

**Colorado Choice Transitions: Elderly, Blind and Disabled (65+, 18-64)**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Adult Day Services</b>									
Basic	S5105	UC				\$ 23.59	\$ 24.06	1/2 Day	An individual unit is 4-5 hours per day
Specialized	S5105	UC	TF			\$ 30.13	\$ 30.73	1/2 Day	An individual unit is 3-5 hours per day
<b>Assistive Technology-Extended</b>	T2029	UC				NR*	NR*	Per Purchase	\$1,000.00 Maximum
<b>Caregiver Education</b>	S5110	UC				\$ 12.19	\$ 12.19	15 Minutes	
<b>Community Transition Services (CTS)</b>									
Combined Maximum of \$3,500.00 for Coordinator and Items Purchased									
Coordinator	T2038	UC				NR*	NR*	Per Transition	\$2,000.00 Maximum
Service Items	A9900	UC				NR*	NR*	Per Purchase	\$1,500.00 Maximum
<b>Consumer Directed Attendant Support Services (CDASS)</b>									
Services (cent per unit)	T2025	UC						Monthly Allocation	Determined on FMS SEP Portal by CM
Per Member/Per Month (PM/PM)	T2040	UC				\$ 310.00	\$ 310.00	Month	
<b>Dental</b>	D2999	UC				NR*	NR*	Per Procedure	\$8,000.00 Maximum
<b>Enhanced Nursing Services (RN)</b>	T1002	UC				\$ 8.87	\$ 8.87	15 Minutes	Service is provided in the first 30 days post transition only. Maximum 50 units.
<b>Home Delivered Meals</b>	S5170	UC				\$ 10.80	\$ 10.80	Per Delivery/Meal	Time limited for CCT clients, may be provided more often during initial weeks after discharge from an institution
<b>Home Modification</b>	S5165	UC				NR*	NR*	Per Mod	\$10,000.00 Lifetime Maximum
<b>Home Modification-Extended</b>	S5165	UC	KG			NR*	NR*	Per Mod	\$5,000.00 Lifetime Maximum, can only be accessed when Home Modification limits have been reached
<b>Homemaker</b>	S5130	UC				\$ 3.76	\$ 3.84	15 minutes	
<b>In Home Support Services</b>									
Health Maintenance Activities (IHSS)	H0038	UC				\$ 7.09	\$ 7.23	15 minutes	
Homemaker (IHSS)	S5130	UC	KX			\$ 3.76	\$ 3.84	15 minutes	
Personal Care (IHSS)	T1019	UC	KX			\$ 3.76	\$ 3.84	15 minutes	

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Relative Personal Care (IHSS)	T1019	UC	HR	KX		\$ 3.76	\$ 3.84	15 minutes	No limits on IHSS benefits provided by parents of adult children. For all other relatives, the limitations on payment to family applies as set forth in 10 C.C.R. 2505-10, Section 8.485.200
<b>Independent Living Skills Training (ILST)</b>	H2014	UC				\$ 9.33	\$ 9.33	15 Minutes	24 units per day maximum
<b>Intensive Case Management</b>	T1016	UC				\$ 21.10	\$ 21.10	15 Minutes	
<b>Medication Reminder</b>									
Install/Purchase	T2029	UC	TF			NR*	NR*	Per Purchase	1 unit = 1 purchase
Monitoring	S5185	UC				NR*	NR*	Month	1 unit = 1 month
<b>Peer Mentorship</b>	H2015	UC				\$ 5.36	\$ 5.36	15 Minutes	
<b>Non Medical Transportation</b>									
All types except Adult Day are limited to 208 trips, or 104 round trips per service plan year									
Taxi	A0100	UC				PUC*	PUC*	1 Way Trip	Taxi: up to \$51.88 per trip, not to exceed the rate with the Public Utilities Commission. Use HB modifier for trips to and from adult day program.
<b>Mobility Van</b>									
Mobility Van-Mileage Band 1 (0-10 miles)	A0120	UC				\$ 8.14	\$ 8.30	1 Way Trip	Use HB modifier for trips to and from adult day program.
Mobility Van-Mileage Band 2 (11-20 miles)	A0120	UC	TT			\$ 14.98	\$ 15.28	1 Way Trip	
Mobility Van-Mileage Band 3 (over 20 miles)	A0120	UC	TN			\$ 22.30	\$ 22.75	1 Way Trip	
<b>Wheelchair Van</b>									
Wheelchair Van-Mileage Band 1 (0-10 miles)	A0130	UC				\$ 9.65	\$ 9.84	1 Way Trip	Use HB modifier for trips to and from adult day program.
Wheelchair Van-Mileage Band 2 (11-20 miles)	A0130	UC	TT			\$ 18.06	\$ 18.42	1 Way Trip	
Wheelchair Van-Mileage Band 3 (over 20 miles)	A0130	UC	TN			\$ 24.59	\$ 25.08	1 Way Trip	
<b>Personal Care</b>	T1019	UC				\$ 3.76	\$ 3.84	15 minutes	
<b>Personal Care-Relative</b>	T1019	UC	HR			\$ 3.76	\$ 3.84	15 minutes	Maximum reimbursement not to exceed 1776 units per year
<b>Personal Emergency Response System</b>									

