Policy Transmittal	S Oregon Department
Aging and People with Disabilitie	of Human Services
Erika Miller	Number: APD-PT-23-026
<i>Authorized signature</i>	Issue date: 11/21/2023
<u>Topic</u> : Long Term Care	Due date:
Transmitting (check the box that best apple)New policyPolicy changeAdministrative RuleManual updateApplies to (check all that apply):	<u>lies)</u> : Policy clarification ⊠ Executive letter ☐ Other:
<ul> <li>All DHS employees</li> <li>Area Agencies on Aging: Types A &amp; B</li> <li>Aging and People with Disabilities</li> <li>Self Sufficiency Programs</li> <li>County DD program managers</li> <li>ODDS Children's Residential Services</li> <li>Child Welfare Programs</li> </ul>	<ul> <li>County Mental Health Directors</li> <li>Health Services</li> <li>Office of Developmental Disabilities Services (ODDS)</li> <li>ODDS Children's Intensive In Home Services</li> <li>Stabilization and Crisis Unit (SACU)</li> <li>Other (<i>please specify</i>):</li> </ul>

Policy/rule title:	Community Based, PACE & Nursing Facility Rates		
Policy/rule number(s):	OAR 411-045 Release number:		
Effective date:	December 1, 2023 Expiration date:		
References:	OAR 411-027 Payment Limitation in Home and Community Based Services		
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 Contact List for Specific Needs Contracts		

## **Discussion/interpretation:**

Per the Collective Bargaining Agreement, Adult Foster Homes (AFH) will receive a 5% increase effective December 1, 2023. This includes Standard Ventilator, ECOS and all AFH Specific Needs Contract Types.

APD Central Office will make all changes necessary to implement these rate changes.

See attached rate schedule.

# Implementation/transition instructions: None

Training/communication plan: None

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

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

Field/stakeholder review: Xes No

If yes, reviewed by: APD Policy and Operations

Filing instructions: File with PT's

If you have any questions about this policy, contact:

Contact(s): Cindy Susee, Reimbursement Policy Analyst			
Phone: 971-345-1168	Fax:		
Email: <u>cynthia.susee@odhs.oregon.gov</u>			

# **RATE SCHEDULE - Effective December 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	NF \$74.75
AD/OA	A \$711.00	will be able to keep their entire income.	CBC \$203.00

#### **Community-Based Care (CBC) Monthly Rates**

	Residential Care Facilities	Adult Foster Homes	Assis
Base	\$2,279	\$2,029	Level 1
Base plus 1 add-on	\$2,722	\$2,398	Level 2
Base plus 2 add-ons	\$3,165	\$2,767	Level 3
Base plus 3 add-ons	\$3,608	\$3,136	Level 4
Hourly Exception Rate	\$19.21 / Hr.	\$18.66 / Hr.	Level 5
Standard Ventilator		\$11,688	

## Memory Care (Endorsed Units Only)

\$5,977

**Assisted Living Facilities** 

\$1,830

\$2,268

\$2,846

\$3,574

\$4,298

Nursing Facility	Daily Rate	Monthly Comparable	AFH Specific Needs Contract Types		Homecare (HC	
Basic	\$478.15	\$13,833.37	Advanced	\$9,348	HCW Hourly	\$17.77
Bariatric	\$884.58	\$26,196.15	Adv. Vent.	\$23,647	Enhanced	\$18.77
Complex	\$669.41	\$19,651.11	Bariatric	\$9,348	Professional	¢10.07
Enhanced	\$669.41	\$19,651.11	Basic	\$8,180	Development	\$18.27
Pediatric	\$1,330.88	\$39,771.71	Complex	\$12,006	Enhanced with	¢10.27
Ventilator	\$1,123.65	\$33,468.19	ECOS	\$3,665	PDC	\$19.27
			Hospice	\$10,012	Mileage –	\$ 56/NG1a
			TBI	\$8,611	Non- Medical	\$.56/Mile

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	Multiply Total Assessed Hours by:
Long Term Care Community Nursing Services: \$20.00/15-minute unit of service	<ul> <li>PSW Rate \$17.77 (\$20.77 if VDQ) +</li> <li>FICA = 7.65% +</li> </ul>
In-Home Agencies: \$36.24/Hr. Service Assessment: \$108.72 Mileage, Non-Medical: \$.56/Mile	<ul> <li>FUTA = .6% +</li> <li>SUTA= 1.97% +</li> <li>WBF = 1.1 cents/Hr.</li> </ul>
Adult Day Services: \$109.75	Add: Assessed Mileage x \$.56/Mile = Total Service Payment
	<b>Contact List for Specific Needs Contracts</b>