

CHAPTER 43: SUPPORTS WAIVER**APPENDIX B: SERVICE PROCEDURE CODES/RATES****PAGE(S) 5****Service Procedure Codes/Rates**

<u>HIPAA CODE NAME</u>	<u>PROVIDER TYPE</u>	<u>PROVIDER SPECIALTY</u>	<u>SUB SPECIALTY</u>	<u>SERVICE NAME</u>	<u>PROCEDURE CODE</u>	<u>MODIFIER 1</u>	<u>MODIFIER 2</u>	<u>RATE</u>	<u>STANDARD UNIT</u>	<u>SERVICE LIMIT</u>
<u>SUPPORT COORDINATION</u>										
Case Management	45	81		Support Coordination	T2023			\$201.50	Monthly	12
<u>TRANSPORTATION</u>										
Non-Emergency Transportation	98 13 14	98 36 50		Transportation for Supported Employment, Day Habilitation or Prevocational	T2002			\$20.00	Daily	Once per day that one of these services (except virtual) are delivered
<u>SUPPORTED EMPLOYMENT - INDIVIDUAL</u>										
Supported Employment	98	98		Work-Based Learning Experience	H2023	UK	U1	\$175.00	Per Assessment	3
Supported Employment	98	98		Job Development/Job Placement	H2023	U1		\$20.00	15 Minutes	480
Supported Employment	98	98		Initial Job Support and Job Stabilization	H2023	TS	U1	\$18.50	15 Minutes	1,920
Supported Employment	98	98		Extended Job Supports	H2023	TT	U1	\$15.00	15 Minutes	2,500
Supported Employment	98	98		Follow-Along Supports	H2026	U1		\$70.00	Per Diem	48
Supported Employment	98	98		Virtual Delivery of Follow-Along Supports	H2026	GT	U1	\$13.63	15 Minutes	240
<u>SUPPORTED EMPLOYMENT- GROUP</u>										
Supported Employment	98	98		Group Employment Job Assessment, Discovery, and Development	H2023			\$3.78	15 Minutes	6,720 Units to be shared across H2025 codes except for H2023.
Supported Employment	98	98		Group Employment (1:2 Beneficiary ratio)	H2025	TT		\$4.16	15 Minutes	
Supported Employment	98	98		Group Employment (1:3-4 Beneficiary ratio)	H2025	UQ		\$3.50	15 Minutes	
Supported Employment	98	98		Group Employment (1:5-8 Beneficiary ratio)	H2025			\$2.76	15 Minutes	
<u>DAY HABILITATION/COMMUNITY LIFE ENGAGEMENT</u>										
Day Habilitation	14	50		Community Life Engagement (1:1 ratio)	T2021	TT		\$4.75	15 Minutes	6720 Units to be shared across all T2021 codes
Day Habilitation	14	50		Community Life Engagement (1:2-4 ratio)	T2021	UQ		\$4.00	15 Minutes	
Day Habilitation	14	50		Onsite Day Habilitation (1:5-8 ratio)	T2021			\$2.48	15 Minutes	
Day Habilitation	14	50		Virtual Delivery of Onsite Day Habilitation (1:5-8 ratio)	T2021	GT		\$2.98	15 Minutes	
<u>COMMUNITY LIFE ENGAGEMENT DEVELOPMENT</u>										