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**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Install/Purchase	S5160	UC				NR*	NR*	Purchase	1 unit = 1 purchase
Monitoring	S5161	UC				NR*	NR*	Month	1 unit = 1 month
<b>Respite Care</b>									
Combined maximum of 30 days per calendar year for Respite Care provided in an ACF, In Home, or a Nursing Facility									
ACF	S5151	UC				\$ 55.62	\$ 56.73	Day	
NF	H0045	UC				\$ 124.03	\$ 126.51	Day	
In Home	S5150	UC				\$ 3.18	\$ 3.24	15 minutes	Not to exceed the ACF per diem for respite care
<b>Substance Abuse Counseling, Transitional</b>									
Individual	H0047	UC	HF			\$ 72.94	\$ 72.94	Hour	
Group	H0047	UC	HQ	HF		\$ 39.39	\$ 39.39	Hour	
<b>Transitional Behavioral Health Services</b>	H0025	UC				\$ 25.31	\$ 25.31	30 Minutes	
<b>Transitional Specialized Day Rehabilitation</b>	S5101	UC				\$ 36.45	\$ 36.45	1/2 Day	An individual unit is 4-5 hours per day
<b>Vision Extended</b>	V2799	UC				NR*	NR*	Per Procedure	\$1,000.00 Maximum

<b>Legend</b>	
<b>NR*</b>	<b>Negotiated Rate, will vary by client</b>
<b>KX</b>	<b>In Home Support Services (HCPCS Defn: Requirements specified in the medical policy have been met)</b>
<b>HR</b>	<b>Relative providing care (HCPCS Defn: Family/Couple with client present)</b>
<b>HB</b>	<b>To and From Adult Day (HCPCS Defn: Adult Program, non-geriatric)</b>
<b>HF</b>	<b>Substance Abuse Program</b>
<b>HQ</b>	<b>Group Setting</b>
<b>KG</b>	<b>Extended Demonstration Program (HCPCS Defn: DMEPOS item subject to DMEPOS competitive)</b>
<b>TF</b>	<b>Intermediate Level of Care</b>
<b>UC</b>	<b>Colorado Choice Transitions (HCPCS Defn: Medicaid Level of Care 12, as defined by each state)</b>

**Colorado Choice Transitions: Community Mental Health Supports (CMHS)**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Adult Day Services</b>									
Basic	S5105	UC				\$ 23.59	\$ 24.06	1/2 Day	An individual unit is 4-5 hours per day
Specialized	S5105	UC	TF			\$ 30.13	\$ 30.73	1/2 Day	An individual unit is 3-5 hours per day
<b>Assistive Technology-Extended</b>	T2029	UC				NR*	NR*	Per Purchase	\$1,000.00 Maximum
<b>Caregiver Education</b>	S5110	UC				\$ 12.19	\$ 12.19	15 Minutes	
<b>Community Transition Services (CTS)</b>									
Combined Maximum of \$3,500.00 for Coordinator and Items Purchased									
Coordinator	T2038	UC				NR*	NR*	Per Transition	\$2,000.00 Maximum
Service Items	A9900	UC				NR*	NR*	Per Purchase	\$1,500.00 Maximum
<b>Consumer Directed Attendant Support Services (CDASS)</b>									
Services (cent per unit)	T2025	UC						Monthly Allocation	Determined on FMS SEP Portal by CM
Per Member/Per Month (PM/PM)	T2040	UC				\$ 310.00	\$ 310.00	Month	Assessed by CM; varies by client
<b>Dental</b>	D2999	UC				NR*	NR*	Per Procedure	\$8,000.00 Maximum
<b>Enhanced Nursing Services (RN)</b>	T1002	UC				\$ 8.87	\$ 8.87	15 Minutes	Service is provided in the first 30 days post transition only. Maximum 50 units.
<b>Home Delivered Meals</b>	S5170	UC				\$ 10.80	\$ 10.80	Per Delivery	Time limited for CCT clients, may be provided more often during initial weeks after discharge from an institution
<b>Home Modification</b>	S5165	UC				NR*	NR*	Per Mod	\$10,000.00 Maximum
<b>Home Modification-Extended</b>	S5165	UC	KG			NR*	NR*	Per Mod	\$5,000.00 Lifetime Maximum, can only be accessed when Home Modification limits have been reached
<b>Homemaker</b>	S5130	UC				\$ 3.76	\$ 3.84	15 Minutes	
<b>Independent Living Skills Training</b>	H2014	UC				\$ 9.33	\$ 9.33	15 Minutes	24 units per day maximum
<b>Intensive Case Management</b>	T1016	UC				\$ 21.10	\$ 21.10	15 Minutes	
<b>Medication Reminder</b>									
Install/Purchase	T2029	UC	TF			NR*	NR*	Per Purchase	1 unit = 1 purchase
Monitoring	S5185	UC				NR*	NR*	Month	1 unit = 1 month
<b>Non Medical Transportation</b>									
All types except Adult Day are limited to 208 trips, or 104 round trips									

