OREGON DEPARTMENT OF
Human Services
Aging and People with Disabilities

Program: ICP	Branch number:	Case mgr. ID:
Prime number:	Service effective date:	
Rate start date:	Rate end date:	

Independent Choices Benefit Calculation

*Enter hours for 2-week period below. The total monthly hours will calculate.

Tasks	Activities of daily living						Self-management							Total per period hours	Auth. per period
	Bath/P. Hy	Bowel/Bladder	Cognition	Dressing/ grooming	Eating	Mobility	Breakfast	Dinner	Housekeeping	Lunch	Med. mgmt.	Shopping	Transport.		
Hourly*															
VDQ*															
						Total 2-week mileage:					X				
									Total per period:						

Monthly calculations	
Total monthly mileage amount:	
Total monthly 'Hourly' hours: Monthly wages:	
Total monthly 'VDQ' hours: Monthly wages:	

Employer tax add-ons		
Additional employer costs:		
FICA/Federal income assessment tax rate is of amount authorized:		
FUTA/Federal unemployment tax assessment rate is :		
SUTA/State unemployment tax assessment rate is :		
WBF- cents per hour:		
Monthly benefit:		