## **NEW OPPORTUNITIES WAIVER SERVICES**

## SERVICE PROCEDURE CODES/RATES 07/01/12

Provider Type	Proc. Code	Modifier	Waiver Service Description	HIPAA Service Description	Units/Limits
45	Z0637		Case Management (not a waiver service)		Monthly
45	Z0177		Case Management (not a waiver service)		Monthly
83	T1005	HQ	Center-Based Respite	Respite Care	15 minutes \$3.19/NTE 2,880 ¼ hour units per CPOC year (exceptions granted)
01 or 82	S5125	U1	Individual & Family Support - Day	Attendant Care Services	15 minutes \$3.61
01 or 82	S5125	U1 AND UN	IFS Shared Support, 2 persons – Day	Attendant Care Services	15 minutes \$2.72
01 or 82	S5125	U1 AND UP	IFS Shared Support, 3 persons - Day	Attendant Care Services	15 minutes \$2.36
01 or 82	S5125	UJ	Individual & Family Support (IFS) - Night	Attendant Care Services	15 minutes \$2.17
01 or 82	S5125	UN AND UJ	IFS Shared Support, 2 persons - Night	Attendant Care Services	15 minutes \$1.52
01 or 82	S5125	UP AND UJ	IFS Shared Support, 3 persons - Night	Attendant Care Services	15 minutes \$1.29
89	S5136		Supervised Independent Living (SIL)	Companion Care	Day \$16.93
82 or 89	T2025		Community Integration & Development	Waiver Services	15 minutes \$3.31/NTE 240 ¼ hour per CPOC year in combination with T202 and T2025 UP
82 or 89	T2025	UN	Community Integration & Development, 2 persons	Waiver Services	15 minutes \$1.89/NTE 240 ¼ hour units per CPOC year in combination with T2025 and T2025 UP
82 or 89	T2025	UP	Community Integration & Development, 3 persons	Waiver Services	15 minutes \$1.42/NTE 240 ¼ hour units per CPOC year in combination with T2025 and T2025 UN
84	S5140		Substitute Family Care (SFC)	Foster Care, Adult	Day \$18.91
14	T2021		Day Habilitation	Day Habilitation	15 minutes \$1.66/Minimum of 16 ¼ hour units NTE maximum of 32 ¼ hour units per day and 8,320 ¼ hour units per CPOC year.

Provider Type	Proc. Code	Modifier	Waiver Service Description	HIPAA Service Description	Units/Limits
14	T2003	HB, U6	Day Habilitation Non- Emergency Transportation	Non-Emergency Transportation	Day (one-way) \$5.67/NTE 2 one- way trips per day
14	A0130	HB, U6	Day Habilitation Non- Emergency Transportation - wheelchair	Non-Emergency Transportation - wheelchair	Day (one-way) \$9.46/NTE 2 one- way trips per day
44	T1002		RN Services	RN Services	15 minutes \$8.33
44	T1002	UN	RN Services, 2 persons	RN Services, 2 persons	15 minutes \$6.25
44	T1002	UP	RN Services, 3 persons	RN Services, 3 persons	15 minutes \$5.50
44	T1003		LPN/LVN Services	LPN/LVN Services	15 minutes \$7.84
44	T1003	UN	LPN/LVN Services, 2 persons	LPN/LVN Services	15 minutes \$5.88
44	T1003	UP	LPN/LVN Services, 3 persons	LPN/LVN Services	15 minutes \$5.17
44,82,89	H2017	U7	Professional Services - Psychologist	Psychosocial Rehabilitation Services	15 minutes \$29.55/NTE \$2,250 per CPOC year in combination with H2017 AJ and H2017 AE, exceptions granted
44,82,89	H2017	AJ	Professional Services - Social Worker	Psychosocial Rehabilitation Services	15 minutes \$9.19/NTE \$2,250 per CPOC year in combination with H2017 U7 and H2017 AE, exceptions granted
44,82,89	H2017	AE	Nutrition/Dietary Services	Psychosocial Rehabilitation Services	15 minutes \$8.82/NTE \$2,250 per CPOC year in combination with H2017 AJ and H2017 U7, exceptions granted
15	Z0616		Environmental Access. (Ramp)	Environmental Access. (Ramp)	\$7,000.00 per recipient; once the recipient reaches 90% or greater of the cap and the account has been dormant for 3 years, the recipient may access another \$7,000.00
15	Z0617		Environmental Access. (Lift)	Environmental Access. (Lift)	
15	Z0618		Environmental Access. (Bathroom)	Environmental Access. (Bathroom)	
15	Z0620		Environmental Access. (Other)	Environmental Access. (Other)	

Provider Type	Proc. Code	Modifier	Waiver Service Description	HIPAA Service Description	Units/Limits
17	Z0621		Medical Equip. & Supplies (lifts)	Medical Equip. & Supplies (lifts)	\$1,000.00 per recipient; once the recipient reaches 90% or greater of the cap and the account has been dormant for 3 years, the recipient may access another \$1,000
17	Z0622		Medical Equip. & Supplies (switches)	Medical Equip. & Supplies (switches)	
17	Z0623		Medical Equip. & Supplies (controls)	Medical Equip. & Supplies (controls)	
17	Z0624		Medical Equip. & Supplies (other)	Medical Equip. & Supplies (other)	
17	T2029	RP	Medical Equip. & Supplies routine maintenance & repair	- Cappillo (Cilibi)	
13	T2019		Employment Related Training	Habilitation, Supported Employment	15 minutes \$1.66/Minimum of 16 ¼ hour units NTE maximum of 32 ¼ hour units per day and 8,320 ¼ hour units per CPOC year.
98	H2023		Supported Employment  – one on one	Supported Employment	15 minutes \$6.66/Not to Exceed 1,280 ¼ hour units per CPOC year
98	H2026		Supported Employment – follow along	Ongoing Support to Maintain Employment	Day \$49.18/Not to Exceed 24 days per CPOC year
98	H2025	TT	Supported Employment – mobile crew	Ongoing Support to Maintain Employment	15 minutes \$2.01/Not to Exceed 8,320 ¼ hour units per CPOC year
14	T2003	НВ	Supported Employment Non-Emergency Transportation	Non-Emergency Transportation	Day (one-way) \$5.67/NTE 2 one- way trips per day
14	A0130	НВ	Supported Employment Non-Emergency Transportation - wheelchair	Non-Emergency Transportation - wheelchair	Day (one-way) \$9.46/NTE 2 one- way trips per day
02	T2038		One Time Transitional Service	Community Transition, Waiver	Lifetime \$3,000.00
16	S5160		PERS (Install & Test)	PER (Install & Test)	Initial installation \$30.00
16	S5161		PERS (Maintenance)	PER (Maintenance)	Monthly \$27.00

## NTE = Not to Exceed

## **Modifiers**

Certain procedure codes will require a modifier (or modifiers) in order to distinguish services. The following modifiers are applicable to New Opportunities Waiver (NOW) providers:

AE = Licensed Dietician

AJ = Licensed Social Worker

HB = Adult Program, Transportation

HQ = Group Setting

RP = Repair

TD = Registered Nurse (RN)

TE = Licensed Practical Nurse (LPN)

TT = Individual Service Provided to More than One Person

U1 = Day

U6 = Day Habilitation U7 = Psychologist

UJ = Night UN = 2 people UP = 3 people