**Colorado Choice Transitions: Community Mental Health Supports (CMHS)**

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Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Taxi	A0100	UC				PUC*	PUC*	1 Way Trip	Taxi: up to \$51.88 per trip, not to exceed the rate with the Public Utilities Commission. Use HB modifier for trips to and from adult day program.
<b>Mobility Van</b>									
Mobility Van-Mileage Band 1 (0-10 miles)	A0120	UC				\$ 8.14	\$ 8.30	1 Way Trip	Use HB modifier for trips to and from adult day program.
Mobility Van-Mileage Band 2 (11-20 miles)	A0120	UC	TT			\$ 14.98	\$ 15.28	1 Way Trip	
Mobility Van-Mileage Band 3 (over 20 miles)	A0120	UC	TN			\$ 22.30	\$ 22.75	1 Way Trip	
<b>Wheelchair Van</b>									
Wheelchair Van-Mileage Band 1 (0-10 miles)	A0130	UC				\$ 9.65	\$ 9.84	1 Way Trip	Use HB modifier for trips to and from adult day program.
Wheelchair Van-Mileage Band 2 (11-20 miles)	A0130	UC	TT			\$ 18.06	\$ 18.42	1 Way Trip	
Wheelchair Van-Mileage Band 3 (over 20 miles)	A0130	UC	TN			\$ 24.59	\$ 25.08	1 Way Trip	
<b>Peer Mentorship</b>	H2015	UC				\$ 5.36	\$ 5.36	15 minutes	
<b>Personal Care</b>	T1019	UC				\$ 3.76	\$ 3.84	15 minutes	
<b>Personal Care-Relative</b>	T1019	UC	HR			\$ 3.76	\$ 3.84	15 minutes	Maximum reimbursement not to exceed 1776 units per year
<b>Personal Emergency Response System</b>									
Install/Purchase	S5160	UC				NR*	NR*	Per Purchase	1 unit = 1 purchase
Monitoring	S5161	UC				NR*	NR*	Month	1 unit = 1 month
<b>Respite Care</b>									
Combined maximum of 30 days per calendar year for Respite Care provided in an ACF, In Home, or a Nursing Facility									
ACF	S5151	UC				\$ 55.62	\$ 56.73	Day	
NF	H0045	UC				\$ 124.03	\$ 126.51	Day	
<b>Substance Abuse Counseling, Transitional</b>									
Individual	H0047	UC	HF			\$ 72.94	\$ 72.94	1 Hour	
Group	H0047	UC	HQ	HF		\$ 39.39	\$ 39.39	1 Hour	
<b>Transitional Behavioral Health Services</b>	H0025	UC				\$ 25.31	\$ 25.31	30 Minutes	
<b>Transitional Specialized Day Rehabilitation Services</b>	S5101	UC				\$ 36.45	\$ 36.45	1/2 Day	An individual unit is 4-5 hours per day
<b>Vision</b>	V2799	UC				NR*	NR*	Per Procedure	\$1,000.00 Maximum

<b>Legend</b>	
NR*	Negotiated Rate, will vary by client

**Colorado Choice Transitions: Community Mental Health Supports (CMHS)**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
HR	Relative providing care (HCPCS Defn: Family/Couple with client present)								
HB	To and From Adult Day (HCPCS Defn: Adult Program, non-geriatric)								
UA	Community Mental Health Supports (HCPCS Defn: Medicaid Level of Care 1, as defined by each state)								
HF	Substance Abuse Program								
HQ	Group Setting								
KG	Extended Demonstration Program (HCPCS Defn: DMEPOS item subject to DMEPOS competitive								
TF	Intermediate Level of Care								
UC	Colorado Choice Transitions (HCPCS Defn: Medicaid Level of Care 12, as defined by each state)								

**Colorado Choice Transitions: Brain Injury**  
**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Adult Day Services</b>									
Adult Day Services	S5102	UC				\$ 49.67	\$ 50.66	Day	At least 2 or more hours of attendance 1 or more days per week
Assistive Technology	T2029	UC	HB			NR*	NR*	Per Purchase	
Behavioral Programming	H0025	UC	TF			\$ 14.01	\$ 14.29	30 Minutes	
Caregiver Education	S5110	UC				\$ 12.19	\$ 12.19	15 Minutes	
<b>Community Transition Services (CTS)</b>									
Combined maximum of \$3,500.00 for Coordinator and Items Purchased									
Coordinator	T2038	UC				NR*	NR*	Per Transition	\$2,000.00 Maximum
Items Purchased	A9900	UC				NR*	NR*	Per Purchase	\$1,500.00 Maximum
<b>Consumer Directed Attendant Support Services (CDASS)</b>									
Services (cent per unit)	T2025	UC						Monthly Allocation	Determined on FMS SEP Portal by CM
Per Member/Per Month (PM/PM)	T2040	UC				\$ 310.00	\$ 310.00	Month	Assessed by CM; varies by client
Day Treatment	H2018	UC				\$ 78.79	\$ 80.37	Day	At least 2 or more hours of attendance 1 or more days per week
Dental	D2999	UC				NR*	NR*	Per Procedure	10,000.00 Lifetime Maximum, Demonstration Service
Enhanced Nursing Services (RN)	T1002	UC				\$ 8.87	\$ 8.87	15 minutes	Service is provided in first 30 days post transition only. Maximum 50 units.
Home Delivered Meals	S5170	UC				\$ 10.80	\$ 10.80	Per Delivery/Meal	Time limited for CCT clients, may be provided more often during initial weeks after discharge from an institution
Home Modifications	S5165	UC				NR*	NR*	Per Mod	\$10,000.00 Lifetime Maximum
Home Modifications-Extended	S5165	UC	KG			NR*	NR*	Per Mod	\$5,000.00 Lifetime Maximum, can only be accessed when Home Modification limits have been reached
Intensive Case Management	T1016	UC				\$ 21.10	\$ 21.10	15 Minutes	
Independent Living Skills Training (ILST)	T2013	UC				\$ 25.50	\$ 26.01	Hour	
<b>Mental Health Counseling</b>									
Must obtain Department approval over 30 cumulative visits of counseling									
Family	H0004	UC	HR			\$ 14.47	\$ 14.76	15 minutes	
Group	H0004	UC	HQ			\$ 8.11	\$ 8.27	15 minutes	
Individual	H0004	UC				\$ 14.47	\$ 14.76	15 minutes	

