

5123-9-32

APPENDIX

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**BILLING UNIT, SERVICE CODES, AND PAYMENT RATES  
FOR PARTICIPANT-DIRECTED HOMEMAKER/PERSONAL CARE**

**Participant-Directed Homemaker/Personal Care (Routine) - Common Law Employee**

**Billing Unit:** Fifteen minutes

<b>Service Codes:</b>	Individual Options Waiver	ADC
	Level One Waiver	FDC
	Self-Empowered Life Funding Waiver	SDD

**Payment Rates:** Negotiable from the equivalent of minimum wage to the maximum rate of \$4.49. When rate modifications apply, the payment rate is negotiable from the equivalent of minimum wage to the maximum rate of \$4.49 plus applicable rate modifications. Payment for a group size of two shall be at seventy-five per cent of the rate for each individual. Payment for a group size of three shall be at seventy-five per cent of the rate of each individual.

**Participant-Directed Homemaker/Personal Care (Routine) - Agency With Choice**

**Billing Unit:** Fifteen minutes

**Service Code:** Self-Empowered Life Funding Waiver      SDC

**Payment Rates:** Payment for a group size of two shall be at seventy-five per cent of the rate for each individual. Payment for a group size of three shall be at seventy-five per cent of the rate of each individual.

Serving 1 Individual	Serving 2 Individuals	Serving 3 Individuals
\$4.91	\$3.68	\$3.68

Participant-Directed Homemaker/Personal Care (Routine) Behavioral Support  
Rate Modification

Billing Unit: Fifteen minutes

Rate Modification Amount: \$0.63

Instructions: Applicable to Participant-Directed Homemaker/Personal Care (Routine) rate. Indicate modification on the cost projection and payment authorization.

Participant-Directed Homemaker/Personal Care (Routine) Medical Assistance  
Rate Modification

Billing Unit: Fifteen minutes

Rate Modification Amount: \$0.12

Instructions: Applicable to Participant-Directed Homemaker/Personal Care (Routine) rate. Indicate modification on the cost projection and payment authorization.

Participant-Directed Homemaker/Personal Care (Routine) Complex Care  
Rate Modification

Billing Unit: Fifteen minutes

Rate Modification Amount: \$0.63

Instructions: Applicable to Participant-Directed Homemaker/Personal Care (Routine) rate provided to individuals enrolled in the Individual Options Waiver. Indicate modification on the cost projection and payment authorization.

Participant-Directed Homemaker/Personal Care (On-Site/On-Call) - Common Law Employee

Billing Unit: Fifteen minutes

Service Codes:	Individual Options Waiver	AZC
	Level One Waiver	FZC
	Self-Empowered Life Funding Waiver	SZD

Payment Rates: The equivalent of minimum wage plus thirteen per cent to cover employer-related expenses. Payment for a group size of two shall be at seventy-five per cent of the rate for each individual. Payment for a group size of three shall be at seventy-five percent of the rate for each individual.

Participant-Directed Homemaker/Personal Care (On-Site/On-Call) - Agency With Choice

Billing Unit: Fifteen minutes

Service Code: Self-Empowered Life Funding Waiver SZC

Payment Rates: The equivalent of minimum wage. Payment for a group size of two shall be at seventy-five per cent of the rate for each individual. Payment for a group size of three shall be at seventy-five percent of the rate for each individual.