

	Begin at Age	Duration in Years	Frequency per year	Average Unit Cost	Monthly Cost	Annual Cost	Lifetime Cost
ROUTINE MEDICAL CARE - PHYSICIAN ONLY							
Primary care physician, annual and as necessary appointments, to monitor overall health status, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Psychiatrist, annual and as necessary appointments, to monitor psychological disorders and psychotropic medications, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Orthopedist, annual appointments, to monitor and treat musculoskeletal issues due to cerebral palsy and osteoporosis, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Neurologist, annual appointments, to monitor and treat spinal cord, nerve, and brain disorders due to cerebral palsy, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Podiatrist, routine appointments every 3 months, to monitor and treat feet and toenails, no cost due to Medicare and/or Medicaid coverage	49	30	4	\$0.00	\$0.00	\$0.00	\$0.00
Urologist, annual appointments, to monitor urinary and reproductive health, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Dentist, annual appointment to assess dental and oral health and hygiene and perform cleanings, cost per All Star Dental	49	30	1	\$75.00	\$6.25	\$75.00	\$2,250.00
Optometrist, annual appointment to assess vision and prescription changes, cost per [REDACTED] optometric	49	30	1	\$60.00	\$5.00	\$60.00	\$1,800.00
TOTAL ROUTINE MEDICAL CARE - PHYSICIAN ONLY					\$11.25	\$135.00	\$4,050.00
HOSPITALIZATIONS & MEDICAL PROCEDURES							
Hospitalization for spinal surgery, due to inability to predict likelihood of occurrence, onset, or frequency a specific cost is not cited; however, hospitalization is possible due to complications including injury from falls, bladder or bowel complications, progression of scoliosis or contractures, or spine hardware complications, cost could exceed \$10,000 per occurrence, cost per Agency for Healthcare Research and Quality	49	30	N/A	N/A	N/A	N/A	N/A
TOTAL HOSPITALIZATIONS & MEDICAL PROCEDURES					\$0.00	\$0.00	\$0.00
MEDICATIONS							
Medications prescribed by physician, for routine and as needed health and psychiatric treatment and which client is not responsible to purchase, no cost due to Medicare and Medicaid	49	30	N/A	\$0.00	\$0.00	\$0.00	\$0.00
Align probiotic, 4 mg, once daily, to aid digestion, supplied as 365 annually, UPC 37000-049109, cost per Redbook	49	30	365	\$0.81	\$24.63	\$295.53	\$8,866.00
Cinnamon, 500 mg, twice daily, for supplement, supplied as 730 daily, NDC 11694-0648-01, cost per Redbook	49	30	730	\$0.05	\$3.04	\$36.50	\$1,095.00
Fish oil, 1200 mg, once daily at bedtime, for omega-3 supplement, supplied as 365 annually, item number 943, cost per Piping Rock Health Products	49	30	365	\$0.02	\$0.63	\$7.59	\$227.66
Lactaid, 3000 units, twice daily, for lactose intolerance, supplied as 730 annually, item number 904522452, cost per Blowout Medical	49	30	730	\$0.13	\$8.15	\$97.82	\$2,934.60
Saw palmetto, 450 mg, once daily at night, for prostate health, supplied as 365 annually, NDC 60142-0106-10, cost per Redbook	49	30	365	\$0.05	\$1.64	\$19.64	\$589.11
Tums, 1 tablet three times daily with meals, supplied as 1095 annually, UPC 07660-074151, cost per Redbook	49	30	1095	\$0.03	\$2.98	\$35.77	\$1,073.21
TOTAL MEDICATIONS					\$41.07	\$492.85	\$14,785.58

	Begin at Age	Duration in Years	Frequency per year	Average Unit Cost	Monthly Cost	Annual Cost	Lifetime Cost
PROJECTED EVALUATIONS							
Physical Therapy Evaluation, once annually and as necessary, to assess impact of cerebral palsy and status of mobility, review equipment and make recommendations, and provide updating of home exercise program, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Occupational Therapy Evaluation, once annually, to assess impact of cerebral palsy and status of activities of daily living performance, review equipment and make recommendations, and provide updating of home exercise program, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Nutritional Assessment, once annually, to provide assessment of nutritional status, caloric needs, dietary intake and meal plans, no cost as services is provided through Bethesda	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