**Colorado Choice Transitions: Brain Injury**  
**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Non-Medical Transportation</b>									
All types except Adult Day are limited to 204 trips, or 104 round trips									
Taxi	A0100	UC				PUC*	PUC*	1 Way Trip	Taxi: up to \$51.88 per trip, not to exceed the rate with the Public Utilities Commission. Use HB modifier for trips to and from adult day program.
<b>Mobility Van</b>									
Mobility Van-Mileage Band 1 (0-10 miles)	A0120	UC				\$ 8.14	\$ 8.30	1 Way Trip	Use HB modifier for trips to and from adult day program.
Mobility Van-Mileage Band 2 (11-20 miles)	A0120	UC	TT			\$ 14.98	\$ 15.28	1 Way Trip	
Mobility Van-Mileage Band 3 (over 20 miles)	A0120	UC	TN			\$ 22.30	\$ 22.75	1 Way Trip	
<b>Wheelchair Van</b>									
Wheelchair Van-Mileage Band 1 (0-10 miles)	A0130	UC				\$ 9.65	\$ 9.84	1 Way Trip	Use HB modifier for trips to and from adult day program.
Wheelchair Van-Mileage Band 2 (11-20 miles)	A0130	UC	TT			\$ 18.06	\$ 18.42	1 Way Trip	
Wheelchair Van-Mileage Band 3 (over 20 miles)	A0130	UC	TN			\$ 24.59	\$ 25.08	1 Way Trip	
<b>Peer Mentorship</b>	H2015	UC				\$ 5.36	\$ 5.36	15 Minutes	
<b>Personal Care</b>	T1019	UC	TG			\$ 3.82	\$ 3.90	15 minutes	Not to exceed 10 hours per day
<b>Personal Care-Relative</b>	T1019	UC	HR	TG		\$ 3.82	\$ 3.90	15 minutes	Maximum reimbursement not to exceed 1776 units per year
<b>Personal Emergency Response System (PERS)</b>									
Installation	S5160	UC				NR*	NR*	Per Purchase	1 unit = 1 purchase
Monitoring	S5161	UC				NR*	NR*	Month	1 unit = 1 month
<b>Respite Care</b>									
Combined maximum of 30 days per calendar year for Respite Care provided In Home or a Nursing Facility									
NF	H0045	UC	TF			\$ 117.35	\$ 119.70	Day	
In Home	S5150	UC				\$ 3.18	\$ 3.24	15 minutes	All inclusive of client's needs
<b>Substance Abuse Counseling</b>									
Family	T1006	UC	HR	HF		\$ 57.95	\$ 59.11	Hour	
Group	H0047	UC	HQ	TF	HF	\$ 32.46	\$ 33.11	Hour	
Individual	H0047	UC	TF	HF		\$ 57.95	\$ 59.11	Hour	
<b>Supported Living Program</b>	T2033	UC				FS*	FS*	Day	Per diem rate set by HCPF using acuity levels of client population

**Colorado Choice Transitions: Brain Injury**  
**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Transitional Living Program (TLP) Tiered Rates</b>									
Transitional Living - Acuity Tier 1	T2016	UC	KX			\$ 137.07	\$ 347.09	1 Day	
Transitional Living - Acuity Tier 2	T2016	UC	HB			\$ -	\$ 371.89	1 Day	
Transitional Living - Acuity Tier 3	T2016	UC	HE			\$ -	\$ 397.70	1 Day	
Transitional Living - Acuity Tier 4	T2016	UC	HK			\$ -	\$ 425.10	1 Day	
Transitional Living - Acuity Tier 5	T2016	UC	HB	HE		\$ -	\$ 450.44	1 Day	
<b>Transitional Specialized Day Rehabilitation Services</b>	S5101	UC				\$ 36.45	\$ 36.45	1/2 Day	An individual unit is 4-5 hours per day
<b>Vision</b>	V2799	UC				NR*	NR*	Per Procedure	\$1,000.00 Maximum

<b>Legend</b>	
<b>NR*</b>	<b>Negotiated Rate, will vary by client</b>
<b>FS*</b>	<b>Facility Specific rate determined using acuity scores by the Dept.</b>
<b>KX</b>	<b>In Home Support Services (HCPCS Defn: Requirements specified in the medical policy have been met)</b>
<b>HR</b>	<b>Relative providing care (HCPCS Defn: Family/Couple with client present)</b>
<b>HB</b>	<b>To and From Adult Day (HCPCS Defn: Adult Program, non-geriatric)</b>
<b>U6</b>	<b>Brain Injury (HCPCS Defn: Medicaid Level of Care 1, as defined by each state)</b>
<b>HF</b>	<b>Substance Abuse Program</b>
<b>HQ</b>	<b>Group Setting</b>
<b>UC</b>	<b>Colorado Choice Transitions (HCPCS Defn: Medicaid Level of Care 12, as defined by each state)</b>

