

**HCBS FY15-16 Rate Schedules**  
**Updated with FY15-16 JBC Increases**

<b>ADJUSTMENT TABLE</b>		
<b>WAIVER TYPE</b>	<b>PERCENT CHANGE</b>	<b>MULTIPLIER</b>
Developmental Disabilities Waiver	1.70%	1.0170
Supported Living Services Waiver	1.70%	1.0170
Children's Extensive Supports Waiver	1.70%	1.0170
DIDD Targeted Case Management	1.70%	1.017

## Home and Community Based Services: Developmental Disabilities

Rates Effective July 1, 2015-June 30, 2016

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
<b>Behavioral Services</b>									
Behavioral Line Staff	H2019	U3				\$ 6.52	\$ 6.63	15 Minutes	Maximum of 960 units per Service Plan year.
Behavioral Consultation	Developmental Disabilities Waiver	U3	22	TG		\$ 24.52	\$ 24.94	15 Minutes	Maximum of 80 units per Service Plan year.
Behavioral Counseling	H2019	U3	TF	TG		\$ 24.52	\$ 24.94	15 Minutes	Maximum of 208 combined units of Individual and Group Counseling services per Service Plan year.
Behavioral Counseling, Group	H2019	U3	TF	HQ		\$ 8.26	\$ 8.40	15 Minutes	
Behavioral Plan Assessment	T2024	U3	22			\$ 24.52	\$ 24.94	15 Minutes	Maximum of 40 units and one Behavior Plan Assessment per Service Plan year.
<b>Day Habilitation</b>									
Maximum of 4,800 combined units of Specialized Habilitation, Supported Community Connections, and Prevocational Services per Service Plan year. Maximum of 7,112 combined units of Specialized Habilitation, Supported Community Connections, Prevocational Services, and Supported Employment per Service Plan year.									
Specialized Habilitation Level 1	T2021	U3	HQ			\$ 2.32	\$ 2.36	15 Minutes	
Specialized Habilitation Level 2	T2021	U3	22	HQ		\$ 2.55	\$ 2.59	15 Minutes	
Specialized Habilitation Level 3	T2021	U3	TF	HQ		\$ 2.84	\$ 2.89	15 Minutes	
Specialized Habilitation Level 4	T2021	U3	TF	22	HQ	\$ 3.34	\$ 3.40	15 Minutes	
Specialized Habilitation Level 5	T2021	U3	TG	HQ		\$ 4.14	\$ 4.21	15 Minutes	
Specialized Habilitation Level 6	T2021	U3	TG	22	HQ	\$ 5.95	\$ 6.05	15 Minutes	
Specialized Habilitation Level 7	T2021	U3	SC	HQ		\$ 9.36	\$ 9.52	15 Minutes	
Supported Community Connections Level 1	T2021	U3				\$ 2.82	\$ 2.87	15 Minutes	
Supported Community Connections Level 2	T2021	U3	22			\$ 3.09	\$ 3.14	15 Minutes	
Supported Community Connections Level 3	T2021	U3	TF			\$ 3.48	\$ 3.54	15 Minutes	
Supported Community Connections Level 4	T2021	U3	TF	22		\$ 4.00	\$ 4.07	15 Minutes	
Supported Community Connections Level 5	T2021	U3	TG			\$ 4.82	\$ 4.90	15 Minutes	
Supported Community Connections Level 6	T2021	U3	TG	22		\$ 6.33	\$ 6.44	15 Minutes	
Supported Community Connections Level 7	T2021	U3	SC			\$ 9.36	\$ 9.52	15 Minutes	
<b>Dental Services</b>									
Basic	D2999	U3				\$ 1.00	-	Dollar	Please refer to DIDD Dental Fee Schedule for rates
Major	D2999	U3	22			\$ 1.00	-	Dollar	

