



Service and Units Conversion Table

This is unit rounding in the EVV system. For billing units, please see the appropriate Ohio Administrative Code rule.

Unit Conversion	
Applies to services billed directly to Ohio Department of Aging, Department of Developmental Disabilities, Ohio Department of Medicaid, or managed care organizations with a base rate and 15-Minute Units	
	00:01-15:59 mins = 1 unit
	16:00-34:59 mins = 2 units
	35:00-45:59 mins = 3 units
	46:00-60:59 mins = 4 units
	61:00-75:59 mins = 5 units
	76:00-90:59 mins = 6 units
	91:00-105:59 mins = 7 units
	106:00-120:59 mins = 8 units
	Each additional 15 minutes = 1 additional unit
Payer and Service Code	
State Plan Service Payers:	
AmeriHealth Caritas, Anthem, Buckeye, CareSource, Humana, Molina, United Health Care and Ohio Department of Medicaid	
G0151 State Plan Home Health Physical Therapy	
G0152 State Plan Home Health Occupational Therapy	
G0153 State Plan Home Health Speech Language Pathology Therapy	
G0156 State Plan Home Health State Plan Home Health Aide	
G0299 State Plan Home Health Nursing-RN	
G0300 State Plan Home Health Nursing-LPN	
T1000 State Plan Home Health Private Duty Nursing	



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MyCare Waiver Payers: Anthem, Buckeye, CareSource, Molina S5125 MyCare Waiver Home Care Attendant T1002 MyCare Waiver Nursing-RN T1003 MyCare Waiver Nursing-LPN
PASSPORT Waiver Payer: Ohio Department of Aging S5125 PASSPORT Waiver Home Care Attendant T1002 PASSPORT Waiver Nursing-RN T1003 PASSPORT Waiver Nursing-LPN
Ohio Home Care Waiver Payer: Ohio Department of Medicaid S5125 Ohio Home Care Waiver Home Care Attendant T1002 Ohio Home Care Waiver Nursing-RN T1003 Ohio Home Care Waiver Nursing-LPN T1019 Ohio Home Care Waiver Personal Care Aide
Individual Options Waiver Payer: Department of Developmental Disabilities T1002 Individual Options Waiver Nursing-RN T1003 Individual Options Waiver Nursing-LPN

Service and Units Conversion Table

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Unit Conversion
Applies to services billed directly to Department of Developmental Disabilities in 15-Minute Units
15-minute increments per unit; 0 to 7 min = 0 Units 8 to 22 min = 1 Units 23 to 37 min = 2 Units Each additional 15 minutes = 1 additional unit
Payer and Service Code
Level One, Individual Options and SELF Waiver Program Payer: Department of Developmental Disabilities RR Individual Options Waiver Residential Respite HPC Level One, Individual Options, and SELF Waiver Homemaker Personal Care

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Unit Conversion	
Applies to State Plan and Waiver services billed directly to the Department of Developmental Disabilities, Ohio Department of Medicaid, or managed care organizations per assessment.	
Per Visit (i.e. RN Assessment - Per Visit)	
Payer and Service Code	
State Plan Service Payers: AmeriHealth Caritas, Anthem, Buckeye, CareSource, Humana, Molina, United Health Care and Ohio Department of Medicaid T1001 State Plan RN Assessment	
Level One, Individual Options and SELF Waiver Program Payer: Department of Developmental Disabilities G0493 U9 Level One, Individual Options, and SELF Waiver Nursing Delegation Assessment RN	

Service and Units Conversion Table

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Unit Conversion	
Applies to PASSPORT and MyCare program services billed directly to Ohio Department of Aging and MyCare organizations in 15-Minute Units	
1:00 - 14:59 min = 1 unit	
15:00 - 29:59 min = 2 units	
30:00 - 44:59 min = 3 units	
45:00 - 59:59 min = 4 units	
60:00 - 74:59 min = 5 units	
Each additional 14:59 minutes = 1 additional unit	
A visit logged with a total visit time under 1 minute will be calculated as zero units	
Payer and Service Code	
MyCare Waiver Payers: Anthem, Buckeye, CareSource, Molina ECL MyCare Enhanced Community Living T1019 MyCare Waiver Personal Care T2025 MyCare Waiver Choices Home Care Attendant Services	
PASSPORT Waiver Service Payer: Ohio Department of Aging ECL PASSPORT Waiver Enhanced Community Living T1019 PASSPORT Waiver Personal Care T2025 PASSPORT Waiver Choices Home Care Attendant Services	



Service and Units Conversion Table

This is unit rounding in the EVV system. For billing units, please see the appropriate Ohio Administrative Code rule.

Unit Conversion	
Applies to services billed directly to Ohio Department of Medicaid, Department of Developmental Disabilities, or managed care organizations only in 15-Minute Units	
	00:01-15:59 mins = 1 unit
	16:00-30:59 mins = 2 units
	31:00-45:59 mins = 3 units
	46:00-60:59 mins = 4 units
	61:00-75:59 mins = 5 units
	76:00-90:59 mins = 6 units
	91:00-105:59 mins = 7 units
	106:00-120:59 mins = 8 units
	Each additional 15 minutes = 1 additional unit
Payer and Service Code	
State Plan Service Payers:	
AmeriHealth Caritas, Anthem, Buckeye, CareSource, Humana, Molina, United Health Care and Ohio Department of Medicaid	
T1001 U9 State Plan RN Consultation	
Level One, Individual Options and SELF Waiver Program Payer:	
Department of Developmental Disabilities	
G0493 Level One, Individual Options, and SELF Waiver Nursing Delegation RN	
G0494 Level One, Individual options, and SELF Waiver Nursing Delegation LPN	