Neuropsychological evaluation, once every 5 years, to assess impact of disability on social and emotional functioning and make treatment recommendations for specific individual counseling session goals, no cost due to Medicare and/or Medicaid coverage	49	30	0.2	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL PROJECTED EVALUATIONS					\$0.00	\$0.00	\$0.00
THERAPEUTIC MODALITIES / SERVICES							
Individual counseling, monthly 1-hour sessions and as necessary for two years, to receive emotional support for depressive symptoms, continuing with current provider to promote continuity of care, cost per Braden Counseling Center	49	2	12	\$70.00	\$70.00	\$840.00	\$1,680.00
Individual counseling, monthly 1-hour sessions and as necessary for 26 years, to receive emotional support for depressive symptoms, no cost due to Medicare coverage	51	26	12	\$0.00	\$0.00	\$0.00	\$0.00
Physical therapy, weekly hour long outpatient sessions for six to eight weeks following each annual evaluation to maintain strength, introduce and evaluate any changes to equipment, and implement adaptations to home exercise program, no cost due to Medicare and/or Medicaid coverage	49	30	7	\$0.00	\$0.00	\$0.00	\$0.00
Occupational therapy, weekly hour long outpatient sessions for two to four weeks following each annual evaluation to maintain strength, introduce and evaluate any changes to equipment, and implement adaptations to home exercise program, no cost due to Medicare and/or Medicaid coverage	49	30	3	\$0.00	\$0.00	\$0.00	\$0.00
Animal Assisted Therapy, sessions once monthly, to provide emotional support and therapeutic interactions with therapy dog and handler, cost per Lifecare Innovations	49	30	12	\$180.00	\$180.00	\$2,160.00	\$64,800.00
TOTAL THERAPEUTIC MODALITIES / SERVICES					\$250.00	\$3,000.00	\$66,480.00

	Begin at Age	Duration in Years	Frequency per year	Average Unit Cost	Monthly Cost	Annual Cost	Lifetime Cost
WHEELCHAIR NEEDS / MEDICAL EQUIPMENT							
Power wheelchair, Quickie QM-710 performance mid-wheel drive power wheelchair with tilt, recline, and power elevation leg rest features to maintain skin integrity and comfort, purchased in 2014, replace every 5 years, cost per S&J Services	53	26	0.1429	\$28,500.00	\$339.39	\$4,072.65	\$105,888.90
Power wheelchair Quickie QM-710, annual maintenance, cost anticipated at 10% of purchase price starting in year one after warranty expires	49	30	1	\$2,850.00	\$237.50	\$2,850.00	\$85,500.00
Power wheelchair battery, group 24 flat top gel, replace every 2-4 years, cost per S&J Services	53	26	0.3333	\$600.00	\$16.67	\$199.98	\$5,199.48
Pelvic positioning strap 48", replace every 1-3 years, cost per S&J Services	50	29	0.5	\$50.00	\$2.08	\$25.00	\$725.00
Shower wheelchair, EZee Shower Commode Chair, replace every 5 years, cost per CareProdx.com	49	30	0.2	\$398.91	\$6.65	\$79.78	\$2,393.46
Hoyer lift, Hoyer Standard Patient Lift, replace every 7-9 years after one year warrantee, cost per Med Mart	49	30	0.1429	\$705.95	\$8.41	\$100.88	\$3,026.41
Standing table, Sammons Preston 921535B EasyStand StrapStand, to allow client to go from sitting to standing position directly from wheelchair, one purchase over lifetime, cost per Medical Solutions	49	1	1	\$4,052.40	\$337.70	\$4,052.40	\$4,052.40
Eyeglasses, annual replacement of lenses and frames, no cost due to Medicare and/or Medicaid coverage	49	30	1	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL WHEELCHAIR NEEDS / MEDICAL EQUIPMENT					\$948.39	\$11,380.69	\$206,785.65
SUPPLIES							
