

MI CHOICE SERVICE USE BY SERVICE

FISCAL YEAR 2010

MI Choice Service	# of Units	FY 2010 Expenditures	Average Cost Per Unit	% of All MI Choice Services
Adult Day Care	675,616	\$ 2,066,823	\$ 3.06	1.85%
Chore Services	30,702	\$ 461,190	\$ 15.02	0.41%
Community Living Supports	5,834,766	\$ 17,600,601	\$ 3.02	15.75%
Counseling	3,513	\$ 187,223	\$ 53.29	0.17%
Environmental Accessibility Adaptations	687	\$ 851,010	\$ 1,238.73	0.76%
Fiscal Intermediary	15,489	\$ 1,635,379	\$ 105.58	1.46%
Goods and Services	690	\$ 53,374	\$ 77.35	0.05%
Home Delivered Meals	967,006	\$ 4,982,396	\$ 5.15	4.46%
Homemaking	6,122,018	\$ 21,898,490	\$ 3.58	19.60%
Non-Medical Transportation	927,054	\$ 661,513	\$ 0.71	0.59%
Nursing Facility Transition	7,488	\$ 1,651,747	\$ 220.59	1.48%
Personal Care	9,639,102	\$ 36,831,249	\$ 3.82	32.97%
Personal Emergency Response System	42,765	\$ 1,095,983	\$ 25.63	0.98%
Private Duty Nursing	822,826	\$ 7,257,979	\$ 8.82	6.50%
Residential Services	134,637	\$ 3,989,835	\$ 29.63	3.57%
Respite	2,410,596	\$ 9,225,646	\$ 3.83	8.26%
Specialized Medical Equip & Supplies	346,181	\$ 1,256,261	\$ 3.63	1.12%
Training	1,893	\$ 20,139	\$ 10.64	0.02%
	27,983,029	\$ 111,726,840	\$ 3.99	100.00%

*Data does not include AAA1B and HHS Information

MI CHOICE SERVICE USE BY SERVICE AND HCPCS CODE
FISCAL YEAR 2010

MI Choice Service	HCPCS Code/Description	# of Units	FY 2010 Expenditures	Average Cost Per Unit	% of All MI Choice Services
Adult Day Care	S5100 - Day Care Services, Adult; Per 15 Minutes Total	672,308	1,991,750		
	S5101 - Day Care Services, Adult; Per Half Day Total	3,308	75,074		
TOTAL FOR ADULT DAY CARE		675,616	2,066,823	\$3.06	1.85%
Chore Services	S5120 - Chore Services; Per 15 Minutes Total	25,014	229,018		
	S5121 - Chore Services; Per Diem Total	5,688	232,172		
TOTAL FOR CHORE SERVICES		30,702	461,190	\$15.02	0.41%
Community Living Supports	H2015 - Comprehensive Community Support Services, Per 15 Minutes Total	5,834,766	17,600,601		
	TOTAL FOR COMMUNITY LIVING SUPPORTS	5,834,766	17,600,601	\$3.02	15.75%
Counseling	99510 - Home Visit For Individual, Family, Or Marriage Counseling Total	3,513	187,223		
	TOTAL FOR COUNSELING	3,513	187,223	\$53.29	0.17%
Environmental Accessibility Adaptations	S5165 - Home Modifications; Per Service Total	687	851,010		
	TOTAL FOR ENVIRONMENTAL ACCESSIBILITY ADAPTATIONS	687	851,010	\$1,238.73	0.76%
Fiscal Intermediary	T2025 - Waiver Services; Not Otherwise Specified (Nos) Total	15,489	1,635,379		
	TOTAL FOR FISCAL INTERMEDIARY	15,489	1,635,379	\$105.58	1.46%
Goods and Services	T5999 - Supply, Not Otherwise Specified Total	690	53,374		
	TOTAL FOR GOODS AND SERVICES	690	53,374	\$77.35	0.05%
Home Delivered Meals	S5170 - Home Delivered Meals, Including Preparation; Per Meal Total	967,006	4,982,396		
	TOTAL FOR HOME DELIVERED MEALS	967,006	4,982,396	\$5.15	4.46%
Homemaking	S5130 - Homemaker Service, Nos; Per 15 Minutes Total	6,122,018	21,898,490		
	TOTAL FOR HOMEMAKING	6,122,018	21,898,490	\$3.58	19.60%
Non-Medical Transportation	A0130 - Non-Emergency Transportation: Wheel-Chair Van Total	3,922	98,653		
	S0209 - Wheelchair Van, Mileage, Per Mile Total	17,579	24,091		
	S0215 - Non-Emergency Transportation; Mileage, Per Mile Total	898,288	392,413		
	T2003 - Non-Emergency Transportation; Encounter/Trip Total	5,838	129,329		
	T2004 - Non-Emergency Transport; Commercial Carrier, Multi-Pass Total	1,427	17,027		
TOTAL FOR NON-MEDICAL TRANSPORTATION		927,054	661,513	\$0.71	0.59%

