Rule No. 560-X-35-.16 Cost for Services

(1)—The cost for services to individuals who qualify for Home and Community-Based care under the waiver program will not exceed on an average per capita basis the total expenditures that would be incurred for such individuals if Home and Community-Based services were not available.

<u>Author:</u> Mattie Jackson, Director, LTC Healthcare Reform Development Division. <u>Statutory</u> Authority: 42 C.F.R. Section 441, Subpart G; and the <u>MR/DDHome and</u> <u>Community-Based</u> Waiver for Persons with Intellectual Disabilities. <u>History:</u> Rule effective January 14, 1997. Amended: Filed March 20, 2023;