## Home and Community Based Services: Developmental Disabilities

Rates Effective July 1, 2015-June 30, 2016

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
<b>Non-Medical Transportation</b>									
Maximum of 508 units (trips) per Service Plan year (all mileage bands).									
Mileage Band 1 (0-10 Miles)	T2003	U3				\$ 5.69	\$ 5.79	1 Trip	
Mileage Band 2 (11-20 Miles)	T2003	U3	22			\$ 11.93	\$ 12.13	1 Trip	
Mileage Band 3 (Over 20 Miles)	T2003	U3	TF			\$ 18.16	\$ 18.47	1 Trip	
Other (public conveyance)	T2004	U3				\$ 1.00	\$ 1.00	Dollar	Bus passes or other public conveyance may be used only when equivalent to or more cost effective than the applicable mileage range.
<b>Prevocational Services</b>									
Maximum of 4,800 combined units of Specialized Habilitation, Supported Community Connections, and Prevocational Services per Service Plan year. Maximum of 7,112 combined units of Specialized Habilitation, Supported Community Connections, Prevocational Services, and Supported Employment per Service Plan year.									
Prevocational Services Level 1	T2015	U3	HQ			\$ 2.32	\$ 2.36	15 Minutes	
Prevocational Services Level 2	T2015	U3	22	HQ		\$ 2.55	\$ 2.59	15 Minutes	
Prevocational Services Level 3	T2015	U3	TF	HQ		\$ 2.84	\$ 2.89	15 Minutes	
Prevocational Services Level 4	T2015	U3	TF	22	HQ	\$ 3.34	\$ 3.40	15 Minutes	
Prevocational Services Level 5	T2015	U3	TG	HQ		\$ 4.14	\$ 4.21	15 Minutes	
Prevocational Services Level 6	T2015	U3	TG	22	HQ	\$ 5.95	\$ 6.05	15 Minutes	
<b>Residential Habilitation</b>									
Group Residential Services and Supports-Level 1	T2016	U3	HQ			\$ 86.79	\$ 88.27	Day	
Group Residential Services and Supports-Level 2	T2016	U3	22	HQ		\$ 114.24	\$ 116.18	Day	
Group Residential Services and Supports-Level 3	T2016	U3	TF	HQ		\$ 134.58	\$ 136.87	Day	
Group Residential Services and Supports-Level 4	T2016	U3	TF	22	HQ	\$ 158.99	\$ 161.69	Day	
Group Residential Services and Supports-Level 5	T2016	U3	TG	HQ		\$ 175.63	\$ 178.62	Day	
Group Residential Services and Supports-Level 6	T2016	U3	TG	22	HQ	\$ 207.83	\$ 211.36	Day	

## Home and Community Based Services: Developmental Disabilities

Rates Effective July 1, 2015-June 30, 2016

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
Group Residential Services and Supports-Level 7	T2016	U3	SC	HQ		*NR	*NR	Day	
Individual Residential Services and Supports-Level 1	T2016	U3				\$ 63.81	\$ 64.89	Day	
Individual Residential Services and Supports-Level 2	T2016	U3	22			\$ 103.11	\$ 104.86	Day	
Individual Residential Services and Supports-Level 3	T2016	U3	TF			\$ 125.98	\$ 128.12	Day	
Individual Residential Services and Supports-Level 4	T2016	U3	TF	22		\$ 153.38	\$ 155.99	Day	
Individual Residential Services and Supports-Level 5	T2016	U3	TG			\$ 176.25	\$ 179.25	Day	
Individual Residential Services and Supports-Level 6	T2016	U3	TG	22		\$ 221.50	\$ 225.27	Day	
Individual Residential Services and Supports-Level 7	T2016	U3	SC			*NR	*NR	Day	
Individual Residential Services and Supports/Host Home-Level 1	T2016	U3	TT			\$ 59.18	\$ 60.19	Day	
Individual Residential Services and Supports/Host Home-Level 2	T2016	U3	22	TT		\$ 95.62	\$ 97.25	Day	
Individual Residential Services and Supports/Host Home-Level 3	T2016	U3	TF	TT		\$ 116.82	\$ 118.81	Day	
Individual Residential Services and Supports/Host Home-Level 4	T2016	U3	TF	22	TT	\$ 142.25	\$ 144.67	Day	
Individual Residential Services and Supports/Host Home-Level 5	T2016	U3	TG	TT		\$ 163.45	\$ 166.23	Day	
Individual Residential Services and Supports/Host Home-Level 6	T2016	U3	TG	22	TT	\$ 205.44	\$ 208.93	Day	
Individual Residential Services and Supports/Host Home-Level 7	T2016	U3	SC	TT		*NR	*NR	Day	
<b>Specialized Medical Equipment and Supplies</b>									
Disposable Supplies	T2028	U3				\$ 1.00	\$ 1.00	Dollar	