Adult briefs, used during longer outings in the community, no cost due to Medicare and/or Medicaid coverage	49	30	N/A	\$0.00	\$0.00	\$0.00	\$0.00
Desktop computer, HP Pavilion 27xt Touch All-in-One PC, to facilitate online courses, personal exploration, and knowledge growth, replace every 10 years, most recent purchased in 2013, cost per Hewlett-Packard	52	20	0.1	\$719.99	\$6.00	\$72.00	\$1,439.98
Printer, HP OfficeJet 3830 Wireless Color Inkjet All-In-One Printer, Scanner, Copier And Fax, replace every 10 years, most recent purchased in 2013, cost per Office Depot	52	27	0.1	\$79.99	\$0.67	\$8.00	\$215.97
Annual allowance for computer maintenance and supplies, cost based on 10% purchase price	49	30	1	\$71.99	\$6.00	\$71.99	\$2,159.70
Television, Sharp 32" Class LED 1080p HDTV black, replace every 5-7 years, cost per Best Buy	49	30	0.6	\$169.99	\$8.50	\$101.99	\$3,059.82
TOTAL SUPPLIES					\$21.17	\$253.98	\$6,875.47

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HEALTH & WELLNESS MAINTENANCE							
AARP Medicare Prescription Drug plan provided through Unitedhealthcare, cost based on recent monthly payments to AARP	49	30	12	\$15.60	\$15.60	\$187.20	\$5,616.00
National Geographic, annual subscription, for cognitive stimulation and enjoyment, cost per National Geographic	49	10	1	\$12.00	\$1.00	\$12.00	\$120.00
Discover Magazine, annual subscription, for cognitive stimulation and enjoyment, cost per Discover Magazine	49	10	1	\$19.98	\$1.67	\$19.98	\$199.80
Mental Floss, two year subscription, for cognitive stimulation and enjoyment, cost per Mental Floss	49	10	0.5	\$39.97	\$1.67	\$19.99	\$199.85
Kishwaukee College, six-week online class sessions, average of 2 classes for 5 years, to promote personal growth and development of knowledge of web design, managing emotions and feelings, and other related courses, cost per past enrollment and course fees at Kishwaukee College	49	5	2	\$150.00	\$25.00	\$300.00	\$1,500.00
TOTAL HEALTH & WELLNESS MAINTENANCE					\$44.93	\$539.17	\$7,635.65
TRANSPORTATION							
Transportation, for monthly counseling appointments, weekly physical therapy outpatient appointments, weekly temple visits, and other outings in the community, price for one way ride \$1.50, average of 10 rides per month, cost per TransVAC and MedVAC through Voluntary Action Center	49	30	12	\$30.00	\$30.00	\$360.00	\$10,800.00
TOTAL TRANSPORTATION					\$0.00	\$0.00	\$10,800.00
HOME / FACILITY CARE							
Residential group home, to provide 24-hour supervision and assistance with all needs, average cost of recent monthly bill, cost per recent Bethesda Lutheran Communities invoices	49	30	12	\$1,084.52	\$1,084.52	\$13,014.24	\$390,427.20
Private duty attendant caregiver, to provide companionship and support, 4 hour visits every other week, at rate of \$26.25/hour, cost per Lifecare Home Solutions	49	30	26.07	\$105.00	\$228.11	\$2,737.35	\$82,120.50
Care manager, to assist with care coordination, establishing providers, problem-solving, advocacy, and overseeing services, cost per budget established with Lifecare Innovations	49	30	12	\$2,500.00	\$2,500.00	\$30,000.00	\$900,000.00
Monthly allowance, provided to client for personal funds and use per his discretion, cost per current budget	49	30	12	\$400.00	\$400.00	\$4,800.00	\$144,000.00
Phone bill, based on average monthly bill, cost per past Great Call invoices	49	30	12	\$90.00	\$90.00	\$1,080.00	\$32,400.00
Internet, based on average monthly bill, cost per past Frontier invoices	49	30	12	\$45.00	\$45.00	\$540.00	\$16,200.00
Escrow funds, replenished once annually and as necessary, for payment of services and products above and beyond what is covered by client's insurance and allowance	49	30	1	\$5,000.00	\$416.67	\$5,000.00	\$150,000.00
TOTAL HOME / FACILITY CARE					\$4,764.30	\$57,171.59	\$1,715,147.70
SUBTRACTION: Monthly SSI payments	49	30	12	-\$1,141.00	-\$1,141.00	-\$13,692.00	-\$410,760.00
TOTAL PROJECTED COSTS					\$4,940.11	\$59,281.28	\$1,621,800.05