Iowa Medicaid
Iowa HHS

Home and Community Based Services (HCBS)
Consumer Choices Option (CCO)
Uniform Fee Schedule
Effective January 1, 2027

Waiver	Service Title and Unit of Service	Procedure Code/Modifier	Cap Amount	Budget Amount	Rate Effective Date
AIDSHIV, BI, EW, HD, ID	Adult Day Care **in the Home** 15-minute unit	S5100UA	$9.80	$8.91	1/1/2027
AIDSHIV, BI, EW, HD, ID, PD	Attendant Care (Self-Directed Personal Care), **Unskilled** 15-minute unit	T1019	$4.03	$4.03	1/1/2027
AIDSHIV, BI, EW, HD, ID, PD	Attendant Care (Agency) **Unskilled** 15-minute unit	S5125	$6.69	$4.35	1/1/2027
AIDSHIV, BI, EW, HD, ID, PD	Attendant Care (Self-Directed Personal Care), **Skilled** 15-minute unit	T1019 U3	$4.03	$4.03	1/1/2027
EW	Companion Care 15-minute unit	S5135	$3.63	$2.18	1/1/2027
ID	Day Habilitation; per day (4.25 to 8 hours)	T2020	$80.42	$60.31	1/1/2027
ID	Day Habilitation; 15-minute unit	T2021	$4.87	$2.92	1/1/2027
AIDHIV, EW, HD	Home-delivered morning meals, per meal	S5170 UF	$9.08	$7.44	1/1/2027
AIDHIV, EW, HD	Home-delivered liquid supplement meal; two cans per meal	S5170 UJ	$9.08	$5.45	1/1/2027
AIDHIV, EW, HD	Home-delivered noon meals, per meal	S5170 UG	$9.08	$7.19	1/1/2027
AIDHIV, EW, HD	Home-delivered evening meals, per meal	S5170 UH	$9.08	$7.53	1/1/2027

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BI, EW, HD, PD, ID	Home and vehicle modification, **Home Modification,** per occurrence	S5165	Annual/ Lifetime limits noted below	Annual/ Lifetime limits noted below	1/1/2027
BI, EW, HD, PD, ID	Home and vehicle modifications, **Vehicle Modification,** per occurrence	T2039	Annual/ Lifetime limits noted below	Annual /Lifetime limits noted below	1/1/2027
AIDSHIV, EW, HD	Home Maintenance Support 15-minute unit	S5130	$6.55	$3.93	1/1/2027
BI, HD, ID	Medical Day Care for Children 15-minute unit	T2027	$9.63	$8.91	1/1/2027
AIDSHIV, BI, ID, HD	Individual Supported Employment	T2018 UC	$79.82	$47.41	1/1/2027
AIDSHIV, BI, ID, HD	Prevocational Services, Per hour	T2015	$11.24	$8.72	1/1/2027
AIDSHIV, BI, ID, HD	Prevocational Career Exploration, Per hour	T2015 U3	$42.99	$26.10	1/1/2027
AIDSHIV, BI, EW, HD, ID	Respite-HHA basic individual, 15-minute unit	S5150	$7.95	$6.39	1/1/2027
AIDSHIV, BI, EW, HD, ID	Respite-Home Care Agency & Non-Facility, Basic Individual 15-minute unit	S5150 UC	$6.10	$4.89	1/1/2027
BI, PD	Specialized Medical Equipment, per occurrence	T2029	Annual/ Lifetime limits noted below	Annual/ Lifetime limits noted below	1/1/2027

