular work sites. The cost of any reimbursable transportation associated with Pathway to Employment is included in the Pathway to Employment fee.

Documentation must be maintained indicating that the services provided under Pathway to Employment are not available under a program funded under section 110 of the Rehabilitation Act of 1973 or the IDEA (20 U.S.C. 1401 et seq.).
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
A detailed vocational career plan and preparation for supported employment services that assist an individual in obtaining competitive, integrated employment at or above the state minimum wage is the expected outcome from this service.

There is a lifetime limit of 556 hours for the service.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Other Service
Service Name: Pathway to Employment

Provider Category:
Agency

Provider Type:
non-profit organization or state
Provider Qualifications
License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
Only providers that currently offer both Day Habilitation and Supported Employment services (or have an equivalent agreement approved by OPWDD) will be authorized to provide Pathway to Employment services. Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8 and any additional employment and career planning trainings designated by OPWDD as a requirement for providing Pathway to Employment Services.

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the provider's board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medical Provider Agreement to enroll the voluntary provider in the NYS Medicaid Program in accordance with regulations found at Part 504 of 18 NYCRR. For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the OPWDD and/or the NYS Department of Education under the following regulations and laws:
• Nursing (8 NYCRR Part 64, and Education Law Title 8, Article 139)
• Speech Language Pathologist (8 NYCRR Part 75, and Education Law Title 8, Article 159)
• Psychology (8 NYCRR Part 72, and Education Law Title 8, Article 153)
• Social Work (8 NYCRR Part 74, and Education Law Title 8, Article 154)
• Rehab Counselor (14 NYCRR Part 679.99)
• Dietetics/Nutrition (8 NYCRR Part 79, and Education Law Title 8, Article 157)
• Occupational Therapy (8 NYCRR Part 76, and Education Law Title 8, Article 156)
• Physical Therapy (8 NYCRR part 77, and Education Law Title 8, Article 136)
• Applied Behavioral Sciences Specialist (8 NYCRR Part 79, and Education Law Title 8, Article 167)
• Behavioral Intervention Specialist (14 NYCRR part 633-16.b(32).

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must
comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and
Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.
Verification of Provider Qualifications
Entity Responsible for Verification:
For contracted providers of the FIDA-IDD Plan that deliver waiver services the FIDA-IDD is responsible to ensure that the provider is one that is approved by OPWDD to provide HCBS waiver services. The OPWDD approval is based upon its review that the entity is fiscally viable and meets the minimum standards to deliver HCBS waiver services including satisfactory character, competence, education and experience. The FIDA-IDD is responsible for verifying appropriate credentials for professional staff and compliance with applicable State and Federal regulations and requirements when licensed staff deliver waiver services.

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD’s Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations, the Part 633.8 training requirements, and other applicable requirements.
Frequency of Verification:
NYS performs an annual review of all OPWDD providers including providers contracted with the FIDA-IDD Plan. For providers that bill eMedNY directly for waiver services, annual reviews of providers and/or samples of individuals in the waiver are performed by OPWDD’s Division of Quality Improvement (DQI). In addition, all agencies, whether delivering services through managed care or fee-for-service Medicaid, must renew their waiver provider agreement every 5 years prior to the waiver renewal.

C-1/C-3: Service Specification

State laws, regulations and policies referenced in the specification are readily available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Service Type:

Other Service

As provided in 42 CFR §440.180(b)(9), the State requests the authority to provide the following additional service not specified in statute.

Service Title:

Plan of Care Support Services

HCBS Taxonomy:

Category 1:

01 Case Management | 01010 case management

Category 2:

Category 3:

Category 4:

Service Definition *(Scope):*
Plan of Care Support Services (PCSS) will be provided only to consumers who do not receive Medicaid Service Coordination (MSC) (i.e., targeted case management under the State Plan). PCSS are services needed to review and maintain a current Individualized Service Plan (ISP) for the person and to maintain documentation of the person's level of care eligibility. The PCSS staff are qualified MSCs and are available to assist the person with access issues, typically on a less frequent basis than the MSC service under the State Plan.

A person qualified to provide MSC may provide PCSS and will:
a. in consultation with the participant, maintain a current ISP and initiate a review of the plan twice per year. This must include a face-to-face contact with the person at the participant's residence or another agreed upon location;
b. make whatever contacts with the advocate and major service providers that are necessary to accurately review and update the plan if needed;
c. assure that the necessary safeguards have been taken to ensure the health and welfare of the person;
d. assure the level of care eligibility determination is completed annually;
e. notify the regional office if the person is no longer eligible for waiver services;
f. maintain a record that includes all required waiver enrollment documentation, clinical assessments, the ISP with attachments and the plan of care support service notes; and
g. initiate re-enrollment in MSC if circumstances warrant and/or the person chooses to receive MSC full time.

The PCSS service coordinator has the responsibility to determine if the person's health and safety needs or quality of services would be better served by the MSC service under the State Plan. If the regional office agrees with the MSC that the person's health, safety and/or best interests are potentially compromised, the participant may be asked to return to MSC until such time when the enrollee can safely use PCSS.
Specify applicable (if any) limits on the amount, frequency, or duration of this service:
Claims are limited to four times per year.

Service Delivery Method *(check each that applies)*:

- ☐ **Participant-directed as specified in Appendix E**
- ☐ **Provider managed**

Specify whether the service may be provided by *(check each that applies)***:**

- ☐ **Legally Responsible Person**
- ☐ **Relative**
- ☐ **Legal Guardian**

Provider Specifications:

Provider Category	Provider Type Title
Agency	non-profit organization or the state

Appendix C: Participant Services

C-1/C-3: Provider Specifications for Service

Service Type: Other Service
Service Name: Plan of Care Support Services

Provider Category:
Agency
Provider Type:
non-profit organization or the state
Provider Qualifications
License *(specify):*

Certificate *(specify):*

Other Standard *(specify):*
PCSS staff must be qualified MSCs (i.e., service coordinators). Service coordinators must: (a) either (1) have experience providing OPWDD Comprehensive Medicaid Case Management (CMCM) or OPWDD Home and Community Based (HCBS) Waiver service coordination or (2)(i) be a registered nurse or have at least an associate's degree (or equivalent accredited college credit hours) in a health or human services field, and (ii) have at least one year's experience working with persons with developmental disabilities or at least one year's experience providing service coordination to any population, and (b) attend professional development courses required by OPWDD.

The hiring criteria for PCSS are the same as for MSC and may be found in Chapter 2 of the MSC Vendor Manual. The specific duties of PCSS are described in Administrative Memorandum #2012-06 (pages 4-6).

OPWDD establishes standards for providers of waiver services, reviews completed provider applications and for qualified providers, issues Waiver provider agreements that allow participation in the waiver program and provides the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR.

OPWDD directly provides HCBS waiver services through its regional offices. In addition, HCBS waiver services are provided by provider agencies which are non-profit organizations. Non-profit organizations include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

If the provider agency employs professional clinical staff, that staff person must have the appropriate credentials stipulated by the NYS Department of Education.

Direct support professionals must have completed the training stipulated in 14 NYCRR Part 633.8. Provider agencies must comply with 14 NYCRR Part 633, "Protections of Individuals Receiving Services", including Criminal Background Check (CBC) screening. Provider agencies must also comply with the Part 624, "Reportable Incidents and Client Abuse", and Part 635, "General Quality Control and Administrative Requirements". OPWDD directs provider agencies to screen staff against the Medicaid Excluded Provider lists maintained by the Department of Health and the HHS Office of the Inspector General.

Verification of Provider Qualifications

Entity Responsible for Verification:

OPWDD is responsible to verify provider qualifications. Annual reviews of all providers are performed by OPWDD's Division of Quality Improvement (DQI). During these reviews, DQI reviews provider compliance with the Criminal Background Check (CBC) regulations and also reviews MSC qualifications.

Frequency of Verification:

OPWDD DQI reviews providers annually. In addition, each agency must renew their waiver provider agreement every 5 years prior to the waiver renewal.

Appendix C: Participant Services

C-1: Summary of Services Covered (2 of 2)

b. Provision of Case Management Services to Waiver Participants. Indicate how case management is furnished to waiver participants (*select one*):

- ○ **Not applicable** - Case management is not furnished as a distinct activity to waiver participants.
- ◉ **Applicable** - Case management is furnished as a distinct activity to waiver participants.

  Check each that applies:

  - ☐ **As a waiver service defined in Appendix C-3.** *Do not complete item C-1-c.*
  - ☐ **As a Medicaid State plan service under §1915(i) of the Act (HCBS as a State Plan Option).** *Complete item C-1-c.*
  - ☐ **As a Medicaid State plan service under §1915(g)(1) of the Act (Targeted Case Management).** *Complete item C-1-c.*
  - ☐ **As an administrative activity.** *Complete item C-1-c.*

c. Delivery of Case Management Services. Specify the entity or entities that conduct case management functions on behalf of waiver participants:

Case management services are provided by the operating agency (OPWDD) or by provider agencies. Provider agencies are non-profit organizations which include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

Case management services are provided through Medicaid Service Coordination (MSC)(targeted case management under the State Plan) or through Plan of Care Support Services (PCSS) (see Appendix C). Also see Appendix D for more information.

For individuals enrolled in a managed care FIDA-IDD, case management is provided as part of the FIDA-IDD's care management responsibilities through the FIDA-IDD directly or through an appropriate network provider of under the FIDA-IDD's auspices.

For individuals who are not enrolled in a managed care FIDA-IDD, case management services are provided by the operating agency or by provider agencies through Medicaid Service Coordination (a targeted case management service described in Appendix D or Plan of Care Support Services described in Appendix C). Provider agencies are non-profit organizations which include: non-profit corporations formed under New York State Law or authorized to do business in New York, local government units, or organizations created by an act of the New York State Legislature for charitable purposes which include providing services to persons with developmental disabilities.

C-2: General Service Specifications (1 of 3)

a. Criminal History and/or Background Investigations. Specify the State's policies concerning the conduct of criminal history and/or background investigations of individuals who provide waiver services (select one):

- ○ **No. Criminal history and/or background investigations are not required.**
- ◉ **Yes. Criminal history and/or background investigations are required.**

Specify: (a) the types of positions (e.g., personal assistants, attendants) for which such investigations must be conducted; (b) the scope of such investigations (e.g., state, national); and, (c) the process for ensuring that mandatory investigations have been conducted. State laws, regulations and policies referenced in this description are available to CMS upon request through the Medicaid or the operating agency (if applicable):

Fingerprinting of staff is required of waiver service providers as described in Mental Hygiene Law 16.34, Exec. L. 845-b and 14 NYCRR Sections 633.22 and 701 which states:
1) all potential employees and volunteers of non-state provider agencies providing waiver services who will have regular and substantial unsupervised or unrestricted physical contact with an individual receiving services; and
2) family care providers and every person over the age of 18 years who will reside in a family care home.
3) employees of contractors of waiver providers which provide transportation services (e.g. bus companies) or staff.

These positions include direct care staff and their supervisors, job coaches, clinicians providing clinical services, individuals working at certified sites or providing transportation services, service coordinators, and other positions deemed to have regular and substantial unsupervised contact with individuals.
Additionally, Civil Service Law 50(4) and Labor Law 201-a require fingerprinting for all potential employees of OPWDD providing waiver services.

Criminal History Check Process:

An applicant for employment who meets the criteria for a criminal history record check must complete the required consent forms. Fingerprints are submitted via the New York State Justice Center for the Protection of People with Special Needs (The Justice Center) to the New York State Division of Criminal Justice Services (DCJS), which conducts a search of state records and records maintained by the Federal Bureau of Investigation. Results are sent to the Justice Center's criminal background check (CBC) unit electronically through the DCJS's E-Justice website, generally within three days of fingerprinting.

The CBC unit notifies the prospective employer (OPWDD or the non-state provider) of the determination indicating denial, pending denial, abeyance (meaning that a determination cannot be made at that time) or non-denial for each applicant. At the time of notification, the CBC unit will also inform the prospective employer what actions shall or may be taken regarding the applicant.

While the results of the CBC check are pending, applicants may be temporarily approved for supervised contact with individuals receiving services subject to the restrictions specified in 14 NYCRR 633.22(f). Applicants may not have unsupervised contact until the results of the check are received.

After the initial CBC determination has been made, the Justice Center CBC unit will send notice to the authorized person if the subject party is arrested after the original determination. In accordance with OPWDD regulations, the authorized person is responsible for conducting a safety assessment of the service environment and taking all appropriate steps to protect the health and safety of the persons receiving services. In addition, the provider is responsible for monitoring the outcome of any pending charge and this assessment must be documented and available for review by OPWDD.

Oversight:
Criminal Background Checks:
All waiver provider agencies undergo an annual OPWDD Division of Quality Improvement (DQI) quality survey. Surveyors review provider records to ensure that criminal history record checks have been conducted for appropriate employees. Any problems uncovered are reported to the agency which is given an opportunity to develop a plan of correction for systemic issues and must also ensure that any individuals who are found to have not been screened must be appropriately supervised until their clearance is granted. The implementation of the plan is later verified by the DQI unit.

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Excluded Providers:

OPWDD and the Department of Health have notified non-state providers about rules concerning persons excluded from providing services under the Medicaid or Medicare program. The State list is maintained by the NYS Department of Health and the Federal list is maintained by the United States HHS Office of Inspector General.

Lists of all employees and vendors involved with services provided by OPWDD (the operating agency) are submitted to the Office of the Medicaid Inspector General on a quarterly basis for screening against the database of excluded providers. All potential OPWDD employees and vendors are screened against the two excluded provider lists.

b. Abuse Registry Screening. Specify whether the State requires the screening of individuals who provide waiver services through a State-maintained abuse registry (select one):

- ○ **No. The State does not conduct abuse registry screening.**
- ◉ **Yes. The State maintains an abuse registry and requires the screening of individuals through this registry.**

Specify: (a) the entity (entities) responsible for maintaining the abuse registry; (b) the types of positions for which abuse registry screenings must be conducted; and, (c) the process for ensuring that mandatory screenings have been conducted. State laws, regulations and policies referenced in this description are available to CMS upon request through the Medicaid agency or the operating agency (if applicable):

Abuse/neglect history checks:
1) Staff Exclusion List (SEL) check: As per Social Services Law 495 and 14 NYCRR 633.24, all state and non-state providers of waiver services (and specified contractors) are required to request a check of the SEL list from the Justice Center for employees, volunteers, and family care providers. The SEL contains the names of current or former custodians (employees, volunteers, family care providers, contractors, consultants, etc.) who have a substantiated "Category One" report of abuse or neglect, or more than one substantiated "Category Two" reports within a specified period of time. The reports concern abuse or neglect that occurred on or after June 30, 2013 in programs certified or operated by OPWDD (as well as specified programs overseen by other State Agencies). A description of "Category One" conduct and "Category Two" conduct can be found in Social Services Law 493.

SEL Process: The waiver provider (or certain contractors of the waiver provider) are required to submit SEL check requests to the Justice Center for potential employees, volunteers, family care providers, adults in the family care home, and contractors, consultants and interns who will have regular and substantial contact with individuals receiving services. If the applicant is on the SEL the provider may not hire or otherwise allow the applicant to have regular and substantial contact with individuals receiving services. The applicant is not permitted to have regular and substantial contact with individuals receiving services until the results of the check are received.

2) MHL 16.34 check: As per Mental Hygiene Law 16.34 and 14 NYCRR 633.24, all state and non-state providers or waiver services (and specified contractors) are required to request an "MHL 16.34 check" from OPWDD. The MHL 16.34 check is requested for all applicants receiving a CBC check, except family care providers and adults in the family care home. The check concerns physical abuse, sexual abuse, psychological abuse and serious neglect that occurred prior to June 30, 2013 in programs certified or operated by OPWDD.

MHL 16.34 Process: The waiver provider (or certain contractors of the waiver provider) submits a request to OPWDD. After a reasonably diligent search of records, if a substantiated report of abuse or neglect is found that is dis-closable, OPWDD sends a summary report to the provider (or contractor). The provider or contractor is required to review the information provided and to make a decision about whether to hire or otherwise allow the party to have regular and substantial contact with an individual receiving services. The applicant is not permitted to have unsupervised contact with individuals receiving services until the results of the check are received.

3) As per Executive Law 562 check: Executive Law 562 and 14 NYCRR 633.24, when a criminal history record check is requested (except for a family care provider or adult living in a family care home) , the Justice Center will also search its records to see if there is a finding of "Category Two" conduct concerning the applicant. This means that the person has been substantiated for "Category Two" abuse and neglect which occurred on or after June 30, 2013 (see the discussion of SEL check for a description).

Executive Law 562 Process: The check is automatically done by the Justice Center when it receives a CBC request. If there is a finding of Category Two conduct the Justice Center will send a summary report to the waiver provider or contractor. The provider or contractor is required to review the information provided and to make a decision about whether to hire or otherwise allow the party to have regular and substantial contact with an individual receiving services.

4) Check of the Statewide Central Register of Child Abuse and Maltreatment (SCR): As per Social Services Law 424-a and 14 NYCRR 633.24, waiver programs which are certified or operated by OPWDD are required to conduct this check (this excludes non-certified waiver programs such as Community Habilitation and Supported Employment unless the program is operated by OPWDD). The NYS Office of Children and Family Services maintains this register of indicated reports of child abuse and maltreatment, generally consisting of reports of familial abuse but including some reports of institutional abuse that occurred prior to June 30, 2013. The check is required for employees, volunteers, contractors, family care providers and adults who live in the family care home, who have the potential for regular and substantial contact with individuals receiving services.

SCR Check Process: The waiver provider submits a request to the SCR. Specified contractors submit a request to OPWDD which then submits the request to the SCR. The provider or contractor is notified whether an indicated report exists concerning the applicant; if a report exists, the provider or contractor is required to obtain pertinent information about the indicated report and review the information to make a decision about whether to hire or otherwise allow the party to have regular and substantial contact with an individual receiving services. The applicant is not permitted to have unsupervised contact with individuals receiving services until the results of the check are received.

Oversight:
OPWDD provides oversight by reviewing the abuse and mistreatment requirements during the DQI survey process. OPWDD's DQI surveyors review agency documentation and review personnel files of new employees to confirm compliance with the required SCR check. If an SCR check cannot be validated for a staff person, a deficiency statement will be issued and the staff person will not be allowed to work unsupervised until an SCR check request is submitted to OCFS and a response is received identifying no indicated abuse. If there is an indication of abuse, the process outlined above must be followed. DQI follows up to ensure that individual remediation action has been taken and that there is subsequent compliance with this requirement; DQI also confirms that the provider has established systems to prevent the recurrence of these findings.

Appendix C: Participant Services

C-2: General Service Specifications (2 of 3)

c. Services in Facilities Subject to §1616(e) of the Social Security Act. *Select one:*

- ○ **No. Home and community-based services under this waiver are not provided in facilities subject to §1616(e) of the Act.**

Yes. Home and community-based services are provided in facilities subject to §1616(e) of the Act. The standards that apply to each type of facility where waiver services are provided are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

i. **Types of Facilities Subject to §1616(e).** Complete the following table for each type of facility subject to §1616(e) of the Act:

Facility Type	
Family Care	
Individualized Residential Alternative	
Community Residence	

ii. **Larger Facilities:** In the case of residential facilities subject to §1616(e) that serve four or more individuals unrelated to the proprietor, describe how a home and community character is maintained in these settings.

To be in compliance with regulation (14 NYCRR 686.3), a community residence must provide an environment that ensures participant rights, promotes freedom of movement, and increases opportunities for participants to make decisions and to participate in regular community activities consistent with their needs and capability. The residence must maximize the level of independence consistent with the participant's disability and functional level. Compliance with this regulation is the driving consideration in designing certified residences for waiver participants and every effort is made to ensure that participants have ample opportunities to become contributing members of their community.

Residential habilitation services are provided in community-based certified homes to allow the residents to feel part of a community and a neighborhood (NYCRR 635-10). For example, training in meal preparation, routine shopping, laundry and cleaning are encouraged to be included in a participant's habilitation plan when appropriate to the needs of the individual. Training in appropriate social behaviors for the community (e.g. behavior in restaurants, and use of money for purchases) is also provided under Individualized Residential Habilitation plans.

Training to maximize independence in travel to and from community destinations (including the use of public transportation) may also be included in habilitation plans to encourage the individual's interaction with their community and to allow for participation in activities of choice. Larger homes generally have transportation and sufficient staff available to take participants to activities or appointments in the community.

Using the established Universal Protocol for on-site surveys, OPWDD's DQI verifies the integration of individuals living in community-based certified homes into the community. The Universal Protocol looks explicitly for evidence that residents of Individualized Residential Alternatives, Community Residences, and Family Care homes participate in community activities. The following examples from the Universal Protocol demonstrate the types of evidence which surveyors examine to document integration.

*(#2) Participants are engaged in activities which are meaningful to the participant and which contribute to their home, work and social environment(s);

*(#4) The community activities are consistent with participant's needs and interests;

*(#8) Habilitation plans are directed toward acquiring, maintaining and improving the life skills a participant needs to be a member of the community;

*(#10) The habilitation plans are actively implemented (i.e. there is on-site documentation demonstrating that habilitation services outlined in the habilitation plan are provided);

In reviewing documentation, the surveyor will also check for the presence of a written individualized plan of services, based on an assessment of the participant's functional capacity which has as its goal maximizing that person's abilities to cope with his/her environment, fostering social competency and enabling him/her to live as independently as possible which is reviewed periodically relative to the participant's response to services (#6).

Every effort is made to make the residence itself as non-institutional as possible. As per 14 NYCRR Part 635, larger homes are required to provide participants residing there with full access to habitable common rooms such as a living room or lounge (which is not used for programmatic purposes) and dining rooms (which can be used as program space if it does not interfere with the primary purpose of dining). Each participant must have a minimum square footage of bedroom space as well as use of toilet rooms and bathrooms which are designed to provide personal privacy. All habitable spaces should have natural light and screens when windows are used for ventilation.

These rules result in group homes where participants have access to cooking facilities, traditional dining rooms, and comfortable living rooms. There are no more than two individuals per bedroom, and the houses have private bathroom facilities. The presence of this access is confirmed by DQI prior to issuance of certification, and is monitored during annual site reviews.

Appendix C: Participant Services

C-2: Facility Specifications

Facility Type:

Family Care

Waiver Service(s) Provided in Facility:

Waiver Service	Provided in Facility
Assistive Technology - Adaptive Devices	☐
Day Habilitation	☐
Prevocational Services	☐
Fiscal Intermediary (FI) formerly Agency with Choice/Financial Management Services (AWC/FMS)	☐
Intensive Behavioral Services	☐
Live-in Caregiver (42 CFR §441.303(f)(8))	
Support Brokerage	
Supported Employment (SEMP)	
Respite	
Community Habilitation	
Individual Directed Goods and Services	
Pathway to Employment	
Environmental Modifications (Home Accessibility)	☐
Community Transition Services	☐
Consolidated Supports and Services	☐
Plan of Care Support Services	☐
Residential Habilitation	☐
Family Education and Training	☐

Facility Capacity Limit:

4 participants (as per current Family Care program policy)

Scope of Facility Standards. For this facility type, please specify whether the State's standards address the following topics (*check each that applies*):

Scope of State Facility Standards

Standard	Topic Addressed
Admission policies	☐
Physical environment	☐
Sanitation	☐
Safety	☐
Staff : resident ratios	☐
Staff training and qualifications	☐
Staff supervision	☐
Resident rights	☐
Medication administration	☐
Use of restrictive interventions	☐
Incident reporting	☐
Provision of or arrangement for necessary health services	☐

When facility standards do not address one or more of the topics listed, explain why the standard is not included or is not relevant to the facility type or population. Explain how the health and welfare of participants is assured in the standard area(s) not addressed:

Appendix C: Participant Services

C-2: Facility Specifications

Facility Type:

Individualized Residential Alternative

Waiver Service(s) Provided in Facility:

Waiver Service	Provided in Facility
Assistive Technology - Adaptive Devices	☐
Day Habilitation	☐
Prevocational Services	☐
Fiscal Intermediary (FI) formerly Agency with Choice/Financial Management Services (AWC/FMS)	☐
Intensive Behavioral Services	☐
Live-in Caregiver (42 CFR §441.303(f)(8))	☐
Support Brokerage	☐
Supported Employment (SEMP)	☐
Respite	☐
Community Habilitation	☐
Individual Directed Goods and Services	☐
Pathway to Employment	☐
Environmental Modifications (Home Accessibility)	☐
Community Transition Services	☐
Consolidated Supports and Services	☐
Plan of Care Support Services	☐
Residential Habilitation	☐
Family Education and Training	☐

Facility Capacity Limit:

14 participants

Scope of Facility Standards. For this facility type, please specify whether the State's standards address the following topics (*check each that applies*):

Scope of State Facility Standards

Standard	Topic Addressed
Admission policies	☐
Physical environment	☐
Sanitation	☐
Safety	☐
Staff : resident ratios	☐
Staff training and qualifications	☐
Staff supervision	☐
Resident rights	☐
Medication administration	☐
Use of restrictive interventions	☐
Incident reporting	☐
Provision of or arrangement for necessary health services	☐

When facility standards do not address one or more of the topics listed, explain why the standard is not included or is not relevant to the facility type or population. Explain how the health and welfare of participants is assured in the standard area(s) not addressed:

Appendix C: Participant Services

C-2: Facility Specifications

Facility Type:

Community Residence

Waiver Service(s) Provided in Facility:

Waiver Service	Provided in Facility
Assistive Technology - Adaptive Devices	
Day Habilitation	
Prevocational Services	
Fiscal Intermediary (FI) formerly Agency with Choice/Financial Management Services (AWC/FMS)	
Intensive Behavioral Services	
Live-in Caregiver (42 CFR §441.303(f)(8))	
Support Brokerage	
Supported Employment (SEMP)	
Respite	
Community Habilitation	
Individual Directed Goods and Services	
Pathway to Employment	
Environmental Modifications (Home Accessibility)	
Community Transition Services	
Consolidated Supports and Services	
Plan of Care Support Services	
Residential Habilitation	
Family Education and Training	

Facility Capacity Limit:

14 participants

Scope of Facility Standards. For this facility type, please specify whether the State's standards address the following topics (*check each that applies*):

Scope of State Facility Standards

Standard	Topic Addressed
Admission policies	
Physical environment	
Sanitation	
Safety	
Staff : resident ratios	
Staff training and qualifications	
Staff supervision	
Resident rights	
Medication administration	
Use of restrictive interventions	
Incident reporting	

Standard	Topic Addressed
	☐
Provision of or arrangement for necessary health services	☐

When facility standards do not address one or more of the topics listed, explain why the standard is not included or is not relevant to the facility type or population. Explain how the health and welfare of participants is assured in the standard area(s) not addressed:

Appendix C: Participant Services

C-2: General Service Specifications (3 of 3)

d. Provision of Personal Care or Similar Services by Legally Responsible Individuals. A legally responsible individual is any person who has a duty under State law to care for another person and typically includes: (a) the parent (biological or adoptive) of a minor child or the guardian of a minor child who must provide care to the child or (b) a spouse of a waiver participant. Except at the option of the State and under extraordinary circumstances specified by the State, payment may not be made to a legally responsible individual for the provision of personal care or similar services that the legally responsible individual would ordinarily perform or be responsible to perform on behalf of a waiver participant. *Select one*:

○ **No. The State does not make payment to legally responsible individuals for furnishing personal care or similar services.**

◉ **Yes. The State makes payment to legally responsible individuals for furnishing personal care or similar services when they are qualified to provide the services.**

Specify: (a) the legally responsible individuals who may be paid to furnish such services and the services they may provide; (b) State policies that specify the circumstances when payment may be authorized for the provision of ***extraordinary care*** by a legally responsible individual and how the State ensures that the provision of services by a legally responsible individual is in the best interest of the participant; and, (c) the controls that are employed to ensure that payments are made only for services rendered. *Also, specify in Appendix C-1/C-3 the personal care or similar services for which payment may be made to legally responsible individuals under the State policies specified here.*

OPWDD recognizes that there are certain circumstances where paying a relative to provide essential services is both justifiable and beneficial to participants. These circumstances may include: a lack of available non-related staff persons in remote geographic regions who can furnish services at necessary times and places; extraordinary and specialized skills or knowledge by relatives in the provision of services and supports in the approved ISP/LP; and efficiency and cost effectiveness. However, it is important to ensure that there are systems to guard against conflicts of interest, inadvertent limits on participant choice, and potential fraud. Therefore, OPWDD has adopted the following policy: OPWDD will allow relatives to be paid as service providers as long as (a) they are at least 18 years of age and not the parents, legal guardians, spouses, or adult children (including sons and daughters-in-law) of the participant, and (b) the service is a function not ordinarily performed by a family member, and (c) the service is necessary and authorized and would otherwise be provided by another qualified provider of waiver services, and (d) the relative does not reside in the same residence as the participant. In extraordinary circumstances, the following are exceptions to this policy:

-The Commissioner or designee may authorize a parent or legal guardian of an adult child (over the age of 18) to be paid to provide waiver services, when it can be clearly documented that the arrangement is in the best interests of the participant.

-The Commissioner or designee may authorize an otherwise qualified relative who resides in the same residence as the participant to be paid to provide waiver services when it can be clearly demonstrated that the arrangement is pursuant to the participant's choice, is in the best interests of the participant, and does not potentially jeopardize the health, safety, rights and informed choice of the participant.

Additional safeguards will be required by the Commissioner or designee including frequent monitoring of this arrangement if either exception is authorized.

OPWDD providers have discretion to determine if relatives may be paid to be service providers under this policy. When the provider authorizes relatives to be paid under this policy, the OPWDD provider must document the review and approval including that the arrangement is necessary, beneficial, and does not pose any significant risk factors to the participant and is in the participant's best interests. OPWDD's regional office must receive written notification of these arrangements and are responsible for oversight.

The services under this waiver for which relatives may be paid include the following: residential habilitation in family care homes; community habilitation; habilitative supports under consolidated supports and services; and respite. After 10/1/14, with the sunset of CSS, family members can be employed to deliver self-directed Respite and self-directed Community Habilitation.

Relatives that are paid to provide services as outlined above must meet the same requirements and qualifications as other providers/staff and are subject to the same oversight levels as outlined in this application.

When providing services, relatives act as an employee of a non-for-profit agency or as a self-directed/self-hired staff person under the administration of the FMS Agency For agency provided services, the Medicaid payment is made to the agency and the rate methodology does not differ if the staff person is a family member or is unrelated to the person served. For self-directed services under /self-direction, the Medicaid payment is made to the FMS agency and the wage limit for the self-hired worker does not differ between self-hired staff who are related to the individual and those self-hired staff persons who are not related to the person.

e. **Other State Policies Concerning Payment for Waiver Services Furnished by Relatives/Legal Guardians.** Specify State policies concerning making payment to relatives/legal guardians for the provision of waiver services over and above the policies addressed in Item C-2-d. *Select one*:

○ **The State does not make payment to relatives/legal guardians for furnishing waiver services.**

◉ **The State makes payment to relatives/legal guardians under specific circumstances and only when the relative/guardian is qualified to furnish services.**

Specify the specific circumstances under which payment is made, the types of relatives/legal guardians to whom payment may be made, and the services for which payment may be made. Specify the controls that are employed to ensure that payments are made only for services rendered. *Also, specify in Appendix C-1/C-3 each waiver service for which payment may be made to relatives/legal guardians.*

OPWDD recognizes that there are certain circumstances where paying a relative to provide essential services is both justifiable and beneficial to participants. These circumstances may include: a lack of available non-related staff persons in remote geographic regions who can furnish services at necessary times and places; extraordinary and specialized skills or knowledge by relatives in the provision of services and supports in the approved ISP/LP; and efficiency and cost effectiveness. However, it is important to ensure that there are systems to guard against conflicts of interest, inadvertent limits on participant choice, and potential fraud.

Therefore, OPWDD has adopted the following policy: OPWDD will allow relatives to be paid as service providers as long as (a) they are at least 18 years of age and not the parents, legal guardians, spouses, or adult children (including sons and daughters-in-law) of the participant, and (b) the service is a function not ordinarily performed by a family member, and (c) the service is necessary and authorized and would otherwise be provided by another qualified provider of waiver services, and (d) the relative does not reside in the same residence as the participant.

In extraordinary circumstances, the following are exceptions to this policy:
-The Commissioner or designee may authorize a parent or legal guardian of an adult child (over the age of 18) to be paid to provide waiver services, when it can be clearly documented that the arrangement is in the best interests of the participant.
-The Commissioner or designee may authorize an otherwise qualified relative who resides in the same residence as the participant to be paid to provide waiver services when it can be clearly demonstrated that the arrangement is pursuant to the participant's choice, is in the best interests of the participant, and does not potentially jeopardize the health, safety, rights and informed choice of the participant.

Additional safeguards will be required by the Commissioner or designee including frequent monitoring of this arrangement if either exception is authorized.
OPWDD providers that bill eMedNY directly have discretion to determine if relatives may be paid to be service providers under this policy. For individuals enrolled in FIDA-IDD, the provider agency has discretion to determine if relatives may be paid to be service providers under this policy. When the provider as applicable authorizes relatives to be paid under this policy, the OPWDD provider must document the review and approval including that the arrangement is necessary, beneficial, and does not pose any significant risk factors to the participant and is in the participant's best interests. OPWDD Regional Offices must receive written notification of these arrangements from providers that bill eMedNY directly and are responsible for oversight of this arrangement from these particular providers.

The services under this waiver for which relatives may be paid include the following: residential habilitation in family care homes; community habilitation; habilitative supports under consolidated supports and services; and respite. After 10/1/14, with the sunset of CSS, family members can be employed to deliver self-directed Respite and self-directed Community Habilitation.

Relatives that are paid to provide services as outlined above must meet the same requirements and qualifications as other providers/staff and are subject to the same oversight levels as outlined in this application.

When providing services, relatives act as an employee of a non-for-profit agency or as a self-directed/self-hired staff person under the administration of the Fiscal Intermediary Agency. For agency provided services, the Medicaid payment is made to the agency and the rate methodology does not differ if the staff person is a family member or is unrelated to the person served.

For self-directed services under self-direction, the Medicaid payment is made to the Fiscal Intermediary agency and the wage limit for the self-hired worker does not differ between self-hired staff who are related to the individual and those self- hired staff persons who are not related to the person.

○ **Relatives/legal guardians may be paid for providing waiver services whenever the relative/legal guardian is qualified to provide services as specified in Appendix C-1/C-3.**

Specify the controls that are employed to ensure that payments are made only for services rendered.

○ **Other policy.**

Specify:

f. Open Enrollment of Providers. Specify the processes that are employed to assure that all willing and qualified providers have the opportunity to enroll as waiver service providers as provided in 42 CFR §431.51:

OPWDD makes information readily available to potential waiver providers (including those who are interested in enrolling in the FIDA-IDD Plan) through its Regional Offices located throughout New York State which provide support and oversight to the agencies in their geographic catchment areas. OPWDD's comprehensive public website, e-mail address, and toll free hotline also provides information to potential providers on the provider enrollment process.

In November 2011, OPWDD enhanced its new provider application process to ensure consistency and transparency in the application process for individuals/organizations seeking approval to become OPWDD funded non-profit providers. These enhancements include the completion of statewide standardized application on the new provider's program, governance, and fiscal capabilities. The application is reviewed and scored based on established criteria. Only those providers that receive a passing score based on these criteria will be considered to provide OPWDD services.

The new process will help ensure that a non-profit agency that is approved to provide services under OPWDD auspices will have:
a) a well thought out plan for providing quality services to unserved or underserved individuals, b) an understanding of regulatory and program requirements,
c) solid governance practices as demonstrated by a diverse Board of Directors that actively provides agency oversight, and
d) a sound fiscal plan that includes a well thought out budget, an understanding of good business practices and a staff/board member with fiscal expertise.

A PDF copy of the New Agency Interest Application, the scoring criteria, and related information can be found on the OPWDD website at "Become a Service Provider".

Additional reforms completed in April 2012, ensure that key staff of new provider agencies are qualified for positions they are or will be holding as the new provider application requires new providers to submit written job descriptions that include required credentials for each key position as well as resumes of those hired to ensure that they have appropriate credentials. The new provider applicant must also attest that the experience and credentials have been verified.

OPWDD accepts provider enrollment applications on a continuous and ongoing basis. Any non-profit organization may apply to be a provider. Non-profit organizations include: non-profit corporations under New York State Law, local government units, or organizations created by an act of the New York State Legislature for charitable purposes including providing services to persons with developmental disabilities.

Steps to become a provider include the following:

1. An entity interested in becoming funded by OPWDD contacts the local regional office to get information on how to become an OPWDD provider.
2. The regional office sends out a “new provider” form letter with an information packet that provides information the interested entity will need to know in order to become an OPWDD funded provider. The letter also includes a New Agency Interest Application and an application for the type of service the agency is interested in providing (e.g., Home and Community Based Services, Medicaid Service Coordination). In the letter, the interested entity will be advised to read the information packet and to complete the New Agency Interest Application and the application for the type of service the agency wishes to provide. The New Agency Interest Application is similar to an abbreviated CON and will require an agency to demonstrate that it has it has an organization and financial plan, that it has an understanding of the services it wishes to provide, that it can identify a population or individuals in need of these services and that it has the business capacity to operate an agency.
3. The interested entity submits a completed New Agency Interest Application and a completed application for the type of service it wishes to provide to the local regional office.
4. Regional office staff ensure that the potential new agency answers all applicable questions on the New Agency Interest Application and the service specific application and submits all the documents requested (recent 990s, recent financial statements, outline of policy and procedure manual for service agency intends to provide, resumes of board members and staff already hired, attestations).
5. Regional office staff make the submitted New Agency Interest Application and the application for the service the agency wishes to provide available electronically through sharepoint to staff of the Division of Quality Assurance.
6. Regional office staff review the potential new agency’s background and program qualifications to ensure the agency has the requisite knowledge and skills to provide the service(s) it proposes to provide and to ensure that the service(s) is needed in the district. Included in this review is a check of the Medicaid excluded lists to ensure that none of the agency’s staff or board members are on any of these lists. Regional office staff use the scoring sheet to score the background and program sections of the New Agency Interest Application. The potential new agency must receive a 20 or above out of a potential 30 points to pass the program section of the New Agency Interest Application. If the potential new agency scores below a 20 on the program section, regional office staff will use the Program and Fiscal Requirements Checklist to indicate which areas the interested agency must strengthen in order to show that it has good program practices in place. If the agency scores a 20 or above but regional office staff feel that there are some areas that can be strengthened, regional office staff will complete the Program and Fiscal Improvement Checklist in order to help the agency achieve long term success.
7. Bureau of Compliance Management (BCM) staff review the potential new agency's governance and fiscal qualifications to determine whether the interested agency has a good board that will be able to provide fiscal and program oversight and whether the interested agency is prepared fiscally to provide OPWDD services. BCM staff use the scoring sheet to score the governance and

fiscal sections of the New Agency Interest Application. The potential new agency must receive a 16 or above out of a potential 25 points to pass the governance section and a 20 out of 33 points to pass the fiscal section of the New Agency Interest Application. If the potential new agency receives below a 16 in the governance section and/or receives below a 20 on the fiscal section, BCM staff will use the Program and Fiscal Requirements Checklist to indicate which areas the interested agency must strengthen in order to show that it has good governance and good fiscal practices in place. If the interested agency receives passing scores on both the governance (16 or above) and fiscal sections (20 or above), but BCM staff feel that there are some areas that can be strengthened, BCM staff will complete the Program and Fiscal
Improvement Checklist.
8. After both regional office and BCM staff have completed their review, regional office staff will tally up the total score. The potential agency must pass the program, governance and fiscal sections but also must have a total score of 70 to be recommended to become an OPWDD provider.
a. If the potential agency doesn't receive a passing score, regional office staff will send the potential agency a letter explaining that the agency must strengthen certain areas as indicated in the Program and Fiscal Requirements Checklist in order to become an approved OPWDD provider. If the agency is strong programmatically but poor fiscally, the regional office may recommend that the potential agency contract with an established agency to provide the service.
b. If the potential agency receives a passing score, regional office staff will advise Division of Quality Improvement (DQI) staff to review the agency's service specific application. If DQI staff approve the service specific application, DQI staff will advise the regional office. Regional office staff will then alert the regional Associate Commissioner to go to the sharepoint site to review the agency's New Agency Interest Application, the Application Scores, the Program and Fiscal Improvement Checklist and the service specific application. The regional Associate Commissioner will have the final authority about whether to approve the agency to become an OPWDD funded provider.
9. For qualified providers, OPWDD issues Waiver provider agreements that allow participation in the waiver program and provide the application for eMedNY. The DOH Division of Operations then reviews the completed eMedNY application and recommendations made by OPWDD, completes an in depth review that incorporates four different sanction searches: eMedNY Sanction, NYS OMIG, HHS-OIG, and Excluded Parties List on the providers board members and managing employees. If found to be appropriate, the DOH Division of Operations then issues a Medicaid provider agreement to enroll the voluntary provider in the NYS Medicaid program in accordance with regulations found at Part 504 of 18 NYCRR.
10. If after one year, the new provider has not provided services to OPWDD participants, the agency will be required to submit updated information to ensure OPWDD has the most current information on the agency.
11. All new agencies will be responsible for ensuring that their board members attend an OPWDD approved board training within six months of becoming an OPWDD provider.

Appendix C: Participant Services

Quality Improvement: Qualified Providers

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

a. Methods for Discovery: Qualified Providers

The state demonstrates that it has designed and implemented an adequate system for assuring that all waiver services are provided by qualified providers.

i. Sub-Assurances:

a. *Sub-Assurance: The State verifies that providers initially and continually meet required licensure and/or certification standards and adhere to other standards prior to their furnishing waiver services.*

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance, complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of waiver service providers that meet OPWDD certification/HCBS standards during the annual HCBS waiver reviews i.e, ongoing basis.(Percentage=the number of providers that meet certification standards/total providers reviewed).

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐	☐	☐

Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

Performance Measure:
The number and percent of new waiver provider applicants that meet OPWDD standards for issuance of HCBS Operating Certificates. (Percentage=the number of waiver provider applicants that meet the standards/total waiver provider applicants).

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI New Provider Review

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

Performance Measure:
The number and percent of certified sites that are complaint with fire safety requirements including that fire alarms are operational. (Percentage=number of certified sites are complaint with fire safety/total number of certified sites).

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
☐	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	☐

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

Performance Measure:
The number and percent of certified IRAs/CRs and Day Settings reviewed for whether heightened scrutiny is triggered.

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify: One Time	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify: One Time

b. ***Sub-Assurance: The State monitors non-licensed/non-certified providers to assure adherence to waiver requirements.***

For each performance measure the State will use to assess compliance with the statutory assurance, complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which

each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

c. ***Sub-Assurance: The State implements its policies and procedures for verifying that provider training is conducted in accordance with state requirements and the approved waiver.***

For each performance measure the State will use to assess compliance with the statutory assurance, complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of front line staff who demonstrate competencies to effectively perform their job functions.

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
☐	☐ **Other** Specify: ☐	☐

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
State Medicaid Agency	**Weekly**
☐ **Operating Agency**	**Monthly**
Sub-State Entity	**Quarterly**
Other Specify:	☐ **Annually**
	Continuously and Ongoing

ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.

OPWDD's Division of Quality Improvement (DQI) QI Functions:

DQI is the administrative division within OPWDD primarily responsible for monitoring regulatory compliance, overseeing all programs and providers including HCBS providers, and certification/licensing functions. DQI is specifically responsible for coordinating the following related to discovery and remediation:

1. DQI conducts HCBS waiver survey reviews annually of providers that are not enrolled in the FIDA-IDD network. These reviews include observation of program implementation, interviews, documentation reviews, outcomes of service delivery, and a review of individual health and safety. DQI also conducts "unannounced" visits to all certified sites where HCBS services are provided at least annually. These unannounced visits focus on physical plant safety and the safety of individuals served.

2. Site surveys include a review of the environmental/physical plant; medication administration; infection control; personal allowance; rights; informed consent; incident reporting; and individualized planning.

3. OPWDD''s Early Alert (EA) Committee: EA is a process to proactively identify providers that may show signs of decreased quality, enabling OPWDD to take timely and definitive action. The committee is chaired by the Deputy Commissioner of Quality Improvement, and comprised of agency leadership. At each meeting there is a focus on specific agencies that have repeated certification deficiencies impacting the quality of care or have significant fiscal concerns that threatens its fiscal viability. Remedial actions may be required by the EA committee based on a variety of factors, including the size of the agency, the extent of the problems identified and the agency's past history as an OPWDD provider. Remedial actions would include meeting with the agency Executive staff and/or the BOD to discuss the circumstances in which the agency finds itself. At this juncture OPWDD may require the agency to develop and implement a management plan that has been reviewed and approved by OPWDD staff, to address governance, fiscal or programmatic issues. An agency that has been placed on the Early Alert list can be removed from the list if it complies in full, with OPWDD's recommendations and provides evidence to show that issues that were of concern, have been corrected and a system has been put in place to prevent recurrence. The other occasion when an agency will be removed from the list is when OPWDD takes action to transition service(s) to another agency. Enhancements to the Early Alert process were implemented in 2012 including the public disclosure of providers with Early Alert status on OPWDD's website and revisions to the Early Alert process to include state operated providers of service and fines/sanctions.

4. OPWDD's Centralized Incident Management, Statewide Committee on Incident Reporting, and Mortality Review (See Appendix G):

5. Provider Performance Transparency Reporting: Effective in 2012, OPWDD has developed a performance page in order to help keep people informed of the performance of service providers, and aware of any concerns that may exist. As a first step, OPWDD is sharing the results of Medicaid Service Coordination (MSC) reviews. These reports provide information about how well an agency meets OPWDD's regulations/requirements and also how an agency meets quality standards for service coordination in the following categories: vendor performance, qualified provider, choice, rights, service planning, responsiveness of service coordinator, advocacy and monitoring, satisfaction with service coordination. Each category has an overall grade in the form of a star and under each star rating is a listing of the items measured and the percentage at which the service met the regulatory or quality requirement. The provider performance webpage is kept updated through OPWDD DQI''s surveys and performance data is continually added to the web page. By the end of 2012, additional information on all providers, including state operations, is expected to be available online.

In 2011-12, OPWDD is focusing efforts on enhancing fire safety and prevention in state and voluntary operated programs and facilities (see below).

The Office of Audit Services conducts financial accountability and corporate governance audits for all provider agencies that operate under OPWDD's auspices. In addition to overall fiscal accountability, these reviews focus on board governance, oversight of executive directors, internal controls, use of agency resources, and fiscal viability.

NYS's oversight of managed care FIDA-IDD will include an annual care coordination review, the continuation of MHL on-site certification/recertification activities described above, and reviews of managed care FIDA-IDD operations in accordance with the contracts and federal/state requirements. Please see the NYS OPWDD 1915 b Waiver Application (Monitoring Plan) for further information on oversight of the FIDA-IDD plan.

b. Methods for Remediation/Fixing Individual Problems

i. Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.

The methods used by DQI to remediate individual problems as they are discovered include the following:

-Through annual and recertification survey visits/activity, notification is provided to all providers of all regulatory deficiencies.

--When warranted, generation of Statements of Deficiency (SODs) which require a Plan of Corrective Action (POCA).

--Review and analysis by DQI of all POCAs submitted by providers. If the POCA is deemed unacceptable by DQI, the provider will be required to amend and submit an updated/acceptable POCA. DQI conducts follow up visits when warranted to ensure that corrective actions have been implemented by provider agencies. Corrective actions are also reviewed by DQI upon recertification of operating certificates and during HCBS reviews.

--When significant issues are found in provider agency operations providers are referred for mandatory board training conducted by OPWDD or an approved trainer/training entity.

--DQI conducts statewide provider training to update the provider community on changes in policy, clarify expectations, and to share best practices and remediation strategies.

Providers experiencing difficulty receive technical assistance from the OPWDD Regional Office which works collaboratively with DQI and the Early Alert Committee to assist the agency to resolve difficulties that create obstacles to quality of care, regulatory compliance, and overall quality management.

--Referral to Early Alert described above. Through the discovery activities described throughout this application and other internal OPWDD activities and processes, provider agencies that experience fiscal or programmatic issues are referred to the Early Alert Committee. The Committee works with these providers to develop strategic and systemic remediation

actions. For example, the Committee may meet with an agency's board of directors to review audit findings and to discuss how the agency can develop and implement a fiscal recovery plan which is then monitored by the Early Alert

Committee. The Early Alert Committee is the entity that ultimately recommends whether an HCBS Medicaid Provider Agreement should be renewed or terminated based on provider performance. As a quality management and improvement function, the Early Alert Committee will develop and implement statewide fiscal, management, and programmatic policy improvements based on their remediation activities to prevent and deter similar situations from occurring in other provider agencies.

In 2011-12, OPWDD is focused efforts on enhancing fire safety and prevention in state and voluntary operated programs and facilities. Fire safety practices have been standardized across the system including uniform fire drill and evacuation processes and formats (May 2012) and standardizing requirements for reporting fire events in OPWDD certified residences (April 2012). A new fire safety curriculum was developed and implemented in conjunction with the NYS Office of Fire Prevention and Control (OFPC). OFPC now receives all reports of fire events in OPWDD certified residences and reviews for cause and origin. OFPC in partnership with OPWDD convened national and state experts in fire safety construction to review progress made to date in the gap analysis study of existing homes in order to prioritize fire safety upgrades in homes. In addition, processes to analyze and trend information on the cause and origin of fires will be used in system improvements for fire prevention efforts.

Strengthening the Workforce 2011-12 efforts: OPWDD focused considerable efforts on system improvements related to enhancing the OPWDD workforce and the workforce of voluntary providers. The bar has been raised on the minimum qualifications and criteria for hiring new direct support professionals in OPWDD state operated programs and facilities including high school diploma or equivalent, psychological and fitness testing, and mandatory drug testing in addition to requirements that were already in existence such as criminal background checks. OPWDD also restructured and streamlined the disciplinary review process to create a statewide disciplinary review panel to increase consistency and improve the management of OPWDD''s Employee Performance Management Program. Consistent policies related to the issuance of Notices of Discipline and suspension without pay for substantiated disciplinary cases for serious abuse and neglect were also implemented for OPWDD staff. An enhanced focus on consistent training for direct support professionals and supervisors statewide to prevent abuse and neglect in state and voluntary operated programs and facilities has also been implemented. The training initiatives include: implementation of PROMOTE which is designed to emphasize the importance of positive relationships and proactive measures to prevent challenging behavior; statewide training to reinforce principles of respect, dignity and professional ethics for people served; the promulgation of regulations that require annual training on promoting positive relationships, incidents/abuse reporting, and abuse prevention. An additional systems improvement initiative implemented beginning in 2011, resulted in the development and implementation of consistent statewide competencies for direct support professionals and supervisors in both state and voluntary operated programs and facilities.

ii. Remediation Data Aggregation

Remediation-related Data Aggregation and Analysis (including trend identification)

Responsible Party*(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	**Weekly**

Responsible Party*(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **Operating Agency**	**Monthly**
Sub-State Entity	**Quarterly**
Other Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

c. Timelines
When the State does not have all elements of the Quality Improvement Strategy in place, provide timelines to design methods for discovery and remediation related to the assurance of Qualified Providers that are currently non-operational.

◉ **No**

○ **Yes**

Please provide a detailed strategy for assuring Qualified Providers, the specific timeline for implementing identified strategies,
and the parties responsible for its operation.

Appendix C: Participant Services

C-3: Waiver Services Specifications

Section C-3 'Service Specifications' is incorporated into Section C-1 'Waiver Services.'

Appendix C: Participant Services

C-4: Additional Limits on Amount of Waiver Services

a. Additional Limits on Amount of Waiver Services. Indicate whether the waiver employs any of the following additional limits on the amount of waiver services (*select one*).

◉ **Not applicable**- The State does not impose a limit on the amount of waiver services except as provided in Appendix C-3.

○ **Applicable** - The State imposes additional limits on the amount of waiver services.

When a limit is employed, specify: (a) the waiver services to which the limit applies; (b) the basis of the limit, including its basis in historical expenditure/utilization patterns and, as applicable, the processes and methodologies that are used to determine the amount of the limit to which a participant's services are subject; (c) how the limit will be adjusted over the course of the waiver period; (d) provisions for adjusting or making exceptions to the limit based on participant health and welfare needs or other factors specified by the state; (e) the safeguards that are in

effect when the amount of the limit is insufficient to meet a participant's needs; (f) how participants are notified of the amount of the limit. (*check each that applies*)

☐ **Limit(s) on Set(s) of Services.** There is a limit on the maximum dollar amount of waiver services that is authorized for one or more sets of services offered under the waiver.
Furnish the information specified above.

☐ **Prospective Individual Budget Amount.** There is a limit on the maximum dollar amount of waiver services authorized for each specific participant.
Furnish the information specified above.

☐ **Budget Limits by Level of Support.** Based on an assessment process and/or other factors, participants are assigned to funding levels that are limits on the maximum dollar amount of waiver services.
Furnish the information specified above.

☐ **Other Type of Limit.** The State employs another type of limit.
Describe the limit and furnish the information specified above.

Appendix C: Participant Services

C-5: Home and Community-Based Settings

Explain how residential and non-residential settings in this waiver comply with federal HCB Settings requirements at 42 CFR 441.301(c)(4)
-(5) and associated CMS guidance. Include:

1. Description of the settings and how they meet federal HCB Settings requirements, at the time of submission and in the future.

2. Description of the means by which the state Medicaid agency ascertains that all waiver settings meet federal HCB Setting requirements, at the time of this submission and ongoing.

Note instructions at Module 1, Attachment #2, HCB Settings Waiver Transition Plan for description of settings that do not meet requirements at the time of submission. Do not duplicate that information here.

As indicated in Attachment 2 of this Waiver, OPWDD has conducted analysis of the HCBS Setting requirements and has cross walked the federal regulations with OPWDD's existing regulations, to determine which rules are in alignment, those that are silent and those that need modification. From this analysis OPWDD has developed a timeline for revising its waiver regulations.

While OPWDD has conducted a review of a sample of IRAs/CRs to assess baseline system performance (results included in Attachment 2), the agency has not begun on-site assessments of Family Care or Day Habilitation settings as of the writing of this application. Assessment Plans are included within this appendix. The following provides an overview of how OPWDD's existing regulations contain some of the major qualities required from the HCBS settings standards rules and how OPWDD is proceeding with assessment of these settings and ongoing monitoring for continued compliance with the rules.

Family Care Homes:
Family Care Providers are certified/licensed and monitored by OPWDD and operate in accordance with OPWDD Regulations, Part 687, "Family Care Homes for the Developmentally Disabled" and the requirements outlined in the Family Care Manual available on OPWDD's website. These requirements cover the certification and recertification requirements including health and safety requirements and background checks, duties and expectations of Family Care providers, as well as individual rights that are expected to be safeguarded. In addition, the Family Care Manual includes the survey tools used by OPWDD to ensure that the

Family Care Home is operated and maintained in accordance with OPWDD's requirements. OPWDD's Family Care Program provides people with intellectual/developmental disabilities the opportunity for community-based residential housing in certified private homes. The Family Care Program enables individuals with intellectual/developmental disabilities to have the support, guidance and companionship inherent in a family unit. Family Care homes provide an extended supportive family for participants, helping them become productive and active members of their community and to develop meaningful relationships.

As the Family Care Home is a private home, it is considered a community integrated residential setting option for individuals with developmental disabilities who prefer (or need) a shared living arrangement without the level of responsibility that typically comes with owning a home or renting an apartment. The intent of the Family Care Program as outlined in Part 687.2 is that the participant experiences a "family oriented, home life environment" and in all cases, the Family Care Home provides a residential environment that approximates, as closely as possible, a family setting which enables and encourages individuals to participate in the family and community life on an equal status with other members of the household.

Part 687.2 also states that one of the primary goals of Family Care is the acceptance of the individual as a full member of the household so as to share in that household's pleasures and responsibilities. These principles are exactly what the new HCBS regulations are designed to promote—that is community integrated, community inclusion outcomes, and quality of life experiences that are similar to that enjoyed by non-disabled individuals.

In addition to the regulatory crosswalk, OPWDD plans to conduct on-site reviews of a sample of Family Care settings in 2016 as follows: This survey will be completed by the Family Care Home Liaison, a staff person of the sponsoring agency, who acts as a direct link between the Family Care Provider (FCP) and the sponsoring agency through required monthly home visits. The survey tool will be similar to that used in the assessment of IRAs/CRs that is based upon the CMS Exploratory Questions. A statistically valid sampling methodology will be used.

Community Residences (CRs)
OPWDD's Community Residences (CRs) are OPWDD certified residential settings providing housing, supplies and services for people with intellectual and/or developmental disabilities who need supportive interpersonal relationships, supervision, and training assistance in the activities of daily living. CRs are designed to accomplish two major goals (1) provide a home environment; (2) provide a setting where persons can acquire the skills necessary to live as independently as possible.

As required under OPWDDD regulations, Part 686.3, CRs provide an environment that ensures rights, promotes freedom of movement, and increases opportunities for individuals to make decisions and to participate in regular community activities to the maximum level of independence of each individual. In accordance with Part 686.3 (a)(3) a Community Residence, through both staff and individual activities, shall endeavor to become an integral part of the neighborhood and community. Furthermore, residents of community residences "shall be encouraged to become participating members of the community in which they live"; 'accordingly, CR staff are responsible for facilitating individual access to appropriate community resources that is sufficiently variable to meet the needs and interests of individuals and wherever possible utilize the same community resources as used by persons who are non-disabled.'

There are two types of certified CRs:
A. Supportive Individualized Residential Alternatives (IRAs): a community residence that is certified by OPWDD that has a maximum capacity of 4 individuals or fewer. Supportive IRAs enable individuals with intellectual and/or developmental disabilities to enjoy the benefits of community residential life with habilitation support staffing tailored to the times and circumstances that is most needed by residents to remain living independently. And;
B. Supervised Individualized Residential Alternatives (IRAs): a community residence that is certified by OPWDD that has a maximum capacity of 14 individuals or fewer and is staffed at all times when persons are present at the home.

Both types of CRs are subject to OPWDD Regulations under Part 686, "Operation of Community Residences"; Part 633, Protection of Individuals Receiving Services in Facilities Operated and/or Certified by OPWDD'; Part 624, Reportable Incidents and Notable Occurrences; and other applicable OPWDD requirements for person centered planning and service delivery. A description of OPWDD's on-site assessment of IRAs/CRs is included in Attachment 2. During 2016-17 survey cycle, OPWDD will be visiting certified IRA/CR and day settings (over 7,000 sites) to determine which settings are subject to heightened scrutiny. HCBS settings standards will be incorporated into ongoing reviews of settings and providers effective October 1, 2016.

Day Habilitation Settings:
OPWDD's regulations at Part 635-10.2 specify that the intent of Home and Community Based Services (HCBS) is to create an individualized service environment consistent with meeting the needs, preferences, and personal goals of individuals through the supports and services necessary to enable a person with a developmental disability to live, work, socialize and participate in the community. Each support or service is expected to contribute to the person's current or future capacity for self-determination, integration with the community, independence and productivity. Furthermore, waiver services are designed to facilitate the flexible arrangement of preferred and needed services, individually tailored to the unique needs and personal goals of each person approved for participation.
OPWDD reviews Day Habilitation providers at least annually to ensure compliance with OPWDD regulatory requirements including Part 633, Protection of Individuals Receiving Services in Facilities Operated and/or Certified by OPWDD'; and Part 624, Reportable Incidents and Notable Occurrences; and other applicable OPWDD requirements for person centered planning and service delivery.

During the 2016-17 survey cycle, OPWDD will be visiting Day settings where waiver services are delivered to determine which settings are subject to heightened scrutiny. Beginning on 10/1/16, HCBS settings standards will be reviewed as part of routine survey activity for certified IRAs/CRs and Day settings in which waiver services are delivered.

Beginning with the 2016-17 survey cycle, OPWDD will be reviewing a sample of waiver participants who do not reside and/or receive services in a certified setting. A Person Centered Review Tool is being developed that will include HCBS settings standards to ensure that people residing in their own homes/uncertified settings are not isolated from the broader community and have choice of where they live and receive services including the choice of a non-disability specific setting.

Appendix D: Participant-Centered Planning and Service Delivery D-1: Service Plan Development (1 of 8)

State Participant-Centered Service Plan Title:
The Individualized Service Plan (ISP) or Life Plan (LP) for individuals enrolled in FIDA-IDD.

a. **Responsibility for Service Plan Development.** Per 42 CFR §441.301(b)(2), specify who is responsible for the development of the service plan and the qualifications of these individuals *(select each that applies):*

- ☐ **Registered nurse, licensed to practice in the State**
- ☐ **Licensed practical or vocational nurse, acting within the scope of practice under State law**
- ☐ **Licensed physician (M.D. or D.O)**
- ☐ **Case Manager** (qualifications specified in Appendix C-1/C-3)
- ☐ **Case Manager** (qualifications not specified in Appendix C-1/C-3).

Specify qualifications:

For individuals enrolled in FIDA-IDD, the care manager is responsible for the development of the Life Plan (LP). Care managers must meet qualifications which are described in the FIDA-IDD Three-Way Contract between CMS, OPWDD, and Partners Health Plan (PHP). The qualifications are as follows:

(1) are required to have a Bachelor's Degree and one year experience working with individuals with IDD;
(2) must be a licensed professional such as an Registered Nurse (RN), Licensed Clinical Social Worker, or Psychologist and have knowledge of physical health, developmental disability services, aging, appropriate support services in the community (e.g., Community-based and Facility-based LTSS), frequently used medications and their potential negative side-effects, depression, challenging behaviors, Alzheimer's disease and other disease-related dementias, behavioral health, and issues related to accessing and using durable medical equipment as appropriate;
(3) must have the experiences, qualifications and training appropriate to the individual needs of the participant, and the FIDA-IDD Plan must establish policies for appropriate assignment of Care Managers;

For individuals not enrolled in FIDA-IDD, the case manager (Medicaid Service Coordinator- MSC) is responsible for the development of the Individualized Service Plan (ISP). MSCs must meet all required qualifications outlined in the MSC TCM State Plan and OPWDD MSC regulations and policies. The following are the minimum requirements:

Service coordinators must: (a) either;
(1) have experience providing OPWDD Comprehensive Medicaid Case Management (CMCM) or OPWDD HCBS Waiver Service Coordination or
(2)(i) be a registered nurse or have at least an associate's degree (or equivalent accredited college credit hours) in a health or human services field, and
(ii) have at least one year's experience working with persons with developmental disabilities or at least one year's experience providing service coordination to any population, and
(b) attend professional development as required by OPWDD.

CORE Training remains a required training element for providers of both PCSS and MSC who must complete the CORE training within six (6) months of assuming coordination duties. Staff providing Plan of Care Support Services must meet all eligibility criteria and training requirements as an MSC service coordinator, including CORE Training. The MSC Vendor Manual addresses training requirements and the PCSS service (Chapters 2 and 8, respectively) and the CORE Training Manual describes the content and requirements of CORE Training.

The FIDA-IDD Plan is responsible for case management training. The FIDA-IDD Three-Way Contract between CMS, OPWDD, and PHP establishes these training requirements which is further described in D.1 d.

- ☐ **Social Worker**

Specify qualifications:

- ☐ **Other**

Specify the individuals and their qualifications:

Appendix D: Participant-Centered Planning and Service Delivery D-1: Service Plan Development (2 of 8)

b. **Service Plan Development Safeguards.** *Select one:*

- ○ **Entities and/or individuals that have responsibility for service plan development may not provide other direct waiver services to the participant.**
- ◉ **Entities and/or individuals that have responsibility for service plan development may provide other direct waiver**

services to the participant.

The State has established the following safeguards to ensure that service plan development is conducted in the best interests of the participant. *Specify:*

The agency providing Medicaid Service Coordination or Plan of Care Support Services (PCCS) may provide other waiver services, however an individual Medicaid Service Coordinator (MSC) is not permitted to provide waiver services to a participant that they serve. This practice avoids a potential conflict of interest and promotes the independence of the MSC.

The FIDA-IDD is a separate corporate entity and is not, itself, a direct provider of services other than care coordination. People receiving HCBS Waiver Services through Fee-for-Service (FFS) have a service plan called an "Individualized Service Plan (ISP)" People participating in the FIDA-IDD demonstration have a service plan called a "Life Plan (LP)".

Currently the following safeguards ensure that the service plan (ISP/LP) development is conducted in the best interests of the waiver participant:
1. The participant requesting initial access to HCBS Waiver services meets with a representative of the local OPWDD Regional Office to receive information about the choice to enter into managed care or to receive services in FFS Medicaid. The person is further advised of the available FIDA-IDD Plan for individuals who are 21 or older, dually eligible for Medicare and Medicaid, and, if so the person will be referred to the State's enrollment broker who can provide information on which service providers are available in managed care. The OPWDD Regional Office will advise participants as to the service providers that are also available in FFS. The Regional Office explains that the participant has a choice of managed care entity and service providers and provides information regarding managed care options which includes the continuous education of contract enrollment brokers on the available managed care entities and service providers in order to allow the participant to make an informed choice;
2. The participant completes a Documentation of Choices form indicating that they have chosen to receive HCBS Waiver services in lieu of ICF/IDD, they have selected an agency to provide Service Coordination or the FIDA-IDD to provide Care Coordination and they have been informed of all the available options with regard to managed care and service providers, including service coordination services. The participant is also informed that they have the right to exercise changes in choice of managed care or FFS at any time.
3. If enrolled in the FIDA-IDD, the care manager and the FIDA-IDD Plan are responsible for providing the participant with information regarding their choice of waiver services and providers in the FIDA-IDD Plan's network. The MSC is responsible for providing the participant with information regarding their choice of all waiver service providers for individuals not enrolled in managed care;
4. Throughout the Individualized Service Plan (ISP) and Life Plan (LP) process, the MSC or care manager is responsible to provide the participant with information about the full range of waiver services available from all service providers;
5. Using a person-centered planning process (see Appendix D-1, c&d for more information), the MSC or care manager is required to ensure that the content of the ISP/LP reflects the participant's goals, outcomes, strengths, needs, and appropriate service providers;
6. Each ISP/LP contains a list of the services provided, the provider of each service, and the duration and frequency of each service;
7. Upon completion of the development and implementation of the ISP/LP, the document is signed by the participant, their advocate, the MSC and the MSC Supervisor or the lead care manager in lieu of the MSC and MSC Supervisor. The participant, their advocate and the waiver habilitation service providers receive a copy of the signed ISP/LP;
8. An agency that provides both Medicaid Service Coordination and HCBS Waiver services must adhere to a "chain of command" policy that is independent of one another. Medicaid Service Coordinators and their supervisors report to administrators that act independently from the waiver service providers staff, supervisors and administrative entities, thus separating the plan development function from the direct service provision function Individuals and providers of service coordination must not 1) be related by blood or marriage to the individual, or to any paid caregiver of the individual, 2) be financially responsible for the individual, 3) be empowered to make financial or health-related decisions on behalf of the individual or 4) be Individuals who would benefit financially from the provision of assessed needs and services. The FIDA-IDD is a separate corporate entity and is not a provider of waiver services;
9. OPWDDs Division of Quality Improvement reviews the FIDA-IDD and surveys Medicaid Service Coordination provider agencies annually in order to assure the quality of the service. Surveyors inquire if Medicaid Service Coordination or care coordination is the only direct service provided to a participant by his/her MSC or care manager;
10. OPWDDs Division of Quality Improvement also reviews qualifications of HCBS waiver providers through an s annual review of a sample of participants' ISPs/LPs. Together, DOH and OPWDD engage in the continuous quality improvement process. Individual deficiencies identified in the reviews are remediated by OPWDD and reported to DOH;
11. The redesigned DOH/OPWDD Individual Service Plan (ISP)/ Life Plan (LP) review includes: 1. An annual review by OPWDD of a DOH generated, statistically valid sample of ISPs/LPs. DOH WMU oversees this OPWDD review to assure that service plan development meets the assurances set forth by CMS; 2. Annually, DOH WMU performs the fiscal component of the ISP/LP review for a statistically valid sub-sample from the larger DOH generated sample. This DOH WMU fiscal review verifies that only the waiver services documented in the
ISP/LP are billed to Medicaid (as evidenced in the Data Mart Claim Detail Report) for the concurrent time period; 3. DOH also conducts an annual ISP/LP Inter-rater Reliability Review. DOH selects a subset of ISPs/LPs from the larger, DOH generated sample of ISPs/LPs to validate that the OPWDD ISP/LP review process, using components of the agreed upon review tool, is performed as required.

Together, DOH and OPWDD engage in the continuous quality improvement process. Individual deficiencies identified in the reviews are remediated by OPWDD and reported to DOH.

DOH has also revised performance metrics in Administrative Authority in order to broaden and enhance oversight of waiver participants' health and welfare, access to choice, and service plan development.

Appendix D: Participant-Centered Planning and Service Delivery

c. **Supporting the Participant in Service Plan Development.** Specify: (a) the supports and information that are made available to the participant (and/or family or legal representative, as appropriate) to direct and be actively engaged in the service plan development process and (b) the participant's authority to determine who is included in the process.

At OPWDD's front door, the individual and family begin the HCBS waiver application process. This process starts with Regional Office staff engaging with the individual and his or her family and advocates with information and education regarding the range of service options that are offered within the HCBS waiver and the service providers that are available in the community, to ensure that the individuals and those that are involved in service planning can make informed choices.

OPWDD has devoted significant staff resources to ensure that there is a consistent approach to educating and informing individuals and families as they first approach OPWDD or not-for-profit agencies in the IDD system for services. This is a multimedia approach that includes written materials, interactive videos and one-on-one sessions that are the start of a person centered planning process. The materials and information gathering templates that are used at the front door focus on promoting opportunities for self-direction and for employment or the development of vocational skills.

Additionally, OPWDD recommends courses that are targeted to participants and their families in order to inform them of choices. These include the following courses; "Information for Parents and Professionals on OPWDD", "Our Community", "Our Experience is the Best Teacher", "We've Got Choices", "Circle of Support", "Guide for Families to Understanding Supports & Services Administered by OPWDD", and "Medicaid Service Coordination for Families; Getting the Most from Your Child's Program".

During the conversations at the front door, the individual selects a service coordinator (known as an MSC) or care manager who continues the person centered planning process with the individual and the people who support the person during the planning process. It is the responsibility of the MSC or FIDA-IDD care manager to invite representatives of the participant's choice to be involved in the service plan/life plan development. The MSC or care manager is required to include the participant, their advocate, and any other family or friends that the participant would like to be involved.

Additionally, the MSC or care manager is required to include a representative from each of the HCBS waiver services that are providing services. It is ultimately the decision of the participant and their advocate to decide who will participate in the service plan/life plan development process.

Appendix D: Participant-Centered Planning and Service Delivery

D-1: Service Plan Development (4 of 8)

d. **Service Plan Development Process.** In four pages or less, describe the process that is used to develop the participant-centered service plan, including: (a) who develops the plan, who participates in the process, and the timing of the plan; (b) the types of assessments that are conducted to support the service plan development process, including securing information about participant needs, preferences and goals, and health status; (c) how the participant is informed of the services that are available under the waiver;
(d) how the plan development process ensures that the service plan addresses participant goals, needs (including health care needs), and preferences; (e) how waiver and other services are coordinated; (f) how the plan development process provides for the assignment of responsibilities to implement and monitor the plan; and, (g) how and when the plan is updated, including when the participant's needs change. State laws, regulations, and policies cited that affect the service plan development process are available to CMS upon request through the Medicaid agency or the operating agency (if applicable):

The development of the participant's ISP/LP is a person-centered process. This process includes participation from the participant, family, friends, clinicians, support brokers, advocates, caregivers and waiver service providers. The development of the ISP/LP occurs through the collaboration of these participants.

At the point when the individual first approaches the Regional Office for services, a person-centered process is initiated, at this time an initial assessment is conducted to assist in the identification of service interests and needs that are ultimately documented in a Preliminary Individualized Service Plan (PISP) and which are informed by the results of the standardized assessment tool, the DDP. This is the interim plan used during the application for HCBS Waiver services. The PISP is initiated at the Front Door by Regional Office staff with the individual and his or her advocate to identify the services that are authorized. If the participant is enrolled in the FIDA-IDD Plan, the LP will be the interim plan used during the application for HCBS Waiver services. The PISP focuses on the identification of the participant's personal goals or desires. It identifies safeguards or protections that are related to the participant and provides a preliminary description of the services that will be needed. It is a brief "first cut" description of the person and what he or she wants. The MSC or care manager, participant and their advocate will use the PISP/LP as a starting point to develop a more comprehensive ISP/LP (also referred to as the Plan of Care or Life Plan (LP)). The PISP/LP remains in place for the first 60 days of enrollment in Medicaid Service Coordination or in the FIDA-IDD, after which a more comprehensive ISP/LP is required. The participant and their advocate are afforded the opportunity to make informed decisions in the development of the preliminary service or life plan. The MSC or FIDA-IDD care manager will build on this process for the full development of the ISP/updated LP.

The full development of the participant's ISP/LP is completed using a person-centered process which, to the maximum extent possible, the participant directs the planning of his or her services and makes informed choices about the services and supports that he or she receives. The planning process guides the delivery of services and supports to the participant in a way that leads to outcomes or results in areas of the participant's life that are most important to him or her (e.g., health, relationships, work, and home). This process involves waiver service providers and people chosen by the participant, often known as the participant's circle of support. These people participate in the process as needed, and as defined by the participant, except to the extent that decision-making authority is conferred on another by state law. The full development of the participant's ISP/LP is completed using a person-centered process approach to planning and by focusing on OPWDDs mission to help people with developmental disabilities live richer lives. It includes the vision of ensuring that people with

developmental disabilities enjoy meaningful relationships with friends, family and others in their lives, experience personal health and growth, live in the home of their choice and fully participate in their communities. Focus is also placed on OPWDDs guiding principles that frame how OPWDD conducts its business. These include "putting the person first", and maximizing opportunities for people with developmental disabilities to lead productive and fulfilling lives.

The service coordinator or care manager and the circle of support assist the person in decision-making by, among other things, explaining issues to be decided, answering the individual's questions, encouraging the individual to actively participate in decision-making and, where necessary, assisting the individual to communicate his or her preferences. During the Person Centered Planning Process, the service coordinator or care manager seeks to listen, discover and understand the participant. The person-centered planning process requires that supports and services are based on the individual's interests, preferences, strengths, capacities, and needs; supports and services are designed to empower the individual by fostering skills to achieve desired personal relationships, community participation, dignity, and respect; and the individual is satisfied with activities, supports, and services.

The person-centered planning process involves: the care manager/service coordinator to provide necessary information and support to ensure that the individual, to the maximum extent possible, directs the process and is enabled to make informed choices and decisions; and that the process is scheduled with the individual at times and locations of convenience to the individual. The service coordinator/care manager take into account the cultural considerations of the individual and provide information in plain language and in a manner that is accessible to and understood by the individual and parties chosen by the individual; provide a method for the individual to request updates to the ISP/LP as needed; and develop strategies that address conflicts or disagreements in the process and communicating such strategies to the individual who is receiving services as appropriate.

OPWDD trains MSCs to use the five sequential steps to planning. These include: gathering information as the basis for planning (a listening and learning step that increases the understanding of the participant); identifying themes in the participant's life (summary statements that are used as cues or indicators to what the person needs and wants for successful living and the keys that impact the participant's day-to-day life); choosing personal valued outcomes; identifying safeguards that are needed to keep a participant safe from harm including any risk factors; and developing the action steps, strategies, resources and funding sources needed. Once these steps are completed, the information learned is included in the service plan development and implementation.

The Three-Way FIDA-IDD Contract describes the training requirements for FIDA-IDD Plan members of the Interdisciplinary Team (IDT). Partners Health Plan (PHP) provides training to all FIDA-IDD Plan members including care managers on the following approved training on the person-centered planning processes: cultural competence; disability; accessibility and accommodations; and wellness principles, along with other required training, as specified by the State. This will include ADA/Olmstead requirements.

The ISP/LP includes the participant's goals and desired outcomes; the participant's strengths and preferences; the necessary and appropriate services and supports (paid and unpaid) that are based on the participant's preferences and needs and that will assist the participant to achieve his or her identified goals; the services that the participant elects to self-direct; if an individual resides in a certified residential setting, documentation that the residence was chosen by the individual, and document the alternative residential settings considered by the individual; and the individual and/or entity responsible for monitoring the plan.
During this development process, the MSC or care manager ensures that the ISP/LP contains the type of waiver services, Medicaid State plan and other services to be furnished, the amount, frequency and duration of each service, and the provider who will furnish each service. The ISP/LP specifies the supports and services to be provided to the waiver participant including: natural supports and community resources, Medicaid State Plan services, federal, state, and county services, waiver services and other services that may be funded by other entities. The MSC or FIDA-IDD care manager assists the participant in obtaining and coordinating the services that are outlined in the ISP/LP. The ISP/LP reflects coordination between major service providers involved with the participant. As waiver services are developed and responsibilities are assigned to waiver service providers, further assessment of specific skills are included as a component of the activities associated with waiver services.

The process of developing the ISP/LP also includes assessment of the participant's clinical and support needs as identified through an assessment of functional and health-related needs. The MSC or FIDA-IDD care manager must identify information regarding health and safety needs that will be reflected in the ISP/LP. Safeguards are supports needed to keep the participant safe from risk and harm, actions to be taken when the health or welfare of the participant is at
Risk, and measures in place to minimize risk, including individual specific back-up plans and strategies when needed. The safeguarding section of the ISP/LP includes a description of the supervision and oversight that may be required in such areas as fire safety, medication management, allergies, community inclusion activities, diet, behavioral concerns, financial transactions, and vulnerabilities at home and in the community. Safeguards are not meant to be so wide-ranging that routine supports are always identified.

The Plan is written in a way that is understandable to the participant, i.e. written in plain language and in a manner that is accessible to the participant, it is finalized and agreed to with the participant's written informed consent and signed by the provider(s) responsible for implementing the person-centered service plan, service coordinator/care manager distributes the ISP/LP to the participant and parties involved in the implementation of the plan. The participant, circle of support, the service providers, and service coordinator/care manager review the person-centered service plan and the service coordinator must revise such plan if necessary, at least twice annually; when the capabilities, capacities, or preferences of the individual have changed and warrant a review; or at the request of the participant. Person centered planning is a collaborative and recurring process between the individual, the circle of support waiver service providers and the care manager/service coordinator. The MSC or FIDA-IDD care manager ensures that the ISP/LP is kept current, adapted to the changing outcomes and priorities of the person, as growth, temporary setbacks, and accomplishments occur. However, OPWDD requires that the service plan be reviewed at least twice per year by the MSC or care manager, the participant, their advocate (if applicable) and, as needed the waiver habilitation service providers. As changes are identified the MSC or care manager updates the ISP/LP to reflect the changes. Additionally, the ISP/LP should be updated any time changes to HCBS Waiver services occur to reflect a change in a service.

The MSC or FIDA-IDD care manager is responsible to oversee and monitor the implementation of the ISP/LP. When reviewing the ISP/LP, the MSC or care manager ensures that its contents are kept current, and that services provided continue to address the participant's needs, preferences and desired outcomes as they develop and change.

The primary difference between Comprehensive Medicaid Case Management (MSC) and OPWDD Home and Community Based Waiver Service Coordination (PCSS) is the intensity of the service coordination provided. Medicaid Service Coordination (MSC)

offers ongoing and comprehensive case management support on a monthly basis. Those who do not require such an intensive level of case management support may be enrolled in Plan of Care Support Services (PCSS) which offers a maximum of four months of case management service per year(a minimum of two services per year with an optional two additional services if needed by the individual). The primary functions of each service are similar: including the development and ensuring implementation of the ISP, and ensuring continued waiver and other service eligibility; yet the frequency of support is less intense with PCSS. This option is available to anyone who is eligible for OPWDD case management services – except for Willowbrook Class members who by decree must receive monthly case management. The service coordination needs of the individual are used to determine which model is provided. The majority of individuals receiving OPWDD case management receive MSC (97.7%) as opposed to PCSS (2.3%).

Appendix D: Participant-Centered Planning and Service Delivery

D-1: Service Plan Development (5 of 8)

e. **Risk Assessment and Mitigation.** Specify how potential risks to the participant are assessed during the service plan development process and how strategies to mitigate risk are incorporated into the service plan, subject to participant needs and preferences. In addition, describe how the service plan development process addresses backup plans and the arrangements that are used for backup.

An assessment of the participant's level of skills, and dignity of risk are identified during the through person-centered planning process. To evaluate “risk” and the individual’s responsibility and ability to calculate the risk, the participant, his/her circle of support, the service coordinator/care manager take into consideration the benefits to the individual and the rights of the individual, ways to empower the person to improve their ability to make informed decisions through education and self-advocacy skills, possible resources and environmental adaptations that can allow the person to take the “risk,” but mitigate potential hazards.

In order to assure the health and safety of each waiver participant, the plan of care includes a safeguarding section. This safeguarding section identifies the supports needed to keep the participant safe from harm and actions to be taken when the health or welfare of the person is at risk. Safeguards are significant issues discovered during the planning process that are individualized and specific to the participant; these include relevant medical and behavioral information.

Additionally, participants residing in OPWDD certified residential settings known as Individualized Residential Alternatives (IRA) are required to have a plan for protective oversight, based on an analysis of the participant's safeguarding needs. This plan is reviewed at least annually and revised as needed and integrated with other services received as appropriate. The plan for protective oversight is attached to the ISP/LP. The OPWDD DQI survey process verifies that participants are receiving appropriate protective oversight, that staff have received training appropriate to the oversight needs of participants, and that the participant's plan is implemented as specified in their ISP/LP. In addition, OPWDD certified residential settings are required to implement a facility evacuation plan. The DQI survey process verifies that staff and participants are trained and evaluated regarding their performance to execute the facility evacuation plan. Each participant's ISP/LP safeguarding section contains a current evaluation of the fire evacuation capacity of the participant based on actual performance.

When risks to a participant's health and safety are identified, every effort is made to assist the participant to understand his or her risks and to address them. The identification of risks for participants includes addressing these risks through specific habilitative plans and services. It is the responsibility of all staff working with a participant to include strategies that address health and safety.

OPWDD regulations, Part 633 Protection of Individuals Receiving Services, sets forth requirements for ensuring and/or promoting the protection of individuals served which are applicable to facilities operated and/or certified by OPWDD. Provider agencies assure the rights of individuals by developing and implementing policies and procedures which ensure ongoing compliance with Part 633. Providers must ensure that participants and/or their parents, guardians or correspondents receive information regarding rights and responsibilities, the process for resolving objections, problems, or grievances relative to the person's rights, and information on where to go to report/resolve these issues. OPWDD DQI surveyors verify provider compliance with the Part 633 requirements during the survey process. In addition, the FIDA-IDD is required to comply with all federal and state requirements related to rights and grievances for their members.

Certified residential settings are required to develop plans for back up by having a communication system which ensures the prompt contacting of on-duty personnel and the prompt notification of responsible personnel in the event of an emergency. OPWDD FIDA-IDD is required to provide 24-hour contact information to access appropriate personnel in the event of an emergency or other circumstances as defined in the contract with NYS. During the person centered planning process, the participant, their family, involved provider agencies and the care manager/service coordinator develop back up arrangements for those participants residing in their own homes.

Appendix D: Participant-Centered Planning and Service Delivery

D-1: Service Plan Development (6 of 8)

f. **Informed Choice of Providers.** Describe how participants are assisted in obtaining information about and selecting from among qualified providers of the waiver services in the service plan.

Upon application to the Regional Office for participation in the HCBS Waiver, the Regional Office provides the participant and their family or advocate with information about the range of services and supports that are offered through the waiver and information regarding all service providers (including the FIDA-IDD network) that are available in their geographic location, to ensure that informed choice of services and providers of services can be made.

The participant requesting HCBS Waiver services meets with a representative of the local OPWDD Regional Office and an enrollment broker if enrolled in managed care to receive information about the FFS and managed care services and service providers. The Regional Office explains that the participant has a choice of service providers and provides information regarding service

providers in order to allow the participant to make an informed choice for individuals in FFS and managed care.

The participant completes a Documentation of Choices form indicating that they have chosen to receive HCBS Waiver services. He or she selects an agency to provide Service Coordination or care management through the FIDA-IDD.. The participant is also informed that they have the right to exercise changes in choice of service providers at any time. For individuals who opt to participate in managed care, they will be provided information from the FIDA-IDD about the choice of managed care providers and choice within its network providers.
The MSC or care manager is responsible for providing the participant with information regarding their choice of all waiver service providers or network providers if enrolled in the FIDA-IDD. All service providers are listed in the participant's ISP/LP. Twice annually, preferably at 6 month intervals, the ISP/LP and all service providers listed are reviewed with the participant. The participant's satisfaction with service providers is assessed at this time and if the participant is dissatisfied with services, the MSC or care manager will help the participant to obtain information regarding other service providers and will assist the participant in the selection of service providers.

Additionally, OPWDDs website provides a public e-mail address to request information. OPWDD's website includes comprehensive information on available services. OPWDDs toll-free hotline is another source of information. The information line is designed to help people get answers to questions regarding supports and services. It is equipped with InterpreTALK, a telephonic interpreting service. Callers, regardless of what language they speak, are able to communicate their questions or concerns without delay. Linkages are made to the appropriate Regional Office for follow-up and assistance.

Appendix D: Participant-Centered Planning and Service Delivery

D-1: Service Plan Development (7 of 8)

g. Process for Making Service Plan Subject to the Approval of the Medicaid Agency. Describe the process by which the service plan is made subject to the approval of the Medicaid agency in accordance with 42 CFR §441.301(b)(1)(i):

In August, 2010, the State realized that there was a great deal of overlap and duplication between the service plan reviews conducted by OPWDD's Division of Quality Improvement and the annual ISP review conducted jointly between DOH WMU and OPWDD's Division of Person Centered Supports. As a result, the two agencies have worked together, with the assistance of the National Quality Enterprise (NQE), to devise strategies to better ensure the following:
• Participant Eligibility is determined;
• Participant Level of Care is performed and re-evaluated annually;
• Services are furnished in accordance with the ISP;
• Participant access to waiver services is identified in the ISP;
• Participant exercises choice of provider;
• Services meet participant's needs;
• Participant health and welfare safeguards are clearly outlined in the ISP/LP and reflect the participant's current health status and need for safeguards;
• Participant has access to non-waiver services (including medical, dental, ancillary health and rehabilitative services) and that these services are listed in the service plan.

Current Strategy:
Changes to the execution of Administrative Authority have been implemented to accomplish the following goals:
a. to strengthen and broaden the scope of the SMA oversight of the OPWDD Comprehensive HCBS Waiver, especially in the areas of health and welfare, qualified providers, and service plans;
b. assure that SMA oversight is current, timely and reflective of OPWDD's present reform initiatives.

1. Performance Measures and revised QIS
• DOH conducts administrative oversight by evaluating the results of the ISP/LP review using the revised performance measures and QIS established by DOH and OPWDD with assistance from NQE. (Appendix A and Appendix H)

2. DOH Oversight of OPWDD DQI Service Plan Review (implemented in the 2011-2012 waiver year): DOH performs oversight of a review of a statistically valid sample of ISPs/LPs completed by OPWDD DQI. DOH continues to perform the Medicaid billing validation (fiscal) review for a subset of the statistically valid sample.
• The annual review of a statistically valid representative sample of ISPs/LPs, previously completed by DOH, is conducted by OPWDD DQI. However, DOH oversight activities ensure the following:
o OPWDD is using the agreed upon review tool and the defined performance measures;
o OPWDD DQI surveyor ISP/LP reviews are accurate, complete, and are performed as per the agreed upon process;
o DOH tracks individual deficiencies identified in the ISP/LP review and monitors both individual and systemic remediation activities related to these deficiencies.
• DOH selects the statistically valid representative sample annually and provides the sample to OPWDD DQI. DQI subsequently completes the review, using a review tool and a timeline agreed upon by DOH and OPWDD.
• OPWDD DQI provides a semi- annual report to DOH that summarizes the ISP/LP Review results and identifies trends observed by each assurance category. This report includes OPWDD's performance measure data as it relates to the MSC review.

3. DOH Fiscal Review : DOH performs the Medicaid billing validation review for a statistically valid sample of the DOH statistically valid sample that DOH provides annually to OPWDD DQI for review. DOH monitors identified deficiencies to assure that appropriate remediation is completed by OPWDD and reported to DOH in the agreed upon timeframe.

4. DOH ISP/LP Validation Review Process referred to as IRR: DOH also reviews a select subset of ISPs/LPs to validate that the review process was performed as required and that the CMS assurances are met.
• DOH randomly selects a subset of ISPs/LPs from the annual DOH larger statistically valid sample. Those ISPs/LPs and related documents are electronically scanned by DQI and submitted to DOH for review;

*DOH uses applicable parts of the OPWDD DQI MSC Review Tool concurrently used by DQI so that the results can be compared and validated; DOH reviews these selected ISPs/LPs for the following:
* eligibility;
* required dates and signatures that ensure appropriate persons are involved in authorizing, planning and providing services;
* documentation specifying that an individual enrolled in the waiver, and his/her circle of supports, are part of the planning, implementation, and evaluation process;
* accurate, complete, and timely Level of Care and Medicaid Service Coordinator (MSC) Agreement forms;
* accurate, complete, and timely Document of Choice/Freedom of Choice forms that verify that the individual and his/her advocate have been informed of the choice between institutionalization or community-based waiver support services and that the participant's choice has been indicated.
*inclusion of valued outcomes ;
*habilitative, health and safety, medical, dental, behavioral health, community inclusion and support needs of the waiver participant are addressed and re-evaluated as needed.
*ultimately, the goal of the IRR process is to assure that any deficiency identified by either OPWDD or DOH is remediated in the agreed upon timeframe.

CONTINUED IN D.2.a.

Appendix D: Participant-Centered Planning and Service Delivery

D-1: Service Plan Development (8 of 8)

h. Service Plan Review and Update. The service plan is subject to at least annual periodic review and update to assess the appropriateness and adequacy of the services as participant needs change. Specify the minimum schedule for the review and update of the service plan:

- ○ **Every three months or more frequently when necessary**
- ○ **Every six months or more frequently when necessary**
- ○ **Every twelve months or more frequently when necessary**
- ◉ **Other schedule**

Specify the other schedule:

OPWDD requires that the service plan/life plan be reviewed at least twice annually on a twelve month basis (i.e. semi-annually) and we suggest that providers seek to do this review/update every six months, however, we allow flexibility in the six month schedule to incorporate changes to the ISP/LP that may occur before or after the six month point based on the unique events and circumstances happening in each individual's life. To ensure that these decisions are made in the best interests of the individual served and not for the convenience of the MSC/FIDA-IDD care manager, OPWDD instructs MSCs/care managers to document in the service coordination record the reason why the ISP/LP review occurs at a time other than the recommended six month interval. In addition, OPWDD requires the Service Coordinator/Care Manager to keep the ISP/LP up to date in accordance with all OPWDD policy guidance.

i. Maintenance of Service Plan Forms. Written copies or electronic facsimiles of service plans are maintained for a minimum period of 3 years as required by 45 CFR §92.42. Service plans are maintained by the following *(check each that applies):*

- ☐ **Medicaid agency**
- ☐ **Operating agency**
- ☐ **Case manager**
- **Other**

Specify:

Medicaid Service Coordination Provider or the FIDA-IDD Plan.

Appendix D: Participant-Centered Planning and Service Delivery

D-2: Service Plan Implementation and Monitoring

a. Service Plan Implementation and Monitoring. Specify: (a) the entity (entities) responsible for monitoring the implementation of the service plan and participant health and welfare; (b) the monitoring and follow-up method(s) that are used; and, (c) the frequency with which monitoring is performed.

Continued from D.1.g.

5. Sampling Methodology: DOH continues to assure that the annual DOH OPWDD DQI ISP/LP sample is both statistically valid and representative of all waiver participants, including individuals who receive both state-operated services and services delivered by not-for-profit agencies.
• Based on the guidance of NQE, DOH WMU annually selects the sample size of 400 ISPs/LPs for the annual ISP/LP Review using the Raosoft. Inc® calculator (5% margin of error, 95% confidence interval, and a 50% response distribution). The response distribution was reset from 95% to 50% to reflect the transition from the traditional DOH ISP/LP review process to the redesigned ISP/LP review process described in this section.
• The DOH ISP/LP review is conducted annually. The sample size will be recalculated periodically and the response distribution

readjusted accordingly when warranted.
• Sample selection process: DOH runs a query through the NYS Data Warehouse to identify all OPWDD HCBS Waiver participants during the sample time period. DOH selects a random statewide sample, using a random number generated table, based on the number of approved waiver slots at the beginning of the review year. The DOH sampling methodology generates a list that includes all waiver services and all authorized residential options including private homes and certified residential settings.

Several layers of monitoring of the implementation of the plan of care occur within the NYS OPWDD Waiver.

For individuals not enrolled in the FIDA-IDD, upon completion of the initial plan of care (ISP), the MSC must submit the plan to the MSC Supervisor for review, signature and approval of the plan. Any time a significant change is made to the plan of care and portions are revised and rewritten, the MSC Supervisor must review, sign and approve the changes to the plan. Once the plan of care has been approved, the MSC is responsible for monitoring the implementation of the plan of care and the participant's continued health and welfare. The MSC will have contact and face to face meetings with the participant based on the individualized needs and circumstances of each individual and the professional judgement of the Service Coordinator and the Supervisor in consultation with the individual based on assessment to assure that the services are meeting the participant's needs and that the participant is satisfied with the services being provided. This activity is documented in the MSC notes.

For individuals enrolled in the FIDA-IDD, the lead care manager is responsible to ensure that the plan is completed, implemented, and monitored. In addition to the lead care manager, the managed care entity will use an Interdisciplinary Team (IDT) that is available to address the specialized planning needs of the person. The FIDA-IDD is responsible to contract members with different expertise and specialty backgrounds (e.g., nurse, education specialist, employment specialist, etc.). These members are available to the participant on the IDT as dictated by the enrollee's care plan needs.

Additionally, the OPWDD Division of Quality Improvement (DQI) performs a series of oversight and monitoring activities to ensure that the service plan/life plan implementation is adequate. When a provider is authorized to provide HCBS Waiver services in a residential or day certified setting, they will receive an operating certificate. Prior to the renewal of a provider's operating certificate, DQI staff complete a survey visit. During this visit, DQI staff will review a sample of 5% of waiver participants' plans of care. The focus of this review includes a review of the participant's valued outcomes, habilitation services, health and welfare, staffing, rights, health services and medications, incident management, and physical plant surroundings. DQI staff will conduct observations, interviews with provider staff and participants and will review records. When serious or systemic deficiencies are identified, the DQI issues a Statement of Deficiencies (SOD) and requires that the provider respond in writing with a Plan of Corrective Action (POCA). Upon approval of the POCA, DQI will issue a renewal of the provider's operating certificate.
When a provider is authorized to provide HCBS Waiver services to participants in non-certified settings, the DQI staff annually review a sample of waiver participants' plans of care. The focus of this review is similar in scope to the previously mentioned survey visit, but is completed via a desk review.

DQI staff complete annual survey visits to all certified programs. Annual visits are limited in scope and focus primarily on participant health and safety issues and a review of the provider's implementation of previous POCAs.

Service plan implementation and monitoring is also achieved through the DQI Medicaid Service Coordination Audit. DQI annually reviews a 5% sample of participants receiving services from an MSC provider to assess the quality of services provided. The sample is representative of the variety of participants' residential living arrangements within the provider agency and will include a cross-section of the agency's service coordinators. The audit components include a review of the development, implementation and maintenance of the participant's plan of care and other required documentation. The DQI staff will review relevant sections of the participant's record, conduct interviews and make observations, as appropriate, to determine whether or not the service coordinator has completed the required documentation in a timely manner and the outcomes, as written, accurately reflect the participant's life goals, aspirations, valued outcomes and required supports. Through their review the DQI staff ensure that the participant and their advocate meaningfully participated in the development, implementation and review of the plan of care and after interviewing the participant and making observations where and when appropriate, the participant's actual activities and services correspond to what is written and to the participant's valued outcomes. They ensure that the participant's choices are incorporated into the plan of care. Statements of Deficiency (SOD) are issued and Plans of Corrective Action are received to address any systemic, pervasive or egregious deficiencies.

In accordance with OPWDD's November 2013 Quality Strategy and the goals outlined in OPWDD's Self-Direction Policy, OPWDD is engaged in survey redesign to lay the foundation for new protocols that will better support our review of the effectiveness of person centered and person directed service delivery including the incorporation of the new federal standards related to home and community based services and person centered planning and process requirements. Work with OPWDD stakeholders to determine the quality standards and characteristics that will be included in new protocols resulted in the development of quality indicators outlining standards and criteria for high quality service provision. This information can be viewed on OPWDD's website at:
http://www.opwdd.ny.gov/opwdd_services_supports/service_providers/provider_performance/aqpwg. As OPWDD develops and implements these new protocols, it will be necessary to revise the sampling percentages and strategies referenced above to ensure that we are getting at the stratification levels that can best ensure that our person samples represent the wide range of agency supports and services and the diversity of needs in our population and to ensure that we can review each person in the sample from a person centered perspective. These revisions will help to ensure that our person samples are not siloed by site or program and that instead the entire array of the person's supports are reviewed to ensure that the Plan is effectively implemented based upon the person's preferences, needs and outcomes.

Providers that deliver HCBS Waiver Services under the FIDA-IDD provider network will be reviewed by DQI through the annual care management review of the managed care entity. New York State OPWDD will conduct an annual on-site review of the effectiveness of every managed care entities Care Management Function. During this review OPWDD will pull a statistically valid sample of all individuals served by the managed care entity and will review life plans and the overall effectiveness of care management to produce results that reflect the person's assessed needs, communicated choices and preferences. The on-site Care Management Review will

include a record review, interviews with the person and their advocates/circles of support, and interviews with managed care personnel and staff engaged in the care management function. This review may also include operational and administrative elements included in the FIDA-IDD contract such as a review of the QI Plan, policies and procedures, and grievance systems.

b. Monitoring Safeguards. *Select one:*

○ **Entities and/or individuals that have responsibility to monitor service plan implementation and participant health and welfare may not provide other direct waiver services to the participant.**

◉ **Entities and/or individuals that have responsibility to monitor service plan implementation and participant health and welfare may provide other direct waiver services to the participant.**

The State has established the following safeguards to ensure that monitoring is conducted in the best interests of the participant. *Specify:*

At this time, the agency providing Medicaid Service Coordination may provide other waiver services. A FIDA-IDD is a separate legal entity and the only direct service that it provides is care management. Both the individual Medicaid Service Coordinator (MSC) and FIDA-IDD care manager are not permitted to provide waiver services to a participant that they serve. This practice avoids a potential conflict of interest and promotes the independence of the MSC or FIDA-IDD care manager. Currently the following safeguards ensure that the service plan (also referred to as the Individualized Service Plan (ISP) or Life Plan (LP)) development is conducted in the best interests of the waiver participant:

1. The participant requesting initial access to the HCBS Waiver services meets with a representative of the local OPWDD Regional Office to receive information about the choice to enter into managed care or to receive services in Fee-For-Service (FFS) Medicaid. The person is further advised of the availability of the FIDA-IDD Plan for individuals who are 21 or older, dually eligible for Medicaid and Medicare, and if so the person will be referred to the State's enrollment broker who can provide information on which service providers are available in managed care. The OPWDD Regional Office will advise as to the service providers that are available in FFS. In addition the Regional Office explains that the participant has a choice of enrolling in the managed care plan and using service providers that are part of the managed care network. Interested participants will be referred to the enrollment broker to provide education on managed care and service providers in order to allow the participant to make an informed choice;
2. The participant completes a Documentation of Choices form indicating that they have chosen to receive HCBS Waiver services in lieu of ICF/IDD, they have selected an agency to provide Service Coordination or the FIDA-IDD to provide care management, and they have been informed of all the available options with regard to managed care and FFS service providers, including service coordination/care management services. In addition, the participant is also informed that they have the right to exercise changes in choice of managed care or FFS and service providers at any time.
3. The MSC is responsible for providing the participant with information regarding their choice of all waiver service providers for individuals not enrolled in managed care. For individuals enrolled in FIDA-IDD the care manager and the FIDA-IDD Plan are responsible for providing the participant with information regarding their choice of waiver services and service providers;
4. For individuals who do not choose to enroll in the FIDA-IDD Plan when initially requesting waiver access, the MSC is responsible for completing a Medicaid Service Coordination Agreement with the participant within 60 days of the participant's enrollment in the MSC program. This agreement identifies the MSC and the agency selected to provide Medicaid Service Coordination. It describes the responsibilities of the MSC, including the need for the MSC to provide the participant with information about other service coordinators within the same provider agency or other service coordination providers when the participant requests a change in service coordination or becomes dissatisfied with the current service coordinator. The MSC Agreement is amended in accordance with OPWDD policy when applicable changes occur.
5. Throughout the Individualized Service Plan (ISP)/ Life Plan (LP) process, the MSC or care manager is responsible to provide the participant with information about the full range of waiver services available from all applicable service providers;
6. Using a person-centered planning process, the MSC or care manager is required to ensure that the content of the ISP/LP reflects the participant's, goals, strengths, needs, and the appropriate service providers ;
7. Each ISP/LP contains a list of the services provided, the provider of each service, and the duration and frequency of each waiver service;
8. Upon completion of the development and implementation of the initial or rewritten ISP/LP, the document is signed by the participant, their advocate, the MSC and the MSC Supervisor or the lead care manager (in lieu of the MSC and MSC Supervisor). The participant, their advocate and the waiver habilitation service providers receive a copy of the signed ISP/LP;
9. An agency that provides both Medicaid Service Coordination and HCBS Waiver services must adhere to a "chain of command" policy that is independent of one another. Medicaid Service Coordinators and their supervisors report to administrators that act independently from the waiver service providers staff, supervisors and administrative entities, thus separating the plan development function from the direct service provision function. Individuals and providers of service coordination must not 1) be related by blood or marriage to the individual, or to any paid caregiver of the individual, 2) be financially responsible for the individual. 3) be empowered to make financial or health-related decisions on behalf of the individual or 4) be Individuals who would benefit financially from the provision of assessed needs and services. The FIDA-IDD Plan is a separate corporate entity and is not a provider of waiver services;
10. OPWDDs Division of Quality Improvement reviews the FIDA-IDD and surveys Medicaid Service Coordination provider agencies annually in order to assure the quality of the service. Surveyors inquire if Medicaid Service Coordination or care management is the only direct service provided to a participant by his/her MSC or care manager;
11. OPWDDs Division of Quality Improvement also surveys providers of HCBS waiver services annually and includes a review of the participant's ISP/LP in order to assure that it protects the participant's health and welfare, and reflects participant choice;
12. The DOH oversight function includes an annual review of a statistically valid sample of ISPs/LPs. The review is conducted on an annual basis. The review assures that each sample participant's health and welfare are protected, and reflects participant choice. Please refer to Appendix G: QIS: Performance Measures G.i.10 through G.i.12, and Appendix D: D.1.g.

Quality Improvement: Service Plan

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

a. **Methods for Discovery: Service Plan Assurance/Sub-assurances**

The state demonstrates it has designed and implemented an effective system for reviewing the adequacy of service plans for waiver participants.

i. **Sub-Assurances:**

a. ***Sub-assurance: Service plans address all participants' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of National Core Indicator (NCI) respondents who reported on the Adult Consumer Survey that the services and supports offered meet their needs.

Data Source (Select one):
Other
If 'Other' is selected, specify:
NCI Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group: OPWDD Regional Office
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The number and percent of service plans that include an assessment of the health and safety risks of the individual.

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI MSC Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other**	☐ **Annually**

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
Specify:	
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The number and percent of service plans/life plans in which the waiver service plans support the individual's valued outcomes and include preferred activities.

Data Source (Select one):
Other
If 'Other' is selected, specify:
ISP/LP Sample/DQI

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
	☐ **Other** Specify:

Performance Measure:
The proportion of individuals who have an integrated job in the community.

Data Source (Select one):
Other
If 'Other' is selected, specify:
NCI Consumer Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The proportion of individuals who do not have an integrated job in the community but would like one.

Data Source (Select one):
Other
If 'Other' is selected, specify:
NCI consumer survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

b. ***Sub-assurance: The State monitors service plan development in accordance with its policies and procedures.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of service plans that comply with OPWDD ISP/LP development requirements (Percentage=number of ISPs/LPs/consumer records that met requirements/total ISPs/LPs reviewed).

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI/MSC Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group: MR/DD functional level and service coordinator
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The number and percent of NCI respondents who responded that they were able to pick who comes to their planning meeting.

Data Source (Select one):
Other
If 'Other' is selected, specify:
NCI Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

c. ***Sub-assurance: Service plans are updated/revised at least annually or when warranted by changes in the waiver participant's needs.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of ISPs/LPs that demonstrate that changes were made to the plan in response to a change in the individual's needs (Number and Percent of plan changes/ISPs/LPs in which the individual's needs changed).

Data Source (Select one):
Other
If 'Other' is selected, specify:
ISP/LP Sample/DQI

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*

Performance Measure:
The number and percent of ISPs/LPs which reflect that the ISP/LP was reviewed at least semi- annually on a twelve month basis.

Data Source (Select one):
Other
If 'Other' is selected, specify:
ISP/LP Sample/DQI

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/-5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group: OPWDD Regional Office
	☐ **Continuously and Ongoing**	☐ **Other** Specify: Proportional representation of three core services: residential, day, and individualized services.
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*

d. ***Sub-assurance: Services are delivered in accordance with the service plan, including the type, scope, amount, duration and frequency specified in the service plan.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of ISPs/LPs reviewed in which the services in the approved plan were provided in the scope, type, amount, frequency and duration specified in the plan. (Percentage=total number of case records sampled that met the requirements/total reviewed).

Data Source (Select one):
Other
If 'Other' is selected, specify:
ISP/LP Sample

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/-5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

e. ***Sub-assurance: Participants are afforded choice: Between waiver services and institutional care; and between/among waiver services and providers.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:
The number and percent of National Core Indicator (NCI) self-directing respondents who reported that they receive information about the services and supports that are available to their family.

Data Source (Select one):
Other
If 'Other' is selected, specify:
NCI Adult Consumer Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/-5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The number and percent of ISPs/LPs reviewed where the Documentation of Choices form was completed to identify a choice of community services rather than institutional care. (Percentage= ISPs/LPs/Choice Forms completed correctly from review/total ISP/LP/ Choice Forms reviewed.)

Data Source (Select one):
Other
If 'Other' is selected, specify:
ISP/LP Sample/DQI

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/-5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The number and percent of individuals sampled where the individual responded that he/she was given a choice of providers.

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI MSC Survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.
See Appendix C-Quality Improvement ii for details.

b. Methods for Remediation/Fixing Individual Problems

i. Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.
The methods used by DQI to remediate individual problems as they are discovered include the following:

-Through annual and recertification survey visits/activity, notification is provided to all providers of all regulatory deficiencies.

--When warranted, generation of Statements of Deficiency (SODs) which require a Plan of Corrective Action (POCA).

--Review and analysis by DQI of all POCAs submitted by providers. If the POCA is deemed unacceptable by DQI, the provider will be required to amend and submit an updated/acceptable POCA. DQI conducts follow up visits when warranted to ensure that corrective actions have been implemented by provider agencies. Corrective actions are also reviewed by DQI upon recertification of operating certificates and during HCBS reviews.

Remediation activities completed by OPWDD in response to the DOH ISP/LP review include: ongoing training on identified issues and trends; "e-visory alerts" sent to providers addressing issues and trends; ongoing technical assistance to providers; DQI provider training of "hot topics"; and revisions to training curriculums of courses offered on plan of care topics.

ii. Remediation Data Aggregation
Remediation-related Data Aggregation and Analysis (including trend identification)

Responsible Party*(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

c. Timelines
When the State does not have all elements of the Quality Improvement Strategy in place, provide timelines to design methods for discovery and remediation related to the assurance of Service Plans that are currently non-operational.

- (●) **No**
- ( ) **Yes**

Please provide a detailed strategy for assuring Service Plans, the specific timeline for implementing identified strategies, and the parties responsible for its operation.

- (●) **No**
- ( ) **Yes**

Please provide a detailed strategy for assuring Service Plans, the specific timeline for implementing identified strategies, and the parties responsible for its operation.

Appendix E: Participant Direction of Services

Applicability *(from Application Section 3, Components of the Waiver Request)*:

- (●) **Yes. This waiver provides participant direction opportunities.** Complete the remainder of the Appendix.
- ( ) **No. This waiver does not provide participant direction opportunities.** Do not complete the remainder of the Appendix.

CMS urges states to afford all waiver participants the opportunity to direct their services. Participant direction of services includes the participant exercising decision-making authority over workers who provide services, a participant-managed budget or both. CMS will confer the Independence Plus designation when the waiver evidences a strong commitment to participant direction.

Indicate whether Independence Plus designation is requested *(select one):*

- ( ) **Yes. The State requests that this waiver be considered for Independence Plus designation.**
- (●) **No. Independence Plus designation is not requested.**

Appendix E: Participant Direction of Services

E-1: Overview (1 of 13)

a. **Description of Participant Direction.** In no more than two pages, provide an overview of the opportunities for participant direction in the waiver, including: (a) the nature of the opportunities afforded to participants; (b) how participants may take advantage of these opportunities; (c) the entities that support individuals who direct their services and the supports that they provide; and, (d) other relevant information about the waiver's approach to participant direction.

Self-Direction is a central tenant of the OPWDD transformation agenda and is a core element of the education and outreach that is provided at the front door. Once a person enters the front door and selects a Service Coordinator, he or she assists the person in accessing all HCBS services presents self-direction as an option for service delivery. Service coordinators provide information on the supports and services available through OPWDD so participants can make informed choices on the service options that best meet their needs and that will enable them to live as independently as possible in the community. For individuals seeking more control and authority over their supports and services or individuals seeking an alternative to traditional provider managed services, the service coordinator informs them about OPWDD participant- directed service options. The OPWDD HCBS waiver offers participant-direction options with varying degrees of employer authority and/or budget authority. Individuals may choose to participant-direct some or all of their waiver services.

Effective 10/1/14 the waiver-funded program called Consolidated Supports and Services (CSS) discontinued and in its place, a new approach to self-direction will be implemented that offers employer and/or budget authority. This approach offers options for the individual allowing choice and flexibility in the range of support the individual and his or her advocate want with the exercise of employer authority and budget authority. The options include:

Agency Supported Self Direction: In this option the individual selects an agency with which he or she wants to work. The individual and the agency enter into a Memorandum of Understanding (MOU) governing the responsibilities of the agency and the individual and his or her advocate(s). A template version of the MOU is available on the OPWDD web site at the following link: http://www.opwdd.ny.gov/node/6199.

In this option, the MOU specifies that the participant will work cooperatively with the provider to hire, train, and oversee staff selected by the participant. The participant oversees the staff's schedule and chooses the level and type of support to be provided by the staff in accordance with his/her ISP and habilitation plans. The staff person is hired by the agency and paid at the agency's rate of pay. Under this option, the person can exercise employer, but not budget authority. This co-management option is offered for community habilitation, Supported Employment, and respite services.

Self-Direction with Budget Authority and Self-Hired Staffing: Under this option, the individual and his or her family can exercise budget authority with the assistance of a Fiscal Intermediary that provides varying levels of support based on the complexity of the person's service plan and the level of support the individual elects to receive from the FI. In this option, the person can hire a staff person, and the FI provides payroll, mandatory training and fingerprinting/background check services for the employee and bills

Medicaid for services rendered. If the self-directing individual chooses, the FI may provide additional supports such as non-mandatory training for staff or assisting with arranging back-up staffing.

An individual may self-direct Community Habilitation, Supported Employment, Respite, Live-in Caregiver, and Community Transition services. These self-directed services can be part of the person's person-centered plan of support that may include other, non-self-directed services, For example, individuals can have both traditional supports from provider agencies and self- directed supports within their plan. When a person opts to exercise budget authority, the following additional services are also available to support the person to exercise self-direction with budget authority, and are also considered self-directed services: Individual Directed Goods and Services (IDGS), Fiscal Intermediary, Community Transition Services and Support Brokerage services. Individuals who choose to enroll in a FIDA I/DD will have the same opportunities to access self-direction services in the same manner through the FIDA I/DD.

To facilitate participant direction, self-direction participants are assisted by a freely chosen planning team, also known as a Circle of Support. This team consists of paid and unpaid members chosen by the participant to help with person-centered planning necessary to develop and manage a Self-Direction budget.

Self-direction participants access support brokerage services under this waiver to provide information and assistance in support of participant direction. Support Brokers may be hired by the participant to assist them to direct and manage a self-directed service options. The Support Broker assists the participant in developing a self-direction budget that address his/her immediate and long-term needs while also addressing health and safety. Each OPWDD Regional Office has at least one "self-direction liaison" who works with the person, the planning team, the Support Broker and the service coordinator to develop and monitor both the Service Plan and the budget. The self-direction participant's annualized budget (Personal Resource Account-PRA) is developed for each participant and are portable. The budget covers the cost of recruitment, selection and supervision of staff hired by the participant, staff salaries, as well as for other approved supports and services in the self-direction budget.

Self-Direction participants access financial management services through a Fiscal Intermediary . The FI is a non-profit provider agency authorized by OPWDD to provide HCB waiver services, including FI services. Under this model, the FI provides a range of supports to the self-direction participant. The FI may serve as an employer of record while the person served is the managing employer. Alternately, the self-direction participant may elect to take on a majority of employer responsibility, and the FI's then serves as a payroll service with the FI's level of reimbursement reduced.

The FI agency manages and directs the disbursement of funds in the budget, facilitate the employment of staff chosen by the participant by completing criminal background checks and other employment related processes, processing timesheets and payroll, withholding and paying taxes, fiscal accounting and expenditure reporting for the person, representatives, and state authorities.

Beginning with the 10/1/14 waiver renewal, the FI model provides a continuum of administrative assistance for the self-directing participant, which at the extreme end represents either (a) basic fiscal management services (e.g., screening potential self-hired employees, acting as employer of record, and conducting documentation and accounting functions only), or (b) active co-management of all staff supports, purchases, and documentation required by the participant.. Participants, in conjunction with their Circles of Support, natural support systems, and support brokers, determine the degree of administrative assistance they desire from their FI.

Through the tools described above, OPWDD is committed to continuing to promote participant direction in the waiver-funded services.

Appendix E: Participant Direction of Services

E-1: Overview (2 of 13)

b. Participant Direction Opportunities. Specify the participant direction opportunities that are available in the waiver. *Select one*:

- ○ **Participant: Employer Authority.** As specified in ***Appendix E-2, Item a***, the participant (or the participant's representative) has decision-making authority over workers who provide waiver services. The participant may function as the common law employer or the co-employer of workers. Supports and protections are available for participants who exercise this authority.
- ○ **Participant: Budget Authority.** As specified in ***Appendix E-2, Item b***, the participant (or the participant's representative) has decision-making authority over a budget for waiver services. Supports and protections are available for participants who have authority over a budget.
- ◉ **Both Authorities.** The waiver provides for both participant direction opportunities as specified in ***Appendix E-2***. Supports and protections are available for participants who exercise these authorities.

c. Availability of Participant Direction by Type of Living Arrangement. *Check each that applies*:

- [ ] **Participant direction opportunities are available to participants who live in their own private residence or the home of a family member.**
- [ ] **Participant direction opportunities are available to individuals who reside in other living arrangements where services (regardless of funding source) are furnished to fewer than four persons unrelated to the proprietor.**
- [ ] **The participant direction opportunities are available to persons in the following other living arrangements**

Specify these living arrangements:

People who live in certified residences (Individual Residential Alternatives (IRAs), Community Residences (CRs) or Family Care Residences, may self-direct their non-residential services. IRAs and CRs contain one to fourteen bedroom and Family Care Residences contain one to four bedrooms.

Appendix E: Participant Direction of Services

E-1: Overview (3 of 13)

d. Election of Participant Direction. Election of participant direction is subject to the following policy *(select one):*

- ( ) **Waiver is designed to support only individuals who want to direct their services.**
- (•) **The waiver is designed to afford every participant (or the participant's representative) the opportunity to elect to direct waiver services. Alternate service delivery methods are available for participants who decide not to direct their services.**
- ( ) **The waiver is designed to offer participants (or their representatives) the opportunity to direct some or all of their services, subject to the following criteria specified by the State. Alternate service delivery methods are available for participants who decide not to direct their services or do not meet the criteria.**

Specify the criteria

Appendix E: Participant Direction of Services

E-1: Overview (4 of 13)

e. Information Furnished to Participant. Specify: (a) the information about participant direction opportunities (e.g., the benefits of participant direction, participant responsibilities, and potential liabilities) that is provided to the participant (or the participant's representative) to inform decision-making concerning the election of participant direction; (b) the entity or entities responsible for furnishing this information; and, (c) how and when this information is provided on a timely basis.

Every individual who seeks services from OPWDD is informed of the opportunity to self-direct their services and is encouraged to explore these opportunities through the new standardized OPWDD entry point to services, called the "Front Door." In addition, all individuals who receive services through the OPWDD Home and Community Based Services (HCBS) waiver must have access to service coordination services (See Appendix D for more information on service coordination). Service coordinators assure that participants have the information necessary to make informed choices regarding the supports available to them, including self-direction services, and helps ensure the participant's personal choices are incorporated into the waiver supports and services chosen to meet their needs. This includes the use of natural and generic community supports as well as paid supports. FIDA-IDD is required to be provide education regarding self-direction to all enrollees in their managed care plan

For individuals seeking more control and authority over their supports and services or individuals seeking an alternative to traditional provider-managed services, the service coordinator will continue the education that begins at the front door about OPWDD participant- directed service options. The OPWDD HCBS waiver offers participant-direction options, with varying degrees of participant employer authority and/or participant budget authority. Individuals may choose to participant-direct some or all of their waiver services.

Multiple written resources and videos are available to assist individuals to understand participant-directed options. The service coordinator assists in connecting participants to the local regional office Self-Direction Liaison for further information. Self-Direction Liaisons offer self-direction sessions to individuals and their families that provide detailed information on the benefits fo self-directing, the responsibilities and liabilities, and how to get started if they are interested. These sessions are offered regionally about once a month. In addition, the Self-Direction liaisons will also have one-on-one sessions if requested by an individual. The service coordinator may also connect the participant with a local Self-Advocacy Coordinator.

It is through one of these resources that individuals begin to understand the many responsibilities of full participant-direction (e.g., staff recruitment, hiring, scheduling, supervising, and

discharging workers; plan development, budget management, and documentation requirements). If a participant continues to be interested in pursuing self-directed service options, it is the role of the Circle of Support, which includes the service coordinator and broker, and the Regional Self-Direction Liaison to help the participant determine the degree to which he/she wants to direct services and help him/her identify the most appropriate supports and services to self-direct.

OPWDD's website and the Self-Advocacy Association of New York State (SANYS) website have a plethora of resources to inform current participants self-directing services and those who may be interested in self-directing services in the future.

Appendix E: Participant Direction of Services

E-1: Overview (5 of 13)

f. Participant Direction by a Representative. Specify the State's policy concerning the direction of waiver services by a representative *(select one):*

- ○ **The State does not provide for the direction of waiver services by a representative.**
- ◉ **The State provides for the direction of waiver services by representatives.**

Specify the representatives who may direct waiver services: *(check each that applies)*:

- ☐ **Waiver services may be directed by a legal representative of the participant.**
- ☐ **Waiver services may be directed by a non-legal representative freely chosen by an adult participant.**

Specify the policies that apply regarding the direction of waiver services by participant-appointed representatives, including safeguards to ensure that the representative functions in the best interest of the participant:

A) Waiver services are participant-directed when the individual receiving the services: is an adult who is capable and willing to make informed choices and manage the self-directed options.

B) Waiver services are directed by a designee of the participant when the individual receiving services is:

a. a capable who has designated another adult who is capable and willing to make informed choices and manage the waiver services for the participant; or
b. a capable adult who has designated another adult who is capable and willing to make informed choices and manage the waiver services for the participant, and the participant has given the other adult a power of attorney to make informed choices and manage the waiver services for the participant.

C) Waiver Services are directed by the guardian of the individual receiving services when the individual receiving services:
a. is an adult whom a court of competent jurisdiction has determined is incapable of making informed choices and for whom such court has appointed a guardian who is a natural person to make informed choices regarding waiver services; or
b. is a minor whose parents(s) or guardian is an adult capable of making informed choices regarding waiver services; or
c. is a minor
i. whose parent(s) or guardian is capable; but
ii. has designated another adult to make informed choices regarding waiver services; and
iii. the other adult is capable and willing to make informed choices regarding waiver services.

Some of the responsibilities of the legal guardian and/or the identified adult, on behalf of the participant include:
(a) recruiting staff;
(b) making recommendations for staff selection and discharge of staff;
(c) managing the staff schedule; and
(d) identifying when and on what schedule the habilitation activities identified in the individual's Plan will be addressed.
(e) Determining staff salary if the person has self-hired staff and budget authority

During the planning stages for self-direction an MSC identifies safeguards that need to be in place to ensure that the best interests of the individual are met.

In OPWDD's service system, it is assumed that everyone has the ability and the right to direct his/her services. OPWDD authorizes waiver services as part of the Front Door process and if, based on these intake/assessment activities, it is established that a person is unable to communicate choice, understand information, comprehend consequences of decisions, and unable to compare options, the person may designate a representative who can act on the person's behalf. If there is no person to act as a representative, the person will be directed to other service options. Once the person is engaged in self-direction, the freely chosen circle of support is developed with people who are willing and able to

assist the person in developing a service plan that is appropriate for the person. The MSC and broker, if there is one, assist in the development of the circle of support.

Appendix E: Participant Direction of Services

E-1: Overview (6 of 13)

g. Participant-Directed Services. Specify the participant direction opportunity (or opportunities) available for each waiver service that is specified as participant-directed in Appendix C-1/C-3.

Waiver Service	Employer Authority	Budget Authority
Fiscal Intermediary (FI) formerly Agency with Choice/Financial Management Services (AWC/FMS)		X
Live-in Caregiver (42 CFR §441.303(f)(8))		X
Support Brokerage		X
Supported Employment (SEMP)	X	X
Respite	X	X
Community Habilitation	X	X
Individual Directed Goods and Services		X
Community Transition Services		X
Consolidated Supports and Services	X	X

Appendix E: Participant Direction of Services

E-1: Overview (7 of 13)

h. Financial Management Services. Except in certain circumstances, financial management services are mandatory and integral to participant direction. A governmental entity and/or another third-party entity must perform necessary financial transactions on behalf of the waiver participant. *Select one*:

- (●) **Yes. Financial Management Services are furnished through a third party entity.** *(Complete item E-1-i)*.

  Specify whether governmental and/or private entities furnish these services. *Check each that applies*:

  - [ ] **Governmental entities**
  - [ ] **Private entities**

- ( ) **No. Financial Management Services are not furnished. Standard Medicaid payment mechanisms are used.** *Do not complete Item E-1-i.*

Appendix E: Participant Direction of Services

E-1: Overview (8 of 13)

i. Provision of Financial Management Services. Financial management services (FMS) may be furnished as a waiver service or as an administrative activity. *Select one*:

- (●) **FMS are covered as the waiver service specified in Appendix C-1/C-3**

  The waiver service entitled:
  Fiscal Intermediary

- ( ) **FMS are provided as an administrative activity.**

Provide the following information

i. Types of Entities: Specify the types of entities that furnish FMS and the method of procuring these services:

Non-profit organizations that are HCBS waiver authorized as an FI agency may furnish FMS. Approved agencies have Medicaid provider agreements, and must adhere to all applicable tax, labor and other law related to employment.

When a person makes an application for self-directed services, the Regional Office provides information about approved FIs in his or her region among which the person may choose.

ii. Payment for FMS. Specify how FMS entities are compensated for the administrative activities that they perform:

FIs are compensated through a monthly fee for service.

iii. Scope of FMS. Specify the scope of the supports that FMS entities provide *(check each that applies)*:

Supports furnished when the participant is the employer of direct support workers:

- ☐ **Assist participant in verifying support worker citizenship status**
- ☐ **Collect and process timesheets of support workers**
- ☐ **Process payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance**
- ☐ **Other**

Specify:

The FI is the employer of record on behalf of the participants who self-direct pending the development of an option for individuals or their families to act as a common law employer. The FI ensures that criminal background checks are performed for each person the participant is interested in hiring.

Supports furnished when the participant exercises budget authority:

- ☐ **Maintain a separate account for each participant's participant-directed budget**
- ☐ **Track and report participant funds, disbursements and the balance of participant funds**
- ☐ **Process and pay invoices for goods and services approved in the service plan**
- ☐ **Provide participant with periodic reports of expenditures and the status of the participant-directed budget**
- ☐ **Other services and supports**

Specify:

Additional functions/activities:

- ☐ **Execute and hold Medicaid provider agreements as authorized under a written agreement with the Medicaid agency**
- ☐ **Receive and disburse funds for the payment of participant-directed services under an agreement with the Medicaid agency or operating agency**
- ☐ **Provide other entities specified by the State with periodic reports of expenditures and the status of the participant-directed budget**
- ☐ **Other**

Specify:

iv. Oversight of FMS Entities. Specify the methods that are employed to: (a) monitor and assess the performance of FMS entities, including ensuring the integrity of the financial transactions that they perform; (b) the entity (or entities) responsible for this monitoring; and, (c) how frequently performance is assessed.

FIs are closely monitored by the Regional Office, the participant, their family and the service coordinator. At a minimum, the participant, family and service coordinator will review the FI performance at each semi-annual review of the plan of care (ISP).

The FI agency performs fiscal accounting and provides regular expenditure reports to the participant, and others as identified by the individual, tracking and reporting participant funds, disbursements and the balance of participant funds, and providing OPWDD with reports of expenditures and the detailed status of the participant-directed budget when requested. FI agencies are closely monitored by the OPWDD Regional Office staff, the participant, their family and the service coordinator. At a minimum, the participant, the circle of support and service coordinator will review the FI performance at the time of the 6 month review of the plan of care (ISP). The participant has the opportunity to express satisfaction with the fiscal performance of the FI during regular planning team meetings and ISP reviews or at any time there is a concern.

In addition, OPWDD uses the NCI survey (self-directed supports section) to assess satisfaction with self-directed services. This section of the NCI survey reviews whether a person can make changes to their budget and services when needed; whether there is someone to assist the person in how to use their budget and services; whether the person receives information on how much money is left in their budget; and other related questions.

The Division of Quality Improvement (DQI) reviews all service providers for regulatory compliance and quality of care.

Certified cost reports are reviewed annually.

Until 9/30/2014, OPWDD required CSS providers to perform a calendar year reconciliation of expenditures to revenues, and if excess

revenue was received, a recovery is made by OPWDD as described below.

After 10/1/14, services are billed to eMedNY as Self-Directed services using separately identified rate codes and FIs will no longer perform a reconciliation. Therefore FIs bill only for those goods and services that are in the approved self-direction budget and do not bill Medicaid until there has been expenditures for those approved goods and services.

OPWDD and the OMIG have a joint audit plan which ensures coverage of all waiver services including any services that are self-directed (as described in Appendix I-1).

OPWDD's Office of Audit Services (OAS), in conjunction with OMIG will develop an audit program(s) to audit the new self-directed services billed through Fiscal Intermediaries (FI) and all existing waiver services (that FI are to be claiming) are already being audit by OAS.

Appendix E: Participant Direction of Services

E-1: Overview (9 of 13)

j. **Information and Assistance in Support of Participant Direction.** In addition to financial management services, participant direction is facilitated when information and assistance are available to support participants in managing their services. These supports may be furnished by one or more entities, provided that there is no duplication. Specify the payment authority (or authorities) under which these supports are furnished and, where required, provide the additional information requested *(check each that applies)*:

☐ **Case Management Activity.** Information and assistance in support of participant direction are furnished as an element of Medicaid case management services.

Specify in detail the information and assistance that are furnished through case management for each participant direction opportunity under the waiver:

Service coordination (case management) is the vehicle that drives all HCBS services including self-directed service options. Every individual who receives services through the HCBS waiver must have access to service coordination. Service coordination services are designed to assist individuals to gain access to needed waiver services, state plan, and other appropriate supports regardless of the funding source. Service coordinators provide information on the supports and services available through OPWDD so participants can make informed choices on the service options that best meet their needs and that will enable them to live as independently as possible in the community.

A primary responsibility of the service coordinator is to maintain and update the ISP and ensure that approved supports and services are delivered, regardless of participant-direction or traditional provider-managed services, and to help determine whether the participant is satisfied with their participant-directed services. Through these processes, the service coordinator provides information and assistance in support of the services the person receives. The service coordinator acts as a link between the Regional Office and the participant and their Circle of Support. The service coordinator must notify the Regional Office Self-Direction Liaison of issues involving the participant’s dissatisfaction as well as issues that may compromise health and safety and obstacles that prevent the participant’s plan from being fully implemented.

☐ **Waiver Service Coverage.** Information and assistance in support of participant direction are provided through the following waiver service coverage(s) specified in Appendix C-1/C-3 (check each that applies):

Participant-Directed Waiver Service	Information and Assistance Provided through this Waiver Service Coverage
Assistive Technology - Adaptive Devices	☐
Day Habilitation	☐
Prevocational Services	☐
Fiscal Intermediary (FI) formerly Agency with Choice/Financial Management Services (AWC/FMS)	☐
Intensive Behavioral Services	☐
Live-in Caregiver (42 CFR §441.303(f)(8))	☐
Support Brokerage	☐
Supported Employment (SEMP)	☐
Respite	☐
Community Habilitation	☐
Individual Directed Goods and Services	☐
Pathway to Employment	☐
Environmental Modifications (Home Accessibility)	☐
Community Transition Services	☐
Consolidated Supports and Services	☐
Plan of Care Support Services	☐
Residential Habilitation	☐
Family Education and Training	☐

☐ **Administrative Activity.** Information and assistance in support of participant direction are furnished as an administrative activity.

Specify (a) the types of entities that furnish these supports; (b) how the supports are procured and compensated; (c) describe in detail the supports that are furnished for each participant direction opportunity under the waiver; (d) the methods and frequency of assessing the performance of the entities that furnish these supports; and, (e) the entity or entities responsible for assessing performance:

Appendix E: Participant Direction of Services

E-1: Overview (10 of 13)

k. Independent Advocacy *(select one).*

○ **No. Arrangements have not been made for independent advocacy.**

◉ **Yes. Independent advocacy is available to participants who direct their services.**

Describe the nature of this independent advocacy and how participants may access this advocacy:

The first level of independent advocacy available in participant-directed services stems from the participant's freely chosen planning team (or Circle of Support) whose members are natural supports to the participant and assist in ensuring that approved supports and services are delivered. Planning Team members often provide temporary, short-term back up supports if needed. The Planning Team meets, minimally, each quarter.

Individuals utilizing participant-directed services continue to receive service coordination (MSC or PCSS). The service coordinator is a required member of the Planning Team. A primary responsibility of the service coordinator is to ensure that approved supports and services are delivered, regardless of participant-direction or traditional provider-managed services, and to help determine whether the participant is satisfied with their participant-directed services. The service coordinator acts as a

link between the Regional Office and the participant and their Planning Team. The service coordinator must notify the Regional Office Self-Direction Liaison of issues involving the participant's dissatisfaction as well as issues compromising health & safety and obstacles preventing the participant's plan from being fully implemented.

If an individual is not pleased with the performance of the FI, he/she can contact people in his/her circle of support or MSC for assistance in resolving any issues. If necessary, the Regional Office staff is available to assist, or the person can contact the OPWDD Hotline to register a complaint with Central office.

Appendix E: Participant Direction of Services

E-1: Overview (11 of 13)

l. Voluntary Termination of Participant Direction. Describe how the State accommodates a participant who voluntarily terminates participant direction in order to receive services through an alternate service delivery method, including how the State assures continuity of services and participant health and welfare during the transition from participant direction:

Individuals may choose at any time to terminate their self-directed service options. This process is facilitated through the service coordinator or the support broker. A period of at least 30 days is requested to allow the FI to appropriately discharge staff and notify any contracted service providers. The service coordinator will work with the participant to ensure continuity of service provision and health and safety.

Appendix E: Participant Direction of Services

E-1: Overview (12 of 13)

m. Involuntary Termination of Participant Direction. Specify the circumstances when the State will involuntarily terminate the use of participant direction and require the participant to receive provider-managed services instead, including how continuity of services and participant health and welfare is assured during the transition.

In situations where participant-direction is through employer authority or a co-management model with a provider agency, the Co-Management Memorandum of Understanding contains a section for discontinuation of the self-directed services. This can be prompted by either the participant or the provider agency. In the event that it is the provider agency who is requesting the discontinuation of self-direction, the provider agency will continue to provide traditional (non-self-directed) supports to the participant. If appropriate, the participant will work with their service coordinator to secure alternative services.

In situations where participant-direction is supported by an FI, the FI may choose to involuntarily terminate a participant who has demonstrated a history of non-compliance with service delivery, budget authority, and/or documentation compliance. The FI must demonstrate efforts undertaken to assist the participant in addressing these issues. These efforts include written notification of pending termination if the issues are not addressed within a minimum 30 day timeframe. This notification must also be sent to the participant’s service coordinator who will work with the participant to secure alternative participant-directed or traditional services.

Appendix E: Participant Direction of Services

E-1: Overview (13 of 13)

n. Goals for Participant Direction. In the following table, provide the State's goals for each year that the waiver is in effect for the unduplicated number of waiver participants who are expected to elect each applicable participant direction opportunity. Annually, the State will report to CMS the number of participants who elect to direct their waiver services.

Table E-1-n

	Employer Authority Only	Budget Authority Only or Budget Authority in Combination with Employer Authority
Waiver Year	**Number of Participants**	**Number of Participants**
Year 1	4000	2500
Year 2	4500	4000
Year 3	5000	4500
Year 4	5500	5000
Year 5	6000	5500

E-2: Opportunities for Participant Direction (1 of 6)

a. Participant - Employer Authority *Complete when the waiver offers the employer authority opportunity as indicated in Item E-1-b:*

i. Participant Employer Status. Specify the participant's employer status under the waiver. *Select one or both*:

☐ **Participant/Co-Employer.** The participant (or the participant's representative) functions as the co-employer (managing employer) of workers who provide waiver services. An agency is the common law employer of participant-selected/recruited staff and performs necessary payroll and human resources functions. Supports are available to assist the participant in conducting employer-related functions.

Specify the types of agencies (a.k.a., agencies with choice) that serve as co-employers of participant-selected staff:

Non-profit entities may serve as co-employers.

☐ **Participant/Common Law Employer.** The participant (or the participant's representative) is the common law employer of workers who provide waiver services. An IRS-approved Fiscal/Employer Agent functions as the participant's agent in performing payroll and other employer responsibilities that are required by federal and state law. Supports are available to assist the participant in conducting employer-related functions.

ii. Participant Decision Making Authority. The participant (or the participant's representative) has decision making authority over workers who provide waiver services. *Select one or more decision making authorities that participants exercise*:

☐ **Recruit staff**
☐ **Refer staff to agency for hiring (co-employer)**
☐ **Select staff from worker registry**
☐ **Hire staff common law employer**
☐ **Verify staff qualifications**
☐ **Obtain criminal history and/or background investigation of staff**

Specify how the costs of such investigations are compensated:

☐ **Specify additional staff qualifications based on participant needs and preferences so long as such qualifications are consistent with the qualifications specified in Appendix C-1/C-3.**
☐ **Determine staff duties consistent with the service specifications in Appendix C-1/C-3.**
☐ **Determine staff wages and benefits subject to State limits**
☐ **Schedule staff**
☐ **Orient and instruct staff in duties**
☐ **Supervise staff**
☐ **Evaluate staff performance**
☐ **Verify time worked by staff and approve time sheets**
☐ **Discharge staff (common law employer)**
☐ **Discharge staff from providing services (co-employer)**
☐ **Other**

Specify:

Provide or arrange for any necessary training/assistance as requested by the participant and Circle of Support members.

Ensure that all staff have received Incident Reporting training prior to the start of employment. This training is available through the FIs.

E-2: Opportunities for Participant-Direction (2 of 6)

b. Participant - Budget Authority *Complete when the waiver offers the budget authority opportunity as indicated in Item E-1-b:*

i. Participant Decision Making Authority. When the participant has budget authority, indicate the decision-making authority that the participant may exercise over the budget. *Select one or more*:

- ☐ **Reallocate funds among services included in the budget**
- ☐ **Determine the amount paid for services within the State's established limits**
- ☐ **Substitute service providers**
- ☐ **Schedule the provision of services**
- ☐ **Specify additional service provider qualifications consistent with the qualifications specified in Appendix C-1/C-3**
- ☐ **Specify how services are provided, consistent with the service specifications contained in Appendix C-1/C-3**
- ☐ **Identify service providers and refer for provider enrollment**
- ☐ **Authorize payment for waiver goods and services**
- ☐ **Review and approve provider invoices for services rendered**
- ☐ **Other**

Specify:

Identify providers he or she no longer wants to work with and refer for provider dis-enrollment.

Monitor monthly expenses to ensure that spending levels are consistent with the approved annual budget.

Appendix E: Participant Direction of Services

E-2: Opportunities for Participant-Direction (3 of 6)

b. Participant - Budget Authority

ii. Participant-Directed Budget Describe in detail the method(s) that are used to establish the amount of the participant-directed budget for waiver goods and services over which the participant has authority, including how the method makes use of reliable cost estimating information and is applied consistently to each participant. Information about these method(s) must be made publicly available.

A resource allocation, called a Personal Resource Account (PRA), is established for each participant. The PRA represents a target amount of resources available to the participant for the cost of the supports and services they need. The budget for –a self-direction participant is limited to the maximum PRA based on ISPM score, which is outlined in the "Attachment 1 - PRA" to Addendum A of this amendment. Participants may not budget for more than the maximum PRA amount and the FI will not be reimbursed for services and supports that are above the maximum.

Personal Resource Account (PRA) values were developed by linking participant characteristics and need for services to the actual Medicaid billings for a reference group over one calendar year. The process evolved in several steps:

-The focus was mainly on persons receiving waiver services from voluntary providers. However, for comparison purposes, community ICF residents served by voluntary agencies were also included. In total, 20,595 consumers met the selection criteria.

-Medicaid expenditures were obtained for residential and day services billed in the specified calendar year. Miscellaneous services not clearly falling into either category were equally divided between residential and day services. For persons receiving HCBS, IRA Residential Habilitation or At Home Residential Habilitation, and State Plan Personal Care Service, billings for personal care services were obtained.

-For each person identified above, data were drawn from OPWDD's Developmental Disabilities Profile (DDP) Information System. Specifically, the DDP provides three summary measures of skills and needs: Adaptive (0-500), Health/medical (0-31) and Challenging Behavior (0-200), where low scores indicate low needs (high skills) and high scores indicate high needs (low skills). Based on extensive OPWDD research on personal resource consumption, the DDP Adaptive and Health scores were further combined into a Direct Support score (0-136), where low scores indicate low direct (hands-on) support needs and high scores indicate high direct support needs. (see chart below)

After preliminary analyses, the Direct Support Scores were cut into levels forming eight roughly equal-sized groups and the Challenging Behavior Scores were cut into four levels forming roughly equal-sized groups. These two variables were the basis of assigning persons to selected groupings for cost analysis purposes. (see chart below)

Direct Support Levels	Scoring Range	Challenging Behavior Levels	Scoring Range
1	0 to 17.61	1	0 to 3.99
2	17.62 to 23.53	2	4.00 to 25.66
3	23.54 to 29.30	3	25.67 to 69.32

4 29.31 to 35.62	4	69.33 to 200.00
5 35.63 to 43.06		
6 43.07 to 52.84		
7 52.85 to 68.54		
8 68.55 to 136.00		

-Personal resource allocation target amounts were then established by analyzing the variations in Medicaid residential and day billings by the DDP ability levels. However, before the analyses were undertaken, the lowest and highest 2.5 percent of the billings in each category were trimmed to reduce the influence of extremely low and high expenditure cases.

-The final Personal Resource Account target values are based upon persons receiving waiver residential services and day habilitation services in non-profit organizations. ICF and Clinic service recipients were included for comparison purposes only.

PRAs are then further refined based on the age of the person and his or her certified residential status. Individuals who live in certified residential settings may choose to direct their day services (not their residential services), and therefore, the PRA is reduced to reflect only the person's day service needs. Also, children living at home may self-direct their services, but the PRA is also reduced to reflect their status as a minor, dependent child and a recipient of services through the school.

Additionally, individuals who qualify for the a "Special Population Funding" rate (e.g., an individual who has been discharged from a more restrictive residential setting such as a developmental center as described in Addendum A to this waiver) has an adjusted PRA which is set at a higher rate that is designed to provide additional supports required to assist an individual transitioning to a less restrictive setting and will be in effect through June 30, 2017.

This information is available to Support Brokers assisting individuals who choose participant-direction via the Regional Office Self-Direction Liaison and is available to the public upon request.

Appendix E: Participant Direction of Services

E-2: Opportunities for Participant-Direction (4 of 6)

b. Participant - Budget Authority

iii. Informing Participant of Budget Amount. Describe how the State informs each participant of the amount of the participant-directed budget and the procedures by which the participant may request an adjustment in the budget amount.

Participants who choose to direct their services can get information on their PRA target value from their Regional Office Self Direction Liaison or their Support Brokerage Services agent at the beginning of the planning process. Participants are given a target value based on historical costs of individuals with similar service needs. These are only meant to be, as stated, a targeted value. A person's budget can be less than or equal to the target value, but cannot exceed the target value. Through the person-centered planning process, the person defines their own specific needs and with the assistance of the support broker designs their self-direction budget..

Participants can also request to change any aspect of their self-directed service plan and budget during the implementation phase to achieve evolving personal goals and valued outcomes, and to prevent institutionalization. There are two set opportunities to make changes to the service plan and budget yearly plan (through 9/30/14) or the Self Direction Budget (after 10/1/14) which align with the semi-annual reviews of the ISP. Individuals are afforded an immediate opportunity to request a change to their budget if circumstances occur that imminently threaten the life, safety and/or welfare of the participant. Participants are assisted through these change processes by their support broker and/or their local Regional Office Self-Direction Liaison.

A participant has a right to a Fair Hearing on a denial, termination or reduction of a self-direction budget, as long as the budget amount the person is requesting does not exceed the target value. A participant cannot request a Fair Hearing to exceed the budget target amount.

Appendix E: Participant Direction of Services

E-2: Opportunities for Participant-Direction (5 of 6)

b. Participant - Budget Authority

iv. Participant Exercise of Budget Flexibility. *Select one*:

◉ **Modifications to the participant directed budget must be preceded by a change in the service plan.**

○ **The participant has the authority to modify the services included in the participant directed budget without prior approval.**

Specify how changes in the participant-directed budget are documented, including updating the service plan. When prior review of changes is required in certain circumstances, describe the circumstances and specify the entity that reviews the proposed change:

Appendix E: Participant Direction of Services

E-2: Opportunities for Participant-Direction (6 of 6)

b. Participant - Budget Authority

v. Expenditure Safeguards. Describe the safeguards that have been established for the timely prevention of the premature depletion of the participant-directed budget or to address potential service delivery problems that may be associated with budget underutilization and the entity (or entities) responsible for implementing these safeguards:

There are a number of safeguards and other resources designed to prevent the premature depletion of the participant-directed individualized budget as well as to address potential problems related to service delivery.

The main function of Support Brokers is to assist the participant to manage his/her self-direction budget. Support brokers review monthly expenditure reports with the participant to ensure that monthly expenses are appropriate. Circles of Support (the Support Broker is a member) act as a primary safeguard as well. Circles are required to meet at least once every three months (quarterly) but will meet as often as the participant requires to assist with staffing, scheduling, risk management and other issues. Other areas of support include:

--continual identification of revised or emerging valued outcomes and the supports needed to address them;
--on-going planning and maintenance of the self-directed budget;
--budgeting for emergency back-up support if needed;
--review of individualized budget expenditure reports to ensure that available resources remain adequate to meet approved services and supports;
--assistance in ensuring that risk, responsibilities, and consequences are understood and adhered to and that safeguards are revised, if needed, to adequately address needs, and;
--helping to ensure that health and safety concerns are immediately identified and addressed.

The participant may also identify a Circle member as his/her liaison or authorized designee to the Fiscal Intermediary (FI) agency for issues related to the co-management of his or her self-direction budget.

A core function of FI Services is to develop and implement an accounting and information system to track and report participant- directed support funds, labor expenses, and non-labor expenses. The FI makes payments based on a current, approved budget which outlines the annual costs the participant will incur and how these costs will be paid over the course of the year. The FI must ensure that there are sufficient funds available within the individual's budget to make the necessary payments.

The FI must develop a mechanism to identify those participants who incur expenses in excess of expected spending or those participants who are significantly under-utilizing their allotted funds. Either circumstance must immediately be reported to the participant (or authorized designee where appropriate) and to the local OPWDD office. The FI must also generate detailed expenditure reports to individuals and others as identified by the individual. These reports must be customized, as appropriate to their intended audience, to ensure that participants and members of their Circle of Support can understand them.

The participant will work with his or her Support Broker and Circle of Support to determine the need to revise the self-direction and budget.

An FI checklist, which highlights the general responsibilities of the FI, is shared with all individuals using FI to self-direct services. On-going training is also provided to all parties on their roles and responsibilities.

In order to prevent a conflict of interest, the Regional Office reviews self-direction budgets and confirms the services/purchases are utilized through self-direction.

Appendix F: Participant Rights

Appendix F-1: Opportunity to Request a Fair Hearing

The State provides an opportunity to request a Fair Hearing under 42 CFR Part 431, Subpart E to individuals: (a) who are not given the choice of home and community-based services as an alternative to the institutional care specified in Item 1-F of the request; (b) are denied the service(s) of their choice or the provider(s) of their choice; or, (c) whose services are denied, suspended, reduced or terminated. The State provides notice of action as required in 42 CFR §431.210.

Procedures for Offering Opportunity to Request a Fair Hearing. Describe how the individual (or his/her legal representative) is informed of the opportunity to request a fair hearing under 42 CFR Part 431, Subpart E. Specify the notice (s)) that are used to offer individuals the opportunity to request a Fair Hearing. State laws, regulations, policies and notices referenced in the description are available to CMS upon request through the operating or Medicaid agency.

The Regional Office Director designee notifies the individual and his/her guardian or involved family member of the right to request a fair hearing. The Notice of Decision (NOD) explains the agency's decision (e.g., denial or termination of HCBS enrollment) and offers the individual the opportunity to appeal the decision. It also includes the name and telephone number of a Regional Office staff person who can answer any questions the individual may have about the NOD and agency action. Instructions on how to request a fair hearing are included in the NOD. The instructions also explain how the individual can continue to receive current services during the pendency of the appeal.

Individuals request a fair hearing by contacting the Office of Administrative Hearings, New York Office of Temporary Disability and Assistance (NYS OTDA) within sixty days from the date of the NOD.

The NODs are sent to the individual, his/her guardian or involved family member, as well as his/her service/care coordinator. A copy of the notice is kept at the Regional Office. NYS OTDA notifies OPWDD when a fair hearing has been requested by or on behalf of the individual.

For individuals enrolled in the HCBS Waiver and enrolled in the Fully Integrated Duals Advantage for Individuals with Intellectual and Developmental Disabilities (FIDA-IDD)demonstration, appeal systems will be required to comply with 42 CFR 438, Article 44 of New York PHL ,applicable New York State regulations and the requirements outlined in the FIDA-IDD Three Way Contract.

Individuals enrolled in the FIDA-IDD can appeal any update to or reauthorization of the Life Plan (LP) or an action taken by the FIDA-IDD Plan related to Covered Items or Services. There are four levels of the appeals process for individuals enrolled in the FIDA-IDD. Level one appeal is an initial appeal to the FIDA-IDD Plan. An Appeal of the Plan's action can be requested by the individual/guardian or designee and must be requested within sixty days from the date of the Coverage Determination Notice (CDN). The CDN explains the Plan's decision and any decision that is not wholly in the individuals favor is automatically sent to the states Integrated Administrative Hearing Office (IAHO), NYS OTDA for a fair hearing, this serves as level two appeal. If the IAHO decision is not in the individuals favor, the individual can appeal that decision to the Medicare Appeals Council (MAC). The individual/guardian or designee can request a MAC through the IAHO within sixty days of the adverse decision by the IAHO. A MAC appeal serves as level three appeal. If there is an adverse decision by the MAC the individual can appeal to the Federal District Court which serves as level four appeal.

People with developmental disabilities will also be able to seek assistance from OPWDD and/or an independent advocate of their choice or the Independent Consumer Advocacy Network (ICAN) to assist them to navigate the grievance/appeals process through the FIDA-IDD when the person is dissatisfied with services and/or believes he or she should receive a service that the FIDA-IDD Plan has not provided to them.

Medicaid Fair Hearing requirements will continue to be applicable as the last step in the grievance process.

Appendix F: Participant-Rights

Appendix F-2: Additional Dispute Resolution Process

a. **Availability of Additional Dispute Resolution Process.** Indicate whether the State operates another dispute resolution process that offers participants the opportunity to appeal decisions that adversely affect their services while preserving their right to a Fair Hearing. *Select one:*

- ○ **No. This Appendix does not apply**
- ◉ **Yes. The State operates an additional dispute resolution process**

b. Description of Additional Dispute Resolution Process. Describe the additional dispute resolution process, including: (a) the State agency that operates the process; (b) the nature of the process (i.e., procedures and timeframes), including the types of disputes addressed through the process; and, (c) how the right to a Medicaid Fair Hearing is preserved when a participant elects to make use of the process: State laws, regulations, and policies referenced in the description are available to CMS upon request through the operating or Medicaid agency.

OPWDD regulations provide for an internal dispute resolution process (14 NYCRR Section 633.12). This process requires providers of service to offer informal dispute resolution for an individual's objection to the adequacy of his/her plan of care, and for provider initiated changes related to reduction, suspension or discontinuance of Home and Community Based waiver services. An individual is advised of the process to resolve objections to services upon enrollment in the HCBS waiver program and as changes occur. A provider must give the individual written notification when such provider proposes a reduction, suspension or withdrawal of waiver services.

If the provider and individual are unable to reach agreement, Regional Office staff will be asked to assist in resolving the issues. Ultimately, the OPWDD Commissioner may appoint a hearing officer to resolve outstanding issues. Individuals who use the process at 14 NYCRR Section 633.12 are told they may request a fair hearing at any time when the objection results from a determination made by OPWDD. The dispute resolution mechanism under Part 633.12 is not a pre-requisite or substitute for a Fair Hearing.

Objections to service plans may be raised at any time. The provider of service is required to inform the individual of the process and the timelines to be followed. When a 633.12 hearing is requested by an individual, OPWDD contacts the parties within 14 days to schedule a mutually convenient time to hold the hearing. The hearing officer's recommendation to the Commissioner is sent to the parties within 2 weeks of the conclusion of the hearing. The parties have 14 days to submit replies and the Commissioner issues a final decision within 14 days of receipt of the replies.

For individuals who are denied waiver services or whose waiver services are discontinued because they are determined not to have a qualifying developmental disability, individuals are notified in writing that they may request (1) a face to face meeting with staff involved in the determination; (2) request a Third Step Review of the determination by a Central Office committee of psychologists; and/or (3) request a fair hearing. A formal notice of decision with fair hearing rights is included with the notification. The individual may request one, two or all three of the options. Neither the meeting nor the Third Step Review is a prerequisite or substitute for the fair hearing.

See answer to question F-1 describing the appeal process applicable to individuals enrolled in the FIDA-IDD Plan.

Appendix F: Participant-Rights

Appendix F-3: State Grievance/Complaint System

a. Operation of Grievance/Complaint System. *Select one:*

- (●) **No. This Appendix does not apply**
- ( ) **Yes. The State operates a grievance/complaint system that affords participants the opportunity to register grievances or complaints concerning the provision of services under this waiver**

b. Operational Responsibility. Specify the State agency that is responsible for the operation of the grievance/complaint system:

The grievance system is operated by the NYS Department of Health, the lead Medicaid Agency. The lead Medicaid Agency will work with OPWDD to address any grievances registered by individuals with IDD who are enrollees in the People First Waiver or are served by the FIDA-IDD demonstration.

c. Description of System. Describe the grievance/complaint system, including: (a) the types of grievances/complaints that participants may register; (b) the process and timelines for addressing grievances/complaints; and, (c) the mechanisms that are used to resolve grievances/complaints. State laws, regulations, and policies referenced in the description are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

For individuals enrolled in the HCBS Waiver and the FIDA-IDD demonstration the grievance systems will be required to comply with 42 CFR 438, Article 44 PHL, applicable New York State regulations and as outlined in the FIDA-IDD Three Way Contract. Article 44 PHL requires a review of grievance procedures prior to a certificate of authority being issued by New York State. The FIDA-IDD, will be required to track all grievances received (oral or written grievances), and these grievance tracking logs will be required to be made available to OPWDD and DOH upon request. New York State will perform a review of grievances for multiple purposes, including but not limited to, as part of the State's required quality strategy, as a quality outcome indicator, and to assess responsiveness of the FIDA-IDD.

For all People First Waiver services delivered through the FIDA-IDD demonstration the NYS grievance system is available for use by all People First Waiver Enrollees. The NYS Grievance System comports with regulations in Subpart F of 42 CFR Part 438 and applies to an "expressions of dissatisfaction" by enrollees. A grievance is filed and decided at the FIDA-IDD Plan level. All grievances must be filed within 60 calendar days of the incident or whenever there is dissatisfaction.

Grievances that can be immediately decided (same day) to the individual/guardian or designee's satisfaction do not need to be responded to in writing. The FIDA-IDD is required to document the grievance and decision, and log and track the grievance and decision for quality improvement purposes. If the grievance cannot be decided immediately (same day), the FIDA-IDD must decide if grievance is expedited or standard.

Expedited and Standard Grievances

Grievances must be decided and notification provided as fast as member's condition requires, but no more than:

Expedited:

Upon paper review within 24 hours

- If the grievance involves the Plan's decision to invoke an extension on an organizational decision **or**
- If the Plan refuses to grant an expedited review of an organizational determination; or

- 48 hours from receipt of all necessary information, but no more than 7 calendar days from the receipt of the grievance.

Standard:

Within 30 calendar days of the FIDA-IDD plan receiving a written or oral grievance

Grievance decisions are communicated to the individual/guardian or designee by the Grievance Decision Notice (GDN). If the individual/guardian or designee is not satisfied with the Plan's decision they can file an external grievance. The external grievance is reviewed by an organization that is not connected to the Plan. The individual can file an external grievance with Medicare or NYS Department of Health.

Appendix G: Participant Safeguards

Appendix G-1: Response to Critical Events or Incidents

a. **Critical Event or Incident Reporting and Management Process.** Indicate whether the State operates Critical Event or Incident Reporting and Management Process that enables the State to collect information on sentinel events occurring in the waiver program. *Select one:*

- (●) **Yes. The State operates a Critical Event or Incident Reporting and Management Process** *(complete Items b through e)*
- ( ) **No. This Appendix does not apply** *(do not complete Items b through e)*

If the State does not operate a Critical Event or Incident Reporting and Management Process, describe the process that the State uses to elicit information on the health and welfare of individuals served through the program.

b. **State Critical Event or Incident Reporting Requirements.** Specify the types of critical events or incidents (including alleged abuse, neglect and exploitation) that the State requires to be reported for review and follow-up action by an appropriate authority, the individuals and/or entities that are required to report such events and incidents and the timelines for reporting. State laws, regulations, and policies that are referenced are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

OPWDD has a rigorous and comprehensive system for identifying, reporting, and investigating incidents and reports of abuse, and for assuring appropriate corrective actions to protect individuals receiving services from harm. OPWDD Regulations (14 NYCRR Part 624 and 625) provide the foundation for OPWDD's incident management system.

Part 624 specifies the standards for identifying, reporting, investigating, reviewing, and following-up on all reportable incidents including reports of abuse, significant incidents and notable occurrences under the auspices of an agency. Part 625 specifies standards for events and situations not under the auspices of an agency. These regulations apply to all OPWDD operated, certified, sponsored or funded facilities, programs, and services. All providers of service must have a system that complies with Part 624 and Part 625 including appropriate policies and procedures that address all regulatory components and one or more Incident Review Committees to review and monitor reportable incidents of abuse/neglect, significant incidents, and notable occurrences.

Part 624 outlines categories of incidents that must be recorded, reported and investigated: 1. Reportable Incidents that include abuse and neglect including physical, sexual and psychological abuse, deliberate inappropriate use of restraints, aversive conditioning, obstruction of reporting of reportable incidents, unlawful use or administration of a controlled substance and neglect; 2. Reportable Significant Incidents that include situations such as conduct between individuals receiving services, seclusion, unauthorized use of time out, medication errors with adverse effects, inappropriate use of restraints, missing persons, choking with a known risk and self-abusive behavior with injury; 3. Serious Notable Incidents that include injury, unauthorized absence, death choking with no known risk, theft or financial exploitation, ICF violations and sensitive situations. Part 625 events and situations not under the auspices of an agency require notification to OPWDD. Part 625 events and situation include physical, sexual and emotional abuse, active passive and self-neglect, financial exploitation, death and other for events/situations that an agency may want to report to OPWDD.

As of January 1, 2016, changes are made to categories of significant incidents and serious notable occurrences. Significant incidents will include; conduct between individuals receiving services, seclusion, unauthorized use of time out, medication errors with adverse effects, inappropriate use of restraints, missing persons, choking with a known risk, self-abusive behavior with injury, choking with no known risk, unauthorized absence, injury, with hospital admission, theft/financial exploitation and other significant incident, mistreatment. Serious Notable Occurrences will include death and sensitive situation. ICF violation will no longer be a category.

Specific details on the types of incidents that fall into each of these categories are outlined in Part 624 and 625 regulations.

Reporting requirements for various types of incidents are outlined in Parts 624 and 625. Reportable incidents, including all reports of abuse and neglect, significant incidents, and serious notable occurrences must be reported to OPWDD immediately and then subsequently entered into the Incident Report and Management Application (IRMA), OPWDD's web based data base. Immediate protective measures must be put in place to protect the person(s) served. In addition, for facilities operated or certified by OPWDD, agencies must report all reportable incidents to the Vulnerable Persons Central Register (VPCR) operated by the New York State Justice Center for the Protection of People with Special Needs (The Justice Center).

When services are provided by State Direct Support Professionals, employees are removed from all contact with participants in all instances of suspected abuse/neglect that would potentially result in seeking termination of an employee if substantiated. If evidence being collected leads OPWDD to reasonable belief that the allegation will be substantiated, the employee is suspended pending termination.

All reportable incidents and notable occurrences must be investigated. This is completed by the provider agency at which the incident occurred and must meet the OPWDD regulations to assure a thorough and independent investigation. For all abuse/neglect in state operations OPWDD's Office of Investigations and Internal Affairs or The Justice Center will complete the investigation. In all cases, the investigator must prepare an investigative report using the Required Investigative Report format. Effective June 30 2013, with the implementation of the Protection of People with Special Needs Act (PPSNA), the Justice Center may assume responsibility for the investigation of certain incidents or occurrences.

In all cases, the investigator must prepare an investigative report using the Required Investigative Report format. All reports of abuse

or neglect must include a finding of substantiated or unsubstantiated. Current investigators in the OPWDD system must view the New York State Justice Center for the Protection of People with Special Needs OPWDD State Oversight Agency Investigator Training prior to completing an investigation of a Reportable Incident or Serious Notable Occurrence as well as any other OPWDD required training.

The investigative report is submitted to the agency's Incident Review Committee. The Incident Review Committee assures that the agency has taken necessary corrective and protective actions; determines whether additional measures are necessary; determines whether the agency reporting/review was adequate; identifies trends and makes recommendations to the director of the agency for improvements. The provider agency where the incident occurred is further required to take appropriate action to minimize the potential for recurrence of the incident and similar incidents.

OPWDD has developed criteria for when OPWDD certified investigators will assume responsibility for, or closely monitor the conduct of investigations in the voluntary sectors. For deaths which occur during the provision of services by State staff, which may involve abuse/neglect there is a clear "arm's length" separation of the individuals involved in an incident and those investigating the incident. State Direct Support Professionals report to the Deputy Commissioner of the Division of Service Delivery. Deaths are reported by State staff through the IRMA system; the Director of the OIIA reports directly to the Commissioner. Any instance of abuse/neglect related to a death is investigated by the Justice Center in any state operated or voluntary operated certified setting. This independent chain of command allows investigations to be conducted independent of conflicting interests.

The reporting agency is always responsible for remediation. The review of incident reporting systems is a component of the OPWDD Division of Quality Improvement's annual routine survey activity for all service providers, including HCBS waiver providers. In addition to assessing the overall quality and effectiveness of the provider's incident management system, DQI reviews the provider's investigations and follow up activities. DQI surveyors also review program communication logs, medical records, and interview staff and individuals served to ensure that all incidents were reported as required. Effective 1/1/2015 corrective action plans are required of the provider agency if any deficiencies are identified; submitted into IRMA and reviewed by OPWDD Incident Management Unit staff to ensure that the corrective action plan is adequate.

The New York State Justice Center for the Protection of People with Special Needs, provides an additional level of oversight and reports directly to the Office of the Governor. Investigators assigned to the Justice Center will be responsible for conducting investigations or providing oversight and monitoring of serious abuse/neglect and deaths as defined in legislation. Justice Center legislation, effective 6/30/2013, requires that the director of every agency provide feedback regarding the agency's corrective action response to incidents falling under the purview of the Justice Center. IRMA includes a page on which the agency director indicates their approval of the corrective action plan by checking specific actions and certifying the activities. The Justice Center has access to IRMA to review this information.

Effective for incidents of abuse and neglect January 1, 2015, OPWDD IMU implemented a system for IMU staff review each correction action plan that is submitted by providers. If a corrective action plan is not adequate, IMU will to return it to the provider and work with the provider agency until an adequate corrective action plan has been submitted. Each corrective action plan must also include documentation of each corrective action. This is also reviewed during site visits by OPWDDs Bureau of Program Certification.

Effective January 1, 2015, OPWDD will require both state operated and voluntary providers of services to submit the full investigative record for incidents of deaths.

Providers enrolled in the Fully Integrated Duals Advantage for Individuals with Intellectual and Developmental Disabilities (FIDA-IDD) plan will follow the same incident management protocols currently required by OPWDD in Part 624 and 625 regulations.

c. **Participant Training and Education.** Describe how training and/or information is provided to participants (and/or families or legal representatives, as appropriate) concerning protections from abuse, neglect, and exploitation, including how participants (and/or families or legal representatives, as appropriate) can notify appropriate authorities or entities when the participant may have experienced abuse, neglect or exploitation.

All staff who provide services in the OPWDD system must be trained annually by the provider agency in identifying an incident of abuse, their responsibility to report, and how to do so. In addition, OPWDD requires that all staff are trained annually in Promoting Positive Relationships.

Upon employment or initial volunteer, contract, or sponsorship arrangements, and annually thereafter, an agency will provide the agency's policies and procedures on incident management to agency employees, interns, volunteers, consultants, contractors, and family care providers.

Custodians with regular and substantial contact in facilities and programs operated or certified by OPWDD, must read and sign annually he Code of Conduct adopted by the Justice Center.

Custodians are defined as a party that meets one of the following criteria: (1) a director, operator, employee, or volunteer of an agency; or (2) a consultant or an employee or volunteer of a corporation, partnership, organization, or governmental entity that provides goods or services to an agency pursuant to contract or other arrangement that permits such party to have regular and substantial contact with individuals receiving services; or (3) a family care provider; or (4) a family care respite/substitute provider.

OPWDD ensures participant training and education in a variety of ways. OPWDD has developed informational brochures and seminars for participants and families/advocates. This information is made available at provider agencies, OPWDD Regional Offices, family support and self-advocacy meetings, and through OPWDD's website. In addition, the Division of Quality Improvement has conducted numerous state-wide trainings on the requirements for incident management. These trainings are open to all providers of services. OPWDD has issued numerous guidance documents to providers of services throughout the past year.

OPWDD also operates a toll-free information line to provide information and referral services and to receive complaints. All

complaints are immediately referred from the information line to OPWDD District Offices and to the Division of Quality Improvement for review and investigation. In addition, the OPWDD Division of Quality Improvement reviews that all staff of provider agencies have received the required training.
For all reportable incidents and notable occurrences OPWDD requires agencies to provide telephone notice to one of the following: a person's guardian, a parent, spouse or adult child within 24 hours. However, the agency shall not provide such notice to any party if the person receiving services is a capable adult who objects to such notification being made or if the guardian, parent, spouse or adult child is the alleged abuser.
If the person does not have a guardian, parent, spouse or adult child, and the person is a capable adult, the agency provides notice to the person receiving services; otherwise, the agency provides notice to the person's advocate or correspondent.

d. Responsibility for Review of and Response to Critical Events or Incidents. Specify the entity (or entities) that receives reports of critical events or incidents specified in item G-1-a, the methods that are employed to evaluate such reports, and the processes and time-frames for responding to critical events or incidents, including conducting investigations.

Each provider in the OPWDD system is responsible for the investigation of critical events/incidents. For all reportable incidents, including reports of abuse and neglect and notable occurrences the investigation must begin immediately. The investigator is assigned by the agency's CEO or designee.

OPWDD's centralized Office of Investigations and Internal Affairs (OIIA) ensures the independence of investigations and the standardization of processes and outcomes in state-operated programs.

The OIIA takes responsibility for the conduct of certain investigations of allegations and/or incidents reported to have occurred in voluntary agencies either at the request of the voluntary agency or at the direction of OPWDD administration. The OIIA utilizes specific criteria for when OPWDD certified investigators will assume responsibility for or closely monitor the conduct of investigations in the voluntary sector.

As noted previously, OPWDD must be notified immediately of reportable incidents and serious notable occurrences. The OPWDD Incident Management Unit evaluates each incident and ensures that protections are put in place and are adequate. All incidents which may constitute a crime are reported to law enforcement.

Final Investigative Reports must be completed in the format required by OPWDD no later than 30 days after the incident occurred or was discovered, unless the agency has been granted an extension after review of the circumstances.