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MI Choice Service	HCPCS Code/Description	# of Units	FY 2010 Expenditures	Average Cost Per Unit	% of All MI Choice Services
Nursing Facility Transition	T1023 - Screen To Determ Approp Of Consid Of Indiv For Participation In Specified Prg, Proj Total	547	270,956		
	T1028 - Assess Of Home, Physical And Family Environment, To Determ Suitability To Meet Total	120	17,099		
	T2038 - Community Transition, Waiver;Per Service Total	6,821	1,363,692		
TOTAL FOR NURSING FACILITY TRANSITION		7,488	1,651,747	\$220.59	1.48%
Personal Care	T1019 - Personal Care Services, Per 15 Minutes Total	9,639,102	36,831,249		
	TOTAL FOR PERSONAL CARE		9,639,102	36,831,249	\$3.82
Personal Emergency Response System	S5160 - Emergency Response System; Installation And Testing Total	177	5,013		
	S5161 - Emergency Response System; Service Fee, Per Month (Excludes Installation And Total	42,588	1,090,970		
	TOTAL FOR PERSONAL EMERGENCY RESPONSE SYSTEM		42,765	1,095,983	\$25.63
Private Duty Nursing	T1000 - Private Duty / Independent Nursing Service(S) - Licensed, Up To 15 Minutes Total	822,826	7,257,979		
	TOTAL FOR PRIVATE DUTY NURSING		822,826	7,257,979	\$8.82
Residential Services	T2032 - Residential Care, Not Otherwise Specified (Nos), Waiver; Per Month Total	275	338,035		
	T2033 - Residential Care, Not Otherwise Specified (Nos), Waiver; Per Diem Total	134,362	3,651,800		
	TOTAL FOR RESIDENTIAL SERVICES		134,637	3,989,835	\$29.63
Respite	H0045 - Respite Care Services, Not In The Home, Per Diem Total	2,962	243,972		
	S5150 - Unskilled Respite Care, Not Hospice; Per 15 Minutes Total	2,404,178	8,796,329		
	S5151 - Unskilled Respite Care, Not Hospice; Per Diem Total	3,456	185,344		
	TOTAL FOR RESPITE		2,410,596	9,225,646	\$3.83
Specialized Medical Equip & Supplies	A9300 - Exercise Equipment Total	8	1,859		
	B4100 - Food Thickener, Administered Orally, Per Ounce Total	522	8,717		
	B4150 - Enteral Formulae; Category I; Semi-Synthetic Intact Protein/Protein Isolates Total	336,620	660,196		
	E0160 - Sitz Type Bath Or Equipment, Portable, Used With Or Without Commode Total	2	17		
	E0215 - Electric Heat Pad, Moist Total	10	258		
	E0241 - Bath Tub Wall Rail, Each Total	278	10,007		
	E0242 - Bath Tub Rail, Floor Base Total	12	469		

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	E0243 - Toilet Rail, Each Total	51	1,939		
	E0244 - Raised Toilet Seat Total	228	10,777		
	E0245 - Tub Stool Or Bench Total	397	32,339		
	E0315 - Bed Accessory: Board, Table, Or Support Device, Any Type Total	193	15,887		
	E0627 - Seat Lift Mechanism Incorporated Into A Combination Lift-Chair Mechanism Total	257	169,770		
	E0628 - Separate Seat Lift Mechanism For Use With Patient Owned Furniture-Electric Total	3	1,075		
	E0629 - Separate Seat Lift Mechanism For Use With Patient Owned Furniture-Non-Electric Total	3	270		
	E0745 - Neuromuscular Stimulator, Electronic Shock Unit Total	2	1,096		
	E1639 - Scale, Each Total	15	794		
	S5199 - Personal Care Item, Nos, Each Total	2,192	31,289		
	T1999 - Miscellaneous Therapeutic Items And Supplies, Retail Purchases, Not Otherwise Total	482	38,286		
	T2028 - Specialized Supply, Not Otherwise Specified Total	1,299	24,969		
	T2029 - Specialized Medical Equipment, Not Otherwise Specified Total	3,301	217,590		
	T2039 - Vehicle Modifications, Waiver; Per Service Total	10	22,925		
	T4537 - Incontinence Product, Protective Underpad, Reusable, Bed Size, Each Total	260	4,462		
	T4540 - Incontinence Product, Protective Underpad, Reusable, Chair Size, Each Total	26	359		
	V5268 - Assistive Listening Device, Telephone Amplifier, Any Type Total	4	380		
	V5269 - Assistive Listening Device, Alerting, Any Type Total	3	93		
	V5270 - Assistive Listening Device, Television Amplifier, Any Type Total	3	437		
	TOTAL FOR SPECIALIZED MEDICAL EQUIP & SUPPLIES	346,181	1,256,261	\$3.63	1.12%
Training	S5110 - Home Care Training, Family; Per 15 Minutes Total	1,244	12,776		
	S5115 - Home Care Training, Non Family; Per 15 Minutes Total	649	7,364		
	TOTAL FOR TRAINING	1,893	20,139	\$10.64	0.02%
	TOTAL FOR ALL SERVICES	27,983,029	\$ 111,726,840	\$3.99	