## Home and Community Based Services: Developmental Disabilities

Rates Effective July 1, 2015-June 30, 2016

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
Equipment	T2029	U3				\$ 1.00	\$ 1.00	Dollar	
<b>Supported Employment</b>									
The maximum Supported Employment units per Service Plan year are limited to 7,112 minus the combined total units for Specialized Habilitation, Supported Community Connections and Prevocational Services, which are limited to a maximum of 4,800 units.									
Job Coaching, Group-Level 1	T2019	U3	HQ			\$ 3.11	\$ 3.16	15 Minutes	
Job Coaching, Group-Level 2	T2019	U3	22	HQ		\$ 3.40	\$ 3.46	15 Minutes	
Job Coaching, Group-Level 3	T2019	U3	TF	HQ		\$ 3.79	\$ 3.85	15 Minutes	
Job Coaching, Group-Level 4	T2019	U3	TF	22	HQ	\$ 4.38	\$ 4.45	15 Minutes	
Job Coaching, Group-Level 5	T2019	U3	TG	HQ		\$ 5.23	\$ 5.32	15 Minutes	
Job Coaching, Group-Level 6	T2019	U3	TG	22	HQ	\$ 6.82	\$ 6.94	15 Minutes	
Job Coaching-Individual	T2019	U3	SC			\$ 12.80	\$ 13.02	15 Minutes	
Job Development-Group	H2023	U3	HQ			\$ 4.08	\$ 4.15	15 Minutes	
Job Development, Individual-Levels 1-2	H2023	U3				\$ 12.80	\$ 13.02	15 Minutes	
Job Development, Individual-Levels 3-4	H2023	U3	22			\$ 12.80	\$ 13.02	15 Minutes	
Job Development, Individual-Levels 5-6	H2023	U3	TF			\$ 12.80	\$ 13.02	15 Minutes	
Job Placement	H2024	U3				\$ 1.00	\$ 1.00	Dollar	
Job Placement Group	H2024	U3	HQ			\$ 1.00	\$ 1.00	Dollar	
<b>Vision</b>	V2799	U3				\$ 1.00	\$ 1.00	Dollar	

Legend	
<b>NR*</b>	<b>Individually approved DDD rate</b>
<b>22</b>	(CPT Defn: Increased procedural services)
<b>HQ</b>	<b>Group Setting</b>
<b>SC</b>	<b>Medically Necessary Service or Supply</b>
<b>TF</b>	<b>Intermediate Level of Care</b>
<b>TG</b>	<b>Complex/High Tech Level of Care</b>
<b>TT</b>	<b>Individualized service provided to more one patient in the same setting</b>
<b>U3</b>	<b>Developmentally Disabled (HCPCS Defn: Medicaid Level of Care 1, as defined by each state)</b>

**DIDD Targeted Case Management (TCM)**  
**Rates Effective July 1, 2015 - June 30, 2016**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
Targeted Case Management	T1017	U4				\$15.60	\$15.87	15 Minutes	Maximum of 240 units per fiscal year

**Home and Community Based Services: Supported Living Services**

**Rates Effective July 1, 2015-June 30, 2016**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
<b>Assistive Technology</b>	T2035	U8				\$ 1.00	\$ 1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/14 - 6/30/19).
<b>Behavioral Services</b>									
Behavioral Line Staff	Developmental Disabilities Waiver	U8				\$ 6.52	\$ 6.63	15 Minutes	Maximum of 960 units per Service Plan year.
Behavioral Consultation	H2019	U8	22	TG		\$ 24.52	\$ 24.94	15 Minutes	Maximum of 80 units per Service Plan year.
Behavioral Counseling	H2019	U8	TF	TG		\$ 24.52	\$ 24.94	15 Minutes	Maximum of 208 combined units of Individual and Group Counseling services per Service Plan year.
Behavioral Counseling Group	H2019	U8	TF	HQ		\$ 8.26	\$ 8.40	15 Minutes	
Behavioral Plan Assessment	T2024	U8	22			\$ 24.52	\$ 24.94	15 Minutes	Maximum of 40 units and one Behavior Plan Assessment per Service Plan year.
<b>Day Habilitation</b>									
Maximum of 7,112 combined units of Specialized Habilitation, Supported Community Connections, Prevocational Services, and Supported Employment per Service Plan year.									
Specialized Habilitation Level 1	T2021	U8	HQ			\$ 2.32	\$ 2.36	15 Minutes	
Specialized Habilitation Level 2	T2021	U8	22	HQ		\$ 2.55	\$ 2.59	15 Minutes	
Specialized Habilitation Level 3	T2021	U8	TF	HQ		\$ 2.84	\$ 2.89	15 Minutes	
Specialized Habilitation Level 4	T2021	U8	TF	22	HQ	\$ 3.34	\$ 3.40	15 Minutes	
Specialized Habilitation Level 5	T2021	U8	TG	HQ		\$ 4.14	\$ 4.21	15 Minutes	
Specialized Habilitation Level 6	T2021	U8	TG	22	HQ	\$ 5.95	\$ 6.05	15 Minutes	
Supported Community Connections Level 1	T2021	U8				\$ 2.82	\$ 2.87	15 Minutes	
Supported Community Connections Level 2	T2021	U8	22			\$ 3.09	\$ 3.14	15 Minutes	
Supported Community Connections Level 3	T2021	U8	TF			\$ 3.48	\$ 3.54	15 Minutes	
Supported Community Connections Level 4	T2021	U8	TF	22		\$ 4.00	\$ 4.07	15 Minutes	
Supported Community Connections Level 5	T2021	U8	TG			\$ 4.82	\$ 4.90	15 Minutes	