Once the investigator completes the investigation and a report is submitted, the incident review committee accepts the investigation as complete or identifies additional investigative tasks which need to be completed. In the instance where the OPWDD OIIA or the Justice Center has completed the investigation, this is determined by the chain of command in that unit, or agency, not the incident review committee. The agency reporting the incident is always responsible for notification to outside entities The Justice Center receives reports directly and also has access to IRMA and is able to view all incidents on a regular basis. The agency reporting the incident is also responsible for reporting to law enforcement.

As noted above, NYS has implemented a larger system of oversight to ensure the health and welfare of individuals receiving services through the implementation of the Protection of People with Special Needs Act (PPSNA), effective June 30, 2013 which has led to additional improvement in the oversight within the system. This legislation established the Justice Center, which is charged with the ultimate oversight o f state agencies serving people with special needs. Implementation of the Justice Center will result in changes to the oversight structures described in this waiver application.

e. Responsibility for Oversight of Critical Incidents and Events. Identify the State agency (or agencies) responsible for overseeing the reporting of and response to critical incidents or events that affect waiver participants, how this oversight is conducted, and how frequently.

OPWDD has centralized its oversight of critical incidents and events. All oversight activities are assigned to OPWDD's Division of Quality Improvement. OPWDD's Incident Management Unit (IMU) provides real time oversight of critical elements of incident management across the state. This unit reviews incidents that are reported to assure adequate measures are put in place to protect persons with disabilities, including required notifications to law enforcement where required. This is accomplished through the use of the Incident Report and Management Application (IRMA), which is a secure web-based statewide database. IRMA is used to ensure consistency in incident reporting and is used by State operations and non-profit providers in the OPWDD system. The OPWDD Incident Management Unit includes off hours staff to received notifications and provides technical assistance to provider agencies. Both Voluntary Providers and State Operations Offices must notify the IMU of Reportable Incidents and Serious Notable Occurrences. Appropriate notifications to IMU are made by telephone for Reportable Incidents. Notification may be made by email for incidents that do not fall in the Reportable category.

All reportable incidents, including all abuse and neglect and serious notable occurrences must be reported to OPWDD immediately and the subsequently entered into the Incident Report and Management Application (IRMA), OPWDD's web based data base. In addition, immediate protective measures must be put in place to protect the person(s) served. OPWDD's Division of Quality Improvement (DQI) Incident Management Unit reviews each incident and protections put in place to ensure they are adequate. All incidents which may constitute a crime are reported to law enforcement. The OPWDD Incident Management Unit reviews every reportable incident including all abuse and neglect and serious notable occurrences.

As noted in d above, the OPWDD Office of Investigations and Internal Affairs has developed criteria for when OPWDD certified investigators will assume responsibility for or closely monitor the conduct of investigations in the voluntary sector. This criteria is available upon request from CMS.

The OPWDD Statewide Committee on Incident Review (SCIR) reviews data on incident reports and disseminates best practices and guidance based on this review to assist in the management and prevention of incidents. SCIR reviews regulations and develops policy documents that provide clear directions to service providers regarding regulatory requirements. SCIR designs and delivers

training programs and other materials to promote safety awareness and incident prevention strategies. SCIR also publishes FAQs on the OPWDD website in response to stakeholder questions.

The review of incident reporting systems is a component of DQI's annual routine survey activity for all service providers, including HCBS waiver providers. In addition to assessing the overall quality and effectiveness of the providers' incident management systems, DQI reviews the provider's investigations and follow up activities. DQI surveyors also review program communication logs, medical records, and interview staff and individuals served to ensure that all incidents were reported as required. Corrective actions are required of the provider agency if any deficiencies are identified.

Appendix G: Participant Safeguards

Appendix G-2: Safeguards Concerning Restraints and Restrictive Interventions (1 of 3)

a. Use of Restraints. *(Select one)*: *(For waiver actions submitted before March 2014, responses in Appendix G-2-a will display information for both restraints and seclusion. For most waiver actions submitted after March 2014, responses regarding seclusion appear in Appendix G-2-c.)*

○ **The State does not permit or prohibits the use of restraints**

Specify the State agency (or agencies) responsible for detecting the unauthorized use of restraints and how this oversight is conducted and its frequency:

◉ **The use of restraints is permitted during the course of the delivery of waiver services**. Complete Items G-2-a-i and G-2-a-ii.

i. Safeguards Concerning the Use of Restraints. Specify the safeguards that the State has established concerning the use of each type of restraint (i.e., personal restraints, drugs used as restraints, mechanical restraints). State laws, regulations, and policies that are referenced are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

In some cases, persons with developmental disabilities may require the use of interventions aimed at developing new adaptive behaviors; maintaining, increasing, or maximizing existing adaptive behaviors; or ameliorating maladaptive behaviors. Such interventions should emphasize positive approaches in modifying behavior, focus on teaching new behaviors, and provide persons with the skills needed to enhance their everyday functions and quality of life.

OPWDD requires that the use of positive approaches which are consistent with standards of professional practice always be the preferred method for addressing maladaptive or inappropriate behavior. However, OPWDD recognizes that positive approaches alone may not always be effective and it may also be necessary to incorporate approaches that are considered restrictive and/or intrusive into a behavior management plan to address such behavior.

For situations where circumstances necessitate the use of restraints, OPWDD has issued policy guidance on their appropriate use. Through this document, OPWDD limits the use of interventions to medication, physical interventions, time-out, mechanical restraining devices, and aversive conditioning; the inappropriate use of any of these interventions requires submission of an incident report and investigation by the provider and/or by OPWDD. Seclusion, as defined in our state regulations is prohibited by OPWDD.

OPWDD's policy and guidance documents pertaining to Behavior Management recommend that any behavior plans that incorporate the use of restrictive interventions require multiple levels of review (i.e. Behavior Management/Human Rights Committee) and must include effective safeguards to ensure the safety of the program participants. These safeguards include:

* A program planning team assigned by the provider agency which assesses the needs of the participant and ensures that the participant's behavioral plan is primarily based on positive approaches to behavior support and management, and only includes restrictive interventions when these restraints are clinically necessary and appropriate. All plans are developed or written by staff (the Behavioral Intervention Specialist or BIS) who have specialized training or experience in assessment techniques and development of behavioral support plans. In addition, any plan which includes a restrictive/intrusive intervention must be developed under the supervision of an appropriately licensed professional (e.g. licensed psychologist). The BIS assesses the antecedent, behavior, and consequences as part of completing the functional behavioral assessment prior to developing the behavioral support plan. The review is conducted on at least a semi-annual basis, or more frequently as needed.

* A committee created by the provider agency specifically to protect the rights of a person with DD, which reviews all participant behavior plans that include restrictive interventions. The committee can sanction clinically appropriate plans, or refuse to sanction proposed behavior management plans if the included interventions are considered to be too restrictive or intrusive. If the committee sanctions the intervention, the committee establishes a sanctioned time period (not to exceed one year) during which the intervention can be utilized and is considered authorized.

* Appropriate record keeping methods which maintain the participant specific behavior management plan. This plan must include a description of the behavior that justifies the need for the intervention along with what positive approaches have been utilized. The plan must have been developed by a program planning team, approved by the review committee, and have an effective time-frame. When applicable, informed consent documentation should be included in the records.

The guidance documents outline specific rules regarding general use and emergency use for each of the restraints. For example:
* Physical intervention can only be used by those who have been trained in, and show a mastery of the Strategies for Crisis Intervention and Prevention-Revised (SCIP-R)physical intervention techniques. The use of SCIP-R physical intervention is limited to circumstances when a participant's behavior creates an unacceptable risk of physical harm to self or others. Any injury must be reported under the incident reporting criterion outlined in 14 NYCRR Part 624. SCIP-R related activities are monitored by Master Trainers employed by OPWDD.

The SCIP-R curriculum supports staff awareness of the needs of persons with developmental disabilities and methods of preventing crises. Because of this approach, direct care staff can only be certified when they have completed a minimum of 17 hours of SCIP-R training. If staff are trained in restrictive physical interventions (e.g. take downs and floor holds), they must also be trained in basic first aid and cardiopulmonary resuscitation in order to be certified in SCIP-R to use such techniques. Eventually PROMOTE will replace the SCIP-R curriculum (see state oversight responsibility below and the QI Timeline section for more info on PROMOTE).

* OPWDD guidance documents define time out as a separate item from seclusion; OPWDD guidance prohibits the use of seclusion. The OPWDD definition of time out clearly states that the participant would be free to leave the time out area except for the direct and continuous action of the staff monitoring the participant. Time out requires constant auditory and visual monitoring of the participant, and the staff member must release the participant from the time out room once the participant is calm but no longer than one hour after the participant entered the time out room. Time out must be included in the behavioral plan of the participant prior to utilization by staff.

* Use of psychotropic drugs to manage or control behavior or to treat a diagnosed psychiatric condition requires a physician's order for the specific participant and it must be included in the participant's behavioral plan prior to utilization. In addition, informed consent for each psychotropic medication must be obtained in writing as per 14 NYCRR Part 681.13 prior to starting the medication. The only time this consent may be overridden is in circumstances where the participant's behavior constitutes an immediate, significant danger to the participant or others, when the participant is engaging in destructive conduct in the facility posing a significant risk to self or others, or when in a physician's judgment, an emergency exists creating an immediate need for the administration of such medication. These medications may only be administered by individuals who meet the criteria established under 14 NYCRR Part 633.17.

OPWDD proposed regulations that included a requirement for a Consultative Panel for the review of the use of psychiatric medications. In response to public commentary on these proposed regulations, OPWDD removed the language surrounding the requirement of a Consultative Panel for the review of the use of psychiatric medications. There will no longer be a separate review required.

The revised language, found on page 43 of the final regulations, Section 633.16(d), states "A semi- annual medication regimen review that includes any medications prescribed to treat a co-occurring diagnosed psychiatric disorder, or to prevent, control, modify or eliminate challenging behavior(s) must be conducted in accordance with section 633.17 of this Part. The results of these medication regimen reviews shall be shared with the person's program planning team and the prescriber, and documented in the person's record, in order to assist healthcare providers and the team to evaluate whether the benefits of continuing the medication(s) outweigh the risk inherent in potential side effects."

The regulations (14 NYCRR Section 633.16) were promulgated on 1/1/13 with an effective date of 4/1/13. This lag in implementation was due to the impact of Hurricane Sandy, along with issues in the field in preparing for the implementation of these requirements. The Person-Centered Behavioral Intervention regulations can be found on the OPWDD website.

* The use of Mechanical Restraining Devices also requires a physician's order for the specific device and it must be included in the participant's behavioral plan prior to utilization by staff unless in the physician's judgment an emergency exists creating an immediate need for use of the device to ensure health and safety of the participant. Additional monitoring and review criteria are required if mechanical devices are used to manage maladaptive behaviors, or are used for medical purposes. Emergency use is no longer permitted for waiver participants. Aversive conditioning is not allowed within the OPWDD service system.

Mechanical restraining devices which may be used without specific OPWDD approval are listed in 14 NYCRR Section 633.16 (j)(4). The items listed in the regulation are considered a type of restrictive/intrusive intervention if these items are being used for behavioral control purposes. As such, the use of these items would require informed consent as well as review and approval by the Behavior Plan/Human Rights Committee. The use of mechanical restraining devices must be spelled out in the person's behavioral support plan which is developed by the program planning team. As noted above, mechanical devices can only be incorporated into a behavior support plan if specifically ordered by a physician.

Additional protections pertaining to the use of restraint and seclusion are required under 14 NYCRR Part 624, which provides the standards for incident reporting when participants are injured or any circumstance where restraints are used to immobilize a participant. Under Part 624, incidents which must be reported as reportable or serious reportable incidents include any unauthorized, inappropriate or unnecessary use of personal/physical interventions (SCIP-R), time out, mechanical restraint, or aversive conditioning. Seclusion, which is prohibited by OPWDD is considered a form of abuse, and must always be reported as a serious incident.

Also under Part 624,the use of aversive conditioning without appropriate permission is considered abuse. Under the regulation, this includes, but is not limited to the use of the technique for convenience, as a substitute for programming, or for disciplinary/punishment purposes.

The provider agency in which the incident occurred is responsible for recording, reporting, and conducting the initial

investigation of incidents. The local OPWDD Regional Office receives initial reports of all incidents required in accordance with the Part 624 regulations. Each report is reviewed by an assigned staff member commonly referred to as an incident coordinator. The incident coordinator secures any required information and refers the incident to appropriate staff for comprehensive follow up. Incidents deemed to be critical by the Regional Office are referred to the Associate Commissioner and to the Deputy Commissioner of the Division of Quality Improvement for further review.

In accordance with Part 624, every provider must have one or more standing committees to review and monitor Reportable Incidents, Serious Reportable Incidents, and all reports of abuse. The standing committee must ascertain that incidents were reported, managed, investigated, and documented in accordance with regulations and that necessary and appropriate corrective actions were taken to protect individuals. The standing committees are also responsible to review and monitor investigation procedures; monitor trends in incidents and recommend appropriate corrective, preventive, and/or disciplinary action to safeguard against recurrences; and to monitor implementation of their recommendations for appropriate safeguards and improvements to the incident management system.

ii. **State Oversight Responsibility.** Specify the State agency (or agencies) responsible for overseeing the use of restraints and ensuring that State safeguards concerning their use are followed and how such oversight is conducted and its frequency:

OPWDD is the State agency responsible for overseeing the use of restraints by service providers. OPWDD employs numerous levels of review and oversight to ensure the safety of participants.

OPWDD's Bureau of Behavior and Clinical Solutions (BBCS), provides oversight at the highest level by developing guidance documents on the acceptable and unacceptable use of restraints and promulgating any changes in regulation. This Bureau also ensures that agency practices are in keeping with national trends. The Bureau collaborates with other state agencies as needed to maintain consistency where appropriate with restraint practices, monitoring and oversight, documentation, and trending.

BBCS also develops and implements the SCIP-R curriculum and training. The group updates and revises the curriculum as warranted based on information gleaned from national trends in behavior management, review of statewide incidents and trends, and the solicitation of feedback from the field regarding participant needs and agency needs. BBCS also oversees utilization and implementation of the curriculum by regularly meeting with Master Trainers employed by OPWDD Regional Offices.

As part of its ongoing efforts to prevent incidents and abuse, in 2012, OPWDD promulgated regulations that require all employees, volunteers, and family care providers in the OPWDD system receive annual training on promoting positive relationships, incidents/abuse reporting, and abuse prevention. OPWDD has implemented statewide training to reinforce the principles of respect, dignity, and professional ethics for all people served. In addition, OPWDD has designed/developed the Positive Relationships Offer More Opportunities for Everyone (PROMOTE) curriculum, which is designed to emphasize the importance of positive relationships and proactive measures to prevent challenging behaviors. The PROMOTE training is being rolled out to Master Instructors, Instructor Trainers, and Instructors throughout 2012 and will be required training for all direct support professionals and supervisors starting in 2013. The PROMOTE curriculum will eventually replace the existing SCIP-R curriculum.

Finally, BBCS reviews all Part 624 reportable incidents regarding the use of restraints, to ensure that policy and training materials appropriately incorporate information and trends learned from this review, including appropriate safety.

BBCS developed a new database and tracking systems to collect the use of restrictive interventions on a statewide basis (i.e., the Restrictive Intervention Application (RIA); the database was piloted with state staff in early 2012. Effective July 30, 2012, BBCS issued policy guidance to the field which outlined the appropriate safeguards, levels of administrative review and reporting requirements necessary for protecting the physical health and safety of individuals when SCIP-R restrictive personal/physical interventions are used as part of a behavior plan or in an emergency to address challenging behaviors that pose a risk of harm to self or others. This guidance also implemented the requirement of all providers to report the use of SCIP-R restrictive physical interventions into a new database and tracking system within five days of the occurrence. This database will interface with the Incident Report and Management Application (IRMA) used for all reports of abuse.

OPWDD Regional Offices provide technical support and guidance to provider agencies in their catchment areas. These offices employ Master SCIP Trainers to track utilization, provide technical assistance to agencies using the SCIP-R curriculum, mentor new SCIP-R Instructor Trainers, and provide curriculum updates to agencies as warranted. The Regional Offices also review the investigations and outcomes for all Part 624 Serious Reportable Incidents including all reports of abuse; Regional Offices provide guidance regarding any additional corrective actions as needed.

OPWDD Division of Quality Improvement (DQI) provides statewide oversight through annual surveys of all certified programs and HCBS waiver provider agencies. The DQI surveyors review the provider's investigations and follow up activities. The surveyors also review program communication logs, medical records, and interview staff and individuals served, among other things, to ensure that all incidents were reported as required and appropriate individual and/or systemic corrective actions were taken. If any survey deficiencies are identified, corrective action plans are required of the provider agency.

OPWDD has implemented a Statewide Incident Reporting Management System (IRMA). This system is used by all Regional Offices and provider agencies to report incidents, specify follow up and investigation activity and other real time information that enables more efficient reporting and follow up activity and trend analysis by type of incident, locations, etc. and over time, results in the deployment of system-wide remediation strategies.

If an incident results in the death of a participant, OPWDD's Investigations Unit is notified and given the opportunity to

review the situation. The NYS Commission on Quality of Care and Advocacy for Persons with Disabilities is also notified of all deaths.

Appendix G: Participant Safeguards

Appendix G-2: Safeguards Concerning Restraints and Restrictive Interventions (2 of 3)

b. Use of Restrictive Interventions. *(Select one)*:

○ **The State does not permit or prohibits the use of restrictive interventions**

Specify the State agency (or agencies) responsible for detecting the unauthorized use of restrictive interventions and how this oversight is conducted and its frequency:

◉ **The use of restrictive interventions is permitted during the course of the delivery of waiver services** Complete Items G-2-b-i and G-2-b-ii.

i. Safeguards Concerning the Use of Restrictive Interventions. Specify the safeguards that the State has in effect concerning the use of interventions that restrict participant movement, participant access to other individuals, locations or activities, restrict participant rights or employ aversive methods (not including restraints or seclusion) to modify behavior. State laws, regulations, and policies referenced in the specification are available to CMS upon request through the Medicaid agency or the operating agency.

OPWDD regulations in 14 NYCRR 633.4 outline the rights that are intended to establish the living and/or program environment that protects individuals and contributes to providing an environment in keeping with the community at large, to the extent possible, given the degree of the disabilities of such individuals. The regulations clarify that certain rights may need to be adapted to meet the needs of certain persons with the most severe handicaps and/or persons whose need for protection, safety and health care will justify such adaption. These regulations also state that it is the responsibility of the agency/facility or the sponsoring agency to ensure that rights are not arbitrarily denied. Limitations of client rights must be on an individual basis, for a specific period of time, and for clinical purposes only. Freedom from physical and psychological abuse; freedom from corporal punishment; freedom from the unnecessary use of mechanical restraining devices; and freedom from unnecessary or excessive medication are rights specifically outlined in these regulations.

NYS regulations categorize the violation of a person's civil rights as a form of abuse and are considered to endanger the physical or emotional wellbeing of the participant; therefore, all reports of abuse s must be reported in writing to the appropriate Regional Office. Additionally, any willful action on the part of a provider which violate a person's human rights is considered an incident of mistreatment (14 NYCRR 624.4(c)(8)) and must also be reported as a part 624 reportable incident.

In accordance with Part 624, every provider must have one or more standing committees to review and monitor reports of abuse. The standing committee must ascertain that incidents were reported, managed, investigated, and documented in accordance with regulations and that necessary and appropriate corrective actions were taken to protect individuals. The standing committees are also responsible to monitor trends in incidents and recommend appropriate corrective, preventive, and/or disciplinary action to safeguard against recurrences; and to make and monitor implementation of recommendations for appropriate safeguards and improvements to the incident management system.

As in the case of incidents of unauthorized restraints, the provider agency is responsible for recording, reporting, and conducting the initial investigation of incidents. OPWDD receives initial reports of all incidents required in accordance with the Part 624 regulations and provides centralized oversight as appropriate.

ii. State Oversight Responsibility. Specify the State agency (or agencies) responsible for monitoring and overseeing the use of restrictive interventions and how this oversight is conducted and its frequency:

As in the case of physical restraints, OPWDD has a multi-level review process for the use of rights-limitations by provider agencies to control the behavior of participants in their programs.

OPWDD (DQI) provides statewide oversight through annual surveys of all certified programs and HCBS waiver provider agencies. The DQI surveyors specifically review records to determine if any limitations were imposed on any participant's rights and ensure that participants live free from abuse and neglect (14 NYCRR 633.2). If limitations were imposed, the surveyors verify that there is a clinical justification for the limitation and a specific time period for which it is to remain in effect. The DQI surveyors also review the provider's investigations and follow up activities regarding reports of abuse.

The OPWDD Regional Offices oversee the providers by reviewing the investigations and outcomes for all Part 624 reports of abuse; regional offices provide guidance regarding any additional corrective actions as needed. The Regional Office also enters any reportable incidents into the IRMA system for tracking, status review, and trend analysis.

Finally, BBCS reviews all Part 624 reportable incidents regarding the use of restraints, to ensure that policy and training materials appropriately incorporate information and trends learned from this review, including appropriate safety.

Appendix G-2: Safeguards Concerning Restraints and Restrictive Interventions (3 of 3)

c. Use of Seclusion. *(Select one)*: *(This section will be blank for waivers submitted before Appendix G-2-c was added to WMS in March 2014, and responses for seclusion will display in Appendix G-2-a combined with information on restraints.)*

◉ **The State does not permit or prohibits the use of seclusion**

Specify the State agency (or agencies) responsible for detecting the unauthorized use of seclusion and how this oversight is conducted and its frequency:

This will be addressed in the renewal, rather than in this amendment.
Seclusion is prohibited by OPWDD and is considered a form of abuse and must always be reported as a serious incident under Part 624 of NYS regulations. OPWDD guidance regulations define time out as a separate item from seclusion. OPWDD guidance prohibits the use of seclusion (see section G-2-b above). OPWDD guidance does permit time out in certain limited circumstances, consistent with the behavioral plan of the individual. As discussed above in G-2 b, OPWDD regulations (14 NYCRR part 633.16 “Person-Centered Behavioral Intervention”) describe safeguards and require that any behavior support plans that incorporate the use of restrictive interventions (including rights limitations) require multiple levels of review (i.e. Behavior Plan/Human Rights Committee) and must include effective safeguards to ensure the safety of the program participants.

The OPWDD definition of time out clearly states that the participant would be free to leave the time out area except for the direct and continuous action of the staff monitoring the participant. Time out requires constant auditory and visual monitoring of the participant, and the staff member must release the participant from the time out room once the participant is calm but no longer than one hour after the participant entered the time out room. Time out must be included in the behavior support plan of the participant prior to utilization by staff.

The OPWDD definition of time out clearly states that the participant would be free to leave the time out area except for the direct and continuous action of the staff monitoring the participant. Time out requires constant auditory and visual monitoring of the participant, and the staff member must release the participant from the time out room once the participant is calm but no longer than one hour after the participant entered the time out room. Time out must be included in the behavior support plan of the participant prior to utilization by staff.

Seclusion is prohibited by OPWDD and is considered a form of abuse and must always be reported as a serious incident under Part 624 of NYS regulations.

OPWDD is the State agency responsible for overseeing the use of restraints by service providers. OPWDD employs numerous levels of review and oversight to ensure the safety of participants.

OPWDD's Bureau of Behavior and Clinical Solutions (BBCS), provides oversight at the highest level by developing guidance documents on the acceptable and unacceptable use of restraints and promulgating any changes in regulation. This Bureau also ensures that agency practices are in keeping with national trends. The Bureau collaborates with other state agencies as needed to maintain consistency where appropriate with restraint practices, monitoring and oversight, documentation, and trending.

As part of its ongoing efforts to prevent incidents and abuse, in 2012, OPWDD promulgated regulations that require all employees, volunteers, and family care providers in the OPWDD system receive annual training on promoting positive relationships, incidents/abuse reporting, and abuse prevention. OPWDD has implemented statewide training (the PRAISE Curriculum – Promoting Relationships and Implementing Safe Environments) to reinforce the principles of respect, dignity, and professional ethics for all people served. In addition, OPWDD has designed/developed the Positive Relationships Offer More Opportunities for Everyone (PROMOTE) curriculum, which is designed to emphasize the importance of positive relationships and proactive measures to prevent challenging behaviors. OPWDD began rolling out the PROMOTE training is a required training for all direct support professionals and supervisors starting in 2013. The PROMOTE curriculum will eventually replace the existing SCIP-R curriculum.

Finally, BBCS reviews all part 624 reportable incidents regarding the use of restraints, to ensure that policy and training materials appropriately incorporate information and trends learned from this review, including appropriate safety.

BBCS utilizes a database and tracking systems to collect the use of restrictive interventions on a statewide basis known as the Restrictive Intervention Application (RIA). Effective July 30, 2012, BBCS issued policy guidance to the field which outlined the appropriate safeguards, levels of administrative review and reporting requirements necessary for protecting the physical health and safety of individuals when SCIP-R restrictive personal/physical interventions are used as part of a behavior support plan or in an emergency to address challenging behaviors that pose a risk of harm to self or others. This guidance also implemented the requirement of all providers to report the use of SCIP-R restrictive physical interventions into the new database and tracking system within five days of the occurrence. Effective April 1, 2013, OPWDD's “Person-Centered Behavioral Intervention” regulations require that any use of a Time-out room in accordance with an individual’s behavior support plan be reported electronically to OPWDD in the form and format specified by OPWDD. This form and format is RIA. This database interfaces with the Incident Report and Management Application (IRMA) used for reports of abuse.

OPWDD Division of Quality Improvement (DQI) provides statewide oversight through annual surveys of all certified programs and, HCBS waiver provider agencies that bill Medicaid directly either through the review of the provider and/or a sample of individuals in the waiver, and DISCOs with waiver providers in their networks. The DQI surveyors review the provider's investigations and follow up activities. The surveyors also review program communication logs, medical records, and interview staff and individuals served, among other things, to ensure that all incidents were reported as required and appropriate individual and/or systemic corrective actions were taken. If any survey deficiencies are identified, corrective action plans are required of the provider agency.

OPWDD has implemented a Statewide Incident Reporting Management System (IRMA) and has a centralized Incident Management Unit in DQI responsible to ensure that appropriate actions and safeguards have been taken for all incidents. This system is used by all Regional Offices and provider agencies to report incidents, specify follow up and investigation activity and other real time information

that enables more efficient reporting and follow up activity and trend analysis by type of incident, locations, etc. and over time, results in the deployment of system-wide remediation strategies.

If an incident results in the death of a participant, OPWDD's Centralized Investigations Unit is notified and given the opportunity to review the situation. The NYS Commission on Quality of Care and Advocacy for Persons with Disabilities is also notified of all deaths.

In addition, for individuals enrolled in managed care, care coordinators are mandated reporters, and therefore FIDA-IDD has a responsibility to ensure that an incident report is made and to review data on incidents involving their members and within their provider network and will be expected to include this review and actionable quality improvement strategies in the Quality Improvement/Performance Improvement Plan (QI/PI Plan).

○ **The use of seclusion is permitted during the course of the delivery of waiver services**. Complete Items G-2-c-i and G-2-c-ii.

i. **Safeguards Concerning the Use of Seclusion.** Specify the safeguards that the State has established concerning the use of each type of seclusion. State laws, regulations, and policies that are referenced are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

ii. **State Oversight Responsibility.** Specify the State agency (or agencies) responsible for overseeing the use of seclusion and ensuring that State safeguards concerning their use are followed and how such oversight is conducted and its frequency:

Appendix G: Participant Safeguards

Appendix G-3: Medication Management and Administration (1 of 2)

This Appendix must be completed when waiver services are furnished to participants who are served in licensed or unlicensed living arrangements where a provider has round-the-clock responsibility for the health and welfare of residents. The Appendix does not need to be completed when waiver participants are served exclusively in their own personal residences or in the home of a family member.

a. **Applicability.** Select one:

○ **No. This Appendix is not applicable** *(do not complete the remaining items)*
◉ **Yes. This Appendix applies** *(complete the remaining items)*

b. **Medication Management and Follow-Up**

i. **Responsibility.** Specify the entity (or entities) that have ongoing responsibility for monitoring participant medication regimens, the methods for conducting monitoring, and the frequency of monitoring.

As per standard medical practice in New York State, the doctor administering a given medication has primary supervision over its use. Under the waiver program, Registered Professional Nurses (RNs) employed by the providers oversee the proper administration of medications to participants living in certified residential and non-residential settings.

Under OPWDD Regulations (Title 14 NYCRR Part 633.17), each provider is required to develop its own policies and procedures relative to prescribed and over-the-counter medications relevant to its needs provided they meet the requirements outlined in regulation. For example, the policies must require that the agency provide medical and nursing supervision of the staff responsible for administering medication. These policies must be established, submitted, and reviewed by OPWDD prior to the provider receiving OPWDD approval to operate the service.

Effective with the implementation of the Nurse Practice Act (NPA), in providing monitoring, the frequency of RN visits to certified community-based residences with two or more participants shall be at the discretion of the RN responsible for supervision but in no case shall visits occur less frequently than once a month.

Additionally, a participant residing in a facility must have his/her medication regimen reviewed by a registered nurse, physician, physician's assistant, or pharmacist at least semi-annually. The review shall include at a minimum:
-A review of the person's medication record for potential adverse reactions, allergies, interactions, contraindications, or irregularities; related laboratory work shall be included in this review.
-An assessment of the person’s response to the medication therapy to determine if the medication is achieving the stated objectives established by the prescribing practitioner.
-Recommendations to the primary and/or consulting practitioner of any indicated changes in the person's medication regimen.
-Determination of the need for a more frequent review depending upon the person's medical status.
-Documentation of the review, findings, and any recommendations made.

The provider's program planning team (with input from a registered nurse, physician, or physician's assistant) must evaluate participants within three months of their entrance into a residential facility regarding their ability to self-administer (with re-evaluation on an annual basis). The evaluation is based upon the following designations: independent self-administration, self-administration with supervision, self-administration with assistance, or incapable of self-administration.

Providers are required by regulation to review all medication administration regimes semi-annually; this includes medication administration regimes for participants receiving behavior modifying medications.

ii. **Methods of State Oversight and Follow-Up.** Describe: (a) the method(s) that the State uses to ensure that participant medications are managed appropriately, including: (a) the identification of potentially harmful practices (e.g., the concurrent use of contraindicated medications); (b) the method(s) for following up on potentially harmful practices; and, (c) the State agency (or agencies) that is responsible for follow-up and oversight.

Through an established DQI survey procedure, OPWDD verifies the accuracy of the medication administration regime and documentation of the semi-annual review of the medication administration regime for participants in all certified residential facilities; the providers are audited against their own reporting procedure. OPWDD also requires in regulation that in all providers which assume the responsibility to administer medications (residential or non-residential) that there is person-specific information available regarding the medications made available to staff / family care providers.

OPWDD's Division of Quality Improvement (DQI) reviews these requirements as part of a provider's annual review. 100% of providers are reviewed through this process annually. Providers found to have issues in their review of medication administration regimes, or in the accurate administration of medication will be issued a Statement of Deficiency (SOD) which the provider must address by creating a Plan of Corrective Action (POCA) which DQI reviews, approves, and later verifies its implementation.

Any trends identified through the DQI survey process are reviewed; if appropriate, advisory letters will be issued by DQI to all providers.

Appendix G: Participant Safeguards

Appendix G-3: Medication Management and Administration (2 of 2)

c. **Medication Administration by Waiver Providers**

i. **Provider Administration of Medications.** *Select one:*

- ○ **Not applicable.** *(do not complete the remaining items)*
- ◉ **Waiver providers are responsible for the administration of medications to waiver participants who cannot self-administer and/or have responsibility to oversee participant self-administration of medications.** *(complete the remaining items)*

ii. **State Policy.** Summarize the State policies that apply to the administration of medications by waiver providers or waiver provider responsibilities when participants self-administer medications, including (if applicable) policies concerning medication administration by non-medical waiver provider personnel. State laws, regulations, and policies referenced in the specification are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

Policies:

The State Regulations governing the administration of medications by waiver providers are outlined in Title 14 NYCRR Part 633.17. Administrative Memorandum #2003-01 summarizes the requirements for providers and gives guidance to providers regarding the implementation of regulations.

The RN is responsible for developing an individualized plan for nursing services for any participant who requires nursing care, including those who require medication administration for diagnosed medical conditions. Such plans must be updated at least annually or whenever there is a significant change in the participant's condition.

The provider's program planning team (with input from a registered nurse, physician, or physician's assistant) must evaluate participants within three months of their entrance into a residential facility regarding their ability to self-administer (with re-evaluation on an annual basis). The evaluation is based upon the following designations: independent self-administration, self-administration with supervision, self-administration with assistance, or incapable of self-administration.

If anyone besides the RN administers medication in a facility, the RN must document that Direct Support Professionals (DSPs) have been educated about the chronic conditions and related health care needs of each participant in their care.

The RN shall also ensure that there is a participant specific medication sheet for each medication that is administered. This sheet shall include all of the information required by 14 NYCRR section 633.17(a)(17)(iii). If there is any change in the medication regimen, or if a new medication is added to the regimen, the staff is required to notify the RN prior to administering the medication.

If a participant is prescribed medication for behavior modification or to control maladaptive or inappropriate behavior, or for a co-occurring psychiatric disorder, she/he must provide informed consent. The team should confirm his/her capacity to provide informed consent. In those cases when the program planning team unanimously agrees that the person does not have capacity to give informed consent, the team shall provide an evaluation that includes a detailed analysis as the basis of its opinion. The results of the evaluation must be in writing and documented in the participant's clinical record and, if not completed by a NYS licensed psychologist or physician, must be confirmed by one of these licensed professionals. If the individual is found to lack capacity to consent, a capable person or a surrogate decision-maker must give informed consent to such medication after he or she is told the purposes, risks and benefits of the medication, and any alternatives to the administration of the medication, in addition to an instruction that the person is free to withdraw his or her consent at any time without prejudice.

It shall be the responsibility of the Registered Professional Nurse to determine which nursing procedures, including medication administration, unlicensed direct care staff will be allowed to perform, and which unlicensed DSPs will be allowed to perform them. The Registered Professional Nurse exercises professional judgment as to when delegation is unsafe and/or not in the participant's best interest.

When making a decision regarding a nursing task or activity, the RN assesses the following:
-complexity of the task;
-condition/stability of the participant; and
-training, skill and experience of the staff involved, including relevant factors related to the participant's ability to safely provide nursing services.

Under the Nurse Practice Act, the State Education Department has allowed unlicensed staff to assist certain participants to administer their medications. This includes participants who are Self-Directing (but may not be able to physically take their medication), those who are Self-Administering but require supports, and individuals who are unable to administer their own medication.

Training:
RNs who do not have previous experience in the field of intellectual/developmental disabilities (ID/DD) nursing will be required to complete an orientation for registered nurses in ID/DD nursing within three months of being hired.

It is the responsibility of the RN to provide initial and on-going training to unlicensed DSP staff in all nursing tasks and/or functions that they will perform, including medication administration. The RN must periodically review that the performance of unlicensed staff is consistent with standards of care and training. An RN can de-certify a direct care staff at any time if, in the opinion of the RN, the DSP staff is unsafe in medication administration.

Medication administration is taught utilizing a standard curriculum approved by OPWDD.

Unlicensed DSP staff are separately certified for medication administration by the provider's RN. The training is standardized and the curriculum is provided by OPWDD. In order to be certified, the DSP must complete:
-4 workdays of training in medication administration;
-Two examinations of at least 50 questions each (a pool of questions provided by OPWDD for use by the provider) where the student must obtain a score of 80% or better; and
-A clinical practicum that includes pouring, administering, and recording medications with no errors on three separate occasions to all participants (defined as a medication pass) at the certified setting where the staff is permanently assigned. If a direct care staff is reassigned, they cannot administer medication until they complete an error-free medication pass supervised by an RN.

Each DSP must be recertified at least once a year by a registered nurse who reviews the DSP's performance over the past year and observes one errorless medication pass. In addition, the RN will review the following with the unlicensed DSP:
-Updates on medications;
-Updates on policy;
-The "5 Rights" of medication administration which is ensuring that the right person receives the right medication, in the right dose, through the right route (e.g., by mouth, on the skin, etc.), at the right time
-One errorless medication pass

Certification to administer medication is not transferrable from one agency to another.

iii. Medication Error Reporting. *Select one of the following:*

○ **Providers that are responsible for medication administration are required to both record and report medication errors to a State agency (or agencies).**
Complete the following three items:

(a) Specify State agency (or agencies) to which errors are reported:

(b) Specify the types of medication errors that providers are required to *record:*

(c) Specify the types of medication errors that providers must *report* to the State:

● **Providers responsible for medication administration are required to record medication errors but make information about medication errors available only when requested by the State.**

Specify the types of medication errors that providers are required to record:

In order to be certified by OPWDD, a provider must have a policy in place to review medication administration and to

record/report errors. All medication administration errors must be documented in a participant's record, however, if the error does not result in an adverse effect, it is not required to be reported.

If an incident falls under the category of a serious reportable incident as defined by regulation part 624, a provider must report the incident to OPWDD through the electronic Incident Report Management Application (IRMA) for additional review. This would include a medication error where a person evidences marked adverse effects or a person's health or welfare is in jeopardy due to:
-The administration of medication in an incorrect dosage, in an incorrect specified form, by incorrect route of administration, or which has not been prescribed or ordered;
-Administration of a medication to the wrong person; and
-Failure to administer a prescribed medication.
Any medication administration which requires admission to a hospital falls under the category of a serious reportable incident, and must be reported to OPWDD in writing.

All medication errors that rise to the level of a serious reportable incident, including administration errors and procedural errors are trended by DQI.

iv. **State Oversight Responsibility.** Specify the State agency (or agencies) responsible for monitoring the performance of waiver providers in the administration of medications to waiver participants and how monitoring is performed and its frequency.

Ongoing Oversight

Through an established DQI survey procedure, OPWDD verifies the adherence to policies and procedures related to medication administration and the semi-annual review of the medication administration regime for participants in all certified residential facilities; the providers are audited against their own reporting procedure. OPWDD also ensures through regulation that all providers which assume the responsibility to administer medications (residential or non-residential) have person-specific information available regarding the medications made available to staff / family care provider.

OPWDD's Division of Quality Improvement (DQI) reviews these requirements as part of a provider's annual review. 100% of providers are reviewed through this process annually. Providers found to have issues in their review of medication administration regimes, or in the accurate administration of medication will be issued a Statement of Deficiency (SOD) which the provider must address by creating a Plan of Corrective Action (POCA) which DQI reviews, approves, and later verifies its implementation.

Any trends identified through the DQI survey process are reviewed; if appropriate, advisory letters will be issued by DQI to all providers.

Reportable Incident Review
If an incident falls under the category of a serious reportable incident as defined by part 624 of the regulations, a provider must enter the incident into IRMA. These incidents are reviewed by OPWDD's Incident Management Unit (IMU) staff, resulting in appropriate follow-up. Incident information is aggregated and reviewed by DQI staff for trends.

If an incident results in the death of a participant, the IMU reviews the situation. The NYS Commission on Quality of Care and Advocacy for Persons with Disabilities also reviews all deaths of participants in the waiver program.

Appendix G: Participant Safeguards

Quality Improvement: Health and Welfare

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

a. **Methods for Discovery: Health and Welfare**
The state demonstrates it has designed and implemented an effective system for assuring waiver participant health and welfare. *(For waiver actions submitted before June 1, 2014, this assurance read "The State, on an ongoing basis, identifies, addresses, and seeks to prevent the occurrence of abuse, neglect and exploitation.")*

i. **Sub-Assurances:**

a. ***Sub-assurance: The state demonstrates on an ongoing basis that it identifies, addresses and seeks to prevent instances of abuse, neglect, exploitation and unexplained death.*** *(Performance measures in this sub-assurance include all Appendix G performance measures for waiver actions submitted before June 1, 2014.)*

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

Performance Measure:

The number and percent of critical incidents reported within appropriate timeframes. (Percentage= number of critical incidents reported within appropriate timeframes/total

incidents reported).

Data Source (Select one):
Other
If 'Other' is selected, specify:
Incident Reporting Management Application (IRMA)

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
The number and percent of critical incident investigations that were initiated within the appropriate timeframes. (Percentage=critical incident investigations that were initiated within the appropriate timeframes/total critical incident investigations).

Data Source (Select one):
Other
If 'Other' is selected, specify:
Incident Reporting Management Application

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐	☐	☐
☐	☐	☐

☐ **Operating Agency**	**Monthly**	**Less than 100% Review**
Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =
☐ **Other** ☐ Specify:	☐ **Annually**	☐ **Stratified** ☐ Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	☐ **Other** Specify:

Performance Measure:
The number and percent of critical incident investigations that were completed within the appropriate timeframes.(Reporting to be implemented 7 months after the regulation is effective). (Percentage=number of critical incident investigations that were completed within the appropriate timeframes/total number of critical incident investigations completed).

Data Source (Select one):
Other
If 'Other' is selected, specify:
IRMA

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
State Medicaid Agency	**Weekly**	☐ **100% Review**
☐ **Operating Agency**	**Monthly**	**Less than 100% Review**
Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =

Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify: Semi-annually

Performance Measure:
The number and percent of physical and sexual abuse allegations that were appropriately reported to law enforcement.(Percentage= number of physical and sexual abuse allegations that were appropriately reported to law enforcement/total number of physical and sexual abuse allegations).

Data Source (Select one):
Other
If 'Other' is selected, specify:
IRMA

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	**Monthly**	**Less than 100% Review**
Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:

	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify: Semi-annually

Performance Measure:
The number and percent of critical incident investigations where there was evidence that the necessary protections of affected individuals were implemented when appropriate. (Percentage= number of critical incident investigations where there was evidence that the necessary protections of affected individuals were implemented when appropriate/total number of critical incident investigations).

Data Source (Select one):
Other
If 'Other' is selected, specify:
DQI survey

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
State Medicaid Agency	**Weekly**	**100% Review**
☐ **Operating Agency**	**Monthly**	☐ **Less than 100% Review**
Sub-State Entity	**Quarterly**	☐ **Representative Sample** Confidence Interval = +/- 5%
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
State Medicaid Agency	**Weekly**
☐ **Operating Agency**	**Monthly**
Sub-State Entity	**Quarterly**
Other Specify:	**Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify: Semi-annually

Performance Measure:
The number of restrictive physical interventions (take downs and floor holds) recorded in the Restrictive Intervention Application (RIA). Note: this measure will provide initial baseline information that will help to target continuous quality improvements to reduce the use of physical interventions.

Data Source (Select one):
Other
If 'Other' is selected, specify:
RIA

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**

	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

b. ***Sub-assurance: The state demonstrates that an incident management system is in place that effectively resolves those incidents and prevents further similar incidents to the extent possible.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

c. ***Sub-assurance: The state policies and procedures for the use or prohibition of restrictive interventions (including restraints and seclusion) are followed.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

d. ***Sub-assurance: The state establishes overall health care standards and monitors those standards based on the responsibility of the service provider as stated in the approved waiver.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.

OPWDD has a comprehensive process for identification and remediation of problems and deficiencies that impact on the individual's health and welfare. The process begins with OPWDD DQI survey activity. All HCBS waiver providers and all certified programs/sites are reviewed annually by DQI and are also reviewed prior to renewal of operating certificates (recertification survey visits). DQI's survey protocols are extensive and reflect a review of the major elements of regulations, provider responsibilities, and health and safety of individuals served. These protocols include a review of provider compliance with 14 NYCRR Part 624 which outlines OPWDD's extensive processes for addressing all incidents including reports of abuse, significant incidents and notable occurrences for all OPWDD operated, certified, sponsored or funded agencies, and 14 NYCRR Part 633 "Protections of Individuals Receiving Services" which sets forth standards for ensuring and promoting the protection of persons served. Surveyors utilize a variety of techniques to gather information including observation, interviews, documentation reviews, and facility and physical plant reviews.

In 2011, OPWDD enhanced oversight of Incident Management by establishing a centralized unit within DQI, the sole function of which is to follow up on incidents of abuse and neglect to ensure that appropriate actions are taken. Together with the Statewide Committee on Incident Reporting (SCIR), the Incident Management Unit analyzes data from these incidents for systemic remediation and systems improvement. SCIR is an interdivisional committee and also comprised of OPWDD stakeholders: SCIR is chaired by a senior manager within OPWDD and meets regularly to review statewide data and trends from incident reports and investigations. SCIR monitors statewide issues related to identification, reporting and management of incidents involving care and treatment of individuals served. SCIR also develops statewide policy and alerts to the field to address issues identified through trend analysis. At least semi-annually incident data is aggregated to determine the most

frequent causes of incidents/allegations and if there are common contributing factors. Based on this analysis, SCIR issues alerts to provider agencies and targets training to risk areas. Centralized Investigations of abuse and neglect: In 2011, OPWDD overhauled the OPWDD Investigations function by creating a centralized Investigation Unit with a lead investigator and centralizing the function to ensure an independent, unbiased process for investigations of state provided services/facilities. In addition, all providers are now required to immediately report all incidents of physical and sexual abuse that are possible crime to law enforcement. New regulations were promulgated that require all investigations (across state and voluntary provided operations) to be conducted at arm's length.

In addition, the following oversight enhancements were completed in 2012- 13 : establishment of consistent investigator training and competencies; standardization of investigations report formats and entry into the State Incident Management Reporting Application (IRMA);establishment and monitoring of appropriate timeframes for the initiation and completion of investigations; establishment of criteria and processes when OPWDD's Centralized Investigation Unit closely monitor the investigations of voluntary providers Mortality Review. Effective in 2012, NYS OPWDD partnered with the University of Massachusetts Medical School's Center for Developmental Disabilities Evaluation and Research Center to establish an enhanced mortality review system across New York State, consistent with current national practice standards in the field of developmental disabilities and mortality review. At the center of this system is regional Mortality review committees and one statewide Central Mortality Review Committee. As part of ongoing quality improvement, OPWDD and DOH created an inter-agency Central Mortality Review Committee. This committee was created to provide an expert review of potentially preventable deaths, identify systems' issues that increase risk of mortality, and propose solutions to improve the quality of supports and services across the system.

MANDATORY REPORTING on the USE of SCIP-R RESTRICTIVE PERSONAL/ PHYSICIAL INTERVENTIONSA new database and tracking system has been developed to collect information pertaining to the use of SCIP-R restrictive personal/physical interventions in state and voluntary operated programs. This system, the Restrictive Intervention Application (RIA), is modeled after the Incident Report and Management Application (IRMA) system currently in place for incident management. Collection of this information will assist OPWDD and voluntary providers in tracking and trending the use of SCIP-R restrictive personal/physical interventions on a statewide basis. Ultimately, the RIA data will be linked to the IRMA data and will allow agencies to monitor, track/trend and analyze the relationship between SCIP-R restrictive personal/physical interventions, resulting injuries, abuse allegations and the frequency of staff involvement. This initiative is part of OPWDD's QI strategy. The baseline data collected (see PM above) helped target areas for quality improvement to reduce the need for physical interventions. These target areas included: establishment of consistent investigator training and competencies; standardization of investigation report formats and entry into the State Incident Management Reporting Application (IRMA);establishment and monitoring of appropriate timeframes for the initiation and completion of investigations; establishment of criteria and processes when OPWDD's Centralized Investigations Unit closely monitored the investigations of voluntary providers and when OPWDD's Investigators actually conducted the investigations of voluntary providers.

b. Methods for Remediation/Fixing Individual Problems

i. Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.
At the end of each DQI survey described above, survey teams conduct exit interviews and inform the agency of findings and if any findings represent issues requiring immediate correction. This information is documented on Exit Conference Forms which highlight all deficiencies and are presented to an authorized representative of the agency for signature acknowledging their receipt of the Exit Form. The form requires that all deficiencies be addressed within 30 days. For deficiencies that result in a 45 day letter, DQI verifies correction in 45 days. For all other deficiencies, corrections are verified during the next visit.

A Statement of Deficiency (SOD) is issued to an agency and a Plan of Corrective Action (POCA) required from the agency for serious, systemic and/or pervasive or egregious issues/deficiencies identified during the survey process. For example, situations in which it is determined that conditions or practices exist which, if allowed to continue, have a high probability of causing harm if the threat is not removed will result in an SOD requiring the agency to submit an acceptable POCA to DQI within 10-20 days depending upon the nature of the deficiency.

A POCA must outline the provider's planned action to correct every specific regulatory deficiency, the expected completion date of the correction, and provider actions to ensure continued regulatory compliance in the future. DQI reviews all POCAs and conducts follow up activity to ensure the problems and deficiencies have been corrected. Failure of an agency to submit and implement an acceptable POCA could result in the decertification and/or cancellation of the HCBS Medicaid Provider Agreement.

ii. Remediation Data Aggregation

Remediation-related Data Aggregation and Analysis (including trend identification)

Responsible Party*(check each that applies):*	**Frequency of data aggregation and analysis** *(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**

	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

c. Timelines

When the State does not have all elements of the Quality Improvement Strategy in place, provide timelines to design methods for discovery and remediation related to the assurance of Health and Welfare that are currently non-operational.

○ **No**

◉

Appendix H: Quality Improvement Strategy (1 of 2)

Under §1915(c) of the Social Security Act and 42 CFR §441.302, the approval of an HCBS waiver requires that CMS determine that the State has made satisfactory assurances concerning the protection of participant health and welfare, financial accountability and other elements of waiver operations. Renewal of an existing waiver is contingent upon review by CMS and a finding by CMS that the assurances have been met. By completing the HCBS waiver application, the State specifies how it has designed the waiver's critical processes, structures and operational features in order to meet these assurances.

- Quality Improvement is a critical operational feature that an organization employs to continually determine whether it operates in accordance with the approved design of its program, meets statutory and regulatory assurances and requirements, achieves desired outcomes, and identifies opportunities for improvement.

CMS recognizes that a state's waiver Quality Improvement Strategy may vary depending on the nature of the waiver target population, the services offered, and the waiver's relationship to other public programs, and will extend beyond regulatory requirements. However, for the purpose of this application, the State is expected to have, at the minimum, systems in place to measure and improve its own performance in meeting six specific waiver assurances and requirements.

It may be more efficient and effective for a Quality Improvement Strategy to span multiple waivers and other long-term care services. CMS recognizes the value of this approach and will ask the state to identify other waiver programs and long-term care services that are addressed in the Quality Improvement Strategy.

Quality Improvement Strategy: Minimum Components

The Quality Improvement Strategy that will be in effect during the period of the approved waiver is described throughout the waiver in the appendices corresponding to the statutory assurances and sub-assurances. Other documents cited must be available to CMS upon request through the Medicaid agency or the operating agency (if appropriate).

In the QIS discovery and remediation sections throughout the application (located in Appendices A, B, C, D, G, and I), a state spells out:

- The evidence based discovery activities that will be conducted for each of the six major waiver assurances;
- The *remediation* activities followed to correct individual problems identified in the implementation of each of the assurances;

In Appendix H of the application, a State describes (1) the *system improvement* activities followed in response to aggregated, analyzed discovery and remediation information collected on each of the assurances; (2) the correspondent *roles/responsibilities* of those conducting assessing and prioritizing improving system corrections and improvements; and (3) the processes the state will follow to continuously *assess the effectiveness of the OIS* and revise it as necessary and appropriate.

If the State's Quality Improvement Strategy is not fully developed at the time the waiver application is submitted, the state may provide a work plan to fully develop its Quality Improvement Strategy, including the specific tasks the State plans to undertake during the period the waiver is in effect, the major milestones associated with these tasks, and the entity (or entities) responsible for the completion of these tasks.

When the Quality Improvement Strategy spans more than one waiver and/or other types of long-term care services under the Medicaid State plan, specify the control numbers for the other waiver programs and/or identify the other long-term services that are addressed in the Quality Improvement Strategy. In instances when the QIS spans more than one waiver, the State must be able to stratify information that is related to each approved waiver program. Unless the State has requested and received approval from CMS for the consolidation of multiple waivers for the purpose of reporting, then the State must stratify information that is related to each approved waiver program, i.e., employ a representative sample for each waiver.

Appendix H: Quality Improvement Strategy (2 of 2)

H-1: Systems Improvement

a. System Improvements

i. Describe the process(es) for trending, prioritizing, and implementing system improvements (i.e., design changes) prompted as a result of an analysis of discovery and remediation information.

OPWDD's waiver assurance quality framework a subset of OPWDD's larger statewide comprehensive quality improvement strategy (QIS),ensures that OPWDD achieves its mission, vision, values, guiding principles and strategic goals and objectives (including the developmental disability transformational goals outlined in the State's Partnership Agreement and the transition to a managed care infrastructure). OPWDD's waiver purpose is reinforced by the various components of OPWDD's QIS, designed to ensure that the expectations of waiver participants and stakeholders are met, that services are of the highest quality, and that individuals served are healthy and safe. The foundation of OPWDD's QIS is built upon discovery through performance metrics, r e p o r t i n g to stakeholders, and systems wide analysis and collaboration that leads to effective remediation strategies, quality o f care enhancements, and ultimately mission-driven progress.

In 2011-12 OPWDD began enhancements to its Continuous Quality Improvement Infrastructure and Processes (detailed in the Quality Work Plan submitted to CMS on January 20, 2012). In partnership with national consulting groups (e.g. Optumas, University of Massachusetts, Council on Quality Leadership), OPWDD has continued to develop a quality improvement infrastructure that permeates through leadership, management, and Regional Office staff from all functional divisions/units and across stakeholder work groups. This construct establishes a series of committees (ongoing and ad hoc) that interface and create a framework to develop, monitor and revise quality improvement initiatives throughout the developmental disability service system in New York State.

OPWDD's Quality Improvement infrastructure includes: advisory committees and OPWDD leadership committees is charged with providing vision and strategic direction for transformation and quality improvement that results in system reform and continuous quality improvement across the OPWDD enterprise; and ad hoc quality committees that are formed for a specific purpose and are usually time limited. Examples of OPWDD's quality improvement advisory committee structure includes the New York State Developmental Disabilities Advisory Council (DDAC) (see: www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/history) and the Joint Advisory Council (JAC) for Managed Care (see: www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/opwdd-joint-advisory-council-managed-care).

In 2013, OPWDD established a more robust review of incidents and mortality through its Mortality Review Steering Committee and mortality regional committees and through the formation of a Statewide Committee on Incident Review (SCR). In addition to this existing committee structure, OPWDD has also sought recommendation from ad hoc committees and expert panelists, Recent examples include the Commissioner's Transformation Panel, see: http://www.opwdd.ny.gov/opwdd_about/commissioners_page/transformation-panel and the HCBS Setting Stakeholder Steering Committee and its subcommittees related to heightened scrutiny and non-residential settings.

OPWDD's stakeholder Transformation Panel teams and other stakeholder workgroups are designed to guide the system, identify critical areas for improvement, coordinate new and ongoing efforts, and develop strategies to make sure that the system is person-centered and sustainable. They focus on: preparing the system to transition to managed care; achieving transformation goals; and continuing to work with the provider community to find efficiencies and foster innovation.

The Enterprise Policy and Performance Measures Committee: OPWDD's key organizational divisions are engaged in trending, prioritizing and implementing systems improvements and transformation reforms. The Bureau of Strategic Planning and Performance Measures ensures that OPWDD has meaningful performance measures that result in accountability and continuous quality improvement throughout the enterprise; and spearheads OPWDD's involvement, implementation, and analysis of the National Core Indicators (NCI) used for quality improvement at the OPWDD systems level and is involved with the evaluation and accountability of OPWDD's transformation initiatives as outlined in the OPWDD Evaluation Plan and the OPWDD Accountability Plan incorporation as components of the OPWDD Quality Strategy which was submitted to CMS in November 2013.

The Division of Person Centered Supports and Service Delivery have a responsibility for spearheading OPWDD's transformation initiatives related to: competitive employment; self-direction; expanding community integrated housing options, Money Follows the Person (MFP) and deinstitutionalization; development of the specialized managed care plans; and for developing continuous quality improvement strategies.

The Division of Quality Improvement (DQI) is responsible for monitoring regulatory compliance and certifying all community programs (both State operated and not-for-profit community residential, day, clinic, and free-standing respite programs), and review of HCBS Waiver and Medicaid Service Coordination (MSC) services. DQI compromised of: Bureau of Program Certification (BPC), Incident Management Unit (IMU), Bureau of Continuous Quality Improvement (CQI): BPC is responsible for review and certification of OPWDD's programs and services while IMU provides real-time oversight of the critical function of incident management statewide reviews incidents to ensure appropriate protective measures are taken and that required notifications to entities are completed as appropriate (i.e. law enforcement); provides feedback to providers if there are concerns related to the comprehensiveness and adequacy of corrective actions; works in conjunction with the New York State Justice Center for the Protection of People with Special Needs, OPWDD's Office of Investigations and Internal Affairs and the OPWDD Office of Employee Relations, as well as the OPWDD Statewide Committee on Incident Review and Local Incident Review Committees, to ensure a strong coordinated approach is taken in response to any incident of abuse/neglect or other serious incidents that may occur within voluntary and state-operated service providers; responsible for managing the Incident Report and Management Application (IRMA) and reviewing and analyzing the data to identify significant trends to ensure they are responded to appropriately to improve the quality of services to individuals served. IMU staff are available 24 hours per day seven days per week to consult with providers, to ensure that timely and appropriate safeguards are in place for individuals served and provide other DQI staff with pertinent information for monitoring and evaluation. They alert BPC staff of significant untoward events for immediate follow up, as needed and develop appropriate and standardized trend analysis reports for the OPWDD Commissioner and Leadership Teams review, as well as specific trend reports that will be required to be completed on an annual basis by all providers of service in accordance with Part 624 regulations.

CQI develops and implements projects critical to OPWDD's core mission as well as internal to DQI, which includes: developing, designing, and improving protocols and survey processes used by the Bureau of Program Certification in their on-site survey work; analyzing data and reporting on performance measures from these surveys; and recommending improvements resulting from the analysis. CQI designs and implements periodic provider training and works with other units/divisions within OPWDD in developing QI strategy. Data is aggregated and reported to OPWDD Leadership and is used to complete the annual waiver reports to the Centers for Medicare and Medicaid (CMS). CQI also oversees, coordinates and/or project manages a number of committees devoted to recommending quality priorities.

The Office of Audit Services (OAS) and Data Management and Performance Metrics staff also conduct provider oversight. OAS has responsibility for auditing provider agencies that operate under OPWDD's auspices and coordinates audit activities with The New York State Office of the Medicaid Inspector General (NYS OMIG). OAS, through its Bureau of Compliance Management, conducts billing and claiming audits of waiver services at provider agencies, per the requirements of recent amendments to OPWDD Waiver agreements with CMS. OAS coordinates the recoupment of Medicaid monies through the NYS OMIG.

Data Management and Performance Metrics carries out periodic post-payment reviews to identify overlapping or

inappropriate HCBS waiver claims. Inappropriate claims are either voided or adjusted or the provider is required to repay the claim. The data is aggregated and reported on a monthly basis to the NYS OMIG.

OPWDD's committee and organizational framework is intended to evolve and change as quality improvement projects commence and are completed and new quality improvement priorities are initiated. These committees and/or relationships are useful in describing how continuous quality improvement is being designed, developed, implemented and evaluated with OPWDD's enterprise. OPWDD's Commissioner advised by the committees and organizational units described, and in conjunction with the Single State Medicaid Agency (DOH) and the Governor's Office, makes final decisions on the prioritization of systems improvement initiatives.

New York State Legislation enacted in 2013 provided a Joint Advisory Council (JAC) for Managed Care chaired by the OPWDD Commissioner. The DOH Commissioner is charged with advising both commissioners in regards to the oversight of the Fully Integrated Duals Advantage for Individuals with Intellectual and Developmental Disabilities (FIDA-IDD). This 12-member council includes individuals with developmental disabilities, their families and advocates, and service providers. Three members of the JAC will also be members of the special advisory review panel on Medicaid managed care. The charge of the JAC is to review all managed care options provided to individuals with developmental disabilities, including the adequacy of habilitation services, the record of compliance with person-centered planning, person-centered services and community integration, the adequacy of rates paid to providers and the quality of life, health, safety and community integration for individuals with developmental disabilities enrolled in managed care. JAC findings and recommendations will be reported to the OPWDD Commissioner, the DOH Commissioner and New York State Legislative Leaders.

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As the Single State Medicaid Agency, DOH's primary focus is to ensure that OPWDD's systemic operation of the HCBS waiver adheres to six waiver assurances. DOH's primary oversight activities take place in the following areas: Multifaceted Individualized Service Plan (ISP)/Life Plan (LP) reviews; Critical Significant Events (CSE) monitoring and participation in the monthly Central Mortality Review Committee; OPWDD's surveillance of waiver providers, including participation in the monthly OPWDD Early Alert Committee; Medicaid enrollment of qualified providers; participation in the OPWDD Joint Advisory Council Meeting; quarterly interagency (DOH and OPWDD) standing quality meetings and timely and accurate CMS 372 Reporting The DOH Waiver Management Unit (WMU) continuously strives to enhance communication and collaboration with OPWDD, along with other divisions and units in DOH involved in waiver oversight activities described in Appendix A.2.b.

ii. System Improvement Activities

Responsible Party*(check each that applies):*	**Frequency of Monitoring and Analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Quality Improvement Committee**	☐ **Annually**
☐ **Other** Specify:	☐ **Other** Specify:

b. System Design Changes

i. Describe the process for monitoring and analyzing the effectiveness of system design changes. Include a description of the various roles and responsibilities involved in the processes for monitoring & assessing system design changes. If applicable, include the State's targeted standards for systems improvement.

The evaluation of systems design changes resulting from OPWDD's quality management and quality improvement activities is achieved through the committee processes described above. Ultimately, the OPWDD Leadership Team is the entity that prioritizes all agency-wide system improvement activities and is responsible for the effectiveness of strategic implementation. The OPWDD Leadership Team is advised by the Commissioner's DD Advisory Council established by NYS Mental Hygiene Law (13.05) and comprised of self-advocates, family members, provider representatives, and other stakeholders, and a broad array of other internal and external stakeholders that represent various constituencies including the following:

•• OPWDD Provider Associations;
•• The Self-Advocacy Association of New York State;
•• The Statewide Committee for Family Support Services; and
•• Tribal entities.

OPWDD engages in consistent and regular communications with these stakeholders on strategic priorities and systems improvement activities. These stakeholders, through various mechanisms, have a major role in providing input and recommendations to OPWDD. Stakeholders also play a major role in evaluating systems improvement actions. OPWDD collaborates with the Department of Health (DOH) (the Single State Medicaid Agency) to share quality

improvement findings and best practices.

The DOH oversight of the OPWDD QIS consists of the following:

1. Annual review of Individual Service Plans (ISP)/Life Plan (LP): a) DOH selects a statistically valid sample of ISPs/LPs, and oversees the OPWDD DQI ISP/LP review of this sample using the Inter-rater reliability review (IRR) process outlined in Appendices A and D. DOH works closely with OPWDD to identify individual and systemic deficiencies and to monitor and evaluate remediation; b) DOH completes a fiscal review of a subset of the statistically valid DOH sample of ISPs/LPs to assure that services documented in the ISP/LP match the corresponding Medicaid Claims Detail Report (CDR) found in NYS Data Mart and that the ISP/LP documentation is complete and accurate. DOH identifies individual and systemic deficiencies and works closely with OPWDD to monitor and evaluate remediation.
2. Critical and Significant Event (CSE) notification by OPWDD: a) DOH monitors OPWDD adherence to the interagency CSE Notification Policy and works closely with OPWDD to clarify policy and procedural issues with the goal of improved reporting; b) DOH and OPWDD confer frequently about CSE reporting practices and identified trends; c) DOH continuously monitors and trends reported CSEs; d) Monthly, DOH meets internally to review new CSEs and monitor monthly trends; DOH then shares this information with OPWDD for review and additional discussion as warranted; e)Annually and as needed, DOH and OPWDD Incident Management Unit (IMU) meet to discuss specific IMU policies, procedures and regulation changes that impact the IMU process; f) Annually, DOH selects a subsample of incidents (CSEs) for more in depth review and discussion with OPWDD IMU in order to verify that these CSEs have been appropriately resolved and closed and g) DOH and OPWDD IMU share data regarding the close out of all reported CSEs for the previous year.
3. Stakeholder communication: DOH assists OPWDD consumers, families and providers as requested. When applicable, DOH shares stakeholders' issues with OPWDD and the two agencies work together to address and resolve problems.
4. Standing Interagency Quarterly Meeting: DOH and OPWDD meet quarterly to review the overall waiver quality assurance program and use a standing quality assurance agenda to ensure consistency. Agenda items include: a) Status of ongoing quality assurance systemic remediation activities; b) Regulatory changes; c) Policy clarifications; d) Proposed activities; e) New quality assurance initiatives. The goal of the standing interagency meeting is to enhance interagency communication, collaboration and evaluation of waiver quality monitoring and quality improvement activities.
5. Medicaid Enrollment of OPWDD Waiver Providers: a) DOH ensures that OPWDD approved waiver service providers meet and maintain the standards for continued Medicaid enrollment and reimbursement; b) New waiver service provider rosters are shared with DOH by OPWDD; c) DOH and OPWDD work together to dis-enroll waiver providers from Medicaid when required.
6. Oversight of OPWDD's surveillance of waiver service providers: a) DOH reviews the OPWDD DQI monthly report/Monthly Surveys with Deficiencies Report and when required, confers with OPWDD for clarification and updates; b) DOH participates in the monthly OPWDD DQI Early Alert meeting and monitors OPWDD's Early Alert process; c) DOH tracks the status of waiver service providers on the Early Alert list and updates DOH leadership as warranted.
7. Participation in OPWDD Waiver and Quality Assurance Statewide Trainings to assure that DOH's knowledge of OPWDD's policy and procedures remain current.
8. Policy liaison between affected DOH, OPWDD Medicaid systems and other affected state staffs and/or concerned parties to assure that Medicaid Evolution Projects and other systems activities that pertain to the Special Population Waivers are appropriate and if germane, that they are completed and running properly. a) Track Evolution Projects that are relevant to the effective, efficient and cost saving management of the OPWDD HCBS Waiver Program.
9. Track federal and state audits that pertain to OPWDD and in particular to the OPWDD HCBS Waiver to insure that these audits are resolved and followed up suitably in the best interest of all involved parties.
10. Monitor federal websites that present policy changes that often directly and tangentially affect the OPWDD HCBS Waiver Program.

ii. Describe the process to periodically evaluate, as appropriate, the Quality Improvement Strategy.

OPWDD's mission is to "help people with developmental disabilities live richer lives." OPWDD recognizes that this mission requires innovation and continuous quality management and improvement. This process must demonstrate accountability to the people we serve, to government entities that fund our services, to the taxpayers, and to other stakeholders.

Quality improvement and evaluation are not one time events. By definition, quality improvement is an ongoing effort to improve services and processes. As a result, OPWDD's HCBS quality improvement strategy is reevaluated at least annually based on the discovery, remediation and analysis activities described throughout this application. DQI, in collaboration with the Waiver Management Unit, the Quality Improvement Steering Committee and subcommittees and other appropriate units/divisions, is responsible to facilitate this reevaluation process. Recommended changes to the quality improvement strategy are reviewed by the OPWDD Leadership Team in consultation with appropriate stakeholders, and the Department of Health (DOH) (the Single State Medicaid Agency).

In January 2008, OPWDD adopted the National Core Indicators (NCI) to measure performance of NYS's developmental disability service delivery system and create strategies for system improvement. The NCI enhances OPWDD's quality improvement process by analyzing and sharing data on outcomes which are important to stakeholders, including people served and family members. The primary survey protocol used annually by OPWDD is the Consumer Survey, a standardized instrument designed to assess individual outcomes for people with developmental disabilities. The Consumer Survey measures constructs that define the quality of service delivery from the perspective of individuals with developmental disabilities and their families. Specifically, the Consumer Survey consists of indicators in the following domains: Home, Employment, Health and Safety, Choice, Community Participation, Relationships, Rights, and Individual Satisfaction.

After seven years of continuous data collection, NYS now has a data set of approximately 7,600 cases. OPWDD has been able to benchmark the agency's performance year to year and compare our outcomes with other states that have comparable service delivery systems. Outcomes are assessed on an annual basis and are shared with policy makers and the public through various reports.

Based upon specific outcomes from the data, OPWDD makes decisions that impact the service delivery system statewide. The NCI will continue to be an essential enterprise level set of performance measures in NYS and will help OPWDD assure

quality in the HCBS Waiver.

DOH's continuous evaluation of effectiveness of the QIS process is as follows:

1. Continuous:
   - Communication with OPWDD regarding any and all HCBS issues and concerns;
   -Monitor reported OPWDD Critical Significant Events (CSE);
   -Conduct DOH ISP/LP Fiscal Reviews;
   -Conduct DOH ISP/LP IRR Reviews;
   -Monitor OPWDD website and LISTSERVs;
   -Track and monitor Federal and State Audits that pertain to OPWDD and in particular to the OPWDD HCBS Waiver;
   - Track Evolution Projects that are relevant to the effective, efficient and cost saving management of the OPWDD HCBS Waiver Program.
   - Monitor on an ongoing basis Federal websites that present policy changes that often directly and tangentially affect the OPWDD HCBS Waiver Program.
2. Monthly:
   -Aggregate and analyze reported OPWDD CSE reports and conduct internal reviews of these reports for monitoring, tracking and trending;
   -Maintain a DOH/OPWDD Communication Log for CSEs to ensure remediation timeliness and/or discuss strategies for improvement/new approaches.
   -Participate in OPWDD Early Alert Committee meetings and review/analyze pertinent meeting data;
   -Participate in OPWDD Central Mortality Review Committee meeting and review/analyze pertinent meeting data;
3. Quarterly: DOH and OPWDD meet to:
   -Follow an agreed upon standing agenda to ensure all assurances are appropriately reviewed, tracked and data sources are trended;
   -Complete cross systems review; and
   -Assure all outstanding remediation and QI issues are addressed and any new strategies are developed, along with a timeline for implementation.
4. Semi- annually: Receive and analyze aggregate reports from OPWDD about OPWDD DQI ISP/LP Review of the DOH statistically valid sample.
5. Annually:
-Review all performance metrics;
-Identify issues/areas requiring systemic remediation;
-Identify needed systemic remediation with OPWDD;
-Establish methodology for evaluation of identified systemic remediation and create and implement timeline for systemic remediation when needed;
6. As Needed:
-Address reported Consumer identified issues;
Provide OPWDD with timely feed-back; and
Monitor all identified Consumer issues to ensure through resolution.

Appendix I: Financial Accountability

I-1: Financial Integrity and Accountability

Financial Integrity. Describe the methods that are employed to ensure the integrity of payments that have been made for waiver services, including: (a) requirements concerning the independent audit of provider agencies; (b) the financial audit program that the state conducts to ensure the integrity of provider billings for Medicaid payment of waiver services, including the methods, scope and frequency of audits; and, (c) the agency (or agencies) responsible for conducting the financial audit program. State laws, regulations, and policies referenced in the description are available to CMS upon request through the Medicaid agency or the operating agency (if applicable).

HCBS Waiver services are provided directly by the State operating agency (OPWDD) through its regional offices or DDROs. HCBS Waiver services are also delivered by provider agencies, which are non-profit organizations.
Non- profit organizations include not-for-profit corporations formed under New York State Law or authorized to do business in New York. All HCBS Waiver services are subject to independent financial audits.

Statewide audits of Medicaid funded programs are conducted by the office of the Office of the State Comptroller (OSC), the Office of the Attorney General (AG), the Department of Health, and the Office of the Medicaid Inspector General. In addition, the operating agency and local counties also conduct reviews and audits of Medicaid funded programs. Within 90-days following each calendar year the state will submit to CMS a report which identifies the oversight activities and associated results for the fiscal integrity activities / measures described in Appendix I that were performed and concluded within the calendar year.

Annual Cost Reporting and Auditing:

Cost reporting for both public (OPWDD) and non-profit HCBS waiver services will be subject to review. OPWDD HCBS waiver cost reporting will be made in a CMS agreed-upon format beginning with the State Fiscal Year ending March 31, 2014, and will be subject to independent examination. The OPWDD Cost Report will be submitted to CMS within 16 months after the close of the reporting period.

OPWDD will either contract with an auditing firm to perform audits, or perform their own audits of private provider cost reports for a representative sample of private providers on an annual basis; and complete these audits within 12-18 months of the date required or filing these cost reports. The state will contract with an independent auditing entity for the review of private provider (not-for-profit) HCBS cost reporting beginning on January 1, 2015 for private providers of services with fiscal years ending in calendar year 2013.

Delinquent Cost Reports for Non-State Providers

If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.
Billing and Claiming Reviews:

The MA Agency (Department of Health, DOH) conducts a sample of Individualized Service Plan reviews to validate that services listed in the ISP are reflected in the MA Claim Detail Report. Corrective action is taken as necessary. (See Appendix A: QIS A. ii-A.i.8)

The Operating Agency conducts Post Payment reviews of HCBS Waiver claim data, which are conducted by OPWDD's Division of Fiscal and Administrative Solutions (DFAS). In addition, OPWDD's Division of Service Delivery also conducts a corporate compliance function for OPWDD's HCBS Waiver services.

To ensure the integrity of provider claims for Medicaid payment of waiver services, the Office of the Medicaid Inspector General (OMIG) conducts audits of waiver providers as part of the agency's fiscal audit plan. All waiver providers are subject to audits performed by the OMIG. Effective with services delivered on or after 4/1/13, OPWDD, working in conjunction with the OMIG, will adjust its audit strategy to subject all providers to audit, including state operations. Our selection strategy will ensure all waiver services including Consolidated Supports and Services receive coverage during the audit cycle.

Each year, OPWDD will establish an audit pool that includes all providers of waiver services, removing those that are scheduled for audit by the New York State Office of The Medicaid Inspector General (OMIG), or are held in abeyance due to a request by the New York State Attorney General's Medicaid Control Fraud Unit (MCFU). Remaining providers will be divided into Not-for-Profit New York City/Long Island, Not-for-Profit rest-of-state, and OPWDD state operations groupings. At least 30 Not-for-Profit providers will be selected from those pools using random, statistical selection; 15 from the New York City/Long Island and rest-of-state pool. After our random sample is drawn, additional audits will be added, if necessary, to ensure all waiver services for the audit period receive coverage.

OPWDD's audit approach will be modeled on that used by HHS-OIG, as described in the HHS-OIG audit report A-02-10-01027 and test coverage using a beneficiary-months approach. The audit scope will include all HCBS waiver services and will include no less than the two most recent calendar years of claims. The engagement letter will specify that NYS retains the right to extend the testing to older claim periods.

OPWDD will annually perform a statewide audit of state provided HCBS waiver services, using the HHS OIG Report A-02-10-01027 as our model. Our audit population will consist of all state provided HCBS waiver service billings for the most recent calendar year. Our sampling unit will be a beneficiary month; defined as all state provided HCBS waiver services provided to one individual for one month.

OPWDD will annually select a stratified, statistically valid, random sample of 100 beneficiary months from a population of approximately 100,000 beneficiary months. Using a 95% confidence interval, OPWDD determined the calculated precision of a sample size of 100 to be 17%. This result was based on a limited internal control study performed by the Office of Audit Services. To improve the calculated precision of 17%, OPWDD will select a stratified random sample. By stratifying the population, the variance in the population will decrease and therefore we expect the precision of the actual sample to improve. In addition, the stratification methodology will ensure all waiver services provided by the state are included in the random sample of 100 beneficiary months.

OPWDD currently contracts with the consulting firm, Karl Heiner Statistical Consulting (KHSC) to independently generate random samples; perform extrapolations of errors to the full population and provide expert technical advice. OPWDD provides the population of beneficiary months to the statistician who analyzes the population and develops an appropriate stratification from which to draw random samples.

Samples will be drawn by the statistician using the 'Random Sample' function in Mathematica. This function requires the strata sizes and strata sample sizes in order to generate random indices which are then applied to the population sampling frame. Mathematica reads the computer's clock and that time is used to select the "seed" used by the random sample function as the starting point for generating random numbers. The seed is documented for future re-performance if required.

A series of statistical tests are performed on the resulting sample to test for apparent randomness. If the sample does not pass the randomness tests, the process begins over. Randomness tests performed include Anderson-Darling, Cramer-von Mises, Distance-to-Boundary, Kolmogorov-Smirnov, KuipePerson χ^2, and Watson U^2.

The beneficiary months approach requires that for each agency selected, NYS identifies all waiver billings for the audit period. These billings are aggregated by individual/month to obtain the beneficiary-month. Any beneficiary-month with aggregated billing of under $100 will be removed from the pool. A random, statistically valid sample of beneficiary-months will be selected and all service documentation will be reviewed to support all waiver billing during the sample month. Any identified errors will be used to estimate total overpayments using statistical software. The revised audit plan will begin on 4/1/2014 and will initially review Calendar Year 2012 and 2013 claims. Individual audit results will be issued no later than 6 months after the close of field work, barring appeals or legal actions that might delay issuance. In conjunction with the OMIG audit results will be aggregated on a State Fiscal Year basis for performance measurement purposes.

Information regarding Financial Integrity Continues in Section QI-a.ii.

Appendix I: Financial Accountability

Quality Improvement: Financial Accountability

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

a. **Methods for Discovery: Financial Accountability**
State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver. *(For waiver actions submitted before June 1, 2014, this assurance read "State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver.")*
   i. **Sub-Assurances:**

      a. ***Sub-assurance: The State provides evidence that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver and only for services rendered.*** *(Performance measures in this sub-assurance include all Appendix I performance measures for waiver actions submitted before June 1, 2014.)*

      Performance Measures

      For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

      For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

      Performance Measure:
      FAa1. # and % of deficiencies identified in the DOH ISP Fiscal Review that were remedied by OPWDD (note also Ai4). Any resulting recoveries will be completed by 6/30 of the year

following the end of the waiver year, allowing for provider objection and due process if needed.(Numerator is the # of claims remedied and the denominator is the total # of deficient claims in DOH ISP audit.)

Data Source (Select one):
Other
If 'Other' is selected, specify:
Off Site Record Review (DOH ISP Sample)

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval = 5%
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
FAa2. # and % of claims that were denied payment because of the effectiveness of MA& HCBS individual eligibility edits & service or provider authorization edits if programmed in eMedNY.(Numerator is the # of claims denied payment, denominator is the total # of claims that should have failed the claim logic based on OPWDD's review of paid & non-paid claims data.)

Data Source (Select one):
Other
If 'Other' is selected, specify:
eMedNY

Responsible Party for data collection/generation(*check each that applies):*	**Frequency of data collection/generation**(*check each that applies):*	**Sampling Approach**(*check each that applies):*
State Medicaid Agency	**Weekly**	☐ **100% Review**
☐ **Operating Agency**	**Monthly**	**Less than 100% Review**
Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =
Other Specify:	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis (*check each that applies):*	**Frequency of data aggregation and analysis**(*check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
FAa3 The % and # of paid HCBS claims that are identified in post payment reviews involving res hab that are found to be submitted in error and are remedied. (Numerator is the # of remedied res hab claims & the denominator is the total # of conflicting res hab billings).

Data Source (Select one):
Other
If 'Other' is selected, specify:
eMedNY

Responsible Party for data collection/generation(*check each that applies):*	**Frequency of data collection/generation**(*check each that applies):*	**Sampling Approach**(*check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐	☐	☐

Sub-State Entity	**Quarterly**	**Representative Sample** Confidence Interval =
Other Specify:	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	☐

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
FAa4.The % and # of paid HCBS claims that are identified in post payment reviews involving weekend day hab that are found to be submitted in error and are remedied. (Numerator is the # of GDH paid claims w/ a weekend date of service remedied and the denominator is the total # of potentially conflicting GDH claims).

Data Source (Select one):
Record reviews, off-site
If 'Other' is selected, specify:
eMedNY

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	☐ **Annually**	**Stratified** Describe Group:

	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	☐

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
FAa 5. The number and percent of HCBS waiver providers that are identified in OMIG audits for recovery and the error rates, and dollars recovered. Where the numerator is the number of providers with errors and the denominator is the total number of Waiver providers in the service system.

Data Source (Select one):
Other
If 'Other' is selected, specify:
OPWDD Recovery Database

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
Other Specify:	**Annually**	**Stratified** Describe Group:
	☐ **Continuously and Ongoing**	**Other** Specify:

	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

Performance Measure:
FAa6 : The number and percent of HCBS waiver providers that were subject to Investigations that are complete, and the dollars recovered. Numerator is the number of HCBS waiver providers with completed investigations and the denominator is the total number of providers.

Data Source (Select one):
Other
If 'Other' is selected, specify:
OPWDD Recovery Database

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify:	☐ **Annually**	☐ **Stratified** Describe Group:
	☐ **Continuously and Ongoing**	☐ **Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	☐ **Other** Specify:

Performance Measure:
FAa7: The number and percent of audits that are initiated annually in accordance with the approved audit plan described in Appendix I-1 of this waiver agreement (Numerator is the number of audits from FAa5 & FAa6 initiated annually and the denominator is the annual commitment in Appendix I-1)

Data Source (Select one):
Other
If 'Other' is selected, specify:
OPWDD/OMIG Audit Reports & Tracking Data

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify: OMIG	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

FAa7: The number and percent of audits that are initiated annually in accordance with the approved audit plan described in Appendix I-1 of this waiver agreement (Numerator is the number of audits from FAa5 & FAa6 initiated annually and the denominator is the annual commitment in Appendix I-1)

Data Source (Select one):
Other
If 'Other' is selected, specify:
OPWDD/OMIG Audit Reports & Tracking Data

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify: OMIG	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

FAa7: The number and percent of audits that are initiated annually in accordance with the approved audit plan described in Appendix I-1 of this waiver agreement (Numerator is the number of audits from FAa5 & FAa6 initiated annually and the denominator is the annual commitment in Appendix I-1)

Data Source (Select one):
Other
If 'Other' is selected, specify:
OPWDD/OMIG Audit Reports & Tracking Data

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify: OMIG	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	Continuously and Ongoing
	Other Specify:

FAa7: The number and percent of audits that are initiated annually in accordance with the approved audit plan described in Appendix I-1 of this waiver agreement (Numerator is the number of audits from FAa5 & FAa6 initiated annually and the denominator is the annual commitment in Appendix I-1)

Data Source (Select one):
Other
If 'Other' is selected, specify:
OPWDD/OMIG Audit Reports & Tracking Data

Responsible Party for data collection/generation*(check each that applies):*	**Frequency of data collection/generation***(check each that applies):*	**Sampling Approach***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**	☐ **100% Review**
☐ **Operating Agency**	☐ **Monthly**	☐ **Less than 100% Review**
☐ **Sub-State Entity**	☐ **Quarterly**	☐ **Representative Sample** Confidence Interval =
☐ **Other** Specify: OMIG	☐ **Annually**	**Stratified** Describe Group:
	Continuously and Ongoing	**Other** Specify:
	☐ **Other** Specify:	

Data Aggregation and Analysis:

Responsible Party for data aggregation and analysis *(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

b. ***Sub-assurance: The state provides evidence that rates remain consistent with the approved rate methodology throughout the five year waiver cycle.***

Performance Measures

For each performance measure the State will use to assess compliance with the statutory assurance (or sub-assurance), complete the following. Where possible, include numerator/denominator.

For each performance measure, provide information on the aggregated data that will enable the State to analyze and assess progress toward the performance measure. In this section provide information on the method by which each source of data is analyzed statistically/deductively or inductively, how themes are identified or conclusions drawn, and how recommendations are formulated, where appropriate.

ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.
OPWDD (Fiscal and Administrative Solutions-DFAS) has a calendar of post-payment reviews that are applied against HCBS Waiver claims, to identify overlapping or inappropriate claims. Inappropriate claims are either voided/adjusted or the provider is required to repay the claim. The data is aggregated and reported on a quarterly basis to the NYS Office of the Medicaid Inspector General (OMIG).

****
Continued from I-1 Fiscal Integrity

The DOH employs methods to assure financial integrity and accountability through the support system of eMedNY, which is the New York statewide database for all NYS MA information. eMedNY allows for payment to the qualified MA provider who renders an approved MA service to an enrolled MA participant. In addition, the Data Mart is an internal DOH web tool that allows DOH staff to analyze data from eMedNY. The Data Mart may also be used to profile an individual's MA eligibility information, including verification of enrollment in the OPWDD HCBS Waiver, the date of enrollment, and, if appropriate, the date of termination from the Waiver. The Data Mart also provides information about the type(s) of waiver services billed for, including qualified provider, frequency and duration of these services.

Furthermore, as part of the MA agency oversight, the DOH Special Populations Group (SPG) reviews a statistically valid sample of OPWDD Individualized Service Plans (ISP) annually to validate that claims are coded and paid in accordance with the reimbursement methodology specified in the waiver agreement and that waiver services billed match the type, amount, duration and frequency of these services as documented in the ISP.

The CMS Annual 372 Report demonstrates the cost neutrality of the HCBS waiver and contains detailed breakouts of waiver expenditures by category of service and for all services provided in a given year. It also documents the number of waiver recipients enrolled in each waiver service during the calendar review year. CMS 372 Report data is calculated by obtaining expenditure data generated by the DOH eMedNY system and is based on date of service for waiver recipients who are

identified by program enrollment rosters maintained by the OPWDD.

Compilation of the CMS 372 begins with OPWDD, which prepares the fiscal portion of the report. Once completed, the report is forwarded to the DOH FMG as well as the SPG for review and approval. FMG compares data included in the CMS 372 report to actual MARS expenditure data for the period in question, and if necessary, follow-up with SPG and OPWDD to resolve any apparent discrepancies, or unusual trends. This review serves as a data check to verify that the fiscal data included in the CMS 372 is consistent with current expenditures. FMG uses the DOH Data Mart system to verify further that the recipient counts included in the 372 report are consistent with those counted on a "date-of- payment" methodology. Again, when inconsistencies are identified, FMG works collaboratively with SPG and OPWDD to clarify and correct errors. Once FMG is satisfied that the CMS 372 Report data is accurate, the report is approved and returned to SPG for completion of the quality assurance portion of the report. SPG sends the completed CMS 372 Report to the Deputy Commissioner, NYS MA Director for final approval and when obtained, the CMS 372 report is forwarded to CMS.

b. Methods for Remediation/Fixing Individual Problems

i. Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.
For Performance Measure FAa1 remediation of claims means that Billing and claiming problems discovered in OPWDD's post-payment desk reviews are handled through claim voids in eMedNY. Providers are issued letters listing the specific claims, reasons for the void and instructions for voiding the claims. Providers have an opportunity to dispute claim voids and submit documentation to prevent voids where appropriate. Claims not voided by providers in a given time frame are submitted to the Medicaid Agency for voiding/adjusting. Voids are reported to the OMIG quarterly.

The OMIG is responsible for on-site billing and claiming reviews for OPWDD's HCBS Waiver Providers.

ii. Remediation Data Aggregation

Remediation-related Data Aggregation and Analysis (including trend identification)

Responsible Party*(check each that applies):*	**Frequency of data aggregation and analysis***(check each that applies):*
☐ **State Medicaid Agency**	☐ **Weekly**
☐ **Operating Agency**	☐ **Monthly**
☐ **Sub-State Entity**	☐ **Quarterly**
☐ **Other** Specify:	☐ **Annually**
	☐ **Continuously and Ongoing**
	☐ **Other** Specify:

c. Timelines

When the State does not have all elements of the Quality Improvement Strategy in place, provide timelines to design methods for discovery and remediation related to the assurance of Financial Accountability that are currently non-operational.

- ◉ **No**
- ○ **Yes**

Please provide a detailed strategy for assuring Financial Accountability, the specific timeline for implementing identified strategies, and the parties responsible for its operation.

Appendix I: Financial Accountability

I-2: Rates, Billing and Claims (1 of 3)

a. Rate Determination Methods. In two pages or less, describe the methods that are employed to establish provider payment rates for waiver services and the entity or entities that are responsible for rate determination. Indicate any opportunity for public comment in the process. If different methods are employed for various types of services, the description may group services for which the same method is employed. State laws, regulations, and policies referenced in the description are available upon request to CMS through the Medicaid agency or the operating agency (if applicable).

The DOH establishes all payment rates for waiver services. These payment rates are subject to the approval of the New York State Division of the Budget (DOB).

The Rate Methodology for payment of HCBS Waiver services are described in Addendum A to this document (and in Addenda A.1 through A.12). The public can access information regarding rates paid for waiver service on the DOH website and the OPWDD website (where the waiver application is published). In addition, all rate methodologies are published in state regulations, which are subject to public review and comment.

b. Flow of Billings. Describe the flow of billings for waiver services, specifying whether provider billings flow directly from providers to the State's claims payment system or whether billings are routed through other intermediary entities. If billings flow through other intermediary entities, specify the entities:

There are two different billing flows, which are described below:

I. For services delivered by voluntary provider agencies, billings flow directly from the provider to New York State's MMIS (eMedNY).

II. All State Operated and OHCDS services billed prior to 5/1/2014 with service dates after 4/1/2014: OPWDD, through its Regional Offices and as an OHCDS, is also an HCBS Waiver provider. For OPWDD-delivered services, claims are submitted to the Medicaid Agency (New York State Department of Health - DOH) for payment of service. In addition, all claim specific information is forwarded, processed and adjudicated through the eMedNY. Any discrepancies between payment and adjudication are reconciled with the Medicaid Agency.
For all waiver services with a service date of 4/1/2014 or thereafter; the state (OPWDD) will process and adjudicate all claims for services, provided by public provides, claims for services provided by its OHCDS, and for any services provided by private providers, through the states MMIS prior to any claiming for Federal Financial Participation. Only valid adjudicated paid claims will be claimed on the quarterly expenditure CMS-64 reports. The claiming process for April and May 2014 services is described in I-3

Appendix I: Financial Accountability

I-2: Rates, Billing and Claims (2 of 3)

c. Certifying Public Expenditures *(select one)*:

- (●) **No. State or local government agencies do not certify expenditures for waiver services.**
- ( ) **Yes. State or local government agencies directly expend funds for part or all of the cost of waiver services and certify their State government expenditures (CPE) in lieu of billing that amount to Medicaid.**

***Select at least one*:**

☐ **Certified Public Expenditures (CPE) of State Public Agencies.**

Specify: (a) the State government agency or agencies that certify public expenditures for waiver services; (b) how it is assured that the CPE is based on the total computable costs for waiver services; and, (c) how the State verifies that the certified public expenditures are eligible for Federal financial participation in accordance with 42 CFR §433.51(b).*(Indicate source of revenue for CPEs in Item I-4-a.)*

☐ **Certified Public Expenditures (CPE) of Local Government Agencies.**

Specify: (a) the local government agencies that incur certified public expenditures for waiver services; (b) how it is assured that the CPE is based on total computable costs for waiver services; and, (c) how the State verifies that the certified public expenditures are eligible for Federal financial participation in accordance with 42 CFR §433.51(b). *(Indicate source of revenue for CPEs in Item I-4-b.)*

Appendix I: Financial Accountability

I-2: Rates, Billing and Claims (3 of 3)

d. Billing Validation Process. Describe the process for validating provider billings to produce the claim for federal financial participation, including the mechanism(s) to assure that all claims for payment are made only: (a) when the individual was eligible for

Medicaid waiver payment on the date of service; (b) when the service was included in the participant's approved service plan; and, (c) the services were provided:

a) Claims for all HCBS waiver services are adjudicated by eMedNY. The eMedNY system identifies HCBS enrollees with codes that identify the person as HCBS-enrolled and the effective date of the enrollment. Payment system edits require the client record to indicate active Medicaid eligibility and HCBS Waiver enrollment for all dates of service billed. Any HCBS Waiver claim submitted to eMedNY is denied if the individual is not actively enrolled in Medicaid and the HCBS Waiver for the date of service billed.

b) Providers and subcontractors are required to certify that all billings are true and accurate and that services being billed are authorized in the Individualized Service Plan and, where applicable, are supported by a Habilitation Plan. Furthermore, the OPWDD issues Administrative Memoranda (ADMs) for waiver services that identify all elements required for billing Medicaid and provides recommended service documentation formats to ensure appropriate documentation of service. ADMs are available on the OPWDD website. The identification of Waiver services in the recipient's plan is subject to semi-annual review by the case manager. Identification of HCBS services in the person's plan is also the subject of several reviews that are described in New York State's Quality Improvement Strategy for this waiver and in section I-1.

c) OPWDD's Office of Audit Services is responsible for auditing waiver services on a sample basis to ensure that providers are appropriately documenting service provision. OPWDD's Division of Service Delivery performs a corporate compliance function that reviews service documentation of the OPWDD's Waiver claims on a sample basis. Claims not substantiated are subject to recovery. Additionally, the OMIG audits waiver providers as part of the OMIG's fiscal audit plan.

d) As part of the oversight of the SMA agency, the DOH SP/WMU reviews a statistically valid sample of OPWDD Individualized Service Plans (ISP) annually, (as described in Appendix D.1.g 7/8, #3) to validate that Medicaid claims are coded appropriately and paid in accordance with the reimbursement methodology specified in the Waiver agreement, as well as OPWDD policy and acceptable Medicaid practices. As part of this process, ISPs are thoroughly reviewed to assure that services billed via the Claim Detail Report (CDR) match the scope, amount, frequency and duration of services documented in the ISP. Claims not substantiated in the ISPs are subject to inquiry and if found to be unauthorized, are subject to recovery.

NYS controls changes to the MMIS system through the use of "Evolution Projects". The term "Evolution Projects" (EP) is used to describe an established project management protocol that coordinates all changes to the MMIS billing and data production to ensure Medicaid eligible individuals are receiving the correct services and that Medicaid Providers bill Medicaid correctly. An EP is a "blue print" to assure that all waiver billing activities follow and meet standard requirements and necessary computer changes related to Medicaid billing occur across relevant systems.

Each EP is assigned a number for tracking purposes. All EPs are monitored by the Evolution Control Board (ECB) that is chaired by the State Medicaid Director. The ECB meets every other month to review projects design, testing, performance and implementation.

An Evolution Project is a management tool used to assure that appropriate edit logic is applied to each project component revision through successful completion. It is a dynamic, consistent systemic approach to support, guide and improve project performance, outcomes and Medicaid billing accuracy.

The focus is to define, refine and manage Medicaid billing system developments or change, increase accountability, timeliness and quality, conserve resources and eliminate error or project failure.

The purpose of EPs is to bring all projects partners/pieces together to:
• review/analyze and assess federal and state legislation that may impact Medicaid recipients, programs and billing accuracy
• share information
• identify issues/make adjustments or corrections
• accommodate any changes
• assure deliverables
• monitor quality

e. **Billing and Claims Record Maintenance Requirement.** Records documenting the audit trail of adjudicated claims (including supporting documentation) are maintained by the Medicaid agency, the operating agency (if applicable), and providers of waiver services for a minimum period of 3 years as required in 45 CFR §92.42.

Appendix I: Financial Accountability

I-3: Payment (1 of 7)

a. **Method of payments -- MMIS** (*select one*):

- ○ **Payments for all waiver services are made through an approved Medicaid Management Information System (MMIS).**
- ◉ **Payments for some, but not all, waiver services are made through an approved MMIS.**

Specify: (a) the waiver services that are not paid through an approved MMIS; (b) the process for making such payments and the entity that processes payments; (c) and how an audit trail is maintained for all state and federal funds expended outside the MMIS; and, (d) the basis for the draw of federal funds and claiming of these expenditures on the CMS-64:

For services delivered prior to 4/1/14, the following applies:
a) All payments for services are ultimately adjudicated through NYS MMIS (referred to as eMedNY. However, for services provided by the OPWDD or through its OHCDS, claims are first submitted to the Medicaid Agency (New York State Department of Health - DOH) for payment of service on the Standard State Agency Claim Form (DOH-4103). Any discrepancies between payment and adjudication are reconciled with the Medicaid Agency (see I-2b and I-2d).
b) The Medicaid Agency makes the payments to OPWDD. All paid claims are ultimately processed and adjudicated through the eMedNY. Any claims ultimately denied or which have payment adjusted will also be processed through eMedNY.
c) For all payments made outside eMedNY, service information is validated by staff and inputted into OPWDDs tracking and billing system (TABS). TABS includes all information necessary to generate a claim for payment (the individual, the HCBS Waiver service, date of service and all necessary Medicaid identifiers). Based on service recording information in TABS, a claim for payment is prepared and submitted to DOH. The same information is used to transmit service information to eMedNY for adjudication. The DOH claim is ultimately reconciled against eMedNY adjudication. All service recording information in TABS is subject to the fiscal audit program described in I-1. All claim data history is available in the eMedNY Data Warehouse for up to five years.
d) The basis for the draw of Federal funds is the service information which is entered into TABS and subject to fiscal audit. OPWDD completes a DOH-4103 for submission to DOH. All claim expenditures are subsequently reported by DOH on the CMS-64.
For all waiver services with a service date of 4/1/2014 or thereafter the following applies:
The State (OPWDD) will process and adjudicate all claims for services provided by public providers, claims for services provided by its OHCDS, and for any services provided by private providers, through the State's MMIS prior to any claiming for Federal Financial Participation. Only valid adjudicated paid claims will be claimed on the quarterly expenditure CMS-64 reports.
For the months of April and May 2014 only, the State may draw the federal financial participation amount for waiver service claims with dates of service in April and May 2014 based on information from their TABS system prior to being adjudicated through the States MMIS under the following conditions:
1. The draw amount for April 2014 and May 2014, will only include claims for services provided by public providers and OHCDS providers.
2. The computation of the dollar amount of the draw will be based on the revised waiver service rates which will be retroactive to April 1, 2013 using the reimbursement methodology changes in NY waiver amendment NY.0238.R04.06, and based on the units of service for April and May 2014.
3. Prior to the draw for April and May 2014, the State shall submit to the CMS Regional Office, in reasonable detail, the computation of the draw amounts for April and May. CMS will review the draw amounts for reasonableness and use of the revised rates.
4. The State within 60 days following each month end of April and May 2014, will submit all claims associated with the draw amounts for these two months through the States MMIS for claim adjudication. The State will not duplicate the draw of FFP for these claims when submitted through the MMIS.
5. The State (OPWDD) will by the 30th of each month following May 1, 2014, submit to the CMS Regional Office a reconciliation of the draw amounts, including the amount of the draw less adjudicated claims for April and May 2014, with supporting documentation of MMIS claims adjudication for actual payments with dates of service in the months of April and May 2014. The format of the reconciliation shall be approved by CMS.
6. If there is any remaining balance of drawn amounts of Federal Financial Participation less fully adjudicated claims processed and paid though the States MMIS for services in the months of April and May 2014 on September 30, 2014, that balance shall reduce the subsequent draw amount no later than November 1, 2014.
7. If the State does not comply with all of the above conditions, CMS will immediately recover any balance related to the drawn amounts for April and/or May 2014.

Payments for waiver services are not made through an approved MMIS.

Specify: (a) the process by which payments are made and the entity that processes payments; (b) how and through which system (s) the payments are processed; (c) how an audit trail is maintained for all state and federal funds expended outside the MMIS; and, (d) the basis for the draw of federal funds and claiming of these expenditures on the CMS-64:

Payments for waiver services are made by a managed care entity or entities. The managed care entity is paid a monthly capitated payment per eligible enrollee through an approved MMIS.

Describe how payments are made to the managed care entity or entities:

Appendix I: Financial Accountability

I-3: Payment (2 of 7)

b. Direct payment. In addition to providing that the Medicaid agency makes payments directly to providers of waiver services, payments for waiver services are made utilizing one or more of the following arrangements (*select at least one*):

- ☐ **The Medicaid agency makes payments directly and does not use a fiscal agent (comprehensive or limited) or a managed care entity or entities.**
- ☐ **The Medicaid agency pays providers through the same fiscal agent used for the rest of the Medicaid program.**
- ☐ **The Medicaid agency pays providers of some or all waiver services through the use of a limited fiscal agent.**

Specify the limited fiscal agent, the waiver services for which the limited fiscal agent makes payment, the functions that the limited fiscal agent performs in paying waiver claims, and the methods by which the Medicaid agency oversees the operations of the limited fiscal agent:

- ☐ **Providers are paid by a managed care entity or entities for services that are included in the State's contract with the entity.**

Specify how providers are paid for the services (if any) not included in the State's contract with managed care entities.

Appendix I: Financial Accountability

I-3: Payment (3 of 7)

c. Supplemental or Enhanced Payments. Section 1902(a)(30) requires that payments for services be consistent with efficiency, economy, and quality of care. Section 1903(a)(1) provides for Federal financial participation to States for expenditures for services under an approved State plan/waiver. Specify whether supplemental or enhanced payments are made. *Select one:*

- ○ **No. The State does not make supplemental or enhanced payments for waiver services.**
- ◉ **Yes. The State makes supplemental or enhanced payments for waiver services.**

Describe: (a) the nature of the supplemental or enhanced payments that are made and the waiver services for which these payments are made; (b) the types of providers to which such payments are made; (c) the source of the non-Federal share of the supplemental or enhanced payment; and, (d) whether providers eligible to receive the supplemental or enhanced payment retain 100% of the total computable expenditure claimed by the State to CMS. Upon request, the State will furnish CMS with detailed information about the total amount of supplemental or enhanced payments to each provider type in the waiver.

Prior to the implementation of rate reform 7/1/14, waiver services include payments to pay health care enhancements allowing agencies to increase health care coverage and benefits for employees. We have been advised by CMS that effective with the 4/1/13 amendment to this waiver, such payments are considered supplemental payments. All enhanced or supplemental payments for private providers are included in the rates in the attached Addenda A.1-A.7.

Appendix I: Financial Accountability

I-3: Payment (4 of 7)

d. Payments to State or Local Government Providers. *Specify whether State or local government providers receive payment for the provision of waiver services.*

- ○ **No. State or local government providers do not receive payment for waiver services.** Do not complete Item I-3-e.
- ◉ **Yes. State or local government providers receive payment for waiver services.** Complete Item I-3-e.

Specify the types of State or local government providers that receive payment for waiver services and the services that the State or local government providers furnish:

HCBS Waiver services are provided directly by OPWDD through its Regional Offices. There are also a small number of local governments and a public university which are authorized as waiver providers. The following services are furnished by these providers: Residential Habilitation, Day Habilitation, Prevocational Services, Supported Employment, Respite, Family

Education and Training and Plan of Care Support Services. In addition, OPWDD is the provider of Environmental Modifications and Adaptive Technology services.

Appendix I: Financial Accountability

I-3: Payment (5 of 7)

e. Amount of Payment to State or Local Government Providers.

Specify whether any State or local government provider receives payments (including regular and any supplemental payments) that in the aggregate exceed its reasonable costs of providing waiver services and, if so, whether and how the State recoups the excess and returns the Federal share of the excess to CMS on the quarterly expenditure report. *Select one:*

- ○ **The amount paid to State or local government providers is the same as the amount paid to private providers of the same service.**
- ○ **The amount paid to State or local government providers differs from the amount paid to private providers of the same service. No public provider receives payments that in the aggregate exceed its reasonable costs of providing waiver services.**
- ◉ **The amount paid to State or local government providers differs from the amount paid to private providers of the same service. When a State or local government provider receives payments (including regular and any supplemental payments) that in the aggregate exceed the cost of waiver services, the State recoups the excess and returns the federal share of the excess to CMS on the quarterly expenditure report.**

Describe the recoupment process:

For state-provided HCBS waiver services with rate-based reimbursment, the cost of service provision is compare to the actual reimbursement as described below. When the Consolidated Fiscal Report (CFR) is completed, the State will calculate a final rate using the CFR applicable to the rate period for each waiver service using the rate methodology above. The same CFR lines which identify costs used to establish Interim Rates will be used to calculate the Final Rate; since the CFR used for the final rate will be the rate period CFR, trending or adjustments for differences in fringe benefits will not be used for the final rate. The final average rate for each service will be multiplied by the adjudicated paid Medicaid service units for services provided in the rate period to determine the allowable Medicaid cost. The final allowable Medicaid cost for each service will be compared to all interim payments, plus any other payments received and expected to be received under this section. If total payments for all waiver service exceed the final allowable Medicaid costs for such rate period, the State will treat any overage as an overpayment to the federal share of which shall be refunded on the next calendar quarter CMS-64 expenditure report. If the total payments received and expected to be received under this section for all Waiver Services are less than allowable Medicaid costs for such rate period, the State shall be entitled to claim the federal share of such difference.

Appendix I: Financial Accountability

I-3: Payment (6 of 7)

f. Provider Retention of Payments. Section 1903(a)(1) provides that Federal matching funds are only available for expenditures made by states for services under the approved waiver. *Select one:*

- ◉ **Providers receive and retain 100 percent of the amount claimed to CMS for waiver services.**
- ○ **Providers are paid by a managed care entity (or entities) that is paid a monthly capitated payment.**

Specify whether the monthly capitated payment to managed care entities is reduced or returned in part to the State.

Appendix I: Financial Accountability

I-3: Payment (7 of 7)

g. Additional Payment Arrangements

i. Voluntary Reassignment of Payments to a Governmental Agency. *Select one:*

- ◉ **No. The State does not provide that providers may voluntarily reassign their right to direct payments to a governmental agency.**

○ **Yes. Providers may voluntarily reassign their right to direct payments to a governmental agency as provided in 42 CFR §447.10(e).**

Specify the governmental agency (or agencies) to which reassignment may be made.

ii. Organized Health Care Delivery System. *Select one:*

○ **No. The State does not employ Organized Health Care Delivery System (OHCDS) arrangements under the provisions of 42 CFR §447.10.**

◉ **Yes. The waiver provides for the use of Organized Health Care Delivery System arrangements under the provisions of 42 CFR §447.10.**

Specify the following: (a) the entities that are designated as an OHCDS and how these entities qualify for designation as an OHCDS; (b) the procedures for direct provider enrollment when a provider does not voluntarily agree to contract with a designated OHCDS; (c) the method(s) for assuring that participants have free choice of qualified providers when an OHCDS arrangement is employed, including the selection of providers not affiliated with the OHCDS; (d) the method(s) for assuring that providers that furnish services under contract with an OHCDS meet applicable provider qualifications under the waiver; (e) how it is assured that OHCDS contracts with providers meet applicable requirements; and, (f) how financial accountability is assured when an OHCDS arrangement is used:

a) OPWDD operates as an OHCDS [see 42 CFR 447.10]. OPWDD qualifies as an OHCDS because it also provides direct waiver services with its own employees. The following services are available through OHCDS:
Residential Habilitation, Supervised and Supportive IRA Day Habilitation
Respite Services
Supported Employment
Pre Vocational
Community Habilitation

b) Under its OHCDS, OPWDD contracts with other providers to furnish HCBS waiver services. OPWDD only contracts with providers that are also HCBS Waiver providers outside the OHCDS. Qualified waiver providers may opt to provide waiver services directly or within the OHCDS.

Provider agencies that deliver services under this waiver are not required to contract with the designated OHCDS. Whether a non-profit organization contracts with the designated OHCDS or not, they are required to complete a waiver enrollment application which must be reviewed by OPWDD and ultimately approved by the single state Medicaid agency (New York State Department of Health).

c) Waiver participants may choose to receive waiver services through an OHCDS or directly from a qualified provider (see B-7a, regarding freedom of choice).

d) As previously noted, providers must go through the process of becoming an HCBS Waiver provider prior to delivering waiver services via the OHCDS contract. Because subcontractors under OPWDD's OHCDS are also separately qualified as HCBS waiver providers, these subcontractors are subject to OPWDD and DOH reviews and quality measures regarding qualified providers (see Appendix c-2). Providers that contract with the OHCDS are required to maintain service documentation that captures all required documentation elements.

e) OHCDS contracts between OPWDD and subcontracting entities are subject to New York State contracting requirements, and are reviewed and approved by the New York State Office of the Comptroller prior to payment to the subcontractor and Medicaid claiming. These OHCDS services are subject to audit by the Office of the State Comptroller, in addition to the Medicaid audit activities of OPWDD, DOH, and the OMIG. Contracts that OPWDD has with contractors under the OHCDS define the OHCDS as being in accordance with applicable federal rules at 42 C.F.R. 434 and 45 CFR.

f) In order to ensure the financial accountability of OHCDS payments, OPWDD has developed an electronic system for service reporting that interfaces with contract information and service authorization information. Effective with services delivered on or after 4/1/13, the rate methodology for OHCDS services will be one statewide rate, and adjustments to the rate will be made based on final audit findings or review, and subject to the methodology described in Addendum A.

SERVICE REPORTING
For each type of waiver service included in an OHCDS contract, OPWDD establishes a unique program in its Tracking and Billing System (TABS). This TABS program identifies the subcontractor agency,

the type of waiver service, the open (or close) date of the program, the eMedNY identifier used for claiming, and the contract identifier (used for registering contracts with Office of the State Comptroller). People whom the Regional Office authorizes to receive a particular OHCDS service, are then "added" to the TABS Program by Regional Office staff.

PAYMENT TO THE SUBCONTRACTOR
The contract payment amount the subcontractor is paid for each unit of the OHCDS service provided is maintained in TABS by Central Office staff. The amount the sub-contractor is paid is established using a budget methodology which is initially compared to the subcontractor's historical cost data, comparative costs of similar services in the region, and the level of need of the person being served. The contract, including the contract payment amount, is reviewed and approved by Office of the State Comptroller and the New York State Attorney General prior to the contract payment amount being input into TABS.

After verifying service delivery, the subcontractor agency inputs OHCDS service information directly into a web-based application that interfaces with TABS (i.e., subcontractor inputs the units of a particular service that are provided to a particular person, on a given date, under the identified contract). A subcontractor is only able to enter services in the web-based application if the Regional Office has authorized the service for a particular person, and the person has been added to the TABS program by the Regional Office. Based on the subcontractor service information and the contract payment information in TABS, an electronic file is created and transmitted to the New York State Office of the State Comptroller, which then issues payment to the subcontractor. Payment is made with 100% state funds.

MEDICAID PAYMENT PROCESSING
On a regularly scheduled basis the services provided by the OHCDS subcontractor are billed by OPWDD for Medicaid payment through eMedNY. In order to simplify and streamline Medicaid claiming, the amount claimed to Medicaid for OHCDS services utilizes an Agency Statewide prospective rate setting methodology that is established using the same components as are used when establishing provider-specific rates (see I-2). In developing the OHCDS prospective rate setting methodology, historical reimbursement and OHCDS proposals/budgets for all non-profit providers were analyzed. The resulting methodology uses averages derived from the analysis as the basis for the Medicaid rate. The methodology's use of averaging historical reimbursement and OHCDS proposals/budgets results in an overall equity in the Medicaid reimbursement. Effective with the 4/1/13 amendment the methdology for reimbursement of OHCDS services is described in Addendum A.

Payment processing of OHCDS services follows the same procedure as is used for HCBS Waiver services delivered by OPWDD staff (see I-3 a). OPWDD submits a claim form (Form 4103) to DOH for payment by service type. At the same time, OPWDD forwards a billing file to eMedNY for adjudication. The DOH claim is ultimately reconciled against eMedNY adjudication.

All OHCDS service recording information in TABS is subject to the fiscal audit program described in I-1. All claim data history is available in the eMedNY Data Warehouse for up to five years.

Beginning 4/1/2013, NYS has modified its OHCDS requirements to include the following activities:
1. The State shall identify provider cost in accordance with Generally Accepted Accounting Principles (GAAP).

2. The State shall annually report cost using a complete Consolidated Fiscal Report (CFR). The CFR annual cost report shall be audited by an Independent Certified Public Accountant (CPA), or the State may use the Compliance Review identified in the New York State Consolidated Fiscal Reporting and Claiming Manual as of April 1, 2013, in lieu of an audit; and the CPA shall render an opinion on the reported cost regarding reasonableness, compliance with GAAP, and that the CFR reported costs were determined in accordance with the cost principles described in the Medicare Provider Reimbursement Manual (HIM-15). Each Waiver service will be reported using a separate column of the CFR; in addition each waiver service provided by and OHCDS will also be reported using a separate column of the CFR.

3. Federal Financial Participation (FFP) will be based on the final reimbursable cost which will be limited to the lower of the actual amount paid to the Voluntary Providers, or the sum of each Voluntary Provider's OHCDS units multiplied by the Voluntary Provider's non-OHCDS waiver service rate for the applicable service.

iii. Contracts with MCOs, PIHPs or PAHPs. *Select one:*

- (●) **The State does not contract with MCOs, PIHPs or PAHPs for the provision of waiver services.**
- ( ) **The State contracts with a Managed Care Organization(s) (MCOs) and/or prepaid inpatient health plan(s) (PIHP) or prepaid ambulatory health plan(s) (PAHP) under the provisions of §1915(a)(1) of the Act for the delivery of waiver and other services. Participants may voluntarily elect to receive waiver and other services through such MCOs or prepaid health plans. Contracts with these health plans are on file at the State Medicaid agency.**

Describe: (a) the MCOs and/or health plans that furnish services under the provisions of §1915(a)(1); (b) the geographic areas served by these plans; (c) the waiver and other services furnished by these plans; and, (d) how payments are made to the health plans.

○ **This waiver is a part of a concurrent §1915(b)/§1915(c) waiver. Participants are required to obtain waiver and other services through a MCO and/or prepaid inpatient health plan (PIHP) or a prepaid ambulatory health plan (PAHP). The §1915(b) waiver specifies the types of health plans that are used and how payments to these plans are made.**

Appendix I: Financial Accountability

I-4: Non-Federal Matching Funds (1 of 3)

a. **State Level Source(s) of the Non-Federal Share of Computable Waiver Costs.** Specify the State source or sources of the non-federal share of computable waiver costs. *Select at least one*:

☐ **Appropriation of State Tax Revenues to the State Medicaid agency**

☐ **Appropriation of State Tax Revenues to a State Agency other than the Medicaid Agency.**

If the source of the non-federal share is appropriations to another state agency (or agencies), specify: (a) the State entity or agency receiving appropriated funds and (b) the mechanism that is used to transfer the funds to the Medicaid Agency or Fiscal Agent, such as an Intergovernmental Transfer (IGT), including any matching arrangement, and/or, indicate if the funds are directly expended by State agencies as CPEs, as indicated in Item I-2-c:

For services delivered by provider agencies, the source of funds for the State share is tax revenues appropriated to OPWDD. When provider agencies bill eMedNY for payment, the Department of Health covers the non-federal share expenditures in the first instance. Throughout the state fiscal year, such expenditures are applied against OPWDD appropriations by the transfer of funds from OPWDD to DOH.

State tax revenues are the source of funds for the state share for HCBS Waiver services delivered by NYS Office of People With Developmental Disabilities (OPWDD) and providers contracted by OPWDD under its Organized Health Care Delivery System. The non-federal share is appropriated to the DOH and paid to OPWDD along with the federal share.

☐ **Other State Level Source(s) of Funds.**

Specify: (a) the source and nature of funds; (b) the entity or agency that receives the funds; and, (c) the mechanism that is used to transfer the funds to the Medicaid Agency or Fiscal Agent, such as an Intergovernmental Transfer (IGT), including any matching arrangement, and/or, indicate if funds are directly expended by State agencies as CPEs, as indicated in Item I-2-c:

Appendix I: Financial Accountability

I-4: Non-Federal Matching Funds (2 of 3)

b. **Local Government or Other Source(s) of the Non-Federal Share of Computable Waiver Costs.** Specify the source or sources of the non-federal share of computable waiver costs that are not from state sources. *Select One*:

○ **Not Applicable**. There are no local government level sources of funds utilized as the non-federal share.

◉ **Applicable**

Check each that applies:

☐ **Appropriation of Local Government Revenues.**

Specify: (a) the local government entity or entities that have the authority to levy taxes or other revenues; (b) the source(s) of revenue; and, (c) the mechanism that is used to transfer the funds to the Medicaid Agency or Fiscal Agent, such as an Intergovernmental Transfer (IGT), including any matching arrangement (indicate any intervening entities in the transfer process), and/or, indicate if funds are directly expended by local government agencies as CPEs, as specified in Item I-2-c:

Local government cost sharing is a part of the financing of provider agency payments. IGTs from counties are part of the non-federal matching funds for provider agency payments made through the NYS Medicaid payment system. Payments are funded with 50% of federal funding and the balance funded through State funding or a combination of state and local funding.

☐ **Other Local Government Level Source(s) of Funds.**

Specify: (a) the source of funds; (b) the local government entity or agency receiving funds; and, (c) the mechanism that is used to transfer the funds to the State Medicaid Agency or Fiscal Agent, such as an Intergovernmental Transfer (IGT), including any matching arrangement, and/or, indicate if funds are directly expended by local government agencies as CPEs, as specified in Item I-2-c:

Appendix I: Financial Accountability

I-4: Non-Federal Matching Funds (3 of 3)

c. **Information Concerning Certain Sources of Funds.** Indicate whether any of the funds listed in Items I-4-a or I-4-b that make up the non-federal share of computable waiver costs come from the following sources: (a) health care-related taxes or fees; (b) provider-related donations; and/or, (c) federal funds. *Select one*:

◉ **None of the specified sources of funds contribute to the non-federal share of computable waiver costs**

○ **The following source(s) are used**

Check each that applies:

☐ **Health care-related taxes or fees**

☐ **Provider-related donations**

☐ **Federal funds**

For each source of funds indicated above, describe the source of the funds in detail:

Appendix I: Financial Accountability

I-5: Exclusion of Medicaid Payment for Room and Board

a. **Services Furnished in Residential Settings.** *Select one:*

○ **No services under this waiver are furnished in residential settings other than the private residence of the individual.**

◉ **As specified in Appendix C, the State furnishes waiver services in residential settings other than the personal home of the individual.**

b. **Method for Excluding the Cost of Room and Board Furnished in Residential Settings.** The following describes the methodology that the State uses to exclude Medicaid payment for room and board in residential settings:

When budgeting total costs for operating certified residences, room and board costs are isolated and excluded from budgeted costs associated with service delivery. The budgeted costs associated with service delivery are used to determine the payment rate for the residential habilitation services.

Appendix I: Financial Accountability

I-6: Payment for Rent and Food Expenses of an Unrelated Live-In Caregiver

Reimbursement for the Rent and Food Expenses of an Unrelated Live-In Personal Caregiver. *Select one:*

○ **No. The State does not reimburse for the rent and food expenses of an unrelated live-in personal caregiver who resides in the same household as the participant.**

◉ **Yes. Per 42 CFR §441.310(a)(2)(ii), the State will claim FFP for the additional costs of rent and food that can be reasonably attributed to an unrelated live-in personal caregiver who resides in the same household as the waiver participant. The State describes its coverage of live-in caregiver in Appendix C-3 and the costs attributable to rent and food for the live-in caregiver are reflected separately in the computation of factor D (cost of waiver services) in Appendix J. FFP for rent and food for a live-in caregiver will not be claimed when the participant lives in the caregiver's home or in a residence that is owned or leased by the provider of Medicaid services.**

The following is an explanation of: (a) the method used to apportion the additional costs of rent and food attributable to the unrelated live-in personal caregiver that are incurred by the individual served on the waiver and (b) the method used to reimburse these costs:

The following is an explanation of: (a) the method used to apportion the additional costs of rent and food attributable to the unrelated live-in personal caregiver that are incurred by the individual served on the waiver and (b) the method used to reimburse these costs:

OPWDD's Regional Office staff conduct a fair market appraisal for the monthly rent of the apartment to be leased by the service recipient, noting actual bedrooms vs. needed bedrooms and whether the lease is a related party transaction. The district office staff determines what if any, other benefits such as HUD subsidy, HEAP or food stamps the service recipient may be eligible to receive. These benefits are deducted from the household costs for rent, food and utilities prior to calculating costs associated with the live-in caregiver as follows:

The lesser of the actual rent or fair market rent is divided by the actual number of bedrooms to determine the portion of monthly rent associated with the live-in caregiver. Annual food and utility costs are estimated for the household, reviewed for reasonableness by district office staff, and divided by, the number of persons residing in the household times twelve months, to determine the amount associated with the live-in caregiver. Payment of the total calculated monthly amount associated with the live-in caregiver is made directly to the service recipient each month.

If the lease is a related party transaction, total payment for the portion of rent attributable to the live-in caregiver is further limited to the landlord's actual cost of ownership.

If the service recipient owns their own home and is making mortgage payments, the aforementioned process shall be used, substituting the annual interest paid on the mortgage in lieu of the rental amount. If there is no mortgage, reimbursement associated with the live-in caregiver will be limited to the pro rated share of utilities and food only.

Until 10/1/14, access to Live-in Caregiver services is restricted to individuals enrolled in the Consolidated Supports and Services self-direction program, who do not live in certified residences. Further, the person’s CCS budget/plan must list the live-in caregiver as self-hired staff and describe the live-in caregiver's role.

The FMS agency pays allowable Live in Care Giver expenses as follows:
• Payment of rent and utilities is made to the landlord or utility company
• Payment for food is reimbursement after presentation of a receipt approved by the CSS participant/designee. At the end of the calendar year, the FMS agency follows procedures for reconciliation of Medicaid receipts against payments from participant accounts. The total service cost for Live-in Caregiver in and of itself does not include any administrative charges by a provider.

Appendix I: Financial Accountability

I-7: Participant Co-Payments for Waiver Services and Other Cost Sharing (1 of 5)

a. **Co-Payment Requirements.** Specify whether the State imposes a co-payment or similar charge upon waiver participants for waiver services. These charges are calculated per service and have the effect of reducing the total computable claim for federal financial participation. *Select one:*

- (●) **No. The State does not impose a co-payment or similar charge upon participants for waiver services.**
- ( ) **Yes. The State imposes a co-payment or similar charge upon participants for one or more waiver services.**

i. **Co-Pay Arrangement.**

Specify the types of co-pay arrangements that are imposed on waiver participants (*check each that applies*):

Charges Associated with the Provision of Waiver Services *(if any are checked, complete Items I-7-a-ii through I-7-a-iv):*

- [ ] **Nominal deductible**
- [ ] **Coinsurance**
- [ ] **Co-Payment**
- [ ] **Other charge**

Specify:

Appendix I: Financial Accountability

I-7: Participant Co-Payments for Waiver Services and Other Cost Sharing (2 of 5)

a. **Co-Payment Requirements.**

ii. **Participants Subject to Co-pay Charges for Waiver Services.**

Answers provided in Appendix I-7-a indicate that you do not need to complete this section.

Appendix I: Financial Accountability

I-7: Participant Co-Payments for Waiver Services and Other Cost Sharing (3 of 5)

a. **Co-Payment Requirements.**

iii. **Amount of Co-Pay Charges for Waiver Services.**

Answers provided in Appendix I-7-a indicate that you do not need to complete this section.

Appendix I: Financial Accountability

I-7: Participant Co-Payments for Waiver Services and Other Cost Sharing (4 of 5)

a. **Co-Payment Requirements.**

iv. **Cumulative Maximum Charges.**

Answers provided in Appendix I-7-a indicate that you do not need to complete this section.

Appendix I: Financial Accountability

I-7: Participant Co-Payments for Waiver Services and Other Cost Sharing (5 of 5)

b. **Other State Requirement for Cost Sharing.** Specify whether the State imposes a premium, enrollment fee or similar cost sharing on waiver participants. *Select one*:

- (●) **No. The State does not impose a premium, enrollment fee, or similar cost-sharing arrangement on waiver participants.**
- ( ) **Yes. The State imposes a premium, enrollment fee or similar cost-sharing arrangement.**

Describe in detail the cost sharing arrangement, including: (a) the type of cost sharing (e.g., premium, enrollment fee); (b) the amount of charge and how the amount of the charge is related to total gross family income; (c) the groups of participants subject to cost-sharing and the groups who are excluded; and, (d) the mechanisms for the collection of cost-sharing and reporting the amount collected on the CMS 64:

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 1 (2014-15)			
		Enrollments	Average Cost	Average Utilization	Projected $$
Day Hab - Group Day Hab-Fee-for-Service (FFS)	Daily	42,463	$ 169.26	178	$ 1,278,478,012
Day Hab - Group Day Hab-Managed Care (MC)	Daily	0	$ 169.26	178	$ -
Day Hab - Individual Day Hab-FFS	Hourly (2014-15 only)	364	$ 42.38	300	$ 4,631,546
Day Hab - Individual Day Hab-MC	Hourly (2014-15 only)	0	$ 42.38	300	$ -
Live-In-Caregiver-FFS	Monthly	49	$ 760.91	9	$ 353,684
Live-In-Caregiver-MC	Monthly	0	$ 760.91	9	$ -
Pre-Voc - Site Based-FFS	Daily	8,908	$ 106.97	158	$ 150,524,026
Pre-Voc - Site Based-MC	Daily	0	$ 106.97	158	$ -
Pre-Voc - Community Based-FFS	Hourly	669	$ 41.56	1	$ 24,619
Pre-Voc - Community Based-MC	Hourly	0	$ 41.56	1	$ -
Res Hab - Cert Program Intensive Res Hab-FFS	Daily (effective 07/01/14)	27,664	$ 323.63	356	$ 3,189,439,802
Res Hab - Cert Program Intensive Res Hab-MC	Daily (effective 07/01/14)	0	$ 323.63	356	$ -
Res Hab - Cert Program Supportive Res Hab-FFS	Monthly	2,311	$ 3,916.95	12	$ 106,659,073
Res Hab - Cert Program Supportive Res Hab-MC	Monthly	0	$ 3,916.95	12	$ -
Family Care-FFS	Daily	1,987	$ 79.78	272	$ 43,181,287
Family Care-MC	Daily	0	$ 79.78	272	$ -
Respite - Self Directed-FFS	Hourly	351	$ 4.30	2,665	$ 4,018,484
Respite - Self Directed-MC	Hourly	0	$ 4.30	2,665	$ -
Respite - Hourly-FFS	Hourly	16,600	$ 5.88	1,138	$ 111,051,771
Respite - Hourly-MC	Hourly	0	$ 5.88	1,138	$ -
SEMP - Hourly-FFS	Hourly	8,431	$ 63.96	86	$ 46,214,130
SEMP - Hourly-MC	Hourly	0	$ 63.96	86	$ -
SEMP - Self Directed-FFS	Hourly	274	$ 25.44	939	$ 6,548,612
SEMP - Self Directed-MC	Hourly	0	$ 25.44	939	$ -
Community Transition Services-FFS	$10 Units	5	$ 10.00	240	$ 12,020
Community Transition Services-MC	$10 Units	0	$ 10.00	240	$ -
Fiscal Intermediary-FFS	Unit (3 Levels)	2,279	$ 525.35	10	$ 11,958,493
Fiscal Intermediary-MC	Unit (3 Levels)	0	$ 525.35	10	$ -
Individual Goods and Services-FFS	$10 Units	1,769	$ 10.00	213	$ 3,761,163
Individual Goods and Services-MC	$10 Units	0	$ 10.00	213	$ -

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 1 (2014-15) Continued			
		Enrollments	Average Cost	Average Utilization	Projected $$
Support Brokerage-FFS	Hourly	2,158	$ 40.00	20	$ 1,701,670
Support Brokerage-MC	Hourly	0	$ 40.00	20	$ -
Adaptive Technologies-FFS	Other	350	NA	NA	$ 2,500,000
Adaptive Technologies-MC	Other	0	NA	NA	$ -
Community Hab - Self-Direction-FFS	Hourly	3,430	$ 20.59	1,141	$ 80,455,424
Community Hab - Self-Direction-MC	Hourly	0	$ 20.59	1,141	$ -
Community Hab - Hourly-FFS	Hourly	14,621	$ 37.90	319	$ 176,523,649
Community Hab - Hourly-MC	Hourly	0	$ 37.90	319	$ -
Environmental Modifications-FFS	Other	7	NA	NA	$ 135,321
Environmental Modifications-MC	Other	0	NA	NA	$ -
Family Education and Training-FFS	Other	720	$ 74.03	1	$ 57,184
Family Education and Training-MC	Other	0	$ 74.03	1	$ -
Intensive Behavioral Services - Plan Fee-FFS	Other	31	$ 1,657.26	2	$ 110,538
Intensive Behavioral Services - Plan Fee-MC	Other	0	$ 1,657.26	2	$ -
Intensive Behavioral Services - Service Hours-FFS	Hourly	71	$ 67.73	16	$ 76,402
Intensive Behavioral Services - Service Hours-MC	Hourly	0	$ 67.73	16	$ -
Pathway to Employment-FFS	Hourly	280	$ 37.27	112	$ 1,168,557
Pathway to Employment-MC	Hourly	0	$ 37.27	112	
Plan of Care Support-FFS	Monthly	2,400	$ 240.40	3	$ 1,459,188
Plan of Care Support-MC	Monthly	0	$ 240.40	3	$ -
Total		XXXXX	XXXXX	XXXXX	$ 5,221,044,656

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 2 (2015-16)			
		Enrollments	Average Cost	Average Utilization	Projected $$
Day Hab - Group Day Hab-Fee-for-Service (FFS)	Daily	45,156	$ 169.43	178	$ 1,360,914,285
Day Hab - Group Day Hab-Managed Care (MC)	Daily	167	$ 169.43	178	$ 5,028,620
Day Hab - Individual Day Hab-FFS	Hourly (2014-15 only)	NA	NA	NA	$ -
Day Hab - Individual Day Hab-MC	Hourly (2014-15 only)	NA	NA	NA	$ -
Live-In-Caregiver-FFS	Monthly	59	$ 761.67	9	$ 425,829
Live-In-Caregiver-MC	Monthly	0	$ 761.67	9	
Pre-Voc - Site Based-FFS	Daily	8,870	$ 107.07	158	$ 150,063,392
Pre-Voc - Site Based-MC	Daily	36	$ 107.07	158	$ 611,158
Pre-Voc - Community Based-FFS	Hourly	1,755	$ 41.60	37	$ 2,665,501
Pre-Voc - Community Based-MC	Hourly	7	$ 41.60	37	$ 10,856
Res Hab - Cert Program Intensive Res Hab-FFS	Daily (effective 07/01/14)	28,735	$ 323.96	356	$ 3,314,148,736
Res Hab - Cert Program Intensive Res Hab-MC	Daily (effective 07/01/14)	114	$ 323.96	356	$ 12,928,506
Res Hab - Cert Program Supportive Res Hab-FFS	Monthly	2,271	$ 3,920.87	12	$ 106,665,753
Res Hab - Cert Program Supportive Res Hab-MC	Monthly	9	$ 3,920.87	12	$ 599,979
Family Care-FFS	Daily	1,993	$ 79.86	272	$ 43,344,847
Family Care-MC	Daily	8	$ 79.86	272	$ 171,418
Respite - Self Directed-FFS	Hourly	425	$ 4.30	2,665	$ 4,869,378
Respite - Self Directed-MC	Hourly	1	$ 4.30	2,665	$ 7,155
Respite - Hourly-FFS	Hourly	16,930	$ 5.89	1,138	$ 113,370,644
Respite - Hourly-MC	Hourly	25	$ 5.89	1,138	$ 166,574
SEMP - Hourly-FFS	Hourly	8,552	$ 64.02	86	$ 46,922,778
SEMP - Hourly-MC	Hourly	34	$ 64.02	86	$ 188,243
SEMP - Self Directed-FFS	Hourly	308	$ 25.47	939	$ 7,379,585
SEMP - Self Directed-MC	Hourly	1	$ 25.47	939	$ 29,605
Community Transition Services-FFS	$10 Units	6	$ 10.01	240	$ 14,432
Community Transition Services-MC	$10 Units	0	$ 10.01	240	$ -
Fiscal Intermediary-FFS	Unit (3 Levels)	2,346	$ 525.87	10	$ 12,324,443
Fiscal Intermediary-MC	Unit (3 Levels)	3	$ 525.87	10	$ 17,424
Individual Goods and Services-FFS	$10 Units	2,114	$ 10.01	213	$ 4,498,564
Individual Goods and Services-MC	$10 Units	3	$ 10.01	213	$ 6,360

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 2 (2015-16) Continued			
		Enrollments	Average Cost	Average Utilization	Projected $$
Support Brokerage-FFS	Hourly	2,585	$ 40.04	20	$ 2,040,487
Support Brokerage-MC	Hourly	4	$ 40.04	20	$ 2,885
Adaptive Technologies-FFS	Other	350	NA	NA	$ 2,500,000
Adaptive Technologies-MC	Other	0	NA	NA	
Community Hab - Self-Direction-FFS	Hourly	3,519	$ 20.59	1,141	$ 82,620,090
Community Hab - Self-Direction-MC	Hourly	7	$ 20.59	1,141	$ 158,956
Community Hab - Hourly-FFS	Hourly	14,825	$ 37.94	319	$ 179,150,735
Community Hab - Hourly-MC	Hourly	29	$ 37.94	319	$ 344,675
Environmental Modifications-FFS	Other	400	NA	NA	$ 5,250,000
Environmental Modifications-MC	Other	0	NA	NA	$ -
Family Education and Training-FFS	Other	749	$ 74.11	1	$ 59,540
Family Education and Training-MC	Other	0	$ 74.11	1	$ -
Intensive Behavioral Services - Plan Fee-FFS	Other	31	$ 1,658.92	2	$ 112,342
Intensive Behavioral Services - Plan Fee-MC	Other	0	$ 1,658.92	2	$ -
Intensive Behavioral Services - Service Hours-FFS	Hourly	1,626	$ 67.79	16	$ 1,751,996
Intensive Behavioral Services - Service Hours-MC	Hourly	0	$ 67.79	16	$ -
Pathway to Employment-FFS	Hourly	400	$ 37.31	112	$ 1,672,307
Pathway to Employment-MC	Hourly	1	$ 37.31	112	$ 2,364
Plan of Care Support-FFS	Monthly	2,457	$ 240.64	3	$ 1,495,631
Plan of Care Support-MC	Monthly	0	$ 240.64	3	$ -
Total		XXXXX	XXXXX	XXXXX	$ 5,464,536,074

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 3 (2016-17)			
		Enrollments	Average Cost	Average Utilization	Projected $$
Day Hab - Group Day Hab-Fee-for-Service (FFS)	Daily	46,615	$ 171.72	178	$ 1,423,868,807
Day Hab - Group Day Hab-Managed Care (MC)	Daily	1,032	$ 171.72	178	31,507,429
Day Hab - Individual Day Hab-FFS	Hourly (2014-15 only)	NA	NA	NA	$ -
Day Hab - Individual Day Hab-MC	Hourly (2014-15 only)	NA	NA	NA	$ -
Live-In-Caregiver-FFS	Monthly	67	$ 771.96	9	$ 491,995
Live-In-Caregiver-MC	Monthly	2	$ 771.96	9	11,667
Pre-Voc - Site Based-FFS	Daily	8,694	$ 108.52	158	$ 149,066,165
Pre-Voc - Site Based-MC	Daily	212	$ 108.52	158	3,642,491
Pre-Voc - Community Based-FFS	Hourly	3,678	$ 42.16	37	$ 5,660,517
Pre-Voc - Community Based-MC	Hourly	90	$ 42.16	37	138,317
Res Hab - Cert Program Intensive Res Hab-FFS	Daily (effective 07/01/14)	29,390	$ 328.33	356	3,436,476,656
Res Hab - Cert Program Intensive Res Hab-MC	Daily (effective 07/01/14)	698	$ 328.33	356	80,410,129
Res Hab - Cert Program Supportive Res Hab-FFS	Monthly	2,243	$ 3,973.80	12	105,959,702
Res Hab - Cert Program Supportive Res Hab-MC	Monthly	54	$ 3,973.80	12	3,595,352
Family Care-FFS	Daily	1,969	$ 80.94	272	43,413,841
Family Care-MC	Daily	47	$ 80.94	272	1,029,518
Respite - Self Directed-FFS	Hourly	494	$ 4.36	2,665	5,743,062
Respite - Self Directed-MC	Hourly	4	$ 4.36	2,665	49,980
Respite - Hourly-FFS	Hourly	17,206	$ 5.97	1,138	116,829,026
Respite - Hourly-MC	Hourly	150	$ 5.97	1,138	1,016,728
SEMP - Hourly-FFS	Hourly	8,604	$ 64.89	86	$ 47,844,788
SEMP - Hourly-MC	Hourly	207	$ 64.89	86	1,151,274
SEMP - Self Directed-FFS	Hourly	315	$ 25.81	939	$ 7,625,719
SEMP - Self Directed-MC	Hourly	8	$ 25.81	939	$ 183,495
Community Transition Services-FFS	$10 Units	8	$ 10.15	240	19,427
Community Transition Services-MC	$10 Units	0	$ 10.15	240	$ -
Fiscal Intermediary-FFS	Unit (3 Levels)	2,402	$ 532.97	10	12,784,574
Fiscal Intermediary-MC	Unit (3 Levels)	20	$ 532.97	10	$ 107,030
Individual Goods and Services-FFS	$10 Units	2,454	$ 10.15	213	5,293,910
Individual Goods and Services-MC	$10 Units	21	$ 10.15	213	$ 44,320

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 3 (2016-17) Continued			
		Enrollments	Average Cost	Average Utilization	Projected $$
Support Brokerage-FFS	Hourly	3,002	$ 40.58	20	2,401,935
Support Brokerage-MC	Hourly	25	$ 40.58	20	20,109
Adaptive Technologies-FFS	Other	349	NA	NA	$ 2,493,466
Adaptive Technologies-MC	Other	1	NA	NA	6,534
Community Hab - Self-Direction-FFS	Hourly	3,596	$ 20.87	1,141	$ 85,584,070
Community Hab - Self-Direction-MC	Hourly	41	$ 20.87	1,141	$ 977,470
Community Hab - Hourly-FFS	Hourly	14,949	$ 38.45	319	$ 183,080,996
Community Hab - Hourly-MC	Hourly	171	$ 38.45	319	$ 2,090,998
Environmental Modifications-FFS	Other	400	NA	NA	5,250,000
Environmental Modifications-MC	Other	0	NA	NA	$ -
Family Education and Training-FFS	Other	770	$ 75.11	1	62,033
Family Education and Training-MC	Other	0	$ 75.11	1	$ -
Intensive Behavioral Services - Plan Fee-FFS	Other	32	$ 1,681.31	2	114,844
Intensive Behavioral Services - Plan Fee-MC	Other	0	$ 1,681.31	2	$ -
Intensive Behavioral Services - Service Hours-FFS	Hourly	1,625	$ 68.71	16	$ 1,774,721
Intensive Behavioral Services - Service Hours-MC	Hourly	2	$ 68.71	16	$ 1,913
Pathway to Employment-FFS	Hourly	516	$ 37.81	112	$ 2,184,744
Pathway to Employment-MC	Hourly	4	$ 37.81	112	$ 18,290
Plan of Care Support-FFS	Monthly	2,523	$ 243.89	3	1,556,541
Plan of Care Support-MC	Monthly	0	$ 243.89	3	$ -
Total		XXXXX	XXXXX	XXXXX	$ 5,771,584,584

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 4 (2017-18)			
		Enrollments	Average Cost	Average Utilization	Projected $$
Day Hab - Group Day Hab-Fee-for-Service (FFS)	Daily	48,708	$ 176.01	178	$ 1,524,982,233
Day Hab - Group Day Hab-Managed Care (MC)	Daily	1,960	$ 176.01	178	$ 61,375,847
Day Hab - Individual Day Hab-FFS	Hourly (2014-15 only)	NA	NA	NA	$ -
Day Hab - Individual Day Hab-MC	Hourly (2014-15 only)	NA	NA	NA	$ -
Live-In-Caregiver-FFS	Monthly	77	$ 771.96	9	$ 565,481
Live-In-Caregiver-MC	Monthly	3	$ 771.96	9	$ 24,421
Pre-Voc - Site Based-FFS	Daily	8,740	$ 108.52	158	$ 149,853,990
Pre-Voc - Site Based-MC	Daily	389	$ 108.52	158	$ 6,672,383
Pre-Voc - Community Based-FFS	Hourly	7,057	$ 42.16	37	$ 10,859,676
Pre-Voc - Community Based-MC	Hourly	314	$ 42.16	37	$ 483,537
Res Hab - Cert Program Intensive Res Hab-FFS	Daily (effective 07/01/14)	31,049	$ 328.33	356	$ 3,631,377,080
Res Hab - Cert Program Intensive Res Hab-MC	Daily (effective 07/01/14)	1,343	$ 328.33	356	$ 154,805,374
Res Hab - Cert Program Supportive Res Hab-FFS	Monthly	2,290	$ 3,973.80	12	$ 107,295,810
Res Hab - Cert Program Supportive Res Hab-MC	Monthly	100	$ 3,973.80	12	$ 6,654,610
Family Care-FFS	Daily	2,007	$ 80.94	272	$ 44,238,110
Family Care-MC	Daily	87	$ 80.94	272	$ 1,910,487
Respite - Self Directed-FFS	Hourly	579	$ 4.36	2,665	$ 6,721,268
Respite - Self Directed-MC	Hourly	9	$ 4.36	2,665	$ 105,256
Respite - Hourly-FFS	Hourly	18,220	$ 5.97	1,138	$ 123,710,655
Respite - Hourly-MC	Hourly	285	$ 5.97	1,138	$ 1,937,335
SEMP - Hourly-FFS	Hourly	9,028	$ 64.89	86	$ 50,205,415
SEMP - Hourly-MC	Hourly	396	$ 64.89	86	$ 2,200,686
SEMP - Self Directed-FFS	Hourly	328	$ 25.81	939	$ 7,955,717
SEMP - Self Directed-MC	Hourly	14	$ 25.81	939	$ 348,728
Community Transition Services-FFS	$10 Units	12	$ 10.15	240	$ 29,513
Community Transition Services-MC	$10 Units	0	$ 10.15	240	$ -
Fiscal Intermediary-FFS	Unit (3 Levels)	2,472	$ 532.97	10	$ 13,161,094
Fiscal Intermediary-MC	Unit (3 Levels)	37	$ 532.97	10	$ 198,218
Individual Goods and Services-FFS	$10 Units	2,863	$ 10.15	213	$ 6,175,515
Individual Goods and Services-MC	$10 Units	43	$ 10.15	213	$ 93,009

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 4 (2017-18) Continued			
		Enrollments	Average Cost	Average Utilization	Projected $$
Support Brokerage-FFS	Hourly	3,500	$ 40.58	20	$ 2,799,823
Support Brokerage-MC	Hourly	53	$ 40.58	20	$ 42,168
Adaptive Technologies-FFS	Other	348	NA	NA	$ 2,488,324
Adaptive Technologies-MC	Other	2	NA	NA	$ 11,676
Community Hab - Self-Direction-FFS	Hourly	3,716	$ 20.87	1,141	$ 88,417,725
Community Hab - Self-Direction-MC	Hourly	77	$ 20.87	1,141	$ 1,821,085
Community Hab - Hourly-FFS	Hourly	15,640	$ 38.45	319	$ 191,547,755
Community Hab - Hourly-MC	Hourly	322	$ 38.45	319	$ 3,945,191
Environmental Modifications-FFS	Other	399	NA	NA	$ 5,242,803
Environmental Modifications-MC	Other	1	NA	NA	$ 7,197
Family Education and Training-FFS	Other	826	$ 75.11	1	$ 66,540
Family Education and Training-MC	Other	0	$ 75.11	1	$ -
Intensive Behavioral Services - Plan Fee-FFS	Other	33	$ 1,681.31	2	$ 119,439
Intensive Behavioral Services - Plan Fee-MC	Other	0	$ 1,681.31	2	$ -
Intensive Behavioral Services - Service Hours-FFS	Hourly	1,666	$ 68.71	16	$ 1,819,266
Intensive Behavioral Services - Service Hours-MC	Hourly	3	$ 68.71	16	$ 3,508
Pathway to Employment-FFS	Hourly	688	$ 37.81	112	$ 2,914,219
Pathway to Employment-MC	Hourly	10	$ 37.81	112	$ 43,891
Plan of Care Support-FFS	Monthly	2,702	$ 243.89	3	$ 1,666,689
Plan of Care Support-MC	Monthly	0	$ 243.89	3	$ -
Total		XXXXX	XXXXX	XXXXX	$ 6,216,898,747

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 5 (2018-19)			
		Enrollments	Average Cost	Average Utilization	Projected $$
Day Hab - Group Day Hab-Fee-for-Service (FFS)	Daily	49,487	$ 180.41	178	$ 1,588,095,412
Day Hab - Group Day Hab-Managed Care (MC)	Daily	2,805	$ 180.41	178	$ 90,032,020
Day Hab - Individual Day Hab-FFS	Hourly (2014-15 only)	NA	NA	NA	$ -
Day Hab - Individual Day Hab-MC	Hourly (2014-15 only)	NA	NA	NA	$ -
Live-In-Caregiver-FFS	Monthly	83	$ 811.04	9	$ 636,513
Live-In-Caregiver-MC	Monthly	5	$ 811.04	9	$ 38,765
Pre-Voc - Site Based-FFS	Daily	8,380	$ 114.01	158	$ 150,955,771
Pre-Voc - Site Based-MC	Daily	526	$ 114.01	158	$ 9,483,761
Pre-Voc - Community Based-FFS	Hourly	7,307	$ 44.30	37	$ 11,815,186
Pre-Voc - Community Based-MC	Hourly	459	$ 44.30	37	$ 742,286
Res Hab - Cert Program Intensive Res Hab-FFS	Daily (effective 07/01/14)	29,785	$ 344.95	356	$ 3,660,805,100
Res Hab - Cert Program Intensive Res Hab-MC	Daily (effective 07/01/14)	1,817	$ 344.95	356	$ 220,031,916
Res Hab - Cert Program Supportive Res Hab-FFS	Monthly	2,212	$ 4,174.97	12	$ 108,133,623
Res Hab - Cert Program Supportive Res Hab-MC	Monthly	136	$ 4,174.97	12	$ 9,506,792
Family Care-FFS	Daily	1,929	$ 85.04	272	$ 44,683,384
Family Care-MC	Daily	117	$ 85.04	272	$ 2,721,341
Respite - Self Directed-FFS	Hourly	627	$ 4.58	2,665	$ 7,645,432
Respite - Self Directed-MC	Hourly	14	$ 4.58	2,665	$ 167,037
Respite - Hourly-FFS	Hourly	17,783	$ 6.27	1,138	$ 126,854,701
Respite - Hourly-MC	Hourly	389	$ 6.27	1,138	$ 2,771,519
SEMP - Hourly-FFS	Hourly	8,719	$ 68.17	86	$ 50,943,032
SEMP - Hourly-MC	Hourly	539	$ 68.17	86	$ 3,149,867
SEMP - Self Directed-FFS	Hourly	326	$ 27.12	939	$ 8,298,924
SEMP - Self Directed-MC	Hourly	20	$ 27.12	939	$ 513,132
Community Transition Services-FFS	$10 Units	19	$ 10.66	240	$ 49,450
Community Transition Services-MC	$10 Units	0	$ 10.66	240	$ -
Fiscal Intermediary-FFS	Unit (3 Levels)	2,402	$ 559.96	10	$ 13,436,108
Fiscal Intermediary-MC	Unit (3 Levels)	50	$ 559.96	10	$ 282,252
Individual Goods and Services-FFS	$10 Units	3,101	$ 10.66	213	$ 7,027,410
Individual Goods and Services-MC	$10 Units	65	$ 10.66	213	$ 147,624

Appendix J Waiver Renewal Total Fiscals

Service	Unit of service	Renewal Year 5 (2018-19) Continued			
		Enrollments	Average Cost	Average Utilization	Projected $$
Support Brokerage-FFS	Hourly	3,795	$ 42.63	20	$ 3,189,384
Support Brokerage-MC	Hourly	80	$ 42.63	20	$ 66,999
Adaptive Technologies-FFS	Other	348	NA	NA	$ 2,545,904
Adaptive Technologies-MC	Other	2	NA	NA	$ 16,596
Community Hab - Self-Direction-FFS	Hourly	3,606	$ 21.92	1,141	$ 90,159,921
Community Hab - Self-Direction-MC	Hourly	104	$ 21.92	1,141	$ 2,595,691
Community Hab - Hourly-FFS	Hourly	15,211	$ 40.40	319	$ 195,726,388
Community Hab - Hourly-MC	Hourly	438	$ 40.40	319	$ 5,634,933
Environmental Modifications-FFS	Other	399	NA	NA	$ 5,240,021
Environmental Modifications-MC	Other	1	NA	NA	$ 9,979
Family Education and Training-FFS	Other	812	$ 78.91	1	$ 68,713
Family Education and Training-MC	Other	0	$ 78.91	1	$ -
Intensive Behavioral Services - Plan Fee-FFS	Other	32	$ 1,766.43	2	$ 122,723
Intensive Behavioral Services - Plan Fee-MC	Other	0	$ 1,766.43	2	$ -
Intensive Behavioral Services - Service Hours-FFS	Hourly	1,625	$ 72.19	16	$ 1,863,653
Intensive Behavioral Services - Service Hours-MC	Hourly	4	$ 72.19	16	$ 4,987
Pathway to Employment-FFS	Hourly	778	$ 39.72	112	$ 3,459,392
Pathway to Employment-MC	Hourly	16	$ 39.72	112	$ 72,671
Plan of Care Support-FFS	Monthly	2,636	$ 256.24	3	$ 1,708,356
Plan of Care Support-MC	Monthly	0	$ 256.24	3	$ -
Total		XXXXX	XXXXX	XXXXX	$ 6,431,454,670

NY Waiver – NY.0238.R05
Addendum A – Supplemental Rate Language

Provider Reimbursement for Waiver Services

Effective April 1, 2013, provider reimbursement for all Waiver Services will be governed by Part (A) of this Appendix I-2; and the associated supporting addenda. This Appendix describes the reimbursement for State Operated Providers, Organized Health Care Delivery System Providers, Non-State Government Providers, and Voluntary Providers.

Waiver services

The Waiver services include: Support Brokerage, Supported Employment, Family Education and Training, Intensive Behavioral, Pre-vocational, Community Habilitation, Community Transition, Consolidated Support Services, Day Habilitation, Financial Management Services/Agency with Choice, Plan of Care Support Services, Environmental Modifications, Respite, Residential Habitation, Adaptive Technology, Live-in Caregiver, Pathways to Employment, and Individual Directed Goods and Services.

I. Definitions Applicable to this Section

a. **Acuity Factor –** Factor developed through a regression analysis utilizing components of the Developmental Disabilities Profile (DDP) scores, average residential bed size, Willowbrook class indicators and historical utilization data to predict direct care hours needed to serve individuals. Factors are available on http://www.health.ny.gov/health_care/medicaid/rates/mental_hygiene/

b. **Allowable Capital Costs –** All necessary and proper capital costs that are appropriate and helpful in developing and maintaining the provision of HCBS waiver services to beneficiaries determined in accordance with the cost principles described in the Medicare Provider Reimbursement Manual (Publication-15) except as further defined below. This shall include, where appropriate, allowable lease/rental and ancillary costs; amortization of leasehold improvements and depreciation of real property; financing expenditures associated with the purchase of real property and related expenditures, and leasehold improvements.

i. With the exception of Live-In Caregiver services, allowable capital costs shall not include the costs of room.

ii. The capital component of a provider's rate will not include the costs identified in paragraph iii below.

Capital Costs of depreciation, and lease/ rental, of equipment and vehicles (annual lease, depreciation and interest). Annual capital reimbursement

identified in this paragraph will be included in the operating component of the provider's rate.

c. **Ancillary Costs** – Those costs identified in a lease in addition to monthly rent. These include, but are not limited to: special assessments, taxes, co-op or condo maintenance fees, utility payments assessed on the lessee by the lessor pursuant to the terms of the lease, and lessor-financed renovations billed as additional rent.

d. **Authorized Rate Period Units** – units approved by OPWDD Budget Office to deliver Day Habilitation Services. OPWDD Budget Office adjusts the units based on addition or subtraction of individuals as well as addition or subtraction of sites. These units are tracked on an ongoing basis and reported to DOH on a semi-annual basis (January and July). Based on the unit update the operating portion of the final target rate will not change. The capital portion will be adjusted by the change in units, which will change the overall Day Habilitation rate.

e. **Base Period** – For Public Providers only, the CFR period from which the Initial Period interim rate will be calculated.

   Base Period CFR – For the Public Providers, the CFR from three years prior to the initial rate period. For Non-State Government Providers and Voluntary Providers the initial period shall be 01/01/2011 through 12/31/2011 for providers reporting on a calendar year basis and 07/01/2010 through 06/30/2011 for providers reporting on a fiscal year basis. Subsequent rate cycles for Non-State Government Providers and Voluntary Providers will begin on 7/1/2015 and thereafter shall use the following; for providers reporting on a fiscal year, the CFR shall be the reporting period ending two years prior to the first day of the new rate cycle. For providers reporting on a calendar year the CFR shall be for the reporting period ending 1 ½ years prior to the first day of the new rate cycle.

f. **Base Operating Rate** – For Voluntary Providers, reimbursement amount calculated by dividing annual reimbursement related to the operating component of the rate by applicable units of service, both in effect as of June 30, 2014.

g. **Base Year** - For Non –State Government Providers and Voluntary Providers the consolidated fiscal report from which the initial target rate will be calculated for Supervised IRA, Supportive IRA and Day Habilitation will be January 1, 2011 through December 31, 2011 for providers reporting on a calendar year basis and July 1, 2010 through June 30, 2011 for providers reporting on a fiscal year basis. The consolidated fiscal report from which the initial target rate will be calculated for Site Based Pre Vocational

Services and Respite will be January 1, 2013 through December 31, 2013 for providers reporting on a calendar year basis and July 1, 2012 through June 30, 2013 for providers reporting on a fiscal year basis. For subsequent rate cycles, the base year shall mean the Consolidated Fiscal Report from two years prior to the rate period.

h. **Budget Neutrality Adjustment** – Factor applied to the end of the methodology, by service, to ensure the total annual target reimbursement is equivalent to the total annual base reimbursement. The factors can be found on: **http://www.health.ny.gov/health_care/medicaid/rates/mental_hygiene/**

i. **Capital Costs** – Costs that are related to the acquisition, lease and/or long-term use of land, buildings and construction equipment, leasehold improvements and vehicles.

j. **Consolidated Fiscal Report (CFR)** –The reporting tool utilized by all government and non-government providers to communicate annual costs incurred as a result of operating OPWDD programs and services, along with related patient utilization and staffing statistics. The CFR is the report and associated instructions as of April 1, 2013, identified by the New York State Education Department, and found on

http://www.oms.nysed.gov/rsu/Manuals_Forms/

k. **Department of Health (DOH) Regions -** Regions as defined by the Department of Health, assigned to providers based upon the geographic location of the provider's headquarters, as reported on the consolidated fiscal report. Such regions are as follows:

- Downstate: 5 boroughs of New York City, and counties of Nassau, Suffolk and Westchester;
- Hudson Valley: Counties of Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster;
- Upstate Metro: Counties of Albany, Erie, Fulton, Genesee, Madison, Monroe, Montgomery, Niagara, Onondaga, Orleans, Rensselaer, Saratoga, Schenectady, Warren, Washington, Wyoming;
- Upstate Non-Metro: Any counties not included in other regions.

l. **Depreciation** –The allowable cost based on historical costs and useful life of buildings, equipment, capital improvements and/or acquisition of real

property. The useful life shall be based on "The Estimated Useful Life of Depreciable Hospital Assets (2008 edition)"except that the useful life for day habilitation buildings will be 25 years. The depreciation method used shall be straight-line method.

m. **Developmental Disabilities Profile (DDP)** –The Confidential Needs Identification (DDP – 4 form) is used by the NYS Office For People With Developmental Disabilities (OPWDD) to help identify service needs for persons with developmental disabilities, whether the person is receiving services from OPWDD or not. The DDP-4 form provides information to OPWDD which is used for planning. A copy of the form and the guide for completion is available at the OPWDD website: http://www.opwdd.ny.gov/opwdd_resources/opwdd_ forms/home.

n. **Evacuation Score (E-Score)** – The score for a supervised community residence and/or individual residential alternative that is certified under Chapters 32 or 33 of the Residential Board and Care Occupancies of the NFPA 101 Life Safety Code (2000 edition) that is provided to the Department by OPWDD once a year. The factors can be found on: http://www.health.ny.gov/health_care/medicaid/rates/mental_hygiene/

o. **Facility** – the site or physical building where actual services are provided.

p. **Final Average Rate** - The final average rate is the reimbursement amount per unit of service for each waiver service, determined for those waiver services subject to annual reconciliation (public providers and OHCDS providers). The final average rate is determined using the final rate year reimbursable cost divided by the final rate year total units of service regardless of payer.

q. **Financing Expenditures** – Interest expense and fees charged for financing of costs related to the purchase/acquisition, alteration, construction, rehabilitation and/or renovation of real property, vehicles and equipment.

r. **Individual** – A person who is receiving a waiver service.

s. **Initial Period** – For Non State Government and Voluntary Providers the first 12 months of the two year rate cycle. For Public Providers the initial period will be the first 12 months of the three year rate cycle for rate periods 4/1/13 through 3/31/16. All rate periods thereafter, the initial period will be the first 12 months of the two year rate cycle.

t. **Lease/Rental and Ancillary Payments** – A facility's annual rental payments for real property a**n**d ancillary outlays associated with the property such as utilities and maintenance**.**

u. **Occupancy Adjustment** – An adjustment to the calculated daily rate of a Voluntary Agency which provides Supervised Residential Habilitation to account for days when Medicaid billing cannot occur because an individual has passed away or has moved to another site.

   i. For the initial rate period of **July 1, 2014 thru June 30, 2015; a Voluntary Agency will be paid 75% of the operating component for up to an annual total of 90 days per bed.**

   ii. For the rate periods beginning July 1, 2015 and thereafter; Voluntary Providers will receive an occupancy adjustment to the operating component of their rate for vacancy days. The occupancy adjustment percentage is calculated by dividing the sum of the agency's rate period retainer days, service days and the therapy days by 100% of the agency's certified capacity. The certified capacity is calculated taking into account capacity changes throughout the year, multiplied by 100% of the year's days. This adjustment will begin on July 1, 2015 and be recalculated on an annual basis based on the previous years' experience.

v. **Operating Costs** - All necessary and proper costs that are appropriate and helpful in developing and maintaining the provision of HCBS waiver services. Necessary and proper costs are costs that are common and accepted occurrences in the field of HCBS waiver services. These costs shall be determined in accordance with the cost principles described in the Medicare Provider Reimbursement Manual (Publication-15). This shall include allowable: program administration, direct care, support, clinical, fringe benefits, contracted personal service and non-personal service,

w. **Organized Health Care Delivery Service (OHCDS) Costs** – State Operated Provider Services will not include costs paid to OHCDS providers; these costs will be reported in a separate column of the CFR for each service, including applicable utilization statistics, and applicable allocation.

x. **OPWDD Region -** Regions as defined by the Office for People with Developmental Disabilities, assigned to providers based upon the geographic location of the provider's headquarters, as reported on the consolidated fiscal report. Such regions are as follows:

   - Region 1: 5 boroughs of New York City;

- Region 2: Counties of Suffolk, Nassau, Rockland, Westchester, Putnam;

- Region 3: Remaining counties in New York State not included in Region 1 or 2;

y. **Rate** – A reimbursement amount based on a computation using annual provider reimbursable cost divided by the applicable annual units of service.

z. **Rate Cycle – the rate cycle is a 24 month period that consists of two rate periods, with the exception of the first year for non State Government and Voluntary Providers whose first rate cycle will consist of a 12 month period and State providers whose first rate cycle will consist of a 36 month period. Public Providers rate cycle begins on 4/1; and non State Government and Voluntary Providers' rate cycle begins on 7/1 of each year.**

aa. **Rate Period** – The annual time period that rates are effective, for Public Providers the time period is April 1st through March 31st and for Voluntary Providers the time period through the transition of this methodology is, July 1st through June 30th.

bb. **Rate Period Capacity** – The Certified Capacity on the last day of the base rate period which includes any adjustments plus or minus made to the Operating Certificate as certified by OPWDD Division of Quality Improvement, which adjusts the Certified Capacity from the base rate period to the rate period.

cc. **Rebasing** – updating cost data in the methodology, using the CFR.

dd. **Reimbursable Cost** – The final allowable operating and capital costs of the rate year after all audit and /or other adjustments are made. Reimbursable cost will also be reduced by any applicable third party revenue or payments made by or on behalf of individuals receiving services. For Public Providers reimbursable cost for each Waiver service will be used to determine a final average rate per service.

ee. **Residential Room and Board** – Room means hotel or shelter type expenses including all property related costs such as rental or depreciation related to the purchase of real estate and furnishings; maintenance, utilities and related administrative services. Board means three meals a day or any other full nutritional regimen.

ff. **Retainer days** – are days of Medical leave or an associated day where any other institutional or in-patient Medicaid payment is made for providing

services to the beneficiary. A provider is limited to billing 14 Retainer days per rate year, per individual beneficiary.

gg. **Service days** – A day when paid Supervised IRA staff deliver residential habilitation to a person who is either resident in the Supervised IRA, or is absent from the IRA and receives residential habilitation services from paid Supervised IRA staff, and these services are of the same scope, frequency and duration as the services provided when the person is resident in the Supervised IRA.

hh. **Start-Up Costs –** Those costs associated with the opening of a new program. Start-up costs include pre-operational rent, utilities, staffing, staff training, advertising for staff, travel, security services, furniture, equipment and supplies.

ii. **Subsequent Period** – The second 12 months of the rate cycle.

jj. **Special Populations Funding** – An all-inclusive habilitation fee payment for Residential habilitation, and a different all-inclusive day habilitation fee paid to voluntary HCBS waiver providers that serve individuals who left an institutional setting or who have aged out (i.e., finished services in a residential school) between 11/01/2011 and 03/31/13. Special Populations Funding is time-limited and will sunset effective June 30, 2017. OPWDD is working on the development of a new~~,~~ assessment tool, the Comprehensive Assessment System (or CAS). OPWDD and DOH will evaluate the CAS-assessed needs of individuals leaving institutions and adjust the standard methodology to incorporate a needs-based acuity adjustment that will be described in the HCBS waiver amendment. Reimbursement for this Special Population will be from the Special Population Fee Table below for residential habilitation and day habilitation services.

kk. **Target Rate** – The rate in effect at the end of the transition period for each waiver service determined using the base year reimbursable cost for each respective provider for each respective service divided by the applicable annual units of service for all individuals, regardless of payer. The target rate is the rate after transition and during transition it will be a part of the rate based on the transition percentage schedule.

ll. **Therapy Day** – A therapy day is a day when the individual is away from the supervised residence and is not receiving services from paid Residential Habilitation staff and the absence is for the purpose of a visiting with family or friends, or a vacation. The therapy day must be described in the person's plan of care to be eligible for payment and the person may not receive another Medicaid-funded residential or in-patient service on that day.

mm. **Trend Factor** – A percentage applied to all applicable operating costs that represent inflations in the costs of goods and services as described in paragraph g of section III.

nn. **Units of Service** – The unit of measure varies by the type of service, i.e., hourly, daily, monthly, or one-time occurrence. The unit of measure used for the following waiver services are:

- Supervised Residential Habilitation IRA – Month/Day
  For Public Providers, Supervised Residential Habilitation services for the time period 04/01/14 through 06/30/14, will be billed at a monthly rate to the State's MMIS. OPWDD will maintain Medicaid day utilization statistics for State Operated Supervised Residential Habilitation services for this three month time period and will add them to the paid adjudicated MMIS days for State Operated Residential Habilitation services 07/01/2014 through 03/31/2015 for the CFR annual reconciliation for the State Fiscal year 04/01/2014 through 03/31/2015. For Non-State Government and Voluntary Providers the unit will be Day effective 7/1/14.
- Supportive Residential Habilitation IRA – Month
- Day Habilitation – Day
- Day Habilitation – Individual – Hour
- Pre-vocational - Site-based – Day
- Pre-vocational – Community based - Hourly
- Residential Habilitation – Family Care – Month/Day
- Respite – Hour
- Supported Employment – Monthly unit (Ending 6/30/2015)
- Supported Employment – Hourly unit (Effective 7/1/2015)
- Community Habilitation – Hour
- Pathway to Employment – Hour
- Community Transition Services – One time occurrence
- Intensive Behavioral Service
  Product Fee – One time occurrence
  Hourly Fee – Hour

oo. **Utilization Statistics** – For those waiver services which require an annual reconciliation, OPWDD will record and maintain total utilization units, and will report these units on the annual CFR. Unless specifically noted elsewhere, the Medicaid utilization units will be paid Medicaid units reported and adjudicated through the State's MMIS.

pp. **Vacancy days** – is an unoccupied period of time (a day) that a provider agency is unable to bill a residential habilitation daily rate, due to an

individual or individuals under the care of a provider agency no longer maintaining a residence, and no other individual occupies the residential bed for any reason. Vacancy days would result from an individual moving, or from death; they would not include an unoccupied period of time where individuals are absent due to Therapy days or Retainer days**.**

qq. **Wage Equalization –** is the sum of the provider average direct care hourly rate multiplied by seventy-five hundredths from the base period CFR and the applicable regional average direct care hourly rate multiplied by twenty-five hundredths from the base period CFR.