**Colorado Choice Transitions: Developmentally Disabled**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Assistive Technology-Extended</b>	T2029	UC				NR*	NR*	Per Purchase	\$1,000.00 Maximum
<b>Behavioral Services</b>									
Behavioral Line Staff	H2019	UC				\$ 6.36	\$ 6.52	15 Minutes	Maximum of 960 units per Service Plan year.
Behavioral Consultation	H2019	UC	HI	TG		\$ 23.92	\$ 24.52	15 Minutes	Maximum of 80 units per service plan year
Behavioral Counseling-Individual	H2019	UC	TF	TG		\$ 23.92	\$ 24.52	15 Minutes	Maximum of 208 units combined Individual and Group, per Service Plan year.
Behavioral Counseling Group	H2019	UC	TF	HQ		\$ 8.06	\$ 8.26	15 Minutes	
Behavioral Plan Assessment	T2024	UC	HI			\$ 23.92	\$ 24.52	15 Minutes	Applies to new enrollments, any amendment to this service in a current Service Plan or at the CSR. Maximum of 40 units per Service Plan year.
<b>Caregiver Education</b>	S5110	UC				\$ 12.19	\$ 12.19	15 Minutes	
<b>Community Transition Services (CTS)</b>									
Combined Maximum of \$3,500.00 for Coordinator and Items Purchased.									
Coordinator	T2038	UC				NR*	NR*	Per Transition	\$2,000.00 Maximum
Items Purchased	A9900	UC				NR*	NR*	Per Purchase	\$1,500.00 Maximum
<b>Day Rehabilitation</b>									
Maximum combined units of Specialized Habilitation, Supported Community Connections and Supported Employment is 4800 units per service plan year									
Specialized Habilitation Level 1	T2021	UC	HQ			\$ 2.27	\$ 2.32	15 Minutes	Maximum 4,800 units
Specialized Habilitation Level 2	T2021	UC	HI	HQ		\$ 2.49	\$ 2.55	15 Minutes	Maximum 4,800 units
Specialized Habilitation Level 3	T2021	UC	TF	HQ		\$ 2.77	\$ 2.84	15 Minutes	Maximum 4,800 units
Specialized Habilitation Level 4	T2021	UC	TF	HI	HQ	\$ 3.26	\$ 3.34	15 Minutes	Maximum 4,800 units
Specialized Habilitation Level 5	T2021	UC	TG	HQ		\$ 4.04	\$ 4.14	15 Minutes	Maximum 4,800 units
Specialized Habilitation Level 6	T2021	UC	TG	HI	HQ	\$ 5.80	\$ 5.95	15 Minutes	Maximum 4,800 units
Specialized Habilitation Level 7	T2021	UC	SC	HQ		\$ 9.13	\$ 9.36	15 Minutes	Maximum 4,800 units
Supported Community Connections Level 1	T2021	UC				\$ 2.76	\$ 2.82	15 Minutes	Maximum 4,800 units
Supported Community Connections Level 2	T2021	UC	HI			\$ 3.02	\$ 3.09	15 Minutes	Maximum 4,800 units
Supported Community Connections Level 3	T2021	UC	TF			\$ 3.39	\$ 3.48	15 Minutes	Maximum 4,800 units
Supported Community Connections Level 4	T2021	UC	TF	HI		\$ 3.90	\$ 4.00	15 Minutes	Maximum 4,800 units
Supported Community Connections Level 5	T2021	UC	TG			\$ 4.70	\$ 4.82	15 Minutes	Maximum 4,800 units

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Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Supported Community Connections Level 6	T2021	UC	TG	HI		\$ 6.18	\$ 6.33	15 Minutes	Maximum 4,800 units
Supported Community Connections Level 7	T2021	UC	SC			\$ 9.13	\$ 9.36	15 Minutes	Maximum 4,800 units
<b>Dental Services</b>									
Basic	D2999	UC	HI			\$ 1.00	\$ 1.00	Dollar	\$2,000.00 limitation without prior authorization from DDD. Diagnostic and Treatment are combined into a single billing service code.
Major	D2999	UC	TF			\$ 1.00	\$ 1.00	Dollar	\$10,000.00 limitation for major services for the life of the waiver period beginning July 1, 2009 through June 30, 2014.
<b>Enhanced Nursing Services (RN)</b>	T1002	UC				\$ 8.87	\$ 8.87	15 Minutes	Services is provided in the first 30 days post transition only. Maximum 50 units.
<b>Home Accessibility Adaptations-Extended</b>	S5165	UC	KG			NR*	NR*	Per Mod	\$5,000.00 Maximum
<b>Intensive Case Management</b>	T1016	UC				\$ 21.10	\$ 21.10	15 Minutes	
<b>Non Medical Transportation</b>									
Maximum of 508 trips (all mileage bands) per Service Plan year.									
Transportation Mileage Level 1	T2003	UC				\$ 5.55	\$ 5.69	1 Trip	0-10 Miles, 2 Trips/Day
Transportation Mileage Level 2	T2003	UC	HI			\$ 11.64	\$ 11.93	1 Trip	11-20 Miles, 2 Trips/Day
Transportation Mileage Level 3	T2003	UC	TF			\$ 17.72	\$ 18.16	1 Trip	21 and Up Miles, 2 Trips/Day
Other (public conveyance)	T2004	UC				\$ 1.00	\$ 1.00	Dollar	A dollar per unit for the cost of a bus pass or other public conveyance may only be used when it is more cost effective than or equivalent to the applicable mileage band.
<b>Peer Mentorship</b>	H2015	UC				\$ 5.36	\$ 5.36	15 Minutes	
<b>Prevocational Services</b>									
Maximum Combined units of Specialized Habilitation, Supported Community Connections and Supported Employment is 4800 units per service plan year.									
Prevocational Services Level 1	T2015	UC	HQ			\$ 2.27	\$ 2.33	15 Minutes	Maximum 4,800 units
Prevocational Services Level 2	T2015	UC	HI	HQ		\$ 2.49	\$ 2.55	15 Minutes	Maximum 4,800 units
Prevocational Services Level 3	T2015	UC	TF	HQ		\$ 2.77	\$ 2.84	15 Minutes	Maximum 4,800 units

