

## Personal Care / Home and Community Based Services Aged & Disabled Waiver Service Codes – Idaho Medicaid

Procedure Code	Mod1	Mod2	Description		Allowed Amt.			
Supervisory RN Codes								
G9002			RN Care Plan Development and Placement (Initial-8 units,		\$7.65/unit			
			Annual-4 units)					
T1001			Nursing Assessment/Evaluation (Agency) \$39.24/v					
Nursing Service Codes								
T1002			Nursing Services RN (RN services up to 15 min)		\$7.65/15 min			
T1003			Nursing Services LPN (LPN/LVN services up to 15 min)		\$5.20/15 min			
Interpretive Service Codes								
T1013			Oral Interpretation Service (1 unit = 15 min)		\$3.04/15 min			
T1013	CG		Sign Language Interpretation Service (1 unit = 15 min)		\$12.50/15 min			
Supervisory QMRP Codes								
G9001			Coordinated Care Fee – Initial (Agency)		\$95.90/visit			
H2020	Therapeutic Behavioral Services (Agency)				\$31.97/day			
Personal Assistance Service Provider Codes								
Agency Providers:								
T1019			Personal Care Services		\$3.89/15 min			
T1019			PCS Family Alternate Care Home (UM Required)		\$3.34/15 min			
Home and Community Based Services								
S5125			Attendant Care Services		\$3.89/15 min			
S5130			Homemaker Services		\$3.30/15 min			
T1001			Nursing Assessment/Evaluation (Agency)	essment/Evaluation (Agency) \$3				
S5140			Adult Residential Care (Services provided in a Residential	Part	icipant			
			Care or Assisted Living Facility or Certified Family		_			
			Home)					
S5100			Adult Day Care	\$6.00/hr				
				(1.50	0/15min)			
E1399			Assistive Technology	As authorized				
S5120			Chore Services		.56/hr			
					4/15min)			
S5115			Consultation \$30.60/hr					
					5/15min)			
S5135			Home Companion \$11.24/hr					
					1/15min)			
S5170			Home Delivered Meals	\$5.23/meal				
S5165			Home Modification	As authorized				
S5160			PERS Install/1 <sup>st</sup> month rent	\$56.89/1 time only				
S5161			PERS Rent/monthly	\$33.83/mo				

## Last updated 01/01/2011

T1005		Respite	\$10.56/hr
			(2.64/15min)
G9002		TBI Assessment	\$11.04/unit
H2015		Individual Supportive living	\$3.24/15 min
H2015	HQ	Group Supportive living	\$1.91/15 min
H2016		Daily Supported living Intense support	\$268.36/day
H2022		Daily Supported living High support	\$225.32/day
H2023		Supported Employment	\$21.00/hr
			(\$5.25/15min)
T2021		Day Rehab	\$4.53/15min

If you have any questions regarding these rates please contact Lourie Neal, Idaho Medicaid Office of Reimbursement, at (208) 287-1162.