II. State Operated Providers, Organized Health Care Delivery System (OHCDS) Providers, Non-State Government Providers and Voluntary Providers Annual Reporting Requirements

a. State Operated Providers and Organized Health Care Delivery System (OHCDS) Providers

i. The State shall identify provider cost in accordance with Generally Accepted Accounting Principles (GAAP)

ii. The State shall annually report cost using a complete Consolidated Fiscal Report (CFR). The CFR annual cost report shall be audited by an Independent Certified Public Accountant (CPA), or the State may use the Compliance Examination identified in the New York State Consolidated Fiscal Reporting and Claiming Manual as of April 1, 2013, in lieu of an audit; and the CPA shall render an opinion on the reported cost regarding reasonableness, compliance with GAAP, and that the CFR reported costs were determined in accordance with the cost principles described in the Medicare Provider Reimbursement Manual (Publication-15). Each Waiver service will be reported using a separate column of the CFR; in addition each waiver service provided by an OHCDS will also be reported using a separate column of the CFR. Further description of the oversight of State cost reporting is included in Addendum A.8 and A.9.

iii. The CFR schedules to be completed annually by Public Providers are:

CFR – i Agency Identification and Certification Statement
CFR – ii / CFR- iiA – Accountant's Report (the State will use Addendum A.9 in lieu of CFR-ii/CFR-iiA)
CFR 1 – Program/Site data
CFR 2 – Agency Fiscal Summary
CFR 3 – Agency Administration
CFR 4 – Personal Services

CFR 4 A – Contracted Direct Care and Clinical Personal Services
CFR 5 – Transactions with Related Organizations/Individuals
CFR 6 – Governing Board and Compensation Summary
DMH 1 – Program Fiscal Summary
DMH 2 – ATL/Direct Contract Summary
DMH 3 – ATL & Direct Contracts Program Funding Source Summary
OPWDD 1 – ICF/DD Schedule of Service
OPWDD 2 – ICF/DD Medical Supplies
OPWDD 3 – HUD Revenues and Expenses
OPWDD 4 – Fringe Benefit Expense and Program Administration

b. Non-State Government Providers and Voluntary / Private Providers

i. The Non-State Government Providers and Voluntary Providers shall identify provider cost in accordance with Generally Accepted Accounting Principles (GAAP)

ii. The state will contract with an independent auditing entity for annual reviews of private provider (not-for-profit) HCBS cost reporting by January 1, 2015 for private providers of waiver services. The reviews will begin with fiscal years ending in calendar year 2013.

iii. The CFR schedules to be completed annually by Non-State Government Providers and Voluntary / Private Providers are:

CFR – i Agency Identification and Certification statement
CFR – ii / CFR- iiA – Accountant's Report
CFR 1 – Program/Site data
CFR 2 – Agency Fiscal Summary
CFR 3 – Agency Administration
CFR 4 – Personal Services
CFR 4 A – Contracted Direct Care and Clinical Personal Services
CFR 5 – Transactions with Related Organizations/Individuals
CFR 6 – Governing Board and Compensation Summary
DMH 1 – Program Fiscal Summary
DMH 2 – ATL/Direct Contract Summary
DMH 3 – ATL & Direct Contracts Program Funding Source Summary
OPWDD 1 – ICF/DD Schedule of Service
OPWDD 2 – ICF/DD Medical Supplies
OPWDD 3 – HUD Revenues and Expenses
OPWDD 4 – Fringe Benefit Expense and Program Administration
OPWDD 5 – Capital Schedule

III. Rate Setting for Public Providers and OHCDS Providers

a. There shall be one State-wide rate for each waiver service for State Operated Providers, and one State-Wide rate for each waiver service for OHCDS providers.

b. New York State will make an adjustment(s) to the rate resulting from any final audit findings or reviews.

c. Interim Rates for the Initial Period

   i. The interim rate for the initial period will be computed on the basis of a full 12-month base period CFR, adjusted in accordance with the interim methodology for the associated service.

   ii. The State will set rates using this interim methodology for eight (8) Waiver Services:

      (a) Day Habilitation
      (b) Residential Habilitation – IRA (Supervised Certified Site)
      (c) Residential Habilitation – IRA (Supportive Certified Site)
      (d) Residential Habilitation – Family Care
      (e) Respite Services
      (f) Supported Employment
      (g) Pre Vocational - Site-based
      (h) OHCDS Services

         1. Residential Habilitation Supervised and Supportive IRA
         2. Day Habilitation
         3. Respite Services
         4. Supported Employment
         5. Pre Vocational
         6. Community Habilitation

d. The calculation of the interim rates in effect as of 04/01/13 is described below:

   i. Day Habilitation –

      (a) Total Operating Costs from the CFR1 line 64
      (b) Less/plus Adjustments from CFR1 line 66
      (c) less Fringe Benefits - CFR1 line 20
      (d) less Provider Tax - CFR1 line 33
      (e) less Vacation accrual - CFR1 line 17

(f) The result of (a), (b), (c), (d) and (e) is trended as per paragraph g of this section
(g) Calculate anticipated fringe for the rate year using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(h) The sum of (f), (g) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

ii. Residential Habilitation – Supervised IRA

(a) Total Operating Costs from the CFR1 line 64
(b) Less/plus Adjustments from CFR1 line 66
(c) less Fringe CFR1 line 20
(d) less Provider Tax CFR1 line 33
(e) less Vacation accrual CFR1 line 17
(f) less Board components CFR1 lines 21, 22, 23, 26, 28, 37,38
(g) Less Maintenance Titles Maintenance Assistant, Maintenance Supervisor 1, Maintenance Supervisor 2, and Maintenance Supervisor 3 from CFR 4.
(h) The result of (a), (b), (c), (d), (e), (f) and (g) is trended as per paragraph g of this section
(i) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 less CFR 4 Maintenance Titles then trended as per paragraph g of this section.
(j) The sum of (h) and (i) are divided by units of service reported on CFR1 line 13.

1. For the period 04/01/13 through 03/31/2014 units of service reported on CFR1 line 13 for Residential Habilitation – Supervised IRA will be months, effective 04/01/2014 units will be days for total utilization and Medicaid utilization.

2. For the period 04/01/2014 and thereafter, see Section III h. iiii. Cost Reconciliation section describing units and associated reporting.

iii. Residential Habilitation – Supportive IRA

(a) Total Operating Costs from the CFR1 line 64
(b) Less/plus Adjustments from CFR1 line 66
(c) less Fringe CFR1 line 20
(d) less Provider Tax CFR1 line 33
(e) less Vacation accrual CFR1 line 17

(f) less Board components CFR1 lines 21, 22, 23, 26, 28, 37,38
(g) Less Maintenance Titles Maintenance Assistant, Maintenance Supervisor 1, Maintenance Supervisor 2, and Maintenance Supervisor 3 from CFR 4.
(h) The result of (a), (b), (c), (d), (e), (f) and (g) is trended as per paragraph g of this section
(i) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 less CFR 4 Maintenance Titles then trended as per paragraph g of this section.
(j) The sum of (h) and (i) are divided by units of service reported on CFR1 line 13.

iv. Residential Habilitation – Family Care

(a) Total Operating Costs from the CFR1 line 64
(b) Less/plus Adjustments from CFR1 line 66
(c) less Fringe CFR1 line 20
(d) less Provider Tax CFR line 33
(e) less Vacation accrual CFR1 line 17
(f) The result of (a), (b), (c), (d) and (e) is trended as per paragraph g of this section
(g) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(h) The sum of (f), (g) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

v. Respite –

(a) Total Operating Costs from the CFR1 line 64
(b) Less/plus Adjustments from CFR1 line 66
(c) less Fringe CFR1 line 20
(d) less Provider Tax CFR1 line 33
(e) less Vacation accrual CFR1 line 17
(f) The result of (a), (b), (c), (d) and (e) is trended as per paragraph g of this section
(g) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(h) The sum of (f), (g) and CFR1 property and equipment lines 48 and 63 are divided by reported units on line 13.

vi. Supported Employment –

(a) Total Operating Costs from the CFR1 line 64
(b) Less/plus Adjustments from CFR1 line 66

(c) less Fringe CFR1 line 20
(d) less Provider Tax CFR1 line 33
(e) less Vacation accrual CFR1 line 17
(f) The result of (a), (b), (c), (d) and (e) is trended as per paragraph g of this section
(g) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(h) The sum of (f), (g) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

vii. Pre Voc. (Site-based) –

(a) Total Operating Costs from the CFR1 line 64
(b) Less/plus Adjustments from CFR1 line 66
(c) less Fringe CFR1 line 20
(d) less Provider Tax CFR 1line 33
(e) less Vacation accrual CFR1 line 17
(f) The result of (a), (b), (c), (d), and (e) is trended as per paragraph g of this section
(g) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(h) The sum of (f), (g) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

e. The calculation of the interim rates in effect as of 04/01/16 is described below:

i. Day Habilitation –

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe Benefits - CFR1 line 20
(e) less Provider Tax - CFR1 line 33
(f) less Vacation accrual - CFR1 line 17
(g) The result of (a), (b), (c), (d) , (e) and (f) is trended as per paragraph g of this section
(h) Calculate anticipated fringe for the rate year using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(i) The sum of (g), (h) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

ii. Residential Habilitation – Supervised IRA

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR1 line 33
(f) less Vacation accrual CFR1 line 17
(g) less Board components CFR1 lines 21, 22, 23, 26, 28, 37,38
(h) Less Maintenance Titles Maintenance Assistant, Maintenance Supervisor 1, Maintenance Supervisor 2, and Maintenance Supervisor 3 from CFR 4.
(i) The result of (a), (b), (c), (d), (e), (f), (g) and (h) is trended as per paragraph g of this section
(j) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 less CFR 4 Maintenance Titles then trended as per paragraph g of this section.
(k) The sum of (i) and (j) are divided by units of service reported on CFR1 line 13.

iii. Residential Habilitation – Supportive IRA

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR1 line 33
(f) less Vacation accrual CFR1 line 17
(g) less Board components CFR1 lines 21, 22, 23, 26, 28, 37,38
(h) Less Maintenance Titles Maintenance Assistant, Maintenance Supervisor 1, Maintenance Supervisor 2, and Maintenance Supervisor 3 from CFR 4.
(i) The result of (a), (b), (c), (d), (e), (f), (g) and (h) is trended as per paragraph g of this section
(j) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 less CFR 4 Maintenance Titles then trended as per paragraph g of this section.

(k) The sum of (i) and (j) are divided by units of service reported on CFR1 line 13.

iv. Residential Habilitation – Family Care

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR line 33
(f) less Vacation accrual CFR1 line 17
(g) The result of (a), (b), (c), (d), (e) and (f) is trended as per paragraph g of this section
(h) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(i) The sum of (g), (h) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

v. Respite –

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR1 line 33
(f) less Vacation accrual CFR1 line 17
(g) The result of (a), (b), (c), (d), (e) and(f) is trended as per paragraph g of this section
(h) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(i) The sum of (g), (h) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

vi. Pre Voc. (Site-based) –

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR 1line 33
(f) less Vacation accrual CFR1 line 17

(g) The result of (a), (b), (c), (d), (e) and (f) is trended as per paragraph g of this section
(h) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(i) The sum of (g), (h) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

vii. Community Habilitation – The initial payment will be a fee, but the computation for reconciliation will use these data elements:

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR1 line 33
(f) less Vacation accrual CFR1 line 17
(g) The result of (a), (b), (c), (d),(e) and (f) is trended as per paragraph g of this section
(h) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.
(i) The sum of (g), (h) and CFR1 property and equipment lines 48 and 63 are divided by units of service reported on CFR1 line 13.

viii. OHCDS waiver services include: Supported Employment, Intensive Behavioral, Pre-vocational, Community Habilitation, Day Habilitation, Respite, and Residential Habilitation. OHCDS Services – Each Service will be calculated individually as follows:

(a) Total Operating Costs from the CFR1 line 64 three years prior to the rate period
(b) Plus Agency Administration Allocation from CFR1 line 65
(c) Less/plus Adjustments from CFR1 line 66
(d) less Fringe CFR1 line 20
(e) less Provider Tax CFR1 line 33
(f) less Vacation accrual CFR1 line 17
(g) The result of (a), (b), (c), (d), (e) and (f) is trended as per paragraph g of this section
(h) Calculate anticipated fringe using OSC Accounting bulletin mandated fringe percentage multiplied by Total PS CFR1 line 16 then trended as per paragraph g of this section.

(i) The sum of (g), (h) and CFR property and equipment lines 48 and 63 are divided by units of service reported CFR1 line 13.
(j) OHCDS residential habilitation services will not include expenditures for room and board.
(k) The final Reimbursable cost will be limited to the lower of the actual amount paid to the Voluntary Providers, or the sum of each Voluntary providers OHCDS units multiplied by the each Voluntary provider's non- OHCDS waiver service rate for the applicable service.

Initial Interim Rate Schedule – New York State will make an adjustment(s) to the rate resulting from any final audit findings or reviews.

Public Provider Waiver Services
Interim Rate schedule

Day Habilitation*	$203.96
Residential Habilitation - IRA (Certified Site)	$13,324.88
Residential Habilitation - Family Care	$1,701.44
Respite Services	$23.04
Supported Employment	$1,437.54
Pre Vocational	$66.80
OHCDS Residential Habilitation Supervised and Supportive IRA	$10,655.85
OHCDS Day Habilitation*	$189.70
OHCDS Respite Services	$25.76
OHCDS Supported Employment	$747.98
OHCDS Pre Vocational	$212.77
OHCDS Community Habilitation	$40.22

*24 hourly individual day habilitation hourly units will be counted as 1 day unit for reconciliation purposes

f. Subsequent Period Interim Rates.

New York State will update the interim rate based on the above methodology on an annual basis using the CFR from 3 years prior to the rate period.

g. State Operated Services initially paid using Interim Fees are subject to the annual reconciliation to rate period cost described in paragraph h below.

For the seven (7) waiver services listed below:

1. Intensive Behavioral Services– subject to reconciliation
2. Plan of Care Support Services– subject to reconciliation
3. Family Education and Training– subject to reconciliation
4. Community Habilitation – subject to reconciliation
5. Pathway to Employment– subject to reconciliation
6. Supported Employment (Intensive & Extended) – subject to reconciliation
7. Community Prevocational – subject to reconciliation

Interim Reimbursement paid to State Operated Facilities will be according to the fee schedule below:

STATE PROVIDER FEE SCHEDULES (effective as of April 1, 2013)

SERVICE TYPE	FEE	Unit of Service or Frequency
INTENSIVE BEHAVIORAL PRODUCT FEE	$1,650.00	One time only
INTENSIVE BEHAVIORAL HOURLY FEE	$16.38	Hourly
PLAN OF CARE SUPPORT SERVICES	$238.99	Max 4 per yr
FAMILY ED AND TRAINING(INDIVIDUAL)	$111.68	Max 2 per yr
FAMILY ED AND TRAINING(GROUP)	$55.84	Max 2 per yr
Community Habilitation (Individual – Serving 1)	$49.19	Hourly
Community Habilitation (Group Serving 2)	$30.74	Hourly
Community Habilitation (Group Serving 3)	$24.59	Hourly
Community Habilitation (Group Serving 4)	$21.52	Hourly

Additional STATE PROVIDER FEE SCHEDULES (effective as of July 1, 2015)

SERVICE TYPE	FEE	Unit of Service or Frequency
Pathway to Employment – Region 1	$43.04	Hourly
Pathway to Employment Region 2	$41.92	Hourly
Pathway to Employment – Region 3	$39.72	Hourly
Supported Employment – Intensive (Serving 1)	$69.97	Hourly
Supported Employment – Intensive (Serving 2+)	$27.99	Hourly
Supported Employment – Extended (Serving 1)	$69.97	Hourly
Supported Employment – Extended (Serving 2+)	$27.99	Hourly
Community Pre Vocational Services - Serving 1	$53.19	Hourly
Community Pre Vocational Services - Serving 2	$34.74	Hourly
Community Pre Vocational Services Serving 3	$28.59	Hourly
Community Pre Vocational Services - Serving 4	$25.52	Hourly

h. Trend Factors

i. The trend factor used will be the applicable years from the Medical Care Services Index for the period April to April of each year from www.BLS.gov/cpi; Table 1 Consumer Price Index for All Urban Consumers (CPI-U); U.S. city average, by expenditure category and commodity and service group.

ii. Generally, actual index values will be used for all intervening years between the base period and the rate period. However, because the index value for the last year immediately preceding the current rate period will not be available when the current rate is calculated, an average of the previous five years actual known indexes will be calculated and used as a proxy for that one year.

iii. A compounded trend factor will be calculated in order to bring base period costs to the appropriate rate period.

i. Cost Reconciliation using Final Rate(s)

i. When the CFR is completed, the State will calculate a final rate using the CFR applicable to the rate period for each waiver service using the rate methodology above; all State operated services paid initially using the fee schedule above will be subject to Cost Reconciliation. The same CFR lines which identify costs used to establish Interim Rates will be used to calculate the Final Rate; since the CFR used for the final rate will be the rate period CFR, trending or adjustments for differences in fringe benefits will not be used for the final rate.

ii. For the rate periods effective 04/01/13, 04/01/14 and 04/01/15, due to changes in CMS mandates in CFR reporting, Agency Administration Allocation identified in the Approved Cost Allocation Plan (CAP) that is related to the direct provision of Medicaid services by Public Providers from CFR1 line 65 must be added to Total Operating Costs from CFR1 line 64 to complete the cost reconciliation.

iii. The final average rate for each service will be multiplied by the adjudicated paid Medicaid service units for services provided in the rate period to determine the allowable Medicaid reimbursement. The final allowable Medicaid reimbursement for each service subject to annual reconciliation will be compared to all associated interim payments for each service, including those processed through eMedNY, for the applicable rate year. If such total payments for any Waiver Service, subject to the annual reconciliation, exceed the final allowable Medicaid reimbursement for such rate period, the State will

treat any overage as an overpayment of the federal share, and any overpayment shall be returned to CMS on the next calendar quarter CMS-64 expenditure report. If the total payments for a Waiver Service, subject to annual reconciliation, are less than the allowable Medicaid reimbursement for such rate period, the State shall be entitled to submit a claim for the federal share of such difference.

iv. Supervised IRA-Res Hab billing will convert from monthly units to daily units for services on or after July 1, 2014. For the period April 1, 2014 through June 30, 2014; OPWDD will manually account for all Supervised IRA Res-Hab days for total and Medicaid utilization; the State will report these utilization statistics as part of the annual reconciliation for the State fiscal year ending March 31, 2015. The Medicaid days used in the annual reconciliations, for the period July 1, 2014 and thereafter will be paid Medicaid adjudicated claims from the State's MMIS. Total Utilization Days for Supervised IRA-Res Hab will be maintained by OPWDD and annually reported as part of the annual reconciliation.

SEMP billing will convert from monthly units to daily for the period April 1, 2015 through June 30, 2015; OPWDD will manually account for all SEMP units for total and Medicaid utilization; the State will report these utilization statistics as part of the annual reconciliation for the State fiscal year ending March 31, 2015. For the three month period the state will extrapolate units from July 1, 2015 through March 31, 2016 for which the hourly rate is reported unit.

v. The State will complete a full CFR and cost reconciliation for each waiver service and will submit these reconciliations to CMS for review and approval within 18 months of the end of each rate period.

IV. Rate Setting for Non-State Governmental Providers and Voluntary Providers for Waiver Services.

a. The State will set rates for Services delivered to individuals with Developmental Disabilities as described below for the following three services; effective July 1, 2014.

   i. Residential Habilitation - Supervised IRA (Certified Site)
   ii. Residential Habilitation – Supportive IRA (Certified Site)
   iii. Day Habilitation – Group and Supplemental Group

b. Residential Habilitation – Supervised IRA

i. Target Rate Operating Cost Components

(a) Regional Average Direct Care Hourly Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region, for all Residential Habilitation–Supervised IRA, Residential Habilitation–Supportive IRA, Day Habilitation–Group and Supplemental Group, and Intermediate Care Facility for the Developmentally Disabled programs by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by DOH Region, for Residential Habilitation–Supervised IRA, Residential Habilitation–Supportive IRA, Day Habilitation–Group and Supplemental Group, and Intermediate Care Facility for the Developmentally Disabled programs.

(b) Target Rate Regional Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(c) Target Rate Regional Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(d) Target Rate Regional Average Direct Care Hourly Rate-Excluding General and Administrative = Add applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of

this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, and applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph.

(e) Target Rate Regional Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by DOH Region. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s) totaled by DOH Region, to calculate the General and Administrative quotient. Divide the Regional Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Regional Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the applicable Regional Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph.

(f) Target Rate Regional Average Direct Care Hourly Rate = Add applicable Regional Average Direct Care Hourly Wage, as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph, and applicable Regional General and Administrative Hourly Component as computed in subparagraph (e) of this paragraph.

(g) Target Rate Provider Average Direct Care Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by provider.

(h) Target Rate Provider Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(i) Target Rate Provider Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(j) Target Rate Provider Average Direct Care Hourly Rate-Excluding General and Administrative= Add Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, and Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph.

(k) Target Rate Provider Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by provider. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line

45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by provider, to calculate the General and Administrative quotient. Divide the Provider Average Direct Care Hourly Rate-Excluding General and Administrative as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Provider Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the Provider Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (j) of this paragraph.

(l) Target Rate Provider Average Direct Care Hourly Rate = Add Provider Average Direct Care Wage, as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph, and Provider General and Administrative Hourly Component as computed in subparagraph (k) of this paragraph.

(m) Statewide Average Direct Care Hours Per Person = From the CFR for the base year, divide Total Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s) by the sum of the capacities for all Voluntary Provider rate sheets for the base year (pro-rated for partial year sites).

(n) Statewide Average Direct Hours Per Provider = Multiply Statewide Average Direct Care Hours Per Person, by the applicable provider acuity factor , the applicable provider E-Score factor, and the provider Rate Sheet capacity for the base year (pro-rated for partial year sites).

(o) Statewide Budget Neutrality Adjustment Factor for Hours = From the CFR for the base year, divide Total Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s) by the Statewide Average Direct Hours Per Provider totaled for all providers.

(p) Calculated Direct Care Hours = Multiply Statewide Average Direct Care Hours Per Provider, as computed in subparagraph (n) of this paragraph by the Statewide Budget Neutrality Adjustment Factor for Hours, as computed in subparagraph (o) of this paragraph. Divide by the Rate Sheet capacity for the base year

(pro-rated for partial year sites). Multiply by Rate Period capacity for the Initial period.

(q) Regional Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s), totaled by DOH Region, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by DOH Region.

(r) Provider Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s), totaled by provider, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by provider.

(s) Provider Salaried Clinical Hours = From the CFR for the base year, divide Salaried Clinical hours (CFR4, Title 300s), totaled by provider, by Rate Sheet capacity for the base year (pro-rated for partial year sites). Multiply by Rate Period capacity for the Initial Period.

(t) Regional Average Contracted Clinical Hourly Wage = From the CFR for the base year, divide Contracted Clinical dollars (CFR4A, Title Code 300s) totaled by DOH Region by Contracted Clinical hours (CFR4A, Title Code 300s), totaled by DOH Region.

(u) Provider Contracted Clinical Hours = From the CFR for the base year, divide Contracted Clinical hours (CFR4A, Title 300s), totaled by provider, by Rate Sheet capacity for the base year (pro-rated for partial year sites). Multiply by Rate Period capacity for the Initial Period.

(v) Provider Direct Care Hourly Rate- Adjusted for Wage Equalization = multiply applicable Provider Average Direct Care Hourly Rate, as computed in subparagraph (l) of this paragraph, by .75. Multiply applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, by .25. Add results together.

(w) Provider Clinical Hourly Wage – Adjusted for Wage Equalization = multiply applicable Provider Average Clinical Hourly Wage by .75. Multiply applicable Regional Average Clinical Hourly Wage, by .25. Add results together.

(x) Provider Reimbursement from Direct Care Hourly Rate = multiply applicable Calculated Direct Care Hours, by applicable Provider Direct Care Hourly Rate-Adjusted for Wage Equalization.

(y) Provider Reimbursement from Clinical Hourly Wage = multiply applicable Provider Salaried Clinical hours, as computed in subparagraph (s) of this paragraph, by applicable Provider Clinical Hourly Wage-Adjusted for Wage Equalization.

(z) Provider Reimbursement from Contracted Clinical Hourly Wage = multiply applicable Provider Contracted Clinical hours, as computed in subparagraph (u) of this paragraph, by applicable Regional Average Contracted Clinical Hourly Wage.

(aa) Provider Operating Revenue = Add applicable Provider Reimbursement from Direct Care Hourly Rate, applicable Provider Reimbursement from Clinical Hourly Wage, and applicable Provider Reimbursement from Contracted Clinical Hourly Wage.

(bb) Statewide Budget Neutrality Adjustment Factor for Operating Dollars = Divide the sum of Operating Revenue from all provider Rate Sheets in effect on 6/30/14, by the sum of all Provider Operating Revenue as calculated in (aa) .

(cc) Total Provider Operating Revenue- Adjusted = multiply applicable Provider Operating Revenue, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars.

(dd) Initial Target Daily Operating Rate = Divide the sum of applicable Total Provider Operating Revenue - Adjusted as computed in (cc) and applicable Adjustments as computed in subdivision VII, by the applicable Rate Period capacity for the Initial Period. Divide such quotient by three hundred sixty five, or in the case of a leap year three hundred sixty six.

(ee) Final Operating Rate = Will be calculated as a combination of the Initial Target Daily Operating Rate as computed in (dd) and the Base Operating Rate as defined in paragraph h of subdivision I and as prescribed on the Transition Period schedule identified in paragraph h of this subdivision.

ii. Alternative Operating Cost Hourly Component – For providers that did not submit a cost report for Residential Habilitation – Supervised IRA services for the base year, the initial target daily operating rate shall be a regional daily operating rate, computed as follows:

(a) Reimbursement from Regional Direct Care Hourly Rate = from the base year, divide the Salaried and Contracted Direct Care

Hours (CFR4 and CFR4-A, Title 200s), totaled by DOH region, by Rate Sheet capacity for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, and by Rate Period capacity for the Initial Period.

(b) Reimbursement from Regional Clinical Hourly Wage = from the base year, divide the Salaried and Contracted Clinical Hours (CFR4 and CFR4-A, Title 300s), totaled by DOH region, by Rate Sheet capacity for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (q) of this paragraph, and by Rate Period capacity for the Initial Period.

(c) Provider Operating Revenue = Add applicable Reimbursement from Regional Direct Care Hourly Rate, as computed in subparagraph (a) of this paragraph, and applicable Reimbursement from Regional Clinical Hourly Wage, as computed in subparagraph (b) of this paragraph.

(d) Total Provider Operating Revenue – Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (c) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (bb) of paragraph i.

(e) Initial Target Regional Daily Operating Rate = Divide the sum of applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (d) of this paragraph and applicable Adjustments as computed in subdivision VII , by the applicable Rate Period capacity for the Initial Period. Divide such quotient by three hundred sixty five, or in the case of a leap year three hundred sixty six. This rate will be in effect until such time that the provider has submitted a cost report for a base year which will be used in the calculation of a subsequent rate period. If a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later, if a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement, effective the first day of the sixth month following the end of the

cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

c. . Residential Habilitation – Supportive IRA

i. Target Rate Operating Cost Hourly Components

(a) Regional Average Direct Care Hourly Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region, for all Residential Habilitation–Supervised IRA, Residential Habilitation–Supportive IRA, Day Habilitation–Group and Supplemental Group, and Intermediate Care Facility for the Developmentally Disabled programs by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by DOH Region, for Residential Habilitation–Supervised IRA, Residential Habilitation–Supportive IRA, Day Habilitation - Group and Supplemental Group, and Intermediate Care Facility for the Developmentally Disabled programs.

(b) Regional Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code

200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(c) Regional Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line 26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(d) Regional Average Direct Care Hourly Rate-Excluding General and Administrative = Add applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, and applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph.

(e) Regional Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by DOH Region. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line 22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by DOH Region, to calculate the

General and Administrative quotient. Divide the Regional Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Regional Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the applicable Regional Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph.

(f) Regional Average Direct Care Hourly Rate = Add applicable Regional Average Direct Care Hourly Wage, as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph, and applicable Regional General and Administrative Hourly Component as computed in subparagraph (e) of this paragraph.

(g) Provider Average Direct Care Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by provider.

(h) Provider Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(i) Provider Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line 26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s,

excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(j) Provider Average Direct Care Hourly Rate-Excluding General and Administrative= Add Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, and Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph.

(k) Provider Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by provider. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by provider, to calculate the General and Administrative quotient. Divide the Provider Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Provider Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the Provider Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (j) of this paragraph.

(l) Provider Average Direct Care Hourly Rate = Add Provider Average Direct Care Wage, as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph, and Provider General and Administrative Hourly Component as computed in subparagraph (k) of this paragraph.

(m) Statewide Average Direct Care Hours Per Person = From the CFR for the base year, divide Total Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s) by total capacity from the Rate Sheets for the base year (pro-rated for partial year sites).

(n) Statewide Average Direct Hours Per Provider = Multiply Statewide Average Direct Care Hours Per Person, as computed in subparagraph (m) of this paragraph, by the applicable provider acuity factor, and by the provider Rate Sheet capacity for the base year (pro-rated for partial year sites).

(o) Statewide Budget Neutrality Adjustment Factor for Hours = From the CFR from all Providers for the base year, divide Total Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s) by the total of Statewide Average Direct Hours per Provider for all providers, as computed in subparagraph (n) of this paragraph.

(p) Calculated Direct Care Hours = Multiply Statewide Average Direct Care Hours Per Provider, as computed in subparagraph (n) of this paragraph, by the Statewide Budget Neutrality Adjustment Factor for Hours, as computed in subparagraph (o) of this paragraph. Divide by the Rate Sheet capacity for the base year (pro-rated for partial year sites). Multiply by Rate Period capacity for the Initial period.

(q) Regional Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s), totaled by DOH Region, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by DOH Region.

(r) Provider Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s), totaled by provider, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by provider.

(s) Provider Salaried Clinical Hours = From the CFR for the base year, divide Salaried Clinical hours (CFR4, Title 300s), totaled by provider, by Rate Sheet capacity for the base year (pro-rated for partial year sites). Multiply by Rate Period capacity for the Initial Period.

(t) Regional Average Contracted Clinical Hourly Wage = From the CFR for the base year, divide Contracted Clinical dollars (CFR4A,

Title Code 300s) totaled by DOH Region by Contracted Clinical hours (CFR4A, Title Code 300s), totaled by DOH Region.

(u) Provider Contracted Clinical Hours = From the CFR for the base year, for each provider, divide Contracted Clinical hours (CFR4A, Title 300s) by Rate Sheet capacity for the base year (pro-rated for partial year sites). Multiply by Rate Period capacity for the Initial Period.

(v) Provider Direct Care Hourly Rate- Adjusted for Wage Equalization = Multiply applicable Provider Average Direct Care Hourly Rate, as computed in subparagraph (l) of this paragraph, by .75. Multiply applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, by .25. Add results together.

(w) Provider Clinical Hourly Wage – Adjusted for Wage Equalization = Multiply applicable Provider Average Clinical Hourly Wage, as computed in subparagraph (r) of this paragraph, by .75. Multiply applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (q) of this paragraph, by .25. Add results together.

(x) Provider Reimbursement from Direct Care Hourly Rate = Multiply applicable Calculated Direct Care Hours, as computed in subparagraph (p) of this paragraph, by applicable Provider Direct Care Hourly Rate-Adjusted for Wage Equalization, as computed in subparagraph (v) of this paragraph.

(y) Provider Reimbursement from Clinical Hourly Wage = Multiply applicable Provider Salaried Clinical hours, as computed in subparagraph (s) of this paragraph, by applicable Provider Clinical Hourly Wage-Adjusted for Wage Equalization, as computed in subparagraph (w) of this paragraph.

(z) Provider Reimbursement from Contracted Clinical Hourly Wage = Multiply applicable Provider Contracted Clinical hours, as computed in subparagraph (u) of this paragraph, by applicable Regional Average Contracted Clinical Hourly Wage, as computed in subparagraph (t) of this paragraph.

(aa) Provider Operating Revenue = Add applicable Provider Reimbursement from Direct Care Hourly Rate, as computed in subparagraph (x) of this paragraph, applicable Provider Reimbursement from Clinical Hourly Wage, as computed in subparagraph (y) of this paragraph, and applicable Provider

Reimbursement from Contracted Clinical Hourly Wage, computed in subparagraph (z) of this paragraph.

(bb) Statewide Budget Neutrality Adjustment Factor for Operating Dollars = Divide Operating Revenue from all provider Rate Sheets for the Initial Period, by Provider Operating Revenue for all providers, as computed in subparagraph (aa) of this paragraph.

(cc) Total Provider Operating Revenue - Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (aa) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (bb) of this paragraph.

(dd) Initial Target Monthly Operating Rate = Divide the sum of applicable Total Provider Operating Revenue - Adjusted as computed in (cc) and applicable Adjustments as computed in subdivision VII , by the applicable Rate Period capacity for the Initial Period. Divide such quotient by twelve.

(ee) Final Operating Rate = Will be calculated as a combination of the Initial Target monthly Operating Rate as computed in (dd) and the Base Operating Rate as defined in paragraph h of subdivision I and as prescribed on the Transition Period schedule identified in paragraph h of this subdivision.

ii. Alternative Operating Cost Hourly Component – For providers that did not submit a cost report for Residential Habilitation – Supportive IRA services for the base year, the initial target monthly operating rate shall be a regional daily operating rate, calculated as follows:

(a) Reimbursement from Regional Direct Care Hourly Rate = From the base year, divide the Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s), totaled by DOH region, by Rate Sheet capacity for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, and by Rate Period capacity for the Initial Period.

(b) Reimbursement from Regional Clinical Hourly Wage = From the base year, divide the Salaried and Contracted Clinical Hours (CFR4 and CFR4-A, Title 300s), totaled by DOH region, by Rate Sheet capacity for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional

Average Clinical Hourly Wage, as computed in subparagraph (q) of this paragraph, and by Rate Period capacity for the Initial Period.

(c) Provider Operating Revenue = Add applicable Reimbursement from Regional Direct Care Hourly Rate, as computed in subparagraph (a) of this paragraph, and applicable Reimbursement from Regional Clinical Hourly Wage, as computed in subparagraph (b) of this paragraph.

(d) Total Provider Operating Revenue – Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (c) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (bb) of paragraph i.

(e) Initial Target Regional Monthly Operating Rate = Divide the sum of applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (d) of this paragraph and applicable Adjustments as computed in subdivision VII, by the applicable Rate Period capacity for the Initial Period. Divide such quotient by twelve. This rate will be in effect until such time that the provider has submitted a cost report for a base year which will be used in the calculation of a subsequent rate period. If a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later, if a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement, effective the first day of the sixth month following the end of the cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.

If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim

Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

d. Day Habilitation – Group and Supplemental Group

i. Target rate Operating Cost Hourly Components

(a) Regional Average Direct Care Hourly Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region, for all Residential Habilitation–Supervised IRA, Residential Habilitation–Supportive IRA, Day Habilitation -Group and Supplemental Group, and Intermediate Care Facility for the Developmentally Disabled programs by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by DOH Region, for Residential Habilitation–Supervised IRA, Residential Habilitation–Supportive IRA, Day Habilitation - Group and Supplemental Group, and Intermediate Care Facility for the Developmentally Disabled programs.

(b) Regional Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(c) Regional Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff

Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(d) Regional Average Direct Care Hourly Rate-Excluding General and Administrative = Add applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, and applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph.

(e) Regional Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by DOH Region. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by DOH Region, to calculate the General and Administrative quotient. Divide the Regional Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Regional Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the applicable Regional Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph.

(f) Regional Average Direct Care Hourly Rate = Add applicable Regional Average Direct Care Hourly Wage, as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph, and applicable Regional General and Administrative Hourly Component as computed in subparagraph (e) of this paragraph.

(g) Provider Average Direct Care Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by provider.

(h) Provider Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(i) Provider Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(j) Provider Average Direct Care Hourly Rate-Excluding General and Administrative= Add Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph, Provider

Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, and Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph.

(k) Provider Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by provider. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by provider, to calculate the General and Administrative quotient. Divide the Provider Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Provider Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the Provider Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (j) of this paragraph.

(l) Provider Average Direct Care Hourly Rate = Add Provider Average Direct Care Wage, as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph, and Provider General and Administrative Hourly Component as computed in subparagraph (k) of this paragraph.

(m) Provider Direct Care Hours = From the CFR for the base year, add Salaried and Contracted Direct Care hours (CFR4 and CFR4A, Title 200s), by provider. Divide by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(n) Regional Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code

300s), totaled by DOH Region, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by DOH Region.

(o) Provider Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s), totaled by provider, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by provider

(p) Provider Salaried Clinical Hours = From the CFR for the base year, divide Salaried Clinical hours (CFR4, Title 300s), totaled by provider, by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(q) Regional Average Contracted Clinical Hourly Wage = From the CFR for the base year, divide Contracted Clinical dollars (CFR4A, Title Code 300s) totaled by DOH Region by Contracted Clinical hours (CFR4A, Title Code 300s), totaled by DOH Region.

(r) Provider Contracted Clinical Hours = From the CFR for the base year, divide Contracted Clinical hours (CFR4A, Title 300s), totaled by provider, by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(s) Provider Direct Care Hourly Rate- Adjusted for Wage Equalization = Multiply applicable Provider Average Direct Care Hourly Rate, as computed in subparagraph (l) of this paragraph, by .75. Multiply applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, by .25. Add results together.

(t) Provider Clinical Hourly Wage – Adjusted for Wage Equalization = Multiply applicable Provider Average Clinical Hourly Wage, as computed in subparagraph (o) of this paragraph, by .75. Multiply applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (n) of this paragraph, by .25. Add results together.

(u) Provider Reimbursement from Direct Care Hourly Rate = Multiply applicable Provider Direct Care Hours, as computed in subparagraph (m) of this paragraph, by applicable Provider Direct Care Hourly Rate-Adjusted for Wage Equalization, as computed in subparagraph (s) of this paragraph.

(v) Provider Reimbursement from Clinical Hourly Wage = Multiply applicable Provider Salaried Clinical Hours, as computed in subparagraph (p) of this paragraph, by applicable Provider

Clinical Hourly Wage-Adjusted for Wage Equalization, as computed in subparagraph (t) of this paragraph.

(w) Provider Reimbursement from Contracted Clinical Hourly Wage = Multiply applicable Provider Contracted Clinical Hours, as computed in subparagraph (r) of this paragraph, by applicable Regional Average Contracted Clinical Hourly Wage, as computed in subparagraph (q) of this paragraph.

(x) Provider Facility Reimbursement – From the CFR for the base year, add Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation of Equipment (CFR1 line 45), Insurance – Property and Casualty (CFR1 line 55), Housekeeping and Maintenance Staff (CFR4 Title 102), and Program Administration Property (OPWDD4 line 24), totaled by provider. Divide by the provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(y) Provider To/From Transportation Reimbursement – From the CFR for the base year, divide To/From Transportation Allocation (CFR1 line 68b), by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period. In the second rate period of the rate cycle Provider To/From transportation will be reimbursed by using the CFR one year after the base year, divide To/From Transportation Allocation (CFR1 line 68b), by provider billed units for the one year after the base year. Multiply by Rate Period authorized units for the Initial Period.

(z) Provider Operating Revenue = Add applicable Provider Reimbursement from Direct Care Hourly Rate, as computed in subparagraph (u) of this paragraph, applicable Provider Reimbursement from Clinical Hourly Wage, as computed in subparagraph (v) of this paragraph, applicable Provider Reimbursement from Contracted Clinical Hourly Wage, as computed in subparagraph (w) of this paragraph, applicable Provider Facility Reimbursement, as computed in subparagraph (x) of this paragraph, and Provider To/From Transportation Reimbursement, as computed in subparagraph (y) of this paragraph.

(aa) Statewide Budget Neutrality Adjustment Factor for Operating Dollars = Divide Operating Revenue from all provider Rate

Sheets in effect on 06/30/14, by Provider Operating Revenue for all providers, as computed in subparagraph (z) of this paragraph.

(bb) Total Provider Operating Revenue- Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (z) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (aa) of this paragraph.

(cc) Total Capital Reimbursement = Capital reimbursement shall be computed as described in subparagraph ii. of this paragraph

(dd) Initial Target Daily Rate = Add applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (bb) of paragraph I, adjustments as computed in subdivision VII and Total Capital Reimbursement, as computed in paragraph ii. Divide sum by applicable provider Rate Period authorized units for the Initial Period.

(ee) Final Operating Rate = Will be calculated as a combination of the Initial Target daily Operating Rate as computed in (dd) and the Base Operating Rate as defined in paragraph h of subdivision I and as prescribed on the Transition Period schedule identified in paragraph h of this subdivision

ii. Total Capital Reimbursement = Capital reimbursement shall be computed as follows:

(a) For Capital Assets Approved by OPWDD on Prior Property Approvals (PPA) prior to July 1, 2014. OPWDD regulations under 14 NYCRR Subpart 635-6 establish standards and criteria that describes the Capital acquisition and lease of real property assets which require approval by OPWDD.

1. Reimbursement rates will include actual straight line depreciation, amortization, Interest expense, financing expenses, and lease costs.

2. OPWDD will never approve lease or acquisition costs in excess of the lower of fair market value (as determined by an independent appraisal) or the provider's actual cost. However, OPWDD may limit the approved costs to a lower amount based on a review of the reasonableness of the transaction and price and a comparison of costs to those of similar facilities with the same characteristics. For example,

if a provider purchases or leases a property in an area in which real estate costs are considerably higher than those in the surrounding areas, and an equally suitable property in the surrounding area was available to the provider for purchase or lease at a lower cost, OPWDD may limit the allowable costs to those of properties in the surrounding area.

3. In no case will the total capital reimbursement associated with the capital asset exceed the total acquisition or renovation cost associated with a capital asset.

4. The State will identify each asset by provider, and provide a schedule of these assets identifying: total actual cost, reimbursable cost and useful life, determined by the prior property approval, total financing cost, allowable depreciation and allowable interest for the remaining useful life as determined by the prior approval, and the allowable reimbursement for each year of the remaining useful lives.

5. Notification to Providers. Each provider will receive supporting documentation detailing all real property to be included in the capital component of the provider's reimbursement rate.

(b) Capital rate for capital assets approved by OPWDD on Prior Property Approvals on or after July 1, 2014. OPWDD regulations under 14 NYCRR Subpart 635-6 establish standards and criteria that describes the Capital acquisition and lease of real property assets which require approval by OPWDD.

1. Reimbursement rates will include actual straight line depreciation, Interest expense, financing expenses, and lease cost established using generally accepted accounting principles, comply with CMS Publication – 15 (Medicare cost and cost allocation principles) and establish useful lives using the American Hospital Association (AHA) Estimated Useful Lives of Depreciable Hospital Assets Revised 2008 Edition.

2. OPWDD will never approve lease or acquisition costs in excess of the lower of fair market value (as determined by an independent appraisal) or the provider's actual cost. However, OPWDD may limit the approved costs to a lower amount based on a review of the reasonableness of the transaction and price and a comparison of costs to those of similar facilities with the same characteristics. For example,

if a provider purchases or leases a property in an area in which real estate costs are considerably higher than those in the surrounding areas, and an equally suitable property in the surrounding area was available to the provider for purchase or lease at a lower cost, OPWDD may limit the allowable costs to those of properties in the surrounding area.

3. In no case will the total capital reimbursement associated with the capital asset exceed the total acquisition, renovation and financing cost associated with a capital asset.

4. The State will identify each asset by provider, and provide a schedule of these assets identifying: total actual cost, reimbursable cost and useful life, determined by the prior property approval, total financing cost, allowable depreciation and allowable interest for the remaining useful life as determined by the prior approval, and the allowable reimbursement for each year of the remaining useful lives.

5. Notification to Providers. Each provider will receive supporting documentation detailing all real property to be included in the capital component of the provider's reimbursement rate.

6. The rate shall include applicable annual interest, depreciation and/or amortization of the approved appraised costs of an acquisition, or fair market value of a lease, and estimated costs for renovations, interest, soft costs and start-up expenses. For real property associated with day habilitation facilities, the useful life will be 25 years. Such costs shall be included in the rate as of the date of certification of the site, continuing until such time as actual costs are submitted to the State.

   Estimated costs shall be submitted in lieu of actual costs for a period no greater than two years. If actual costs are not submitted to the State within two years from the date of site certification, the amount of capital costs included in the rate shall be zero for each period in which actual costs are not submitted. DOH will retroactively adjust the capital component; and will return FFP to CMS on the next quarterly expenditure report (CMS-64) following the two year period. Once the final cost reconciliation has been received by the Department of Health, the rate will be retroactively adjusted to include reconciled costs.

7. DOH will verify and reconcile the costs submitted on a PPA by requiring the provider to submit to the State supporting documentation of actual costs. Actual costs shall be verified by the State reviewing the supporting documentation of such costs. A provider submitting such actual costs shall certify that the reimbursement requested reflects allowable capital costs and that such costs were actually expended by such provider. Under no circumstances shall the amount included in the rate under this subparagraph exceed the amount authorized in the approval process. Capital costs shall be amortized over a twenty-five year period for acquisition of properties or the life of the lease for leased sites. Capital improvements shall be depreciated over the life of the asset, or the revised useful life of the asset as a result of the capital improvements, whichever is greater. The amortization of interest shall not exceed the life of the loan taken. Amortization or depreciation shall begin upon certification by the provider of such costs. Start-up costs shall be amortized over a one year period beginning with certification of the site. If actual costs are not submitted to the State within two years from the date of site certification, the amount of capital costs included in the rate shall be zero for each period in which actual costs are not submitted.

   The Department will retroactively adjust capital reimbursement based on the actual cost verification process as described.

8. DOH will annually update Capital reimbursement for existing proprieties these changes will occur in, January for providers filing a CFR on a calendar year and July for providers filing a CFR on a fiscal year cycle. Also, DOH will update capital to include all newly approved PPA's twice a year(in January and July). The second update may require the Department to annualize the PPA, which could include more than 12 months of costs in the first year.

(c) CFR Reporting for Capital Assets

1. Expenses relating to Equipment are reported in two sections of CFR-1. Expensed equipment is included under the Other Than Personal Services (OTPS) section of CFR-1 and is included in the operating portion of the rate reimbursement (Lines 27 & 28). Depreciable equipment expenses are

included under the Equipment section of CFR-1 and all items in this section are included in the operating portion of the rate reimbursement (Lines 42-47).

2. Capital expenses related to real property are included under the Property section of the CFR-1 (Lines 49-62). With the exception of Insurance-Property or Casualty, which is reported on CFR-1, Line 55, Lines 49-62 are not included in the rates. Alternatively, providers are reimbursed for Capital in accordance with the capital schedule (III as identified above) and the Insurance-Property or Casualty reported on CFR-1, Line 55.

3. All expenses reported on CFR-1 are to be reported in accordance with Appendix X – Adjustments to Reported Costs, dated January 1, 2014, which details expenses that are considered to be non-allowable. CFR instructions for reporting depreciation and amortization are included in Appendix O of the January 1, 2014 CFR Manual , which can be found at:

   http://www.oms.nysed.gov/rsu/Manuals_Forms/Manuals/CFRManual/home.html

4. Capital Schedule. Beginning with the cost reporting period ending December thirty-first, two thousand fourteen, each provider shall submit to OPWDD, as part of the annual cost report, a Capital Schedule.

   This schedule will specifically identify the differences, by capital reimbursement item, between the amounts reported on the certified cost report, and the reimbursable items, including depreciation, interest and lease cost from the schedule of approved reimbursable costs.
   The provider's independent auditor will apply procedures to verify the accuracy and completeness of the capital schedule.

5. If a provider fails to file a cost report (including the capital reimbursement reconciliation schedule) by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later,, if a provider fails to file a cost report (including the capital schedule) by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's

Medicaid reimbursement, effective the first day of the sixth month following the end of the cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.

If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

iii. Alternative Operating Cost Component – For providers that did not submit a cost report for Day Habilitation – Group and Supplemental Group services for the base year, the initial target daily operating rate shall be a regional daily operating rate, calculated as follows:

(a) Reimbursement from Regional Direct Care Hourly Rate = From the base year, divide the Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s), totaled by DOH region, by billed units for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of paragraph i, and by Rate Period authorized units for the Initial Period.

(b) Reimbursement from Regional Clinical Hourly Wage = From the base year, divide the Salaried and Contracted Clinical Hours (CFR4 and CFR4-A, Title 300s), totaled by DOH region, by billed units for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (n) of paragraph i, and by Rate Period authorized units for the Initial Period.

(c) Provider Operating Revenue = Add applicable Reimbursement from Regional Direct Care Hourly Rate, as computed in subparagraph (a) of this paragraph, and applicable Reimbursement from Regional Clinical Hourly Wage, as computed in subparagraph (b) of this paragraph.

(d) Total Provider Operating Revenue – Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (c) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (bb) of paragraph i.

(e) Total Capital Reimbursement = Capital reimbursement shall be computed as described in paragraph ii

(f) Initial Target Regional Daily Operating Rate = Add applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (d) of this paragraph and Total Capital Reimbursement, as computed in subparagraph (e) of this paragraph. Divide sum by applicable provider Rate Period authorized units for the Initial Period. This rate will be in effect until such time that the provider has submitted a cost report for a base year which will be used in the calculation of a subsequent rate period. If a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later, if a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement, effective the first day of the sixth month following the end of the cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.

If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

e. Subsequent Rate Periods

i. Beginning one year after the initial period the methodology will rebase the costs used in the methodology described in this section using the 1/1 – 12/31 and 7/1 – 6/30 CFR one and one half and two years prior to the rate period respectively. Thereafter, the Department will follow a two year rate cycle utilizing the CFR one and one half and two years prior to the rate year respectively.

For years in which the Department of Health does not update the base year the Department will update to-from transportation from the CFR and update property as described above.

f. Transition period

i. Transition to new methodology. The reimbursement methodology for the operating portion of the rate described in IV of this section xx will be phased-in over a three-year period, with a year for purposes of the transition period meaning a twelve month period from July first to the following June thirtieth, and with full implementation in the beginning of the fourth year. During this transition period, the base operating rate will transition to the target rate according to the phase-in schedule immediately below. The base operating rate will remain

fixed and the target rate, as determined by the methodology in III of this section, will be updated to reflect rebasing of cost data.

	Phase-in Percentage	
Transition Year	**Base operating rate**	**Target Operating Rate**
Year One (July 1, 2014 – June 30, 2015)	75%	25%
Year Two (July 1, 2015 – June 30, 2016)	50%	50%
Year Three (July 1, 2016 - June 30, 2017)	25%	75%
Year Four (July 1, 2017 – June 30, 2018)	0%	100%

ii. Transition from Monthly to Daily unit of service, reimbursement for residential habilitation provided in supervised residences shall be according to a daily unit of service. From July 1, 2014 through June 30, 2015, providers which have rates for residential habilitation provided in supervised IRAs pursuant to section 1. 1. above shall determine and report to the Department retainer days and therapeutic leave days.

(a) Residential Habilitation – IRA Supervised conversion to daily on July 1, 2014

(b) Beginning July 1, 2014 distinct rate codes will be established in eMedNY to allow for the recording of service activity as follows:

1. Retainer service days as defined in section II.x above set at $0 to record days in which a hospital, SNF or other institutional claim is billed to Medicaid on the same day.

2. Therapy days set at the provider rate in effect in accordance with the rate methodology described in section II.dd above to allow for the reimbursement of therapy days as described in the person's plan of care.

3. Service days set at the provider rate in effect in accordance with the rate methodology described in section II.aa above to allow for the reimbursement of residential habilitation to the provider of service.

(c) Following the July 1, 2014 through June 30, 2015 service period, the state will reconcile the services recorded under the retainer day rate code in order to determine the amount of reimbursement owed to the provider. The retainer payment will be paid the full rate as calculated in section III.a.3.b above. Payment for retainer days will not exceed the 14 days allowed. Vacancy days as defined in section I.hh above will be paid at 75% of the daily rate as defined in section III.a.3.b above up to a maximum of 90 days per certified occupied bed.

(d) Beginning July 1, 2015 all edits will be operational in the eMedNY system as follows:

1. Limit to the reimbursement of retainer payments to 14 days at the full daily rate.

2. Vacancy days will be reimbursed through an occupancy adjustment as defined in section II.hh. The adjustment will be made prospectively at the beginning of the rate year and is based on the previous years' experience. The occupancy percentage will be calculated 90 days after the close of the previous rate year and will be applied retroactive to the beginning of the rate period. The reduced occupancy shall only be based on the number of Vacancy days occurring in the rate year which are described in the definition section and based on the previous years' experience. The Occupancy adjustment calculation will be Agency specific and will be the higher of the Agencies actual occupancy % or at 95% occupancy. The occupancy percentage % will be used to adjust the operating component of the rate for the rate year.

g. The attached addenda are applicable to the following services as of 7/1/14. On a quarterly basis the State will submit any necessary updated Addenda in the form of a waiver amendment for CMS approval.

i. Individual Day Habilitation - See Addendum A.1 ending 9/30/15
ii. Pre Voc – See Addendum A.2
iii. Consolidated Supports and Services (CSS) – See Addendum A.4 (CSS) ending 9/30/14
iv. Family Care--A.5.b)
v. Respite Services – See Addendum A.6 (Respite)
vi. Consolidated Supports and Services (CSS) Annual Cap – See Addendum A.7 (CSS-annual) ending 9/30/14

h. The following services as of 7/1/14 will be reimbursed based on the fee schedules below.

i. Community Habilitation
ii. Intensive Behavioral Services
iii. Plan of Care Support Services
iv. Family Education and Training
v. Supported Employment Services (SEMP)
vi. Pathway to Employment
vii. Special Populations Funding

(a) Special Populations Funding is not a separate service category, it is a special funding level that supports not-for-profit agencies to provide HCBS Waiver services to support individuals who are transitioning from institutional programs to more individualized and integrated opportunities in the community. The transition from institutional to community living is part of OPWDD's transformational agenda and commitment to the federal Centers for Medicare and Medicaid Services (CMS). This enhanced funding is essential to ensuring appropriate supports are available for individuals leaving institutional programs, or other high-needs populations, not only for clinical and direct support staff, but also to ensure that they are able to fully integrate into their communities. The specialized funding is available for residential habilitation and for day services (Day Habilitation or Prevocational Services). The specialized funding level is also available for individuals who opt to self-direct their services and serves as the Personal Resource Allocation (PRA) level up to which the person may budget for his or her services.

(b) Specialized funding is available for individuals who left an institution between 11/01/2011 and 03/31/2013 and for the period of 04/01/14 through 6/30/17, and is available to individuals who transitioned from Multiply Disabled Units, Developmental Centers, Local Intensive Treatment Units, Autism Units & Special Behavioral Units. Highly Complex funding is

available for individuals who left an institution between 11/01/2011 and 03/31/2013 and for the period of 04/01/14 through 6/30/17, and is available to individuals who transitioned from Centers for Intensive Treatment, Regional Intensive Treatment Units, Children's Residential Programs, Residential schools and individuals who left other institutional settings but have higher level of needs. A separate payment rate is available for individuals who leave a Skilled Nursing Facility between the period of 11/01/2011 and 03/31/2013 and for the period of 04/01/14 through 6/30/17.

VOLUNTARY PROVIDER FEE SCHEDULES

Community Habilitation Services

SERVICE TYPE	REGION	UNIT OF SERVICE	INDIVIDUAL SERVING 1	GROUP SERVING 2	GROUP SERVING 3	GROUP SERVING 3+
Community Hab	1	Hourly	$37.05	$23.16	$18.53	$16.21
Community Hab	2	Hourly	$38.39	$23.99	$19.20	$16.80
Community Hab	3	Hourly	$37.51	$23.44	$18.76	$16.41

Intensive Behavioral Services One Time Product Fee

	REGION	FEE
DDRO 1	Western & Finger Lakes	$1,625.00
DDRO 2	Central, Broome & Sunmount	$1,625.00
DDRO 3	Capital District	$1,625.00
DDRO 3	Hudson Valley & Taconic	$1,750.00
DDRO 4	Metro, Brooklyn, Staten Island, Fineson	$1,875.00
DDRO 5	Long Island	$1,750.00

Intensive Behavioral Services on going Hourly Fee

	REGION	¼ HOUR BILLING UNIT
DDRO 1	Western & Finger Lakes	$16.25
DDRO 2	Central, Broome & Sunmount	$16.25
DDRO 3	Capital District	$16.25
DDRO 3	Hudson Valley & Taconic	$17.50
DDRO 4	Metro, Brooklyn, Staten Island, Fineson	$18.75
DDRO 5	Long Island	$17.50

Plan of Care Support Services (PCSS)

SERVICE TYPE	UNIT	FEE
INITIAL	One Time	$716.97
ON GOING	Maximum of 4 units per year	$238.99

Family Education and Training (FET)

SERVICE TYPE	UNIT	FEE
Individual	Max of 2 units per year	$111.68
Group	Max of 2 units per year	$55.84

Supported Employment Services (SEMP)

LEVEL OF SUPPORT	UNIT OF SERVICE	NYC FEES	REST OF THE STATE
1	Month	$538	$386
2	Month	$720	$515
3	Month	$812	$581

Pathway to Employment—Fee is hourly per person

REGION	UNIT OF SERVICE	INDIVIDUAL SUPPORTING 1	GROUP SUPPORTING 2-3
1	Hour	$43.04	$37.66
2	Hour	$41.89	$35.61
3	Hour	$39.70	$33.74

Special Populations Funding for Institutional Transitions

Funding Level	Region	Residential/ Daily Unit of Service	Day Services (Day Habilitation and Pre Vocational Services)/ Daily Unit of Service
Specialized LOC	Upstate	$412.33	$174.71
Specialized LOC	Downstate	$455.89	$194.09
Highly Complex LOC	Upstate	$469.86	$200.29
Highly Complex LOC	Downstate	$519.18	$215.97
Skilled Nursing Facility	Upstate	$338.36	N/A
Skilled Nursing Facility	Downstate	$373.97	N/A

i. The attached addenda are applicable to the following services as of 1/1/15. On a quarterly basis the State will submit any necessary updated Addendums in the form of a waiver amendment for CMS approval.

   i. Individual Day Habilitation See Addendum A.1 ending 9/30/15)

ii. Pre Voc – See Addendum A.2
iii. Family Care--See A.5.b)
iv. Respite Services – See Addendum A.6 (Respite)

j. The following services will be reimbursed based on the fee schedules below as of 1/1/15:

i. Community Habilitation
ii. Supported Employment Services (SEMP)
iii. Special Populations Funding

VOLUNTARY PROVIDER FEE SCHEDULES

Community Habilitation Services

SERVICE TYPE	REGION	UNIT OF SERVICE	INDIVIDUAL SERVING 1	GROUP SERVING 2	GROUP SERVING 3	GROUP SERVING 3+
Community Hab	1	Hourly	$37.75	$23.59	$18.88	$16.52
Community Hab	2	Hourly	$39.13	$24.46	$19.57	$17.12
Community Hab	3	Hourly	$38.23	$23.90	$19.12	$16.73

Supported Employment Services (SEMP)

LEVEL OF SUPPORT	UNIT OF SERVICE	NYC FEES	REST OF THE STATE
1	Month	$544.83	$390.91
2	Month	$729.14	$521.55
3	Month	$822.30	$588.39

Special Populations Funding for Institutional Transitions

Funding Level	Region	Residential / Daily Unit of Service	Day Services (Day Habilitation and Pre Vocational Services / Daily Unit of Service
Specialized LOC	Upstate	$ 418.78	$ 176.64
Specialized LOC	Downstate	$ 463.02	$ 196.33
Highly Complex LOC	Upstate	$ 477.17	$ 202.59
Highly Complex LOC	Downstate	$ 527.25	$ 218.41
Skilled Nursing Facility	Upstate	$ 343.57	N/A
Skilled Nursing Facility	Downstate	$ 379.73	N/A

k. The attached addenda are applicable to the following services as of 4/1/15. On a quarterly basis the State will submit any necessary updated Addendums in the form of a waiver amendment for CMS approval.

   i. Individual Day Habilitation - See Addendum A.1 ending 9/30/15)
   ii. Pre Voc – See Addendum A.2
   iii. Residential Habilitation — Family Care—See Addendum A.5.b
   iv. Respite Services – See Addendum A.6 (Respite)

l. The following services will be reimbursed based on the fee schedules below as of 4/1/15:

   i. Community Habilitation
   ii. Intensive Behavioral Services
   iii. Plan of Care Support Services
   iv. Supported Employment Services (SEMP)
   v. Special Populations Funding

VOLUNTARY PROVIDER FEE SCHEDULES

Community Habilitation Services

SERVICE TYPE	REGION	UNIT OF SERVICE	INDIVIDUAL SERVING 1	GROUP SERVING 2	GROUP SERVING 3	GROUP SERVING 3+
Community Hab	1	Hourly	$38.51	$24.07	$19.25	$16.85
Community Hab	2	Hourly	$39.91	$24.95	$19.96	$17.46
Community Hab	3	Hourly	$39.00	$24.37	$19.50	$17.06

Intensive Behavioral Services One Time Product Fee

	REGION	**FEE**
DDRO 1	Western & Finger Lakes	$1,657.50
DDRO 2	Central, Broome & Sunmount	$1,657.50
DDRO 3	Capital District	$1,657.50
DDRO 3	Hudson Valley & Taconic	$1,785.00
DDRO 4	Metro, Brooklyn, Staten Island, Fineson	$1,912.50
DDRO 5	Long Island	$1,785.00

Intensive Behavioral Services on going Hourly Fee

	REGION	¼ HOUR BILLING UNIT
DDRO 1	Western & Finger Lakes	$16.58
DDRO 2	Central, Broome & Sunmount	$16.58
DDRO 3	Capital District	$16.58
DDRO 3	Hudson Valley & Taconic	$17.85
DDRO 4	Metro, Brooklyn, Staten Island, Fineson	$19.13
DDRO 5	Long Island	$17.85

Supported Employment Services (SEMP)

LEVEL OF SUPPORT	UNIT OF SERVICE	NYC FEES	REST OF THE STATE
1	Month	$551.66	$395.82
2	Month	$738.23	$528.07
3	Month	$832.51	$595.72

Level of Care	Region	Residential / Daily Unit of Service	Day Services (Day Habilitation or Pre. Vocational Service) Daily Unit of Service
Specialized LOC	Upstate	$ 425.50	$ 178.89
Specialized LOC	Downstate	$ 470.46	$ 198.70
Highly Complex LOC	Upstate	$ 484.82	$ 205.09
Highly Complex LOC	Downstate	$ 535.71	$ 221.08
Skilled Nursing Facility	Upstate	$ 349.02	N/A
Skilled Nursing Facility	Downstate	$ 385.75	N/A

m. The attached addenda are applicable to the following services as of 7/1/15. On a quarterly basis the State will submit any necessary updated Addendums in the form of a waiver amendment for CMS approval.

   i. Individual Day Habilitation– See Addendum A.1 ending 9/30/15)

n. The following services will be reimbursed based on the fee schedules below as of 7/1/15

   i. Prevocational (Community Based)
   ii. Supported Employment Services
   iii. Residential Habilitation (Family Care)

Prevocational (Community-Based)

OPWDD REGION	UNIT OF SERVICE	INDIVIDUAL (SERVING 1)	GROUP (SERVING 2)	GROUP (SERVING 3+)
1	Hourly	$41.57	$25.98	$20.78
2	Hourly	$43.92	$27.45	$21.96
3	Hourly	$42.90	$26.81	$21.45

Supported Employment (Intensive Phase)

OPWDD REGION	UNIT OF SERVICE	INDIVIDUAL SESSION (SERVING 1)	GROUP SESSION (SERVING 2 +)
1	Hourly	69.97	27.99
2	Hourly	63.95	25.58
3	Hourly	56.50	22.60

Supported Employment (Extended Phase)

OPWDD REGION	UNIT OF SERVICE	INDIVIDUAL SESSION (SERVING 1)	GROUP SESSION (SERVING 2 +)
1	Hourly	69.97	27.99
2	Hourly	63.95	25.58
3	Hourly	56.50	22.60

Residential Habilitation - Family Care – Difficulty of Care (DOC) Add-on

DOH Region	UNIT OF SERVICE	ISPM level 1	ISPM level 2	ISPM level 3	ISPM level 4	ISPM level 5	ISPM level 6
1	Daily	$66.61	$71.92	$72.17	$77.48	$93.31	$98.62
2	Daily	$63.44	$68.75	$69.00	$74.31	$90.14	$95.45
3	Daily	$65.67	$70.98	$71.23	$76.54	$92.37	$97.61
4	Daily	$60.45	$65.76	$66.01	$71.32	$87.15	$92.46

The State will set rates for Services delivered to individuals with Developmental Disabilities as described below for the following services; as of July 1, 2015:

-Pre Vocational Services – Site Based
-Respite – Hourly and Free Standing

o. Pre Vocational Services – Site Based

i. Target rate Operating Cost Hourly Components

(a) Regional Average Direct Care Hourly Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s) for Pre Vocational services, totaled by DOH Region, by Salaried Direct Care hours (CFR4, Title Code 200s) for Pre Vocational services, totaled by DOH Region.

(b) Regional Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(c) Regional Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract

(CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(d) Regional Average Direct Care Hourly Rate-Excluding General and Administrative = Add applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, and applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph.

(e) Regional Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by DOH Region. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by DOH Region, to calculate the General and Administrative quotient. Divide the Regional Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Regional Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the applicable Regional Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph.

(f) Regional Average Direct Care Hourly Rate = Add applicable Regional Average Direct Care Hourly Wage, as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph, and applicable Regional General and Administrative Hourly Component as computed in subparagraph (e) of this paragraph.

(g) Provider Average Direct Care Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider by Salaried Direct Care hours (CFR4, Title Code 200s), totaled by provider.

(h) Provider Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(i) Provider Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s), totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s), totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(j) Provider Average Direct Care Hourly Rate-Excluding General and Administrative= Add Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph, Provider

Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, and Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph.

(k) Provider Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by provider. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s), totaled by provider, to calculate the General and Administrative quotient. Divide the Provider Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Provider Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the Provider Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (j) of this paragraph.

(l) Provider Average Direct Care Hourly Rate = Add Provider Average Direct Care Wage, as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph, and Provider General and Administrative Hourly Component as computed in subparagraph (k) of this paragraph.

(m) Provider Direct Care Hours = From the CFR for the base year, add Salaried and Contracted Direct Care hours (CFR4 and CFR4A, Title 200s), by provider. Divide by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(n) Regional Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code

300s), totaled by DOH Region, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by DOH Region.

(o) Provider Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s), totaled by provider, by Salaried Clinical hours (CFR4, Title Code 300s), totaled by provider

(p) Provider Salaried Clinical Hours = From the CFR for the base year, divide Salaried Clinical hours (CFR4, Title 300s), totaled by provider, by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(q) Regional Average Contracted Clinical Hourly Wage = From the CFR for the base year, divide Contracted Clinical dollars (CFR4A, Title Code 300s) totaled by DOH Region by Contracted Clinical hours (CFR4A, Title Code 300s), totaled by DOH Region.

(r) Provider Contracted Clinical Hours = From the CFR for the base year, divide Contracted Clinical hours (CFR4A, Title 300s), totaled by provider, by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(s) Provider Direct Care Hourly Rate- Adjusted for Wage Equalization = Multiply applicable Provider Average Direct Care Hourly Rate, as computed in subparagraph (l) of this paragraph, by .75. Multiply applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, by .25. Add results together.

(t) Provider Clinical Hourly Wage – Adjusted for Wage Equalization = Multiply applicable Provider Average Clinical Hourly Wage, as computed in subparagraph (o) of this paragraph, by .75. Multiply applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (n) of this paragraph, by .25. Add results together.

(u) Provider Reimbursement from Direct Care Hourly Rate = Multiply applicable Provider Direct Care Hours, as computed in subparagraph (m) of this paragraph, by applicable Provider Direct Care Hourly Rate-Adjusted for Wage Equalization, as computed in subparagraph (s) of this paragraph.

(v) Provider Reimbursement from Clinical Hourly Wage = Multiply applicable Provider Salaried Clinical Hours, as computed in subparagraph (p) of this paragraph, by applicable Provider

Clinical Hourly Wage-Adjusted for Wage Equalization, as computed in subparagraph (t) of this paragraph.

(w) Provider Reimbursement from Contracted Clinical Hourly Wage = Multiply applicable Provider Contracted Clinical Hours, as computed in subparagraph (r) of this paragraph, by applicable Regional Average Contracted Clinical Hourly Wage, as computed in subparagraph (q) of this paragraph.

(x) Provider Facility Reimbursement – From the CFR for the base year, add Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Insurance – Property and Casualty (CFR1 line 55), Housekeeping and Maintenance Staff (CFR4 Title 102), and Program Administration Property (OPWDD4 line 24), totaled by provider. Divide by the provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(y) Provider To/From Transportation Reimbursement – From the CFR for the base year, divide To/From Transportation Allocation (CFR1 line 68b), by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period. In the second rate period of the rate cycle Provider To/From transportation will be reimbursed by using the CFR one year after the base year, divide To/From Transportation Allocation (CFR1 line 68b), by provider billed units for the one year after the base year. Multiply by Rate Period authorized units for the Initial Period.

(z) Provider Operating Revenue = Add applicable Provider Reimbursement from Direct Care Hourly Rate, as computed in subparagraph (u) of this paragraph, applicable Provider Reimbursement from Clinical Hourly Wage, as computed in subparagraph (v) of this paragraph, applicable Provider Reimbursement from Contracted Clinical Hourly Wage, as computed in subparagraph (w) of this paragraph, applicable Provider Facility Reimbursement, as computed in subparagraph (x) of this paragraph, and Provider To/From Transportation Reimbursement, as computed in subparagraph (y) of this paragraph.

(aa) Statewide Budget Neutrality Adjustment Factor for Operating Dollars = Divide Operating Revenue from all provider Rate

Sheets in effect 06/30/15, by Provider Operating Revenue for all providers, as computed in subparagraph (z) of this paragraph.

(bb) Total Provider Operating Revenue- Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (z) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (aa) of this paragraph.

(cc) Total Capital Reimbursement = Capital reimbursement shall be computed as described in subparagraph (ii) of this paragraph.

(dd) Initial Target Daily Rate = Add applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (bb) of this paragraph and Total Capital Reimbursement, as computed in subparagraph (cc) of this paragraph. Divide sum by applicable provider Rate Period authorized units for the Initial Period.

(ee) Final Operating Rate = Will be calculated as a combination of the Initial Target daily Operating Rate as computed in (dd) and the Base Operating Rate as defined in paragraph h of subdivision I and as prescribed on the Transition Period schedule identified in paragraph h of this subdivision

ii. Total Capital Reimbursement = Capital reimbursement shall be computed as follows:

(a) For Capital Assets Approved by OPWDD on Prior Property Approvals Prior to July 1, 2014. OPWDD regulations under 14 NYCRR Subpart 635-6 establish standards and criteria that describes the Capital acquisition and lease of real property assets which require approval by OPWDD.

1. Reimbursement rates will include actual straight line depreciation, amortization, Interest expense, financing expenses, and lease costs.

2. OPWDD will never approve lease or acquisition costs in excess of the lower of fair market value (as determined by an independent appraisal) or the provider's actual cost. However, OPWDD may limit the approved costs to a lower amount based on a review of the reasonableness of the transaction and price and a comparison of costs to those of similar facilities with the same characteristics. For example, if a provider purchases or leases a property in an area in which real estate costs are considerably higher than those in

the surrounding areas, and an equally suitable property in the surrounding area was available to the provider for purchase or lease at a lower cost, OPWDD may limit the allowable costs to those of properties in the surrounding area.

3. In no case will the total capital reimbursement associated with the capital asset exceed the total acquisition or renovation cost associated with a capital asset.

4. The State will identify each asset by provider, and provide a schedule of these assets identifying: total actual cost, reimbursable cost and useful life, determined by the prior property approval, total financing cost, allowable depreciation and allowable interest for the remaining useful life as determined by the prior approval, and the allowable reimbursement for each year of the remaining useful lives.

5. Notification to Providers. Each provider will receive supporting documentation detailing all real property to be included in the capital component of the provider's reimbursement rate.

(b) Capital rate for capital assets approved by OPWDD on Prior Property Approvals on or after July 1, 2014. OPWDD regulations under 14 NYCRR Subpart 635-6 establish standards and criteria that describes the Capital acquisition and lease of real property assets which require approval by OPWDD.

1. Reimbursement rates will include actual straight line depreciation, Interest expense, financing expenses, and lease cost established using generally accepted accounting principles, comply with CMS Publication – 15 (Medicare cost and cost allocation principles) and establish useful lives using the American Hospital Association (AHA) Estimated Useful Lives of Depreciable Hospital Assets Revised 2008 Edition.

2. OPWDD will never approve lease or acquisition costs in excess of the lower of fair market value (as determined by an independent appraisal) or the provider's actual cost. However, OPWDD may limit the approved costs to a lower amount based on a review of the reasonableness of the transaction and price and a comparison of costs to those of similar facilities with the same characteristics. For example, if a provider purchases or leases a property in an area in which real estate costs are considerably higher than those in

the surrounding areas, and an equally suitable property in the surrounding area was available to the provider for purchase or lease at a lower cost, OPWDD may limit the allowable costs to those of properties in the surrounding area.

3. In no case will the total capital reimbursement associated with the capital asset exceed the total acquisition, renovation and financing cost associated with a capital asset.

4. The State will identify each asset by provider, and provide a schedule of these assets identifying: total actual cost, reimbursable cost and useful life, determined by the prior property approval, total financing cost, allowable depreciation and allowable interest for the remaining useful life as determined by the prior approval, and the allowable reimbursement for each year of the remaining useful lives.

5. Notification to Providers. Each provider will receive supporting documentation detailing all real property to be included in the capital component of the provider's reimbursement rate.

6. The rate shall include applicable annual interest, depreciation and/or amortization of the approved appraised costs of an acquisition for a useful life consistent with AHA guidelines, or fair market value of a lease, and estimated costs for renovations, interest, soft costs and start-up expenses. Such costs shall be included in the rate as of the date, continuing until such time as actual costs are submitted to the State. Estimated costs shall be submitted in lieu of actual costs for a period no greater than two years. If actual costs are not submitted to the State within two years from the date, the amount of capital costs included in the rate shall be zero for each period in which actual costs are not submitted. DOH will retroactively adjust the capital component; and will return FFP to CMS on the next quarterly expenditure report (CMS-64) following the two year period. Once the final cost reconciliation has been received by the Department of Health, the rate will be retroactively adjusted to include reconciled costs.

7. The provider shall submit to the State supporting documentation of actual costs. Actual costs shall be verified by the State reviewing the supporting documentation of such costs. A provider submitting such actual costs shall certify

that the reimbursement requested reflects allowable capital costs and that such costs were actually expended by such provider. Under no circumstances shall the amount included in the rate under this subparagraph exceed the amount authorized in the approval process. Capital costs shall be amortized according to AHA guidelines for the acquisition of properties or the life of the lease for leased sites. Capital improvements shall be depreciated over the life of the asset, or the revised useful life of the asset as a result of the capital improvements, whichever is greater. The amortization of interest shall not exceed the life of the loan taken. Amortization or depreciation shall begin upon certification by the provider of such costs. Start-up costs shall be amortized over a one year period beginning with certification of the site. If actual costs are not submitted to the State within two years from the date of site certification, the amount of capital costs included in the rate shall be zero for each period in which actual costs are not submitted.

The Department will retroactively adjust capital reimbursement based on the actual cost verification process as described in subparagraph II of this paragraph.

(c) CFR reporting for Capital assets:

1. Expenses relating to Equipment are reported in two sections of CFR-1. Expensed equipment is included under the Other Than Personal Services (OTPS) section of CFR-1 and is included in the operating portion of the rate reimbursement (Lines 27 & 28). Depreciable equipment expenses are included under the Equipment section of CFR-1 and all items in this section are included in the operating portion of the rate reimbursement (Lines 42-47).

2. Capital expenses related to real property are included under the Property section of the CFR-1 (Lines 49-62). With the exception of Insurance-Property or Casualty, which is reported on CFR-1, Line 55, Lines 49-62 are not included in the rates. Alternatively, providers are reimbursed for Capital in accordance with the capital schedule (as identified in 1. iv and 2. iv of this paragraph) and the Insurance-Property or Casualty reported on CFR-1, Line 55.

3. All expenses reported on CFR-1 are to be reported in accordance with Appendix X – Adjustments to Reported Costs, dated January 1, 2014, which details expenses that

are considered to be non-allowable. CFR instructions for reporting depreciation and amortization are included in Appendix O of the January 1, 2014 CFR Manual, which can be found at:

http://www.oms.nysed.gov/rsu/Manuals_Forms/Manuals/CFRManual/home.html

4. Capital Schedule. Beginning with the cost reporting period ending December thirty-first, two thousand fourteen, each provider shall submit to OPWDD, as part of the annual cost report, a Capital Schedule.

   This schedule will specifically identify the differences, by capital reimbursement item, between the amounts reported on the certified cost report, and the reimbursable items, including depreciation, interest and lease cost from the schedule of approved reimbursable costs.

   The provider's independent auditor will apply procedures to verify the accuracy and completeness of the capital schedule.

5. If a provider fails to file a cost report (including the capital reimbursement reconciliation schedule) by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later, if a provider fails to file a cost report (including the capital schedule) by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement, effective the first day of the sixth month following the end of the cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.

   If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent

providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

iii. Alternative Operating Cost Component – For providers that did not submit a cost report for Pre Vocational Site Based services for the base year, the initial target daily operating rate shall be a regional daily operating rate, calculated as follows:

(a) Reimbursement from Regional Direct Care Hourly Rate = from the base year, divide the Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s), totaled by DOH region, by billed units for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of paragraph i, and by Rate Period authorized units for the Initial Period.

(b) Reimbursement from Regional Clinical Hourly Wage = from the base year, divide the Salaried and Contracted Clinical Hours (CFR4 and CFR4-A, Title 300s), totaled by DOH region, by billed units for the base year (pro-rated for partial year sites), totaled by DOH region. Multiply by the applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (n) of paragraph i, and by Rate Period authorized units for the Initial Period.

(c) Provider Operating Revenue = Add applicable Reimbursement from Regional Direct Care Hourly Rate, as computed in subparagraph (a) of this paragraph, and applicable Reimbursement from Regional Clinical Hourly Wage, as computed in subparagraph (b) of this paragraph.

(d) Total Provider Operating Revenue – Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (c) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (bb) of paragraph i.

(e) Total Capital Reimbursement = Capital reimbursement shall be computed as described in subparagraph (cc) of paragraph i.

(f) Initial Target Regional Daily Rate = Add applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (d) of this paragraph and Total Capital Reimbursement, as computed in subparagraph (e) of this paragraph. Divide sum by applicable provider Rate Period authorized units for the Initial Period This rate will be in effect until such time that the provider has submitted a cost report for a base year which will be used in the calculation of a subsequent rate period. If a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later, if a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement, effective the first day of the sixth month following the end of the cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.

If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS

provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

p. Respite – Hourly and Free Standing

i. Target rate Operating Cost Hourly Components

(a) Regional Average Direct Care Hourly Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by DOH Region, by Salaried Direct Care hours (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by DOH Region.

(b) Regional Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20), for Hourly Respite and Free Standing Respite, totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(c) Regional Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s) for Hourly Respite and Free Standing Respite, totaled by DOH Region. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s) for Hourly

Respite and Free Standing Respite, totaled by DOH Region. Multiply by the applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph.

(d) Regional Average Direct Care Hourly Rate-Excluding General and Administrative = Add applicable Regional Average Direct Care Hourly Wage as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, and applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph.

(e) Regional Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65), totaled by DOH Region. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by DOH Region, to calculate the General and Administrative quotient. Divide the Regional Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Regional Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the applicable Regional Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph.

(f) Regional Average Direct Care Hourly Rate = Add applicable Regional Average Direct Care Hourly Wage, as computed in subparagraph (a) of this paragraph, applicable Regional Average Employee-Related Hourly Component as computed in subparagraph (b) of this paragraph, applicable Regional Average Program Support Hourly Component as computed in subparagraph (c) of this paragraph, and applicable Regional

General and Administrative Hourly Component as computed in subparagraph (e) of this paragraph.

(g) Provider Average Direct Care Wage = From the CFR for the base year, divide Salaried Direct Care dollars (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by provider by Salaried Direct Care hours (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by provider.

(h) Provider Average Employee-Related Hourly Component = From the CFR for the base year, add Vacation Leave Accruals (CFR1 line 17) and Total Fringe Benefits (CFR1 line 20) for Hourly Respite and Free Standing Respite, totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(i) Provider Average Program Support Hourly Component = From the CFR for the base year, add Transportation Related-Participant (CFR1 line 24), Staff Travel (CFR1 line 25), Participant Incidentals (CFR1 line26), Expensed Adaptive Equipment (CFR1 line 27), Sub-Contract Raw Materials (CFR1 line 29), Participant Wages-Non-Contract (CFR1 line 30), Participant Wages-Contract (CFR1 line 31), Participant Fringe Benefits (CFR1 line 32), Staff Development (CFR1 line 34), Supplies and Materials-Non-Household (CFR1 line 36), Other-OTPS (CFR1 line 40), Lease/Rental Vehicle (CFR1 line 42), Depreciation-Vehicle (CFR1 line 44), Interest-Vehicle (CFR1 line 46), Other-Equipment (CFR1 line 47), Other Than To/From Transportation Allocation (CFR1 line 68a), Salaried Support dollars (CFR4 Title Code 100s, excluding Housekeeping and Maintenance Staff Title 102) and Salaried Program Administration dollars (CFR4 Title 500s) for Hourly Respite and Free Standing Respite, totaled by provider. Divide by Salaried Direct Care dollars (CFR4, Title Code 200s) for Hourly Respite and Free Standing Respite, totaled by provider. Multiply by the Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph.

(j) Provider Average Direct Care Hourly Rate-Excluding General and Administrative= Add Provider Average Direct Care Wage as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, and Provider Average

Program Support Hourly Component as computed in subparagraph (i) of this paragraph.

(k) Provider Average General and Administrative Hourly Component = From the CFR for the base year, add Insurance-General (CFR1 line 39) and Agency Administration Allocation (CFR1 line 65) for Hourly Respite and Free Standing Respite, totaled by provider. Divide by the sum of Total Program/Site Costs (CFR1 line 67) and Other Than To/From Transportation Allocation (CFR1 line 68a), minus the sum of Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Total Property-Provider Paid (CFR1 line 63), Housekeeping and Maintenance Staff (CFR4 Title 102), Salaried Clinical dollars (CFR4 Title Code 300s), and Contracted Clinical dollars (CFR4A Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by provider, to calculate the General and Administrative quotient. Divide the Provider Average Direct Care Hourly Rate-Excluding General and Administrative, as computed in subparagraph (d) of this paragraph, by 1 minus the applicable Provider Average General and Administrative quotient, as computed previously in this subparagraph. From this total subtract the Provider Average Direct Care Wage Hourly Rate-Excluding General and Administrative, as computed in subparagraph (j) of this paragraph.

(l) Provider Average Direct Care Hourly Rate = Add Provider Average Direct Care Wage, as computed in subparagraph (g) of this paragraph, Provider Average Employee-Related Hourly Component as computed in subparagraph (h) of this paragraph, Provider Average Program Support Hourly Component as computed in subparagraph (i) of this paragraph, and Provider General and Administrative Hourly Component as computed in subparagraph (k) of this paragraph.

(m) Provider Direct Care Hours = From the CFR for the base year, add Salaried and Contracted Direct Care hours (CFR4 and CFR4A, Title 200s) for Hourly Respite and Free Standing Respite, by provider. Divide by provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(n) Regional Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code

300s) for Hourly Respite and Free Standing Respite, totaled by DOH Region, by Salaried Clinical hours (CFR4, Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by DOH Region.

(o) Provider Average Clinical Hourly Wage = From the CFR for the base year, divide Salaried Clinical dollars (CFR4, Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by provider, by Salaried Clinical hours (CFR4, Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by provider

(p) Provider Salaried Clinical Hours = From the CFR for the base year, divide Salaried Clinical hours (CFR4, Title 300s) for Hourly Respite and Free Standing Respite, totaled by provider, by provider billed units for the base year for Hourly Respite and Free Standing Respite. Multiply by Rate Period authorized units for the Initial Period.

(q) Regional Average Contracted Clinical Hourly Wage = From the CFR for the base year, divide Contracted Clinical dollars (CFR4A, Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by DOH Region, by Contracted Clinical hours (CFR4A, Title Code 300s) for Hourly Respite and Free Standing Respite, totaled by DOH Region.

(r) Provider Contracted Clinical Hours = From the CFR for the base year, divide Contracted Clinical hours (CFR4A, Title 300s) for Hourly Respite and Free Standing Respite, totaled by provider, by provider billed units for the base year for Hourly Respite and Free Standing Respite. Multiply by Rate Period authorized units for the Initial Period.

(s) Provider Direct Care Hourly Rate- Adjusted for Wage Equalization = multiply applicable Provider Average Direct Care Hourly Rate, as computed in subparagraph (l) of this paragraph, by .75. Multiply applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of this paragraph, by .25. Add results together.

(t) Provider Clinical Hourly Wage – Adjusted for Wage Equalization = multiply applicable Provider Average Clinical Hourly Wage, as computed in subparagraph (o) of this paragraph, by .75. Multiply applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (n) of this paragraph, by .25. Add results together.

(u) Provider Reimbursement from Direct Care Hourly Rate = Multiply applicable Provider Direct Care Hours, as computed in subparagraph (m) of this paragraph, by applicable Provider Direct Care Hourly Rate-Adjusted for Wage Equalization, as computed in subparagraph (s) of this paragraph.

(v) Provider Reimbursement from Clinical Hourly Wage = Multiply applicable Provider Salaried Clinical Hours, as computed in subparagraph (p) of this paragraph, by applicable Provider Clinical Hourly Wage-Adjusted for Wage Equalization, as computed in subparagraph (t) of this paragraph.

(w) Provider Reimbursement from Contracted Clinical Hourly Wage = Multiply applicable Provider Contracted Clinical Hours, as computed in subparagraph (r) of this paragraph, by applicable Regional Average Contracted Clinical Hourly Wage, as computed in subparagraph (q) of this paragraph.

(x) Provider Facility Reimbursement – From the CFR for the base year, add Food (CFR line 21), Repairs and Maintenance (CFR1 line22), Utilities (CFR1 line 23), Expensed Equipment (CFR1 line 28), Household Supplies (CFR1 line 37), Telephone (CFR1 line 38), Lease/Rental Equipment (CFR1 line 43), Depreciation Equipment (CFR1 line 45), Insurance – Property and Casualty (CFR1 line 55), Housekeeping and Maintenance Staff (CFR4 Title 102), and Program Administration Property (OPWDD4 line 24), totaled by provider. Divide by the provider billed units for the base year. Multiply by Rate Period authorized units for the Initial Period.

(y) Provider Operating Revenue = Add applicable Provider Reimbursement from Direct Care Hourly Rate, as computed in subparagraph (u) of this paragraph, applicable Provider Reimbursement from Clinical Hourly Wage, as computed in subparagraph (v) of this paragraph, and applicable Provider Reimbursement from Contracted Clinical Hourly Wage, as computed in subparagraph (w) of this paragraph, applicable Provider Facility Reimbursement, as computed in subparagraph (x) of this paragraph.

(z) Statewide Budget Neutrality Adjustment Factor for Operating Dollars = Divide Operating Revenue from all provider Rate Sheets in effect on 6/30/15, by Provider Operating Revenue for all providers, as computed in subparagraph (y) of this paragraph.

(aa) Total Provider Operating Revenue- Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (z) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (z) of this paragraph.

(bb) Initial Target Operating Rate = Add applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (bb) of this paragraph divided by the applicable provider Rate Period authorized units for the Initial Period.

(cc) Final Operating Rate = Will be calculated as a combination of the Initial Target daily Operating Rate as computed in (bb) and the Base Operating Rate as defined in paragraph h of subdivision I and as prescribed on the Transition Period schedule identified in paragraph h of this subdivision

ii. Alternative Operating Cost Component – For providers that did not submit a cost report for Hourly or Free Standing Respite services for the base year, the initial target operating rate shall be a regional operating rate, calculated as follows:

(a) Reimbursement from Regional Direct Care Hourly Rate = from the base year, divide the Salaried and Contracted Direct Care Hours (CFR4 and CFR4-A, Title 200s) for Hourly and Free Standing Respite, totaled by DOH region, by billed units for the base year (pro-rated for partial year sites) for Hourly and Free Standing Respite, totaled by DOH region. Multiply by the applicable Regional Average Direct Care Hourly Rate, as computed in subparagraph (f) of paragraph i, and by Rate Period authorized units for the Initial Period.

(b) Reimbursement from Regional Clinical Hourly Wage = from the base year, divide the Salaried and Contracted Clinical Hours (CFR4 and CFR4-A, Title 300s) for Hourly and Free Standing Respite, totaled by DOH region, by billed units for the base year (pro-rated for partial year sites) for Hourly and Free Standing Respite, totaled by DOH region. Multiply by the applicable Regional Average Clinical Hourly Wage, as computed in subparagraph (n) of paragraph i, and by Rate Period authorized units for the Initial Period.

(c) Provider Operating Revenue = Add applicable Reimbursement from Regional Direct Care Hourly Rate, as computed in subparagraph (a) of this paragraph, and applicable

Reimbursement from Regional Clinical Hourly Wage, as computed in subparagraph (b) of this paragraph.

(d) Total Provider Operating Revenue – Adjusted = Multiply applicable Provider Operating Revenue, as computed in subparagraph (c) of this paragraph, by Statewide Budget Neutrality Adjustment Factor for Operating Dollars, as computed in subparagraph (bb) of paragraph i.

iii. Initial Regional Target Operating Rate = Add applicable Total Provider Operating Revenue-Adjusted, as computed in subparagraph (d) of this paragraph divided by the applicable provider Rate Period authorized units for the Initial Period. This rate will be in effect until such time that the provider has submitted a cost report for a base year which will be used in the calculation of a subsequent rate period. If a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement. For cost reporting periods ending December 31, 2014 and later, if a provider fails to file a cost report by the due date (including one 30 day extension, if granted by OPWDD), OPWDD will impose a penalty of 2% on the provider's Medicaid reimbursement, effective the first day of the sixth month following the end of the cost reporting period. However, OPWDD will not impose such a penalty if it determines that there were unforeseeable circumstances beyond the provider's control (such as a natural disaster) that prevented the provider from filing the cost report by the due date.

If a Non-State (NS) provider has not filed a complete and compliant annual Consolidated Fiscal Report (CFR) for any CFR reporting period ending between January 1, 2013 and January 1, 2015, the NS provider will be considered delinquent. The State shall give notice to delinquent providers that to avoid the loss of FFP effective April 1, 2016, a complete and compliant CFR must be submitted by October 1, 2015. The State will not claim Federal Financial Participation (FFP) for any Waiver Service provided by the delinquent NS provider after April 1, 2016.

For CFR cost reporting periods beginning July 1, 2014 and thereafter, NS providers are required to file an annual CFR to the State within 120 days (150 with a requested extension) following the end of the provider's fiscal reporting period. If a NS provider fails to file a complete and compliant CFR within 60 days following the imposition of the 2% penalty, the State must provide timely notice to the

delinquent provider that FFP will end 240 days following the imposition of the 2% penalty; and the State will not claim FFP for any Waiver service provided by the NS provider with a date of service after the 240 day period.

iv. Effective with Respite services delivered on or after July 1, 2015 Respite payments will be calculated using the methodology described in section "n" (above) to establish individual hourly rates by Respite provider; however the maximum amount for any 24 hour period, per individual beneficiary, that may be paid under this waiver is limited to:

(a) For respite services occurring in certified Supervised Residential Habilitation and ICFs, the 24-hour hard cap will be equal to the calculated agency-specific Supervised Residential Habilitation daily rate or ICF daily rate.

(b) For all other respite services, the 24-hour hard cap will be equal to the regional average IRA rate. The caps in effect as of 7/1/15 are as follows:

DOH Region	Regional Rate – Daily
1	$308.18
2	$254.26
3	$254.88
4	$226.85

In addition, should the State elect to pay a provider payments which exceeds the approved methodology and/or 24 hour daily CAP authorized in this waiver, these amounts are not authorized as part of this waiver and the State will not claim FFP for these payments

q. Subsequent Rate Periods for Pre Vocational and Respite Services as described above:

i. The Department will follow a two year rate cycle utilizing the CFR two years prior to the rate year.

r. Transition period

i. Transition to new methodology for Pre Vocational Services. The operating methodology described in III of this section xx will be phased-in over a two-year period, with a year for purposes of the transition period meaning a twelve month period from July first to the following June thirtieth, and with full implementation in the beginning of the third year. During this transition period, the base operating rate will transition to the target rate according to the phase-in schedule immediately below. The base operating rate will remain fixed and the target rate, as determined by the methodology in part g.i and h.i of this addendum, will be updated to reflect rebasing of cost data, trend factors and other adjustments described in the methodology above.

	Phase-in Percentage	
Transition Year	**Base Operating Rate**	**Target Operating Rate**
Year One (July 1, 2015 – June 30, 2016)	50%	50%
Year Two (July 1, 2016 - June 30, 2017)	25%	75%
Year three (July 1, 2017 – June 30, 2018)	0%	100%

ii. Transition to new methodology for Respite Services. The operating methodology described in III of this section will be phased-in over a two-year period, with a year for purposes of the transition period meaning a twelve month period from July first to the following June thirtieth, and with full implementation in the beginning of the third year. During this transition period, the base operating rate will transition to the target rate according to the phase-in schedule immediately below. The base operating rate will remain fixed. The target rate will be determined by the methodology in part p of this addendum until April first, at which time the target rate will be determined based on the fee schedule in paragraph t below.

	Phase-in Percentage	
Transition Year	**Base Operating Rate**	**Target Operating Rate**
Year One (July 1, 2015 – June 30, 2016)	50%	50%
Year Two (July 1, 2016 - June 30, 2017)	50%	50%
Year three (July 1, 2017 – June 30, 2018)	0%	100%

s. The following services will be reimbursed based on the fee schedules below as of 10/1/15:

Residential Habilitation (Family Care)

DOH Region	UNIT OF SERVICE	ISPM level 1	ISPM level 2	ISPM level 3	ISPM level 4	ISPM level 5	ISPM level 6
1	Daily	$70.60	$75.91	$76.16	$81.47	$97.30	$102.61
2	Daily	$72.22	$77.53	$77.78	$83.09	$98.92	$104.23
3	Daily	$71.12	$76.43	$76.68	$81.99	$97.82	$103.06
4	Daily	$67.86	$73.17	$73.42	$78.73	$94.56	$99.87

t. The following services will be reimbursed based on the fee schedules below as of 4/1/16

i. Respite

DOH Region	UNIT OF SERVICE	1 : 1	Group (2 or more)	2 : 1
1	Hourly	$28.74	$19.18	$42.38
2	Hourly	$32.41	$21.45	$48.08
3	Hourly	$25.61	$17.06	$37.82
4	Hourly	$25.06	$16.74	$36.94

u. Effective October 1, 2015, the State will set interim rates for Services delivered to individuals with Developmental Disabilities, who are not currently being served in one of the following services and who do not qualify for specialized funding as described above. Eligibility for the interim rate will be based upon an evaluation of the person's need for additional direct care and/or clinical support hours that are eligible for funding as part of a Residential Habilitation or Day Habilitation rate. This method applies to individuals who are approved for one or more of the following services on and after 10/1/2015:

- Residential Habilitation – Supervised IRA
- Residential Habilitation – Supportive IRA
- Day Habilitation

i. OPWDD will conduct a clinical determination of the level of direct care and/or clinical support needs of an individual at the time he or she requests one of the above-referenced services for the first time. The clinical determination will be conducted for the purpose of establishing the number of hours of direct care and/or clinical supports necessary to provide the individual with the appropriate level of services to ensure his or her health, safety and welfare. This will be done on a service-specific basis.

ii. The direct care and/or clinical hours determined in (i) above will be compared to the per individual direct care and/or clinical hours the agency currently receives in accordance with the respective methodology described in NY Waiver – NY.0238.

iii. If the direct care and/or clinical hours determined in (i) above are higher than the calculated per individual direct care and/or clinical hours for individuals currently being served by the proposed service provider based on the reimbursement methodology (as described in NY.0238), then an *interim rate* per individual will be set. The only difference between the interim rate and the provider's rate calculated in accordance with the methodology described in NY.0238 is the clinical and/or direct care hours. The interim rate will replace clinical and/or direct care hours in the rate established in accordance with NY.0238 with the hours necessary in accordance with paragraph u(i).

iv. There will be no change to the other cost components associated with delivering the requested service(s); the only change will be the number of direct care and/or clinical hours available to appropriately support the individual(s) in one or more of the community service options described above.

v. Services for an individual will be reimbursed with the interim rate until the cost of providing service(s) to this individual for a full year is reflected in the service provider's base year CFR applicable to the requested service.

vi. When an interim rate is necessary, the provider will have one interim rate per waiver service per individual. The interim rate will be adjusted every six months effective January 1 and July 1 to reflect the hours needed for the individuals who are determined to need the higher direct care or clinical service hours and for whom there is not yet one full year of cost reporting available to adjust the provider's rate that is calculated in accordance with the NY.0238 methodology.

v. In situations where a non-State government Provider ceases some or all of its operations, the service(s) may transition to another non-State government Provider. In these cases, the "sending provider" is the non-State government Provider that ceases operations, and the "receiving provider" is the non-State government Provider that takes over the transferred services. The State will pay the higher of either the calculated rate of the receiving Provider as prescribed in NY.0238 or the rate of the sending provider, again as calculated in accordance with NY.0238. This "higher of" rate will be in effect until a full year's cost of providing services to the individual(s) impacted by the change in auspice is reflected in the receiving provider's base year CFR.

V. Self-Direction Services

a. Consolidated Supports and Services (CSS)

Consolidated Supports and Services (CSS) prices are established for each individual based on a comprehensive process of evaluating and determining individual specific needs and relating the individual's needs to the Personal Resource Allocation (PRA), effective with prices established on or after April 1, 2013 all prices will be within PRA (see attached table Addendum A.10) or will be separately identified in this supplement to the waiver application. The CSS rates in effect prior to 10/1/14 are included in Addenda A.4 and A.7.

Consolidated Support Services (CSS) identified in this waiver as a service, and for the purposes of this waiver, will sunset on September 30, 2014. NY (OPWDD) will not bill or claim federal financial participation (FFP) for CSS services with a date of service of October 1, 2014 or thereafter. The individual waiver services identified in Appendix C, other than CSS, may be individually billed and claimed for FFP, if they are provided in accordance with the terms and conditions of this waiver.

Annual Reconciliation - A provider must submit an annual reconciliation to OPWDD no later than 150 days following the end of the rate year or rate period. Once the annual reconciliation is received OPWDD will return any federal financial participation (FFP) that is not supported on the next quarterly expenditure report – CMS 64. If a provider fails to submit the annual reconciliation by the required time, OPWDD will return all FFP associated with the rate period on the next quarterly expenditure report – CMS 64. After CSS sunsets, the reconciliation is no longer required as each service is billed directly to Medicaid.

b. Agency with Choice/Financial Management Service AWC/FMS

Through 9/30/14, FMS provider agencies are compensated at 17 ½ percent of the service budget for performing the fiscal intermediary duties on behalf of an individual. Effective 10/01/14, OPWDD will implement a fee structure that will replace the current percentage-based methodology for all individuals opting for self-direction with the assistance of a fiscal intermediary.

c. Fiscal Intermediary Services

Effective 10/1/14 Fiscal Intermediary Services will be reimbursed at the following fee schedule based on the level of service provided as described in Appendix C of this HCBS Agreement.

Fiscal Intermediary Level	Statewide Monthly Fee
1	$125
2	$225
3	$550

d. . Individual Directed Goods and Services (IDGS)

The claiming limits and allowable goods and services that can be purchased using IDGS is described in Addendum A.11 to this HCBS Waiver Agreement.

e. Live-in Caregiver

Access to Live-in Caregiver services is restricted to individuals who are enrolled in the Consolidated Supports and Services or after 10/1/14 people who self-direct their services with budget authority and do not live in certified residences. Further, the person's CSS budget/plan must list the live-in caregiver as self-hired staff and describe the live-in caregiver's role

The FMS/AWC (through 9/30/14) and the fiscal intermediary agency (after 10/1/14) pays allowable Live in Care Giver expenses as follows:

- Payment of rent and utilities is made to the landlord or utility company
- Payment for food is reimbursement after presentation of a receipt approved by the CSS participant/designee.

The payment is based on the proportion of these costs that can be attributed to the Live in Care Giver. For example, if the person and Live in Care Giver are the only two people living in an apartment, then a maximum of 50% of the above costs would be attributed to the Caregiver.

At the end of the calendar year, the FMS agency follows procedures for reconciliation of Medicaid receipts against payments from participant accounts. The total service cost for Live-in Caregiver in and of itself does not include any administrative charges by a provider.

f. Support Brokerage

Support Brokerage is reimbursed by the FMS/AWC (through 9/30/14) and by the fiscal intermediary (after 10/1/14) provider at an hourly rate of payment not to exceed as follows:

Support Broker who has completed the necessary training but has had no experience as a Support Broker and may require mentoring	$20
Support Broker with limited experience and has brokered one approved OPWDD CSS Plan/Budget for at least six months.	$25
Support Broker who has brokered two approved OPWDD CSS Plan/Budgets for at least six months	$30.
Support Broker who has brokered three or more approved CSS Plan/Budgets for at least six months	$35 -$40

g. "Self-Hired" Staffing for Community Habilitation, Supported Employment and Respite Services

As of 10/1/14, individuals who select and hire staff using a Fiscal Intermediary may pay the staff delivering the self-directed services an hourly rate that does not exceed the following levels:

For Respite Self Hired Service the cap for 24 reimbursement will apply as per n, iii

Self-Hired Service	Hourly Rate effective 10/1/14 – 12/31/14
Community Habilitation	Regional Fee for Provider-Delivered Community Habilitation Region 1: $37.05 (1-to-1); $23.16 (Group) Region 2: $38.39 (1-to-1); $23.99 (Group) Region 3: $37.51 (1-to-1); $23.44 (Group)
Respite	Average Regional Rate for Non-State Government Providers and Voluntary Providers Delivered Respite Services as follows: Region 1: $20.92 Region 2: $22.32 Region 3: $20.32
Supported Employment	Region 1: $37.05 Region 2: $38.39 Region 3: $37.51

Self-Hired Service	Hourly Rate effective 1/1/15 – 3/31/15
Community Habilitation	Regional Fee for Provider-Delivered Community Habilitation Region 1: $ 37.75 (1-to-1); $ 23.59 (Group) Region 2: $ 39.13 (1-to-1); $ 24.46 (Group) Region 3: $ 38.23 (1-to-1); $ 23.90 (Group)
Respite	Average Regional Rate for Non-State Government Providers and Voluntary Providers Delivered Respite Services as follows: Region 1: $21.64 Region 2: $22.60 Region 3: $21.84
Supported Employment	Region 1: $ 37.75 Region 2: $ 39.13 Region 3: $ 38.23

Self-Hired Service	Hourly Rate effective 4/1/15 -6/30/15
Community Habilitation	Regional Fee for Provider-Delivered Community Habilitation Region 1: $ 38.51 (1-to-1); $ 24.07 (Group) Region 2: $ 39.91 (1-to-1); $ 24.95 (Group) Region 3: $ 39.00 (1-to-1); $ 24.37 (Group)
Respite	Average Regional Rate for Non-State Government Providers and Voluntary Providers Delivered Respite Services as follows: Region 1: $21.84 Region 2: $22.88 Region 3: $22.04
Supported Employment	Region 1: $ 38.51 Region 2: $ 39.91 Region 3: $ 39.00

Self-Hired Service	-Hourly Rate effective 7/1/15
Community Habilitation	Regional Fee for Provider-Delivered Community Habilitation Region 1: $ 38.51 (1-to-1); $ 24.07 (Group) Region 2: $ 39.91 (1-to-1); $ 24.95 (Group) Region 3: $ 39.00 (1-to-1); $ 24.37 (Group)
Respite	Average Regional Rate for Non-State Government Providers and Voluntary Providers Delivered Respite Services as follows: Region 1: $21.36 Region 2: $20.08Region 3: $19.60 Region 4: $19.44
Supported Employment	Region 1: $ 69.97 (1-to-1); $27.99 (Group) Region 2: $ 63.95 (1-to-1); $25.58 (Group) Region 3: $ 56.50 (1-to-1); $22.60 (Group)

For Self-Directed Services delivered prior to 10/1/14: Annual Reconciliation

– A provider must submit an annual reconciliation to OPWDD no later than 150 days following the end of the rate year or rate period. Once the annual reconciliation is received OPWDD will return any federal financial participation (FFP) that is not supported on the next quarterly expenditure report – CMS 64. If a provider fails to submit the annual reconciliation by the required time, OPWDD will return all FFP associated with the rate period on the next quarterly expenditure report – CMS 64. The reconciliation is not needed after 9/30/14 service dates since the billing to Medicaid will be based on actual utilization/expenditure and not on a monthly budgeted price as existed prior to 10/1/14.

VI. Services paid using a Contract Amount

a. Environmental Modifications

NYS is the provider of record for environmental modifications for billing purposes. The work is done by a contractor who is selected through a standard bid process, following the rules established by the Office of the State Comptroller. The e-mod is only billed to Medicaid once the contract work is verified as complete and the amount billed is equal to the contract value. Environmental Modifications are limited to individual or family owned or controlled homes.

Effective with claims submitted to eMedNY on or after April 1, 2013 the maximum expenditure for Environmental Modifications for the benefit of an individual Medicaid beneficiary may not exceed $60,000 in any consecutive five year period. If an individual requires an expenditure which exceeds the maximum expenditure amount, the Single State Medicaid Agency may submit and seek approval of an amendment to the waiver; the Single State Medicaid Agency shall provide supporting documentation as deemed necessary by CMS to support approval of the amendment. Any exceptions will be noted in the supplemental language included as part of the Comprehensive HCBS Waiver agreement.

b. Adaptive Technology

Effective with claims submitted to eMedNY on or after April 1, 2013 the maximum expenditure for adaptive technology services for the benefit of an individual Medicaid beneficiary may not exceed $35,000 in any consecutive two years period. If an individual requires an expenditure which exceeds the maximum expenditure amount, the Single State Medicaid Agency may

submit and seek approval of an amendment to the waiver; the Single State Medicaid Agency shall provide supporting documentation as deemed necessary by CMS to support approval of the amendment. Any exceptions will be noted in the supplemental language included as part of the Comprehensive HCBS Waiver agreement.

c. Community Transition Services

This service is a one-time reimbursement. The one-time payment will be no more than $3,000 per person. This service may not be used to pay for furnishing living arrangements that are owned or leased by a waiver provider where the provision of these items and services are inherent to the service they are already providing.

VII. Adjustments

a. Increases to Compensation these increases will be displayed as a separate line and calculated as stated below.

i. Applicability. On or after January first, two thousand fifteen, rates of reimbursement for providers that operate eligible programs as defined in this section will be revised to incorporate funding for compensation increases to their direct support professional employees. Such rate increases will be effective January first, two thousand fifteen. The compensation increase funding will be included in the provider's rate issued for January first, two thousand fifteen and in a subsequent rate with the inclusion of funding in the amount necessary to achieve the same funding impact as if the rate had been issued on January first, two thousand fifteen. The compensation increase funding will be inclusive of associated fringe benefits. The inclusion of this provision will be included until the use of the 1/1/2015 through 12/31/2015 CFR (Upstate) and the 7/1/2014 – 6/30/2015 CFR (Downstate) as a base at which time the adjustment will be included in the CFR and no longer necessary. The 7/1/2014 – 6/30/2015 Downstate CFR data will be adjusted to annualize the six-month increase.

ii. Definitions. As used in this section, the following terms shall have the following meanings:

(a) Direct support professionals are those defined as Direct Care and Support per Consolidated Fiscal Report (CFR) Appendix R and reported on the CFR under the Position Title code identifiers of 100 or 200. Contracted staff salary information will not be utilized.

(b) Clinical staff are those defined as Clinical per CFR Appendix R and reported on the CFR under the Position Title code identifier of 300. Contracted staff salary information will not be utilized.

(c) Eligible rate based programs shall mean supervised community residences (including supervised IRAs), supportive community residences (including supportive IRAs), or group day habilitation programs.

iii. Increases for Eligible Rate Based Programs.

iv. January first, two thousand fifteen Increase. Rates for eligible rate based programs will be revised to incorporate funding for compensation increases to direct support professional employees. Such rate increases will be effective January first, two thousand fifteen. The compensation increase funding will be included in the provider's rate issued for January first, two thousand fifteen, and in a subsequent rate with the inclusion of funding in the amount necessary to achieve the same funding impact as if the rate had been issued on January first, two thousand fifteen. The compensation increase funding will be inclusive of associated fringe benefits. The inclusion of this provision will be included until the use of the 1/1/2015 through 12/31/2015 CFR (Upstate) and the 7/1/2014 – 6/30/2015 CFR (Downstate) as a base at which time the adjustment will be included in the CFR and no longer necessary. The 7/1/2014 – 6/30/2015 Downstate CFR data will be adjusted to annualize the six-month increase.

(a) April first, two thousand fifteen Increase. In addition to the compensation funding effective January first, two thousand fifteen, providers that operate supervised IRAs, including supervised community residences, supportive IRAs, including supportive community residences, and group day habilitation will receive a compensation increase targeted to direct support professional and clinical employees to be effective April first, two thousand fifteen. The compensation increase funding will be inclusive of associated fringe benefits. The April first, two thousand fifteen direct support professionals compensation funding will be the same, on an annualized basis, as that which was calculated for the January first, two thousand fifteen compensation increase and will be an augmentation to the January first, two thousand fifteen increase.

(b) Calculations. The basis for the calculation of provider and regional direct care, support and clinical salary averages and associated fringe benefit percentages will be the data in providers' CFRs for July first, two thousand ten through June thirtieth, two thousand eleven for providers reporting on

a fiscal year basis or January first, two thousand eleven through December thirty-first, two thousand eleven for providers reporting on a calendar year basis.

1. The January first, two thousand fifteen and April first, two thousand fifteen Direct Support Professionals compensation increase funding formula will be as follows:

   A) The annual impact of a two percent increase to 2010-11 or 2011 salaried direct care dollars, salaried support dollars and associated fringe benefits will be calculated.

   B) The annual impact of the two percent increase for salaried direct care dollars, salaried support dollars and associated fringe will be added to the appropriate operating components in the rate methodology. This will result in a recalculation of provider and regional average direct care wages, provider and regional average employee-related components, provider and regional average program support components, and provider and regional average direct care hourly rates.

   C) The provider direct care hourly rate – adjusted for wage equalization factor will be recalculated to utilize the provider average direct care hourly rate and regional average direct care hourly rate, as calculated in subparagraph 2) of this paragraph.

   D) An identification will be made of the dollar difference between the provider direct care hourly rate – adjusted for wage equalization factor, which is in the rate in effect on December thirty-first, two thousand fourteen, and the provider direct care hourly rate – adjusted for wage equalization factor, as calculated in subparagraph 3) of this paragraph.

   E) The rate difference identified in subparagraph 4) of this paragraph will be multiplied by the calculated direct care hours in the rate in effect on December thirty-first, two thousand fourteen to calculate the additional funding generated by the direct care compensation adjustment.

F) The rate add-on for the compensation increase shall be determined by dividing the additional funding, as calculated in subparagraph 5) of this paragraph by the rate sheet units in effect on January first, two thousand fifteen.

2. The April first, two thousand fifteen Clinical compensation increase funding formula will be as follows:

A) The annual impact of a two percent increase to 2010-11 or 2011 salaried clinical dollars and associated fringe benefits will be calculated.

B) The annual impact of the two percent increase for salaried clinical dollars and associated fringe will be added to the appropriate operating components in the rate methodology. This will result in a recalculation of provider and regional average employee-related components, provider and regional average clinical hourly wages.

C) The provider clinical hourly wage – adjusted for wage equalization factor will be recalculated to utilize the provider average clinical hourly wage and regional average clinical hourly wage, as calculated in subparagraph 2) of this paragraph.

D) An identification will be made of the dollar difference between the provider clinical hourly wage – adjusted for wage equalization factor, which is in the rate in effect on December thirty-first, two thousand fourteen, and the provider clinical hourly wage – adjusted for wage equalization factor, as calculated in subparagraph 3) of this paragraph.

E) The rate difference identified in subparagraph 4) of this paragraph will be multiplied by the provider salaried clinical hours in the rate in effect on December thirty-first, two thousand fourteen to calculate the additional funding generated by the clinical compensation adjustment.

F) The rate add-on for the compensation increase shall be determined by dividing the additional funding, as calculated in

subparagraph 5) of this paragraph by the rate sheet units in effect on January first, two thousand fifteen.

v. This section will be in effect until the first year of the two year rate cycle beginning on 7/1/2017. After which there will no longer be an add-on to the calculated hourly rate.

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
A VERY SPECIAL PLACE INC DAY	133005006	02703560	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$149.10	01-OCT-12	$149.10	01-MAY-14	$ 149.48
A VERY SPECIAL PLACE INC DAY	133005006	02703560	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$92.31	01-OCT-12	$92.31	01-MAY-14	$ 92.50
AABR INC DAY	131968035	02692437	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$158.74	01-OCT-12	$158.74	01-MAY-14	$ 158.74
AABR INC DAY	131968035	02692437	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$92.43	01-OCT-12	$92.43	01-MAY-14	$ 92.43
ABBOTT HOUSE DAY	131991946	02704061	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$136.29	01-JAN-13	$136.43	01-MAY-14	$ 135.18
ABBOTT HOUSE DAY	131991946	02704061	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$74.22	01-JAN-13	$74.29	01-MAY-14	$ 73.67
ABILITIES FIRST INC DAY	141467427	02701384	3	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$140.72	01-JAN-13	$139.92	01-MAY-14	$ 140.69
ABILITIES FIRST INC DAY	141467427	02701384	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$81.52	01-JAN-13	$81.11	01-MAY-14	$ 81.55
ABILITIES INC DAY/CH	111710419	03506296	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)			01-FEB-13	$175.11	01-MAY-14	$ 175.11
ABILITIES INC DAY/CH	111710419	03506296	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)			01-FEB-13	$99.27	01-MAY-14	$ 99.27
ABILITY BEYOND DISABILITY DAY	141758770	02703946	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$198.88	01-JAN-13	$200.44	01-MAY-14	$ 174.60
ABILITY BEYOND DISABILITY DAY	141758770	02703946	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$112.70	01-JAN-13	$113.49	01-MAY-14	$ 101.02
ABLE2 ENHANCING POTENTIAL, INC DAY	161091767	02702550	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$140.40	01-JAN-13	$140.38	01-MAY-14	$ 140.96
ABLE2 ENHANCING POTENTIAL, INC DAY	161091767	02702550	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$78.20	01-JAN-13	$78.19	01-MAY-14	$ 78.48
ACLD GROUP DAY HAB DAY	116042250	02704070	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$177.80	01-JAN-13	$177.11	01-MAY-14	$ 179.65
ACLD GROUP DAY HAB DAY	116042250	02704070	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$106.12	01-JAN-13	$105.78	01-MAY-14	$ 107.04
ADULT RETARDATES CTR INC DAY	111986300	02692491	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$121.73	01-OCT-12	$121.73	01-MAY-14	$ 121.73
ADULT RETARDATES CTR INC DAY	111986300	02692491	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$73.92	01-OCT-12	$73.92	01-MAY-14	$ 73.92
AGAPE PARENT FELLOWSHIP DAY	112617454	02704043	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$88.30	01-JAN-13	$88.30	01-MAY-14	$ 88.30
AGAPE PARENT FELLOWSHIP DAY	112617454	02704043	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$54.35	01-JAN-13	$54.35	01-MAY-14	$ 54.35
AHIVIM INC DAY	261488729	02952596	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$121.50	01-JUL-12	$121.50	01-MAY-14	$ 121.50
AHIVIM INC DAY	261488729	02952596	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$60.75	01-JUL-12	$60.75	01-MAY-14	$ 60.75
AIM SERVICES INC DAY	141609398	02692473	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$118.78	01-JAN-13	$118.78	01-MAY-14	$ 118.78
AIM SERVICES INC DAY	141609398	02692473	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$59.39	01-JAN-13	$59.39	01-MAY-14	$ 59.39
ALBANY CO CHAPTER NYSARC DAY	141392181	02704034	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$107.91	01-FEB-13	$0.00	01-FEB-13	$ -
ALBANY CO CHAPTER NYSARC DAY	141392181	02704034	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$63.65	01-FEB-13	$0.00	01-FEB-13	$ -
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$185.05	01-JAN-13	$184.99	01-MAY-14	$ 184.91
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$110.01	01-JAN-13	$109.98	01-MAY-14	$ 109.94
ANDERSON CENTER SERVICES INC DAY	222923873	02707862	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-MAR-2012	$192.15	01-JAN-13	$191.53	01-MAY-14	$ 169.17
ANDERSON CENTER SERVICES INC DAY	222923873	02707862	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-MAR-2012	$101.80	01-JAN-13	$101.50	01-MAY-14	$ 90.84
ANGELS UNAWARE INC	133753509	02692464	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$121.77	01-OCT-12	$121.77	01-MAY-14	$ 122.37
ANGELS UNAWARE INC	133753509	02692464	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$74.33	01-OCT-12	$74.33	01-MAY-14	$ 74.63
ANOTHER STEP INC DAY	133680851	02692419	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$152.48	01-JAN-13	$152.48	01-MAY-14	$ 152.48
ANOTHER STEP INC DAY	133680851	02692419	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$76.24	01-JAN-13	$76.24	01-MAY-14	$ 76.24
ARISE DAY	161186293	02704025	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$104.55	01-JAN-13	$104.31	01-MAY-14	$ 104.06

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
ARISE DAY	161186293	02704025	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$55.97	01-JAN-13	$55.85	01-MAY-14	$ 55.72
ASBM INC	112685324	02704016	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$169.64	01-OCT-12	$169.64	01-MAY-14	$ 171.18
ASBM INC	112685324	02704016	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$98.21	01-OCT-12	$98.21	01-MAY-14	$ 98.98
ASPIRE DF WNY INC DAY	160757756	02692455	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-FEB-2013	$178.74	01-FEB-13	$178.50	01-MAY-14	$ 177.13
ASPIRE DF WNY INC DAY	160757756	02692455	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-FEB-2013	$116.75	01-FEB-13	$116.63	01-MAY-14	$ 115.95
ASSOC /CHILDREN WITH DOWN DAY/AHRH	237175975	03257150	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$164.18	01-JAN-13	$164.18	01-MAY-14	$ 164.18
ASSOC /CHILDREN WITH DOWN DAY/AHRH	237175975	03257150	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$98.79	01-JAN-13	$98.79	01-MAY-14	$ 98.79
ASSOC MENT ILL CHILD W DAY	132554243	02692446	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$91.72	01-JAN-13	$91.72	01-MAY-14	$ 91.72
ASSOC MENT ILL CHILD W DAY	132554243	02692446	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$45.86	01-JAN-13	$45.86	01-MAY-14	$ 45.86
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$131.73	01-OCT-12	$131.73	01-MAY-14	$ 129.43
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$78.88	01-OCT-12	$78.88	01-MAY-14	$ 77.73
ASSOC-METROAREA AU CHILD DAY	131974582	02692428	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$134.72	01-JUL-12	$134.72	01-MAY-14	$ 136.07
ASSOC-METROAREA AU CHILD DAY	131974582	02692428	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$80.63	01-JUL-12	$80.63	01-MAY-14	$ 81.31
AUTISTIC SERVICES INC DAY	161185024	02700961	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$110.74	01-JAN-13	$118.10	01-MAY-14	$ 132.02
AUTISTIC SERVICES INC DAY	161185024	02700961	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$61.02	01-JAN-13	$64.70	01-MAY-14	$ 74.60
BATTENKILL COMM SVCS DAY	141810997	02692542	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$122.08	01-JAN-13	$122.08	01-MAY-14	$ 122.08
BATTENKILL COMM SVCS DAY	141810997	02692542	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$61.04	01-JAN-13	$61.04	01-MAY-14	$ 61.04
BIRCH FAMILY SVCS INC DAY	112503193	02781015	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$191.55	01-JAN-13	$191.99	01-MAY-14	$ 189.88
BIRCH FAMILY SVCS INC DAY	112503193	02781015	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$108.15	01-JAN-13	$108.99	01-MAY-14	$ 107.94
BKLYN BUREAU OF COMM SVC	111630780	02703991	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$138.72	01-OCT-12	$138.72	01-MAY-14	$ 138.63
BKLYN BUREAU OF COMM SVC	111630780	02703991	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$78.39	01-OCT-12	$78.39	01-MAY-14	$ 78.34
BLOCK INSTITUTE	112416320	02703982	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$173.56	01-JUL-12	$173.56	01-MAY-14	$ 173.48
BLOCK INSTITUTE	112416320	02703982	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$103.23	01-JUL-12	$103.23	01-MAY-14	$ 103.19
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$107.09	01-JAN-13	$106.77	01-MAY-14	$ 106.77
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$60.93	01-JAN-13	$60.77	01-MAY-14	$ 60.77
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$197.34	01-JAN-12	$197.34	01-MAY-14	$ 197.34
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$98.67	01-JAN-12	$98.67	01-MAY-14	$ 98.67
CAMP VENTURE	132661988	02703964	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$145.98	01-JAN-13	$145.34	01-MAY-14	$ 144.85
CAMP VENTURE	132661988	02703964	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$84.96	01-JAN-13	$84.64	01-MAY-14	$ 84.39
CANTALICIAN CTR LEARN DAY	161003618	02692524	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$137.93	01-JAN-13	$137.93	01-MAY-14	$ 139.72
CANTALICIAN CTR LEARN DAY	161003618	02692524	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$86.26	01-JAN-13	$86.26	01-MAY-14	$ 87.16
CAPITAL REGION GER CTR DAY	141701597	02692515	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$59.25	01-JAN-12	$59.25	01-MAY-14	$ 59.24
CAPITAL REGION GER CTR DAY	141701597	02692515	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$34.87	01-JAN-12	$34.87	01-MAY-14	$ 34.87
CARDINAL HAYES HOME FOR CHILDREN DA	141395444	03520216	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-MAY-14	$ 208.53
CARDINAL HAYES HOME FOR CHILDREN DA	141395444	03520216	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-MAY-14	$ 111.00

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CARDINAL MCCLOSKEY SVCS DAY	131740443	02692973	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$147.39	01-JUL-12	$147.39	01-MAY-14	$ 150.80
CARDINAL MCCLOSKEY SVCS DAY	131740443	02692973	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$84.38	01-JUL-12	$84.38	01-MAY-14	$ 86.08
CAREERS F/PEOPLE W/DISAB DAY/CH	133424844	03609721	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-MAY-14	$ 148.83
CAREERS F/PEOPLE W/DISAB DAY/CH	133424844	03609721	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-MAY-14	$ 74.42
CARL FENICHEL COMM SVCS DAY	112449485	02703973	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$214.19	01-JUL-12	$214.19	01-MAY-14	$ 218.78
CARL FENICHEL COMM SVCS DAY	112449485	02703973	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$122.87	01-JUL-12	$122.87	01-MAY-14	$ 125.17
CATH CHAR NGHBHD SVCS INC DAY	112047151	02704052	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$143.34	01-JUL-12	$143.34	01-MAY-14	$ 142.85
CATH CHAR NGHBHD SVCS INC DAY	112047151	02704052	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$85.20	01-JUL-12	$85.20	01-MAY-14	$ 84.96
CATTARAUGUS CO AGING DAY	166002555	02704603	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$89.52	01-JAN-13	$89.52	01-MAY-14	$ -
CATTARAUGUS CO AGING DAY	166002555	02704603	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$60.66	01-JAN-13	$60.66	01-MAY-14	$ -
CAY COMM SVC ORG INC	113235840	02704552	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$143.55	01-JUL-12	$143.55	01-MAY-14	$ 148.83
CAY COMM SVC ORG INC	113235840	02704552	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$82.92	01-JUL-12	$82.92	01-MAY-14	$ 85.56
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$196.02	01-JAN-13	$195.86	01-MAY-14	$ 195.21
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$110.45	01-JAN-13	$110.37	01-MAY-14	$ 110.05
CDS MONARCH INC DAY	161089115	02693089	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$158.98	01-JAN-13	$158.98	01-MAY-14	$ 158.98
CDS MONARCH INC DAY	161089115	02693089	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$93.29	01-JAN-13	$93.29	01-MAY-14	$ 93.29
CENTER F/DEVELOP DISABIL DAY	111874383	02693007	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$153.27	01-JAN-13	$150.22	01-MAY-14	$ 152.61
CENTER F/DEVELOP DISABIL DAY	111874383	02693007	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$96.19	01-JAN-13	$94.61	01-MAY-14	$ 95.65
CENTER F/DISAB SVCS DAY	141425851	02704483	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$202.08	01-JAN-13	$201.96	01-MAY-14	$ 201.92
CENTER F/DISAB SVCS DAY	141425851	02704483	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$128.62	01-JAN-13	$128.56	01-MAY-14	$ 128.54
CENTER F/RAPID RECVRY	113246332	02704561	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$111.30	01-JAN-13	$108.00	01-MAY-14	$ 105.90
CENTER F/RAPID RECVRY	113246332	02704561	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$66.54	01-JAN-13	$64.90	01-MAY-14	$ 63.85
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-MAR-2012	$152.77	01-JAN-13	$149.83	01-MAY-14	$ 161.03
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-MAR-2012	$95.98	01-JAN-13	$94.50	01-MAY-14	$ 100.11
CHAUTAUQUA ADC INC DAY	161182855	02704589	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$93.29	01-JAN-12	$93.29	01-MAY-14	$ 93.29
CHAUTAUQUA ADC INC DAY	161182855	02704589	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$58.10	01-JAN-12	$58.10	01-MAY-14	$ 58.10
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$138.82	01-JAN-13	$138.79	01-MAY-14	$ 145.60
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$77.86	01-JAN-13	$77.84	01-MAY-14	$ 81.25
CHEMLU DEV DISAB CTR	352198039	02704570	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$107.36	01-JAN-13	$107.36	01-MAY-14	$ 107.36
CHEMLU DEV DISAB CTR	352198039	02704570	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$53.68	01-JAN-13	$53.68	01-MAY-14	$ 53.68
CHEMUNG CO ARC DAY	160795709	02704474	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$60.13	01-JAN-13	$60.13	01-MAY-14	$ 68.29
CHEMUNG CO ARC DAY	160795709	02704474	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$32.02	01-JAN-13	$32.02	01-MAY-14	$ 36.10
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$81.62	01-JAN-13	$81.62	01-MAY-14	$ 81.10
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$53.42	01-JAN-13	$53.42	01-MAY-14	$ 51.49
CITIZEN ADVOCATES INC DAY	141577715	02693016	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$122.26	01-JAN-13	$122.19	01-MAY-14	$ 123.17

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CITIZEN ADVOCATES INC DAY	141577715	02693016	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$71.98	01-JAN-13	$71.95	01-MAY-14	$ 72.47
CITY ACCESS NY INC DAY	203786663	02861585	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$135.53	01-OCT-12	$135.53	01-MAY-14	$ 135.53
CITY ACCESS NY INC DAY	203786663	02861585	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$67.76	01-OCT-12	$67.76	01-MAY-14	$ 67.76
CLADDAGH COMMISSION INC DAY	161096096	02693034	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$113.92	01-JAN-13	$113.73	01-MAY-14	$ 113.38
CLADDAGH COMMISSION INC DAY	161096096	02693034	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$64.68	01-JAN-13	$64.58	01-MAY-14	$ 64.40
CLINTON CO CHAP NYSARC DAY	141463735	02704781	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$240.14	01-JAN-13	$237.86	01-MAY-14	$ 237.88
CLINTON CO CHAP NYSARC DAY	141463735	02704781	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$137.84	01-JAN-13	$136.70	01-MAY-14	$ 136.71
CNTRO SOC LA ESPERANZA DAY	132688412	02704772	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$137.86	01-JUL-12	$137.86	01-MAY-14	$ 141.49
CNTRO SOC LA ESPERANZA DAY	132688412	02704772	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$84.44	01-JUL-12	$84.44	01-MAY-14	$ 86.26
COLUMBIA COUNTY ARC DAY	141489603	02693112	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-NOV-2012	$149.27	01-JAN-13	$149.94	01-JUN-14	$ 152.82
COLUMBIA COUNTY ARC DAY	141489603	02693112	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2012	$86.48	01-JAN-13	$86.87	01-JUN-14	$ 88.57
COMM ACTION/HUMAN SVCS DAY	222317376	02704790	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$155.11	01-JUL-12	$155.11	01-MAY-14	$ 152.18
COMM ACTION/HUMAN SVCS DAY	222317376	02704790	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$90.95	01-JUL-12	$90.95	01-MAY-14	$ 89.48
COMM AID F/RETARD CHIL DAY	136160907	02703551	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$127.10	01-JAN-13	$125.71	01-MAY-14	$ 114.80
COMM AID F/RETARD CHIL DAY	136160907	02703551	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$65.84	01-JAN-13	$65.15	01-MAY-14	$ 59.69
COMM RES SVC/CHILDREN DAY	113307991	02781024	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$137.87	01-OCT-12	$137.87	01-MAY-14	$ 141.03
COMM RES SVC/CHILDREN DAY	113307991	02781024	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$82.07	01-OCT-12	$82.07	01-MAY-14	$ 83.65
COMM RESOURCE CTR F/OD DAY	132954788	02772347	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)			01-JUL-12	155.34	01-JUL-12	$ 155.34
COMM RESOURCE CTR F/OD DAY	132954788	02772347	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)			01-JUL-12	90.17	01-JUL-12	$ 90.17
COMM SVCS F/T DEV DISB DAY	161317369	02704350	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$138.59	01-JAN-13	$161.11	01-MAY-14	$ 149.82
COMM SVCS F/T DEV DISB DAY	161317369	02704350	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$78.33	01-JAN-13	$89.94	01-MAY-14	$ 84.91
COMM WORK INDEPEND DAY	141470091	02704369	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-FEB-2013	$129.03	01-FEB-13	$129.17	01-JUN-14	$ 129.46
COMM WORK INDEPEND DAY	141470091	02704369	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-FEB-2013	$74.61	01-FEB-13	$74.68	01-JUN-14	$ 74.84
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$197.13	01-JUL-12	$197.13	01-MAY-14	$ 197.13
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$111.96	01-JUL-12	$111.96	01-MAY-14	$ 111.96
COMMUNITY BASED SERVICES INC DAY/CH	133070655	03418724	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$159.07	01-SEP-12	$159.07	01-MAY-14	$ 159.07
COMMUNITY BASED SERVICES INC DAY/CH	133070655	03418724	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$85.22	01-SEP-12	$85.22	01-MAY-14	$ 85.22
COMMUNITY ENTERPRISES DAY	510178661	02704378	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$98.47	01-JAN-13	$98.47	01-MAY-14	$ 98.47
COMMUNITY ENTERPRISES DAY	510178661	02704378	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$60.61	01-JAN-13	$60.61	01-MAY-14	$ 60.61
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$149.43	01-JAN-13	$149.43	01-MAY-14	$ 149.43
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$85.15	01-JAN-13	$85.15	01-MAY-14	$ 85.15
COMMUNITY LIVING CORP DAY/AHRH	133563609	03185577	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$114.52	01-JAN-13	$114.52	01-MAY-14	$ 114.52
COMMUNITY LIVING CORP DAY/AHRH	133563609	03185577	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$58.75	01-JAN-13	$58.75	01-MAY-14	$ 58.75
COMMUNITY OPTIONS NY DAY	113414724	02703937	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$160.48	01-JUL-12	$160.48	01-MAY-14	$ 141.86
COMMUNITY OPTIONS NY DAY	113414724	02703937	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$90.23	01-JUL-12	$90.23	01-MAY-14	$ 81.00

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COMMUNITY PLACE/GR ROCH DAY	161602979	02707904	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$50.83	01-JAN-12	$50.83	01-JAN-14	$ -
COMMUNITY PLACE/GR ROCH DAY	161602979	02707904	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$34.06	01-JAN-12	$34.06	01-JAN-14	$ -
COMMUNITY PROGS OF WJCS DAY	132985945	02704396	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$108.02	01-JAN-13	$108.02	01-MAY-14	$ 108.02
COMMUNITY PROGS OF WJCS DAY	132985945	02704396	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$54.01	01-JAN-13	$54.01	01-MAY-14	$ 54.01
CONTEMPORARY GUIDANCE SV DAY	132730776	02709786	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$128.96	01-OCT-12	$128.96	01-MAY-14	$ 128.96
CONTEMPORARY GUIDANCE SV DAY	132730776	02709786	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$77.83	01-OCT-12	$77.83	01-MAY-14	$ 77.83
CREATIVE LIFESTYLES INC DAY	113151481	02698108	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$189.39	01-OCT-12	$189.39	01-MAY-14	$ 189.09
CREATIVE LIFESTYLES INC DAY	113151481	02698108	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$111.52	01-OCT-12	$111.52	01-MAY-14	$ 111.37
CROSSROADS UNLIMITED INC DAY/AHRH	710967724	03101071	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$170.08	01-JUL-12	$170.08	01-MAY-14	$ 170.08
CROSSROADS UNLIMITED INC DAY/AHRH	710967724	03101071	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$98.04	01-JUL-12	$98.04	01-MAY-14	$ 98.04
CRYSTAL RUN VILLAGE DAY	112466996	02698117	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$141.96	01-JAN-13	$142.16	01-MAY-14	$ 141.74
CRYSTAL RUN VILLAGE DAY	112466996	02698117	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$92.35	01-JAN-13	$92.45	01-MAY-14	$ 92.24
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$89.05	01-JAN-12	$89.05	01-MAY-14	$ 89.05
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$44.53	01-JAN-12	$44.53	01-MAY-14	$ 44.53
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$133.10	01-OCT-12	$133.10	01-MAY-14	$ 133.10
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$74.64	01-OCT-12	$74.64	01-MAY-14	$ 74.64
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$172.79	01-OCT-12	$172.79	01-MAY-14	$ 181.06
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$99.61	01-OCT-12	$99.61	01-MAY-14	$ 103.75
DELAWARE OPP INC DAY	166063879	02704410	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$109.30	01-JAN-12	$109.30	01-MAY-14	$ 109.30
DELAWARE OPP INC DAY	166063879	02704410	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$54.65	01-JAN-12	$54.65	01-MAY-14	$ 54.65
DEPAUL DEV SERVICES DAY	202017098	02734614	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$98.89	01-JAN-13	$98.89	01-MAY-14	$ 98.89
DEPAUL DEV SERVICES DAY	202017098	02734614	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$49.44	01-JAN-13	$49.44	01-MAY-14	$ 49.44
DEVELOPMENTAL DIST INST DAY	116077347	02700741	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$187.67	01-JAN-13	$188.24	01-MAY-14	$ 189.60
DEVELOPMENTAL DIST INST DAY	116077347	02700741	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$110.24	01-JAN-13	$110.51	01-MAY-14	$ 111.19
DEVEREUX FOUNDATION DAY	231390618	02698382	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$82.76	01-JAN-13	$89.25	01-MAY-14	$ 91.11
DEVEREUX FOUNDATION DAY	231390618	02698382	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$41.38	01-JAN-13	$44.91	01-MAY-14	$ 46.03
DISABLED PERSONS ACTION DAY	222194058	02698415	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$102.95	01-JAN-13	$102.77	01-MAY-14	$ 102.39
DISABLED PERSONS ACTION DAY	222194058	02698415	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$51.83	01-JAN-13	$51.74	01-MAY-14	$ 51.55
E DOUGHLIN CTR SVC PPLE DAY	113356044	02703597	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$137.43	01-OCT-12	$137.43	01-MAY-14	$ 171.06
E DOUGHLIN CTR SVC PPLE DAY	113356044	02703597	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$81.59	01-OCT-12	$81.59	01-MAY-14	$ 99.74
EAST END DISABILITY DAY	113318718	02698406	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$144.12	01-JAN-13	$143.28	01-MAY-14	$ 143.22
EAST END DISABILITY DAY	113318718	02698406	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$83.97	01-JAN-13	$83.55	01-MAY-14	$ 83.52
ECONOMIC OPPORTUNITY COUNCIL DAY	112141197	03062879	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$140.69	01-JAN-13	$140.69	01-MAY-14	$ 140.69
ECONOMIC OPPORTUNITY COUNCIL DAY	112141197	03062879	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$82.42	01-JAN-13	$82.42	01-MAY-14	$ 82.41
EDEN II SCHL AUT/CHILD DAY	132872916	02698391	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$193.00	01-JAN-13	$192.16	01-MAY-14	$ 190.93

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EDEN II SCHL AUT/CHILD DAY	132872916	02698391	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$109.62	01-JAN-13	$109.20	01-MAY-14	$ 108.62
EDWIN GOULD SERVICES DAY/CH	135675643	03371799	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$189.20	01-FEB-13	$196.50	01-MAY-14	$ 189.20
EDWIN GOULD SERVICES DAY/CH	135675643	03371799	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$108.00	01-FEB-13	$112.58	01-MAY-14	$ 108.00
EIHAB HUMAN SVCS INC DAY	113376415	02704429	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$171.14	01-OCT-12	$171.14	01-MAY-14	$ 170.14
EIHAB HUMAN SVCS INC DAY	113376415	02704429	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$98.36	01-OCT-12	$98.36	01-MAY-14	$ 97.86
ELMYS SPECIAL SERVICES DAY	020590957	02704438	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$158.06	01-OCT-12	$158.06	01-MAY-14	$ 162.55
ELMYS SPECIAL SERVICES DAY	020590957	02704438	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$92.77	01-OCT-12	$92.77	01-MAY-14	$ 95.01
EPILEPSY FOUND LI INC DAY	111821135	02693043	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$152.78	01-JAN-13	$152.24	01-MAY-14	$ 153.29
EPILEPSY FOUND LI INC DAY	111821135	02693043	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$90.37	01-JAN-13	$90.10	01-MAY-14	$ 90.64
EPILEPSY INSTITUTE DAY	132608325	02704465	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$221.34	01-JUL-12	$221.34	01-MAY-14	$ 221.34
EPILEPSY INSTITUTE DAY	132608325	02704465	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$110.67	01-JUL-12	$110.67	01-MAY-14	$ 110.67
EPISCOPAL SOCIAL SVCS DAY	133709095	02849172	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$329.97	01-JUL-12	$329.97	01-MAY-14	$ 329.97
EPISCOPAL SOCIAL SVCS DAY	133709095	02849172	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$177.74	01-JUL-12	$177.74	01-MAY-14	$ 177.74
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$149.84	01-JAN-13	$149.84	01-MAY-14	$ 149.84
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$97.02	01-JAN-13	$97.02	01-MAY-14	$ 97.02
ESSEX CO CHAP NYSARC DAY	141563885	02699407	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-NOV-2012	$179.39	01-JAN-13	$200.66	01-JUN-14	$ 199.04
ESSEX CO CHAP NYSARC DAY	141563885	02699407	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2012	$100.76	01-JAN-13	$111.39	01-JUN-14	$ 99.52
EUROPA ASSOC INC DAY	141796294	02704305	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2009	$114.21	01-JAN-09	$114.21	01-JAN-09	$ 114.21
EUROPA ASSOC INC DAY	141796294	02704305	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2009	$58.69	01-JAN-09	$58.69	01-JAN-09	$ 58.69
FAM EMPOWERMENT CNCL	133751820	02699416	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$98.81	01-JAN-13	$98.28	01-MAY-14	$ 97.13
FAM EMPOWERMENT CNCL	133751820	02699416	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$49.40	01-JAN-13	$49.14	01-MAY-14	$ 48.57
FEDERATION OF MULT PROG DAY	112422505	02701408	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$118.71	01-JUL-12	$118.71	01-MAY-14	$ 118.71
FEDERATION OF MULT PROG DAY	112422505	02701408	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$59.35	01-JUL-12	$59.35	01-MAY-14	$ 59.35
FEGS DAY	131624000	02699163	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$184.40	01-JAN-13	$184.40	01-MAY-14	$ 190.28
FEGS DAY	131624000	02699163	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$116.96	01-JAN-13	$116.96	01-MAY-14	$ 120.03
FINGER LAKES UCP INC DAY	160965912	02699383	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$139.00	01-JAN-13	$139.00	01-MAY-14	$ 139.00
FINGER LAKES UCP INC DAY	160965912	02699383	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$82.83	01-JAN-13	$82.83	01-MAY-14	$ 82.83
FOOTINGS INC DAY	061364619	02699365	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$101.58	01-JAN-13	$101.58	01-MAY-14	$ 101.48
FOOTINGS INC DAY	061364619	02699365	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$58.56	01-JAN-13	$58.56	01-MAY-14	$ 58.51
FRANKLIN CO NYSARC DAY	237150954	02702409	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$214.59	01-JAN-13	$214.59	01-MAY-14	$ 213.81
FRANKLIN CO NYSARC DAY	237150954	02702409	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$114.79	01-JAN-13	$114.79	01-MAY-14	$ 114.52
FRANZISKA RACKER CTR DAY	150581887	02699154	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$106.50	01-JAN-13	$81.17	01-MAY-14	$ 143.63
FRANZISKA RACKER CTR DAY	150581887	02699154	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$57.93	01-JAN-13	$41.86	01-MAY-14	$ 81.24
FREE DAY	112420547	02693070	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$163.20	01-MAR-13	$162.62	01-MAY-14	$ 163.13
FREE DAY	112420547	02693070	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$98.58	01-MAR-13	$98.29	01-MAY-14	$ 98.54

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FULTON CNTY ARC DAY	146020996	02699374	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$155.78	01-JAN-13	$155.79	01-JUN-14	$ 157.60
FULTON CNTY ARC DAY	146020996	02699374	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$82.25	01-JAN-13	$82.31	01-JUN-14	$ 83.14
GATEWAY COMMUNITY IND DAY	141458757	02699392	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$104.00	01-JAN-13	$104.00	01-MAY-14	$ 104.47
GATEWAY COMMUNITY IND DAY	141458757	02699392	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$58.06	01-JAN-13	$58.06	01-MAY-14	$ 58.30
GATEWAY COUNSELING CTR DAY	133492890	02693052	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$135.15	01-OCT-12	$135.15	01-MAY-14	$ 133.48
GATEWAY COUNSELING CTR DAY	133492890	02693052	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$87.50	01-OCT-12	$87.50	01-MAY-14	$ 86.67
GENERAL HUMAN OUTREACH DAY	113134570	02699356	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$129.49	01-OCT-12	$129.49	01-MAY-14	$ 127.72
GENERAL HUMAN OUTREACH DAY	113134570	02699356	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$81.36	01-OCT-12	$81.36	01-MAY-14	$ 80.48
GENESEE CO CHAP NYSARC DAY	161001185	02699181	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$120.48	01-JAN-13	$120.48	01-MAY-14	$ 120.48
GENESEE CO CHAP NYSARC DAY	161001185	02699181	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$69.92	01-JAN-13	$69.92	01-MAY-14	$ 69.92
GOODWILL IND GR NY/NJ DAY	131641068	02699214	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$173.39	01-JUL-12	$173.39	01-MAY-14	$ 173.39
GOODWILL IND GR NY/NJ DAY	131641068	02699214	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$99.69	01-JUL-12	$99.69	01-MAY-14	$ 99.69
GRACE LUTHERAN RES SVC DAY	161554927	02699145	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)			01-JAN-13	$80.97	01-MAY-14	$ 80.97
GRACE LUTHERAN RES SVC DAY	161554927	02699145	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)			01-JAN-13	$43.44	01-MAY-14	$ 43.44
GREYSTONE PROGRAMS INC DAY	141608318	02699269	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$163.08	01-JAN-13	$163.83	01-MAY-14	$ 160.32
GREYSTONE PROGRAMS INC DAY	141608318	02699269	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$91.48	01-JAN-13	$91.85	01-MAY-14	$ 90.19
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$136.94	01-OCT-12	$136.94	01-MAY-14	$ 137.01
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$84.78	01-OCT-12	$84.78	01-MAY-14	$ 84.82
HAITIAN AMER UN/ PROGR DAY	112423857	02699127	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$103.04	01-OCT-12	$103.04	01-MAY-14	$ 103.04
HAITIAN AMER UN/ PROGR DAY	112423857	02699127	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$64.52	01-OCT-12	$64.52	01-MAY-14	$ 64.52
HALO NETWORK INC DAY/CH	270408181	03423558	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$136.30	01-JAN-13	$136.30	01-MAY-14	$ 136.30
HALO NETWORK INC DAY/CH	270408181	03423558	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$79.41	01-JAN-13	$79.41	01-MAY-14	$ 79.41
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$251.77	01-JAN-13	$251.00	01-MAY-14	$ 238.04
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$143.19	01-JAN-13	$142.81	01-MAY-14	$ 136.33
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$161.46	01-NOV-12	$161.46	01-MAY-14	$ 161.46
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$94.13	01-NOV-12	$94.13	01-MAY-14	$ 94.13
HANDICAPPED CHILD SO NY DAY	150516395	02699190	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$111.34	01-JAN-12	$111.34	01-MAY-14	$ 150.10
HANDICAPPED CHILD SO NY DAY	150516395	02699190	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$55.67	01-JAN-12	$55.67	01-MAY-14	$ 83.49
HARMONY SERVICES INC DAY	201134350	02838622	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$151.97	01-OCT-12	$151.19	01-MAY-14	$ 153.62
HARMONY SERVICES INC DAY	201134350	02838622	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$89.13	01-OCT-12	$88.73	01-MAY-14	$ 89.95
HASC CENTER DAY	112630071	02693061	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$181.78	01-JUL-12	$181.78	01-MAY-14	$ 178.91
HASC CENTER DAY	112630071	02693061	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$108.26	01-JUL-12	$108.26	01-MAY-14	$ 106.82
HAWTHORNE FOUNDATION INC DAY	133447893	02693098	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$165.73	01-JAN-13	$165.43	01-MAY-14	$ 158.16
HAWTHORNE FOUNDATION INC DAY	133447893	02693098	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$94.17	01-JAN-13	$94.03	01-MAY-14	$ 90.39
HEAD INJURY ASSOCIATION INC DAY	112946185	02700094	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$137.75	01-JAN-13	$145.07	01-MAY-14	$ 156.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
HEAD INJURY ASSOCIATION INC DAY	112946185	02700094	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$86.04	01-JAN-13	$89.71	01-MAY-14	$ 96.44
HEALTH ASSOC/NIAGARA CO DAY	160743206	02699205	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$83.14	01-JAN-12	$83.14	01-JAN-12	$ 83.14
HEALTH ASSOC/NIAGARA CO DAY	160743206	02699205	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$53.12	01-JAN-12	$53.12	01-JAN-12	$ 53.12
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$187.62	01-JAN-13	$187.36	01-MAY-14	$ 189.79
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$112.65	01-JAN-13	$112.52	01-MAY-14	$ 113.61
HEAVENS HANDS COMM SVCS DAY	200225064	02703588	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$243.71	01-OCT-12	$243.71	01-MAY-14	$ 242.36
HEAVENS HANDS COMM SVCS DAY	200225064	02703588	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$135.40	01-OCT-12	$135.40	01-MAY-14	$ 134.72
HELEN KELLER SERVICES F/T BLIND DAY	111630807	03044153	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$117.08	01-JUL-12	$117.08	01-MAY-14	$ 118.27
HELEN KELLER SERVICES F/T BLIND DAY	111630807	03044153	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$70.05	01-JUL-12	$70.05	01-MAY-14	$ 70.71
HELP ON THE WAY INC	141986513	03382116	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-AUG-2012	$180.05	01-SEP-12	$180.05	01-MAY-14	$ 180.05
HELP ON THE WAY INC	141986513	03382116	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-AUG-2012	$102.76	01-SEP-12	$102.76	01-MAY-14	$ 102.76
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-NOV-2012	$133.65	01-JAN-13	$132.97	01-MAY-14	$ 134.80
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2012	$71.54	01-JAN-13	$71.20	01-MAY-14	$ 72.36
HERITAGE FARM INC DAY	161250913	02701393	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$134.74	01-JAN-13	$134.59	01-MAY-14	$ 134.22
HERITAGE FARM INC DAY	161250913	02701393	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$75.05	01-JAN-13	$74.97	01-MAY-14	$ 74.79
HERITAGE HUMAN SERVICES INC	264692822	03357164	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-AUG-2012	$196.21	01-AUG-12	$196.21	01-MAY-14	$ 196.21
HERITAGE HUMAN SERVICES INC	264692822	03357164	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-AUG-2012	$111.11	01-AUG-12	$111.11	01-MAY-14	$ 111.11
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$135.03	01-JAN-13	$134.74	01-MAY-14	$ 135.21
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$73.54	01-JAN-13	$73.40	01-MAY-14	$ 73.69
HICKOK CENTER FOR BRAIN INJURY DAY	223127533	03024559	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$138.32	01-JAN-12	$138.32	01-MAY-14	$ 138.32
HICKOK CENTER FOR BRAIN INJURY DAY	223127533	03024559	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$80.36	01-JAN-12	$80.36	01-MAY-14	$ 80.36
HUMAN CARE SVCS FAM CHLD DAY	113338946	02849163	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$169.37	01-OCT-12	$169.37	01-MAY-14	$ 165.98
HUMAN CARE SVCS FAM CHLD DAY	113338946	02849163	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$97.21	01-OCT-12	$97.21	01-MAY-14	$ 95.51
HUMAN FIRST INC DAY	113590136	02704507	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$149.95	01-OCT-12	$149.95	01-MAY-14	$ 152.83
HUMAN FIRST INC DAY	113590136	02704507	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$88.78	01-OCT-12	$88.78	01-MAY-14	$ 90.22
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-APR-2012	$80.26	01-APR-12	$80.26	01-MAY-14	$ 80.26
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-APR-2012	$51.12	01-APR-12	$51.12	01-MAY-14	$ 51.12
IBERO AMERICAN ACTION DAY	160954745	02701375	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$110.89	01-JAN-13	$110.69	01-MAY-14	$ 110.47
IBERO AMERICAN ACTION DAY	160954745	02701375	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$65.60	01-JAN-13	$65.49	01-MAY-14	$ 65.38
IN FLIGHT INC DAY	141764481	02699172	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$117.29	01-FEB-13	$120.21	01-MAY-14	$ 120.55
IN FLIGHT INC DAY	141764481	02699172	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$67.75	01-FEB-13	$69.46	01-MAY-14	$ 69.64
INDEPENDENCE RES INC DAY	133490223	02699232	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$164.72	01-MAR-13	$167.67	01-MAY-14	$ 166.16
INDEPENDENCE RES INC DAY	133490223	02699232	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$105.22	01-MAR-13	$106.00	01-MAY-14	$ 105.27
INDEPENDENT GRHM LIVING DAY	112458584	02699223	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$150.12	01-JAN-13	$150.09	01-MAY-14	$ 139.71
INDEPENDENT GRHM LIVING DAY	112458584	02699223	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$92.09	01-JAN-13	$92.07	01-MAY-14	$ 85.26

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
INDEPENDENT LIVING INC DAY	222894558	02701348	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$95.12	01-JAN-13	$95.08	01-MAY-14	$ 94.87
INDEPENDENT LIVING INC DAY	222894558	02701348	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$54.81	01-JAN-13	$54.79	01-MAY-14	$ 54.69
INST APP HUMAN DYNA DAY	132573827	02704323	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$164.24	01-OCT-12	$164.24	01-MAY-14	$ 168.82
INST APP HUMAN DYNA DAY	132573827	02704323	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$98.08	01-OCT-12	$98.08	01-MAY-14	$ 100.37
IYAHO SOCIAL SERVICES INC DAY/AHRH	593806132	03132661	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-AUG-2012	$179.93	01-AUG-12	$179.93	01-MAY-14	$ 179.93
IYAHO SOCIAL SERVICES INC DAY/AHRH	593806132	03132661	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-AUG-2012	$103.36	01-AUG-12	$103.36	01-MAY-14	$ 103.36
JAMAICA HOSPITAL MED CTR DAY	111631788	02699278	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$157.03	01-OCT-12	$157.03	01-MAY-14	$ 157.03
JAMAICA HOSPITAL MED CTR DAY	111631788	02699278	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$94.64	01-OCT-12	$94.64	01-MAY-14	$ 94.64
JAWONIO INC DAY	131761660	02693727	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$162.66	01-JAN-13	$161.95	01-MAY-14	$ 160.84
JAWONIO INC DAY	131761660	02693727	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$90.57	01-JAN-13	$90.21	01-MAY-14	$ 89.66
JEFFERSON REHAB DAY	161134631	02699287	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$78.48	01-JAN-13	$78.48	01-MAY-14	$ 78.45
JEFFERSON REHAB DAY	161134631	02699287	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$44.11	01-JAN-13	$44.11	01-MAY-14	$ 44.09
JEWEL HUMAN SERVICES INC DAY/CH	331177252	03422608	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$178.07	01-OCT-12	$178.07	01-MAY-14	$ 178.07
JEWEL HUMAN SERVICES INC DAY/CH	331177252	03422608	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$101.53	01-OCT-12	$101.53	01-MAY-14	$ 101.53
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$140.68	01-JUL-12	$140.68	01-MAY-14	$ 140.68
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	004	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$74.63	01-JUL-11	$74.63	01-JUL-11	$ 74.63
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$74.62	01-JUL-12	$74.62	01-MAY-14	$ 74.62
JEWISH FAM SVC BUFF/ERIE DAY	160760888	02699296	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$60.11	01-OCT-12	$60.11	01-MAY-14	$ 60.11
JEWISH FAM SVC BUFF/ERIE DAY	160760888	02699296	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$30.05	01-OCT-12	$30.05	01-MAY-14	$ 30.05
JEWISH UNION FOUNDATION DAY	133636595	02699329	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$142.83	01-JAN-13	$142.83	01-MAY-14	$ 142.83
JEWISH UNION FOUNDATION DAY	133636595	02699329	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$80.82	01-JAN-13	$80.82	01-MAY-14	$ 80.82
JM MURRAY CTR INC DAY	160919050	02699338	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$173.60	01-JAN-13	$171.93	01-MAY-14	$ 173.15
JM MURRAY CTR INC DAY	160919050	02699338	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$100.47	01-JAN-13	$99.63	01-MAY-14	$ 100.24
JOB PATH DAY	134038495	02704736	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$240.89	01-OCT-12	$240.89	01-MAY-14	$ 240.89
JOB PATH DAY	134038495	02704736	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$128.21	01-OCT-12	$128.21	01-MAY-14	$ 128.21
JOSHUA HOUSE INC DAY	161427778	02699310	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$90.85	01-JAN-13	$90.85	01-MAY-14	$ 102.59
JOSHUA HOUSE INC DAY	161427778	02699310	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$46.01	01-JAN-13	$46.01	01-MAY-14	$ 53.74
KELBERMAN CENTER INC DAY/AHRH	550901293	03062411	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-MAY-14	$ 178.36
KELBERMAN CENTER INC DAY/AHRH	550901293	03062411	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-MAY-14	$ 102.99
KELI HOUSE COMM SVCS INC DAY/CH	810680293	03474504	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-APR-2012	$113.43	01-JAN-13	$106.49	01-MAY-14	$ 107.31
KELI HOUSE COMM SVCS INC DAY/CH	810680293	03474504	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-APR-2012	$56.71	01-JAN-13	$53.25	01-MAY-14	$ 53.66
LAKE SHORE CHILD CR CTR DAY	161381646	02703579	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$52.38	01-JAN-13	$52.38	01-MAY-14	$ 52.38
LAKE SHORE CHILD CR CTR DAY	161381646	02703579	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$28.69	01-JAN-13	$28.69	01-MAY-14	$ 28.69
L'ARCHE SYRACUSE INC DAY	161085314	03047096	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$175.31	01-JAN-13	$175.31	01-MAY-14	$ 175.31
L'ARCHE SYRACUSE INC DAY	161085314	03047096	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$100.03	01-JAN-13	$100.03	01-MAY-14	$ 100.03

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LEAKE AND WATTS SERVICES INC	131860451	03105828	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$180.41	01-JUL-12	$180.41	01-MAY-14	$ 186.14
LEAKE AND WATTS SERVICES INC	131860451	03105828	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$103.08	01-JUL-12	$103.08	01-MAY-14	$ 106.52
LEAP INC DAY	161467182	02699301	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$117.03	01-JAN-13	$116.93	01-MAY-14	$ 116.82
LEAP INC DAY	161467182	02699301	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$67.30	01-JAN-13	$67.25	01-MAY-14	$ 67.20
LEARNING DISABILITIES WNY DAY	161118058	02699347	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$215.76	01-JAN-13	$215.76	01-MAY-14	$ 215.76
LEARNING DISABILITIES WNY DAY	161118058	02699347	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$107.88	01-JAN-13	$107.88	01-MAY-14	$ 107.88
LEARNING DISBIL GV DAY	222702285	02693745	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$135.92	01-JAN-13	$135.92	01-MAY-14	$ 135.92
LEARNING DISBIL GV DAY	222702285	02693745	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$78.09	01-JAN-13	$78.09	01-MAY-14	$ 78.09
LIBERTY RESOURCES INC DAY	161129675	02699118	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$128.27	01-JAN-13	$128.33	01-MAY-14	$ 128.26
LIBERTY RESOURCES INC DAY	161129675	02699118	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$69.71	01-JAN-13	$69.74	01-MAY-14	$ 69.71
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$143.43	01-JAN-13	$143.05	01-MAY-14	$ 143.35
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$83.83	01-JAN-13	$83.65	01-MAY-14	$ 83.81
LIFE ADJUSTMENT CNTR INC DAY	133620577	02700085	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$144.08	01-OCT-12	$144.08	01-MAY-14	$ 146.29
LIFE ADJUSTMENT CNTR INC DAY	133620577	02700085	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$89.03	01-OCT-12	$89.03	01-MAY-14	$ 90.14
LIFES WORC DAY	237209731	02700136	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$131.32	01-OCT-12	$131.32	01-MAY-14	$ 130.66
LIFES WORC DAY	237209731	02700136	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$78.76	01-OCT-12	$78.76	01-MAY-14	$ 78.16
LIFESONG INC DAY/CH	273639848	03307004	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-DEC-2012	$159.75	01-DEC-12	$159.75	01-MAY-14	$ 159.75
LIFESONG INC DAY/CH	273639848	03307004	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-DEC-2012	$79.88	01-DEC-12	$79.88	01-MAY-14	$ 79.88
LIFESPAN OF GREATER ROCHESTER DAY	160986298	03047087	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$96.72	01-JAN-13	$96.45	01-MAY-14	$ 95.81
LIFESPAN OF GREATER ROCHESTER DAY	160986298	03047087	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$59.88	01-JAN-13	$59.75	01-MAY-14	$ 59.43
LIFESPIRE INC DAY	132526022	02700076	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$171.50	01-OCT-12	$171.50	01-MAY-14	$ 168.37
LIFESPIRE INC DAY	132526022	02700076	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$105.59	01-OCT-12	$105.59	01-MAY-14	$ 104.03
LIFESTYLES F/T DISABLED DAY	133740011	02700067	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$129.22	01-OCT-12	$129.22	01-MAY-14	$ 129.22
LIFESTYLES F/T DISABLED DAY	133740011	02700067	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$73.15	01-OCT-12	$73.15	01-MAY-14	$ 73.15
LIFETIME ASSIST INC DAY	222221158	02693754	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$145.07	01-JAN-13	$144.85	01-MAY-14	$ 158.65
LIFETIME ASSIST INC DAY	222221158	02693754	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$85.78	01-JAN-13	$85.67	01-MAY-14	$ 92.57
LITTLE FLOWER CHILDREN AND FAMILY S	#N/A	03881505	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-APR-14	$ 184.35
LITTLE FLOWER CHILDREN AND FAMILY S	#N/A	03881505	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-APR-14	$ 92.18
LIVING RESOURCES CORP DAY	141564208	02704745	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$139.71	01-JAN-13	$139.52	01-JUN-14	$ 140.79
LIVING RESOURCES CORP DAY	141564208	02704745	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$79.16	01-JAN-13	$79.06	01-JUN-14	$ 79.82
LIVINGSTON WYOMING ARC DAY	161022565	02704754	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUN-2012	$189.14	01-JAN-13	$190.18	01-MAY-14	$ 189.58
LIVINGSTON WYOMING ARC DAY	161022565	02704754	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUN-2012	$104.15	01-JAN-13	$104.67	01-MAY-14	$ 104.37
LOCHLAND SCHOOL DAY	160780944	02700058	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$77.65	01-JAN-13	$73.76	01-MAY-14	$ 73.76
LOCHLAND SCHOOL DAY	160780944	02700058	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$38.82	01-JAN-13	$36.88	01-MAY-14	$ 36.88
LONGLIFE INFO/REF NETWK DAY	112878383	02700109	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$109.16	01-OCT-12	$109.16	01-MAY-14	$ 109.16

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LONGLIFE INFO/REF NETWK DAY	112878383	02700109	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$67.98	01-OCT-12	$67.98	01-MAY-14	$ 67.98
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$111.44	01-JAN-12	$111.44	01-MAY-14	$ 111.44
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$66.83	01-JAN-12	$66.83	01-MAY-14	$ 66.83
MADISON-CORTLAND NYSARC DAY	160958020	02701499	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$188.63	01-JAN-13	$188.36	01-MAY-14	$ 187.32
MADISON-CORTLAND NYSARC DAY	160958020	02701499	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$121.99	01-JAN-13	$121.85	01-MAY-14	$ 121.34
MARANATHA HUMAN SVCS INC DAY	141755068	02705562	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$105.41	01-JAN-13	$106.59	01-MAY-14	$ 106.67
MARANATHA HUMAN SVCS INC DAY	141755068	02705562	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$53.57	01-JAN-13	$54.16	01-MAY-14	$ 54.20
MARY CARIOLA CTR DAY/CH	160771078	03597326	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)			01-FEB-13	146.97	01-JUN-14	$ 164.74
MARY CARIOLA CTR DAY/CH	160771078	03597326	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)			01-FEB-13	75.23	01-JUN-14	$ 88.14
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$149.21	01-JAN-13	$148.21	01-MAY-14	$ 151.58
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$90.31	01-JAN-13	$89.81	01-MAY-14	$ 91.50
MENTAL HEALTH ASSOC DAY	111710983	02890311	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$177.63	01-SEP-12	$177.63	01-MAY-14	$ 177.63
MENTAL HEALTH ASSOC DAY	111710983	02890311	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$100.53	01-SEP-12	$100.53	01-MAY-14	$ 100.52
MERCY DRIVE INC DAY	043831639	02934141	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$182.82	01-JUL-12	$182.82	01-MAY-14	$ 182.82
MERCY DRIVE INC DAY	043831639	02934141	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$104.80	01-JUL-12	$104.80	01-MAY-14	$ 104.80
MERCY HOME FOR CHILDREN DAY	111666227	02701357	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$188.51	01-JUL-12	$188.51	01-MAY-14	$ 188.51
MERCY HOME FOR CHILDREN DAY	111666227	02701357	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$94.26	01-JUL-12	$94.26	01-MAY-14	$ 94.26
MILL NECK SVCS INC DAY	113119786	02704832	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$145.50	01-JAN-13	$145.50	01-MAY-14	$ 142.21
MILL NECK SVCS INC DAY	113119786	02704832	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$85.26	01-JAN-13	$85.26	01-MAY-14	$ 83.61
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$138.66	01-JUL-12	$138.66	01-MAY-14	$ 138.66
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$80.00	01-JUL-12	$80.00	01-MAY-14	$ 80.00
MODERN GUIDENCE SERVICES INC DAY	133852613	02936423	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$182.66	01-OCT-12	$182.66	01-MAY-14	$ 194.45
MODERN GUIDENCE SERVICES INC DAY	133852613	02936423	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$104.72	01-OCT-12	$104.72	01-MAY-14	$ 110.62
MODEST COMMUNITY SERVICES ASSOC DAY	134288916	03046086	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$161.13	01-JUL-12	$161.13	01-MAY-14	$ 161.13
MODEST COMMUNITY SERVICES ASSOC DAY	134288916	03046086	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$93.30	01-JUL-12	$93.30	01-MAY-14	$ 93.30
MONROE CO CHAP NYSARC DAY	160835172	02704814	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$122.38	01-JAN-13	$122.64	01-MAY-14	$ 128.11
MONROE CO CHAP NYSARC DAY	160835172	02704814	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$75.46	01-JAN-13	$75.59	01-MAY-14	$ 78.32
MULTIFUNCTIONAL FAM SVCS DAY	113417903	02903886	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$231.35	01-JUL-12	$231.35	01-MAY-14	$ 228.80
MULTIFUNCTIONAL FAM SVCS DAY	113417903	02903886	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$128.68	01-JUL-12	$128.68	01-MAY-14	$ 127.41
NASSAU CO CHAP NYSARC DAY	111720254	02693736	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$175.84	01-JAN-13	$175.09	01-JUN-14	$ 174.35
NASSAU CO CHAP NYSARC DAY	111720254	02693736	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$102.02	01-JAN-13	$101.64	01-JUN-14	$ 101.29
NASSAU SUFFOLK SVCS AUT DAY	112689753	02821185	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$193.12	01-JUL-12	$193.12	01-MAY-14	$ 193.12
NASSAU SUFFOLK SVCS AUT DAY	112689753	02821185	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$108.28	01-JUL-12	$108.28	01-MAY-14	$ 108.28
NEW HOPE COMMUNITY INC DAY	222871755	03394983	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$111.78	01-MAR-13	$121.25	01-MAY-14	$ 117.63
NEW HOPE COMMUNITY INC DAY	222871755	03394983	004	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-DEC-2011	$55.89	01-DEC-11	$55.89	01-DEC-11	$ 55.89