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<u>Day Habilitation</u>	<u>14</u>	<u>50</u>		<u>Community Life Engagement Development (1:1 ratio)</u>	<u>T2025</u>	<u>U1</u>		<u>\$7.00</u>	<u>15 Minutes</u>	<u>240 Units to be shared across all T2025 codes</u>
<u>Day Habilitation</u>	<u>14</u>	<u>50</u>		<u>Community Life Engagement Development (1:2 ratio)</u>	<u>T2025</u>	<u>UN</u>		<u>\$4.00</u>	<u>15 Minutes</u>	
<u>Day Habilitation</u>	<u>14</u>	<u>50</u>		<u>Community Life Engagement Development (1:3 ratio)</u>	<u>T2025</u>	<u>UP</u>		<u>\$3.00</u>	<u>15 Minutes</u>	
<u>HIPAA CODE NAME</u>	<u>PROVIDER TYPE</u>	<u>PROVIDER SPECIALTY</u>	<u>SUB SPECIALTY</u>	<u>SERVICE NAME</u>	<u>PROCEDURE CODE</u>	<u>MODIFIER 1</u>	<u>MODIFIER 2</u>	<u>RATE</u>	<u>STANDARD UNIT</u>	<u>SERVICE LIMIT</u>
<u>PREVOCATIONAL</u>										
<u>Habilitation, Prevocational</u>	<u>13</u>	<u>36</u>		<u>Community Career Planning (1:1 ratio)</u>	<u>H2014</u>	<u>TT</u>		<u>\$5.00</u>	<u>15 Minute</u>	<u>6720 Units to be shared across all H2014 codes</u>
<u>Habilitation, Prevocational</u>	<u>13</u>	<u>36</u>		<u>Community Career Planning (1:2-4 ratio)</u>	<u>H2014</u>	<u>UQ</u>		<u>\$4.50</u>	<u>15 Minute</u>	
<u>Habilitation, Prevocational</u>	<u>13</u>	<u>36</u>		<u>Onsite Prevocational (1:5-8)</u>	<u>H2014</u>			<u>\$2.39</u>	<u>15 Minute</u>	
<u>Habilitation, Prevocational</u>	<u>13</u>	<u>36</u>		<u>Virtual Delivery of Onsite Prevocational</u>	<u>H2014</u>	<u>GT</u>		<u>\$2.98</u>	<u>15 Minute</u>	
<u>HABILITATION</u>										
<u>Habilitation</u>	<u>13</u>	<u>36</u>		<u>Habilitation (1:1 ratio/based out of home)</u>	<u>T2019</u>			<u>\$4.63</u>	<u>15 Minute</u>	<u>285 units shared across provider types</u>
<u>Habilitation</u>	<u>14</u>	<u>50</u>		<u>Habilitation (1:1 ratio/based out of home)</u>	<u>T2019</u>			<u>\$4.63</u>	<u>15 Minute</u>	
<u>Habilitation</u>	<u>82</u>	<u>82</u>	<u>8A</u>	<u>Habilitation (1:1 ratio/based out of home)</u>	<u>T2019</u>			<u>\$4.63</u>	<u>15 Minute</u>	
<u>Habilitation</u>	<u>98</u>	<u>98</u>		<u>Habilitation (1:1 ratio/based out of home)</u>	<u>T2019</u>			<u>\$4.63</u>	<u>15 Minute</u>	
<u>RESPIRE</u>										
<u>Respite Care Services</u>	<u>82</u>	<u>82</u>	<u>8A</u>	<u>In-home Respite</u>	<u>S5125</u>			<u>\$4.63</u>	<u>15 Minute</u>	<u>428 units shared across in-home and center-based</u>
<u>Respite Care Services</u>	<u>83</u>	<u>83</u>		<u>Center-based Respite</u>	<u>T1005</u>	<u>HQ</u>				
<u>PERSONAL EMERGENCY RESPONSE SYSTEM (PERS)</u>										
<u>Personal Emergency Response System</u>	<u>16</u>	<u>90</u>		<u>Personal Emergency Response System Installation</u>	<u>S5160</u>			<u>\$30.00</u>	<u>One Time</u>	<u>One time per residence</u>
<u>Personal Emergency Response System</u>	<u>16</u>	<u>90</u>		<u>Personal Emergency Response System Monthly Maintenance</u>	<u>S5161</u>			<u>\$28.00</u>	<u>Monthly</u>	<u>12</u>
<u>PERMANENT SUPPORTIVE HOUSING</u>										
<u>Permanent Supportive Housing</u>	<u>AW</u>	<u>3W</u>		<u>Permanent Supportive Housing Stabilization</u>	<u>G9012</u>			<u>\$15.11</u>	<u>15 minute</u>	<u>93</u>
<u>Permanent Supportive Housing</u>	<u>AW</u>	<u>3W</u>		<u>Permanent Supportive Housing Stabilization Transition</u>	<u>G9012</u>	<u>U8</u>		<u>\$15.11</u>	<u>15 Minute</u>	<u>72</u>
<u>SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES</u>										

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<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Emergency Response System Purchase</u>	<u>S5162</u>				<u>One Time</u>	
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Emergency Response System</u>	<u>S5162</u>	<u>XU</u>		<u>\$50.00</u>	<u>Monthly</u>	
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Medication Reminder Service Per month</u>	<u>S5185</u>			<u>\$75.00</u>	<u>Monthly</u>	
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Alert Device, Noc</u>	<u>A9280</u>					
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Assistive Technology Supports Consultation</u>	<u>T2035</u>				<u>\$200.00</u>	<u>One time per CPOC Cannot be provided in the same CPOC year as T1028</u>
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Home Environment Assessment</u>	<u>T1028</u>				<u>\$450.00</u>	<u>One time per CPOC Cannot be provided in the same CPOC year as T2035</u>

