

HCBS Habilitation and Waiver Upper Rate Limits Effective August 1, 2025

Service	Service	Reimbursement Methodology	Unit of Service	Upper Rate Limit Effective
				August 1, 2025
	HCB:	S Waiver Service Providers	6	
1. Adult Day Care		For AIDS/HIV, brain injury, elderly, and health and disability waivers: Fee Schedule	15-Minute	\$1.64
			Half Day	\$26.37
			Full Day	\$52.51
			Extended Day	\$78.73
		For intellectual disability	15-Minute	\$2.21
		waiver: Fee schedule for the member's acuity tier, determined pursuant to 79.1(30)	Half Day	\$35.14
Adult Day Care in the Home		For AIDS/HIV, brain injury, elderly, intellectual disability waiver, and health and disability waivers: Fee Schedule	15-Minute	\$10.07
2. Emergency Response System	Personal Response	Fee Schedule Initial One- Time	\$45.48	
	System		Ongoing Monthly Fee	\$35.14 \$10.07
	Portable Locator	Fee Schedule	Initial One- Time	58.48
	System		Ongoing Monthly Fee	·
4. Homemakers		Fee Schedule	15-Minute	\$5.84
5. Nursing Care		Fee Schedule	Visit	\$98.87
6. Respite Care	Home Health Agency: Specialized Respite	Fee Schedule	Daily	\$356.93

Aç Inc	ome Health gency: Basic dividual espite	Fee Schedule	15 - Minute	\$3.94
110	СОРПС		Daily	\$356.93
Aç	ome Health gency:	Fee Schedule	15-Minute	3.96
Gı	roup Respite		Daily	\$356.93
Aç	ome Care gency:	Fee Schedule	15-Minute	\$10.15
- I	pecialized espite		Daily	\$356.93
Ag	ome Care gency: Basic	Fee Schedule	15-Minute	\$ 5.41
	dividual espite		Daily	\$356.93
	ome Care gency:	Fee Schedule	15-Minute	\$3.94
Gı	roup Respite		Daily	\$356.93
Ca	onfacility are:	Fee Schedule	15-Minute	\$10.15
- I	pecialized espite		Daily	\$356.93
Ca	onfacility are: Basic	Fee Schedule	15-Minute	\$5.41
	dividual espite		Daily	\$356.93
	onfacility are: Group	Fee Schedule	15-Minute	\$3.95
	espite		Daily	\$356.93
Ho Nu Fa Pr	acility Care: ospital or ursing acility roviding killed Care	Fee Schedule	15-Minute	\$3.94
Nu	acility Care: ursing acility	Fee Schedule	15-Minute	\$3.94
	acility Care:	Fee Schedule	15-Minute	\$3.94
Ca	amps		Daily	\$356.93

	Facility Care: Adult Day Care	Fee Schedule	15-Minute	\$3.94
	Facility Care: Intermediate Care Facility for Persons with an Intellectual Disability	Fee Schedule	15-Minute	\$3.94
	Facility Care: Residential Care Facilities for Persons with an Intellectual Disability	Fee Schedule	15-Minute	\$3.94
	Facility Care: Foster Group Care	Fee Schedule	15-Minute	\$3.94
	Facility Care: Child Care Facilities	Fee Schedule	15-Minute	\$3.94
7. Chore Services		Fee Schedule	15-Minute	\$4.55
8. Home-Delivered Meals		Fee Schedule	15-Minute	\$9.11
9. Home and Vehicle Modification	Elderly Waiver	Fee Schedule	Lifetime Maximum	\$1,192.44
	Intellectual Disability Waiver	Fee Schedule	Lifetime Maximum	\$5,962.19
	Brain Injury, Health and Disability, and Physical Disability Waivers	Fee Schedule	Per Year	\$7,154.64
12. Nutritional Counseling		Fee Schedule	15-Minute	\$9.85
13. Assistive Devices		Fee Schedule	Unit	\$129.93
14. Senior Companion		Fee Schedule	15-Minute	\$2.12
	Agency (Other than an		15-Minute	\$6.02