## Colorado Choice Transitions: Developmentally Disabled

Rates Effective July 1, 2014-February 28, 2018

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Prevocational Services Level 4	T2015	UC	TF	HI	HQ	\$ 3.26	\$ 3.34	15 Minutes	Maximum 4,800 units
Prevocational Services Level 5	T2015	UC	TG	HQ		\$ 4.04	\$ 4.14	15 Minutes	Maximum 4,800 units
Prevocational Services Level 6	T2015	UC	TG	HI	HQ	\$ 5.80	\$ 5.95	15 Minutes	Maximum 4,800 units
<b>Residential Services</b>									
Group Home Level 1	T2016	UC	HQ			\$ 84.68	\$ 86.79	Day	
Group Home Level 2	T2016	UC	HI	HQ		\$ 111.46	\$ 114.24	Day	
Group Home Level 3	T2016	UC	TF	HQ		\$ 131.30	\$ 134.58	Day	
Group Home Level 4	T2016	UC	TF	HI	HQ	\$ 155.12	\$ 158.99	Day	
Group Home Level 5	T2016	UC	TG	HQ		\$ 171.35	\$ 175.63	Day	
Group Home Level 6	T2016	UC	TG	HI	HQ	\$ 202.76	\$ 207.83	Day	
Group Home Level 7	T2016	UC	SC	HQ		NR*	NR*	Day	
Personal Care Alternative Level 1	T2016	UC				\$ 62.25	\$ 63.81	Day	
Personal Care Alternative Level 2	T2016	UC	HI			\$ 100.60	\$ 103.12	Day	
Personal Care Alternative Level 3	T2016	UC	TF			\$ 122.91	\$ 125.98	Day	
Personal Care Alternative Level 4	T2016	UC	TF	HI		\$ 149.64	\$ 153.38	Day	
Personal Care Alternative Level 5	T2016	UC	TG			\$ 171.95	\$ 176.25	Day	
Personal Care Alternative Level 6	T2016	UC	TG	HI		\$ 216.10	\$ 221.50	Day	
Personal Care Alternative Level 7	T2016	UC	SC			NR*	NR*	Day	
Host Home Level 1	T2016	UC	TT			\$ 57.74	\$ 59.18	Day	
Host Home Level 2	T2016	UC	HI	TT		\$ 93.29	\$ 95.62	Day	
Host Home Level 3	T2016	UC	TF	TT		\$ 113.97	\$ 116.82	Day	
Host Home Level 4	T2016	UC	TF	HI	TT	\$ 138.78	\$ 142.25	Day	
Host Home Level 5	T2016	UC	TG	TT		\$ 159.46	\$ 163.45	Day	
Host Home Level 6	T2016	UC	TG	HI	TT	\$ 200.43	\$ 205.44	Day	
Host Home Level 7	T2016	UC	SC	TT		NR*	NR*	Day	
<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.									
Supported Employment Group Level 1	T2019	UC	HQ			\$ 3.04	\$ 3.11	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 2	T2019	UC	HI	HQ		\$ 3.32	\$ 3.40	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 3	T2019	UC	TF	HQ		\$ 3.70	\$ 3.79	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 4	T2019	UC	TF	HI	HQ	\$ 4.27	\$ 4.38	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 5	T2019	UC	TG	HQ		\$ 5.11	\$ 5.23	15 Minutes	Maximum 7,112 units

**Colorado Choice Transitions: Developmentally Disabled**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Supported Employment Group Level 6	T2019	UC	TG	HI	HQ	\$ 6.66	\$ 6.82	15 Minutes	Maximum 7,112 units
Supported Employment Individual-All Levels	T2019	UC	SC			\$ 12.49	\$ 12.80	15 Minutes	Maximum 7,112 units
Job Development Group-All Levels	H2023	UC	HQ			\$ 3.98	\$ 4.08	15 Minutes	Maximum of 100 units, must not be otherwise available for Division of Vocational Rehabilitation
Job Development Levels 1-2	H2023	UC				\$ 12.49	\$ 12.80	15 Minutes	Maximum 80 units, must not be otherwise available for DVR
Job Development Levels 3-4	H2023	UC	HI			\$ 12.49	\$ 12.80	15 Minutes	Maximum 100 units, must not be otherwise available for DVR
Job Development Levels 5-6	H2023	UC	TF			\$ 12.49	\$ 12.80	15 Minutes	Maximum 120 units, must not be otherwise available for DVR
Job Placement	H2024	UC				\$ 1.00	\$ 1.00	Dollar	Maximum 1,000 units (i.e. \$1000.00), must not be otherwise available through DVR. Maximum units do not start over with service plan year and are paid to find a successful job for the individual.
Job Placement Group	H2024	UC	HQ			\$ 1.00	\$ 1.00	Dollar	Maximum 400 units (i.e. \$400.00), must not be otherwise available through DVR. Maximum units do not start over with service plan year and are paid to find a successful job for the individual.
<b>Substance Abuse Counseling, Transitional</b>									
Individual	H0047	UC	HF			\$ 72.94	\$ 72.94	Hour	
Group	H0047	UC	HQ	HF		\$ 39.39	\$ 39.39	Hour	
<b>Specialized Medical Equipment and Supplies</b>									
Disposable	T2028	UC				\$ 1.00	\$ 1.00	Dollar	Services may be authorized by a CCB up the DDD pre-established thresholds, beyond which DDD prior authorization is required.
Equipment	T2029	UC	TF			\$ 1.00	\$ 1.00	Dollar	
Vision	V2799	UC	HI			\$ 1.00	\$ 1.00	Dollar	\$1,000.00 Maximum

**Colorado Choice Transitions: Developmentally Disabled**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Legend</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>								