**Home and Community Based Services: Supported Living Services**

**Rates Effective July 1, 2015-June 30, 2016**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
Supported Community Connections Level 6	T2021	U8	TG	22		\$ 6.33	\$ 6.44	15 Minutes	
<b>Dental Services</b>									
Basic	D2999	U8				\$ 1.00	-	Dollar	<b>Please refer to DIDD Dental Fee Schedule for rates</b>
Major	D2999	U8	22			\$ 1.00	-	Dollar	
<b>Home Accessibility Adaptations</b>	S5165	U8				\$ 1.00	\$ 1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/14 - 6/30/19).
<b>Homemaker</b>									
<b>Basic</b>	S5130	U8				\$ 3.73	\$ 3.73	15 Minutes	
<b>Enhanced</b>	S5130	U8	22			\$ 6.03	\$ 6.13	15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.
<b>Mentorship</b>	H2021	U8				\$ 9.83	\$ 10.00	15 Minutes	Maximum of 192 units per Service Plan year.
<b>Non Medical Transportation</b>									
Maximum of 508 trips (all mileage bands) per Service Plan year.									
Mileage Band 1 (0-10 Miles)	T2003	U8				\$ 5.69	\$ 5.79	1 Trip	
Mileage Band 2 (11-20 Miles)	T2003	U8	22			\$ 11.93	\$ 12.13	1 Trip	
Mileage Band 3 (Over 20 Miles)	T2003	U8	TF			\$ 18.16	\$ 18.47	1 Trip	
Mileage-Not in Day Program	T2003	U8	SC			\$ 5.69	\$ 5.79	4 Trips per week	All Distances. Maximum of 208 units (4 trips per week) per Service Plan year.
Other (public conveyance)	T2004	U8				\$ 1.00	\$ 1.00	Dollar	Bus passes or other public conveyance may be used only when equivalent to or more cost effective than the applicable mileage range.
<b>Personal Care</b>	T1019	U8				\$ 4.87	\$ 4.95	15 Minutes	
<b>Personal Emergency Response System (PERS)</b>	S5161	U8				\$ 1.00	\$ 1.00	Dollar	