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NEW HOPE COMMUNITY INC DAY	222871755	03394983	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$55.89	01-MAR-13	$62.07	01-MAY-14	$ 59.70
NEW HORIZON COUNSELING CENTER DAY	112593090	03855052	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-JUN-13	$ 160.48
NEW HORIZON COUNSELING CENTER DAY	112593090	03855052	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-JUN-13	$ 80.24
NEW HORIZONS RESOURCES DAY	524862107	02693718	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$165.09	01-MAR-13	$172.28	01-MAY-14	$ 172.15
NEW HORIZONS RESOURCES DAY	524862107	02693718	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$82.55	01-MAR-13	$89.60	01-MAY-14	$ 89.54
NIAGARA COUNTY ARC DAY	160794847	02704823	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$140.03	01-JAN-13	$139.89	01-MAY-14	$ 139.99
NIAGARA COUNTY ARC DAY	160794847	02704823	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$82.28	01-JAN-13	$82.20	01-MAY-14	$ 82.28
NORTHERN NY CP ASSOC DAY	222542065	02704841	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$76.59	01-JAN-12	$76.59	01-MAY-14	$ 76.59
NORTHERN NY CP ASSOC DAY	222542065	02704841	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$38.29	01-JAN-12	$38.29	01-MAY-14	$ 38.29
NY FAMILIES FOR AUTISTIC CHLDRN DAY	113442879	03044828	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)			01-SEP-12	$182.35	01-MAY-14	$ 182.35
NY FAMILIES FOR AUTISTIC CHLDRN DAY	113442879	03044828	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)			01-SEP-12	$104.57	01-MAY-14	$ 104.57
NY FOUNDLING HOSP ST AGATHAS DAY	131624123	03044864	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$170.61	01-SEP-12	$170.61	01-MAY-14	$ 172.96
NY FOUNDLING HOSP ST AGATHAS DAY	131624123	03044864	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$87.07	01-SEP-12	$87.07	01-MAY-14	$ 89.66
NYS ARC INC CATTARAUG DAY	160818293	02701417	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$117.73	01-JAN-13	$117.69	01-MAY-14	$ 117.38
NYS ARC INC CATTARAUG DAY	160818293	02701417	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$70.11	01-JAN-13	$70.09	01-MAY-14	$ 69.93
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$126.71	01-JAN-13	$126.79	01-MAY-14	$ 125.70
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$73.91	01-JAN-13	$73.95	01-MAY-14	$ 73.41
NYSARC INC NYC CHAPTER DAY	135596746	02703602	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$173.23	01-MAR-13	$174.93	01-MAY-14	$ 174.48
NYSARC INC NYC CHAPTER DAY	135596746	02703602	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$105.08	01-MAR-13	$105.94	01-MAY-14	$ 105.68
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$170.77	01-JAN-13	$171.01	01-MAY-14	$ 191.49
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$102.12	01-JAN-13	$102.24	01-MAY-14	$ 111.47
OHEL CHILDRENS HM/FAM DAY	116078704	02750085	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-NOV-2012	$153.75	01-NOV-12	$152.20	01-MAY-14	$ 149.59
OHEL CHILDRENS HM/FAM DAY	116078704	02750085	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2012	$91.22	01-NOV-12	$90.44	01-MAY-14	$ 89.14
ON YOUR MARK DAY	133128315	02707871	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$143.68	01-OCT-12	$143.68	01-MAY-14	$ 140.91
ON YOUR MARK DAY	133128315	02707871	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$86.38	01-OCT-12	$86.38	01-MAY-14	$ 85.00
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$112.96	01-JAN-13	$116.58	01-MAY-14	$ 116.16
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$65.83	01-JAN-13	$67.64	01-MAY-14	$ 67.43
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$148.15	01-JAN-13	$147.00	01-MAY-14	$ 147.67
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$90.87	01-JAN-13	$90.30	01-MAY-14	$ 90.63
ONONDAGA COMM COLLEGE DAY	160973001	02701426	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$96.46	01-JAN-13	$96.46	01-MAY-14	$ 96.46
ONONDAGA COMM COLLEGE DAY	160973001	02701426	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$56.56	01-JAN-13	$56.56	01-MAY-14	$ 56.56
ONTARIO ARC DAY	160786219	02702005	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$150.77	01-JAN-13	$150.77	01-MAY-14	$ 154.43
ONTARIO ARC DAY	160786219	02702005	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$91.29	01-JAN-13	$91.29	01-MAY-14	$ 89.76
OPENGATE INC DAY	132634269	02714712	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$159.66	01-JAN-13	$159.68	01-MAY-14	$ 160.20
OPENGATE INC DAY	132634269	02714712	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$93.10	01-JAN-13	$93.12	01-MAY-14	$ 93.37

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$112.18	01-JAN-13	$112.03	01-MAY-14	$ 126.13
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$69.04	01-JAN-13	$68.96	01-MAY-14	$ 76.01
ORANGE REHAB OCCUP INC DAY	141471097	02693763	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$141.26	01-JAN-13	$141.73	01-MAY-14	$ 143.02
ORANGE REHAB OCCUP INC DAY	141471097	02693763	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$79.61	01-JAN-13	$79.84	01-MAY-14	$ 80.20
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-DEC-2012	$142.49	01-JAN-13	$142.37	01-MAY-14	$ 142.62
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-DEC-2012	$77.41	01-JAN-13	$77.36	01-MAY-14	$ 77.48
OSWEGO CO CHAP NYS ARC DAY	160973939	02708038	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$120.80	01-JAN-13	$119.87	01-MAY-14	$ 120.61
OSWEGO CO CHAP NYS ARC DAY	160973939	02708038	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$80.15	01-JAN-13	$79.69	01-MAY-14	$ 80.06
OSWEGO CO OPPORTUNITIES DAY	160979876	02702129	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$124.06	01-JAN-13	$124.06	01-MAY-14	$ 123.92
OSWEGO CO OPPORTUNITIES DAY	160979876	02702129	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$70.24	01-JAN-13	$70.24	01-MAY-14	$ 70.17
OSWEGO INDUSTRIES INC DAY	162197163	02703611	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$145.82	01-JAN-13	$145.82	01-MAY-14	$ 146.62
OSWEGO INDUSTRIES INC DAY	162197163	02703611	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$79.18	01-JAN-13	$79.18	01-MAY-14	$ 79.58
OTSAR INC DAY	112601112	02702014	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$113.65	01-NOV-12	$113.65	01-MAY-14	$ 112.48
OTSAR INC DAY	112601112	02702014	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$69.68	01-NOV-12	$69.68	01-MAY-14	$ 69.10
OTSEGO CHAP NYSARC DAY	160953477	02702101	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$109.58	01-JAN-13	$110.86	01-MAY-14	$ 110.00
OTSEGO CHAP NYSARC DAY	160953477	02702101	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$62.76	01-JAN-13	$63.40	01-MAY-14	$ 63.01
PARK RIDGE NH INC DAY	160978184	02728045	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$86.95	01-OCT-12	$86.95	01-MAY-14	$ 86.95
PARK RIDGE NH INC DAY	160978184	02728045	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$54.61	01-OCT-12	$54.61	01-MAY-14	$ 54.61
PARTNERSHIP FOR ICCI DAY	133537258	02702138	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$136.47	01-JUL-12	$136.47	01-OCT-13	$ -
PARTNERSHIP FOR ICCI DAY	133537258	02702138	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$73.74	01-JUL-12	$73.74	01-OCT-13	$ -
PATHWAYS INC DAY	161089007	02702041	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$138.35	01-JAN-13	$138.24	01-MAY-14	$ 139.61
PATHWAYS INC DAY	161089007	02702041	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$83.69	01-JAN-13	$83.63	01-MAY-14	$ 84.31
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-NOV-2012	$148.66	01-JAN-13	$148.66	01-MAY-14	$ 150.61
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2012	$84.85	01-JAN-13	$84.85	01-MAY-14	$ 85.82
PEOPLE SERVICE TO THE DAY	160975538	02702156	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$199.44	01-JAN-13	$203.70	01-MAY-14	$ 199.58
PEOPLE SERVICE TO THE DAY	160975538	02702156	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$125.59	01-JAN-13	$127.62	01-MAY-14	$ 125.05
PERSON CENTERED CARE DAY	202878791	02750076	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$157.25	01-OCT-12	$157.25	01-MAY-14	$ 157.25
PERSON CENTERED CARE DAY	202878791	02750076	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$92.02	01-OCT-12	$92.02	01-MAY-14	$ 92.02
PHOENIX FRONTIER INC DAY	160865451	02702032	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$120.78	01-JAN-13	$120.74	01-JAN-14	$ -
PHOENIX FRONTIER INC DAY	160865451	02702032	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$67.79	01-JAN-13	$67.77	01-JAN-14	$ -
PROF SVC CTR HANDICAPPED DAY	112542430	02693570	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$140.25	01-OCT-12	$140.25	01-JUN-14	$ 146.56
PROF SVC CTR HANDICAPPED DAY	112542430	02693570	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$83.97	01-OCT-12	$83.97	01-JUN-14	$ 87.25
PROGRAM DEVELOPMENT SVC DAY	112715916	02701444	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$153.16	01-OCT-12	$153.16	01-MAY-14	$ 153.57
PROGRAM DEVELOPMENT SVC DAY	112715916	02701444	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$87.92	01-OCT-12	$87.92	01-MAY-14	$ 88.12
PROVIDER HAMASPIK KINGS DAY	161522895	02821176	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$151.46	01-OCT-12	$151.46	01-MAY-14	$ 156.06

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PROVIDER HAMASPIK KINGS DAY	161522895	02821176	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$88.11	01-OCT-12	$88.11	01-MAY-14	$ 90.41
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$183.55	01-JAN-13	$183.63	01-MAY-14	$ 178.58
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$106.83	01-JAN-13	$106.87	01-MAY-14	$ 104.35
PUTNAM ARC DAY	141426729	02703620	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$124.98	01-JAN-13	$124.69	01-MAY-14	$ 125.19
PUTNAM ARC DAY	141426729	02703620	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$71.39	01-JAN-13	$71.24	01-MAY-14	$ 71.50
QSAC DAY	112482974	02701480	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-DEC-2012	$178.88	01-JAN-13	$179.07	01-MAY-14	$ 177.61
QSAC DAY	112482974	02701480	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-DEC-2012	$107.07	01-JAN-13	$107.16	01-MAY-14	$ 106.38
QUEENS PARENT RESRC CTR DAY	113211119	02701471	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$157.77	01-OCT-12	$157.77	01-MAY-14	$ 160.89
QUEENS PARENT RESRC CTR DAY	113211119	02701471	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$99.70	01-OCT-12	$99.70	01-MAY-14	$ 101.26
RAYIM OF HUDSON VALLEY DAY	562331735	02701260	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$108.25	01-JAN-13	$108.11	01-MAY-14	$ 105.09
RAYIM OF HUDSON VALLEY DAY	562331735	02701260	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$54.12	01-JAN-13	$54.05	01-MAY-14	$ 52.55
RENSS CO CHAP NYSARC DAY	141485873	02693709	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$139.42	01-JAN-13	$139.11	01-JUN-14	$ 139.49
RENSS CO CHAP NYSARC DAY	141485873	02693709	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$82.10	01-JAN-13	$81.95	01-JUN-14	$ 82.05
RESIDENTIAL RESOURCES DAY	141823526	02701288	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$206.35	01-JAN-13	$206.35	01-MAY-14	$ 206.35
RESIDENTIAL RESOURCES DAY	141823526	02701288	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$123.74	01-JAN-13	$123.74	01-MAY-14	$ 123.74
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-NOV-2012	$124.34	01-JAN-13	$125.81	01-MAY-14	$ 125.74
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2012	$63.17	01-JAN-13	$64.31	01-MAY-14	$ 64.28
REWARDING ENVIRONMENTS FOR ADULT LI	204778868	03357146	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)			01-NOV-12	$166.34	01-MAY-14	$ 166.34
REWARDING ENVIRONMENTS FOR ADULT LI	204778868	03357146	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)			01-NOV-12	$96.57	01-MAY-14	$ 96.57
RICHMOND CHILDRENS CTR DAY	132736761	02701935	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$217.13	01-JAN-13	$217.30	01-MAY-14	$ 274.16
RICHMOND CHILDRENS CTR DAY	132736761	02701935	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$119.89	01-JAN-13	$119.98	01-MAY-14	$ 149.80
RIVERSHORE INC DAY	161146128	02915222	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$135.37	01-JAN-13	$135.37	01-MAY-14	$ 135.37
RIVERSHORE INC DAY	161146128	02915222	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$67.69	01-JAN-13	$67.69	01-MAY-14	$ 67.69
RIVERSHORE INC DAY	161146128	02915222	004	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-MAR-2011	$68.12	01-MAR-11	$68.12	01-MAR-11	$ 68.12
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$113.19	01-JAN-13	$113.19	01-MAY-14	$ 113.19
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$56.59	01-JAN-13	$56.59	01-MAY-14	$ 56.59
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$134.47	01-JAN-13	$134.42	01-MAY-14	$ 134.40
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$74.17	01-JAN-13	$74.15	01-MAY-14	$ 74.14
ROCKLAND COUNTY ALD DAY	132951835	03043890	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$142.37	01-JAN-12	$142.37	01-MAY-14	$ 142.37
ROCKLAND COUNTY ALD DAY	132951835	03043890	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$71.18	01-JAN-12	$71.18	01-MAY-14	$ 71.18
SAINT DOMINICS HOME DAY	131740399	02693685	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$124.77	01-JAN-13	$125.07	01-MAY-14	$ 145.51
SAINT DOMINICS HOME DAY	131740399	02693685	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$64.38	01-JAN-13	$64.53	01-MAY-14	$ 74.76
SARATOGA CNTY ARC DAY	141465932	02701980	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$121.21	01-JAN-13	$121.14	01-MAY-14	$ 121.87
SARATOGA CNTY ARC DAY	141465932	02701980	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$72.83	01-JAN-13	$72.80	01-MAY-14	$ 73.16
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$128.08	01-JAN-13	$128.11	01-MAY-14	$ 128.76

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SCHOHARIE CHAP NYSARC DAY	141494347	02693612	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$73.55	01-JAN-13	$73.57	01-MAY-14	$ 73.96
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$177.71	01-JAN-13	$177.71	01-MAY-14	$ 177.71
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$100.56	01-JAN-13	$100.56	01-MAY-14	$ 100.56
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$145.59	01-JAN-13	$145.55	01-MAY-14	$ 146.82
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$83.02	01-JAN-13	$83.00	01-MAY-14	$ 83.74
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$123.99	01-JAN-13	$123.99	01-MAY-14	$ 129.43
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$73.97	01-JAN-13	$73.97	01-MAY-14	$ 76.69
SDTC THE CTR/DISCOVERY DAY	141395426	02704492	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$155.81	01-JAN-13	$149.09	01-MAY-14	$ 149.09
SDTC THE CTR/DISCOVERY DAY	141395426	02704492	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$77.91	01-JAN-13	$74.55	01-MAY-14	$ 74.55
SENECA CAYUGA NYSARC DAY	161124314	02701971	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$165.39	01-JAN-13	$165.46	01-MAY-14	$ 166.31
SENECA CAYUGA NYSARC DAY	161124314	02701971	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$97.16	01-JAN-13	$97.19	01-MAY-14	$ 97.62
SERVICES FOR THE DEVELOPMENTALLY CH	133921190	03450740	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$210.33	01-JUL-12	$210.33	01-MAY-14	$ 205.59
SERVICES FOR THE DEVELOPMENTALLY CH	133921190	03450740	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$118.56	01-JUL-12	$118.56	01-MAY-14	$ 116.19
SERVICES FOR UNDERSRVD DAY	133250383	02704516	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$179.95	01-MAR-13	$180.44	01-MAY-14	$ 180.64
SERVICES FOR UNDERSRVD DAY	133250383	02704516	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$113.08	01-MAR-13	$113.07	01-MAY-14	$ 112.76
SHARE OF NEW SQUARE DAY	133475062	02701962	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$204.42	01-JAN-13	$204.42	01-MAY-14	$ 199.63
SHARE OF NEW SQUARE DAY	133475062	02701962	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$102.21	01-JAN-13	$102.21	01-MAY-14	$ 99.82
SINERGIA INC DAY	133183344	02701953	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$119.01	01-OCT-12	$119.01	01-MAY-14	$ 119.66
SINERGIA INC DAY	133183344	02701953	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$71.01	01-OCT-12	$71.01	01-MAY-14	$ 71.33
SKILLS UNLIMITED INC DAY	111759110	02702023	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$102.01	01-JAN-13	$102.01	01-MAY-14	$ 102.01
SKILLS UNLIMITED INC DAY	111759110	02702023	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$62.79	01-JAN-13	$62.79	01-MAY-14	$ 62.79
SOCIAL ACTION CTR INC DAY	134093738	02701944	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$149.38	01-OCT-12	$149.38	01-MAY-14	$ 144.35
SOCIAL ACTION CTR INC DAY	134093738	02701944	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$87.56	01-OCT-12	$87.56	01-MAY-14	$ 85.05
SOUTHEAST BRONX NGBHD CTR DAY	132675560	02701279	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$139.54	01-JUL-12	$139.54	01-MAY-14	$ 140.00
SOUTHEAST BRONX NGBHD CTR DAY	132675560	02701279	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$85.41	01-JUL-12	$85.41	01-MAY-14	$ 85.64
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$82.30	01-JAN-13	$80.95	01-MAY-14	$ 79.90
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$51.97	01-JAN-13	$51.30	01-MAY-14	$ 50.77
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-AUG-2012	$176.56	01-AUG-12	$176.56	01-MAY-14	$ 176.56
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-AUG-2012	$88.28	01-AUG-12	$88.28	01-MAY-14	$ 88.28
SPARC INC	133832725	03496059	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$156.30	01-JAN-13	$156.30	01-MAY-14	$ 156.30
SPARC INC	133832725	03496059	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$83.96	01-JAN-13	$83.96	01-MAY-14	$ 83.96
SPAULDING PRAY RES CORP DAY	161196869	02701297	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$113.46	01-JAN-13	$113.46	01-MAY-14	$ 113.46
SPAULDING PRAY RES CORP DAY	161196869	02701297	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$56.73	01-JAN-13	$56.73	01-MAY-14	$ 56.73
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$182.04	01-OCT-12	$182.04	01-MAY-14	$ 177.46
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$104.38	01-OCT-12	$104.38	01-MAY-14	$ 102.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
SPECIAL NEEDS PROGRAM DAY	222325526	02701320	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$115.24	01-FEB-13	$115.06	01-MAY-14	$ 114.87
SPECIAL NEEDS PROGRAM DAY	222325526	02701320	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$66.60	01-FEB-13	$66.51	01-MAY-14	$ 66.42
SPRINGBROOK NY INC DAY	150539129	02703368	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$138.00	01-JAN-13	$135.37	01-MAY-14	$ 139.47
SPRINGBROOK NY INC DAY	150539129	02703368	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$74.60	01-JAN-13	$73.28	01-MAY-14	$ 75.97
ST CHRISTOPHER OTTILIE DAY	112777066	02701999	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$141.80	01-JUL-12	$141.80	01-MAY-14	$ 141.70
ST CHRISTOPHER OTTILIE DAY	112777066	02701999	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$83.71	01-JUL-12	$83.71	01-MAY-14	$ 83.66
ST CHRISTOPHERS INC DAY	131740485	02702427	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$131.14	01-JUL-12	$131.14	01-MAY-14	$ 131.14
ST CHRISTOPHERS INC DAY	131740485	02702427	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$78.44	01-JUL-12	$78.44	01-MAY-14	$ 78.44
ST LAWRENCE NYSARC INC DAY	150617072	02702069	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$167.34	01-JAN-13	$167.34	01-MAY-14	$ 167.43
ST LAWRENCE NYSARC INC DAY	150617072	02702069	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$96.36	01-JAN-13	$96.36	01-MAY-14	$ 96.41
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$206.11	01-JAN-13	$206.11	01-MAY-14	$ 206.11
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$117.19	01-JAN-13	$117.19	01-MAY-14	$ 117.19
STATEN ISLAND AID INC DAY	135660279	02704525	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$123.43	01-OCT-12	$123.43	01-MAY-14	$ 117.55
STATEN ISLAND AID INC DAY	135660279	02704525	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$73.64	01-OCT-12	$73.64	01-MAY-14	$ 70.70
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$150.77	01-JAN-13	$150.35	01-MAY-14	$ 150.37
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$91.97	01-JAN-13	$91.76	01-MAY-14	$ 91.77
STONY FORD FOUNDATION DAY	061207341	02702087	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$152.78	01-JAN-13	$152.78	01-MAY-14	$ 152.78
STONY FORD FOUNDATION DAY	061207341	02702087	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$76.39	01-JAN-13	$76.39	01-MAY-14	$ 76.39
SUBURBAN ADULT SERVICES DAY	161115992	02693621	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$160.39	01-JAN-13	$164.87	01-MAY-14	$ 162.67
SUBURBAN ADULT SERVICES DAY	161115992	02693621	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$98.17	01-JAN-13	$99.86	01-MAY-14	$ 98.94
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$120.06	01-JAN-13	$119.72	01-MAY-14	$ 121.21
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$66.49	01-JAN-13	$66.31	01-MAY-14	$ 67.06
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$106.99	01-JAN-13	$106.99	01-MAY-14	$ 106.99
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$61.98	01-JAN-13	$61.98	01-MAY-14	$ 61.98
SUSQUEHANNA CARE CORP DAY	141778382	02704456	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$84.27	01-JAN-13	$83.25	01-MAY-14	$ 82.63
SUSQUEHANNA CARE CORP DAY	141778382	02704456	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$51.10	01-JAN-13	$50.59	01-MAY-14	$ 50.28
TACONIC INNOVATIONS INC DAY	223729121	02702505	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$123.28	01-JAN-13	$121.97	01-MAY-14	$ 116.34
TACONIC INNOVATIONS INC DAY	223729121	02702505	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$64.62	01-JAN-13	$63.96	01-MAY-14	$ 61.15
TENDER CARE HUMAN SERVICES DAY	113586379	03045250	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$169.40	01-OCT-12	$169.40	01-MAY-14	$ 169.40
TENDER CARE HUMAN SERVICES DAY	113586379	03045250	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$98.10	01-OCT-12	$98.10	01-MAY-14	$ 98.10
THE FRIENDS NETWORK DAY	133955641	02991940	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-DEC-2012	$135.26	01-JAN-13	$135.08	01-MAY-14	$ 134.93
THE FRIENDS NETWORK DAY	133955641	02991940	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-DEC-2012	$73.48	01-JAN-13	$73.39	01-MAY-14	$ 73.32
THE GOOD SHEPHARD INC DAY/CH	383773335	03445190	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$186.49	01-JUL-12	$186.49	01-MAY-14	$ 186.49
THE GOOD SHEPHARD INC DAY/CH	383773335	03445190	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$106.64	01-JUL-12	$106.64	01-MAY-14	$ 106.64
THE REHABILITATION INST DAY	112073672	02702514	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$134.59	01-JAN-13	$134.59	01-MAY-14	$ 134.59

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THE REHABILITATION INST DAY	112073672	02702514	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$96.17	01-JAN-13	$96.17	01-MAY-14	$ 96.17
THE SALVATION ARMY DAY	135562351	02702523	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$92.35	01-JAN-12	$92.35	01-MAY-14	$ 92.35
THE SALVATION ARMY DAY	135562351	02702523	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$56.93	01-JAN-12	$56.93	01-MAY-14	$ 56.92
THE SHIELD INSTITUTE DAY	131740041	02702532	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$201.22	01-OCT-12	$201.22	01-MAY-14	$ 204.41
THE SHIELD INSTITUTE DAY	131740041	02702532	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$118.59	01-OCT-12	$118.59	01-MAY-14	$ 120.19
TOOMEY RES AND COMM SVS DAY	161363414	02702541	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$166.60	01-JAN-13	$166.60	01-MAY-14	$ 167.13
TOOMEY RES AND COMM SVS DAY	161363414	02702541	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$83.30	01-JAN-13	$83.30	01-MAY-14	$ 84.47
TRANSITIONAL LIV SVCS DAY	161039435	02702481	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$135.84	01-JAN-13	$135.84	01-MAY-14	$ 135.84
TRANSITIONAL LIV SVCS DAY	161039435	02702481	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$81.68	01-JAN-13	$81.68	01-MAY-14	$ 81.68
TRIFORM ENTERPRISES LTD DAY	222186872	02702463	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$99.72	01-FEB-13	$99.72	01-MAY-14	$ 99.72
TRIFORM ENTERPRISES LTD DAY	222186872	02702463	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$56.15	01-FEB-13	$56.15	01-MAY-14	$ 56.15
UCP ASSOC OF NASSAU INC DAY	111723782	02693676	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$152.17	01-JAN-13	$152.48	01-MAY-14	$ 176.32
UCP ASSOC OF NASSAU INC DAY	111723782	02693676	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$93.00	01-JAN-13	$93.15	01-MAY-14	$ 107.12
UCP ASSOC OF NYS DAY	131623856	02709777	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$165.28	01-OCT-12	$177.64	01-MAY-14	$ 181.11
UCP ASSOC OF NYS DAY	131623856	02709777	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$97.37	01-OCT-12	$109.73	01-MAY-14	$ 112.23
UCP ASSOC ROCHESTER DAY	160743950	02702165	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$163.61	01-JAN-13	$163.61	01-MAY-14	$ 163.99
UCP ASSOC ROCHESTER DAY	160743950	02702165	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$89.28	01-JAN-13	$89.28	01-MAY-14	$ 89.57
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$211.17	01-JAN-13	$210.92	01-MAY-14	$ 207.05
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$107.25	01-JAN-13	$107.13	01-MAY-14	$ 105.09
UCP HANDICAPPED P UTICA DAY	150543657	02693598	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$144.48	01-JAN-13	$143.88	01-MAY-14	$ 143.85
UCP HANDICAPPED P UTICA DAY	150543657	02693598	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$80.45	01-JAN-13	$80.15	01-MAY-14	$ 80.13
UCP OF QUEENS	111665821	02702578	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$139.84	01-JAN-13	$139.84	01-MAY-14	$ 139.04
UCP OF QUEENS	111665821	02702578	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$82.45	01-JAN-13	$82.45	01-MAY-14	$ 82.06
UCP OF TRI COUNTIES DAY	141495700	02702418	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-MAY-14	$ 254.45
UCP OF TRI COUNTIES DAY	141495700	02702418	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-MAY-14	$ 131.30
UCP PUTNAM/S DUTCHESS CO DAY	141813412	02703455	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$158.00	01-JAN-13	$157.45	01-MAY-14	$ 154.57
UCP PUTNAM/S DUTCHESS CO DAY	141813412	02703455	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$97.19	01-JAN-13	$96.92	01-MAY-14	$ 95.48
UCPA NIAGARA CO INC DAY	160786061	02703419	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$85.50	01-JAN-13	$85.48	01-MAY-14	$ 85.64
UCPA NIAGARA CO INC DAY	160786061	02703419	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$53.88	01-JAN-13	$53.87	01-MAY-14	$ 53.95
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$157.30	01-JAN-13	$157.08	01-MAY-14	$ 156.76
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$90.87	01-JAN-13	$90.76	01-MAY-14	$ 90.60
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$149.37	01-JAN-13	$148.86	01-MAY-14	$ 148.96
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$92.24	01-JAN-13	$91.99	01-MAY-14	$ 92.04
UCPA OF THE NORTH CTRY DAY	161568985	02703482	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$223.72	01-JAN-13	$223.72	01-MAY-14	$ 223.72
UCPA OF THE NORTH CTRY DAY	161568985	02703482	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$124.57	01-JAN-13	$124.57	01-MAY-14	$ 124.57

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ULSTER GREENE ARC DAY	141437657	02703437	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-SEP-2012	$123.63	01-FEB-13	$123.77	01-JUN-14	$ 126.00
ULSTER GREENE ARC DAY	141437657	02703437	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2012	$68.98	01-FEB-13	$69.09	01-JUN-14	$ 70.46
UNIQUE LIFE INC DAY	113653314	02915906	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$167.41	01-OCT-12	$167.41	01-MAY-14	$ 165.07
UNIQUE LIFE INC DAY	113653314	02915906	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$97.10	01-OCT-12	$97.10	01-MAY-14	$ 95.93
UNIQUE PEOPLE SERVICES DAY/AHRH	133636555	03292537	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-FEB-14	$ 166.61
UNIQUE PEOPLE SERVICES DAY/AHRH	133636555	03292537	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-FEB-14	$ 96.70
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$203.96	01-OCT-12	$203.96	01-MAY-14	$ 241.31
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$120.26	01-OCT-12	$120.26	01-MAY-14	$ 138.93
UNITED HELPERS ICF INC DAY	222412205	02703446	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$120.52	01-JAN-13	$120.52	01-MAY-14	$ 120.44
UNITED HELPERS ICF INC DAY	222412205	02703446	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$65.53	01-JAN-13	$65.53	01-MAY-14	$ 65.48
UNITY HS CAYUGA CO INC DAY	161081372	02703359	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$152.66	01-JAN-13	$152.66	01-MAY-14	$ 152.90
UNITY HS CAYUGA CO INC DAY	161081372	02703359	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$89.71	01-JAN-13	$89.71	01-MAY-14	$ 89.83
URBAN LEAGUE OF ROCHESTE DAY	160906150	02703464	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$105.72	01-JAN-13	$104.26	01-MAY-14	$ 103.75
URBAN LEAGUE OF ROCHESTE DAY	160906150	02703464	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$55.33	01-JAN-13	$54.60	01-MAY-14	$ 54.35
VANDERHEYDEN HALL INC DAY	141338575	02952601	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)					01-MAY-14	$ 179.82
VANDERHEYDEN HALL INC DAY	141338575	02952601	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)					01-MAY-14	$ 103.72
VICTOR ASSOC CULT ARTS DAY	222511852	02703377	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUN-2012	$129.11	01-JAN-13	$128.90	01-MAY-14	$ 128.69
VICTOR ASSOC CULT ARTS DAY	222511852	02703377	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUN-2012	$75.31	01-JAN-13	$75.21	01-MAY-14	$ 75.10
WARREN WASHINGTON ARC DAY	141560053	02703340	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-FEB-2013	$109.54	01-FEB-13	$109.21	01-MAY-14	$ 108.93
WARREN WASHINGTON ARC DAY	141560053	02703340	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-FEB-2013	$64.39	01-FEB-13	$64.23	01-MAY-14	$ 64.10
WAYNE CO CHAP NYSARC DAY	237540582	02703331	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$110.64	01-JAN-13	$111.85	01-MAY-14	$ 111.75
WAYNE CO CHAP NYSARC DAY	237540582	02703331	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$55.64	01-JAN-13	$56.24	01-MAY-14	$ 56.35
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$151.23	01-JAN-13	$152.43	01-MAY-14	$ 152.54
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$95.89	01-JAN-13	$96.49	01-MAY-14	$ 96.97
WILDWOOD PROGRAMS INC DAY	222132752	02703473	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$159.34	01-JAN-13	$159.51	01-MAY-14	$ 161.20
WILDWOOD PROGRAMS INC DAY	222132752	02703473	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$91.30	01-JAN-13	$91.38	01-MAY-14	$ 92.32
WOMENS LEAGUE COMM RES DAY	112889774	02703400	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$302.15	01-OCT-12	$302.15	01-MAY-14	$ 302.15
WOMENS LEAGUE COMM RES DAY	112889774	02703400	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$175.66	01-OCT-12	$175.66	01-MAY-14	$ 175.66
YAI DAY	112030172	02704447	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$197.25	01-OCT-12	$197.25	01-JUN-14	$ 196.09
YAI DAY	112030172	02704447	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$119.63	01-OCT-12	$119.63	01-JUN-14	$ 119.05
YATES CNTY CHAP NYSARC DAY	161086091	02703395	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$138.22	01-JAN-13	$137.78	01-MAY-14	$ 137.47
YATES CNTY CHAP NYSARC DAY	161086091	02703395	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$79.46	01-JAN-13	$79.24	01-MAY-14	$ 79.09
YEDEI CESED INC DAY	133728771	02703386	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$148.24	01-JAN-13	$155.65	01-MAY-14	$ 134.32
YEDEI CESED INC DAY	133728771	02703386	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$74.12	01-JAN-13	$77.83	01-MAY-14	$ 67.16
YOUNG ADULTS W/SPEC ABILITIES DAY	113586205	02950058	003	4453	GRP DAY HAB; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$162.58	01-JUL-12	$162.58	01-MAY-14	$ 181.60

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
YOUNG ADULTS W/SPEC ABILITIES DAY	113586205	02950058	003	4454	GRP DAY HAB; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$93.39	01-JUL-12	$93.39	01-MAY-14	$ 102.90
A VERY SPECIAL PLACE INC DAY	133005006	02703560	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$149.10	01-OCT-12	$149.10	01-MAY-14	$ 149.48
A VERY SPECIAL PLACE INC DAY	133005006	02703560	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$92.31	01-OCT-12	$92.31	01-MAY-14	$ 92.50
ABILITIES FIRST INC DAY	#N/A	02701384	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)			01-JAN-13	81.11	01-MAY-14	$ 81.55
ABILITIES FIRST INC DAY	#N/A	02701384	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)			01-JAN-13	139.92	01-MAY-14	$ 140.69
AHIVIM INC DAY	261488729	02952596	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$121.50	01-JUL-12	$121.50	01-MAY-14	$ 121.50
AHIVIM INC DAY	261488729	02952596	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$60.75	01-JUL-12	$60.75	01-MAY-14	$ 60.75
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$185.05	01-JAN-13	$184.99	01-MAY-14	$ 184.91
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$110.01	01-JAN-13	$109.98	01-MAY-14	$ 109.94
ANOTHER STEP INC DAY	133680851	02692419	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$152.48	01-JAN-13	$152.48	01-MAY-14	$ 152.48
ANOTHER STEP INC DAY	133680851	02692419	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$76.24	01-JAN-13	$76.24	01-MAY-14	$ 76.24
ASPIRE DF WNY INC DAY	160757756	02692455	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-FEB-2013	$178.74	01-FEB-13	$178.50	01-MAY-14	$ 177.13
ASPIRE DF WNY INC DAY	160757756	02692455	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-FEB-2013	$116.75	01-FEB-13	$116.63	01-MAY-14	$ 115.95
AUTISTIC SERVICES INC DAY	161185024	02700961	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)			01-JAN-13	64.7	01-MAY-14	$ 74.60
AUTISTIC SERVICES INC DAY	161185024	02700961	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)			01-JAN-13	118.1	01-MAY-14	$ 132.02
BATTENKILL COMM SVCS DAY	141810997	02692542	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$122.08	01-JAN-13	$122.08	01-MAY-14	$ 122.08
BATTENKILL COMM SVCS DAY	141810997	02692542	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$61.04	01-JAN-13	$61.04	01-MAY-14	$ 61.04
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$107.09	01-JAN-13	$106.77	01-MAY-14	$ 106.77
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$60.93	01-JAN-13	$60.77	01-MAY-14	$ 60.77
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$197.34	01-JAN-12	$197.34	01-MAY-14	$ 197.34
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$98.67	01-JAN-12	$98.67	01-MAY-14	$ 98.67
CANTALICIAN CTR LEARN DAY	161003618	02692524	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$137.93	01-JAN-13	$137.93	01-MAY-14	$ 139.72
CANTALICIAN CTR LEARN DAY	161003618	02692524	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$86.26	01-JAN-13	$86.26	01-MAY-14	$ 87.16
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$196.02	01-JAN-13	$195.86	01-MAY-14	$ 195.21
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$110.45	01-JAN-13	$110.37	01-MAY-14	$ 110.05
CHAUTAUQUA ADC INC DAY	161182855	02704589	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$93.29	01-JAN-12	$93.29	01-MAY-14	$ 93.29
CHAUTAUQUA ADC INC DAY	161182855	02704589	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$58.10	01-JAN-12	$58.10	01-MAY-14	$ 58.10
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$138.82	01-JAN-13	$138.79	01-MAY-14	$ 145.60
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$77.86	01-JAN-13	$77.84	01-MAY-14	$ 81.25
CHEMLU DEV DISAB CTR	352198039	02704570	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$107.36	01-JAN-13	$107.36	01-MAY-14	$ 107.36
CHEMLU DEV DISAB CTR	352198039	02704570	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$53.68	01-JAN-13	$53.68	01-MAY-14	$ 53.68
CHEMUNG CO ARC DAY	160795709	02704474	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$60.13	01-JAN-13	$60.13	01-MAY-14	$ 68.29
CHEMUNG CO ARC DAY	160795709	02704474	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$32.02	01-JAN-13	$32.02	01-MAY-14	$ 36.10
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$81.62	01-JAN-13	$81.62	01-MAY-14	$ 81.10
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$53.42	01-JAN-13	$53.42	01-MAY-14	$ 51.49

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CITIZEN ADVOCATES INC DAY	141577715	02693016	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$122.26	01-JAN-13	$122.19	01-MAY-14	$ 123.17
CITIZEN ADVOCATES INC DAY	141577715	02693016	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$71.98	01-JAN-13	$71.95	01-MAY-14	$ 72.47
CLINTON CO CHAP NYSARC DAY	141463735	02704781	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$240.14	01-JAN-13	$237.86	01-MAY-14	$ 237.88
CLINTON CO CHAP NYSARC DAY	141463735	02704781	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$137.84	01-JAN-13	$136.70	01-MAY-14	$ 136.71
COLUMBIA COUNTY ARC DAY	141489603	02693112	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-NOV-2012	$149.27	01-JAN-13	$149.94	01-JUN-14	$ 152.82
COLUMBIA COUNTY ARC DAY	141489603	02693112	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-NOV-2012	$86.48	01-JAN-13	$86.87	01-JUN-14	$ 88.57
COMM SVCS F/T DEV DISB DAY	161317369	02704350	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$138.59	01-JAN-13	$161.11	01-MAY-14	$ 149.82
COMM SVCS F/T DEV DISB DAY	161317369	02704350	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$78.33	01-JAN-13	$89.94	01-MAY-14	$ 84.91
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$149.43	01-JAN-13	$149.43	01-MAY-14	$ 149.43
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$85.15	01-JAN-13	$85.15	01-MAY-14	$ 85.15
COMMUNITY OPTIONS NY DAY	113414724	02703937	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$160.48	01-JUL-12	$160.48	01-MAY-14	$ 141.86
COMMUNITY OPTIONS NY DAY	113414724	02703937	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$90.23	01-JUL-12	$90.23	01-MAY-14	$ 81.00
COMMUNITY PLACE/GR ROCH DAY	161602979	02707904	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$50.83	01-JAN-12	$50.83	01-JAN-14	$ -
COMMUNITY PLACE/GR ROCH DAY	161602979	02707904	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$34.06	01-JAN-12	$34.06	01-JAN-14	$ -
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$89.05	01-JAN-12	$89.05	01-MAY-14	$ 89.05
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$44.53	01-JAN-12	$44.53	01-MAY-14	$ 44.53
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$133.10	01-OCT-12	$133.10	01-MAY-14	$ 133.10
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$74.64	01-OCT-12	$74.64	01-MAY-14	$ 74.64
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$172.79	01-OCT-12	$172.79	01-MAY-14	$ 181.06
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$99.61	01-OCT-12	$99.61	01-MAY-14	$ 103.75
DELAWARE OPP INC DAY	166063879	02704410	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$109.30	01-JAN-12	$109.30	01-MAY-14	$ 109.30
DELAWARE OPP INC DAY	166063879	02704410	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$54.65	01-JAN-12	$54.65	01-MAY-14	$ 54.65
DISABLED PERSONS ACTION DAY	222194058	02698415	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$102.95	01-JAN-13	$102.77	01-MAY-14	$ 102.39
DISABLED PERSONS ACTION DAY	222194058	02698415	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$51.83	01-JAN-13	$51.74	01-MAY-14	$ 51.55
ESSEX CO CHAP NYSARC DAY	141563885	02699407	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-NOV-2012	$179.39	01-JAN-13	$200.66	01-JUN-14	$ 199.04
ESSEX CO CHAP NYSARC DAY	141563885	02699407	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-NOV-2012	$100.76	01-JAN-13	$111.39	01-JUN-14	$ 99.52
EUROPA ASSOC INC DAY	141796294	02704305	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2009	$114.21	01-JAN-09	$114.21	01-JAN-09	$ 114.21
EUROPA ASSOC INC DAY	141796294	02704305	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2009	$58.69	01-JAN-09	$58.69	01-JAN-09	$ 58.69
FAM EMPOWERMENT CNCL	133751820	02699416	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$98.81	01-JAN-13	$98.28	01-MAY-14	$ 97.13
FAM EMPOWERMENT CNCL	133751820	02699416	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$49.40	01-JAN-13	$49.14	01-MAY-14	$ 48.57
FINGER LAKES UCP INC DAY	160965912	02699383	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$139.00	01-JAN-13	$139.00	01-MAY-14	$ 139.00
FINGER LAKES UCP INC DAY	160965912	02699383	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$82.83	01-JAN-13	$82.83	01-MAY-14	$ 82.83
FOOTINGS INC DAY	061364619	02699365	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$101.58	01-JAN-13	$101.58	01-MAY-14	$ 101.48
FOOTINGS INC DAY	061364619	02699365	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$58.56	01-JAN-13	$58.56	01-MAY-14	$ 58.51
FRANKLIN CO NYSARC DAY	237150954	02702409	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$214.59	01-JAN-13	$214.59	01-MAY-14	$ 213.81

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FRANKLIN CO NYSARC DAY	237150954	02702409	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$114.79	01-JAN-13	$114.79	01-MAY-14	$ 114.52
FRANZISKA RACKER CTR DAY	150581887	02699154	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$106.50	01-JAN-13	$81.17	01-MAY-14	$ 143.63
FRANZISKA RACKER CTR DAY	150581887	02699154	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$57.93	01-JAN-13	$41.86	01-MAY-14	$ 81.24
FREE DAY	112420547	02693070	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)					01-MAY-14	98.54
FREE DAY	112420547	02693070	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)					01-MAY-14	163.13
FULTON CNTY ARC DAY	146020996	02699374	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$155.78	01-JAN-13	$155.79	01-JUN-14	$ 157.60
FULTON CNTY ARC DAY	146020996	02699374	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$82.25	01-JAN-13	$82.31	01-JUN-14	$ 83.14
GATEWAY COUNSELING CTR DAY	133492890	02693052	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$135.15	01-OCT-12	$135.15	01-MAY-14	$ 133.48
GATEWAY COUNSELING CTR DAY	133492890	02693052	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$87.50	01-OCT-12	$87.50	01-MAY-14	$ 86.67
GREYSTONE PROGRAMS INC DAY	141608318	02699269	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$163.08	01-JAN-13	$163.83	01-MAY-14	$ 160.32
GREYSTONE PROGRAMS INC DAY	141608318	02699269	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$91.48	01-JAN-13	$91.85	01-MAY-14	$ 90.19
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$251.77	01-JAN-13	$251.00	01-MAY-14	$ 238.04
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$143.19	01-JAN-13	$142.81	01-MAY-14	$ 136.33
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$161.46	01-NOV-12	$161.46	01-MAY-14	$ 161.46
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$94.13	01-NOV-12	$94.13	01-MAY-14	$ 94.13
HANDICAPPED CHILD SO NY DAY	150516395	02699190	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)			01-OCT-12	55.67	01-MAY-14	$ 83.49
HANDICAPPED CHILD SO NY DAY	150516395	02699190	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)			01-OCT-12	111.34	01-MAY-14	$ 150.10
HARMONY SERVICES INC DAY	201134350	02838622	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$151.97	01-OCT-12	$151.19	01-MAY-14	$ 153.62
HARMONY SERVICES INC DAY	201134350	02838622	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$89.13	01-OCT-12	$88.73	01-MAY-14	$ 89.95
HASC CENTER DAY	112630071	02693061	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$181.78	01-JUL-12	$181.78	01-MAY-14	$ 178.91
HASC CENTER DAY	112630071	02693061	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$108.26	01-JUL-12	$108.26	01-MAY-14	$ 106.82
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$187.62	01-JAN-13	$187.36	01-MAY-14	$ 189.79
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$112.65	01-JAN-13	$112.52	01-MAY-14	$ 113.61
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$135.03	01-JAN-13	$134.74	01-MAY-14	$ 135.21
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$73.54	01-JAN-13	$73.40	01-MAY-14	$ 73.69
HUMAN FIRST INC DAY	113590136	02704507	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)						
HUMAN FIRST INC DAY	113590136	02704507	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)						
IN FLIGHT INC DAY	141764481	02699172	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$117.29	01-FEB-13	$120.21	01-MAY-14	$ 120.55
IN FLIGHT INC DAY	141764481	02699172	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$67.75	01-FEB-13	$69.46	01-MAY-14	$ 69.64
JEFFERSON REHAB DAY	161134631	02699287	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$78.48	01-JAN-13	$78.48	01-MAY-14	$ 78.45
JEFFERSON REHAB DAY	161134631	02699287	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$44.11	01-JAN-13	$44.11	01-MAY-14	$ 44.09
JEWISH UNION FOUNDATION DAY	133636595	02699329	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$142.83	01-JAN-13	$142.83	01-MAY-14	$ 142.83
JEWISH UNION FOUNDATION DAY	133636595	02699329	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$80.82	01-JAN-13	$80.82	01-MAY-14	$ 80.82
JOB PATH DAY	134038495	02704736	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$240.89	01-OCT-12	$240.89	01-MAY-14	$ 240.89
JOB PATH DAY	134038495	02704736	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$128.21	01-OCT-12	$128.21	01-MAY-14	$ 128.21

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
LEAKE AND WATTS SERVICES INC	131860451	03105828	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)					01-MAY-14	106.52
LEAKE AND WATTS SERVICES INC	131860451	03105828	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)					01-MAY-14	186.14
LEAP INC DAY	161467182	02699301	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$117.03	01-JAN-13	$116.93	01-MAY-14	$ 116.82
LEAP INC DAY	161467182	02699301	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$67.30	01-JAN-13	$67.25	01-MAY-14	$ 67.20
LEARNING DISABILITIES WNY DAY	161118058	02699347	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$215.76	01-JAN-13	$215.76	01-MAY-14	$ 215.76
LEARNING DISABILITIES WNY DAY	161118058	02699347	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$107.88	01-JAN-13	$107.88	01-MAY-14	$ 107.88
LEARNING DISBIL GV DAY	222702285	02693745	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$135.92	01-JAN-13	$135.92	01-MAY-14	$ 135.92
LEARNING DISBIL GV DAY	222702285	02693745	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$78.09	01-JAN-13	$78.09	01-MAY-14	$ 78.09
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$143.43	01-JAN-13	$143.05	01-MAY-14	$ 143.35
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$83.83	01-JAN-13	$83.65	01-MAY-14	$ 83.81
LIFES WORC DAY	237209731	02700136	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)					01-MAY-14	78.16
LIFES WORC DAY	237209731	02700136	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)					01-MAY-14	130.66
LIFESONG INC DAY/CH	273639848	03307004	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$159.75	01-JUL-12	$159.75	01-MAY-14	$ 159.75
LIFESONG INC DAY/CH	273639848	03307004	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$79.88	01-JUL-12	$79.88	01-MAY-14	$ 79.88
LIFESONG INC DAY/CH	273639848	03307004	006	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-MAY-2011	$79.88	01-MAY-11	$79.88	01-MAY-11	$ 79.88
LIFESTYLES F/T DISABLED DAY	133740011	02700067	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)						
LIFESTYLES F/T DISABLED DAY	133740011	02700067	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)						
LIVING RESOURCES CORP DAY	141564208	02704745	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$139.71	01-JAN-13	$139.52	01-JUN-14	$ 140.79
LIVING RESOURCES CORP DAY	141564208	02704745	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$79.16	01-JAN-13	$79.06	01-JUN-14	$ 79.82
LIVINGSTON WYOMING ARC DAY	161022565	02704754	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUN-2012	$189.14	01-JAN-13	$190.18	01-MAY-14	$ 189.58
LIVINGSTON WYOMING ARC DAY	161022565	02704754	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUN-2012	$104.15	01-JAN-13	$104.67	01-MAY-14	$ 104.37
LOCHLAND SCHOOL DAY	160780944	02700058	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-APR-2008	$82.29	01-JAN-13	$73.76	01-MAY-14	$ 73.76
LOCHLAND SCHOOL DAY	160780944	02700058	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-APR-2008	$41.15	01-JAN-13	$36.88	01-MAY-14	$ 36.88
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$111.44	01-JAN-12	$111.44	01-MAY-14	$ 111.44
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$66.83	01-JAN-12	$66.83	01-MAY-14	$ 66.83
MADISON-CORTLAND NYSARC DAY	160958020	02701499	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$188.63	01-JAN-13	$188.36	01-MAY-14	$ 187.32
MADISON-CORTLAND NYSARC DAY	160958020	02701499	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$121.99	01-JAN-13	$121.85	01-MAY-14	$ 121.34
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)						
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)						
MONROE CO CHAP NYSARC DAY	160835172	02704814	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$122.38	01-JAN-13	$122.64	01-MAY-14	$ 128.11
MONROE CO CHAP NYSARC DAY	160835172	02704814	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$75.46	01-JAN-13	$75.59	01-MAY-14	$ 78.32
NASSAU CO CHAP NYSARC DAY	111720254	02693736	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$175.84	01-JAN-13	$175.09	01-JUN-14	$ 174.35
NASSAU CO CHAP NYSARC DAY	111720254	02693736	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$102.02	01-JAN-13	$101.64	01-JUN-14	$ 101.29
NIAGARA COUNTY ARC DAY	160794847	02704823	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$140.03	01-JAN-13	$139.89	01-MAY-14	$ 139.99
NIAGARA COUNTY ARC DAY	160794847	02704823	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$82.28	01-JAN-13	$82.20	01-MAY-14	$ 82.28

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
NORTHERN NY CP ASSOC DAY	222542065	02704841	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$76.59	01-JAN-12	$76.59	01-MAY-14	$ 76.59
NORTHERN NY CP ASSOC DAY	222542065	02704841	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$38.29	01-JAN-12	$38.29	01-MAY-14	$ 38.29
NYSARC INC NYC CHAPTER DAY	135596746	02703602	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$173.23	01-MAR-13	$174.93	01-MAY-14	$ 174.48
NYSARC INC NYC CHAPTER DAY	135596746	02703602	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$105.08	01-MAR-13	$105.94	01-MAY-14	$ 105.68
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$112.96	01-JAN-13	$116.58	01-MAY-14	$ 116.16
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$65.83	01-JAN-13	$67.64	01-MAY-14	$ 67.43
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$112.18	01-JAN-13	$112.03	01-MAY-14	$ 126.13
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$69.04	01-JAN-13	$68.96	01-MAY-14	$ 76.01
ORANGE REHAB OCCUP INC DAY	141471097	02693763	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-SEP-2012	$141.26	01-JAN-13	$141.73	01-MAY-14	$ 143.02
ORANGE REHAB OCCUP INC DAY	141471097	02693763	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-SEP-2012	$79.61	01-JAN-13	$79.84	01-MAY-14	$ 80.20
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-DEC-2012	$142.49	01-JAN-13	$142.37	01-MAY-14	$ 142.62
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-DEC-2012	$77.41	01-JAN-13	$77.36	01-MAY-14	$ 77.48
OTSAR INC DAY	112601112	02702014	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)			01-NOV-12	113.65	01-MAY-14	$ 112.48
OTSAR INC DAY	112601112	02702014	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)			01-NOV-12	69.68	01-MAY-14	$ 69.10
PATHWAYS INC DAY	161089007	02702041	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$138.35	01-JAN-13	$138.24	01-MAY-14	$ 139.61
PATHWAYS INC DAY	161089007	02702041	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$83.69	01-JAN-13	$83.63	01-MAY-14	$ 84.31
PEOPLE SERVICE TO THE DAY	160975538	02702156	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$199.44	01-JAN-13	$203.70	01-MAY-14	$ 199.58
PEOPLE SERVICE TO THE DAY	160975538	02702156	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$125.59	01-JAN-13	$127.62	01-MAY-14	$ 125.05
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$183.55	01-JAN-13	$183.63	01-MAY-14	$ 178.58
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$106.83	01-JAN-13	$106.87	01-MAY-14	$ 104.35
PUTNAM ARC DAY	141426729	02703620	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$124.98	01-JAN-13	$124.69	01-MAY-14	$ 125.19
PUTNAM ARC DAY	141426729	02703620	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$71.39	01-JAN-13	$71.24	01-MAY-14	$ 71.50
QSAC DAY	112482974	02701480	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-DEC-2012	$178.88	01-JAN-13	$179.07	01-MAY-14	$ 177.61
QSAC DAY	112482974	02701480	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-DEC-2012	$107.07	01-JAN-13	$107.16	01-MAY-14	$ 106.38
RENSS CO CHAP NYSARC DAY	141485873	02693709	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-SEP-2012	$139.42	01-JAN-13	$139.11	01-JUN-14	$ 139.49
RENSS CO CHAP NYSARC DAY	141485873	02693709	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-SEP-2012	$82.10	01-JAN-13	$81.95	01-JUN-14	$ 82.05
RESIDENTIAL RESOURCES DAY	141823526	02701288	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$206.35	01-JAN-13	$206.35	01-MAY-14	$ 206.35
RESIDENTIAL RESOURCES DAY	141823526	02701288	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$123.74	01-JAN-13	$123.74	01-MAY-14	$ 123.74
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-NOV-2012	$124.34	01-JAN-13	$125.81	01-MAY-14	$ 125.74
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-NOV-2012	$63.17	01-JAN-13	$64.31	01-MAY-14	$ 64.28
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$134.47	01-JAN-13	$134.42	01-MAY-14	$ 134.40
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$74.17	01-JAN-13	$74.15	01-MAY-14	$ 74.14
SARATOGA CNTY ARC DAY	141465932	02701980	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$121.21	01-JAN-13	$121.14	01-MAY-14	$ 121.87
SARATOGA CNTY ARC DAY	141465932	02701980	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$72.83	01-JAN-13	$72.80	01-MAY-14	$ 73.16
SENECA CAYUGA NYSARC DAY	161124314	02701971	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$165.39	01-JAN-13	$165.46	01-MAY-14	$ 166.31

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SENECA CAYUGA NYSARC DAY	161124314	02701971	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$97.16	01-JAN-13	$97.19	01-MAY-14	$ 97.62
SHARE OF NEW SQUARE DAY	133475062	02701962	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$204.42	01-JAN-13	$204.42	01-MAY-14	$ 199.63
SHARE OF NEW SQUARE DAY	133475062	02701962	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$102.21	01-JAN-13	$102.21	01-MAY-14	$ 99.82
SINERGIA INC DAY	133183344	02701953	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$119.01	01-OCT-12	$119.01	01-MAY-14	$ 119.66
SINERGIA INC DAY	133183344	02701953	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$71.01	01-OCT-12	$71.01	01-MAY-14	$ 71.33
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$82.30	01-JAN-13	$80.95	01-MAY-14	$ 79.90
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$51.97	01-JAN-13	$51.30	01-MAY-14	$ 50.77
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$176.56	01-JAN-13	$176.56	01-MAY-14	$ 176.56
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$88.28	01-JAN-13	$88.28	01-MAY-14	$ 88.28
SPRINGBROOK NY INC DAY	150539129	02703368	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$138.00	01-JAN-13	$135.37	01-MAY-14	$ 139.47
SPRINGBROOK NY INC DAY	150539129	02703368	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$74.60	01-JAN-13	$73.28	01-MAY-14	$ 75.97
ST LAWRENCE NYSARC INC DAY	150617072	02702069	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$167.34	01-JAN-13	$167.34	01-MAY-14	$ 167.43
ST LAWRENCE NYSARC INC DAY	150617072	02702069	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$96.36	01-JAN-13	$96.36	01-MAY-14	$ 96.41
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$206.11	01-JAN-13	$206.11	01-MAY-14	$ 206.11
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$117.19	01-JAN-13	$117.19	01-MAY-14	$ 117.19
STATEN ISLAND AID INC DAY	135660279	02704525	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)						
STATEN ISLAND AID INC DAY	135660279	02704525	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)						
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$150.77	01-JAN-13	$150.35	01-MAY-14	$ 150.37
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$91.97	01-JAN-13	$91.76	01-MAY-14	$ 91.77
STONY FORD FOUNDATION DAY	061207341	02702087	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$152.78	01-JAN-13	$152.78	01-MAY-14	$ 152.78
STONY FORD FOUNDATION DAY	061207341	02702087	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$76.39	01-JAN-13	$76.39	01-MAY-14	$ 76.39
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$120.06	01-JAN-13	$119.72	01-MAY-14	$ 121.21
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$66.49	01-JAN-13	$66.31	01-MAY-14	$ 67.06
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$106.99	01-JAN-13	$106.99	01-MAY-14	$ 106.99
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$61.98	01-JAN-13	$61.98	01-MAY-14	$ 61.98
TACONIC INNOVATIONS INC DAY	223729121	02702505	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$123.28	01-JAN-13	$121.97	01-MAY-14	$ 116.34
TACONIC INNOVATIONS INC DAY	223729121	02702505	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$64.62	01-JAN-13	$63.96	01-MAY-14	$ 61.15
THE SHIELD INSTITUTE DAY	131740041	02702532	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$201.22	01-OCT-12	$201.22	01-MAY-14	$ 204.41
THE SHIELD INSTITUTE DAY	131740041	02702532	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$118.59	01-OCT-12	$118.59	01-MAY-14	$ 120.19
TOOMEY RES AND COMM SVS DAY	161363414	02702541	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$166.60	01-JAN-13	$166.60	01-MAY-14	$ 167.13
TOOMEY RES AND COMM SVS DAY	161363414	02702541	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$83.30	01-JAN-13	$83.30	01-MAY-14	$ 84.47
TRANSITIONAL LIV SVCS DAY	161039435	02702481	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$135.84	01-JAN-13	$135.84	01-MAY-14	$ 135.84
TRANSITIONAL LIV SVCS DAY	161039435	02702481	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$81.68	01-JAN-13	$81.68	01-MAY-14	$ 81.68
UCP ASSOC ROCHESTER DAY	160743950	02702165	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$163.61	01-JAN-13	$163.61	01-MAY-14	$ 163.99
UCP ASSOC ROCHESTER DAY	160743950	02702165	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$89.28	01-JAN-13	$89.28	01-MAY-14	$ 89.57

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UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)			01-JAN-13	107.13	01-MAY-14	$ 105.09
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)			01-JAN-13	210.92	01-MAY-14	$ 207.05
UCP HANDICAPPED P UTICA DAY	150543657	02693598	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2013	$144.48	01-JAN-13	$143.88	01-MAY-14	$ 143.85
UCP HANDICAPPED P UTICA DAY	150543657	02693598	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2013	$80.45	01-JAN-13	$80.15	01-MAY-14	$ 80.13
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JAN-2012	$157.30	01-JAN-13	$157.08	01-MAY-14	$ 156.76
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JAN-2012	$90.87	01-JAN-13	$90.76	01-MAY-14	$ 90.60
UCPA OF THE NORTH CTRY DAY	161568985	02703482	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$223.72	01-JAN-13	$223.72	01-MAY-14	$ 223.72
UCPA OF THE NORTH CTRY DAY	161568985	02703482	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$124.57	01-JAN-13	$124.57	01-MAY-14	$ 124.57
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$203.96	01-OCT-12	$203.96	01-MAY-14	$ 241.31
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$120.26	01-OCT-12	$120.26	01-MAY-14	$ 138.93
UNITED HELPERS ICF INC DAY	222412205	02703446	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)						
UNITED HELPERS ICF INC DAY	222412205	02703446	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)						
UNITY HS CAYUGA CO INC DAY	161081372	02703359	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$152.66	01-JAN-13	$152.66	01-MAY-14	$ 152.90
UNITY HS CAYUGA CO INC DAY	161081372	02703359	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$89.71	01-JAN-13	$89.71	01-MAY-14	$ 89.83
YAI DAY	112030172	02704447	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-OCT-2012	$197.25	01-OCT-12	$197.25	01-JUN-14	$ 196.09
YAI DAY	112030172	02704447	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-OCT-2012	$119.63	01-OCT-12	$119.63	01-JUN-14	$ 119.05
YATES CNTY CHAP NYSARC DAY	161086091	02703395	005	4455	SUP GRP DAY HAB; VOL; FULL UNI	DAY (1)	01-JUL-2012	$138.22	01-JAN-13	$137.78	01-MAY-14	$ 137.47
YATES CNTY CHAP NYSARC DAY	161086091	02703395	005	4456	SUP GRP DAY HAB; VOL; HALF UNI	HALF DAY (1)	01-JUL-2012	$79.46	01-JAN-13	$79.24	01-MAY-14	$ 79.09
ARISE DAY	161186293	02704025	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	7.22	01-JUL-11	7.22	01-JUL-11	7.22
ASPIRE DF WNY INC DAY	160757756	02692455	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	9.14	01-JUL-11	9.14	01-JUL-11	9.14
CATH CHAR COMM RES SVC DAY	160743944	02704598	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	10.56	01-JUL-11	10.56	01-JUL-11	10.56
CATHOLIC CHAR DDS DAY	141340033	02692982	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	10.42	01-JUL-11	10.42	01-JUL-11	10.42
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	8.99	01-JUL-11	8.99	01-JUL-11	8.99
COMM RESOURCE CTR F/OD DAY	132954788	02772347	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (96)			01-JUL-11	5.5	01-JUL-11	5.5
COMM SVCS F/T DEV DISB DAY	161317369	02704350	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-NOV-2012	12.91	01-NOV-12	12.91	01-NOV-12	12.91
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	7.55	01-JUL-11	7.55	01-JUL-11	7.55
EPILEPSY ASSOC GR ROCH DAY	222146295	02890320	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	10.36	01-JUL-11	10.36	01-FEB-14	0
EPILEPSY INSTITUTE DAY	132608325	02704465	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	16.63	01-JUL-11	16.63	01-JUL-11	16.63
FRANZISKA RACKER CTR DAY	150581887	02699154	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	10.94	01-JUL-11	10.94	01-JUL-11	10.94
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	7.99	01-JUL-11	7.99	01-JUL-11	7.99
INDEPENDENT LIVING ASSOCIATION INC	112729771	03597266	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (96)			05-JAN-13	18.15	01-MAY-13	18.15
ONONDAGA COMM LIVING DAY	161275425	02701366	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JAN-2013	8.64	01-JAN-13	8.64	01-MAY-13	9.64
PATHWAYS INC DAY	161089007	02702041	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JUL-2011	16.98	01-JUL-11	16.98	01-JUL-11	16.98
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (96)					01-APR-13	10.36
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JAN-2013	18.2	01-JAN-13	18.2	01-JAN-13	18.2

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YAI DAY	112030172	02704447	006	4457	IND DAY HAB; VOL; 1/4 HR UNIT	15 MINUTES (9	01-JAN-2011	12.6	01-JAN-11	12.6	01-JAN-11	12.6
ARISE DAY	161186293	02704025	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$7.22	01-JUL-11	$7.22	01-JUL-11	$ 7.22
ASPIRE DF WNY INC DAY	160757756	02692455	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$9.14	01-JUL-11	$9.14	01-JUL-11	$ 9.14
CATH CHAR COMM RES SVC DAY	160743944	02704598	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$10.56	01-JUL-11	$10.56	01-JUL-11	$ 10.56
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$8.99	01-JUL-11	$8.99	01-JUL-11	$ 8.99
COMM SVCS F/T DEV DISB DAY	161317369	02704350	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$12.68	01-JAN-13	$12.91	01-JAN-13	$ 12.91
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$7.55	01-JUL-11	$7.55	01-JUL-11	$ 7.55
FRANZISKA RACKER CTR DAY	150581887	02699154	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$10.94	01-JUL-11	$10.94	01-JUL-11	$ 10.94
ONONDAGA COMM LIVING DAY	161275425	02701366	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JAN-2013	$8.64	01-JAN-13	$8.64	01-JAN-13	$ 8.64
PATHWAYS INC DAY	161089007	02702041	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$16.98	01-JUL-11	$16.98	01-JUL-11	$ 16.98
RENSS CO CHAP NYSARC DAY	141485873	02693709	007	4463	SUP IND DAY HAB; VOL; 1/4 HR UN	15 MINUTES (9	01-JUL-2011	$19.50	01-JUL-11	$19.50	01-JUL-11	$ 19.50

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A VERY SPECIAL PLACE INC DAY	133005006	02703560	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
A VERY SPECIAL PLACE INC DAY	133005006	02703560	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
A VERY SPECIAL PLACE INC DAY	133005006	02703560	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
A VERY SPECIAL PLACE INC DAY	133005006	02703560	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
AABR INC DAY	131968035	02692437	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
AABR INC DAY	131968035	02692437	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
AABR INC DAY	131968035	02692437	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
AABR INC DAY	131968035	02692437	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ABBOTT HOUSE DAY	131991946	02704061	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$103.58	01-JUL-11	$103.58	01-JUL-11	$ 103.58	01-JAN-15	$ 105.17	01-APR-15	$ 106.81	01-JUN-15	$ 106.81
ABBOTT HOUSE DAY	131991946	02704061	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$51.79	01-JUL-11	$51.79	01-JUL-11	$ 51.79	01-JAN-15	$ 52.58	01-APR-15	$ 53.40	01-JUN-15	$ 53.41
ABBOTT HOUSE DAY	131991946	02704061	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ABBOTT HOUSE DAY	131991946	02704061	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ABBOTT HOUSE DAY	131991946	02704061	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ABBOTT HOUSE DAY	131991946	02704061	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ABILITIES FIRST INC DAY	141467427	02701384	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$100.39	01-JUL-11	$100.39	01-JUL-11	$ 100.39	01-JAN-15	$ 101.58	01-APR-15	$ 102.78	01-JUN-15	$ 102.77
ABILITIES FIRST INC DAY	141467427	02701384	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$50.20	01-JUL-11	$50.20	01-JUL-11	$ 50.20	01-JAN-15	$ 50.79	01-APR-15	$ 51.39	01-JUN-15	$ 51.39
ABILITIES FIRST INC DAY	141467427	02701384	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ABILITIES FIRST INC DAY	141467427	02701384	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ABILITIES FIRST INC DAY	141467427	02701384	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ABILITIES FIRST INC DAY	141467427	02701384	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ABILITIES INC DAY/CH	111710419	03506296	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ABILITIES INC DAY/CH	111710419	03506296	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ABILITIES INC DAY/CH	111710419	03506296	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ABILITIES INC DAY/CH	111710419	03506296	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ABILITY BEYOND DISABILITY DAY	141758770	02703946	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ABILITY BEYOND DISABILITY DAY	141758770	02703946	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ABILITY BEYOND DISABILITY DAY	141758770	02703946	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ABILITY BEYOND DISABILITY DAY	141758770	02703946	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ABLE2 ENHANCING POTENTIAL, INC DAY	161091767	02702550	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ABLE2 ENHANCING POTENTIAL, INC DAY	161091767	02702550	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ABLE2 ENHANCING POTENTIAL, INC DAY	161091767	02702550	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ABLE2 ENHANCING POTENTIAL, INC DAY	161091767	02702550	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ACDS	237175975	03257150	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ACDS	237175975	03257150	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ACDS	237175975	03257150	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ACDS	237175975	03257150	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ACLD GROUP DAY HAB DAY	116042250	02704070	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ACLD GROUP DAY HAB DAY	116042250	02704070	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ACLD GROUP DAY HAB DAY	116042250	02704070	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ACLD GROUP DAY HAB DAY	116042250	02704070	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ADULT RESOURCES CTR INC	111986300	02692491	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ADULT RESOURCES CTR INC	111986300	02692491	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ADULT RESOURCES CTR INC	111986300	02692491	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ADULT RESOURCES CTR INC	111986300	02692491	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ADULT RETARDATES CTR INC DAY	111986300	02692491	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$56.04	01-JUL-11	$56.04	01-JUL-11	$ 56.04	01-JAN-15	$ 109.53	01-APR-15	$ 110.21	01-JUN-15	$ 103.25
ADULT RETARDATES CTR INC DAY	111986300	02692491	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$28.46	01-JUL-11	$28.46	01-JUL-11	$ 28.46	01-JAN-15	$ 55.20	01-APR-15	$ 55.54	01-JUN-15	$ 52.06
AGAPE PARENT FELLOWSHIP DAY	112617454	02704043	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
AGAPE PARENT FELLOWSHIP DAY	112617454	02704043	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
AGAPE PARENT FELLOWSHIP DAY	112617454	02704043	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
AGAPE PARENT FELLOWSHIP DAY	112617454	02704043	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
AHIVIM INC DAY	261488729	02952596	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
AHIVIM INC DAY	261488729	02952596	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
AHIVIM INC DAY	261488729	02952596	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
AHIVIM INC DAY	261488729	02952596	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
AIM SERVICES INC DAY	141609398	02692473	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
AIM SERVICES INC DAY	141609398	02692473	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
AIM SERVICES INC DAY	141609398	02692473	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
AIM SERVICES INC DAY	141609398	02692473	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ALBANY CO CHAPTER NYSARC DAY	141392181	02704034	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$121.92	01-FEB-13	$0.00	01-FEB-13	$ -	01-FEB-13	$ -	01-FEB-13	$ -	01-FEB-13	$ -
ALBANY CO CHAPTER NYSARC DAY	141392181	02704034	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$66.76	01-FEB-13	$0.00	01-FEB-13	$ -	01-FEB-13	$ -	01-FEB-13	$ -	01-FEB-13	$ -
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$91.22	01-JUL-11	$91.22	01-JUL-11	$ 91.22	01-JAN-15	$ 96.01	01-APR-15	$ 97.24	01-JUN-15	$ 97.40
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$52.85	01-JUL-11	$52.85	01-JUL-11	$ 52.85	01-JAN-15	$ 55.10	01-APR-15	$ 55.72	01-JUN-15	$ 55.80
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ALLEGANY CO CHAPTER ARC DAY	161021588	02692506	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ANDERSON CENTER SERVICES INC DAY	222923873	02707862	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ANDERSON CENTER SERVICES INC DAY	222923873	02707862	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ANDERSON CENTER SERVICES INC DAY	222923873	02707862	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ANDERSON CENTER SERVICES INC DAY	222923873	02707862	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ANGELS UNAWARE INC	133753509	02692464	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ANGELS UNAWARE INC	133753509	02692464	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ANGELS UNAWARE INC	133753509	02692464	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ANGELS UNAWARE INC	133753509	02692464	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ANOTHER STEP INC DAY	133680851	02692419	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$58.98	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
ANOTHER STEP INC DAY	133680851	02692419	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$29.49	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
ANOTHER STEP INC DAY	133680851	02692419	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ANOTHER STEP INC DAY	133680851	02692419	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ANOTHER STEP INC DAY	133680851	02692419	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ANOTHER STEP INC DAY	133680851	02692419	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ARISE DAY	161186293	02704025	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ARISE DAY	161186293	02704025	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ARISE DAY	161186293	02704025	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ARISE DAY	161186293	02704025	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ASBM INC	112685324	02704016	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ASBM INC	112685324	02704016	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ASBM INC	112685324	02704016	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ASBM INC	112685324	02704016	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ASPIRE DF WNY INC DAY	160757756	02692455	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)					01-JUL-13	67.75	01-JAN-15	$ 68.22	01-APR-15	$ 68.70	01-APR-15	$ 68.70
ASPIRE DF WNY INC DAY	160757756	02692455	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)					01-JUL-13	135.51	01-JAN-15	$ 136.44	01-APR-15	$ 137.40	01-APR-15	$ 137.40
ASPIRE DF WNY INC DAY	160757756	02692455	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ASPIRE DF WNY INC DAY	160757756	02692455	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ASPIRE DF WNY INC DAY	160757756	02692455	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ASPIRE DF WNY INC DAY	160757756	02692455	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ASSOC MENT ILL CHILD W DAY	132554243	02692446	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ASSOC MENT ILL CHILD W DAY	132554243	02692446	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ASSOC MENT ILL CHILD W DAY	132554243	02692446	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ASSOC MENT ILL CHILD W DAY	132554243	02692446	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$86.84	01-JUL-11	$86.84	01-JUL-11	$ 86.84	01-JAN-15	$ 88.02	01-APR-15	$ 89.23	01-JUN-15	$ 89.23
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$43.42	01-JUL-11	$43.42	01-JUL-11	$ 43.42	01-JAN-15	$ 44.01	01-APR-15	$ 44.61	01-JUN-15	$ 44.61
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ASSOC NEUROL IMPAIRED DAY	112348663	02692482	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ASSOC-METROAREA AU CHILD DAY	131974582	02692428	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ASSOC-METROAREA AU CHILD DAY	131974582	02692428	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ASSOC-METROAREA AU CHILD DAY	131974582	02692428	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ASSOC-METROAREA AU CHILD DAY	131974582	02692428	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
AUTISTIC SERVICES INC DAY	161185024	02700961	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
AUTISTIC SERVICES INC DAY	161185024	02700961	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
AUTISTIC SERVICES INC DAY	161185024	02700961	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
AUTISTIC SERVICES INC DAY	161185024	02700961	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
BATTENKILL COMM SVCS DAY	141810997	02692542	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
BATTENKILL COMM SVCS DAY	141810997	02692542	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
BATTENKILL COMM SVCS DAY	141810997	02692542	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
BATTENKILL COMM SVCS DAY	141810997	02692542	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
BIRCH FAMILY SVCS INC DAY	112503193	02781015	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
BIRCH FAMILY SVCS INC DAY	112503193	02781015	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
BIRCH FAMILY SVCS INC DAY	112503193	02781015	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
BIRCH FAMILY SVCS INC DAY	112503193	02781015	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
BKLYN BUREAU OF COMM SVC	111630780	02703991	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$144.56	01-JUL-11	$144.56	01-JUL-11	$ 144.56	01-JAN-15	$ 145.56	01-APR-15	$ 147.11	01-JUN-15	$ 147.11
BKLYN BUREAU OF COMM SVC	111630780	02703991	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$72.28	01-JUL-11	$72.28	01-JUL-11	$ 72.28	01-JAN-15	$ 72.78	01-APR-15	$ 73.55	01-JUN-15	$ 73.55
BKLYN BUREAU OF COMM SVC	111630780	02703991	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
BKLYN BUREAU OF COMM SVC	111630780	02703991	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
BKLYN BUREAU OF COMM SVC	111630780	02703991	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
BKLYN BUREAU OF COMM SVC	111630780	02703991	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
BLOCK INSTITUTE	112416320	02703982	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$37.49	01-JUL-11	$37.49	01-JUL-11	$ 37.49	01-JAN-15	$ 37.92	01-APR-15	$ 38.36	01-JUN-15	$ 38.36
BLOCK INSTITUTE	112416320	02703982	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$21.53	01-JUL-11	$21.53	01-JUL-11	$ 21.53	01-JAN-15	$ 21.75	01-APR-15	$ 21.97	01-JUN-15	$ 21.97
BLOCK INSTITUTE	112416320	02703982	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
BLOCK INSTITUTE	112416320	02703982	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
BLOCK INSTITUTE	112416320	02703982	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
BLOCK INSTITUTE	112416320	02703982	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$63.18	01-JAN-13	$63.71	01-JAN-14	$ 65.31	01-JAN-15	$ 65.88	01-APR-15	$ 66.63	01-JUN-15	$ 66.63
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$34.90	01-JAN-13	$35.17	01-JAN-14	$ 35.97	01-JAN-15	$ 36.25	01-APR-15	$ 36.63	01-JUN-15	$ 36.63
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
BROOME-TIOGA CO CHAP NYSARC DAY	150619307	02692533	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
BUREAU OF JEWISH EDUCATION DAY	160760886	02936414	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CAMP VENTURE	132661988	02703964	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$52.01	01-JUL-11	$52.01	01-JUL-11	$ 52.01	01-JAN-15	$ 52.01	01-APR-15	$ 52.64	01-JUN-15	$ 52.64
CAMP VENTURE	132661988	02703964	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$31.70	01-JUL-11	$31.70	01-JUL-11	$ 31.70	01-JAN-15	$ 31.70	01-APR-15	$ 32.02	01-JUN-15	$ 32.02
CAMP VENTURE	132661988	02703964	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CAMP VENTURE	132661988	02703964	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CAMP VENTURE	132661988	02703964	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CAMP VENTURE	132661988	02703964	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CANTALICIAN CTR LEARN DAY	161003618	02692524	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$36.13	01-JUL-11	$36.13	01-JUL-11	$ 36.13	01-JAN-15	$ 36.59	01-APR-15	$ 37.06	01-JUN-15	$ 37.06
CANTALICIAN CTR LEARN DAY	161003618	02692524	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$18.07	01-JUL-11	$18.07	01-JUL-11	$ 18.07	01-JAN-15	$ 18.30	01-APR-15	$ 18.53	01-JUN-15	$ 18.53
CANTALICIAN CTR LEARN DAY	161003618	02692524	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CANTALICIAN CTR LEARN DAY	161003618	02692524	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CANTALICIAN CTR LEARN DAY	161003618	02692524	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CANTALICIAN CTR LEARN DAY	161003618	02692524	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CAPABILITIES INC DAY	160807981	02890339	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$89.86	01-JUL-11	$89.86	01-JUL-11	$ 89.86	01-JAN-15	$ 109.44	01-APR-15	$ 110.73	01-JUN-15	$ 110.73
CAPABILITIES INC DAY	160807981	02890339	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$44.93	01-JUL-11	$44.93	01-JUL-11	$ 44.93	01-JAN-15	$ 54.72	01-APR-15	$ 55.36	01-JUN-15	$ 55.36
CAPITAL REGION GER CTR DAY	141701597	02692515	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CAPITAL REGION GER CTR DAY	141701597	02692515	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CAPITAL REGION GER CTR DAY	141701597	02692515	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CAPITAL REGION GER CTR DAY	141701597	02692515	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CARDINAL HAYES HOME FOR CHILDREN DA	141395444	03520216	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CARDINAL HAYES HOME FOR CHILDREN DA	141395444	03520216	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
CARDINAL HAYES HOME FOR CHILDREN DA	141395444	03520216	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CARDINAL HAYES HOME FOR CHILDREN DA	141395444	03520216	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CARDINAL MCCLOSKEY SVCS DAY	131740443	02692973	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CARDINAL MCCLOSKEY SVCS DAY	131740443	02692973	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CARDINAL MCCLOSKEY SVCS DAY	131740443	02692973	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CARDINAL MCCLOSKEY SVCS DAY	131740443	02692973	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CAREERS F/PEOPLE W/DISAB DAY/CH	133424844	03609721	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CAREERS F/PEOPLE W/DISAB DAY/CH	133424844	03609721	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CAREERS F/PEOPLE W/DISAB DAY/CH	133424844	03609721	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CAREERS F/PEOPLE W/DISAB DAY/CH	133424844	03609721	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CARL FENICHEL COMM SVCS DAY	112449485	02703973	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$168.17	01-JUL-12	$168.17	01-JUL-13	$ 169.22	01-JAN-15	$ 171.13	01-APR-15	$ 172.63	01-JUN-15	$ 175.61
CARL FENICHEL COMM SVCS DAY	112449485	02703973	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$99.96	01-JUL-12	$99.96	01-JUL-13	$ 100.49	01-JAN-15	$ 101.44	01-APR-15	$ 102.19	01-JUN-15	$ 103.68
CARL FENICHEL COMM SVCS DAY	112449485	02703973	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CARL FENICHEL COMM SVCS DAY	112449485	02703973	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CARL FENICHEL COMM SVCS DAY	112449485	02703973	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CARL FENICHEL COMM SVCS DAY	112449485	02703973	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CATH CHAR NGHBHD SVCS INC DAY	112047151	02704052	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CATH CHAR NGHBHD SVCS INC DAY	112047151	02704052	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CATH CHAR NGHBHD SVCS INC DAY	112047151	02704052	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CATH CHAR NGHBHD SVCS INC DAY	112047151	02704052	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CAY COMM SVC ORG INC	113235840	02704552	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	126.35	01-APR-15	$ 128.08	01-JUN-15	$ 128.08
CAY COMM SVC ORG INC	113235840	02704552	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	229.66	01-APR-15	$ 233.12	01-JUN-15	$ 233.12
CAY COMM SVC ORG INC	113235840	02704552	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CAY COMM SVC ORG INC	113235840	02704552	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CAY COMM SVC ORG INC	113235840	02704552	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CAY COMM SVC ORG INC	113235840	02704552	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CAYUGA HOME FOR CHILDREN DAY	150532087	02692991	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CDS MONARCH INC DAY	161089115	02693089	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$71.37	01-JAN-13	$70.19	01-JAN-14	$ 69.39	01-JAN-15	$ 82.74	01-APR-15	$ 83.50	01-JUN-15	$ 83.69
CDS MONARCH INC DAY	161089115	02693089	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$46.77	01-JAN-13	$46.18	01-JAN-14	$ 45.78	01-JAN-15	$ 52.57	01-APR-15	$ 52.95	01-JUN-15	$ 53.05
CDS MONARCH INC DAY	161089115	02693089	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CDS MONARCH INC DAY	161089115	02693089	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CDS MONARCH INC DAY	161089115	02693089	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CDS MONARCH INC DAY	161089115	02693089	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CENTER F/DEVELOP DISABIL DAY	111874383	02693007	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CENTER F/DEVELOP DISABIL DAY	111874383	02693007	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CENTER F/DEVELOP DISABIL DAY	111874383	02693007	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CENTER F/DEVELOP DISABIL DAY	111874383	02693007	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CENTER F/DISAB SVCS DAY	141425851	02704483	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$162.35	01-JAN-12	$162.35	01-JAN-12	$ 162.35	01-JAN-15	$ 163.87	01-APR-15	$ 165.41	01-JUN-15	$ 165.41
CENTER F/DISAB SVCS DAY	141425851	02704483	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$109.46	01-JAN-12	$109.46	01-JAN-12	$ 109.46	01-JAN-15	$ 110.22	01-APR-15	$ 110.99	01-JUN-15	$ 110.99
CENTER F/DISAB SVCS DAY	141425851	02704483	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CENTER F/DISAB SVCS DAY	141425851	02704483	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CENTER F/DISAB SVCS DAY	141425851	02704483	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CENTER F/DISAB SVCS DAY	141425851	02704483	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CENTER F/RAPID RECVRY	113246332	02704561	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CENTER F/RAPID RECVRY	113246332	02704561	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CENTER F/RAPID RECVRY	113246332	02704561	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CENTER F/RAPID RECVRY	113246332	02704561	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CENTRAL ASSOC F/T BLIND DAY/AHRH	150543587	03185568	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$92.74	01-JUL-11	$92.74	01-JUL-11	$ 92.74	01-JAN-15	$ 93.92	01-APR-15	$ 95.13	01-JUN-15	$ 95.13
CENTRAL ASSOC F/T BLIND DAY/AHRH	150543587	03185568	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$46.37	01-JUL-11	$46.37	01-JUL-11	$ 46.37	01-JAN-15	$ 46.96	01-APR-15	$ 47.56	01-JUN-15	$ 47.56
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$106.71	01-JUL-11	$106.71	01-JUL-11	$ 106.71	01-JAN-15	$ 108.03	01-APR-15	$ 109.38	01-JUN-15	$ 109.38
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$62.41	01-JUL-11	$62.41	01-JUL-11	$ 62.41	01-JAN-15	$ 63.07	01-APR-15	$ 63.74	01-JUN-15	$ 63.74

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CEREBRAL PALSY OF WESTCHESTER DAY	131690769	02702587	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CHALLENGE INDUSTRIES INC DAY	160956917	02704543	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	75.85	01-APR-15	$ 76.74	01-JUN-15	$ 78.82
CHALLENGE INDUSTRIES INC DAY	160956917	02704543	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	149.45	01-APR-15	$ 151.23	01-JUN-15	$ 155.39
CHAUTAUQUA ADC INC DAY	161182855	02704589	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CHAUTAUQUA ADC INC DAY	161182855	02704589	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CHAUTAUQUA ADC INC DAY	161182855	02704589	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CHAUTAUQUA ADC INC DAY	161182855	02704589	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$141.99	01-JUL-11	$141.99	01-JUL-11	$ 141.99	01-JAN-15	$ 143.15	01-APR-15	$ 142.07	01-JUN-15	$ 144.49
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$76.85	01-JUL-11	$76.85	01-JUL-11	$ 76.85	01-JAN-15	$ 77.43	01-APR-15	$ 76.58	01-JUN-15	$ 77.79
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CHAUTAUQUA CO CHAP ARC DAY	160968914	02693121	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CHEMLU DEV DISAB CTR	352198039	02704570	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CHEMLU DEV DISAB CTR	352198039	02704570	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CHEMLU DEV DISAB CTR	352198039	02704570	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CHEMLU DEV DISAB CTR	352198039	02704570	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CHEMUNG CO ARC DAY	160795709	02704474	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$113.28	01-JUL-11	$113.28	01-JUL-11	$ 113.28	01-JAN-15	$ 114.65	01-APR-15	$ 116.05	01-JUN-15	$ 116.12
CHEMUNG CO ARC DAY	160795709	02704474	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$56.64	01-JUL-11	$56.64	01-JUL-11	$ 56.64	01-JAN-15	$ 57.33	01-APR-15	$ 58.03	01-JUN-15	$ 58.06
CHEMUNG CO ARC DAY	160795709	02704474	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CHEMUNG CO ARC DAY	160795709	02704474	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CHEMUNG CO ARC DAY	160795709	02704474	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CHEMUNG CO ARC DAY	160795709	02704474	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$173.39	01-JUL-11	$173.39	01-JUL-11	$ 173.39	01-JAN-15	$ 175.21	01-APR-15	$ 177.34	01-JUN-15	$ 177.55
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$86.70	01-JUL-11	$86.70	01-JUL-11	$ 86.70	01-JAN-15	$ 87.60	01-APR-15	$ 88.67	01-JUN-15	$ 88.77
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CHENANGO CO CHAP NYSARC DAY	160970103	02704341	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CITIZEN ADVOCATES INC DAY	141577715	02693016	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$77.99	01-JAN-13	$80.02	01-APR-14	$ 82.93	01-JAN-15	$ 79.53	01-APR-15	$ 80.88	01-JUN-15	$ 80.88
CITIZEN ADVOCATES INC DAY	141577715	02693016	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$43.91	01-JAN-13	$45.12	01-APR-14	$ 46.84	01-JAN-15	$ 44.71	01-APR-15	$ 45.38	01-JUN-15	$ 45.38
CITIZEN ADVOCATES INC DAY	141577715	02693016	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CITIZEN ADVOCATES INC DAY	141577715	02693016	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CITIZEN ADVOCATES INC DAY	141577715	02693016	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CITIZEN ADVOCATES INC DAY	141577715	02693016	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CITY ACCESS NY INC DAY	203786663	02861585	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CITY ACCESS NY INC DAY	203786663	02861585	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CITY ACCESS NY INC DAY	203786663	02861585	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CITY ACCESS NY INC DAY	203786663	02861585	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CLADDAGH COMMISSION INC DAY	161096096	02693034	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CLADDAGH COMMISSION INC DAY	161096096	02693034	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CLADDAGH COMMISSION INC DAY	161096096	02693034	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CLADDAGH COMMISSION INC DAY	161096096	02693034	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CLINTON CO CHAP NYSARC DAY	141463735	02704781	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$95.29	01-JAN-12	$95.29	01-JAN-12	$ 95.29	01-JAN-15	$ 96.48	01-APR-15	$ 97.68	01-JUN-15	$ 97.68
CLINTON CO CHAP NYSARC DAY	141463735	02704781	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$56.19	01-JAN-12	$56.19	01-JAN-12	$ 56.19	01-JAN-15	$ 56.79	01-APR-15	$ 57.39	01-JUN-15	$ 57.39
CLINTON CO CHAP NYSARC DAY	141463735	02704781	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CLINTON CO CHAP NYSARC DAY	141463735	02704781	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CLINTON CO CHAP NYSARC DAY	141463735	02704781	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CLINTON CO CHAP NYSARC DAY	141463735	02704781	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CNTRO SOC LA ESPERANZA DAY	132688412	02704772	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CNTRO SOC LA ESPERANZA DAY	132688412	02704772	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
CNTRO SOC LA ESPERANZA DAY	132688412	02704772	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CNTRO SOC LA ESPERANZA DAY	132688412	02704772	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COLUMBIA COUNTY ARC DAY	141489603	02693112	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-APR-2012	$123.60	01-APR-12	$123.60	01-APR-12	$ 123.60	01-JAN-15	$ 163.57	01-APR-15	$ 165.38	01-JUN-15	$ 165.38
COLUMBIA COUNTY ARC DAY	141489603	02693112	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-APR-2012	$61.80	01-APR-12	$61.80	01-APR-12	$ 61.80	01-JAN-15	$ 86.16	01-APR-15	$ 87.06	01-JUN-15	$ 87.06
COLUMBIA COUNTY ARC DAY	141489603	02693112	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
COLUMBIA COUNTY ARC DAY	141489603	02693112	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
COLUMBIA COUNTY ARC DAY	141489603	02693112	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
COLUMBIA COUNTY ARC DAY	141489603	02693112	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
COMM ACTION/HUMAN SVCS DAY	222317376	02704790	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMM ACTION/HUMAN SVCS DAY	222317376	02704790	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMM ACTION/HUMAN SVCS DAY	222317376	02704790	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMM ACTION/HUMAN SVCS DAY	222317376	02704790	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMM AID F/RETARD CHIL DAY	136160907	02703551	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$85.10	01-JUL-11	$85.10	01-JUL-11	$ 85.10	01-JAN-15	$ 85.41	01-APR-15	$ 86.25	01-JUN-15	$ 85.76
COMM AID F/RETARD CHIL DAY	136160907	02703551	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$42.55	01-JUL-11	$42.55	01-JUL-11	$ 42.55	01-JAN-15	$ 42.70	01-APR-15	$ 43.13	01-JUN-15	$ 42.88
COMM AID F/RETARD CHIL DAY	136160907	02703551	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMM AID F/RETARD CHIL DAY	136160907	02703551	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMM AID F/RETARD CHIL DAY	136160907	02703551	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMM AID F/RETARD CHIL DAY	136160907	02703551	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMM RES SVC/CHILDREN DAY	113307991	02781024	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$78.11	01-JUL-11	$78.11	01-JUL-11	$ 78.11	01-JAN-15	$ 78.89	01-APR-15	$ 79.75	01-JUN-15	$ 79.75
COMM RES SVC/CHILDREN DAY	113307991	02781024	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$39.06	01-JUL-11	$39.06	01-JUL-11	$ 39.06	01-JAN-15	$ 39.44	01-APR-15	$ 39.88	01-JUN-15	$ 39.88
COMM RES SVC/CHILDREN DAY	113307991	02781024	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMM RES SVC/CHILDREN DAY	113307991	02781024	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMM RES SVC/CHILDREN DAY	113307991	02781024	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMM RES SVC/CHILDREN DAY	113307991	02781024	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMM SVCS F/T DEV DISB DAY	161317369	02704350	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)					01-SEP-13	47.18	01-JAN-15	$ 47.59	01-APR-15	$ 48.00	01-APR-15	$ 48.00
COMM SVCS F/T DEV DISB DAY	161317369	02704350	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)					01-SEP-13	75.04	01-JAN-15	$ 75.86	01-APR-15	$ 76.68	01-APR-15	$ 76.68
COMM SVCS F/T DEV DISB DAY	161317369	02704350	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
COMM SVCS F/T DEV DISB DAY	161317369	02704350	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
COMM SVCS F/T DEV DISB DAY	161317369	02704350	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
COMM SVCS F/T DEV DISB DAY	161317369	02704350	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
COMM WORK INDEPEND DAY	141470091	02704369	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$85.53	01-JUL-11	$85.53	01-JUL-11	$ 85.53	01-JAN-15	$ 86.28	01-APR-15	$ 87.04	01-JUN-15	$ 88.94
COMM WORK INDEPEND DAY	141470091	02704369	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$50.80	01-JUL-11	$50.80	01-JUL-11	$ 50.80	01-JAN-15	$ 51.18	01-APR-15	$ 51.56	01-JUN-15	$ 52.51
COMM WORK INDEPEND DAY	141470091	02704369	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
COMM WORK INDEPEND DAY	141470091	02704369	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
COMM WORK INDEPEND DAY	141470091	02704369	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
COMM WORK INDEPEND DAY	141470091	02704369	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-NOV-2011	$117.04	01-NOV-11	$117.04	01-NOV-11	$ 117.04	01-JAN-15	$ 118.33	01-APR-15	$ 119.78	01-JUN-15	$ 119.78
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-NOV-2011	$58.52	01-NOV-11	$58.52	01-NOV-11	$ 58.52	01-JAN-15	$ 59.16	01-APR-15	$ 59.89	01-JUN-15	$ 59.89
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY ASSISTANCE RESOURCES DAY	203368734	02991880	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMMUNITY BASED SERVICES	133070655	03418724	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY BASED SERVICES	133070655	03418724	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY BASED SERVICES	133070655	03418724	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY BASED SERVICES	133070655	03418724	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMMUNITY ENTERPRISES DAY	510178661	02704378	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY ENTERPRISES DAY	510178661	02704378	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY ENTERPRISES DAY	510178661	02704378	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY ENTERPRISES DAY	510178661	02704378	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY LEAGUE WASSAIE ARC DAY	237540549	02949773	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
COMMUNITY LIVING CORPORATION RSP	133563609	03185577	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY LIVING CORPORATION RSP	133563609	03185577	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY LIVING CORPORATION RSP	133563609	03185577	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY LIVING CORPORATION RSP	133563609	03185577	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMMUNITY MAINSTREAMING DAY	237448487	02961571	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)					01-JAN-14	143.69	01-JAN-15	$ 145.74	01-APR-15	$ 147.99	01-JUN-15	$ 147.22
COMMUNITY MAINSTREAMING DAY	237448487	02961571	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)					01-JAN-14	287.38	01-JAN-15	$ 291.47	01-APR-15	$ 295.98	01-JUN-15	$ 294.45
COMMUNITY OPTIONS NY DAY	113414724	02703937	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY OPTIONS NY DAY	113414724	02703937	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY OPTIONS NY DAY	113414724	02703937	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY OPTIONS NY DAY	113414724	02703937	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
COMMUNITY PROGS OF WJCS DAY	132985945	02704396	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
COMMUNITY PROGS OF WJCS DAY	132985945	02704396	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
COMMUNITY PROGS OF WJCS DAY	132985945	02704396	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
COMMUNITY PROGS OF WJCS DAY	132985945	02704396	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CONTEMPORARY GUIDANCE SV DAY	132730776	02709786	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CONTEMPORARY GUIDANCE SV DAY	132730776	02709786	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CONTEMPORARY GUIDANCE SV DAY	132730776	02709786	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CONTEMPORARY GUIDANCE SV DAY	132730776	02709786	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CREATIVE LIFESTYLES INC DAY	113151481	02698108	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CREATIVE LIFESTYLES INC DAY	113151481	02698108	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CREATIVE LIFESTYLES INC DAY	113151481	02698108	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CREATIVE LIFESTYLES INC DAY	113151481	02698108	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CROSSROADS UNLIMITED INC DAY/AHRH	710967724	03101071	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CROSSROADS UNLIMITED INC DAY/AHRH	710967724	03101071	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CROSSROADS UNLIMITED INC DAY/AHRH	710967724	03101071	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CROSSROADS UNLIMITED INC DAY/AHRH	710967724	03101071	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CRYSTAL RUN VILLAGE DAY	112466996	02698117	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CRYSTAL RUN VILLAGE DAY	112466996	02698117	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CRYSTAL RUN VILLAGE DAY	112466996	02698117	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CRYSTAL RUN VILLAGE DAY	112466996	02698117	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
CTR F/DISABILITY RIGHTS DAY	223141275	02701339	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
CTR FOR FAMILY SUPPORT DAY	131913807	02704401	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$113.85	01-JAN-12	$113.85	01-JAN-12	$ 113.85	01-JAN-15	$ 115.08	01-APR-15	$ 116.47	01-JUN-15	$ 116.47
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$56.92	01-JAN-12	$56.92	01-JAN-12	$ 56.92	01-JAN-15	$ 57.54	01-APR-15	$ 58.24	01-JUN-15	$ 58.24
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
DAYBREAK INDEPENDENT SRVS DAY/AHRH	262564855	03075972	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
DELAWARE CO CHAP NYSARC DAY	160976343	02698424	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)									01-APR-15	162.31	01-JUN-15	$ 162.31
DELAWARE CO CHAP NYSARC DAY	160976343	02698424	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)									01-APR-15	267.7	01-JUN-15	$ 267.70
DELAWARE OPP INC DAY	166063879	02704410	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
DELAWARE OPP INC DAY	166063879	02704410	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
DELAWARE OPP INC DAY	166063879	02704410	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
DELAWARE OPP INC DAY	166063879	02704410	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
DEVELOPMENTAL DIST INST DAY	116077347	02700741	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$137.87	01-JUL-11	$137.87	01-JUL-11	$ 137.87	01-JAN-15	$ 149.78	01-APR-15	$ 151.69	01-JUN-15	$ 179.65
DEVELOPMENTAL DIST INST DAY	116077347	02700741	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$79.48	01-JUL-11	$79.48	01-JUL-11	$ 79.48	01-JAN-15	$ 83.22	01-APR-15	$ 84.17	01-JUN-15	$ 98.15
DEVELOPMENTAL DIST INST DAY	116077347	02700741	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
DEVELOPMENTAL DIST INST DAY	116077347	02700741	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
DEVELOPMENTAL DIST INST DAY	116077347	02700741	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
DEVELOPMENTAL DIST INST DAY	116077347	02700741	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
DEVEREUX FOUNDATION DAY	231390618	02698382	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
DEVEREUX FOUNDATION DAY	231390618	02698382	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
DEVEREUX FOUNDATION DAY	231390618	02698382	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
DEVEREUX FOUNDATION DAY	231390618	02698382	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
DISABLED PERSONS ACTION DAY	222194058	02698415	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
DISABLED PERSONS ACTION DAY	222194058	02698415	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
DISABLED PERSONS ACTION DAY	222194058	02698415	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
DISABLED PERSONS ACTION DAY	222194058	02698415	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
E DOUGHLIN CTR SVC PPLE DAY	113356044	02703597	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
E DOUGHLIN CTR SVC PPLE DAY	113356044	02703597	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
E DOUGHLIN CTR SVC PPLE DAY	113356044	02703597	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
E DOUGHLIN CTR SVC PPLE DAY	113356044	02703597	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EAST END DISABILITY DAY	113318718	02698406	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$46.53	01-JUL-11	$46.53	01-JUL-11	$ 46.53	01-JAN-15	$ 47.15	01-APR-15	$ 47.84	01-JUN-15	$ 47.83
EAST END DISABILITY DAY	113318718	02698406	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$23.27	01-JUL-11	$23.27	01-JUL-11	$ 23.27	01-JAN-15	$ 23.57	01-APR-15	$ 23.92	01-JUN-15	$ 23.92
EAST END DISABILITY DAY	113318718	02698406	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EAST END DISABILITY DAY	113318718	02698406	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EAST END DISABILITY DAY	113318718	02698406	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EAST END DISABILITY DAY	113318718	02698406	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ECONOMIC OPPORTUNITY COUNCIL DAY	112141197	03062879	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ECONOMIC OPPORTUNITY COUNCIL DAY	112141197	03062879	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ECONOMIC OPPORTUNITY COUNCIL DAY	112141197	03062879	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ECONOMIC OPPORTUNITY COUNCIL DAY	112141197	03062879	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EDEN II SCHL AUT/CHILD DAY	132872916	02698391	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EDEN II SCHL AUT/CHILD DAY	132872916	02698391	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EDEN II SCHL AUT/CHILD DAY	132872916	02698391	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EDEN II SCHL AUT/CHILD DAY	132872916	02698391	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EDWIN GOULD SERVICES DAY/CH	135675643	03371799	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EDWIN GOULD SERVICES DAY/CH	135675643	03371799	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EDWIN GOULD SERVICES DAY/CH	135675643	03371799	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EDWIN GOULD SERVICES DAY/CH	135675643	03371799	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EIHAB HUMAN SVCS INC DAY	113376415	02704429	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EIHAB HUMAN SVCS INC DAY	113376415	02704429	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EIHAB HUMAN SVCS INC DAY	113376415	02704429	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EIHAB HUMAN SVCS INC DAY	113376415	02704429	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ELMYS SPECIAL SERVICES DAY	020590957	02704438	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ELMYS SPECIAL SERVICES DAY	020590957	02704438	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ELMYS SPECIAL SERVICES DAY	020590957	02704438	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ELMYS SPECIAL SERVICES DAY	020590957	02704438	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EPILEPSY FOUND LI INC DAY	111821135	02693043	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EPILEPSY FOUND LI INC DAY	111821135	02693043	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EPILEPSY FOUND LI INC DAY	111821135	02693043	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EPILEPSY FOUND LI INC DAY	111821135	02693043	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EPILEPSY INSTITUTE DAY	132608325	02704465	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EPILEPSY INSTITUTE DAY	132608325	02704465	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EPILEPSY INSTITUTE DAY	132608325	02704465	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EPILEPSY INSTITUTE DAY	132608325	02704465	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
EPISCOPAL SOCIAL SVCS DAY	133709095	02849172	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
EPISCOPAL SOCIAL SVCS DAY	133709095	02849172	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
EPISCOPAL SOCIAL SVCS DAY	133709095	02849172	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
EPISCOPAL SOCIAL SVCS DAY	133709095	02849172	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$64.28	01-JAN-12	$64.28	01-JAN-12	$ 64.28	01-JAN-15	$ 65.05	01-APR-15	$ 65.68	01-JUN-15	$ 65.87
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$36.51	01-JAN-12	$36.51	01-JAN-12	$ 36.51	01-JAN-15	$ 36.89	01-APR-15	$ 37.21	01-JUN-15	$ 37.30

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ERIE CO ARC HERITAGE CT DAY	160769044	02699136	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ESSEX CO CHAP NYSARC DAY	141563885	02699407	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$96.11	01-JAN-13	$97.36	01-JAN-14	$ 104.54	01-JAN-15	$ 96.80	01-APR-15	$ 98.18	01-JUN-15	$ 98.23
ESSEX CO CHAP NYSARC DAY	141563885	02699407	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$48.06	01-JAN-13	$48.91	01-JAN-14	$ 53.76	01-JAN-15	$ 48.40	01-APR-15	$ 49.09	01-JUN-15	$ 49.11
ESSEX CO CHAP NYSARC DAY	141563885	02699407	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ESSEX CO CHAP NYSARC DAY	141563885	02699407	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ESSEX CO CHAP NYSARC DAY	141563885	02699407	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ESSEX CO CHAP NYSARC DAY	141563885	02699407	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
FAM EMPOWERMENT CNCL	133751820	02699416	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
FAM EMPOWERMENT CNCL	133751820	02699416	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
FAM EMPOWERMENT CNCL	133751820	02699416	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
FAM EMPOWERMENT CNCL	133751820	02699416	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
FEDERATION OF MULT PROG DAY	112422505	02701408	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
FEDERATION OF MULT PROG DAY	112422505	02701408	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
FEDERATION OF MULT PROG DAY	112422505	02701408	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
FEDERATION OF MULT PROG DAY	112422505	02701408	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
FEGS DAY	131624000	02699163	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$141.35	01-JUL-11	$141.35	01-JUL-13	$ 132.58	01-JAN-15	$ 133.62	01-APR-15	$ 135.32	01-JUN-15	$ -
FEGS DAY	131624000	02699163	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$71.23	01-JUL-11	$71.23	01-JUL-13	$ 66.85	01-JAN-15	$ 67.36	01-APR-15	$ 68.21	01-JUN-15	$ -
FEGS DAY	131624000	02699163	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-JUN-15	$ -
FEGS DAY	131624000	02699163	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
FEGS DAY	131624000	02699163	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-JUN-15	$ -
FEGS DAY	131624000	02699163	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-JUN-15	$ -
FINGER LAKES UCP INC DAY	160965912	02699383	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
FINGER LAKES UCP INC DAY	160965912	02699383	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
FINGER LAKES UCP INC DAY	160965912	02699383	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
FINGER LAKES UCP INC DAY	160965912	02699383	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
FOOTINGS INC DAY	061364619	02699365	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
FOOTINGS INC DAY	061364619	02699365	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
FOOTINGS INC DAY	061364619	02699365	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
FOOTINGS INC DAY	061364619	02699365	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
FRANKLIN CO NYSARC DAY	237150954	02702409	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
FRANKLIN CO NYSARC DAY	237150954	02702409	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
FRANKLIN CO NYSARC DAY	237150954	02702409	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
FRANKLIN CO NYSARC DAY	237150954	02702409	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
FRANZISKA RACKER CTR DAY	150581887	02699154	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
FRANZISKA RACKER CTR DAY	150581887	02699154	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
FRANZISKA RACKER CTR DAY	150581887	02699154	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
FRANZISKA RACKER CTR DAY	150581887	02699154	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
FREE DAY	112420547	02693070	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$84.57	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
FREE DAY	112420547	02693070	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$42.28	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
FREE DAY	112420547	02693070	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
FREE DAY	112420547	02693070	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
FREE DAY	112420547	02693070	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
FREE DAY	112420547	02693070	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
FULTON CNTY ARC DAY	146020996	02699374	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$95.05	01-JAN-13	$0.00	01-JAN-13	$ -	01-JAN-13	$ -	01-JAN-13	$ -	01-JAN-13	$ -
FULTON CNTY ARC DAY	146020996	02699374	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$61.54	01-JAN-13	$0.00	01-JAN-13	$ -	01-JAN-13	$ -	01-JAN-13	$ -	01-JAN-13	$ -
FULTON CNTY ARC DAY	146020996	02699374	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
FULTON CNTY ARC DAY	146020996	02699374	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
FULTON CNTY ARC DAY	146020996	02699374	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
FULTON CNTY ARC DAY	146020996	02699374	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
GATEWAY COMMUNITY IND DAY	141458757	02699392	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$52.99	01-JAN-13	$52.99	01-JAN-13	$ 52.99	01-JAN-15	$ 52.83	01-APR-15	$ 53.53	01-JUN-15	$ 57.27
GATEWAY COMMUNITY IND DAY	141458757	02699392	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$26.49	01-JAN-13	$26.49	01-JAN-13	$ 26.49	01-JAN-15	$ 26.42	01-APR-15	$ 26.77	01-JUN-15	$ 28.64

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
GATEWAY COMMUNITY IND DAY	141458757	02699392	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
GATEWAY COMMUNITY IND DAY	141458757	02699392	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
GATEWAY COMMUNITY IND DAY	141458757	02699392	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
GATEWAY COMMUNITY IND DAY	141458757	02699392	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
GATEWAY COUNSELING CTR DAY	133492890	02693052	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
GATEWAY COUNSELING CTR DAY	133492890	02693052	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
GATEWAY COUNSELING CTR DAY	133492890	02693052	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
GATEWAY COUNSELING CTR DAY	133492890	02693052	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
GENERAL HUMAN OUTREACH DAY	113134570	02699356	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
GENERAL HUMAN OUTREACH DAY	113134570	02699356	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
GENERAL HUMAN OUTREACH DAY	113134570	02699356	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
GENERAL HUMAN OUTREACH DAY	113134570	02699356	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
GENESEE CO CHAP NYSARC DAY	161001185	02699181	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$56.11	01-JUL-11	$56.11	01-JUL-11	$ 56.11	01-JAN-15	$ 56.90	01-APR-15	$ 57.71	01-JUN-15	$ 57.71
GENESEE CO CHAP NYSARC DAY	161001185	02699181	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$28.06	01-JUL-11	$28.06	01-JUL-11	$ 28.06	01-JAN-15	$ 28.45	01-APR-15	$ 28.85	01-JUN-15	$ 28.85
GENESEE CO CHAP NYSARC DAY	161001185	02699181	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
GENESEE CO CHAP NYSARC DAY	161001185	02699181	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
GENESEE CO CHAP NYSARC DAY	161001185	02699181	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
GENESEE CO CHAP NYSARC DAY	161001185	02699181	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
GOODWILL IND GR NY/NJ DAY	131641068	02699214	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$68.21	01-JUL-11	$68.21	01-JUL-11	$ 68.21	01-JAN-15	$ 68.88	01-APR-15	$ 69.58	01-APR-15	$ 69.58
GOODWILL IND GR NY/NJ DAY	131641068	02699214	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$40.43	01-JUL-11	$40.43	01-JUL-11	$ 40.43	01-JAN-15	$ 40.76	01-APR-15	$ 41.11	01-APR-15	$ 41.11
GOODWILL IND GR NY/NJ DAY	131641068	02699214	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
GOODWILL IND GR NY/NJ DAY	131641068	02699214	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
GOODWILL IND GR NY/NJ DAY	131641068	02699214	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
GOODWILL IND GR NY/NJ DAY	131641068	02699214	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
GRACE LUTHERAN RES SVC DAY	161554927	02699145	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
GRACE LUTHERAN RES SVC DAY	161554927	02699145	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
GRACE LUTHERAN RES SVC DAY	161554927	02699145	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
GRACE LUTHERAN RES SVC DAY	161554927	02699145	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
GREYSTONE PROGRAMS INC DAY	141608318	02699269	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
GREYSTONE PROGRAMS INC DAY	141608318	02699269	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
GREYSTONE PROGRAMS INC DAY	141608318	02699269	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
GREYSTONE PROGRAMS INC DAY	141608318	02699269	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$57.49	01-JUL-11	$57.49	01-JUL-11	$ 57.49	01-JAN-15	$ 58.13	01-APR-15	$ 58.93	01-JUN-15	$ 60.98
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$29.04	01-JUL-11	$29.04	01-JUL-11	$ 29.04	01-JAN-15	$ 29.36	01-APR-15	$ 29.76	01-JUN-15	$ 30.79
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
GUILD/EXCEPTIONAL CHDN DAY	116037766	02704314	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HAITIAN AMER UN/ PROGR DAY	112423857	02699127	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HAITIAN AMER UN/ PROGR DAY	112423857	02699127	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HAITIAN AMER UN/ PROGR DAY	112423857	02699127	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HAITIAN AMER UN/ PROGR DAY	112423857	02699127	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HALO NETWORK INC DAY/CH	270408181	03423558	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HALO NETWORK INC DAY/CH	270408181	03423558	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HALO NETWORK INC DAY/CH	270408181	03423558	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HALO NETWORK INC DAY/CH	270408181	03423558	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HAMASPIK OF ORANGE CO DAY/CH	141711583	02701462	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HAND IN HAND FAMILY SERVICES DAY	204157876	03132670	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
HANDICAPPED CHILD SO NY DAY	150516395	02699190	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HANDICAPPED CHILD SO NY DAY	150516395	02699190	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HANDICAPPED CHILD SO NY DAY	150516395	02699190	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HANDICAPPED CHILD SO NY DAY	150516395	02699190	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HARMONY SERVICES INC DAY	201134350	02838622	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HARMONY SERVICES INC DAY	201134350	02838622	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HARMONY SERVICES INC DAY	201134350	02838622	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HARMONY SERVICES INC DAY	201134350	02838622	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HASC CENTER DAY	112630071	02693061	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$40.91	01-JUL-11	$40.91	01-JUL-11	$ 40.91	01-JAN-15	$ 68.21	01-APR-15	$ 68.67	01-JUN-15	$ 104.54
HASC CENTER DAY	112630071	02693061	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$21.23	01-JUL-11	$21.23	01-JUL-11	$ 21.23	01-JAN-15	$ 34.88	01-APR-15	$ 35.10	01-JUN-15	$ 53.04
HASC CENTER DAY	112630071	02693061	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HASC CENTER DAY	112630071	02693061	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HASC CENTER DAY	112630071	02693061	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HASC CENTER DAY	112630071	02693061	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HAWTHORNE FOUNDATION INC DAY	133447893	02693098	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HAWTHORNE FOUNDATION INC DAY	133447893	02693098	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HAWTHORNE FOUNDATION INC DAY	133447893	02693098	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HAWTHORNE FOUNDATION INC DAY	133447893	02693098	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HEAD INJURY ASSOCIATION INC DAY	112946185	02700094	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HEAD INJURY ASSOCIATION INC DAY	112946185	02700094	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HEAD INJURY ASSOCIATION INC DAY	112946185	02700094	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HEAD INJURY ASSOCIATION INC DAY	112946185	02700094	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HEALTH ASSOC/NIAGARA CO DAY	160743206	02699205	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HEALTH ASSOC/NIAGARA CO DAY	160743206	02699205	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HEALTH ASSOC/NIAGARA CO DAY	160743206	02699205	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HEALTH ASSOC/NIAGARA CO DAY	160743206	02699205	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	81.89	01-APR-15	$ 83.09	01-JUN-15	$ 83.09
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	163.78	01-APR-15	$ 166.18	01-JUN-15	$ 166.18
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HEARTSHARE HUMAN SVCS DAY	111633549	02699241	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HEAVENS HANDS COMM SVCS DAY	200225064	02703588	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HEAVENS HANDS COMM SVCS DAY	200225064	02703588	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HEAVENS HANDS COMM SVCS DAY	200225064	02703588	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HEAVENS HANDS COMM SVCS DAY	200225064	02703588	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HELEN KELLER SERVICES F/T BLIND DAY	111630807	03044153	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HELEN KELLER SERVICES F/T BLIND DAY	111630807	03044153	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HELEN KELLER SERVICES F/T BLIND DAY	111630807	03044153	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HELEN KELLER SERVICES F/T BLIND DAY	111630807	03044153	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HELP ON THE WAY INC	141986513	03382116	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HELP ON THE WAY INC	141986513	03382116	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HELP ON THE WAY INC	141986513	03382116	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HELP ON THE WAY INC	141986513	03382116	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HERITAGE CHRISTIAN SVCS DAY	222334190	02693667	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HERITAGE FARM INC DAY	161250913	02701393	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HERITAGE FARM INC DAY	161250913	02701393	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HERITAGE FARM INC DAY	161250913	02701393	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HERITAGE FARM INC DAY	161250913	02701393	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HERITAGE HUMAN SERVICES INC	264692822	03357164	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HERITAGE HUMAN SERVICES INC	264692822	03357164	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
HERITAGE HUMAN SERVICES INC	264692822	03357164	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HERITAGE HUMAN SERVICES INC	264692822	03357164	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$109.93	01-JUL-11	$109.93	01-JUL-11	$ 109.93	01-JAN-15	$ 110.74	01-APR-15	$ 134.14	01-JUN-15	$ 134.25
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$65.84	01-JUL-11	$65.84	01-JUL-11	$ 65.84	01-JAN-15	$ 66.24	01-APR-15	$ 79.93	01-JUN-15	$ 79.98
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HERKIMER CO CHAP NYSARC DAY	160973231	02699250	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HICKOK CENTER FOR BRAIN INJURY DAY	223127533	03024559	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HICKOK CENTER FOR BRAIN INJURY DAY	223127533	03024559	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HICKOK CENTER FOR BRAIN INJURY DAY	223127533	03024559	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HICKOK CENTER FOR BRAIN INJURY DAY	223127533	03024559	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
HUMAN CARE SVCS FAM CHLD DAY	113338946	02849163	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HUMAN CARE SVCS FAM CHLD DAY	113338946	02849163	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HUMAN CARE SVCS FAM CHLD DAY	113338946	02849163	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HUMAN CARE SVCS FAM CHLD DAY	113338946	02849163	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HUMAN FIRST INC DAY	113590136	02704507	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
HUMAN FIRST INC DAY	113590136	02704507	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
HUMAN FIRST INC DAY	113590136	02704507	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
HUMAN FIRST INC DAY	113590136	02704507	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
HUMAN TECHNOLOGIES CORP DAY/AHRH	150571056	03144098	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$86.79	01-JUL-11	$86.79	01-JUL-11	$ 86.79	01-JAN-15	$ 87.88	01-APR-15	$ 89.00	01-JUN-15	$ 89.00
HUMAN TECHNOLOGIES CORP DAY/AHRH	150571056	03144098	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$43.40	01-JUL-11	$43.40	01-JUL-11	$ 43.40	01-JAN-15	$ 43.94	01-APR-15	$ 44.50	01-JUN-15	$ 44.50
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	128.5	01-APR-15	$ 129.70	01-JUN-15	$ 129.69
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	227.49	01-APR-15	$ 229.88	01-JUN-15	$ 229.88
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
HUMANITARIAN ORG MULTI EX DAY	161425108	02704332	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
IBERO AMERICAN ACTION DAY	160954745	02701375	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$101.99	01-JAN-13	$100.90	01-JAN-14	$ 98.88	01-JAN-15	$ 99.75	01-APR-15	$ 100.63	01-APR-15	$ 100.63
IBERO AMERICAN ACTION DAY	160954745	02701375	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$51.00	01-JAN-13	$50.45	01-JAN-14	$ 49.44	01-JAN-15	$ 49.87	01-APR-15	$ 50.32	01-APR-15	$ 50.32
IBERO AMERICAN ACTION DAY	160954745	02701375	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
IBERO AMERICAN ACTION DAY	160954745	02701375	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
IBERO AMERICAN ACTION DAY	160954745	02701375	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
IBERO AMERICAN ACTION DAY	160954745	02701375	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
IN FLIGHT INC DAY	141764481	02699172	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
IN FLIGHT INC DAY	141764481	02699172	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
IN FLIGHT INC DAY	141764481	02699172	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
IN FLIGHT INC DAY	141764481	02699172	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
INDEPENDENCE RES INC DAY	133490223	02699232	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
INDEPENDENCE RES INC DAY	133490223	02699232	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
INDEPENDENCE RES INC DAY	133490223	02699232	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
INDEPENDENCE RES INC DAY	133490223	02699232	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
INDEPENDENT GRHM LIVING DAY	112458584	02699223	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
INDEPENDENT GRHM LIVING DAY	112458584	02699223	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
INDEPENDENT GRHM LIVING DAY	112458584	02699223	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
INDEPENDENT GRHM LIVING DAY	112458584	02699223	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
INDEPENDENT LIVING INC DAY	222894558	02701348	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
INDEPENDENT LIVING INC DAY	222894558	02701348	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
INDEPENDENT LIVING INC DAY	222894558	02701348	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
INDEPENDENT LIVING INC DAY	222894558	02701348	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
INST APP HUMAN DYNA DAY	132573827	02704323	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$96.20	01-JUL-12	$96.13	01-JUL-13	$ 96.13	01-JAN-15	$ 94.94	01-APR-15	$ 96.02	01-JUN-15	$ 96.02
INST APP HUMAN DYNA DAY	132573827	02704323	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$59.44	01-JUL-12	$59.40	01-JUL-13	$ 59.40	01-JAN-15	$ 58.58	01-APR-15	$ 59.12	01-JUN-15	$ 59.12
INST APP HUMAN DYNA DAY	132573827	02704323	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
INST APP HUMAN DYNA DAY	132573827	02704323	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INST APP HUMAN DYNA DAY	132573827	02704323	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
INST APP HUMAN DYNA DAY	132573827	02704323	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
IYAHO SOCIAL SERVICES INC DAY/AHRH	593806132	03132661	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
IYAHO SOCIAL SERVICES INC DAY/AHRH	593806132	03132661	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
IYAHO SOCIAL SERVICES INC DAY/AHRH	593806132	03132661	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
IYAHO SOCIAL SERVICES INC DAY/AHRH	593806132	03132661	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JAMAICA HOSPITAL MED CTR DAY	111631788	02699278	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
JAMAICA HOSPITAL MED CTR DAY	111631788	02699278	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
JAMAICA HOSPITAL MED CTR DAY	111631788	02699278	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
JAMAICA HOSPITAL MED CTR DAY	111631788	02699278	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JAWONIO INC DAY	131761660	02693727	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$84.62	01-JUL-11	$84.62	01-JUL-11	$ 84.62	01-JAN-15	$ 84.94	01-APR-15	$ 86.05	01-JUN-15	$ 112.93
JAWONIO INC DAY	131761660	02693727	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$42.31	01-JUL-11	$42.31	01-JUL-11	$ 42.31	01-JAN-15	$ 42.47	01-APR-15	$ 43.02	01-JUN-15	$ 56.47
JAWONIO INC DAY	131761660	02693727	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
JAWONIO INC DAY	131761660	02693727	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
JAWONIO INC DAY	131761660	02693727	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
JAWONIO INC DAY	131761660	02693727	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JEFFERSON REHAB DAY	161134631	02699287	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$56.98	01-JUL-11	$56.98	01-JUL-11	$ 56.98	01-JAN-15	$ 56.63	01-APR-15	$ 57.23	01-JUN-15	$ 57.26
JEFFERSON REHAB DAY	161134631	02699287	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$28.49	01-JUL-11	$28.49	01-JUL-11	$ 28.49	01-JAN-15	$ 28.32	01-APR-15	$ 28.62	01-JUN-15	$ 28.63
JEFFERSON REHAB DAY	161134631	02699287	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
JEFFERSON REHAB DAY	161134631	02699287	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
JEFFERSON REHAB DAY	161134631	02699287	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
JEFFERSON REHAB DAY	161134631	02699287	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
JEWEL HUMAN SERVICES INC DAY/CH	331177252	03422608	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
JEWEL HUMAN SERVICES INC DAY/CH	331177252	03422608	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
JEWEL HUMAN SERVICES INC DAY/CH	331177252	03422608	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
JEWEL HUMAN SERVICES INC DAY/CH	331177252	03422608	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
JEWISH COMM CTR OF SI DAY/CH	135562256	03378989	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JEWISH FAM SVC BUFF/ERIE DAY	160760888	02699296	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
JEWISH FAM SVC BUFF/ERIE DAY	160760888	02699296	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
JEWISH FAM SVC BUFF/ERIE DAY	160760888	02699296	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
JEWISH FAM SVC BUFF/ERIE DAY	160760888	02699296	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
JEWISH UNION FOUNDATION DAY	133636595	02699329	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
JEWISH UNION FOUNDATION DAY	133636595	02699329	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
JEWISH UNION FOUNDATION DAY	133636595	02699329	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
JEWISH UNION FOUNDATION DAY	133636595	02699329	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JM MURRAY CTR INC DAY	160919050	02699338	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$94.38	01-JUL-11	$94.38	01-JUL-11	$ 94.38	01-JAN-15	$ 94.67	01-APR-15	$ 95.92	01-JUN-15	$ 96.64
JM MURRAY CTR INC DAY	160919050	02699338	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$47.19	01-JUL-11	$47.19	01-JUL-11	$ 47.19	01-JAN-15	$ 47.34	01-APR-15	$ 47.96	01-JUN-15	$ 48.32
JM MURRAY CTR INC DAY	160919050	02699338	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
JM MURRAY CTR INC DAY	160919050	02699338	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
JM MURRAY CTR INC DAY	160919050	02699338	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
JM MURRAY CTR INC DAY	160919050	02699338	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
JOB PATH DAY	134038495	02704736	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
JOB PATH DAY	134038495	02704736	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
JOB PATH DAY	134038495	02704736	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
JOB PATH DAY	134038495	02704736	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
JOSHUA HOUSE INC DAY	161427778	02699310	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
JOSHUA HOUSE INC DAY	161427778	02699310	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
JOSHUA HOUSE INC DAY	161427778	02699310	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
JOSHUA HOUSE INC DAY	161427778	02699310	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
KELBERMAN CENTER INC DAY/AHRH	550901293	03062411	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
KELBERMAN CENTER INC DAY/AHRH	550901293	03062411	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
KELBERMAN CENTER INC DAY/AHRH	550901293	03062411	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
KELBERMAN CENTER INC DAY/AHRH	550901293	03062411	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
KELI HOUSE COMM SVCS INC DAY/CH	810680293	03474504	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
KELI HOUSE COMM SVCS INC DAY/CH	810680293	03474504	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
KELI HOUSE COMM SVCS INC DAY/CH	810680293	03474504	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
KELI HOUSE COMM SVCS INC DAY/CH	810680293	03474504	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
L ARCHE SYRACUSE INC	161085314	03047096	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
L ARCHE SYRACUSE INC	161085314	03047096	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
L ARCHE SYRACUSE INC	161085314	03047096	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
L ARCHE SYRACUSE INC	161085314	03047096	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LAKE SHORE CHILD CR CTR DAY	161381646	02703579	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LAKE SHORE CHILD CR CTR DAY	161381646	02703579	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LAKE SHORE CHILD CR CTR DAY	161381646	02703579	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LAKE SHORE CHILD CR CTR DAY	161381646	02703579	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LEAKE AND WATTS SERVICES INC	131860451	03105828	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-SEP-2011	$110.81	01-SEP-11	$110.81	01-SEP-11	$ 110.81	01-JAN-15	$ 111.85	01-APR-15	$ 112.95	01-APR-15	$ 112.95
LEAKE AND WATTS SERVICES INC	131860451	03105828	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-SEP-2011	$68.80	01-SEP-11	$68.80	01-SEP-11	$ 68.80	01-JAN-15	$ 69.32	01-APR-15	$ 69.87	01-APR-15	$ 69.87
LEAKE AND WATTS SERVICES INC	131860451	03105828	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
LEAKE AND WATTS SERVICES INC	131860451	03105828	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
LEAKE AND WATTS SERVICES INC	131860451	03105828	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
LEAKE AND WATTS SERVICES INC	131860451	03105828	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
LEAP INC DAY	161467182	02699301	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LEAP INC DAY	161467182	02699301	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LEAP INC DAY	161467182	02699301	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LEAP INC DAY	161467182	02699301	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LEARNING DISABILITIES WNY DAY	161118058	02699347	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LEARNING DISABILITIES WNY DAY	161118058	02699347	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LEARNING DISABILITIES WNY DAY	161118058	02699347	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LEARNING DISABILITIES WNY DAY	161118058	02699347	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LEARNING DISBIL GV DAY	222702285	02693745	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LEARNING DISBIL GV DAY	222702285	02693745	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LEARNING DISBIL GV DAY	222702285	02693745	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LEARNING DISBIL GV DAY	222702285	02693745	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LIBERTY HOUSE FOUNDATION INC DAY	141568361	03131871	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$70.93	01-JUL-11	$70.93	01-JUL-11	$ 70.93	01-JAN-15	$ 71.49	01-APR-15	$ 72.25	01-JUN-15	$ 72.25
LIBERTY HOUSE FOUNDATION INC DAY	141568361	03131871	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$35.47	01-JUL-11	$35.47	01-JUL-11	$ 35.47	01-JAN-15	$ 35.74	01-APR-15	$ 36.12	01-JUN-15	$ 36.12
LIBERTY RESOURCES INC DAY	161129675	02699118	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIBERTY RESOURCES INC DAY	161129675	02699118	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIBERTY RESOURCES INC DAY	161129675	02699118	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIBERTY RESOURCES INC DAY	161129675	02699118	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIBERTY/MONTGOMERY ARC DAY	141506257	02700049	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LIFE ADJUSTMENT CNTR INC DAY	133620577	02700085	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
LIFE ADJUSTMENT CNTR INC DAY	133620577	02700085	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
LIFE ADJUSTMENT CNTR INC DAY	133620577	02700085	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
LIFE ADJUSTMENT CNTR INC DAY	133620577	02700085	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
LIFES WORC DAY	237209731	02700136	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
LIFES WORC DAY	237209731	02700136	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
LIFES WORC DAY	237209731	02700136	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
LIFES WORC DAY	237209731	02700136	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
LIFESONG INC DAY/CH	273639848	03307004	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIFESONG INC DAY/CH	273639848	03307004	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIFESONG INC DAY/CH	273639848	03307004	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIFESONG INC DAY/CH	273639848	03307004	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
LIFESPAN OF GREATER ROCHESTER DAY	160986298	03047087	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIFESPAN OF GREATER ROCHESTER DAY	160986298	03047087	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIFESPAN OF GREATER ROCHESTER DAY	160986298	03047087	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIFESPAN OF GREATER ROCHESTER DAY	160986298	03047087	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LIFESPIRE INC DAY	132526022	02700076	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-AUG-2012	$101.73	01-AUG-12	$101.73	01-JUL-13	$ 98.61	01-JAN-15	$ 101.76	01-APR-15	$ 102.48	01-JUN-15	$ 105.25
LIFESPIRE INC DAY	132526022	02700076	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-AUG-2012	$67.98	01-AUG-12	$67.98	01-JUL-13	$ 66.43	01-JAN-15	$ 68.00	01-APR-15	$ 68.36	01-JUN-15	$ 69.75
LIFESPIRE INC DAY	132526022	02700076	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
LIFESPIRE INC DAY	132526022	02700076	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
LIFESPIRE INC DAY	132526022	02700076	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
LIFESPIRE INC DAY	132526022	02700076	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
LIFESTYLES F/T DISABLED DAY	133740011	02700067	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
LIFESTYLES F/T DISABLED DAY	133740011	02700067	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
LIFESTYLES F/T DISABLED DAY	133740011	02700067	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
LIFESTYLES F/T DISABLED DAY	133740011	02700067	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
LIFETIME ASSIST INC DAY	222221158	02693754	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$60.54	01-JUL-11	$60.54	01-JAN-14	$ 70.55	01-JAN-15	$ 71.11	01-APR-15	$ 71.69	01-JUN-15	$ 71.53
LIFETIME ASSIST INC DAY	222221158	02693754	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$34.34	01-JUL-11	$34.34	01-JAN-14	$ 39.35	01-JAN-15	$ 39.63	01-APR-15	$ 39.92	01-JUN-15	$ 39.83
LIFETIME ASSIST INC DAY	222221158	02693754	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIFETIME ASSIST INC DAY	222221158	02693754	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIFETIME ASSIST INC DAY	222221158	02693754	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIFETIME ASSIST INC DAY	222221158	02693754	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LIVING RESOURCES CORP DAY	141564208	02704745	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIVING RESOURCES CORP DAY	141564208	02704745	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIVING RESOURCES CORP DAY	141564208	02704745	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIVING RESOURCES CORP DAY	141564208	02704745	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LIVINGSTON WYOMING ARC DAY	161022565	02704754	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$99.24	01-JAN-13	$99.26	01-JAN-14	$ 99.27	01-JAN-15	$ 99.82	01-APR-15	$ 100.51	01-JUN-15	$ 100.60
LIVINGSTON WYOMING ARC DAY	161022565	02704754	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$59.31	01-JAN-13	$59.31	01-JAN-14	$ 59.32	01-JAN-15	$ 59.60	01-APR-15	$ 59.94	01-JUN-15	$ 59.99
LIVINGSTON WYOMING ARC DAY	161022565	02704754	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LIVINGSTON WYOMING ARC DAY	161022565	02704754	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LIVINGSTON WYOMING ARC DAY	161022565	02704754	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LIVINGSTON WYOMING ARC DAY	161022565	02704754	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LOCHLAND SCHOOL DAY	160780944	02700058	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LOCHLAND SCHOOL DAY	160780944	02700058	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LOCHLAND SCHOOL DAY	160780944	02700058	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LOCHLAND SCHOOL DAY	160780944	02700058	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
LONGLIFE INFO/REF NETWK DAY	112878383	02700109	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
LONGLIFE INFO/REF NETWK DAY	112878383	02700109	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
LONGLIFE INFO/REF NETWK DAY	112878383	02700109	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
LONGLIFE INFO/REF NETWK DAY	112878383	02700109	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
LORD OF LIFE ADULT/CHI DAY	161456270	02704763	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
MADISON-CORTLAND NYSARC DAY	160958020	02701499	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$132.12	01-JAN-12	$132.12	01-JAN-12	$ 132.12	01-JAN-15	$ 132.67	01-APR-15	$ 133.88	01-JUN-15	$ 133.88
MADISON-CORTLAND NYSARC DAY	160958020	02701499	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$88.23	01-JAN-12	$88.23	01-JAN-12	$ 88.23	01-JAN-15	$ 88.51	01-APR-15	$ 89.12	01-JUN-15	$ 89.12
MADISON-CORTLAND NYSARC DAY	160958020	02701499	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
MADISON-CORTLAND NYSARC DAY	160958020	02701499	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
MADISON-CORTLAND NYSARC DAY	160958020	02701499	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
MADISON-CORTLAND NYSARC DAY	160958020	02701499	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
MARANATHA HUMAN SVCS INC DAY	141755068	02705562	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MARANATHA HUMAN SVCS INC DAY	141755068	02705562	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MARANATHA HUMAN SVCS INC DAY	141755068	02705562	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MARANATHA HUMAN SVCS INC DAY	141755068	02705562	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MARY CARIOLA CTR DAY/CH	160771078	03597326	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
MARY CARIOLA CTR DAY/CH	160771078	03597326	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
MARY CARIOLA CTR DAY/CH	160771078	03597326	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
MARY CARIOLA CTR DAY/CH	160771078	03597326	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$60.89	01-JAN-13	$60.89	01-JAN-13	$ 60.89	01-JAN-15	$ 60.95	01-APR-15	$ 61.46	01-JUN-15	$ 61.46
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$40.37	01-JAN-13	$40.37	01-JAN-13	$ 40.37	01-JAN-15	$ 40.40	01-APR-15	$ 40.65	01-JUN-15	$ 40.65
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MARYHAVEN CTR OF HOPE DAY	112861698	02693561	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MENTAL HEALTH ASSOC DAY	111710983	02890311	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MENTAL HEALTH ASSOC DAY	111710983	02890311	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MENTAL HEALTH ASSOC DAY	111710983	02890311	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MENTAL HEALTH ASSOC DAY	111710983	02890311	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MERCY DRIVE INC DAY	043831639	02934141	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MERCY DRIVE INC DAY	043831639	02934141	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MERCY DRIVE INC DAY	043831639	02934141	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MERCY DRIVE INC DAY	043831639	02934141	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MERCY HOME FOR CHILDREN DAY	111666227	02701357	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MERCY HOME FOR CHILDREN DAY	111666227	02701357	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MERCY HOME FOR CHILDREN DAY	111666227	02701357	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MERCY HOME FOR CHILDREN DAY	111666227	02701357	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MILL NECK SVCS INC DAY	113119786	02704832	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MILL NECK SVCS INC DAY	113119786	02704832	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MILL NECK SVCS INC DAY	113119786	02704832	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MILL NECK SVCS INC DAY	113119786	02704832	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MISSION OF IMMAC VIRGIN DAY	135562286	02700118	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MODERN GUIDENCE SERVICES INC DAY	133852613	02936423	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MODERN GUIDENCE SERVICES INC DAY	133852613	02936423	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MODERN GUIDENCE SERVICES INC DAY	133852613	02936423	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MODERN GUIDENCE SERVICES INC DAY	133852613	02936423	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MODEST COMMUNITY SERVICES ASSOC DAY	134288916	03046086	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MODEST COMMUNITY SERVICES ASSOC DAY	134288916	03046086	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MODEST COMMUNITY SERVICES ASSOC DAY	134288916	03046086	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MODEST COMMUNITY SERVICES ASSOC DAY	134288916	03046086	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
MONROE CO CHAP NYSARC DAY	160835172	02704814	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$73.03	01-JAN-13	$73.16	01-JAN-14	$ 73.26	01-JAN-15	$ 73.89	01-APR-15	$ 74.55	01-JUN-15	$ 76.27
MONROE CO CHAP NYSARC DAY	160835172	02704814	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$42.55	01-JAN-13	$42.62	01-JAN-14	$ 42.67	01-JAN-15	$ 42.98	01-APR-15	$ 43.32	01-JUN-15	$ 44.17
MONROE CO CHAP NYSARC DAY	160835172	02704814	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
MONROE CO CHAP NYSARC DAY	160835172	02704814	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
MONROE CO CHAP NYSARC DAY	160835172	02704814	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
MONROE CO CHAP NYSARC DAY	160835172	02704814	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
MULTIFUNCTIONAL FAM SVCS DAY	113417903	02903886	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
MULTIFUNCTIONAL FAM SVCS DAY	113417903	02903886	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
MULTIFUNCTIONAL FAM SVCS DAY	113417903	02903886	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
MULTIFUNCTIONAL FAM SVCS DAY	113417903	02903886	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NASSAU CO CHAP NYSARC DAY	111720254	02693736	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$152.40	01-JUL-11	$152.40	01-JAN-14	$ 152.60	01-JAN-15	$ 153.10	01-APR-15	$ 154.72	01-JUN-15	$ 165.00
NASSAU CO CHAP NYSARC DAY	111720254	02693736	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$89.43	01-JUL-11	$89.43	01-JAN-14	$ 89.54	01-JAN-15	$ 89.78	01-APR-15	$ 90.59	01-JUN-15	$ 95.73
NASSAU CO CHAP NYSARC DAY	111720254	02693736	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NASSAU CO CHAP NYSARC DAY	111720254	02693736	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NASSAU CO CHAP NYSARC DAY	111720254	02693736	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NASSAU CO CHAP NYSARC DAY	111720254	02693736	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NASSAU SUFFOLK SVCS AUT DAY	112689753	02821185	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NASSAU SUFFOLK SVCS AUT DAY	112689753	02821185	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
NASSAU SUFFOLK SVCS AUT DAY	112689753	02821185	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NASSAU SUFFOLK SVCS AUT DAY	112689753	02821185	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NEW HOPE COMMUNITY INC DAY	222871755	03394983	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NEW HOPE COMMUNITY INC DAY	222871755	03394983	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NEW HOPE COMMUNITY INC DAY	222871755	03394983	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NEW HOPE COMMUNITY INC DAY	222871755	03394983	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NEW HORIZON COUNSELING CENTER DAY	112593090	03855052	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)					01-JUN-14	54.94	01-JAN-15	$ 55.54	01-APR-15	$ 56.23	01-JUN-15	$ 56.23
NEW HORIZON COUNSELING CENTER DAY	112593090	03855052	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)					01-JUN-14	109.87	01-JAN-15	$ 111.08	01-APR-15	$ 112.46	01-JUN-15	$ 112.46
NEW HORIZONS RESOURCES DAY	524862107	02693718	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NEW HORIZONS RESOURCES DAY	524862107	02693718	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NEW HORIZONS RESOURCES DAY	524862107	02693718	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NEW HORIZONS RESOURCES DAY	524862107	02693718	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NIAGARA COUNTY ARC DAY	160794847	02704823	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$138.87	01-JAN-13	$138.60	01-JAN-14	$ 138.34	01-JAN-15	$ 138.81	01-APR-15	$ 139.76	01-JUN-15	$ 140.14
NIAGARA COUNTY ARC DAY	160794847	02704823	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$86.94	01-JAN-13	$86.81	01-JAN-14	$ 86.68	01-JAN-15	$ 86.91	01-APR-15	$ 87.39	01-JUN-15	$ 87.58
NIAGARA COUNTY ARC DAY	160794847	02704823	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
NIAGARA COUNTY ARC DAY	160794847	02704823	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
NIAGARA COUNTY ARC DAY	160794847	02704823	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
NIAGARA COUNTY ARC DAY	160794847	02704823	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
NORTHERN NY CP ASSOC DAY	222542065	02704841	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
NORTHERN NY CP ASSOC DAY	222542065	02704841	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
NORTHERN NY CP ASSOC DAY	222542065	02704841	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
NORTHERN NY CP ASSOC DAY	222542065	02704841	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
NY FAMILIES FOR AUTISTIC CHLDRN DAY	113442879	03044828	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NY FAMILIES FOR AUTISTIC CHLDRN DAY	113442879	03044828	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NY FAMILIES FOR AUTISTIC CHLDRN DAY	113442879	03044828	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NY FAMILIES FOR AUTISTIC CHLDRN DAY	113442879	03044828	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NY FOUNDLING HOSPITAL ST AGATHAS DA	131624123	03044864	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NY FOUNDLING HOSPITAL ST AGATHAS DA	131624123	03044864	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NY FOUNDLING HOSPITAL ST AGATHAS DA	131624123	03044864	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NY FOUNDLING HOSPITAL ST AGATHAS DA	131624123	03044864	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NYS ARC INC CATTARAUG DAY	160818293	02701417	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$88.44	01-JUL-11	$88.44	01-JUL-11	$ 88.44	01-JAN-15	$ 89.37	01-APR-15	$ 90.33	01-JUN-15	$ 90.33
NYS ARC INC CATTARAUG DAY	160818293	02701417	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$48.39	01-JUL-11	$48.39	01-JUL-11	$ 48.39	01-JAN-15	$ 48.86	01-APR-15	$ 49.33	01-JUN-15	$ 49.33
NYS ARC INC CATTARAUG DAY	160818293	02701417	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
NYS ARC INC CATTARAUG DAY	160818293	02701417	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
NYS ARC INC CATTARAUG DAY	160818293	02701417	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
NYS ARC INC CATTARAUG DAY	160818293	02701417	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$75.44	01-JUL-11	$75.44	01-JUL-11	$ 75.44	01-JAN-15	$ 76.08	01-APR-15	$ 76.82	01-JUN-15	$ 76.84
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$49.72	01-JUL-11	$49.72	01-JUL-11	$ 49.72	01-JAN-15	$ 50.04	01-APR-15	$ 50.41	01-JUN-15	$ 50.42
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NYSARC DUTCHESS COUNTY DAY	146077915	02704850	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NYSARC INC NYC CHAPTER DAY	135596746	02703602	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$230.68	01-JUL-12	$230.68	01-JUL-13	$ 230.93	01-JAN-15	$ 272.98	01-APR-15	$ 275.92	01-JUN-15	$ 283.59
NYSARC INC NYC CHAPTER DAY	135596746	02703602	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$115.34	01-JUL-12	$115.34	01-JUL-13	$ 115.46	01-JAN-15	$ 136.49	01-APR-15	$ 137.96	01-JUN-15	$ 141.79
NYSARC INC NYC CHAPTER DAY	135596746	02703602	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NYSARC INC NYC CHAPTER DAY	135596746	02703602	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NYSARC INC NYC CHAPTER DAY	135596746	02703602	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NYSARC INC NYC CHAPTER DAY	135596746	02703602	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$81.03	01-JAN-13	$81.37	01-APR-14	$ 81.27	01-JAN-15	$ 81.92	01-APR-15	$ 82.80	01-JUN-15	$ 83.61
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$51.27	01-JAN-13	$51.45	01-APR-14	$ 51.39	01-JAN-15	$ 51.72	01-APR-15	$ 52.35	01-JUN-15	$ 52.75
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
NYSARC INC SUFFOLK CHAP DAY	111845294	02707880	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
OHEL CHILDRENS HM/FAM DAY	116078704	02750085	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
OHEL CHILDRENS HM/FAM DAY	116078704	02750085	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
OHEL CHILDRENS HM/FAM DAY	116078704	02750085	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
OHEL CHILDRENS HM/FAM DAY	116078704	02750085	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ON YOUR MARK DAY	133128315	02707871	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ON YOUR MARK DAY	133128315	02707871	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ON YOUR MARK DAY	133128315	02707871	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ON YOUR MARK DAY	133128315	02707871	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$127.25	01-JUL-11	$127.25	01-JUL-11	$ 127.25	01-JAN-15	$ 127.57	01-APR-15	$ 129.21	01-JUN-15	$ 130.14
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$72.12	01-JUL-11	$72.12	01-JUL-11	$ 72.12	01-JAN-15	$ 71.75	01-APR-15	$ 72.57	01-JUN-15	$ 73.03
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ONEIDA CO CHAP NYSARC DAY	150581298	02708029	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$73.60	01-JUL-11	$73.60	01-JUL-11	$ 73.60	01-JAN-15	$ 73.76	01-APR-15	$ 74.66	01-JUN-15	$ 76.26
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$36.80	01-JUL-11	$36.80	01-JUL-11	$ 36.80	01-JAN-15	$ 36.88	01-APR-15	$ 37.33	01-JUN-15	$ 38.13
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ONONDAGA CO CHAP NYSARC DAY	150561718	02693589	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ONONDAGA COMM COLLEGE DAY	160973001	02701426	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ONONDAGA COMM COLLEGE DAY	160973001	02701426	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ONONDAGA COMM COLLEGE DAY	160973001	02701426	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ONONDAGA COMM COLLEGE DAY	160973001	02701426	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ONTARIO ARC DAY	160786219	02702005	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	70.66	01-APR-15	$ 71.39	01-JUN-15	$ 71.39
ONTARIO ARC DAY	160786219	02702005	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	125.22	01-APR-15	$ 126.68	01-JUN-15	$ 126.68
ONTARIO ARC DAY	160786219	02702005	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ONTARIO ARC DAY	160786219	02702005	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ONTARIO ARC DAY	160786219	02702005	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ONTARIO ARC DAY	160786219	02702005	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
OPENGATE INC DAY	132634269	02714712	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
OPENGATE INC DAY	132634269	02714712	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
OPENGATE INC DAY	132634269	02714712	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
OPENGATE INC DAY	132634269	02714712	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$47.63	01-JUL-11	$47.63	01-JUL-11	$ 47.63	01-JAN-15	$ 48.02	01-APR-15	$ 48.75	01-JUN-15	$ 48.75
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$23.82	01-JUL-11	$23.82	01-JUL-11	$ 23.82	01-JAN-15	$ 24.01	01-APR-15	$ 24.37	01-JUN-15	$ 24.37
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ORANGE CO CHAP NYS ARC DAY	141462340	02701435	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ORANGE REHAB OCCUP INC DAY	141471097	02693763	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$105.65	01-JUL-11	$105.65	01-APR-14	$ 119.92	01-JAN-15	$ 114.48	01-APR-15	$ 115.66	01-JUN-15	$ 115.31
ORANGE REHAB OCCUP INC DAY	141471097	02693763	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$64.38	01-JUL-11	$64.38	01-APR-14	$ 72.09	01-JAN-15	$ 69.10	01-APR-15	$ 69.69	01-JUN-15	$ 69.51
ORANGE REHAB OCCUP INC DAY	141471097	02693763	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ORANGE REHAB OCCUP INC DAY	141471097	02693763	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ORANGE REHAB OCCUP INC DAY	141471097	02693763	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ORANGE REHAB OCCUP INC DAY	141471097	02693763	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$103.71	01-JUL-11	$103.71	01-JAN-14	$ 106.46	01-JAN-15	$ 105.43	01-APR-15	$ 107.34	01-JUN-15	$ 107.41
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$54.98	01-JUL-11	$54.98	01-JAN-14	$ 56.76	01-JAN-15	$ 55.84	01-APR-15	$ 56.79	01-JUN-15	$ 56.83
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ORLEANS CO CHAP NYSARC DAY	237150957	02702110	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
OSWEGO CO CHAP NYS ARC DAY	160973939	02708038	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
OSWEGO CO CHAP NYS ARC DAY	160973939	02708038	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
OSWEGO CO CHAP NYS ARC DAY	160973939	02708038	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
OSWEGO CO CHAP NYS ARC DAY	160973939	02708038	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
OSWEGO CO OPPORTUNITIES DAY	160979876	02702129	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
OSWEGO CO OPPORTUNITIES DAY	160979876	02702129	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
OSWEGO CO OPPORTUNITIES DAY	160979876	02702129	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
OSWEGO CO OPPORTUNITIES DAY	160979876	02702129	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
OSWEGO INDUSTRIES INC DAY	162197163	02703611	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$65.81	01-JAN-13	$69.97	01-JAN-13	$ 69.97	01-JAN-15	$ 68.02	01-APR-15	$ 68.54	01-JUN-15	$ 68.54
OSWEGO INDUSTRIES INC DAY	162197163	02703611	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$32.91	01-JAN-13	$37.06	01-JAN-13	$ 37.06	01-JAN-15	$ 36.09	01-APR-15	$ 36.35	01-JUN-15	$ 36.35
OSWEGO INDUSTRIES INC DAY	162197163	02703611	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
OSWEGO INDUSTRIES INC DAY	162197163	02703611	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
OSWEGO INDUSTRIES INC DAY	162197163	02703611	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
OSWEGO INDUSTRIES INC DAY	162197163	02703611	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
OTSAR INC DAY	112601112	02702014	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
OTSAR INC DAY	112601112	02702014	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
OTSAR INC DAY	112601112	02702014	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
OTSAR INC DAY	112601112	02702014	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
OTSEGO CHAP NYSARC DAY	160953477	02702101	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$88.40	01-JUL-11	$88.40	01-JUL-11	$ 88.40	01-JAN-15	$ 89.03	01-APR-15	$ 89.82	01-JUN-15	$ 89.82
OTSEGO CHAP NYSARC DAY	160953477	02702101	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$44.20	01-JUL-11	$44.20	01-JUL-11	$ 44.20	01-JAN-15	$ 44.52	01-APR-15	$ 44.91	01-JUN-15	$ 44.91
OTSEGO CHAP NYSARC DAY	160953477	02702101	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
OTSEGO CHAP NYSARC DAY	160953477	02702101	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
OTSEGO CHAP NYSARC DAY	160953477	02702101	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
OTSEGO CHAP NYSARC DAY	160953477	02702101	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PARK RIDGE NH INC DAY	160978184	02728045	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
PARK RIDGE NH INC DAY	160978184	02728045	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
PARK RIDGE NH INC DAY	160978184	02728045	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
PARK RIDGE NH INC DAY	160978184	02728045	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PATHFINDER VILLAGE INC PRE DAY/CH	150618744	03519179	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$128.53	01-JAN-13	$128.58	01-JAN-13	$ 128.58	01-JAN-15	$ 130.56	01-APR-15	$ 132.59	01-APR-15	$ 132.59
PATHFINDER VILLAGE INC PRE DAY/CH	150618744	03519179	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$64.29	01-JAN-13	$64.29	01-JAN-13	$ 64.29	01-JAN-15	$ 65.28	01-APR-15	$ 66.29	01-APR-15	$ 66.29
PATHFINDER VILLAGE INC PREVOC	150618744	03519179	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
PATHFINDER VILLAGE INC PREVOC	150618744	03519179	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
PATHFINDER VILLAGE INC PREVOC	150618744	03519179	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
PATHFINDER VILLAGE INC PREVOC	150618744	03519179	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PATHWAYS INC DAY	161089007	02702041	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
PATHWAYS INC DAY	161089007	02702041	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
PATHWAYS INC DAY	161089007	02702041	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
PATHWAYS INC DAY	161089007	02702041	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PEOPLE INC FINGER LAKES DAY	202017098	02734614	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
PEOPLE INC FINGER LAKES DAY	202017098	02734614	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
PEOPLE INC FINGER LAKES DAY	202017098	02734614	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
PEOPLE INC FINGER LAKES DAY	202017098	02734614	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
PEOPLE REBLD-LVNG DIGNITY DAY	161422825	02702147	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PEOPLE SERVICE TO THE DAY	160975538	02702156	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
PEOPLE SERVICE TO THE DAY	160975538	02702156	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
PEOPLE SERVICE TO THE DAY	160975538	02702156	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
PEOPLE SERVICE TO THE DAY	160975538	02702156	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
PERSON CENTERED CARE DAY	202878791	02750076	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
PERSON CENTERED CARE DAY	202878791	02750076	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
PERSON CENTERED CARE DAY	202878791	02750076	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
PERSON CENTERED CARE DAY	202878791	02750076	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
PHOENIX FRONTIER INC DAY	160865451	02702032	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$68.49	01-JUL-11	$68.49	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
PHOENIX FRONTIER INC DAY	160865451	02702032	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$34.46	01-JUL-11	$34.46	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
PROF SVC CTR HANDICAPPED DAY	112542430	02693570	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
PROF SVC CTR HANDICAPPED DAY	112542430	02693570	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
PROF SVC CTR HANDICAPPED DAY	112542430	02693570	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
PROF SVC CTR HANDICAPPED DAY	112542430	02693570	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
PROGRAM DEVELOPMENT SVC DAY	112715916	02701444	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
PROGRAM DEVELOPMENT SVC DAY	112715916	02701444	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
PROGRAM DEVELOPMENT SVC DAY	112715916	02701444	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
PROGRAM DEVELOPMENT SVC DAY	112715916	02701444	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
PROVIDER HAMASPIK KINGS DAY	161522895	02821176	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
PROVIDER HAMASPIK KINGS DAY	161522895	02821176	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
PROVIDER HAMASPIK KINGS DAY	161522895	02821176	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
PROVIDER HAMASPIK KINGS DAY	161522895	02821176	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
PROVIDER HAMASPIK ROCKLD DAY	133978518	02701453	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
PUTNAM ARC DAY	141426729	02703620	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$73.51	01-JUL-11	$73.51	01-JUL-11	$ 73.51	01-JAN-15	$ 74.52	01-APR-15	$ 75.75	01-JUN-15	$ 75.80
PUTNAM ARC DAY	141426729	02703620	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$37.40	01-JUL-11	$37.40	01-JUL-11	$ 37.40	01-JAN-15	$ 37.90	01-APR-15	$ 38.52	01-JUN-15	$ 38.54
PUTNAM ARC DAY	141426729	02703620	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
PUTNAM ARC DAY	141426729	02703620	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
PUTNAM ARC DAY	141426729	02703620	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
PUTNAM ARC DAY	141426729	02703620	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
QSAC DAY	112482974	02701480	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
QSAC DAY	112482974	02701480	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
QSAC DAY	112482974	02701480	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
QSAC DAY	112482974	02701480	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
QUEENS PARENT RESRC CTR DAY	113211119	02701471	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
QUEENS PARENT RESRC CTR DAY	113211119	02701471	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
QUEENS PARENT RESRC CTR DAY	113211119	02701471	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
QUEENS PARENT RESRC CTR DAY	113211119	02701471	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
RAYIM OF HUDSON VALLEY DAY	562331735	02701260	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
RAYIM OF HUDSON VALLEY DAY	562331735	02701260	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
RAYIM OF HUDSON VALLEY DAY	562331735	02701260	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
RAYIM OF HUDSON VALLEY DAY	562331735	02701260	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
RENSS CO CHAP NYSARC DAY	141485873	02693709	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$114.06	01-JUL-11	$114.06	01-JUL-11	$ 114.06	01-JAN-15	$ 115.03	01-APR-15	$ 116.03	01-JUN-15	$ 117.40
RENSS CO CHAP NYSARC DAY	141485873	02693709	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$72.38	01-JUL-11	$72.38	01-JUL-11	$ 72.38	01-JAN-15	$ 72.87	01-APR-15	$ 73.37	01-JUN-15	$ 74.05
RENSS CO CHAP NYSARC DAY	141485873	02693709	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
RENSS CO CHAP NYSARC DAY	141485873	02693709	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
RENSS CO CHAP NYSARC DAY	141485873	02693709	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
RENSS CO CHAP NYSARC DAY	141485873	02693709	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
RESIDENTIAL RESOURCES DAY	141823526	02701288	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
RESIDENTIAL RESOURCES DAY	141823526	02701288	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
RESIDENTIAL RESOURCES DAY	141823526	02701288	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
RESIDENTIAL RESOURCES DAY	141823526	02701288	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
RESOURCE CTR-INDEP LIV DAY	222518284	02693603	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
REWARDING ENVIRONMENTS FOR ADULT LI	204778868	03357146	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
REWARDING ENVIRONMENTS FOR ADULT LI	204778868	03357146	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
REWARDING ENVIRONMENTS FOR ADULT LI	204778868	03357146	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
REWARDING ENVIRONMENTS FOR ADULT LI	204778868	03357146	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
RICHMOND CHILDRENS CTR DAY	132736761	02701935	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
RICHMOND CHILDRENS CTR DAY	132736761	02701935	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RICHMOND CHILDRENS CTR DAY	132736761	02701935	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
RICHMOND CHILDRENS CTR DAY	132736761	02701935	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
RIVERSHORE INC DAY	161146128	02915222	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
RIVERSHORE INC DAY	161146128	02915222	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
RIVERSHORE INC DAY	161146128	02915222	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
RIVERSHORE INC DAY	161146128	02915222	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$40.37	01-JUL-11	$40.37	01-JUL-11	$ 40.37	01-JAN-15	$ 40.96	01-APR-15	$ 41.57	01-JUN-15	$ 41.82
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$20.19	01-JUL-11	$20.19	01-JUL-11	$ 20.19	01-JAN-15	$ 20.48	01-APR-15	$ 20.78	01-JUN-15	$ 20.91
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ROCH SCHOOL OF HOLY CHLD DAY	160761224	02693658	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ROCHESTER REHAB CENTER INC DAY/AHRH	160743143	03145342	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$65.14	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
ROCHESTER REHAB CENTER INC DAY/AHRH	160743143	03145342	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$32.57	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$108.88	01-JUL-11	$108.88	01-JUL-11	$ 108.88	01-JAN-15	$ 122.36	01-APR-15	$ 123.91	01-JUN-15	$ 130.81
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$59.40	01-JUL-11	$59.40	01-JUL-11	$ 59.40	01-JAN-15	$ 66.52	01-APR-15	$ 67.29	01-JUN-15	$ 70.74
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ROCKLAND CO CHAP NYSARC DAY	131916359	02701926	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ROCKLAND COUNTY ALD DAY	132951835	03043890	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ROCKLAND COUNTY ALD DAY	132951835	03043890	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ROCKLAND COUNTY ALD DAY	132951835	03043890	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ROCKLAND COUNTY ALD DAY	132951835	03043890	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SAINT DOMINICS HOME DAY	131740399	02693685	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SAINT DOMINICS HOME DAY	131740399	02693685	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SAINT DOMINICS HOME DAY	131740399	02693685	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SAINT DOMINICS HOME DAY	131740399	02693685	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SARATOGA CNTY ARC DAY	141465932	02701980	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$80.96	01-JUL-11	$80.96	01-JUL-11	$ 80.96	01-JAN-15	$ 87.53	01-APR-15	$ 93.71	01-JUN-15	$ 93.71
SARATOGA CNTY ARC DAY	141465932	02701980	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$54.31	01-JUL-11	$54.31	01-JUL-11	$ 54.31	01-JAN-15	$ 57.04	01-APR-15	$ 59.54	01-JUN-15	$ 59.54
SARATOGA CNTY ARC DAY	141465932	02701980	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SARATOGA CNTY ARC DAY	141465932	02701980	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SARATOGA CNTY ARC DAY	141465932	02701980	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SARATOGA CNTY ARC DAY	141465932	02701980	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$79.94	01-JUL-11	$79.94	01-JUL-11	$ 79.94	01-JAN-15	$ 80.66	01-APR-15	$ 81.48	01-JUN-15	$ 81.48
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$46.34	01-JUL-11	$46.34	01-JUL-11	$ 46.34	01-JAN-15	$ 46.70	01-APR-15	$ 47.11	01-JUN-15	$ 47.11
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SCHOHARIE CHAP NYSARC DAY	141494347	02693612	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)					01-AUG-13	71.8	01-JAN-15	$ 72.80	01-APR-15	$ 73.96	01-JUN-15	$ 73.96
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)					01-AUG-13	143.59	01-JAN-15	$ 145.60	01-APR-15	$ 147.91	01-JUN-15	$ 147.91
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SCHOOL FOR LANG/COMM DEV DAY/CH	112739039	03352072	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$74.08	01-JUL-11	$74.08	01-JUL-11	$ 74.08	01-JAN-15	$ 74.76	01-APR-15	$ 75.46	01-JUN-15	$ 76.45
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$43.98	01-JUL-11	$43.98	01-JUL-11	$ 43.98	01-JAN-15	$ 44.32	01-APR-15	$ 44.67	01-JUN-15	$ 45.16
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SCHTY CO CHAP NYSARC INC DAY	141459277	02703955	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$70.19	01-JUL-11	$70.19	01-JUL-11	$ 70.19	01-JAN-15	$ 70.57	01-APR-15	$ 70.95	01-JUN-15	$ 70.95
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$45.70	01-JUL-11	$45.70	01-JUL-11	$ 45.70	01-JAN-15	$ 45.88	01-APR-15	$ 46.08	01-JUN-15	$ 46.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SCHUYLER CO CHAP NYSARC DAY	161120089	02702436	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SDTC THE CTR/DISCOVERY DAY	141395426	02704492	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SDTC THE CTR/DISCOVERY DAY	141395426	02704492	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SDTC THE CTR/DISCOVERY DAY	141395426	02704492	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SDTC THE CTR/DISCOVERY DAY	141395426	02704492	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SENECA CAYUGA NYSARC DAY	161124314	02701971	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$86.18	01-JUL-11	$86.18	01-JUL-11	$ 86.18	01-JAN-15	$ 86.84	01-APR-15	$ 88.21	01-JUN-15	$ 89.03
SENECA CAYUGA NYSARC DAY	161124314	02701971	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$46.68	01-JUL-11	$46.68	01-JUL-11	$ 46.68	01-JAN-15	$ 47.01	01-APR-15	$ 47.70	01-JUN-15	$ 48.11
SENECA CAYUGA NYSARC DAY	161124314	02701971	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SENECA CAYUGA NYSARC DAY	161124314	02701971	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SENECA CAYUGA NYSARC DAY	161124314	02701971	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SENECA CAYUGA NYSARC DAY	161124314	02701971	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SERVICES FOR THE DEVELOPMENTALLY CH	133921190	03450740	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SERVICES FOR THE DEVELOPMENTALLY CH	133921190	03450740	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SERVICES FOR THE DEVELOPMENTALLY CH	133921190	03450740	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SERVICES FOR THE DEVELOPMENTALLY CH	133921190	03450740	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SERVICES FOR UNDERSRVD DAY	133250383	02704516	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SERVICES FOR UNDERSRVD DAY	133250383	02704516	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SERVICES FOR UNDERSRVD DAY	133250383	02704516	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SERVICES FOR UNDERSRVD DAY	133250383	02704516	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SHARE OF NEW SQUARE DAY	133475062	02701962	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SHARE OF NEW SQUARE DAY	133475062	02701962	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SHARE OF NEW SQUARE DAY	133475062	02701962	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SHARE OF NEW SQUARE DAY	133475062	02701962	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SINERGIA INC DAY	133183344	02701953	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SINERGIA INC DAY	133183344	02701953	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SINERGIA INC DAY	133183344	02701953	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SINERGIA INC DAY	133183344	02701953	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SKILLS UNLIMITED INC DAY	111759110	02702023	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SKILLS UNLIMITED INC DAY	111759110	02702023	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SKILLS UNLIMITED INC DAY	111759110	02702023	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SKILLS UNLIMITED INC DAY	111759110	02702023	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SOCIAL ACTION CTR INC DAY	134093738	02701944	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SOCIAL ACTION CTR INC DAY	134093738	02701944	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SOCIAL ACTION CTR INC DAY	134093738	02701944	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SOCIAL ACTION CTR INC DAY	134093738	02701944	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SOUTHEAST BRONX NGBHD CTR DAY	132675560	02701279	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SOUTHEAST BRONX NGBHD CTR DAY	132675560	02701279	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SOUTHEAST BRONX NGBHD CTR DAY	132675560	02701279	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SOUTHEAST BRONX NGBHD CTR DAY	132675560	02701279	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2013	$59.72	01-JAN-13	$59.72	01-JAN-14	$ 59.67	01-JAN-15	$ 67.30	01-APR-15	$ 68.04	01-JUN-15	$ 68.04
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2013	$35.85	01-JAN-13	$35.85	01-JAN-14	$ 35.82	01-JAN-15	$ 39.35	01-APR-15	$ 39.72	01-JUN-15	$ 39.72
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SOUTHEAST COMM WORK CTR DAY	161074815	02693694	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SOUTHERN TIER INDEP CTR DAY	161204347	02693649	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SPARC INC	133832725	03496059	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SPARC INC	133832725	03496059	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
SPARC INC	133832725	03496059	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SPARC INC	133832725	03496059	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SPAULDING PRAY RES CORP DAY	161196869	02701297	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SPAULDING PRAY RES CORP DAY	161196869	02701297	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SPAULDING PRAY RES CORP DAY	161196869	02701297	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SPAULDING PRAY RES CORP DAY	161196869	02701297	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$183.34	01-JUL-12	$159.08	01-JUL-13	$ 73.79	01-JAN-15	$ 85.53	01-APR-15	$ 86.81	01-JUN-15	$ 94.75
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$91.67	01-JUL-12	$79.54	01-JUL-13	$ 36.89	01-JAN-15	$ 42.76	01-APR-15	$ 43.41	01-JUN-15	$ 47.37
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SPECIAL CIT FUTURE UNLID DAY	132865903	02701311	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SPRINGBROOK NY INC DAY	150539129	02703368	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)									01-APR-15	81.59	01-JUN-15	$ 81.59
SPRINGBROOK NY INC DAY	150539129	02703368	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)									01-APR-15	163.17	01-JUN-15	$ 163.17
SPRINGBROOK NY INC DAY	150539129	02703368	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SPRINGBROOK NY INC DAY	150539129	02703368	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SPRINGBROOK NY INC DAY	150539129	02703368	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SPRINGBROOK NY INC DAY	150539129	02703368	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ST CHRISTOPHER OTTILIE DAY	112777066	02701999	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ST CHRISTOPHER OTTILIE DAY	112777066	02701999	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ST CHRISTOPHER OTTILIE DAY	112777066	02701999	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ST CHRISTOPHER OTTILIE DAY	112777066	02701999	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ST CHRISTOPHERS INC DAY	131740485	02702427	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
ST CHRISTOPHERS INC DAY	131740485	02702427	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
ST CHRISTOPHERS INC DAY	131740485	02702427	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
ST CHRISTOPHERS INC DAY	131740485	02702427	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
ST LAWRENCE NYSARC INC DAY	150617072	02702069	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$127.53	01-JAN-12	$127.53	01-JAN-12	$ 127.53	01-JAN-15	$ 129.10	01-APR-15	$ 130.84	01-JUN-15	$ 130.93
ST LAWRENCE NYSARC INC DAY	150617072	02702069	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$63.77	01-JAN-12	$63.77	01-JAN-12	$ 63.77	01-JAN-15	$ 64.55	01-APR-15	$ 65.42	01-JUN-15	$ 65.47
ST LAWRENCE NYSARC INC DAY	150617072	02702069	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ST LAWRENCE NYSARC INC DAY	150617072	02702069	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ST LAWRENCE NYSARC INC DAY	150617072	02702069	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ST LAWRENCE NYSARC INC DAY	150617072	02702069	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ST REGIS MOHAWK TRIBE DAY	161007650	02702078	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
STATEN ISLAND AID INC DAY	135660279	02704525	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$44.58	01-JUL-12	$44.58	01-JUL-12	$ 44.58	01-JAN-15	$ 44.94	01-APR-15	$ 45.38	01-JUN-15	$ 45.38
STATEN ISLAND AID INC DAY	135660279	02704525	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$26.92	01-JUL-12	$26.92	01-JUL-12	$ 26.92	01-JAN-15	$ 27.10	01-APR-15	$ 27.32	01-JUN-15	$ 27.32
STATEN ISLAND AID INC DAY	135660279	02704525	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
STATEN ISLAND AID INC DAY	135660279	02704525	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
STATEN ISLAND AID INC DAY	135660279	02704525	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
STATEN ISLAND AID INC DAY	135660279	02704525	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$87.93	01-JUL-11	$87.93	01-JUL-11	$ 87.93	01-JAN-15	$ 88.74	01-APR-15	$ 89.70	01-JUN-15	$ 89.89
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$53.21	01-JUL-11	$53.21	01-JUL-11	$ 53.21	01-JAN-15	$ 53.62	01-APR-15	$ 54.09	01-JUN-15	$ 54.19
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
STEUBEN CO CHAP NYSARC DAY	160971450	02693630	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SUBURBAN ADULT SERVICES DAY	161115992	02693621	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$102.26	01-JAN-13	$110.36	01-JUL-13	$ 105.75	01-JAN-15	$ 97.66	01-APR-15	$ 99.04	01-JUN-15	$ 99.04
SUBURBAN ADULT SERVICES DAY	161115992	02693621	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$56.24	01-JAN-13	$60.09	01-JUL-13	$ 58.31	01-JAN-15	$ 53.45	01-APR-15	$ 54.14	01-JUN-15	$ 54.14
SUBURBAN ADULT SERVICES DAY	161115992	02693621	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SUBURBAN ADULT SERVICES DAY	161115992	02693621	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SUBURBAN ADULT SERVICES DAY	161115992	02693621	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SUBURBAN ADULT SERVICES DAY	161115992	02693621	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$86.87	01-JUL-11	$86.87	01-JUL-11	$ 86.87	01-JAN-15	$ 87.34	01-APR-15	$ 88.10	01-JUN-15	$ 89.31
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$49.28	01-JUL-11	$49.28	01-JUL-11	$ 49.28	01-JAN-15	$ 49.52	01-APR-15	$ 49.90	01-JUN-15	$ 50.51
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
SULLIVAN CO CHAP NYSARC DAY	146028767	02702096	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SUNY PLATTSBURGH NYSADAC DAY	146013200	02703542	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
SUSQUEHANNA CARE CORP DAY	141778382	02704456	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
SUSQUEHANNA CARE CORP DAY	141778382	02704456	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
SUSQUEHANNA CARE CORP DAY	141778382	02704456	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
SUSQUEHANNA CARE CORP DAY	141778382	02704456	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
TACONIC INNOVATIONS INC DAY	223729121	02702505	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
TACONIC INNOVATIONS INC DAY	223729121	02702505	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
TACONIC INNOVATIONS INC DAY	223729121	02702505	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
TACONIC INNOVATIONS INC DAY	223729121	02702505	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
TENDER CARE HUMAN SERVICES DAY	113586379	03045250	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
TENDER CARE HUMAN SERVICES DAY	113586379	03045250	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
TENDER CARE HUMAN SERVICES DAY	113586379	03045250	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
TENDER CARE HUMAN SERVICES DAY	113586379	03045250	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
THE FRIENDS NETWORK DAY	133955641	02991940	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
THE FRIENDS NETWORK DAY	133955641	02991940	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
THE FRIENDS NETWORK DAY	133955641	02991940	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
THE FRIENDS NETWORK DAY	133955641	02991940	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
THE GOOD SHEPHARD INC DAY/CH	383773335	03445190	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
THE GOOD SHEPHARD INC DAY/CH	383773335	03445190	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
THE GOOD SHEPHARD INC DAY/CH	383773335	03445190	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
THE GOOD SHEPHARD INC DAY/CH	383773335	03445190	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
THE REHABILITATION INST DAY	112073672	02702514	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$80.96	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
THE REHABILITATION INST DAY	112073672	02702514	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$40.48	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
THE REHABILITATION INST DAY	112073672	02702514	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
THE REHABILITATION INST DAY	112073672	02702514	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
THE REHABILITATION INST DAY	112073672	02702514	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
THE REHABILITATION INST DAY	112073672	02702514	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
THE SALVATION ARMY DAY	135562351	02702523	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
THE SALVATION ARMY DAY	135562351	02702523	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
THE SALVATION ARMY DAY	135562351	02702523	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
THE SALVATION ARMY DAY	135562351	02702523	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
THE SHIELD INSTITUTE DAY	131740041	02702532	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
THE SHIELD INSTITUTE DAY	131740041	02702532	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
THE SHIELD INSTITUTE DAY	131740041	02702532	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
THE SHIELD INSTITUTE DAY	131740041	02702532	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
THE WORKSHOP INC HCBS DAY	141410352	02702472	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$92.54	01-JUL-11	$92.54	01-JUL-11	$ 92.54	01-JAN-15	$ 93.43	01-APR-15	$ 94.53	01-JUN-15	$ 95.91
THE WORKSHOP INC HCBS DAY	141410352	02702472	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$46.27	01-JUL-11	$46.27	01-JUL-11	$ 46.27	01-JAN-15	$ 46.71	01-APR-15	$ 47.27	01-JUN-15	$ 47.96
TOOMEY RES AND COMM SVS DAY	161363414	02702541	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
TOOMEY RES AND COMM SVS DAY	161363414	02702541	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
TOOMEY RES AND COMM SVS DAY	161363414	02702541	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
TOOMEY RES AND COMM SVS DAY	161363414	02702541	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
TRIFORM ENTERPRISES LTD DAY	222186872	02702463	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
TRIFORM ENTERPRISES LTD DAY	222186872	02702463	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
TRIFORM ENTERPRISES LTD DAY	222186872	02702463	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
TRIFORM ENTERPRISES LTD DAY	222186872	02702463	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
UCP ASSOC OF NASSAU INC DAY	111723782	02693676	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UCP ASSOC OF NASSAU INC DAY	111723782	02693676	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UCP ASSOC OF NASSAU INC DAY	111723782	02693676	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UCP ASSOC OF NASSAU INC DAY	111723782	02693676	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UCP ASSOC OF NYS DAY	131623856	02709777	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UCP ASSOC OF NYS DAY	131623856	02709777	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UCP ASSOC OF NYS DAY	131623856	02709777	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UCP ASSOC OF NYS DAY	131623856	02709777	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UCP ASSOC ROCHESTER DAY	160743950	02702165	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCP ASSOC ROCHESTER DAY	160743950	02702165	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCP ASSOC ROCHESTER DAY	160743950	02702165	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCP ASSOC ROCHESTER DAY	160743950	02702165	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCP HANDI CHILDREN ASSOC DAY	150532247	02702569	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UCP HANDICAPPED P UTICA DAY	150543657	02693598	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCP HANDICAPPED P UTICA DAY	150543657	02693598	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCP HANDICAPPED P UTICA DAY	150543657	02693598	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCP HANDICAPPED P UTICA DAY	150543657	02693598	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UCP OF QUEENS	111665821	02702578	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-OCT-2012	$69.36	01-OCT-12	$69.36	01-OCT-12	$ 69.36	01-JAN-15	$ 70.09	01-APR-15	$ 71.02	01-JUN-15	$ 71.02
UCP OF QUEENS	111665821	02702578	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-OCT-2012	$36.83	01-OCT-12	$36.83	01-OCT-12	$ 36.83	01-JAN-15	$ 37.20	01-APR-15	$ 37.66	01-JUN-15	$ 37.66
UCP OF QUEENS	111665821	02702578	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UCP OF QUEENS	111665821	02702578	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UCP OF QUEENS	111665821	02702578	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UCP OF QUEENS	111665821	02702578	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UCP OF TRI COUNTIES DAY	141495700	02702418	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCP OF TRI COUNTIES DAY	141495700	02702418	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCP OF TRI COUNTIES DAY	141495700	02702418	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCP OF TRI COUNTIES DAY	141495700	02702418	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UCP PUTNAM/S DUTCHESS CO DAY	141813412	02703455	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UCP PUTNAM/S DUTCHESS CO DAY	141813412	02703455	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UCP PUTNAM/S DUTCHESS CO DAY	141813412	02703455	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UCP PUTNAM/S DUTCHESS CO DAY	141813412	02703455	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UCPA NIAGARA CO INC DAY	160786061	02703419	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$169.97	01-JUL-11	$169.97	01-JUL-11	$ 169.97	01-JAN-15	$ 171.61	01-APR-15	$ 173.27	01-JUN-15	$ 173.24
UCPA NIAGARA CO INC DAY	160786061	02703419	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$84.99	01-JUL-11	$84.99	01-JUL-11	$ 84.99	01-JAN-15	$ 85.80	01-APR-15	$ 86.64	01-JUN-15	$ 86.62
UCPA NIAGARA CO INC DAY	160786061	02703419	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCPA NIAGARA CO INC DAY	160786061	02703419	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCPA NIAGARA CO INC DAY	160786061	02703419	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCPA NIAGARA CO INC DAY	160786061	02703419	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCPA OF CAYUGA CNTY INC DAY	150576613	02703639	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$110.45	01-JUL-11	$110.45	01-JUL-11	$ 110.45	01-JAN-15	$ 111.03	01-APR-15	$ 111.62	01-JUN-15	$ 110.80
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$69.14	01-JUL-11	$69.14	01-JUL-11	$ 69.14	01-JAN-15	$ 69.44	01-APR-15	$ 69.73	01-JUN-15	$ 69.32
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UCPA OF GTR SUFFOLK INC DAY	112568841	02703491	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UCPA OF THE NORTH CTRY DAY	161568985	02703482	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UCPA OF THE NORTH CTRY DAY	161568985	02703482	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UCPA OF THE NORTH CTRY DAY	161568985	02703482	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UCPA OF THE NORTH CTRY DAY	161568985	02703482	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ULSTER GREENE ARC DAY	141437657	02703437	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$64.14	01-JAN-13	$65.75	01-JAN-14	$ 65.90	01-JAN-15	$ 64.90	01-APR-15	$ 65.59	01-JUN-15	$ 67.64
ULSTER GREENE ARC DAY	141437657	02703437	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$40.36	01-JAN-13	$41.24	01-JAN-14	$ 41.32	01-JAN-15	$ 40.74	01-APR-15	$ 41.09	01-JUN-15	$ 42.11
ULSTER GREENE ARC DAY	141437657	02703437	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
ULSTER GREENE ARC DAY	141437657	02703437	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
ULSTER GREENE ARC DAY	141437657	02703437	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
ULSTER GREENE ARC DAY	141437657	02703437	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UNIQUE LIFE INC DAY	113653314	02915906	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UNIQUE LIFE INC DAY	113653314	02915906	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UNIQUE LIFE INC DAY	113653314	02915906	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UNIQUE LIFE INC DAY	113653314	02915906	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UNIQUE PEOPLE SERVICES DAY/AHRH	133636555	03292537	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UNIQUE PEOPLE SERVICES DAY/AHRH	133636555	03292537	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UNIQUE PEOPLE SERVICES DAY/AHRH	133636555	03292537	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UNIQUE PEOPLE SERVICES DAY/AHRH	133636555	03292537	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
UNITED CEREBRAL PALSY NYC DAY	135654532	02703428	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
UNITED HELPERS ICF INC DAY	222412205	02703446	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UNITED HELPERS ICF INC DAY	222412205	02703446	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UNITED HELPERS ICF INC DAY	222412205	02703446	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UNITED HELPERS ICF INC DAY	222412205	02703446	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
UNITY HS CAYUGA CO INC DAY	161081372	02703359	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
UNITY HS CAYUGA CO INC DAY	161081372	02703359	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
UNITY HS CAYUGA CO INC DAY	161081372	02703359	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
UNITY HS CAYUGA CO INC DAY	161081372	02703359	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
URBAN LEAGUE OF ROCHESTE DAY	160906150	02703464	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
URBAN LEAGUE OF ROCHESTE DAY	160906150	02703464	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
URBAN LEAGUE OF ROCHESTE DAY	160906150	02703464	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
URBAN LEAGUE OF ROCHESTE DAY	160906150	02703464	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
VANDERHEYDEN HALL INC DAY	141338575	02952601	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
VANDERHEYDEN HALL INC DAY	141338575	02952601	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
VANDERHEYDEN HALL INC DAY	141338575	02952601	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
VANDERHEYDEN HALL INC DAY	141338575	02952601	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
VICTOR ASSOC CULT ARTS DAY	222511852	02703377	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
VICTOR ASSOC CULT ARTS DAY	222511852	02703377	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
VICTOR ASSOC CULT ARTS DAY	222511852	02703377	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
VICTOR ASSOC CULT ARTS DAY	222511852	02703377	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
WARREN WASHINGTON ARC DAY	141560053	02703340	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-FEB-2013	$121.92	01-FEB-13	$121.92	01-JAN-14	$ 120.75	01-JAN-15	$ 121.98	01-APR-15	$ 123.51	01-JUN-15	$ 123.24
WARREN WASHINGTON ARC DAY	141560053	02703340	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-FEB-2013	$66.76	01-FEB-13	$66.76	01-JAN-14	$ 66.18	01-JAN-15	$ 66.79	01-APR-15	$ 67.56	01-JUN-15	$ 67.42
WARREN WASHINGTON ARC DAY	141560053	02703340	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
WARREN WASHINGTON ARC DAY	141560053	02703340	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
WARREN WASHINGTON ARC DAY	141560053	02703340	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
WARREN WASHINGTON ARC DAY	141560053	02703340	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
WAYNE CO CHAP NYSARC DAY	237540582	02703331	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$111.46	01-JUL-11	$111.46	01-JAN-14	$ 112.59	01-JAN-15	$ 112.38	01-APR-15	$ 113.85	01-JUN-15	$ 113.91
WAYNE CO CHAP NYSARC DAY	237540582	02703331	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$58.27	01-JUL-11	$58.27	01-JAN-14	$ 59.03	01-JAN-15	$ 58.72	01-APR-15	$ 59.46	01-JUN-15	$ 59.49
WAYNE CO CHAP NYSARC DAY	237540582	02703331	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
WAYNE CO CHAP NYSARC DAY	237540582	02703331	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
WAYNE CO CHAP NYSARC DAY	237540582	02703331	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
WAYNE CO CHAP NYSARC DAY	237540582	02703331	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$113.69	01-JAN-13	$112.84	01-JAN-14	$ 111.69	01-JAN-15	$ 112.06	01-APR-15	$ 113.47	01-JUN-15	$ 127.18
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$56.85	01-JAN-13	$56.42	01-JAN-14	$ 55.84	01-JAN-15	$ 56.03	01-APR-15	$ 56.74	01-JUN-15	$ 63.59
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
WESTCHESTER CHAP NYSARC DAY	131740065	02703322	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
WILDWOOD PROGRAMS INC DAY	222132752	02703473	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$152.95	01-JUL-11	$152.95	01-JAN-14	$ 154.89	01-JAN-15	$ 153.85	01-APR-15	$ 155.25	01-APR-15	$ 155.25
WILDWOOD PROGRAMS INC DAY	222132752	02703473	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$76.47	01-JUL-11	$76.47	01-JAN-14	$ 78.67	01-JAN-15	$ 76.93	01-APR-15	$ 77.62	01-APR-15	$ 77.62
WILDWOOD PROGRAMS INC DAY	222132752	02703473	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
WILDWOOD PROGRAMS INC DAY	222132752	02703473	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
WILDWOOD PROGRAMS INC DAY	222132752	02703473	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
WILDWOOD PROGRAMS INC DAY	222132752	02703473	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
WOMENS LEAGUE COMM RES DAY	112889774	02703400	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
WOMENS LEAGUE COMM RES DAY	112889774	02703400	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
WOMENS LEAGUE COMM RES DAY	112889774	02703400	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
WOMENS LEAGUE COMM RES DAY	112889774	02703400	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
YAI DAY	112030172	02704447	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2012	$85.97	01-JUL-12	$85.97	01-JUL-13	$ 86.23	01-JAN-15	$ 119.67	01-APR-15	$ 121.93	01-JUN-15	$ 126.81
YAI DAY	112030172	02704447	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2012	$42.98	01-JUL-12	$42.98	01-JUL-13	$ 43.11	01-JAN-15	$ 60.56	01-APR-15	$ 61.69	01-JUN-15	$ 64.13
YAI DAY	112030172	02704447	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
YAI DAY	112030172	02704447	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
YAI DAY	112030172	02704447	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
YAI DAY	112030172	02704447	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
YATES CNTY CHAP NYSARC DAY	161086091	02703395	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JAN-2012	$112.35	01-JAN-13	$81.62	01-JAN-14	$ 81.62	01-JAN-15	$ 81.41	01-APR-15	$ 82.42	01-JUN-15	$ 84.25
YATES CNTY CHAP NYSARC DAY	161086091	02703395	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JAN-2012	$56.89	01-JAN-13	$41.52	01-JAN-14	$ 41.52	01-JAN-15	$ 41.42	01-APR-15	$ 41.92	01-JUN-15	$ 42.84
YATES CNTY CHAP NYSARC DAY	161086091	02703395	024	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	88.32	01-APR-15	$ 89.45	01-APR-15	$ 89.45
YATES CNTY CHAP NYSARC DAY	161086091	02703395	024	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	176.64	01-APR-15	$ 178.89	01-APR-15	$ 178.89
YATES CNTY CHAP NYSARC DAY	161086091	02703395	026	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	101.2	01-APR-15	$ 102.55	01-APR-15	$ 102.55
YATES CNTY CHAP NYSARC DAY	161086091	02703395	026	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	202.4	01-APR-15	$ 205.09	01-APR-15	$ 205.09
YEDEI CESED INC DAY	133728771	02703386	004	4464	PRE VOC; VOL; FULL UNIT	DAY (1)	01-JUL-2011	$198.01	01-JUL-11	$198.01	01-JUL-11	$ 198.01	01-JAN-15	$ 199.38	01-APR-15	$ 201.03	01-JUN-15	$ 201.03
YEDEI CESED INC DAY	133728771	02703386	004	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)	01-JUL-2011	$99.01	01-JUL-11	$99.01	01-JUL-11	$ 99.01	01-JAN-15	$ 99.69	01-APR-15	$ 100.52	01-JUN-15	$ 100.52
YEDEI CESED INC DAY	133728771	02703386	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
YEDEI CESED INC DAY	133728771	02703386	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
YEDEI CESED INC DAY	133728771	02703386	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
YEDEI CESED INC DAY	133728771	02703386	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08
YOUNG ADULTS W/SPEC ABILITIES DAY	113586205	02950058	023	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	98.1	01-APR-15	$ 99.35	01-APR-15	$ 99.35
YOUNG ADULTS W/SPEC ABILITIES DAY	113586205	02950058	023	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	196.22	01-APR-15	$ 198.70	01-APR-15	$ 198.70
YOUNG ADULTS W/SPEC ABILITIES DAY	113586205	02950058	025	4465	PRE VOC; VOL; HALF UNIT	HALF DAY (1)							01-JAN-15	109.11	01-APR-15	$ 110.54	01-APR-15	$ 110.54
YOUNG ADULTS W/SPEC ABILITIES DAY	113586205	02950058	025	4464	PRE VOC; VOL; FULL UNIT	DAY (1)							01-JAN-15	218.22	01-APR-15	$ 221.08	01-APR-15	$ 221.08

