

5123:2-9-56

APPENDIX

Page 1 of 1

**BILLING UNITS, SERVICE CODES, AND PAYMENT RATES
FOR PERSONAL CARE AIDE SERVICES**

Independent Provider

| Billing Unit | Service Code | Payment Rate |
|--|---------------------|-----------------------------------|
| Base rate (the amount paid for the first thirty-five to sixty minutes of service delivered) | T1019 | \$18.10 <u>\$18.64</u> |
| Unit rate (the amount paid for each fifteen minutes of service delivered when the visit is greater than sixty minutes in length or less than or equal to thirty-four minutes in length)* | T1019 | \$2.86 <u>\$2.95</u> |

Agency Provider

| Billing Unit | Service Code | Payment Rate |
|--|---------------------|-----------------------------------|
| Base rate (the amount paid for the first thirty-five to sixty minutes of service delivered) | T1019 | \$22.45 <u>\$23.12</u> |
| Unit rate (the amount paid for each fifteen minutes of service delivered when the visit is greater than sixty minutes in length or less than or equal to thirty-four minutes in length)* | T1019 | \$3.73 <u>\$3.84</u> |

- * The provider shall be paid a maximum of one unit if the service is equal to or less than fifteen minutes in length and a maximum of two units if the service is sixteen to thirty-four minutes in length.