

**5101:3-1-06.4**

## Appendix A

<b>Choices Waiver Rates</b>		
The following services are available only to choices enrollees in the service area defined in the approved 1915 (c) waiver for the choices program.		
<b>Service</b>	<b>Billing Maximum</b>	<b>Billing unit</b>
Enhanced adult day service	\$40.00	1 day
Enhanced adult day service	\$20.00	1/2 day
Enhanced adult day service	\$1.25	15 minutes
Intensive adult day service	\$52.50	1 day
Intensive adult day service	\$26.25	1/2 day
Intensive adult day service	\$1.64	15 minutes
Adult day service transportation	\$2.12	1 mile
Adult day service transportation	\$15.84	1 one-way trip
Adult day service transportation	\$19.52	1 round trip
Home care attendant service	\$37.50	¼ hour
Home medical equipment & supplies: Ambulatory	\$5,000	1 Item
Home medical equipment & supplies : Non- Ambulatory	\$5,000	1 Item
Home medical equipment & supplies: Hygiene and Disposables	\$5,000	1 Item
Home medical equipment & supplies: Equipment Repair	\$5,000	1 Item
Home medical equipment & supplies: Nutrition supplement and Supplies	\$5,000	1 Item
Emergency response system	\$45.00	1 month rental
Emergency response system	\$45.00	installation
Emergency response system	<u>\$100.00</u>	<u>alternative ERS device</u>
Minor home modification	\$7,500	1 completed work order
Meals: home delivered	\$6.32	1 meal
Meals: therapeutic	\$8.92	1 meal
Alternative meals service	\$30.00	1 meal
Pest control	\$750.00	1 job
All services are reimbursed at the usual and customary rates or the Medicaid maximum rate whichever is lower.		