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<u>HIPAA CODE NAME</u>	<u>PROVIDER TYPE</u>	<u>PROVIDER SPECIALTY</u>	<u>SUB SPECIALTY</u>	<u>SERVICE NAME</u>	<u>PROCEDURE CODE</u>	<u>MODIFIER 1</u>	<u>MODIFIER 2</u>	<u>RATE</u>	<u>STANDARD UNIT</u>	<u>SERVICE LIMIT</u>
<u>SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES</u>										
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Monitoring Feature/Device Noc</u>	<u>A9279</u>					
<u>Remote Supports</u>	<u>17</u>	<u>91</u>		<u>Monitoring Feature/Device Noc Interactive Audio And Video</u>	<u>A9279</u>	<u>GT</u>				
<u>INCONTINENCE PRODUCTS</u>										
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Brief/Diaper Small</u>	<u>T4521</u>					Total incontinence products per CPOC year NTE \$2,500 *Refer to Incontinence Products Manual
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Brief/Diaper Medium</u>	<u>T4522</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Brief/Diaper Large</u>	<u>T4523</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Brief/Diaper X-Large</u>	<u>T4524</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Pull-On Small</u>	<u>T4525</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Pull-On Medium</u>	<u>T4526</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Pull-On Large</u>	<u>T4527</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Pull-On X-Large</u>	<u>T4528</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Liner/Shield/Pad</u>	<u>T4535</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Reusable Pull-On Any Size</u>	<u>T4536</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Reusable Under Pad Bed Any Size</u>	<u>T4537</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Reusable Diaper/Brief Any Size</u>	<u>T4539</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Reusable Under Pad Chair Any Size</u>	<u>T4540</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Under Pad Large</u>	<u>T4541</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Under Pad Small</u>	<u>T4542</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Brief/Diaper Above X-Large</u>	<u>T4543</u>					

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<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Adult Size Pull-On Above X-Large</u>	<u>T4544</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Disposable Penile Wrap</u>	<u>T4545</u>					
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Youth Brief/Diaper Any Size</u>	<u>T4533</u>					
<u>HIPAA CODE NAME</u>	<u>PROVIDER TYPE</u>	<u>PROVIDER SPECIALTY</u>	<u>SUB SPECIALTY</u>	<u>SERVICE NAME</u>	<u>PROCEDURE CODE</u>	<u>MODIFIER 1</u>	<u>MODIFIER 2</u>	<u>RATE</u>	<u>STANDARD UNIT</u>	<u>SERVICE LIMIT</u>
<u>INCONTINENCE PRODUCTS</u>										
<u>Incontinence Products</u>	<u>17</u>	<u>91</u>		<u>Youth Pull-On Any Size</u>	<u>T4534</u>					

The following chart describes the codes and rates that are to be used with the Supports Waiver (SW). Providers must bill the appropriate procedure code for the service performed.

PROVIDER TYPE	SERVICE DESCRIPTION	PROCEDURE CODE	MODIFIER	SECOND MODIFIER	RATE	STANDARD UNIT-OF SERVICE	ANNUAL SERVICE LIMITS
98	Work-Based Learning Experience	H2023	UK	U1	\$175.00	Per Assessment	3
98	Group Employment Job Assessment, Discovery, and Development	H2023			\$3.78	15 minutes	480
98	Job Development/Job Placement	H2023	U1		\$20.00	15 minutes	480 units
98	Initial Job Support and Job Stabilization	H2023	TS	U1	\$18.50	15 minutes	1,920
98	Extended On The Job Supports	H2023	TT	U1	\$15.00	15 minutes	2,500
98	Follow Along Job Supports	H2023	U1		\$70.00	Per-Diem	48
98	Virtual Delivery of Follow-Along Job Supports	H2023	GT	U1	\$13.63		240
98	Group Employment (1:2 Beneficiary ratio)	H2025	TT		\$4.16	15 minutes	6720 shared for all H2025 codes