**Home and Community Based Services: Supported Living Services**

**Rates Effective July 1, 2015-June 30, 2016**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
<b>Prevocational Services</b>									
Maximum of 7,112 combined units of Specialized Habilitation, Supported Community Connections, Prevocational Services, and Supported Employment per Service Plan year.									
Prevocational Services Level 1	T2015	U8	HQ			\$ 2.32	\$ 2.36	15 Minutes	
Prevocational Services Level 2	T2015	U8	22	HQ		\$ 2.55	\$ 2.59	15 Minutes	
Prevocational Services Level 3	T2015	U8	TF	HQ		\$ 2.84	\$ 2.89	15 Minutes	
Prevocational Services Level 4	T2015	U8	TF	22	HQ	\$ 3.34	\$ 3.40	15 Minutes	
Prevocational Services Level 5	T2015	U8	TG	HQ		\$ 4.14	\$ 4.21	15 Minutes	
Prevocational Services Level 6	T2015	U8	TG	22	HQ	\$ 5.95	\$ 6.05	15 Minutes	
<b>Professional Services</b>									
Massage Therapy	97124	U8				\$ 18.34	\$ 18.65	15 Minutes	
Movement Therapy Bachelors	G0176	U8				\$ 15.29	\$ 15.55	15 Minutes	
Movement Therapy Masters	G0176	U8	22			\$ 22.41	\$ 22.79	15 Minutes	
Hippotherapy Individual	S8940	U8				\$ 20.37	\$ 20.72	15 Minutes	
Hippotherapy Group	S8940	U8	HQ			\$ 8.66	\$ 8.81	15 Minutes	
Recreational Facility Fees / Passes	S5199	U8				\$ 1.00	\$ 1.00	Dollar	
<b>Respite Care</b>									
Individual	S5150	U8				\$ 4.87	\$ 4.95	15 Minutes	Use Individual Day rate when Respite services exceed 40 units (10 hours) in a 24 hour period.
Individual Day	S5151	U8				\$ 194.60	\$ 197.91	Day	
Group	S5151	U8	HQ			\$ 1.00	\$ 1.00	Dollar	Group Respite rates may not exceed the rate paid for Individual Respite.
Camp (Group, Overnight)	T2036	U8				\$ 1.00	\$ 1.00	Dollar	
<b>Specialized Medical Equipment and Supplies</b>									
Disposable Supplies	T2028	U8				\$ 1.00	\$ 1.00	Dollar	
Equipment	T2029	U8				\$ 1.00	\$ 1.00	Dollar	
<b>Supported Employment</b>									
Maximum combined units of Specialized Habilitation, Supported Community Connections, Prevocational and Supported Employment is 7,112 units per plan year.									
Job Coaching, Group-Level 1	T2019	U8	HQ			\$ 3.11	\$ 3.16	15 Minutes	
Job Coaching, Group-Level 2	T2019	U8	22	HQ		\$ 3.40	\$ 3.46	15 Minutes	
Job Coaching, Group-Level 3	T2019	U8	TF	HQ		\$ 3.79	\$ 3.85	15 Minutes	
Job Coaching, Group-Level 4	T2019	U8	TF	22	HQ	\$ 4.38	\$ 4.45	15 Minutes	
Job Coaching, Group-Level 5	T2019	U8	TG	HQ		\$ 5.23	\$ 5.32	15 Minutes	

**Home and Community Based Services: Supported Living Services**

**Rates Effective July 1, 2015-June 30, 2016**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
Job Coaching, Group-Level 6	T2019	U8	TG	22	HQ	\$ 6.82	\$ 6.94	15 Minutes	
Job Coaching-Individual	T2019	U8	SC			\$ 12.80	\$ 13.02	15 Minutes	
Job Development-Group	H2023	U8	HQ			\$ 4.08	\$ 4.15	15 Minutes	
Job Development, Individual-Levels 1-2	H2023	U8				\$ 12.80	\$ 13.02	15 Minutes	
Job Development, Individual-Levels 3-4	H2023	U8	22			\$ 12.80	\$ 13.02	15 Minutes	
Job Development, Individual-Levels 5-6	H2023	U8	TF			\$ 12.80	\$ 13.02	15 Minutes	
Job Placement-Individual	H2024	U8				\$ 1.00	\$ 1.00	Dollar	
Job Placement-Group	H2024	U8	HQ			\$ 1.00	\$ 1.00	Dollar	
<b>Vehicle Modifications</b>	T2039	U8				\$ 1.00	\$ 1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/14 - 6/30/19).
<b>Vision</b>	V2799	U8				\$ 1.00	\$ 1.00	Dollar	

**Support Level Authorization Limits (SPAL)**

Support Level 1	\$13,219.00
Support Level 2	\$17,673.00
Support Level 3	\$19,882.00
Support Level 4	\$22,867.00
Support Level 5	\$27,524.00
Support Level 6	\$36,181.00

**Overall Service Plan Limit**

\$46,274.00

**Legend**

<b>22</b>	(CPT Defn: Increased procedural services)
<b>HQ</b>	<b>Group Setting</b>
<b>SC</b>	<b>Medically Necessary Service or Supply</b>
<b>TF</b>	<b>Intermediate Level of Care</b>
<b>TG</b>	<b>Complex/High Tech Level of Care</b>
<b>TT</b>	<b>Individualized service provided to more one patient in the same setting</b>
<b>U8</b>	<b>Supported Living Services (HCPCS Defn: Medicaid Level of Care 1, as defined by each state)</b>

