

Policy Transmittal Aging and People with Disabilities



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Number: APD-PT-23-014

Issue date: 6/27/2023

Topic: Long Term Care

Due date:

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other:

Applies to (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Types A & B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> ODDS Children's Residential Services | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Community Based & Nursing Facility Rates		
Policy/rule number(s):	OAR 411-027, OAR 411-030, OAR 411-054, OAR 411-065 & OAR 411-070	Release number:	
Effective date:	July 1, 2022	Expiration date:	
References:	OAR 411-027 Payment Limitation in Home and Community Based Services OAR 411-030 In-Home Services OAR 411-054 Residential Care and Assisted Living Facilities OAR 411-065 Specialized Living Services Contracts OAR 411-070 Nursing Facility/Medicaid-Generally and Reimbursement		
Web address:	http://www.dhs.state.or.us/spd/tools/program/osip/rateschedule.pdf http://www.dhs.state.or.us/spd/tools/cm/rates.htm , and		

Discussion/interpretation:

Both the temporary COVID emergency increase and the Wage Add-on (WAO) are ending June 30, 2023.

Effective July 1, 2023, the Legislature passed a COLA that raises the rates to match the temporary rates from 2021-2023. For providers who are currently receiving the 10% WAO, there will neither be a decrease nor an increase, but the rates are now permanent. For providers who are not participating in WAO, they will receive a 10% increase effective July 1, 2023. This is for the following providers: Assisted Living Facilities, Residential Care Facilities, Memory Care Facilities, In-Home Care Agencies, Specific Needs CBC Contracts, CBC ECOS and ECS Programs, Specialized Living Contracts, In-home Specialized Living Contracts.

Effective July 1, 2023, the nursing facility rate will increase per OAR 411-070-0442.

See attached rate schedule.

Local/branch action required: Review transmittal and apply appropriate rates.

Central office action required: Central Office staff will review the rate schedule and make system changes.

If you have any questions about this policy, contact:

Contact(s):

Cindy Susee, APD Administration: NF & PACE

Traci Lerner, Long Term Care Services and Supports: HCW & AFH

Stacey Spelman, Long Term Care Services and Supports: In Home Agencies

Sarah Hansen, Central Delivery Supports: Specific Needs Contracts & LTCCN

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RATE SCHEDULE - Effective July 1, 2023

Rates apply to Medicaid Services funded by Aging and People with Disabilities.

Room & Board	In-Home Allowance	Personal Incidental Funds
AB \$711.00	As of January 1, 2022, APD will be able to keep their entire income.	NF \$74.75
AD/OAA \$711.00		CBC \$203.00

Community-Based Care (CBC) Monthly Rates

	Residential Care Facilities	Adult Foster Homes	Assisted Living Facilities	
Base	\$2,279	\$1,932	Level 1	\$1,830
Base plus 1 add-on	\$2,722	\$2,283	Level 2	\$2,268
Base plus 2 add-ons	\$3,165	\$2,634	Level 3	\$2,846
Base plus 3 add-ons	\$3,608	\$2,985	Level 4	\$3,574
Hourly Exception Rate	\$19.21 / Hr.	\$17.77 / Hr.	Level 5	\$4,298
Standard Ventilator		\$11,131		

Memory Care (Endorsed Units Only)	\$5,977
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Nursing Facility	Daily Rate	Monthly Comparable	AFH Specific Needs Contract Types		Homecare Workers (HCW)	
Basic	\$478.15	\$13,833.37	Advanced	\$8,903	HCW Hourly	\$17.77
Bariatric	\$884.58	\$26,196.15	Adv. Vent.	\$22,521	Enhanced	\$18.77
Complex	\$669.41	\$19,651.11	Bariatric	\$8,903	Professional Development	\$18.27
Enhanced	\$669.41	\$19,651.11	Basic	\$7,790	Enhanced with PDC	\$19.27
Pediatric	\$1,330.88	\$39,771.71	Complex	\$11,434	Mileage – Non- Medical	\$.56/Mile
Ventilator	\$1,123.65	\$33,468.19	Dementia	\$6,198		
			ECOS	\$3,490		
			Hospice	\$9,535		
			TBI	\$8,201		

PACE Organization	Medicaid Only Rate	Medicare/Medicaid Rate
Providence ElderPlace	\$8,289.28	\$5,681.80
AllCare PACE	\$6,579.03	\$4,705.73

Other Services	ICP Monthly Benefit Calculation
Home Delivered Meals: \$12.25/meal Long Term Care Community Nursing Services: \$20.00/15-minute unit of service In-Home Agencies: \$36.24/Hr. Service Assessment: \$108.72 Mileage, Non-Medical: \$.56/Mile HK Shelter: \$59.09/Mo. \$1.94/Day Adult Day Services: Refer to ADS Rate Table	Multiply Total Assessed Hours by: <ul style="list-style-type: none"> • PSW Rate \$17.77 (\$20.77 if VDQ) + • FICA = 7.65% + • FUTA = .6% + • SUTA= 1.97% + • WBF = 1.1 cents/Hr. Add: Assessed Mileage x \$.56/Mile = Total Service Payment Contact List for Specific Needs Contracts