

OLTL Home and Community Based Waiver Services Rates

Rates Effective January 1, 2016

Service	Aging	Attendant Care	ACT 150	CC*	IW*	OW*	Procedure Code	Region 1	Region 2	Region 3	Region 4	Unit	Fee Schedule Rate	Vendor
Adult Daily Living	x	N/A	N/A	x	x	x	S5102	\$ 58.39	\$ 58.91	\$ 60.86	\$ 59.80	1 Day	x	
Adult Daily Living Half Day	x	N/A	N/A	x	x	x	S5102 U5	\$ 29.20	\$ 29.45	\$ 30.43	\$ 29.90	1/2 Day	x	
Adult Daily Living Enhanced	x	N/A	N/A	x	x	x	S5102 U4	\$ 75.01	\$ 71.79	\$ 68.42	\$ 75.01	1 Day	x	
Adult Daily Living Enhanced Half Day*****	x	N/A	N/A	x	x	x	S5102 U3	\$ 37.51	\$ 35.90	\$ 34.21	\$ 37.51	1/2 Day	x	
Community Integration	N/A	N/A	N/A	x	x	x	97537	\$ 6.29	\$ 6.50	\$ 6.96	\$ 6.54	15 Minutes	x	
Enrollment	x	N/A	N/A	N/A	N/A	N/A	W0009	\$ 95.00	\$ 95.00	\$ 95.00	\$ 95.00	One Time	x	
Home Health Aide	x	N/A	N/A	N/A	N/A	N/A	T2025	\$ 5.38	\$ 5.38	\$ 5.38	\$ 5.38	15 Minutes	x	
Home Health-Nursing (LPN)	x	N/A	N/A	x	x	x	T1003 SE	\$ 11.02	\$ 11.02	\$ 11.02	\$ 11.02	15 Minutes	x	
Home Health-Nursing (RN)	x	N/A	N/A	x	x	x	T1002 SE	\$ 16.55	\$ 16.55	\$ 16.55	\$ 16.55	15 Minutes	x	
Home Health-Occupational Therapy	x	N/A	N/A	x	x	x	T2025 GO	\$ 21.29	\$ 21.29	\$ 21.29	\$ 21.29	15 Minutes	x	
Home Health-Occupational Therapy-Assist.	x	N/A	N/A	x	x	x	T2025 GO U4	\$ 14.48	\$ 14.48	\$ 14.48	\$ 14.48	15 Minutes	x	
Home Health-Physical Therapy	x	N/A	N/A	x	x	x	T2025 GP	\$ 20.20	\$ 20.20	\$ 20.20	\$ 20.20	15 Minutes	x	
Home Health-Physical Therapy-Assist.	x	N/A	N/A	x	x	x	T2025 GP U4	\$ 11.51	\$ 11.51	\$ 11.51	\$ 11.51	15 Minutes	x	
Home Health-Speech&Language Therapy	x	N/A	N/A	x	x	x	T2025 GN	\$ 21.72	\$ 21.72	\$ 21.72	\$ 21.72	15 Minutes	x	
PAS (Agency)	x	x	x	x	x	x	W1793	\$ 4.38	\$ 4.87	\$ 4.58	\$ 4.88	15 Minutes	x	
PAS (Consumer)	x	x	x	x	x	x	W1792	\$ 3.41	\$ 3.26	\$ 3.57	\$ 4.01	15 Minutes	x	
PAS (Consumer Overtime)	x	x	x	x	x	x	W1792 TU	\$ 5.12	\$ 4.89	\$ 5.36	\$ 6.02	15 Minutes	x	
PAS (CSLA)	N/A	N/A	N/A	N/A	x	x	W1793 TT	\$ 4.46	\$ 4.96	\$ 4.67	\$ 4.97	15 Minutes	x	
Prevocational Services	N/A	N/A	N/A	x	N/A	x	W6107	\$ 6.29	\$ 6.50	\$ 6.96	\$ 6.54	15 Minutes	x	
Residential Habilitation 1-3	N/A	N/A	N/A	x	N/A	x	W0100	\$ 264.15	\$ 264.15	\$ 264.15	\$ 264.15	1 Day	x	
Residential Habilitation 1-3 Supp 1:1	N/A	N/A	N/A	x	N/A	x	W0101 U4	\$ 19.79	\$ 19.79	\$ 19.79	\$ 19.79	1 Hour	x	
Residential Habilitation 1-3 Supp 2:1	N/A	N/A	N/A	x	N/A	x	W0101 U5	\$ 39.58	\$ 39.58	\$ 39.58	\$ 39.58	1 Hour	x	
Residential Habilitation 4-8	N/A	N/A	N/A	x	N/A	x	W0102	\$ 247.67	\$ 247.67	\$ 247.67	\$ 247.67	1 Day	x	
Residential Habilitation 4-8 Supp 1:1	N/A	N/A	N/A	x	N/A	x	W0103 U4	\$ 19.62	\$ 19.62	\$ 19.62	\$ 19.62	1 Hour	x	
Residential Habilitation 4-8 Supp 2:1	N/A	N/A	N/A	x	N/A	x	W0103 U5	\$ 39.23	\$ 39.23	\$ 39.23	\$ 39.23	1 Hour	x	