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
A VERY SPECIAL PLACE INC SPV	133005006	02254442	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,946.24	01-FEB-13	$7,946.24	01-FEB-14	$ 7,946.24
ABBOTT HOUSE IRA SPV	131991946	02257812	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,312.25	01-FEB-13	$9,982.08	01-FEB-14	$ 9,982.08
ABILITIES FIRST INC SPV	141467427	02248915	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,642.34	01-FEB-13	$4,632.60	01-FEB-14	$ 6,020.20
ABILITY BEYOND DISAB SPV	141758770	02246720	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$11,025.35	01-FEB-13	$11,025.35	01-APR-14	$ 11,485.52
ABLE2 ENHANCING POTENTIAL, INC SPV	161091767	02253547	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,886.95	01-FEB-13	$8,872.39	01-FEB-14	$ 9,960.96
ACLD SPV	116042250	02245912	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,685.88	01-FEB-13	$7,685.88	01-FEB-14	$ 7,685.88
ADULT RETARDATES CENTER SPV	111986300	02246046	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$3,421.16	01-FEB-13	$3,421.16	01-FEB-14	$ 3,419.06
ADVOCATES FOR SERVICES SPV	112685324	02246064	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,345.91	01-FEB-13	$8,345.91	01-FEB-14	$ 8,345.91
AID TO DEV DISABLED SPV	112573451	02246211	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,274.61	01-FEB-13	$7,246.97	01-FEB-14	$ 7,217.00
AIM SERVICES INC SPV	141609398	02246326	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,379.28	01-FEB-13	$6,331.35	01-FEB-14	$ 6,324.75
AIM SERVICES INC ND 3	141609398	02681978	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-OCT-2006	$5,939.04	03-JAN-07	$0.00	03-JAN-07	$ -
ALBANY CO CHAP NYSARC SPV	141392181	02246380	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,230.49	03-FEB-13	$0.00	03-FEB-13	$ -
ALLEGANY CO CHAP NYSARC SPV	161021588	02246775	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,707.58	01-FEB-13	$5,704.24	01-FEB-14	$ 5,704.49
ANDERSON CENTER SERVICES INC SPV	222923873	02245696	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,170.90	01-FEB-13	$9,407.33	01-FEB-14	$ 9,568.73
ANGELS UNAWARE INC SPV	133753509	02245747	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,343.10	01-FEB-13	$7,343.10	01-FEB-14	$ 7,446.93
ANOTHER STEP INC SPV	133680851	02517426	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,659.05	01-FEB-13	$8,659.05	01-FEB-14	$ 8,722.69
ASPIRE OF WNY INC ND 12	160757756	02839467	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-DEC-2006	$8,436.07	03-JAN-07	$0.00	03-JAN-07	$ -
ASPIRE OF WNY SPV	160757756	02257472	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,950.51	01-FEB-13	$7,939.04	01-FEB-14	$ 7,913.93
ASSN F/NEUR IMP BRAIN INJ SPV	112348663	02337988	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,905.93	01-FEB-13	$5,925.50	01-FEB-14	$ 5,898.09
ASSOC F/CHILD W/DOWN SYN SPV	237175975	02253923	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,504.71	01-FEB-13	$6,504.77	01-FEB-14	$ 6,495.63
ASSOC F/T ADV BLIND AND RET N	131968035	02663234	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$7,631.41	03-JAN-07	$0.00	03-JAN-07	$ -
ASSOC FOR ADV BLIND & RET SPV	131968035	02245783	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,344.32	01-FEB-13	$7,344.32	01-FEB-14	$ 7,344.32
ASSOC MENT ILL CHILD WEST SPV	132554243	02245765	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$3,921.32	01-FEB-13	$3,916.97	01-FEB-14	$ 3,916.06
AUTISTIC SERVICES INC ND 4	161185024	02740467	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-DEC-2006	$7,601.16	03-JAN-07	$0.00	03-JAN-07	$ -
AUTISTIC SERVICES INC SPV	161185024	02245834	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,181.21	01-FEB-13	$7,151.17	01-FEB-14	$ 7,131.01
BAKER VICTORY SERVICES SPV	161017453	02687965	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,883.18	01-FEB-13	$10,419.83	01-FEB-14	$ 10,411.77
BIRCH FAMILY SVCS INC SPV	112503193	02247170	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$12,556.79	01-FEB-13	$12,969.40	01-FEB-14	$ 12,904.90
BLOCK INSTITUTE SPV	112416320	02259543	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,511.29	01-FEB-13	$6,990.69	01-FEB-14	$ 6,971.53
BROOME-TIOGA CO CHAP NYSARC SPV	150619307	02246082	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,543.14	01-FEB-13	$4,528.04	01-FEB-14	$ 4,520.71
CAMP VENTURE INC SPV	132661988	02252968	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,872.87	01-FEB-13	$6,867.06	01-FEB-14	$ 6,567.58
CAMPHILL HUDSON INC SPV	264101808	03265203	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,997.50	01-FEB-13	$4,997.50	01-FEB-14	$ 4,997.50
CARDINAL MCCLOSKEY SCHOOL SPV	131740443	02245756	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,224.14	01-FEB-13	$10,224.14	01-FEB-14	$ 10,224.14
CATH CHAR NGHBHD SVCS INC SPV	112047151	02608280	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,797.79	01-FEB-13	$10,949.84	01-JUN-14	$ 10,949.84
CATH CHARITIES DIO ROCH SPV	160743944	02620919	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$3,408.69	01-FEB-13	$3,406.03	01-FEB-14	$ 3,408.41
CATHOLIC CHAR DIO RVC SPV	111843801	02245930	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010579	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010588	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010597	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010602	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010611	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010620	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010639	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010648	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010657	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR DIO RVC SPV	111843801	03010666	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,906.32	01-FEB-13	$6,700.87	01-FEB-14	$ 6,755.26
CATHOLIC CHAR OF CHENANGO CO SPV	161307983	03187762	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,542.38	01-FEB-13	$7,542.38	01-FEB-14	$ 7,542.38
CATHOLIC CHARITIES DDS SPV	141340033	02245985	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,478.83	01-FEB-13	$10,478.83	01-FEB-14	$ 10,521.10
CATHOLIC CHARITIES/BROOME/SPV	161170407	02859332	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,617.91	01-FEB-13	$8,582.62	01-FEB-14	$ 8,572.26
CATHOLIC GUARDIAN SOCIETY SPV	135562186	02253978	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,976.38	01-FEB-13	$10,205.28	01-FEB-14	$ 10,205.28
CATTARAUGUS CO NYSARC SPV	160818293	02246019	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,543.31	01-FEB-13	$6,540.45	01-FEB-14	$ 6,541.82

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
CDS MONARCH INC SPV	161089115	02246606	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,673.91	01-FEB-13	$5,658.92	01-FEB-14	$ 5,650.61
CENTER F/DISAB SVCS SPV	141425851	02250053	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,653.68	01-FEB-13	$7,632.98	01-FEB-14	$ 7,614.95
CENTER F/RAPID RECVRY SPV	113246332	02257918	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,166.20	01-FEB-13	$7,166.20	01-FEB-14	$ 7,166.20
CENTER FOR DEVELOP DISAB SPV	111874383	02256499	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,738.85	01-FEB-13	$8,738.85	01-MAR-14	$ 9,464.70
CHAUTAUQUA CO CHAP ARC SPV	160968914	02245967	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,851.68	01-FEB-13	$6,882.89	01-APR-14	$ 6,923.49
CHEMUNG CO CHAP ARC SPV	160795709	02245994	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,141.18	01-FEB-13	$6,125.15	01-FEB-14	$ 6,251.50
CHENANGO CO CHAP NYSARC SPV	160970103	02359777	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,061.91	01-FEB-13	$6,061.91	01-FEB-14	$ 4,631.79
CHINESE AMERICAN PLAN SPV	136202692	02246317	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,081.42	01-FEB-13	$8,081.42	01-FEB-14	$ 8,081.42
CITIZEN ADVOCATES INC SPV	141577715	02255067	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,573.75	01-FEB-13	$6,519.49	01-MAR-14	$ 6,520.06
CLADDAGH COMMISSION SPV	161096096	02246353	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,469.29	01-FEB-13	$5,458.03	01-FEB-14	$ 5,449.20
CLINTON CO CHAPTER NYSARC SPV	141463735	02247189	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,637.01	01-FEB-13	$7,637.01	01-FEB-14	$ 7,863.14
CNTRO SOC LA ESPERNZA SPV	132688412	02245903	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,747.36	01-FEB-13	$6,747.36	01-FEB-14	$ 6,964.45
COLUMBIA COUNTY CHAP ARC SPV	141489603	02247203	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,018.29	01-FEB-13	$4,890.61	01-FEB-14	$ 5,686.28
COMM LIVING CORP SPV	133563609	02247258	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,790.26	01-FEB-13	$6,782.69	01-FEB-14	$ 7,540.89
COMM MAINSTREAMING INC ND 3	237448487	02840453	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$7,988.51	03-JAN-07	$0.00	03-JAN-07	$ -
COMM MAINSTREAMING INC SPV	237448487	02259561	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,134.28	01-FEB-13	$7,233.49	01-FEB-14	$ 7,343.23
COMM RESOURCE CTR F/DD SPV	132954788	02246500	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,103.71	01-FEB-13	$10,103.71	01-FEB-14	$ 10,103.71
COMM SVCS F/T DEV DISAB ND 12	161317369	02839458	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-NOV-2006	$6,781.84	03-JAN-07	$0.00	03-JAN-07	$ -
COMM SVCS F/T DEV DISABIL SPV	161317369	02253469	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,782.98	01-FEB-13	$7,782.74	01-FEB-14	$ 8,114.70
COMMUNITY ACTION F/HUM SV SPV	222317376	02279849	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,258.94	01-FEB-13	$7,258.94	01-FEB-14	$ 7,241.27
COMMUNITY BASED SER INC SPV	133070655	02559424	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,277.51	01-FEB-13	$9,827.53	01-FEB-14	$ 9,583.30
COMMUNITY OPTIONS NY SPV	113414724	02259598	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,693.93	01-FEB-13	$8,811.67	01-JUN-14	$ 8,925.23
COMMUNITY PROGS OF WJCS SPV	132985945	02247336	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,682.92	01-FEB-13	$8,682.92	01-FEB-14	$ 8,682.92
COMMUNITY RESOURCES SPV	135660279	02625152	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,965.25	01-FEB-13	$8,965.25	01-FEB-14	$ 8,965.25
COMMUNITY WORK & INDEPEND SPV	141470091	02246528	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-MAR-2013	$9,543.59	01-MAR-13	$9,567.66	01-FEB-14	$ 9,570.84
CONTINUING DEVELOP SVCS ND 4	161089115	02826180	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-DEC-2006	$12,184.30	03-JAN-07	$0.00	03-JAN-07	$ -
CREATIVE LIFESTYLES SPV	113151481	02255094	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,299.57	01-FEB-13	$7,299.57	01-FEB-14	$ 7,299.57
CROSSROADS UNLIMITED SPV	710967724	02728485	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,530.94	01-FEB-13	$10,530.94	01-FEB-14	$ 10,963.08
CRYSTAL RUN VILLAGE INC SPV	112466996	02246711	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,486.31	01-FEB-13	$7,448.08	01-FEB-14	$ 7,630.09
CTR FOR FAMILY SUPPORT SPV	131913807	02246106	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,579.32	01-FEB-13	$8,618.44	01-MAR-14	$ 9,096.29
DELAWARE CO CHAP NYSARC SPV	160976343	02599842	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,355.30	01-FEB-13	$4,349.75	01-FEB-14	$ 4,339.75
DEPAUL DEV SERVICES SPV	202017098	02734701	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,999.54	01-FEB-13	$7,999.54	01-FEB-14	$ 7,999.54
DEVELOPMENTAL DIS INST SPV	116077347	02246748	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$13,017.04	01-FEB-13	$13,017.04	01-MAY-14	$ 13,017.04
DEVEREUX FOUNDATION SPV	231390618	02246757	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,850.31	01-FEB-13	$6,930.13	01-MAY-14	$ 7,141.96
E DOUGLIN CTR/SERV PPLE SPV	113356044	02246688	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,588.89	01-FEB-13	$9,677.52	01-JUN-14	$ 10,319.25
EAST END DISABILITY ASSOC SPT	113318718	02259709	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,751.24	01-FEB-13	$8,751.24	01-FEB-14	$ 8,751.24
EAST HARLEM COUN F/COMM SPV	132969933	02256513	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,849.94	01-MAR-13	$9,849.94	01-FEB-14	$ 9,849.94
EASTER SEALS NEW YORK INC SPV	135596808	02257252	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,455.07	01-FEB-13	$8,455.07	01-FEB-14	$ 8,598.57
EDEN II SCHOOL SPV	132872916	02460286	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$13,483.46	01-FEB-13	$13,483.46	01-FEB-14	$ 13,483.46
EDWIN GOULD SVCS/CHILD SPV	135675643	02246766	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,770.52	01-MAR-13	$10,690.81	01-FEB-14	$ 11,264.05
EIHAB HUMAN SERVICES SPV	113376415	02246784	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,809.39	01-FEB-13	$8,809.39	01-FEB-14	$ 8,854.60
ELMCREST CHILDRENS CENTER INC SPV	150539090	02952885	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,733.09	01-FEB-13	$8,733.09	01-FEB-14	$ 8,733.09
ELMYS SPECIAL SERVICES INC SPV	020590957	03082560	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,452.71	01-FEB-13	$7,452.71	01-APR-14	$ 9,224.82
EPILEPSY ASSOC/ROCHESTER SPV	222146295	02246399	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,243.59	01-FEB-13	$5,236.03	03-MAY-13	$ -
EPILEPSY FOUNDATION LI SPV	111821135	02714785	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,425.58	01-FEB-13	$8,425.58	01-APR-14	$ 8,466.94
EPISCOPAL SOCIAL SERVICES SPV	133709095	02246440	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,490.98	01-FEB-13	$8,490.98	01-FEB-14	$ 8,494.81
ERIE COUNTY ARC SPV	160769044	02246555	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,870.10	01-FEB-13	$5,879.75	01-FEB-14	$ 5,842.61
ESSEX COUNTY CHAP NYSARC SPV	141563885	02246642	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,263.71	01-FEB-13	$8,944.58	01-MAY-14	$ 9,048.14
FED EMPLOY & GUIDANCE SVC SPV	131624000	02246995	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,204.66	01-FEB-13	$9,204.66	01-JUN-14	$ 9,437.08
FEDERATION/MULTICULTURAL PROG SPV	112422505	02934494	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,307.03	01-FEB-13	$4,562.88	01-FEB-14	$ 4,616.05

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
FINGER LAKES UCP INC SPV	160965912	02687869	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,857.09	01-FEB-13	$7,857.09	01-FEB-14	$ 7,857.09
FRANKLIN CO NYSARC SPV	237150954	02249874	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,130.48	01-FEB-13	$7,116.23	01-MAR-14	$ 7,442.22
FRANZISKA RACKER CENTERS SPV	150581887	02246968	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,851.69	01-FEB-13	$7,974.43	01-MAY-14	$ 8,617.73
FREE SUPERVISED IRA SPV	112420547	02247029	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,426.08	01-MAR-13	$8,472.21	01-APR-14	$ 9,088.21
FULTON CO ARC SPV	146020996	02463129	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,401.25	01-FEB-13	$9,419.46	01-FEB-14	$ 9,559.15
GAN KAVOD INC SPV	223032483	03057669	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$14,450.90	01-FEB-13	$14,450.90	01-FEB-14	$ 14,450.90
GATEWAY COMM INDUSTRIES INC SPV	141458757	03370472	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,461.48	01-FEB-13	$4,469.91	01-FEB-14	$ 4,482.44
GENERAL HUMAN OUTREACH SPV	113134570	02247092	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,333.72	01-FEB-13	$7,333.72	01-FEB-14	$ 7,337.55
GENESEE CO ARC SPV	161001185	02247107	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,076.49	01-FEB-13	$6,059.60	01-FEB-14	$ 6,012.03
GRACE LUTHERAN RES SVC SPV	161554927	02247125	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,419.27	01-FEB-13	$6,416.66	01-FEB-14	$ 6,424.29
GREYSTONE PROGRAMS INC SPV	141608318	02247152	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,177.64	01-FEB-13	$9,177.64	01-FEB-14	$ 9,177.64
GROTON COMM HLTH CARE CTR SPV	237300255	02252913	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,862.68	01-FEB-13	$6,862.68	01-FEB-14	$ 6,866.51
GUILD F/EXCEPTIONAL CHILD ND4	116037766	02408340	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-AUG-2006	$3,845.13	03-JAN-07	$0.00	03-JAN-07	$ -
GUILD F/EXCEPTIONAL CHILD ND5	116037766	02519015	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-AUG-2006	$3,576.34	03-JAN-07	$0.00	03-JAN-07	$ -
GUILD F/EXCEPTIONAL CHILD SPV	116037766	02247010	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,848.02	01-FEB-13	$7,938.73	01-FEB-14	$ 7,938.73
HAMASPIK OF ORANGE CO SPV	141711583	02248295	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,924.83	01-FEB-13	$6,924.83	01-FEB-14	$ 6,924.83
HANDICAPPED CHILD SO NY SPV	150516395	02247038	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,313.65	01-FEB-13	$8,368.91	01-JUN-14	$ 9,189.34
HASC CENTER INC ND 13	112630071	02803538	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$6,838.49	03-JAN-07	$0.00	03-JAN-07	$ -
HASC CENTER INC SPV	112630071	02247056	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,126.68	01-MAR-13	$9,260.67	01-FEB-14	$ 9,234.87
HAWTHORNE FOUNDATION INC SPV	133447893	02247116	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,255.78	01-FEB-13	$8,055.11	01-FEB-14	$ 8,038.03
HCA OF SOUTHERN NY INC ND 7	150516395	02838631	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$9,506.91	03-JAN-07	$0.00	03-JAN-07	$ -
HEAD INJURY ASSOCIATION INC SPV	112946185	02256568	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,809.24	01-FEB-13	$8,809.24	01-APR-14	$ 9,632.75
HEARTSHARE HUMAN SERVICES SPV	111633549	02247143	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,934.42	02-MAR-13	$9,175.98	01-FEB-14	$ 9,208.68
HELEN KELLER SVCS F/T BLD SPV	111630807	02315768	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,925.41	01-FEB-13	$7,925.41	01-FEB-14	$ 10,857.17
HERITAGE CHRISTIAN SVCS ND16	222334190	02826171	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$8,056.49	03-JAN-07	$0.00	03-JAN-07	$ -
HERITAGE CHRISTIAN SVCS SPV	222334190	02247276	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,019.25	01-MAR-13	$7,990.52	01-APR-14	$ 8,199.25
HERKIMER CO CHAP NYSARC SPV	160973231	02247309	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,089.27	01-FEB-13	$5,081.92	01-MAY-14	$ 5,168.45
HILLSIDE CHILDRENS CTR SPV	160743039	02247212	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,884.43	01-FEB-13	$10,884.43	01-FEB-14	$ 10,884.43
HUMAN CARE SVCS F/FAM CH SPV	113338946	02254171	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,983.44	01-FEB-13	$9,983.44	01-FEB-14	$ 9,983.44
HUMAN FIRST INC SPV	113590136	03528301	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)					01-MAR-14	11900.58
IBERO AMERICAN ACT LEAGUE SPV	160954745	02252922	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,582.06	01-FEB-13	$6,568.71	01-FEB-14	$ 6,539.75
ICL JOSELOW HOUSE INC SPV	134053788	02753097	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,054.34	01-FEB-13	$8,054.34	01-FEB-14	$ 8,054.34
IN FLIGHT INC SPV	141764481	02247294	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,766.40	01-FEB-13	$8,766.40	01-FEB-14	$ 8,766.46
INDEPENDENCE RESIDENCES SPV	133490223	02255163	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,590.33	01-MAR-13	$9,108.88	01-FEB-14	$ 9,367.01
INDEPENDENT GR HM LIVING SPV	112458584	02247327	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,767.65	01-FEB-13	$8,781.99	01-FEB-14	$ 9,027.38
INDEPENDENT LIVING ASSN SPV	112729771	02378063	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$12,270.99	01-FEB-13	$12,270.99	01-FEB-14	$ 12,270.99
INST OF APPLIED HUMAN DYN SPV	132573827	02256540	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,304.99	01-FEB-13	$8,304.99	01-FEB-14	$ 8,304.99
INSTITUTE FOR COMM LIVING SPV	133306195	02256531	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,505.07	01-FEB-13	$9,505.07	01-APR-14	$ 9,666.09
JAMAICA HOSPITAL MED CTR SPV	111631788	02247390	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,872.40	01-FEB-13	$6,872.40	01-FEB-14	$ 6,829.08
JAWONIO INC SPV	131761660	02247432	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,412.56	01-FEB-13	$10,412.56	01-FEB-14	$ 10,412.56
JEFFERSON REHABILITATION SPV	161134631	02247487	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,441.20	01-FEB-13	$4,441.74	01-FEB-14	$ 4,443.44
JEWISH BOARD OF FAM CHILD SPV	135564937	02253414	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,541.03	01-FEB-13	$10,541.03	01-FEB-14	$ 10,541.03
JOB PATH INC SPV	134038495	02386881	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,716.89	01-FEB-13	$8,716.89	01-FEB-14	$ 8,716.89
JOSHUA HOUSE INC SPV	161427778	02257261	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,710.40	01-FEB-13	$6,696.47	01-FEB-14	$ 7,781.21
KELBERMAN CTR INC SPV IRA	550901293	03697638	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)					01-FEB-14	12113.06
L ARCHE SYRACUSE INC SPV	161085314	02255118	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,101.81	01-FEB-13	$7,101.81	01-FEB-14	$ 7,101.81
LEAKE AND WATTS SVCS INC SPV	131860451	02781060	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,665.20	01-FEB-13	$9,791.77	01-FEB-14	$ 9,791.77
LEARNING DISAB ASSOC WNY SPV	161118058	02247592	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,472.09	01-FEB-13	$6,471.20	01-FEB-14	$ 6,474.07
LEARNING DISABIL/GEN VAL SPV	222702285	02247616	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,108.69	01-FEB-13	$6,154.50	01-FEB-14	$ 6,148.08
LIBERTY RESOURCES INC SPV	161129675	02256559	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,719.78	01-FEB-13	$8,641.88	01-FEB-14	$ 8,666.72

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
LIBERTY/MONTGOMERY ARC SPV	141506257	02617792	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,766.26	01-FEB-13	$9,757.26	01-MAR-14	$ 9,841.30
LIFE ADJUSTMENT CENTER SPV	133620577	02247372	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,255.70	01-FEB-13	$7,255.70	01-FEB-14	$ 7,255.70
LIFESPIRE INC SPV	132526022	02247414	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,733.87	01-FEB-13	$7,733.87	01-FEB-14	$ 7,733.87
LIFETIME ASSISTANCE INC SPV	222221158	02253432	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,380.45	01-FEB-13	$8,389.43	01-FEB-14	$ 8,439.54
LITTLE FLOWER CHILDRENS SPV	111633572	02320107	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,049.99	01-FEB-13	$8,573.20	01-APR-14	$ 8,620.43
LITTLE VILLAGE HOUSE SPV	112881075	02758276	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,632.14	01-FEB-13	$8,632.14	01-FEB-14	$ 8,632.14
LIVING EXPLORING ALL POSS SPV	161467182	02247565	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,850.37	01-FEB-13	$7,850.37	01-FEB-14	$ 7,850.38
LIVING RESOURCES CORP ND 6	141564208	02742616	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$11,978.80	03-JAN-07	$0.00	03-JAN-07	$ -
LIVING RESOURCES CORP SPV	141564208	02247441	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,513.66	01-FEB-13	$5,491.86	01-JUN-14	$ 5,675.75
LIVINGSTON WYOMING ARC ND 5	161022565	02513500	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-NOV-2006	$8,221.62	03-JAN-07	$0.00	03-JAN-07	$ -
LIVINGSTON WYOMING ARC ND 6	161022565	02513546	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$7,066.51	03-JAN-07	$0.00	03-JAN-07	$ -
LIVINGSTON WYOMING ARC SPV	161022565	02513486	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,278.21	01-FEB-13	$5,561.63	01-FEB-14	$ 5,556.44
LOCHLAND SCHOOL INC SPV	160780944	02248328	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,401.33	01-FEB-13	$7,396.29	01-FEB-14	$ 7,394.74
MADISON CORTLAND NYSARC SPV	160958020	02256586	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,596.78	01-FEB-13	$5,576.78	01-FEB-14	$ 5,617.36
MARANATHA HUMAN SERVICES SPV	141755068	02248391	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,474.28	01-FEB-13	$8,444.88	01-FEB-14	$ 8,429.28
MARY CARIOLA CHILD CTR SPV	160771078	02416035	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$12,946.70	01-FEB-13	$12,946.70	01-FEB-14	$ 12,946.70
MARYHAVEN CENTER OF HOPE SPV	112861698	02248497	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,842.71	01-FEB-13	$7,539.72	01-APR-14	$ 7,431.97
MENORAH PARK GROUP RESIDENCES SPV	262639157	03035921	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,552.18	01-FEB-13	$5,552.18	01-FEB-14	$ 5,552.18
MENTAL HEALTH ASSOC OF NASSAU SPV	111710983	03154363	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,540.46	01-FEB-13	$9,540.46	01-FEB-14	$ 9,540.46
MERCY HOME FOR CHILDREN SPV	111666227	02254204	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,508.26	01-FEB-13	$8,508.26	01-FEB-14	$ 8,508.26
MISSION OF IMMAC VIRGIN SPV	135562286	02253478	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,541.63	01-FEB-13	$8,541.63	01-FEB-14	$ 8,526.41
MODEST COMMUNITY SERVICES ASSOC SPV	134288916	03075183	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,399.09	01-FEB-13	$8,399.09	01-FEB-14	$ 8,289.61
MONROE CO CHAP NYSARC SPV	160835172	02248608	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,798.25	01-FEB-13	$5,788.42	01-FEB-14	$ 6,112.66
MULTI COUNTY CDC SPV	141558673	02248671	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,997.28	01-FEB-13	$7,757.19	01-FEB-14	$ 7,716.51
NASSAU CO AHRC INC SPV	261520311	03045301	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,127.31	01-FEB-13	$8,127.31	01-APR-14	$ 10,088.31
NASSAU CO CHAP NYSAHRC SPV	111720254	02248855	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,681.20	01-MAR-13	$7,747.37	01-FEB-14	$ 7,747.37
NEW HOPE COMMUNITY INC SPV	222871755	02248795	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,780.07	01-FEB-13	$7,672.77	01-FEB-14	$ 8,088.46
NEW HORIZONS RESOURCES SPV	524862107	02248819	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,042.52	01-FEB-13	$8,040.56	01-FEB-14	$ 8,522.13
NEW YORK FOUNDLING HOSP ND 2	131624123	02812004	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-NOV-2006	$8,218.66	03-JAN-07	$0.00	03-JAN-07	$ -
NEW YORK FOUNDLING HOSP SPV	131624123	02254222	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,486.49	01-FEB-13	$10,486.49	01-JUN-14	$ 10,745.61
NYSARC DUTCHESS CNTY SPV	146077915	02253670	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,356.96	01-FEB-13	$5,342.76	01-FEB-14	$ 6,323.08
NYSARC INC NYC CHAPTER SPV	135596746	02248933	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,192.78	01-FEB-13	$10,192.78	01-MAY-14	$ 9,764.98
NYSARC INC ORANGE CNTY SPV	141462340	02259589	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,338.03	01-FEB-13	$6,355.20	01-FEB-14	$ 6,355.57
NYSARC INC SUFFOLK CHAP SPV	111845294	02249856	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,335.51	01-FEB-13	$5,299.62	01-JUN-14	$ 5,368.34
NYSARC NIAGARA CO CHAP SPV	160794847	02253496	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,668.74	01-FEB-13	$4,664.17	01-FEB-14	$ 4,910.14
OCCUPATIONS INC SPV	141471097	02248988	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$11,949.62	01-FEB-13	$11,933.09	01-MAY-14	$ 10,607.94
OHEL CHILDRENS HM/FAM SPV	116078704	02750594	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,625.16	01-FEB-13	$8,625.16	01-APR-14	$ 8,629.05
ON YOUR MARK INC SPV	133128315	02548561	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,443.99	01-FEB-13	$7,443.99	01-FEB-14	$ 7,470.80
ONONDAGA CO CHAP NYSARC SPV	150561718	02249076	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,736.65	01-FEB-13	$5,728.63	01-FEB-14	$ 5,682.54
ONONDAGA COMM LIVING SPV	161275425	02254286	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,524.73	01-FEB-13	$5,524.74	01-FEB-14	$ 5,528.57
ONTARIO ARC SPV	160786219	02360552	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,920.13	01-FEB-13	$5,906.64	01-MAY-14	$ 6,188.04
OPENGATE INC SPV	132634269	02249127	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,174.23	01-FEB-13	$7,174.23	01-FEB-14	$ 8,259.35
ORLEANS COUNTY CHAP ARC SPV	237150957	02249163	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,476.99	01-FEB-13	$5,459.92	01-FEB-14	$ 5,652.67
OSWEGO CO OPPORTUNITIES SPV	160979876	02249181	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,184.04	01-FEB-13	$5,186.94	01-FEB-14	$ 5,202.08
OTSEGO COUNTY CHAP NYSARC SPV	160953477	02249205	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,976.84	01-FEB-13	$8,104.95	01-MAR-14	$ 7,956.49
PARENTAL LOVING CARE INC SPV	133986940	02248268	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,751.16	01-FEB-13	$9,751.16	01-FEB-14	$ 9,751.16
PARTNERSHIP FOR INNOV CC SPV	133537258	02248286	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,448.57	01-FEB-13	$8,448.57	01-NOV-13	$ -
PATHFINDER VILLAGE INC SPV	150618744	02248346	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,261.57	01-FEB-13	$4,221.13	01-FEB-14	$ 4,224.96
PATHWAYS INC SPV	161089007	02248406	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,695.72	01-FEB-13	$6,682.80	01-FEB-14	$ 6,672.67
PAUL J COOPER CTR/ H S SPV	112245967	02257385	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,291.49	01-FEB-13	$8,291.49	01-FEB-14	$ 8,291.49

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
PEOPLE INC - HCBS IRA 9 SPV	160975538	02248479	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,389.10	01-FEB-13	$6,630.20	01-FEB-14	$ 6,799.70
PERSON CENTERED CARE SERVICES SPV	202878791	02952876	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,780.42	01-FEB-13	$10,780.42	01-FEB-14	$ 10,754.04
PLUS GROUP HOMES INC SPV	112530267	02248548	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,309.95	01-FEB-13	$9,309.95	01-FEB-14	$ 9,309.95
PRALID INC SPV	161422825	02248617	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$11,790.00	01-FEB-13	$11,674.68	01-FEB-14	$ 9,254.34
PROGRAM DEVELOPMENT SVCS SPV	112715916	02257270	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,938.58	01-FEB-13	$8,938.58	01-FEB-14	$ 8,938.58
PROJECT INDEPENDENCE INC SPV	161173031	02581579	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$2,731.18	01-FEB-13	$2,731.18	01-FEB-14	$ 2,735.01
PROVIDER HAMASPIK KINGS SPV	161522895	02248277	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,894.50	01-FEB-13	$10,894.50	01-JUN-14	$ 10,894.50
PROVIDER HAMASPIK ROCKLD SPV	133978518	02248319	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,314.25	01-FEB-13	$8,314.25	01-FEB-14	$ 8,314.26
PSCH INC SPV	112542430	02248337	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,296.91	01-FEB-13	$8,296.91	01-MAY-14	$ 8,517.79
PSCH ND 15	112542430	02839412	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$9,661.20	03-JAN-07	$0.00	03-JAN-07	$ -
PUERTO RICAN FAMILY INST SPV	136167177	02366190	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,204.54	01-FEB-13	$7,204.54	01-FEB-14	$ 7,204.54
PUTNAM COUNTY CHAP NYSARC SPV	141426729	02248373	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,797.87	01-FEB-13	$6,797.87	01-FEB-14	$ 6,797.87
QSAC SPV	112482974	02248424	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,022.38	01-FEB-13	$10,022.38	01-JUN-14	$ 10,405.86
QUEENS PARENT RESRC CTR SPV	113211119	02248488	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,147.63	01-FEB-13	$8,147.63	01-FEB-14	$ 8,147.63
QUICK SOCIAL SERVICES INC SPV	113265113	02248644	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,653.80	01-FEB-13	$6,653.80	01-FEB-14	$ 6,657.63
RENSS CO CHAP NYSARC SPV	141485873	02249021	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,665.94	01-FEB-13	$7,676.68	01-MAY-14	$ 7,709.58
RICHMOND CHILDRENS CENTER SPV	132736761	02249094	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$12,917.35	02-FEB-13	$12,917.35	01-FEB-14	$ 12,917.35
RIVERSHORE INC SPV	161146128	02248846	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,420.23	01-FEB-13	$4,365.96	01-FEB-14	$ 4,359.57
ROCKLAND CO CHAP NYSARC SPV	131916359	02248891	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,537.30	01-FEB-13	$7,517.99	01-FEB-14	$ 7,513.67
ROCKLAND COUNTY ALD SPV	132951835	02256619	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$13,479.88	01-FEB-13	$13,472.71	01-FEB-14	$ 12,379.04
SARATOGA CNTY ARC SPV	141465932	02248924	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,140.23	01-FEB-13	$6,139.35	01-APR-14	$ 6,606.15
SARATOGA COUNTY ARC ND 3	141465932	02849118	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$6,785.41	03-JAN-07	$0.00	03-JAN-07	$ -
SCHDY CO CHAP NYSARC SPV	141459277	02248960	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,484.48	01-FEB-13	$7,484.48	01-MAR-14	$ 7,713.58
SCHOHARIE CHAP NYSARC INC SPV	141494347	02255214	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,394.56	01-FEB-13	$5,400.03	01-APR-14	$ 5,621.99
SCHUYLER CO CHAP NYSARC SPV	161120089	02249085	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,414.38	01-FEB-13	$6,476.36	01-FEB-14	$ 6,469.73
SDTC CTR FOR DISCOVERY SPV	141395426	02256628	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,907.67	01-FEB-13	$9,907.67	01-FEB-14	$ 9,907.67
SENECA-CAYUGA NYSARC SPV	161124314	02249118	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,185.62	01-FEB-13	$5,235.09	01-FEB-14	$ 5,237.74
SERVICES F/DEV CHALLENGED SPV	133921190	02249223	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,753.99	01-FEB-13	$8,753.99	01-FEB-14	$ 8,753.99
SERVICES FOR UNDERSERVED SPV	133250383	02249796	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,286.32	01-FEB-13	$10,286.32	01-FEB-14	$ 10,646.05
SHARE OF NEW SQUARE SPV	133475062	02811741	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,505.27	01-FEB-13	$8,505.27	01-FEB-14	$ 8,505.27
SINERGIA INC SPV	133183344	02249801	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,705.29	01-FEB-13	$8,705.29	01-FEB-14	$ 8,705.28
SOUTHEAST BRONX NEIGHBORHOOD SPV	132675560	02973788	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,517.01	01-FEB-13	$5,517.01	01-FEB-14	$ 5,517.01
SOUTHEAST COMM WORK CTR SPV	161074815	02256637	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,611.89	01-FEB-13	$5,496.59	01-FEB-14	$ 5,564.31
SPAULDING PRAY RES CORP SPV	161196869	02249961	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,062.88	01-FEB-13	$4,182.16	01-FEB-14	$ 4,080.22
SPECIAL CIT FUTURE UNLTD SPV	132865903	02354089	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,193.38	01-FEB-13	$9,193.38	01-FEB-14	$ 9,193.38
SPECIAL NEEDS PROGRAM INC SPV	222325526	02250008	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,027.84	01-MAR-13	$8,027.84	01-APR-14	$ 8,051.01
SPRINGBROOK NY INC SPV	150539129	02252871	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,321.17	01-FEB-13	$6,407.45	01-MAR-14	$ 7,337.43
ST CHRISTOPHER OTTILIE SPV	112777066	02250026	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,784.41	01-FEB-13	$9,073.48	01-FEB-14	$ 9,073.48
ST DOMINICS HOME SPV	131740399	02280106	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,938.45	01-FEB-13	$8,931.87	01-FEB-14	$ 8,927.05
ST LAWRENCE NYSARC INC SPV	150617072	02250071	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,661.03	01-FEB-13	$5,652.50	01-FEB-14	$ 5,753.27
ST REGIS MOHAWK TRIBE IRA SPV	161007650	02255374	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,445.68	01-FEB-13	$7,432.67	01-FEB-14	$ 7,422.01
ST VINCENTS SERVICES INC SPV	111631823	02254373	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,759.99	01-FEB-13	$8,759.99	01-FEB-14	$ 8,732.94
STEUBEN CO CHAP NYSARC SPV	160971450	02249829	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,215.67	01-FEB-13	$6,203.74	01-FEB-14	$ 6,199.96
STONY FORD FOUNDATION SPV	061207341	03172209	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$2,132.44	01-FEB-13	$2,527.69	01-FEB-14	$ 2,531.52
SUBURBAN ADULT SERVICES SPV	161115992	02249838	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,926.00	01-FEB-13	$7,885.69	01-FEB-14	$ 8,105.75
SULLIVAN CO CHAP NYSARC SPV	146028767	02249865	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,901.00	01-FEB-13	$7,081.98	01-FEB-14	$ 6,803.68
TANGLEWOOD ACRES ADULT HM SPV	133099825	02331588	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,801.45	01-FEB-13	$4,776.47	01-FEB-14	$ -
THE ALTERNATIVE LIV GRP SPV	141713378	02249943	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,341.94	01-FEB-13	$7,317.37	01-FEB-14	$ 7,706.86
THE ARC ONEIDA LEWIS ARC SPV	150581298	02249952	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$4,809.90	01-FEB-13	$4,789.97	01-FEB-14	$ 4,777.22
THE SALVATION ARMY SPV	135562351	02728476	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,704.53	01-FEB-13	$8,704.53	01-FEB-14	$ 8,704.53

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
TOOMEY RES & COMM SVCS SPV	161363414	02353560	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,575.83	01-FEB-13	$7,546.55	01-MAR-14	$ 7,818.26
TRANSITIONAL LIVING SVC SPV	161039435	02284311	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,120.69	01-FEB-13	$7,120.69	01-FEB-14	$ 7,297.63
UCP & HANDI PERS UTICA SPV	150543657	02257454	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,664.55	01-FEB-13	$8,664.55	01-FEB-14	$ 8,632.16
UCP ASSOC OF NASSAU SPV	111723782	02252519	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,460.56	01-FEB-13	$7,460.56	01-FEB-14	$ 7,545.89
UCP ASSOC OF ROCHESTER SPV	160743950	02257394	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,083.58	01-FEB-13	$7,079.55	01-FEB-14	$ 7,054.72
UCP HANDI CHILD ASSOC SYR SPV	150532247	02252624	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,831.81	01-FEB-13	$8,831.81	01-FEB-14	$ 8,855.68
UCP OF NYC INC SPV	135654532	02255383	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,784.34	01-FEB-13	$9,784.34	01-APR-14	$ 9,847.22
UCP OF QUEENS SPV	111665821	02252615	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,132.42	01-FEB-13	$9,132.42	01-FEB-14	$ 9,132.42
UCP OF ULSTER CO SPV	141377518	02621052	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,732.18	01-FEB-13	$5,732.18	01-MAY-14	$ 6,084.98
UCP OF UTICA ND 5	150543657	02814244	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$12,544.81	03-JAN-07	$0.00	03-JAN-07	$ -
UCP OF WESTCHESTER SPV	131690769	03110950	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,141.70	01-FEB-13	$8,141.70	01-FEB-14	$ 8,141.70
UCP PUTNAM/S DUTCHESS SPV	141813412	02252591	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,129.20	01-FEB-13	$9,129.20	01-FEB-14	$ 9,146.86
UCPA NIAGARA COUNTY INC SPV	160786061	02252757	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,023.92	01-FEB-13	$9,010.17	01-FEB-14	$ 8,982.04
UCPA OF CAYUGA CO INC SPV	150576613	02577764	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,459.36	01-FEB-13	$7,529.01	01-FEB-14	$ 7,807.98
UCPA OF GTR SUFFOLK SPV	112568841	02252702	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,217.97	01-FEB-13	$9,217.97	01-FEB-14	$ 9,406.95
UCPA OF NYS SPV	131623856	02257358	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$14,083.24	01-FEB-13	$14,083.24	01-FEB-14	$ 14,055.17
UCPA OF THE NORTH COUNTRY SPV	161568985	02257289	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,512.49	01-FEB-13	$7,492.75	01-FEB-14	$ 7,464.68
UCPA OF THE TRI COUNTIES SPV	141495700	02320501	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,761.01	01-FEB-13	$8,761.01	01-FEB-14	$ 8,761.01
ULSTER GREENE ARC SPV	141437657	02252711	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,177.30	01-FEB-13	$7,154.12	01-MAR-14	$ 7,283.16
UNIQUE PEOPLE SERVICES ND 1	133636555	02769428	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$11,730.91	03-JAN-07	$0.00	03-JAN-07	$ -
UNIQUE PEOPLE SERVICES ND 2	133636555	02769419	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-JAN-2007	$7,225.97	03-JAN-07	$0.00	03-JAN-07	$ -
UNIQUE PEOPLE SERVICES SPV	133636555	02252817	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,666.69	01-FEB-13	$9,666.69	01-JUN-14	$ 9,954.78
UNITED HELPERS CARE INC SPV	222412205	02252835	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,573.36	01-FEB-13	$7,524.69	01-FEB-14	$ 7,525.80
UNITY HOUSE OF CAYUGA CO SPV	161081372	02252862	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,510.92	01-FEB-13	$5,492.98	01-JUN-14	$ 5,655.15
URBAN RESOURCE INSTITUTE SPV	112561648	02392785	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,911.39	01-FEB-13	$9,911.39	01-FEB-14	$ 9,911.39
VANDERHEYDEN HALL INC SPV	141338575	02252880	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$7,492.14	01-FEB-13	$7,490.26	01-JUN-14	$ 8,212.41
VOLUNTEERS OF AMERICA SPV	581959781	02284348	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-AUG-2011	$8,405.82	01-FEB-13	$8,377.83	01-FEB-14	$ 8,386.11
WARREN WASHINGTON CO ARC SPV	141560053	02252899	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-MAR-2013	$6,907.54	01-MAR-13	$6,903.25	01-JUN-14	$ 6,991.18
WAYNE CO CHAP NYSARC INC SPV	237540582	02252528	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,345.35	01-FEB-13	$5,327.43	01-JUN-14	$ 5,570.93
WESTCHESTER NYSARC SPV	131740065	02252573	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$8,174.04	01-FEB-13	$8,164.93	01-FEB-14	$ 8,424.91
WILDWOOD PROGRAMS INC SPV	222132752	02252697	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$5,900.89	01-FEB-13	$5,882.24	01-APR-14	$ 6,227.65
WOMENS LEAGUE COMM RES SPV	112889774	02252748	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,010.74	01-FEB-13	$10,010.74	01-FEB-14	$ 10,028.10
WORCA INC SPV	237209731	02252793	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$11,387.44	01-FEB-13	$11,395.35	01-FEB-14	$ 11,395.32
YATES CNTY CHAP NYSARC SPV	161086091	02252808	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$6,237.99	01-FEB-13	$6,212.98	01-FEB-14	$ 6,146.77
YEDEI CHESED INC SPV	133728771	02252826	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$10,111.27	01-FEB-13	$10,111.27	01-FEB-14	$ 10,111.27
YOUNG ADULT INSTITUTE SPV	112030172	02256682	003	4706	RES HAB; VOL; IRA/CR -SUPVD; MONTHLY	MONTH (1)	01-FEB-2013	$9,130.29	01-FEB-13	$9,130.29	01-FEB-14	$ 9,130.24
A VERY SPECIAL PLACE INC SPV	133005006	02254442	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,973.12	01-FEB-13	$3,973.12	01-FEB-14	$ 3,973.12
ABBOTT HOUSE IRA SPV	131991946	02257812	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,656.13	01-FEB-13	$4,991.04	01-FEB-14	$ 4,991.04
ABILITIES FIRST INC SPV	141467427	02248915	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,321.17	01-FEB-13	$2,316.30	01-FEB-14	$ 3,010.10
ABILITY BEYOND DISAB SPV	141758770	02246720	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,512.68	01-FEB-13	$5,512.68	01-APR-14	$ 5,742.76
ABLE2 ENHANCING POTENTIAL, INC SPV	161091767	02253547	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,443.48	01-FEB-13	$4,436.20	01-FEB-14	$ 4,980.48
ACLD SPV	116042250	02245912	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,842.94	01-FEB-13	$3,842.94	01-FEB-14	$ 3,842.94
ADULT RETARDATES CENTER SPV	111986300	02246046	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,710.58	01-FEB-13	$1,710.58	01-FEB-14	$ 1,709.53
ADVOCATES FOR SERVICES SPV	112685324	02246064	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,172.96	01-FEB-13	$4,172.96	01-FEB-14	$ 4,172.96
AID TO DEV DISABLED SPV	112573451	02246211	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,637.31	01-FEB-13	$3,623.49	01-FEB-14	$ 3,608.50
AIM SERVICES INC SPV	141609398	02246326	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,189.64	01-FEB-13	$3,165.68	01-FEB-14	$ 3,162.38
AIM SERVICES INC ND 3	141609398	02681978	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-OCT-2006	$2,969.52	03-JAN-07	$0.00	03-JAN-07	$ -
ALBANY CO CHAP NYSARC SPV	141392181	02246380	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,115.25	03-FEB-13	$0.00	03-FEB-13	$ -
ALLEGANY CO CHAP NYSARC SPV	161021588	02246775	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,853.79	01-FEB-13	$2,852.12	01-FEB-14	$ 2,852.25
ANDERSON CENTER SERVICES INC SPV	222923873	02245696	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,585.45	01-FEB-13	$4,703.67	01-FEB-14	$ 4,784.37

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
ANGELS UNAWARE INC SPV	133753509	02245747	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,671.55	01-FEB-13	$3,671.55	01-FEB-14	$ 3,723.47
ANOTHER STEP INC SPV	133680851	02517426	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,329.53	01-FEB-13	$4,329.53	01-FEB-14	$ 4,361.35
ASPIRE OF WNY INC ND 12	160757756	02839467	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-DEC-2006	$4,218.04	03-JAN-07	$0.00	03-JAN-07	$ -
ASPIRE OF WNY SPV	160757756	02257472	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,975.26	01-FEB-13	$3,969.52	01-FEB-14	$ 3,956.97
ASSN F/NEUR IMP BRAIN INJ SPV	112348663	02337988	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,952.97	01-FEB-13	$2,962.75	01-FEB-14	$ 2,949.05
ASSOC F/CHILD W/DOWN SYN SPV	237175975	02253923	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,252.36	01-FEB-13	$3,252.39	01-FEB-14	$ 3,247.82
ASSOC F/T ADV BLIND AND RET N	131968035	02663234	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,815.71	03-JAN-07	$0.00	03-JAN-07	$ -
ASSOC FOR ADV BLIND & RET SPV	131968035	02245783	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,672.16	01-FEB-13	$3,672.16	01-FEB-14	$ 3,672.16
ASSOC MENT ILL CHILD WEST SPV	132554243	02245765	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,960.66	01-FEB-13	$1,958.49	01-FEB-14	$ 1,958.03
AUTISTIC SERVICES INC ND 4	161185024	02740467	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-DEC-2006	$3,800.58	03-JAN-07	$0.00	03-JAN-07	$ -
AUTISTIC SERVICES INC SPV	161185024	02245834	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,590.61	01-FEB-13	$3,575.59	01-FEB-14	$ 3,565.51
BAKER VICTORY SERVICES SPV	161017453	02687965	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,441.59	01-FEB-13	$5,209.92	01-FEB-14	$ 5,205.89
BIRCH FAMILY SVCS INC SPV	112503193	02247170	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,278.40	01-FEB-13	$6,484.70	01-FEB-14	$ 6,452.45
BLOCK INSTITUTE SPV	112416320	02259543	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,255.65	01-FEB-13	$3,495.35	01-FEB-14	$ 3,485.77
BROOME-TIOGA CO CHAP NYSARC SPV	150619307	02246082	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,271.57	01-FEB-13	$2,264.02	01-FEB-14	$ 2,260.36
CAMP VENTURE INC SPV	132661988	02252968	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,436.44	01-FEB-13	$3,433.53	01-FEB-14	$ 3,283.79
CAMPHILL HUDSON INC SPV	264101808	03265203	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,498.75	01-FEB-13	$2,498.75	01-FEB-14	$ 2,498.75
CARDINAL MCCLOSKEY SCHOOL SPV	131740443	02245756	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,112.07	01-FEB-13	$5,112.07	01-FEB-14	$ 5,112.07
CATH CHAR NGHBHD SVCS INC SPV	112047151	02608280	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,398.90	01-FEB-13	$5,474.92	01-JUN-14	$ 5,474.92
CATH CHARITIES DIO ROCH SPV	160743944	02620919	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,704.35	01-FEB-13	$1,703.02	01-FEB-14	$ 1,704.21
CATHOLIC CHAR DIO RVC SPV	111843801	02245930	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010579	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010588	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010597	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010602	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010611	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010620	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010639	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010648	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010657	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010666	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR OF CHENANGO CO SPV	161307983	03187762	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,771.19	01-FEB-13	$3,771.19	01-FEB-14	$ 3,771.19
CATHOLIC CHARITIES DDS SPV	141340033	02245985	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,239.42	01-FEB-13	$5,239.42	01-FEB-14	$ 5,260.55
CATHOLIC CHARITIES/BROOME/SPV	161170407	02859332	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,308.96	01-FEB-13	$4,291.31	01-FEB-14	$ 4,286.13
CATHOLIC GUARDIAN SOCIETY SPV	135562186	02253978	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,988.19	01-FEB-13	$5,102.64	01-FEB-14	$ 5,102.64
CATTARAUGUS CO NYSARC SPV	160818293	02246019	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,271.66	01-FEB-13	$3,270.23	01-FEB-14	$ 3,270.91
CDS MONARCH INC SPV	161089115	02246606	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,836.96	01-FEB-13	$2,829.46	01-FEB-14	$ 2,825.31
CENTER F/DISAB SVCS SPV	141425851	02250053	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,826.84	01-FEB-13	$3,816.49	01-FEB-14	$ 3,807.48
CENTER F/RAPID RECVRY SPV	113246332	02257918	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,583.10	01-FEB-13	$3,583.10	01-FEB-14	$ 3,583.10
CENTER FOR DEVELOP DISAB SPV	111874383	02256499	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,369.43	01-FEB-13	$4,369.43	01-MAR-14	$ 4,732.35
CHAUTAUQUA CO CHAP ARC SPV	160968914	02245967	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,425.84	01-FEB-13	$3,441.45	01-APR-14	$ 3,461.75
CHEMUNG CO CHAP ARC SPV	160795709	02245994	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,070.59	01-FEB-13	$3,062.58	01-FEB-14	$ 3,125.75
CHENANGO CO CHAP NYSARC SPV	160970103	02359777	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,030.96	01-FEB-13	$3,030.96	01-FEB-14	$ 2,315.90
CHINESE AMERICAN PLAN SPV	136202692	02246317	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,040.71	01-FEB-13	$4,040.71	01-FEB-14	$ 4,040.71
CITIZEN ADVOCATES INC SPV	141577715	02255067	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,286.88	01-FEB-13	$3,259.75	01-MAR-14	$ 3,260.03
CLADDAGH COMMISSION SPV	161096096	02246353	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,734.65	01-FEB-13	$2,729.02	01-FEB-14	$ 2,724.60
CLINTON CO CHAPTER NYSARC SPV	141463735	02247189	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,818.51	01-FEB-13	$3,818.51	01-FEB-14	$ 3,931.57
CNTRO SOC LA ESPERNZA SPV	132688412	02245903	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,373.68	01-FEB-13	$3,373.68	01-FEB-14	$ 3,482.23
COLUMBIA COUNTY CHAP ARC SPV	141489603	02247203	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,509.15	01-FEB-13	$2,445.31	01-FEB-14	$ 2,843.14
COMM LIVING CORP SPV	133563609	02247258	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,395.13	01-FEB-13	$3,391.35	01-FEB-14	$ 3,770.45

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
COMM MAINSTREAMING INC ND 3	237448487	02840453	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,994.26	03-JAN-07	$0.00	03-JAN-07	$ -
COMM MAINSTREAMING INC SPV	237448487	02259561	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,567.14	01-FEB-13	$3,616.75	01-FEB-14	$ 3,671.62
COMM RESOURCE CTR F/DD SPV	132954788	02246500	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,051.86	01-FEB-13	$5,051.86	01-FEB-14	$ 5,051.86
COMM SVCS F/T DEV DISAB ND 12	161317369	02839458	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-NOV-2006	$3,390.92	03-JAN-07	$0.00	03-JAN-07	$ -
COMM SVCS F/T DEV DISABIL SPV	161317369	02253469	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,891.49	01-FEB-13	$3,891.37	01-FEB-14	$ 4,057.35
COMMUNITY ACTION F/HUM SV SPV	222317376	02279849	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,629.47	01-FEB-13	$3,629.47	01-FEB-14	$ 3,620.64
COMMUNITY BASED SER INC SPV	133070655	02559424	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,138.76	01-FEB-13	$4,913.77	01-FEB-14	$ 4,791.65
COMMUNITY OPTIONS NY SPV	113414724	02259598	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,346.97	01-FEB-13	$4,405.84	01-JUN-14	$ 4,462.62
COMMUNITY PROGS OF WJCS SPV	132985945	02247336	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,341.46	01-FEB-13	$4,341.46	01-FEB-14	$ 4,341.46
COMMUNITY RESOURCES SPV	135660279	02625152	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,482.63	01-FEB-13	$4,482.63	01-FEB-14	$ 4,482.63
COMMUNITY WORK & INDEPEND SPV	141470091	02246528	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-2013	$4,771.80	01-MAR-13	$4,783.83	01-FEB-14	$ 4,785.42
CONTINUING DEVELOP SVCS ND 4	161089115	02826180	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-DEC-2006	$6,092.15	03-JAN-07	$0.00	03-JAN-07	$ -
CREATIVE LIFESTYLES SPV	113151481	02255094	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,649.79	01-FEB-13	$3,649.79	01-FEB-14	$ 3,649.79
CROSSROADS UNLIMITED SPV	710967724	02728485	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,265.47	01-FEB-13	$5,265.47	01-FEB-14	$ 5,481.54
CRYSTAL RUN VILLAGE INC SPV	112466996	02246711	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,743.16	01-FEB-13	$3,724.04	01-FEB-14	$ 3,815.05
CTR FOR FAMILY SUPPORT SPV	131913807	02246106	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,289.66	01-FEB-13	$4,309.22	01-MAR-14	$ 4,548.15
DELAWARE CO CHAP NYSARC SPV	160976343	02599842	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,177.65	01-FEB-13	$2,174.88	01-FEB-14	$ 2,169.88
DEPAUL DEV SERVICES SPV	202017098	02734701	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,999.77	01-FEB-13	$3,999.77	01-FEB-14	$ 3,999.77
DEVELOPMENTAL DIS INST SPV	116077347	02246748	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,508.52	01-FEB-13	$6,508.52	01-MAY-14	$ 6,508.52
DEVEREUX FOUNDATION SPV	231390618	02246757	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,425.16	01-FEB-13	$3,465.07	01-MAY-14	$ 3,570.98
E DOUGLIN CTR/SERV PPLE SPV	113356044	02246688	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,794.45	02-FEB-13	$4,794.45	01-JUN-14	$ 5,159.63
EAST END DISABILITY ASSOC SPT	113318718	02259709	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,375.62	01-FEB-13	$4,375.62	01-FEB-14	$ 4,375.62
EAST HARLEM COUN F/COMM SPV	132969933	02256513	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,924.97	01-MAR-13	$4,924.97	01-FEB-14	$ 4,924.97
EASTER SEALS NEW YORK INC SPV	135596808	02257252	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,227.54	01-FEB-13	$4,227.54	01-FEB-14	$ 4,299.29
EDEN II SCHOOL SPV	132872916	02460286	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,741.73	01-FEB-13	$6,741.73	01-FEB-14	$ 6,741.73
EDWIN GOULD SVCS/CHILD SPV	135675643	02246766	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,385.26	01-MAR-13	$5,345.41	01-FEB-14	$ 5,632.03
EIHAB HUMAN SERVICES SPV	113376415	02246784	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,404.70	01-FEB-13	$4,404.70	01-FEB-14	$ 4,427.30
ELMCREST CHILDRENS CENTER INC SPV	150539090	02952885	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,366.55	01-FEB-13	$4,366.55	01-FEB-14	$ 4,366.55
ELMYS SPECIAL SERVICES INC SPV	020590957	03082560	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,726.36	01-FEB-13	$3,726.36	01-APR-14	$ 4,612.41
EPILEPSY ASSOC/ROCHESTER SPV	222146295	02246399	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,621.80	01-FEB-13	$2,618.02	03-MAY-13	$ -
EPILEPSY FOUNDATION LI SPV	111821135	02714785	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,212.79	01-FEB-13	$4,212.79	01-APR-14	$ 4,233.47
EPISCOPAL SOCIAL SERVICES SPV	133709095	02246440	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,245.49	01-FEB-13	$4,245.49	01-FEB-14	$ 4,247.41
ERIE COUNTY ARC SPV	160769044	02246555	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,935.05	01-FEB-13	$2,939.88	01-FEB-14	$ 2,921.31
ESSEX COUNTY CHAP NYSARC SPV	141563885	02246642	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,631.86	01-FEB-13	$4,472.29	01-MAY-14	$ 4,524.07
FED EMPLOY & GUIDANCE SVC SPV	131624000	02246995	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,602.33	01-FEB-13	$4,602.33	01-JUN-14	$ 4,718.54
FEDERATION/MULTICULTURAL PROG SPV	112422505	02934494	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,153.52	01-FEB-13	$2,281.44	01-FEB-14	$ 2,308.03
FINGER LAKES UCP INC SPV	160965912	02687869	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,928.55	01-FEB-13	$3,928.55	01-FEB-14	$ 3,928.55
FRANKLIN CO NYSARC SPV	237150954	02249874	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,565.24	01-FEB-13	$3,558.12	01-MAR-14	$ 3,721.11
FRANZISKA RACKER CENTERS SPV	150581887	02246968	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,925.85	01-FEB-13	$3,987.22	01-MAY-14	$ 4,308.87
FREE SUPERVISED IRA SPV	112420547	02247029	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,213.04	01-MAR-13	$4,236.11	01-APR-14	$ 4,544.11
FULTON CO ARC SPV	146020996	02463129	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,700.63	01-FEB-13	$4,709.73	01-FEB-14	$ 4,779.58
GAN KAVOD INC SPV	223032483	03057669	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$7,225.45	01-FEB-13	$7,225.45	01-FEB-14	$ 7,225.45
GATEWAY COMM INDUSTRIES INC SPV	141458757	03370472	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,230.74	01-FEB-13	$2,234.96	01-FEB-14	$ 2,241.22
GENERAL HUMAN OUTREACH SPV	113134570	02247092	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,666.86	01-FEB-13	$3,666.86	01-FEB-14	$ 3,668.78
GENESEE CO ARC SPV	161001185	02247107	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,038.25	01-FEB-13	$3,029.80	01-FEB-14	$ 3,006.02
GRACE LUTHERAN RES SVC SPV	161554927	02247125	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,209.64	01-FEB-13	$3,208.33	01-FEB-14	$ 3,212.15
GREYSTONE PROGRAMS INC SPV	141608318	02247152	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,588.82	01-FEB-13	$4,588.82	01-FEB-14	$ 4,588.82
GROTON COMM HLTH CARE CTR SPV	237300255	02252913	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,431.34	01-FEB-13	$3,431.34	01-FEB-14	$ 3,433.26
GUILD F/EXCEPTIONAL CHILD ND4	116037766	02408340	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-AUG-2006	$1,922.57	03-JAN-07	$0.00	03-JAN-07	$ -
GUILD F/EXCEPTIONAL CHILD ND5	116037766	02519015	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-AUG-2006	$1,788.17	03-JAN-07	$0.00	03-JAN-07	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
GUILD F/EXCEPTIONAL CHILD SPV	116037766	02247010	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,924.01	01-FEB-13	$3,969.37	01-FEB-14	$ 3,969.37
HAMASPIK OF ORANGE CO SPV	141711583	02248295	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,462.42	01-FEB-13	$3,462.42	01-FEB-14	$ 3,462.42
HANDICAPPED CHILD SO NY SPV	150516395	02247038	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,156.83	01-FEB-13	$4,184.46	01-JUN-14	$ 4,594.67
HASC CENTER INC ND 13	112630071	02803538	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,419.25	03-JAN-07	$0.00	03-JAN-07	$ -
HASC CENTER INC SPV	112630071	02247056	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,563.34	01-MAR-13	$4,630.34	01-FEB-14	$ 4,617.44
HAWTHORNE FOUNDATION INC SPV	133447893	02247116	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,127.89	01-FEB-13	$4,027.56	01-FEB-14	$ 4,019.02
HCA OF SOUTHERN NY INC ND 7	150516395	02838631	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$4,753.46	03-JAN-07	$0.00	03-JAN-07	$ -
HEAD INJURY ASSOCIATION INC SPV	112946185	02256568	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,404.62	01-FEB-13	$4,404.62	01-APR-14	$ 4,816.38
HEARTSHARE HUMAN SERVICES SPV	111633549	02247143	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,467.21	02-MAR-13	$4,554.62	01-FEB-14	$ 4,604.34
HELEN KELLER SVCS F/T BLD SPV	111630807	02315768	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,962.71	01-FEB-13	$3,962.71	01-FEB-14	$ 5,428.59
HERITAGE CHRISTIAN SVCS ND16	222334190	02826171	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$4,028.25	03-JAN-07	$0.00	03-JAN-07	$ -
HERITAGE CHRISTIAN SVCS SPV	222334190	02247276	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,009.63	01-MAR-13	$3,995.26	01-APR-14	$ 4,099.63
HERKIMER CO CHAP NYSARC SPV	160973231	02247309	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,544.64	01-FEB-13	$2,540.96	01-MAY-14	$ 2,584.23
HILLSIDE CHILDRENS CTR SPV	160743039	02247212	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,442.22	01-FEB-13	$5,442.22	01-FEB-14	$ 5,442.22
HUMAN CARE SVCS F/FAM CH SPV	113338946	02254171	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,991.72	01-FEB-13	$4,991.72	01-FEB-14	$ 4,991.72
HUMAN FIRST INC SPV	113590136	03528301	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-MAR-14	5950.29
IBERO AMERICAN ACT LEAGUE SPV	160954745	02252922	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,291.03	01-FEB-13	$3,284.36	01-FEB-14	$ 3,269.88
ICL JOSELOW HOUSE INC SPV	134053788	02753097	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,027.17	01-FEB-13	$4,027.17	01-FEB-14	$ 4,027.17
IN FLIGHT INC SPV	141764481	02247294	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,383.20	01-FEB-13	$4,383.20	01-FEB-14	$ 4,383.23
INDEPENDENCE RESIDENCES SPV	133490223	02255163	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,295.17	01-MAR-13	$4,554.44	01-FEB-14	$ 4,683.51
INDEPENDENT GR HM LIVING SPV	112458584	02247327	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,383.83	02-FEB-13	$4,383.83	01-FEB-14	$ 4,513.69
INDEPENDENT LIVING ASSN SPV	112729771	02378063	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,135.50	01-FEB-13	$6,135.50	01-FEB-14	$ 6,135.50
INST OF APPLIED HUMAN DYN SPV	132573827	02256540	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,152.50	01-FEB-13	$4,152.50	01-FEB-14	$ 4,152.50
INSTITUTE FOR COMM LIVING SPV	133306195	02256531	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,752.54	01-FEB-13	$4,752.54	01-APR-14	$ 4,833.05
JAMAICA HOSPITAL MED CTR SPV	111631788	02247390	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,436.20	01-FEB-13	$3,436.20	01-FEB-14	$ 3,414.54
JAWONIO INC SPV	131761660	02247432	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,206.28	01-FEB-13	$5,206.28	01-FEB-14	$ 5,206.28
JEFFERSON REHABILITATION SPV	161134631	02247487	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,220.60	01-FEB-13	$2,220.87	01-FEB-14	$ 2,221.72
JEWISH BOARD OF FAM CHILD SPV	135564937	02253414	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,270.52	01-FEB-13	$5,270.52	01-FEB-14	$ 5,270.52
JOB PATH INC SPV	134038495	02386881	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,358.45	01-FEB-13	$4,358.45	01-FEB-14	$ 4,358.45
JOSHUA HOUSE INC SPV	161427778	02257261	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,355.20	01-FEB-13	$3,348.24	01-FEB-14	$ 3,890.61
KELBERMAN CTR INC SPV IRA	550901293	03697638	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-FEB-14	6056.53
L ARCHE SYRACUSE INC SPV	161085314	02255118	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,550.91	01-FEB-13	$3,550.91	01-FEB-14	$ 3,550.91
LEAKE AND WATTS SVCS INC SPV	131860451	02781060	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,832.60	01-FEB-13	$4,895.89	01-FEB-14	$ 4,895.89
LEARNING DISAB ASSOC WNY SPV	161118058	02247592	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,236.05	01-FEB-13	$3,235.60	01-FEB-14	$ 3,237.04
LEARNING DISABIL/GEN VAL SPV	222702285	02247616	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,054.35	01-FEB-13	$3,077.25	01-FEB-14	$ 3,074.04
LIBERTY RESOURCES INC SPV	161129675	02256559	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,359.89	01-FEB-13	$4,320.94	01-FEB-14	$ 4,333.36
LIBERTY/MONTGOMERY ARC SPV	141506257	02617792	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,883.13	01-FEB-13	$4,878.63	01-MAR-14	$ 4,920.65
LIFE ADJUSTMENT CENTER SPV	133620577	02247372	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,627.85	01-FEB-13	$3,627.85	01-FEB-14	$ 3,627.85
LIFESPIRE INC SPV	132526022	02247414	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,866.94	01-FEB-13	$3,866.94	01-FEB-14	$ 3,866.94
LIFETIME ASSISTANCE INC SPV	222221158	02253432	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,190.23	01-FEB-13	$4,194.72	01-FEB-14	$ 4,219.77
LITTLE FLOWER CHILDRENS SPV	111633572	02320107	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,025.00	01-FEB-13	$4,286.60	01-APR-14	$ 4,310.22
LITTLE VILLAGE HOUSE SPV	112881075	02758276	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,316.07	01-FEB-13	$4,316.07	01-FEB-14	$ 4,316.07
LIVING EXPLORING ALL POSS SPV	161467182	02247565	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,925.19	01-FEB-13	$3,925.19	01-FEB-14	$ 3,925.19
LIVING RESOURCES CORP ND 6	141564208	02742616	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$5,989.40	03-JAN-07	$0.00	03-JAN-07	$ -
LIVING RESOURCES CORP SPV	141564208	02247441	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,756.83	01-FEB-13	$2,745.93	01-JUN-14	$ 2,837.88
LIVINGSTON WYOMING ARC ND 5	161022565	02513500	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-NOV-2006	$4,110.81	03-JAN-07	$0.00	03-JAN-07	$ -
LIVINGSTON WYOMING ARC ND 6	161022565	02513546	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,533.26	03-JAN-07	$0.00	03-JAN-07	$ -
LIVINGSTON WYOMING ARC SPV	161022565	02513486	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,639.11	01-FEB-13	$2,780.82	01-FEB-14	$ 2,778.22
LOCHLAND SCHOOL INC SPV	160780944	02248328	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,700.67	01-FEB-13	$3,698.15	01-FEB-14	$ 3,697.37
MADISON CORTLAND NYSARC SPV	160958020	02256586	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,798.39	01-FEB-13	$2,788.39	01-FEB-14	$ 2,808.68

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
MARANATHA HUMAN SERVICES SPV	141755068	02248391	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,237.14	01-FEB-13	$4,222.44	01-FEB-14	$ 4,214.64
MARY CARIOLA CHILD CTR SPV	160771078	02416035	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,473.35	01-FEB-13	$6,473.35	01-FEB-14	$ 6,473.35
MARYHAVEN CENTER OF HOPE SPV	112861698	02248497	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,421.36	01-FEB-13	$3,769.86	01-APR-14	$ 3,715.99
MENORAH PARK GROUP RESIDENCES SPV	262639157	03035921	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,776.09	01-FEB-13	$2,776.09	01-FEB-14	$ 2,776.09
MENTAL HEALTH ASSOC OF NASSAU SPV	111710983	03154363	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,770.23	01-FEB-13	$4,770.23	01-FEB-14	$ 4,770.23
MERCY HOME FOR CHILDREN SPV	111666227	02254204	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,254.13	01-FEB-13	$4,254.13	01-FEB-14	$ 4,254.13
MISSION OF IMMAC VIRGIN SPV	135562286	02253478	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,270.82	01-FEB-13	$4,270.82	01-FEB-14	$ 4,263.21
MODEST COMMUNITY SERVICES ASSOC SPV	134288916	03075183	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,199.55	01-FEB-13	$4,199.55	01-FEB-14	$ 4,144.81
MONROE CO CHAP NYSARC SPV	160835172	02248608	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,899.13	01-FEB-13	$2,894.21	01-FEB-14	$ 3,056.33
MULTI COUNTY CDC SPV	141558673	02248671	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,998.64	01-FEB-13	$3,878.60	01-FEB-14	$ 3,858.26
NASSAU CO AHRC INC SPV	261520311	03045301	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,063.66	01-FEB-13	$4,063.66	01-APR-14	$ 5,044.16
NASSAU CO CHAP NYSAHRC SPV	111720254	02248855	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,840.60	01-MAR-13	$3,873.69	01-FEB-14	$ 3,873.69
NEW HOPE COMMUNITY INC SPV	222871755	02248795	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,890.04	01-FEB-13	$3,836.39	01-FEB-14	$ 4,044.23
NEW HORIZONS RESOURCES SPV	524862107	02248819	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,021.26	01-FEB-13	$4,020.28	01-FEB-14	$ 4,261.07
NEW YORK FOUNDLING HOSP ND 2	131624123	02812004	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-NOV-2006	$4,109.33	03-JAN-07	$0.00	03-JAN-07	$ -
NEW YORK FOUNDLING HOSP SPV	131624123	02254222	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,243.25	01-FEB-13	$5,243.25	01-JUN-14	$ 5,372.81
NYSARC DUTCHESS CNTY SPV	146077915	02253670	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,678.48	01-FEB-13	$2,671.38	01-FEB-14	$ 3,161.54
NYSARC INC NYC CHAPTER SPV	135596746	02248933	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,096.39	01-FEB-13	$5,096.39	01-MAY-14	$ 4,882.49
NYSARC INC ORANGE CNTY SPV	141462340	02259589	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,169.02	01-FEB-13	$3,177.60	01-FEB-14	$ 3,177.79
NYSARC INC SUFFOLK CHAP SPV	111845294	02249856	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,667.76	01-FEB-13	$2,649.81	01-JUN-14	$ 2,684.17
NYSARC NIAGARA CO CHAP SPV	160794847	02253496	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,334.37	01-FEB-13	$2,332.09	01-FEB-14	$ 2,455.07
OCCUPATIONS INC SPV	141471097	02248988	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,974.81	01-FEB-13	$5,966.55	01-MAY-14	$ 5,303.97
OHEL CHILDRENS HM/FAM SPV	116078704	02750594	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,312.58	01-FEB-13	$4,312.58	01-APR-14	$ 4,314.53
ON YOUR MARK INC SPV	133128315	02548561	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,722.00	01-FEB-13	$3,722.00	01-FEB-14	$ 3,735.40
ONONDAGA CO CHAP NYSARC SPV	150561718	02249076	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,868.33	01-FEB-13	$2,864.32	01-FEB-14	$ 2,841.27
ONONDAGA COMM LIVING SPV	161275425	02254286	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,762.37	01-FEB-13	$2,762.37	01-FEB-14	$ 2,764.29
ONTARIO ARC SPV	160786219	02360552	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,960.07	01-FEB-13	$2,953.32	01-MAY-14	$ 3,094.02
OPENGATE INC SPV	132634269	02249127	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,587.12	02-FEB-13	$3,587.12	01-FEB-14	$ 4,129.68
ORLEANS COUNTY CHAP ARC SPV	237150957	02249163	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,738.50	01-FEB-13	$2,729.96	01-FEB-14	$ 2,826.34
OSWEGO CO OPPORTUNITIES SPV	160979876	02249181	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,592.02	01-FEB-13	$2,593.47	01-FEB-14	$ 2,601.04
OTSEGO COUNTY CHAP NYSARC SPV	160953477	02249205	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,988.42	01-FEB-13	$4,052.48	01-MAR-14	$ 3,978.25
PARENTAL LOVING CARE INC SPV	133986940	02248268	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,875.58	01-FEB-13	$4,875.58	01-FEB-14	$ 4,875.58
PARTNERSHIP FOR INNOV CC SPV	133537258	02248286	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,224.29	01-FEB-13	$4,224.29	01-NOV-13	$ -
PATHFINDER VILLAGE INC SPV	150618744	02248346	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,130.79	01-FEB-13	$2,110.57	01-FEB-14	$ 2,112.48
PATHWAYS INC SPV	161089007	02248406	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,347.86	01-FEB-13	$3,341.40	01-FEB-14	$ 3,336.34
PAUL J COOPER CTR/ H S SPV	112245967	02257385	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,145.75	01-FEB-13	$4,145.75	01-FEB-14	$ 4,145.75
PEOPLE INC - HCBS IRA 9 SPV	160975538	02248479	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,194.55	02-FEB-13	$3,261.55	01-FEB-14	$ 3,399.85
PERSON CENTERED CARE SERVICES SPV	202878791	02952876	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,390.21	01-FEB-13	$5,390.21	01-FEB-14	$ 5,377.02
PLUS GROUP HOMES INC SPV	112530267	02248548	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,654.98	01-FEB-13	$4,654.98	01-FEB-14	$ 4,654.98
PRALID INC SPV	161422825	02248617	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,895.00	01-FEB-13	$5,837.34	01-FEB-14	$ 4,627.17
PROGRAM DEVELOPMENT SVCS SPV	112715916	02257270	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,469.29	01-FEB-13	$4,469.29	01-FEB-14	$ 4,469.29
PROJECT INDEPENDENCE INC SPV	161173031	02581579	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,365.59	01-FEB-13	$1,365.59	01-FEB-14	$ 1,367.51
PROVIDER HAMASPIK KINGS SPV	161522895	02248277	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,447.25	01-FEB-13	$5,447.25	01-JUN-14	$ 5,447.25
PROVIDER HAMASPIK ROCKLD SPV	133978518	02248319	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,157.13	01-FEB-13	$4,157.13	01-FEB-14	$ 4,157.13
PSCH INC SPV	112542430	02248337	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,148.46	01-FEB-13	$4,148.46	01-MAY-14	$ 4,258.90
PSCH ND 15	112542430	02839412	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$4,830.60	03-JAN-07	$0.00	03-JAN-07	$ -
PUERTO RICAN FAMILY INST SPV	136167177	02366190	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,602.27	01-FEB-13	$3,602.27	01-FEB-14	$ 3,602.27
PUTNAM COUNTY CHAP NYSARC SPV	141426729	02248373	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,398.94	01-FEB-13	$3,398.94	01-FEB-14	$ 3,398.94
QSAC SPV	112482974	02248424	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,011.19	01-FEB-13	$5,011.19	01-JUN-14	$ 5,202.93
QUEENS PARENT RESRC CTR SPV	113211119	02248488	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,073.82	01-FEB-13	$4,073.82	01-FEB-14	$ 4,073.82

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
QUICK SOCIAL SERVICES INC SPV	113265113	02248644	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,326.90	01-FEB-13	$3,326.90	01-FEB-14	$ 3,328.82
RENSS CO CHAP NYSARC SPV	141485873	02249021	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,832.97	01-FEB-13	$3,838.34	01-MAY-14	$ 3,854.79
RICHMOND CHILDRENS CENTER SPV	132736761	02249094	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,458.68	02-FEB-13	$6,458.68	01-FEB-14	$ 6,458.68
RIVERSHORE INC SPV	161146128	02248846	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,210.12	01-FEB-13	$2,182.98	01-FEB-14	$ 2,179.79
ROCKLAND CO CHAP NYSARC SPV	131916359	02248891	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,768.65	01-FEB-13	$3,759.00	01-FEB-14	$ 3,756.84
ROCKLAND COUNTY ALD SPV	132951835	02256619	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$6,739.94	01-FEB-13	$6,736.36	01-FEB-14	$ 6,189.52
SARATOGA CNTY ARC SPV	141465932	02248924	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,070.12	01-FEB-13	$3,069.68	01-APR-14	$ 3,303.08
SARATOGA COUNTY ARC ND 3	141465932	02849118	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,392.71	03-JAN-07	$0.00	03-JAN-07	$ -
SCHDY CO CHAP NYSARC SPV	141459277	02248960	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,742.24	01-FEB-13	$3,742.24	01-MAR-14	$ 3,856.79
SCHOHARIE CHAP NYSARC INC SPV	141494347	02255214	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,697.28	01-FEB-13	$2,700.02	01-APR-14	$ 2,811.00
SCHUYLER CO CHAP NYSARC SPV	161120089	02249085	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,207.19	01-FEB-13	$3,238.18	01-FEB-14	$ 3,234.87
SDTC CTR FOR DISCOVERY SPV	141395426	02256628	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,953.84	01-FEB-13	$4,953.84	01-FEB-14	$ 4,953.84
SENECA-CAYUGA NYSARC SPV	161124314	02249118	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,592.81	01-FEB-13	$2,617.55	01-FEB-14	$ 2,618.87
SERVICES F/DEV CHALLENGED SPV	133921190	02249223	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,377.00	01-FEB-13	$4,377.00	01-FEB-14	$ 4,377.00
SERVICES FOR UNDERSERVED SPV	133250383	02249796	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,143.16	01-FEB-13	$5,143.16	01-FEB-14	$ 5,323.03
SHARE OF NEW SQUARE SPV	133475062	02811741	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,252.64	01-FEB-13	$4,252.64	01-FEB-14	$ 4,252.64
SINERGIA INC SPV	133183344	02249801	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,352.65	01-FEB-13	$4,352.65	01-FEB-14	$ 4,352.64
SOUTHEAST BRONX NEIGHBORHOOD SPV	132675560	02973788	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,758.51	01-FEB-13	$2,758.51	01-FEB-14	$ 2,758.51
SOUTHEAST COMM WORK CTR SPV	161074815	02256637	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,805.95	01-FEB-13	$2,748.30	01-FEB-14	$ 2,782.16
SPAULDING PRAY RES CORP SPV	161196869	02249961	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,031.44	02-FEB-13	$2,101.63	01-FEB-14	$ 2,040.11
SPECIAL CIT FUTURE UNLTD SPV	132865903	02354089	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,596.69	01-FEB-13	$4,596.69	01-FEB-14	$ 4,596.69
SPECIAL NEEDS PROGRAM INC SPV	222325526	02250008	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,013.92	01-MAR-13	$4,013.92	01-APR-14	$ 4,025.51
SPRINGBROOK NY INC SPV	150539129	02252871	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,160.59	01-FEB-13	$3,203.73	01-MAR-14	$ 3,668.72
ST CHRISTOPHER OTTILIE SPV	112777066	02250026	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,392.21	01-FEB-13	$4,536.74	01-FEB-14	$ 4,536.74
ST DOMINICS HOME SPV	131740399	02280106	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,469.23	01-FEB-13	$4,465.94	01-FEB-14	$ 4,463.53
ST LAWRENCE NYSARC INC SPV	150617072	02250071	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,830.52	01-FEB-13	$2,826.25	01-FEB-14	$ 2,876.64
ST REGIS MOHAWK TRIBE IRA SPV	161007650	02255374	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,722.84	01-FEB-13	$3,716.34	01-FEB-14	$ 3,711.01
ST VINCENTS SERVICES INC SPV	111631823	02254373	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,380.00	01-FEB-13	$4,380.00	01-FEB-14	$ 4,366.47
STEUBEN CO CHAP NYSARC SPV	160971450	02249829	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,107.84	01-FEB-13	$3,101.87	01-FEB-14	$ 3,099.98
STONY FORD FOUNDATION SPV	061207341	03172209	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,066.22	01-FEB-13	$1,263.85	01-FEB-14	$ 1,265.76
SUBURBAN ADULT SERVICES SPV	161115992	02249838	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,963.00	01-FEB-13	$3,942.85	01-FEB-14	$ 4,052.88
SULLIVAN CO CHAP NYSARC SPV	146028767	02249865	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,450.50	02-FEB-13	$3,445.36	01-FEB-14	$ 3,401.84
TANGLEWOOD ACRES ADULT HM SPV	133099825	02331588	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,400.73	01-FEB-13	$2,388.24	01-FEB-14	$ -
THE ALTERNATIVE LIV GRP SPV	141713378	02249943	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,670.97	01-FEB-13	$3,658.69	01-FEB-14	$ 3,853.43
THE ARC ONEIDA LEWIS ARC SPV	150581298	02249952	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,404.95	01-FEB-13	$2,394.99	01-FEB-14	$ 2,388.61
THE SALVATION ARMY SPV	135562351	02728476	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,352.27	01-FEB-13	$4,352.27	01-FEB-14	$ 4,352.27
TOOMEY RES & COMM SVCS SPV	161363414	02353560	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,787.92	01-FEB-13	$3,773.28	01-MAR-14	$ 3,909.13
TRANSITIONAL LIVING SVC SPV	161039435	02284311	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,560.35	01-FEB-13	$3,560.35	01-FEB-14	$ 3,648.82
UCP & HANDI PERS UTICA SPV	150543657	02257454	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,332.28	01-FEB-13	$4,332.28	01-FEB-14	$ 4,316.08
UCP ASSOC OF NASSAU SPV	111723782	02252519	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,730.28	01-FEB-13	$3,730.28	01-FEB-14	$ 3,772.95
UCP ASSOC OF ROCHESTER SPV	160743950	02257394	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,541.79	01-FEB-13	$3,539.78	01-FEB-14	$ 3,527.36
UCP HANDI CHILD ASSOC SYR SPV	150532247	02252624	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,415.91	01-FEB-13	$4,415.91	01-FEB-14	$ 4,427.84
UCP OF NYC INC SPV	135654532	02255383	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,892.17	02-FEB-13	$4,892.17	01-APR-14	$ 4,923.61
UCP OF QUEENS SPV	111665821	02252615	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,566.21	01-FEB-13	$4,566.21	01-FEB-14	$ 4,566.21
UCP OF ULSTER CO SPV	141377518	02621052	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,866.09	01-FEB-13	$2,866.09	01-MAY-14	$ 3,042.49
UCP OF UTICA ND 5	150543657	02814244	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$6,272.41	03-JAN-07	$0.00	03-JAN-07	$ -
UCP OF WESTCHESTER SPV	131690769	03110950	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,070.85	01-FEB-13	$4,070.85	01-FEB-14	$ 4,070.85
UCP PUTNAM/S DUTCHESS SPV	141813412	02252591	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,564.60	01-FEB-13	$4,564.60	01-FEB-14	$ 4,573.43
UCPA NIAGARA COUNTY INC SPV	160786061	02252757	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,511.96	01-FEB-13	$4,505.09	01-FEB-14	$ 4,491.02
UCPA OF CAYUGA CO INC SPV	150576613	02577764	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,729.68	01-FEB-13	$3,764.51	01-FEB-14	$ 3,903.99

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
UCPA OF GTR SUFFOLK SPV	112568841	02252702	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,608.99	01-FEB-13	$4,608.99	01-FEB-14	$ 4,703.48
UCPA OF NYS SPV	131623856	02257358	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$7,041.62	01-FEB-13	$7,041.62	01-FEB-14	$ 7,027.59
UCPA OF THE NORTH COUNTRY SPV	161568985	02257289	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,756.25	01-FEB-13	$3,746.38	01-FEB-14	$ 3,732.34
UCPA OF THE TRI COUNTIES SPV	141495700	02320501	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,380.51	01-FEB-13	$4,380.51	01-FEB-14	$ 4,380.51
ULSTER GREENE ARC SPV	141437657	02252711	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,588.65	01-FEB-13	$3,577.06	01-MAR-14	$ 3,641.58
UNIQUE PEOPLE SERVICES ND 1	133636555	02769428	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$5,865.46	03-JAN-07	$0.00	03-JAN-07	$ -
UNIQUE PEOPLE SERVICES ND 2	133636555	02769419	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,612.99	03-JAN-07	$0.00	03-JAN-07	$ -
UNIQUE PEOPLE SERVICES SPV	133636555	02252817	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,833.35	01-FEB-13	$4,833.35	01-JUN-14	$ 4,977.39
UNITED HELPERS CARE INC SPV	222412205	02252835	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,786.68	01-FEB-13	$3,762.35	01-FEB-14	$ 3,762.90
UNITY HOUSE OF CAYUGA CO SPV	161081372	02252862	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,755.46	01-FEB-13	$2,746.49	01-JUN-14	$ 2,827.58
URBAN RESOURCE INSTITUTE SPV	112561648	02392785	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,955.70	01-FEB-13	$4,955.70	01-FEB-14	$ 4,955.70
VANDERHEYDEN HALL INC SPV	141338575	02252880	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,746.07	01-FEB-13	$3,745.13	01-JUN-14	$ 4,106.21
VOLUNTEERS OF AMERICA SPV	581959781	02284348	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-AUG-2011	$4,202.91	01-FEB-13	$4,188.92	01-FEB-14	$ 4,193.06
WARREN WASHINGTON CO ARC SPV	141560053	02252899	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-2013	$3,453.77	01-MAR-13	$3,451.63	01-JUN-14	$ 3,495.59
WAYNE CO CHAP NYSARC INC SPV	237540582	02252528	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,672.68	01-FEB-13	$2,663.72	01-JUN-14	$ 2,785.47
WESTCHESTER NYSARC SPV	131740065	02252573	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,087.02	01-FEB-13	$4,082.47	01-FEB-14	$ 4,212.46
WILDWOOD PROGRAMS INC SPV	222132752	02252697	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,950.45	01-FEB-13	$2,941.12	01-APR-14	$ 3,113.83
WOMENS LEAGUE COMM RES SPV	112889774	02252748	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,005.37	01-FEB-13	$5,005.37	01-FEB-14	$ 5,014.05
WORCA INC SPV	237209731	02252793	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,693.72	01-FEB-13	$5,697.68	01-FEB-14	$ 5,697.66
YATES CNTY CHAP NYSARC SPV	161086091	02252808	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,119.00	01-FEB-13	$3,106.49	01-FEB-14	$ 3,073.39
YEDEI CHESED INC SPV	133728771	02252826	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,055.64	01-FEB-13	$5,055.64	01-FEB-14	$ 5,055.64
YOUNG ADULT INSTITUTE SPV	112030172	02256682	003	4707	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,565.15	01-FEB-13	$4,565.15	01-FEB-14	$ 4,565.12
A VERY SPECIAL PLACE INC SPV	133005006	02254442	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,973.12	01-FEB-13	$3,973.12	01-FEB-14	$ 3,973.12
ABBOTT HOUSE IRA SPV	131991946	02257812	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,656.13	01-FEB-13	$4,991.04	01-FEB-14	$ 4,991.04
ABILITIES FIRST INC SPV	141467427	02248915	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,321.17	01-FEB-13	$2,316.30	01-FEB-14	$ 3,010.10
ABILITY BEYOND DISAB SPV	141758770	02246720	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,512.68	01-FEB-13	$5,512.68	01-APR-14	$ 5,742.76
ABLE2 ENHANCING POTENTIAL, INC SPV	161091767	02253547	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,443.48	01-FEB-13	$4,436.20	01-FEB-14	$ 4,980.48
ACLD SPV	116042250	02245912	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,842.94	01-FEB-13	$3,842.94	01-FEB-14	$ 3,842.94
ADULT RETARDATES CENTER SPV	111986300	02246046	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,710.58	01-FEB-13	$1,710.58	01-FEB-14	$ 1,709.53
ADVOCATES FOR SERVICES SPV	112685324	02246064	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,172.96	01-FEB-13	$4,172.96	01-FEB-14	$ 4,172.96
AID TO DEV DISABLED SPV	112573451	02246211	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,637.31	01-FEB-13	$3,623.49	01-FEB-14	$ 3,608.50
AIM SERVICES INC SPV	141609398	02246326	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,189.64	01-FEB-13	$3,165.68	01-FEB-14	$ 3,162.38
AIM SERVICES INC ND 3	141609398	02681978	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-OCT-2006	$2,969.52	03-JAN-07	$0.00	03-JAN-07	$ -
ALBANY CO CHAP NYSARC SPV	141392181	02246380	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,115.25	03-FEB-13	$0.00	03-FEB-13	$ -
ALLEGANY CO CHAP NYSARC SPV	161021588	02246775	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,853.79	01-FEB-13	$2,852.12	01-FEB-14	$ 2,852.25
ANDERSON CENTER SERVICES INC SPV	222923873	02245696	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,585.45	01-FEB-13	$4,703.67	01-FEB-14	$ 4,784.37
ANGELS UNAWARE INC SPV	133753509	02245747	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,671.55	01-FEB-13	$3,671.55	01-FEB-14	$ 3,723.47
ANOTHER STEP INC SPV	133680851	02517426	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,329.53	01-FEB-13	$4,329.53	01-FEB-14	$ 4,361.35
ASPIRE OF WNY INC ND 12	160757756	02839467	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-DEC-2006	$4,218.04	03-JAN-07	$0.00	03-JAN-07	$ -
ASPIRE OF WNY SPV	160757756	02257472	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,975.26	01-FEB-13	$3,969.52	01-FEB-14	$ 3,956.97
ASSN F/NEUR IMP BRAIN INJ SPV	112348663	02337988	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,952.97	01-FEB-13	$2,962.75	01-FEB-14	$ 2,949.05
ASSOC F/CHILD W/DOWN SYN SPV	237175975	02253923	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,252.36	01-FEB-13	$3,252.39	01-FEB-14	$ 3,247.82
ASSOC F/T ADV BLIND AND RET N	131968035	02663234	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,815.71	03-JAN-07	$0.00	03-JAN-07	$ -
ASSOC FOR ADV BLIND & RET SPV	131968035	02245783	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,672.16	01-FEB-13	$3,672.16	01-FEB-14	$ 3,672.16
ASSOC MENT ILL CHILD WEST SPV	132554243	02245765	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,960.66	01-FEB-13	$1,958.49	01-FEB-14	$ 1,958.03
AUTISTIC SERVICES INC ND 4	161185024	02740467	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-DEC-2006	$3,800.58	03-JAN-07	$0.00	03-JAN-07	$ -
AUTISTIC SERVICES INC SPV	161185024	02245834	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,590.61	01-FEB-13	$3,575.59	01-FEB-14	$ 3,565.51
BAKER VICTORY SERVICES SPV	161017453	02687965	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,441.59	01-FEB-13	$5,209.92	01-FEB-14	$ 5,205.89
BIRCH FAMILY SVCS INC SPV	112503193	02247170	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,278.40	01-FEB-13	$6,484.70	01-FEB-14	$ 6,452.45
BLOCK INSTITUTE SPV	112416320	02259543	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,255.65	01-FEB-13	$3,495.35	01-FEB-14	$ 3,485.77

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
BROOME-TIOGA CO CHAP NYSARC SPV	150619307	02246082	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,271.57	01-FEB-13	$2,264.02	01-FEB-14	$ 2,260.36
CAMP VENTURE INC SPV	132661988	02252968	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,436.44	01-FEB-13	$3,433.53	01-FEB-14	$ 3,283.79
CAMPHILL HUDSON INC SPV	264101808	03265203	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,498.75	01-FEB-13	$2,498.75	01-FEB-14	$ 2,498.75
CARDINAL MCCLOSKEY SCHOOL SPV	131740443	02245756	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,112.07	01-FEB-13	$5,112.07	01-FEB-14	$ 5,112.07
CATH CHAR NGHBHD SVCS INC SPV	112047151	02608280	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,398.90	01-FEB-13	$5,474.92	01-JUN-14	$ 5,474.92
CATH CHARITIES DIO ROCH SPV	160743944	02620919	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,704.35	01-FEB-13	$1,703.02	01-FEB-14	$ 1,704.21
CATHOLIC CHAR DIO RVC SPV	111843801	02245930	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010579	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010588	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010597	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010602	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010611	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010620	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010639	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010648	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010657	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR DIO RVC SPV	111843801	03010666	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,453.16	01-FEB-13	$3,350.44	01-FEB-14	$ 3,377.63
CATHOLIC CHAR OF CHENANGO CO SPV	161307983	03187762	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,771.19	01-FEB-13	$3,771.19	01-FEB-14	$ 3,771.19
CATHOLIC CHARITIES DDS SPV	141340033	02245985	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,239.42	01-FEB-13	$5,239.42	01-FEB-14	$ 5,260.55
CATHOLIC CHARITIES/BROOME/SPV	161170407	02859332	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,308.96	01-FEB-13	$4,291.31	01-FEB-14	$ 4,286.13
CATHOLIC GUARDIAN SOCIETY SPV	135562186	02253978	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,988.19	01-FEB-13	$5,102.64	01-FEB-14	$ 5,102.64
CATTARAUGUS CO NYSARC SPV	160818293	02246019	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,271.66	01-FEB-13	$3,270.23	01-FEB-14	$ 3,270.91
CDS MONARCH INC SPV	161089115	02246606	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,836.96	01-FEB-13	$2,829.46	01-FEB-14	$ 2,825.31
CENTER F/DISAB SVCS SPV	141425851	02250053	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,826.84	01-FEB-13	$3,816.49	01-FEB-14	$ 3,807.48
CENTER F/RAPID RECVRY SPV	113246332	02257918	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,583.10	01-FEB-13	$3,583.10	01-FEB-14	$ 3,583.10
CENTER FOR DEVELOP DISAB SPV	111874383	02256499	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,369.43	01-FEB-13	$4,369.43	01-MAR-14	$ 4,732.35
CHAUTAUQUA CO CHAP ARC SPV	160968914	02245967	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,425.84	01-FEB-13	$3,441.45	01-APR-14	$ 3,461.75
CHEMUNG CO CHAP ARC SPV	160795709	02245994	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,070.59	01-FEB-13	$3,062.58	01-FEB-14	$ 3,125.75
CHENANGO CO CHAP NYSARC SPV	160970103	02359777	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,030.96	01-FEB-13	$3,030.96	01-FEB-14	$ 2,315.90
CHINESE AMERICAN PLAN SPV	136202692	02246317	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,040.71	01-FEB-13	$4,040.71	01-FEB-14	$ 4,040.71
CITIZEN ADVOCATES INC SPV	141577715	02255067	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,286.88	01-FEB-13	$3,259.75	01-MAR-14	$ 3,260.03
CLADDAGH COMMISSION SPV	161096096	02246353	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,734.65	01-FEB-13	$2,729.02	01-FEB-14	$ 2,724.60
CLINTON CO CHAPTER NYSARC SPV	141463735	02247189	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,818.51	01-FEB-13	$3,818.51	01-FEB-14	$ 3,931.57
CNTRO SOC LA ESPERNZA SPV	132688412	02245903	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,373.68	01-FEB-13	$3,373.68	01-FEB-14	$ 3,482.23
COLUMBIA COUNTY CHAP ARC SPV	141489603	02247203	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,509.15	01-FEB-13	$2,445.31	01-FEB-14	$ 2,843.14
COMM LIVING CORP SPV	133563609	02247258	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,395.13	01-FEB-13	$3,391.35	01-FEB-14	$ 3,770.45
COMM MAINSTREAMING INC ND 3	237448487	02840453	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,994.26	03-JAN-07	$0.00	03-JAN-07	$ -
COMM MAINSTREAMING INC SPV	237448487	02259561	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,567.14	01-FEB-13	$3,616.75	01-FEB-14	$ 3,671.62
COMM RESOURCE CTR F/DD SPV	132954788	02246500	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,051.86	01-FEB-13	$5,051.86	01-FEB-14	$ 5,051.86
COMM SVCS F/T DEV DISAB ND 12	161317369	02839458	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-NOV-2006	$3,390.92	03-JAN-07	$0.00	03-JAN-07	$ -
COMM SVCS F/T DEV DISABIL SPV	161317369	02253469	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,891.49	01-FEB-13	$3,891.37	01-FEB-14	$ 4,057.35
COMMUNITY ACTION F/HUM SV SPV	222317376	02279849	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,629.47	01-FEB-13	$3,629.47	01-FEB-14	$ 3,620.64
COMMUNITY BASED SER INC SPV	133070655	02559424	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,138.76	01-FEB-13	$4,913.77	01-FEB-14	$ 4,791.65
COMMUNITY OPTIONS NY SPV	113414724	02259598	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,346.97	01-FEB-13	$4,405.84	01-JUN-14	$ 4,462.62
COMMUNITY PROGS OF WJCS SPV	132985945	02247336	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,341.46	01-FEB-13	$4,341.46	01-FEB-14	$ 4,341.46
COMMUNITY RESOURCES SPV	135660279	02625152	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,482.63	01-FEB-13	$4,482.63	01-FEB-14	$ 4,482.63
COMMUNITY WORK & INDEPEND SPV	141470091	02246528	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-2013	$4,771.80	01-MAR-13	$4,783.83	01-FEB-14	$ 4,785.42
CONTINUING DEVELOP SVCS ND 4	161089115	02826180	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-DEC-2006	$6,092.15	03-JAN-07	$0.00	03-JAN-07	$ -
CREATIVE LIFESTYLES SPV	113151481	02255094	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,649.79	01-FEB-13	$3,649.79	01-FEB-14	$ 3,649.79
CROSSROADS UNLIMITED SPV	710967724	02728485	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,265.47	01-FEB-13	$5,265.47	01-FEB-14	$ 5,481.54

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
CRYSTAL RUN VILLAGE INC SPV	112466996	02246711	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,743.16	01-FEB-13	$3,724.04	01-FEB-14	$ 3,815.05
CTR FOR FAMILY SUPPORT SPV	131913807	02246106	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,289.66	01-FEB-13	$4,309.22	01-MAR-14	$ 4,548.15
DELAWARE CO CHAP NYSARC SPV	160976343	02599842	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,177.65	01-FEB-13	$2,174.88	01-FEB-14	$ 2,169.88
DEPAUL DEV SERVICES SPV	202017098	02734701	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,999.77	01-FEB-13	$3,999.77	01-FEB-14	$ 3,999.77
DEVELOPMENTAL DIS INST SPV	116077347	02246748	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,508.52	01-FEB-13	$6,508.52	01-MAY-14	$ 6,508.52
DEVEREUX FOUNDATION SPV	231390618	02246757	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,425.16	01-FEB-13	$3,465.07	01-MAY-14	$ 3,570.98
E DOUGLIN CTR/SERV PPLE SPV	113356044	02246688	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,794.45	01-FEB-13	$4,838.76	01-JUN-14	$ 5,159.63
EAST END DISABILITY ASSOC SPT	113318718	02259709	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,375.62	01-FEB-13	$4,375.62	01-FEB-14	$ 4,375.62
EAST HARLEM COUN F/COMM SPV	132969933	02256513	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,924.97	01-MAR-13	$4,924.97	01-FEB-14	$ 4,924.97
EASTER SEALS NEW YORK INC SPV	135596808	02257252	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,227.54	01-FEB-13	$4,227.54	01-FEB-14	$ 4,299.29
EDEN II SCHOOL SPV	132872916	02460286	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,741.73	01-FEB-13	$6,741.73	01-FEB-14	$ 6,741.73
EDWIN GOULD SVCS/CHILD SPV	135675643	02246766	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,385.26	01-MAR-13	$5,345.41	01-FEB-14	$ 5,632.03
EIHAB HUMAN SERVICES SPV	113376415	02246784	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,404.70	01-FEB-13	$4,404.70	01-FEB-14	$ 4,427.30
ELMCREST CHILDRENS CENTER INC SPV	150539090	02952885	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,366.55	01-FEB-13	$4,366.55	01-FEB-14	$ 4,366.55
ELMYS SPECIAL SERVICES INC SPV	020590957	03082560	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,726.36	01-FEB-13	$3,726.36	01-APR-14	$ 4,612.41
EPILEPSY ASSOC/ROCHESTER SPV	222146295	02246399	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,621.80	01-FEB-13	$2,618.02	03-MAY-13	$ -
EPILEPSY FOUNDATION LI SPV	111821135	02714785	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,212.79	01-FEB-13	$4,212.79	01-APR-14	$ 4,233.47
EPISCOPAL SOCIAL SERVICES SPV	133709095	02246440	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,245.49	01-FEB-13	$4,245.49	01-FEB-14	$ 4,247.41
ERIE COUNTY ARC SPV	160769044	02246555	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,935.05	01-FEB-13	$2,939.88	01-FEB-14	$ 2,921.31
ESSEX COUNTY CHAP NYSARC SPV	141563885	02246642	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,631.86	01-FEB-13	$4,472.29	01-MAY-14	$ 4,524.07
FED EMPLOY & GUIDANCE SVC SPV	131624000	02246995	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,602.33	01-FEB-13	$4,602.33	01-JUN-14	$ 4,718.54
FEDERATION/MULTICULTURAL PROG SPV	112422505	02934494	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,153.52	01-FEB-13	$2,281.44	01-FEB-14	$ 2,308.03
FINGER LAKES UCP INC SPV	160965912	02687869	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,928.55	01-FEB-13	$3,928.55	01-FEB-14	$ 3,928.55
FRANKLIN CO NYSARC SPV	237150954	02249874	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,565.24	01-FEB-13	$3,558.12	01-MAR-14	$ 3,721.11
FRANZISKA RACKER CENTERS SPV	150581887	02246968	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,925.85	01-FEB-13	$3,987.22	01-MAY-14	$ 4,308.87
FREE SUPERVISED IRA SPV	112420547	02247029	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,213.04	01-MAR-13	$4,236.11	01-APR-14	$ 4,544.11
FULTON CO ARC SPV	146020996	02463129	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,700.63	01-FEB-13	$4,709.73	01-FEB-14	$ 4,779.58
GAN KAVOD INC SPV	223032483	03057669	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$7,225.45	01-FEB-13	$7,225.45	01-FEB-14	$ 7,225.45
GATEWAY COMM INDUSTRIES INC SPV	141458757	03370472	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,230.74	01-FEB-13	$2,234.96	01-FEB-14	$ 2,241.22
GENERAL HUMAN OUTREACH SPV	113134570	02247092	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,666.86	01-FEB-13	$3,666.86	01-FEB-14	$ 3,668.78
GENESEE CO ARC SPV	161001185	02247107	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,038.25	01-FEB-13	$3,029.80	01-FEB-14	$ 3,006.02
GRACE LUTHERAN RES SVC SPV	161554927	02247125	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,209.64	01-FEB-13	$3,208.33	01-FEB-14	$ 3,212.15
GREYSTONE PROGRAMS INC SPV	141608318	02247152	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,588.82	01-FEB-13	$4,588.82	01-FEB-14	$ 4,588.82
GROTON COMM HLTH CARE CTR SPV	237300255	02252913	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,431.34	01-FEB-13	$3,431.34	01-FEB-14	$ 3,433.26
GUILD F/EXCEPTIONAL CHILD ND4	116037766	02408340	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-AUG-2006	$1,922.57	03-JAN-07	$0.00	03-JAN-07	$ -
GUILD F/EXCEPTIONAL CHILD ND5	116037766	02519015	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-AUG-2006	$1,788.17	03-JAN-07	$0.00	03-JAN-07	$ -
GUILD F/EXCEPTIONAL CHILD SPV	116037766	02247010	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,924.01	01-FEB-13	$3,969.37	01-FEB-14	$ 3,969.37
HAMASPIK OF ORANGE CO SPV	141711583	02248295	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,462.42	01-FEB-13	$3,462.42	01-FEB-14	$ 3,462.42
HANDICAPPED CHILD SO NY SPV	150516395	02247038	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,156.83	01-FEB-13	$4,184.46	01-JUN-14	$ 4,594.67
HASC CENTER INC ND 13	112630071	02803538	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,419.25	03-JAN-07	$0.00	03-JAN-07	$ -
HASC CENTER INC SPV	112630071	02247056	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,563.34	01-MAR-13	$4,630.34	01-FEB-14	$ 4,617.44
HAWTHORNE FOUNDATION INC SPV	133447893	02247116	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,127.89	01-FEB-13	$4,027.56	01-FEB-14	$ 4,019.02
HCA OF SOUTHERN NY INC ND 7	150516395	02838631	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$4,753.46	03-JAN-07	$0.00	03-JAN-07	$ -
HEAD INJURY ASSOCIATION INC SPV	112946185	02256568	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,404.62	01-FEB-13	$4,404.62	01-APR-14	$ 4,816.38
HEARTSHARE HUMAN SERVICES SPV	111633549	02247143	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,467.21	02-MAR-13	$4,587.99	01-FEB-14	$ 4,604.34
HELEN KELLER SVCS F/T BLD SPV	111630807	02315768	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,962.71	01-FEB-13	$3,962.71	01-FEB-14	$ 5,428.59
HERITAGE CHRISTIAN SVCS ND16	222334190	02826171	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$4,028.25	03-JAN-07	$0.00	03-JAN-07	$ -
HERITAGE CHRISTIAN SVCS SPV	222334190	02247276	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,009.63	01-MAR-13	$3,995.26	01-APR-14	$ 4,099.63
HERKIMER CO CHAP NYSARC SPV	160973231	02247309	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,544.64	01-FEB-13	$2,540.96	01-MAY-14	$ 2,584.23
HILLSIDE CHILDRENS CTR SPV	160743039	02247212	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,442.22	01-FEB-13	$5,442.22	01-FEB-14	$ 5,442.22

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
HUMAN CARE SVCS F/FAM CH SPV	113338946	02254171	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,991.72	01-FEB-13	$4,991.72	01-FEB-14	$ 4,991.72
HUMAN FIRST INC SPV	113590136	03528301	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-MAR-14	5950.29
IBERO AMERICAN ACT LEAGUE SPV	160954745	02252922	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,291.03	01-FEB-13	$3,284.36	01-FEB-14	$ 3,269.88
ICL JOSELOW HOUSE INC SPV	134053788	02753097	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,027.17	01-FEB-13	$4,027.17	01-FEB-14	$ 4,027.17
IN FLIGHT INC SPV	141764481	02247294	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,383.20	01-FEB-13	$4,383.20	01-FEB-14	$ 4,383.23
INDEPENDENCE RESIDENCES SPV	133490223	02255163	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,295.17	01-MAR-13	$4,554.44	01-FEB-14	$ 4,683.51
INDEPENDENT GR HM LIVING SPV	112458584	02247327	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,383.83	01-FEB-13	$4,391.00	01-FEB-14	$ 4,513.69
INDEPENDENT LIVING ASSN SPV	112729771	02378063	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,135.50	01-FEB-13	$6,135.50	01-FEB-14	$ 6,135.50
INST OF APPLIED HUMAN DYN SPV	132573827	02256540	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,152.50	01-FEB-13	$4,152.50	01-FEB-14	$ 4,152.50
INSTITUTE FOR COMM LIVING SPV	133306195	02256531	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,752.54	01-FEB-13	$4,752.54	01-APR-14	$ 4,833.05
JAMAICA HOSPITAL MED CTR SPV	111631788	02247390	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,436.20	01-FEB-13	$3,436.20	01-FEB-14	$ 3,414.54
JAWONIO INC SPV	131761660	02247432	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,206.28	01-FEB-13	$5,206.28	01-FEB-14	$ 5,206.28
JEFFERSON REHABILITATION SPV	161134631	02247487	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,220.60	01-FEB-13	$2,220.87	01-FEB-14	$ 2,221.72
JEWISH BOARD OF FAM CHILD SPV	135564937	02253414	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,270.52	01-FEB-13	$5,270.52	01-FEB-14	$ 5,270.52
JOB PATH INC SPV	134038495	02386881	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,358.45	01-FEB-13	$4,358.45	01-FEB-14	$ 4,358.45
JOSHUA HOUSE INC SPV	161427778	02257261	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,355.20	01-FEB-13	$3,348.24	01-FEB-14	$ 3,890.61
KELBERMAN CTR INC SPV IRA	550901293	03697638	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-FEB-14	6056.53
L ARCHE SYRACUSE INC SPV	161085314	02255118	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,550.91	01-FEB-13	$3,550.91	01-FEB-14	$ 3,550.91
LEAKE AND WATTS SVCS INC SPV	131860451	02781060	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,832.60	01-FEB-13	$4,895.89	01-FEB-14	$ 4,895.89
LEARNING DISAB ASSOC WNY SPV	161118058	02247592	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,236.05	01-FEB-13	$3,235.60	01-FEB-14	$ 3,237.04
LEARNING DISABIL/GEN VAL SPV	222702285	02247616	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,054.35	01-FEB-13	$3,077.25	01-FEB-14	$ 3,074.04
LIBERTY RESOURCES INC SPV	161129675	02256559	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,359.89	01-FEB-13	$4,320.94	01-FEB-14	$ 4,333.36
LIBERTY/MONTGOMERY ARC SPV	141506257	02617792	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,883.13	01-FEB-13	$4,878.63	01-MAR-14	$ 4,920.65
LIFE ADJUSTMENT CENTER SPV	133620577	02247372	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,627.85	01-FEB-13	$3,627.85	01-FEB-14	$ 3,627.85
LIFESPIRE INC SPV	132526022	02247414	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,866.94	01-FEB-13	$3,866.94	01-FEB-14	$ 3,866.94
LIFETIME ASSISTANCE INC SPV	222221158	02253432	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,190.23	01-FEB-13	$4,194.72	01-FEB-14	$ 4,219.77
LITTLE FLOWER CHILDRENS SPV	111633572	02320107	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,025.00	01-FEB-13	$4,286.60	01-APR-14	$ 4,310.22
LITTLE VILLAGE HOUSE SPV	112881075	02758276	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,316.07	01-FEB-13	$4,316.07	01-FEB-14	$ 4,316.07
LIVING EXPLORING ALL POSS SPV	161467182	02247565	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,925.19	01-FEB-13	$3,925.19	01-FEB-14	$ 3,925.19
LIVING RESOURCES CORP ND 6	141564208	02742616	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$5,989.40	03-JAN-07	$0.00	03-JAN-07	$ -
LIVING RESOURCES CORP SPV	141564208	02247441	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,756.83	01-FEB-13	$2,745.93	01-JUN-14	$ 2,837.88
LIVINGSTON WYOMING ARC ND 5	161022565	02513500	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-NOV-2006	$4,110.81	03-JAN-07	$0.00	03-JAN-07	$ -
LIVINGSTON WYOMING ARC ND 6	161022565	02513546	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,533.26	03-JAN-07	$0.00	03-JAN-07	$ -
LIVINGSTON WYOMING ARC SPV	161022565	02513486	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,639.11	01-FEB-13	$2,780.82	01-FEB-14	$ 2,778.22
LOCHLAND SCHOOL INC SPV	160780944	02248328	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,700.67	01-FEB-13	$3,698.15	01-FEB-14	$ 3,697.37
MADISON CORTLAND NYSARC SPV	160958020	02256586	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,798.39	01-FEB-13	$2,788.39	01-FEB-14	$ 2,808.68
MARANATHA HUMAN SERVICES SPV	141755068	02248391	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,237.14	01-FEB-13	$4,222.44	01-FEB-14	$ 4,214.64
MARY CARIOLA CHILD CTR SPV	160771078	02416035	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,473.35	01-FEB-13	$6,473.35	01-FEB-14	$ 6,473.35
MARYHAVEN CENTER OF HOPE SPV	112861698	02248497	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,421.36	01-FEB-13	$3,769.86	01-APR-14	$ 3,715.99
MENORAH PARK GROUP RESIDENCES SPV	262639157	03035921	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,776.09	01-FEB-13	$2,776.09	01-FEB-14	$ 2,776.09
MENTAL HEALTH ASSOC OF NASSAU SPV	111710983	03154363	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,770.23	01-FEB-13	$4,770.23	01-FEB-14	$ 4,770.23
MERCY HOME FOR CHILDREN SPV	111666227	02254204	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,254.13	01-FEB-13	$4,254.13	01-FEB-14	$ 4,254.13
MISSION OF IMMAC VIRGIN SPV	135562286	02253478	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,270.82	01-FEB-13	$4,270.82	01-FEB-14	$ 4,263.21
MODEST COMMUNITY SERVICES ASSOC SPV	134288916	03075183	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,199.55	01-FEB-13	$4,199.55	01-FEB-14	$ 4,144.81
MONROE CO CHAP NYSARC SPV	160835172	02248608	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,899.13	01-FEB-13	$2,894.21	01-FEB-14	$ 3,056.33
MULTI COUNTY CDC SPV	141558673	02248671	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,998.64	01-FEB-13	$3,878.60	01-FEB-14	$ 3,858.26
NASSAU CO AHRC INC SPV	261520311	03045301	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,063.66	01-FEB-13	$4,063.66	01-APR-14	$ 5,044.16
NASSAU CO CHAP NYSAHRC SPV	111720254	02248855	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,840.60	01-MAR-13	$3,873.69	01-FEB-14	$ 3,873.69
NEW HOPE COMMUNITY INC SPV	222871755	02248795	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,890.04	01-FEB-13	$3,836.39	01-FEB-14	$ 4,044.23
NEW HORIZONS RESOURCES SPV	524862107	02248819	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,021.26	01-FEB-13	$4,020.28	01-FEB-14	$ 4,261.07

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
NEW YORK FOUNDLING HOSP ND 2	131624123	02812004	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-NOV-2006	$4,109.33	03-JAN-07	$0.00	03-JAN-07	$ -
NEW YORK FOUNDLING HOSP SPV	131624123	02254222	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,243.25	01-FEB-13	$5,243.25	01-JUN-14	$ 5,372.81
NYSARC DUTCHESS CNTY SPV	146077915	02253670	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,678.48	01-FEB-13	$2,671.38	01-FEB-14	$ 3,161.54
NYSARC INC NYC CHAPTER SPV	135596746	02248933	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,096.39	01-FEB-13	$5,096.39	01-MAY-14	$ 4,882.49
NYSARC INC ORANGE CNTY SPV	141462340	02259589	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,169.02	01-FEB-13	$3,177.60	01-FEB-14	$ 3,177.79
NYSARC INC SUFFOLK CHAP SPV	111845294	02249856	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,667.76	01-FEB-13	$2,649.81	01-JUN-14	$ 2,684.17
NYSARC NIAGARA CO CHAP SPV	160794847	02253496	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,334.37	01-FEB-13	$2,332.09	01-FEB-14	$ 2,455.07
OCCUPATIONS INC SPV	141471097	02248988	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,974.81	01-FEB-13	$5,966.55	01-MAY-14	$ 5,303.97
OHEL CHILDRENS HM/FAM SPV	116078704	02750594	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,312.58	01-FEB-13	$4,312.58	01-APR-14	$ 4,314.53
ON YOUR MARK INC SPV	133128315	02548561	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,722.00	01-FEB-13	$3,722.00	01-FEB-14	$ 3,735.40
ONONDAGA CO CHAP NYSARC SPV	150561718	02249076	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,868.33	01-FEB-13	$2,864.32	01-FEB-14	$ 2,841.27
ONONDAGA COMM LIVING SPV	161275425	02254286	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,762.37	01-FEB-13	$2,762.37	01-FEB-14	$ 2,764.29
ONTARIO ARC SPV	160786219	02360552	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,960.07	01-FEB-13	$2,953.32	01-MAY-14	$ 3,094.02
OPENGATE INC SPV	132634269	02249127	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,587.12	01-FEB-13	$3,587.12	01-FEB-14	$ 4,129.68
ORLEANS COUNTY CHAP ARC SPV	237150957	02249163	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,738.50	01-FEB-13	$2,729.96	01-FEB-14	$ 2,826.34
OSWEGO CO OPPORTUNITIES SPV	160979876	02249181	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,592.02	01-FEB-13	$2,593.47	01-FEB-14	$ 2,601.04
OTSEGO COUNTY CHAP NYSARC SPV	160953477	02249205	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,988.42	01-FEB-13	$4,052.48	01-MAR-14	$ 3,978.25
PARENTAL LOVING CARE INC SPV	133986940	02248268	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,875.58	01-FEB-13	$4,875.58	01-FEB-14	$ 4,875.58
PARTNERSHIP FOR INNOV CC SPV	133537258	02248286	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,224.29	01-FEB-13	$4,224.29	01-NOV-13	$ -
PATHFINDER VILLAGE INC SPV	150618744	02248346	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,130.79	01-FEB-13	$2,110.57	01-FEB-14	$ 2,112.48
PATHWAYS INC SPV	161089007	02248406	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,347.86	01-FEB-13	$3,341.40	01-FEB-14	$ 3,336.34
PAUL J COOPER CTR/ H S SPV	112245967	02257385	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,145.75	01-FEB-13	$4,145.75	01-FEB-14	$ 4,145.75
PEOPLE INC - HCBS IRA 9 SPV	160975538	02248479	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,194.55	01-FEB-13	$3,315.10	01-FEB-14	$ 3,399.85
PERSON CENTERED CARE SERVICES SPV	202878791	02952876	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,390.21	01-FEB-13	$5,390.21	01-FEB-14	$ 5,377.02
PLUS GROUP HOMES INC SPV	112530267	02248548	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,654.98	01-FEB-13	$4,654.98	01-FEB-14	$ 4,654.98
PRALID INC SPV	161422825	02248617	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,895.00	01-FEB-13	$5,837.34	01-FEB-14	$ 4,627.17
PROGRAM DEVELOPMENT SVCS SPV	112715916	02257270	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,469.29	01-FEB-13	$4,469.29	01-FEB-14	$ 4,469.29
PROJECT INDEPENDENCE INC SPV	161173031	02581579	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,365.59	01-FEB-13	$1,365.59	01-FEB-14	$ 1,367.51
PROVIDER HAMASPIK KINGS SPV	161522895	02248277	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,447.25	01-FEB-13	$5,447.25	01-JUN-14	$ 5,447.25
PROVIDER HAMASPIK ROCKLD SPV	133978518	02248319	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,157.13	01-FEB-13	$4,157.13	01-FEB-14	$ 4,157.13
PSCH INC SPV	112542430	02248337	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,148.46	01-FEB-13	$4,148.46	01-MAY-14	$ 4,258.90
PSCH ND 15	112542430	02839412	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$4,830.60	03-JAN-07	$0.00	03-JAN-07	$ -
PUERTO RICAN FAMILY INST SPV	136167177	02366190	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,602.27	01-FEB-13	$3,602.27	01-FEB-14	$ 3,602.27
PUTNAM COUNTY CHAP NYSARC SPV	141426729	02248373	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,398.94	01-FEB-13	$3,398.94	01-FEB-14	$ 3,398.94
QSAC SPV	112482974	02248424	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,011.19	01-FEB-13	$5,011.19	01-JUN-14	$ 5,202.93
QUEENS PARENT RESRC CTR SPV	113211119	02248488	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,073.82	01-FEB-13	$4,073.82	01-FEB-14	$ 4,073.82
QUICK SOCIAL SERVICES INC SPV	113265113	02248644	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,326.90	01-FEB-13	$3,326.90	01-FEB-14	$ 3,328.82
RENSS CO CHAP NYSARC SPV	141485873	02249021	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,832.97	01-FEB-13	$3,838.34	01-MAY-14	$ 3,854.79
RICHMOND CHILDRENS CENTER SPV	132736761	02249094	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,458.68	02-FEB-13	$6,458.68	01-FEB-14	$ 6,458.68
RIVERSHORE INC SPV	161146128	02248846	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,210.12	01-FEB-13	$2,182.98	01-FEB-14	$ 2,179.79
ROCKLAND CO CHAP NYSARC SPV	131916359	02248891	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,768.65	01-FEB-13	$3,759.00	01-FEB-14	$ 3,756.84
ROCKLAND COUNTY ALD SPV	132951835	02256619	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$6,739.94	01-FEB-13	$6,736.36	01-FEB-14	$ 6,189.52
SARATOGA CNTY ARC SPV	141465932	02248924	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,070.12	01-FEB-13	$3,069.68	01-APR-14	$ 3,303.08
SARATOGA COUNTY ARC ND 3	141465932	02849118	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,392.71	03-JAN-07	$0.00	03-JAN-07	$ -
SCHDY CO CHAP NYSARC SPV	141459277	02248960	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,742.24	01-FEB-13	$3,742.24	01-MAR-14	$ 3,856.79
SCHOHARIE CHAP NYSARC INC SPV	141494347	02255214	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,697.28	01-FEB-13	$2,700.02	01-APR-14	$ 2,811.00
SCHUYLER CO CHAP NYSARC SPV	161120089	02249085	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,207.19	01-FEB-13	$3,238.18	01-FEB-14	$ 3,234.87
SDTC CTR FOR DISCOVERY SPV	141395426	02256628	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,953.84	01-FEB-13	$4,953.84	01-FEB-14	$ 4,953.84
SENECA-CAYUGA NYSARC SPV	161124314	02249118	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,592.81	01-FEB-13	$2,617.55	01-FEB-14	$ 2,618.87
SERVICES F/DEV CHALLENGED SPV	133921190	02249223	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,377.00	01-FEB-13	$4,377.00	01-FEB-14	$ 4,377.00

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
SERVICES FOR UNDERSERVED SPV	133250383	02249796	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,143.16	01-FEB-13	$5,143.16	01-FEB-14	$ 5,323.03
SHARE OF NEW SQUARE SPV	133475062	02811741	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,252.64	01-FEB-13	$4,252.64	01-FEB-14	$ 4,252.64
SINERGIA INC SPV	133183344	02249801	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,352.65	01-FEB-13	$4,352.65	01-FEB-14	$ 4,352.64
SOUTHEAST BRONX NEIGHBORHOOD SPV	132675560	02973788	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,758.51	01-FEB-13	$2,758.51	01-FEB-14	$ 2,758.51
SOUTHEAST COMM WORK CTR SPV	161074815	02256637	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,805.95	01-FEB-13	$2,748.30	01-FEB-14	$ 2,782.16
SPAULDING PRAY RES CORP SPV	161196869	02249961	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,031.44	01-FEB-13	$2,091.08	01-FEB-14	$ 2,040.11
SPECIAL CIT FUTURE UNLTD SPV	132865903	02354089	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,596.69	01-FEB-13	$4,596.69	01-FEB-14	$ 4,596.69
SPECIAL NEEDS PROGRAM INC SPV	222325526	02250008	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,013.92	01-MAR-13	$4,013.92	01-APR-14	$ 4,025.51
SPRINGBROOK NY INC SPV	150539129	02252871	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,160.59	01-FEB-13	$3,203.73	01-MAR-14	$ 3,668.72
ST CHRISTOPHER OTTILIE SPV	112777066	02250026	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,392.21	01-FEB-13	$4,536.74	01-FEB-14	$ 4,536.74
ST DOMINICS HOME SPV	131740399	02280106	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,469.23	01-FEB-13	$4,465.94	01-FEB-14	$ 4,463.53
ST LAWRENCE NYSARC INC SPV	150617072	02250071	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,830.52	01-FEB-13	$2,826.25	01-FEB-14	$ 2,876.64
ST REGIS MOHAWK TRIBE IRA SPV	161007650	02255374	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,722.84	01-FEB-13	$3,716.34	01-FEB-14	$ 3,711.01
ST VINCENTS SERVICES INC SPV	111631823	02254373	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,380.00	01-FEB-13	$4,380.00	01-FEB-14	$ 4,366.47
STEUBEN CO CHAP NYSARC SPV	160971450	02249829	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,107.84	01-FEB-13	$3,101.87	01-FEB-14	$ 3,099.98
STONY FORD FOUNDATION SPV	061207341	03172209	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,066.22	01-FEB-13	$1,263.85	01-FEB-14	$ 1,265.76
SUBURBAN ADULT SERVICES SPV	161115992	02249838	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,963.00	01-FEB-13	$3,942.85	01-FEB-14	$ 4,052.88
SULLIVAN CO CHAP NYSARC SPV	146028767	02249865	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,450.50	01-FEB-13	$3,540.99	01-FEB-14	$ 3,401.84
TANGLEWOOD ACRES ADULT HM SPV	133099825	02331588	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,400.73	01-FEB-13	$2,388.24	01-FEB-14	$ -
THE ALTERNATIVE LIV GRP SPV	141713378	02249943	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,670.97	01-FEB-13	$3,658.69	01-FEB-14	$ 3,853.43
THE ARC ONEIDA LEWIS ARC SPV	150581298	02249952	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,404.95	01-FEB-13	$2,394.99	01-FEB-14	$ 2,388.61
THE SALVATION ARMY SPV	135562351	02728476	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,352.27	01-FEB-13	$4,352.27	01-FEB-14	$ 4,352.27
TOOMEY RES & COMM SVCS SPV	161363414	02353560	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,787.92	01-FEB-13	$3,773.28	01-MAR-14	$ 3,909.13
TRANSITIONAL LIVING SVC SPV	161039435	02284311	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,560.35	01-FEB-13	$3,560.35	01-FEB-14	$ 3,648.82
UCP & HANDI PERS UTICA SPV	150543657	02257454	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,332.28	01-FEB-13	$4,332.28	01-FEB-14	$ 4,316.08
UCP ASSOC OF NASSAU SPV	111723782	02252519	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,730.28	01-FEB-13	$3,730.28	01-FEB-14	$ 3,772.95
UCP ASSOC OF ROCHESTER SPV	160743950	02257394	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,541.79	01-FEB-13	$3,539.78	01-FEB-14	$ 3,527.36
UCP HANDI CHILD ASSOC SYR SPV	150532247	02252624	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,415.91	01-FEB-13	$4,415.91	01-FEB-14	$ 4,427.84
UCP OF NYC INC SPV	135654532	02255383	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,892.17	01-FEB-13	$4,892.17	01-APR-14	$ 4,923.61
UCP OF QUEENS SPV	111665821	02252615	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,566.21	01-FEB-13	$4,566.21	01-FEB-14	$ 4,566.21
UCP OF ULSTER CO SPV	141377518	02621052	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,866.09	01-FEB-13	$2,866.09	01-MAY-14	$ 3,042.49
UCP OF UTICA ND 5	150543657	02814244	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$6,272.41	03-JAN-07	$0.00	03-JAN-07	$ -
UCP OF WESTCHESTER SPV	131690769	03110950	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,070.85	01-FEB-13	$4,070.85	01-FEB-14	$ 4,070.85
UCP PUTNAM/S DUTCHESS SPV	141813412	02252591	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,564.60	01-FEB-13	$4,564.60	01-FEB-14	$ 4,573.43
UCPA NIAGARA COUNTY INC SPV	160786061	02252757	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,511.96	01-FEB-13	$4,505.09	01-FEB-14	$ 4,491.02
UCPA OF CAYUGA CO INC SPV	150576613	02577764	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,729.68	01-FEB-13	$3,764.51	01-FEB-14	$ 3,903.99
UCPA OF GTR SUFFOLK SPV	112568841	02252702	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,608.99	01-FEB-13	$4,608.99	01-FEB-14	$ 4,703.48
UCPA OF NYS SPV	131623856	02257358	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$7,041.62	01-FEB-13	$7,041.62	01-FEB-14	$ 7,027.59
UCPA OF THE NORTH COUNTRY SPV	161568985	02257289	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,756.25	01-FEB-13	$3,746.38	01-FEB-14	$ 3,732.34
UCPA OF THE TRI COUNTIES SPV	141495700	02320501	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,380.51	01-FEB-13	$4,380.51	01-FEB-14	$ 4,380.51
ULSTER GREENE ARC SPV	141437657	02252711	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,588.65	01-FEB-13	$3,577.06	01-MAR-14	$ 3,641.58
UNIQUE PEOPLE SERVICES ND 1	133636555	02769428	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$5,865.46	03-JAN-07	$0.00	03-JAN-07	$ -
UNIQUE PEOPLE SERVICES ND 2	133636555	02769419	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,612.99	03-JAN-07	$0.00	03-JAN-07	$ -
UNIQUE PEOPLE SERVICES SPV	133636555	02252817	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,833.35	01-FEB-13	$4,833.35	01-JUN-14	$ 4,977.39
UNITED HELPERS CARE INC SPV	222412205	02252835	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,786.68	01-FEB-13	$3,762.35	01-FEB-14	$ 3,762.90
UNITY HOUSE OF CAYUGA CO SPV	161081372	02252862	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,755.46	01-FEB-13	$2,746.49	01-JUN-14	$ 2,827.58
URBAN RESOURCE INSTITUTE SPV	112561648	02392785	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,955.70	01-FEB-13	$4,955.70	01-FEB-14	$ 4,955.70
VANDERHEYDEN HALL INC SPV	141338575	02252880	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,746.07	01-FEB-13	$3,745.13	01-JUN-14	$ 4,106.21
VOLUNTEERS OF AMERICA SPV	581959781	02284348	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-AUG-2011	$4,202.91	01-FEB-13	$4,188.92	01-FEB-14	$ 4,193.06
WARREN WASHINGTON CO ARC SPV	141560053	02252899	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-2013	$3,453.77	01-MAR-13	$3,451.63	01-JUN-14	$ 3,495.59

