

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
3 Beckerle Street
Danbury CT 06810

RE: ABD-Beckerle Dr. Group Home
Provider #: 60988

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$479.39

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

- (1) Send a written request to the Department of Social Services **within 10 days of the date of this letter**. The 10 days are measured from the date of this letter to the date of the postmark, email, or delivery of the request; AND
- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
2 Deer Hill Drive
Danbury CT 06810

RE: ABD-Deer Hill Dr.
Provider #: 65640

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$627.59

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

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Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

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Ned Lamont
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Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
89 Dodgingtown Road
Bethel CT 06801

RE: ABD-Dodgingtown Rd.
Provider #: 60418

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$699.81

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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S. Ouellette Myers & Stauffer

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Ned Lamont
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Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
26 Dorset Lane
Brookfield CT 06804

RE: ABD-Dorset
Provider #: 65806

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$565.35

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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S. Ouellette Myers & Stauffer

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Ned Lamont
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Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
14 Green View Road
New Milford CT 06776

RE: ABD-Greenview Rd.
Provider #: 65658

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$543.94

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
54 Lanesville Road
New Milford CT 06776

RE: ABD-Lanesville Rd.
Provider #: 64535

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$766.79

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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S. Ouellette Myers & Stauffer

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Ned Lamont
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Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
156 Longmeadow Hill Road
Brookfield CT 06804

RE: ABD-Longmeadow
Provider #: 62380

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$535.44

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Andrea Barton Reeves, J.D.
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Ned Lamont
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Lt. Governor

July 8, 2025

Ability Beyond Disability
27 Maple Avenue
Danbury CT 06810

RE: ABD-Maple Ave.
Provider #: 60442

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$481.83

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
6 Mountainville Road
Danbury CT 06810

RE: ABD-Mountainville Rd
Provider #: 61010

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$617.03

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
2 Old Hawleyville Road
Newtown CT 06470

RE: ABD-Old Hawleyville
Provider #: 61242

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$475.21

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Ned Lamont
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Lt. Governor

July 8, 2025

Ability Beyond Disability
19 Pleasant Rise Circle
Brookfield CT 06804

RE: ABD-Pleasant Rise Circle
Provider #: 008092136

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$504.90

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Lt. Governor

July 8, 2025

Ability Beyond Disability
8 Pound Sweet Road
Bethel CT 06801

RE: ABD-Pound Sweet Rd.
Provider #: 62398

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$547.08

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Ned Lamont
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Lt. Governor

July 8, 2025

Ability Beyond Disability
27 Ridge Road
Newtown CT 06470

RE: ABD-Ridge Rd.
Provider #: 62356

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$522.53

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
45 Ritch Drive
Ridgefield CT 06877

RE: ABD-Ritch Rd.
Provider #: 65781

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$507.72

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

- (1) Send a written request to the Department of Social Services **within 10 days of the date of this letter**. The 10 days are measured from the date of this letter to the date of the postmark, email, or delivery of the request; AND
- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
12 Saw Mill Road
New Fairfield CT 06812

RE: ABD-Saw Mill Rd.
Provider #: 65799

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$612.10

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

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- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
5 Squire Court
Brookfield CT 06804

RE: ABD-Squire Court
Provider #: 65880

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$551.48

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
36 Sweetcake Mountain Road
New Fairfield CT 06812

RE: ABD-Sweetcake Mt.
Provider #: 65898

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$543.76

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
7 Valleyview Road
Brookfield CT 06804

RE: ABD-Valleyview
Provider #: 61440

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$601.04

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
41 West Street
Newtown CT 06470

RE: ABD-West St.
Provider #: 62349

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$435.77

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Ability Beyond Disability
8 Whippoorwill Road
Bethel CT 06801

RE: ABD-Whippoorwill
Provider #: 62364

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$512.43

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Abilis
50 Glenville Street
Greenwich CT 06831

RE: Abilis-Cross Ridge Drive
Provider #: 66698

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$737.08

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Abilis
50 Glenville Street
Greenwich CT 06831

