ID/DD Waiver Procedure Code Fee Schedule
Effective July 1, 2018
Modifier U3 Must Be Added To Every Procedure Code

Service	Procedure Code	Second Modifier	Third Modifier	Rates	Max. Allowable Units	Provider Type	Place of Service
Support Coordination	T2022	None	None	$203.87/month	1 per month	W08	12
Supervised Living 4 beds or fewer, low support (Level 1 & 2) 4 beds or fewer, medium support (Level 3) 4 or fewer, high support (Level 4 & 5) 5 or more beds, low support (Level 1 & 2) 5 or more beds, medium support (Level 3) 5 or more beds, high support (Level 4 & 5) Medical Supervised Living Behavioral Supervised Living	S5136 S5136 S5136 S5136 S5136 S5136 S5136 S5136	UQ UQ UQ UR UR UR TF TG	None TF TG None TF TG None None	$184.89/day $203.17/day $239.73/day $168.53/day $178.99/day $199.87/day $302.23/day $465.98/day	345 days per certification year	W07 W08	12
Supported Living Intermittent Intermittent, 2 person Intermittent, 3 person	S5135 S5135 S5135	None UN UP	None None None	$6.34/15 min. unit $3.97/15 min. unit $3.17/15 min. unit	32 units (8 hours) per 24 hour period	W06 W07 W08	12 99
Shared Supported Living Low Support (Level 1 & 2) Medium Support (Level 3) High Support (Level 4 & 5)	H0043 H0043 H0043	None TF TG	None None None	$116.66/day $147.27/day $190.22/day	345 days per certification year	W06 W07 W08	12 99
Host Home	T2016	None	None	$95.38/day	345 days per certification year	W03 W08	12
Home and Community Supports Home and Community Supports-1 Person Home and Community Supports-2 Person Home and Community Supports-3 Person	S5125 S5125 S5125	TF UN UP	None TF TF	$6.18/15 min. unit $3.87/15 min. unit $3.09/15 min. unit	None None None	W06 W07 W08	12 99
Respite-In Home Nursing	T1005	None	None	$8.93/15 min. unit	None	W03 W08	12
Respite-In Home Respite-In Home-1 Person Respite-In Home-2 Person Respite-In-Home-3 Person	T1019 T1019 T1019	TF UN UP	None TF TF	$5.33/15 min. unit $3.33/15 min. unit $2.66/15 min. unit	None None None	W03 W06 W07 W08	12
Community Respite	S5150	None	None	$2.63/15 min. unit	None	W02 W03 W08	12
Day Services Adult Low Support (Level 1&2) Medium Support (Level 3) High Support (Level 4&5)	S5100 S5100 S5100	None TF TG	None None None	$3.78/15 min. unit $4.10/15 min. unit $4.66/15 min. unit	138 hours per month	W07 W08	99
Pre-Vocational Low Support (Level 1&2) Medium Support (Level 3) High Support (Level 4&5)	T2015 T2015 T2015	None TF TG	None None None	$12.48/hr. $13.28/hr. $14.64/hr.	138 hours per month	W07 W08	99
Job Discovery	97537	None	None	$11.16/15 min. unit	120 units (30 hours) in a 3 month period	W07 W08	99

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Supported Employment Job Development	H2023	None	None	$8.80/15 min. unit	360 units (90 hours) per certification year	W07 W08	99
Supported Employment Job Maintenance Job Maintenance - 2 Person Job Maintenance - 3 Person	H2025 H2025 H2025	None UN UP	None None None	$8.35/15 min. unit $5.22/15 min. unit $4.17/15 min. unit	None None None	W07 W08	99 99
Crisis Intervention Daily Intermittent	T2034 H2011	None None	None None	$525.41/day $6.92/15 min. unit	1 per day 168 hours per certification year	W08	12 99
Crisis Support-ICF/IID	H0045	None	None	$279.83/day	30 days per stay	G02 G07	54
Behavior Support Evaluation Evaluation <6 hours Evaluation >6 hours Behavior Support Specialist Behavior Support Consultant	H0002 H0002 H2019 H2019	None TF HN HO	None None None None	$310.64/evaluation $621.27/evaluation $12.70/15 min. unit $18.14/15 min. unit	6 hours None None None	W08	12 99
Transition Assistance	T2038	None	None	$800.00	Per Lifetime	W08	12 99
Occupational Therapy Prior Authorization Required	G0152	None	None	$19.17/15 min. unit	8 units (2 hours) per week	T00	12 99
Physical Therapy Prior Authorization Required	G0151	None	None	$17.83/15 min. unit	12 units (3 hours) per week	T01	12 99
Speech Therapy Prior Authorization Required	G0153	None	None	$16.85/15 min. unit	12 units (3 hours) per week	T01	12 99
Specialized Medical Supplies Blue Pads Diapers - Small Diapers - Medium Diapers – large Diapers – extra large Intermittent straight tip urinary catheter Intermittent curved tip urinary catheter Intermittent urinary catheter with insertion supplies Insertion Tray without catheter or drainage bag Lube Sterile packet Foley 2-way Indwelling Cath -Special Indwelling Foley Silicone Indwelling Foley 3 way Insertion tray with drainage bag without catheter Bedside drainage bag Urinary leg or abdominal bag	 A4554 T4521 T4522 T4523 T4524 A4351 A4352 A4353 A4310 A4332 A4338 A4340 A4344 A4346 A4354 A4357 A4358	 SC SC SC SC SC SC SC SC SC SC SC SC SC SC SC SC	None	 $.43 per unit $.60 per unit $.70 per unit $.95 per unit $.95 per unit $1.51 per unit $5.78 per unit $6.30 per unit $5.91 per unit $.10 per unit $11.04 per unit $24.30 per unit $13.18 per unit $15.62 per unit $10.62 per unit $7.43 per unit $5.38 per unit	None	I00 I01 I02 I03 I04 I05	None