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
WAYNE CO CHAP NYSARC INC SPV	237540582	02252528	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,672.68	01-FEB-13	$2,663.72	01-JUN-14	$ 2,785.47
WESTCHESTER NYSARC SPV	131740065	02252573	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,087.02	01-FEB-13	$4,082.47	01-FEB-14	$ 4,212.46
WILDWOOD PROGRAMS INC SPV	222132752	02252697	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,950.45	01-FEB-13	$2,941.12	01-APR-14	$ 3,113.83
WOMENS LEAGUE COMM RES SPV	112889774	02252748	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,005.37	01-FEB-13	$5,005.37	01-FEB-14	$ 5,014.05
WORCA INC SPV	237209731	02252793	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,693.72	01-FEB-13	$5,697.68	01-FEB-14	$ 5,697.66
YATES CNTY CHAP NYSARC SPV	161086091	02252808	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,119.00	01-FEB-13	$3,106.49	01-FEB-14	$ 3,073.39
YEDEI CHESED INC SPV	133728771	02252826	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,055.64	01-FEB-13	$5,055.64	01-FEB-14	$ 5,055.64
YOUNG ADULT INSTITUTE SPV	112030172	02256682	003	4708	RES HAB; VOL; IRA/CR -SUPVD; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,565.15	01-FEB-13	$4,565.15	01-FEB-14	$ 4,565.12
A VERY SPECIAL PLACE INC SPV	133005006	02254442	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,592.74	01-FEB-13	$ 10,592.74	03-OCT-13	0
ABBOTT HOUSE IRA SPV	131991946	02257812	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,403.67	01-FEB-13	$ 12,403.67	03-OCT-13	0
ABILITIES FIRST INC SPV	141467427	02248915	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,116.19	01-FEB-13	$ 7,116.19	03-OCT-13	0
ABILITY BEYOND DISAB SPV	141758770	02246720	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 14,583.21	01-FEB-13	$ 14,583.21	03-OCT-13	0
ABLE2 ENHANCING POTENTIAL, INC SPV	161091767	02253547	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,364.08	01-FEB-13	$ 11,364.08	03-OCT-13	0
ACLD SPV	116042250	02245912	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,829.65	01-FEB-13	$ 10,829.65	03-OCT-13	0
ADULT RESOURCES CENTER INC	111986300	02246046	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 5,581.81	01-FEB-13	$ 5,581.81	03-OCT-13	0
ADVOCATES FOR SERVICES SPV	112685324	02246064	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,356.96	01-FEB-13	$ 11,356.96	03-OCT-13	0
AIM SERVICES INC SPV	141609398	02246326	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,439.76	01-FEB-13	$ 8,439.76	03-OCT-13	0
ALLEGANY CO CHAP NYSARC SPV	161021588	02246775	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,987.77	01-FEB-13	$ 8,987.77	03-OCT-13	0
ANDERSON CENTER SERVICES INC SPV	222923873	02245696	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,807.08	01-FEB-13	$ 12,807.08	03-OCT-13	0
ANGELS UNAWARE INC SPV	133753509	02245747	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,504.55	01-FEB-13	$ 9,504.55	03-OCT-13	0
ANOTHER STEP INC SPV	133680851	02517426	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,365.57	01-FEB-13	$ 11,365.57	03-OCT-13	0
ASPIRE OF WNY SPV	160757756	02257472	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 11,107.08	01-MAR-13	$ 11,107.08	03-OCT-13	0
ASSN F/NEUR IMP BRAIN INJ SPV	112348663	02337988	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,263.74	01-FEB-13	$ 8,263.74	03-OCT-13	0
ASSOC F/CHILD W/DOWN SYN SPV	237175975	02253923	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,418.90	01-FEB-13	$ 9,418.90	03-OCT-13	0
ASSOC FOR ADV BLIND & RET SPV	131968035	02245783	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,162.01	01-FEB-13	$ 10,162.01	03-OCT-13	0
ASSOC MENT ILL CHILD WEST SPV	132554243	02245765	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 5,544.94	01-FEB-13	$ 5,544.94	03-OCT-13	0
AUTISTIC SERVICES INC SPV	161185024	02245834	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,247.47	01-FEB-13	$ 9,247.47	03-OCT-13	0
BIRCH FAMILY SVCS INC SPV	112503193	02247170	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 16,377.30	01-FEB-13	$ 16,377.30	03-OCT-13	0
BLOCK INSTITUTE SPV	112416320	02259543	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,443.25	01-FEB-13	$ 9,443.25	03-OCT-13	0
BROOME-TIOGA CO CHAP NYSARC SPV	150619307	02246082	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,423.16	01-FEB-13	$ 6,423.16	03-OCT-13	0
CAMP VENTURE INC SPV	132661988	02252968	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,446.85	01-FEB-13	$ 9,446.85	03-OCT-13	0
CARDINAL MCCLOSKEY SCHOOL SPV	131740443	02245756	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,840.29	01-FEB-13	$ 12,840.29	03-OCT-13	0
CATH CHAR NGHBHD SVCS INC SPV	112047151	02608280	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,494.16	01-FEB-13	$ 13,494.16	03-OCT-13	0
CATTARAUGUS CO NYSARC SPV	160818293	02246019	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,629.43	01-FEB-13	$ 8,629.43	03-OCT-13	0
CDS MONARCH INC SPV	161089115	02246606	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,480.81	01-FEB-13	$ 8,480.81	03-OCT-13	0
CENTER F/DISAB SVCS SPV	141425851	02250053	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,217.76	01-FEB-13	$ 11,217.76	03-OCT-13	0
CENTER F/RAPID RECVRY SPV	113246332	02257918	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,083.26	01-FEB-13	$ 9,083.26	03-OCT-13	0
CENTER FOR DEVELOP DISAB SPV	111874383	02256499	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,405.24	01-FEB-13	$ 11,405.24	03-OCT-13	0
CHAUTAUQUA CO CHAP ARC SPV	160968914	02245967	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,346.38	01-FEB-13	$ 9,346.38	03-OCT-13	0
CHEMUNG CO CHAP ARC SPV	160795709	02245994	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,192.50	01-FEB-13	$ 7,192.50	03-OCT-13	0
CHENANGO CO CHAP NYSARC SPV	160970103	02359777	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,510.65	01-FEB-13	$ 7,510.65	03-OCT-13	0
CITIZEN ADVOCATES INC SPV	141577715	02255067	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,688.31	01-FEB-13	$ 8,688.31	03-OCT-13	0
CLADDAGH COMMISSION SPV	161096096	02246353	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,476.71	01-FEB-13	$ 7,476.71	03-OCT-13	0
CLINTON CO CHAPTER NYSARC SPV	141463735	02247189	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,859.08	01-FEB-13	$ 11,859.08	03-OCT-13	0
CNTRO SOC LA ESPERNZA SPV	132688412	02245903	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,194.33	01-FEB-13	$ 9,194.33	03-OCT-13	0
COLUMBIA COUNTY CHAP ARC SPV	141489603	02247203	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,552.07	01-FEB-13	$ 7,552.07	03-OCT-13	0
COMM LIVING CORP SPV	133563609	02247258	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,815.48	01-FEB-13	$ 8,815.48	03-OCT-13	0
COMM SVCS F/T DEV DISABIL SPV	161317369	02253469	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,329.79	01-FEB-13	$ 8,329.79	03-OCT-13	0
COMMUNITY ACTION F/HUM SV SPV	222317376	02279849	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,012.20	01-FEB-13	$ 10,012.20	03-OCT-13	0
COMMUNITY OPTIONS NY SPV	113414724	02259598	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,660.15	01-FEB-13	$ 11,660.15	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
COMMUNITY PROGS OF WJCS SPV	132985945	02247336	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,600.27	01-FEB-13	$ 10,600.27	03-OCT-13	0
COMMUNITY RESOURCES SPV	135660279	02625152	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,156.14	01-FEB-13	$ 11,156.14	03-OCT-13	0
COMMUNITY WORK & INDEPEND SPV	141470091	02246528	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 11,860.42	01-MAR-13	$ 11,860.42	03-OCT-13	0
CROSSROADS UNLIMITED SPV	710967724	02728485	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,549.85	01-FEB-13	$ 13,549.85	03-OCT-13	0
CRYSTAL RUN VILLAGE INC SPV	112466996	02246711	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,971.41	01-FEB-13	$ 9,971.41	03-OCT-13	0
CTR FOR FAMILY SUPPORT SPV	131913807	02246106	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,981.00	01-FEB-13	$ 10,981.00	03-OCT-13	0
DEVELOPMENTAL DIS INST SPV	116077347	02246748	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 16,358.31	01-FEB-13	$ 16,358.31	03-OCT-13	0
DEVEREUX FOUNDATION SPV	231390618	02246757	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,514.35	01-FEB-13	$ 8,514.35	03-OCT-13	0
E DOUGLIN CTR/SERV PPLE SPV	113356044	02246688	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,132.32	01-FEB-13	$ 12,132.32	03-OCT-13	0
EAST END DISABILITY ASSOC SPT	113318718	02259709	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,294.53	01-FEB-13	$ 11,294.53	03-OCT-13	0
EDEN II SCHOOL SPV	132872916	02460286	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 16,894.34	01-FEB-13	$ 16,894.34	03-OCT-13	0
EDWIN GOULD SVCS/CHILD SPV	135675643	02246766	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 14,317.21	01-MAR-13	$ 14,317.21	03-OCT-13	0
EIHAB HUMAN SERVICES SPV	113376415	02246784	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,847.12	01-FEB-13	$ 11,847.12	03-OCT-13	0
ELMYS SPECIAL SERVICES INC SPV	020590957	03082560	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,258.33	01-FEB-13	$ 10,258.33	03-OCT-13	0
EPILEPSY FOUNDATION LI SPV	111821135	02714785	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,127.92	01-FEB-13	$ 11,127.92	03-OCT-13	0
EPISCOPAL SOCIAL SERVICES SPV	133709095	02246440	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 14,348.03	01-FEB-13	$ 14,348.03	03-OCT-13	0
ERIE COUNTY ARC SPV	160769044	02246555	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,539.36	01-FEB-13	$ 8,539.36	03-OCT-13	0
ESSEX COUNTY CHAP NYSARC SPV	141563885	02246642	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,447.60	01-FEB-13	$ 11,447.60	01-NOV-13	0
FED EMPLOY & GUIDANCE SVC SPV	131624000	02246995	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,477.79	01-FEB-13	$ 12,477.79	03-OCT-13	0
FEDERATION/MULTICULTURAL PROG SPV	112422505	02934494	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,210.30	01-FEB-13	$ 6,210.30	03-OCT-13	0
FINGER LAKES UCP INC SPV	160965912	02687869	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,324.28	01-FEB-13	$ 10,324.28	03-OCT-13	0
FRANKLIN CO NYSARC SPV	237150954	02249874	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,925.17	01-FEB-13	$ 10,925.17	03-OCT-13	0
FRANZISKA RACKER CENTERS SPV	150581887	02246968	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,415.11	01-FEB-13	$ 9,415.11	03-OCT-13	0
FREE SUPERVISED IRA SPV	112420547	02247029	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 11,355.94	01-MAR-13	$ 11,355.94	03-OCT-13	0
FULTON CO ARC SPV	146020996	02463129	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,184.43	01-FEB-13	$ 12,184.43	03-OCT-13	0
GATEWAY COMMUNITY INDUSTRIES INC SP	141458757	03370472	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,315.91	01-FEB-13	$ 6,315.91	03-OCT-13	0
GENERAL HUMAN OUTREACH SPV	113134570	02247092	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,632.12	01-FEB-13	$ 9,632.12	03-OCT-13	0
GENESEE CO ARC SPV	161001185	02247107	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,198.20	01-FEB-13	$ 8,198.20	03-OCT-13	0
GRACE LUTHERAN RES SVC SPV	161554927	02247125	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,853.91	01-FEB-13	$ 7,853.91	03-OCT-13	0
GREYSTONE PROGRAMS INC SPV	141608318	02247152	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,085.69	01-FEB-13	$ 12,085.69	03-OCT-13	0
GUILD F/EXCEPTIONAL CHILD SPV	116037766	02247010	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,369.47	01-FEB-13	$ 10,369.47	03-OCT-13	0
HAMASPIK OF ORANGE CO SPV	141711583	02248295	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,380.06	01-FEB-13	$ 11,380.06	03-OCT-13	0
HANDICAPPED CHILD SO NY SPV	150516395	02247038	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,345.20	01-FEB-13	$ 10,345.20	03-OCT-13	0
HASC CENTER INC SPV	112630071	02247056	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 12,487.34	01-MAR-13	$ 12,487.34	01-NOV-13	0
HAWTHORNE FOUNDATION INC SPV	133447893	02247116	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,991.57	01-FEB-13	$ 10,991.57	03-OCT-13	0
HEAD INJURY ASSOCIATION INC SPV	112946185	02256568	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,384.30	01-FEB-13	$ 11,384.30	03-OCT-13	0
HEARTSHARE HUMAN SERVICES SPV	111633549	02247143	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 12,501.66	01-MAR-13	$ 12,501.66	03-OCT-13	0
HELEN KELLER SVCS F/T BLD SPV	111630807	02315768	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,003.60	01-FEB-13	$ 10,003.60	03-OCT-13	0
HERITAGE CHRISTIAN SVCS SPV	222334190	02247276	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 10,350.76	01-MAR-13	$ 10,350.76	03-OCT-13	0
HERKIMER CO CHAP NYSARC SPV	160973231	02247309	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,473.57	01-FEB-13	$ 7,473.57	03-OCT-13	0
HUMAN CARE SVCS F/FAM CH SPV	113338946	02254171	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,989.71	01-FEB-13	$ 12,989.71	03-OCT-13	0
IBERO AMERICAN ACT LEAGUE SPV	160954745	02252922	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,533.43	01-FEB-13	$ 8,533.43	03-OCT-13	0
IN FLIGHT INC SPV	141764481	02247294	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 10,900.11	01-MAR-13	$ 10,900.11	03-OCT-13	0
INDEPENDENCE RESIDENCES SPV	133490223	02255163	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 12,075.47	01-MAR-13	$ 12,075.47	03-OCT-13	0
INDEPENDENT GR HM LIVING SPV	112458584	02247327	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,446.64	01-FEB-13	$ 11,446.64	03-OCT-13	0
INST OF APPLIED HUMAN DYN SPV	132573827	02256540	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,218.96	01-FEB-13	$ 11,218.96	03-OCT-13	0
JAMAICA HOSPITAL MED CTR SPV	111631788	02247390	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,659.67	01-FEB-13	$ 9,659.67	03-OCT-13	0
JAWONIO INC SPV	131761660	02247432	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,287.11	01-FEB-13	$ 13,287.11	03-OCT-13	0
JEFFERSON REHABILITATION SPV	161134631	02247487	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 5,834.78	01-FEB-13	$ 5,834.78	03-OCT-13	0
JOB PATH INC SPV	134038495	02386881	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,992.62	01-FEB-13	$ 12,992.62	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
JOSHUA HOUSE INC SPV	161427778	02257261	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,308.99	01-FEB-13	$ 8,308.99	03-OCT-13	0
L ARCHE SYRACUSE INC SPV	161085314	02255118	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,213.49	01-FEB-13	$ 10,213.49	03-OCT-13	0
LEAKE AND WATTS SVCS INC SPV	131860451	02781060	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,994.06	01-FEB-13	$ 12,994.06	03-OCT-13	0
LEARNING DISAB ASSOC WNY SPV	161118058	02247592	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,300.97	01-FEB-13	$ 10,300.97	03-OCT-13	0
LEARNING DISABIL/GEN VAL SPV	222702285	02247616	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,567.08	01-FEB-13	$ 8,567.08	03-OCT-13	0
LIBERTY RESOURCES INC SPV	161129675	02256559	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,919.71	01-FEB-13	$ 10,919.71	03-OCT-13	0
LIBERTY/MONTGOMERY ARC SPV	141506257	02617792	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,296.45	01-FEB-13	$ 12,296.45	03-OCT-13	0
LIFE ADJUSTMENT CENTER SPV	133620577	02247372	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,813.07	01-FEB-13	$ 9,813.07	03-OCT-13	0
LIFESPIRE INC SPV	132526022	02247414	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,777.94	01-FEB-13	$ 10,777.94	03-OCT-13	0
LIFETIME ASSISTANCE INC SPV	222221158	02253432	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,960.55	01-FEB-13	$ 10,960.55	03-OCT-13	0
LIVING EXPLORING ALL POSS SPV	161467182	02247565	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,925.88	01-FEB-13	$ 9,925.88	03-OCT-13	0
LIVING RESOURCES CORP SPV	141564208	02247441	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,968.41	01-FEB-13	$ 7,968.41	03-OCT-13	0
LIVINGSTON WYOMING ARC SPV	161022565	02513486	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,937.34	01-FEB-13	$ 8,937.34	03-OCT-13	0
LOCHLAND SCHOOL INC SPV	160780944	02248328	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,705.60	01-FEB-13	$ 8,705.60	03-OCT-13	0
MADISON CORTLAND NYSARC SPV	160958020	02256586	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,920.09	01-FEB-13	$ 8,920.09	03-OCT-13	0
MARANATHA HUMAN SERVICES SPV	141755068	02248391	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,336.90	01-FEB-13	$ 10,336.90	03-OCT-13	0
MARY CARIOLA CHILD CTR SPV	160771078	02416035	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 15,555.45	01-MAR-13	$ 15,555.45	03-OCT-13	0
MARYHAVEN CENTER OF HOPE SPV	112861698	02248497	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,170.37	01-FEB-13	$ 10,170.37	03-OCT-13	0
MERCY HOME FOR CHILDREN SPV	111666227	02254204	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,854.32	01-FEB-13	$ 11,854.32	03-OCT-13	0
MISSION OF IMMAC VIRGIN SPV	135562286	02253478	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,002.80	01-FEB-13	$ 11,002.80	03-OCT-13	0
MODEST COMMUNITY SERVICES ASSOC SPV	134288916	03075183	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,259.11	01-FEB-13	$ 11,259.11	03-OCT-13	0
MONROE CO CHAP NYSARC SPV	160835172	02248608	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,965.37	01-FEB-13	$ 7,965.37	03-OCT-13	0
NASSAU CO CHAP NYSAHRC SPV	111720254	02248855	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 10,855.21	01-MAR-13	$ 10,855.21	03-OCT-13	0
NEW HOPE COMMUNITY INC SPV	222871755	02248795	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,656.87	01-FEB-13	$ 9,656.87	03-OCT-13	0
NEW HORIZONS RESOURCES SPV	524862107	02248819	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,968.84	01-FEB-13	$ 10,968.84	03-OCT-13	0
NEW YORK FOUNDLING HOSP SPV	131624123	02254222	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,514.88	01-FEB-13	$ 13,514.88	03-OCT-13	0
nifican	133475062	02811741	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,133.77	01-FEB-13	$ 12,133.77	03-OCT-13	0
NYSARC DUTCHESS CNTY SPV	146077915	02253670	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,593.26	01-FEB-13	$ 7,593.26	03-OCT-13	0
NYSARC INC NYC CHAPTER SPV	135596746	02248933	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,298.11	01-FEB-13	$ 13,298.11	03-OCT-13	0
NYSARC INC SUFFOLK CHAP SPV	111845294	02249856	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,335.03	01-FEB-13	$ 8,335.03	03-OCT-13	0
NYSARC NIAGARA CO CHAP SPV	160794847	02253496	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,147.13	01-FEB-13	$ 7,147.13	03-OCT-13	0
OCCUPATIONS INC SPV	141471097	02248988	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 14,448.77	01-FEB-13	$ 14,448.77	03-OCT-13	0
OHEL CHILDRENS HM/FAM SPV	116078704	02750594	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,354.25	01-FEB-13	$ 11,354.25	03-OCT-13	0
ON YOUR MARK INC SPV	133128315	02548561	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,994.29	01-FEB-13	$ 9,994.29	03-OCT-13	0
ONONDAGA CO CHAP NYSARC SPV	150561718	02249076	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,337.94	01-FEB-13	$ 8,337.94	03-OCT-13	0
ONTARIO ARC SPV	160786219	02360552	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,582.73	01-FEB-13	$ 8,582.73	03-OCT-13	0
OPENGATE INC SPV	132634269	02249127	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,008.61	01-FEB-13	$ 10,008.61	03-OCT-13	0
ORANGE COUNTY AHRC	141462340	02259589	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,343.65	01-FEB-13	$ 8,343.65	01-NOV-13	0
ORLEANS COUNTY CHAP ARC SPV	237150957	02249163	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,987.02	01-FEB-13	$ 7,987.02	03-OCT-13	0
OSWEGO CO OPPORTUNITIES SPV	160979876	02249181	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,521.37	01-FEB-13	$ 7,521.37	03-OCT-13	0
OTSEGO COUNTY CHAP NYSARC SPV	160953477	02249205	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,072.75	01-FEB-13	$ 10,072.75	03-OCT-13	0
PARTNERSHIP FOR INNOV CC SPV	133537258	02248286	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,870.83	01-FEB-13	$ 10,870.83	03-OCT-13	0
PATHWAYS INC SPV	161089007	02248406	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,136.49	01-FEB-13	$ 9,136.49	03-OCT-13	0
PEOPLE INC - HCBS IRA 9 SPV	160975538	02248479	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	02-FEB-13	$ 10,174.84	02-FEB-13	$ 10,174.84	03-OCT-13	0
PEOPLE INC FINGER LAKES SPV	202017098	02734701	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,754.78	01-FEB-13	$ 9,754.78	03-OCT-13	0
PERSON CENTERED CARE SERVICES SPV	202878791	02952876	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,571.68	01-FEB-13	$ 13,571.68	03-OCT-13	0
PRALID INC SPV	161422825	02248617	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 14,313.34	01-FEB-13	$ 14,313.34	03-OCT-13	0
PROGRAM DEVELOPMENT SVCS SPV	112715916	02257270	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,657.12	01-FEB-13	$ 11,657.12	03-OCT-13	0
PROVIDER HAMASPIK KINGS SPV	161522895	02248277	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,582.85	01-FEB-13	$ 13,582.85	03-OCT-13	0
PROVIDER HAMASPIK ROCKLD SPV	133978518	02248319	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	02-FEB-13	$ 11,573.59	02-FEB-13	$ 11,573.59	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
PSCH INC SPV	112542430	02248337	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,786.28	01-FEB-13	$ 10,786.28	03-OCT-13	0
PUTNAM COUNTY CHAP NYSARC SPV	141426729	02248373	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,011.07	01-FEB-13	$ 9,011.07	03-OCT-13	0
QSAC SPV	112482974	02248424	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,200.87	01-FEB-13	$ 13,200.87	03-OCT-13	0
QUEENS PARENT RESRC CTR SPV	113211119	02248488	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,947.98	01-FEB-13	$ 10,947.98	03-OCT-13	0
RENSS CO CHAP NYSARC SPV	141485873	02249021	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,145.90	01-FEB-13	$ 10,145.90	03-OCT-13	0
RICHMOND CHILDRENS CENTER SPV	132736761	02249094	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 16,774.42	01-FEB-13	$ 16,774.42	01-NOV-13	0
RIVERSHORE INC SPV	161146128	02248846	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,768.82	01-FEB-13	$ 6,768.82	03-OCT-13	0
ROCKLAND CO CHAP NYSARC SPV	131916359	02248891	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,903.94	01-FEB-13	$ 9,903.94	03-OCT-13	0
ROCKLAND COUNTY ALD SPV	132951835	02256619	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 15,999.74	01-FEB-13	$ 15,999.74	03-OCT-13	0
SARATOGA CNTY ARC SPV	141465932	02248924	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,289.67	01-FEB-13	$ 8,289.67	03-OCT-13	0
SCHDY CO CHAP NYSARC SPV	141459277	02248960	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,067.93	01-FEB-13	$ 10,067.93	03-OCT-13	0
SCHOHARIE CHAP NYSARC INC SPV	141494347	02255214	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,674.02	01-FEB-13	$ 7,674.02	03-OCT-13	0
SCHUYLER CO CHAP NYSARC SPV	161120089	02249085	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,677.14	01-FEB-13	$ 8,677.14	03-OCT-13	0
SDTC CTR FOR DISCOVERY SPV	141395426	02256628	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,554.10	01-FEB-13	$ 12,554.10	03-OCT-13	0
SENECA-CAYUGA NYSARC SPV	161124314	02249118	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,171.95	01-FEB-13	$ 8,171.95	03-OCT-13	0
SERVICES FOR UNDERSERVED SPV	133250383	02249796	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 13,591.80	01-MAR-13	$ 13,591.80	03-OCT-13	0
SINERGIA INC SPV	133183344	02249801	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,817.65	01-FEB-13	$ 10,817.65	03-OCT-13	0
SOUTHEAST BRONX NEIGHBORHOOD SPV	132675560	02973788	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,993.87	01-FEB-13	$ 7,993.87	03-OCT-13	0
SOUTHEAST COMM WORK CTR SPV	161074815	02256637	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,933.47	01-FEB-13	$ 6,933.47	03-OCT-13	0
SPAULDING PRAY RES CORP SPV	161196869	02249961	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,196.08	01-FEB-13	$ 6,196.08	03-OCT-13	0
SPECIAL CIT FUTURE UNLTD SPV	132865903	02354089	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,424.62	01-FEB-13	$ 12,424.62	03-OCT-13	0
SPECIAL NEEDS PROGRAM INC SPV	222325526	02250008	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 10,070.21	01-MAR-13	$ 10,070.21	03-OCT-13	0
SPRINGBROOK NY INC SPV	150539129	02252871	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,810.34	01-FEB-13	$ 8,810.34	01-NOV-13	0
ST CHRISTOPHER OTTILIE SPV	112777066	02250026	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,590.51	01-FEB-13	$ 11,590.51	03-OCT-13	0
ST DOMINICS HOME SPV	131740399	02280106	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,151.89	01-FEB-13	$ 11,151.89	03-OCT-13	0
ST LAWRENCE NYSARC INC SPV	150617072	02250071	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,622.75	01-FEB-13	$ 8,622.75	03-OCT-13	0
ST REGIS MOHAWK TRIBE IRA SPV	161007650	02255374	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,091.12	01-FEB-13	$ 11,091.12	03-OCT-13	0
STEUBEN CO CHAP NYSARC SPV	160971450	02249829	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,872.49	01-FEB-13	$ 8,872.49	03-OCT-13	0
STONY FORD FOUNDATION SPV	061207341	03172209	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 5,239.55	01-FEB-13	$ 5,239.55	03-OCT-13	0
SUBURBAN ADULT SERVICES SPV	161115992	02249838	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,812.20	01-FEB-13	$ 10,812.20	03-OCT-13	0
SULLIVAN CO CHAP NYSARC SPV	146028767	02249865	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,206.95	01-FEB-13	$ 9,206.95	03-OCT-13	0
THE ARC ONEIDA LEWIS ARC SPV	150581298	02249952	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 6,859.25	01-FEB-13	$ 6,859.25	03-OCT-13	0
TOOMEY RES & COMM SVCS SPV	161363414	02353560	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,503.73	01-FEB-13	$ 10,503.73	03-OCT-13	0
TRANSITIONAL LIVING SVC SPV	161039435	02284311	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,531.78	01-FEB-13	$ 9,531.78	03-OCT-13	0
UCP & HANDI PERS UTICA SPV	150543657	02257454	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,218.47	01-FEB-13	$ 11,218.47	03-OCT-13	0
UCP ASSOC OF NASSAU SPV	111723782	02252519	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,167.14	01-FEB-13	$ 10,167.14	03-OCT-13	0
UCP ASSOC OF ROCHESTER SPV	160743950	02257394	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,983.55	01-FEB-13	$ 9,983.55	03-OCT-13	0
UCP HANDI CHILD ASSOC SYR SPV	150532247	02252624	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,575.67	01-FEB-13	$ 12,575.67	03-OCT-13	0
UCP OF NYC INC SPV	135654532	02255383	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,404.64	01-FEB-13	$ 13,404.64	03-OCT-13	0
UCP OF QUEENS SPV	111665821	02252615	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,614.53	01-FEB-13	$ 11,614.53	03-OCT-13	0
UCP OF WESTCHESTER SPV	131690769	03110950	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,801.16	01-FEB-13	$ 10,801.16	03-OCT-13	0
UCP PUTNAM/S DUTCHESS SPV	141813412	02252591	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,923.90	01-FEB-13	$ 11,923.90	03-OCT-13	0
UCPA NIAGARA COUNTY INC SPV	160786061	02252757	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,527.41	01-FEB-13	$ 10,527.41	03-OCT-13	0
UCPA OF CAYUGA CO INC SPV	150576613	02577764	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,317.24	01-FEB-13	$ 10,317.24	03-OCT-13	0
UCPA OF GTR SUFFOLK SPV	112568841	02252702	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,860.27	01-FEB-13	$ 11,860.27	03-OCT-13	0
UCPA OF NYS SPV	131623856	02257358	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 17,017.01	01-FEB-13	$ 17,017.01	03-OCT-13	0
UCPA OF THE NORTH COUNTRY SPV	161568985	02257289	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 11,463.76	01-FEB-13	$ 11,463.76	03-OCT-13	0
ULSTER GREENE ARC SPV	141437657	02252711	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 9,351.08	01-MAR-13	$ 9,351.08	03-OCT-13	0
UNITED HELPERS CARE INC SPV	222412205	02252835	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 9,663.99	01-FEB-13	$ 9,663.99	03-OCT-13	0
UNITY HOUSE OF CAYUGA CO SPV	161081372	02252862	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,377.19	01-FEB-13	$ 8,377.19	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
WARREN WASHINGTON CO ARC SPV	141560053	02252899	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-MAR-13	$ 8,841.80	01-MAR-13	$ 8,841.80	03-OCT-13	0
WAYNE CO CHAP NYSARC INC SPV	237540582	02252528	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 7,312.73	01-FEB-13	$ 7,312.73	03-OCT-13	0
WESTCHESTER NYSARC SPV	131740065	02252573	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 10,870.63	01-FEB-13	$ 10,870.63	03-OCT-13	0
WILDWOOD PROGRAMS INC SPV	222132752	02252697	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,713.53	01-FEB-13	$ 8,713.53	03-OCT-13	0
WOMENS LEAGUE COMM RES SPV	112889774	02252748	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 15,373.96	01-FEB-13	$ 15,373.96	03-OCT-13	0
WORCA INC SPV	237209731	02252793	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 13,726.36	01-FEB-13	$ 13,726.36	03-OCT-13	0
YATES CNTY CHAP NYSARC SPV	161086091	02252808	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 8,658.62	01-FEB-13	$ 8,658.62	03-OCT-13	0
YEDEI CHESED INC SPV	133728771	02252826	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,874.11	01-FEB-13	$ 12,874.11	03-OCT-13	0
YOUNG ADULT INSTITUTE SPV	112030172	02256682	004	4727	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);MONTHLY	MONTH (1)	01-FEB-13	$ 12,631.11	01-FEB-13	$ 12,631.11	03-OCT-13	0
A VERY SPECIAL PLACE INC SPV	133005006	02254442	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,296.37	01-FEB-13	$ 5,296.37	03-OCT-13	0
ABBOTT HOUSE IRA SPV	131991946	02257812	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,201.84	01-FEB-13	$ 6,201.84	03-OCT-13	0
ABILITIES FIRST INC SPV	141467427	02248915	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,558.10	01-FEB-13	$ 3,558.10	03-OCT-13	0
ABILITY BEYOND DISAB SPV	141758770	02246720	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 7,291.61	01-FEB-13	$ 7,291.61	03-OCT-13	0
ABLE2 ENHANCING POTENTIAL, INC SPV	161091767	02253547	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,682.04	01-FEB-13	$ 5,682.04	03-OCT-13	0
ACLD SPV	116042250	02245912	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,414.83	01-FEB-13	$ 5,414.83	03-OCT-13	0
ADULT RESOURCES CENTER INC	111986300	02246046	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 2,790.91	01-FEB-13	$ 2,790.91	03-OCT-13	0
ADVOCATES FOR SERVICES SPV	112685324	02246064	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,678.48	01-FEB-13	$ 5,678.48	03-OCT-13	0
AIM SERVICES INC SPV	141609398	02246326	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,219.88	01-FEB-13	$ 4,219.88	03-OCT-13	0
ALLEGANY CO CHAP NYSARC SPV	161021588	02246775	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,493.89	01-FEB-13	$ 4,493.89	03-OCT-13	0
ANDERSON CENTER SERVICES INC SPV	222923873	02245696	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,403.54	01-FEB-13	$ 6,403.54	03-OCT-13	0
ANGELS UNAWARE INC SPV	133753509	02245747	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,752.28	01-FEB-13	$ 4,752.28	03-OCT-13	0
ANOTHER STEP INC SPV	133680851	02517426	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,682.79	01-FEB-13	$ 5,682.79	03-OCT-13	0
ASPIRE OF WNY SPV	160757756	02257472	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,553.54	01-MAR-13	$ 5,553.54	03-OCT-13	0
ASSN F/NEUR IMP BRAIN INJ SPV	112348663	02337988	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,131.87	01-FEB-13	$ 4,131.87	03-OCT-13	0
ASSOC F/CHILD W/DOWN SYN SPV	237175975	02253923	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,709.45	01-FEB-13	$ 4,709.45	03-OCT-13	0
ASSOC FOR ADV BLIND & RET SPV	131968035	02245783	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,081.01	01-FEB-13	$ 5,081.01	03-OCT-13	0
ASSOC MENT ILL CHILD WEST SPV	132554243	02245765	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 2,772.47	01-FEB-13	$ 2,772.47	03-OCT-13	0
AUTISTIC SERVICES INC SPV	161185024	02245834	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,623.74	01-FEB-13	$ 4,623.74	03-OCT-13	0
BIRCH FAMILY SVCS INC SPV	112503193	02247170	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 8,188.65	01-FEB-13	$ 8,188.65	03-OCT-13	0
BLOCK INSTITUTE SPV	112416320	02259543	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,721.63	01-FEB-13	$ 4,721.63	03-OCT-13	0
BROOME-TIOGA CO CHAP NYSARC SPV	150619307	02246082	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,211.58	01-FEB-13	$ 3,211.58	03-OCT-13	0
CAMP VENTURE INC SPV	132661988	02252968	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,723.43	01-FEB-13	$ 4,723.43	03-OCT-13	0
CARDINAL MCCLOSKEY SCHOOL SPV	131740443	02245756	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,420.15	01-FEB-13	$ 6,420.15	03-OCT-13	0
CATH CHAR NGHBHD SVCS INC SPV	112047151	02608280	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,747.08	01-FEB-13	$ 6,747.08	03-OCT-13	0
CATTARAUGUS CO NYSARC SPV	160818293	02246019	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,314.72	01-FEB-13	$ 4,314.72	03-OCT-13	0
CDS MONARCH INC SPV	161089115	02246606	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,240.41	01-FEB-13	$ 4,240.41	03-OCT-13	0
CENTER F/DISAB SVCS SPV	141425851	02250053	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,608.88	01-FEB-13	$ 5,608.88	03-OCT-13	0
CENTER F/RAPID RECVRY SPV	113246332	02257918	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,541.63	01-FEB-13	$ 4,541.63	03-OCT-13	0
CENTER FOR DEVELOP DISAB SPV	111874383	02256499	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,702.62	01-FEB-13	$ 5,702.62	03-OCT-13	0
CHAUTAUQUA CO CHAP ARC SPV	160968914	02245967	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,673.19	01-FEB-13	$ 4,673.19	03-OCT-13	0
CHEMUNG CO CHAP ARC SPV	160795709	02245994	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,596.25	01-FEB-13	$ 3,596.25	03-OCT-13	0
CHENANGO CO CHAP NYSARC SPV	160970103	02359777	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,755.33	01-FEB-13	$ 3,755.33	03-OCT-13	0
CITIZEN ADVOCATES INC SPV	141577715	02255067	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,344.16	01-FEB-13	$ 4,344.16	03-OCT-13	0
CLADDAGH COMMISSION SPV	161096096	02246353	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,738.36	01-FEB-13	$ 3,738.36	03-OCT-13	0
CLINTON CO CHAPTER NYSARC SPV	141463735	02247189	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,929.54	01-FEB-13	$ 5,929.54	03-OCT-13	0
CNTRO SOC LA ESPERNZA SPV	132688412	02245903	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,597.17	01-FEB-13	$ 4,597.17	03-OCT-13	0
COLUMBIA COUNTY CHAP ARC SPV	141489603	02247203	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,776.04	01-FEB-13	$ 3,776.04	03-OCT-13	0
COMM LIVING CORP SPV	133563609	02247258	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,407.74	01-FEB-13	$ 4,407.74	03-OCT-13	0
COMM SVCS F/T DEV DISABIL SPV	161317369	02253469	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	02-FEB-13	$ 5,113.32	02-FEB-13	$ 5,113.32	03-OCT-13	0
COMMUNITY ACTION F/HUM SV SPV	222317376	02279849	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,006.10	01-FEB-13	$ 5,006.10	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
COMMUNITY OPTIONS NY SPV	113414724	02259598	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,830.08	01-FEB-13	$ 5,830.08	03-OCT-13	0
COMMUNITY PROGS OF WJCS SPV	132985945	02247336	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,300.14	01-FEB-13	$ 5,300.14	03-OCT-13	0
COMMUNITY RESOURCES SPV	135660279	02625152	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,578.07	01-FEB-13	$ 5,578.07	03-OCT-13	0
COMMUNITY WORK & INDEPEND SPV	141470091	02246528	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,930.21	01-MAR-13	$ 5,930.21	03-OCT-13	0
CROSSROADS UNLIMITED SPV	710967724	02728485	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,774.93	01-FEB-13	$ 6,774.93	03-OCT-13	0
CRYSTAL RUN VILLAGE INC SPV	112466996	02246711	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,985.71	01-FEB-13	$ 4,985.71	03-OCT-13	0
CTR FOR FAMILY SUPPORT SPV	131913807	02246106	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,490.50	01-FEB-13	$ 5,490.50	03-OCT-13	0
DEVELOPMENTAL DIS INST SPV	116077347	02246748	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 8,179.16	01-FEB-13	$ 8,179.16	03-OCT-13	0
DEVEREUX FOUNDATION SPV	231390618	02246757	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,257.18	01-FEB-13	$ 4,257.18	03-OCT-13	0
E DOUGLIN CTR/SERV PPLE SPV	113356044	02246688	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	02-FEB-13	$ 6,014.17	02-FEB-13	$ 6,014.17	03-OCT-13	0
EAST END DISABILITY ASSOC SPT	113318718	02259709	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,647.27	01-FEB-13	$ 5,647.27	03-OCT-13	0
EDEN II SCHOOL SPV	132872916	02460286	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 8,447.17	01-FEB-13	$ 8,447.17	03-OCT-13	0
EDWIN GOULD SVCS/CHILD SPV	135675643	02246766	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 7,158.61	01-MAR-13	$ 7,158.61	03-OCT-13	0
EIHAB HUMAN SERVICES SPV	113376415	02246784	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,923.56	01-FEB-13	$ 5,923.56	03-OCT-13	0
ELMYS SPECIAL SERVICES INC SPV	020590957	03082560	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,129.17	01-FEB-13	$ 5,129.17	03-OCT-13	0
EPILEPSY FOUNDATION LI SPV	111821135	02714785	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,563.96	01-FEB-13	$ 5,563.96	03-OCT-13	0
EPISCOPAL SOCIAL SERVICES SPV	133709095	02246440	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 7,174.02	01-FEB-13	$ 7,174.02	03-OCT-13	0
ERIE COUNTY ARC SPV	160769044	02246555	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,269.68	01-FEB-13	$ 4,269.68	03-OCT-13	0
FED EMPLOY & GUIDANCE SVC SPV	131624000	02246995	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,238.90	01-FEB-13	$ 6,238.90	03-OCT-13	0
FEDERATION/MULTICULTURAL PROG SPV	112422505	02934494	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,105.15	01-FEB-13	$ 3,105.15	03-OCT-13	0
FINGER LAKES UCP INC SPV	160965912	02687869	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,162.14	01-FEB-13	$ 5,162.14	03-OCT-13	0
FRANKLIN CO NYSARC SPV	237150954	02249874	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,462.59	01-FEB-13	$ 5,462.59	03-OCT-13	0
FRANZISKA RACKER CENTERS SPV	150581887	02246968	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,707.56	01-FEB-13	$ 4,707.56	03-OCT-13	0
FREE SUPERVISED IRA SPV	112420547	02247029	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,677.97	01-MAR-13	$ 5,677.97	03-OCT-13	0
FULTON CO ARC SPV	146020996	02463129	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,092.22	01-FEB-13	$ 6,092.22	03-OCT-13	0
GATEWAY COMMUNITY INDUSTRIES INC SP	141458757	03370472	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,157.96	01-FEB-13	$ 3,157.96	03-OCT-13	0
GENERAL HUMAN OUTREACH SPV	113134570	02247092	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,816.06	01-FEB-13	$ 4,816.06	03-OCT-13	0
GENESEE CO ARC SPV	161001185	02247107	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,099.10	01-FEB-13	$ 4,099.10	03-OCT-13	0
GRACE LUTHERAN RES SVC SPV	161554927	02247125	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,926.96	01-FEB-13	$ 3,926.96	03-OCT-13	0
GREYSTONE PROGRAMS INC SPV	141608318	02247152	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,042.85	01-FEB-13	$ 6,042.85	03-OCT-13	0
GUILD F/EXCEPTIONAL CHILD SPV	116037766	02247010	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,184.74	01-FEB-13	$ 5,184.74	03-OCT-13	0
HAMASPIK OF ORANGE CO SPV	141711583	02248295	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,690.03	01-FEB-13	$ 5,690.03	03-OCT-13	0
HANDICAPPED CHILD SO NY SPV	150516395	02247038	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,172.60	01-FEB-13	$ 5,172.60	03-OCT-13	0
HASC CENTER INC SPV	112630071	02247056	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 6,243.67	01-MAR-13	$ 6,243.67	01-NOV-13	0
HAWTHORNE FOUNDATION INC SPV	133447893	02247116	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,495.79	01-FEB-13	$ 5,495.79	03-OCT-13	0
HEAD INJURY ASSOCIATION INC SPV	112946185	02256568	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,692.15	01-FEB-13	$ 5,692.15	03-OCT-13	0
HEARTSHARE HUMAN SERVICES SPV	111633549	02247143	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 6,250.83	01-MAR-13	$ 6,250.83	03-OCT-13	0
HELEN KELLER SVCS F/T BLD SPV	111630807	02315768	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,001.80	01-FEB-13	$ 5,001.80	03-OCT-13	0
HERITAGE CHRISTIAN SVCS SPV	222334190	02247276	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,175.38	01-MAR-13	$ 5,175.38	03-OCT-13	0
HERKIMER CO CHAP NYSARC SPV	160973231	02247309	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,736.79	01-FEB-13	$ 3,736.79	03-OCT-13	0
HUMAN CARE SVCS F/FAM CH SPV	113338946	02254171	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,494.86	01-FEB-13	$ 6,494.86	03-OCT-13	0
IBERO AMERICAN ACT LEAGUE SPV	160954745	02252922	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,266.72	01-FEB-13	$ 4,266.72	03-OCT-13	0
IN FLIGHT INC SPV	141764481	02247294	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,450.06	01-MAR-13	$ 5,450.06	03-OCT-13	0
INDEPENDENCE RESIDENCES SPV	133490223	02255163	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 6,037.74	01-MAR-13	$ 6,037.74	03-OCT-13	0
INDEPENDENT GR HM LIVING SPV	112458584	02247327	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,723.32	01-FEB-13	$ 5,723.32	03-OCT-13	0
INST OF APPLIED HUMAN DYN SPV	132573827	02256540	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,609.48	01-FEB-13	$ 5,609.48	03-OCT-13	0
JAMAICA HOSPITAL MED CTR SPV	111631788	02247390	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,829.84	01-FEB-13	$ 4,829.84	03-OCT-13	0
JAWONIO INC SPV	131761660	02247432	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,643.56	01-FEB-13	$ 6,643.56	03-OCT-13	0
JEFFERSON REHABILITATION SPV	161134631	02247487	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 2,917.39	01-FEB-13	$ 2,917.39	03-OCT-13	0
JOB PATH INC SPV	134038495	02386881	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,496.31	01-FEB-13	$ 6,496.31	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
JOSHUA HOUSE INC SPV	161427778	02257261	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,154.50	01-FEB-13	$ 4,154.50	03-OCT-13	0
L ARCHE SYRACUSE INC SPV	161085314	02255118	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,106.75	01-FEB-13	$ 5,106.75	03-OCT-13	0
LEAKE AND WATTS SVCS INC SPV	131860451	02781060	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,497.03	01-FEB-13	$ 6,497.03	03-OCT-13	0
LEARNING DISAB ASSOC WNY SPV	161118058	02247592	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,150.49	01-FEB-13	$ 5,150.49	03-OCT-13	0
LEARNING DISABIL/GEN VAL SPV	222702285	02247616	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,283.54	01-FEB-13	$ 4,283.54	03-OCT-13	0
LIBERTY RESOURCES INC SPV	161129675	02256559	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,459.86	01-FEB-13	$ 5,459.86	03-OCT-13	0
LIBERTY/MONTGOMERY ARC SPV	141506257	02617792	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,148.23	01-FEB-13	$ 6,148.23	03-OCT-13	0
LIFE ADJUSTMENT CENTER SPV	133620577	02247372	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,906.54	01-FEB-13	$ 4,906.54	03-OCT-13	0
LIFESPIRE INC SPV	132526022	02247414	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,388.97	01-FEB-13	$ 5,388.97	03-OCT-13	0
LIFETIME ASSISTANCE INC SPV	222221158	02253432	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,480.28	01-FEB-13	$ 5,480.28	03-OCT-13	0
LIVING EXPLORING ALL POSS SPV	161467182	02247565	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,962.94	01-FEB-13	$ 4,962.94	03-OCT-13	0
LIVING RESOURCES CORP SPV	141564208	02247441	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,984.21	01-FEB-13	$ 3,984.21	03-OCT-13	0
LIVINGSTON WYOMING ARC SPV	161022565	02513486	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,468.67	01-FEB-13	$ 4,468.67	03-OCT-13	0
LOCHLAND SCHOOL INC SPV	160780944	02248328	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,352.80	01-FEB-13	$ 4,352.80	03-OCT-13	0
MADISON CORTLAND NYSARC SPV	160958020	02256586	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,460.05	01-FEB-13	$ 4,460.05	03-OCT-13	0
MARANATHA HUMAN SERVICES SPV	141755068	02248391	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,168.45	01-FEB-13	$ 5,168.45	03-OCT-13	0
MARY CARIOLA CHILD CTR SPV	160771078	02416035	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 7,777.72	01-MAR-13	$ 7,777.72	03-OCT-13	0
MARYHAVEN CENTER OF HOPE SPV	112861698	02248497	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,085.19	01-FEB-13	$ 5,085.19	03-OCT-13	0
MERCY HOME FOR CHILDREN SPV	111666227	02254204	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,927.16	01-FEB-13	$ 5,927.16	03-OCT-13	0
MISSION OF IMMAC VIRGIN SPV	135562286	02253478	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,501.40	01-FEB-13	$ 5,501.40	03-OCT-13	0
MODEST COMMUNITY SERVICES ASSOC SPV	134288916	03075183	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,629.56	01-FEB-13	$ 5,629.56	03-OCT-13	0
MONROE CO CHAP NYSARC SPV	160835172	02248608	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,982.69	01-FEB-13	$ 3,982.69	03-OCT-13	0
MOUNTAIN LAKE SERVICES	141563885	02246642	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,723.80	01-FEB-13	$ 5,723.80	01-NOV-13	0
NASSAU CO CHAP NYSAHRC SPV	111720254	02248855	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,427.61	01-MAR-13	$ 5,427.61	03-OCT-13	0
NEW HOPE COMMUNITY INC SPV	222871755	02248795	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,874.23	01-FEB-13	$ 4,874.23	03-OCT-13	0
NEW HORIZONS RESOURCES SPV	524862107	02248819	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,484.42	01-FEB-13	$ 5,484.42	03-OCT-13	0
NEW YORK FOUNDLING HOSP SPV	131624123	02254222	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,757.44	01-FEB-13	$ 6,757.44	03-OCT-13	0
NYSARC DUTCHESS CNTY SPV	146077915	02253670	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,796.63	01-FEB-13	$ 3,796.63	03-OCT-13	0
NYSARC INC NYC CHAPTER SPV	135596746	02248933	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,649.06	01-FEB-13	$ 6,649.06	03-OCT-13	0
NYSARC INC ORANGE CNTY SPV	141462340	02259589	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,171.83	01-FEB-13	$ 4,171.83	01-NOV-13	0
NYSARC INC SUFFOLK CHAP SPV	111845294	02249856	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,167.52	01-FEB-13	$ 4,167.52	03-OCT-13	0
NYSARC NIAGARA CO CHAP SPV	160794847	02253496	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,573.57	01-FEB-13	$ 3,573.57	03-OCT-13	0
OCCUPATIONS INC SPV	141471097	02248988	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 7,224.39	01-FEB-13	$ 7,224.39	03-OCT-13	0
OHEL CHILDRENS HM/FAM SPV	116078704	02750594	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,677.13	01-FEB-13	$ 5,677.13	03-OCT-13	0
ON YOUR MARK INC SPV	133128315	02548561	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,997.15	01-FEB-13	$ 4,997.15	03-OCT-13	0
ONONDAGA CO CHAP NYSARC SPV	150561718	02249076	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,168.97	01-FEB-13	$ 4,168.97	03-OCT-13	0
ONTARIO ARC SPV	160786219	02360552	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,291.37	01-FEB-13	$ 4,291.37	03-OCT-13	0
OPENGATE INC SPV	132634269	02249127	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,004.31	01-FEB-13	$ 5,004.31	03-OCT-13	0
ORLEANS COUNTY CHAP ARC SPV	237150957	02249163	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,993.51	01-FEB-13	$ 3,993.51	03-OCT-13	0
OSWEGO CO OPPORTUNITIES SPV	160979876	02249181	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,760.69	01-FEB-13	$ 3,760.69	03-OCT-13	0
OTSEGO COUNTY CHAP NYSARC SPV	160953477	02249205	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,036.38	01-FEB-13	$ 5,036.38	03-OCT-13	0
PARTNERSHIP FOR INNOV CC SPV	133537258	02248286	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,435.42	01-FEB-13	$ 5,435.42	03-OCT-13	0
PATHWAYS INC SPV	161089007	02248406	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,568.25	01-FEB-13	$ 4,568.25	03-OCT-13	0
PEOPLE INC - HCBS IRA 9 SPV	160975538	02248479	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	02-FEB-13	$ 5,087.42	02-FEB-13	$ 5,087.42	03-OCT-13	0
PEOPLE INC FINGER LAKES SPV	202017098	02734701	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,877.39	01-FEB-13	$ 4,877.39	03-OCT-13	0
PERSON CENTERED CARE SERVICES SPV	202878791	02952876	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,785.84	01-FEB-13	$ 6,785.84	03-OCT-13	0
PRALID INC SPV	161422825	02248617	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 7,156.67	01-FEB-13	$ 7,156.67	03-OCT-13	0
PROGRAM DEVELOPMENT SVCS SPV	112715916	02257270	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,828.56	01-FEB-13	$ 5,828.56	03-OCT-13	0
PROVIDER HAMASPIK KINGS SPV	161522895	02248277	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,791.43	01-FEB-13	$ 6,791.43	03-OCT-13	0
PROVIDER HAMASPIK ROCKLD SPV	133978518	02248319	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	02-FEB-13	$ 5,786.80	02-FEB-13	$ 5,786.80	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
PSCH INC SPV	112542430	02248337	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,393.14	01-FEB-13	$ 5,393.14	03-OCT-13	0
PUTNAM COUNTY CHAP NYSARC SPV	141426729	02248373	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,505.54	01-FEB-13	$ 4,505.54	03-OCT-13	0
QSAC SPV	112482974	02248424	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,600.44	01-FEB-13	$ 6,600.44	03-OCT-13	0
QUEENS PARENT RESRC CTR SPV	113211119	02248488	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,473.99	01-FEB-13	$ 5,473.99	03-OCT-13	0
RENSS CO CHAP NYSARC SPV	141485873	02249021	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,072.95	01-FEB-13	$ 5,072.95	03-OCT-13	0
RICHMOND CHILDRENS CENTER SPV	132736761	02249094	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 8,387.21	01-FEB-13	$ 8,387.21	01-NOV-13	0
RIVERSHORE INC SPV	161146128	02248846	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,384.41	01-FEB-13	$ 3,384.41	03-OCT-13	0
ROCKLAND CO CHAP NYSARC SPV	131916359	02248891	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,951.97	01-FEB-13	$ 4,951.97	03-OCT-13	0
ROCKLAND COUNTY ALD SPV	132951835	02256619	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 7,999.87	01-FEB-13	$ 7,999.87	03-OCT-13	0
SARATOGA CNTY ARC SPV	141465932	02248924	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,144.84	01-FEB-13	$ 4,144.84	03-OCT-13	0
SCHDY CO CHAP NYSARC SPV	141459277	02248960	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,033.97	01-FEB-13	$ 5,033.97	03-OCT-13	0
SCHOHARIE CHAP NYSARC INC SPV	141494347	02255214	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,837.01	01-FEB-13	$ 3,837.01	03-OCT-13	0
SCHUYLER CO CHAP NYSARC SPV	161120089	02249085	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,338.57	01-FEB-13	$ 4,338.57	03-OCT-13	0
SDTC CTR FOR DISCOVERY SPV	141395426	02256628	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,277.05	01-FEB-13	$ 6,277.05	03-OCT-13	0
SENECA-CAYUGA NYSARC SPV	161124314	02249118	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,085.98	01-FEB-13	$ 4,085.98	03-OCT-13	0
SERVICES FOR UNDERSERVED SPV	133250383	02249796	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 6,795.90	01-MAR-13	$ 6,795.90	03-OCT-13	0
SHARE OF NEW SQUARE SPV	133475062	02811741	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,066.89	01-FEB-13	$ 6,066.89	03-OCT-13	0
SINERGIA INC SPV	133183344	02249801	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,408.83	01-FEB-13	$ 5,408.83	03-OCT-13	0
SOUTHEAST BRONX NEIGHBORHOOD SPV	132675560	02973788	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,996.94	01-FEB-13	$ 3,996.94	03-OCT-13	0
SOUTHEAST COMM WORK CTR SPV	161074815	02256637	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,466.74	01-FEB-13	$ 3,466.74	03-OCT-13	0
SPAULDING PRAY RES CORP SPV	161196869	02249961	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,098.04	01-FEB-13	$ 3,098.04	03-OCT-13	0
SPECIAL CIT FUTURE UNLTD SPV	132865903	02354089	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,212.31	01-FEB-13	$ 6,212.31	03-OCT-13	0
SPECIAL NEEDS PROGRAM INC SPV	222325526	02250008	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 5,035.11	01-MAR-13	$ 5,035.11	03-OCT-13	0
SPRINGBROOK NY INC SPV	150539129	02252871	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,405.17	01-FEB-13	$ 4,405.17	01-NOV-13	0
ST CHRISTOPHER OTTILIE SPV	112777066	02250026	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,795.26	01-FEB-13	$ 5,795.26	03-OCT-13	0
ST DOMINICS HOME SPV	131740399	02280106	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,575.95	01-FEB-13	$ 5,575.95	03-OCT-13	0
ST LAWRENCE NYSARC INC SPV	150617072	02250071	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,311.38	01-FEB-13	$ 4,311.38	03-OCT-13	0
ST REGIS MOHAWK TRIBE IRA SPV	161007650	02255374	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,545.56	01-FEB-13	$ 5,545.56	03-OCT-13	0
STEUBEN CO CHAP NYSARC SPV	160971450	02249829	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,436.25	01-FEB-13	$ 4,436.25	03-OCT-13	0
STONY FORD FOUNDATION SPV	061207341	03172209	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 2,619.78	01-FEB-13	$ 2,619.78	03-OCT-13	0
SUBURBAN ADULT SERVICES SPV	161115992	02249838	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	02-FEB-13	$ 5,365.35	02-FEB-13	$ 5,365.35	03-OCT-13	0
SULLIVAN CO CHAP NYSARC SPV	146028767	02249865	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,603.48	01-FEB-13	$ 4,603.48	03-OCT-13	0
THE ARC ONEIDA LEWIS ARC SPV	150581298	02249952	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,429.63	01-FEB-13	$ 3,429.63	03-OCT-13	0
TOOMEY RES & COMM SVCS SPV	161363414	02353560	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,251.87	01-FEB-13	$ 5,251.87	03-OCT-13	0
TRANSITIONAL LIVING SVC SPV	161039435	02284311	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,765.89	01-FEB-13	$ 4,765.89	03-OCT-13	0
UCP & HANDI PERS UTICA SPV	150543657	02257454	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,609.24	01-FEB-13	$ 5,609.24	03-OCT-13	0
UCP ASSOC OF NASSAU SPV	111723782	02252519	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,083.57	01-FEB-13	$ 5,083.57	03-OCT-13	0
UCP ASSOC OF ROCHESTER SPV	160743950	02257394	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,991.78	01-FEB-13	$ 4,991.78	03-OCT-13	0
UCP HANDI CHILD ASSOC SYR SPV	150532247	02252624	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,287.84	01-FEB-13	$ 6,287.84	03-OCT-13	0
UCP OF NYC INC SPV	135654532	02255383	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,702.32	01-FEB-13	$ 6,702.32	03-OCT-13	0
UCP OF QUEENS SPV	111665821	02252615	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,807.27	01-FEB-13	$ 5,807.27	03-OCT-13	0
UCP OF WESTCHESTER SPV	131690769	03110950	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,400.58	01-FEB-13	$ 5,400.58	03-OCT-13	0
UCP PUTNAM/S DUTCHESS SPV	141813412	02252591	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,961.95	01-FEB-13	$ 5,961.95	03-OCT-13	0
UCPA NIAGARA COUNTY INC SPV	160786061	02252757	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,263.71	01-FEB-13	$ 5,263.71	03-OCT-13	0
UCPA OF CAYUGA CO INC SPV	150576613	02577764	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,158.62	01-FEB-13	$ 5,158.62	03-OCT-13	0
UCPA OF GTR SUFFOLK SPV	112568841	02252702	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,930.14	01-FEB-13	$ 5,930.14	03-OCT-13	0
UCPA OF NYS SPV	131623856	02257358	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 8,508.51	01-FEB-13	$ 8,508.51	03-OCT-13	0
UCPA OF THE NORTH COUNTRY SPV	161568985	02257289	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,731.88	01-FEB-13	$ 5,731.88	03-OCT-13	0
ULSTER GREENE ARC SPV	141437657	02252711	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 4,675.54	01-MAR-13	$ 4,675.54	03-OCT-13	0
UNITED HELPERS CARE INC SPV	222412205	02252835	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,832.00	01-FEB-13	$ 4,832.00	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
UNITY HOUSE OF CAYUGA CO SPV	161081372	02252862	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,188.60	01-FEB-13	$ 4,188.60	03-OCT-13	0
WARREN WASHINGTON CO ARC SPV	141560053	02252899	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-13	$ 4,420.90	01-MAR-13	$ 4,420.90	03-OCT-13	0
WAYNE CO CHAP NYSARC INC SPV	237540582	02252528	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 3,656.37	01-FEB-13	$ 3,656.37	03-OCT-13	0
WESTCHESTER NYSARC SPV	131740065	02252573	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 5,435.32	01-FEB-13	$ 5,435.32	03-OCT-13	0
WILDWOOD PROGRAMS INC SPV	222132752	02252697	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,356.77	01-FEB-13	$ 4,356.77	03-OCT-13	0
WOMENS LEAGUE COMM RES SPV	112889774	02252748	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 7,686.98	01-FEB-13	$ 7,686.98	03-OCT-13	0
WORCA INC SPV	237209731	02252793	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,863.18	01-FEB-13	$ 6,863.18	03-OCT-13	0
YATES CNTY CHAP NYSARC SPV	161086091	02252808	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 4,329.31	01-FEB-13	$ 4,329.31	03-OCT-13	0
YEDEI CHESED INC SPV	133728771	02252826	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,437.06	01-FEB-13	$ 6,437.06	03-OCT-13	0
YOUNG ADULT INSTITUTE SPV	112030172	02256682	004	4728	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-13	$ 6,315.56	01-FEB-13	$ 6,315.56	03-OCT-13	0
A VERY SPECIAL PLACE INC SPV	133005006	02254442	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,296.37	01-FEB-13	$ 5,296.37	03-OCT-13	0
ABBOTT HOUSE IRA SPV	131991946	02257812	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,201.84	01-FEB-13	$ 6,201.84	03-OCT-13	0
ABILITIES FIRST INC SPV	141467427	02248915	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,558.10	01-FEB-13	$ 3,558.10	03-OCT-13	0
ABILITY BEYOND DISAB SPV	141758770	02246720	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 7,291.61	01-FEB-13	$ 7,291.61	03-OCT-13	0
ABLE2 ENHANCING POTENTIAL, INC SPV	161091767	02253547	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,682.04	01-FEB-13	$ 5,682.04	03-OCT-13	0
ACLD SPV	116042250	02245912	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,414.83	01-FEB-13	$ 5,414.83	03-OCT-13	0
ADULT RESOURCES CENTER INC	111986300	02246046	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 2,790.91	01-FEB-13	$ 2,790.91	03-OCT-13	0
ADVOCATES FOR SERVICES SPV	112685324	02246064	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,678.48	01-FEB-13	$ 5,678.48	03-OCT-13	0
AIM SERVICES INC SPV	141609398	02246326	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,219.88	01-FEB-13	$ 4,219.88	03-OCT-13	0
ALLEGANY CO CHAP NYSARC SPV	161021588	02246775	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,493.89	01-FEB-13	$ 4,493.89	03-OCT-13	0
ANDERSON CENTER SERVICES INC SPV	222923873	02245696	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,403.54	01-FEB-13	$ 6,403.54	03-OCT-13	0
ANGELS UNAWARE INC SPV	133753509	02245747	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,752.28	01-FEB-13	$ 4,752.28	03-OCT-13	0
ANOTHER STEP INC SPV	133680851	02517426	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,682.79	01-FEB-13	$ 5,682.79	03-OCT-13	0
ASPIRE OF WNY SPV	160757756	02257472	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,553.54	01-MAR-13	$ 5,553.54	03-OCT-13	0
ASSN F/NEUR IMP BRAIN INJ SPV	112348663	02337988	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,131.87	01-FEB-13	$ 4,131.87	03-OCT-13	0
ASSOC F/CHILD W/DOWN SYN SPV	237175975	02253923	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,709.45	01-FEB-13	$ 4,709.45	03-OCT-13	0
ASSOC FOR ADV BLIND & RET SPV	131968035	02245783	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,081.01	01-FEB-13	$ 5,081.01	03-OCT-13	0
ASSOC MENT ILL CHILD WEST SPV	132554243	02245765	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 2,772.47	01-FEB-13	$ 2,772.47	03-OCT-13	0
AUTISTIC SERVICES INC SPV	161185024	02245834	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,623.74	01-FEB-13	$ 4,623.74	03-OCT-13	0
BIRCH FAMILY SVCS INC SPV	112503193	02247170	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 8,188.65	01-FEB-13	$ 8,188.65	03-OCT-13	0
BLOCK INSTITUTE SPV	112416320	02259543	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,721.63	01-FEB-13	$ 4,721.63	03-OCT-13	0
BROOME-TIOGA CO CHAP NYSARC SPV	150619307	02246082	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,211.58	01-FEB-13	$ 3,211.58	03-OCT-13	0
CAMP VENTURE INC SPV	132661988	02252968	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,723.43	01-FEB-13	$ 4,723.43	03-OCT-13	0
CARDINAL MCCLOSKEY SCHOOL SPV	131740443	02245756	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,420.15	01-FEB-13	$ 6,420.15	03-OCT-13	0
CATH CHAR NGHBHD SVCS INC SPV	112047151	02608280	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,747.08	01-FEB-13	$ 6,747.08	03-OCT-13	0
CATTARAUGUS CO NYSARC SPV	160818293	02246019	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,314.72	01-FEB-13	$ 4,314.72	03-OCT-13	0
CDS MONARCH INC SPV	161089115	02246606	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,240.41	01-FEB-13	$ 4,240.41	03-OCT-13	0
CENTER F/DISAB SVCS SPV	141425851	02250053	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,608.88	01-FEB-13	$ 5,608.88	03-OCT-13	0
CENTER F/RAPID RECVRY SPV	113246332	02257918	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,541.63	01-FEB-13	$ 4,541.63	03-OCT-13	0
CENTER FOR DEVELOP DISAB SPV	111874383	02256499	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,702.62	01-FEB-13	$ 5,702.62	03-OCT-13	0
CHAUTAUQUA CO CHAP ARC SPV	160968914	02245967	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,673.19	01-FEB-13	$ 4,673.19	03-OCT-13	0
CHEMUNG CO CHAP ARC SPV	160795709	02245994	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,596.25	01-FEB-13	$ 3,596.25	03-OCT-13	0
CHENANGO CO CHAP NYSARC SPV	160970103	02359777	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,755.33	01-FEB-13	$ 3,755.33	03-OCT-13	0
CITIZEN ADVOCATES INC SPV	141577715	02255067	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,344.16	01-FEB-13	$ 4,344.16	03-OCT-13	0
CLADDAGH COMMISSION SPV	161096096	02246353	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,738.36	01-FEB-13	$ 3,738.36	03-OCT-13	0
CLINTON CO CHAPTER NYSARC SPV	141463735	02247189	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,929.54	01-FEB-13	$ 5,929.54	03-OCT-13	0
CNTRO SOC LA ESPERNZA SPV	132688412	02245903	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,597.17	01-FEB-13	$ 4,597.17	03-OCT-13	0
COLUMBIA COUNTY CHAP ARC SPV	141489603	02247203	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,776.04	01-FEB-13	$ 3,776.04	03-OCT-13	0
COMM LIVING CORP SPV	133563609	02247258	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,407.74	01-FEB-13	$ 4,407.74	03-OCT-13	0
COMM SVCS F/T DEV DISABIL SPV	161317369	02253469	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,164.90	01-FEB-13	$ 4,164.90	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
COMMUNITY ACTION F/HUM SV SPV	222317376	02279849	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,006.10	01-FEB-13	$ 5,006.10	03-OCT-13	0
COMMUNITY OPTIONS NY SPV	113414724	02259598	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,830.08	01-FEB-13	$ 5,830.08	03-OCT-13	0
COMMUNITY PROGS OF WJCS SPV	132985945	02247336	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,300.14	01-FEB-13	$ 5,300.14	03-OCT-13	0
COMMUNITY RESOURCES SPV	135660279	02625152	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,578.07	01-FEB-13	$ 5,578.07	03-OCT-13	0
COMMUNITY WORK & INDEPEND SPV	141470091	02246528	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,930.21	01-MAR-13	$ 5,930.21	03-OCT-13	0
CROSSROADS UNLIMITED SPV	710967724	02728485	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,774.93	01-FEB-13	$ 6,774.93	03-OCT-13	0
CRYSTAL RUN VILLAGE INC SPV	112466996	02246711	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,985.71	01-FEB-13	$ 4,985.71	03-OCT-13	0
CTR FOR FAMILY SUPPORT SPV	131913807	02246106	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,490.50	01-FEB-13	$ 5,490.50	03-OCT-13	0
DEVELOPMENTAL DIS INST SPV	116077347	02246748	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 8,179.16	01-FEB-13	$ 8,179.16	03-OCT-13	0
DEVEREUX FOUNDATION SPV	231390618	02246757	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,257.18	01-FEB-13	$ 4,257.18	03-OCT-13	0
E DOUGLIN CTR/SERV PPLE SPV	113356044	02246688	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,066.16	01-FEB-13	$ 6,066.16	03-OCT-13	0
EAST END DISABILITY ASSOC SPT	113318718	02259709	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,647.27	01-FEB-13	$ 5,647.27	03-OCT-13	0
EDEN II SCHOOL SPV	132872916	02460286	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 8,447.17	01-FEB-13	$ 8,447.17	03-OCT-13	0
EDWIN GOULD SVCS/CHILD SPV	135675643	02246766	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 7,158.61	01-MAR-13	$ 7,158.61	03-OCT-13	0
EIHAB HUMAN SERVICES SPV	113376415	02246784	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,923.56	01-FEB-13	$ 5,923.56	03-OCT-13	0
ELMYS SPECIAL SERVICES INC SPV	020590957	03082560	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,129.17	01-FEB-13	$ 5,129.17	03-OCT-13	0
EPILEPSY FOUNDATION LI SPV	111821135	02714785	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,563.96	01-FEB-13	$ 5,563.96	03-OCT-13	0
EPISCOPAL SOCIAL SERVICES SPV	133709095	02246440	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 7,174.02	01-FEB-13	$ 7,174.02	03-OCT-13	0
ERIE COUNTY ARC SPV	160769044	02246555	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,269.68	01-FEB-13	$ 4,269.68	03-OCT-13	0
ESSEX COUNTY CHAP NYSARC SPV	141563885	02246642	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,723.80	01-FEB-13	$ 5,723.80	01-NOV-13	0
FED EMPLOY & GUIDANCE SVC SPV	131624000	02246995	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,238.90	01-FEB-13	$ 6,238.90	03-OCT-13	0
FEDERATION/MULTICULTURAL PROG SPV	112422505	02934494	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,105.15	01-FEB-13	$ 3,105.15	03-OCT-13	0
FINGER LAKES UCP INC SPV	160965912	02687869	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,162.14	01-FEB-13	$ 5,162.14	03-OCT-13	0
FRANKLIN CO NYSARC SPV	237150954	02249874	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,462.59	01-FEB-13	$ 5,462.59	03-OCT-13	0
FRANZISKA RACKER CENTERS SPV	150581887	02246968	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,707.56	01-FEB-13	$ 4,707.56	03-OCT-13	0
FREE SUPERVISED IRA SPV	112420547	02247029	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,677.97	01-MAR-13	$ 5,677.97	03-OCT-13	0
FULTON CO ARC SPV	146020996	02463129	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,092.22	01-FEB-13	$ 6,092.22	03-OCT-13	0
GATEWAY COMMUNITY INDUSTRIES INC SP	141458757	03370472	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,157.96	01-FEB-13	$ 3,157.96	03-OCT-13	0
GENERAL HUMAN OUTREACH SPV	113134570	02247092	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,816.06	01-FEB-13	$ 4,816.06	03-OCT-13	0
GENESEE CO ARC SPV	161001185	02247107	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,099.10	01-FEB-13	$ 4,099.10	03-OCT-13	0
GRACE LUTHERAN RES SVC SPV	161554927	02247125	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,926.96	01-FEB-13	$ 3,926.96	03-OCT-13	0
GREYSTONE PROGRAMS INC SPV	141608318	02247152	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,042.85	01-FEB-13	$ 6,042.85	03-OCT-13	0
GUILD F/EXCEPTIONAL CHILD SPV	116037766	02247010	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,184.74	01-FEB-13	$ 5,184.74	03-OCT-13	0
HAMASPIK OF ORANGE CO SPV	141711583	02248295	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,690.03	01-FEB-13	$ 5,690.03	03-OCT-13	0
HANDICAPPED CHILD SO NY SPV	150516395	02247038	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,172.60	01-FEB-13	$ 5,172.60	03-OCT-13	0
HASC CENTER INC SPV	112630071	02247056	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 6,243.67	01-MAR-13	$ 6,243.67	01-NOV-13	0
HAWTHORNE FOUNDATION INC SPV	133447893	02247116	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,495.79	01-FEB-13	$ 5,495.79	03-OCT-13	0
HEAD INJURY ASSOCIATION INC SPV	112946185	02256568	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,692.15	01-FEB-13	$ 5,692.15	03-OCT-13	0
HEARTSHARE HUMAN SERVICES SPV	111633549	02247143	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 6,250.83	01-MAR-13	$ 6,250.83	03-OCT-13	0
HELEN KELLER SVCS F/T BLD SPV	111630807	02315768	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,001.80	01-FEB-13	$ 5,001.80	03-OCT-13	0
HERITAGE CHRISTIAN SVCS SPV	222334190	02247276	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,175.38	01-MAR-13	$ 5,175.38	03-OCT-13	0
HERKIMER CO CHAP NYSARC SPV	160973231	02247309	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,736.79	01-FEB-13	$ 3,736.79	03-OCT-13	0
HUMAN CARE SVCS F/FAM CH SPV	113338946	02254171	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,494.86	01-FEB-13	$ 6,494.86	03-OCT-13	0
IBERO AMERICAN ACT LEAGUE SPV	160954745	02252922	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,266.72	01-FEB-13	$ 4,266.72	03-OCT-13	0
IN FLIGHT INC SPV	141764481	02247294	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,450.06	01-MAR-13	$ 5,450.06	03-OCT-13	0
INDEPENDENCE RESIDENCES SPV	133490223	02255163	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 6,037.74	01-MAR-13	$ 6,037.74	03-OCT-13	0
INDEPENDENT GR HM LIVING SPV	112458584	02247327	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,723.32	01-FEB-13	$ 5,723.32	03-OCT-13	0
INST OF APPLIED HUMAN DYN SPV	132573827	02256540	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,609.48	01-FEB-13	$ 5,609.48	03-OCT-13	0
JAMAICA HOSPITAL MED CTR SPV	111631788	02247390	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,829.84	01-FEB-13	$ 4,829.84	03-OCT-13	0
JAWONIO INC SPV	131761660	02247432	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,643.56	01-FEB-13	$ 6,643.56	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
JEFFERSON REHABILITATION SPV	161134631	02247487	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 2,917.39	01-FEB-13	$ 2,917.39	03-OCT-13	0
JOB PATH INC SPV	134038495	02386881	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,496.31	01-FEB-13	$ 6,496.31	03-OCT-13	0
JOSHUA HOUSE INC SPV	161427778	02257261	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,154.50	01-FEB-13	$ 4,154.50	03-OCT-13	0
L ARCHE SYRACUSE INC SPV	161085314	02255118	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,106.75	01-FEB-13	$ 5,106.75	03-OCT-13	0
LEAKE AND WATTS SVCS INC SPV	131860451	02781060	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,497.03	01-FEB-13	$ 6,497.03	03-OCT-13	0
LEARNING DISAB ASSOC WNY SPV	161118058	02247592	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,150.49	01-FEB-13	$ 5,150.49	03-OCT-13	0
LEARNING DISABIL/GEN VAL SPV	222702285	02247616	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,283.54	01-FEB-13	$ 4,283.54	03-OCT-13	0
LIBERTY RESOURCES INC SPV	161129675	02256559	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,459.86	01-FEB-13	$ 5,459.86	03-OCT-13	0
LIBERTY/MONTGOMERY ARC SPV	141506257	02617792	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,148.23	01-FEB-13	$ 6,148.23	03-OCT-13	0
LIFE ADJUSTMENT CENTER SPV	133620577	02247372	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,906.54	01-FEB-13	$ 4,906.54	03-OCT-13	0
LIFESPIRE INC SPV	132526022	02247414	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,388.97	01-FEB-13	$ 5,388.97	03-OCT-13	0
LIFETIME ASSISTANCE INC SPV	222221158	02253432	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,480.28	01-FEB-13	$ 5,480.28	03-OCT-13	0
LIVING EXPLORING ALL POSS SPV	161467182	02247565	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,962.94	01-FEB-13	$ 4,962.94	03-OCT-13	0
LIVING RESOURCES CORP SPV	141564208	02247441	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,984.21	01-FEB-13	$ 3,984.21	03-OCT-13	0
LIVINGSTON WYOMING ARC SPV	161022565	02513486	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,468.67	01-FEB-13	$ 4,468.67	03-OCT-13	0
LOCHLAND SCHOOL INC SPV	160780944	02248328	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,352.80	01-FEB-13	$ 4,352.80	03-OCT-13	0
MADISON CORTLAND NYSARC SPV	160958020	02256586	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,460.05	01-FEB-13	$ 4,460.05	03-OCT-13	0
MARANATHA HUMAN SERVICES SPV	141755068	02248391	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,168.45	01-FEB-13	$ 5,168.45	03-OCT-13	0
MARY CARIOLA CHILD CTR SPV	160771078	02416035	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 7,777.72	01-MAR-13	$ 7,777.72	03-OCT-13	0
MARYHAVEN CENTER OF HOPE SPV	112861698	02248497	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,085.19	01-FEB-13	$ 5,085.19	03-OCT-13	0
MERCY HOME FOR CHILDREN SPV	111666227	02254204	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,927.16	01-FEB-13	$ 5,927.16	03-OCT-13	0
MISSION OF IMMAC VIRGIN SPV	135562286	02253478	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,501.40	01-FEB-13	$ 5,501.40	03-OCT-13	0
MODEST COMMUNITY SERVICES ASSOC SPV	134288916	03075183	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,629.56	01-FEB-13	$ 5,629.56	03-OCT-13	0
MONROE CO CHAP NYSARC SPV	160835172	02248608	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,982.69	01-FEB-13	$ 3,982.69	03-OCT-13	0
NASSAU CO CHAP NYSAHRC SPV	111720254	02248855	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,427.61	01-MAR-13	$ 5,427.61	03-OCT-13	0
NEW HOPE COMMUNITY INC SPV	222871755	02248795	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,874.23	01-FEB-13	$ 4,874.23	03-OCT-13	0
NEW HORIZONS RESOURCES SPV	524862107	02248819	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,484.42	01-FEB-13	$ 5,484.42	03-OCT-13	0
NEW YORK FOUNDLING HOSP SPV	131624123	02254222	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,757.44	01-FEB-13	$ 6,757.44	03-OCT-13	0
NYSARC DUTCHESS CNTY SPV	146077915	02253670	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,796.63	01-FEB-13	$ 3,796.63	03-OCT-13	0
NYSARC INC NYC CHAPTER SPV	135596746	02248933	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,649.06	01-FEB-13	$ 6,649.06	03-OCT-13	0
NYSARC INC ORANGE CNTY SPV	141462340	02259589	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,171.83	01-FEB-13	$ 4,171.83	01-NOV-13	0
NYSARC INC SUFFOLK CHAP SPV	111845294	02249856	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,167.52	01-FEB-13	$ 4,167.52	03-OCT-13	0
NYSARC NIAGARA CO CHAP SPV	160794847	02253496	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,573.57	01-FEB-13	$ 3,573.57	03-OCT-13	0
OCCUPATIONS INC SPV	141471097	02248988	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 7,224.39	01-FEB-13	$ 7,224.39	03-OCT-13	0
OHEL CHILDRENS HM/FAM SPV	116078704	02750594	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,677.13	01-FEB-13	$ 5,677.13	03-OCT-13	0
ON YOUR MARK INC SPV	133128315	02548561	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,997.15	01-FEB-13	$ 4,997.15	03-OCT-13	0
ONONDAGA CO CHAP NYSARC SPV	150561718	02249076	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,168.97	01-FEB-13	$ 4,168.97	03-OCT-13	0
ONTARIO ARC SPV	160786219	02360552	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,291.37	01-FEB-13	$ 4,291.37	03-OCT-13	0
OPENGATE INC SPV	132634269	02249127	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,004.31	01-FEB-13	$ 5,004.31	03-OCT-13	0
ORLEANS COUNTY CHAP ARC SPV	237150957	02249163	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,993.51	01-FEB-13	$ 3,993.51	03-OCT-13	0
OSWEGO CO OPPORTUNITIES SPV	160979876	02249181	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,760.69	01-FEB-13	$ 3,760.69	03-OCT-13	0
OTSEGO COUNTY CHAP NYSARC SPV	160953477	02249205	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,036.38	01-FEB-13	$ 5,036.38	03-OCT-13	0
PARTNERSHIP FOR INNOV CC SPV	133537258	02248286	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,435.42	01-FEB-13	$ 5,435.42	03-OCT-13	0
PATHWAYS INC SPV	161089007	02248406	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,568.25	01-FEB-13	$ 4,568.25	03-OCT-13	0
PEOPLE INC - HCBS IRA 9 SPV	160975538	02248479	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	02-FEB-13	$ 5,087.42	02-FEB-13	$ 5,087.42	03-OCT-13	0
PEOPLE INC FINGER LAKES SPV	202017098	02734701	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,877.39	01-FEB-13	$ 4,877.39	03-OCT-13	0
PERSON CENTERED CARE SERVICES SPV	202878791	02952876	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,785.84	01-FEB-13	$ 6,785.84	03-OCT-13	0
PRALID INC SPV	161422825	02248617	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 7,156.67	01-FEB-13	$ 7,156.67	03-OCT-13	0
PROGRAM DEVELOPMENT SVCS SPV	112715916	02257270	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,828.56	01-FEB-13	$ 5,828.56	03-OCT-13	0
PROVIDER HAMASPIK KINGS SPV	161522895	02248277	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,791.43	01-FEB-13	$ 6,791.43	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
PROVIDER HAMASPIK ROCKLD SPV	133978518	02248319	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	02-FEB-13	$ 5,786.80	02-FEB-13	$ 5,786.80	03-OCT-13	0
PSCH INC SPV	112542430	02248337	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,393.14	01-FEB-13	$ 5,393.14	03-OCT-13	0
PUTNAM COUNTY CHAP NYSARC SPV	141426729	02248373	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,505.54	01-FEB-13	$ 4,505.54	03-OCT-13	0
QSAC SPV	112482974	02248424	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,600.44	01-FEB-13	$ 6,600.44	03-OCT-13	0
QUEENS PARENT RESRC CTR SPV	113211119	02248488	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,473.99	01-FEB-13	$ 5,473.99	03-OCT-13	0
RENSS CO CHAP NYSARC SPV	141485873	02249021	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,072.95	01-FEB-13	$ 5,072.95	03-OCT-13	0
RICHMOND CHILDRENS CENTER SPV	132736761	02249094	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 8,387.21	01-FEB-13	$ 8,387.21	01-NOV-13	0
RIVERSHORE INC SPV	161146128	02248846	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,384.41	01-FEB-13	$ 3,384.41	03-OCT-13	0
ROCKLAND CO CHAP NYSARC SPV	131916359	02248891	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,951.97	01-FEB-13	$ 4,951.97	03-OCT-13	0
ROCKLAND COUNTY ALD SPV	132951835	02256619	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 7,999.87	01-FEB-13	$ 7,999.87	03-OCT-13	0
SARATOGA CNTY ARC SPV	141465932	02248924	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,144.84	01-FEB-13	$ 4,144.84	03-OCT-13	0
SCHDY CO CHAP NYSARC SPV	141459277	02248960	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,033.97	01-FEB-13	$ 5,033.97	03-OCT-13	0
SCHOHARIE CHAP NYSARC INC SPV	141494347	02255214	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,837.01	01-FEB-13	$ 3,837.01	03-OCT-13	0
SCHUYLER CO CHAP NYSARC SPV	161120089	02249085	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,338.57	01-FEB-13	$ 4,338.57	03-OCT-13	0
SDTC CTR FOR DISCOVERY SPV	141395426	02256628	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,277.05	01-FEB-13	$ 6,277.05	03-OCT-13	0
SENECA-CAYUGA NYSARC SPV	161124314	02249118	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,085.98	01-FEB-13	$ 4,085.98	03-OCT-13	0
SERVICES FOR UNDERSERVED SPV	133250383	02249796	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 6,795.90	01-MAR-13	$ 6,795.90	03-OCT-13	0
SHARE OF NEW SQUARE SPV	133475062	02811741	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,066.89	01-FEB-13	$ 6,066.89	03-OCT-13	0
SINERGIA INC SPV	133183344	02249801	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,408.83	01-FEB-13	$ 5,408.83	03-OCT-13	0
SOUTHEAST BRONX NEIGHBORHOOD SPV	132675560	02973788	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,996.94	01-FEB-13	$ 3,996.94	03-OCT-13	0
SOUTHEAST COMM WORK CTR SPV	161074815	02256637	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,466.74	01-FEB-13	$ 3,466.74	03-OCT-13	0
SPAULDING PRAY RES CORP SPV	161196869	02249961	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,098.04	01-FEB-13	$ 3,098.04	03-OCT-13	0
SPECIAL CIT FUTURE UNLTD SPV	132865903	02354089	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,212.31	01-FEB-13	$ 6,212.31	03-OCT-13	0
SPECIAL NEEDS PROGRAM INC SPV	222325526	02250008	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 5,035.11	01-MAR-13	$ 5,035.11	03-OCT-13	0
SPRINGBROOK NY INC SPV	150539129	02252871	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,405.17	01-FEB-13	$ 4,405.17	01-NOV-13	0
ST CHRISTOPHER OTTILIE SPV	112777066	02250026	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,795.26	01-FEB-13	$ 5,795.26	03-OCT-13	0
ST DOMINICS HOME SPV	131740399	02280106	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,575.95	01-FEB-13	$ 5,575.95	03-OCT-13	0
ST LAWRENCE NYSARC INC SPV	150617072	02250071	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,311.38	01-FEB-13	$ 4,311.38	03-OCT-13	0
ST REGIS MOHAWK TRIBE IRA SPV	161007650	02255374	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,545.56	01-FEB-13	$ 5,545.56	03-OCT-13	0
STEUBEN CO CHAP NYSARC SPV	160971450	02249829	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,436.25	01-FEB-13	$ 4,436.25	03-OCT-13	0
STONY FORD FOUNDATION SPV	061207341	03172209	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 2,619.78	01-FEB-13	$ 2,619.78	03-OCT-13	0
SUBURBAN ADULT SERVICES SPV	161115992	02249838	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,406.10	01-FEB-13	$ 5,406.10	03-OCT-13	0
SULLIVAN CO CHAP NYSARC SPV	146028767	02249865	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,603.48	01-FEB-13	$ 4,603.48	03-OCT-13	0
THE ARC ONEIDA LEWIS ARC SPV	150581298	02249952	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,429.63	01-FEB-13	$ 3,429.63	03-OCT-13	0
TOOMEY RES & COMM SVCS SPV	161363414	02353560	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,251.87	01-FEB-13	$ 5,251.87	03-OCT-13	0
TRANSITIONAL LIVING SVC SPV	161039435	02284311	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,765.89	01-FEB-13	$ 4,765.89	03-OCT-13	0
UCP & HANDI PERS UTICA SPV	150543657	02257454	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,609.24	01-FEB-13	$ 5,609.24	03-OCT-13	0
UCP ASSOC OF NASSAU SPV	111723782	02252519	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,083.57	01-FEB-13	$ 5,083.57	03-OCT-13	0
UCP ASSOC OF ROCHESTER SPV	160743950	02257394	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,991.78	01-FEB-13	$ 4,991.78	03-OCT-13	0
UCP HANDI CHILD ASSOC SYR SPV	150532247	02252624	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,287.84	01-FEB-13	$ 6,287.84	03-OCT-13	0
UCP OF NYC INC SPV	135654532	02255383	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,702.32	01-FEB-13	$ 6,702.32	03-OCT-13	0
UCP OF QUEENS SPV	111665821	02252615	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,807.27	01-FEB-13	$ 5,807.27	03-OCT-13	0
UCP OF WESTCHESTER SPV	131690769	03110950	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,400.58	01-FEB-13	$ 5,400.58	03-OCT-13	0
UCP PUTNAM/S DUTCHESS SPV	141813412	02252591	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,961.95	01-FEB-13	$ 5,961.95	03-OCT-13	0
UCPA NIAGARA COUNTY INC SPV	160786061	02252757	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,263.71	01-FEB-13	$ 5,263.71	03-OCT-13	0
UCPA OF CAYUGA CO INC SPV	150576613	02577764	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,158.62	01-FEB-13	$ 5,158.62	03-OCT-13	0
UCPA OF GTR SUFFOLK SPV	112568841	02252702	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,930.14	01-FEB-13	$ 5,930.14	03-OCT-13	0
UCPA OF NYS SPV	131623856	02257358	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 8,508.51	01-FEB-13	$ 8,508.51	03-OCT-13	0
UCPA OF THE NORTH COUNTRY SPV	161568985	02257289	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,731.88	01-FEB-13	$ 5,731.88	03-OCT-13	0
ULSTER GREENE ARC SPV	141437657	02252711	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 4,675.54	01-MAR-13	$ 4,675.54	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
UNITED HELPERS CARE INC SPV	222412205	02252835	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,832.00	01-FEB-13	$ 4,832.00	03-OCT-13	0
UNITY HOUSE OF CAYUGA CO SPV	161081372	02252862	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,188.60	01-FEB-13	$ 4,188.60	03-OCT-13	0
WARREN WASHINGTON CO ARC SPV	141560053	02252899	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-13	$ 4,420.90	01-MAR-13	$ 4,420.90	03-OCT-13	0
WAYNE CO CHAP NYSARC INC SPV	237540582	02252528	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 3,656.37	01-FEB-13	$ 3,656.37	03-OCT-13	0
WESTCHESTER NYSARC SPV	131740065	02252573	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 5,435.32	01-FEB-13	$ 5,435.32	03-OCT-13	0
WILDWOOD PROGRAMS INC SPV	222132752	02252697	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,356.77	01-FEB-13	$ 4,356.77	03-OCT-13	0
WOMENS LEAGUE COMM RES SPV	112889774	02252748	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 7,686.98	01-FEB-13	$ 7,686.98	03-OCT-13	0
WORCA INC SPV	237209731	02252793	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,863.18	01-FEB-13	$ 6,863.18	03-OCT-13	0
YATES CNTY CHAP NYSARC SPV	161086091	02252808	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 4,329.31	01-FEB-13	$ 4,329.31	03-OCT-13	0
YEDEI CHESED INC SPV	133728771	02252826	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,437.06	01-FEB-13	$ 6,437.06	03-OCT-13	0
YOUNG ADULT INSTITUTE SPV	112030172	02256682	004	4729	RES HAB;VOL;IRA-SUPVD(COMP W/DAY);SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-13	$ 6,315.56	01-FEB-13	$ 6,315.56	03-OCT-13	0

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ADVOCATES INC PTL	161453716	03143340	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$4.40	01-JUL-10	$4.40	01-JUL-10	$ 4.40	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2010	$5.43	01-OCT-10	$5.43	01-OCT-10	$ 5.43	01-SEP-14	$ -	01-SEP-14	$ -	01-SEP-14	$ -
ADVOCATES INC PTL	161453716	03143340	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2010	$5.56	01-MAY-10	$5.56	01-MAY-10	$ 5.56	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2011	$6.48	01-MAR-11	$6.48	01-MAR-11	$ 6.48	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$5.42	01-JUL-10	$5.42	01-JUL-10	$ 5.42	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ADVOCATES INC PTL	161453716	03143340	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$10.73	01-APR-11	$10.73	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
ADVOCATES INC PTL	161453716	03143340	014	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$5.91	01-JUL-10	$5.91	01-MAR-14	$ -	01-MAR-14	$ -	01-MAR-14	$ -	01-MAR-14	$ -
ADVOCATES INC PTL	161453716	03143340	016	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$5.63	01-JUN-10	$5.63	01-JUN-10	$ 5.63	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	017	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$5.17	01-JUN-10	$5.17	01-JUN-10	$ 5.17	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	018	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2011	$6.04	01-MAR-11	$6.04	01-JUN-14	$ -	01-JUN-14	$ -	01-JUN-14	$ -	01-JUN-14	$ -
ADVOCATES INC PTL	161453716	03143340	019	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$5.60	01-JUN-10	$5.60	01-JUN-10	$ 5.60	01-JUL-14	$ -	01-JUL-14	$ -	01-JUL-14	$ -
ADVOCATES INC PTL	161453716	03143340	020	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2010	$5.52	01-AUG-10	$5.52	01-AUG-10	$ 5.52	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ADVOCATES INC PTL	161453716	03143340	021	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$7.18	01-APR-11	$7.18	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
ADVOCATES INC PTL	161453716	03143340	022	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$5.41	01-JUN-10	$5.41	01-JUN-10	$ 5.41	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	025	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2010	$5.87	01-MAY-10	$5.87	01-MAY-10	$ 5.87	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	026	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$5.43	01-JUL-10	$5.43	01-JUL-10	$ 5.43	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	027	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2011	$6.99	01-MAR-11	$6.99	01-MAR-11	$ 6.99	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ADVOCATES INC PTL	161453716	03143340	028	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$5.18	01-JUL-10	$5.18	01-JUL-10	$ 5.18	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$5.23	01-APR-11	$5.23	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2012	$5.72	01-MAY-12	$5.72	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$6.45	01-JUN-10	$6.45	01-JUN-10	$ 6.45	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	008	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$6.19	01-DEC-11	$6.19	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2012	$6.50	01-FEB-12	$6.50	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$5.28	01-SEP-11	$5.28	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2012	$5.78	01-MAY-12	$5.78	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	014	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2011	$6.16	01-JUN-11	$6.16	01-JUN-11	$ 6.16	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ASPIRE OF WESTERN NEW YORK INC PTL	160757756	03180334	015	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$5.80	01-NOV-12	$5.80	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
ENABLE PTL	150532247	03157499	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2010	$4.39	01-MAR-10	$4.39	01-MAR-10	$ 4.39	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
ENABLE PTL	150532247	03157499	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2011	$4.99	01-MAY-11	$4.99	01-MAY-11	$ 4.99	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
FEDERATION OF MULTICULTURAL PROG IN	112422505	03176381	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$2.66	01-FEB-10	$2.66	01-FEB-10	$ 2.66	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
FEDERATION OF MULTICULTURAL PROG IN	112422505	03176381	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$6.37	01-FEB-10	$6.37	01-FEB-10	$ 6.37	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
FEDERATION OF MULTICULTURAL PROG IN	112422505	03176381	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$2.66	01-FEB-10	$2.66	01-FEB-10	$ 2.66	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.02	01-JUL-11	$6.02	01-JUL-11	$ 6.02	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$6.02	01-JUL-12	$6.02	01-JUL-12	$ 6.02	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$6.02	01-JUL-12	$6.02	01-JUL-12	$ 6.02	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.01	01-JUL-11	$5.01	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2010	$9.26	01-NOV-10	$9.26	01-NOV-10	$ 9.26	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2009	$4.51	01-DEC-09	$4.51	01-DEC-09	$ 4.51	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2009	$5.62	01-SEP-09	$5.62	01-SEP-09	$ 5.62	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$5.82	01-FEB-10	$5.82	01-FEB-10	$ 5.82	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$6.41	01-FEB-10	$6.41	01-FEB-10	$ 6.41	01-SEP-14	$ -	01-SEP-14	$ -	01-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	014	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2012	$6.53	01-FEB-12	$6.53	01-FEB-12	$ 6.53	01-SEP-14	$ -	01-SEP-14	$ -	01-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	018	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$5.82	01-FEB-10	$5.82	01-FEB-10	$ 5.82	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	019	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$5.92	01-FEB-10	$5.92	01-FEB-10	$ 5.92	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	020	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2010	$6.53	01-APR-10	$6.53	01-APR-10	$ 6.53	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	021	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2013	$7.56	01-FEB-13	$7.56	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	022	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$6.41	01-OCT-12	$6.41	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	023	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$6.34	01-OCT-12	$6.34	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	024	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$6.29	01-OCT-12	$6.29	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	027	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$5.62	01-AUG-11	$5.62	01-AUG-11	$ 5.62	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	028	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$11.21	01-NOV-09	$11.21	01-NOV-09	$ 11.21	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	030	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$5.45	01-NOV-09	$5.45	01-NOV-09	$ 5.45	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	031	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$5.29	01-NOV-09	$5.29	01-NOV-09	$ 5.29	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	035	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2009	$6.70	01-DEC-09	$6.70	01-DEC-09	$ 6.70	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	036	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2009	$5.73	01-DEC-09	$5.73	01-DEC-09	$ 5.73	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	039	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2010	$6.45	01-JAN-10	$6.45	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	041	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2010	$6.89	01-MAR-10	$6.89	01-MAR-10	$ 6.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	042	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$14.00	01-FEB-10	$14.00	01-FEB-10	$ 14.00	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	043	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2010	$5.08	01-MAR-10	$5.08	01-MAR-10	$ 5.08	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	046	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAR-2010	$6.94	01-MAR-10	$6.94	01-MAR-10	$ 6.94	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	047	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$15.96	01-JUN-10	$15.96	01-JUN-10	$ 15.96	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	058	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2011	$7.24	01-MAY-11	$7.24	01-MAY-11	$ 7.24	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	062	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$5.97	01-NOV-12	$5.97	01-NOV-12	$ 5.97	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	064	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2012	$4.58	01-JUN-12	$4.58	01-JUN-12	$ 4.58	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$17.65	01-JAN-11	$17.65	01-JAN-11	$ 17.65	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$13.23	01-JAN-11	$13.23	01-JAN-11	$ 13.23	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$9.62	01-JAN-11	$9.62	01-JAN-11	$ 9.62	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$13.23	01-JAN-11	$13.23	01-JAN-11	$ 13.23	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$9.55	01-JAN-11	$9.55	01-JAN-11	$ 9.55	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$16.89	01-JAN-11	$16.89	01-NOV-13	$ 14.02	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$13.01	01-JAN-11	$13.01	01-JAN-11	$ 13.01	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2011	$11.02	01-JAN-11	$11.02	01-JAN-11	$ 11.02	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL	134038495	03259010	014	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2012	$16.60	01-JUN-12	$16.60	01-JUN-12	$ 16.60	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
JOB PATH INC PTL29630	134038495	03259010	015	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)			01-JUN-12	16.5	01-JUN-12	$ 16.50	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2009	$9.68	01-DEC-09	$9.68	01-DEC-09	$ 9.68	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2010	$7.07	01-MAY-10	$7.07	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$13.82	01-JUL-11	$13.82	01-JUL-11	$ 13.82	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2010	$10.08	01-SEP-10	$10.08	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$8.86	01-DEC-11	$8.86	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	014	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2011	$5.59	01-FEB-11	$5.59	01-FEB-11	$ 5.59	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	016	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2011	$15.45	01-JUN-11	$15.45	01-JUN-11	$ 15.45	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	017	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2011	$10.05	01-JUN-11	$10.05	01-JUN-11	$ 10.05	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
MONROE CO NYSARC PTL	160835172	03153055	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$4.57	01-AUG-11	$4.57	01-AUG-13	$ 4.64	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
NYSARC INC COLUMBIA COUNTY PTL	141489603	03184392	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2011	$15.98	01-JUN-11	$15.98	01-MAY-14	$ -	01-MAY-14	$ -	01-MAY-14	$ -	01-MAY-14	$ -
NYSARC INC COLUMBIA COUNTY PTL	141489603	03184392	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2011	$8.34	01-MAY-11	$8.34	01-MAY-11	$ 8.34	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
NYSARC INC NYC CHAPTER	135596746	03206517	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$14.32	01-JUN-10	$14.32	01-JUN-10	$ 14.32	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ORLEANS CO CHAP NYSARC PTL	237150957	03178269	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$5.92	01-APR-12	$5.92	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -
PEOPLE INC PTL	160975538	03142936	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2012	$5.61	01-AUG-12	$5.61	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -
PEOPLE INC PTL	160975538	03142936	008	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$5.63	01-APR-11	$5.63	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -
PEOPLE INC PTL	160975538	03142936	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$4.95	01-OCT-11	$4.95	01-MAY-14	$ -	01-MAY-14	$ -	01-MAY-14	$ -	01-MAY-14	$ -
PEOPLE INC PTL	160975538	03142936	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$16.82	01-DEC-11	$16.82	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
PEOPLE INC PTL	160975538	03142936	014	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2012	$5.46	01-AUG-12	$5.46	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -
PEOPLE INC PTL	160975538	03142936	016	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2010	$5.58	01-JUN-10	$5.58	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -
PEOPLE INC PTL	160975538	03142936	017	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$5.52	01-SEP-12	$5.52	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -
PEOPLE INC PTL	160975538	03142936	018	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$5.66	01-JUL-12	$5.66	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
PEOPLE INC PTL	160975538	03142936	019	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2012	$5.24	01-MAY-12	$5.24	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -
PEOPLE INC PTL	160975538	03142936	020	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.56	01-JUL-11	$3.56	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -
PEOPLE INC PTL	160975538	03142936	022	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$5.39	01-NOV-11	$5.39	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -
PEOPLE INC PTL	160975538	03142936	023	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$6.97	01-NOV-11	$6.97	01-NOV-11	$ 6.97	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
PEOPLE INC PTL	160975538	03142936	027	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2010	$6.49	01-NOV-10	$6.49	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -
PEOPLE INC PTL	160975538	03142936	029	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$5.86	01-APR-12	$5.86	01-MAY-13	$ -	01-MAY-13	$ -	01-MAY-13	$ -	01-MAY-13	$ -
PEOPLE INC PTL	160975538	03142936	031	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2010	$6.64	01-AUG-10	$6.64	01-AUG-10	$ 6.64	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
PEOPLE INC PTL	160975538	03142936	032	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2012	$5.69	01-AUG-12	$5.69	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -
PEOPLE INC PTL	160975538	03142936	035	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$5.65	01-AUG-11	$5.65	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -	01-APR-13	$ -
PEOPLE INC PTL	160975538	03142936	036	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$7.24	01-OCT-11	$7.24	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -
PEOPLE INC PTL	160975538	03142936	037	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$6.96	01-OCT-11	$6.96	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -
PEOPLE REBUILDING / LIV IN DIGNITY	161422825	03272566	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2012	$5.60	01-JUN-12	$5.60	01-JUN-12	$ 5.60	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RAYIM OF HUDSON VALLEY PTL	562331735	03176390	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2010	$5.57	01-MAY-10	$5.57	01-MAY-10	$ 5.57	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RENSSELAER CO NYSARC PTL	141485873	03160441	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2010	$11.57	01-NOV-10	$11.57	01-NOV-10	$ 11.57	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RENSSELAER CO NYSARC PTL	141485873	03160441	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2010	$13.54	01-DEC-10	$13.54	01-DEC-10	$ 13.54	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$5.00	01-DEC-11	$5.00	01-DEC-11	$ 5.00	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2010	$5.45	01-APR-10	$5.45	01-APR-10	$ 5.45	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	008	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$4.41	01-NOV-11	$4.41	01-NOV-11	$ 4.41	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$7.60	01-NOV-12	$7.60	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$5.03	01-AUG-11	$5.03	01-AUG-11	$ 5.03	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$14.00	01-NOV-11	$14.00	01-NOV-11	$ 14.00	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	013	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$5.14	01-FEB-10	$5.14	01-JUN-14	$ -	01-JUN-14	$ -	01-JUN-14	$ -	01-JUN-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	015	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$5.06	01-JAN-12	$5.06	01-JAN-12	$ 5.06	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	017	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2010	$6.66	01-SEP-10	$6.66	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -	01-OCT-13	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	019	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$4.75	01-DEC-11	$4.75	01-DEC-11	$ 4.75	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RESOURCE CTR F/INDEP PTL	222518284	02870771	020	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2010	$3.56	01-DEC-10	$3.56	01-DEC-10	$ 3.56	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	021	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$5.94	01-APR-11	$5.94	01-APR-11	$ 5.94	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	028	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2012	$3.44	01-AUG-12	$3.44	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
SPRINGBROOK PTL	150539129	03161277	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2012	$4.24	01-DEC-12	$4.24	01-DEC-12	$ 4.24	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
TRINITY ASSISTANCE CORP PTL	205510689	03154372	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$5.27	01-SEP-11	$5.27	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -
ULSTER-GREENE CO NYSARC PTL	141437657	03144103	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$8.06	01-JUL-12	$8.06	01-JUL-12	$ 8.06	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ADVOCATES CSSZ48	161453716	03171771	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2012	$3,495.63	01-NOV-12	$3,495.63	01-NOV-12	$ 3,495.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSS Z01	161453716	03028282	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$863.25	01-DEC-11	$863.25	01-DEC-11	$ 863.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSS Z01	161453716	03028282	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$431.63	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSS Z02	161453716	03028291	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$890.39	01-DEC-11	$890.39	01-DEC-11	$ 890.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSS Z02	161453716	03028291	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$445.20	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSS Z04	161453716	03029036	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2009	$4,967.14	01-JUN-09	$4,967.14	01-JUN-09	$ 4,967.14	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSS Z07	161453716	03031945	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2010	$834.01	01-NOV-10	$834.01	01-NOV-10	$ 834.01	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSS Z08	161453716	03031954	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$2,767.93	01-MAY-11	$2,767.93	01-MAY-11	$ 2,767.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSS Z10	161453716	03033790	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$1,832.29	01-MAY-11	$1,832.29	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
ADVOCATES INC CSS Z11	161453716	03037056	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$5,653.31	01-MAY-10	$5,653.31	01-MAY-10	$ 5,653.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSY01	161453716	03520252	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$13,613.08	01-FEB-13	$13,613.08	01-FEB-13	$ 13,613.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSY02	161453716	03520463	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$4,140.49	01-NOV-12	$4,140.49	01-NOV-12	$ 4,140.49	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ADVOCATES INC CSSY04		03562663	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-AUG-13	2091.72	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ADVOCATES INC CSSZ05	161453716	03032299	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$4,005.33	01-MAY-10	$4,005.33	01-MAY-10	$ 4,005.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ06	161453716	03029343	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$2,781.93	01-MAR-11	$2,781.93	01-MAR-11	$ 2,781.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ09	161453716	03032340	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$2,610.79	01-MAY-12	$2,610.79	01-MAY-12	$ 2,610.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ12	161453716	03081096	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$5,195.82	01-NOV-11	$5,195.82	01-NOV-11	$ 5,195.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ13	161453716	03081078	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$3,347.59	01-NOV-10	$3,347.59	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
ADVOCATES INC CSSZ16	161453716	03082313	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2010	$2,951.80	01-NOV-10	$2,951.80	01-NOV-10	$ 2,951.80	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ17	161453716	03085485	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$2,425.35	01-NOV-10	$2,425.35	01-NOV-10	$ 2,425.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ17	161453716	03085485	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$1,212.68	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ18	161453716	03110932	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$2,939.62	01-MAY-10	$2,939.62	01-MAY-10	$ 2,939.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ27	161453716	03131197	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2010	$5,432.34	01-AUG-10	$5,432.34	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
ADVOCATES INC CSSZ31	161453716	03130545	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$4,076.61	01-FEB-13	$4,076.61	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
ADVOCATES INC CSSZ41	161453716	03133548	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2011	$3,460.03	01-FEB-11	$3,460.03	01-FEB-11	$ 3,460.03	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ42	161453716	03134934	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$1,429.17	01-DEC-12	$2,858.34	01-DEC-12	$ 2,858.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ42	161453716	03134934	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$1,696.95	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ43	161453716	03137400	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$4,208.23	01-AUG-12	$4,208.23	01-AUG-12	$ 4,208.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ47	161453716	03171762	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$1,079.98	01-AUG-10	$1,079.98	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
ADVOCATES INC CSSZ49	161453716	03183424	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2010	$4,543.12	01-MAR-10	$4,543.12	01-APR-13	$ 4,822.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ50		03184856	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-MAY-10	2937.58	01-MAY-10	$ 2,937.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ51	161453716	03234131	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$5,080.75	01-JUL-11	$5,080.75	01-JUL-11	$ 5,080.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ51	161453716	03234131	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2010	$2,807.39	02-JUN-11	$0.00	02-JUN-11	$ -	02-JUN-11	$ -	02-JUN-11	$ -	02-JUN-11	$ -
ADVOCATES INC CSSZ52	161453716	03293161	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2011	$5,218.83	01-APR-11	$5,218.83	01-JUL-13	$ 4,867.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ53	161453716	03295732	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,042.21	01-MAY-11	$2,042.21	01-MAY-11	$ 2,042.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ53	161453716	03295732	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$1,021.11	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ54	161453716	03295723	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,148.07	01-MAY-11	$2,148.07	01-MAY-11	$ 2,148.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ55	161453716	03339168	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,486.26	01-OCT-12	$4,486.26	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -
ADVOCATES INC CSSZ56	161453716	03339195	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,294.13	01-MAR-13	$2,294.13	01-MAR-13	$ 2,294.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ57	161453716	03339177	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,083.31	01-OCT-11	$2,083.31	01-MAY-13	$ 2,333.35	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ADVOCATES INC CSSZ58	161453716	03339200	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$5,836.39	01-MAR-11	$5,836.39	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
ADVOCATES INC CSSZ59	161453716	03339186	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$4,364.02	01-MAR-11	$4,364.02	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
ADVOCATES INC CSSZ60	161453716	03351842	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$3,691.99	01-JUN-12	$3,691.99	01-JUN-12	$ 3,691.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ61	161453716	03351815	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$2,484.42	01-JUL-11	$2,484.42	01-JUL-11	$ 2,484.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ61	161453716	03351815	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$1,242.21	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ62	161453716	03351791	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2011	$1,684.01	01-JUL-11	$1,684.01	01-JUL-11	$ 1,684.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ63	161453716	03351806	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$5,021.37	01-JUL-11	$5,021.37	01-JUL-13	$ 5,603.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ64	161453716	03351833	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$4,794.84	01-JUL-11	$4,794.84	01-JUL-11	$ 4,794.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ65	161453716	03359051	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$4,816.99	01-AUG-11	$4,816.99	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
ADVOCATES INC CSSZ66	161453716	03359060	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$4,893.88	01-AUG-11	$4,893.88	01-AUG-11	$ 4,893.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ67	161453716	03359079	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$4,297.89	01-OCT-11	$4,297.89	01-OCT-11	$ 4,297.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ67	161453716	03359079	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$2,148.95	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ68	161453716	03370770	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$4,530.07	01-OCT-11	$4,530.07	01-OCT-11	$ 4,530.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ69	161453716	03371455	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,331.99	01-MAR-13	$2,331.99	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ADVOCATES INC CSSZ70	161453716	03371717	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,229.84	01-OCT-11	$2,229.84	01-OCT-11	$ 2,229.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ71	161453716	03373475	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$2,183.08	01-MAR-12	$2,183.08	01-MAR-12	$ 2,183.08	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSSZ72	161453716	03373484	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,078.46	01-AUG-12	$2,078.46	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
ADVOCATES INC CSSZ73	161453716	03386638	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,008.82	01-AUG-12	$2,008.82	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
ADVOCATES INC CSSZ74	161453716	03386656	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,250.67	01-JUL-12	$2,250.67	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
ADVOCATES INC CSSZ75	161453716	03386647	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,058.59	01-SEP-12	$2,058.59	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
ADVOCATES INC CSSZ76	161453716	03387455	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,249.11	01-MAR-13	$3,249.11	01-MAR-13	$ 3,249.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ76	161453716	03387455	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$2,072.28	02-FEB-13	$0.00	02-FEB-13	$ -	02-FEB-13	$ -	02-FEB-13	$ -	02-FEB-13	$ -
ADVOCATES INC CSSZ77	161453716	03407009	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$2,329.32	01-FEB-12	$2,329.32	01-FEB-12	$ 2,329.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ77	161453716	03407009	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$1,164.66	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ78	161453716	03422786	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$2,331.91	01-FEB-12	$2,331.91	01-FEB-12	$ 2,331.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ78	161453716	03422786	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$1,165.96	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ79	161453716	03422795	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$2,045.58	01-MAR-12	$2,045.58	01-MAR-12	$ 2,045.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ80	161453716	03428140	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,081.59	01-NOV-12	$2,081.59	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
ADVOCATES INC CSSZ80	161453716	03428140	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-DEC-12	1040.8	01-DEC-12	$ 1,040.80	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ81	161453716	03428159	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,108.53	01-SEP-12	$2,108.53	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
ADVOCATES INC CSSZ82	161453716	03448859	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,045.58	01-MAY-12	$2,045.58	01-MAY-12	$ 2,045.58	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ADVOCATES INC CSSZ82	161453716	03448859	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$1,022.79	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ83	161453716	03449112	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,120.91	01-MAY-12	$2,120.91	01-MAY-12	$ 2,120.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ84	161453716	03449103	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,151.38	01-NOV-12	$2,151.38	01-NOV-12	$ 2,151.38	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ADVOCATES INC CSSZ85	161453716	03449089	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,053.42	01-OCT-12	$2,053.42	01-OCT-12	$ 2,053.42	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSSZ86	161453716	03449098	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2012	$1,609.71	01-MAY-12	$1,609.71	01-MAY-12	$ 1,609.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ86	161453716	03449098	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2012	$804.86	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ADVOCATES INC CSSZ87	161453716	03449121	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2012	$2,075.74	01-JUN-12	$2,075.74	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
ADVOCATES INC CSSZ88	161453716	03476079	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$13,613.10	01-FEB-13	$13,613.10	01-FEB-13	$ 13,613.10	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ89	161453716	03476139	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,075.11	01-DEC-12	$2,075.11	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
ADVOCATES INC CSSZ91		03476464	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	15532.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC CSSZ92	161453716	03476455	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$1,964.13	01-JAN-13	$1,964.13	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
ADVOCATES INC CSSZ92	161453716	03476455	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-JAN-13	982.07	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
ADVOCATES INC CSSZ93	161453716	03476868	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,093.27	01-AUG-12	$2,093.27	01-AUG-12	$ 2,093.27	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSSZ94	161453716	03476877	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,090.32	01-AUG-12	$2,090.32	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
ADVOCATES INC CSSZ95	161453716	03477323	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,166.84	01-AUG-12	$2,166.84	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
ADVOCATES INC CSSZ96		03477314	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-13	2074.33	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSSZ98	161453716	03477305	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2013	$2,082.08	01-FEB-13	$2,082.08	01-FEB-13	$ 2,082.08	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ADVOCATES INC CSSZ99	161453716	03520472	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,252.40	01-OCT-12	$2,252.40	01-OCT-12	$ 2,252.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3668.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3506.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3786.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3536.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3619.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	015	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	3740.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	017	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3647.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	020	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3026.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	030	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4500	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	023	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	1267.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	026	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	1356.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	016	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	2338.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	025	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-DEC-13	1808.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ADVOCATES INC ICS		03561988	039	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-14	2487.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ARC OF MONROE CSS Z01	160835172	03180430	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$4,257.58	01-MAY-11	$4,257.58	01-MAY-11	$ 4,257.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ARC OF MONROE CSSZ02	160835172	03184407	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$2,665.32	01-MAY-10	$2,665.32	01-MAY-10	$ 2,665.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ARC OF MONROE CSSZ03	160835172	03475578	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$2,640.84	01-JUN-12	$2,640.84	01-JUN-12	$ 2,640.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ARC OF ORLEANS COUNTY CSSZ01	237150957	03370349	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$2,558.28	01-JUL-11	$2,558.28	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
ARC OF ORLEANS COUNTY CSSZ03	237150957	03448937	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$821.21	01-APR-12	$821.21	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
ASPIRE OF WESTERN NEW YORK CSSZ01	160757756	03488617	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUN-2012	$922.38	01-JUN-12	$922.38	01-JUN-12	$ 922.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY CSSZ03	160757756	03529568	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$4,961.78	01-DEC-12	$4,961.78	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
ASPIRE OF WNY CSSZ04	160757756	03529559	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2013	$5,567.06	01-JAN-13	$5,567.06	01-JAN-13	$ 5,567.06	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ASPIRE OF WNY ICS		03561740	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4444.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4735.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4725.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ASPIRE OF WNY ICS		03561740	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4645.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4721.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1713.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4737.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4710.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4681.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3057.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2761.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	015	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5013.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	016	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3560.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	018	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2240.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	019	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4620.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	020	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1783.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	011	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-AUG-13	2009.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ASPIRE OF WNY ICS		03561740	017	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	2577.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHAR/ ALBANY INC CSSZ01	141340033	03464853	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,853.54	01-JAN-13	$3,853.54	01-JAN-13	$ 3,853.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHAR/ ALBANY INC CSSZ04	141340033	03464862	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,770.19	01-JAN-13	$3,770.19	01-JAN-13	$ 3,770.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHAR/ ALBANY INC CSSZ05	141340033	03465469	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$2,360.19	01-JAN-13	$2,360.19	01-JAN-13	$ 2,360.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHAR/ALBANY INC CSSZ02	141340033	03465478	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,719.99	01-JAN-13	$3,719.99	01-JAN-13	$ 3,719.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHAR/ALBANY INC CSSZ03	141340033	03464871	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,794.47	01-JAN-13	$3,794.47	01-JAN-13	$ 3,794.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY ICS		03563499	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	9518.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY ICS		03563499	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3412.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY ICS		03563499	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	2526.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY ICS		03563499	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	1458.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CHEMUNG CO NYSARC ICS		03563779	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAR-14	3059.08	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
CHEMUNG CO NYSARC ICS		03563779	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	3317.57	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
CHEMUNG CO NYSARC INC PFW	160795709	03448900	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$3,098.05	01-MAR-13	$3,098.05	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
COARC		03600057	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6862.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COARC		03600057	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	9640.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COARC		03600057	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7051.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COARC		03600057	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5060.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COARC		03600057	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3110.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COARC		03600057	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	1305.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COARC		03600057	006	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	5066.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMM SVCS F/DEV DISAB CSSZ13	161317369	03293170	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$1,751.39	01-SEP-12	$1,751.39	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
COMM SVCS F/DEV DISAB CSSZ14	161317369	03475587	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$4,196.65	01-MAR-12	$4,196.65	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
COMM SVCS F/DEV DISAB CSSZ15	161317369	03475596	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$2,053.04	01-APR-12	$2,053.04	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
COMMUNITY SERVICES F/DD CSS 3	161317369	02713082	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$6,626.18	01-OCT-12	$6,626.18	01-OCT-12	$ 6,626.18	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	1645.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	1408.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3672.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	1991.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3916.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1359.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
COMMUNITY SERVICES FOR THE DD ICS		03562030	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1930.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CENTRAL NEW YORK ICS		03612402	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-AUG-13	13139.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$4,017.44	01-MAY-11	$4,017.44	01-MAY-11	$ 4,017.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,008.72	01-MAY-11	$2,008.72	01-MAY-11	$ 2,008.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,973.00	01-MAY-11	$2,973.00	01-MAY-11	$ 2,973.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	006	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$1,486.50	01-MAY-11	$1,486.50	01-MAY-11	$ 1,486.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	007	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$8,196.83	01-MAY-11	$8,196.83	01-MAY-11	$ 8,196.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	008	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$4,098.42	01-MAY-11	$4,098.42	01-MAY-11	$ 4,098.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	009	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,184.33	01-MAY-11	$3,184.33	01-MAY-11	$ 3,184.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	010	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$1,592.17	01-MAY-11	$1,592.17	01-MAY-11	$ 1,592.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	011	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,195.67	01-MAY-11	$3,195.67	01-MAY-11	$ 3,195.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	012	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$1,597.84	01-MAY-11	$1,597.84	01-MAY-11	$ 1,597.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	013	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,281.00	01-MAY-11	$3,281.00	01-MAY-11	$ 3,281.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	014	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$1,640.50	01-MAY-11	$1,640.50	01-MAY-11	$ 1,640.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	015	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$5,094.38	01-MAY-11	$5,094.38	01-MAY-11	$ 5,094.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	016	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,547.19	01-MAY-11	$2,547.19	01-MAY-11	$ 2,547.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	017	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,158.17	01-MAY-11	$3,158.17	01-MAY-11	$ 3,158.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	018	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$1,579.09	01-MAY-11	$1,579.09	01-MAY-11	$ 1,579.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	019	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$4,482.50	01-MAY-11	$4,482.50	01-MAY-11	$ 4,482.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	020	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,241.25	01-MAY-11	$2,241.25	01-MAY-11	$ 2,241.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	021	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$5,094.42	01-MAY-11	$5,094.42	01-MAY-11	$ 5,094.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	022	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,547.21	01-MAY-11	$2,547.21	01-MAY-11	$ 2,547.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	025	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2011	$3,444.58	01-DEC-11	$3,444.58	01-DEC-11	$ 3,444.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
CONNECTIONS OF CNY PREPORTAL	201105149	03193982	026	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2011	$1,722.29	01-DEC-11	$1,722.29	01-DEC-11	$ 1,722.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSS Z08	150532247	03210271	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$3,120.06	01-FEB-12	$3,120.06	01-FEB-12	$ 3,120.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSS Z14	150532247	03273172	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2011	$2,185.01	01-JUN-11	$2,185.01	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
ENABLE CSSZ02	150532247	03175826	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$5,063.53	01-DEC-10	$5,063.53	01-DEC-10	$ 5,063.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ03	150532247	03180307	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,965.41	02-MAR-13	$0.00	02-MAR-13	$ -	02-MAR-13	$ -	02-MAR-13	$ -	02-MAR-13	$ -
ENABLE CSSZ05	150532247	03180316	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,946.81	01-NOV-12	$2,946.81	01-NOV-12	$ 2,946.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ06	150532247	03175817	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$1,812.21	01-MAR-12	$1,812.21	01-MAR-12	$ 1,812.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ07	150532247	03178278	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$9,122.79	01-DEC-11	$9,122.79	01-DEC-11	$ 9,122.79	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
ENABLE CSSZ07	150532247	03178278	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2010	$2,690.28	02-NOV-11	$0.00	02-NOV-11	$ -	02-NOV-11	$ -	02-NOV-11	$ -	02-NOV-11	$ -
ENABLE CSSZ10	150532247	03227598	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2011	$2,773.67	01-JUN-11	$2,773.67	01-MAY-13	$ 3,038.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ11	150532247	03227561	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$3,537.27	01-JUN-11	$3,537.27	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
ENABLE CSSZ11	150532247	03227561	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2010	$2,424.82	02-MAY-11	$0.00	02-MAY-11	$ -	02-MAY-11	$ -	02-MAY-11	$ -	02-MAY-11	$ -
ENABLE CSSZ12	150532247	03227570	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2011	$2,840.57	01-JUN-11	$2,840.57	01-JUN-11	$ 2,840.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ13	150532247	03227589	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$3,134.31	01-FEB-12	$3,134.31	01-FEB-12	$ 3,134.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ13	150532247	03227589	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$1,567.16	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ENABLE CSSZ15	150532247	03257114	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$3,327.81	01-FEB-12	$3,327.81	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
ENABLE CSSZ15	150532247	03257114	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$1,663.91	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ENABLE CSSZ16	150532247	03291921	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$7,944.11	01-AUG-12	$7,944.11	01-AUG-12	$ 7,944.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ17	150532247	03295741	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$5,210.99	01-JUL-12	$5,210.99	01-JUL-12	$ 5,210.99	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
ENABLE CSSZ18	150532247	03371771	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$4,832.15	01-FEB-12	$4,832.15	01-FEB-12	$ 4,832.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ19	150532247	03371744	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$3,578.46	01-AUG-12	$3,578.46	01-AUG-12	$ 3,578.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ19	150532247	03371744	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$1,789.23	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ENABLE CSSZ20	150532247	03371753	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,371.60	01-AUG-11	$2,371.60	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
ENABLE CSSZ21	150532247	03371780	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2012	$1,415.99	01-NOV-12	$1,415.99	01-NOV-12	$ 1,415.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ21	150532247	03371780	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,409.23	01-AUG-11	$2,409.23	01-AUG-11	$ 2,409.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ21	150532247	03371780	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$1,204.62	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
ENABLE CSSZ22	150532247	03371762	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,764.28	01-OCT-11	$2,764.28	01-OCT-11	$ 2,764.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ23	150532247	03418760	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,887.95	01-OCT-12	$2,887.95	01-OCT-12	$ 2,887.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ24	150532247	03386358	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,197.50	01-JUL-12	$2,197.50	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -
ENABLE CSSZ25	150532247	03391393	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$2,216.25	01-JAN-12	$2,216.25	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
ENABLE CSSZ27	150532247	03418779	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$6,165.85	01-APR-12	$6,165.85	01-APR-12	$ 6,165.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ28	150532247	03477209	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$3,916.99	01-APR-12	$3,916.99	01-APR-12	$ 3,916.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ30	150532247	03428411	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,191.29	01-MAY-12	$2,191.29	01-MAY-12	$ 2,191.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ31	150532247	03432946	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,259.17	01-AUG-12	$2,259.17	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
ENABLE CSSZ32	150532247	03477194	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,297.82	01-AUG-12	$2,297.82	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
ENABLE CSSZ33	150532247	03489374	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,157.82	01-AUG-12	$2,157.82	01-AUG-12	$ 2,157.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE CSSZ34		03664486	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-OCT-12	2970.97	01-OCT-12	$ 2,970.97	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	2085.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3416.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	3232.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3609.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	3356.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	2945.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2853.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3347.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3778.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	015	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3848.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	011	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1440.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUL-13	2024.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ENABLE ICS		03794016	006	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	2177.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
EPILEPSY-PRALID INC		03866951	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4695.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
FINGER LAKES UCPA INC PFW	160965912	03439512	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$1,589.91	01-MAR-13	$1,589.91	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
FRANZISKA RACKER CENTERS ICS		03563820	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3673.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
FRANZISKA RACKER CENTERS ICS		03563820	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3815.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
FRANZISKA RACKER CENTERS ICS		03563820	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	1760.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
FRANZISKA RACKER CENTERS INC CSSZ01	150581887	03425990	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$10,206.12	01-SEP-12	$10,206.12	01-SEP-12	$ 10,206.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
FRANZISKA RACKER CENTERS INC CSSZ01	150581887	03425990	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2012	$7,659.52	02-AUG-12	$0.00	02-AUG-12	$ -	02-AUG-12	$ -	02-AUG-12	$ -	02-AUG-12	$ -
FRANZISKA RACKER CENTERS INC PFW	150581887	03439961	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$3,958.65	01-MAR-13	$3,958.65	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
HAMASPIK OF ROCKLAND COUNTY PFW	133978518	03431954	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$7,494.22	01-MAR-13	$7,494.22	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4409.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3773.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4218.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4236.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4972.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6187.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	10108.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HAND IN HAND FAMILY SERVICES		03561933	006	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAR-14	2274.22	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC ICS		03449305	014	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	3028.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC ICS		03449305	011	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-DEC-13	761.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4144.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3886.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	1758.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5603.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5445.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	2168.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-SEP-13	3325.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	008	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	5111.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	009	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	2638.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PFW		03449305	010	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	5173.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERKIMER AREA RESOURCE CENTER INC		03563788	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	3021.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
HERKIMER AREA RESOURCE CENTER INC		03563788	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	3717.21	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
HERKIMER CO NYSARC INC	160973231	03449245	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$1,925.63	01-MAR-13	$1,925.63	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
HUMANITARIAN ORG F/MULTI EXP CSSZ01	161425108	03120674	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2012	$13,671.38	01-MAR-12	$13,671.38	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
ICS		03424022	010	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	1224.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS		03424022	031	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	2124.48	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS		03424022	037	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	1416.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS		03424022	040	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	945.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS		03424022	061	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	1609.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3732.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3423.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3731.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3838.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3677.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3861.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3729.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	018	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	15052.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	019	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3804.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	029	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	2231.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	032	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3966.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	033	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3643.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	035	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	1539.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	036	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5167.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	037	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3715.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	038	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2389.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	040	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3393.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	041	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4520.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	042	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7425.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	043	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3739	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	044	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3739.97	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	045	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3801.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	046	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5997.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	047	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3685.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	049	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3800.18	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ICS078		03561988	050	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4200.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	051	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	6579.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	052	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	6613.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	053	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5390.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	054	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3232.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	055	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4026.7	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	057	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4881.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	058	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4199.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	059	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3622.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	061	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3786	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	064	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3179.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	066	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3501.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	069	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4133.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	076	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4070.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	022	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-OCT-13	1562.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	031	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	1561.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	034	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	1650.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	056	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1402.51	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	060	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1358.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	062	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	1597.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	063	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1433.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	070	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1682.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	071	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1675.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	019	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	2503.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	024	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	2473.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	028	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	1730.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS078		03561988	065	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2577.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	028	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	790.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	041	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	887.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	042	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	1378.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	051	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	918.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	052	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1325.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	053	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	915.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	058	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	1948.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS079		03424022	067	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	2276.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3621.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	018	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3186.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	023	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	8018.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	024	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	5217.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	033	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	5917.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	037	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3218.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	038	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3012.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	044	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	5387.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	045	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	8231.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	049	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	4623.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	061	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	6486.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	075	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	2688.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	082	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	5486.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	086	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	9432.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	095	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3366.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	117	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	6063.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	119	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	4376.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	120	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	4080.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	145	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5454.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	206	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	6778.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	213	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	7602.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	229	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5162.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	256	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5481.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	259	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5579.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	263	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4099.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ICS366		03561722	274	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5109.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	275	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5885.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	276	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4741.48	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	277	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5303.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	278	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5462.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	279	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2636.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	280	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4992.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	281	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3377.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	282	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3279.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	283	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3529.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	284	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	6687.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	285	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3813.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	286	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5885.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	287	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3922.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	288	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2741.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	289	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4815.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	291	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5074.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	292	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5763.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	293	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7316.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	295	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4521.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	296	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7597.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	297	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5609.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	298	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4578.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	299	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	6849.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	301	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7420.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	302	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	8156.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	303	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5313.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	304	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4627.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	305	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	6191.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	306	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	6354.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	317	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	10263.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	318	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	9029.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	319	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3979.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	321	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4777.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	322	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4673.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	323	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	6285.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	324	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2749.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	325	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4608.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	326	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3836.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	327	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5108.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	328	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	9304.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	329	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4235.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	330	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4333.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	331	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5622.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	332	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3159.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	333	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	7908	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	334	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5253.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	335	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	7933.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	336	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4594.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	339	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6073.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	340	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5540.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	341	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2858.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	342	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5205.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	343	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	10487.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	344	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4027.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	345	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3719.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	346	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4390.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	347	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	7196.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	348	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	8653.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	349	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5228.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ICS366		03561722	350	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4639.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	351	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4861.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	353	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	12279.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	354	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5634	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	355	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3580.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	356	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5950.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	357	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4011.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	373	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5536.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	374	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4983.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	375	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6950.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	376	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5260.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	377	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5574.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	378	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	9570.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	379	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	10665.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	381	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5746.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	382	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5825.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	383	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7174.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	384	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	10255.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	385	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6969.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	386	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4401.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	387	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5265.4	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	389	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5739.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	390	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5009.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	391	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6436.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	393	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4819.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	394	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4136.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	395	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6185.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	397	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	8109.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	398	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4228.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	399	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5155.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	400	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4229.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	401	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1884.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	402	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4993.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	404	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3509.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	408	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7595.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	409	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4609.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	410	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	8709.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	411	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	8634.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	412	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	2616.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	413	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6293.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	414	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6162.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	415	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3850.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	416	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6317.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	417	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4156.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	418	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5475.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	419	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	8524.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	420	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4827.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	421	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7376.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	422	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6298.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	423	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6747.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	424	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1155.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	425	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6659.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	427	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6571.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	428	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4780.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	429	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4993.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	430	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6345.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	431	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7967.3	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	432	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3699.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	433	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4417	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	006	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	6643.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ICS366		03561722	009	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	3595.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	010	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	4311.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	087	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	3958.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	088	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	3958.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	110	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	4429.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	137	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	8547.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	155	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-OCT-13	6845.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	156	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-OCT-13	2971.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	290	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	4084.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	313	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	3840.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	315	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	3799.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	352	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	2323.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	369	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	3831.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	370	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	5702.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	013	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	2208.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	015	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	1539.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	016	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	2475.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	019	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUL-13	1663.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	025	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	1576.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	026	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	1422.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	027	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	3255.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	028	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	2947.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	053	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-13	2811.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	086	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	5989.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	094	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	1761.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	111	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUL-13	2777.48	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	122	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	1833.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	131	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	2029	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	257	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	2069.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	258	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	1584.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	269	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3130.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	359	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	1998.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	392	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2184.4	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	403	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	1409.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	405	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2205.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	406	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2316.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ICS366		03561722	407	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2079.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENCE RESIDENCES INC PFW	133490223	03448919	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$8,161.83	01-MAR-13	$8,161.83	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
INDEPENDENT SUPP SRVS CSS 47	050535944	02814271	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$4,906.31	01-NOV-11	$4,906.31	01-NOV-11	$ 4,906.31	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPP SRVS CSS 49	050535944	02825881	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2009	$3,488.09	01-SEP-09	$3,488.09	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPP SRVS CSS 52	050535944	02830037	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2008	$8,094.18	01-MAR-08	$8,094.18	01-MAR-08	$ 8,094.18	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 55	050535944	02831872	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2008	$5,520.25	01-JUL-08	$5,520.25	01-JUL-08	$ 5,520.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 57	050535944	02843603	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,876.40	01-OCT-11	$2,876.40	01-OCT-11	$ 2,876.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 59	050535944	02843974	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$4,168.70	01-NOV-10	$4,168.70	01-NOV-10	$ 4,168.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 68	050535944	02865305	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$5,755.93	01-AUG-11	$5,755.93	01-AUG-11	$ 5,755.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 69	050535944	02865323	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2007	$3,029.25	01-APR-07	$3,029.25	01-APR-07	$ 3,029.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 73	050535944	02878128	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$5,908.68	01-APR-12	$5,908.68	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -
INDEPENDENT SUPP SRVS CSS 74	050535944	02878182	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2010	$2,366.25	01-JAN-10	$2,366.25	01-JAN-10	$ 2,366.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 86	050535944	02906581	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2009	$1,710.84	01-MAY-09	$1,710.84	01-MAY-09	$ 1,710.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS 87	050535944	02906563	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$7,719.55	01-MAY-10	$7,719.55	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPP SRVS CSS 91	050535944	02909391	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$5,251.37	01-AUG-11	$5,251.37	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPP SRVS CSS 92	050535944	02909373	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$1,380.72	01-MAY-12	$1,380.72	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -
INDEPENDENT SUPP SRVS CSS 92	050535944	02909373	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2010	$1,195.76	01-FEB-10	$1,195.76	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -
INDEPENDENT SUPP SRVS CSS 94	050535944	02922892	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2010	$1,427.33	01-JAN-10	$1,427.33	01-JAN-10	$ 1,427.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS Y00	050535944	02923297	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$14,117.53	01-JUL-12	$14,117.53	01-JUL-12	$ 14,117.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS Y01	050535944	02923302	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$6,128.90	01-OCT-12	$6,128.90	01-OCT-12	$ 6,128.90	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS Y02	050535944	02923311	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$3,532.44	01-APR-12	$3,532.44	01-APR-12	$ 3,532.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SRVS CSS Y02	050535944	02923311	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2009	$1,717.65	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
INDEPENDENT SUPP SRVS CSS Y04	050535944	02934518	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2009	$3,501.70	01-AUG-09	$3,501.70	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPP SRVS CSS Y05	050535944	02934527	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$1,796.77	01-OCT-11	$1,796.77	01-OCT-11	$ 1,796.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INDEPENDENT SUPP SVC CSS 20	050535944	02718472	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2009	$3,097.30	01-DEC-09	$3,097.30	01-DEC-09	$ 3,097.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVC CSS 22	050535944	02718490	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2011	$2,662.75	01-MAR-11	$2,662.75	01-MAR-11	$ 2,662.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVC CSS 24	050535944	02718463	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2009	$5,328.63	01-AUG-09	$5,328.63	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPP SVCS 38	050535944	02784632	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2008	$4,202.88	01-AUG-08	$4,202.88	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPP SVCS CSS 10	050535944	02711553	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2009	$6,264.22	01-AUG-09	$6,264.22	01-AUG-09	$ 6,264.22	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 11	050535944	02711544	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2009	$2,021.98	01-APR-09	$2,021.98	01-APR-09	$ 2,021.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 12	050535944	02719175	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2009	$1,972.04	01-DEC-09	$1,972.04	01-DEC-09	$ 1,972.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 14	050535944	02713582	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2009	$2,858.38	01-AUG-09	$2,858.38	01-AUG-09	$ 2,858.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 16	050535944	02713564	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2007	$1,997.01	01-MAY-07	$1,997.01	01-MAY-07	$ 1,997.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 26	050535944	02739357	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$3,654.64	01-NOV-10	$3,654.64	01-NOV-10	$ 3,654.64	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPP SVCS CSS 27	050535944	02737460	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$4,849.71	01-APR-12	$4,849.71	01-APR-12	$ 4,849.71	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPP SVCS CSS 30	050535944	02746005	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$5,148.26	01-FEB-12	$5,148.26	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPP SVCS CSS 31	050535944	02746023	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2008	$3,514.28	01-OCT-08	$3,514.28	01-OCT-08	$ 3,514.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 33	050535944	02746014	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$6,128.02	01-AUG-11	$6,128.02	01-AUG-11	$ 6,128.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 39	050535944	02784623	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,005.85	01-MAY-11	$3,005.85	01-MAY-11	$ 3,005.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVCS CSS 8	050535944	02680353	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$1,961.17	01-AUG-10	$1,961.17	01-AUG-10	$ 1,961.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPP SVS CSS 41	050535944	02811970	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2010	$10,808.92	01-AUG-10	$10,808.92	01-AUG-10	$ 10,808.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSS 11	050535944	02941582	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$6,150.83	01-MAY-11	$6,150.83	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW01	050535944	03467163	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,813.34	01-JUL-12	$2,813.34	01-JUL-12	$ 2,813.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW02	050535944	03467145	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,600.47	01-JUL-12	$2,600.47	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW04	050535944	03467136	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$2,716.60	01-JUL-12	$2,716.60	01-JUL-12	$ 2,716.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW06	050535944	03467118	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$13,481.17	01-JUL-12	$13,481.17	01-JUL-12	$ 13,481.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW07	050535944	03477649	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,889.52	01-JUL-12	$2,889.52	01-JUL-12	$ 2,889.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW08	050535944	03487354	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,699.17	01-SEP-12	$2,699.17	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW09	050535944	03487703	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,930.77	01-SEP-12	$3,930.77	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW10	050535944	03487712	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,871.04	01-SEP-12	$3,871.04	01-SEP-12	$ 3,871.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW11	050535944	03496673	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$4,719.88	01-SEP-12	$4,719.88	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW12	050535944	03496664	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$4,168.02	01-SEP-12	$4,168.02	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW13	050535944	03496655	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,022.83	01-SEP-12	$5,022.83	01-SEP-12	$ 5,022.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW14	050535944	03496646	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2012	$1,174.41	01-SEP-12	$1,174.41	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW15	050535944	03497418	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$2,756.75	01-SEP-12	$2,756.75	01-SEP-12	$ 2,756.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW16	050535944	03497409	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2012	$1,802.25	01-SEP-12	$1,802.25	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW17	050535944	03496682	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,550.11	01-SEP-12	$5,550.11	01-SEP-12	$ 5,550.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW18	050535944	03497427	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,809.23	01-SEP-12	$2,809.23	01-SEP-12	$ 2,809.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW19	050535944	03497876	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,210.24	01-SEP-12	$5,210.24	01-SEP-12	$ 5,210.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW20	050535944	03497867	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,010.25	01-OCT-12	$3,010.25	01-OCT-12	$ 3,010.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW21	050535944	03497858	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,005.45	01-OCT-12	$3,005.45	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW22	050535944	03497849	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,444.20	01-OCT-12	$2,444.20	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW23	050535944	03500483	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,421.09	01-OCT-12	$2,421.09	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW24	050535944	03500992	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,120.21	01-OCT-12	$3,120.21	01-OCT-12	$ 3,120.21	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW25	050535944	03520270	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,979.51	01-OCT-12	$2,979.51	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW26	050535944	03500974	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,827.44	01-OCT-12	$2,827.44	01-OCT-12	$ 2,827.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW27	050535944	03500965	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,029.05	01-OCT-12	$3,029.05	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW28	050535944	03500956	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,036.10	01-OCT-12	$3,036.10	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW29	050535944	03501035	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,786.41	01-OCT-12	$2,786.41	01-OCT-12	$ 2,786.41	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW30	050535944	03501026	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,629.75	01-OCT-12	$2,629.75	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW31	050535944	03501017	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,373.79	01-OCT-12	$2,373.79	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW32	050535944	03501008	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,743.33	01-OCT-12	$2,743.33	01-OCT-12	$ 2,743.33	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW33	050535944	03505488	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,552.39	01-OCT-12	$2,552.39	01-OCT-12	$ 2,552.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW34	050535944	03505479	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,330.27	01-OCT-12	$4,330.27	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW35	050535944	03505460	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,302.16	01-OCT-12	$4,302.16	01-OCT-12	$ 4,302.16	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW36	050535944	03505497	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,861.81	01-OCT-12	$2,861.81	01-OCT-12	$ 2,861.81	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW37	050535944	03505451	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,111.08	01-OCT-12	$2,111.08	01-OCT-12	$ 2,111.08	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW38	050535944	03505442	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,948.56	01-OCT-12	$2,948.56	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW39	050535944	03505864	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,917.72	01-NOV-12	$2,917.72	01-NOV-12	$ 2,917.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW40	050535944	03505855	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,848.20	01-NOV-12	$2,848.20	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW41	050535944	03520972	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$2,863.08	01-NOV-12	$2,863.08	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW42	050535944	03505846	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$5,536.70	01-NOV-12	$5,536.70	01-NOV-12	$ 5,536.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW43	050535944	03505837	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,596.75	01-NOV-12	$2,596.75	01-NOV-12	$ 2,596.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW44	050535944	03505828	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,433.33	01-NOV-12	$2,433.33	01-NOV-12	$ 2,433.33	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INDEPENDENT SUPPORT SERVICES CSSW45	050535944	03505819	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,727.24	01-SEP-12	$5,727.24	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW46	050535944	03505800	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,815.69	01-NOV-12	$2,815.69	01-NOV-12	$ 2,815.69	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW47	050535944	03505433	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,477.19	01-JUL-12	$2,477.19	01-JUL-12	$ 2,477.19	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW48	050535944	03506241	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$4,598.85	01-JAN-13	$4,598.85	01-JAN-13	$ 4,598.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW48	050535944	03506241	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,583.34	01-DEC-12	$2,583.34	01-DEC-12	$ 2,583.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW49	050535944	03506109	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,287.14	01-OCT-12	$2,287.14	01-OCT-12	$ 2,287.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW50	050535944	03506301	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$2,443.61	01-DEC-12	$2,443.61	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW51	050535944	03510354	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,586.18	01-DEC-12	$2,586.18	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW52	050535944	03510363	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$3,025.53	01-DEC-12	$3,025.53	01-DEC-12	$ 3,025.53	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW53	050535944	03510372	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,364.88	01-DEC-12	$2,364.88	01-DEC-12	$ 2,364.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW54	050535944	03510390	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$4,991.30	01-DEC-12	$4,991.30	01-DEC-12	$ 4,991.30	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW55	050535944	03510381	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$4,212.96	01-DEC-12	$4,212.96	01-DEC-12	$ 4,212.96	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW56	050535944	03520885	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$5,057.30	01-JAN-13	$5,057.30	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW57	050535944	03520909	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$4,855.69	01-JAN-13	$4,855.69	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW58	050535944	03520927	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$3,922.74	01-JAN-13	$3,922.74	01-JAN-13	$ 3,922.74	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW59	050535944	03520894	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$4,240.38	01-JAN-13	$4,240.38	01-JAN-13	$ 4,240.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW60	050535944	03520918	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$2,878.36	01-JAN-13	$2,878.36	01-JAN-13	$ 2,878.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW61	050535944	03537744	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,120.31	01-JAN-13	$3,120.31	01-JAN-13	$ 3,120.31	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW62	050535944	03537753	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$4,574.18	01-JAN-13	$4,574.18	01-JAN-13	$ 4,574.18	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW63	050535944	03537762	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2013	$1,888.17	01-JAN-13	$1,888.17	01-JAN-13	$ 1,888.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW64		03537726	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-13	2609.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW65	050535944	03537717	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$2,754.10	01-JAN-13	$2,754.10	01-JAN-13	$ 2,754.10	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW66	050535944	03537735	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,669.31	01-NOV-12	$2,669.31	01-NOV-12	$ 2,669.31	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW67	050535944	03539975	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$5,226.60	01-MAR-13	$5,226.60	01-MAR-13	$ 5,226.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW68	050535944	03539984	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,439.79	01-MAR-13	$2,439.79	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW69	050535944	03539993	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,545.98	01-MAR-13	$4,545.98	01-MAR-13	$ 4,545.98	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW70	050535944	03539939	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,181.14	01-MAR-13	$4,181.14	01-MAR-13	$ 4,181.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW71	050535944	03539948	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,239.55	01-MAR-13	$2,239.55	01-MAR-13	$ 2,239.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW72	050535944	03539957	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$3,003.40	01-MAR-13	$3,003.40	01-JUL-13	$ 3,003.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW73	050535944	03540012	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,317.39	01-MAR-13	$2,317.39	01-MAR-13	$ 2,317.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW74	050535944	03540003	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,839.98	01-MAR-13	$2,839.98	01-MAR-13	$ 2,839.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW75	050535944	03540021	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,306.28	01-MAR-13	$4,306.28	01-MAR-13	$ 4,306.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW76	050535944	03540030	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,613.40	01-MAR-13	$2,613.40	01-MAR-13	$ 2,613.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW77	050535944	03539966	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,928.00	01-MAR-13	$2,928.00	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW78	050535944	03540627	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,510.68	01-MAR-13	$2,510.68	01-MAR-13	$ 2,510.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW79	050535944	03540645	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,880.51	01-MAR-13	$2,880.51	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSW80	050535944	03540636	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$5,026.45	01-MAR-13	$5,026.45	01-MAR-13	$ 5,026.45	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW81	050535944	03540654	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,729.72	01-MAR-13	$2,729.72	01-MAR-13	$ 2,729.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW82	050535944	03540663	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$5,106.16	01-MAR-13	$5,106.16	01-MAR-13	$ 5,106.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW84		03562278	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAR-13	3801.03	01-MAR-13	$ 3,801.03	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW85		03562269	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-MAR-13	2676.06	01-MAR-13	$ 2,676.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW86		03562241	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-MAR-13	2282.63	01-MAR-13	$ 2,282.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW87		03562223	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-MAR-13	2355.68	01-MAR-13	$ 2,355.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW89		03562329	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-13	2956.3	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW93		03562310	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3087.9	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW94		03562301	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3087.9	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSW95		03562296	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3087.9	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX02	050535944	03187840	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$3,161.63	01-SEP-11	$3,161.63	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX03	050535944	03204455	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2011	$1,906.34	01-MAR-11	$1,906.34	01-MAR-11	$ 1,906.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX04	050535944	03204464	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$4,212.86	01-SEP-11	$4,212.86	01-SEP-11	$ 4,212.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX06	050535944	03209914	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$4,772.36	01-MAY-10	$4,772.36	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX09	050535944	03220160	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$3,996.47	01-FEB-12	$3,996.47	01-FEB-12	$ 3,996.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX10	050535944	03226831	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$7,054.41	01-NOV-12	$7,054.41	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX11	050535944	03227016	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$3,964.74	01-DEC-10	$3,964.74	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX14	050535944	03257090	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2010	$2,888.44	01-SEP-10	$2,888.44	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX15	050535944	03257201	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$3,057.25	01-DEC-12	$3,057.25	01-DEC-12	$ 3,057.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX16	050535944	03257247	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$3,834.32	01-AUG-11	$3,834.32	01-AUG-11	$ 3,834.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX17	050535944	03257729	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,801.30	01-MAY-12	$2,801.30	01-MAY-12	$ 2,801.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX18	050535944	03271056	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$5,168.83	01-JAN-13	$5,168.83	01-JAN-13	$ 5,168.83	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX19	050535944	03271047	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$4,447.96	01-DEC-11	$4,447.96	01-DEC-11	$ 4,447.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INDEPENDENT SUPPORT SERVICES CSSX19	050535944	03271047	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2010	$2,388.87	01-OCT-10	$2,388.87	01-OCT-10	$ 2,388.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX20	050535944	03271038	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$2,984.30	01-JUN-12	$2,984.30	01-JUN-12	$ 2,984.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX21	050535944	03271029	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$4,951.84	01-NOV-11	$4,951.84	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX22	050535944	03271074	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$3,188.75	01-NOV-10	$3,188.75	01-JUL-13	$ 3,209.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX23	050535944	03291710	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$3,762.55	01-NOV-11	$3,762.55	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX24	050535944	03291701	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$2,968.54	01-JAN-12	$2,968.54	01-JAN-12	$ 2,968.54	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX25	050535944	03291729	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,370.93	01-SEP-12	$5,370.93	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX26	050535944	03291256	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$4,506.91	01-NOV-10	$4,506.91	01-NOV-10	$ 4,506.91	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX27	050535944	03291898	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$2,820.20	01-JAN-11	$2,820.20	01-APR-13	$ 3,233.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX28	050535944	03291903	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,100.90	01-OCT-11	$2,100.90	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX29	050535944	03291912	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$2,429.12	01-DEC-11	$2,429.12	01-JUL-13	$ 2,454.87	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX31	050535944	03306296	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$5,810.47	01-APR-12	$5,810.47	01-APR-12	$ 5,810.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX32	050535944	03306374	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$2,765.66	01-FEB-12	$2,765.66	01-FEB-12	$ 2,765.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX33	050535944	03307706	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$5,458.85	01-MAR-11	$5,458.85	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX34	050535944	03308078	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,334.53	01-MAY-11	$2,334.53	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX35	050535944	03308087	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$3,417.39	01-JUN-11	$3,417.39	01-JUN-11	$ 3,417.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX36	050535944	03308096	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,502.48	01-MAY-11	$3,502.48	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX37	050535944	03315735	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2011	$2,743.63	01-APR-11	$2,743.63	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX38	050535944	03315726	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2011	$2,667.15	01-APR-11	$2,667.15	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX39	050535944	03357682	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$3,758.53	01-MAY-11	$3,758.53	01-MAY-11	$ 3,758.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX40	050535944	03357733	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$3,641.23	01-MAY-11	$3,641.23	01-MAY-11	$ 3,641.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX42	050535944	03357664	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,325.91	01-MAR-13	$2,325.91	01-MAR-13	$ 2,325.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX43	050535944	03357673	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,158.96	01-MAY-11	$2,158.96	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX44	050535944	03357655	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2012	$2,660.30	01-JUN-12	$2,660.30	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX46	050535944	03357742	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,407.03	01-OCT-12	$4,407.03	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX46	050535944	03357742	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$1,373.38	01-MAY-11	$1,373.38	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX47	050535944	03357706	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$3,409.65	01-FEB-12	$3,409.65	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX48	050535944	03357691	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2012	$3,084.38	01-JUN-12	$3,084.38	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX49	050535944	03358087	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,725.04	01-MAR-13	$3,725.04	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX50	050535944	03358069	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2011	$2,605.95	01-JUN-11	$2,605.95	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX51	050535944	03358096	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$2,780.93	01-JUL-11	$2,780.93	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX52	050535944	03358050	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$3,703.99	01-JUL-11	$3,703.99	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX53	050535944	03358023	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$3,893.46	01-JUL-11	$3,893.46	01-JUL-11	$ 3,893.46	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX54	050535944	03358032	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2011	$1,525.15	01-JUL-11	$1,525.15	01-JUL-11	$ 1,525.15	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX55	050535944	03358041	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$3,887.29	01-FEB-12	$3,887.29	01-FEB-12	$ 3,887.29	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX55	050535944	03358041	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$2,621.82	01-JUL-11	$2,621.82	01-JUL-11	$ 2,621.82	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX56	050535944	03358436	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,827.93	01-AUG-11	$2,827.93	01-MAY-13	$ 2,800.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX58	050535944	03358454	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$2,615.65	01-JAN-13	$2,615.65	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX59	050535944	03358463	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,773.20	01-AUG-11	$2,773.20	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX60	050535944	03358427	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,875.52	01-AUG-11	$2,875.52	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX61	050535944	03386514	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,882.37	01-AUG-11	$2,882.37	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX62	050535944	03386505	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$5,663.99	01-OCT-11	$5,663.99	01-OCT-11	$ 5,663.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX63	050535944	03386490	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$3,017.60	01-OCT-11	$3,017.60	01-OCT-11	$ 3,017.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX64	050535944	03386849	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,888.64	01-OCT-11	$2,888.64	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX65	050535944	03386830	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$3,909.03	01-OCT-11	$3,909.03	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX66	050535944	03386821	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,707.98	01-OCT-11	$2,707.98	01-OCT-11	$ 2,707.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX67	050535944	03386812	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$4,517.19	01-OCT-11	$4,517.19	01-OCT-11	$ 4,517.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX68	050535944	03387280	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,664.80	01-OCT-11	$2,664.80	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX69	050535944	03387271	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2011	$2,744.70	01-SEP-11	$2,744.70	01-SEP-11	$ 2,744.70	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX70	050535944	03387299	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,457.51	01-OCT-11	$2,457.51	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX71	050535944	03387262	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$3,370.39	01-OCT-11	$3,370.39	01-OCT-11	$ 3,370.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX72	050535944	03387359	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,100.73	01-OCT-12	$3,100.73	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX73	050535944	03387340	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,291.64	01-OCT-11	$2,291.64	01-OCT-11	$ 2,291.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX74	050535944	03387331	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$3,701.05	01-NOV-11	$3,701.05	01-NOV-11	$ 3,701.05	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX75	050535944	03396912	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$2,874.64	01-DEC-11	$2,874.64	01-DEC-11	$ 2,874.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX76	050535944	03396930	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$2,559.93	01-OCT-11	$2,559.93	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX77	050535944	03396921	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$2,857.01	01-JAN-12	$2,857.01	01-JAN-12	$ 2,857.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX78	050535944	03396903	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$2,507.84	01-JAN-12	$2,507.84	01-JAN-12	$ 2,507.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX79	050535944	03396949	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$2,856.62	01-JAN-12	$2,856.62	01-JAN-12	$ 2,856.62	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX80	050535944	03407045	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$4,407.13	01-JAN-12	$4,407.13	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INDEPENDENT SUPPORT SERVICES CSSX81	050535944	03407081	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$2,182.95	01-NOV-11	$2,182.95	01-NOV-11	$ 2,182.95	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX82	050535944	03415767	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$2,767.91	01-FEB-12	$2,767.91	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX83	050535944	03415987	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,449.24	01-MAR-13	$4,449.24	01-MAR-13	$ 4,449.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX83	050535944	03415987	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2012	$1,815.18	02-FEB-13	$0.00	02-FEB-13	$ -	02-FEB-13	$ -	02-FEB-13	$ -	02-FEB-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX84	050535944	03416002	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2012	$1,470.90	01-MAR-12	$1,470.90	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX85	050535944	03415996	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,381.04	01-DEC-12	$2,381.04	01-JUN-14	$ -	01-JUN-14	$ -	01-JUN-14	$ -	01-JUN-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX86	050535944	03416960	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$2,539.18	01-MAR-12	$2,539.18	01-MAR-12	$ 2,539.18	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX87	050535944	03422960	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$3,468.89	01-MAR-12	$3,468.89	01-MAR-12	$ 3,468.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX88	050535944	03422979	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$3,964.84	01-MAR-12	$3,964.84	01-MAR-12	$ 3,964.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX89	050535944	03434484	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$2,637.39	01-JAN-12	$2,637.39	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX90	050535944	03447261	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$5,065.82	01-MAY-12	$5,065.82	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX91	050535944	03447436	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$3,460.38	01-MAY-12	$3,460.38	01-MAY-12	$ 3,460.38	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX92	050535944	03447445	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,462.80	01-MAY-12	$2,462.80	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX93	050535944	03447427	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$4,643.40	01-MAY-12	$4,643.40	01-MAY-12	$ 4,643.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX94	050535944	03447418	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2011	$2,644.73	01-NOV-11	$2,644.73	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX95	050535944	03450277	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,553.86	01-JUL-12	$2,553.86	01-JUL-12	$ 2,553.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX96	050535944	03450286	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,903.62	01-JUL-12	$2,903.62	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX97	050535944	03450846	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,579.91	01-JUL-12	$2,579.91	01-JUL-12	$ 2,579.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSX98	050535944	03450837	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,062.91	01-JUL-12	$2,062.91	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSX99	050535944	03450828	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$5,266.06	01-MAY-12	$5,266.06	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY09	050535944	02941615	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2010	$5,633.54	01-AUG-10	$5,633.54	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY10	050535944	02941606	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$5,871.96	01-MAY-12	$5,871.96	01-MAY-12	$ 5,871.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY13	050535944	02953299	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2008	$4,216.00	01-OCT-08	$4,216.00	01-OCT-08	$ 4,216.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY13	050535944	02953299	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2011	$2,649.63	01-DEC-11	$2,649.63	01-DEC-11	$ 2,649.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY14	050535944	02953313	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2009	$2,698.98	01-DEC-09	$2,698.98	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY14	050535944	02953313	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2009	$1,349.49	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY16	050535944	02953304	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2009	$4,030.74	01-SEP-09	$4,030.74	01-SEP-09	$ 4,030.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY18	050535944	02965126	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$5,543.75	01-NOV-12	$5,543.75	01-NOV-12	$ 5,543.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY22	050535944	02967953	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2010	$3,232.72	01-DEC-10	$3,232.72	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY23	050535944	02968472	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2009	$10,014.09	01-JUL-09	$10,014.09	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY25	050535944	02965795	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$6,054.97	01-MAY-12	$6,054.97	01-MAY-12	$ 6,054.97	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY27	050535944	02965497	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$5,574.00	01-AUG-11	$5,574.00	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY28	050535944	02965488	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,562.72	01-MAR-13	$4,562.72	01-MAR-13	$ 4,562.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY30	050535944	02969428	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$5,191.84	01-JAN-10	$5,191.84	01-JAN-10	$ 5,191.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY31	050535944	02969437	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$2,422.16	01-MAY-11	$2,422.16	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY32	050535944	02968812	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$2,422.16	01-MAY-11	$2,422.16	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY33	050535944	02968821	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$5,579.49	01-JUN-12	$5,579.49	01-JUN-12	$ 5,579.49	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY34	050535944	02968490	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$3,217.54	01-DEC-10	$3,217.54	01-DEC-10	$ 3,217.54	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY35	050535944	02968505	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$4,224.81	01-DEC-10	$4,224.81	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY36	050535944	02974225	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2010	$4,630.19	01-FEB-10	$4,630.19	01-FEB-10	$ 4,630.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY37	050535944	02974514	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$4,615.40	01-MAY-12	$4,615.40	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY38	050535944	02974505	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$5,855.81	01-APR-12	$5,855.81	01-APR-12	$ 5,855.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY40	050535944	02974716	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$3,205.01	01-MAR-11	$3,205.01	01-MAR-11	$ 3,205.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY42	050535944	02981771	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2011	$1,806.95	01-SEP-11	$1,806.95	01-SEP-11	$ 1,806.95	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY43	050535944	02981762	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$5,191.93	01-JAN-11	$5,191.93	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY46	050535944	02992345	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$6,388.28	01-JUL-12	$6,388.28	01-MAY-13	$ 7,881.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY47	050535944	02992354	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$6,110.98	01-JUL-12	$6,110.98	01-MAY-13	$ 7,055.97	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY49	050535944	03024191	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2010	$4,592.10	01-OCT-10	$4,592.10	01-OCT-10	$ 4,592.10	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY50	050535944	03024173	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$4,466.08	01-NOV-12	$4,466.08	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY51	050535944	03024182	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$3,088.29	01-JUL-12	$3,088.29	01-JUL-12	$ 3,088.29	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY52	050535944	03026120	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,543.19	01-MAY-12	$2,543.19	01-MAY-12	$ 2,543.19	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY53	050535944	03016800	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$4,413.30	01-SEP-11	$4,413.30	01-SEP-11	$ 4,413.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY54	050535944	03024471	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$6,323.65	01-JUL-12	$6,323.65	01-MAY-13	$ 6,611.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY54	050535944	03024471	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2009	$2,202.64	02-OCT-09	$0.00	02-OCT-09	$ -	02-OCT-09	$ -	02-OCT-09	$ -	02-OCT-09	$ -
INDEPENDENT SUPPORT SERVICES CSSY56	050535944	03024480	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$4,764.72	01-NOV-11	$4,764.72	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY57	050535944	03026868	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$3,142.15	01-JAN-10	$3,142.15	01-JAN-10	$ 3,142.15	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY59	050535944	03033429	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$4,384.81	01-SEP-11	$4,384.81	01-SEP-11	$ 4,384.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY60	050535944	03036711	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$5,717.84	01-JUL-12	$5,717.84	01-JUL-12	$ 5,717.84	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY61	050535944	03035563	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$3,826.29	01-NOV-10	$3,826.29	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY62	050535944	03034526	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$4,066.97	01-JAN-12	$4,066.97	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
INDEPENDENT SUPPORT SERVICES CSSY63	050535944	03046206	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$4,448.55	01-AUG-11	$4,448.55	01-AUG-11	$ 4,448.55	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY65	050535944	03079678	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$3,852.73	01-SEP-11	$3,852.73	01-SEP-11	$ 3,852.73	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY66	050535944	03079669	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,777.38	01-SEP-12	$5,777.38	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY70	050535944	03131188	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$4,557.34	01-JUN-11	$4,557.34	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY71	050535944	03131179	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$3,349.73	01-JUL-11	$3,349.73	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY74	050535944	03131651	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$3,502.28	01-DEC-10	$3,502.28	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY76	050535944	03131633	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2011	$2,771.83	01-NOV-11	$2,771.83	01-NOV-11	$ 2,771.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY77	050535944	03131679	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2010	$4,929.32	01-JUN-10	$4,929.32	01-JUN-10	$ 4,929.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY80	050535944	03125835	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2010	$5,360.94	01-MAR-10	$5,360.94	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY81	050535944	03124747	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2010	$5,360.94	01-MAR-10	$5,360.94	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY84	050535944	03126285	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$4,269.85	01-NOV-10	$4,269.85	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY85	050535944	03125862	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$4,575.16	01-MAY-12	$4,575.16	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY86	050535944	03125871	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$2,224.76	01-MAR-12	$2,224.76	01-MAR-12	$ 2,224.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY87	050535944	03125844	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,534.11	01-SEP-12	$3,534.11	01-SEP-12	$ 3,534.11	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY90	050535944	03131720	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$3,530.78	01-MAY-12	$3,530.78	01-MAY-12	$ 3,530.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY91	050535944	03131711	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$7,745.99	01-APR-12	$7,745.99	01-JUL-13	$ 7,742.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY92	050535944	03134916	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2010	$3,117.57	01-AUG-10	$3,117.57	01-MAY-13	$ 3,222.93	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY93	050535944	03153000	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$5,488.23	01-JAN-12	$5,488.23	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES CSSY94	050535944	03172992	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$5,743.69	01-JAN-10	$5,743.69	01-JAN-10	$ 5,743.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY95	050535944	03175197	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$2,599.88	01-DEC-11	$2,599.88	01-DEC-11	$ 2,599.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY96	050535944	03172983	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$4,554.99	01-DEC-11	$4,554.99	01-DEC-11	$ 4,554.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY96	050535944	03172983	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2010	$2,153.48	01-JAN-10	$2,153.48	01-JAN-10	$ 2,153.48	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY98	050535944	03180403	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,872.58	01-OCT-12	$2,872.58	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
INDEPENDENT SUPPORT SERVICES CSSY99	050535944	03183699	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$4,753.36	01-OCT-11	$4,753.36	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
INDEPENDENT SUPPORT SERVICES CSSZ97	050535944	03176065	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$1,816.75	01-JUL-11	$1,816.75	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -
INDEPENDENT SUPPORT SRVS CSS Y06	050535944	02936487	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$3,587.47	01-OCT-12	$3,587.47	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
INDEPENDENT SUPPORT SRVS CSS Y06	050535944	02936487	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2009	$1,959.62	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
INDEPENDENT SUPPORT SRVS CSS Y07	050535944	02936496	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2010	$5,893.21	01-JUN-10	$5,893.21	01-JUN-10	$ 5,893.21	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
INDEPENDENT SUPPORT SVCS CSS1	050535944	02567715	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$5,482.35	01-APR-12	$5,482.35	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
INDEPENDENT SUPPORT SVCS CSS2	050535944	02567724	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$5,956.27	01-JAN-11	$5,956.27	01-JAN-11	$ 5,956.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SVCS CSS3	050535944	02623765	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2007	$3,925.09	01-APR-07	$3,925.09	01-APR-07	$ 3,925.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
INDEPENDENT SUPPORT SVCS CSS4	050535944	02623774	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2006	$6,465.63	01-JUN-06	$6,465.63	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
INDEPENDENT SUPPORT SVCS CSS6	050535944	02623807	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2006	$5,675.25	01-AUG-06	$5,675.25	01-AUG-06	$ 5,675.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	8276.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5424.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4373.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	017	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4090.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	020	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	6868.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	021	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6121.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	022	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4954.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	030	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5325.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	031	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4648.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	032	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4765.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	035	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4746.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	036	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2674	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	039	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	7104.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	040	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5497.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	041	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5791.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	042	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5214.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	043	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5462.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	046	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4217.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	047	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5485.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	048	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3446.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	050	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4029.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	051	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4117.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	052	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	7670.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	055	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	7565.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	056	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3748.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	057	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6486.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	058	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4432.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ISS INC ICS		03561722	059	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6927.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	060	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5733.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	062	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	9229.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	064	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3369.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	065	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6579.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	066	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	7674.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	067	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	7880.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	068	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4940	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	069	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4940	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	070	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4749.22	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	071	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2556.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	072	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5671.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	073	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3441.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	074	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2659.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	076	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4916.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	077	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5225.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	078	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	10952.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	079	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6761.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	080	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6102.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	081	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5023.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	083	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	9047.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	084	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5086.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	085	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6964.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	089	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5850.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	090	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6258.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	091	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	7494.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	093	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6507.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	094	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6109.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	096	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5589	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	097	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5900.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	099	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	1825.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	100	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3796.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	102	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5998	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
ISS INC ICS		03561722	103	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4508.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	105	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	9366.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	107	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	4243.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	108	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	5001.34	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ISS INC ICS		03561722	109	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	2980.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	112	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3860.4	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	113	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3682.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	114	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4102.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	115	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	5963.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	116	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	3849	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	118	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4526.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	121	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5303.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	123	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	10923.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	125	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	10461.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	126	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5385.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	127	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	6989.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	128	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5014.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	129	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	12905.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	130	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4548.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	132	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5814.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	133	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	7021.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	134	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3949.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	135	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5846.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	138	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4631.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	139	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4626.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	140	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	10274.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	141	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4129.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ISS INC ICS		03561722	143	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	8275.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	144	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	7318.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	146	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5589.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	148	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4582.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	149	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4010.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	151	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	11933.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	152	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	6095.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	153	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	3060.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	154	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	6128.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	158	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	4143.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	159	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	5665.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	160	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	6278.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	161	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	10140.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	162	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	7765.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	163	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	5981.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	165	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	5257.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	166	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5220.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	167	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5294.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	168	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	4933.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	169	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5288.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	170	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	4397.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	171	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5970.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	172	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	6919.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	173	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5030.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	174	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5389.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	175	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	4773.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	176	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5780.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	177	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5671.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	178	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	6403.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	180	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5655.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	182	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5358.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	183	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	8961.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	184	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	6483.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	185	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	7085.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	186	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	7798	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	187	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	4831.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	188	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	7925.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	189	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5686.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	190	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5650.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	191	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4975.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	193	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6555.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	194	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5871.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	195	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5732.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	196	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	7607.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	197	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4593.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	198	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4707.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	199	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6814.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	200	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5840.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	201	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	7015.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	202	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6814.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	203	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	8061.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	204	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5144.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	205	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6635.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	207	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4831.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	208	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5754.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	209	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4858.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	210	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6287.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	211	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	2586.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	212	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4435.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	214	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4169.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ISS INC ICS		03561722	215	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4540.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	216	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	7485.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	217	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	3943.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	220	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	7228.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	221	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5136.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	223	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4900.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	224	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	7009.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	225	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5231.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	226	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5339.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	228	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	6169.48	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	230	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5693.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	231	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	6389.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	232	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5693.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	233	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3453.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	234	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5624.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	235	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	7772.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	236	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5519.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	237	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5686.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	238	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4342.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	239	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	6960.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	240	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5721.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	247	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5481.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	248	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4299.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	249	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5340.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	250	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4439.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	251	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3874.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	252	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	7854.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	253	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5986.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	254	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	2612.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	255	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	2216.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	260	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5489.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	261	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4496.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	262	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	2560.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	264	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4529.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	265	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	7525.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	267	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4702.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	268	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3749.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	270	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3721.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	271	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5553.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	272	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4200.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	273	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4011.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	307	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	10174.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	308	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7366.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	309	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4196.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	310	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	11469.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	312	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7357.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	314	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7032.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	316	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5763.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	337	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	7919.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	338	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	10586.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	358	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5290.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	361	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5250.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	362	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5897.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	363	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6698.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	364	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5647.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	365	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4357.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	366	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	11646.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	367	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	7866.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	368	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5820.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	371	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6220.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ISS INC ICS		03561722	372	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	8462.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	034	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-13	3644.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	054	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	3881.03	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	104	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUL-13	2796	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	124	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-SEP-13	7009.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	136	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	3383.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	181	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	5315.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	227	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	4990.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	380	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	2706	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	388	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	5722.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	396	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	5284.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	426	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	7660.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	1435.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	008	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	2104.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	011	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	1514.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	012	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-13	1932.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	029	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUL-13	2932.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	045	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	3991.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	063	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-13	2646.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	073	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-13	2381.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	098	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-13	1851.81	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
ISS INC ICS		03561722	101	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-13	2680.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	142	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	1951.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	147	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	2477.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	150	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	1357.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	157	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-OCT-13	2051.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	164	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-OCT-13	2224.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	179	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	2758.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	218	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-DEC-13	2798.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	241	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	1556.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	242	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	2875.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	243	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	2729.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	244	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	1349.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	245	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	2720.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	246	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	2699.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	294	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAR-14	2686.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ISS INC ICS		03561722	320	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-14	1557.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
KELBERMAN CENTER ICS		03596816	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	14797.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
KELBERMAN CENTER ICS		03596816	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	14797.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
KELBERMAN CENTER ICS		03596816	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1489.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	2474.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	1155.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4395.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2769.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	1775.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2330.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	8201.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3361.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-FEB-14	1654	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA GENESEE VALLEY ICS		03561800	006	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	1422.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA LIFE AND LEARNING SERVICES CSSY		03562205	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAR-13	3651.73	01-MAR-13	$ 3,651.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA OF GV CSS 20	222702285	02760103	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$4,604.60	01-JAN-13	$4,604.60	01-JAN-13	$ 4,604.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LDA OF GV CSS 22	222702285	02760112	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,261.28	01-DEC-12	$2,261.28	01-DEC-12	$ 2,261.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS ASSO GV CSS 9	222702285	02711571	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,829.34	01-OCT-12	$4,829.34	01-OCT-12	$ 4,829.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 13	222702285	02731831	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$7,118.96	01-DEC-11	$7,118.96	01-DEC-11	$ 7,118.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 14	222702285	02731813	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$1,984.12	01-FEB-12	$1,984.12	01-FEB-12	$ 1,984.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 14	222702285	02731813	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2009	$935.29	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSS 16	222702285	02752270	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,169.94	01-SEP-12	$3,169.94	01-SEP-12	$ 3,169.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 19	222702285	02752303	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$3,530.57	01-DEC-12	$3,530.57	01-DEC-12	$ 3,530.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 23	222702285	02784825	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$3,824.57	01-MAY-10	$3,824.57	01-NOV-13	$ 4,056.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
LEARNING DIS OF GV CSS 39	222702285	02853029	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2010	$2,523.68	01-MAY-10	$2,523.68	01-MAY-10	$ 2,523.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 41	222702285	02859612	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$1,724.91	01-MAY-10	$1,724.91	01-MAY-10	$ 1,724.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 41	222702285	02859612	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$853.72	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSS 42	222702285	02857830	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$1,655.95	01-AUG-11	$1,655.95	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
LEARNING DIS OF GV CSS 47	222702285	02890357	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$7,439.55	01-MAY-12	$7,439.55	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
LEARNING DIS OF GV CSS 47	222702285	02890357	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$3,261.40	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSS 50	222702285	02899145	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2012	$3,119.50	01-JAN-12	$3,119.50	01-JAN-12	$ 3,119.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 51	222702285	02899163	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2011	$2,913.55	01-DEC-11	$2,913.55	01-DEC-11	$ 2,913.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 55	222702285	02934485	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2009	$3,698.30	01-MAY-09	$3,698.30	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
LEARNING DIS OF GV CSS 57	222702285	02965479	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$3,430.61	01-DEC-11	$3,430.61	01-DEC-11	$ 3,430.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS 58	222702285	02965093	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$2,771.57	01-SEP-11	$2,771.57	01-SEP-11	$ 2,771.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS Z61	222702285	02981693	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$5,025.94	01-MAR-12	$5,025.94	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
LEARNING DIS OF GV CSS Z62		02981033	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAY-10	3327.29	01-MAY-10	$ 3,327.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS Z63	222702285	02982281	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$2,832.68	01-JUL-10	$2,832.68	01-JUL-10	$ 2,832.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS Z63	222702285	02982281	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$1,400.90	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSS Z66	222702285	02981804	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2011	$1,749.07	01-SEP-11	$1,749.07	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
LEARNING DIS OF GV CSS Z91	222702285	03110941	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,511.24	01-OCT-12	$4,511.24	01-OCT-12	$ 4,511.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSS Z91	222702285	03110941	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-APR-2011	$3,095.24	02-APR-12	$0.00	02-APR-12	$ -	02-APR-12	$ -	02-APR-12	$ -	02-APR-12	$ -
LEARNING DIS OF GV CSS Z92	222702285	03110996	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$2,610.62	01-JAN-12	$2,610.62	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
LEARNING DIS OF GV CSSY01	222702285	03376001	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$3,868.30	01-OCT-11	$3,868.30	01-OCT-11	$ 3,868.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSY02	222702285	03376065	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2011	$1,927.43	02-MAR-13	$0.00	02-MAR-13	$ -	02-MAR-13	$ -	02-MAR-13	$ -	02-MAR-13	$ -
LEARNING DIS OF GV CSSY02	222702285	03376065	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$963.72	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSY03	222702285	03423549	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2011	$2,783.99	01-NOV-11	$2,783.99	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
LEARNING DIS OF GV CSSY03	222702285	03423549	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$1,392.00	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSY04	222702285	03423296	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$1,121.52	01-MAR-13	$1,121.52	01-MAR-13	$ 1,121.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSY05		03423750	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	1142.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSY05	222702285	03423750	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$1,142.72	01-FEB-12	$1,142.72	01-FEB-12	$ 1,142.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSY05	222702285	03423750	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$571.36	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSY06	222702285	03423810	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$2,725.41	01-MAR-12	$2,725.41	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
LEARNING DIS OF GV CSSZ64	222702285	02982272	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$1,961.40	01-JAN-11	$1,961.40	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
LEARNING DIS OF GV CSSZ64	222702285	02982272	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$980.70	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSZ67	222702285	02981780	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$2,504.15	01-JUL-11	$2,504.15	01-JUL-11	$ 2,504.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ69	222702285	03029352	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$3,379.06	01-DEC-11	$3,379.06	01-DEC-11	$ 3,379.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ76	222702285	03046504	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,819.49	01-MAR-13	$3,819.49	01-MAR-13	$ 3,819.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ78	222702285	03082079	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$4,628.10	01-AUG-11	$4,628.10	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
LEARNING DIS OF GV CSSZ79	222702285	03082088	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2009	$4,179.56	01-OCT-09	$4,179.56	01-OCT-09	$ 4,179.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ79	222702285	03082088	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$2,048.32	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSZ81	222702285	03082102	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2009	$3,692.12	01-OCT-09	$3,692.12	01-OCT-09	$ 3,692.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ81	222702285	03082102	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$1,808.47	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSZ94	222702285	03271065	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$4,444.64	01-DEC-12	$4,444.64	01-DEC-12	$ 4,444.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ95	222702285	03358303	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$2,566.66	01-MAY-11	$2,566.66	01-MAY-11	$ 2,566.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ97	222702285	03358523	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$1,364.68	01-AUG-11	$1,364.68	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -
LEARNING DIS OF GV CSSZ97	222702285	03358523	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$682.34	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSZ98	222702285	03358532	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,855.01	01-AUG-11	$2,855.01	01-AUG-11	$ 2,855.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ98	222702285	03358532	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$1,427.51	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DIS OF GV CSSZ99	222702285	03370445	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2011	$1,440.26	01-SEP-11	$1,440.26	01-SEP-11	$ 1,440.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DIS OF GV CSSZ99	222702285	03370445	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2012	$720.13	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DISAB ASSOC CSS 5	222702285	02679849	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$4,866.41	01-MAR-11	$4,866.41	01-MAR-11	$ 4,866.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DISABIL-GEN VAL CSS1	222702285	02567733	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$4,846.65	01-MAY-12	$4,846.65	01-MAY-12	$ 4,846.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNING DISABIL-GEN VAL CSS1	222702285	02567733	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$2,423.33	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
LEARNING DISABIL-GEN VAL CSS4	222702285	02623843	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2010	$4,657.79	01-OCT-10	$4,657.79	01-JUN-13	$ 5,704.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
LEARNINGS DIS OF GV CSSY07	222702285	03531202	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$2,616.58	01-OCT-12	$2,616.58	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
OCCUPATIONS INC PFW	141471097	03437616	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$8,472.92	01-MAR-13	$8,472.92	03-MAR-14	$ -	03-MAR-14	$ -	03-MAR-14	$ -	03-MAR-14	$ -
OCCUPATIONS INC PFW		03437616	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	7502.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5900.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2310	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3562.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4153.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	1021.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	11064.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
OCCUPATIONS INC PFW		03437616	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5136.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5486.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
OCCUPATIONS INC PFW		03437616	008	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	881	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$4,432.00	01-AUG-10	$4,432.00	01-AUG-10	$ 4,432.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$2,216.00	01-AUG-10	$2,216.00	01-AUG-10	$ 2,216.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUN-2010	$5,094.50	01-JUN-10	$5,094.50	01-JUN-10	$ 5,094.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	006	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUN-2010	$2,547.25	01-JUN-10	$2,547.25	01-JUN-10	$ 2,547.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	007	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2010	$4,031.50	01-JUL-10	$4,031.50	01-JUL-10	$ 4,031.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	008	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2010	$2,015.75	01-JUL-10	$2,015.75	01-JUL-10	$ 2,015.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	009	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$3,296.50	01-AUG-10	$3,296.50	01-AUG-10	$ 3,296.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	010	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$1,648.25	01-AUG-10	$1,648.25	01-AUG-10	$ 1,648.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	011	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2010	$6,443.00	01-MAR-10	$6,443.00	01-MAR-10	$ 6,443.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	012	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2010	$3,221.50	01-MAR-10	$3,221.50	01-MAR-10	$ 3,221.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	013	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$4,693.10	01-AUG-10	$4,693.10	01-AUG-10	$ 4,693.10	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	014	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2010	$2,346.55	01-AUG-10	$2,346.55	01-AUG-10	$ 2,346.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	015	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2010	$4,710.60	01-JUL-10	$4,710.60	01-JUL-10	$ 4,710.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	016	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2010	$2,355.30	01-JUL-10	$2,355.30	01-JUL-10	$ 2,355.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	017	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,027.80	01-FEB-11	$5,027.80	01-FEB-11	$ 5,027.80	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	018	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,513.90	01-FEB-11	$2,513.90	01-FEB-11	$ 2,513.90	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	019	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,296.38	01-FEB-11	$3,296.38	01-FEB-11	$ 3,296.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	020	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,648.19	01-FEB-11	$1,648.19	01-FEB-11	$ 1,648.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	021	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,580.33	01-FEB-11	$3,580.33	01-FEB-11	$ 3,580.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	022	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,790.17	01-FEB-11	$1,790.17	01-FEB-11	$ 1,790.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	023	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$4,121.18	01-FEB-11	$4,121.18	01-FEB-11	$ 4,121.18	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	024	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,060.59	01-FEB-11	$2,060.59	01-FEB-11	$ 2,060.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	025	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,233.17	01-FEB-11	$3,233.17	01-FEB-11	$ 3,233.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	026	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,616.59	01-FEB-11	$1,616.59	01-FEB-11	$ 1,616.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	027	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$7,148.92	01-FEB-11	$7,148.92	01-FEB-11	$ 7,148.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	028	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,574.46	01-FEB-11	$3,574.46	01-FEB-11	$ 3,574.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	029	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$4,833.08	01-FEB-11	$4,833.08	01-FEB-11	$ 4,833.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	030	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,416.54	01-FEB-11	$2,416.54	01-FEB-11	$ 2,416.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	031	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$4,629.00	01-FEB-11	$4,629.00	01-FEB-11	$ 4,629.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	032	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,314.50	01-FEB-11	$2,314.50	01-FEB-11	$ 2,314.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	033	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,709.17	01-FEB-11	$3,709.17	01-FEB-11	$ 3,709.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	034	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,854.59	01-FEB-11	$1,854.59	01-FEB-11	$ 1,854.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	035	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$7,148.92	01-FEB-11	$7,148.92	01-FEB-11	$ 7,148.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	036	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,574.46	01-FEB-11	$3,574.46	01-FEB-11	$ 3,574.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	037	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,094.45	01-FEB-11	$5,094.45	01-FEB-11	$ 5,094.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	038	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,547.23	01-FEB-11	$2,547.23	01-FEB-11	$ 2,547.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	039	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$6,541.33	01-FEB-11	$6,541.33	01-FEB-11	$ 6,541.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	040	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,270.67	01-FEB-11	$3,270.67	01-FEB-11	$ 3,270.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	041	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$6,311.75	01-FEB-11	$6,311.75	01-FEB-11	$ 6,311.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	042	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,155.88	01-FEB-11	$3,155.88	01-FEB-11	$ 3,155.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	043	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$6,892.42	01-FEB-11	$6,892.42	01-FEB-11	$ 6,892.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	044	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,446.21	01-FEB-11	$3,446.21	01-FEB-11	$ 3,446.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	045	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$6,838.17	01-FEB-11	$6,838.17	01-FEB-11	$ 6,838.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	046	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,419.09	01-FEB-11	$3,419.09	01-FEB-11	$ 3,419.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	047	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$4,491.50	01-FEB-11	$4,491.50	01-FEB-11	$ 4,491.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	048	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,245.75	01-FEB-11	$2,245.75	01-FEB-11	$ 2,245.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	049	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$4,484.50	01-FEB-11	$4,484.50	01-FEB-11	$ 4,484.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	050	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,242.25	01-FEB-11	$2,242.25	01-FEB-11	$ 2,242.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	051	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,539.33	01-FEB-11	$5,539.33	01-FEB-11	$ 5,539.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	052	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,769.67	01-FEB-11	$2,769.67	01-FEB-11	$ 2,769.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	053	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$4,523.40	01-FEB-11	$4,523.40	01-FEB-11	$ 4,523.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	054	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,261.70	01-FEB-11	$2,261.70	01-FEB-11	$ 2,261.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	055	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$7,148.92	01-FEB-11	$7,148.92	01-FEB-11	$ 7,148.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	056	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,574.46	01-FEB-11	$3,574.46	01-FEB-11	$ 3,574.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	057	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,753.67	01-FEB-11	$3,753.67	01-FEB-11	$ 3,753.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	058	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,876.84	01-FEB-11	$1,876.84	01-FEB-11	$ 1,876.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	059	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$6,533.83	01-FEB-11	$6,533.83	01-FEB-11	$ 6,533.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	060	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,266.92	01-FEB-11	$3,266.92	01-FEB-11	$ 3,266.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	061	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,745.90	01-FEB-11	$3,745.90	01-FEB-11	$ 3,745.90	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	062	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,872.95	01-FEB-11	$1,872.95	01-FEB-11	$ 1,872.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	063	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,015.92	01-FEB-11	$5,015.92	01-FEB-11	$ 5,015.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	064	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,507.96	01-FEB-11	$2,507.96	01-FEB-11	$ 2,507.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	065	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,451.08	01-FEB-11	$3,451.08	01-FEB-11	$ 3,451.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	066	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$1,725.54	01-FEB-11	$1,725.54	01-FEB-11	$ 1,725.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	067	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,094.43	01-FEB-11	$5,094.43	01-FEB-11	$ 5,094.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	068	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,547.22	01-FEB-11	$2,547.22	01-FEB-11	$ 2,547.22	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	069	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,901.00	01-FEB-11	$5,901.00	01-FEB-11	$ 5,901.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	070	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,950.50	01-FEB-11	$2,950.50	01-FEB-11	$ 2,950.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	071	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$6,367.58	01-FEB-11	$6,367.58	01-FEB-11	$ 6,367.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	072	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$3,183.79	01-FEB-11	$3,183.79	01-FEB-11	$ 3,183.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	073	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$5,088.00	01-FEB-11	$5,088.00	01-FEB-11	$ 5,088.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ONONDAGA COMM LIVING PREPORTAL	161275425	03072117	074	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,544.00	01-FEB-11	$2,544.00	01-FEB-11	$ 2,544.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ORLEANS CO CHAPTER NYSARC ICS		03562461	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	1657.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ORLEANS CO CHAPTER NYSARC ICS		03562461	005	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	2379.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 08	160975538	02852995	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2010	$1,700.15	01-AUG-10	$1,700.15	01-AUG-10	$ 1,700.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 09	160975538	02853001	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2010	$3,104.44	01-SEP-10	$3,104.44	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
PEOPLE INC CSS 11	160975538	02939619	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$2,507.70	01-JUN-11	$2,507.70	01-JUN-11	$ 2,507.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 13	160975538	02909382	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$8,239.41	01-DEC-10	$8,239.41	01-NOV-13	$ 7,910.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 14	160975538	02939595	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,867.75	01-MAY-11	$2,867.75	01-MAY-11	$ 2,867.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 2	160975538	02739339	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$5,894.57	01-MAY-11	$5,894.57	01-MAY-11	$ 5,894.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 3	160975538	02746041	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$4,975.94	01-JUL-11	$4,975.94	01-JUL-11	$ 4,975.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS 4	160975538	02679858	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$5,822.94	01-JAN-11	$5,822.94	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -	02-APR-13	$ -
PEOPLE INC CSS Z20	160975538	03102476	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$1,464.28	01-NOV-11	$1,464.28	01-NOV-11	$ 1,464.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSS Z23	160975538	03257063	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$5,106.64	01-SEP-12	$5,106.64	01-SEP-12	$ 5,106.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ16	160975538	02971135	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$2,324.06	01-MAY-11	$2,324.06	01-MAY-11	$ 2,324.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ21	160975538	03111002	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$1,987.33	01-SEP-12	$1,987.33	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
PEOPLE INC CSSZ22	160975538	03169679	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUN-2011	$2,848.95	01-JUN-11	$2,848.95	01-JUN-11	$ 2,848.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ24	160975538	03293125	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2012	$1,614.54	01-FEB-12	$1,614.54	01-FEB-12	$ 1,614.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ26	160975538	03396816	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2012	$1,754.49	01-NOV-12	$1,754.49	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ27	160975538	03459607	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$1,438.55	01-JUL-12	$1,438.55	01-JUL-12	$ 1,438.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ28	160975538	03507366	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,083.83	01-SEP-12	$2,083.83	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
PEOPLE INC CSSZ29	160975538	03507384	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,618.89	01-SEP-12	$3,618.89	01-SEP-12	$ 3,618.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ30	160975538	03507733	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,584.07	01-MAR-13	$3,584.07	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ30	160975538	03507733	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,951.11	01-SEP-12	$2,951.11	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ31	160975538	03507357	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$1,290.76	01-OCT-12	$1,920.46	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
PEOPLE INC CSSZ32	160975538	03507375	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,561.35	01-OCT-12	$2,561.35	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ33	160975538	03538121	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,140.76	01-JAN-13	$3,140.76	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ34	160975538	03538281	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,191.95	01-MAR-13	$4,191.95	01-MAR-13	$ 4,191.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ35	160975538	03539053	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$1,028.78	01-MAR-13	$1,028.78	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ36	160975538	03539071	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$2,965.02	01-MAR-13	$2,965.02	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
PEOPLE INC CSSZ37	160975538	03539062	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$859.50	01-MAR-13	$859.50	01-MAR-13	$ 859.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC CSSZ38		03542147	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAR-13	2245.23	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
PEOPLE INC CSSZZ19	160975538	03037074	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$3,471.56	01-MAR-13	$3,471.56	01-MAR-13	$ 3,471.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3130.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	015	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5060.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	021	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	1277.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	023	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	1845.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	026	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3004.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	032	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	1532.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	035	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	1104.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1395.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	048	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	1254.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	019	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-AUG-13	1919.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	033	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-DEC-13	1758.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC ICS		03424022	062	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	890.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	3829.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4466.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
PEOPLE INC PFW		03424022	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2005.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	1364.56	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
PEOPLE INC PFW		03424022	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	1982.7	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1225.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	4469.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3469.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	016	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	846.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	017	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	1145.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	027	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	2240.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	030	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3010.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	034	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2413.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	038	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2663.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	039	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3312.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	047	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	1759.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	049	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	1569.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	050	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3996.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	057	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2584.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	059	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2787.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	060	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2971.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	063	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	1569.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	064	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	2867.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	065	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3883.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	013	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-13	2517.73	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
PEOPLE INC PFW		03424022	024	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-OCT-13	906.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	025	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-SEP-13	1110.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	029	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-OCT-13	1480.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	043	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	1109.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	044	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	1450.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	045	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	1527.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	046	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	1436.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	054	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	918.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	055	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1551.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	056	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1628.3	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	018	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-AUG-13	3372.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	022	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	2488.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	036	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JAN-14	2590.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE INC PFW		03424022	066	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	1283.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBLD & LIVING IN DIG CSSZ06	161422825	03532634	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$3,347.71	01-AUG-12	$3,347.71	01-AUG-12	$ 3,347.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBLD & LIVING IN DIG CSSZ07	161422825	03532652	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$4,045.26	01-AUG-12	$4,045.26	01-AUG-12	$ 4,045.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBLD & LIVING IN DIG CSSZ08	161422825	03532643	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$7,729.93	01-SEP-12	$7,729.93	01-SEP-12	$ 7,729.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBLD & LIVING IN DIG CSSZ09	161422825	03532625	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$3,035.58	01-SEP-12	$3,035.58	01-SEP-12	$ 3,035.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBLD & LIVING IN DIG CSSZ10	161422825	03532661	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$3,358.37	01-SEP-12	$3,358.37	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
PEOPLE REBUILD/ LIVING DIG CSSZ01	161422825	03408046	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$2,798.55	01-MAY-12	$2,798.55	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03478755	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$5,602.98	01-JUN-12	$5,602.98	01-JUN-12	$ 5,602.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03478764	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$6,041.56	01-JUL-12	$6,041.56	01-JUL-12	$ 6,041.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG		03562287	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-JAN-13	6673.86	01-JAN-13	$ 6,673.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG		03718150	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-DEC-12	6131.2	01-DEC-12	$ 6,131.20	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03478773	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$3,155.29	01-JUL-12	$3,155.29	01-JUL-12	$ 3,155.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03478782	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$954.30	01-JUL-12	$954.30	01-SEP-13	$ 841.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG		03561777	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-MAR-13	2854.62	01-MAR-13	$ 2,854.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG		03561786	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-JAN-13	2957.35	01-JAN-13	$ 2,957.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PEOPLE REBUILDING AND LIVING IN DIG		03561795	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-13	2840.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5996.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	2786.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	4028.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	574.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3818.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	2031.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4663.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	2886.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
PRALID ICS PEOPLE REBUILDING AND LI		03562636	009	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	1863.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	012	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3130	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	013	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3130	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	014	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3130	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	015	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3130	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	016	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3588.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	017	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3588.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	018	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3588.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
PRALID ICS PEOPLE REBUILDING AND LI		03562636	019	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	3588.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL CSS Y45	222518284	02924298	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$5,560.09	01-DEC-11	$5,560.09	01-DEC-11	$ 5,560.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL CSS Z69	222518284	03293134	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$6,463.85	01-APR-12	$6,463.85	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
RCIL ICS		03562214	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	2569.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	2569.82	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	8393.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3344.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2127.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	5680.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	2986.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	2294.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	2020.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6395.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2158.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	016	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2883.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	017	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	3629.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	018	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6028.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	019	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2354.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	021	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2906.4	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	022	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	8332.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	023	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3405.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	024	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2193.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	025	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	1610.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	026	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	6134.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	027	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	12372.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	028	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2566.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	029	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6025.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	030	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUL-13	1857.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	031	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	3617.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	034	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5502.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	035	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3028.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	036	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3336.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	037	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	7122.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	038	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3256.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	039	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	7105.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	040	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	1645	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	041	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	2154.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	042	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	5147.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	044	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	2761.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	045	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7065.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	046	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3599.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	047	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	3574.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	048	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	3298.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	049	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	3995.01	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
RCIL ICS		03562214	050	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3566.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	051	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	9847.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	052	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	1920.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	053	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3282.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	054	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	2654.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	055	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	14429.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	056	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5191.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	057	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	2134.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RCIL ICS		03562214	058	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6605.03	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	060	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3524.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	061	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	2850.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	062	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	1898.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	063	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	1898.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	064	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5549.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	065	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	5045.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	067	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	6732.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	068	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	4855.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	070	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3053.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	071	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	3993.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	072	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2499.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	073	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	2256.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	074	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2505.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	075	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2728.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	076	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	3100.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	077	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5382.03	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	078	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2908.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	079	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2922.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	080	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5636.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	081	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3716.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	082	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	8067.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	084	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	4134.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	085	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	2140.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	086	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	8272.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	087	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	2653.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	088	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2755.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	089	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2278.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	090	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	8596.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	091	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5458.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	092	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5708.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	094	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2927.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	095	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2999	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	096	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2304.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	097	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	1992.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	098	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2078.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	099	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3787.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	101	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3160.8	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	102	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3169.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	103	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2890.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	104	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4868.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	105	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2330.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	106	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2214.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	107	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5589.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	108	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3183.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	109	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	7044.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	110	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3009.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	111	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3538.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	112	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3034.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	113	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3344.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	114	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2893.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	115	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3286.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	117	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3013.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	118	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	6345	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	119	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3640.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	120	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2955.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	122	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3506.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	123	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2760.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	124	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3471.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	126	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2812.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RCIL ICS		03562214	127	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5456.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	128	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	2683.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	129	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3819.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	130	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3114.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	131	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	4411	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	132	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3843.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	133	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3527.97	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	134	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1773.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	135	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4035.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	138	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2881.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	139	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4420	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	144	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	14909.48	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	145	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6670.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	147	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2278.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	148	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6737.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	149	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4068.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	150	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	4236.7	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	155	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	1924.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	156	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4232.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	157	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3041.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	158	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	2470.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	161	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	2580.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	167	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	2734.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	172	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6256.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	178	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	7404.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	032	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-AUG-13	4807.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	069	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-FEB-14	6462.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	083	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	7330.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	093	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	3528.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	116	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1562.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	125	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	3491.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	136	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1114.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	137	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1383.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	141	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	1196.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	142	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	1422.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	159	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	5304.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	168	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	774.51	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	028	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUL-13	2231.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	033	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-AUG-13	2291.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	043	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-SEP-13	3006.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	066	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-DEC-13	2451.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	100	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAR-14	1328.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	121	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-14	1363.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	143	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2394.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RCIL ICS		03562214	146	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	2360.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	7473.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	6231.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	10800.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	12716.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	6443.51	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7575.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	7998.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	5790.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4160.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	009	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	2550.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	013	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	3578.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	014	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	2846.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER ARC ICS		03562365	015	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	4571.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ01	141485873	03126267	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$8,717.59	01-JUL-10	$8,717.59	01-JUL-10	$ 8,717.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ02	141485873	03160423	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2009	$2,449.66	01-NOV-09	$2,449.66	01-NOV-09	$ 2,449.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RENSSELAER CO NYSARC CSSZ02	141485873	03160423	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2011	$1,224.83	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RENSSELAER CO NYSARC CSSZ03	141485873	03160432	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$5,756.77	01-JAN-10	$5,756.77	01-JAN-10	$ 5,756.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ04	141485873	03172401	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$2,641.78	02-JUN-12	$0.00	02-JUN-12	$ -	02-JUN-12	$ -	02-JUN-12	$ -	02-JUN-12	$ -
RENSSELAER CO NYSARC CSSZ05	141485873	03257045	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2010	$2,211.71	01-AUG-10	$2,211.71	01-AUG-10	$ 2,211.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ05	141485873	03257045	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2011	$1,105.86	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RENSSELAER CO NYSARC CSSZ06	141485873	03234517	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2010	$4,526.85	01-AUG-10	$4,526.85	01-AUG-10	$ 4,526.85	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ08	141485873	03528374	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,450.50	01-NOV-12	$2,450.50	01-NOV-12	$ 2,450.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ09	141485873	03528383	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$15,110.99	01-DEC-12	$15,110.99	01-DEC-12	$ 15,110.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ10	141485873	03528498	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,926.26	01-JAN-13	$3,926.26	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
RENSSELAER CO NYSARC CSSZ11	141485873	03538603	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2013	$2,580.52	01-FEB-13	$2,580.52	01-FEB-13	$ 2,580.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ12	141485873	03538621	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$2,598.65	01-FEB-13	$2,598.65	01-FEB-13	$ 2,598.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER CO NYSARC CSSZ13		03538612	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-13	6983.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER COUNTY NYSARC CSSZ07	141485873	03398336	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$13,055.26	01-OCT-11	$13,055.26	01-OCT-11	$ 13,055.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RENSSELAER COUNTY NYSARC PFW	141485873	03431945	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$8,615.56	01-MAR-13	$8,615.56	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -
RES CTR F/INDEP LIVING CSS 12	222518284	02577526	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$13,123.39	01-MAY-10	$13,123.39	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	1909.51	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	005	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	2385.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	006	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	2168.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	007	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	1901.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	009	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	3068.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	011	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1098.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	012	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	2521.51	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-FEB-14	2509.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	008	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-NOV-13	2318.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	010	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-DEC-13	2123.6	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER CHAUTAUQUA ARC ICS		03697674	013	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	2010.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F INDEP LIVING CSSX	222518284	03495154	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$4,544.96	01-SEP-12	$4,544.96	01-SEP-12	$ 4,544.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F INDEP LIVING CSSX	222518284	03495145	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,078.56	01-SEP-12	$2,078.56	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
RESOURCE CENTER F/INDEP LIV CSSX54	222518284	03341499	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$4,358.93	01-SEP-12	$4,358.93	01-SEP-12	$ 4,358.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03521419	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$10,251.84	01-DEC-12	$10,251.84	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03522194	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$3,666.96	01-JAN-13	$3,666.96	01-JAN-13	$ 3,666.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03530669	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$14,752.90	01-FEB-13	$14,752.90	01-FEB-13	$ 14,752.90	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03531000	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,280.83	01-MAR-13	$4,280.83	01-MAR-13	$ 4,280.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03540925	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,586.18	01-MAR-13	$3,586.18	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW		03538718	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	4337.28	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW		03538727	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	2075.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW		03538736	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	2064.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW		03538745	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	2108.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW		03538754	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	4525.62	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03521780	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2013	$1,429.68	01-FEB-13	$1,429.68	01-FEB-13	$ 1,429.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03522209	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$2,129.53	01-JAN-13	$2,129.53	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03522305	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$3,304.72	01-JAN-13	$3,304.72	01-JAN-13	$ 3,304.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03530632	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2013	$2,107.65	01-JAN-13	$2,107.65	01-JAN-13	$ 2,107.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03538507	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,080.62	01-MAR-13	$2,080.62	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSW	222518284	03538589	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$1,702.18	01-MAR-13	$1,702.18	01-MAR-13	$ 1,702.18	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03284080	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$3,983.11	01-APR-12	$3,983.11	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03292362	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$3,159.95	01-JUN-12	$3,159.95	01-JUN-12	$ 3,159.95	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03332749	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,933.16	01-SEP-12	$3,933.16	01-SEP-12	$ 3,933.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03339897	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$4,984.29	01-JUL-11	$4,984.29	01-JUL-11	$ 4,984.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377039	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$3,784.58	01-DEC-12	$3,784.58	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377108	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2011	$3,990.50	01-SEP-11	$3,990.50	01-SEP-11	$ 3,990.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377213	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$4,576.40	01-OCT-11	$4,576.40	01-OCT-11	$ 4,576.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377231	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$2,539.99	01-OCT-11	$2,539.99	01-OCT-11	$ 2,539.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377240	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$4,379.09	01-NOV-11	$4,379.09	01-NOV-11	$ 4,379.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03415785	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$4,128.42	01-MAR-12	$4,128.42	01-MAR-12	$ 4,128.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03419147	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$711.88	01-MAR-12	$711.88	01-MAR-12	$ 711.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03419225	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$3,282.07	01-APR-12	$3,282.07	01-APR-12	$ 3,282.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03425752	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$6,087.89	01-APR-12	$6,087.89	01-APR-12	$ 6,087.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03446779	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$3,797.70	01-JUN-12	$3,797.70	01-JUN-12	$ 3,797.70	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03449341	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$4,759.04	01-MAY-12	$4,759.04	01-MAY-12	$ 4,759.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03458335	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$3,534.70	01-JUL-12	$3,534.70	01-JUL-12	$ 3,534.70	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03458702	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$3,465.19	01-JUL-12	$3,465.19	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03462342	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$4,914.84	01-JUL-12	$4,914.84	01-JUL-12	$ 4,914.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03475692	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$4,731.69	01-SEP-12	$4,731.69	01-SEP-12	$ 4,731.69	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03485370	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$5,129.30	01-OCT-12	$5,129.30	01-OCT-12	$ 5,129.30	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487529	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,962.40	01-OCT-12	$4,962.40	01-OCT-12	$ 4,962.40	02-SEP-14	$ -	02-SEP-14	$ -	02-SEP-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487538	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$5,561.19	01-OCT-12	$5,561.19	01-OCT-12	$ 5,561.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487547	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$5,975.21	01-NOV-12	$5,975.21	01-NOV-12	$ 5,975.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487565	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$3,435.21	01-OCT-12	$3,435.21	01-OCT-12	$ 3,435.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487574	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$3,918.79	01-OCT-12	$3,918.79	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03506172	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,948.27	01-OCT-12	$4,948.27	01-OCT-12	$ 4,948.27	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03506190	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$3,644.71	01-DEC-12	$3,644.71	01-DEC-12	$ 3,644.71	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03506205	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$1,239.52	01-NOV-12	$1,239.52	01-NOV-12	$ 1,239.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03506250	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$4,077.00	01-DEC-12	$4,077.00	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03506269	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$6,589.16	01-OCT-12	$6,589.16	01-OCT-12	$ 6,589.16	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03284080	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$1,991.56	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03332749	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$1,966.94	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03339897	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$2,492.15	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377231	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$1,270.00	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03419147	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$355.94	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03419225	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$1,641.04	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487529	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$2,481.20	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03283149	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2011	$2,866.81	01-JAN-11	$2,866.81	01-JAN-11	$ 2,866.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377346	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2011	$630.08	01-OCT-11	$630.08	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03487556	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,392.45	01-OCT-12	$2,392.45	01-OCT-12	$ 2,392.45	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03283149	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2012	$1,433.41	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377346	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUL-2012	$315.04	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03298579	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2011	$2,295.20	01-FEB-11	$2,295.20	01-FEB-11	$ 2,295.20	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377011	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2011	$2,230.27	01-SEP-11	$2,230.27	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377020	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2011	$2,161.78	01-SEP-11	$2,161.78	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377135	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,210.68	01-OCT-12	$2,210.68	01-OCT-12	$ 2,210.68	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03412815	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2012	$2,363.78	01-FEB-12	$2,363.78	01-FEB-12	$ 2,363.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03415749	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$2,184.00	01-MAR-12	$2,184.00	01-MAR-12	$ 2,184.00	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03425707	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$2,040.80	01-APR-12	$2,040.80	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03425716	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$1,912.45	01-APR-12	$1,912.45	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03425761	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$1,981.22	01-APR-12	$1,981.22	01-APR-12	$ 1,981.22	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03439214	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,156.33	01-MAY-12	$2,156.33	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03475174	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,108.31	01-AUG-12	$2,108.31	01-AUG-12	$ 2,108.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03478719	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,216.57	01-AUG-12	$2,216.57	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03506181	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$1,890.20	01-OCT-12	$1,890.20	01-OCT-12	$ 1,890.20	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377020	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2012	$1,080.89	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03377135	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$1,105.34	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CENTER F/INDEP LIVING CSSX	222518284	03425761	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$990.61	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F INDEP CSS 50	222518284	02728081	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$2,860.70	01-JUL-10	$2,860.70	01-JUL-10	$ 2,860.70	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/IND LVG 45	222518284	02718610	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2011	$2,924.98	01-JAN-11	$2,924.98	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR F/IND LVG CSS 24	222518284	02713073	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$2,878.78	01-MAY-10	$2,878.78	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
RESOURCE CTR F/IND LVG CSS 25	222518284	02713091	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2010	$3,308.57	01-MAY-10	$3,308.57	01-MAY-10	$ 3,308.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/IND LVG CSS23	222518284	02663707	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$9,527.66	01-NOV-10	$9,527.66	01-NOV-10	$ 9,527.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 27	222518284	02679830	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$2,697.66	01-DEC-12	$2,697.66	01-DEC-12	$ 2,697.66	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 27	222518284	02679830	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2010	$1,128.01	02-NOV-12	$0.00	02-NOV-12	$ -	02-NOV-12	$ -	02-NOV-12	$ -	02-NOV-12	$ -
RESOURCE CTR F/INDEP CSS 27	222518284	02679830	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUN-2009	$544.73	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS 28	222518284	02680826	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$1,269.37	01-JAN-11	$1,269.37	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CTR F/INDEP CSS 30	222518284	02713124	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$6,307.06	01-JAN-13	$6,307.06	01-JAN-13	$ 6,307.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 32	222518284	02719184	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2006	$1,980.36	02-APR-08	$0.00	02-APR-08	$ -	02-APR-08	$ -	02-APR-08	$ -	02-APR-08	$ -
RESOURCE CTR F/INDEP CSS 32	222518284	02719184	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,157.47	01-AUG-12	$2,157.47	01-AUG-12	$ 2,157.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 34	222518284	02718445	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$4,652.75	01-MAY-10	$4,652.75	01-MAY-10	$ 4,652.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 43	222518284	02718629	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$1,671.57	01-JAN-12	$1,671.57	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
RESOURCE CTR F/INDEP CSS 43	222518284	02718629	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$969.07	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS 44	222518284	02718601	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,604.79	01-AUG-11	$2,604.79	01-AUG-11	$ 2,604.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 44	222518284	02718601	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JUN-2010	$1,290.25	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RESOURCE CTR F/INDEP CSS 48	222518284	02728141	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$2,440.51	01-MAY-10	$2,440.51	01-MAY-10	$ 2,440.51	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP CSS 52	222518284	02740018	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$4,702.70	01-JAN-12	$4,702.70	01-JAN-12	$ 4,702.70	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP CSS 56	222518284	02739802	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$4,851.45	01-FEB-12	$4,851.45	01-JUN-13	$ 5,375.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 57	222518284	02739408	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2010	$2,376.25	01-SEP-10	$2,376.25	01-SEP-10	$ 2,376.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 58	222518284	02739393	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$4,616.54	01-NOV-12	$4,616.54	01-NOV-12	$ 4,616.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 62	222518284	02739971	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$6,167.01	01-NOV-10	$6,167.01	01-NOV-10	$ 6,167.01	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 65	222518284	02745971	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$6,997.78	01-JAN-11	$6,997.78	01-JAN-11	$ 6,997.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 66	222518284	02745953	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,659.44	01-MAR-13	$3,659.44	01-MAR-13	$ 3,659.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 68	222518284	02750585	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$2,468.85	01-JUN-12	$2,468.85	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
RESOURCE CTR F/INDEP CSS 74	222518284	02750618	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$4,854.75	01-OCT-11	$4,854.75	01-OCT-11	$ 4,854.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 76	222518284	02756825	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$6,146.68	01-AUG-11	$6,146.68	01-AUG-11	$ 6,146.68	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 78	222518284	02811714	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$4,962.50	01-NOV-10	$4,962.50	01-NOV-10	$ 4,962.50	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 80	222518284	02811732	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$2,160.13	01-NOV-10	$2,160.13	01-NOV-10	$ 2,160.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 80	222518284	02811732	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$1,067.08	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS 83	222518284	02811810	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$2,444.81	01-MAY-10	$2,444.81	01-JUN-13	$ 3,226.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 83	222518284	02811810	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$1,209.65	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS 84	222518284	02837561	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$1,242.24	01-MAR-11	$1,242.24	01-MAR-11	$ 1,242.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 86	222518284	02837589	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$5,567.91	01-JUN-12	$5,567.91	01-JUN-12	$ 5,567.91	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS 86	222518284	02837589	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$2,749.64	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS 94	222518284	02837516	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2010	$3,103.22	01-SEP-10	$3,103.22	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
RESOURCE CTR F/INDEP CSS 96	222518284	02839912	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$4,985.59	01-DEC-11	$4,985.59	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CTR F/INDEP CSS 96	222518284	02839912	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$2,492.80	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS Y00	222518284	02843956	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2013	$2,450.27	01-MAR-13	$2,450.27	01-MAR-13	$ 2,450.27	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y00	222518284	02843956	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2010	$1,206.65	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS Y01	222518284	02852459	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2011	$5,416.99	01-JUL-11	$5,416.99	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
RESOURCE CTR F/INDEP CSS Y02		02852477	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-JUL-12	2622.05	01-JUL-12	$ 2,622.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y03	222518284	02852440	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2007	$4,798.70	01-AUG-07	$4,798.70	01-AUG-07	$ 4,798.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y05	222518284	02859621	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$2,410.74	01-JAN-11	$2,410.74	01-MAY-13	$ 2,383.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y06	222518284	02861663	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$1,852.73	01-FEB-13	$1,852.73	01-SEP-13	$ 2,055.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y06	222518284	02861663	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$1,090.56	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS Y09	222518284	02866026	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$4,293.99	01-APR-12	$4,293.99	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR F/INDEP CSS Y12	222518284	02866360	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$4,101.60	01-JUN-12	$4,101.60	01-JUN-12	$ 4,101.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y14	222518284	02873774	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$2,300.98	01-OCT-12	$2,300.98	01-OCT-12	$ 2,300.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y14	222518284	02873774	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$1,150.49	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS Y16	222518284	02870762	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$4,584.99	01-MAR-13	$4,584.99	01-MAR-13	$ 4,584.99	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP CSS Y18	222518284	02870780	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$2,505.58	01-DEC-11	$2,505.58	01-DEC-11	$ 2,505.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y18	222518284	02870780	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2007	$1,225.52	02-OCT-08	$0.00	02-OCT-08	$ -	02-OCT-08	$ -	02-OCT-08	$ -	02-OCT-08	$ -
RESOURCE CTR F/INDEP CSS Y22	222518284	02874019	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$7,179.33	01-NOV-12	$7,179.33	01-NOV-12	$ 7,179.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y24	222518284	02888580	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-APR-2011	$1,331.36	01-APR-11	$1,331.36	01-APR-11	$ 1,331.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y26	222518284	02889325	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$3,506.95	01-MAY-10	$3,506.95	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
RESOURCE CTR F/INDEP CSS Y26	222518284	02889325	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$1,753.48	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS Y27	222518284	02891023	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2011	$1,493.96	01-AUG-11	$1,493.96	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CTR F/INDEP CSS Y32	222518284	02909319	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,033.31	01-OCT-12	$4,033.31	01-OCT-12	$ 4,033.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y35	222518284	02909346	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2011	$4,203.40	01-APR-11	$4,203.40	01-APR-11	$ 4,203.40	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y36	222518284	02909355	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$1,868.65	01-JAN-12	$1,868.65	01-JAN-12	$ 1,868.65	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y36	222518284	02909355	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2012	$1,795.80	01-DEC-12	$1,795.80	01-DEC-12	$ 1,795.80	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y36	222518284	02909355	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)			01-MAR-13	897.9	01-MAR-13	$ 897.90	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y38	222518284	02909328	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$1,840.09	01-MAY-10	$1,840.09	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
RESOURCE CTR F/INDEP CSS Y39	222518284	02913582	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2010	$928.00	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSS Y41	222518284	02913555	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$2,949.42	01-OCT-12	$2,949.42	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
RESOURCE CTR F/INDEP CSS Y42	222518284	02913564	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2010	$3,009.18	01-MAY-10	$3,009.18	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CTR F/INDEP CSS Y43	222518284	02913546	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2010	$2,234.84	01-JUN-10	$2,234.84	01-MAY-13	$ 2,189.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP CSS Y43	222518284	02913546	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$1,106.05	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP CSSY21	222518284	02874028	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$3,020.78	01-JAN-13	$3,020.78	01-JAN-13	$ 3,020.78	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIV CSSX55	222518284	03341682	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$7,650.59	01-OCT-12	$7,650.59	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CTR F/INDEP LIVING CSS X00	222518284	02992294	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,145.32	01-AUG-12	$2,145.32	01-AUG-12	$ 2,145.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS X01	222518284	02992309	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$2,803.21	01-DEC-10	$2,803.21	01-SEP-13	$ 3,907.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS X03	222518284	02992285	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$1,780.98	01-MAY-11	$1,780.98	01-MAY-11	$ 1,780.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS X03	222518284	02992285	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$890.49	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS X08	222518284	03026859	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2010	$2,745.19	01-OCT-10	$2,745.19	01-OCT-10	$ 2,745.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RESOURCE CTR F/INDEP LIVING CSS X08	222518284	03026859	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2010	$1,355.71	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS X21		03081023	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAY-10	3571.7	01-MAY-10	$ 3,571.70	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS X23	222518284	03081050	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$754.12	01-JUL-11	$754.12	01-JUL-11	$ 754.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS X23	222518284	03081050	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-APR-2010	$353.63	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS Y49	222518284	02938907	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$2,060.54	01-AUG-11	$2,060.54	01-AUG-11	$ 2,060.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y49	222518284	02938907	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2008	$1,123.85	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS Y53	222518284	02936469	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$2,647.75	01-JAN-13	$2,647.75	01-JAN-13	$ 2,647.75	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y53	222518284	02936469	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$1,476.85	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS Y57	222518284	02941091	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2011	$1,090.99	01-JUN-11	$1,090.99	01-JUN-11	$ 1,090.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y57	222518284	02941091	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2010	$544.38	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS Y59	222518284	02951531	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$2,965.06	01-MAR-12	$2,965.06	01-MAR-12	$ 2,965.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y66	222518284	02965391	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$6,332.12	01-OCT-11	$6,332.12	01-OCT-11	$ 6,332.12	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y67	222518284	02965406	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$3,195.76	01-DEC-10	$3,195.76	01-DEC-10	$ 3,195.76	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y67	222518284	02965406	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$1,597.88	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS Y69	222518284	02965424	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2011	$5,153.27	01-NOV-11	$5,153.27	01-NOV-11	$ 5,153.27	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y70	222518284	02965433	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2011	$5,153.27	01-OCT-11	$5,153.27	01-OCT-11	$ 5,153.27	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y71	222518284	02967944	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$3,889.44	01-NOV-12	$3,889.44	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y74	222518284	02967917	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2011	$5,110.82	01-NOV-11	$5,110.82	01-MAY-13	$ 4,523.23	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y80	222518284	02967980	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$3,331.29	01-NOV-12	$3,331.29	01-NOV-12	$ 3,331.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y92	222518284	02979160	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$5,019.95	01-DEC-11	$5,019.95	01-DEC-11	$ 5,019.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y93	222518284	02979179	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2010	$1,446.20	01-MAY-10	$1,446.20	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR F/INDEP LIVING CSS Y93	222518284	02979179	004	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2011	$714.94	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSS Y97	222518284	02982649	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$3,676.42	01-JAN-11	$3,676.42	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX04	222518284	03016575	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2012	$2,472.52	01-SEP-12	$2,472.52	01-SEP-12	$ 2,472.52	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX04	222518284	03016575	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2011	$1,237.87	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX05	222518284	02992336	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$3,625.56	02-JUL-12	$0.00	02-JUL-12	$ -	02-JUL-12	$ -	02-JUL-12	$ -	02-JUL-12	$ -
RESOURCE CTR F/INDEP LIVING CSSX05	222518284	02992336	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2012	$3,143.96	01-AUG-12	$3,143.96	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX07	222518284	03016557	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2012	$1,956.03	01-SEP-12	$1,956.03	01-SEP-12	$ 1,956.03	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX07	222518284	03016557	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2011	$978.27	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX15	222518284	03033763	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2011	$1,553.92	01-MAR-11	$1,553.92	01-MAR-11	$ 1,553.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX15	222518284	03033763	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2011	$776.96	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX16	222518284	03033772	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$6,669.62	01-MAY-10	$6,669.62	01-MAY-10	$ 6,669.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX17	222518284	03037083	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAR-2011	$2,257.72	01-MAR-11	$2,257.72	01-MAR-11	$ 2,257.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX18	222518284	03046215	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$4,665.86	01-JUL-10	$4,665.86	01-JUL-10	$ 4,665.86	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX25	222518284	03082015	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$2,019.14	01-OCT-11	$2,019.14	01-OCT-11	$ 2,019.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX26	222518284	03092431	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$3,233.07	01-JUL-12	$3,233.07	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX29	222518284	03092468	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$3,218.12	01-JUN-12	$3,218.12	01-JUN-12	$ 3,218.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX33	222518284	03092495	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$2,627.57	01-JUL-12	$2,627.57	01-JUL-12	$ 2,627.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX33	222518284	03092495	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$1,313.79	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX34	222518284	03095076	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$2,570.42	01-JUL-12	$2,570.42	01-JUL-12	$ 2,570.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX39	222518284	03121611	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2010	$2,575.95	01-MAY-10	$2,575.95	01-MAY-10	$ 2,575.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX40	222518284	03134085	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$1,743.36	01-AUG-12	$1,743.36	01-AUG-12	$ 1,743.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX40	222518284	03134085	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$746.76	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX41	222518284	03175202	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$4,561.52	01-MAY-10	$4,561.52	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX41	222518284	03175202	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$2,201.52	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX43	222518284	03234493	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2011	$3,553.50	01-OCT-11	$3,553.50	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
RESOURCE CTR F/INDEP LIVING CSSX48	222518284	03293152	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2012	$5,927.01	01-DEC-12	$5,927.01	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX50	222518284	03314569	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2011	$3,836.63	01-MAY-11	$3,836.63	01-MAY-11	$ 3,836.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSX52	222518284	03332818	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAY-2011	$3,162.88	01-MAY-11	$3,162.88	01-MAY-11	$ 3,162.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY65	222518284	02965144	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$5,523.83	01-JUN-11	$5,523.83	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
RESOURCE CTR F/INDEP LIVING CSSY72	222518284	02967926	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$3,030.81	01-OCT-12	$3,030.81	01-OCT-12	$ 3,030.81	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY73	222518284	02967935	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$3,245.94	01-MAY-10	$3,245.94	01-MAY-10	$ 3,245.94	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY73	222518284	02967935	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$1,606.55	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSY76	222518284	02968014	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2009	$2,641.19	01-JUN-09	$2,641.19	01-JUN-09	$ 2,641.19	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY79	222518284	02967971	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$5,427.60	01-NOV-12	$5,427.60	01-SEP-13	$ 5,591.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY87	222518284	02975148	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2010	$2,118.86	01-NOV-10	$2,118.86	01-JUN-13	$ 3,103.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY87	222518284	02975148	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$1,059.43	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR F/INDEP LIVING CSSY95	222518284	02982667	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$4,610.39	01-FEB-12	$4,610.39	01-FEB-12	$ 4,610.39	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR F/INDEP LIVING CSSY96	222518284	02982658	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$4,211.25	01-MAR-11	$4,211.25	01-MAR-11	$ 4,211.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP CSS 39	222518284	02710290	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$3,661.10	01-AUG-12	$3,661.10	01-AUG-12	$ 3,661.10	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
RESOURCE CTR INDEP CSS 39	222518284	02710290	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUN-2006	$2,140.16	02-JUL-06	$0.00	02-JUL-06	$ -	02-JUL-06	$ -	02-JUL-06	$ -	02-JUL-06	$ -
RESOURCE CTR INDEP CSS 40	222518284	02710281	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$2,485.57	01-DEC-11	$2,485.57	01-DEC-11	$ 2,485.57	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
RESOURCE CTR INDEP CSS 41	222518284	02710341	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$6,595.75	01-JUL-12	$6,595.75	01-JUL-12	$ 6,595.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV	222518284	02623903	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$5,065.43	01-JAN-12	$5,065.43	01-JAN-12	$ 5,065.43	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV	222518284	02623903	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2007	$2,451.44	01-FEB-07	$2,451.44	01-FEB-07	$ 2,451.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV CSS 10	222518284	02568183	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2011	$1,446.96	01-JUL-11	$1,446.96	01-JUL-11	$ 1,446.96	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV CSS 11	222518284	02568192	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$3,413.25	01-FEB-12	$3,413.25	01-FEB-12	$ 3,413.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV CSS 2	222518284	02568014	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2007	$7,773.31	01-FEB-07	$7,773.31	01-FEB-07	$ 7,773.31	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV CSS 20	222518284	02623898	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$5,940.85	01-DEC-11	$5,940.85	01-DEC-11	$ 5,940.85	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
RESOURCE CTR INDEP LIV CSS 22	222518284	02623958	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2010	$1,815.86	01-DEC-10	$1,815.86	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR INDEP LIV CSS 22	222518284	02623958	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-FEB-2007	$565.47	02-SEP-08	$0.00	02-SEP-08	$ -	02-SEP-08	$ -	02-SEP-08	$ -	02-SEP-08	$ -
RESOURCE CTR INDEP LIV CSS 4	222518284	02568032	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$3,860.34	01-JAN-11	$3,860.34	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
RESOURCE CTR INDEP LIV CSS 4	222518284	02568032	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2011	$1,910.69	03-MAR-13	$0.00	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -	03-MAR-13	$ -
RESOURCE CTR INDEP LIV CSS 8	222518284	02568096	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$6,622.11	01-MAY-10	$6,622.11	01-MAY-10	$ 6,622.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LIV CSS 9	222518284	02568165	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$8,339.05	01-MAR-11	$8,339.05	01-MAR-11	$ 8,339.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR INDEP LVG CSS 42	222518284	02718596	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$4,789.63	02-DEC-10	$0.00	02-DEC-10	$ -	02-DEC-10	$ -	02-DEC-10	$ -	02-DEC-10	$ -
RESOURCE CTR INDEP LVG CSS 42	222518284	02718596	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JAN-2011	$3,161.60	01-JAN-11	$3,161.60	01-JAN-11	$ 3,161.60	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR/INDEP LIV CSS 13	222518284	02601701	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2011	$9,435.24	01-FEB-11	$9,435.24	01-FEB-11	$ 9,435.24	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR/INDEP LIV CSS 14	222518284	02601710	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$2,763.96	01-JUN-11	$2,763.96	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
RESOURCE CTR/INDEP LIV CSS 15	222518284	02601729	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2010	$4,760.63	01-JUL-10	$4,760.63	01-JUL-10	$ 4,760.63	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RESOURCE CTR/INDEP LIV CSS 16	222518284	02601738	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$9,962.83	01-MAY-10	$9,962.83	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
RESOURCE CTR/INDEP LIV CSS 18	222518284	02601765	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-SEP-2011	$6,716.55	01-SEP-11	$6,716.55	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
RIVERSHORE ICS		03610506	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	2706.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
RIVERSHORE ICS		03610506	004	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-FEB-14	1942.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
ROCKLAND CO NYSARC ICS		03843056	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	9582.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SELECT HUMAN SERVICES ICS		03565491	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5947.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBOOK NY INC CSSY03		03561819	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-13	2504.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOH NY INC CSS 5	150539129	02623834	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$3,957.53	01-JUL-12	$3,957.53	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
SPRINGBROOK CSS 17	150539129	02784852	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$5,575.96	01-JUL-12	$5,575.96	01-JUN-13	$ 5,577.49	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK CSS 19	150539129	02786074	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$4,504.05	01-JAN-13	$4,504.05	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
SPRINGBROOK CSS 20	150539129	02786092	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$2,685.29	01-JAN-12	$2,685.29	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
SPRINGBROOK CSS 21	150539129	02797886	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$3,845.55	01-MAY-12	$3,845.55	01-MAY-12	$ 3,845.55	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK CSS 22	150539129	02814304	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$1,095.80	01-AUG-12	$1,095.80	01-AUG-12	$ 1,095.80	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK CSS 23	150539129	02814313	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$3,366.05	01-MAR-12	$3,366.05	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
SPRINGBROOK CSS 28	150539129	02837492	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2010	$4,862.32	02-OCT-10	$0.00	02-OCT-10	$ -	02-OCT-10	$ -	02-OCT-10	$ -	02-OCT-10	$ -
SPRINGBROOK CSS 28	150539129	02837492	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-OCT-2012	$3,718.42	01-OCT-12	$3,718.42	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
SPRINGBROOK CSS 30	150539129	02849085	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$2,483.43	02-JUL-12	$0.00	02-JUL-12	$ -	02-JUL-12	$ -	02-JUL-12	$ -	02-JUL-12	$ -
SPRINGBROOK CSS 30	150539129	02849085	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,010.42	01-AUG-12	$2,010.42	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK CSS 31	150539129	02849154	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$3,270.29	01-MAR-12	$3,270.29	01-APR-13	$ 3,271.11	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK CSS 32	150539129	02849145	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,109.87	01-MAR-13	$3,109.87	01-MAR-13	$ 3,109.87	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK CSS 35	150539129	02869941	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$3,627.12	01-FEB-12	$3,627.12	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
SPRINGBROOK CSS 36	150539129	02869950	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2010	$2,919.09	01-JAN-10	$2,919.09	01-JAN-10	$ 2,919.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK CSS 39	150539129	02873985	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$1,150.34	01-SEP-12	$1,150.34	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
SPRINGBROOK CSS 45	150539129	02898786	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$3,205.69	01-MAY-12	$3,205.69	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
SPRINGBROOK CSS 46	150539129	02898795	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2010	$1,895.93	01-JUN-10	$1,895.93	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
SPRINGBROOK CSS 47	150539129	02898731	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$2,222.90	01-JAN-13	$2,222.90	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK CSS 47	150539129	02898731	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2009	$1,500.51	01-MAY-09	$1,500.51	01-MAY-09	$ 1,500.51	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK CSS 48	150539129	02906614	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$2,010.57	01-JAN-13	$2,010.57	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
SPRINGBROOK CSS 49	150539129	02906605	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$2,666.32	01-APR-12	$2,666.32	01-MAY-13	$ 2,733.80	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK CSS 50	150539129	02906590	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$2,514.74	01-FEB-13	$2,514.74	01-FEB-13	$ 2,514.74	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK CSS 53	150539129	02918481	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$1,834.97	01-JAN-13	$1,834.97	01-JAN-13	$ 1,834.97	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK CSS 54	150539129	02918692	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$2,154.03	01-NOV-12	$2,154.03	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
SPRINGBROOK CSS 55	150539129	02918707	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$1,957.10	01-NOV-12	$1,957.10	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK CSS 56	150539129	02934536	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$3,504.07	01-OCT-12	$3,504.07	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
SPRINGBROOK CSS 57	150539129	02934545	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$4,531.59	01-FEB-13	$4,531.59	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -	02-SEP-13	$ -
SPRINGBROOK CSS 57	150539129	02934545	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2010	$2,064.14	02-DEC-11	$0.00	02-DEC-11	$ -	02-DEC-11	$ -	02-DEC-11	$ -	02-DEC-11	$ -
SPRINGBROOK CSS41	150539129	02890944	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$3,846.85	02-JUL-12	$0.00	02-JUL-12	$ -	02-JUL-12	$ -	02-JUL-12	$ -	02-JUL-12	$ -
SPRINGBROOK CSS41	150539129	02890944	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,578.49	01-AUG-12	$2,578.49	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
SPRINGBROOK ICS		03562521	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	1533.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	4081.37	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
SPRINGBROOK ICS		03562521	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	2465.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-AUG-13	5121.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4167.35	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	3253.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	012	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	4052.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	981.77	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	2989.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	015	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3455.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	017	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	1752.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	018	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3986.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	019	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	3406.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	020	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					02-DEC-13	4562.22	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	021	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	3495.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	022	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5518.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	024	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	1927.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	025	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-DEC-13	5142.95	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	026	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4495.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	027	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4751.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	029	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	2109.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	031	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	5275.63	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK ICS		03562521	033	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	1729.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	035	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5026.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	036	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3911.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	037	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5201.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	040	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	4100.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	043	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	5729.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	044	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	2037.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	047	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3800.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	048	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	1940.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	049	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	5938.06	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	050	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	14890.46	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	051	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3440.4	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	052	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	2778.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	053	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	3158.84	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	055	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	1842.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	057	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3439.13	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	058	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5193.47	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	059	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	3451.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	062	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	6542.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	067	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	4795.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	006	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-AUG-13	1956.58	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	011	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-OCT-13	2867.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	016	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	2740.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	023	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-DEC-13	2097.9	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	028	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	2129.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	030	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	2384.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	032	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JAN-14	2756.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	034	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-FEB-14	2947.09	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	038	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	2496.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	039	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	5102.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	041	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAR-14	1224.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	045	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	2137.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	046	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-MAY-14	2210	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	054	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	1897.99	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	063	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	2102.57	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	064	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-JUN-14	2462.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	042	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAR-14	2994.67	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	056	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-MAY-14	2236.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	060	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	1574.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK ICS		03562521	061	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUN-14	2559.52	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
SPRINGBROOK NY INC CSS 1	150539129	02567742	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$2,393.62	01-JUN-12	$2,393.62	01-MAY-13	$ 2,395.49	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSS 12	150539129	02680844	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$2,640.77	01-MAY-12	$2,640.77	02-NOV-13	$ -	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK NY INC CSS 13	150539129	02728036	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$4,893.15	01-FEB-12	$4,893.15	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -	02-MAR-14	$ -
SPRINGBROOK NY INC CSS 2	150539129	02567760	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$3,621.73	01-JUL-12	$3,621.73	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
SPRINGBROOK NY INC CSS 3	150539129	02610906	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$5,847.18	01-APR-12	$5,847.18	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -	02-APR-14	$ -
SPRINGBROOK NY INC CSS 58	150539129	02941106	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$5,089.88	01-MAR-13	$5,089.88	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
SPRINGBROOK NY INC CSS 59	150539129	02941624	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,908.97	01-MAR-13	$3,908.97	01-MAR-13	$ 3,908.97	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK NY INC CSS 6	150539129	02713151	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$5,089.17	01-JUL-12	$5,089.17	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
SPRINGBROOK NY INC CSS 60	150539129	02941573	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,471.77	01-OCT-12	$4,471.77	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
SPRINGBROOK NY INC CSS 61	150539129	02941564	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2012	$1,785.21	01-DEC-12	$1,785.21	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
SPRINGBROOK NY INC CSS 62	150539129	02950681	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2013	$5,451.75	01-FEB-13	$5,451.75	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK NY INC CSS 65	150539129	02957308	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$4,810.83	01-JAN-12	$4,810.83	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
SPRINGBROOK NY INC CSS 7	150539129	02719244	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$3,140.04	01-MAR-12	$3,140.04	01-MAY-13	$ 3,149.62	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK NY INC CSS 70	150539129	02965520	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$3,436.10	01-JUN-12	$3,436.10	01-JUN-13	$ 3,437.02	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSS 9	150539129	02728018	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-DEC-2011	$2,440.96	01-DEC-11	$2,440.96	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
SPRINGBROOK NY INC CSS Z52	150539129	02969822	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2011	$3,362.49	01-AUG-11	$3,362.49	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK NY INC CSS Z75	150539129	03016819	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-DEC-2012	$3,068.72	01-DEC-12	$3,068.72	01-DEC-12	$ 3,068.72	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSS Z76	150539129	03025005	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-FEB-2012	$2,781.89	01-FEB-12	$2,781.89	01-FEB-12	$ 2,781.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSS Z77	150539129	03025023	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$2,855.07	01-APR-12	$2,855.07	01-APR-12	$ 2,855.07	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSS Z78	150539129	03025014	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$5,729.48	01-JUL-12	$5,729.48	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK NY INC CSS Z79	150539129	03026184	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAY-2012	$1,731.38	01-MAY-12	$1,731.38	01-MAY-12	$ 1,731.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSS72	150539129	02967522	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2011	$3,837.88	02-JUL-11	$0.00	02-JUL-11	$ -	02-JUL-11	$ -	02-JUL-11	$ -	02-JUL-11	$ -
SPRINGBROOK NY INC CSS72	150539129	02967522	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-AUG-2011	$2,777.56	01-AUG-11	$2,777.56	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
SPRINGBROOK NY INC CSSY01		03561837	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAR-13	2401.93	01-MAR-13	$ 2,401.93	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK NY INC CSSY02		03561846	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAR-13	2505.86	01-MAR-13	$ 2,505.86	02-JUL-14	$ -	02-JUL-14	$ -	02-JUL-14	$ -
SPRINGBROOK NY INC CSSY04		03561828	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-APR-13	2504.11	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSSY05		03561864	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	2023.68	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK NY INC CSSY06		03561855	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-13	2023.68	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK NY INC CSSZ81	150539129	03095365	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$1,805.51	01-MAR-13	$1,805.51	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
SPRINGBROOK NY INC CSSZ82	150539129	03095094	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$3,893.50	01-NOV-12	$3,893.50	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
SPRINGBROOK NY INC CSSZ83	150539129	03095085	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2013	$3,666.09	01-MAR-13	$3,666.09	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
SPRINGBROOK NY INC CSSZ84	150539129	03095109	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-DEC-2012	$2,268.67	01-DEC-12	$2,268.67	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
SPRINGBROOK NY INC CSSZ86	150539129	03204506	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$4,774.60	01-NOV-12	$4,774.60	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -	02-NOV-13	$ -
SPRINGBROOK NY INC CSSZ87	150539129	03295934	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-NOV-2012	$2,469.35	01-NOV-12	$2,469.35	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -	02-FEB-14	$ -
SPRINGBROOK NY INC CSSZ88	150539129	03296086	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2012	$3,051.63	01-JUN-12	$3,051.63	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -	02-JUN-13	$ -
SPRINGBROOK NY INC CSSZ89	150539129	03407292	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$2,892.23	01-AUG-12	$2,892.23	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
SPRINGBROOK NY INC CSSZ91	150539129	03407283	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-NOV-2011	$2,026.46	01-NOV-11	$2,026.46	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
SPRINGBROOK NY INC CSSZ92	150539129	03449290	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-MAY-2012	$2,568.47	01-MAY-12	$2,568.47	01-MAY-12	$ 2,568.47	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK NY INC CSSZ94	150539129	03476771	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-AUG-2012	$2,470.95	01-AUG-12	$2,470.95	01-JUN-13	$ 2,592.89	02-AUG-14	$ -	02-AUG-14	$ -	02-AUG-14	$ -
SPRINGBROOK NY INC CSSZ95		03565175	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-NOV-12	2156.99	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -	02-JUL-13	$ -
SPRINGBROOK NY INC CSSZ96		03564918	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)			01-JAN-13	2880.31	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -	02-JAN-14	$ -
SPRINGBROOK NY INC CSSZ97	150539129	03540892	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2013	$1,530.99	01-JAN-13	$1,530.99	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
SPRINGBROOK NY INC CSSZ98	150539129	03541242	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2013	$1,255.33	01-FEB-13	$1,255.33	01-FEB-13	$ 1,255.33	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
SPRINGBROOK NY INC CSSZ99	150539129	03541251	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-FEB-2013	$1,966.93	01-FEB-13	$1,966.93	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -	02-MAY-14	$ -
STEUBEN CO NYSARC ICS		03562672	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	6731.2	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE ARC OF ORLEANS COUNTY		03562461	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2065.1	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE ARC OF ORLEANS COUNTY		03562461	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-NOV-13	2864.87	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE ARC OF STEUBEN		03562672	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-NOV-13	3446.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE ARC ONEIDA-LEWIS CHAP CSSZ01	150581298	03409652	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$4,463.38	01-SEP-12	$4,463.38	01-SEP-12	$ 4,463.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE ARC ONEIDA-LEWIS CHAP CSSZ01	150581298	03409652	003	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)	01-JAN-2012	$1,676.60	02-AUG-12	$0.00	02-AUG-12	$ -	02-AUG-12	$ -	02-AUG-12	$ -	02-AUG-12	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3765.92	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	12681.62	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	6419.04	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	006	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	12576.61	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	9418.38	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	3929.12	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-FEB-14	5062.89	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	10741.93	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAR-14	10561.74	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	013	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	10404.36	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
THE CENTER FOR FAMILY SUPPORT		03610400	018	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	3392.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	019	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-APR-14	11180.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	020	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-14	7003.56	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	021	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5396.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	022	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5143.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	023	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	10436.7	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	012	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	6619.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	014	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	3963.21	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	015	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	6891.83	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	016	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	7114.32	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
THE CENTER FOR FAMILY SUPPORT		03610400	017	4731	CONS SUPP & SVCS; VOL; RES ONLY; MTHLY	MONTH (1)					01-APR-14	7002.05	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSS Z14		03494635	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-13	3583.44	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSS Z14	205510689	03494635	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-OCT-2012	$1,795.50	01-OCT-12	$1,795.50	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -	02-MAY-13	$ -
TRINITY ASSISTANCE CORP CSSZ01	205510689	03227070	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2013	$3,234.70	01-JAN-13	$3,234.70	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -	02-DEC-13	$ -
TRINITY ASSISTANCE CORP CSSZ02	205510689	03327906	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$4,205.17	01-APR-12	$4,205.17	01-APR-12	$ 4,205.17	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ03	205510689	03327915	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUN-2011	$4,288.78	01-JUN-11	$4,288.78	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -	02-AUG-13	$ -
TRINITY ASSISTANCE CORP CSSZ04	205510689	03370436	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-SEP-2011	$2,141.98	01-SEP-11	$2,141.98	01-SEP-11	$ 2,141.98	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ05	205510689	03395219	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JAN-2012	$8,304.81	01-JAN-12	$8,304.81	01-APR-13	$ 6,959.42	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ06	205510689	03431830	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-MAR-2012	$2,526.59	01-MAR-12	$2,526.59	01-MAR-12	$ 2,526.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ07	205510689	03439952	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-APR-2012	$1,345.08	01-APR-12	$1,345.08	01-NOV-13	$ 1,623.26	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ08	205510689	03459152	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$2,007.64	01-JUL-12	$2,007.64	01-JUL-12	$ 2,007.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ09	205510689	03462764	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-JUL-2012	$2,332.41	01-JUL-12	$2,332.41	01-JUL-12	$ 2,332.41	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ10	205510689	03467663	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)	01-JUL-2012	$3,534.59	01-JUL-12	$3,534.59	01-JUL-12	$ 3,534.59	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ11	205510689	03478746	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-AUG-2012	$5,580.71	01-AUG-12	$5,580.71	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -	02-JUN-14	$ -
TRINITY ASSISTANCE CORP CSSZ12	205510689	03494617	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$3,605.15	01-SEP-12	$3,605.15	01-SEP-12	$ 3,605.15	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ13	205510689	03494626	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-SEP-2012	$6,433.25	01-SEP-12	$6,433.25	01-SEP-12	$ 6,433.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ15	205510689	03494662	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-OCT-2012	$4,334.79	01-OCT-12	$4,334.79	01-OCT-12	$ 4,334.79	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ16	205510689	03494653	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-NOV-2012	$1,679.34	01-NOV-12	$1,679.34	01-NOV-12	$ 1,679.34	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ17		03562425	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-NOV-12	3006.53	01-NOV-12	$ 3,006.53	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE CORP CSSZ18		03562416	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)			01-MAR-13	3898.54	01-MAR-13	$ 3,898.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	1922.88	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-MAY-13	2829.64	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	007	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	5808.54	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	008	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-SEP-13	4978.29	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	009	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	4989.5	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	010	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	3250.55	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	011	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JAN-14	4212.14	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	014	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-JUN-14	5388.08	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
TRINITY ASSISTANCE ICS		03562407	003	4732	CONS SUPP & SVCS; VOL; DAY ONLY; MTHLY	MONTH (1)					01-JUL-13	1358.73	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
UPSTATE HOME F/CHILD CSS 16	150539129	02756843	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)	01-MAR-2012	$2,877.00	01-MAR-12	$2,877.00	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
WILDWOOD PROGRAMS INC		03613756	003	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	2197.23	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
WILDWOOD PROGRAMS INC		03613756	004	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	2699.25	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
WILDWOOD PROGRAMS INC		03613756	005	4730	CONS SUPP & SVCS; VOL; RES & DAY; MTHLY	MONTH (1)					01-OCT-13	2571.75	02-OCT-14	$ -	02-OCT-14	$ -	02-OCT-14	$ -
WOMENS LEAGUE COMM RES PFW	112889774	03427061	003	4442	CONS SUPP & SVCS; VOL; MTHLY	MONTH (1)	01-MAR-2013	$6,749.33	01-MAR-13	$6,765.74	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -	03-FEB-14	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
A VERY SPECIAL PLACE SPT	133005006	02757793	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,669.72	01-FEB-13	$2,669.72	01-FEB-14	$ 2,669.72
ABBOTT HOUSE SPT	131991946	03426042	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,621.41	01-FEB-13	$3,621.41	01-FEB-14	$ 3,621.41
ABILITIES FIRST INC SPT	141467427	02248951	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,045.59	01-FEB-13	$4,045.59	01-FEB-14	$ 4,045.59
ABILITY BEYOND DISABILITY INC SPT	141758770	03306347	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,276.51	01-FEB-13	$5,276.51	01-FEB-14	$ 5,276.51
ACLD SPT	116042250	02245958	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,790.52	01-FEB-13	$3,790.52	01-FEB-14	$ 3,790.52
AID TO THE DEVELOPMENTALLY DISABLED	112573451	03257494	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,415.81	01-FEB-13	$3,415.81	01-FEB-14	$ 3,415.81
AIM SERVICES INC SPT	141609398	03561942	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)					01-MAY-14	3244.13
ALBANY CO CHAP NYSARC SPT	141392181	02365951	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,299.80	03-FEB-13	$0.00	03-FEB-13	$ -
ALLEGANY CO CHAP NYSARC SPT	161021588	02246651	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,948.03	01-FEB-13	$1,954.82	01-FEB-14	$ 1,953.08
ALTERNATIVE LIVING GROUP SPT	141713378	03418206	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,465.04	01-FEB-13	$4,465.04	01-JUN-14	$ 4,907.05
ASSN F/NEUR BRAIN INJ SPT	112348663	02663192	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,696.85	01-FEB-13	$3,696.85	01-FEB-14	$ 3,696.85
ASSN FOR CHILDREN W/DOWNS SYND SPT	237175975	03273058	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,769.59	01-FEB-13	$4,769.59	01-FEB-14	$ 4,769.59
BLOCK INSTITUTE SPT	112416320	02259552	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,983.71	01-FEB-13	$1,983.71	01-FEB-14	$ 2,426.64
BROOKLYN BUREAU OF COMM SRVC SPT	111630780	03125968	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,325.60	01-FEB-13	$6,325.60	01-FEB-14	$ 6,325.60
BROOME TIOGA CO CHAP NYSARC SPT	150619307	02587346	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,515.69	01-FEB-13	$1,533.17	01-FEB-14	$ 1,527.59
CAMP VENTURE INC SPT	132661988	02256480	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,111.54	01-FEB-13	$2,092.49	01-FEB-14	$ 2,057.58
CATH CHARITIES DIO ROCH SPT	160743944	02279394	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,828.51	01-FEB-13	$2,785.22	01-FEB-14	$ 2,748.86
CATHOLIC CHAR DIO RVC SPT	111843801	02245898	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,864.31	01-FEB-13	$2,864.31	01-FEB-14	$ 2,855.31
CATHOLIC CHAR NEIGHBORHOOD SVC SPT	112047151	03169468	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$745.92	01-FEB-13	$745.92	01-MAY-14	$ 778.17
CATHOLIC GUARDIAN SOCIETY SPT	135562186	02253996	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,454.52	01-FEB-13	$2,454.52	01-FEB-14	$ 2,454.52
CATTARAUGUS CO NYSARC SPT	160818293	02246000	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,252.58	01-FEB-13	$2,260.03	01-FEB-14	$ 2,261.72
CENTER FOR DEVELOP DISAB SPT	111874383	02256504	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,556.41	01-FEB-13	$2,556.41	01-FEB-14	$ 2,556.41
CEREBRAL PALSY OF WESTCHESTER SPT	131690769	03169784	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,087.31	01-FEB-13	$1,087.88	01-FEB-14	$ 1,079.50
CHAUTAUQUA CO NYSARC INC SPT	160968914	03505777	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,573.05	01-FEB-13	$2,204.60	01-FEB-14	$ 2,194.97
CHEMUNG CO CHAP ARC SPT	160795709	02246073	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,973.31	01-FEB-13	$2,202.17	01-FEB-14	$ 2,092.42
CHENANGO CO CHAP NYSAC SPT	160970103	02359768	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,405.76	01-FEB-13	$1,405.76	01-FEB-14	$ 1,386.85
CITIZEN ADVOCATES, INC SPT	141577715	02255190	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,840.43	01-FEB-13	$1,846.16	01-FEB-14	$ 1,843.29
CLADDAGH COMMISSION SPT	161096096	02246922	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,650.96	01-FEB-13	$3,650.96	01-FEB-14	$ 3,663.90
COLUMBIA COUNTY CHAP ARC SPT	141489603	02247198	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,612.59	01-FEB-13	$2,612.59	01-FEB-14	$ 2,612.59
COMM ACTION F/HUMAN SVCS SPT	222317376	02772365	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,732.48	01-FEB-13	$5,732.48	01-FEB-14	$ 5,734.35
COMM LIVING CORP SPT	133563609	02247230	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,537.18	01-FEB-13	$3,529.84	01-FEB-14	$ 3,583.64
COMM MAINSTREAMING INC SPT	237448487	02259570	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,291.51	01-FEB-13	$4,291.51	01-FEB-14	$ 4,291.51
COMM SVCS F/T DEV DISABIL SPT	161317369	02253487	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,442.75	01-FEB-13	$7,442.75	01-FEB-14	$ 7,442.75
COMMUNITY OPTIONS NY SPT	222964056	02740650	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,925.60	01-FEB-13	$3,925.60	01-FEB-14	$ 3,941.45
COMMUNITY PROGS OF WJCS SPT	132985945	02247285	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,268.88	01-FEB-13	$2,268.88	01-FEB-14	$ 2,268.88
COMMUNITY WORK AND INDEPENDENCE SPT	141470091	03827887	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)					01-FEB-14	3728.87
CROSSROADS UNLIMITED SPT	710967724	02742107	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,208.73	01-FEB-13	$6,208.73	01-FEB-14	$ 6,208.74
CRYSTAL RUN VILLAGE INC SPT	112466996	02493621	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,543.01	01-FEB-13	$4,543.01	01-FEB-14	$ 3,800.91
CTR FOR FAMILY SUPPORT SPT	131913807	02753175	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,383.79	01-FEB-13	$6,383.79	01-FEB-14	$ 6,383.79
DELAWARE CO CHAP NYSARC SPT	160976343	02392698	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,429.04	01-FEB-13	$1,437.59	01-FEB-14	$ 1,437.76
DEPAUL DEV SERVICES SPT	202017098	02734696	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,409.38	01-FEB-13	$6,409.38	01-FEB-14	$ 6,409.38
DEVEREUX FOUNDATION SPT	231390618	02338085	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,481.07	01-FEB-13	$3,481.07	01-FEB-14	$ 3,481.07
E DOUGLIN CTR SPT	113356044	02404671	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,614.41	01-FEB-13	$7,614.41	01-APR-14	$ 7,904.07