**Colorado Choice Transitions: Supported Living Services**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Assistive Technology</b>	T2035	UC				\$ 1.00	\$ 1.00	Dollar	Maximum \$10,000.00 over the life of the waiver for combination of Assistive Technology, Vehicle Modifications, and Home Modifications.
<b>Behavioral Services</b>									
Behavioral Line Staff	H2019	UC				\$ 6.36	\$ 6.52	15 Minutes	Maximum of 960 units per Service Plan year.
Behavioral Consultation	H2019	UC	HI	TG		\$ 23.92	\$ 24.52	15 Minutes	Maximum of 80 units per service plan year
Behavioral Counseling Individual	H2019	UC	TF	TG		\$ 23.92	\$ 24.52	15 Minutes	Maximum of 208 units combined Individual and Group, per Service Plan year.
Behavioral Counseling Group	H2019	UC	TF	HQ		\$ 8.06	\$ 8.26	15 Minutes	
Behavioral Plan Assessment	T2024	UC	HI			\$ 23.92	\$ 24.52	15 Minutes	Applies to new enrollments, any amendment to this service in a current Service Plan or at the CSR. Maximum of 40 units per Service Plan year.
<b>Caregiver Education</b>	S5110	UC				\$ 12.19	\$ 12.19	15 Minutes	
<b>Community Transition Services (CTS)</b>									
Combined Maximum of \$3,500.00 for Coordinator and Items Purchased.									
Coordinator	T2038	UC				NR*	NR*	Per Transition	\$2,000.00 Maximum
Items Purchased	A9900	UC				NR*	NR*	Per Purchase	\$1,500.00 Maximum
<b>Day Habilitation</b>									
Maximum combined units of Specialized Habilitation, Supported Community Connections and Supported Employment is 7,112 units per year.									
Specialized Habilitation Level 1	T2021	UC	HQ			\$ 2.27	\$ 2.32	15 Minutes	Maximum 7,112 units-See Above
Specialized Habilitation Level 2	T2021	UC	HI	HQ		\$ 2.49	\$ 2.55	15 Minutes	Maximum 7,112 units-See Above
Specialized Habilitation Level 3	T2021	UC	TF	HQ		\$ 2.77	\$ 2.84	15 Minutes	Maximum 7,112 units-See Above
Specialized Habilitation Level 4	T2021	UC	TF	HI	HQ	\$ 3.26	\$ 3.34	15 Minutes	Maximum 7,112 units-See Above
Specialized Habilitation Level 5	T2021	UC	TG	HQ		\$ 4.04	\$ 4.14	15 Minutes	Maximum 7,112 units-See Above
Specialized Habilitation Level 6	T2021	UC	TG	HI	HQ	\$ 5.80	\$ 5.95	15 Minutes	Maximum 7,112 units-See Above
Supported Community Connections Level 1	T2021	UC				\$ 2.76	\$ 2.82	15 Minutes	Maximum 7,112 units-See Above
Supported Community Connections Level 2	T2021	UC	HI			\$ 3.02	\$ 3.09	15 Minutes	Maximum 7,112 units-See Above
Supported Community Connections Level 3	T2021	UC	TF			\$ 3.39	\$ 3.48	15 Minutes	Maximum 7,112 units-See Above
Supported Community Connections Level 4	T2021	UC	TF	HI		\$ 3.90	\$ 4.00	15 Minutes	Maximum 7,112 units-See Above

**Colorado Choice Transitions: Supported Living Services**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Supported Community Connections Level 5	T2021	UC	TG			\$ 4.70	\$ 4.82	15 Minutes	Maximum 7,112 units- See Above
Supported Community Connections Level 6	T2021	UC	TG	HI		\$ 6.18	\$ 6.33	15 Minutes	Maximum 7,112 units- See Above
<b>Dental Services</b>									
Combined maximum of \$10,000.00 for Basic/Preventative and Major Dental.									
Basic/Preventative	D2999	UC	HI			\$ 1.00	\$ 1.00	Dollar	\$2,000.00 limitation without prior authorization from DDD. Diagnostic and Treatment are combined into a single billing service code.
Major	D2999	UC	TF			\$ 1.00	\$ 1.00	Dollar	\$10,000.00 limitation for major services for the life of the waiver period beginning July 1, 2009 through June 30, 2014
<b>Enhanced Nursing Services (RN)</b>	T1002	UC				\$ 8.87	\$ 8.87	15 Minutes	Services provided in first 30 days post-transition only. Maximum 50 units.
<b>Home Accessibility Adaptations</b>	S5165	UC				\$ 1.00	\$ 1.00	Dollar	Maximum \$10,000.00 over life of the waiver for combination of Assistive Technology, Vehicle Modifications and Home Accessibility Adaptations.
<b>Home Accessibility Adaptations-Extended</b>	S5165	UC	KG			\$ 1.00	\$ 1.00	Dollar	\$5,000.00 Lifetime Maximum
<b>Homemaker</b>									
Basic	S5130	UC	HI			\$ 3.64	\$ 3.73	15 Minutes	This rate is set to be consistent with EBD waiver
Enhanced	S5130	UC	TF			\$ 5.88	\$ 6.02	15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to the individual behavioral or medical needs.
<b>Independent Living Skills Training (ILST)</b>	H2014	UC				\$ 9.33	\$ 9.33	15 Minutes	24 units per day maximum
<b>Intensive Case Management</b>	T1016	UC				\$ 21.10	\$ 21.10	15 Minutes	
<b>Mentorship</b>	H2021	UC				\$ 9.59	\$ 9.83	15 Minutes	Maximum of 192 units/year, except for training regarding child care.

