

**Council on Aging  
IHA: Requested Unit Rate Revision**

<b>Cost</b>	<b>Current Rates</b>	<b>Requested Rate</b>	<b>Current Provider Rate</b>	<b>Request Provider Rate</b>	<b>Current Rate to Aide</b>	<b>Requested Rate to Aide</b>	<b>Current Case Management Rate</b>	<b>Requested Case Management Rate</b>	<b>Difference in CM Rate</b>
Level 1	\$ 28.28	\$ 36.00	\$ 25.00	\$ 31.00	14-17.50	\$ 17.70	\$ 3.28	\$ 5.00	\$ 1.72
Level 2	\$ 29.00	\$ 39.20	\$ 25.64	\$ 33.00	14-17.50	\$ 17.70	\$ 3.36	\$ 6.20	\$ 2.84
Level 3	\$ 29.73	\$ 39.20	\$ 26.28	\$ 34.00	14-17.50	\$ 17.70	\$ 3.45	\$ 5.20	\$ 1.75
<b>Units Billed</b>	<b>Current Units</b>	<b>Requested Rate</b>	<b>Difference</b>	<b>As of 1/1/23 Units Billed County</b>	<b>As of 1/1/23 Units Billed (HCCBG)</b>	<b>Total Units as of 1/1/23</b>	<b>Remaining Units w/ rate change</b>		
Level 1	2,379.0	806.0	1,573.0	0.5	363.0	363.5	442.5		
Level 2	12,237.0	11,163.0	1,074.0	2,571.2	1,922.0	4,493.2	6,669.9		
Level 3	4,675.0	2,100.0	2,575.0	1,061.3	0.0	1,061.3	1,038.8		
<b>Total</b>	<b>19,291.0</b>	<b>14,069.0</b>	<b>5,222.0</b>	<b>3,632.9</b>	<b>2,285.0</b>	<b>5,917.9</b>	<b>8,151.1</b>		
<b>Case Management Cost Review</b>	<b>Units</b>	<b>Overall CM rate (prior)</b>	<b>CM Rate County to 1/1/23</b>	<b>CM Rate Current HCCBG</b>	<b>CM Rate past with rate change HCCBG) (w/ Back pay)</b>	<b>Difference in CM Rate (Back Pay)</b>	<b>Remaining Units w/ CM Rate Change</b>		
	Level 1	\$ 7,803.12	\$ 1.64	\$ 1,190.64	\$ 1,815.00	\$ 624.36	\$ 2,212.50		
	Level 2	\$ 41,116.32	\$ 8,639.06	\$ 6,457.92	\$ 11,916.40	\$ 5,458.48	\$ 41,353.07		
	Level 3	\$ 16,128.75	\$ 3,661.31	\$ -	\$ -	\$ -	\$ 5,401.50		
	<b>Total</b>	<b>\$ 65,048.19</b>	<b>\$ 12,302.02</b>	<b>\$ 7,648.56</b>	<b>\$ 13,731.40</b>	<b>\$ 6,082.84</b>	<b>\$ 48,967.07</b>		
			<b>Total paid for CM</b>	<b>\$ 75,000.49</b>					