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
EIHAB HUMAN SERVICES SPT	113376415	02750094	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,344.11	01-FEB-13	$7,344.11	01-FEB-14	$ 7,344.11
EPILEPSY ASSOC/GR ROCH SPT	222146295	02723004	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,783.89	01-FEB-13	$1,797.32	03-MAY-13	$ -
ERIE COUNTY ARC SPT	160769044	02246546	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,135.54	01-FEB-13	$3,138.26	01-FEB-14	$ 3,132.17
ESSEX COUNTY CHAP NYSARC SPT	141563885	02246615	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,796.40	01-FEB-13	$1,802.31	01-FEB-14	$ 1,858.08
FED EMPLOY & GUIDANCE SVC SPT	131624000	02247001	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,602.97	01-FEB-13	$4,602.97	01-FEB-14	$ 4,908.93
FEDERATION OF MULTICULTURAL PRG SPT	112422505	03172194	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,658.38	01-FEB-13	$3,658.38	01-FEB-14	$ 3,658.38
FRANKLIN CO NYSARC SPT	237150954	02272700	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,934.97	01-FEB-13	$4,934.97	01-FEB-14	$ 4,934.98
FREE SUPPORTIVE SPT	112420547	02246986	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,783.80	01-FEB-13	$3,783.80	01-FEB-14	$ 3,783.80
FULTON CO CHAPTER NYSARC SPT	146020996	02247065	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,715.46	01-FEB-13	$2,733.72	01-FEB-14	$ 2,764.21
GATEWAY COMMUNITY IND SPT	141458757	02247083	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,741.27	01-FEB-13	$3,741.27	01-FEB-14	$ 3,741.27
GENESEE CO CHAP NYSARC SPT	161001185	02633214	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,511.81	01-FEB-13	$1,603.04	01-FEB-14	$ 1,551.46
GUILD F/EXECPTIONAL CHILD SPT	116037766	02338241	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,485.48	01-FEB-13	$1,356.42	01-FEB-14	$ 1,350.44
HAMASPIK OF ORANGE CO SPT	141711583	03370367	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,855.31	01-FEB-13	$5,206.86	01-FEB-14	$ 5,231.59
HASC CENTER INC SPT	112630071	02247074	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,284.75	01-FEB-13	$5,284.75	01-FEB-14	$ 5,284.75
HEAD INJURY ASSOCIATION INC SPT	112946185	02256577	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,326.37	01-FEB-13	$7,326.37	01-FEB-14	$ 7,326.36
HEARTSHARE HUMAN SERVICES SPT	111633549	02363477	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,050.21	01-FEB-13	$3,050.21	01-FEB-14	$ 3,050.21
HERITAGE CHRISTIAN SVCS SPT	222334190	02463207	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,976.10	01-FEB-13	$3,976.10	01-FEB-14	$ 3,976.10
HERKIMER CO CHAP NYSARC SPT	160973231	02247318	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,576.38	01-FEB-13	$3,567.00	01-FEB-14	$ 3,524.97
HUMAN CARE SERVICES SPT	113338946	03450259	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,067.73	01-FEB-13	$5,067.73	01-FEB-14	$ 5,067.73
IBERO AMERICAN ACT LEAGUE SPT	160954745	02252959	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,051.98	01-FEB-13	$3,051.98	01-FEB-14	$ 3,051.98
INDEPENDENCE RESIDENCES INC SPT	133490223	03431849	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,734.38	01-MAR-13	$4,721.77	01-FEB-14	$ 4,734.38
INDEPENDENT GR HM LIVING SPT	112458584	02247345	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,557.39	01-FEB-13	$4,557.39	01-FEB-14	$ 4,548.39
INDEPENDENT LIVING ASSN SPT	112729771	02247381	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$8,311.59	01-FEB-13	$8,311.59	01-FEB-14	$ 8,311.59
INFLIGHT INC SPT	141764481	02422140	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,888.36	01-FEB-13	$2,888.36	01-FEB-14	$ 2,888.36
INSTITUTE FOR COMMUNITY LIVING INC	133306195	03827025	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)					01-MAR-14	4544.94
INSTITUTES OF APPLIED DYN SPT	132573827	02513371	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,821.74	01-FEB-13	$4,812.95	01-FEB-14	$ 4,822.44
JAWONIO INC SPT	131761660	02247450	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,774.10	01-FEB-13	$6,774.10	01-FEB-14	$ 6,774.10
JAWONIO INC ND 17	131761660	02811769	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-DEC-2006	$5,117.75	03-JAN-07	$0.00	03-JAN-07	$ -
JEFFERSON REHABILITATION SPT	161134631	02247510	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,223.44	01-FEB-13	$1,229.32	01-FEB-14	$ 1,221.29
JOB PATH INC SPT	134038495	02247529	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,023.92	01-FEB-13	$7,023.92	01-FEB-14	$ 7,023.92
LDA OF WESTERN NY SPT	161118058	03172218	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$924.61	01-FEB-13	$0.00	01-FEB-13	$ -
LEARNING DISABIL/GEN VAL SPT	222702285	02354176	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,860.68	01-FEB-13	$2,946.42	01-FEB-14	$ 2,927.49
LIBERTY NYSARC-MONTGOMERY SPT	141506257	02247698	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,251.08	01-FEB-13	$4,251.08	01-FEB-14	$ 4,251.08
LIBERTY RESOURCES INC SPT	161129675	03171877	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$759.83	01-FEB-13	$765.88	01-FEB-14	$ 763.33
LIFE ADJUSTMENT CENTER ND 5	133620577	02798007	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-JAN-2007	$6,664.78	03-JAN-07	$0.00	03-JAN-07	$ -
LIFE ADJUSTMENT CENTER SPT	133620577	02247405	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$10,114.25	01-FEB-13	$10,114.25	01-FEB-14	$ 10,120.96
LIFESPIRE INC SPT	132526022	02247423	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,367.09	01-FEB-13	$2,367.09	01-FEB-14	$ 2,367.09
LIFETIME ASSISTANCE INC SPT	222221158	02253441	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,063.93	01-FEB-13	$2,243.70	01-FEB-14	$ 2,134.08
LIVING RESOURCES CORP SPT	141564208	02247469	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,377.64	01-FEB-13	$2,377.64	01-FEB-14	$ 2,389.42
MADISON CORTLAND NYSARC SPT	160958020	02256595	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,958.33	01-FEB-13	$1,958.33	01-MAY-13	$ -
MARYHAVEN CENTER OF HOPE SPT	112861698	02248511	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,153.65	01-FEB-13	$2,262.19	01-FEB-14	$ 2,153.65
MERCY HOME FOR CHILDREN SPT	111666227	02979202	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,876.39	01-FEB-13	$4,876.39	01-FEB-14	$ 4,876.40
MODEST COMMUNITY SERVICES ASSOC SPT	134288916	02991537	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,070.22	01-FEB-13	$7,070.22	01-APR-14	$ 7,036.56

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
MULTI COUNTY CDC SPT	141558673	02248704	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,474.69	01-FEB-13	$3,473.45	01-FEB-14	$ 3,474.69
NASSAU CO CHAP NYSAHRC SPT	111720254	02248882	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,457.68	01-FEB-13	$3,457.68	01-FEB-14	$ 3,457.68
NEW HOPE COMMUNITY INC SPT	222871755	02248722	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,626.24	01-FEB-13	$7,626.24	01-FEB-14	$ 7,626.24
NEW HORIZONS RESOURCES SPT	524862107	02248828	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,026.44	01-FEB-13	$2,026.44	01-FEB-14	$ 2,006.64
NYSARC DUTCHESS CNTY CHAP SPT	146077915	02253689	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,155.81	01-FEB-13	$3,138.56	01-FEB-14	$ 3,165.92
NYSARC INC NYC CHAPTER SPT	135596746	02248906	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,431.27	01-FEB-13	$4,431.27	01-MAY-14	$ 4,431.27
NYSARC INC SUFFOLK CHAP SPT	111845294	02392818	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,165.98	01-FEB-13	$3,165.98	01-FEB-14	$ 3,165.99
OCCUPATIONS INC SPT	141471097	02248979	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,809.53	01-FEB-13	$1,809.53	01-FEB-14	$ 1,809.53
OHEL CHILDRENS HM/FAM SPT	116078704	02750609	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,291.35	01-FEB-13	$5,291.35	01-JUN-14	$ 5,291.36
ON YOUR MARK INC SPT	133128315	02548570	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,014.53	01-FEB-13	$3,014.53	01-FEB-14	$ 2,996.90
ORANGE CO NYS ARC SPT	141462340	03172158	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$681.68	01-FEB-13	$710.60	01-FEB-14	$ 873.68
ORLEANS CO CHAP NYSARC SPT	237150957	02625221	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,748.29	01-FEB-13	$1,758.61	01-FEB-14	$ 1,757.83
OSWEGO CO OPPORTUNITIES SPT	160979876	02249172	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,409.38	01-FEB-13	$1,422.44	01-FEB-14	$ 1,427.43
OTSEGO COUNTY CHAP NYSARC SPT	160953477	02257821	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,393.11	01-FEB-13	$3,532.83	01-APR-14	$ 3,368.62
PARTNERSHIP FOR INNOV CC SPT	133537258	02248300	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,815.54	01-FEB-13	$6,815.54	01-AUG-13	$ -
PAUL J COOPER CTR F/ HS SPT	112245967	02257445	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,816.42	01-FEB-13	$5,816.42	01-FEB-14	$ 5,816.45
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03718018	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)					01-FEB-14	1802.42
PEOPLE SERVICE HCBS SPT	160975538	02502261	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,352.99	01-FEB-13	$2,376.61	01-FEB-14	$ 2,356.27
PROGRAM DEVELOPMENT SVCS SPT	112715916	02257298	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,673.61	01-FEB-13	$3,673.61	01-FEB-14	$ 3,673.61
PROJECT INDEPENDENCE INC SPT	161173031	02581588	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,775.38	01-FEB-13	$1,783.59	01-FEB-14	$ 1,783.38
PSCH INC SPT	112542430	02681390	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,815.35	01-FEB-13	$1,815.35	01-FEB-14	$ 1,815.35
PUTNAM COUNTY CHAP NYSARC SPT	141426729	02248415	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,619.43	01-FEB-13	$3,619.43	01-FEB-14	$ 3,619.43
QSAC INC	112482974	03825270	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)					01-FEB-14	9404.17
QUEENS PARENT RESRC CTR SPT	113211119	02379739	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,855.63	01-FEB-13	$3,855.63	01-FEB-14	$ 3,855.62
RAYIM OF HUDSON VALLEY INC SPT IRA	562331735	03191953	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,264.51	01-FEB-13	$3,272.49	01-FEB-14	$ 3,272.03
RENSS CO CHAP NYSARC SPT	141485873	02249003	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,083.97	01-FEB-13	$6,083.97	01-FEB-14	$ 6,095.32
RIVERSHORE INC SPT	161146128	02688411	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,913.63	01-FEB-13	$1,920.38	01-FEB-14	$ 1,921.24
ROCKLAND CO CHAP NYSARC SPT	131916359	02248864	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,238.73	01-FEB-13	$3,238.73	01-FEB-14	$ 3,238.73
ROCKLAND COUNTY ALD SPT	132951835	02608464	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,159.85	01-FEB-13	$5,159.85	01-FEB-14	$ 5,159.84
SARATOGA COUNTY CHAPTER NYS ARC INC	141465932	03332712	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,628.34	01-FEB-13	$2,616.70	01-JUN-14	$ 2,628.34
SCHDY CO CHAP NYSARC SPT	141459277	02492611	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,024.46	01-FEB-13	$2,024.46	01-FEB-14	$ 2,034.71
SCHOHARIE CHAP NYSARC INC SPT	141494347	02255232	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,073.22	01-FEB-13	$2,066.16	01-APR-14	$ 2,003.34
SCHUYLER CO CHAP NYSARC SPT	161120089	02249049	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,303.13	01-FEB-13	$1,413.50	01-FEB-14	$ 1,410.09
SENECA-CAYUGA NYSARC SPT	161124314	02249190	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,175.77	01-FEB-13	$1,185.20	01-FEB-14	$ 1,187.01
SERVICES F/ T UNDERSVRD ND 8	133250383	02751646	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,659.77	01-FEB-13	$6,659.77	01-FEB-14	$ 6,659.82
SINERGIA INC SPT	133183344	02249907	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,058.09	01-FEB-13	$5,058.09	01-JUN-14	$ 5,058.09
SPAULDING PRAY RES CORP ND 1	161196869	02811778	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-DEC-2006	$3,819.59	03-JAN-07	$0.00	03-JAN-07	$ -
SPAULDING PRAY RES CORP ND 2	161196869	02811787	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-DEC-2006	$4,382.66	03-JAN-07	$0.00	03-JAN-07	$ -
SPAULDING PRAY RES CORP SPT	161196869	02249934	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,931.40	01-FEB-13	$4,931.38	01-FEB-14	$ 4,933.81
SPECIAL CIT FUTURE UNLTD SPT	132865903	02249989	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$7,473.81	01-FEB-13	$7,473.81	01-FEB-14	$ 7,473.81
ST CHRISTOPHER OTTILIE SPT	112777066	02250035	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,483.40	01-FEB-13	$3,483.40	01-FEB-14	$ 3,483.40
ST DOMINICS HOME SPT	131740399	02519620	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,984.35	01-FEB-13	$4,984.35	01-FEB-14	$ 4,984.35
ST REGIS MOHAWK ED AND COMM FUND SP	222423477	03171868	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$583.75	01-FEB-13	$583.75	01-FEB-14	$ 582.94

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
STATEN ISLAND AID SPT	135660279	02249732	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,228.26	01-FEB-13	$5,228.26	01-FEB-14	$ 5,228.26
SUBURBAN ADULT SERVICES INC SPT	161115992	03171455	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$797.35	01-FEB-13	$804.29	01-FEB-14	$ 802.71
SULLIVAN CO CHAP NYSARC SPT	146028767	02249883	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,593.62	01-FEB-13	$1,601.79	01-FEB-14	$ 1,604.14
TACONIC INNOVATIONS SPT	223729121	02779757	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,829.15	01-FEB-13	$6,829.15	01-FEB-14	$ 6,829.15
THE ARC ONEIDA LEWIS ARC SPT	150581298	02249970	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,886.48	01-FEB-13	$1,896.36	01-FEB-14	$ 1,883.43
UCP ASSOC OF NASSAU SPT	111723782	02252537	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,427.09	01-FEB-13	$4,427.09	01-FEB-14	$ 4,427.09
UCP OF NYC INC SPT	135654532	02255416	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,446.36	01-FEB-13	$5,463.84	01-FEB-14	$ 5,493.57
UCP OF ULSTER CO SPT	141377518	02621061	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,034.27	01-FEB-13	$3,036.61	01-FEB-14	$ 3,030.05
UCP PUTNAM/S DUTCHESS SPT	141813412	02360630	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,100.38	01-FEB-13	$5,100.38	01-FEB-14	$ 5,100.38
UCPA CAPITAL DISTRICT SPT	141425851	02499672	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,862.53	01-FEB-13	$1,879.64	01-FEB-14	$ 1,875.29
UCPA NIAGARA CO INC SPT	160786061	02731946	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,427.33	01-FEB-13	$1,437.61	01-FEB-14	$ 1,408.10
UCPA OF THE NORTH COUNTRY SPT	161568985	02257243	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,805.82	01-FEB-13	$2,813.65	01-FEB-14	$ 2,813.03
ULSTER GREENE ARC SPT	141437657	02252739	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,577.08	01-FEB-13	$2,601.69	01-FEB-14	$ 2,550.69
UNITY HOUSE OF CAYUGA CO SPT	161081372	02743626	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,692.91	01-FEB-13	$1,692.91	01-FEB-14	$ 1,692.91
VANDERHEYDEN HALL INC SPT	141338575	02493709	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,709.10	01-FEB-13	$5,736.33	01-FEB-14	$ 5,745.70
VOLUNTEERS OF AMERICA GNY SPT	581959781	02284357	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$6,487.14	01-FEB-13	$6,487.14	01-FEB-14	$ 6,503.12
WARREN WASHINGTON CO ARC SPT	141560053	02252904	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-MAR-2013	$2,489.82	01-MAR-13	$2,530.49	01-FEB-14	$ 2,484.52
WAYNE CO CHAP NYSARC SPT	237540582	02732043	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$1,340.25	01-FEB-13	$1,345.45	01-FEB-14	$ 1,343.87
WESTCHESTER NYSARC SPT	131740065	02252582	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,935.37	01-FEB-13	$2,904.15	01-FEB-14	$ 3,094.95
WILDWOOD PROGRAMS INC SPT	222132752	02493718	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,540.77	01-FEB-13	$3,540.77	01-FEB-14	$ 3,551.27
WOMENS LEAGUE COMM RES SPT	112889774	02252775	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$5,579.20	01-FEB-13	$5,579.20	01-FEB-14	$ 5,579.20
YATES CO NYSARC INC SPT	161086091	03292380	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$2,199.13	01-FEB-13	$2,199.13	01-FEB-14	$ 2,190.13
YEDEI CHESED INC	133728771	03410611	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$3,862.89	01-FEB-13	$3,862.89	01-FEB-14	$ 3,867.83
YOUNG ADULT INSTITUTE SPT	112030172	02256691	003	4709	RES HAB; VOL; IRA/CR -SUPRT; MONTHLY	MONTH (1)	01-FEB-2013	$4,571.83	01-FEB-13	$4,571.83	01-FEB-14	$ 4,571.83
A VERY SPECIAL PLACE SPT	133005006	02757793	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,334.86	01-FEB-13	$1,334.86	01-FEB-14	$ 1,334.86
ABBOTT HOUSE SPT	131991946	03426042	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,810.71	01-FEB-13	$1,810.71	01-FEB-14	$ 1,810.71
ABILITIES FIRST INC SPT	141467427	02248951	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,022.80	01-FEB-13	$2,022.80	01-FEB-14	$ 2,022.80
ABILITY BEYOND DISABILITY INC SPT	141758770	03306347	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,638.26	01-FEB-13	$2,638.26	01-FEB-14	$ 2,638.26
ACLD SPT	116042250	02245958	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,895.26	01-FEB-13	$1,895.26	01-FEB-14	$ 1,895.26
AID TO THE DEVELOPMENTALLY DISABLED	112573451	03257494	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,707.91	01-FEB-13	$1,707.91	01-FEB-14	$ 1,707.91
AIM SERVICES INC SPT	141609398	03561942	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-MAY-14	1622.07
ALBANY CO CHAP NYSARC SPT	141392181	02365951	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,149.90	03-FEB-13	$0.00	03-FEB-13	$ -
ALLEGANY CO CHAP NYSARC SPT	161021588	02246651	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$974.02	01-FEB-13	$977.41	01-FEB-14	$ 976.54
ALTERNATIVE LIVING GROUP SPT	141713378	03418206	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,232.52	01-FEB-13	$2,232.52	01-JUN-14	$ 2,453.53
ASSN F/NEUR BRAIN INJ SPT	112348663	02663192	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,848.43	01-FEB-13	$1,848.43	01-FEB-14	$ 1,848.43
ASSN FOR CHILDREN W/DOWNS SYND SPT	237175975	03273058	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,384.80	01-FEB-13	$2,384.80	01-FEB-14	$ 2,384.80
BLOCK INSTITUTE SPT	112416320	02259552	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$991.86	01-FEB-13	$991.86	01-FEB-14	$ 1,213.32
BROOKLYN BUREAU OF COMM SRVC SPT	111630780	03125968	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,162.80	01-FEB-13	$3,162.80	01-FEB-14	$ 3,162.80
BROOME TIOGA CO CHAP NYSARC SPT	150619307	02587346	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$757.85	01-FEB-13	$766.59	01-FEB-14	$ 763.80
CAMP VENTURE INC SPT	132661988	02256480	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,055.77	01-FEB-13	$1,046.25	01-FEB-14	$ 1,028.79
CATH CHARITIES DIO ROCH SPT	160743944	02279394	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,414.26	01-FEB-13	$1,392.61	01-FEB-14	$ 1,374.43
CATHOLIC CHAR DIO RVC SPT	111843801	02245898	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,432.16	01-FEB-13	$1,432.16	01-FEB-14	$ 1,427.66
CATHOLIC CHAR NEIGHBORHOOD SVC SPT	112047151	03169468	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$372.96	01-FEB-13	$372.96	01-MAY-14	$ 389.09

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
CATHOLIC GUARDIAN SOCIETY SPT	135562186	02253996	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,227.26	01-FEB-13	$1,227.26	01-FEB-14	$ 1,227.26
CATTARAUGUS CO NYSARC SPT	160818293	02246000	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,126.29	01-FEB-13	$1,130.02	01-FEB-14	$ 1,130.86
CENTER FOR DEVELOP DISAB SPT	111874383	02256504	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,278.21	01-FEB-13	$1,278.21	01-FEB-14	$ 1,278.21
CEREBRAL PALSY OF WESTCHESTER SPT	131690769	03169784	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$543.66	01-FEB-13	$543.94	01-FEB-14	$ 539.75
CHAUTAUQUA CO NYSARC INC SPT	160968914	03505777	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,286.53	01-FEB-13	$1,102.30	01-FEB-14	$ 1,097.49
CHEMUNG CO CHAP ARC SPT	160795709	02246073	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$986.66	01-FEB-13	$1,101.09	01-FEB-14	$ 1,046.21
CHENANGO CO CHAP NYSAC SPT	160970103	02359768	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$702.88	01-FEB-13	$702.88	01-FEB-14	$ 693.43
CITIZEN ADVOCATES, INC SPT	141577715	02255190	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$920.22	01-FEB-13	$923.08	01-FEB-14	$ 921.65
CLADDAGH COMMISSION SPT	161096096	02246922	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,825.48	01-FEB-13	$1,825.48	01-FEB-14	$ 1,831.95
COLUMBIA COUNTY CHAP ARC SPT	141489603	02247198	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,306.30	01-FEB-13	$1,306.30	01-FEB-14	$ 1,306.30
COMM ACTION F/HUMAN SVCS SPT	222317376	02772365	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,866.24	01-FEB-13	$2,866.24	01-FEB-14	$ 2,867.18
COMM LIVING CORP SPT	133563609	02247230	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,768.59	01-FEB-13	$1,764.92	01-FEB-14	$ 1,791.82
COMM MAINSTREAMING INC SPT	237448487	02259570	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,145.76	01-FEB-13	$2,145.76	01-FEB-14	$ 2,145.76
COMM SVCS F/T DEV DISABIL SPT	161317369	02253487	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,721.38	01-FEB-13	$3,721.38	01-FEB-14	$ 3,721.38
COMMUNITY OPTIONS NY SPT	222964056	02740650	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,962.80	01-FEB-13	$1,962.80	01-FEB-14	$ 1,970.73
COMMUNITY PROGS OF WJCS SPT	132985945	02247285	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,134.44	01-FEB-13	$1,134.44	01-FEB-14	$ 1,134.44
COMMUNITY WORK AND INDEPENDENCE SPT	141470091	03827887	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-FEB-14	1864.44
CROSSROADS UNLIMITED SPT	710967724	02742107	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,104.37	01-FEB-13	$3,104.37	01-FEB-14	$ 3,104.37
CRYSTAL RUN VILLAGE INC SPT	112466996	02493621	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,271.51	01-FEB-13	$2,271.51	01-FEB-14	$ 1,900.46
CTR FOR FAMILY SUPPORT SPT	131913807	02753175	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,191.90	01-FEB-13	$3,191.90	01-FEB-14	$ 3,191.90
DELAWARE CO CHAP NYSARC SPT	160976343	02392698	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$714.52	01-FEB-13	$718.80	01-FEB-14	$ 718.88
DEPAUL DEV SERVICES SPT	202017098	02734696	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,204.69	01-FEB-13	$3,204.69	01-FEB-14	$ 3,204.69
DEVEREUX FOUNDATION SPT	231390618	02338085	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,740.54	01-FEB-13	$1,740.54	01-FEB-14	$ 1,740.54
E DOUGLIN CTR SPT	113356044	02404671	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,807.21	01-FEB-13	$3,807.21	01-APR-14	$ 3,952.04
EIHAB HUMAN SERVICES SPT	113376415	02750094	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,672.06	01-FEB-13	$3,672.06	01-FEB-14	$ 3,672.06
EPILEPSY ASSOC/GR ROCH SPT	222146295	02723004	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$891.95	01-FEB-13	$898.66	03-MAY-13	$ -
ERIE COUNTY ARC SPT	160769044	02246546	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,567.77	01-FEB-13	$1,569.13	01-FEB-14	$ 1,566.09
ESSEX COUNTY CHAP NYSARC SPT	141563885	02246615	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$898.20	01-FEB-13	$901.16	01-FEB-14	$ 929.04
FED EMPLOY & GUIDANCE SVC SPT	131624000	02247001	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,301.49	01-FEB-13	$2,301.49	01-FEB-14	$ 2,454.47
FEDERATION OF MULTICULTURAL PRG SPT	112422505	03172194	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,829.19	01-FEB-13	$1,829.19	01-FEB-14	$ 1,829.19
FRANKLIN CO NYSARC SPT	237150954	02272700	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,467.49	01-FEB-13	$2,467.49	01-FEB-14	$ 2,467.49
FREE SUPPORTIVE SPT	112420547	02246986	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,891.90	01-FEB-13	$1,891.90	01-FEB-14	$ 1,891.90
FULTON CO CHAPTER NYSARC SPT	146020996	02247065	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,357.73	01-FEB-13	$1,366.86	01-FEB-14	$ 1,382.11
GATEWAY COMMUNITY IND SPT	141458757	02247083	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,870.64	01-FEB-13	$1,870.64	01-FEB-14	$ 1,870.64
GENESEE CO CHAP NYSARC SPT	161001185	02633214	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$755.91	01-FEB-13	$801.52	01-FEB-14	$ 775.73
GUILD F/EXECPTIONAL CHILD SPT	116037766	02338241	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$742.74	01-FEB-13	$678.21	01-FEB-14	$ 675.22
HAMASPIK OF ORANGE CO SPT	141711583	03370367	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,427.66	01-FEB-13	$2,603.43	01-FEB-14	$ 2,615.80
HASC CENTER INC SPT	112630071	02247074	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,642.38	01-FEB-13	$2,642.38	01-FEB-14	$ 2,642.38
HEAD INJURY ASSOCIATION INC SPT	112946185	02256577	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,663.19	01-FEB-13	$3,663.19	01-FEB-14	$ 3,663.18
HEARTSHARE HUMAN SERVICES SPT	111633549	02363477	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,525.11	01-FEB-13	$1,525.11	01-FEB-14	$ 1,525.11
HERITAGE CHRISTIAN SVCS SPT	222334190	02463207	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,988.05	01-FEB-13	$1,988.05	01-FEB-14	$ 1,988.05
HERKIMER CO CHAP NYSARC SPT	160973231	02247318	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,788.19	01-FEB-13	$1,783.50	01-FEB-14	$ 1,762.49
HUMAN CARE SERVICES SPT	113338946	03450259	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,533.87	01-FEB-13	$2,533.87	01-FEB-14	$ 2,533.87

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
IBERO AMERICAN ACT LEAGUE SPT	160954745	02252959	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,525.99	01-FEB-13	$1,525.99	01-FEB-14	$ 1,525.99
INDEPENDENCE RESIDENCES INC SPT	133490223	03431849	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,367.19	01-MAR-13	$2,360.89	01-FEB-14	$ 2,367.19
INDEPENDENT GR HM LIVING SPT	112458584	02247345	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,278.70	01-FEB-13	$2,278.70	01-FEB-14	$ 2,274.20
INDEPENDENT LIVING ASSN SPT	112729771	02247381	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$4,155.80	01-FEB-13	$4,155.80	01-FEB-14	$ 4,155.80
INFLIGHT INC SPT	141764481	02422140	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,444.18	01-FEB-13	$1,444.18	01-FEB-14	$ 1,444.18
INSTITUTE FOR COMMUNITY LIVING INC	133306195	03827025	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-MAR-14	2272.47
INSTITUTES OF APPLIED DYN SPT	132573827	02513371	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,410.87	01-FEB-13	$2,406.48	01-FEB-14	$ 2,411.22
JAWONIO INC SPT	131761660	02247450	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,387.05	01-FEB-13	$3,387.05	01-FEB-14	$ 3,387.05
JAWONIO INC ND 17	131761660	02811769	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-DEC-2006	$2,558.88	03-JAN-07	$0.00	03-JAN-07	$ -
JEFFERSON REHABILITATION SPT	161134631	02247510	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$611.72	01-FEB-13	$614.66	01-FEB-14	$ 610.65
JOB PATH INC SPT	134038495	02247529	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,511.96	01-FEB-13	$3,511.96	01-FEB-14	$ 3,511.96
LDA OF WESTERN NY SPT	161118058	03172218	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$462.31	01-FEB-13	$0.00	01-FEB-13	$ -
LEARNING DISABIL/GEN VAL SPT	222702285	02354176	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,430.34	01-FEB-13	$1,473.21	01-FEB-14	$ 1,463.75
LIBERTY NYSARC-MONTGOMERY SPT	141506257	02247698	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,125.54	01-FEB-13	$2,125.54	01-FEB-14	$ 2,125.54
LIBERTY RESOURCES INC SPT	161129675	03171877	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$379.92	01-FEB-13	$382.94	01-FEB-14	$ 381.67
LIFE ADJUSTMENT CENTER ND 5	133620577	02798007	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-JAN-2007	$3,332.39	03-JAN-07	$0.00	03-JAN-07	$ -
LIFE ADJUSTMENT CENTER SPT	133620577	02247405	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$5,057.13	01-FEB-13	$5,057.13	01-FEB-14	$ 5,060.48
LIFESPIRE INC SPT	132526022	02247423	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,183.55	01-FEB-13	$1,183.55	01-FEB-14	$ 1,183.55
LIFETIME ASSISTANCE INC SPT	222221158	02253441	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,031.97	01-FEB-13	$1,121.85	01-FEB-14	$ 1,067.04
LIVING RESOURCES CORP SPT	141564208	02247469	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,188.82	01-FEB-13	$1,188.82	01-FEB-14	$ 1,194.71
MADISON CORTLAND NYSARC SPT	160958020	02256595	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$979.17	01-FEB-13	$979.17	01-MAY-13	$ -
MARYHAVEN CENTER OF HOPE SPT	112861698	02248511	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,076.83	01-FEB-13	$1,131.10	01-FEB-14	$ 1,076.83
MERCY HOME FOR CHILDREN SPT	111666227	02979202	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,438.20	01-FEB-13	$2,438.20	01-FEB-14	$ 2,438.20
MODEST COMMUNITY SERVICES ASSOC SPT	134288916	02991537	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,535.11	01-FEB-13	$3,535.11	01-APR-14	$ 3,518.28
MULTI COUNTY CDC SPT	141558673	02248704	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,737.35	01-FEB-13	$1,736.73	01-FEB-14	$ 1,737.35
NASSAU CO CHAP NYSAHRC SPT	111720254	02248882	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,728.84	01-FEB-13	$1,728.84	01-FEB-14	$ 1,728.84
NEW HOPE COMMUNITY INC SPT	222871755	02248722	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,813.12	01-FEB-13	$3,813.12	01-FEB-14	$ 3,813.12
NEW HORIZONS RESOURCES SPT	524862107	02248828	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,013.22	01-FEB-13	$1,013.22	01-FEB-14	$ 1,003.32
NYSARC DUTCHESS CNTY CHAP SPT	146077915	02253689	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,577.91	01-FEB-13	$1,569.28	01-FEB-14	$ 1,582.96
NYSARC INC NYC CHAPTER SPT	135596746	02248906	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,215.64	01-FEB-13	$2,215.64	01-MAY-14	$ 2,215.64
NYSARC INC SUFFOLK CHAP SPT	111845294	02392818	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,582.99	01-FEB-13	$1,582.99	01-FEB-14	$ 1,583.00
OCCUPATIONS INC SPT	141471097	02248979	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$904.77	01-FEB-13	$904.77	01-FEB-14	$ 904.77
OHEL CHILDRENS HM/FAM SPT	116078704	02750609	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,645.68	01-FEB-13	$2,645.68	01-JUN-14	$ 2,645.68
ON YOUR MARK INC SPT	133128315	02548570	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,507.27	01-FEB-13	$1,507.27	01-FEB-14	$ 1,498.45
ORANGE CO NYS ARC SPT	141462340	03172158	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$340.84	01-FEB-13	$355.30	01-FEB-14	$ 436.84
ORLEANS CO CHAP NYSARC SPT	237150957	02625221	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$874.15	01-FEB-13	$879.31	01-FEB-14	$ 878.92
OSWEGO CO OPPORTUNITIES SPT	160979876	02249172	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$704.69	01-FEB-13	$711.22	01-FEB-14	$ 713.72
OTSEGO COUNTY CHAP NYSARC SPT	160953477	02257821	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,696.56	01-FEB-13	$1,766.42	01-APR-14	$ 1,684.31
PARTNERSHIP FOR INNOV CC SPT	133537258	02248300	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,407.77	01-FEB-13	$3,407.77	01-AUG-13	$ -
PAUL J COOPER CTR F/ HS SPT	112245967	02257445	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,908.21	01-FEB-13	$2,908.21	01-FEB-14	$ 2,908.23
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03718018	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-FEB-14	901.21
PEOPLE SERVICE HCBS SPT	160975538	02502261	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,176.50	01-FEB-13	$1,188.31	01-FEB-14	$ 1,178.14
PROGRAM DEVELOPMENT SVCS SPT	112715916	02257298	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,836.81	01-FEB-13	$1,836.81	01-FEB-14	$ 1,836.81

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
PROJECT INDEPENDENCE INC SPT	161173031	02581588	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$887.69	01-FEB-13	$891.80	01-FEB-14	$ 891.69
PSCH INC SPT	112542430	02681390	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$907.68	01-FEB-13	$907.68	01-FEB-14	$ 907.68
PUTNAM COUNTY CHAP NYSARC SPT	141426729	02248415	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,809.72	01-FEB-13	$1,809.72	01-FEB-14	$ 1,809.72
QSAC INC	112482974	03825270	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)					01-FEB-14	4702.09
QUEENS PARENT RESRC CTR SPT	113211119	02379739	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,927.82	01-FEB-13	$1,927.82	01-FEB-14	$ 1,927.81
RAYIM OF HUDSON VALLEY INC SPT IRA	562331735	03191953	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,632.26	01-FEB-13	$1,636.25	01-FEB-14	$ 1,636.02
RENSS CO CHAP NYSARC SPT	141485873	02249003	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,041.99	01-FEB-13	$3,041.99	01-FEB-14	$ 3,047.66
RIVERSHORE INC SPT	161146128	02688411	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$956.82	01-FEB-13	$960.19	01-FEB-14	$ 960.62
ROCKLAND CO CHAP NYSARC SPT	131916359	02248864	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,619.37	01-FEB-13	$1,619.37	01-FEB-14	$ 1,619.37
ROCKLAND COUNTY ALD SPT	132951835	02608464	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,579.93	01-FEB-13	$2,579.93	01-FEB-14	$ 2,579.92
SARATOGA COUNTY CHAPTER NYS ARC INC	141465932	03332712	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,314.17	01-FEB-13	$1,308.35	01-JUN-14	$ 1,314.17
SCHDY CO CHAP NYSARC SPT	141459277	02492611	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,012.23	01-FEB-13	$1,012.23	01-FEB-14	$ 1,017.36
SCHOHARIE CHAP NYSARC INC SPT	141494347	02255232	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,036.61	01-FEB-13	$1,033.08	01-APR-14	$ 1,001.67
SCHUYLER CO CHAP NYSARC SPT	161120089	02249049	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$651.57	01-FEB-13	$706.75	01-FEB-14	$ 705.05
SENECA-CAYUGA NYSARC SPT	161124314	02249190	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$587.89	01-FEB-13	$592.60	01-FEB-14	$ 593.51
SERVICES F/ T UNDERSVRD ND 8	133250383	02751646	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,329.89	01-FEB-13	$3,329.89	01-FEB-14	$ 3,329.91
SINERGIA INC SPT	133183344	02249907	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,529.05	01-FEB-13	$2,529.05	01-JUN-14	$ 2,529.05
SPAULDING PRAY RES CORP ND 1	161196869	02811778	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-DEC-2006	$1,909.80	03-JAN-07	$0.00	03-JAN-07	$ -
SPAULDING PRAY RES CORP ND 2	161196869	02811787	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-DEC-2006	$2,191.33	03-JAN-07	$0.00	03-JAN-07	$ -
SPAULDING PRAY RES CORP SPT	161196869	02249934	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,465.70	01-FEB-13	$2,465.69	01-FEB-14	$ 2,466.91
SPECIAL CIT FUTURE UNLTD SPT	132865903	02249989	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,736.91	01-FEB-13	$3,736.91	01-FEB-14	$ 3,736.91
ST CHRISTOPHER OTTILIE SPT	112777066	02250035	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,741.70	01-FEB-13	$1,741.70	01-FEB-14	$ 1,741.70
ST DOMINICS HOME SPT	131740399	02519620	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,492.18	01-FEB-13	$2,492.18	01-FEB-14	$ 2,492.18
ST REGIS MOHAWK ED AND COMM FUND SP	222423477	03171868	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$291.88	01-FEB-13	$291.88	01-FEB-14	$ 291.47
STATEN ISLAND AID SPT	135660279	02249732	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,614.13	01-FEB-13	$2,614.13	01-FEB-14	$ 2,614.13
SUBURBAN ADULT SERVICES INC SPT	161115992	03171455	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$398.68	01-FEB-13	$402.15	01-FEB-14	$ 401.36
SULLIVAN CO CHAP NYSARC SPT	146028767	02249883	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$796.81	01-FEB-13	$800.90	01-FEB-14	$ 802.07
TACONIC INNOVATIONS SPT	223729121	02779757	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,414.58	01-FEB-13	$3,414.58	01-FEB-14	$ 3,414.58
THE ARC ONEIDA LEWIS ARC SPT	150581298	02249970	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$943.24	01-FEB-13	$948.18	01-FEB-14	$ 941.72
UCP ASSOC OF NASSAU SPT	111723782	02252537	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,213.55	01-FEB-13	$2,213.55	01-FEB-14	$ 2,213.55
UCP OF NYC INC SPT	135654532	02255416	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,723.18	01-FEB-13	$2,731.92	01-FEB-14	$ 2,746.79
UCP OF ULSTER CO SPT	141377518	02621061	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,517.14	01-FEB-13	$1,518.31	01-FEB-14	$ 1,515.03
UCP PUTNAM/S DUTCHESS SPT	141813412	02360630	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,550.19	01-FEB-13	$2,550.19	01-FEB-14	$ 2,550.19
UCPA CAPITAL DISTRICT SPT	141425851	02499672	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$931.27	01-FEB-13	$939.82	01-FEB-14	$ 937.65
UCPA NIAGARA CO INC SPT	160786061	02731946	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$713.67	01-FEB-13	$718.81	01-FEB-14	$ 704.05
UCPA OF THE NORTH COUNTRY SPT	161568985	02257243	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,402.91	01-FEB-13	$1,406.83	01-FEB-14	$ 1,406.52
ULSTER GREENE ARC SPT	141437657	02252739	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,288.54	01-FEB-13	$1,300.85	01-FEB-14	$ 1,275.35
UNITY HOUSE OF CAYUGA CO SPT	161081372	02743626	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$846.46	01-FEB-13	$846.46	01-FEB-14	$ 846.46
VANDERHEYDEN HALL INC SPT	141338575	02493709	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,854.55	01-FEB-13	$2,868.17	01-FEB-14	$ 2,872.85
VOLUNTEERS OF AMERICA GNY SPT	581959781	02284357	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$3,243.57	01-FEB-13	$3,243.57	01-FEB-14	$ 3,251.56
WARREN WASHINGTON CO ARC SPT	141560053	02252904	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-MAR-2013	$1,244.91	01-MAR-13	$1,265.25	01-FEB-14	$ 1,242.26
WAYNE CO CHAP NYSARC SPT	237540582	02732043	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$670.13	01-FEB-13	$672.73	01-FEB-14	$ 671.94
WESTCHESTER NYSARC SPT	131740065	02252582	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,467.69	01-FEB-13	$1,452.08	01-FEB-14	$ 1,547.48

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
WILDWOOD PROGRAMS INC SPT	222132752	02493718	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,770.39	01-FEB-13	$1,770.39	01-FEB-14	$ 1,775.64
WOMENS LEAGUE COMM RES SPT	112889774	02252775	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,789.60	01-FEB-13	$2,789.60	01-FEB-14	$ 2,789.60
YATES CO NYSARC INC SPT	161086091	03292380	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,099.57	01-FEB-13	$1,099.57	01-FEB-14	$ 1,095.07
YEDEI CHESED INC	133728771	03410611	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$1,931.45	01-FEB-13	$1,931.45	01-FEB-14	$ 1,933.92
YOUNG ADULT INSTITUTE SPT	112030172	02256691	003	4710	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 1ST HALF	MONTH (1)	01-FEB-2013	$2,285.92	01-FEB-13	$2,285.92	01-FEB-14	$ 2,285.92
A VERY SPECIAL PLACE SPT	133005006	02757793	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,334.86	01-FEB-13	$1,334.86	01-FEB-14	$ 1,334.86
ABBOTT HOUSE SPT	131991946	03426042	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,810.71	01-FEB-13	$1,810.71	01-FEB-14	$ 1,810.71
ABILITIES FIRST INC SPT	141467427	02248951	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,022.80	01-FEB-13	$2,022.80	01-FEB-14	$ 2,022.80
ABILITY BEYOND DISABILITY INC SPT	141758770	03306347	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,638.26	01-FEB-13	$2,638.26	01-FEB-14	$ 2,638.26
ACLD SPT	116042250	02245958	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,895.26	01-FEB-13	$1,895.26	01-FEB-14	$ 1,895.26
AID TO THE DEVELOPMENTALLY DISABLED	112573451	03257494	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,707.91	01-FEB-13	$1,707.91	01-FEB-14	$ 1,707.91
AIM SERVICES INC SPT	141609398	03561942	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-MAY-14	1622.07
ALBANY CO CHAP NYSARC SPT	141392181	02365951	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,149.90	03-FEB-13	$0.00	03-FEB-13	$ -
ALLEGANY CO CHAP NYSARC SPT	161021588	02246651	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$974.02	01-FEB-13	$977.41	01-FEB-14	$ 976.54
ALTERNATIVE LIVING GROUP SPT	141713378	03418206	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,232.52	01-FEB-13	$2,232.52	01-JUN-14	$ 2,453.53
ASSN F/NEUR BRAIN INJ SPT	112348663	02663192	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,848.43	01-FEB-13	$1,848.43	01-FEB-14	$ 1,848.43
ASSN FOR CHILDREN W/DOWNS SYND SPT	237175975	03273058	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,384.80	01-FEB-13	$2,384.80	01-FEB-14	$ 2,384.80
BLOCK INSTITUTE SPT	112416320	02259552	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$991.86	01-FEB-13	$991.86	01-FEB-14	$ 1,213.32
BROOKLYN BUREAU OF COMM SRVC SPT	111630780	03125968	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,162.80	01-FEB-13	$3,162.80	01-FEB-14	$ 3,162.80
BROOME TIOGA CO CHAP NYSARC SPT	150619307	02587346	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$757.85	01-FEB-13	$766.59	01-FEB-14	$ 763.80
CAMP VENTURE INC SPT	132661988	02256480	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,055.77	01-FEB-13	$1,046.25	01-FEB-14	$ 1,028.79
CATH CHARITIES DIO ROCH SPT	160743944	02279394	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,414.26	01-FEB-13	$1,392.61	01-FEB-14	$ 1,374.43
CATHOLIC CHAR DIO RVC SPT	111843801	02245898	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,432.16	01-FEB-13	$1,432.16	01-FEB-14	$ 1,427.66
CATHOLIC CHAR NEIGHBORHOOD SVC SPT	112047151	03169468	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$372.96	01-FEB-13	$372.96	01-MAY-14	$ 389.09
CATHOLIC GUARDIAN SOCIETY SPT	135562186	02253996	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,227.26	01-FEB-13	$1,227.26	01-FEB-14	$ 1,227.26
CATTARAUGUS CO NYSARC SPT	160818293	02246000	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,126.29	01-FEB-13	$1,130.02	01-FEB-14	$ 1,130.86
CENTER FOR DEVELOP DISAB SPT	111874383	02256504	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,278.21	01-FEB-13	$1,278.21	01-FEB-14	$ 1,278.21
CEREBRAL PALSY OF WESTCHESTER SPT	131690769	03169784	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$543.66	01-FEB-13	$543.94	01-FEB-14	$ 539.75
CHAUTAUQUA CO NYSARC INC SPT	160968914	03505777	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,286.53	01-FEB-13	$1,102.30	01-FEB-14	$ 1,097.49
CHEMUNG CO CHAP ARC SPT	160795709	02246073	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$986.66	01-FEB-13	$1,101.09	01-FEB-14	$ 1,046.21
CHENANGO CO CHAP NYSAC SPT	160970103	02359768	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$702.88	01-FEB-13	$702.88	01-FEB-14	$ 693.43
CITIZEN ADVOCATES, INC SPT	141577715	02255190	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$920.22	01-FEB-13	$923.08	01-FEB-14	$ 921.65
CLADDAGH COMMISSION SPT	161096096	02246922	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,825.48	01-FEB-13	$1,825.48	01-FEB-14	$ 1,831.95
COLUMBIA COUNTY CHAP ARC SPT	141489603	02247198	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,306.30	01-FEB-13	$1,306.30	01-FEB-14	$ 1,306.30
COMM ACTION F/HUMAN SVCS SPT	222317376	02772365	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,866.24	01-FEB-13	$2,866.24	01-FEB-14	$ 2,867.18
COMM LIVING CORP SPT	133563609	02247230	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,768.59	01-FEB-13	$1,764.92	01-FEB-14	$ 1,791.82
COMM MAINSTREAMING INC SPT	237448487	02259570	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,145.76	01-FEB-13	$2,145.76	01-FEB-14	$ 2,145.76
COMM SVCS F/T DEV DISABIL SPT	161317369	02253487	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,721.38	01-FEB-13	$3,721.38	01-FEB-14	$ 3,721.38
COMMUNITY OPTIONS NY SPT	222964056	02740650	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,962.80	01-FEB-13	$1,962.80	01-FEB-14	$ 1,970.73
COMMUNITY PROGS OF WJCS SPT	132985945	02247285	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,134.44	01-FEB-13	$1,134.44	01-FEB-14	$ 1,134.44
COMMUNITY WORK AND INDEPENDENCE SPT	141470091	03827887	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-FEB-14	1864.44
CROSSROADS UNLIMITED SPT	710967724	02742107	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,104.37	01-FEB-13	$3,104.37	01-FEB-14	$ 3,104.37
CRYSTAL RUN VILLAGE INC SPT	112466996	02493621	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,271.51	01-FEB-13	$2,271.51	01-FEB-14	$ 1,900.46

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
CTR FOR FAMILY SUPPORT SPT	131913807	02753175	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,191.90	01-FEB-13	$3,191.90	01-FEB-14	$ 3,191.90
DELAWARE CO CHAP NYSARC SPT	160976343	02392698	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$714.52	01-FEB-13	$718.80	01-FEB-14	$ 718.88
DEPAUL DEV SERVICES SPT	202017098	02734696	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,204.69	01-FEB-13	$3,204.69	01-FEB-14	$ 3,204.69
DEVEREUX FOUNDATION SPT	231390618	02338085	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,740.54	01-FEB-13	$1,740.54	01-FEB-14	$ 1,740.54
E DOUGLIN CTR SPT	113356044	02404671	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,807.21	01-FEB-13	$3,807.21	01-APR-14	$ 3,952.04
EIHAB HUMAN SERVICES SPT	113376415	02750094	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,672.06	01-FEB-13	$3,672.06	01-FEB-14	$ 3,672.06
EPILEPSY ASSOC/GR ROCH SPT	222146295	02723004	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$891.95	01-FEB-13	$898.66	03-MAY-13	$ -
ERIE COUNTY ARC SPT	160769044	02246546	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,567.77	01-FEB-13	$1,569.13	01-FEB-14	$ 1,566.09
ESSEX COUNTY CHAP NYSARC SPT	141563885	02246615	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$898.20	01-FEB-13	$901.16	01-FEB-14	$ 929.04
FED EMPLOY & GUIDANCE SVC SPT	131624000	02247001	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,301.49	01-FEB-13	$2,301.49	01-FEB-14	$ 2,454.47
FEDERATION OF MULTICULTURAL PRG SPT	112422505	03172194	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,829.19	01-FEB-13	$1,829.19	01-FEB-14	$ 1,829.19
FRANKLIN CO NYSARC SPT	237150954	02272700	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,467.49	01-FEB-13	$2,467.49	01-FEB-14	$ 2,467.49
FREE SUPPORTIVE SPT	112420547	02246986	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,891.90	01-FEB-13	$1,891.90	01-FEB-14	$ 1,891.90
FULTON CO CHAPTER NYSARC SPT	146020996	02247065	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,357.73	01-FEB-13	$1,366.86	01-FEB-14	$ 1,382.11
GATEWAY COMMUNITY IND SPT	141458757	02247083	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,870.64	01-FEB-13	$1,870.64	01-FEB-14	$ 1,870.64
GENESEE CO CHAP NYSARC SPT	161001185	02633214	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$755.91	01-FEB-13	$801.52	01-FEB-14	$ 775.73
GUILD F/EXECPTIONAL CHILD SPT	116037766	02338241	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$742.74	01-FEB-13	$678.21	01-FEB-14	$ 675.22
HAMASPIK OF ORANGE CO SPT	141711583	03370367	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,427.66	01-FEB-13	$2,603.43	01-FEB-14	$ 2,615.80
HASC CENTER INC SPT	112630071	02247074	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,642.38	01-FEB-13	$2,642.38	01-FEB-14	$ 2,642.38
HEAD INJURY ASSOCIATION INC SPT	112946185	02256577	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,663.19	01-FEB-13	$3,663.19	01-FEB-14	$ 3,663.18
HEARTSHARE HUMAN SERVICES SPT	111633549	02363477	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,525.11	01-FEB-13	$1,525.11	01-FEB-14	$ 1,525.11
HERITAGE CHRISTIAN SVCS SPT	222334190	02463207	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,988.05	01-FEB-13	$1,988.05	01-FEB-14	$ 1,988.05
HERKIMER CO CHAP NYSARC SPT	160973231	02247318	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,788.19	01-FEB-13	$1,783.50	01-FEB-14	$ 1,762.49
HUMAN CARE SERVICES SPT	113338946	03450259	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,533.87	01-FEB-13	$2,533.87	01-FEB-14	$ 2,533.87
IBERO AMERICAN ACT LEAGUE SPT	160954745	02252959	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,525.99	01-FEB-13	$1,525.99	01-FEB-14	$ 1,525.99
INDEPENDENCE RESIDENCES INC SPT	133490223	03431849	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,367.19	01-MAR-13	$2,360.89	01-FEB-14	$ 2,367.19
INDEPENDENT GR HM LIVING SPT	112458584	02247345	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,278.70	01-FEB-13	$2,278.70	01-FEB-14	$ 2,274.20
INDEPENDENT LIVING ASSN SPT	112729771	02247381	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$4,155.80	01-FEB-13	$4,155.80	01-FEB-14	$ 4,155.80
INFLIGHT INC SPT	141764481	02422140	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,444.18	01-FEB-13	$1,444.18	01-FEB-14	$ 1,444.18
INSTITUTE FOR COMMUNITY LIVING INC	133306195	03827025	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-MAR-14	2272.47
INSTITUTES OF APPLIED DYN SPT	132573827	02513371	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,410.87	01-FEB-13	$2,406.48	01-FEB-14	$ 2,411.22
JAWONIO INC SPT	131761660	02247450	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,387.05	01-FEB-13	$3,387.05	01-FEB-14	$ 3,387.05
JAWONIO INC ND 17	131761660	02811769	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-DEC-2006	$2,558.88	03-JAN-07	$0.00	03-JAN-07	$ -
JEFFERSON REHABILITATION SPT	161134631	02247510	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$611.72	01-FEB-13	$614.66	01-FEB-14	$ 610.65
JOB PATH INC SPT	134038495	02247529	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,511.96	01-FEB-13	$3,511.96	01-FEB-14	$ 3,511.96
LDA OF WESTERN NY SPT	161118058	03172218	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$462.31	01-FEB-13	$0.00	01-FEB-13	$ -
LEARNING DISABIL/GEN VAL SPT	222702285	02354176	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,430.34	01-FEB-13	$1,473.21	01-FEB-14	$ 1,463.75
LIBERTY NYSARC-MONTGOMERY SPT	141506257	02247698	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,125.54	01-FEB-13	$2,125.54	01-FEB-14	$ 2,125.54
LIBERTY RESOURCES INC SPT	161129675	03171877	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$379.92	01-FEB-13	$382.94	01-FEB-14	$ 381.67
LIFE ADJUSTMENT CENTER ND 5	133620577	02798007	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-JAN-2007	$3,332.39	03-JAN-07	$0.00	03-JAN-07	$ -
LIFE ADJUSTMENT CENTER SPT	133620577	02247405	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$5,057.13	01-FEB-13	$5,057.13	01-FEB-14	$ 5,060.48
LIFESPIRE INC SPT	132526022	02247423	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,183.55	01-FEB-13	$1,183.55	01-FEB-14	$ 1,183.55
LIFETIME ASSISTANCE INC SPT	222221158	02253441	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,031.97	01-FEB-13	$1,121.85	01-FEB-14	$ 1,067.04

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
LIVING RESOURCES CORP SPT	141564208	02247469	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,188.82	01-FEB-13	$1,188.82	01-FEB-14	$ 1,194.71
MADISON CORTLAND NYSARC SPT	160958020	02256595	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$979.17	01-FEB-13	$979.17	01-MAY-13	$ -
MARYHAVEN CENTER OF HOPE SPT	112861698	02248511	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,076.83	01-FEB-13	$1,131.10	01-FEB-14	$ 1,076.83
MERCY HOME FOR CHILDREN SPT	111666227	02979202	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,438.20	01-FEB-13	$2,438.20	01-FEB-14	$ 2,438.20
MODEST COMMUNITY SERVICES ASSOC SPT	134288916	02991537	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,535.11	01-FEB-13	$3,535.11	01-APR-14	$ 3,518.28
MULTI COUNTY CDC SPT	141558673	02248704	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,737.35	01-FEB-13	$1,736.73	01-FEB-14	$ 1,737.35
NASSAU CO CHAP NYSAHRC SPT	111720254	02248882	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,728.84	01-FEB-13	$1,728.84	01-FEB-14	$ 1,728.84
NEW HOPE COMMUNITY INC SPT	222871755	02248722	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,813.12	01-FEB-13	$3,813.12	01-FEB-14	$ 3,813.12
NEW HORIZONS RESOURCES SPT	524862107	02248828	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,013.22	01-FEB-13	$1,013.22	01-FEB-14	$ 1,003.32
NYSARC DUTCHESS CNTY CHAP SPT	146077915	02253689	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,577.91	01-FEB-13	$1,569.28	01-FEB-14	$ 1,582.96
NYSARC INC NYC CHAPTER SPT	135596746	02248906	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,215.64	01-FEB-13	$2,215.64	01-MAY-14	$ 2,215.64
NYSARC INC SUFFOLK CHAP SPT	111845294	02392818	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,582.99	01-FEB-13	$1,582.99	01-FEB-14	$ 1,583.00
OCCUPATIONS INC SPT	141471097	02248979	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$904.77	01-FEB-13	$904.77	01-FEB-14	$ 904.77
OHEL CHILDRENS HM/FAM SPT	116078704	02750609	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,645.68	01-FEB-13	$2,645.68	01-JUN-14	$ 2,645.68
ON YOUR MARK INC SPT	133128315	02548570	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,507.27	01-FEB-13	$1,507.27	01-FEB-14	$ 1,498.45
ORANGE CO NYS ARC SPT	141462340	03172158	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$340.84	01-FEB-13	$355.30	01-FEB-14	$ 436.84
ORLEANS CO CHAP NYSARC SPT	237150957	02625221	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$874.15	01-FEB-13	$879.31	01-FEB-14	$ 878.92
OSWEGO CO OPPORTUNITIES SPT	160979876	02249172	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$704.69	01-FEB-13	$711.22	01-FEB-14	$ 713.72
OTSEGO COUNTY CHAP NYSARC SPT	160953477	02257821	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,696.56	01-FEB-13	$1,766.42	01-APR-14	$ 1,684.31
PARTNERSHIP FOR INNOV CC SPT	133537258	02248300	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,407.77	01-FEB-13	$3,407.77	01-AUG-13	$ -
PAUL J COOPER CTR F/ HS SPT	112245967	02257445	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,908.21	01-FEB-13	$2,908.21	01-FEB-14	$ 2,908.23
PEOPLE REBUILDING AND LIVING IN DIG	161422825	03718018	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-FEB-14	901.21
PEOPLE SERVICE HCBS SPT	160975538	02502261	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,176.50	01-FEB-13	$1,188.31	01-FEB-14	$ 1,178.14
PROGRAM DEVELOPMENT SVCS SPT	112715916	02257298	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,836.81	01-FEB-13	$1,836.81	01-FEB-14	$ 1,836.81
PROJECT INDEPENDENCE INC SPT	161173031	02581588	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$887.69	01-FEB-13	$891.80	01-FEB-14	$ 891.69
PSCH INC SPT	112542430	02681390	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$907.68	01-FEB-13	$907.68	01-FEB-14	$ 907.68
PUTNAM COUNTY CHAP NYSARC SPT	141426729	02248415	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,809.72	01-FEB-13	$1,809.72	01-FEB-14	$ 1,809.72
QSAC INC	112482974	03825270	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)					01-FEB-14	4702.09
QUEENS PARENT RESRC CTR SPT	113211119	02379739	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,927.82	01-FEB-13	$1,927.82	01-FEB-14	$ 1,927.81
RAYIM OF HUDSON VALLEY INC SPT IRA	562331735	03191953	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,632.26	01-FEB-13	$1,636.25	01-FEB-14	$ 1,636.02
RENSS CO CHAP NYSARC SPT	141485873	02249003	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,041.99	01-FEB-13	$3,041.99	01-FEB-14	$ 3,047.66
RIVERSHORE INC SPT	161146128	02688411	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$956.82	01-FEB-13	$960.19	01-FEB-14	$ 960.62
ROCKLAND CO CHAP NYSARC SPT	131916359	02248864	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,619.37	01-FEB-13	$1,619.37	01-FEB-14	$ 1,619.37
ROCKLAND COUNTY ALD SPT	132951835	02608464	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,579.93	01-FEB-13	$2,579.93	01-FEB-14	$ 2,579.92
SARATOGA COUNTY CHAPTER NYS ARC INC	141465932	03332712	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,314.17	01-FEB-13	$1,308.35	01-JUN-14	$ 1,314.17
SCHDY CO CHAP NYSARC SPT	141459277	02492611	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,012.23	01-FEB-13	$1,012.23	01-FEB-14	$ 1,017.36
SCHOHARIE CHAP NYSARC INC SPT	141494347	02255232	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,036.61	01-FEB-13	$1,033.08	01-APR-14	$ 1,001.67
SCHUYLER CO CHAP NYSARC SPT	161120089	02249049	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$651.57	01-FEB-13	$706.75	01-FEB-14	$ 705.05
SENECA-CAYUGA NYSARC SPT	161124314	02249190	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$587.89	01-FEB-13	$592.60	01-FEB-14	$ 593.51
SERVICES F/ T UNDERSVRD ND 8	133250383	02751646	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,329.89	01-FEB-13	$3,329.89	01-FEB-14	$ 3,329.91
SINERGIA INC SPT	133183344	02249907	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,529.05	01-FEB-13	$2,529.05	01-JUN-14	$ 2,529.05
SPAULDING PRAY RES CORP ND 1	161196869	02811778	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-DEC-2006	$1,909.80	03-JAN-07	$0.00	03-JAN-07	$ -
SPAULDING PRAY RES CORP ND 2	161196869	02811787	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-DEC-2006	$2,191.33	03-JAN-07	$0.00	03-JAN-07	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT
SPAULDING PRAY RES CORP SPT	161196869	02249934	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,465.70	01-FEB-13	$2,465.69	01-FEB-14	$ 2,466.91
SPECIAL CIT FUTURE UNLTD SPT	132865903	02249989	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,736.91	01-FEB-13	$3,736.91	01-FEB-14	$ 3,736.91
ST CHRISTOPHER OTTILIE SPT	112777066	02250035	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,741.70	01-FEB-13	$1,741.70	01-FEB-14	$ 1,741.70
ST DOMINICS HOME SPT	131740399	02519620	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,492.18	01-FEB-13	$2,492.18	01-FEB-14	$ 2,492.18
ST REGIS MOHAWK ED AND COMM FUND SP	222423477	03171868	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$291.88	01-FEB-13	$291.88	01-FEB-14	$ 291.47
STATEN ISLAND AID SPT	135660279	02249732	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,614.13	01-FEB-13	$2,614.13	01-FEB-14	$ 2,614.13
SUBURBAN ADULT SERVICES INC SPT	161115992	03171455	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$398.68	01-FEB-13	$402.15	01-FEB-14	$ 401.36
SULLIVAN CO CHAP NYSARC SPT	146028767	02249883	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$796.81	01-FEB-13	$800.90	01-FEB-14	$ 802.07
TACONIC INNOVATIONS SPT	223729121	02779757	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,414.58	01-FEB-13	$3,414.58	01-FEB-14	$ 3,414.58
THE ARC ONEIDA LEWIS ARC SPT	150581298	02249970	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$943.24	01-FEB-13	$948.18	01-FEB-14	$ 941.72
UCP ASSOC OF NASSAU SPT	111723782	02252537	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,213.55	01-FEB-13	$2,213.55	01-FEB-14	$ 2,213.55
UCP OF NYC INC SPT	135654532	02255416	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,723.18	01-FEB-13	$2,731.92	01-FEB-14	$ 2,746.79
UCP OF ULSTER CO SPT	141377518	02621061	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,517.14	01-FEB-13	$1,518.31	01-FEB-14	$ 1,515.03
UCP PUTNAM/S DUTCHESS SPT	141813412	02360630	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,550.19	01-FEB-13	$2,550.19	01-FEB-14	$ 2,550.19
UCPA CAPITAL DISTRICT SPT	141425851	02499672	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$931.27	01-FEB-13	$939.82	01-FEB-14	$ 937.65
UCPA NIAGARA CO INC SPT	160786061	02731946	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$713.67	01-FEB-13	$718.81	01-FEB-14	$ 704.05
UCPA OF THE NORTH COUNTRY SPT	161568985	02257243	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,402.91	01-FEB-13	$1,406.83	01-FEB-14	$ 1,406.52
ULSTER GREENE ARC SPT	141437657	02252739	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,288.54	01-FEB-13	$1,300.85	01-FEB-14	$ 1,275.35
UNITY HOUSE OF CAYUGA CO SPT	161081372	02743626	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$846.46	01-FEB-13	$846.46	01-FEB-14	$ 846.46
VANDERHEYDEN HALL INC SPT	141338575	02493709	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,854.55	01-FEB-13	$2,868.17	01-FEB-14	$ 2,872.85
VOLUNTEERS OF AMERICA GNY SPT	581959781	02284357	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$3,243.57	01-FEB-13	$3,243.57	01-FEB-14	$ 3,251.56
WARREN WASHINGTON CO ARC SPT	141560053	02252904	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-MAR-2013	$1,244.91	01-MAR-13	$1,265.25	01-FEB-14	$ 1,242.26
WAYNE CO CHAP NYSARC SPT	237540582	02732043	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$670.13	01-FEB-13	$672.73	01-FEB-14	$ 671.94
WESTCHESTER NYSARC SPT	131740065	02252582	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,467.69	01-FEB-13	$1,452.08	01-FEB-14	$ 1,547.48
WILDWOOD PROGRAMS INC SPT	222132752	02493718	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,770.39	01-FEB-13	$1,770.39	01-FEB-14	$ 1,775.64
WOMENS LEAGUE COMM RES SPT	112889774	02252775	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,789.60	01-FEB-13	$2,789.60	01-FEB-14	$ 2,789.60
YATES CO NYSARC INC SPT	161086091	03292380	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,099.57	01-FEB-13	$1,099.57	01-FEB-14	$ 1,095.07
YEDEI CHESED INC	133728771	03410611	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$1,931.45	01-FEB-13	$1,931.45	01-FEB-14	$ 1,933.92
YOUNG ADULT INSTITUTE SPT	112030172	02256691	003	4711	RES HAB; VOL; IRA/CR -SUPRT; SEMI-MNTHLY 2ND HALF	MONTH (1)	01-FEB-2013	$2,285.92	01-FEB-13	$2,285.92	01-FEB-14	$ 2,285.92

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT
AIM SERVICES INC HCBS	141609398	01491565	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$75.85	01-APR-12	$75.85	01-APR-12	$ 75.85	01-JAN-15	$ 77.87	01-APR-15	$ 79.89
ALLEGANY CO CHAP NYSARC HCBS3	161021588	01805729	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$79.71	01-JUL-11	$79.71	01-JUL-11	$ 79.71	01-JAN-15	$ 82.78	01-APR-15	$ 85.85
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$82.88	01-JUL-11	$82.88	01-JUL-11	$ 82.88	01-JAN-15	$ 82.88	01-APR-15	$ 82.88
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$52.37	01-JUL-11	$52.37	01-JUL-11	$ 52.37	01-JAN-15	$ 53.33	01-APR-15	$ 54.29
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$76.67	01-JUL-11	$76.67	01-JUL-11	$ 76.67	01-JAN-15	$ 76.67	01-APR-15	$ 76.67
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$66.68	01-JUL-11	$66.68	01-JUL-11	$ 66.68	01-JAN-15	$ 67.64	01-APR-15	$ 68.60
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$50.23	01-JUL-11	$50.23	01-JUL-11	$ 50.23	01-JAN-15	$ 50.23	01-APR-15	$ 50.23
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-MAY-2011	$77.70	01-MAY-11	$77.70	01-MAY-11	$ 77.70	01-JAN-15	$ 80.49	01-APR-15	$ 83.28
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-MAY-2011	$61.60	01-MAY-11	$61.60	01-MAY-11	$ 61.60	01-JAN-15	$ 67.63	01-APR-15	$ 73.67
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-MAY-2011	$85.93	01-MAY-11	$85.93	01-MAY-11	$ 85.93	01-JAN-15	$ 85.92	01-APR-15	$ 85.92
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2011	$50.65	01-APR-11	$50.65	01-APR-11	$ 50.65	01-JAN-15	$ 52.07	01-APR-15	$ 53.49
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	20-APR-2012	$52.41	20-APR-12	$52.41	20-APR-12	$ 52.41	01-JAN-15	$ 53.32	01-APR-15	$ 54.23
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	27-APR-2012	$57.94	27-APR-12	$57.94	27-APR-12	$ 57.94	01-JAN-15	$ 57.95	01-APR-15	$ 57.95
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	22-OCT-2012	$53.89	22-OCT-12	$53.89	22-OCT-12	$ 53.89	01-JAN-15	$ 53.89	01-APR-15	$ 53.89
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			07-FEB-13	53.13	07-FEB-13	$ 53.13	01-JAN-15	$ 54.09	01-APR-15	$ 55.05
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					17-JUN-14	45.5	01-JAN-15	$ 45.95	01-APR-15	$ 46.42
ALLEGANY CO CHAP NYSARC HCBS4	161021588	02315171	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)									02-MAR-15	56.89
CATT REHAB CENTER INC HCBS	161291766	01510856	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$55.65	01-JAN-12	$55.65	01-JAN-12	$ 55.65	01-JAN-15	$ 56.61	01-APR-15	$ 57.57
CATT REHAB CENTER INC HCBS	161291766	01510856	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$55.00	01-JAN-12	$55.00	01-JAN-12	$ 55.00	01-JAN-15	$ 55.96	01-APR-15	$ 56.93
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$51.78	01-JUL-11	$51.78	01-JUL-11	$ 51.78	01-JAN-15	$ 52.26	01-APR-15	$ 52.74
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$56.98	01-JUL-11	$56.98	01-JUL-11	$ 56.98	01-JAN-15	$ 56.98	01-APR-15	$ 56.98
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$84.29	01-JUL-11	$84.29	01-JUL-11	$ 84.29	01-JAN-15	$ 85.25	01-APR-15	$ 86.21
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$47.94	01-JUL-11	$47.94	01-JUL-11	$ 47.94	01-JAN-15	$ 48.42	01-APR-15	$ 48.90
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	12-JAN-2012	$51.41	02-JUN-12	$51.41	02-JUN-12	$ 51.41	01-JAN-15	$ 51.41	01-APR-15	$ 51.41
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-NOV-2012	$59.18	01-NOV-12	$59.18	01-NOV-12	$ 59.18	01-JAN-15	$ 60.14	01-APR-15	$ 61.11
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	12-OCT-2012	$51.41	12-OCT-12	$51.41	12-OCT-12	$ 51.41	01-JAN-15	$ 51.89	01-APR-15	$ 52.38
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	22-NOV-2010	$57.54	22-NOV-10	$57.54	22-NOV-10	$ 57.54	01-JAN-15	$ 57.54	01-APR-15	$ 57.54
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	20-JUN-2011	$58.18	20-JUN-11	$58.18	20-JUN-11	$ 58.18	01-JAN-15	$ 58.18	01-APR-15	$ 58.18
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			08-MAR-13	59.18	08-MAR-13	$ 59.18	01-JAN-15	$ 60.14	01-APR-15	$ 61.11
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					10-JUN-13	48.88	01-JAN-15	$ 48.88	01-APR-15	$ 48.88
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			21-NOV-12	57.89	21-NOV-12	$ 57.89	01-JAN-15	$ 58.85	01-APR-15	$ 59.81
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-MAR-13	55.65	01-MAR-13	$ 55.65	01-JAN-15	$ 55.65	01-APR-15	$ 55.65
CATTARAUGUS CO CHAP NYSARC HCBS 11	160818293	03306392	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					31-OCT-13	48.31	01-JAN-15	$ 48.31	01-APR-15	$ 48.31
CDS MONARCH INC HCBS 5	161089115	02889774	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.37	01-JUL-11	$64.37	01-JUL-11	$ 64.37	01-JAN-15	$ 78.86	01-APR-15	$ 79.78
CDS MONARCH INC HCBS 5	161089115	02889774	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$66.85	01-JUL-11	$66.85	01-JUL-11	$ 66.85	01-JAN-15	$ 78.86	01-APR-15	$ 79.80
CDS MONARCH INC HCBS 5	161089115	02889774	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.12	01-JUL-11	$64.12	01-JUL-11	$ 64.12	01-JAN-15	$ 78.86	01-APR-15	$ 79.33
CDS MONARCH INC HCBS 6	161089115	03169775	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$71.97	01-JUL-11	$71.97	01-JUL-11	$ 71.97	01-JAN-15	$ 81.34	01-APR-15	$ 82.27
CDS MONARCH INC HCBS 6	161089115	03169775	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$60.82	01-JUL-11	$60.82	01-JUL-11	$ 60.82	01-JAN-15	$ 78.20	01-APR-15	$ 79.13
CDS MONARCH INC HCBS 6	161089115	03169775	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$71.76	01-JUL-11	$71.76	01-JUL-11	$ 71.76	01-JAN-15	$ 78.93	01-APR-15	$ 79.43
CDS MONARCH INC HCBS 6	161089115	03169775	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.87	01-JUL-11	$64.87	01-JUL-11	$ 64.87	01-JAN-15	$ 73.37	01-APR-15	$ 73.84
CDS MONARCH INC HCBS 6	161089115	03169775	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	15-APR-2011	$74.91	15-APR-11	$74.91	15-APR-11	$ 74.91	01-JAN-15	$ 74.91	01-APR-15	$ 74.91
CDS MONARCH INC HCBS 6	161089115	03169775	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	02-JUN-2011	$82.57	02-JUN-11	$82.57	02-JUN-11	$ 82.57	01-JAN-15	$ 95.40	01-APR-15	$ 96.33
CDS MONARCH INC HCBS 6	161089115	03169775	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-SEP-2011	$100.55	11-NOV-12	$0.00	11-NOV-12	$ -	11-NOV-12	$ -	11-NOV-12	$ -
CDS MONARCH INC HCBS 6	161089115	03169775	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	29-JAN-2012	$74.83	29-JAN-12	$74.83	29-JAN-12	$ 74.83	01-JAN-15	$ 82.03	01-APR-15	$ 82.96
CDS MONARCH INC HCBS 6	161089115	03169775	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			21-FEB-13	70.73	04-JAN-14	$ -	04-JAN-14	$ -	04-JAN-14	$ -
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$65.08	12-JUL-12	$65.08	12-JUL-12	$ 65.08	01-JAN-15	$ 65.08	01-APR-15	$ 65.08
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$63.39	01-JUL-11	$63.39	01-JUL-11	$ 63.39	01-JAN-15	$ 64.34	01-APR-15	$ 65.29
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$77.22	01-JUL-11	$77.22	01-JUL-11	$ 77.22	01-JAN-15	$ 78.17	01-APR-15	$ 79.12
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$67.01	01-JUL-11	$67.01	01-JUL-11	$ 67.01	01-JAN-15	$ 67.96	01-APR-15	$ 68.92

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$62.20	01-JAN-12	$62.20	01-JAN-12	$ 62.20	01-JAN-15	$ 63.15	01-APR-15	$ 64.10
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$62.20	01-JAN-12	$62.20	01-JAN-12	$ 62.20	01-JAN-15	$ 63.15	01-APR-15	$ 64.10
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$60.84	01-JUL-11	$60.84	01-JUL-11	$ 60.84	01-JAN-15	$ 61.79	01-APR-15	$ 62.74
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-DEC-2011	$68.19	01-DEC-11	$68.19	01-DEC-11	$ 68.19	01-JAN-15	$ 68.19	01-APR-15	$ 68.19
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	15-MAR-2012	$45.67	15-MAR-12	$45.67	15-MAR-12	$ 45.67	01-JAN-15	$ 46.57	01-APR-15	$ 47.48
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	03-JUN-2011	$53.99	03-JUN-11	$53.99	03-JUN-11	$ 53.99	01-JAN-15	$ 54.00	01-APR-15	$ 54.00
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-MAY-2011	$54.57	01-MAY-11	$54.57	01-MAY-11	$ 54.57	01-JAN-15	$ 55.53	01-APR-15	$ 56.48
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-SEP-12	55.95	01-SEP-12	$ 55.95	01-JAN-15	$ 56.90	01-APR-15	$ 57.86
CHAUTAUGUA CO CHAP ARC HCBS8	160968914	02751655	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-APR-14	61.3	01-JAN-15	$ 61.30	01-APR-15	$ 61.30
CHAUTAUQUA CO CHAP ARC HCBS 4	160968914	01736814	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$61.73	01-APR-12	$61.73	01-APR-12	$ 61.73	01-JAN-15	$ 62.91	01-APR-15	$ 64.08
CHAUTAUQUA CO CHAP ARC HCBS 6	160968914	02078513	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$100.99	01-JUL-11	$100.99	01-JUL-11	$ 100.99	01-JAN-15	$ 104.20	01-APR-15	$ 107.41
CHAUTAUQUA CO CHAP ARC HCBS 6	160968914	02078513	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$60.77	01-JUL-11	$60.77	01-JUL-11	$ 60.77	01-JAN-15	$ 61.72	01-APR-15	$ 62.67
CHAUTAUQUA CO NYSARC HCBS 9	160968914	03996196	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							01-SEP-14	53.93	01-APR-15	$ 54.88
CHAUTAUQUA CO NYSARC HCBS 9	160968914	03996196	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)									01-APR-15	60.7
CHAUTAUQUA CO NYSARC HCBS 9	160968914	03996196	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)										
CHILDRENS HOME OF JEFFERSON COUNTY	150532089	03350649	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$68.62	03-JUN-12	$0.00	03-JUN-12	$ -	01-JAN-15	$ -	01-APR-15	$ -
CONTINUING DEVELPMENT SVC HCBS 6	161089115	03169775	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					16-MAY-13	64.32	01-JAN-15	$ 85.47	01-APR-15	$ 85.93
CONTINUING DEVELPMENT SVC HCBS 6	161089115	03169775	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-NOV-13	73.33	01-JAN-15	$ 73.33	01-APR-15	$ 73.33
FREE HCBS 6	112420547	02497969	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-FEB-2012	$69.02	01-FEB-12	$69.02	01-FEB-12	$ 69.02	01-JAN-15	$ 69.30	01-APR-15	$ 69.57
FULTON COUNTY ARC HCBS	146020996	01492915	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$61.64	01-APR-12	$61.64	01-APR-12	$ 61.64	01-JAN-15	$ 62.34	01-APR-15	$ 63.05
GENESEE CO CHAP NYSARC HCBS 2	161001185	01736465	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$81.54	01-APR-12	$81.54	01-APR-12	$ 81.54	01-JAN-15	$ 82.88	01-APR-15	$ 84.22
GENESEE CO CHAP NYSARC HCBS 4	161001185	01750343	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$71.78	01-JUL-11	$71.78	01-JUL-11	$ 71.78	01-JAN-15	$ 72.69	01-APR-15	$ 73.60
GENESEE CO CHAP NYSARC HCBS 4	161001185	01750343	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$56.43	01-JUL-11	$56.43	01-JUL-11	$ 56.43	01-JAN-15	$ 56.43	01-APR-15	$ 56.43
GENESEE CO CHAP NYSARC HCBS 4	161001185	01750343	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$77.47	01-JUL-11	$77.47	01-JUL-11	$ 77.47	01-JAN-15	$ 80.30	01-APR-15	$ 83.13
HAMASPIK OF ORANGE CO HCBS 1	141711583	01538187	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$138.57	01-JAN-13	$138.58	01-JAN-13	$ 138.58	01-JAN-15	$ 141.17	01-APR-15	$ 143.76
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$112.38	01-JUL-11	$112.38	01-JUL-11	$ 112.38	01-JAN-15	$ 116.02	01-APR-15	$ 119.67
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$105.07	01-JUL-11	$105.07	01-JUL-11	$ 105.07	01-JAN-15	$ 109.32	01-APR-15	$ 113.56
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$105.07	01-JUL-11	$105.07	01-JUL-11	$ 105.07	01-JAN-15	$ 108.72	01-APR-15	$ 112.36
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$105.99	01-JUL-11	$105.99	01-JUL-11	$ 105.99	01-JAN-15	$ 105.99	01-APR-15	$ 105.99
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$108.83	01-JUL-11	$108.83	01-JUL-11	$ 108.83	01-JAN-15	$ 112.47	01-APR-15	$ 116.12
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2011	$105.99	01-JAN-11	$105.99	01-JAN-11	$ 105.99	01-JAN-15	$ 109.64	01-APR-15	$ 113.28
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	19-MAR-2011	$107.63	19-MAR-11	$107.63	19-MAR-11	$ 107.63	01-JAN-15	$ 111.28	01-APR-15	$ 114.92
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	24-JAN-2011	$107.63	24-JAN-11	$107.63	24-JAN-11	$ 107.63	01-JAN-15	$ 107.63	01-APR-15	$ 107.63
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-DEC-2010	$89.67	01-DEC-10	$89.67	01-DEC-10	$ 89.67	01-JAN-15	$ 89.67	01-APR-15	$ 89.67
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	31-MAY-2011	$107.63	31-MAY-11	$107.63	31-MAY-11	$ 107.63	01-JAN-15	$ 111.88	01-APR-15	$ 116.12
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	10-FEB-2011	$107.63	10-FEB-11	$107.63	10-FEB-11	$ 107.63	01-JAN-15	$ 111.28	01-APR-15	$ 114.92
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$107.50	01-JAN-12	$107.50	01-JAN-12	$ 107.50	01-JAN-15	$ 111.75	01-APR-15	$ 115.99
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	18-JUL-2012	$106.31	18-JUL-12	$106.31	18-JUL-12	$ 106.31	01-JAN-15	$ 108.17	01-APR-15	$ 110.02
HAMASPIK OF ORANGE CO HCBS 10	141711583	02982263	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2012	$90.02	01-JUL-12	$90.02	01-JUL-12	$ 90.02	01-JAN-15	$ 91.87	01-APR-15	$ 93.73
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-NOV-12	105.83	01-NOV-12	$ 105.83	01-JAN-15	$ 109.48	01-APR-15	$ 113.12
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-NOV-12	108.83	01-NOV-12	$ 108.83	01-JAN-15	$ 112.47	01-APR-15	$ 116.12
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-NOV-12	108.83	01-NOV-12	$ 108.83	01-JAN-15	$ 112.47	01-APR-15	$ 116.12
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					15-APR-13	108.79	01-JAN-15	$ 112.44	01-APR-15	$ 116.08
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-SEP-12	108.83	01-SEP-12	$ 108.83	01-JAN-15	$ 112.47	01-APR-15	$ 116.12
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-JUL-13	107.71	01-JAN-15	$ 111.36	01-APR-15	$ 115.00
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-OCT-13	109.03	01-JAN-15	$ 112.67	01-APR-15	$ 116.31
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-MAR-14	109.35	01-JAN-15	$ 109.35	01-APR-15	$ 109.35
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-JUN-14	109.03	01-JAN-15	$ 109.03	01-APR-15	$ 109.03
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							01-JAN-15	109.41	01-APR-15	$ 109.41

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							01-JAN-15	109.54	01-APR-15	$ 109.54
HAMASPIK OF ORANGE CO HCBS 11	141711583	03794667	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							01-JAN-15	109.41	01-APR-15	$ 109.41
HAMASPIK OF ORANGE CO HCBS 2	141711583	01803305	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$137.35	01-APR-12	$137.35	01-APR-12	$ 137.35	01-JAN-15	$ 139.17	01-APR-15	$ 140.99
HAMASPIK OF ORANGE CO HCBS 4	141711583	02078540	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$124.15	01-APR-12	$124.15	01-APR-12	$ 124.15	01-JAN-15	$ 126.86	01-APR-15	$ 129.56
HAMASPIK OF ORANGE CO HCBS 5	141711583	02188796	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$113.08	01-JAN-12	$113.08	01-JAN-12	$ 113.08	01-JAN-15	$ 116.43	01-APR-15	$ 119.77
HAMASPIK OF ORANGE CO HCBS 6	141711583	02473738	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$118.28	01-APR-12	$118.28	01-APR-12	$ 118.28	01-JAN-15	$ 120.84	01-APR-15	$ 123.40
HAMASPIK OF ORANGE CO HCBS 7	141711583	02570074	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$115.82	01-JUL-11	$115.82	01-JUL-11	$ 115.82	01-JAN-15	$ 119.47	01-APR-15	$ 123.11
HAMASPIK OF ORANGE CO HCBS 7	141711583	02570074	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.31	01-JUL-11	$110.31	01-JUL-11	$ 110.31	01-JAN-15	$ 113.95	01-APR-15	$ 117.60
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$109.67	01-JUL-11	$109.67	01-JUL-11	$ 109.67	01-JAN-15	$ 113.91	01-APR-15	$ 118.16
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$104.93	01-JUL-11	$104.93	01-JUL-11	$ 104.93	01-JAN-15	$ 106.78	01-APR-15	$ 108.64
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$107.30	01-JUL-11	$107.30	01-JUL-11	$ 107.30	01-JAN-15	$ 107.30	01-APR-15	$ 107.30
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$107.30	01-APR-12	$107.30	01-APR-12	$ 107.30	01-JAN-15	$ 110.94	01-APR-15	$ 114.59
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$109.34	01-JUL-11	$109.34	01-JUL-11	$ 109.34	01-JAN-15	$ 113.59	01-APR-15	$ 117.83
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$102.09	01-JUL-11	$102.09	01-JUL-11	$ 102.09	01-JAN-15	$ 105.74	01-APR-15	$ 109.38
HAMASPIK OF ORANGE CO HCBS 8	141711583	02757784	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$109.44	01-JUL-11	$109.44	01-JUL-11	$ 109.44	01-JAN-15	$ 113.68	01-APR-15	$ 117.92
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.53	01-JUL-11	$110.53	01-JUL-11	$ 110.53	01-JAN-15	$ 111.79	01-APR-15	$ 113.05
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.47	01-JUL-11	$110.47	01-JUL-11	$ 110.47	01-JAN-15	$ 112.33	01-APR-15	$ 114.19
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.35	01-JUL-11	$110.35	01-JUL-11	$ 110.35	01-JAN-15	$ 113.99	01-APR-15	$ 117.64
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.47	01-JUL-11	$110.47	01-JUL-11	$ 110.47	01-JAN-15	$ 114.12	01-APR-15	$ 117.76
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$104.21	01-JUL-11	$104.21	01-JUL-11	$ 104.21	01-JAN-15	$ 106.06	01-APR-15	$ 107.92
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$108.23	01-JUL-11	$108.23	01-JUL-11	$ 108.23	01-JAN-15	$ 112.47	01-APR-15	$ 116.71
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$108.23	01-JUL-11	$108.23	01-JUL-11	$ 108.23	01-JAN-15	$ 111.87	01-APR-15	$ 115.52
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$108.23	01-JUL-11	$108.23	01-JUL-11	$ 108.23	01-JAN-15	$ 112.47	01-APR-15	$ 116.71
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.94	01-JUL-11	$110.94	01-JUL-11	$ 110.94	01-JAN-15	$ 115.18	01-APR-15	$ 119.43
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.11	01-JUL-11	$110.11	01-JUL-11	$ 110.11	01-JAN-15	$ 113.75	01-APR-15	$ 117.39
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$109.16	01-JUL-11	$109.16	01-JUL-11	$ 109.16	01-JAN-15	$ 112.80	01-APR-15	$ 116.45
HAMISPIK OF ORANGE CO HCBS 9	141711583	02889834	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$107.00	01-JUL-11	$107.00	01-JUL-11	$ 107.00	01-JAN-15	$ 110.64	01-APR-15	$ 114.28
HERKIMER CO CHAP NYSARC HCBS4	160973231	01790918	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$63.99	01-APR-12	$63.99	01-APR-12	$ 63.99	01-JAN-15	$ 65.03	01-APR-15	$ 66.07
HUMAN FIRST INC HCBS 3	113590136	02991519	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-MAY-13	66.22	01-MAY-13	$ 66.22	01-MAY-13	$ 66.22
HUMANITARIN ORG MULTI EX HCBS	161425108	01494504	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$71.54	01-APR-12	$71.54	01-APR-12	$ 71.54	01-JAN-15	$ 72.91	01-APR-15	$ 74.28
IBERO-AMERICAN LEAGUE HCBS 2	160954745	01779400	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$72.98	01-JUL-11	$72.98	01-JUL-11	$ 72.98	01-JAN-15	$ 73.88	01-APR-15	$ 74.79
IBERO-AMERICAN LEAGUE HCBS 2	160954745	01779400	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$74.67	01-JUL-11	$74.67	01-JUL-11	$ 74.67	01-JAN-15	$ 75.58	01-APR-15	$ 76.49
LIBERTY/MONTGOMERY ARC HCBS 2	141506257	01750518	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$71.12	01-APR-12	$71.12	01-APR-12	$ 71.12	01-JAN-15	$ 71.85	01-APR-15	$ 72.57
LIFETIME ASSIST INC HCBS 17	222221158	02377168	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$65.43	01-JUL-11	$65.43	01-JUL-11	$ 65.43	01-JAN-15	$ 66.79	01-APR-15	$ 68.16
LIFETIME ASSIST INC HCBS 18	222221158	02492482	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.77	01-JUL-11	$64.77	01-JUL-11	$ 64.77	01-JAN-15	$ 64.77	01-APR-15	$ 64.77
LIFETIME ASSISTANCE HCBS 2	222221158	01736841	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$100.36	07-MAR-13	$100.36	01-JAN-14	$ 100.36	01-JAN-15	$ 101.27	01-APR-15	$ 102.18
LIFETIME ASSISTANCE HCBS 2	222221158	01736841	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$66.32	01-JUL-11	$66.32	01-JUL-11	$ 66.32	01-JAN-15	$ 67.66	01-APR-15	$ 69.00
LIFETIME ASSISTANCE HCBS 2	222221158	01736841	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$82.07	01-JUL-11	$82.07	01-JUL-11	$ 82.07	07-JUL-14	$ -	07-JUL-14	$ -
LIFETIME ASSISTANCE HCBS 2	222221158	01736841	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$85.30	01-JUL-11	$85.30	02-OCT-13	$ -	02-OCT-13	$ -	02-OCT-13	$ -
LIFETIME ASSISTANCE HCBS 22	222221158	02737433	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$72.20	01-JUL-11	$72.20	01-JUL-11	$ 72.20	01-JAN-15	$ 73.58	01-APR-15	$ 74.96
LIFETIME ASSISTANCE HCBS 22	222221158	02737433	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$82.04	01-JUL-11	$82.04	01-JUL-11	$ 82.04	01-JAN-15	$ 84.68	01-APR-15	$ 87.31
LIFETIME ASSISTANCE HCBS 24	222221158	02934554	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$67.64	01-JUL-11	$67.64	01-JUL-11	$ 67.64	01-JAN-15	$ 67.64	01-APR-15	$ 67.64
LIFETIME ASSISTANCE HCBS 24	222221158	02889843	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$92.49	01-JUL-11	$92.49	01-JUL-11	$ 92.49	04-AUG-14	$ -	04-AUG-14	$ -
LIFETIME ASSISTANCE HCBS 26	222221158	03036160	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.41	01-JUL-11	$64.41	01-JUL-11	$ 64.41	01-JAN-15	$ 65.79	01-APR-15	$ 67.17
LIFETIME ASSISTANCE HCBS27	222221158	03423407	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUN-2011	$66.58	01-JUN-11	$66.58	01-JUN-11	$ 66.58	01-JAN-15	$ 67.94	01-APR-15	$ 69.30
LIFETIME ASSISTANCE HCBS27	222221158	03423407	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-AUG-2011	$67.74	01-AUG-11	$67.74	01-AUG-11	$ 67.74	01-JAN-15	$ 68.67	01-APR-15	$ 69.59
LIFETIME ASSISTANCE HCBS27	222221158	03423407	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUN-2011	$67.34	01-JUN-11	$67.34	01-JUN-11	$ 67.34	01-JAN-15	$ 68.26	01-APR-15	$ 69.18
LIFETIME ASSISTANCE HCBS27	222221158	03423407	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	04-FEB-2011	$58.91	08-MAR-13	$0.00	08-MAR-13	$ -	08-MAR-13	$ -	08-MAR-13	$ -
LIFETIME ASSISTANCE HCBS27	222221158	03423407	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUN-2011	$61.52	01-JUN-11	$61.52	01-JUN-11	$ 61.52	01-JAN-15	$ 62.44	01-APR-15	$ 63.36

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT
LIFETIME ASSISTANCE HCBS27	222221158	03423407	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUN-2011	$61.69	01-JUN-11	$61.69	01-JUN-11	$ 61.69	01-JAN-15	$ 62.61	01-APR-15	$ 63.53
LIFETIME ASSISTANCE HCBS27	222221158	03423407	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUN-2011	$61.35	01-JUN-11	$61.35	19-MAY-14	$ 78.68	01-JAN-15	$ 79.60	01-APR-15	$ 80.52
LIFETIME ASSISTANCE HCBS27	222221158	03423407	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	02-DEC-2011	$57.88	02-DEC-11	$57.88	02-DEC-11	$ 57.88	01-JAN-15	$ 59.26	01-APR-15	$ 60.64
LIFETIME ASSISTANCE HCBS27	222221158	03423407	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	07-MAY-2012	$64.81	07-MAY-12	$64.81	07-MAY-12	$ 64.81	01-JAN-15	$ 65.74	01-APR-15	$ 66.68
LIFETIME ASSISTANCE HCBS27	222221158	03423407	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			02-NOV-12	64.77	02-NOV-12	$ 64.77	01-JAN-15	$ 64.77	01-APR-15	$ 64.77
LIFETIME ASSISTANCE HCBS27	222221158	03423407	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-JAN-13	103.15	01-JAN-13	$ 103.15	01-JAN-15	$ 104.08	01-APR-15	$ 105.02
LIFETIME ASSISTANCE HCBS27	222221158	03423407	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-JAN-13	103.15	01-JAN-13	$ 103.15	01-JAN-15	$ 104.08	01-APR-15	$ 105.02
LIFETIME ASSISTANCE INC HCBS3	222221158	01739697	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$88.28	01-APR-12	$88.28	01-APR-12	$ 88.28	01-JAN-15	$ 91.35	01-APR-15	$ 94.42
LIFETIME ASSISTANCE INC HCBS3	222221158	01739697	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$84.76	01-JUL-11	$84.76	01-JUL-11	$ 84.76	01-JAN-15	$ 87.83	01-APR-15	$ 90.90
LIFETIME ASSISTANCE INC HCBS5	222221158	01805701	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$79.02	01-JUL-11	$79.02	01-JUL-11	$ 79.02	01-JAN-15	$ 81.66	01-APR-15	$ 84.29
LIFETIME ASSISTANCE INC HCBS6	222221158	01871383	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							01-JAN-15	97.56	01-APR-15	$ 100.63
LIFETIME ASSISTANCE INC HCBS9	222221158	01972949	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$60.64	01-JUL-11	$60.64	01-JUL-11	$ 60.64	01-JAN-15	$ 60.64	01-APR-15	$ 60.64
LITL FLOWER CHILD SVC NY HCBS	111633572	01494875	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$65.07	01-APR-12	$65.07	01-APR-12	$ 65.07	01-JAN-15	$ 66.70	01-APR-15	$ 68.33
LITL FLOWER CHILD SVC NY HCBS	111633572	01494875	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$47.69	01-APR-12	$47.69	01-APR-12	$ 47.69	01-JAN-15	$ 48.80	01-APR-15	$ 49.90
MADISON-CORTLAND NYSARC HCBS2	160958020	01750605	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$78.51	01-APR-12	$78.51	01-APR-12	$ 78.51	01-JAN-15	$ 79.60	01-APR-15	$ 80.69
MARANATHA HUMAN SVCS INC HCBS	141755068	01492277	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$90.25	01-APR-12	$90.25	01-APR-12	$ 90.25	01-JAN-15	$ 92.18	01-APR-15	$ 94.10
NYS ARC INC CATTARAUG HCBS 10	160818293	02625414	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$80.28	01-JUL-11	$80.28	01-JUL-11	$ 80.28	01-JAN-15	$ 83.07	01-APR-15	$ 85.86
NYS ARC INC CATTARAUG HCBS 10	160818293	02625414	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$55.90	01-JUL-11	$55.90	01-JUL-11	$ 55.90	01-JAN-15	$ 55.90	01-APR-15	$ 55.90
NYS ARC INC CATTARAUG HCBS 10	160818293	02625414	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$58.21	01-JUL-11	$58.21	01-JUL-11	$ 58.21	01-JAN-15	$ 58.21	01-APR-15	$ 58.21
NYS ARC INC CATTARAUG HCBS 10	160818293	02625414	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$81.85	01-JUL-11	$81.85	01-JUL-11	$ 81.85	01-JAN-15	$ 81.85	01-APR-15	$ 81.85
NYS ARC INC CATTARAUG HCBS 10	160818293	02625414	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$56.54	01-JUL-11	$56.54	01-JUL-11	$ 56.54	01-JAN-15	$ 57.50	01-APR-15	$ 58.46
NYS ARC INC CATTARAUG HCBS 10	160818293	02625414	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$63.49	01-JUL-11	$63.49	01-JUL-11	$ 63.49	01-JAN-15	$ 63.49	01-APR-15	$ 63.49
NYS ARC INC CATTARAUG HCBS 2	160818293	01736456	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$39.79	01-JUL-11	$39.79	01-JUL-11	$ 39.79	01-JAN-15	$ 40.75	01-APR-15	$ 41.70
NYS ARC INC CATTARAUG HCBS 3	160818293	01736474	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$44.69	01-JUL-11	$44.69	01-JUL-11	$ 44.69	01-JAN-15	$ 44.69	01-APR-15	$ 44.69
NYS ARC INC CATTARAUG HCBS 3	160818293	01736474	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$39.79	01-JUL-11	$39.79	01-JUL-11	$ 39.79	01-JAN-15	$ 40.75	01-APR-15	$ 41.70
NYS ARC INC CATTARAUG HCBS 4	160818293	01736492	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$39.79	01-JUL-11	$39.79	01-JUL-11	$ 39.79	01-JAN-15	$ 40.75	01-APR-15	$ 41.70
NYS ARC INC CATTARAUG HCBS 7	160818293	01746363	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$42.56	01-JUL-11	$42.56	01-JUL-11	$ 42.56	01-JAN-15	$ 43.51	01-APR-15	$ 44.47
NYS ARC INC CATTARAUG HCBS 7	160818293	01746363	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$54.09	01-JUL-11	$54.09	01-JUL-11	$ 54.09	01-JAN-15	$ 55.49	01-APR-15	$ 56.89
NYS ARC INC CATTARAUG HCBS 8	160818293	02000282	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$63.48	01-JUL-11	$63.48	01-JUL-11	$ 63.48	01-JAN-15	$ 64.43	01-APR-15	$ 65.38
NYS ARC INC CATTARAUG HCBS 8	160818293	02000282	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$56.97	01-JUL-11	$56.97	01-JUL-11	$ 56.97	01-JAN-15	$ 57.91	01-APR-15	$ 58.86
NYS ARC INC CATTARAUG HCBS 8	160818293	02000282	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$62.63	01-JUL-11	$62.63	01-JUL-11	$ 62.63	01-JAN-15	$ 63.58	01-APR-15	$ 64.52
NYS ARC INC CATTARAUG HCBS 9	160818293	02255503	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$57.73	01-JUL-11	$57.73	01-JUL-11	$ 57.73	01-JAN-15	$ 58.68	01-APR-15	$ 59.63
NYS ARC INC CATTARAUG HCBS 9	160818293	02255503	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$58.69	01-JUL-11	$58.69	01-JUL-11	$ 58.69	01-JAN-15	$ 59.64	01-APR-15	$ 60.59
NYS ARC INC CATTARAUG HCBS 9	160818293	02255503	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$83.28	01-JUL-11	$83.28	01-JUL-11	$ 83.28	01-JAN-15	$ 84.24	01-APR-15	$ 85.20
NYSARC NIAGARA CO HCBS 7	160794847	02711622	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$63.38	01-JUL-11	$63.38	01-JUL-11	$ 63.38	01-JAN-15	$ 64.37	01-APR-15	$ 65.36
NYSARC NIAGARA CO HCBS 7	160794847	02711622	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-NOV-2011	$64.00	01-NOV-11	$64.00	01-NOV-11	$ 64.00	01-JAN-15	$ 63.26	01-APR-15	$ 63.26
ONTARIO ARC HCBS 12	160786219	02973811	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$61.63	01-JUL-11	$61.63	01-JUL-11	$ 61.63	01-JAN-15	$ 62.54	01-APR-15	$ 63.45
ONTARIO ARC HCBS 3	160786219	01978409	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$77.71	01-JUL-11	$77.71	01-JUL-11	$ 77.71	01-JAN-15	$ 78.62	01-APR-15	$ 79.53
PEOPLE INC HCBS 11	160975538	02711604	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$56.00	01-APR-12	$56.00	01-APR-12	$ 56.00	01-JAN-15	$ 56.00	01-APR-15	$ 56.00
PEOPLE INC HCBS 11	160975538	02711604	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$71.27	01-JUL-11	$71.27	01-JUL-11	$ 71.27	01-JAN-15	$ 72.17	01-APR-15	$ 73.08
PEOPLE INC HCBS 11	160975538	02711604	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$65.98	01-JUL-11	$65.98	01-JUL-11	$ 65.98	01-JAN-15	$ 66.89	01-APR-15	$ 67.80
PEOPLE INC HCBS 12	160975538	02769708	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$82.16	01-JUL-11	$82.16	01-JUL-11	$ 82.16	01-JAN-15	$ 83.07	01-APR-15	$ 83.98
PEOPLE INC HCBS 12	160975538	02769708	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$61.28	01-APR-12	$61.28	01-APR-12	$ 61.28	01-JAN-15	$ 62.63	01-APR-15	$ 63.97
PEOPLE INC HCBS 12	160975538	02769708	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$76.88	01-JUL-11	$76.88	01-JUL-11	$ 76.88	01-JAN-15	$ 79.52	01-APR-15	$ 82.16
PEOPLE INC HCBS 12	160975538	02769708	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$69.88	01-JUL-11	$69.88	01-JUL-11	$ 69.88	01-JAN-15	$ 70.79	01-APR-15	$ 71.69
PEOPLE INC HCBS 12	160975538	02769708	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.20	01-JUL-11	$64.20	01-JUL-11	$ 64.20	01-JAN-15	$ 66.84	01-APR-15	$ 69.47
PEOPLE INC HCBS 12	160975538	02769708	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$70.61	01-JUL-11	$70.61	01-JUL-11	$ 70.61	01-JAN-15	$ 71.06	01-APR-15	$ 71.51
PEOPLE INC HCBS 12	160975538	02769708	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$37.33	01-JUL-11	$37.33	01-JUL-11	$ 37.33	01-JAN-15	$ 38.24	01-APR-15	$ 39.15
PEOPLE INC HCBS 13	160975538	02839081	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$46.77	01-JUL-11	$46.77	01-JUL-11	$ 46.77	01-JAN-15	$ 47.23	01-APR-15	$ 47.70

