



Washington State Department of
CHILDREN, YOUTH & FAMILIES

Family Time/Sibling Visit
Fee Schedule
Effective **August 1, 2021**

Fee for Service Fee for Service for Family and Sibling Visits		
In Person Visit	\$24.49	Visit - Hourly actual time - travel time to visit, wait time, visit time, and travel from visit
	\$24.49	No-Show * - Hourly actual travel time to visit, wait time, and travel from visit
	\$24.49	Cancelation less than 24 Hour Notice** - Per each
Virtual Visit	\$48.98	Virtual Visit -Per Each
	\$24.49	Cancelation less than 24 Hour Notice** - Per each
Unsupervised Visit	\$24.49	Visit – Hourly <ul style="list-style-type: none"> • actual time - travel time to visit and travel from visit • duration of wait and visit time (maximum allowed three hours)
Intake	\$48.98	Intake Screening Per Each

*per Special Terms & Conditions, item 7.c.(2) of the contract.
The contractor is authorized to bill up to three consecutive canceled visits or no shows per service authorization.

Sibling Visit Activity Fee	Up to \$ 7.03	Per child/per visit
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COVID-19 Visit Preparation

The Contractor may bill for each the following actions have been completed per visit following DCYF protocols:

		Per activity
1. Pre-visit COVID-19 screening call of each participants contacted, the day before a visit.	\$2.04	Each Call

Mileage Reimbursement for travel to and from a visit exceeding 60 miles
Example: A sibling visit requiring a total of 70 miles to and from a visit will be paid mileage for 10 miles.

The mileage rate is set by the Washington State Office of Financial Management (OFM). Current rates for travel can be accessed at

**Family Impact Network Family Time services delivered in the following counties
Spokane, Whitman, Grant, Stevens, Pend Oreille, Lincoln, Adams, and Ferry**

Fee for Service for Family and Sibling Visits

In Person Visit	\$ 26.50	Visit - Hourly actual time - travel time to visit, wait time, visit time, and travel from visit
	\$ 26.50	No-Show * - Hourly actual travel time to visit, wait time, and travel from visit
	\$ 26.50	Cancelation less than 24 Hour Notice** - Per each
Virtual Visit	\$53	Virtual Visit -Per Each
	\$ 26.50	Cancelation less than 24 Hour Notice** - Per each
Unsupervised Visit	\$ 26.50	Visit – Hourly <ul style="list-style-type: none"> • actual time - travel time to visit and travel from visit • duration of wait and visit time (maximum allowed three hours)
Intake	\$ 26.50	Intake Screening Per Each

*per Special Terms & Conditions, item 7.c.(2) of the contract.

The contractor is authorized to bill up to three consecutive canceled visits or no shows per service authorization.

Sibling Visit Activity Fee	Up to \$ 7.03	Per child/per visit
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COVID-19 Visit Preparation

The Contractor may bill for each the following actions have been completed per visit following DCYF protocols:

	Per activity	
1. Pre-visit COVID-19 screening call of each participants contacted.	\$2.21	Each Call

Mileage Reimbursement for travel to and from a visit

The mileage rate is set by the Washington State Office of Financial Management (OFM). Current rates for travel can be accessed at

