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Home Health Rates

Effective June 19, 2004

Revenue Code	Fee (effective 10/1/03)	Plus Copay (effective 1/1/03)	Standard Copay (eliminated 6/19/04)
421 - Physical therapy visit charge	\$58.64	\$3.00	none
424 - Physical therapy evaluation or re-evaluation	\$58.64	\$3.00	none
431 - Occupational therapy visit	\$63.92	\$3.00	none
434 - Occupational therapy evaluation or re-evaluation	\$63.92	\$3.00	none
441 - Speech-language pathology visit	\$64.01	\$3.00	none
444 - Speech-language pathology evaluation or re-evaluation	\$64.01	\$3.00	none
551 - Skilled nursing visit	\$62.85	\$3.00	none
559 - Skilled nursing evaluation	\$62.85	\$3.00	none
571 - Home health aide visit	\$29.49	\$3.00	none
270 - Medical/surgical supplies, general classification	Acquisition cost	none	none
271 - Medical/surgical supplies, non sterile supplies	Acquisition cost	none	none
272 - Medical/surgical supplies, sterile supplies	Acquisition cost	none	none

If you have questions about DHS or problems getting DHS services, email us: [DHS Information](#). DHS Groupwise users, address email to dhs.info@state.or.us For comments on this site: [DMAP Information](#). DHS Groupwise users, address email to dmap.info@state.or.us

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 Division of Medical Assistance Programs
 500 Summer St. NE E37, Salem, OR 97301-1079
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Home Health Rates

Effective January 1, 2008

Revenue Center Code		Rate per visit	Co-pay (see OAR 410-120-1230 for exemptions)
421	Physical therapy visit	\$ 125.33	\$ 3.00
424	Physical therapy evaluation or re-evaluation	\$ 125.33	\$ 3.00
431	Occupational therapy visit	\$ 129.70	\$ 3.00
434	Occupational therapy evaluation or re-evaluation	\$ 129.70	\$ 3.00
441	Speech-language pathology visit	\$ 144.87	\$ 3.00
444	Speech-language pathology evaluation or reevaluation	\$ 144.87	\$ 3.00
551	Skilled nursing visit	\$ 173.16	\$ 3.00
559	Skilled nursing evaluation	\$ 173.16	\$ 3.00
571	Home Health Aide visit	\$ 55.14	\$ 3.00
270*	Medical/surgical supplies, general classification	Acquisition cost	None
271*	Medical/surgical supplies, non-sterile supplies	Acquisition cost	None
272*	Medical/surgical supplies, sterile supplies	Acquisition cost	None

* Total charges billed to all medical/surgical supplies Revenue Center Codes must not exceed \$75 per day.