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT
PEOPLE INC HCBS 13	160975538	02839081	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-AUG-2011	$66.46	01-AUG-11	$66.46	01-AUG-11	$ 66.46	01-JAN-15	$ 67.39	01-APR-15	$ 68.31
PEOPLE INC HCBS 13	160975538	02839081	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUN-2012	$64.06	01-JUN-12	$64.06	01-JUN-12	$ 64.06	01-JAN-15	$ 65.43	01-APR-15	$ 66.80
PEOPLE INC HCBS 13	160975538	02839081	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	06-JAN-2012	$65.53	06-JAN-12	$65.53	06-JAN-12	$ 65.53	01-JAN-15	$ 65.53	01-APR-15	$ 65.53
PEOPLE INC HCBS 13	160975538	02839081	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	14-NOV-2012	$53.43	14-NOV-12	$53.43	14-NOV-12	$ 53.43	01-JAN-15	$ 53.89	01-APR-15	$ 54.35
PEOPLE INC HCBS 13	160975538	02839081	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-FEB-2013	$66.14	01-FEB-13	$66.14	01-FEB-13	$ 66.14	01-JAN-15	$ 66.14	01-APR-15	$ 66.14
PEOPLE INC HCBS 13	160975538	02839081	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	04-FEB-2013	$56.38	04-FEB-13	$56.38	04-FEB-13	$ 56.38	01-JAN-15	$ 57.31	01-APR-15	$ 58.23
PEOPLE INC HCBS 13	160975538	02839081	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					24-JUL-13	66.19	01-JAN-15	$ 67.12	01-APR-15	$ 68.04
PEOPLE SERVICE TO THE HCBS 10	160975538	02632915	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$56.67	01-JUL-11	$56.67	01-JUL-11	$ 56.67	01-JAN-15	$ 57.60	01-APR-15	$ 58.53
PEOPLE SERVICE TO THE HCBS 10	160975538	02632915	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$45.00	01-JUL-11	$45.00	01-JUL-11	$ 45.00	01-JAN-15	$ 45.93	01-APR-15	$ 46.86
PEOPLE SERVICE TO THE HCBS 10	160975538	02632915	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$67.19	08-SEP-12	$67.19	08-SEP-12	$ 67.19	01-JAN-15	$ 67.19	01-APR-15	$ 67.19
PEOPLE SERVICE TO THE HCBS 10	160975538	02632915	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$51.11	01-JUL-11	$51.11	01-JUL-11	$ 51.11	01-JAN-15	$ 52.48	01-APR-15	$ 53.85
PEOPLE SERVICE TO THE HCBS 10	160975538	02632915	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$66.86	01-JUL-11	$66.86	01-JUL-11	$ 66.86	01-JAN-15	$ 67.78	01-APR-15	$ 68.71
PEOPLE SERVICE TO THE HCBS 10	160975538	02632915	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$45.82	01-JUL-11	$45.82	01-JUL-11	$ 45.82	01-JAN-15	$ 45.82	01-APR-15	$ 45.82
PEOPLE SERVICE TO THE HCBS 9	160975538	02391817	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$45.00	01-JUL-11	$45.00	01-JUL-11	$ 45.00	01-JAN-15	$ 45.93	01-APR-15	$ 46.86
PEOPLE SERVICE TO THE HCBS 9	160975538	02391817	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$45.00	01-JUL-11	$45.00	01-JUL-11	$ 45.00	01-JAN-15	$ 48.13	01-APR-15	$ 51.26
PEOPLE SRVICE TO THE DD HCBS2	160975538	01737035	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							12-NOV-14	66.19	01-APR-15	$ 66.19
PEOPLE SRVICE TO THE DD HCBS2	160975538	01737035	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)										
PEOPLE SRVICE TO THE DD HCBS3	160975538	01737044	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					02-JAN-14	71.21	01-JAN-15	$ 71.22	01-APR-15	$ 71.22
PEOPLE SRVICE TO THE DD HCBS3	160975538	01737044	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							01-JAN-15	69.68	01-APR-15	$ 69.68
PROV HAMASPIK ROCKLAND HCBS7	133978518	02749677	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.58	01-JUL-11	$110.58	01-JUL-11	$ 110.58	01-JAN-15	$ 114.22	01-APR-15	$ 117.86
PROV HAMASPIK ROCKLAND HCBS7	133978518	02749677	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$112.11	01-JUL-11	$112.11	01-JUL-11	$ 112.11	01-JAN-15	$ 115.75	01-APR-15	$ 119.40
PROVIDER HAMASPIK RCKLD HCBS6	133978518	02625423	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	24-JUN-2005	$91.98	24-JUN-05	$91.98	24-JUN-05	$ 91.98	24-JUN-05	$ 91.98	24-JUN-05	$ 91.98
PROVIDER HAMASPIK RCKLD HCBS6	133978518	02625423	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$115.76	01-JUL-11	$115.76	01-JUL-11	$ 115.76	01-JAN-15	$ 119.41	01-APR-15	$ 123.05
PROVIDER HAMASPIK RCKLD HCBS6	133978518	02625423	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$111.54	01-JUL-11	$111.54	01-JUL-11	$ 111.54	01-JAN-15	$ 115.18	01-APR-15	$ 118.83
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-SEP-2011	$105.64	01-SEP-11	$105.64	01-SEP-11	$ 105.64	01-JAN-15	$ 109.28	01-APR-15	$ 112.93
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-SEP-2011	$105.64	01-SEP-11	$105.64	01-SEP-11	$ 105.64	01-JAN-15	$ 85.84	01-APR-15	$ 87.69
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-NOV-12	104.25	01-NOV-12	$ 104.25	01-JAN-15	$ 107.89	01-APR-15	$ 111.54
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-NOV-12	105.18	01-NOV-12	$ 105.18	01-JAN-15	$ 108.83	01-APR-15	$ 112.47
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-FEB-13	105.18	01-FEB-13	$ 105.18	01-JAN-15	$ 105.18	01-APR-15	$ 105.18
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					06-DEC-13	105.99	01-JAN-15	$ 109.64	01-APR-15	$ 113.29
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-SEP-13	105.08	01-JAN-15	$ 108.73	01-APR-15	$ 112.37
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-SEP-13	104.97	01-JAN-15	$ 108.61	01-APR-15	$ 112.26
PROVIDER HAMASPIK ROCKLAND HCBS 9	133978518	03288213	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							18-DEC-14	105.3	01-APR-15	$ 105.30
PROVIDER HAMASPIK ROCKLD HCB2	133978518	02012004	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-SEP-2012	$122.62	01-SEP-12	$122.62	01-SEP-12	$ 122.62	01-JAN-15	$ 125.67	01-APR-15	$ 128.72
PROVIDER HAMASPIK ROCKLD HCBS	133978518	01776049	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$131.30	01-APR-12	$131.30	01-APR-12	$ 131.30	01-JAN-15	$ 133.60	01-APR-15	$ 135.90
PROVIDER HAMASPIK ROCKLD HCBS	133978518	01776049	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JAN-2012	$133.18	01-JAN-13	$133.18	01-JAN-13	$ 133.18	01-JAN-15	$ 136.38	01-APR-15	$ 139.58
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.46	01-JUL-11	$110.46	01-JUL-11	$ 110.46	01-JAN-15	$ 114.10	01-APR-15	$ 117.75
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$114.99	01-JUL-11	$114.99	01-JUL-11	$ 114.99	01-JAN-15	$ 119.23	01-APR-15	$ 123.48
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$114.53	01-JUL-11	$114.53	01-JUL-11	$ 114.53	01-JAN-15	$ 118.17	01-APR-15	$ 121.82
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$110.80	01-JUL-11	$110.80	01-JUL-11	$ 110.80	01-JAN-15	$ 114.44	01-APR-15	$ 118.08
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$111.80	01-JUL-11	$111.80	01-JUL-11	$ 111.80	01-JAN-15	$ 116.04	01-APR-15	$ 120.29
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$85.42	01-JUL-11	$85.42	01-JUL-11	$ 85.42	01-JAN-15	$ 89.06	01-APR-15	$ 92.70
PROVIDER HAMASPIK-ROCKLAND COHCBS 8	133978518	02934238	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$103.53	01-JUL-11	$103.53	01-JUL-11	$ 103.53	01-JAN-15	$ 107.17	01-APR-15	$ 110.81
PROVIDER-HAMASPIK KINGS HCBS1	161522895	01756394	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$99.51	01-APR-12	$99.51	01-APR-12	$ 99.51	01-JAN-15	$ 101.63	01-APR-15	$ 103.75
RAYIM OF HUDSON VALLEY HCBS6	562331735	02751628	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-FEB-2007	$92.73	01-FEB-07	$92.73	01-FEB-07	$ 92.73	01-FEB-07	$ 92.73	01-FEB-07	$ 92.73
RAYIM OF HUDSON VALLEY INC	562331735	02973802	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$93.06	01-JUL-11	$93.06	01-JUL-11	$ 93.06	01-JAN-15	$ 96.70	01-APR-15	$ 100.35
RAYIM OF HUDSON VALLEY INC	562331735	02973802	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$93.06	01-JUL-11	$93.06	01-JUL-11	$ 93.06	01-JAN-15	$ 96.70	01-APR-15	$ 100.35
RAYIM OF HUDSON VALLEY INC	562331735	02973802	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$92.34	01-JUL-11	$92.34	01-JUL-11	$ 92.34	01-JAN-15	$ 95.98	01-APR-15	$ 99.63
RAYIM OF HUDSON VALLEY INC	562331735	02973802	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-SEP-2012	$91.00	01-SEP-12	$91.00	01-SEP-12	$ 91.00	01-JAN-15	$ 94.64	01-APR-15	$ 98.29

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT
RAYIM OF HUDSON VALLEY INC	562331735	02973802	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-SEP-2012	$91.00	01-SEP-12	$91.00	01-SEP-12	$ 91.00	01-JAN-15	$ 94.64	01-APR-15	$ 98.29
RAYIM OF HUDSON VALLEY INC	562331735	02973802	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-FEB-13	67.38	01-FEB-13	$ 67.38	01-JAN-15	$ 69.24	01-APR-15	$ 71.09
RAYIM OF HV INC HCBS 9	562331735	03610542	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-JAN-13	92.33	01-JAN-13	$ 92.33	01-JAN-15	$ 94.19	01-APR-15	$ 96.05
RAYIM OF HV INC HCBS 9	562331735	03610542	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-MAR-13	92.33	01-MAR-13	$ 92.33	01-JAN-15	$ 92.34	01-APR-15	$ 92.34
RAYIM OF HV INC HCBS 9	562331735	03610542	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-JAN-13	92.33	01-JAN-13	$ 92.33	01-JAN-15	$ 92.34	01-APR-15	$ 92.34
RAYIM OF HV INC HCBS 9	562331735	03610542	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-SEP-13	92.33	01-JAN-15	$ 96.58	01-APR-15	$ 100.82
RAYIM OF HV INC HCBS 9	562331735	03610542	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-DEC-12	92.33	01-DEC-12	$ 92.33	01-JAN-15	$ 95.98	01-APR-15	$ 99.63
RAYIM OF HV INC HCBS 9	562331735	03610542	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-APR-14	92.33	01-JAN-15	$ 95.98	01-APR-15	$ 99.63
RAYIM OF HV INC HCBS 9	562331735	03610542	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					01-MAR-14	92.33	01-JAN-15	$ 95.98	01-APR-15	$ 99.63
SARATOGA COUNTY ARC HCBS	141465932	01494655	016	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$61.45	01-APR-12	$61.45	01-APR-12	$ 61.45	01-JAN-15	$ 62.16	01-APR-15	$ 62.87
SCHOHARIE CO CHAP NYSARC HCBS	141494347	01489541	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$43.86	01-APR-12	$43.86	01-APR-12	$ 43.86	01-JAN-15	$ 45.33	01-APR-15	$ 46.80
SINERGIA INC HCBS	133183344	01505288	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$85.59	01-JUL-11	$85.59	01-JUL-11	$ 85.59	01-JAN-15	$ 89.41	01-APR-15	$ 93.24
ST CHRISTOPHER OTTILIE HCBS	112777066	01491189	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$53.44	01-APR-12	$53.44	01-APR-12	$ 53.44	01-JAN-15	$ 54.50	01-APR-15	$ 55.56
ST CHRISTOPHER OTTILIE HCBS	112777066	01491189	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$64.76	01-APR-12	$64.76	01-APR-12	$ 64.76	01-JAN-15	$ 66.48	01-APR-15	$ 68.21
THE SALVATION ARMY SSC HCBS	135562351	01505279	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$83.33	01-APR-12	$83.33	01-APR-12	$ 83.33	01-JAN-15	$ 84.19	01-APR-15	$ 85.06
THE SALVATION ARMY SSC HCBS	135562351	01505279	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$58.84	01-APR-12	$58.84	01-APR-12	$ 58.84	01-JAN-15	$ 59.75	01-APR-15	$ 60.66
URBAN LEAGUE OF ROCH HCBS 6	160906150	02739348	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$81.30	01-APR-12	$81.30	01-APR-12	$ 81.30	01-JAN-15	$ 82.22	01-APR-15	$ 83.14
URBAN LEAGUE OF ROCH HCBS 7	160906150	02890935	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$64.10	01-JUL-11	$64.10	01-JUL-11	$ 64.10	01-JAN-15	$ 64.10	01-APR-15	$ 64.10
URBAN LEAGUE OF ROCHESTER INC HCB58	160906150	03053303	008	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			01-NOV-12	55.06	01-NOV-12	$ 55.06	01-JAN-15	$ 55.06	01-APR-15	$ 55.06
URBAN LEAGUE OF ROCHESTER INC HCB58	160906150	03053303	013	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)							10-JUL-14	58.11	10-JUL-14	$ 58.11
URBAN LEAGUE OF ROCHESTER INC HCBS8	160906150	03053303	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$62.00	01-JUL-11	$62.00	01-JUL-11	$ 62.00	01-JAN-15	$ 62.00	01-APR-15	$ 62.00
URBAN LEAGUE OF ROCHESTER INC HCBS8	160906150	03053303	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	17-MAY-2012	$52.48	17-MAY-12	$52.48	17-MAY-12	$ 52.48	01-JAN-15	$ 52.93	01-APR-15	$ 53.39
URBAN LEAGUE OF ROCHESTER INC HCBS8	160906150	03053303	009	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			03-JAN-13	61.39	03-JAN-13	$ 61.39	01-JAN-15	$ 62.30	01-APR-15	$ 63.21
URBAN LEAGUE OF ROCHESTER INC HCBS8	160906150	03053303	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					16-APR-14	62.65	01-JAN-15	$ 63.56	01-APR-15	$ 77.79
URBAN LEAGUE OF ROCHESTER INC HCBS8	160906150	03053303	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					12-MAY-14	89.08	01-JAN-15	$ 90.06	01-APR-15	$ 91.03
YATES CNTY CHAP NYSARC HCBS	161086091	01491010	011	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$66.51	08-MAR-13	$0.00	08-MAR-13	$ -	08-MAR-13	$ -	08-MAR-13	$ -
YATES CNTY CHAP NYSARC HCBS3	161086091	02055163	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$78.05	01-JUL-11	$78.05	30-SEP-13	$ -	30-SEP-13	$ -	30-SEP-13	$ -
YATES CNTY CHAP NYSARC HCBS4	161086091	02189999	005	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$50.73	01-JUL-11	$50.73	11-SEP-13	$ -	11-SEP-13	$ -	11-SEP-13	$ -
YATES CNTY CHAP NYSARC HCBS4	161086091	02189999	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$104.40	08-MAR-13	$0.00	08-MAR-13	$ -	08-MAR-13	$ -	08-MAR-13	$ -
YATES CNTY CHAP NYSARC HCBS4	161086091	02189999	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$67.09	08-MAR-13	$0.00	08-MAR-13	$ -	08-MAR-13	$ -	08-MAR-13	$ -
YATES CNTY CHAP NYSARC HCBS6	161086091	02786065	004	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$50.57	01-APR-12	$50.57	11-SEP-13	$ -	11-SEP-13	$ -	11-SEP-13	$ -
YATES CNTY CHAP NYSARC HCBS6	161086091	02786065	006	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$60.15	01-JUL-11	$60.15	01-JUL-13	$ -	01-JUL-13	$ -	01-JUL-13	$ -
YATES CNTY CHAP NYSARC HCBS6	161086091	02786065	007	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$55.67	01-JUL-11	$55.67	09-SEP-13	$ -	09-SEP-13	$ -	09-SEP-13	$ -
YEDEI CHESED INC HCBS	133728771	01494408	019	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$126.95	27-FEB-13	$126.96	27-FEB-13	$ 126.96	01-JAN-15	$ 129.28	01-APR-15	$ 131.61
YEDEI CHESED INC HCBS 5	133728771	02200140	003	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-APR-2012	$135.91	01-APR-12	$135.91	01-APR-12	$ 135.91	01-JAN-15	$ 137.90	01-APR-15	$ 139.89
YEDEI CHESED INC HCBS 6	133728771	02356669	020	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$116.61	01-JUL-11	$116.61	01-JUL-11	$ 116.61	01-JAN-15	$ 120.26	01-APR-15	$ 123.90
YEDEI CHESED INC HCBS 7	133728771	02604231	010	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$108.86	01-JUL-11	$108.86	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -
YEDEI CHESED INC HCBS 7	133728771	02604231	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$108.04	01-JUL-11	$108.04	01-SEP-13	$ -	01-SEP-13	$ -	01-SEP-13	$ -
YEDEI CHESED INC HCBS 7	133728771	02604231	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$114.95	01-JUL-11	$114.95	01-JUL-11	$ 114.95	01-JAN-15	$ 116.80	01-APR-15	$ 118.66
YEDEI CHESED INC HCBS 8	133728771	02785115	012	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$104.80	01-JUL-11	$104.80	01-JUL-11	$ 104.80	01-JAN-15	$ 106.06	01-APR-15	$ 107.32
YEDEI CHESED INC HCBS 8	133728771	02785115	014	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$109.34	01-JUL-11	$109.34	01-JUL-11	$ 109.34	01-JAN-15	$ 109.34	01-APR-15	$ 109.34
YEDEI CHESED INC HCBS 8	133728771	02785115	015	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)	01-JUL-2011	$103.26	01-JUL-11	$103.26	01-JUL-11	$ 103.26	01-JAN-15	$ 106.91	01-APR-15	$ 110.55
YEDEI CHESED INC HCBS 8	133728771	02785115	017	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)			27-FEB-13	102.73	27-FEB-13	$ 102.73	01-JAN-15	$ 106.98	01-APR-15	$ 111.22
YEDEI CHESED INC HCBS 8	133728771	02785115	018	4440	RES HAB; VOL; FMLY CARE; PER DIEM	DAY (1)					27-FEB-14	76.51	01-JAN-15	$ 80.76	01-APR-15	$ 85.00

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
A VERY SPECIAL PLACE INC RSP	133005006	02618037	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$14.42	01-JUL-11	$14.42	01-JUL-11	$ 14.42	01-JAN-15	$ 14.45	01-APR-15	$ 14.47	01-JUN-15	$ 11.47
A-1 UNIVERSAL CARE INC RSP	113247040	02597299	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.12	01-JUL-11	$7.12	01-JUL-11	$ 7.12	01-JAN-15	$ 7.16	01-APR-15	$ 7.21	01-JUN-15	$ 7.21
ABILITIES FIRST INC RSP	141467427	02618546	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$4.86	01-JAN-13	$4.86	01-JAN-13	$ 4.86	01-JAN-15	$ 4.94	01-APR-15	$ 5.02	01-JUN-15	$ 5.02
ABILITY BEYOND DISABILITY RSP	141758770	02657972	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.16	01-JUL-11	$6.16	01-JUL-11	$ 6.16	01-JAN-15	$ 6.27	01-APR-15	$ 6.38	01-JUN-15	$ 6.38
ABLE2 ENHANCING POTENTIAL,INC RSP	161091767	02593846	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.35	01-JUL-11	$6.35	01-JUL-11	$ 6.35	01-JAN-15	$ 6.39	01-APR-15	$ 6.42	01-JUN-15	$ 6.42
ACLD RSP	116042250	02599255	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.86	01-JUL-11	$8.86	01-JUL-11	$ 8.86	01-JAN-15	$ 8.97	01-APR-15	$ 9.08	01-JUN-15	$ 9.08
ADULT RETARDATES CENTER INC RSP	111986300	02974216	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.96	01-JUL-11	$4.96	01-JUL-11	$ 4.96	01-JAN-15	$ 5.04	01-APR-15	$ 5.12	01-JUN-15	$ 5.12
AGAPE PARENTS FELLOWSHIP RSP	112617454	02618064	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.39	01-JUL-11	$6.39	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
AHIVIM INC RSP	261488729	02952610	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.26	01-JUL-11	$5.26	01-JUL-11	$ 5.26	01-JAN-15	$ 5.35	01-APR-15	$ 5.45	01-JUN-15	$ 5.45
AIM SERVICES INC RSP	141609398	02597322	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.02	01-JUL-11	$5.02	01-JUL-11	$ 5.02	01-JAN-15	$ 5.09	01-APR-15	$ 5.17	01-JUN-15	$ 5.17
ALLEGANY CO CHAP NYSARC RSP	161021588	02610328	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$3.68	01-JAN-12	$3.68	01-JAN-12	$ 3.68	01-JAN-15	$ 3.73	01-APR-15	$ 3.78	01-JUN-15	$ 3.78
ALLEGANY REGIONAL DEV CORP RSP	161442959	03096462	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.17	01-JUL-11	$4.17	01-JUL-11	$ 4.17	01-JAN-15	$ 4.24	01-APR-15	$ 4.31	01-JUN-15	$ 4.31
ANGELS UNAWARE INC RSP	133753509	02599264	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$1.22	01-JUL-11	$1.22	01-JUL-11	$ 1.22	01-JAN-15	$ 1.22	01-APR-15	$ 1.22	01-JUN-15	$ 1.22
ANOTHER STEP INC RSP	133680851	02618082	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$5.88	01-JAN-12	$5.88	01-JAN-12	$ 5.88	01-JAN-15	$ 5.98	01-APR-15	$ 6.08	01-JUN-15	$ 6.08
ARISE CHILD AND FAMILY SER INC RSP	161186293	02949599	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.45	01-JUL-11	$6.45	01-JUL-11	$ 6.45	01-JAN-15	$ 6.54	01-APR-15	$ 6.62	01-JUN-15	$ 6.62
ASPIRE OF WNY FR ST FSR 1	160757756	02593915	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$6.30	01-JUL-11	$6.30	01-JUL-11	$ 6.30	01-JAN-15	$ 6.39	01-APR-15	$ 6.49	01-JUN-15	$ 6.49
ASPIRE OF WNY HRLY RSP	160757756	02591660	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.23	01-JUL-11	$4.23	01-JUL-11	$ 4.23	01-JAN-15	$ 4.30	01-APR-15	$ 4.38	01-JUN-15	$ 4.38
ASSN F/NEUR IMP BRAIN INJ RSP	112348663	02610337	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.14	01-JUL-11	$2.14	01-JUL-11	$ 2.14	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -
ASSOC FOR ADV BLIND/RET RSP	131968035	02591688	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$2.75	01-JUL-12	$2.75	01-JUL-12	$ 2.75	01-JAN-15	$ 2.77	01-APR-15	$ 2.80	01-JUN-15	$ 2.80
ASSOC FOR CHILDREN WITH DOWNS RSP	237175975	02935995	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.77	01-JUL-11	$4.77	01-JUL-11	$ 4.77	01-JAN-15	$ 4.83	01-APR-15	$ 4.89	01-JUN-15	$ 4.89
AUTISTIC SERVICES INC RSP	161185024	02595866	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.99	01-JUL-11	$4.99	01-JUL-11	$ 4.99	01-JAN-15	$ 5.08	01-APR-15	$ 5.17	01-JUN-15	$ 5.17
BADEN ST SETTLEMENT OF ROCH RSP	160743914	03094942	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.50	01-JUL-11	$2.50	01-JUL-11	$ 2.50	01-JAN-15	$ 2.54	01-APR-15	$ 2.57	01-JUN-15	$ 2.57
BAKER HALL RSP	161017453	02591697	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.84	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -
BATTENKILL COMM SVCS RSP	141810997	02597340	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.97	01-JUL-11	$4.97	01-JUL-11	$ 4.97	01-JAN-15	$ 5.01	01-APR-15	$ 5.06	01-JUN-15	$ 5.06
BEDFORD HAITIAN COMM CTR RSP	113142888	02599920	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$1.44	01-JUL-11	$1.44	01-JUL-13	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -
BEHAVORIAL SOLUTIONS NY INC RSP	452791214	03531188	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)			01-MAR-13	$5.24	01-MAR-13	$ 5.24	01-JAN-15	$ 5.32	01-APR-15	$ 5.41	01-JUN-15	$ 5.41
BELLPORT AREA COMM ACTION RSP	237376060	02620693	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$1.79	01-JUL-11	$1.79	01-JUL-11	$ 1.79	01-JAN-15	$ 1.79	01-APR-15	$ 1.79	01-JUN-15	$ 1.79
BIRCH FAMILY SVCS INC RSP	112503193	02610635	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.64	01-JUL-11	$3.64	01-JUL-13	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -
BLOCK INSTITUTE RSP	112416320	03036720	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.73	01-JUL-11	$5.73	01-JAN-14	$ 5.73	01-JAN-15	$ 5.78	01-APR-15	$ 5.85	01-JUN-15	$ 5.85
BORNHAVA RSP	161206389	02618106	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.02	01-JUL-11	$3.02	01-JUL-11	$ 3.02	01-JAN-15	$ 3.02	01-APR-15	$ 3.02	01-JUN-15	$ 3.02
BOYS & GIRLS CLUB BUFFALO RSP	160849516	02633296	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.22	01-JUL-11	$4.22	01-JUL-11	$ 4.22	01-JAN-15	$ 4.22	01-APR-15	$ 4.22	01-JUN-15	$ 4.22
BOYS AND GIRLS CLUBS OF ROCH RSP	161001619	03096646	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.90	01-JUL-11	$4.90	01-JUL-11	$ 4.90	01-JAN-15	$ 4.97	01-APR-15	$ 5.03	01-JUN-15	$ 5.03
BROOKLYN BUREAU OF COMM SVCS RSP	111630780	03118518	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.68	01-JUL-11	$5.68	01-JUL-11	$ 5.68	01-JAN-15	$ 5.74	01-APR-15	$ 5.79	01-JUN-15	$ 5.79
BROOKLYN SVCS F/AUTISTIC CIT RSP	112495998	03537813	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)					01-JUL-13	6.28	01-JAN-15	$ 6.33	01-APR-15	$ 6.39	01-JUN-15	$ 6.39
BROOKVILLE CTR FOR CHILDREN RSP	731662897	03094511	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$4.52	01-OCT-11	$4.52	01-OCT-11	$ 4.52	01-JAN-15	$ 4.57	01-APR-15	$ 4.61	01-JUN-15	$ 4.61
BROOME-TIOGA CO CHAP NYSARC RSP	150619307	02592501	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$3.33	01-JAN-12	$3.33	01-JAN-12	$ 3.33	01-JAN-15	$ 3.36	01-APR-15	$ 3.40	01-JUN-15	$ 3.40
CAMP VENTURE INC RSP	132661988	02595875	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$6.22	01-OCT-12	$6.22	01-JAN-14	$ 6.22	01-JAN-15	$ 6.29	01-APR-15	$ 6.36	01-JUN-15	$ 6.36
CARDINAL HAYES HM CHILD RSP	141395444	02610346	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$6.80	01-OCT-12	$6.80	01-JUL-13	$ 6.80	01-JAN-15	$ 6.86	01-APR-15	$ 6.92	01-JUN-15	$ 6.92
CATH CHAR NGHBHD SVCS INC RSP	112047151	02597359	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.66	01-JUL-11	$2.66	01-JUL-11	$ 2.66	01-JAN-15	$ 2.66	01-APR-15	$ 2.66	01-JUN-15	$ 2.66
CATH CHAR OF SYRACUSE RSP	150532085	02610373	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$4.63	01-JAN-12	$4.63	01-JAN-12	$ 4.63	01-JAN-15	$ 4.71	01-APR-15	$ 4.79	01-JUN-15	$ 4.79
CATHOLIC CHAR OF CHENANGO CO RSP	161307983	02949782	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$3.67	01-JAN-12	$3.67	01-JAN-12	$ 3.67	01-JAN-15	$ 3.73	01-APR-15	$ 3.79	01-JUN-15	$ 3.79
CATHOLIC CHARITIES DDS RSP	141340033	02610355	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.62	01-JUL-11	$5.62	01-JUL-11	$ 5.62	01-JAN-15	$ 5.72	01-APR-15	$ 5.81	01-JUN-15	$ 5.81
CATHOLIC GUARDIAN SOCIETY RSP	135562186	02599939	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.30	01-JUL-11	$8.30	01-JUL-11	$ 8.30	01-JAN-15	$ 8.30	01-APR-15	$ 8.30	01-JUN-15	$ 8.30
CATTARAUGUS CO NYSARC RSP	160818293	02591702	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.13	01-JUL-11	$4.13	01-JUL-11	$ 4.13	01-JAN-15	$ 4.20	01-APR-15	$ 4.27	01-JUN-15	$ 4.27
CAYUGA HOME FOR CHILDREN FSR1	150532087	02593951	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.46	01-JUL-11	$4.46	01-JAN-14	$ 4.46	01-JAN-15	$ 4.53	01-APR-15	$ 4.60	01-JUN-15	$ 4.60
CDS MONARCH INC RSP	161089115	03094502	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$11.39	01-JUL-11	$11.39	01-JUL-11	$ 11.39	01-JAN-15	$ 11.58	01-APR-15	$ 11.77	01-JUN-15	$ 11.77
CENTER F/DISAB SVCS FSR 1	141425851	02593979	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$5.19	01-JUL-11	$5.19	01-JUL-11	$ 5.19	01-JAN-15	$ 5.27	01-APR-15	$ 5.35	01-JUN-15	$ 5.35
CENTER F/DISAB SVCS FSR 2	141425851	02594021	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$5.01	01-JUL-11	$5.01	01-JUL-11	$ 5.01	01-JAN-15	$ 5.08	01-APR-15	$ 5.16	01-JUN-15	$ 5.16
CENTER F/DISAB SVCS RSP	141425851	02618202	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$5.52	01-JAN-12	$5.52	01-JAN-12	$ 5.52	01-JAN-15	$ 5.58	01-APR-15	$ 5.66	01-JUN-15	$ 5.66
CENTER FOR FAMILY SUPPORT RSP	131913807	02591720	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$4.89	01-JUL-12	$4.89	01-JUL-13	$ 4.89	01-JAN-15	$ 4.98	01-APR-15	$ 5.07	01-JUN-15	$ 5.07
CENTRO CIVICO AMSTERDAM RSP	222877236	02599948	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.76	01-JUL-11	$3.76	01-JUL-11	$ 3.76	01-JAN-15	$ 3.76	01-APR-15	$ 3.76	01-JUN-15	$ 3.76
CENTRO SOC LA ESPERANZA RSP	132688412	02592547	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$6.17	01-JUL-12	$6.17	01-JUL-13	$ 6.17	01-JAN-15	$ 6.20	01-APR-15	$ 6.22	01-JUN-15	$ 6.22
CEREBRAL PALSY OF WESTCHESTER RSP	131690769	02782438	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$7.95	01-APR-12	$7.95	01-JAN-14	$ 7.95	01-JAN-15	$ 8.04	01-APR-15	$ 8.13	01-JUN-15	$ 8.13

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
CHAUTAUQUA CO CHAP ARC RSP	160968914	02597762	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.14	01-JUL-11	$6.14	01-JUL-11	$ 6.14	01-JAN-15	$ 6.25	01-APR-15	$ 6.37	01-JUN-15	$ 6.37
CHAUTAUQUA OPPORTUNITIES INC RSP	160905222	03487652	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.76	01-JUL-11	$3.76	01-JUL-11	$ 3.76	01-JAN-15	$ 3.83	01-APR-15	$ 3.91	01-JUN-15	$ 3.91
CHEMLU DEV DISAB CTR RSP	352198039	02712389	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.25	01-JUL-11	$5.25	01-JUL-11	$ 5.25	01-JAN-15	$ 5.25	01-APR-15	$ 5.26	01-JUN-15	$ 5.26
CHEMUNG CO CHAP ARC RSP	160795709	02679234	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.29	01-JUL-11	$4.29	01-JUL-11	$ 4.29	01-JAN-15	$ 4.35	01-APR-15	$ 4.42	01-JUN-15	$ 4.42
CHENANGO CO CHAP NYSARC RSP	160970103	02622200	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.93	01-JUL-11	$5.93	01-JUL-11	$ 5.93	01-JAN-15	$ 5.98	01-APR-15	$ 6.05	01-JUN-15	$ 6.05
CHILD AND FAMILY SUPPORT SVCS RSP	810572473	02918490	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.31	01-JUL-11	$3.31	01-JUL-11	$ 3.31	01-JAN-15	$ 3.33	01-APR-15	$ 3.36	01-JUN-15	$ 3.36
CHILDRENS AID SOCIETY RSP	135562191	03045838	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.44	01-JUL-11	$4.44	01-JUL-11	$ 4.44	01-JAN-15	$ 4.44	01-APR-15	$ 4.45	01-JUN-15	$ 4.45
CHINESE AMERICAN PLANNING CNCL RSP	136202692	03131793	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$4.12	01-JUL-12	$4.12	01-JUL-12	$ 4.12	01-JAN-15	$ 4.17	01-APR-15	$ 4.22	01-JUN-15	$ 4.22
CITIZEN ADVOCATES INC RSP	141577715	02597368	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$5.19	01-NOV-11	$5.19	01-NOV-11	$ 5.19	01-JAN-15	$ 5.27	01-APR-15	$ 5.36	01-JUN-15	$ 5.36
CITY ACCESS NY INC RSP	203786663	03057614	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$8.73	01-JUL-12	$8.73	01-JUL-12	$ 8.73	01-JAN-15	$ 8.73	01-APR-15	$ 8.74	01-JUN-15	$ 8.74
CITY OF MT VERNON REC DEPT RSP	136007305	03436591	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$3.01	01-APR-12	$3.01	01-JAN-14	$ 3.20	01-JAN-15	$ 3.27	01-APR-15	$ 3.33	01-JUN-15	$ 3.33
CLADDAGH COMMISSION INC FSR 1	161096096	02600053	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.43	01-JAN-13	$4.43	01-JAN-13	$ 4.43	01-JAN-15	$ 4.49	01-APR-15	$ 4.56	01-JUN-15	$ 4.56
CLADDAGH COMMISSION INC FSR 2	161096096	03027956	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-SEP-2012	$4.98	01-JAN-13	$5.02	01-JAN-14	$ 5.02	01-JAN-15	$ 5.09	01-APR-15	$ 5.17	01-JUN-15	$ 5.17
CLADDAGH COMMISSION INC RSP	161096096	02595893	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$4.77	01-NOV-12	$4.77	01-NOV-12	$ 4.77	01-JAN-15	$ 4.84	01-APR-15	$ 4.92	01-JUN-15	$ 4.92
CLINTON CO CHAP NYSARC FSR 1	141463735	02594030	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$5.30	01-JUL-11	$5.30	01-JUL-11	$ 5.30	01-JAN-15	$ 5.38	01-APR-15	$ 5.45	01-JUN-15	$ 5.45
CLINTON CO CHAP NYSARC FSR 2	141463735	03187304	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$6.78	01-JUL-11	$6.78	01-JUL-11	$ 6.78	01-JAN-15	$ 6.85	01-APR-15	$ 6.93	01-JUN-15	$ 6.93
CLINTON CO CHAP NYSARC RSP	141463735	02618275	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$7.29	01-NOV-11	$7.29	01-NOV-11	$ 7.29	01-JAN-15	$ 7.39	01-APR-15	$ 7.50	01-JUN-15	$ 7.50
COMM ACTION/HUMAN SVCS RSP	222317376	02663918	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.34	01-JUL-11	$3.34	01-JUL-11	$ 3.34	01-JAN-15	$ 3.34	01-APR-15	$ 3.35	01-JUN-15	$ 3.35
COMM AID FOR RET CHILD RSP	136160907	02873958	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.53	01-JUL-11	$2.53	01-JUL-11	$ 2.53	01-JAN-15	$ 2.56	01-APR-15	$ 2.60	01-JUN-15	$ 2.60
COMM ASSOC PROGRESS DOM RSP	133266145	02599966	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.42	01-JUL-11	$3.42	01-JUL-13	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-APR-15	$ -
COMM PLACE GREATER ROCH RSP	161602979	02595935	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.78	01-JUL-11	$2.78	01-JUL-11	$ 2.78	01-JAN-15	$ 2.81	01-APR-15	$ 2.84	01-JUN-15	$ 2.84
COMM RES & SVC/CHILDREN RSP	113307991	02599273	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$7.79	01-APR-12	$7.79	01-JAN-14	$ 7.79	01-JAN-15	$ 7.82	01-APR-15	$ 7.84	01-JUN-15	$ 7.84
COMM SVCS F/T DEV DISABLD RSP	161317369	02591739	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.82	01-JAN-13	$5.15	01-JAN-14	$ 5.15	01-JAN-15	$ 5.22	01-APR-15	$ 5.29	01-JUN-15	$ 5.29
COMMUNITY ASSISTANCE RESOURCES RSP	203368734	02991904	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$6.64	01-SEP-12	$6.64	01-JAN-14	$ 6.64	01-JAN-15	$ 6.64	01-APR-15	$ 6.64	01-JUN-15	$ 6.64
COMMUNITY BASED SERVICES INC	133070655	03418715	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$6.12	01-JAN-13	$6.12	01-JAN-14	$ 6.12	01-JAN-15	$ 6.23	01-APR-15	$ 6.34	01-JUN-15	$ 6.34
COMMUNITY OPTIONS NY RSP	113414724	03084911	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$4.14	01-AUG-11	$4.14	01-AUG-11	$ 4.14	01-JAN-15	$ 4.20	01-APR-15	$ 4.26	01-JUN-15	$ 4.26
COMMUNITY RESOURCES RSP	135660279	02592565	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.38	01-JUL-11	$4.38	01-JUL-11	$ 4.38	01-JAN-15	$ 4.40	01-APR-15	$ 4.43	01-JUN-15	$ 4.43
COMMUNITY SERVICES FOR THE DD FSR 1	161317369	03561906	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)					01-APR-13	7.29	01-JAN-15	$ 7.39	01-APR-15	$ 7.50	01-JUN-15	$ 7.50
COMMUNITY WORK & INDEPEND RSP	141470091	02599282	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$9.10	01-JUL-11	$9.10	01-JUL-11	$ 9.10	01-JAN-15	$ 9.21	01-APR-15	$ 9.33	01-JUN-15	$ 9.33
CONTEMPORARY GUIDENCE SVCS INC RSP	132730776	03122130	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.94	01-JUL-11	$7.94	01-JUL-11	$ 7.94	01-JAN-15	$ 7.99	01-APR-15	$ 8.04	01-JUN-15	$ 8.04
CRADLE BEACH CAMP INC RSP	160743025	02680537	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$3.81	01-JAN-12	$3.81	01-JAN-12	$ 3.81	01-JAN-15	$ 3.88	01-APR-15	$ 3.95	01-JUN-15	$ 3.95
CRYSTAL RUN VILLAGE INC FSR 1	112466996	02610740	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$5.04	01-JUL-11	$5.04	01-JUL-11	$ 5.04	01-JAN-15	$ 5.12	01-APR-15	$ 5.20	01-JUN-15	$ 5.20
CRYSTAL RUN VILLAGE INC RSP	112466996	02610391	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.13	01-JUL-11	$5.13	01-JUL-11	$ 5.13	01-JAN-15	$ 5.22	01-APR-15	$ 5.32	01-JUN-15	$ 5.32
DAYSTAR FOR MED FRAGILE INFANTS RSP	263275794	03081367	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.25	01-JUL-11	$6.25	01-JUL-11	$ 6.25	01-JAN-15	$ 6.29	01-APR-15	$ 6.39	01-JUN-15	$ 6.39
DAZZLE SCHOOL VIS PERF ARTS INC RSP	161608166	02928765	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.92	01-JUL-11	$4.92	01-JUL-11	$ 4.92	01-JAN-15	$ 4.96	01-APR-15	$ 5.00	01-JUN-15	$ 5.00
DELAWARE CO CHAP NYSARC RSP	160976343	02591899	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$10.14	01-JAN-12	$10.14	01-JAN-12	$ 10.14	01-JAN-15	$ 10.27	01-APR-15	$ 10.41	01-JUN-15	$ 10.41
DELAWARE OPPORTUNITIES RSP	166063879	02620753	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.80	01-JUL-11	$4.80	01-JUN-13	$ 4.80	01-JAN-15	$ 4.89	01-APR-15	$ 4.98	01-JUN-15	$ 4.98
DEPAUL DEV SERVICES RSP	202017098	02734554	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.69	01-JUL-11	$4.69	01-JUL-11	$ 4.69	01-JAN-15	$ 4.76	01-APR-15	$ 4.85	01-JUN-15	$ 4.85
DEVELOPMENTAL DISAB INST RSP	116077347	02610406	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.80	01-JUL-11	$7.80	01-JAN-14	$ 7.80	01-JAN-15	$ 7.93	01-APR-15	$ 8.06	01-JUN-15	$ 8.06
DISABLED PERSONS ACTION FSR 1	222194058	02594094	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$2.87	01-JUL-11	$2.87	01-JUL-11	$ 2.87	01-JAN-15	$ 2.91	01-APR-15	$ 2.94	01-JUN-15	$ 2.94
DISABLED PERSONS ACTION FSR 2	222194058	02594109	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$2.87	01-JAN-13	$2.87	01-JAN-14	$ 2.87	01-JAN-15	$ 2.91	01-APR-15	$ 2.94	01-JUN-15	$ 2.94
DISABLED PERSONS ACTION FSR3	222194058	02687878	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-SEP-2012	$3.70	01-SEP-12	$3.70	01-SEP-12	$ 3.70	01-JAN-15	$ 3.75	01-APR-15	$ 3.79	01-JUN-15	$ 3.79
DISABLED PERSONS ACTION RSP	222194058	02599975	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$3.76	01-NOV-11	$3.76	01-MAR-14	$ 3.76	01-JAN-15	$ 3.79	01-APR-15	$ 3.83	01-JUN-15	$ 3.83
DUTCHESS CO NYSARL RESPITE	146077915	03094497	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$5.67	01-OCT-12	$5.67	01-OCT-12	$ 5.67	01-JAN-15	$ 5.75	01-APR-15	$ 5.83	01-JUN-15	$ 5.83
E DOUGLIN CTR/SERV PPLE RSP	113493474	02591784	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.29	01-JUL-11	$7.29	01-JUL-11	$ 7.29	01-JAN-15	$ 7.31	01-APR-15	$ 7.34	01-JUN-15	$ 7.34
EAST END DISABILITY ASSO FSR1	113318718	02594127	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$6.21	01-JAN-13	$6.21	01-JAN-14	$ 6.21	01-JAN-15	$ 6.30	01-APR-15	$ 6.39	01-JUN-15	$ 6.39
EAST END DISABILITY ASSOC INC FSR2	113318718	02939628	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$7.81	01-JAN-12	$7.81	01-JAN-12	$ 7.81	01-JAN-15	$ 7.90	01-APR-15	$ 8.02	01-JUN-15	$ 8.02
EAST END DISABILITY ASSOC RSP	113318718	02663963	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.65	01-JUL-11	$7.65	01-JUL-11	$ 7.65	01-JAN-15	$ 7.77	01-APR-15	$ 7.90	01-JUN-15	$ 7.90
EAST HARLEM COUN F/COMM RSP	132969933	02663927	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$2.98	01-APR-12	$2.98	01-JUL-13	$ 2.98	01-JAN-15	$ 2.98	01-APR-15	$ 2.98	01-JUN-15	$ 2.98
EASTER SEALS NEW YORK INC RSP	135596808	02599306	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$3.81	01-OCT-11	$3.81	01-JUL-13	$ 3.81	01-JAN-15	$ 3.85	01-APR-15	$ 3.89	01-JUN-15	$ 3.89
EDEN 11 SCHL AUT/CHILD RSP	132872916	02593364	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$6.52	01-SEP-11	$6.52	01-SEP-11	$ 6.52	01-JAN-15	$ 6.59	01-APR-15	$ 6.67	01-JUN-15	$ 6.67
EDEN II SCHOOL/AUTISTIC CHILD FSRI	132872916	03027438	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$9.42	01-JUL-12	$9.42	01-JUL-13	$ 9.42	01-JAN-15	$ 9.57	01-APR-15	$ 9.72	01-JUN-15	$ 9.72
EIHAB HUMAN SERVICES RSP	113376415	02599984	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.06	01-JUL-11	$3.06	01-JUL-11	$ 3.06	01-JAN-15	$ 3.09	01-APR-15	$ 3.12	01-JUN-15	$ 3.12

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ELMCREST CHILDRENS CTR FSR	150539090	02622306	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$6.93	01-JAN-13	$6.75	01-JAN-13	$ 6.75	01-JAN-15	$ 6.82	01-APR-15	$ 6.90	01-JUN-15	$ 6.90
ELMYS SPECIAL SERVICES RSP	020590957	02781042	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$7.88	01-NOV-12	$7.88	01-MAR-14	$ 7.94	01-JAN-15	$ 8.03	01-APR-15	$ 8.11	01-JUN-15	$ 8.11
ENABLE	150532247	03186014	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)							01-JAN-15	9.62	01-APR-15	$ 9.78	01-JUN-15	$ 9.78
EOC OF SUFFOLK INC RSP	112141197	02597395	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.89	01-JUL-11	$6.89	01-JUL-11	$ 6.89	01-JAN-15	$ 7.00	01-APR-15	$ 7.12	01-JUN-15	$ 7.12
EPILEPSY FOUNDATION OF LI RSP	111821135	02618308	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$6.18	01-SEP-12	$6.18	01-SEP-12	$ 6.18	01-JAN-15	$ 6.27	01-APR-15	$ 6.36	01-JUN-15	$ 6.36
EPILEPSY-PRALID INC RSP	161422825	03940943	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)							01-JAN-15	4.73	01-APR-15	$ 4.82	01-JUN-15	$ 4.82
ERIE COUNTY ARC RSP	160769044	02595999	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.19	01-JUL-11	$4.19	01-JUL-11	$ 4.19	01-JAN-15	$ 4.27	01-APR-15	$ 4.35	01-JUN-15	$ 4.35
ESSEX COUNTY CHAP NYSARC RSP	141563885	02599315	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$4.92	01-NOV-12	$4.92	01-JUN-14	$ 4.92	01-JAN-15	$ 5.00	01-APR-15	$ 5.08	01-JUN-15	$ 5.08
FAM EMPOWERMENT COUNCIL RSP	133751820	02596069	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$4.30	01-JAN-12	$4.30	01-JAN-12	$ 4.30	01-JAN-15	$ -	01-APR-15	$ -	01-APR-15	$ -
FAM RESID/ESSENTIAL ENT FSR 3	112420547	03016566	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$6.44	01-JUL-11	$6.44	01-JUL-11	$ 6.44	01-JAN-15	$ 6.52	01-APR-15	$ 6.63	01-JUN-15	$ 6.63
FAM RESID/ESSENTIAL ENT FSR 4	112420547	03118527	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$3.18	01-JAN-13	$3.18	01-JAN-14	$ 3.18	01-JAN-15	$ 3.22	01-APR-15	$ 3.27	01-JUN-15	$ 3.27
FAM RESID/ESSENTIAL ENT RSP	112420547	02663936	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.43	01-JUL-11	$4.43	01-JAN-14	$ 4.43	01-JAN-15	$ 4.48	01-APR-15	$ 4.53	01-JUN-15	$ 4.53
FAM RESID/ESSENTL ENT FSR 1	112420547	02594163	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$8.94	01-JAN-13	$8.94	01-JAN-14	$ 8.94	01-JAN-15	$ 9.05	01-APR-15	$ 9.19	01-JUN-15	$ 9.19
FAM RESID/ESSENTL ENT FSR 2	112420547	02594287	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.24	01-JUL-11	$4.24	01-JUL-11	$ 4.24	01-JAN-15	$ 4.31	01-APR-15	$ 4.37	01-JUN-15	$ 4.37
FAMILY & CHILD SVC RSP	141338397	02599333	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.61	01-JUL-11	$5.61	01-JUL-11	$ 5.61	01-JAN-15	$ 5.69	01-APR-15	$ 5.78	01-JUN-15	$ 5.78
FED EMPLOY & GUID SVC RSP	131624000	02610433	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$9.18	01-JUL-12	$9.18	01-JUL-13	$ 9.18	01-JAN-15	$ 9.18	01-APR-15	$ -	01-APR-15	$ -
FEDERATION OF MULTI ORG FSR 1	112422505	02618431	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$2.31	01-JUL-11	$2.31	01-JUL-11	$ 2.31	01-JAN-15	$ 2.35	01-APR-15	$ 2.38	01-JUN-15	$ 2.38
FINGER LAKES UCP INC RSP	160965912	02610442	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$5.27	01-JAN-12	$5.27	01-JAN-12	$ 5.27	01-JAN-15	$ 5.31	01-APR-15	$ 5.34	01-JUN-15	$ 5.34
FINGERLAKES PARENT NTWRK RSP	161450537	02622195	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$7.47	01-JAN-12	$7.47	01-JAN-14	$ 7.47	01-JAN-15	$ 7.47	01-APR-15	$ 7.47	01-JUN-15	$ 7.47
FRANKLIN CO NYSARC RSP	237150954	02618573	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$5.04	01-NOV-11	$5.04	01-NOV-11	$ 5.04	01-JAN-15	$ 5.14	01-APR-15	$ 5.23	01-JUN-15	$ 5.23
FRANZISKA RACKER CTR INC FSR1	150581887	03370463	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$8.02	01-JAN-13	$8.02	01-JAN-13	$ 8.02	01-JAN-15	$ 8.12	01-APR-15	$ 8.23	01-JUN-15	$ 8.23
FRANZISKA RACKER CTR RSP	150581887	02599993	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$7.62	01-JAN-12	$7.62	01-JAN-12	$ 7.62	01-JAN-15	$ 7.72	01-APR-15	$ 7.83	01-JUN-15	$ 7.83
FULTON CO CHAP NYSARC RSP	146020996	02599351	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$5.09	01-JAN-13	$5.09	01-JAN-14	$ 5.09	01-JAN-15	$ 5.15	01-APR-15	$ 5.22	01-JUN-15	$ 5.22
GENERAL HUMAN OUTREACH RESPITE	113134570	03094451	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$11.55	01-JUL-11	$11.55	01-JUL-11	$ 11.55	01-JAN-15	$ 11.58	01-APR-15	$ 11.65	01-JUN-15	$ 11.65
GENESEE CO ARC RSP	161001185	02839921	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$4.82	01-JAN-12	$4.82	01-JAN-14	$ 4.82	01-JAN-15	$ 4.91	01-APR-15	$ 5.00	01-JUN-15	$ 5.00
GOODWILL INDUSTRIES OF GREATER NY I	131641068	03809221	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)									01-APR-15	9.18	01-JUN-15	$ 9.18
GRACE COMMUNITY SERVICES	161554927	03758945	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)					01-JAN-14	6.62	01-JAN-15	$ 6.72	01-APR-15	$ 6.82	01-JUN-15	$ 6.82
GREENBURGH PARKS AND REC RSP	136007293	03436486	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$4.95	01-APR-12	$4.95	01-APR-12	$ 4.95	01-JAN-15	$ 5.03	01-APR-15	$ 5.11	01-JUN-15	$ 5.11
GREYSTONE PROGRAMS INC RSP	141608318	02596087	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2012	$4.25	01-DEC-12	$4.25	01-DEC-12	$ 4.25	01-JAN-15	$ 4.31	01-APR-15	$ 4.37	01-JUN-15	$ 4.37
GUILD F/EXCEPTIONAL CHILD RSP	116037766	02599360	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.82	01-JUL-11	$5.82	01-JUL-11	$ 5.82	01-JAN-15	$ 5.82	01-APR-15	$ 5.82	01-JUN-15	$ 5.82
HAITIAN AMER UN/PROGR RSP	112423857	02593382	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.85	01-JUL-11	$3.85	01-JUL-11	$ 3.85	01-JAN-15	$ 3.88	01-APR-15	$ 3.92	01-JUN-15	$ 3.92
HAMASPIK OF ORANGE CO RSP	141711583	02596330	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.64	01-JUL-11	$4.64	01-MAR-14	$ 4.64	01-JAN-15	$ 4.66	01-APR-15	$ 4.68	01-JUN-15	$ 4.68
HAND IN HAND FAM/SVCS RSP	204157876	02784834	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.11	01-JUL-11	$3.11	01-JUL-11	$ 3.11	01-JAN-15	$ 3.14	01-APR-15	$ 3.17	01-JUN-15	$ 3.17
HANDICAPPED CHILD ASSOC FSRI	150516395	02722705	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$4.23	01-JAN-12	$4.23	01-JAN-14	$ 4.23	01-JAN-15	$ 4.28	01-APR-15	$ 4.34	01-JUN-15	$ 4.34
HANDICAPPED CHILD ASSOC RSP	150516395	02591817	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.74	01-JUL-11	$4.74	01-JUL-11	$ 4.74	01-JAN-15	$ 4.79	01-APR-15	$ 4.85	01-JUN-15	$ 4.85
HASC CENTER FSR 1	112630071	03209890	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$5.54	01-JUL-12	$5.54	01-JUL-12	$ 5.54	01-JAN-15	$ 5.63	01-APR-15	$ 5.74	01-JUN-15	$ 5.74
HASC CENTER INC RSP	112630071	02610479	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.60	01-JUL-12	$4.07	01-JAN-14	$ 4.02	01-JAN-15	$ 4.05	01-APR-15	$ 4.09	01-JUN-15	$ 4.09
HAWTHORNE FOUNDATION INC RSP	133447893	02596096	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.46	01-JUL-11	$4.46	01-JUL-11	$ 4.46	01-JAN-15	$ 4.46	01-APR-15	$ 4.46	01-JUN-15	$ 4.46
HEAD INJURY ASSOCIATION INC RSP	112946185	03082551	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$9.48	01-JUL-11	$9.48	01-JUL-11	$ 9.48	01-JAN-15	$ 9.59	01-APR-15	$ 9.71	01-JUN-15	$ 9.71
HEARTSHARE HUMAN SERVICES FSR1	111633549	03369968	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$6.36	01-JUL-12	$6.36	01-JUL-13	$ 6.36	01-JAN-15	$ 6.44	01-APR-15	$ 6.53	01-JUN-15	$ 6.53
HEARTSHARE HUMAN SERVICES RSP	111633549	02591826	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$9.53	01-JUL-12	$9.53	01-JUL-12	$ 9.53	01-JAN-15	$ 9.60	01-APR-15	$ 9.67	01-JUN-15	$ 9.67
HEAVENS HANDS COMM SVCS RSP	200225064	02811961	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.49	01-JUL-11	$5.49	01-JAN-14	$ 5.42	01-JAN-15	$ 7.16	01-APR-15	$ 7.27	01-JUN-15	$ 7.27
HEBREW ACAD/SPEC CHLDRN RSP	112107335	02680660	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.52	01-JUL-11	$2.52	01-JUL-11	$ 2.52	01-JAN-15	$ 2.54	01-APR-15	$ 2.57	01-JUN-15	$ 2.57
HEBREW EDUCATIONAL SOCIETY RSP	111642720	03101186	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2012	$5.15	01-FEB-13	$5.15	01-JUL-13	$ 5.15	01-JAN-15	$ 5.15	01-APR-15	$ 5.15	01-JUN-15	$ 5.15
HERITAGE CHRISTIAN FSR 1	222334190	02594301	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.35	01-OCT-12	$4.35	01-OCT-12	$ 4.35	01-JAN-15	$ 4.42	01-APR-15	$ 4.49	01-JUN-15	$ 4.49
HERITAGE CHRISTIAN FSR 2	222334190	02594310	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.07	01-OCT-12	$4.07	01-OCT-12	$ 4.07	01-JAN-15	$ 4.13	01-APR-15	$ 4.20	01-JUN-15	$ 4.20
HERITAGE CHRISTIAN SVCS RSP	222334190	02596110	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$7.11	01-JAN-13	$7.11	01-JAN-14	$ 7.11	01-JAN-15	$ 7.21	01-APR-15	$ 7.32	01-JUN-15	$ 7.32
HERITAGE FARM INC FSR 1	161250913	02610759	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$4.03	01-JAN-13	$4.03	01-JAN-14	$ 4.03	01-JAN-15	$ 4.07	01-APR-15	$ 4.11	01-JUN-15	$ 4.11
HERITAGE HUMAN SERVICES INC	264692822	03370394	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.48	01-OCT-12	$5.48	01-JAN-14	$ 5.48	01-JAN-15	$ 5.58	01-APR-15	$ 5.67	01-JUN-15	$ 5.67
HERKIMER CO CHAP NYSARC FSR 1	160973231	02617554	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.50	01-JUL-11	$4.50	01-JUL-11	$ 4.50	01-JAN-15	$ 4.55	01-APR-15	$ 4.61	01-JUN-15	$ 4.61
HERKIMER CO CHAP NYSARC RSP	160973231	02618459	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.65	01-JUL-11	$5.65	01-JUL-11	$ 5.65	01-JAN-15	$ 5.72	01-APR-15	$ 5.79	01-JUN-15	$ 5.79
HOME INC RSP	161425108	03941357	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)							01-JAN-15	6.04	01-APR-15	$ 6.11	01-JUN-15	$ 6.11
HUMAN CARE SVCS FAM/CHLD RSP	113338946	02680564	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.41	01-JUL-11	$4.41	01-JUL-11	$ 4.41	01-JAN-15	$ 4.41	01-APR-15	$ 4.42	01-JUN-15	$ 4.42

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
HUMAN FIRST INC RSP	113590136	02991528	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.51	01-JUL-11	$8.51	01-JUL-11	$ 8.51	01-JAN-15	$ 8.65	01-APR-15	$ 8.80	01-JUN-15	$ 8.80
IKAN INC RSP	208479728	03292528	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.30	01-JUL-11	$4.30	01-JUL-11	$ 4.30	01-JAN-15	$ 4.37	01-APR-15	$ 4.44	01-JUN-15	$ 4.44
IMAGINE FOUNDATION RSP	202336717	03096480	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)											01-JUN-15	9.04
INDEPENDENCE RESIDENCES RSP	133490223	02903900	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.39	01-JUL-11	$5.39	01-OCT-13	$ 5.39	01-JAN-15	$ 5.47	01-APR-15	$ 5.56	01-JUN-15	$ 5.56
INDEPENDENT GR HM LIVING FSR1	112458584	02594796	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.21	01-JUL-11	$4.21	01-JUL-11	$ 4.21	01-JAN-15	$ 4.26	01-APR-15	$ 4.32	01-JUN-15	$ 4.32
INDEPENDENT GR HM LIVING FSR2	112458584	02594347	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$5.60	01-JUL-11	$5.60	01-JUL-11	$ 5.60	01-JAN-15	$ 5.68	01-APR-15	$ 5.76	01-JUN-15	$ 5.76
INDEPENDENT GROUP HOME LIVING PROGR	112458584	03531835	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)			01-JAN-13	6.06	01-JAN-13	$ 6.06	01-JAN-15	$ 6.14	01-APR-15	$ 6.23	01-JUN-15	$ 6.23
INDEPENDENT GROUP HOME LIVING RSP	112458584	03118476	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.48	01-JUL-11	$6.48	01-MAY-13	$ 6.34	01-JAN-15	$ 6.43	01-APR-15	$ 6.52	01-JUN-15	$ 6.52
INDEPENDENT LIVING INC RSP	222894558	02680624	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.97	01-JUL-11	$3.97	01-JUL-11	$ 3.97	01-JAN-15	$ 4.00	01-APR-15	$ 4.05	01-JUN-15	$ 4.05
INFLIGHT INC RSP	141764481	02597446	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.89	01-JUL-11	$4.89	01-JUL-11	$ 4.89	01-JAN-15	$ 4.99	01-APR-15	$ 5.09	01-JUN-15	$ 5.09
INSTITITES OF APPLIED DYN RSP	132573827	02618468	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.47	01-JUL-11	$5.47	01-JUL-11	$ 5.47	01-JAN-15	$ 5.49	01-APR-15	$ 5.51	01-JUN-15	$ 5.51
IYAHO SOCIAL SERVICES INC RSP	593806132	03122158	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.26	01-JUL-11	$5.26	01-JUL-11	$ 5.26	01-JAN-15	$ 5.35	01-APR-15	$ 5.45	01-JUN-15	$ 5.45
JAWONIO INC RSP	131761660	02600008	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.96	01-JUL-11	$4.96	01-JAN-14	$ 4.96	01-JAN-15	$ 5.01	01-APR-15	$ 5.08	01-JUN-15	$ 5.08
JEFFERSON REHAB CENTER RSP	161134631	02599397	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$3.09	01-NOV-11	$3.09	01-NOV-11	$ 3.09	01-JAN-15	$ 3.13	01-APR-15	$ 3.17	01-JUN-15	$ 3.17
JEWEL HUMAN SERVICES INC RSP	331177252	03562503	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)			01-JAN-13	$5.68	01-JAN-14	$ 5.76	01-JAN-15	$ 5.85	01-APR-15	$ 5.94	01-JUN-15	$ 5.94
JEWISH BD/FAMILY CHILD RSP	135564937	02679463	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.94	01-JUL-11	$2.94	01-JUL-11	$ 2.94	01-JAN-15	$ 2.94	01-APR-15	$ 2.94	01-JUN-15	$ 2.94
JEWISH COMM CTR/GR BUFF RSP	160760887	02633338	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.26	01-JUL-11	$6.26	01-JUL-11	$ 6.26	01-JAN-15	$ 6.26	01-APR-15	$ 6.26	01-JUN-15	$ 6.26
JEWISH COMMUNITY CENTER OF SI RSP	135562256	03105846	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$5.64	01-JUL-12	$5.64	01-JAN-14	$ 6.41	01-JAN-15	$ 6.49	01-APR-15	$ 6.58	01-JUN-15	$ 6.58
JEWISH UNION FOUNDATION RSP	133636595	02680615	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2005	$7.51	01-JUL-05	$7.51	01-JUL-05	$ 7.51	01-JUL-05	$ 7.51	01-JUL-05	$ 7.51	01-JUL-05	$ 7.51
KELBERMAN CENTER INC RSP	550901293	03063861	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$6.55	01-JAN-12	$6.55	01-JAN-12	$ 6.55	01-JAN-15	$ 6.64	01-APR-15	$ 6.74	01-JUN-15	$ 6.74
KELI HOUSE COMM SVCS INC RSP	810680293	03474499	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$4.16	01-APR-12	$4.16	01-APR-12	$ 4.16	01-JAN-15	$ 4.22	01-APR-15	$ 4.28	01-JUN-15	$ 4.28
KENNEDY CHILD STUDY CENTER RSP	135671639	03134094	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$7.66	01-JUL-12	$7.66	01-JUL-12	$ 7.66	01-JAN-15	$ 7.66	01-APR-15	$ 7.66	01-JUN-15	$ 7.66
KINGSBRIDGE HEIGHTS COMM CENTER RSP	132813809	03155153	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$3.48	01-JUL-12	$3.48	01-JUL-12	$ 3.48	01-JAN-15	$ 3.48	01-APR-15	$ 3.48	01-JUN-15	$ 3.48
LABOR AND INDUSTRY / EDUCATION RSP	114088055	03063852	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.66	01-JUL-11	$5.66	01-JAN-14	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -
LASHONNES PLACE FOR INDEP RSP	010782023	03209881	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.78	01-JUL-11	$3.78	01-JUL-11	$ 3.78	01-JAN-15	$ 3.81	01-APR-15	$ 3.85	01-JUN-15	$ 3.85
LEARNING DISAB ASSOC WNY RSP	161118058	02591871	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.52	01-JUL-11	$4.52	01-JUL-11	$ 4.52	01-JAN-15	$ 4.60	01-APR-15	$ 4.69	01-JUN-15	$ 4.69
LIBERTY RESOURCES RSP	161129675	03134925	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)							01-JAN-15	4.22	01-APR-15	$ 4.26	01-JUN-15	$ 4.26
LIBERTY/MONTGOMERY CO ARC RSP	141506257	02599411	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.13	01-JUL-11	$5.13	01-JUL-11	$ 5.13	01-JAN-15	$ 5.20	01-APR-15	$ 5.27	01-JUN-15	$ 5.27
LIFESPIRE INC RSP	132526022	02618477	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.65	01-JUL-11	$6.65	01-JAN-14	$ 6.65	01-JAN-15	$ 6.68	01-APR-15	$ 6.74	01-JUN-15	$ 6.74
LIFESTYLES F/T DISABLED RSP	133740011	02591880	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$7.88	01-JUL-12	$7.88	01-JAN-14	$ 7.88	01-JAN-15	$ 7.96	01-APR-15	$ 8.04	01-JUN-15	$ 8.04
LIFETIME ASSISTANCE INC RSP	222221158	02597464	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.98	01-OCT-12	$4.98	01-JAN-14	$ 4.98	01-JAN-15	$ 5.06	01-APR-15	$ 5.14	01-JUN-15	$ 5.14
LITTLE VILLAGE SCHOOL RSP	112222807	02599420	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.46	01-JAN-13	$0.00	01-JUL-13	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -
LIVING RESOURCES CORP RSP	141564208	02599439	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.60	01-JUL-11	$6.60	01-JUL-11	$ 6.60	01-JAN-15	$ 6.70	01-APR-15	$ 6.81	01-JUN-15	$ 6.81
LIVINGSTON WYOMING ARC RSP	161022565	02593731	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.07	01-JUL-11	$6.07	01-JAN-14	$ 6.07	01-JAN-15	$ 6.17	01-APR-15	$ 6.27	01-JUN-15	$ 6.27
LOCHLAND SCHOOL INC RSP	160780944	03489356	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$5.27	01-SEP-11	$5.27	01-SEP-11	$ 5.27	01-JAN-15	$ 5.34	01-APR-15	$ 5.40	01-JUN-15	$ 5.40
LONGLIFE INFO AND REF RSP	112878383	03450671	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.35	01-JUL-11	$7.35	01-JUL-11	$ 7.35	01-JAN-15	$ 7.39	01-APR-15	$ 7.42	01-JUN-15	$ 7.42
MADISON CORTLAND NYSARC RSP	160958020	02593740	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$12.58	01-JAN-12	$12.58	01-JAN-12	$ 12.58	01-JAN-15	$ 12.74	01-APR-15	$ 12.91	01-JUN-15	$ 12.91
MADISON/CORT CHAP NYSARC FSR1	160958020	02610786	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$7.54	01-JAN-13	$7.54	01-JAN-14	$ 7.54	01-JAN-15	$ 7.64	01-APR-15	$ 7.78	01-JUN-15	$ 7.78
MAIDSTONE FOUNDATION INC RESPITE	112718381	03094488	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.66	01-JUL-11	$5.66	01-JUL-11	$ 5.66	01-JAN-15	$ 5.66	01-APR-15	$ 5.66	01-JUN-15	$ 5.48
MARANATHA HUMAN SVCS INC RSP	141755068	02610644	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.63	01-JUL-11	$7.63	01-JUL-11	$ 7.63	01-JAN-15	$ 7.74	01-APR-15	$ 7.86	01-JUN-15	$ 7.86
MARYHAVEN CENTER OF HOPE RSP	112861698	02599448	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.45	01-JUL-11	$2.45	01-JUL-11	$ 2.45	01-JAN-15	$ 2.45	01-APR-15	$ 2.45	01-JUN-15	$ 2.45
MENTAL HEALTH ASSN OR CO RSP	146024124	02596192	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$4.51	01-JAN-12	$4.51	01-JAN-12	$ 4.51	01-JAN-15	$ 4.59	01-APR-15	$ 4.67	01-JUN-15	$ 4.67
MENTAL HEALTH ASSOC RSP	111710983	02890393	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.96	01-JUL-11	$7.96	01-JUL-11	$ 7.96	01-JAN-15	$ 8.08	01-APR-15	$ 8.21	01-JUN-15	$ 8.21
MERCY DRIVE INC RSP	043831639	02934132	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.05	01-JUL-11	$7.05	01-JUL-11	$ 7.05	01-JAN-15	$ 7.13	01-APR-15	$ 7.22	01-JUN-15	$ 7.22
MERCY HOME FOR CHILDREN RSP	111666227	02597473	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.86	01-JUL-11	$5.86	01-JUL-11	$ 5.86	01-JAN-15	$ 5.88	01-APR-15	$ 5.90	01-JUN-15	$ 5.90
METROPOLITAN DEVELOPMENT CENTER RSP	113293489	03120587	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.53	01-OCT-12	$4.53	01-OCT-12	$ 4.53	01-JAN-15	$ 4.60	01-APR-15	$ 4.68	01-JUN-15	$ 4.68
MIDWOOD DEVELOPMENT CORP RSP	112420752	02600017	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.93	01-JUL-11	$6.93	01-JUL-11	$ 6.93	01-JAN-15	$ 6.93	01-APR-15	$ 6.93	01-JUN-15	$ 6.93
MILL NECK SERVICES INC RSP	113119786	03217741	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$4.16	01-JAN-13	$4.16	01-JAN-13	$ 4.16	01-JAN-15	$ 4.21	01-APR-15	$ 4.27	01-JUN-15	$ 4.27
MONROE CO CHAP NYSARC RESPITE	160835172	03094479	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.53	01-JUL-11	$4.53	01-JUL-11	$ 4.53	01-JAN-15	$ 4.60	01-APR-15	$ 4.68	01-JUN-15	$ 4.68
MULTI-FUNCTIONAL FAMILY SERVICES RS	113417903	03131853	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.71	01-JUL-11	$3.71	01-JUL-11	$ 3.71	01-JAN-15	$ 3.75	01-APR-15	$ 3.79	01-JUN-15	$ 3.79
NASS/SUFF SERVICES FOR AUTISTIC RSP	112669753	03094433	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.17	01-JUL-11	$5.17	01-JUL-13	$ 5.17	01-JAN-15	$ 5.26	01-APR-15	$ 5.36	01-JUN-15	$ 5.36
NASSAU CO AHRC INC FSR1	261520311	03045810	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$6.12	01-JAN-13	$6.12	01-JAN-14	$ 6.12	01-JAN-15	$ 6.20	01-APR-15	$ 6.29	01-JUN-15	$ 6.29
NASSAU CO AHRC INC RSP	261520311	03045829	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$3.75	01-JAN-13	$3.75	01-JAN-13	$ 3.75	01-JAN-15	$ 3.80	01-APR-15	$ 3.85	01-JUN-15	$ 3.85

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
NASSAU CO CHAP NYSARC FSR 1	111720254	02600104	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$6.83	01-JAN-13	$6.83	01-JAN-13	$ 6.83	01-JAN-15	$ 6.89	01-APR-15	$ 6.97	01-JUN-15	$ 6.97
NE WESTCHESTER SPECIAL RECREATION R	133098542	03423856	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$4.87	01-APR-12	$4.87	01-JAN-14	$ 4.87	01-JAN-15	$ 4.94	01-APR-15	$ 5.02	01-JUN-15	$ 5.02
NEW HORIZONS RESOURCES FSR 1	524862107	02594356	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$5.38	01-JUL-11	$5.38	01-JUL-11	$ 5.38	01-JAN-15	$ 5.43	01-APR-15	$ 5.50	01-JUN-15	$ 5.50
NEW HORIZONS RESOURCES RSP	524862107	02622273	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$5.87	01-MAR-13	$5.87	01-JUL-13	$ 5.87	01-JAN-15	$ 5.97	01-APR-15	$ 6.07	01-JUN-15	$ 6.07
NEW ROCHELLE PARKS AND REC RSP	136013979	03436335	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$4.88	01-APR-12	$4.88	01-APR-12	$ 4.88	01-JAN-15	$ 4.97	01-APR-15	$ 5.05	01-JUN-15	$ 5.05
NEW VISIONS RSP	141392181	02599475	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$4.37	01-FEB-13	$0.00	01-FEB-13	$ -	01-FEB-13	$ -	01-FEB-13	$ -	01-FEB-13	$ -
NEW YORK SERVICE FOR THE HANDICAPPE	135674230	03485398	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$3.12	01-NOV-12	$3.12	01-NOV-12	$ 3.12	01-JAN-15	$ 3.15	01-APR-15	$ 3.19	01-JUN-15	$ 3.19
NOR WEST REGIONAL SPECIAL SERVICES	136013797	03436326	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$5.66	01-APR-12	$5.66	01-APR-12	$ 5.66	01-JAN-15	$ 5.74	01-APR-15	$ 5.81	01-JUN-15	$ 5.81
NY FAMILIES F/AUTISTIC C RSP	113442879	02633310	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2012	$5.31	01-AUG-12	$5.31	01-AUG-12	$ 5.31	01-JAN-15	$ 5.38	01-APR-15	$ 5.44	01-JUN-15	$ 5.44
NY FOUNDLING HOSPITAL FSR 1	131624123	02633030	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$7.84	01-JUL-12	$7.84	01-JUL-13	$ 7.84	01-JAN-15	$ 7.93	01-APR-15	$ 8.04	01-JUN-15	$ 8.04
NY FOUNDLING HOSPITAL FSR 2	131624123	02633085	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$7.84	01-JUL-12	$7.84	01-JUL-13	$ 7.84	01-JAN-15	$ 7.93	01-APR-15	$ 8.04	01-JUN-15	$ 8.04
NYSARC COLUMBIA CO CHAP RSP	141489603	02597491	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.65	01-JUL-11	$8.65	01-JUL-11	$ 8.65	01-JAN-15	$ 8.63	01-APR-15	$ 8.76	01-JUN-15	$ 8.76
NYSARC INC NYC CHAPTER FSR 1	135596746	02594392	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$7.11	01-JUL-11	$7.11	01-JUL-11	$ 7.11	01-JAN-15	$ 7.22	01-APR-15	$ 7.33	01-JUN-15	$ 7.33
NYSARC INC NYC CHAPTER FSR 2	135596746	02600080	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$8.91	01-JUL-11	$8.91	01-JUL-11	$ 8.91	01-JAN-15	$ 9.04	01-APR-15	$ 9.18	01-JUN-15	$ 9.18
NYSARC INC NYC CHAPTER FSR 3	135596746	02594470	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$9.24	01-JUL-11	$9.24	01-JUL-11	$ 9.24	01-JAN-15	$ 9.37	01-APR-15	$ 9.52	01-JUN-15	$ 9.52
NYSARC INC NYC CHAPTER FSR 4	135596746	02600062	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$8.04	01-JUL-11	$8.04	01-JUL-11	$ 8.04	01-JAN-15	$ 8.15	01-APR-15	$ 8.27	01-JUN-15	$ 8.27
NYSARC INC NYC CHAPTER FSR 5	135596746	02594503	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$11.20	01-JUL-11	$11.20	01-JUL-11	$ 11.20	01-JAN-15	$ 11.37	01-APR-15	$ 11.56	01-JUN-15	$ 11.56
NYSARC INC NYS CHAPTER RSP	135596746	02591904	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$7.48	01-APR-12	$7.48	01-JAN-14	$ 7.48	01-JAN-15	$ 7.50	01-APR-15	$ 7.54	01-JUN-15	$ 7.53
NYSARC INC ORANGE CO CHAP RSP	141462340	02633356	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$4.82	01-JAN-13	$4.82	01-JAN-13	$ 4.82	01-JAN-15	$ 4.90	01-APR-15	$ 4.98	01-JUN-15	$ 4.98
NYSARC INC SUFFOLK CHAP FSR 1	111845294	02594627	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$3.94	01-JUL-11	$3.94	01-JUL-11	$ 3.94	01-JAN-15	$ 3.99	01-APR-15	$ 4.05	01-JUN-15	$ 4.05
NYSARC NIAGARA CO CHAP RSP	160794847	02597515	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.18	01-JUL-11	$4.18	01-JUL-11	$ 4.18	01-JAN-15	$ 4.26	01-APR-15	$ 4.34	01-JUN-15	$ 4.34
OCCUPATIONS INC-RESPITE RSP	141471097	03118485	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.68	01-JUL-11	$6.68	01-APR-14	$ 5.93	01-JAN-15	$ 6.02	01-APR-15	$ 6.12	01-JUN-15	$ 6.12
OHEL CHILDRENS HM/FAM RSP	116078704	02750558	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$7.45	01-DEC-12	$7.45	01-JAN-14	$ 7.43	01-JAN-15	$ 7.49	01-APR-15	$ 7.56	01-JUN-15	$ 7.56
ON YOUR MARK INC RSP	133128315	02592065	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.74	01-JUL-11	$6.74	01-JUL-11	$ 6.74	01-JAN-15	$ 6.79	01-APR-15	$ 6.84	01-JUN-15	$ 6.84
ONONDAGA CO CHAP NYSARC RSP	150561718	02758345	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$9.04	01-JUL-11	$9.04	01-JUL-11	$ 9.04	01-JAN-15	$ 9.14	01-APR-15	$ 9.25	01-JUN-15	$ 9.25
ONTARIO ARC RSP	160786219	02599484	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$6.87	01-JAN-12	$6.87	01-JAN-12	$ 6.87	01-JAN-15	$ 6.98	01-APR-15	$ 7.10	01-JUN-15	$ 7.10
ORANGE COUNTY CP ASSOC RSP	141456248	02596234	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$7.37	01-JAN-12	$7.37	01-JAN-14	$ 7.37	01-JAN-15	$ 7.44	01-APR-15	$ 7.51	01-JUN-15	$ 7.51
ORLEANS COUNTY CHAP ARC RSP	237150957	02600026	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.11	01-JUL-11	$5.11	01-JUL-11	$ 5.11	01-JAN-15	$ 5.20	01-APR-15	$ 5.29	01-JUN-15	$ 5.29
OSWEGO CO CHAP NYS ARC RSP	160973939	02610653	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.59	01-JUL-11	$3.59	01-JUL-11	$ 3.59	01-JAN-15	$ 3.62	01-APR-15	$ 3.65	01-JUN-15	$ 3.65
OSWEGO CO OPPORTUNITIES FSR1	160979876	02779275	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$3.84	01-JUL-11	$3.84	01-JUL-11	$ 3.84	01-JAN-15	$ 3.90	01-APR-15	$ 3.96	01-JUN-15	$ 3.96
OTSAR INC RSP	112601112	02610662	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.44	01-JUL-11	$4.44	01-JUL-11	$ 4.44	01-JAN-15	$ 4.44	01-APR-15	$ 4.44	01-JUN-15	$ 4.44
OTSEGO COUNTY CHAP NYSARC RSP	160953477	02620895	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.93	01-JUL-11	$4.93	01-JUL-11	$ 4.93	01-JAN-15	$ 4.96	01-APR-15	$ 4.98	01-JUN-15	$ 4.98
PARENTS INFORMATION GRP RSP	161098311	02596243	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.09	01-JUL-11	$6.09	01-JUL-11	$ 6.09	01-JAN-15	$ 6.10	01-APR-15	$ 6.13	01-JUN-15	$ 6.13
PATHWAYS INC RSP	161089007	02593768	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$9.62	01-JAN-12	$9.62	01-JAN-12	$ 9.62	01-JAN-15	$ 9.74	01-APR-15	$ 9.90	01-JUN-15	$ 9.90
PEOPLE INC FSR 1	160975538	02594645	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.81	01-JUL-11	$4.81	01-JUL-11	$ 4.81	01-JAN-15	$ 4.88	01-APR-15	$ 4.95	01-JUN-15	$ 4.95
PEOPLE INC FSR4	160975538	03035912	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$6.09	01-JAN-13	$6.09	01-JAN-14	$ 6.09	01-JAN-15	$ 6.17	01-APR-15	$ 6.27	01-JUN-15	$ 6.27
PEOPLE INC RSP	160975538	02592083	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$5.57	01-JAN-13	$5.57	01-JAN-14	$ 5.57	01-JAN-15	$ 5.64	01-APR-15	$ 5.72	01-JUN-15	$ 5.72
PERSON CENTERED CARE SVS RSP	202878791	02750549	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.96	01-JUL-11	$7.96	01-JUL-11	$ 7.96	01-JAN-15	$ 8.04	01-APR-15	$ 8.13	01-JUN-15	$ 8.13
PESACH TIKVAH-HOPE DEV RSP	112642641	02592092	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.06	01-JUL-11	$5.06	01-JUL-11	$ 5.06	01-JAN-15	$ 5.10	01-APR-15	$ 5.14	01-JUN-15	$ 5.14
PROJECT INDEPENDENCE INC RSP	161173031	03063976	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$10.96	01-JAN-12	$10.96	01-JAN-12	$ 10.96	01-JAN-15	$ 11.11	01-APR-15	$ 11.27	01-JUN-15	$ 11.27
PROVIDER HAMASPIK ROCKLD RSP	133978518	02596303	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$8.96	01-JAN-13	$8.96	01-MAR-14	$ 8.96	01-JAN-15	$ 9.04	01-APR-15	$ 9.13	01-JUN-15	$ 9.13
PROVIDER-HAMASPIK KINGS RSP	161522895	02610671	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.61	01-FEB-13	$4.61	01-JUL-13	$ 4.61	01-JAN-15	$ 4.87	01-APR-15	$ 4.96	01-JUN-15	$ 4.96
PSCH INC RSP	112542430	02599493	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.98	01-JUL-11	$6.98	01-JAN-14	$ 7.08	01-JAN-15	$ 7.10	01-APR-15	$ 7.12	01-JUN-15	$ 7.12
PUTNAM COUNTY CHAP NYSARC RSP	141426729	02597524	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$5.45	01-SEP-12	$5.45	01-JAN-14	$ 6.23	01-JAN-15	$ 6.32	01-APR-15	$ 6.41	01-JUN-15	$ 6.41
QSAC RSP	112482974	02592116	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$5.15	01-JUL-12	$5.15	01-JAN-14	$ 5.15	01-JAN-15	$ 5.21	01-APR-15	$ 5.28	01-JUN-15	$ 5.28
QUEENS PARENT RES RC CTR RSP	113211119	02592107	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.16	01-OCT-12	$3.16	01-OCT-12	$ 3.16	01-JAN-15	$ 3.17	01-APR-15	$ 3.18	01-JUN-15	$ 3.18
RAYIM OF HUDSON VALLEY RSP	562331735	02596358	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$4.32	01-DEC-11	$4.32	01-FEB-14	$ 4.32	01-JAN-15	$ 4.32	01-APR-15	$ 4.33	01-JUN-15	$ 4.33
RENSS CO CHAP NYSARC FSR 1	141485873	02594654	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$3.73	01-JAN-13	$3.73	01-JAN-14	$ 3.73	01-JAN-15	$ 3.78	01-APR-15	$ 3.84	01-JUN-15	$ 3.84
RENSS CO CHAP NYSARC RSP	141485873	02599544	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.15	01-JUL-11	$8.15	01-JUL-11	$ 8.15	01-JAN-15	$ 8.26	01-APR-15	$ 8.37	01-JUN-15	$ 8.37
RESIDENTIAL RESOURCES RSP	141823526	03036179	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$6.23	01-NOV-11	$6.23	01-NOV-11	$ 6.23	01-JAN-15	$ 6.32	01-APR-15	$ 6.42	01-JUN-15	$ 6.42
RESOURCE CTR FOR INDEP LIVING RSP	222518284	03314505	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.21	01-JUL-11	$6.21	01-JUL-11	$ 6.21	01-JAN-15	$ 6.30	01-APR-15	$ 6.38	01-JUN-15	$ 6.38
RICHMOND CHILDRENS CENTER RSP	132736761	02597533	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.94	01-JUL-11	$3.94	01-JUL-11	$ 3.94	01-JAN-15	$ 3.96	01-APR-15	$ 3.98	01-JUN-15	$ 3.98
RIVERSHORE INC RSP	161146128	02960685	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.47	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-JUN-15	$ -

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
ROCH SCHOOL OF HOLY CHILD RSP	160761224	02596385	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$3.53	01-JAN-13	$3.53	01-JAN-13	$ 3.53	01-JAN-15	$ 3.57	01-APR-15	$ 3.61	01-JUN-15	$ 3.61
ROCKLAND COUNTY ALD RSP	132951835	03178021	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$8.26	01-JAN-12	$8.26	01-JAN-12	$ 8.26	01-JAN-15	$ 8.38	01-APR-15	$ 8.50	01-JUN-15	$ 8.50
ROCKLAND COUNTY CHAP ARC FSR1	131916359	02620684	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$7.29	01-JAN-13	$7.29	01-JAN-13	$ 7.29	01-JAN-15	$ 7.41	01-APR-15	$ 7.52	01-JUN-15	$ 7.52
ROCKLAND COUNTY CHAP ARC FSR2	131916359	02620666	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$5.97	01-JAN-12	$5.97	01-JAN-14	$ 5.97	01-JAN-15	$ 6.07	01-APR-15	$ 6.17	01-JUN-15	$ 6.17
ROCKLAND COUNTY CHAP ARC RSP	131916359	02620780	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2012	$7.17	01-DEC-12	$7.17	01-DEC-12	$ 7.17	01-JAN-15	$ 7.25	01-APR-15	$ 7.34	01-JUN-15	$ 7.34
SAMUEL FIELD YM AND YWHA INC RSP	113071518	03118494	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.70	01-JUL-11	$6.70	01-JUL-11	$ 6.70	01-JAN-15	$ 6.68	01-APR-15	$ 6.78	01-JUN-15	$ 6.78
SARATOGA CNTY ARC RSP	141465932	02599553	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$5.86	01-OCT-11	$5.86	01-OCT-11	$ 5.86	01-JAN-15	$ 5.93	01-APR-15	$ 6.02	01-JUN-15	$ 6.02
SCHDY CO CHAP NYSARC RSP	141459277	02599562	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$7.75	01-JAN-13	$7.75	01-JAN-13	$ 7.75	01-JAN-15	$ 7.83	01-APR-15	$ 7.93	01-JUN-15	$ 7.93
SCHOHARIE CO CHAP NYSARC FSR1	141494347	02594681	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$6.76	01-JUL-12	$6.76	01-JUL-12	$ 6.76	01-JAN-15	$ 6.86	01-APR-15	$ 6.97	01-JUN-15	$ 6.97
SCHOHARIE COUNTY NYSARC RSP	141494347	03095058	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$4.92	01-JAN-13	$4.92	01-JAN-13	$ 4.92	01-JAN-15	$ 4.96	01-APR-15	$ 5.01	01-JUN-15	$ 5.01
SCHUYLER COUNTY NYSARC RSP	161120089	02599571	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.21	01-JUL-11	$6.21	01-JUL-11	$ 6.21	01-JAN-15	$ 6.30	01-APR-15	$ 6.40	01-JUN-15	$ 6.40
SE CONSORTIUM FOR SPECIAL SRVCS RSP	133076622	03434580	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$5.75	01-APR-12	$5.75	01-APR-12	$ 5.75	01-JAN-15	$ 5.85	01-APR-15	$ 5.95	01-JUN-15	$ 5.95
SELECT HUMAN SERVICES INC RSP	262571066	03256035	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$5.78	01-NOV-12	$5.78	01-MAR-14	$ 5.78	01-JAN-15	$ 5.86	01-APR-15	$ 5.95	01-JUN-15	$ 5.95
SENECA-CAYUGA NYS ARC RSP	161124314	02599599	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.89	01-OCT-12	$3.89	01-OCT-12	$ 3.89	01-JAN-15	$ 3.95	01-APR-15	$ 4.02	01-JUN-15	$ 4.02
SERVICES F/T UNDERSERVED RSP	133250383	02680679	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.98	01-JUL-11	$2.98	01-JAN-14	$ 2.98	01-JAN-15	$ 3.00	01-APR-15	$ 3.05	01-JUN-15	$ 3.05
SERVICES FOR THE DEVELOP CHALLENGED	133921190	03845003	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)					01-JAN-14	4.51	01-JAN-15	$ 4.57	01-APR-15	$ 4.63	01-JUN-15	$ 4.63
SHARE OF NEW SQUARE RSP	133475062	02596394	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.53	01-JUL-11	$3.53	01-MAR-14	$ 3.53	01-JAN-15	$ 3.55	01-APR-15	$ 3.57	01-JUN-15	$ 3.57
SID JACOBSON JCC RSP	111976051	02599613	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2012	$7.87	01-NOV-12	$7.87	01-NOV-12	$ 7.87	01-JAN-15	$ 7.96	01-APR-15	$ 8.06	01-JUN-15	$ 8.06
SINERGIA INC FSR 1	133183344	03185559	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$7.72	01-JUL-12	$7.72	01-JUL-13	$ 7.72	01-JAN-15	$ 7.82	01-APR-15	$ 7.94	01-JUN-15	$ 7.94
SINERGIA INC RSP	133183344	02593777	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$7.72	01-JUL-12	$7.72	01-JUL-12	$ 7.72	01-JAN-15	$ 7.74	01-APR-15	$ 7.76	01-JUN-15	$ 7.76
SKIP OF NY INC RSP	133236869	02596472	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$4.39	01-SEP-12	$4.39	01-JAN-14	$ 4.39	01-JAN-15	$ 4.47	01-APR-15	$ 4.55	01-JUN-15	$ 4.55
SOCIAL ACTION CTR RSP	134093738	02597560	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$3.87	01-JUL-12	$3.87	01-JUL-12	$ 3.87	01-JAN-15	$ 3.89	01-APR-15	$ 3.91	01-JUN-15	$ 3.91
SOUTHEAST BRONX NGBHD CTR RSP	132675560	02610680	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$2.89	01-JUL-11	$2.89	01-JUL-11	$ 2.89	01-JAN-15	$ 2.89	01-APR-15	$ 2.90	01-JUN-15	$ 2.90
SOUTHEAST COMM WORK CTR RSP	161074815	02663945	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$7.27	01-SEP-11	$7.27	01-SEP-11	$ 7.27	01-JAN-15	$ 7.40	01-APR-15	$ 7.53	01-JUN-15	$ 7.53
SPARC INC RSP	133832725	03095489	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$5.46	01-APR-12	$5.66	01-JAN-14	$ 5.46	01-JAN-15	$ 5.48	01-APR-15	$ 5.51	01-JUN-15	$ 5.51
SPAULDING PRAY RES CORP FSR 1	161196869	02594705	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$4.88	01-JAN-13	$4.88	01-JAN-14	$ 4.88	01-JAN-15	$ 4.95	01-APR-15	$ 5.02	01-JUN-15	$ 5.02
SPAULDING PRAY RES CORP FSR2	161196869	02873976	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2012	$4.51	01-JAN-13	$4.51	01-JAN-13	$ 4.51	01-JAN-15	$ 4.56	01-APR-15	$ 4.61	01-JUN-15	$ 4.61
SPECIAL CARE FAM/CHILD RSP	113476645	02821263	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.21	01-JUL-11	$5.21	01-JUL-11	$ 5.21	01-JAN-15	$ 5.21	01-APR-15	$ 5.22	01-JUN-15	$ 5.22
SPECIAL CITIZENS FUTURE UNLTD RSP	132865903	02928756	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$4.80	01-JUL-12	$4.80	01-MAR-14	$ 4.80	01-JAN-15	$ 4.85	01-APR-15	$ 4.93	01-JUN-15	$ 4.93
SPECIAL NEEDS PROGRAM INC RSP	222325526	02597597	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$3.29	01-APR-12	$3.29	01-APR-13	$ 3.24	01-JAN-15	$ 3.27	01-APR-15	$ 3.30	01-JUN-15	$ -
SPRINGBROOK NY INC RSP	150539129	02593882	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$4.72	01-JAN-13	$4.72	01-JAN-13	$ 4.72	01-JAN-15	$ 4.80	01-APR-15	$ 4.88	01-JUN-15	$ 4.88
ST CHRISTOPHER OTTILIE RSP	112777066	02599622	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.07	01-JUL-11	$6.07	01-JUL-11	$ 6.07	01-JAN-15	$ 6.15	01-APR-15	$ 6.23	01-JUN-15	$ 6.23
ST DOMINICS HOME RSP	131740399	02596490	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.90	01-JAN-13	$0.00	01-JAN-14	$ -	01-JAN-15	$ -	01-APR-15	$ -	01-APR-15	$ -
ST JOHNS CHRISTIAN ACADEMY RSP	161448649	03144130	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.56	01-JUL-11	$3.56	01-JUL-11	$ 3.56	01-JAN-15	$ 3.63	01-APR-15	$ 3.71	01-JUN-15	$ 3.71
ST LAWRENCE NYSARC INC RSP	150617072	02618564	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$4.45	01-NOV-11	$4.45	01-NOV-11	$ 4.45	01-JAN-15	$ 4.50	01-APR-15	$ 4.58	01-JUN-15	$ 4.58
ST REGIS MOHAWK TRIBE RSP	161007650	02599659	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$10.17	01-NOV-11	$10.17	01-JAN-14	$ 10.17	01-JAN-15	$ 10.27	01-APR-15	$ 10.37	01-JUN-15	$ 10.37
STEP BY STEP INFANT DEV CTR RSP	112862378	03095190	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.94	01-JUL-11	$3.94	01-JUL-11	$ 3.94	01-JAN-15	$ 4.01	01-APR-15	$ 4.07	01-JUN-15	$ 4.07
STEPPING STONES LEARNING CENTER	161467135	03096471	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$5.39	01-DEC-11	$5.39	01-DEC-11	$ 5.39	01-JAN-15	$ 5.46	01-APR-15	$ 5.54	01-JUN-15	$ 5.54
STEUBEN CO CHAP NYSARC RSP	160971450	02596596	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.07	01-JUL-11	$7.07	01-JUL-11	$ 7.07	01-JAN-15	$ 7.19	01-APR-15	$ 7.31	01-JUN-15	$ 7.31
STONY FORD FOUNDATION RSP	061207341	02596610	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.69	01-JUL-11	$4.69	01-JUL-11	$ 4.69	01-JAN-15	$ -	01-APR-15	$ -	01-APR-15	$ -
SUBURBAN ADULT SERVICES RSP	161115992	02592125	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.95	01-JUL-11	$4.95	01-JUL-11	$ 4.95	01-JAN-15	$ 5.03	01-APR-15	$ 5.11	01-JUN-15	$ 5.11
SULLIVAN CO CHAP NYSARC RSP	146028767	02722690	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2012	$4.27	01-DEC-12	$4.27	01-DEC-12	$ 4.27	01-JAN-15	$ 4.32	01-APR-15	$ 4.38	01-JUN-15	$ 4.38
SUMMIT EDUCATIONAL RES RSP	161095750	02592143	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2011	$9.15	01-OCT-11	$9.15	01-MAY-13	$ 9.29	01-JAN-15	$ 9.36	01-APR-15	$ 9.46	01-JUN-15	$ 9.46
TACONIC INNOVATIONS RSP	223729121	02596638	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2013	$4.36	01-FEB-13	$4.36	01-FEB-14	$ 4.36	01-JAN-15	$ 4.42	01-APR-15	$ 4.49	01-JUN-15	$ 4.49
TENDER CARE HUMAN SERVICES RSP	113586379	03132652	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.83	01-OCT-12	$6.83	01-OCT-12	$ 6.83	01-JAN-15	$ 6.95	01-APR-15	$ 7.08	01-JUN-15	$ 7.08
THE ALTERNATIVE LIV GRP RSP	141713378	02599686	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.28	01-JUL-11	$6.28	01-OCT-13	$ 6.28	01-JAN-15	$ 6.29	01-APR-15	$ 6.31	01-JUN-15	$ 6.31
THE ARC ONEIDA/LEWIS ARC FSR1	150581298	02594723	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-SEP-2012	$4.32	01-JAN-13	$4.32	01-JAN-14	$ 4.32	01-JAN-15	$ 4.38	01-APR-15	$ 4.44	01-JUN-15	$ 4.44
THE ARC ONEIDA/LEWIS ARC RSP	150581298	02594663	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$9.31	01-SEP-12	$9.31	01-SEP-13	$ 9.31	01-JAN-15	$ 9.37	01-APR-15	$ 9.51	01-JUN-15	$ 9.51
THE FRIENDS NETWORK INC RSP	133955641	02839903	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2012	$5.45	01-DEC-12	$5.45	01-DEC-12	$ 5.45	01-JAN-15	$ 5.53	01-APR-15	$ 5.61	01-JUN-15	$ 5.61
THE GRACE FDTN OF NY RSP	134131863	02757853	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$9.04	01-JUL-11	$9.04	01-JUL-11	$ 9.04	01-JAN-15	$ 9.17	01-APR-15	$ 9.30	01-JUN-15	$ 9.30
THE THERAPEUTIC EQUESTRIAN CTR RSP	204432765	03881798	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)							01-OCT-14	9	01-OCT-14	$ 9.00	01-OCT-14	$ 9.00
TRANSITIONAL LIVING SERVICES RSP	161039435	03292353	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$9.47	01-JUL-11	$9.47	01-JUL-11	$ 9.47	01-JAN-15	$ -	01-JAN-15	$ -	01-JAN-15	$ -
TRINITY ASSISTANCE CORP RSP	205510689	02890595	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.38	01-JUL-11	$8.38	01-MAR-14	$ 8.38	01-JAN-15	$ 8.41	01-APR-15	$ 8.46	01-JUN-15	$ 8.46

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
UCP & HANDI PERS UTICA RSP	150543657	02592161	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$6.55	01-JAN-12	$6.55	01-JAN-12	$ 6.55	01-JAN-15	$ 6.64	01-APR-15	$ 6.73	01-JUN-15	$ 6.73
UCP ASSOC ROCHESTER FSR 1	160743950	02600122	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JAN-2013	$4.64	01-JAN-13	$4.64	01-JAN-13	$ 4.64	01-JAN-15	$ 4.70	01-APR-15	$ 4.77	01-JUN-15	$ 4.77
UCP ASSOC ROCHESTER RSP	160743950	02596656	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$6.02	01-JAN-13	$6.02	01-JAN-13	$ 6.02	01-JAN-15	$ 6.10	01-APR-15	$ 6.18	01-JUN-15	$ 6.18
UCP OF NYC FSR 1	135654532	02610891	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$6.32	01-JUL-12	$6.32	01-JUL-12	$ 6.32	01-JAN-15	$ 6.39	01-APR-15	$ 6.48	01-JUN-15	$ 6.48
UCP OF NYC RSP	135654532	02610699	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.53	01-JUL-11	$6.53	01-JUL-11	$ 6.53	01-JAN-15	$ 6.64	01-APR-15	$ 6.75	01-JUN-15	$ 6.75
UCPA NIAGARA COUNTY INC RSP	160786061	02592170	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.71	01-JUL-11	$4.71	01-JUL-11	$ 4.71	01-JAN-15	$ 4.78	01-APR-15	$ 4.86	01-JUN-15	$ 4.86
UCPA OF GREATER SUFFOLK RSP	112568841	03081358	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.64	01-JUL-11	$8.64	01-JUL-11	$ 8.64	01-JAN-15	$ 8.77	01-APR-15	$ 8.91	01-JUN-15	$ 8.91
UCPA OF NYS RSP	131623856	02592189	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2012	$4.56	01-JUL-12	$4.56	01-JUL-12	$ 4.56	01-JAN-15	$ 4.56	01-APR-15	$ 4.56	01-JUN-15	$ 4.56
UCPA OF THE NORTH COUNTRY RSP	161568985	02597717	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$6.63	01-NOV-11	$6.63	01-JAN-14	$ 6.63	01-JAN-15	$ 6.73	01-APR-15	$ 6.82	01-JUN-15	$ 6.82
UCPA OF THE TRICOUNTIES RSP	141495700	02599700	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.87	01-JUL-11	$5.87	01-JUL-11	$ 5.87	01-JAN-15	$ 5.92	01-APR-15	$ 5.98	01-JUN-15	$ 5.98
UCPA OT PUTNAM AND S DUTCHESS RSP	141813412	02967531	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-OCT-2012	$4.71	01-OCT-12	$4.71	01-APR-13	$ 4.71	01-JAN-15	$ 4.77	01-APR-15	$ 4.84	01-JUN-15	$ 4.84
ULSTER GREEN ARC RSP	141437657	02593864	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2013	$8.19	01-MAR-13	$8.19	01-MAR-13	$ 8.19	01-JAN-15	$ 8.28	01-APR-15	$ 8.38	01-JUN-15	$ 8.38
ULSTER UCP RSP	141377518	03094442	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.99	01-JUL-11	$7.99	01-JUL-11	$ 7.99	01-JAN-15	$ 8.11	01-APR-15	$ 8.22	01-JUN-15	$ 8.22
UNIQUE LIFE INC RSP	113653314	02356678	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)					01-JAN-14	3.82	01-JAN-15	$ 3.86	01-APR-15	$ 3.89	01-JUN-15	$ 3.89
UNITY HOUSE OF CAYUGA CO RSP	161081372	02663954	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.10	01-JUL-11	$5.10	01-JAN-14	$ 5.10	01-JAN-15	$ 5.19	01-APR-15	$ 5.28	01-JUN-15	$ 5.28
VANDERHEYDEN HALL INC RSP	141338575	02597726	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$4.32	01-JUL-11	$4.32	01-JUL-11	$ 4.32	01-JAN-15	$ 4.39	01-APR-15	$ 4.46	01-JUN-15	$ 4.46
VARIETY CHILD LEARNING RSP	112157326	02599719	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$7.61	01-JUL-11	$7.61	01-JUL-11	$ 7.61	01-JAN-15	$ 7.61	01-APR-15	$ 7.61	01-JUN-15	$ 7.61
VOLUNTEERS OF AMERICA GNY RSP	581959781	02592198	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.72	01-JUL-11	$3.72	01-JUL-11	$ 3.72	01-JAN-15	$ 3.74	01-APR-15	$ 3.76	01-JUN-15	$ 3.76
WARREN WASHINGTON ARC FSR 2	141560053	02718683	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$3.94	01-JUL-12	$0.00	01-JUL-12	$ -	01-JUL-12	$ -	01-APR-15	$ -	01-APR-15	$ -
WARREN WASHINGTON CO ARC FSR1	141560053	02594750	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2012	$5.15	01-JAN-13	$5.15	01-JAN-13	$ 5.15	01-JAN-15	$ 5.22	01-APR-15	$ 5.30	01-JUN-15	$ 5.30
WARREN WASHINGTON CO ARC RSP	141560053	02599728	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2013	$4.55	01-FEB-13	$4.55	01-FEB-13	$ 4.55	01-JAN-15	$ 4.59	01-APR-15	$ 4.63	01-JUN-15	$ 4.63
WAYNE CO CHAP NYSARC RSP	237540582	02593891	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$3.34	01-JUL-11	$3.34	01-JAN-14	$ 3.34	01-JAN-15	$ 3.37	01-APR-15	$ 3.41	01-JUN-15	$ 3.41
WESTCHESTER CHAP NYSARC FSR 1	131740065	02594778	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-NOV-2011	$6.25	01-NOV-11	$6.25	01-NOV-11	$ 6.25	01-JAN-15	$ 6.34	01-APR-15	$ 6.44	01-JUN-15	$ 6.44
WESTCHESTER CHAP NYSARC RSP	131740065	02610704	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2012	$5.40	01-DEC-12	$5.40	01-DEC-12	$ 5.40	01-JAN-15	$ 5.46	01-APR-15	$ 5.53	01-JUN-15	$ 5.53
WHITE PLAINS RECREATION AND PARKS R	136007339	03436344	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$6.12	01-APR-12	$6.12	01-APR-12	$ 6.12	01-JAN-15	$ 6.22	01-APR-15	$ 6.33	01-JUN-15	$ 6.33
WILDWOOD PROGRAMS INC REC RSP	222132752	03094460	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2013	$6.01	01-JAN-13	$6.17	01-OCT-13	$ 6.66	01-JAN-15	$ 6.75	01-APR-15	$ 6.85	01-JUN-15	$ 6.85
WORC RSP	237209731	02592267	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$8.68	01-JUL-11	$8.68	01-MAR-14	$ 8.85	01-JAN-15	$ 8.91	01-APR-15	$ 8.97	01-JUN-15	$ 8.97
YATES CNTY CHAP NYSARC RSP	161086091	02610713	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$6.33	01-JUL-11	$6.33	01-JUL-11	$ 6.33	01-JAN-15	$ 6.45	01-APR-15	$ 6.56	01-JUN-15	$ 6.56
YEDEI CHESED INC RSP	133728771	02610722	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$6.39	01-APR-12	$6.39	01-APR-12	$ 6.39	01-JAN-15	$ 6.47	01-APR-15	$ 6.55	01-JUN-15	$ 6.55
YONKERS PARKS AND RECREATION RSP	136007340	03095205	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$2.65	01-APR-12	$2.65	01-APR-12	$ 2.65	01-JAN-15	$ 2.69	01-APR-15	$ 2.73	01-JUN-15	$ 2.73
YOUNG ADULT INSTITUTE FSR 1	112030172	02600159	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$4.87	01-JUL-11	$4.87	01-JUL-11	$ 4.87	01-JAN-15	$ 4.95	01-APR-15	$ 5.03	01-JUN-15	$ 5.03
YOUNG ADULT INSTITUTE FSR 2	112030172	02600168	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$7.36	01-JUL-11	$7.36	01-JUL-11	$ 7.36	01-JAN-15	$ 7.48	01-APR-15	$ 7.59	01-JUN-15	$ 7.59
YOUNG ADULT INSTITUTE FSR 3	112030172	02600131	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	01-JUL-2011	$6.15	01-JUL-11	$6.15	01-JUL-11	$ 6.15	01-JAN-15	$ 6.25	01-APR-15	$ 6.35	01-JUN-15	$ 6.35
YOUNG ADULT INSTITUTE FSR-5 EDITH	112030172	03438451	003	4491	RESPITE FREE-STANDING; VOL	15 MINUTES (96)	23-SEP-2012	$8.24	23-SEP-12	$8.24	01-JUL-13	$ 8.24	01-JAN-15	$ 8.34	01-APR-15	$ 8.46	01-JUN-15	$ 8.46
YOUNG ADULT INSTITUTE RSP	112030172	02596665	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2011	$5.69	01-JUL-11	$5.69	01-JAN-14	$ 5.69	01-JAN-15	$ 5.71	01-APR-15	$ 5.73	01-JUN-15	$ 5.73
YOUTH EMPOWERMENT PROJECT INC RSP	320040736	03226937	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2012	$6.19	01-SEP-12	$6.19	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -	01-JAN-14	$ -
YWCA OF WHITE PLAINS RSP	131740519	03094424	003	4486	RESPITE; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2012	$7.58	01-APR-12	$7.58	01-APR-12	$ 7.58	01-JAN-15	$ 7.68	01-APR-15	$ 7.78	01-JUN-15	$ 7.78

PROV_NAME	TAXPAYER_FED_TAX_ID	PROV_ID	LOC_OF_SRV	RATE_CD	RATE_DESC	RATE_TYPE	RATES AS OF 3/31/2013	RATE AMT	RATES AS OF 3/31/2013 (08/19/2015)	RATE AMT	RATES AS OF 6/30/2014 (08/19/2015)	RATE AMT	RATES AS OF 1/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 4/1/2015 (08/14/2015)	RATE AMT	RATES AS OF 6/30/2015 (08/14/2015)	RATE AMT
PEOPLE INC PTL	160975538	03142936	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2011	$25.61	01-DEC-11	$25.61	01-DEC-11	$ 25.61	01-JUL-14	$ -	01-JUL-14	$ -	01-JUL-14	$ -
PEOPLE INC PTL	160975538	03142936	038	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2012	$24.27	01-MAY-12	$24.27	01-MAY-14	$ -	01-MAY-14	$ -	01-MAY-14	$ -	01-MAY-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	019	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$29.23	01-SEP-11	$29.23	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	020	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$29.23	01-SEP-11	$29.23	01-SEP-11	$ 29.23	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	023	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$29.23	01-SEP-11	$29.23	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
PEOPLE INC PTL	160975538	03142936	033	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2012	$29.88	01-MAY-12	$29.88	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -	01-JUN-13	$ -
NYSARC INC NYC CHAPTER	135596746	03206517	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$31.82	01-AUG-11	$31.82	01-AUG-11	$ 31.82	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ULSTER-GREENE CO NYSARC PTL	141437657	03144103	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$35.01	01-NOV-09	$35.01	01-NOV-09	$ 35.01	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ULSTER-GREENE CO NYSARC PTL	141437657	03144103	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$35.01	01-NOV-09	$35.01	01-NOV-09	$ 35.01	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ULSTER-GREENE CO NYSARC PTL	141437657	03144103	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2009	$40.73	01-SEP-09	$40.73	01-SEP-09	$ 40.73	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
ULSTER-GREENE CO NYSARC PTL	141437657	03144103	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	12-SEP-2009	$42.01	12-SEP-09	$42.01	12-SEP-09	$ 42.01	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
RESOURCE CTR F/INDEP PTL	222518284	02870771	018	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$47.00	01-APR-11	$47.00	01-APR-11	$ 47.00	01-AUG-14	$ -	01-AUG-14	$ -	01-AUG-14	$ -
CATHOLIC CHARITIES OF ALBANY PTL	141340033	03169266	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$48.00	01-NOV-09	$48.00	01-NOV-09	$ 48.00	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
TRINITY ASSISTANCE CORP PTL	205510689	03154372	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2010	$50.06	01-JAN-10	$50.06	01-JAN-10	$ 50.06	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	021	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$58.46	01-SEP-11	$58.46	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -	01-FEB-14	$ -
ULSTER-GREENE CO NYSARC PTL	141437657	03144103	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	12-SEP-2009	$61.10	12-SEP-09	$61.10	12-SEP-09	$ 61.10	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	044	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-MAY-2010	$85.68	01-MAY-10	$85.68	01-MAY-10	$ 85.68	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	027	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-AUG-2011	$88.13	01-AUG-11	$88.13	01-AUG-11	$ 88.13	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
PEOPLE INC PTL	160975538	03142936	024	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2011	$110.45	01-NOV-11	$110.45	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	022	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$116.91	01-SEP-11	$116.91	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	024	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$116.91	01-SEP-11	$116.91	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	026	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$116.91	01-SEP-11	$116.91	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	018	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$146.17	01-SEP-11	$146.17	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
LEARNING DISAB ASSOC GV PTL	222702285	03178250	025	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-SEP-2011	$146.17	01-SEP-11	$146.17	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -	01-DEC-13	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$155.10	01-APR-11	$155.10	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	010	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUN-2011	$155.10	01-JUN-11	$155.10	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -	01-APR-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$155.93	01-APR-11	$155.93	01-APR-11	$ 155.93	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	008	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$155.93	01-APR-11	$155.93	01-APR-11	$ 155.93	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
HERITAGE CHRISTIAN SERVICES INC PTL	222334190	03297418	009	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-APR-2011	$155.93	01-APR-11	$155.93	01-AUG-13	$ -	01-AUG-13	$ -	01-AUG-13	$ -	01-AUG-13	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	033	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2009	$183.59	01-DEC-09	$183.59	01-DEC-09	$ 183.59	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	034	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2009	$183.59	01-DEC-09	$183.59	01-DEC-09	$ 183.59	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	040	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-FEB-2010	$236.25	01-FEB-10	$236.25	01-FEB-10	$ 236.25	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
MONROE CO NYSARC PTL	160835172	03153055	007	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-DEC-2010	$341.73	01-DEC-10	$341.73	01-MAY-13	$ -	01-MAY-13	$ -	01-MAY-13	$ -	01-MAY-13	$ -
CATHOLIC CHARITIES OF ALBANY PTL	141340033	03169266	005	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$387.99	01-NOV-09	$387.99	01-NOV-09	$ 387.99	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	048	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	050	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	051	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	052	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	053	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	054	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	055	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	056	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	057	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JUL-2010	$439.89	01-JUL-10	$439.89	01-JUL-10	$ 439.89	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY PTL	141340033	03169266	012	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$535.85	01-NOV-09	$535.85	01-NOV-09	$ 535.85	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
INDEPENDENT SUPPORT SERVICES PTL	050535944	03137900	029	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-JAN-2012	$621.13	01-JAN-12	$621.13	01-JAN-12	$ 621.13	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY PTL	141340033	03169266	006	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$933.64	01-NOV-09	$933.64	01-NOV-09	$ 933.64	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -
CATHOLIC CHARITIES OF ALBANY PTL	141340033	03169266	011	4481	CONS SUPP & SVCS; VOL; 1/4 HR UNIT	15 MINUTES (96)	01-NOV-2009	$998.32	01-NOV-09	$998.32	01-NOV-09	$ 998.32	01-OCT-14	$ -	01-OCT-14	$ -	01-OCT-14	$ -

Independent Accountant's Compliance Examination Guidance
For use when examining
Office For People With Developmental Disabilities' Consolidated Fiscal Report

Centers for Medicare and Medicaid Services (CMS), NY Office for People With Developmental Disabilities (OPWDD) and Department of Health (DOH) have agreed that the Consolidated Fiscal Report (CFR) with associated instructions is the cost report that will be used to annually report public provider costs for both the Medicaid State Plan and Medicaid Waiver services, beginning with the State Fiscal Year April 1, 2013 thru March 31, 2014. OPWDD has also agreed that they will follow the instructions/procedures defined in the CFR manual as modified with the agreement of both NYS and CMS. All reporting and/or cost allocation(s) not conforming with the requirements stated in the CFR manual, such as OPWDD's required adherence to Medicare Cost and Cost Allocation principles as described in the CMS Medicare Provider Reimbursement Manual (publication-15), require the written approval of CMS. OPWDD which is required to submit a certified CFR to State and/or Federal oversight agencies may use the Compliance Examination in lieu of the accountant's certification which appears on Schedule CFR-ii/CFR-iiA. The Compliance Examination is intended to ensure the reliability of CFR data by subjecting it to generally accepted government auditing standards (GAGAS) as well as the examination guidance specified by and agreed to by State and Federal oversight agencies. The Compliance Examination must include the Document Control Number and the reporting period of the CFR submission that was examined.

The certification must address the following:

- Verification that there is a system in place, as of April 1, 2013, and maintained for recording data in accordance with CFR definitions.

- Verification that source documents are available to support the reported data and are / or will be maintained for review and audit for a minimum of 7 years following the close of the reporting period of the CFR. The data must be fully documented and securely stored.

- Verification that there is a system of internal controls to assure the accuracy of the data collection process and recording system and that reported documents are not altered. Test that documents are reviewed and signed by a supervisor as required.

- Verification that the data collection methods are adequate to support the amounts reported.

- Verification that all amounts reported can be traced to supporting documentation.

- Verification that OPWDD maintained data and prepared cost based on the following:

a. OPWDD shall identify and record provider cost in accordance with Generally Accepted Accounting Principles (GAAP).
b. OPWDD shall annually report cost using a complete Consolidated Fiscal Report (CFR). The CFR annual cost report shall be examined by an Independent Certified Public Accountant (CPA) as of April 1, 2013; in lieu of an audit the CPA shall perform an Attestation Engagement – Examination and render an opinion on the reported cost regarding reasonableness, compliance with GAAP, and that the CFR reported costs were determined in accordance with the cost and cost allocation principles described in the Medicare Provider Reimbursement Manual (Publication-15). Each Waiver service will be reported using a separate column of the CFR; in addition each waiver service provided by and OHCDS will also be reported using a separate column of the CFR. In addition, for State Plan services; each Developmental Center and Over Thirty Bed ICF location should also be reported in a separate column. Any other non-Medicaid services must also be reported in separate columns of the CFR.

- Documentation of the independent practitioner's analytical review of the reported data to provide evidence that the CFR revenues, costs, statistics, and cost allocation methods are reasonable, consistent with prior reporting periods if applicable, and compliant with Medicare cost and cost allocation principles; , or differences are adequately justified, based on the independent practitioner's sufficient knowledge of OPWDD operations.

OPWDD has specified and State and Federal oversight agencies have agreed to a set of procedures for independent practitioners to minimally perform in addition to any others determined necessary in the professional judgment of the practitioner to satisfy GAGAS requirements. Procedures a through j, as listed below, will be performed by the independent practitioner on Schedules: CFR-1, lines 10, 11, 12, 13, 14, 16,17, 20, 41,48, 63, 64 through 67, 69 through 107; CFR-2; CFR-3; CFR-4; CFR 4-A and CFR-5; DMH -1; OPWDD – 3; OPWDD-4; and OMH-1 to satisfy the requirements of CFR Certification.

a. Obtain and review the Consolidated Fiscal Reporting Manual as modified with the agreement of both NYS and CMS, as it relates to the schedules listed above. Ensure that the manual is consistent with GAAP and Publication 15 and any material changes from the prior year, or inconsistency from Medicare Cost and Cost Allocation principles were approved by CMS.

b. The independent practitioner should discuss the procedures (written or informal) with the personnel assigned responsibility of supervising the preparation and maintenance of the CFR to ascertain:

    - The extent to which the OPWDD followed the established procedures on a continuous basis; and

    - The extent to which OPWDD is in compliance with GAAP and Publication-15 cost and cost allocation principles; and

- Whether they believe such procedures are adequate to result in accurate reporting of data required by the CFR

c. Inquire of same person concerning the retention policy that is followed by OPWDD, and any other State or non-State agency or entity, with respect to source documents supporting the CFR.

d. Based on a description of the procedures obtained in items b and c above, identify all the source documents which are to be retained by the OPWDD, or any other State Agency, used in the CFR, for a minimum of seven years. For each type of source document, observe that the document exists for the period.

e. Discuss the system of internal controls with the person responsible for supervising and maintaining the CFR data. Inquire whether personnel independent of the preparer reviews the source documents and data summaries for completeness, accuracy and reasonableness and how often such reviews are performed. Perform tests, as appropriate, to ensure these reviews are performed.

f. Test the mathematical accuracy of the report.

g. Ensure summarization schedules agree to detail schedules, as prescribed by the CFR Manual as modified with the agreement of both NYS and CMS.

h. Obtain the supporting worksheets/reports utilized by the agency to prepare the final data which are transcribed to the CFR. Compare the data included on the worksheets to the amounts reported in the CFR. Test the arithmetical accuracy of the summarizations.

i. Verify that the books and records fully support the total of each amount entered on each line, and column, of the specified CFR schedules. Identify significant reconciling items and conclude on their propriety; and

j. Verify that the total expenditures used to prepare the CFR agree to the Office of the State Comptroller (OSC) data for OPWDD, and report any variance from the OSC data.

The independent practitioner must adequately document the engagement planning, specific procedures followed, personnel interviewed, documents reviewed, tests performed, and conclusions reached in the work papers. The work papers should be available for State and Federal Agencies review for a minimum of seven years following the CFR report year.

The independent practitioner may perform additional procedures which are agreed to by the independent practitioner and the OPWDD, if desired. The independent practitioner should clearly identify the additional procedures performed in a separate attachment to the certification report as procedures that were agreed to by the OPWDD and the independent practitioner.

Addendum A.9 Audit Organization's Report

The following is a sample report on an audit organization's examination of a CFR prepared by OPWDD which has been determined acceptable for CMS purposes. Material omissions in an actual report may result in CMS rejecting the report.

[*Addressee*]

We examined the Consolidated Fiscal Report (CFR) prepared by the New York State Office for People With Developmental Disabilities (OPWDD) for its fiscal year ended March 31, 20XX (Document Control Number ####). OPWDD's management is responsible for implementing and maintaining internal controls that ensure the CFR's conformity with all applicable requirements, including adherence to the New York State Consolidated Fiscal Reporting and Claiming Manual and any exceptions thereto for which approvals of the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) takes precedence. OPWDD management identified for us the following such exceptions as being applicable to the CFR which is the subject of our examination:

1. Agreement between OPWDD and CMS dated [insert date] on [insert topic and brief overview of key matters].

2. State Plan Amendment [insert identifying number] approved by CMS on [insert date] regarding [insert topic and brief overview of key matters].

3. Etc.

Our responsibility is to obtain sufficient, appropriate evidence to express an opinion on whether OPWDD's reported CFR data is complete and in compliance with required criteria in all material respects.

We performed an examination-level attestation engagement conducted in accordance with the standards and guidance contained in Government Auditing Standards issued by the Comptroller General of the United States (2011 revision) which is commonly referred to as generally accepted government auditing standards. These standards require that we design our engagement to provide reasonable assurance of detecting fraud, illegal acts, or violations of provisions of contracts or grant agreements that could have a material effect on OPWDD's CFR.

We obtained an understanding of internal control as it relates to OPWDD's CFR. A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, detect, or correct errors in assertions made by management, on a timely basis. A deficiency in design exists when (1) a control necessary to meet the control objective is missing or (2) an existing control is not properly designed so that, even if the control operates as designed, the control objective is not met. A deficiency in operation exists when a properly designed control does not operate as designed, or when the person performing the control does not possess the necessary authority or qualifications to perform the control effectively. Deficiencies in internal control, if any, are identified in our findings below.

Addendum A.9 Audit Organization's Report

In our opinion, except as noted in our findings below, OPWDD's reported CFR data is complete and in compliance with required criteria in all material respects.

Findings

1.
2.
3.

Recommendations

1.
2.
3.

[*Signature*]
[*Date*]

Addendum A.10

INDIVIDUAL AND COMMUNITY SUPPORTS PERSONAL RESOURCE ACCOUNT (PRA) ANNUAL ALLOCATION

These amounts represent the **OPWDD gross amount** of the total available PRA.

Bernard Fineson, Brooklyn, Metro, Staten Island DDSOs

2	3	4	5	6	7	8	9	10	11	12	13	14
LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 53,708	$ 15,935	$ 69,643	$ 54,861	$ 16,708	$ 71,569	$ 55,876	$ 17,134	$ 73,010	$ 56,803	$ 18,040	$ 74,843
Direct Care Support - 2	$ 61,432	$ 17,005	$ 78,437	$ 62,218	$ 17,654	$ 79,872	$ 63,302	$ 18,794	$ 82,096	$ 64,294	$ 19,800	$ 84,094
Direct Care Support - 3	$ 70,838	$ 19,834	$ 90,672	$ 71,816	$ 20,377	$ 92,193	$ 72,472	$ 21,211	$ 93,683	$ 73,288	$ 22,261	$ 95,549
Direct Care Support - 4	$ 77,003	$ 22,274	$ 99,277	$ 78,483	$ 22,929	$ 101,412	$ 79,848	$ 23,763	$ 103,611	$ 80,864	$ 24,568	$ 105,432
Direct Care Support - 5	$ 85,617	$ 24,490	$ 110,107	$ 87,974	$ 25,230	$ 113,204	$ 89,132	$ 25,876	$ 115,008	$ 90,126	$ 26,812	$ 116,938
Direct Care Support - 6	$ 91,646	$ 27,108	$ 118,754	$ 93,651	$ 27,749	$ 121,400	$ 94,990	$ 28,400	$ 123,390	$ 96,466	$ 29,103	$ 125,569
Direct Care Support - 7	$ 97,930	$ 27,616	$ 125,546	$ 98,848	$ 28,164	$ 127,012	$ 99,701	$ 28,600	$ 128,301	$ 101,175	$ 29,654	$ 130,829
Direct Care Support - 8	$ 103,603	$ 29,629	$ 133,232	$ 105,099	$ 30,413	$ 135,512	$ 105,923	$ 31,324	$ 137,247	$ 106,967	$ 32,513	$ 139,480

Hudson Valley, Long Island DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 48,830	$ 13,145	$ 61,975	$ 49,885	$ 13,744	$ 63,629	$ 50,812	$ 14,344	$ 65,156	$ 51,659	$ 14,938	$ 66,597
Direct Care Support - 2	$ 55,888	$ 15,469	$ 71,357	$ 56,607	$ 16,067	$ 72,674	$ 57,599	$ 16,667	$ 74,266	$ 58,505	$ 17,261	$ 75,766
Direct Care Support - 3	$ 64,482	$ 17,792	$ 82,274	$ 65,377	$ 18,391	$ 83,768	$ 65,977	$ 18,990	$ 84,967	$ 66,722	$ 19,584	$ 86,306
Direct Care Support - 4	$ 70,116	$ 20,115	$ 90,231	$ 71,468	$ 20,714	$ 92,182	$ 72,717	$ 21,314	$ 94,031	$ 73,645	$ 21,907	$ 95,552
Direct Care Support - 5	$ 77,987	$ 22,438	$ 100,425	$ 80,141	$ 23,037	$ 103,178	$ 81,200	$ 23,637	$ 104,837	$ 82,107	$ 24,231	$ 106,338
Direct Care Support - 6	$ 83,497	$ 24,762	$ 108,259	$ 85,328	$ 25,361	$ 110,689	$ 86,553	$ 25,961	$ 112,514	$ 87,901	$ 26,555	$ 114,456
Direct Care Support - 7	$ 89,248	$ 27,085	$ 116,333	$ 90,077	$ 27,684	$ 117,761	$ 90,858	$ 28,284	$ 119,142	$ 92,204	$ 28,878	$ 121,082
Direct Care Support - 8	$ 94,422	$ 29,409	$ 123,831	$ 95,789	$ 30,007	$ 125,796	$ 96,542	$ 30,607	$ 127,149	$ 97,496	$ 31,928	$ 129,424

Broome, Capital District, Central, Finger Lakes, Sunmount, Taconic, Western DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 42,728	$ 10,830	$ 53,558	$ 43,657	$ 11,343	$ 55,000	$ 44,475	$ 11,856	$ 56,331	$ 45,223	$ 12,363	$ 57,586
Direct Care Support - 2	$ 48,952	$ 12,818	$ 61,770	$ 49,586	$ 13,330	$ 62,916	$ 50,459	$ 13,844	$ 64,303	$ 51,259	$ 14,350	$ 65,609
Direct Care Support - 3	$ 56,531	$ 14,805	$ 71,336	$ 57,320	$ 15,318	$ 72,638	$ 57,849	$ 15,831	$ 73,680	$ 58,507	$ 16,338	$ 74,845
Direct Care Support - 4	$ 61,500	$ 16,793	$ 78,293	$ 62,692	$ 17,305	$ 79,997	$ 63,792	$ 17,819	$ 81,611	$ 64,612	$ 18,325	$ 82,937
Direct Care Support - 5	$ 68,441	$ 18,780	$ 87,221	$ 70,340	$ 19,293	$ 89,633	$ 71,273	$ 19,806	$ 91,079	$ 72,075	$ 20,313	$ 92,388
Direct Care Support - 6	$ 73,260	$ 20,767	$ 94,027	$ 74,914	$ 21,280	$ 96,194	$ 75,997	$ 21,793	$ 97,790	$ 77,183	$ 22,300	$ 99,483
Direct Care Support - 7	$ 78,363	$ 22,755	$ 101,118	$ 79,103	$ 23,267	$ 102,370	$ 79,790	$ 23,781	$ 103,571	$ 80,978	$ 24,198	$ 105,176
Direct Care Support - 8	$ 82,934	$ 24,742	$ 107,676	$ 84,140	$ 25,255	$ 109,395	$ 84,803	$ 25,768	$ 110,571	$ 85,644	$ 26,896	$ 112,540

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INDIVIDUAL AND COMMUNITY SUPPORTS PERSONAL RESOURCE ACCOUNT (PRA) ANNUAL ALLOCATION

These amounts represent the **OPWDD gross amount** of the total available PRA.

Bernard Fineson, Brooklyn, Metro, Staten Island DDSOs

2	3	4	5	6	7	8	9	10	11	12	13	14
LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 54,224	$ 16,522	$ 70,746	$ 55,383	$ 17,314	$ 72,697	$ 56,403	$ 17,759	$ 74,162	$ 57,335	$ 18,678	$ 76,013
Direct Care Support - 2	$ 61,948	$ 17,592	$ 79,540	$ 62,740	$ 18,260	$ 81,000	$ 63,829	$ 19,419	$ 83,248	$ 64,826	$ 20,438	$ 85,264
Direct Care Support - 3	$ 71,354	$ 20,421	$ 91,775	$ 72,338	$ 20,983	$ 93,321	$ 72,999	$ 21,836	$ 94,835	$ 73,820	$ 22,899	$ 96,719
Direct Care Support - 4	$ 77,519	$ 22,861	$ 100,380	$ 79,005	$ 23,535	$ 102,540	$ 80,375	$ 24,388	$ 104,763	$ 81,396	$ 25,206	$ 106,602
Direct Care Support - 5	$ 86,133	$ 25,077	$ 111,210	$ 88,496	$ 25,836	$ 114,332	$ 89,659	$ 26,501	$ 116,160	$ 90,658	$ 27,450	$ 118,108
Direct Care Support - 6	$ 92,162	$ 27,695	$ 119,857	$ 94,173	$ 28,355	$ 122,528	$ 95,517	$ 29,025	$ 124,542	$ 96,998	$ 29,741	$ 126,739
Direct Care Support - 7	$ 98,446	$ 28,203	$ 126,649	$ 99,370	$ 28,770	$ 128,140	$ 100,228	$ 29,225	$ 129,453	$ 101,707	$ 30,292	$ 131,999
Direct Care Support - 8	$ 104,119	$ 30,216	$ 134,335	$ 105,621	$ 31,019	$ 136,640	$ 106,450	$ 31,900	$ 138,350	$ 107,499	$ 33,151	$ 140,650

Hudson Valley, Long Island DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 49,301	$ 13,721	$ 63,022	$ 50,361	$ 14,339	$ 64,700	$ 51,292	$ 14,958	$ 66,250	$ 52,144	$ 15,564	$ 67,708
Direct Care Support - 2	$ 56,359	$ 16,045	$ 72,404	$ 57,083	$ 16,662	$ 73,745	$ 58,079	$ 17,281	$ 75,360	$ 58,990	$ 17,887	$ 76,877
Direct Care Support - 3	$ 64,953	$ 18,368	$ 83,321	$ 65,853	$ 18,986	$ 84,839	$ 66,457	$ 19,604	$ 86,061	$ 67,207	$ 20,210	$ 87,417
Direct Care Support - 4	$ 70,587	$ 20,691	$ 91,278	$ 71,944	$ 21,309	$ 93,253	$ 73,197	$ 21,928	$ 95,125	$ 74,130	$ 22,533	$ 96,663
Direct Care Support - 5	$ 78,458	$ 23,014	$ 101,472	$ 80,617	$ 23,632	$ 104,249	$ 81,680	$ 24,251	$ 105,931	$ 82,592	$ 24,857	$ 107,449
Direct Care Support - 6	$ 83,968	$ 25,338	$ 109,306	$ 85,804	$ 25,956	$ 111,760	$ 87,033	$ 26,575	$ 113,608	$ 88,386	$ 27,181	$ 115,567
Direct Care Support - 7	$ 89,709	$ 27,661	$ 117,370	$ 90,553	$ 28,279	$ 118,832	$ 91,338	$ 28,898	$ 120,236	$ 92,689	$ 29,504	$ 122,193
Direct Care Support - 8	$ 94,893	$ 29,985	$ 124,878	$ 96,265	$ 30,602	$ 126,867	$ 97,022	$ 31,221	$ 128,243	$ 97,981	$ 32,554	$ 130,535

Broome, Capital District, Central, Finger Lakes, Sunmount, Taconic, Western DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 43,141	$ 11,316	$ 54,457	$ 44,075	$ 11,844	$ 55,919	$ 44,897	$ 12,373	$ 57,270	$ 45,649	$ 12,891	$ 58,540
Direct Care Support - 2	$ 49,365	$ 13,304	$ 62,669	$ 50,004	$ 13,831	$ 63,835	$ 50,881	$ 14,361	$ 65,242	$ 51,685	$ 14,878	$ 66,563
Direct Care Support - 3	$ 56,944	$ 15,291	$ 72,235	$ 57,738	$ 15,819	$ 73,557	$ 58,271	$ 16,348	$ 74,619	$ 58,933	$ 16,866	$ 75,799
Direct Care Support - 4	$ 61,913	$ 17,279	$ 79,192	$ 63,110	$ 17,806	$ 80,916	$ 64,214	$ 18,336	$ 82,550	$ 65,038	$ 18,853	$ 83,891
Direct Care Support - 5	$ 68,854	$ 19,266	$ 88,120	$ 70,758	$ 19,794	$ 90,552	$ 71,695	$ 20,323	$ 92,018	$ 72,501	$ 20,841	$ 93,342
Direct Care Support - 6	$ 73,673	$ 21,253	$ 94,926	$ 75,332	$ 21,781	$ 97,113	$ 76,416	$ 22,310	$ 98,726	$ 77,609	$ 22,828	$ 100,437
Direct Care Support - 7	$ 78,776	$ 23,241	$ 102,017	$ 79,521	$ 23,768	$ 103,289	$ 80,212	$ 24,298	$ 104,510	$ 81,404	$ 24,726	$ 106,130
Direct Care Support - 8	$ 83,347	$ 25,228	$ 108,575	$ 84,558	$ 25,756	$ 110,314	$ 85,225	$ 26,285	$ 111,510	$ 86,070	$ 27,424	$ 113,494

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INDIVIDUAL AND COMMUNITY SUPPORTS PERSONAL RESOURCE ACCOUNT (PRA) ANNUAL ALLOCATION

These amounts represent the **OPWDD gross amount** of the total available PRA.

Bernard Fineson, Brooklyn, Metro, Staten Island DDSOs

2	3	4	5	6	7	8	9	10	11	12	13	14
LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 53,192	$ 15,349	$ 68,541	$ 54,340	$ 16,103	$ 70,443	$ 55,350	$ 16,509	$ 71,859	$ 56,271	$ 17,403	$ 73,674
Direct Care Support - 2	$ 60,916	$ 16,419	$ 77,335	$ 61,697	$ 17,049	$ 78,746	$ 62,776	$ 18,169	$ 80,945	$ 63,762	$ 19,163	$ 82,925
Direct Care Support - 3	$ 70,322	$ 19,248	$ 89,570	$ 71,295	$ 19,772	$ 91,067	$ 71,946	$ 20,586	$ 92,532	$ 72,756	$ 21,624	$ 94,380
Direct Care Support - 4	$ 76,487	$ 21,688	$ 98,175	$ 77,962	$ 22,324	$ 100,286	$ 79,322	$ 23,138	$ 102,460	$ 80,332	$ 23,931	$ 104,263
Direct Care Support - 5	$ 85,101	$ 23,904	$ 109,005	$ 87,453	$ 24,625	$ 112,078	$ 88,606	$ 25,251	$ 113,857	$ 89,594	$ 26,175	$ 115,769
Direct Care Support - 6	$ 91,130	$ 26,522	$ 117,652	$ 93,130	$ 27,144	$ 120,274	$ 94,464	$ 27,775	$ 122,239	$ 95,934	$ 28,466	$ 124,400
Direct Care Support - 7	$ 97,414	$ 27,030	$ 124,444	$ 98,327	$ 27,559	$ 125,886	$ 99,175	$ 27,975	$ 127,150	$ 100,643	$ 29,017	$ 129,660
Direct Care Support - 8	$ 103,087	$ 29,043	$ 132,130	$ 104,578	$ 29,808	$ 134,386	$ 105,397	$ 30,748	$ 136,145	$ 106,435	$ 31,876	$ 138,311

Hudson Valley, Long Island DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 48,360	$ 12,569	$ 60,929	$ 49,410	$ 13,150	$ 62,560	$ 50,332	$ 13,731	$ 64,063	$ 51,174	$ 14,312	$ 65,486
Direct Care Support - 2	$ 55,418	$ 14,893	$ 70,311	$ 56,132	$ 15,473	$ 71,605	$ 57,119	$ 16,054	$ 73,173	$ 58,020	$ 16,635	$ 74,655
Direct Care Support - 3	$ 64,012	$ 17,216	$ 81,228	$ 64,902	$ 17,797	$ 82,699	$ 65,497	$ 18,377	$ 83,874	$ 66,237	$ 18,958	$ 85,195
Direct Care Support - 4	$ 69,646	$ 19,539	$ 89,185	$ 70,993	$ 20,120	$ 91,113	$ 72,237	$ 20,701	$ 92,938	$ 73,160	$ 21,281	$ 94,441
Direct Care Support - 5	$ 77,517	$ 21,862	$ 99,379	$ 79,666	$ 22,443	$ 102,109	$ 80,720	$ 23,024	$ 103,744	$ 81,622	$ 23,605	$ 105,227
Direct Care Support - 6	$ 83,027	$ 24,186	$ 107,213	$ 84,853	$ 24,767	$ 109,620	$ 86,073	$ 25,348	$ 111,421	$ 87,416	$ 25,929	$ 113,345
Direct Care Support - 7	$ 88,768	$ 26,509	$ 115,277	$ 89,602	$ 27,090	$ 116,692	$ 90,378	$ 27,671	$ 118,049	$ 91,719	$ 28,252	$ 119,971
Direct Care Support - 8	$ 93,952	$ 28,833	$ 122,785	$ 95,314	$ 29,413	$ 124,727	$ 96,062	$ 29,994	$ 126,056	$ 97,011	$ 31,302	$ 128,313

Broome, Capital District, Central, Finger Lakes, Sunmount, Taconic, Western DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 42,315	$ 10,345	$ 52,660	$ 43,240	$ 10,842	$ 54,082	$ 44,054	$ 11,339	$ 55,393	$ 44,797	$ 11,836	$ 56,633
Direct Care Support - 2	$ 48,539	$ 12,333	$ 60,872	$ 49,169	$ 12,829	$ 61,998	$ 50,038	$ 13,327	$ 63,365	$ 50,833	$ 13,823	$ 64,656
Direct Care Support - 3	$ 56,118	$ 14,320	$ 70,438	$ 56,903	$ 14,817	$ 71,720	$ 57,428	$ 15,314	$ 72,742	$ 58,081	$ 15,811	$ 73,892
Direct Care Support - 4	$ 61,087	$ 16,308	$ 77,395	$ 62,275	$ 16,804	$ 79,079	$ 63,371	$ 17,302	$ 80,673	$ 64,186	$ 17,798	$ 81,984
Direct Care Support - 5	$ 68,028	$ 18,295	$ 86,323	$ 69,923	$ 18,792	$ 88,715	$ 70,852	$ 19,289	$ 90,141	$ 71,649	$ 19,786	$ 91,435
Direct Care Support - 6	$ 72,847	$ 20,282	$ 93,129	$ 74,497	$ 20,779	$ 95,276	$ 75,573	$ 21,276	$ 96,849	$ 76,757	$ 21,773	$ 98,530
Direct Care Support - 7	$ 77,950	$ 22,270	$ 100,220	$ 78,686	$ 22,766	$ 101,452	$ 79,369	$ 23,264	$ 102,633	$ 80,552	$ 23,671	$ 104,223
Direct Care Support - 8	$ 82,521	$ 24,257	$ 106,778	$ 83,723	$ 24,754	$ 108,477	$ 84,382	$ 25,251	$ 109,633	$ 85,218	$ 26,369	$ 111,587

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INDIVIDUAL AND COMMUNITY SUPPORTS PERSONAL RESOURCE ACCOUNT (PRA) ANNUAL ALLOCATION

These amounts represent the **OPWDD gross amount** of the total available PRA.

Bernard Fineson, Brooklyn, Metro, Staten Island DDSOs

2	3	4	5	6	7	8	9	10	11	12	13	14
LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 69,185	$ 23,316	$ 92,501	$ 70,578	$ 24,230	$ 94,807	$ 71,801	$ 25,377	$ 97,178	$ 72,919	$ 25,805	$ 98,724
Direct Care Support - 2	$ 78,548	$ 24,612	$ 103,160	$ 79,494	$ 25,377	$ 104,871	$ 80,803	$ 26,727	$ 107,530	$ 81,998	$ 27,939	$ 109,937
Direct Care Support - 3	$ 89,948	$ 28,042	$ 117,990	$ 91,129	$ 28,677	$ 119,806	$ 91,919	$ 29,663	$ 121,582	$ 92,900	$ 30,921	$ 123,821
Direct Care Support - 4	$ 97,422	$ 31,000	$ 128,421	$ 99,209	$ 31,770	$ 130,979	$ 100,858	$ 32,757	$ 133,615	$ 102,084	$ 33,718	$ 135,802
Direct Care Support - 5	$ 107,863	$ 33,686	$ 141,549	$ 110,713	$ 34,559	$ 145,273	$ 112,112	$ 35,318	$ 147,431	$ 113,309	$ 36,439	$ 149,748
Direct Care Support - 6	$ 115,172	$ 36,857	$ 152,029	$ 117,594	$ 37,613	$ 155,207	$ 119,213	$ 38,377	$ 157,590	$ 120,994	$ 39,215	$ 160,209
Direct Care Support - 7	$ 122,788	$ 37,473	$ 160,261	$ 123,895	$ 38,115	$ 162,011	$ 124,923	$ 38,620	$ 163,544	$ 126,703	$ 39,884	$ 166,587
Direct Care Support - 8	$ 129,665	$ 39,915	$ 169,579	$ 131,473	$ 40,842	$ 172,314	$ 132,464	$ 41,981	$ 174,445	$ 133,722	$ 43,348	$ 177,070

Hudson Valley, Long Island DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 63,329	$ 19,946	$ 83,275	$ 64,602	$ 20,650	$ 85,252	$ 65,719	$ 21,354	$ 87,074	$ 66,741	$ 22,058	$ 88,799
Direct Care Support - 2	$ 71,884	$ 22,762	$ 94,647	$ 72,749	$ 23,466	$ 96,216	$ 73,945	$ 24,170	$ 98,116	$ 75,037	$ 24,875	$ 99,912
Direct Care Support - 3	$ 82,301	$ 25,579	$ 107,880	$ 83,380	$ 26,283	$ 109,663	$ 84,102	$ 26,987	$ 111,089	$ 84,999	$ 27,691	$ 112,689
Direct Care Support - 4	$ 89,130	$ 28,395	$ 117,525	$ 90,763	$ 29,099	$ 119,862	$ 92,270	$ 29,803	$ 122,073	$ 93,390	$ 30,507	$ 123,897
Direct Care Support - 5	$ 98,671	$ 31,211	$ 129,882	$ 101,275	$ 31,915	$ 133,190	$ 102,553	$ 32,619	$ 135,172	$ 103,647	$ 33,323	$ 136,970
Direct Care Support - 6	$ 105,349	$ 34,027	$ 139,376	$ 107,563	$ 34,731	$ 142,294	$ 109,042	$ 35,435	$ 144,477	$ 110,669	$ 36,139	$ 146,808
Direct Care Support - 7	$ 112,308	$ 36,843	$ 149,151	$ 113,320	$ 37,547	$ 150,867	$ 114,259	$ 38,251	$ 152,511	$ 115,885	$ 38,955	$ 154,840
Direct Care Support - 8	$ 118,592	$ 39,659	$ 158,251	$ 120,244	$ 40,363	$ 160,607	$ 121,150	$ 41,067	$ 162,217	$ 122,299	$ 42,652	$ 164,951

Broome, Capital District, Central, Finger Lakes, Sunmount, Taconic, Western DDSOs

LEVELS	Behavior 1			Behavior 2			Behavior 3			Behavior 4		
	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total	Residential	Day	Total
Direct Care Support - 1	$ 56,002	$ 17,251	$ 73,252	$ 57,124	$ 17,853	$ 74,977	$ 58,110	$ 18,455	$ 76,565	$ 59,011	$ 19,057	$ 78,068
Direct Care Support - 2	$ 63,546	$ 19,660	$ 83,206	$ 64,309	$ 20,262	$ 84,571	$ 65,364	$ 20,864	$ 86,228	$ 66,327	$ 21,466	$ 87,793
Direct Care Support - 3	$ 72,733	$ 22,069	$ 94,801	$ 73,684	$ 22,671	$ 96,355	$ 74,321	$ 23,273	$ 97,594	$ 75,112	$ 23,875	$ 98,987
Direct Care Support - 4	$ 78,755	$ 24,478	$ 103,233	$ 80,195	$ 25,080	$ 105,275	$ 81,524	$ 25,682	$ 107,206	$ 82,512	$ 26,284	$ 108,796
Direct Care Support - 5	$ 87,169	$ 26,887	$ 114,055	$ 89,466	$ 27,489	$ 116,954	$ 90,593	$ 28,091	$ 118,684	$ 91,557	$ 28,693	$ 120,250
Direct Care Support - 6	$ 93,058	$ 29,296	$ 122,354	$ 95,010	$ 29,898	$ 124,908	$ 96,314	$ 30,500	$ 126,814	$ 97,750	$ 31,102	$ 128,852
Direct Care Support - 7	$ 99,195	$ 31,705	$ 130,900	$ 100,087	$ 32,307	$ 132,394	$ 100,916	$ 32,909	$ 133,825	$ 102,350	$ 33,511	$ 135,861
Direct Care Support - 8	$ 104,737	$ 34,114	$ 138,850	$ 106,193	$ 34,716	$ 140,909	$ 106,992	$ 35,318	$ 142,310	$ 108,006	$ 36,674	$ 144,680

Note: These amounts include Clinic Services and any services billed on the Medicaid card except nursing services. These amounts include State Plan Services, such as Personal Care/Home Health Aide services, Medicaid Service Coordination and clinic services. Any Housing Stipends granted are Net of Countable Income, will be included in the PRA value, thereby reducing the amount available for services. Health Care Enhancements, Transportation and all administration, including Fiscal Management Services payments are included. Persons < 22 years old and receiving services or eligible to receive services through the school district and residing with parents or legal guardian, will receive only 60% of the value of the Residential PRA.

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Individual Directed Goods and Services (IDGS) Definitions Chart

TABLE 1: Allowable IDGS Expenses

IDGS Category	Available To Individuals in Certified Residences?	Description	Qualifications	Pricing Parameters
Camp	• No	• Funding may be requested for the cost of summer camp in a self-directed plan for a camp that is able to provide the needed safeguarding supports and supports to achieve the person's valued outcomes. • Camps can be either focused on supporting individuals with disabilities or camps that are available to the general public. • Directly related to a valued outcome.	• For a children's camp, a state, city, or county health department permit to operate legally and must operate in compliance with Subpart 7-2 of the State Sanitary Code requirements. A permit is issued only when the camp is in compliance with the state's health regulations.	• Not to exceed published fees • Annual cap $4000/year.
Community Classes & Publicly Available Training/Coaching	• Yes	• Classes available to the general public in any subject area that relates to a person's valued outcomes (Art, Dance, Exercise, Cooking, Computer Training, Etc.) • Sessions with a private trainer (physical education/exercise) may be covered as long as the service relates to a valued outcome). • Classes must be related to a habilitative need in the individual's person-centered plan and not just for recreational purposes. • Classes must be non-credit bearing; IDGS funding is for non-matriculating students.		• Not to exceed the published fees as outlined in the entity's published course fees.

Coaching/ education for parent(s), spouse and advocates involved in the person's self-directed services	• No	• IDGS funding is for Parent/Spouse/Advocate to attend/participate in educational opportunities (not covered by other public programs) that assist participants and those close to them to achieve goals established in the individual's service plan. • Self-directing individual is over age 18 (Under 18 is through FET). • May Include registration, and conference fees.		• Annual cap $500/year based on Family Education & Training (FET) pricing parameters in 1915(c) HCBS waiver. • Reimbursement is only up to FET reimbursement levels; overnight lodging or travel not allowable.
Clinician Consultants, Independent Contractors – (Non-Direct Service Provision -- Clinical Consultation Specialties)	• Yes, but only related to self-directed services	• Consultants/contractors are clinical specialists who are hired for the following purpose: ▪ Evaluate an individual's habilitation plan ▪ Training self-hired staff in delivering the self-directed plan (NOTE: State Plan clinic services may not be used to train and consult with paid caregivers. To the extent that IDGS Consultation services are being used to train self-hired staff, who might otherwise not have such resources available to them, it will not duplicate State Plan services) ▪ Evaluation of the effectiveness of the self-hired staff in carrying out the services in the self-directed plan • Consultants/contractors services cannot replicate any service available through a third-party insurer, the Medicaid State Plan or the HCBS Waiver Service. • Consultants must provide a written outline of services to be delivered prior to approval; consultants must provide an annual update of progress/provision of service and need to continue.	• A consultant/ contractor who is a member of a profession that is under the jurisdiction of the NYSED Office of the Professions, must meet all licensure or registration requirements as verified at the following site: http://www.op.nysed.gov/opsearches.htm • Discipline authorized under Article 16 clinic regulations (Psychology, OT, PT, SLP, social work, nursing, nutrition/ dietetics, rehabilitation counseling)	The hourly amount paid to the therapist cannot exceed the 90th percentile for the hourly wage for the therapeutic or consultant's professional discipline (i.e., the standard occupational code) published by the Bureau of Labor Statistics (BLS) and is identified in the table below

Clinician (Direct-Provision of Therapies/ Therapeutic Activities Not Otherwise Funded in the State Plan)	• Yes	Hippo Therapy: A treatment strategy by physical therapists, occupational therapists, and speech language pathologists that is incorporated into the professional's plan of care to achieve functional outcomes. Hippo therapy is a medical treatment, not a recreational program of teaching a progressive riding and horsemanship skill. • Funding may be requested for hippo therapy in a self-directed plan by individuals with cerebral palsy and other neurological disorders that permanently affect body movement and muscle coordination. • Funding may be requested for hippo therapy in a self-directed plan by Individuals with cerebral palsy and other neurological disorders that permanently affect body movement and muscle coordination. Therapeutic Riding & Equine-assisted Activities • Therapeutic Riding and equine-assisted activities address and contribute positively to the cognitive, physical, emotional and social well-being of individuals with special needs. Therapeutic riding and equine-assisted activities are taught by a PATH International Instructor to individuals five (5) years old and older. • The PATH instructor will provide written policies on the eligibility and discharge of individual, written documentation of the initial evaluation of the individual and written progress notes for the individual. The initial evaluation of abilities establishes the appropriate goals and objectives for the individual and the progress notes document the achievements and problem areas. The discharge should be supported by appropriate documentation that shows a baseline for goals and objectives and a recommended course	Hippo Therapy • An individual providing hippo therapy **must** be a NYS licensed Occupational, Physical or Speech Therapist; if he/she is an Assistant in one of those categories (OTA, PTA) then he/she **must** be working under an OT or PT. Therapeutic Riding & Equine Assisted Activities • PATH International Instructor must carry a certification business card with an annual expiration date, and must requalify each year to be certified Aquatic, Art, Massage, Music, Play Therapy: • A consultant/ contractor who is a member of a profession that is under the jurisdiction of the NYSED Office of the Professions, must meet all licensure or	The hourly amount paid to the therapist cannot exceed the 90th percentile for the hourly wage for the therapeutic or consultant's professional discipline (i.e., the standard occupational code) published by the Bureau of Labor Statistics (BLS) and is identified in the table below.

		of action when continued participation is no longer appropriate. Instructors communicate with the individual/parents/guardians at the start and at the end of the session (6-8 weeks) to discuss the goals, objectives, accomplishments and the next steps, and best practice includes mid-session meetings and informal discussions each time the individual rode. • Individuals may engage in horseback riding and equine related activity as therapy or through a community class that is available to the general public. When individuals engage in community classes the activity must be in support of a valued outcome and paid based on published class prices. • Riding stables may offer both public classes and equine related therapies. Based on the purpose of the activity the rates and fees must be supported for billing purposes consistent with the guidance defined in this chart and other related guidance. <u>Aquatic, Art, Massage, Music, Play Therapy:</u> • <u>Funding for **massage therapy** may</u> be included in a self-directed plan when the service has been prescribed by the individual's medical doctor to ameliorate a specific medical diagnosis/condition for which massage therapy has recognized efficacy. Funding is not available to support vague goals such as "promote well-being," "reduce stress," or "promote relaxation." There must be a corresponding valued outcome in the individual's plan. • Funding for **music therapy** may be included in a Self Direction Budget only if there is a specific communication or audiological requirement for the service as stated in the plan and justified by the individual's medical doctor or licensed clinician, and a corresponding valued outcome.	registration requirements as verified at the following site: http://www.op.nysed.gov/opsearches.htm	

		All Services – Ordering, Treatment Plan & Documentation Requirements • The request for funding **must** be accompanied by a written prescription from the individual's medical doctor with a goal of treating a specific medical diagnosis/ condition and shall support a specific valued outcome. • The therapist shall conduct an initial assessment, report findings, and propose a treatment plan. These documents are not required as part of the request for funding since these documents are not likely to be developed until after treatment begins. The treatment plan shall outline treatment goals, proposed therapeutic activities, and their anticipated frequency and duration. The treatment plan shall acknowledge the individual's personal goals and support a specific valued outcome(s) described in the ISP. The treatment plan becomes active upon the referring/prescribing medical doctor's review and written approval. • On-going treatment services shall be delivered only in accordance with the approved treatment plan. Each session shall be documented with a brief treatment note outlining the therapeutic services/activities performed, duration, and response to treatment. • The therapist shall provide periodic (at least semi-annual) progress reports to the referring/ prescribing medical doctor. Such report shall review the individual's progress toward goals and the efficacy of services to date; it shall propose any necessary updates/ revisions to the treatment plan. The medical doctor shall review the individual's progress and, if warranted, approve the updated treatment plan and continuation of services in writing.		

Health Club/ Organizational Memberships/ Community Participation	• Yes	• Health club memberships; Community membership dues -- Funding for a gym, health club or other community organization membership may be included in the self-directed plan for reasons of health and fitness or community integration in accordance with the participant's valued outcomes. • Membership is for the individual only; no family memberships allowed with IDGS funding. • The club/organization must offer open enrollment to the public, and cannot be a private club with a closed membership where membership is available by invitation only. • An individual may have multiple memberships to health clubs.	• Payment not to exceed the entity's published membership dues/fees specified.	• Annual cap $1500/year.
Household-Related Items and Services	• No	• Item cannot be funded through any other funded program and may include Appliances that assist a person to live more independently (i.e., a microwave oven for someone who cannot safely use a stove or oven) • Appliance must benefit the individual and be related to a valued outcome as well as be related to health and safety. • Household support (cleaning, minor maintenance, snow removal, lawn mowing) only for individuals not living in the family home. • Note: The Community Transition Services (CTS) waiver service and funding cap remains separate from IDGS funding in this category.	• N/A	• Annual cap $1500/year.
Interpretation Services	• Yes, but only related to self-direction services	• Cannot duplicate any Medicaid funded service providers' requirement to communicate with the person, e.g. community habilitation, Medicaid Service Coordination, Hospitalizations • Includes language interpretation, but not translation services.	• Payment may not exceed the entity's established fees • Payment must be to a formal interpretation service	• Published fees cannot be exceeded.

		• Must be directly related to valued outcomes, safeguards and services identified and approved in the Self Direction Budget. In order to make the determination whether the interpretation is service related, and costs may be reimbursed, the questions to be answered are: 1. What valued outcome/safeguard is this activity in support of? 2. What service was the interpretation related to? 3. What service was actually provided? 4. Who provided the service?		
Paid Neighbor	• No	• Stipend paid to neighbor to be "on-call" to assist a person who lives independently. If the paid neighbor is called upon to provide direct services, he/she is paid an hourly wage for the delivery of self-hired or agency supported community habilitation. • The specific duties are defined in a contract signed by the paid neighbor and the Fiscal Intermediary.	• The paid neighbor staff person cannot be a family member of the person. • Must meet all requirements for background check, and training that would be required of a self-hired staff person.	• Monthly cap $800
Self-Directed Staffing Support	• Yes, but only related to self-directed services	• Assistance with scheduling self-hired staff and with assisting the person to complete staffing related paperwork. • Not to duplicate FI employer responsibilities or Broker services related to development of the person's self-directed plan. • The 'self-hired' staff person providing this support is not a staff person of a NFP agency and is not a person who is active in assisting the person with decision-making regarding his/her self-directed services (not a family-member or a member of the person's freely chosen planning team).	• All staff, volunteers and trainers are screened for criminal background and excluded provider status •	• Not to exceed payment of $20/hour
Transition Programs for	• No	• Tuition for non-credit bearing transition programs for individuals with IDD who have already completed their educational program (i.e. 'aged out').	• All staff, volunteers and trainers are screened for criminal	• Published fees cannot be exceeded.

Individuals with IDD		• The coursework must address a person's valued outcomes and address skill building and employment outcomes. • Programs may be provided in non-site based settings, on college campuses, but not in locations certified by OPWDD. • Coursework may include training on personal care skills, and socialization skills, but this training is provided to support vocational outcomes for the person. • To be funded via a person's Self Direction Budget, the program cannot be funded by ACCESS-VR, IDEA or other funding sources. • Services are time-limited and cannot exceed a two year timeframe. • No room and board costs are fundable.	background and excluded provider status •	• Per class limit for tuition is $350/course. • Where tuition is on a monthly basis, not to exceed $800/month
Transportation	• Yes, only related to self-directed services	• Funding may be requested for the cost of service related transportation that is directly related to valued outcomes, safeguards and services identified and approved in the Self Direction Budget. In order to make the determination whether transportation is service related, and costs may be reimbursed, the questions to be answered are: 5. What valued outcome/safeguard is this activity in support of? 6. What service was this transportation related to? 7. What service was actually provided? 8. Who provided the service? • Transportation costs are not reimbursed through the Self Direction Budget for transportation to and from OPWDD funded services for which transportation costs are included in the price developed and paid for the service. • Mileage may not be reimbursed for medical appointments as this duplicates a State Plan service. • Transportation reimbursement takes several forms:	• Vehicle must be operated by a licensed driver.	• Mileage reimbursement not to exceed standard federal mileage rate: http://www.irs.gov/2014-Standard-Mileage-Rates-for-Business,-Medical-and-Moving-Announced • Reimbursement of public transportation and paratransport limited to published rates. Discounts for individuals with disabilities shall be requested, where available. • Vendor transportation limited to published fees.

		1. **Reimbursement for service related miles** may be made to: a. *Staff person* who drove his/her personal vehicle to a service related activity, b. *Participant* who drove or was driven in his/her personal vehicle to a service related activity, or c. *Friend or family* member who drove his/her personal vehicle to a service related activity. • Service related mileage may be paid from IDGS for transportation costs required for the individual to access a generic service in the community that is Medicaid reimbursable within the Self Direction Budget (directly related to a valued outcome or safeguard) regardless of whether or not there is a paid staff person present. • Mileage reimbursement covers all operating costs related to the vehicle and included in the IRS standard mileage rate standards, i.e., gas, registration, vehicle inspection, insurance, repairs & maintenance. • **Reimbursement for the cost of public transportation or paratransit**, such as bus passes, bus, taxi and train fares that is directly related to valued outcomes, safeguards and services identified and approved in the Self Direction Budget. Individuals may purchase metro cards under this category for self-hired staff providing habilitation supports as long as the card is kept in the possession of the individual and is only used during the provision of service.		

TABLE 2: The Following items cannot be funded through IDGS

Academic Tutoring	• Academic tutoring is **not** funded through the IDGS. This service should be pursued through the school district or college setting. Academic tutoring/homework assistance is not an appropriate task for self-hired staff.
Automatic pill dispenser/ medication system	• Available through Assistive Technology, outside the person's Self Direction Budget
Cell Phones/Telephones	• Funding for cell phones is not an allowable IDGS expense. • The SafeLink Wireless program is available to eligible individuals in New York State who receive Supplemental Security Income (SSI). • The SafeLink service in New York State allows for a cell phone and limited free minutes for a person who has a diagnosed developmental disability and receives social security benefits under SSI.
Computer Hardware	• Not allowable in IDGS
Computer Programs/Software	• Computer Software may be available through Assistive Technology, outside the person's Self Direction Budget.
Leased and Purchased Vehicles	• Leased or Purchased Vehicles **are not allowable expenses under IDGS.**
Health-Related Services, Equipment and Supplies	• Health related supplies such as food and beverage thickeners, trachea collars, disposable bed pads, wipes, incontinence products, and supplemental medications are funded through the State Plan only; not through IDGS funding.
Parents' Activity Fees, Expenses, and Meals	• Activity fees, expenses, and meals incurred by parents of individuals **are not** reimbursed with IDGS funds and must be paid by the parents when they accompany an individual to an activity supported by the his/her Self Direction Budget.
Participants' Activity Fees, Expenses, and Meals	• Activity fees, expenses, and meals incurred by individuals **are not** reimbursed with IDGS funds and must be paid by the individual or his/her family.
Personal Monitoring Systems	• Available through State Plan
Staff Activity Fees, Expenses, and Meals	• Activity fees, expenses, and meals incurred by self-hired staff supporting individuals are not reimbursed with IDGS funds, but may be funded through Other Than Personal Services.

Direct Clinician service delivery and Therapies: Physical Therapy, Occupational Therapy, Speech Therapy, Psychology (Medicaid state funded)	• On-going therapies that are provided directly to the person are funded through the individual's State Plan Medicaid Card or, if the individual is school-aged, through the local school district, and are **not** funded under IDGS.
Experimental Therapies	• Experimental therapies are not reimbursable in any clinical category within IDGS and are not a permitted expense in the OTPS payment category.

Table 3: Clinician & Therapy Payment Capitation Levels

Area: New York **Period: May 2013 – Based on 90th Percentile Wages from BLS July 31, 2014**	
Occupation (SOC code)	**Hourly 90th percentile wage**
Social Workers, All Other(211029)	$ 38.21
Dietitians and Nutritionists(291031)	$ 40.14
Occupational Therapists(291122)	$ 51.60
Physical Therapists(291123)includes Equine, Aquatic Therapy**	$ 53.42
Recreational Therapists(291125)	$ 34.60
Speech-Language Pathologists(291127)	$ 61.16
Therapists All Other(291129)	$ 43.00
Registered Nurses(291141)	$ 50.98
Nurse Practitioners(291171)	$ 65.22
Hearing Aid Specialists(292092)	$ 30.33
Occupational Therapy Assistants(312011)	$ 34.09
Occupational Therapy Aides(312012)	$ 25.08
Physical Therapist Assistants(312021)	$ 33.96
Physical Therapist Aides(312022)	$ 18.25
Psychologists, All Other(193039)	57.66
Footnotes: (1) Annual wages have been calculated by multiplying the hourly mean wage by 2080 hours; where an hourly mean wage is not published the annual wage has been directly calculated from the reported survey data.	
SOC code: Standard Occupational Classification code -- see http://www.bls.gov/soc/home.htm	
Data extracted on July 31 2014	

Addendum A.12 to NYS Waiver* 0238.R04.07 (OPWDD/Comprehensive Waiver)- *August, 2015

CMS Counterproposal Regarding Clinical Therapies (OT, PT, S/L) Being Included in Residential and Day Habilitation Rates - CMS 64 Claiming/Re-Claiming to Eliminate any Potential Duplicate Payments

Effective July 1, 2014

1. ***Beginning with service dates of July 1, 2014, NYS shall credit to CMS, via the CMS 64, the value of off-site clinic services delivered in Supervised Residential Habilitation and Day Habilitation Sites, or any other waiver rate that might include a service in the state plan.*** This will be accomplished as follows:

   a. The full value of the federal share of all retroactive off-site claims will be credited on a quarterly basis. The voluntary adjustment for the retroactive period will be made on the Quarterly Expenditure Report for July – September 2015.

   b. Prospectively, at the close of each quarter, NYS will calculate the value of off-site services and will continue to refund the federal share value of off-site services until the date when all off-site claims will cease.

2. ***NYS will evaluate Supervised Residential Habilitation and Day Habilitation services to establish where 'hands-on' therapies are provided.***

3. **NYS will reclaim the federal share for the value of any off-site services that meet the following criteria:**

   a. Any off-site services that are determined to be delivered at a day habilitation program, or any other service location that does not include funding in its rate for hands-on therapies.

4. **Following the above "reclaiming process," NYS shall limit the residual value of the repayment of the federal share to the federal share value of off-site services that are delivered at a day habilitation program site that are deemed to include funding for direct, hands-on therapies.**

5. **This process shall continue each quarter until claims run out is complete for off-site services. *All reclaiming is subject to the two-year timely-filing requirements.**

Effective January 1, 2016

1. **The state will submit new, draft State Plan language by 9/30/15 (SPA10-18) to implement changes to the Other Licensed Providers and rehabilitation portions of the State Plan, in order to allow certain off-site Article 16 clinic services and certain therapies provided within HCBS waiver programs to transition to the new State Plan Option effective with service dates of 1/1/16. The SPA will authorize special rates for the provision of the following services when accessed by individuals with IDD and when provided by clinicians experienced in delivering services to the IDD population:**

   a. Occupational Therapy
   b. Physical Therapy
   c. Speech and Language Pathology
   d. Psychology

2. **Also effective with 1/1/16 service dates, funding within Supervised Residential and Day Service rates that are attributable to 'direct – hands on' therapy costs will be removed from waiver rates effective 1/1/16 when the state is able to implement the new State Plan option. Further changes in the Renewal will be necessary to describe the removal of the clinical funding effective 1/1/16.**

The removal of the services have been included in the .07 waiver document effective 07/01/2014; CMS has agreed to acknowledge that the actual payment amount in the State's MMIS system will exclude the associated payment amount effective 1/1/16. During the transition period of 7/1/2014 through 12/31/15, the State will make correcting adjustments when claiming for this time period on the quarterly CMS – 64s. These correcting adjustments will report the value of direct clinic therapy expenses on the appropriate line of the CMS-64, not as an HCBS waiver expense.

Addendum B to the NYS OPWDD Comprehensive Renewal Waiver
NY.0238.R04.03
Proposed effective date: 10/01/2011
Submitted to CMS 5/20/2013

New York State has the same requirements for state-operated providers as voluntary providers.

There have been no new state-operated providers requiring enrollment or issuance of a Medicaid Provider number. Given the anticipated transition of the developmental disability system to a managed care infrastructure, New York State does not anticipate any "new" state-operated providers requiring qualified provider enrollment and issuance of a Medicaid Provider number. However, should a new state-operated provider wish to deliver waiver services for the first time and/or a current state-operated provider wishes to add additional waiver services to their menu, the state-operated provider would need to demonstrate the same qualifications as those required by a voluntary operated provider.

As outlined in Appendix C QIS Sections (a) and (b), NYS OPWDD Division of Quality Improvement conducts annual reviews of all HCBS waiver providers including state-operated providers.

Through these discovery activities and others discussed throughout the waiver application, provider agencies that experience fiscal or programmatic issues are referred to the OPWDD Early Alert Committee (also described in C-QIS (a) and (b)). EA is a process to proactively identify providers that may show signs of decreased quality, enabling OPWDD to take timely and definitive action. Notwithstanding steps to enhance monitoring and promote remedial actions, the Early Alert committee may recommend adverse actions in response to an agency's failure to comply with program requirements. These actions may include:

- Recommendations to fine providers as stipulated in the 6/1/11 Financial Accountability Initiative memo from the OPWDD Acting Executive Deputy Commissioner. Fines are based upon circumstances encountered during survey and certification activities or review of agency incident management that are of such a significant nature or severity related to health and safety that the implementation of a fine is warranted.
- Change of Auspice
- Surrender, limitation, termination or nonrenewal of, operating certificates of one or more sites, surrendering, limitation of, or termination of, the Agency's provider agreement or cancellation of OPWDD contracts. During this time the agency's programs will be monitored by OPWDD staff including DQI/BPC and DDSO staff. This may require an agency to submit closure plans in accordance with OPWDD regulations and continue to implement plans of corrective action. Further information on the Early Alert process can be found on the OPWDD website.

Enhancements to the Early Alert process were implemented in 2012 including the public disclosure of providers with Early Alert status on OPWDD's website and revisions to the Early Alert process to include state operated providers of service and fines/sanctions. Additional information about Early Alert including the list of providers and notifications to them of their Early Alert status can be found on the OPWDD website.

NYS Department of Health (DOH) monitors the progress and findings of OPWDD surveys through a Monthly Report provided to DOH from OPWDD DQI that outlines all providers who have been issued Statements of Deficiency (SODs) requiring Plans of Corrective Action (POCAs). In addition, these providers may be discussed during the DOH-OPWDD Quarterly Waiver Management Meeting.

The OPWDD Early Alert Committee is the OPWDD entity that ultimately recommends to DOH whether an HCBS provider should be disallowed to bill MA and/or be renewed or terminated based on provider performance.

The process to terminate a Waiver Provider Agreement is as follows and is the same process whether the provider is a state operated provider or a voluntary provider:

a. Once a determination has been made to terminate a waiver provider agreement, DQI issues a termination letter to the provider. DDSO Director(s) are copied on this letter and it should be used to initiate removal of individuals from programs and program closures in OPWDD's Tracking and Billing System (TABS).
b. Separately DQI notifies DOH of the provider termination, including a copy of the termination letter sent to the provider.
c. Removal of individuals from a provider's program will initiate update of recipient/exception (R/E) for certain services that OPWDD has enhanced edits, thus preventing payment to the provider. For example, payment of residential habilitation services in a supervised Individualized Residential Alternative (IRA) requires that the person is registered in the appropriate IRA program. This enrollment automatically creates an R/E code which allows payment processing in eMedNY. Without the R/E code, eMedNY will deny the residential habilitation claim.
d. Through Early Alert meetings OPWDD Bureaus of Rate Setting and Central Operations are alerted to proposed provider terminations. As a courtesy, copies of the termination letter to the provider and DOH are sometimes provided.
e. If a state operated provider is terminated, Central Operations notifies the OPWDD Cost and Revenue Solutions Bureau of the effective date to set applicable rate to $0 and monitors for completion.
f. If a voluntary provider is terminated, for certain services Rate Setting is informed of effective date to set rate to $0 due to DDSO program closure in TABS.
g. Other QI activities, such as termination following the completion of the Early Alert process or the loss of an operating certificate, will result in the notification to Rate Setting that a rate needs to be set to $0.
h. Periodically, through various reviews Central Operations performs, active rates for a terminated voluntary provider may be identified. Central Operations works with the DDSO to close open program Codes in TABS, if applicable, and contacts Rate Setting to initiate the setting of rate(s) to $0 for services that Rate Setting would not receive alert to terminate a rate via program closure.

When OPWDD activates or terminates a waiver provider agreement, the information is sent to DOH. DOH makes the necessary changes to the provider file in the eMedNY system.

The procedure is the same for both voluntary and government entity providers. The only difference between the two types of providers within the application processing as follows:

1) Sanction searches are not done for state operated/government entities
2) State operated provider agencies do not have boards and therefore, there is no information to disclose.

When a provider has a change of address, they complete a change of address form, which is found on the eMedNY website. The provider submits the completed form to DOH's fiscal agent, Computer Science Corporation (CSC). The completed form is scanned into eMedNY and sent to DOH electronically. DOH reviews the form and makes necessary changes to the provider file on eMedNY. The same process is followed when the provider has a change of ownership; they complete the CHOW (Change of Ownership) form, which is also on the eMedNY website.