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PROVIDER TYPE	SERVICE DESCRIPTION	PROCEDURE CODE	MODIFIER	SECOND MODIFIER	RATE	STANDARD UNIT-OF SERVICE	ANNUAL SERVICE LIMITS
98	Group Employment (1:3-4 Beneficiary ratio)	H2025	UQ		\$3.50	15 minutes	6720 shared for all H2025 codes
98	Group Employment (1:5-8 Beneficiary ratio)	H2025	NO-MOD		\$2.76	15 minutes	6720 shared for all H2025 codes
14	Community Life Engagement Day Habilitation (1:1 Beneficiary ratio)	T2021	TT		\$4.75	15 minutes	6720 shared for all T2021 codes
14	Community Life Engagement Day Habilitation (1:2-4 Beneficiary ratio)	T2021	UQ		\$4.00	15 minutes	6720 shared for all T2021 codes
14	Day Habilitation Onsite (1:5-8 Beneficiary ratio)	T2021	NO-MOD		\$2.48	15 minutes	6720 shared for all T2021 codes
14	Virtual Delivery of Day Habilitation (1:5-8 Beneficiary ratio)	T2021	GT		\$2.98	15 minutes	6720 shared for all T2021 codes
14	Community Life Engagement Development (1:1 Beneficiary ratio)	T2025	U1		\$7.00	15 minutes	240 shared among all T2025 codes
14	Community Life Engagement Development (1:2 Beneficiary ratio)	T2025	UN		\$4.00	15 minutes	240 shared among all T2025 codes
14	Community Life Engagement Development (1:3 Beneficiary ratio)	T2025	UP		\$3.00	15 minutes	240 shared among all T2025 codes
13	Community Career Planning (1:1 Beneficiary ratio)	H2014	TT		\$5.00	15 minutes	6720 shared for all H2014 codes
13	Community Career Planning (1:2-4 Beneficiary ratio)	H2014	UQ		\$4.50	15 minutes	6720 shared for all H2014 codes
13	Prevocational Services Onsite (1:5-8 Beneficiary ratio)	H2014	NO-MOD		\$2.39	15 minutes	6720 shared for all H2014 codes
13	Virtual Delivery of Prevocational Services	H2014	GT		\$2.98	15 minutes	6720 shared for all H2014 codes

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PROVIDER TYPE	SERVICE DESCRIPTION	PROCEDURE CODE	MODIFIER	SECOND MODIFIER	RATE	STANDARD UNIT-OF SERVICE	ANNUAL SERVICE LIMITS
	(1:5-8 Beneficiary ratio)						
98, 14, 13	Transportation for Supported Employment, Day Habilitation, and Prevocational on the day of delivery of service	T2002			\$20.00	Per Diem	
83	Center-Based Respite	T1005	HQ		\$4.63	15 minutes	428
82	In-Home Respite	S5125	NO-MOD		\$4.63		
13, 14, 82, 98	Habilitation (1:1 Beneficiary ratio)	T2019	NO-MOD		\$4.63	15 minutes	285
16	Personal Emergency Response System (PERS) Installation	S5160	NO-MOD		\$30.00	One-Time	1 in current residence and 1 each time beneficiary moves to new residence
16	Personal Emergency Response System (PERS) Monthly Maintenance	S5161	NO-MOD		\$28.00	Monthly	12
45	Support Coordination	T2023	NO-MOD		\$ 201.50	Monthly	12
AW	Permanent Supportive Housing Stabilization	G9012	NO-MOD		\$15.11	15 minutes	93
AW	Permanent Supportive Housing Stabilization Transition	G9012	U8		\$15.11	15 minutes	72
17	Adult size brief/diaper—S	T4521			\$0.50	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult size brief/diaper—M	T4522			\$0.60	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older

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PROVIDER TYPE	SERVICE DESCRIPTION	PROCEDURE CODE	MODIFIER	SECOND MODIFIER	RATE	STANDARD UNIT OF SERVICE	ANNUAL SERVICE LIMITS
17	Adult size brief/diaper — L	T4523			\$0.87	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult size brief/diaper — XL	T4524			\$0.87	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult size pull-on — S	T4525			\$0.85	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult size pull-on — M	T4526			\$0.85	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult size pull-on — L	T4527			\$0.94	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult size pull-on — XL	T4528			\$1.17	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Disposable liner/shield/pad	T4535			\$0.46	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Large disposable underpad	T4541			\$0.46	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Small disposable underpad	T4542			\$0.46	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older

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PROVIDER TYPE	SERVICE DESCRIPTION	PROCEDURE CODE	MODIFIER	SECOND MODIFIER	RATE	STANDARD UNIT-OF SERVICE	ANNUAL SERVICE LIMITS
17	Adult disposable brief/ diaper-abv-XL	T4543			\$2.49	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Adult disposable und/pull on abv-XL	T4544			\$2.49	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Incontinence disposable penile wrap	T4545			\$1.25	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Reusable pull-on any-size	T4536			\$0.76	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Reusable underpad bed-size	T4537			\$8.73	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Reusable diaper/brief any-size	T4539			\$2.49	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older
17	Reusable underpad -chair size	T4540			\$10.00	Per item	\$2,500 Total budget for all incontinence supplies per POC for those 21 and older