RE: Abilis-Little Hill
Provider #: 64379

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$710.75

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Alternatives, Inc.
68 Genoa Street
Waterbury CT 06708

RE: Alternatives, Inc-Genoa Street
Provider #: 008022940

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$670.08

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Alternatives, Inc.
148 Highview St
Waterbury CT 06708

RE: Alternatives, Inc-Highview Street
Provider #: 65096

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$679.24

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Alternatives, Inc.
48 Lakeside Boulevard East
Waterbury CT 06708

RE: Alternatives, Inc-Lakeside Boulevard
Provider #: 65062

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$699.68

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Aspire Living & Learning
490 Amity Rd.
Woodbridge CT 06525

RE: Aspire-Amity Rd.
Provider #: 62059

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$670.49

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

- (1) Send a written request to the Department of Social Services **within 10 days of the date of this letter**. The 10 days are measured from the date of this letter to the date of the postmark, email, or delivery of the request; AND
- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Aspire Living & Learning
15 Maple Street
East Haven CT 06512

RE: Aspire-Maple St.
Provider #: 61986

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$719.33

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

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- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Aspire Living & Learning
1655 Ridge Rd.
North Haven CT 06473

RE: Aspire-Ridge Rd.
Provider #: 61929

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$685.10

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Aspire Living & Learning
123 Scrub Oak Rd.
North Haven CT 06473

RE: Aspire-Scrub Oak
Provider #: 61945

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$598.08

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Benhaven, Inc.
187 Half Mile Road
North Haven CT 06473

RE: Benhaven-Rosenberg House
Provider #: 61606

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$486.48

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
1 Bruns Road
Ansonia CT 06401

RE: CIB-Bruns Road
Provider #: 66052

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$776.83

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
85 Burnham Road
West Hartford CT 06119

RE: CIB-Burnham Road
Provider #: 61473

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$693.42

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
25 North Church Street
Granby CT 06035

RE: CIB-Carolyn John
Provider #: 60509

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$679.17

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
8 Carriage Drive
Burlington CT 06013

RE: CIB-Carriage House
Provider #: 61143

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$693.33

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
34 Cloverdale Avenue
Shelton CT 06484

RE: CIB-Cloverdale
Provider #: 66135

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$996.08

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
225 Duncaster Road
Bloomfield CT 06002

RE: CIB-Duncaster
Provider #: 62646

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$523.00

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
1 Avon Street
Enfield CT 06082

RE: CIB-Enfield GH
Provider #: 62761

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$671.28

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
24 Evans Drive
Simsbury CT 06070

RE: CIB-Evans Drive
Provider #: 62323

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$678.64

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
11 West Meath Lane
Unionville CT 06085

RE: CIB-Farmington GH
Provider #: 62183

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$607.89

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

- (1) Send a written request to the Department of Social Services **within 10 days of the date of this letter**. The 10 days are measured from the date of this letter to the date of the postmark, email, or delivery of the request; AND
- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
7 George Street
Middlebury CT 06762

RE: CIB-George St.
Provider #: 66086

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$615.58

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
210 Hayes Road
Rocky Hill CT 06067

RE: CIB-Hayes Road
Provider #: 61556

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$972.13

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
544 Moose Hill Road
Monroe CT 06468

RE: CIB-Moose Hill Rd.
Provider #: 66185

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$724.75

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
55 Pisgah Road
Oxford CT 06478

RE: CIB-Pisgah Rd
Provider #: 66151

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$741.75

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
765 Prospect Street
Wethersfield CT 06109

RE: CIB-Prospect Street
Provider #: 62977

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$815.96

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
1 Juniper Drive
Granby CT 06035

RE: CIB-Rob Edward (1 Juniper Dr)
Provider #: 60492

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$770.69

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Connecticut Institute for the Blind
103 Prospect Street
Watertown CT 06795

RE: CIB-Watertown Group Home
Provider #: 66060

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$925.78

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
120 Boyd Street
Winsted CT 06098

