

Home and Community Based Services:

Children with Autism (CWA) Waiver

Rates Effective July 1, 2016-June 30, 2017



Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 07/01/2015	Rate Effective 07/01/2016	Unit Value	Comments
Behavior Therapies - Lead Therapist	H0004	U2				\$ 21.64	\$ 21.64	15 minutes	Combined maximum of \$25,000 per Service Plan year.
Behavior Therapies - Senior Therapist	H0004	U2	HN			\$ 11.21	\$ 11.21	15 minutes	
Behavior Therapies - Line Staff	H2019	U2				\$ 3.53	\$ 3.53	15 minutes	
Initial / Ongoing Treatment Evaluation	H2000	U2				\$ 20.08	\$ 120.48	1 Evaluation	Up to 90 minutes, included in \$25,000 maximum per Service Plan Year.
Post Service Evaluation	H2000	U2	TS			\$ 20.08	\$ 20.08	15 minutes	Maximum of 6 units per Date of Service (In addition to the \$25,000 per Service Plan year limit)

Legend	
HA	Child/adolescent program
HN	Bachelor's Degree Level
TS	Follow-up Service
U2	Children with Autism (Effective March 1, 2017)



Home and Community Based Services:

**Children with Life Limiting Illness (CLLI) Waiver
(Previously the Pediatric Hospice Waiver)***

Rates Effective July 1, 2016-June 30, 2017



COLORADO
Department of Health Care
Policy & Financing

Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 07/01/2015	Rate Effective 07/01/2016	Unit Value	Comments
Expressive Therapy									
Art and Play Therapy	H2032	UD	HA			\$ 15.80	\$ 15.80	15 Minutes	Combined maximum of 156 units (39 hours) for all Expressive Therapy services per Service Plan year.
Art and Play Therapy Group	H2032	UD	HA	HQ		\$ 8.84	\$ 8.84	15 Minutes	
Music Therapy	H2032	UD				\$ 15.80	\$ 15.80	15 Minutes	
Music Therapy Group	H2032	UD	HQ			\$ 8.84	\$ 8.84	15 Minutes	
Integrative Therapy									
Massage Therapy	97124	UD				\$ 17.63	\$ 17.63	15 Minutes	Maximum of 96 units (24 hours) per Service Plan year
Palliative/Supportive Care Skilled									
Care Coordination	G9012	UD				\$ 20.07	\$ 20.07	15 Minutes	
Pain and Symptom Management	S9123	UD				\$ 75.68	\$ 75.68	Hour	
Respite Services									
Unskilled(4 hours or less)	S5150	UD				\$ 5.37	\$ 5.37	15 Minutes	Combined maximum of 30 calendar days per Service Plan year for all Respite Care services.
Unskilled (4 hours or more)	S5151	UD				\$ 96.63	\$ 96.63	Day	
CNA (4 hours or less)	T1005	UD				\$ 7.04	\$ 7.04	15 Minutes	
CNA (4 hours or more)	S9125	UD				\$ 125.10	\$ 125.10	Day	
Skilled RN, LPN (4 hours or less)	T1005	UD	TD			\$ 15.31	\$ 15.31	15 Minutes	
Skilled RN, LPN (4 hours or more)	S9125	UD	TD			\$ 275.44	\$ 275.44	Day	
Therapeutic Services									
Bereavement Counseling	S0257	UD	HK			\$ 1,100.00	\$ 1,100.00	Lump Sum	One time lump sum payment per client.
Therapeutic Life Limiting Illness Support-Individual	S0257	UD				\$ 24.53	\$ 24.53	15 Minutes	Combined maximum of 392 units (98 hours) per Service Plan year.
Therapeutic Life Limiting Illness Support-Family	S0257	UD	HR			\$ 24.53	\$ 24.53	15 Minutes	
Therapeutic Life Limiting Illness Support-Group	S0257	UD	HQ			\$ 14.47	\$ 14.47	15 Minutes	

Legend	
HA	Child/adolescent program
HK	Specialized Mental Health services for high risk populations
HQ	Group Setting
HR	Relative providing care
TD	RN providing care
UD	Children with Life Limiting Illness



Home and Community Based Services:

Children's Home and Community Based Services (CHCBS) Waiver

Rates Effective July 1, 2016-June 30, 2017



Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 07/01/2015	Rate Effective 07/01/2016	Unit Value	Comments
Case Management	T1016	U5				\$ 8.64	\$ 8.64	15 minutes	
IHSS Health Maintenance	H0038	U5				\$ 7.27	\$ 7.27	15 minutes	

Legend	
U5	Children's HCBS





ADJUSTMENT TABLE		
WAIVER TYPE	PERCENT CHANGE	MULTIPLIER
HH, PDN	0.00%	1.0000
HCBS EBD	0.00%	1.0000
HCBS CMHS	0.00%	1.0000
HCBS BI	0.00%	1.0000
HCBS SCI	0.00%	1.0000
HCBS DD	0.00%	1.0000
HCBS SLS	0.00%	1.0000
HCBS/DDD/DHS CWA	0.00%	1.0000
HCBS/DDD/DHS CHCBS	0.00%	1.0000
HCBS/DDD/DHS CLLI	0.00%	1.0000
HCBS/DDD/DHS CES	0.00%	1.0000
HCBS/DDD/DHS CHRP	0.00%	1.0000