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BI, ID	Supported Community Living; Daily - 8 or more hours per day;	H2016(BI) H2016HI(ID)	$314.50	$234.79	1/1/2027
BI, ID	Supported Community Living 15-minute unit	H2015(BI) H2015 HI (ID)	$11.59	$6.95	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Small Group) 15-minute unit, Tier 1, Groups of 2 to 4	H2023U3	$3.43	$2.07	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Small Group) 15-minute unit, Tier 2, Groups of 5 to 6	H2023 U5	$2.14	$1.30	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Small Group) 15-minute unit, Tier 3, Groups of 7 to 8	H2023 U7	$1.53	$0.92	1/1/2027
AIDSHIV, BI, ID, HD	Individual Supported Employment	T2018UC	$79.82	$47.41	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Long Term Job Coaching) Tier 2, 2-8 hours/month	H2025 U3	$436.33	$261.80	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment - Individual Long Term Job Coaching- 1 contact/ month	H2025 U4	$81.67	$49.37	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Long Term Job Coaching) Tier 3, 9-16 hours/month	H2025 U5	$871.44	$522.86	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Long Term Job Coaching) Tier 4, 17-25 hours/month	H2025 U7	$1,362.63	$817.58	1/1/2027
AIDSHIV, BI, ID, HD	Supported Employment (Long Term Job Coaching) Tier 5, 26 or more hours/month, hour	H2025 UC	$54.50	$32.70	1/1/2027

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BI, EW, ID, PD	Transportation, Individual, Per mile	S0215	$3.11	$1.86	1/1/2027
BI, EW, ID, PD	Transportation, Individual, Per trip	T2003	$34.42	$20.65	1/1/2027
MFP	Supported Community Living (Daily) 8 or more hours per day;	H2016 HI	$268.29	$234.79	1/1/2027
MFP	Attendant Care Agency, 15-minute unit	S5125	$6.69	$4.35	1/1/2027
MFP	Home and Vehicle Modifications, Per occurrence	S5165	Per Occurrence	Per Occurrence	1/1/2027
MFP	Self-Directed Personal Cares Skilled 15-minute unit	T1019 U3	$4.03	$4.03	1/1/2027
MFP	Self-Directed Personal Care, Unskilled, 15-minute unit	T1019	$4.03	$4.03	1/1/2027
MFP	Day Habilitation, Per day (4.25 to 8 hours)	T2020	$80.42	$60.31	1/1/2027
MFP	Day Habilitation, 15-minute unit	T2021	$4.87	$2.92	1/1/2027
All	Respite Savings	S5150SE	N/A	N/A	1/1/2027
All	Workman's compensation (CCO)	T2025UC	N/A	N/A	1/1/2027
All	Independent Support Broker (ISB) Fee	T2041	N/A	$18.06	1/1/2027
All	Financial Management Service (FMS)	T2040	N/A	$75.24	1/1/2027
All	Background Check Fee *MCO Encounters only	99199 U1	N/A	N/A	1/1/2027
All	Background Check Fee- Admin*MCO Encounters only	99199U2	N/A	N/A	1/1/2027

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Monthly Cap on the Total Cost of Waiver Services	Waiver	Level of Care	Monthly Cap
Monthly Cap on the Total Cost of Waiver Services	ADIS/HIV	Hospital	$2,387.71
Monthly Cap on the Total Cost of Waiver Services	CMH	Hospital	$2,274.96
Monthly Cap on the Total Cost of Waiver Services	HD	NF	$1,220.69
Monthly Cap on the Total Cost of Waiver Services	HD	SNF	$3,552.85
Monthly Capson the Total Cost of Waiver Services	HD	ICF/ID	$4,761.81
Monthly Cap on the Total Cost of Waiver Services	PD	NF	$889.97
Monthly, Annual and Lifetime Limitations on Services	**Waiver**	**Limit Type**	**Limit**
Assistive devices per item Personal Care Item- adaptive device & therapeutic resources	Elderly	Per Item	$129.93
Environmental Modifications and Adaptive Devices	CMH	Annual	$7,154.64
Home and Vehicle Modifications	Elderly	Lifetime	$1,192.44
Home and Vehicle Modifications	BI, HD, PD	Annual	$7,154.64
Home and Vehicle Modifications	ID	Lifetime	$5,962.19
Respite	ID	Annual	$8,316.60
Specialized Medical Equipment	BI, PD	Annual	$7,154.64
Supported Community Living, 15-minute unit per state fiscal year	BI	Annual	11,315 units
	ID	Annual	20,440 units
Supported Employment	AIDS/HIV, BI, ID, HD	Monthly	$3,692.24