**Colorado Choice Transitions: Supported Living Services**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
<b>Non Medical Transportation</b>									
Maximum of 508 trips (all mileage bands) per Service Plan year.									
Mileage Level 1	T2003	UC				\$ 5.55	\$ 5.69	1 Trip	0-10 Miles, 2 Trips/Day
Mileage Level 2	T2003	UC	HI			\$ 11.64	\$ 11.93	1 Trip	11-20 Miles, 2 Trips/Day
Mileage Level 3	T2003	UC	TF			\$ 17.72	\$ 18.16	1 Trip	21 and Up Miles, 2 Trips/Day
Mileage not in Day Program	T2003	UC	HB			\$ 5.55	\$ 5.69	4 Trips per week	4 Trips/week (Mileage band 1)
Other (public conveyance)	T2004	UC				\$ 1.00	\$ 1.00	Dollar	A dollar per unit for the cost of a bus pass or other public conveyance may only be used when it is more cost effective than or equivalent to the applicable mileage band.
<b>Personal Emergency Response System (PERS)</b>	S5161	UC				\$ 1.00	\$ 1.00	Dollar	Services may be authorized by a CCB up the DDD pre-established thresholds, beyond which DDD prior authorization is required.
<b>Personal Care</b>	T1019	UC	TF			\$ 4.75	\$ 4.87	15 Minutes	
<b>Prevocational Services</b>									
Maximum combined units of Specialized Habilitation, Supported Community Connections and Supported Employment is 7,112 units per year.									
Prevocational Services Level 1	T2015	UC	HQ			\$ 2.27	\$ 2.32	15 Minutes	Maximum 7,112 units-See Above
Prevocational Services Level 2	T2015	UC	HI	HQ		\$ 2.49	\$ 2.55	15 Minutes	Maximum 7,112 units-See Above
Prevocational Services Level 3	T2015	UC	TF	HQ		\$ 2.77	\$ 2.84	15 Minutes	Maximum 7,112 units-See Above
Prevocational Services Level 4	T2015	UC	TF	HI	HQ	\$ 3.26	\$ 3.34	15 Minutes	Maximum 7,112 units-See Above
Prevocational Services Level 5	T2015	UC	TG	HQ		\$ 4.04	\$ 4.14	15 Minutes	Maximum 7,112 units-See Above
Prevocational Services Level 6	T2015	UC	TG	HI	HQ	\$ 5.80	\$ 5.95	15 Minutes	Maximum 7,112 units-See Above
<b>Professional Services</b>									
Massage Therapy	97124	UC				\$ 17.89	\$ 18.34	15 Minutes	
Movement Therapy Bachelors	G0176	UC	HN			\$ 14.91	\$ 15.29	15 Minutes	
Movement Therapy Masters	G0176	UC				\$ 21.86	\$ 22.41	15 Minutes	
Hippotherapy Individual	S8940	UC				\$ 19.87	\$ 20.37	15 Minutes	
Hippotherapy Group	S8940	UC	HQ			\$ 8.44	\$ 8.66	15 Minutes	

**Colorado Choice Transitions: Supported Living Services**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Rec Pass Access Fee	S5199	UC				\$ 1.00	\$ 1.00	Dollar	Services may be authorized by a CCB up the DDD pre-established thresholds, beyond which DDD prior authorization is required. This service is limited to the need to access professional services as described in the July 1, 2009 FAQs.
<b>Respite Care</b>									
Individual	S5150	UC	TG			\$ 4.75	\$ 4.87	15 Minutes	Maximum of 10 hours per day
Individual Day	S5151	UC	TG			\$ 189.85	\$ 194.60	1 Day	A Day is >10 hours (including individual and/or group setting)
Group	S5151	UC	HQ	TG		\$ 1.00	\$ 1.00	Dollar	Not to exceed respite individual rates (i.e. 15 minute rate if 10 hours or less in a day or daily rate if more than 10 hours per day.)
Camp	T2036	UC				\$ 1.00	\$ 1.00	Dollar	
<b>Specialized Medical Equipment and Supplies</b>									
Disposable	T2028	UC				\$ 1.00	\$ 1.00	Dollar	Services may be authorized by a CCB up the DDD pre-established thresholds, beyond which DDD prior authorization is required.
Equipment	T2029	UC	TF			\$ 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.									
Supported Employment Group Level 1	T2019	UC	HQ			\$ 3.04	\$ 3.11	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 2	T2019	UC	HI	HQ		\$ 3.32	\$ 3.40	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 3	T2019	UC	TF	HQ		\$ 3.70	\$ 3.79	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 4	T2019	UC	TF	HI	HQ	\$ 4.27	\$ 4.38	15 Minutes	Maximum 7,112 units

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Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Supported Employment Group Level 5	T2019	UC	TG	HQ		\$ 5.11	\$ 5.23	15 Minutes	Maximum 7,112 units
Supported Employment Group Level 6	T2019	UC	TG	HI	HQ	\$ 6.66	\$ 6.82	15 Minutes	Maximum 7,112 units
Supported Employment Individual-All Levels	T2019	UC	HI			\$ 12.49	\$ 12.80	15 Minutes	Maximum 7,112 units
Job Development Group-All Levels	H2023	UC	HQ			\$ 3.98	\$ 4.08	15 Minutes	Maximum of 100 units, must not be otherwise available for Division of Vocational Rehabilitation
Job Development Levels 1-2	H2023	UC				\$ 12.49	\$ 12.80	15 Minutes	Maximum 80 units, must not be otherwise available for DVR
Job Development Levels 3-4	H2023	UC	HI			\$ 12.49	\$ 12.80	15 Minutes	Maximum 100 units, must not be otherwise available for DVR
Job Development Levels 5-6	H2023	UC	TF			\$ 12.49	\$ 12.80	15 Minutes	Maximum 120 units, must not be otherwise available for DVR
Job Placement	H2024	UC				\$ 1.00	\$ 1.00	Dollar	Maximum 1,000 units (i.e. \$1000.00), must not be otherwise available through DVR. Maximum units do not start over with service plan year and are paid to find a successful job for the individual.
Job Placement Group	H2024	UC	HQ			\$ 1.00	\$ 1.00	Dollar	Maximum 400 units (i.e. \$400.00), must not be otherwise available through DVR. Maximum units do not start over with service plan year and are paid to find a successful job for the individual.
<b>Substance Abuse Counseling, Transitional</b>									
Individual	H0047	UC	HF			\$ 72.94	\$ 72.94	Hour	
Group	H0047	UC	HQ	HF		\$ 39.39	\$ 39.39	Hour	
<b>Vehicle Modifications</b>	T2039	UC				NR*	NR*	Per Mod	Maximum \$10,000.00 over the life of the waiver for combination of Assistive Technology, Vehicle Modifications, and Home Modifications.

**Colorado Choice Transitions: Supported Living Services**

**Rates Effective July 1, 2014-February 28, 2018**

Service Type	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Current Rate 7/1/2013	New Rate 7/1/2014	Unit Value	Comments
Vision	V2799	UC	HI			\$ 1.00	\$ 1.00	Dollar	Services may be authorized by a CCB up to the DDD pre-established thresholds, beyond which prior authorization is required.

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