DEVELOPMENTAL DISABILITIES WAIVER FEE SCHEDULE

| Procedure Description | Procedure Code | Mod 1 | Mod 2 | Mod 3 | Unit | Unit Price |
|--|-------------------|----------|----------|----------|--------|------------|
| Assistive Technology Purchasing Agent | | | | | | |
| Assistive Technology Purchasing Agent | T2028 | НВ | | | Each | \$1.00 |
| Behavioral Support Consultation | | | | | | |
| Behavioral Support Consultation, Standard | H2019 | НВ | | | 15 Min | \$24.39 |
| Behavioral Support Consultation, Incentive | H2019 | НВ | TN | | 15 Min | \$31.46 |
| Case Management | | | | | | |
| Case Management On-Going | T2022 | HB | | | Month | \$314.35 |
| Pre-eligibility Code (billable for maximum 3 months) | T2024 | | | | Month | \$52.31 |
| Community Integrated Employment Services | , | | | | | |
| Community Integrated Employment, Job Maintenance | T2025 | HB | UA | | Month | \$951.66 |
| Community Integrated Employment, Group, Category 1 | T2019 | HB | HQ | | 15 Min | \$2.22 |
| Community Integrated Employment, Group, Category 2 Extensive Support | T2019 | НВ | HQ | TG | 15 Min | \$3.69 |
| Community Integrated Employment, Self-Employment | T2019 | HB | UA | | 15 Min | \$15.30 |
| Community Integrated Employment, Job Aide | 99509 | HB | | | Hour | \$18.03 |
| Community Integrated Employment, Intensive | T2013 | HB | U2 | | Hour | \$56.42 |
| Customized Community Supports | | | I | | | |
| Customized Community Support, Individual | H2021 | HB | U1 | | 15 min | \$8.86 |
| Customized Community Support, Individual Intensive Behavioral Support | H2021 | HB | TG | | 15 Min | \$8.20 |
| Customized Community Supports, Group, Jackson Class Only | T2021 | HB | U5 | | 15 Min | \$5.97 |
| Customized Community Support, Group, Category 1 | T2021 | HB | U7 | | 15 Min | \$2.68 |
| Customized Community Support, Group, Category 2 Extensive Support | T2021 | НВ | U8 | | 15 Min | \$5.21 |
| Customized Community Support, Small Group | T2021 | HB | U9 | | 15 Min | \$5.73 |
| Community Inclusion Aide | 99509 | HB | UC | | Hour | \$18.03 |
| Fiscal Management of Adult Education Opportunities | T2025 | HB | | | Each | \$1.00 |

Effective July 1, 2022

Customized In-Home Supports

| Customized In-Home Supports, Living with Family or Natural Supports | S5125 | HB | | 15 Min | \$7.99 |
|---|-------|----|----|--------|-------------------------|
| Customized In-Home Supports, Living Independently | S5125 | HB | UA | 15 Min | \$7.99 |
| Crisis Supports | | | | | |
| Crisis Support (Alternative Residential Setting) | T2034 | HB | | Day | \$465.49 |
| Crisis Support (Individual's Residence) | T2011 | HB | | 15 Min | \$9.70 |
| Environmental Modification Service | | | | | |
| Environmental Modifications | S5165 | НВ | | Each | \$5000 every 5 years |

Independent Living Transition Service

| | Independent Living Transition | T2038 | HB | | | Each | \$1.00 |
|--|-------------------------------|-------|----|--|--|------|--------|
|--|-------------------------------|-------|----|--|--|------|--------|

Living Supports

| Family Living | T2033 | HB | | Day | \$152.96 |
|---|-------|----|----|-----|----------|
| Family Living, Jackson Class Only | T2033 | HB | U7 | Day | \$164.00 |
| Supported Living, Category 1 Basic Support | T2016 | HB | U4 | Day | \$210.35 |
| Supported Living, Category 2 Moderate Support | T2016 | HB | U5 | Day | \$258.69 |
| Supported Living, Category 3 Extensive Support | T2016 | HB | U6 | Day | \$339.09 |
| Supported Living Category 4 Extraordinary Medical/ Behavioral Support | T2016 | HB | U7 | Day | \$435.81 |
| Supported Living, Non-Ambulatory Stipend | H2022 | HB | TG | Day | \$61.93 |
| Intensive Medical Living Services | T2033 | HB | TG | Day | \$468.00 |

Non-Medical Transportation

| Non-Medical Transportation Per Mile | A0160 | HB | | Per Mile | \$0.44 |
|--|-------|----|--|----------|--------|
| Non-Medical Transportation Pass/Ticket | A0170 | НВ | | ltem | \$1.00 |

Nutritional Counseling

| Nutritional Counseling S9470 HB 15 Min \$21.10 |
|--|
|--|

Personal Support Technology/ On-Site Support

| Personal Support Technology, Installation | A9270 | НВ | | Each | \$1.00 |
|--|-------|----|----|------|--------|
| Personal Support Technology, Monthly Maintenance | A9270 | НВ | RR | Day | \$5.48 |

Preliminary Risk Screening and Consultation Related to Inappropriate Sexual Behavior

| Preliminary Risk Screening and Consultation for Inappropriate Sexual Behavior, Standard | T1023 | НВ | UA | | 15 Min | \$26.94 |
|--|-------|----|----|----|--------|---------|
| Preliminary Risk Screening and Consultation for Inappropriate Sexual Behavior, Incentive | T1023 | НВ | UA | TN | 15 Min | \$34.51 |

Adult Nursing

| Adult Nursing Services, RN | T1002 | НВ | | 15 Min | \$24.36 |
|-----------------------------|-------|----|--|--------|---------|
| Adult Nursing Services, LPN | T1003 | HB | | 15 Min | \$16.59 |

Respite

| Respite | T1005 | НВ | | 15 Min | \$4.82 |
|-----------------|-------|----|----|--------|--------|
| Respite - Group | T1005 | HB | HQ | 15 Min | \$3.28 |

Socialization and Sexuality Education

Speech, Language Pathology, Incentive

| Socialization and Sexuality Education, Standard | S9446 | HB | | Each | \$354.00 |
|--|-------|----|----|------|----------|
| Socialization and Sexuality Education, Incentive | S9446 | HB | TN | Each | \$708.00 |

| Supplemental Dental Care | | | | | |
|--------------------------|-------|----|--|-----------|----------|
| Supplemental Dental Care | T1015 | HB | | Per Visit | \$116.28 |
| | | | | | |

| Therapy Services | | | | | |
|---|-------|----|----|--------|---------|
| Occupational Therapy, Standard | G0152 | НВ | GO | 15 Min | \$34.93 |
| Occupational Therapy, Incentive | G0152 | НВ | TN | 15 Min | \$44.54 |
| | | | | | |
| Occupational Therapy Assistant, Standard | G0158 | НВ | HM | 15 Min | \$23.78 |
| Occupational Therapy Assistant, Incentive | G0158 | HB | TN | 15 Min | \$31.20 |
| | | | | | |
| Physical Therapy, Standard | G0151 | НВ | GP | 15 Min | \$34.93 |
| Physical Therapy, Incentive | G0151 | HB | TN | 15 Min | \$44.54 |
| | | | | | |
| Physical Therapy Assistant (PTA), Standard | G0157 | НВ | HM | 15 Min | \$23.78 |
| Physical Therapy Assistant (PTA), Incentive | G0157 | НВ | TN | 15 Min | \$31.20 |
| | | | | | |
| Speech, Language Pathology, Standard | G0153 | НВ | GN | 15 Min | \$34.93 |
| | | | | | |

G0153

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15 Min

\$44.54