

**Division of Youth and Family Services
Resource Family Home Care and Relative Care Monthly Reimbursement Rates
"Rate Table No. 7" – Effective January 1, 2009**

AGE in years	STEP 00 Level "A"	STEP 01 Level "B"	STEP 02 Level "C"	Step 03 Level "D"
0-5	\$713	\$763	\$813	\$863
6-9	\$765	\$815	\$865	\$915
10-12	\$790	\$840	\$890	\$940
13+	\$838	\$888	\$938	\$988

**Daily Clothing Allowance
Effective January 1, 2009**

AGE in years	REGULAR	OVERSIZED
0-5	\$2.09	\$2.27
6-9	\$2.09	\$2.27
10-12	\$2.09	\$2.27
13+	\$2.69	\$2.96

**Special Home Service Provider* (SHSP) Monthly Rates
Effective January 1, 2009**

HANDICAP**	DATE INITIATED	RATE
Medically Fragile	Any Date	\$1,113
HIV-A	Later than 1/1/1995	\$1,113
HIV-A	1/1/1995 or Earlier	\$1,256
HIV-S	Any Date	\$1,539

* For more information about the requirements for becoming a Special Home Service Provider, please contact your Resource Family Support worker.

** *Medically Fragile* refers to children who have been identified by DYFS medical staff as having a life-affecting or life-threatening disease that requires the caregiver to receive special training and provide a significantly more demanding level of care.
HIV-A denotes asymptomatic Human Immunodeficiency Virus.
HIV-S denotes symptomatic HIV.