BILLING UNITS, SERVICE CODES, AND PAYMENT RATES
FOR ADULT DAY SUPPORT

Adult Day Support by Providers Certified by the Ohio Department of Developmental Disabilities

Adult Day Support Provided In-Person in a Small Group in an Integrated Community Setting

Billing Unit: Daily

Service Codes:

Individual Options Waiver	ADU
Level One Waiver	FDU
Self-Empowered Life Funding Waiver	SDU

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis. Rates will not be further altered to reflect actual group size.

CODB Category 1	$169.75
CODB Category 2	$171.50
CODB Category 3	$173.25
CODB Category 4	$175.25
CODB Category 5	$176.75
CODB Category 6	$178.75
CODB Category 7	$180.50
CODB Category 8	$182.25

Adult Day Support Provided In-Person in a Setting That is Not an Integrated Community Setting

Billing Unit: Daily

Service Codes:

Individual Options Waiver	ADS
Level One Waiver	FDS
Self-Empowered Life Funding Waiver	SDS

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis, by acuity assessment group assignment. Rates will not be further altered to reflect actual group size.

CODB Category	Group A-1	Group A	Group B	Group C
1	$42.50	$56.75	$102.00	$169.75
2	$43.00	$57.25	$103.00	$171.50
3	$43.25	$57.75	$104.00	$173.25
4	$43.75	$58.50	$105.00	$175.25
5	$44.25	$59.00	$106.00	$176.75
6	$44.75	$59.50	$107.00	$178.75
7	$45.00	$60.25	$108.00	$180.50
8	$45.50	$60.75	$109.00	$182.25

Adult Day Support Provided In-Person in a Small Group in an Integrated Community Setting

Billing Unit: Fifteen minutes

Service Codes:

Individual Options Waiver	ADT
Level One Waiver	FDT
Self-Empowered Life Funding Waiver	SDT

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis. Rates will not be further altered to reflect actual group size.

CODB Category 1	$6.79
CODB Category 2	$6.86
CODB Category 3	$6.93
CODB Category 4	$7.01
CODB Category 5	$7.07
CODB Category 6	$7.15
CODB Category 7	$7.22
CODB Category 8	$7.29

Adult Day Support Provided in a Setting That is Not an Integrated Community Setting

Billing Unit: Fifteen minutes

Service Codes:

In-Person:	Individual Options Waiver	ADF
	Level One Waiver	FDF
	Self-Empowered Life Funding Waiver	SDF
Virtual Support:	Individual Options Waiver	ADW
	Level One Waiver	FDW
	Self-Empowered Life Funding Waiver	SDW

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis, by acuity assessment group assignment. Rates will not be further altered to reflect actual group size.

CODB Category	Group A-1	Group A	Group B	Group C
1	$1.70	$2.27	$4.08	$6.79
2	$1.72	$2.29	$4.12	$6.86
3	$1.73	$2.32	$4.16	$6.93
4	$1.75	$2.34	$4.20	$7.01
5	$1.77	$2.36	$4.24	$7.07
6	$1.79	$2.38	$4.28	$7.15
7	$1.80	$2.41	$4.32	$7.22
8	$1.82	$2.43	$4.36	$7.29

Adult Day Support Provided Through Contract with Providers Certified by the Ohio Department of Aging

Adult Day Support Provided in Any Setting

Billing Unit: Daily

Service Codes:

Individual Options Waiver	AGD
Level One Waiver	FGD
Self-Empowered Life Funding Waiver	SGD

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis, by acuity assessment group assignment. Rates will not be further altered to reflect actual group size.

CODB Category	Group A	Group B	Group C
1	$56.75	$102.00	$169.75
2	$57.25	$103.00	$171.50
3	$57.75	$104.00	$173.25
4	$58.50	$105.00	$175.25
5	$59.00	$106.00	$176.75
6	$59.50	$107.00	$178.75
7	$60.25	$108.00	$180.50
8	$60.75	$109.00	$182.25

Adult Day Support Provided In-Person in a Small Group in an Integrated Community Setting

Billing Unit: Fifteen minutes

Service Codes:

Individual Options Waiver	AGE
Level One Waiver	FGE
Self-Empowered Life Funding Waiver	SGE

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis. Rates will not be further altered to reflect actual group size.

CODB Category 1	$6.79
CODB Category 2	$6.86
CODB Category 3	$6.93
CODB Category 4	$7.01
CODB Category 5	$7.07
CODB Category 6	$7.15
CODB Category 7	$7.22
CODB Category 8	$7.29

Adult Day Support Provided in a Setting That is Not an Integrated Community Setting

Billing Unit: Fifteen minutes

Service Codes:

In-Person:	Individual Options Waiver	AGF
	Level One Waiver	FGF
	Self-Empowered Life Funding Waiver	SGF
Virtual Support:	Individual Options Waiver	AGW
	Level One Waiver	FGW
	Self-Empowered Life Funding Waiver	SGW

Payment Rates: Listed below by cost-of-doing-business (CODB) category. Rates are presented on a per-person basis, by acuity assessment group assignment. Rates will not be further altered to reflect actual group size.

CODB Category	Group A	Group B	Group C
1	$2.27	$4.08	$6.79
2	$2.29	$4.12	$6.86
3	$2.32	$4.16	$6.93
4	$2.34	$4.20	$7.01
5	$2.36	$4.24	$7.07
6	$2.38	$4.28	$7.15
7	$2.41	$4.32	$7.22
8	$2.43	$4.36	$7.29

Behavioral Support Rate Modification

Billing Unit:	Fifteen minutes
Amount:	$0.87
Instructions:	Indicate rate modification on the cost projection and payment authorization.

Medical Assistance Rate Modification

Billing Unit:	Fifteen minutes
Amount:	$0.17
Instructions:	Indicate rate modification on the cost projection and payment authorization.