RE: CRI-Boyd Street
Provider #: 65369

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$672.91

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
116 Edward Avenue
Torrington CT 06790

RE: CRI-Edward Avenue
Provider #: 65335

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$655.84

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
3 Erica Lane
Wolcott CT 06716

RE: CRI-Erica Lane
Provider #: 63842

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$970.71

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
90 Farmington Avenue
Plainville CT 06062

RE: CRI-Farmington Avenue
Provider #: 65997

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$612.18

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
350 Lydale Place
Meriden CT 06450

RE: CRI-Lydale Place
Provider #: 66367

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$626.30

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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- (2) Send a detailed, written description of all items of grievance **within 90 days of the date of this letter**. The 90 days are measured from the date of this letter to the date of the postmark, email, or delivery of the detailed, written description of each specific item of grievance.

You must comply with both of these requirements in order to have a hearing. Please send both the 10-day letter and the detailed items of grievance to con-ratesetting.dss@ct.gov and cida.dss@ct.gov.

Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
723 Plainville Avenue
Farmington CT 06032

RE: CRI-Plainville Avenue Group Home
Provider #: 63074

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$712.34

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
92 Royal Oak Road
Farmington CT 06032

RE: CRI-Royal Oak
Provider #: 66218

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$641.80

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

Please note, rates are subject to future adjustment for after-discovered differences in cost data which may take place, particularly as the result of field audit. In addition, due to year-to-year rate increase limitations in statute, changes to rates issued for prior rate periods due to audit, interim rate replacement, or other reasons could result in a revision to the rates issued herein.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Outreach, Inc.
166 Spencer Hill Road
Winsted CT 06098

RE: CRI-Spencer Hill Road
Provider #: 65343

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$650.90

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Kennedy Collective
18 Belleview Dr.
Derby CT 06418

RE: Kennedy Collective-Belleview Drive
Provider #: 66383

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$465.97

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Please be advised that, pursuant to section 17b-238(b) of the Connecticut General Statutes, if you are aggrieved by this rate decision and request a hearing, you must:

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Kennedy Collective
42 Franklin Street
Derby CT 06418

RE: Kennedy Collective-Franklin Avenue
Provider #: 60434

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$403.45

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Any questions or correspondence concerning this rate should be directed to the Department of Social Services at cida.dss@ct.gov.

Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Kennedy Collective
4 Danielle Court
Derby CT 06418

RE: Kennedy Collective-Newman House
Provider #: 67224

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$407.81

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Litchfield ARC
314 Main Street
Litchfield CT 06790

RE: LARC - Bertoli Drive
Provider #: 61937

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$509.57

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Marrakech Housing Options
85 Englewood Dr
New Haven CT 06511

RE: Marrakech-Englewood
Provider #: 61317

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$621.48

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Marrakech Housing Options
7 Lyda Dr.
Milford CT 06460

RE: Marrakech-Lyda
Provider #: 64197

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$672.16

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer

Andrea Barton Reeves, J.D.
Commissioner.

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

July 8, 2025

Marrakech Housing Options
23 Wildwood Terrace
West Haven CT 06516

RE: Marrakech-Wildwood Terrace
Provider #: 64428

Dear Provider:

Effective July 1, 2025, the following reimbursement rate for State-aided residents in your facility has been determined pursuant to Section 17b-340 of the Connecticut General Statutes, as amended, and Regulation of Connecticut State Agencies 17-311-52:

<u>Rate Period</u>	<u>Licensure</u>	<u>Per Diem</u>
7/1/2025– 6/30/2026	ICF/IID	\$648.09

Pursuant to Public Act 25-168 rates are inclusive of a 2% general rate increase in accordance with the strike settlement agreement for all DDS private providers. Pursuant to Public Act 23-204, rates are based on the 2024 Annual Report filing, the minimum per diem rate is no longer in effect, and there is no inflationary adjustment.

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Sincerely,



Andrea Barton Reeves, J.D.
Commissioner

cc: A. Davis B. Mitchell
S. Ouellette Myers & Stauffer