



HCBS Habilitation and Waiver Upper Rate Limits

Effective July 1, 2024

Service	Service	Reimbursement Methodology	Unit of Service	New Upper Limit July 1, 2024
HCBS Waiver Service Providers				
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 waiver: Fee schedule for the member's acuity tier, determined pursuant to 79.1(30)	15-Minute	\$2.21
			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 System	Fee Schedule	Initial One-Time	\$58.48
			Ongoing Monthly Fee	\$45.48
	Portable Locator System		Initial One-Time	\$58.48
			Ongoing Monthly Fee	\$45.48
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	\$354.10
	Home Health Agency: Basic	Fee Schedule	Daily	\$354.10

	Individual Respite			
	Home Health Agency: Group Respite	Fee Schedule	15-Minute	\$3.91
			Daily	\$354.10
	Home Care Agency: Specialized Respite	Fee Schedule	15-Minute	\$10.07
			Daily	\$354.10
	Home Care Agency: Basic Individual Respite	Fee Schedule	15-Minute	\$5.37
			Daily	\$354.10
	Home Care Agency: Group Respite	Fee Schedule	15-Minute	\$3.91
			Daily	\$354.10
	Nonfacility Care: Specialized Respite	Fee Schedule	15-Minute	\$10.07
			Daily	\$354.10
	Nonfacility Care: Basic Individual Respite	Fee Schedule	15-Minute	\$5.37
			Daily	\$354.10
	Nonfacility Care: Group Respite	Fee Schedule	15-Minute	\$3.91
			Daily	\$354.10
	Facility Care: Hospital or Nursing Facility Providing Skilled Care	Fee Schedule	15-Minute	\$3.91
	Facility Care: Nursing Facility	Fee Schedule	15-Minute	\$3.91
	Facility Care: Camps	Fee Schedule	15-Minute	\$3.91
			Daily	\$354.10

	Facility Care: Adult Day Care	Fee Schedule	15-Minute	\$3.91
	Facility Care: Intermediate Care Facility for Persons with an Intellectual Disability	Fee Schedule	15-Minute	\$3.91
	Facility Care: Residential Care Facilities for Persons with an Intellectual Disability	Fee Schedule	15-Minute	\$3.91
	Facility Care: Foster Group Care	Fee Schedule	15-Minute	\$3.91
	Facility Care: Child Care Facilities	Fee Schedule	15-Minute	\$3.91
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

15. Consumer-Directed Attendant Care	Agency (Other than an Elderly Waiver Assisted Living Program)	Fee Agreed Upon by Member and Provider	15-Minute	\$6.02
			Daily	\$139.18
	Assisted Living Program (for Elderly Waiver only)	Fee Agreed Upon by Member and Provider	15-Minute	\$6.02
			Daily	\$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	\$10.92
	Intellectual Disability Waiver	Fee Schedule for the Member's Acuity Tier; Retrospectively Limited Prospective Rate for SCL 15-Minute Unit	15-Minute	\$10.92
19. Supported Employment	Individual Supported Employment	Fee Schedule	Month	\$3,437.93
	Long-Term Job Coaching	Fee Schedule	Month	\$3,437.93
	Small-Group Supported Employment (2 to 8 Individuals)	Fee Schedule	Month	\$3,437.93
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 Living Provider	Retrospectively Limited Prospective Rates	15-Minute	\$10.43
26. Day Habilitation		Fee Schedule for the Member's Acuity Tier	15-Minute	\$3.93
27. Environmental Modifications and Adaptive Devices		Fee Schedule	Year	\$7,154.64
28. Family and Community Support Services		Retrospectively Limited Prospective Rates	15-Minute	\$10.43
29. In-Home Family Therapy		Fee Schedule	15-Minute	\$27.92
30. Financial Management Services		Fee Schedule	Per Member Per Month	\$77.51
31. Independent Support Broker		Rate Negotiated by Member	Hour	\$18.06
35. Assisted living On-Call		Fee Agreed Upon by Member and Provider	Daily	\$29.31
36. Enabling Technology for Remote Support	Enabling Technology	Fee Schedule	Per Job	\$442.43
	Enabling Technology Assessment	Fee Schedule	Per Assessment	\$442.43
37. Medical Day Care for Children		Fee Schedule	15 min units	\$10.07
Home- and Community-Based Habilitation Services				
3. Day Habilitation		See 79.1(24)"d"	15-Minute	\$3.72
			Day	\$72.25

5. Supported Employment	Individual Supported Employment	Fee Schedule	Month	\$3,437.93
	Long-Term Job Coaching	Fee Schedule	Month	\$3,437.93
	Small-Group Supported Employment (2 to 8 Individuals)	Fee Schedule	Month	\$3,437.93
		Monthly Caps	Level of Care	New Cap
		Health and Disability Waiver - 83.2(2)"b"	SNF	\$3,138.29
			NF	\$1,078.26
			ICFID	\$4,206.18
		ADIS/HIV - 83.42(2)"b"	Hospital	\$2,109.10
		Physical Disability Waiver - 83.102(2)"b"	NF	\$793.20
		CMHW - 83.122(6)"b"	Hospital	\$2,254.67
		ID Waiver Respite - 78.41(2)"i"		\$8,242.42
		BI Daily Waiver Max Rate Calculation with 4.1% increase		New Rate Limit
			79.1(2)	15.827%
			ICF/ID Max Payment Rate (Compilation Report)	\$ 457.31
			Calculated Max Rate	\$ 529.69