

Iowa Medicaid HCBS Habilitation Individual Placement and Support (IPS) Supported Employment (SE) Funding Methodology

Outcome	Outcome Description	Service Code	Units authorized	Unit Rate	Total Outcome Reimbursement	Supporting Documentation May Include:
Outcome #1	Completed Employment Plan	T2018 U3	1	\$1,570.42	\$1,570.42	<ul style="list-style-type: none"> • PCSP • Employment Plan
Outcome #2	1 st Day Successful Placement	T2018 U4	1	\$2,394.53	\$2,394.53	<ul style="list-style-type: none"> • PCSP • Service Documentation
Outcome #3	45 Days Successful Job Retention	T2018 U5	1	\$2,394.53	\$2,394.53	<ul style="list-style-type: none"> • PCSP • Service Documentation
Outcome #4	90 Days Successful Job Retention	T2018 U6	1	\$871.58	\$871.58	<ul style="list-style-type: none"> • PCSP • Service Documentation

Note: All units are authorized up front for the IPS Model in the member's (job seeker) person centered service plan to facilitate payment for each outcome as it is achieved. A Fee-For-Service (FFS) service plan authorization example would be as follows:

Service	Begin Date	End Date	Provider Number/ Name	Monthly Total 1 st Month	Monthly Total Ongoing	Units	Rate
T2018:U3 Supported Employment IPS Employment Plan	02/01/2026	03/31/2026	Provider Name/Number	\$1,570.42	\$0.00	1	\$1,570.42
T2018:U4 Supported Employment IPS 1 st Day on the Job	04/01/2026	04/30/2026	Provider Name/Number	\$2,394.53	\$0.00	1	\$2,394.53
T2018:U5 Supported Employment IPS 45 days Successful Employment	05/01/2026	05/31/2026	Provider Name/Number	\$2,394.53	\$0.00	1	\$2,394.53
T2018:U5 Supported Employment IPS 90 Days Successful Employment	07/01/2026	07/31/2026	Provider Name/Number	\$871.58	\$0.00	1	\$871.58

- This example assumes the member's first day on the job will occur during April 2026.