ACTION: Revised

AMENDED
Appendix
516APPENDIX A

DATE: 10/25/2016 8:36 AM

## 5160-1-06.1 PASSPORT WAIVER RATES

WAIVER SERVICE	BILLING MAXIMUM	UNIT
Enhanced Adult Day Service	\$49.39	1 Day
Enhanced Adult Day Service	\$24.70	1/2 Day
Enhanced Adult Day Service	\$1.55	15 minutes
Intensive Adult Day Service	\$64.84	1 Day
Intensive Adult Day Service	\$32.41	1/2 Day
Intensive Adult Day Service	\$2.03	15 minutes
Adult Day Service	\$2.22	1 mile
Transportation		
Adult Day Service	\$20.40	Round Trip
Transportation		1
Adult Day Service	\$16.55	1 One-Way Trip
Transportation		
Meals: Home Delivered	\$6.60	1 Meal
Meals: therapeutic	\$9.33	1 Meal
Homemaker Service	\$3.84	15 minutes (1/4 hour)
Chore Service	\$2,612.47	1 Job
Social Work Counseling	\$16.26	15 minutes (1/4 hour)
Service		,
Nutritional Consultation	\$13.34	15 minutes (1/4 hour)
Service		,
Personal Care Services	\$4.49	15 minutes (1/4 hour)
provided by ODA Certified		
Long-Term Care Agency		
Providers		
Personal Care Services	\$3.13	15 minutes (1/4 hour)
provided by ODA Certified		
Consumer-Directed Personal		
Care Provider		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Ambulatory		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Ambulatory-		
Second One		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Third One		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Non-		
Ambulatory		

## APPENDIX A 5160-1-06.1 PASSPORT WAIVER RATES

Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Non-	\$3,221.73	
Ambulatory- Second one		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Non-		
Ambulatory-Third One		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Hygiene &		
Disposables		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Hygiene &		
Disposables: Second One		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Hygiene &		
Disposables: Third One		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Equipment		
Repair		
Home Medical Equipment	\$5,224.93	1 Item
and Supplies: Nutrition		
Supplement & Supplies		
Emergency Response System	\$31.78	1 Month Rental
Emergency Response System	\$31.35	Installation
Emergency Response System	\$101.46	Alternative ERS Device
Minor Home Modification	\$7,837.40	1 Completed Work Order
Independent Living	\$5.22	15 minutes (1/4 hour)
Assistance: In-Person		
Activities		
Independent Living	\$5.22	15 minutes (1/4 hour)
Assistance: Travel Attendant	<b>\$7.22</b>	
Independent Living	\$5.22	1 Completed Call
Assistance: Telephone		
Assistance	¢1.206.24	1 D 1 T.:
Transportation	\$1,306.24	1 Round Trip
Transportation Community Transition	\$653.11	1 One-Way Trip
Community Transition Service	\$1,477.50	1 Completed Job Order or Deposit Made
	\$1,306,24	*
Non-Medical Transportation  Non-Medical Transportation	\$1,306.24 \$653.11	1 Round Trip 1 One-Way Trip
Enhanced Community Living	\$5.06	15 minute (1/4 hour)
Service Service	φυ.00	13 mmute (1/4 mour)
Alternative Meals Service	\$31.35	1 Meal
Pest Control	\$783.74	1 Job
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## APPENDIX A 5160-1-06.1 PASSPORT WAIVER RATES

Choices Home Care	\$6.25	15 minutes (1/4 hour)
Attendant Service		
Waiver Nursing Service	See rate in rule 5160-46-06	See billing unit in rule 5160-46-06
Out-of-Home Respite Service	See rate in rule 5160-46-06	See billing unit in rule 5160-46-06
Home Care Attendant Service	See rate in rule 5160-46-06	See billing unit in rule 5160-46-06
Shared Living Service: Level One	\$77.20	1 day
Shared Living Service: Level Two	\$113.19	1 day