



DEPARTMENT OF HUMAN SERVICES
SENIORS & PEOPLE WITH DISABILITIES
500 Summer Street NE E02
Salem, Oregon 97301-1073
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AUTHORIZED BY: _____

**SPD Assistant Director/
Deputy Assistant Director/**

INFORMATION MEMORANDUM

SPD-IM-01-105

Date: December 21, 2001

TO: SPD District and Unit Managers
Area Agency on Aging Directors

SUBJECT: **In-Home Exceptions for CEP's**

INFORMATION:

Legislatively required community based care rate restructuring will be effective January 1, 2002. At that time, the information in this IM will be reissued in Executive Letter format, since changes in policy are required. This IM is intended to provide advance notice of those changes.

OAR 411-030-0070(1)(a) defines the maximum monthly hours of service for which Medicaid will pay an in-home provider to assist a client with ADL tasks. OAR 411-030-0070(1)(d) reserves to DHS the right to set payment rates for ADL tasks and states that exceptions will be approved by DHS.

OAR 411-030-0070(2)(a) defines the maximum monthly hours of service for which Medicaid will pay an in-home provider to assist a client with IADL tasks. OAR 411-030-0070(2)(b) reserves to DHS the right to set payment rates for ADL tasks and states that exceptions will be approved by DHS.

The monthly maximum payment for both ADL and IADL tasks allowed by rule is:

TASK	Maximum Monthly Hours	Scheduled Hourly Rate	Total
Eating	30	\$8.56	\$256.80
Dressing	20	\$8.56	\$171.20
Bathing/Personal Hygiene	25	\$8.56	\$214.00
Mobility	25	\$8.56	\$214.00
Bowel and Bladder	25	\$8.56	\$214.00
Cognition	20	\$8.56	\$171.20
Medication management	6	\$8.34	\$50.04
Transportation/ Escort	5	\$8.34	\$41.70
Meal Prep	48	\$8.34	\$400.32
Shopping	6	\$8.34	\$50.04
Housecleaning	20	\$8.34	\$166.80
TOTAL			\$1950.10

Effective January 1, 2002, monthly payments to client employed providers for Medicaid long-term care clients that exceed \$1,950 must be pre-authorized by DHS. Existing payments for plans that exceed this monthly maximum will be allowed to continue until the next client assessment. At that time, continuation of the plan must be pre-authorized by DHS.

Steps in the authorization process are as follows:

1. Exception requests are sent to the Finance and Policy Analysis (FPA) Office of Rate Setting. Form 514x (January 2002 revision) must be used to transmit the request. All requested information on Form 514x must be completed. Local office management must indicate their approval of the request.
2. A review team from the SPD Office of Home and Community Supports and from the Office of Rate Setting will review the request and recommend action to management. SPD staff will review client care needs and the proposed plan; Rate Setting staff will review the cost of plan for reasonableness.
3. Exceptions will be approved or denied the Monday following receipt of a "hard copy" of the request. In case of Monday holidays, the approval or denial will occur the next business day. Local offices will be notified of status on that day.

4. Requests should be sent to:

Department of Human Services
Attention: Debbie Harms
500 Summer Street NE, E18
Salem, OR 97301-1074

Requests can be faxed to (503) 947-5044. Please mark the fax to Debbie Harms' attention. Requests can be E-mailed; however, a hard copy must be received by the Office of Rate Setting before the request will be acted upon. The E-mail address is Debbie.Harms@state.or.us.

The maximum monthly amount that can be locally approved will be published as part of the SPD long-term care rate schedule. When CEP rates are increased, the Office of Rate Setting will update the monthly maximum amount.

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