**Home and Community Based Services: Children's Extensive Supports Waiver**

**Rates Effective July 1, 2015-June 30, 2016**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 7/1/2014-6/30/2015	New Rate Effective 7/1/2015-6/30/2016	Unit Value	Comments
<b>Adapted Therapeutic Recreational Equipment and Fees</b>									
Equipment	T1999	U7				\$ 1.00	\$ 1.00	Dollar	Maximum \$1,000 units per year (i.e., \$1,000.00 per year combined limit)
Fees	Developmental Disability	U7				\$ 1.00	\$ 1.00	Dollar	
<b>Assistive Technology</b>	T2035	U7				\$ 1.00	\$ 1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/14 - 6/30/19).
<b>Behavioral Services</b>									
Behavioral Line Staff	H2019	U7				\$ 6.52	\$ 6.63	15 Minutes	
Behavioral Consultation	H2019	U7	22	TG		\$ 24.52	\$ 24.94	15 Minutes	
Behavioral Counseling	H2019	U7	TF	TG		\$ 24.52	\$ 24.94	15 Minutes	
Behavioral Counseling Group	H2019	U7	TF	HQ		\$ 8.26	\$ 8.40	15 Minutes	
Behavioral Plan Assessment	T2024	U7	22			\$ 24.52	\$ 24.94	15 Minutes	Maximum of 40 units and one Behavior Plan Assessment per Service Plan year.
<b>Community Connector</b>	H2021	U7				\$ 8.19	\$ 8.33	15 Minutes	
<b>Home Accessible Adaptations</b>	S5165	U7				\$ 1.00	\$ 1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/14 - 6/30/19).
<b>Homemaker</b>									
<b>Basic</b>	S5130	U7				\$ 3.73	\$ 3.73	15 Minutes	
<b>Enhanced</b>	S5130	U7	22			\$ 6.03	\$ 6.13	15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.
<b>Parent Education</b>	H1010	U7				\$ 1.00	\$ 1.00	Dollar	Maximum of \$1,000 per Service Plan year.
<b>Personal Care</b>	T1019	U7				\$ 4.87	\$ 4.95	15 Minutes	
<b>Professional Services</b>									
Hippo Therapy	S8940	U7				\$ 20.37	\$ 20.72	15 Minutes	
Hippo Therapy Group	S8940	U7	HQ			\$ 8.66	\$ 8.81	15 Minutes	
Massage	97124	U7				\$ 18.34	\$ 18.65	15 Minutes	
Movement Therapy-Bachelors	G0176	U7				\$ 15.29	\$ 15.55	15 Minutes	

**Home and Community Based Services: Children's Extensive Supports Waiver**

**Rates Effective July 1, 2015-June 30, 2016**

Movement Therapy-Masters	G0176	U7	22			\$ 22.41	\$ 22.79	15 Minutes	
<b>Respite</b>									
Maximum of 30 days and 1,880 additional 15 minute units per Service Plan year.									
Respite Services-Individual	S5150	U7				\$ 4.87	\$ 4.95	15 Minutes	Use Individual Day rate when Respite services exceed 40 units (10 hours) in a 24 hour period.
Respite Services-Individual, Per Diem	S5151	U7				\$ 194.60	\$ 197.91	Day	
Respite Services-Group	S5151	U7	HQ			\$ 1.00	\$ 1.00	Dollar	Group Respite rates may not exceed the rate paid for Individual Respite.
Camp (Group, Overnight)	T2036	U7				\$ 1.00	\$ 1.00	Dollar	
<b>Specialized Medical Equipment and Supplies</b>									
Services may be authorized up to the pre-established CCB thresholds, beyond which DDD prior authorization is required.									
Disposable Supplies	T2028	U7				\$ 1.00	\$ 1.00	Dollar	
Equipment	T2029	U7				\$ 1.00	\$ 1.00	Dollar	
<b>Vehicle Modifications</b>	T2039	U7				\$ 1.00	\$ 1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/14 - 6/30/19).
<b>Vision Services</b>	V2799	U7				\$ 1.00	\$ 1.00	Dollar	

<b>Overall Service Plan Limit</b>
\$37,944.00

<b>Legend</b>	
<b>22</b>	(CPT Defn: Increased procedural services)
<b>HQ</b>	<b>Group Setting</b>
<b>HR</b>	<b>Relative providing care</b>
<b>TF</b>	<b>Intermediate Level of Care</b>
<b>TG</b>	<b>Complex/High Tech Level of Care</b>
<b>U7</b>	<b>Children's Extensive Support</b>