

PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Georgia Department of Community Health is required to give public notice of any significant proposed change in its methods and standards for setting payment rates for services.

INDEPENDENT CARE WAIVER PROGRAM RATES

Effective for services provided on and after April 1, 2011, and subject to payment at fee-for-service rates, the Department of Community Health is providing notice of CMS approval of renewal of the Independent Care Waiver Program (ICWP) and all of the rates associated with the Waiver Program.

The Independent Care Waiver Program was developed to provide services for individuals between the ages of twenty-one (21) and sixty-four (64) who have physical disabilities or traumatic brain injury and who, without the community-based services provided through this waiver, would otherwise require institutional care.

The purpose of this notice is to confirm maximum rates for services provided under the ICWP and establish the rate for a newly approved service, Alternative Living Service, which will provide a residential care option for waiver participants.

This public notice is available for review at each county Department of Family and Children Services office. An opportunity for public comment will be held on **April 27, 2011**, 1:00 p.m., at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the Fifth Floor Board Room. Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479. Citizens wishing to comment in writing on any of the proposed changes should do so on or before **April 29, 2011**, to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30303.

Comments submitted will be available for review by the public at the Department of Community Health, Monday – Friday, 9:00 a.m. to 4:30 p.m., in Room 4053, 2 Peachtree Street, N.W., Atlanta, Georgia 30303.

Comments from written and public testimony will be summarized and provided to the Board of Community Health prior to the **May 12, 2011**, Board meeting at 10:30 a.m. at the Department of Community Health, 2 Peachtree Street, N.W., Atlanta, Georgia 30303, in the Fifth Floor Board Room.

NOTICE IS HEREBY GIVEN THIS 14th DAY OF April, 2011

David A. Cook, Commissioner

ICWP Waiver Rate Table

Service	Maximum Rate	Unit Description	Maximum Units/Reimbursement
Adult Day Services – half day	\$39.00	Per diem	31/month
Adult Day Services – full day	\$65.00	Per diem	31/month
Alternative Living Services	\$70.00	daily	31/month
Behavioral Support Service	\$14.00	15-minute	16/day; 368/month
Case Management	\$6.25	15-minute	48 units/month
Enhanced Case Management	\$461	monthly	12
Counseling	\$21.40	15-minute	2/day; 40/month
Environmental Modification			\$8,000 lifetime
Financial Management	\$75.00	monthly	12
Personal Emergency Response Installation	\$75.00	1 installation	1
Personal Emergency Response Monitoring	\$25.00	monthly	12 annually
Skilled Nursing	\$49.79	visit	31/month
Personal Support Service – Level I	\$10.32	hour	744/month
Personal Support Service – Level II	\$12.20	hour	744/month
Personal Support Service – Level III	\$14.07	hour	744/month
Respite Service – Level I	\$2.20	15-minute	240/month
Respite Service – Level II	\$2.60	15-minute	240/month
Respite Service – Level III	\$3.00	15-minute	240/month
Respite Service – Level I	\$70.55	Per diem	14/year
Respite Service – Level II	\$83.00	Per diem	14/year
Respite Service – Level III	\$95.45	Per diem	14/year
Specialized Medical Equipment and Supplies			\$1,026/month
Vehicle Adaptation			\$225/year