



Division of Medical Assistance Programs

# Information Memorandum Transmittal

Donald Ross, Manager  
DMAP Policy and Planning Section

**Number:** DMAP-IM-11-126

**Authorized Signature**

**Issue Date:** 12/19/2011

**Topic:** Medical Benefits

**Subject:** **Provider announcement:** Home health rates effective Jan. 1, 2012

**Applies to:**

- All DHS employees
- Area Agencies on Aging
- Children, Adults and Families
- County DD Program Managers
- County Mental Health Directors
- Seniors and People with Disabilities
- Other (please specify): DHS and OHA staff and others identified on the SPD, CAF, AMH and DMAP transmittal lists

**Message:**

DMAP will mail the following announcement to approximately 50 home health agencies. It tells them about rate changes effective Jan. 1.

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Judith Van Osdol		
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HEALTH CARE PROGRAMS  
Division of Medical Assistance Programs

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[www.oregon.gov/OHA/healthplan](http://www.oregon.gov/OHA/healthplan)

**Date:** December 19, 2011

**To:** DMAP Home Health Providers

**From:** Donald Ross, Manager  
Policy and Planning Section, DMAP

**Subject:** Fee-for-service home health rates effective Jan. 1, 2012

Effective Jan. 1, 2012, the Division of Medical Assistance Programs (DMAP) will update rates for home health services as shown below. You can find this chart and other program information on the Home Health Services provider guidelines page at [www.dhs.state.or.us/policy/healthplan/guides/homehealth/main.html](http://www.dhs.state.or.us/policy/healthplan/guides/homehealth/main.html).

Revenue Center Code	Rate	Copayment**
421 – Physical therapy visit	\$ 134.66	\$3.00
424 – Physical therapy evaluation or reevaluation	\$ 134.66	\$3.00
431 – Occupational therapy visit	\$ 150.50	\$3.00
434 – Occupational therapy evaluation or reevaluation	\$ 150.50	\$3.00
441 – Speech-language pathology visit	\$ 167.30	\$3.00
444 – Speech-language pathology evaluation or reevaluation	\$ 167.30	\$3.00
551 – Skilled nursing visit	\$ 175.98	\$3.00
559 – Skilled nursing evaluation	\$ 175.98	\$3.00
571 – Home Health Aide visit	\$ 63.21	\$3.00
270** – Medical/surgical supplies, general classification	Acquisition cost	None
271** – Medical/surgical supplies, non-sterile supplies	Acquisition cost	None
272** – Medical/surgical supplies, sterile supplies	Acquisition cost	None

\* See OAR 410-120-1230 for exemptions.

\*\* Total charges billed to all medical/surgical supplies Revenue Center Codes must not exceed \$50 per day.

### Questions?

Please contact the Provider Services Unit with any questions you may have regarding this announcement. Email [dmapproviderservices@state.or.us](mailto:dmapproviderservices@state.or.us) or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:30 p.m. and Friday 10 a.m. to 4:30 p.m. (phone lines closed 11:25 a.m. to 12:30 p.m. daily).

As always, thank you for your continued support and dedication to those you serve.

#### Help us improve future announcements:

Answer six survey questions about this provider announcement at <https://survey.emp.state.or.us/cgi-bin/qwebcorporate.dll?idx=J2ESKJ>.