15. Consumer- Directed Attendant Care	Elderly Waiver Assisted Living Program)	Fee Agreed Upon by Member and Provider	Daily	\$139.18
	Assisted Living Program (for Elderly Waiver only)	Fee Agreed Upon by Member and Provider	15-Minute Daily	\$6.02 \$139.18
	Individual	Fee Agreed Upon by Member and Provider	15-Minute	\$4.03
			Daily	\$93.68
16. Counseling	Individual	Fee Schedule	15-Minute	\$12.87
	Group	Fee Schedule	15-Minute	\$12.86
18. Supported Community Living	Brain Injury Waiver	Retrospectively Limited Prospective Rates	15-Minute	\$11.59
	Intellectual Disability Waiver	Fee Schedule for the Member's Acuity Tier; Retrospectively Limited Prospective Rate for SCL 15-Minute Unit	15-Minute	\$11.59
19. Supported Employment	Individual Supported Employment	Fee Schedule	Month	\$3,692.34
	Long-Term Job Coaching	Fee Schedule	Month	\$3,692.34
	Small-Group Supported Employment (2 to 8 Individuals)	Fee Schedule	Month	\$3,692.34
20. Specialized Medical Equipment		Fee Schedule	Year	\$7,154.64
21. Behavioral Programming		Fee Schedule	15-Minute	\$12.87
22. Family Counseling and Training		Fee Schedule	15-Minute	\$12.86
24. Interim Medical Monitoring and Treatment	Child Development Home or Center	Fee Schedule	15-Minute	\$3.91
	Supported Community	Retrospectively Limited Prospective Rates	15-Minute	\$10.43

		Monthly Caps	Level of Care	New Cap
	Small-Group Supported Employment (2 to 8 Individuals)	Fee Schedule	Month	\$3,692.34
	Long-Term Job Coaching	Fee Schedule	Month	\$3,692.34
Employment	Supported Employment			
5. Supported	Individual	Fee Schedule	Day Month	\$72.90 \$3,692.34
3. Day Habilitation		See 79.1(24)"d"	15-Minute	\$3.75
	Home- and Cor	 nmunity-Based Habilitatio	on Services	
37. Medical Day Care for Children		Fee Schedule	15 min units	\$10.07
Remote Support	Enabling Technology Assessment	Fee Schedule	Per Assessment	\$442.43
36. Enabling Technology for Pemote Support	Enabling Technology	Fee Schedule	Per Job	\$442.43
35. Assisted living On- Call		Fee Agreed Upon by Member and Provider	Daily	\$29.31
31. Independent Support Broker		Rate Negotiated by Member	Hour	\$18.06
30. Financial Management Services		Fee Schedule	Per Member Per Month	\$77.51
29. In-Home Family Therapy		Fee Schedule	15-Minute	\$27.92
28. Family and Community Support Services		Retrospectively Limited Prospective Rates	15-Minute	\$10.43
27. Environmental Modifications and Adaptive Devices		Fee Schedule	Year	\$7,154.64
26. Day Habilitation	Flovidei	Fee Schedule for the Member's Acuity Tier	15-Minute	\$3.97
	Living Provider			

Health and Disability	SNF	\$3,166.53
Waiver - 83.2(2)"b"	NF	\$1,087.96
	ICFID	\$4,244.04
ADIS/HIV - 83.42(2)"b"	Hospital	\$2,128.08
Physical Disability Waiver - 83.102(2)"b"	NF	\$793.20
CMHW - 83.122(6)"b"	Hospital	\$2,274.96
ID Waiver Respite - 78.41(2)"i"		\$8,316.60
BI Daily Waiver Max Rate Calculation with 4.1% increase		\$8,316.60 New Rate Limit 15.827% \$487.81
	79.1(2)	15.827%
	ICF/ID Max Payment Rate (Compilation Report)	\$487.81
	Calculated Max Rate	\$565.02