

Policy Transmittal Aging and People with Disabilities



Mike McCormick

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Number: APD-PT-22-010

Issue date: 3/28/2022

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, PACE & Nursing Facility Rates		
Policy/rule number(s):	OAR 411-045	Release number:	
Effective date:	April 1, 2022	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 an additional 2.3% increase effective April 1, 2022. This includes Standard Ventilator, ECOS and all AFH Specific Needs Contract Types.

Some providers may be under the impression that the 5% increase that was effective retroactively to July 1, 2021 will expire. Though the COVID relief funding expires, the AFHs will see a net increase of 2.3% as collectively bargained with SEIU in 2021.

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.

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

Field/stakeholder review: Yes 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: 503-945-6448	Fax: 503-947-4245
Email: cynthia.susee@dhsosha.state.or.us	

RATE SCHEDULE - Effective April 1, 2022

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

Room & Board	In-Home Allowance	Personal Incidental Funds
AB \$654.00	As of January 1, 2022, APD will be able to keep their entire income.	NF \$68.77
AD/OAA \$654.00		CBC \$187

Community-Based Care (CBC) Monthly Rates

	Residential Care Facilities	Adult Foster Homes	Assisted Living Facilities	
Base	\$1,882	\$1,932	Level 1	\$1,511
Base plus 1 add-on	\$2,247	\$2,283	Level 2	\$1,873
Base plus 2 add-ons	\$2,612	\$2,634	Level 3	\$2,351
Base plus 3 add-ons	\$2,977	\$2,985	Level 4	\$2,953
Hourly Exception Rate	\$15.87 / Hr.	\$17.77 / Hr.	Level 5	\$3,551
Standard Ventilator		\$11,131		

Memory Care (Endorsed Units Only)	\$4,939
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Nursing Facility	Daily Rate	Monthly Comparable	AFH Specific Needs Contract Types		Homecare Workers (HCW)	
Basic	\$377.24	\$10,857.51	Advanced	\$8,903	HCW Hourly	\$16.67
Bariatric	\$697.89	\$20,610.72	Adv. Vent.	\$22,521	Enhanced	\$17.67
Complex	\$528.14	\$15,447.43	Bariatric	\$8,903	Professional Development	\$17.17
Enhanced	\$528.14	\$15,447.43	Basic	\$7,790	Enhanced with PDC	\$18.17
Pediatric	\$1,084.81	\$32,379.67	Complex	\$11,434	Mileage – Non- Medical	\$.56/Mile
Ventilator	\$886.51	\$26,347.97	Dementia	\$6,198		
			ECOS	\$3,490		
			Hospice	\$9,535		
			TBI	\$8,201		

PACE Organization	Medicaid Only Rate	Medicare/Medicaid Rate
Providence ElderPlace	\$7,368.56	\$5,253.32
AllCare PACE	\$7,039.49	\$4,597.04

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: \$29.92/Hr. Service Assessment: \$89.76 Mileage, Non-Medical: \$.56/Mile HK Shelter: \$59.09/Mo. \$1.94/Day Adult Day Services: Refer to ADS Rate Table Contact List for Specific Needs Contracts	Multiply Total Assessed Hours by: • HCW Rate \$16.67 (\$19.67 if VDQ) + • FICA = 7.65% + • FUTA = .6% + • SUTA= 1.97% + • WBF = \$.011/Hr.	Add: • Assessed Mileage x \$.56/Mile = Total Service Payment

ENHANCED WAGE ADD-ON RATE SCHEDULE

Effective April 1, 2022 (Prior Approval Needed)

The Oregon Legislature approved the Enhanced Wage Add-on Program to support Home and Community-Based Services (Assisted Living, Residential Care, Memory Care – endorsed units only and In-Home Care Agencies) providers and nursing facilities. The purpose of the program is to support providers with retention of caregivers and CNAs by providing a Medicaid Enhanced rate to providers who pay wages at a specific threshold. Providers may be eligible for these increases between October 1, 2021, and June 30, 2023. The goal of the program is to maintain a stable work force and maintain quality services by paying higher wages to caregivers and CNAs. Please refer to [OAR 411-027-0160](#) and [OAR 411-070-0438](#).

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

Room & Board		Personal Incidental Funds	
AB	\$654.00	NF	\$68.77
AD/OAA	\$654.00	CBC	\$187

Community-Based Care (CBC) Monthly Rates

	Residential Care Facilities	Assisted Living Facilities	
Base	\$2,071	Level 1	\$1,663
Base plus 1 add-on	\$2,473	Level 2	\$2,061
Base plus 2 add-ons	\$2,875	Level 3	\$2,587
Base plus 3 add-ons	\$3,277	Level 4	\$3,249
Hourly Exception Rate	\$17.46 / Hr.	Level 5	\$3,907

Memory Care (Endorsed Units Only)	\$5,433
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Nursing Facility	Daily Rate	Monthly Comparable	In-Home Care Agencies (IHCA)	
Basic	\$392.33	\$11,316.50	IHCA Hourly	\$32.92
Bariatric	\$725.81	\$22,076.96	Service Assessment	\$98.76
Complex	\$549.27	\$16,089.84		
Enhanced	\$549.27	\$16,089.84		
Pediatric	\$1,128.20	\$33,699.46		
Ventilator	\$921.97	\$27,426.87		