

**COMMUNITY BASED ALTERNATIVES HOME AND  
COMMUNITY SUPPORT SERVICES (CBA HCSS)  
PAYMENT RATES  
EFFECTIVE SEPTEMBER 1, 2004**

<b>SERVICE</b>	<b>PAYMENT RATE</b>
CBA HCSS PAS per hour (See Chart Below)	
Registered Nurse (RN) per hour	\$33.44
Licensed Vocational Nurse (LVN) per hour	\$25.06
Physical Therapy (PT) per hour	\$64.57
Occupational Therapy (OT) per hour	\$61.59
Speech Pathology (SP) per hour	\$60.55
Adult Foster Care (AFC) per day	
Level I	\$18.71
Level II	\$32.27
Level III	\$65.52
AFC Out-of-Home Respite per day	
Level I	\$32.45
Level II	\$46.01
Level III	\$79.27
In-Home Respite Care per day	\$228.39
Administrative Expense Fee	
(Pre-Enrollment Home Health Assessment)	\$129.26
Transition Assistance Services one time	\$156.00
Requisition Fees Adaptive Aids and Medical Supplies	
Under \$500	9.89% of cost
\$500 to \$999.99	\$53.44
\$1,000 to \$1,499.99	\$91.83
\$1,500 to \$1,999.99	\$104.50
\$2,000 to \$2,499.99	\$117.55
\$2,500 to \$2,999.99	\$132.73
\$3,000 to \$3,499.99	\$139.26
\$3,500 to \$3,999.99	\$145.40
\$4,000 to \$4,499.99	\$151.93
\$4,500 to \$4,999.99	\$158.46
\$5,000 and over	\$167.10
Minor Home Modifications	
under \$500	9.89% of cost
\$500 to \$999.99	\$79.16
\$1,000 to \$1,499.99	\$117.55
\$1,500 to \$1,999.99	\$130.22
\$2,000 to \$2,499.99	\$162.09
\$2,500 to \$2,999.99	\$194.34
\$3,000 to \$3,499.99	\$224.69
\$3,500 to \$3,999.99	\$255.43
\$4,000 to \$4,499.99	\$281.15
\$4,500 to \$4,999.99	\$306.49
\$5,000 to \$5,499.99	\$332.21
\$5,500 to \$5,999.99	\$357.94
\$6,000 to \$6,499.99	\$390.80
\$6,500 and over	\$424.04

**COMMUNITY BASED ALTERNATIVES HOME AND  
COMMUNITY SUPPORT SERVICES (CBA HCSS)  
PERSONAL ASSISTANCE SERVICES (PAS) PAYMENT RATES  
EFFECTIVE SEPTEMBER 1, 2004**

<b>Participant Level</b>	<b>Attendant Cost Area</b>	<b>Administration and Facility Cost Area</b>	<b>Total</b>
Nonparticipant	\$7.09	\$2.73	\$9.82
Participant - Level 1	\$7.13	\$2.73	\$9.86
Participant - Level 2	\$7.18	\$2.73	\$9.91
Participant - Level 3	\$7.23	\$2.73	\$9.96
Participant - Level 4	\$7.28	\$2.73	\$10.01
Participant - Level 5	\$7.33	\$2.73	\$10.06
Participant - Level 6	\$7.38	\$2.73	\$10.11
Participant - Level 7	\$7.43	\$2.73	\$10.16
Participant - Level 8	\$7.48	\$2.73	\$10.21
Participant - Level 9	\$7.53	\$2.73	\$10.26
Participant - Level 10	\$7.58	\$2.73	\$10.31
Participant - Level 11	\$7.63	\$2.73	\$10.36
Participant - Level 12	\$7.68	\$2.73	\$10.41
Participant - Level 13	\$7.73	\$2.73	\$10.46
Participant - Level 14	\$7.78	\$2.73	\$10.51
Participant - Level 15	\$7.83	\$2.73	\$10.56
Participant - Level 16	\$7.88	\$2.73	\$10.61
Participant - Level 17	\$7.93	\$2.73	\$10.66
Participant - Level 18	\$7.98	\$2.73	\$10.71
Participant - Level 19	\$8.03	\$2.73	\$10.76
Participant - Level 20	\$8.08	\$2.73	\$10.81

**COMMUNITY BASED ALTERNATIVES HOME AND  
COMMUNITY SUPPORT SERVICES (CBA HCSS)  
CONSUMER DIRECTED SERVICES PAYMENT RATES  
EFFECTIVE SEPTEMBER 1, 2004**

<b>PERSONAL ASSISTANCE SERVICES (PAS) per hour</b>	
Consumer Directed Services Agency Payment Rate	\$0.99
Client Payment Rate	\$9.03
Total Payment Rate	\$10.02
<b>IN-HOME RESPITE per day</b>	
Consumer Directed Services Agency Payment Rate	\$23.74
Client Payment Rate	\$204.65
Total Payment Rate	\$228.39
<b>OUT-OF-HOME RESPITE per day</b>	
<b>ADULT FOSTER CARE OUT-OF-HOME RESPITE per day</b>	
Level I:	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	\$20.58
Total Payment Rate	\$32.45
Level II:	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	\$34.14
Total Payment Rate	\$46.01
Level III:	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	\$67.40
Total Payment Rate	\$79.27
<b>ASSISTED LIVING/RESIDENTIAL CARE OUT-OF-HOME RESPITE per day</b>	
(Nonparticipant Payment Rate)	
Apartment Single Occupancy:	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	\$43.02
Total Payment Rate	\$54.89
Apartment Double Occupancy:	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	\$34.29
Total Payment Rate	\$46.16
Non-Apartment:	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	\$26.93
Total Payment Rate	\$38.80
<b>NURSING FACILITY (NF) OUT-OF-HOME RESPITE per day</b>	
Consumer Directed Services Agency Payment Rate	\$11.87
Client Payment Rate	NF TILE rate - \$11.87
Total Payment Rate	NF TILE rate