Respite (Agency)****	x	N/A	N/A	x	x	x	T1005	\$ 4.29	\$ 4.77	\$ 4.49	\$ 4.78	15 Minutes	x	
Respite (Consumer)	x	N/A	N/A	x	x	x	S5150	\$ 3.34	\$ 3.20	\$ 3.50	\$ 3.93	15 Minutes	x	
Respite (Consumer Overtime)	x	N/A	N/A	x	x	x	S5150 TU	\$ 5.01	\$ 4.80	\$ 5.25	\$ 5.90	15 Minutes	x	
Service Coordination	x	x	x	x	x	x	W1011	\$ 18.49	\$ 20.21	\$ 18.78	\$ 21.47	15 Minutes	x	
Structured Day Habilitation Group	N/A	N/A	N/A	x	N/A	x	W0104	\$ 34.56	\$ 34.56	\$ 34.56	\$ 34.56	1 Hour	x	
Structured Day Habilitation 1:1	N/A	N/A	N/A	x	N/A	x	W0105 U4	\$ 19.62	\$ 19.62	\$ 19.62	\$ 19.62	1 Hour	x	
Structured Day Habilitation 2:1	N/A	N/A	N/A	x	N/A	x	W0105 U5	\$ 39.23	\$ 39.23	\$ 39.23	\$ 39.23	1 Hour	x	
Supported Employment	N/A	N/A	N/A	x	x	x	W6106	\$ 40.48	\$ 39.88	\$ 45.25	\$ 40.68	1 Hour	x	
Thera&Couns Svcs (Behavior Therapy)	N/A	N/A	N/A	x	x	x	H2019	\$ 20.79	\$ 20.79	\$ 20.79	\$ 20.79	15 Minutes	x	
Thera&Couns Svcs (Cognitive Rehabilitation)	N/A	N/A	N/A	x	x	x	97532 SE	\$ 14.12	\$ 14.12	\$ 14.12	\$ 14.12	15 Minutes	x	
Thera&Couns Svcs (Counseling Svcs) **	x	N/A	N/A	x	x	x	W0093	\$ 11.83	\$ 11.83	\$ 11.83	\$ 11.83	15 Minutes	x	
Thera&Couns Svcs (Nutritional Counseling)	x	N/A	N/A	x	x	x	S9470 AE U4	\$ 13.77	\$ 13.77	\$ 13.77	\$ 13.77	15 Minutes	x	
Transition Service Coordination	x	x	N/A	x	x	x	W7337	\$ 10.00	\$ 10.00	\$ 10.00	\$ 10.00	15 Minutes	x	
Assistive Technology***	x	N/A	N/A	x	x	x	W0138	N/A	N/A	N/A	N/A	Per Purchase		x
Community Transition Svcs (Health Safety)	x	x	N/A	x	x	x	W7336	N/A	N/A	N/A	N/A	One Time		x
Community Transition Svcs (House Hold Suppl)	x	x	N/A	x	x	x	W7332	N/A	N/A	N/A	N/A	One Time		x
Community Transition Svcs (Moving Expenses)	x	x	N/A	x	x	x	W7333	N/A	N/A	N/A	N/A	One Time		x
Community Transition Svcs (Security Deposit)	x	x	N/A	x	x	x	W7334	N/A	N/A	N/A	N/A	One Time		x
Community Transition Svcs (Set-Up Fees)	x	x	N/A	x	x	x	W7335	N/A	N/A	N/A	N/A	One Time		x
Financial Management Services*****	x	x	x	x	x	x	W7341	-	-	-	-	1 Month		x
Financial Management Services Start Up*****	x	x	x	x	x	x	W7341 U4	-	-	-	-	1 Time		x
Financial Management Services Services My Way*****	x	x	N/A	N/A	N/A	N/A	W7341 U2	-	-	-	-	1 Month		x
Home Adaptations (<\$6,000)***	x	N/A	N/A	x	x	x	W0140	N/A	N/A	N/A	N/A	Per Purchase		x
Home Adaptations (>\$6,000)***	x	N/A	N/A	x	x	x	W0141	N/A	N/A	N/A	N/A	Per Purchase		x
Home Delivered Meals-Emergency Pack	x	N/A	N/A	N/A	N/A	N/A	W1762	N/A	N/A	N/A	N/A	Per Purchase		x
Home Delivered Meals-Frozen Entrée	x	N/A	N/A	N/A	N/A	N/A	W1760	N/A	N/A	N/A	N/A	Per Purchase		x
Home Delivered Meals-Hot Entrée	x	N/A	N/A	N/A	N/A	N/A	W1759	N/A	N/A	N/A	N/A	Per Purchase		x
Home Delivered Meals-Sandwich	x	N/A	N/A	N/A	N/A	N/A	W1761	N/A	N/A	N/A	N/A	Per Purchase		x
Home Delivered Meals-Special Meal	x	N/A	N/A	N/A	N/A	N/A	W1764	N/A	N/A	N/A	N/A	Per Purchase		x
Non-medical Transportation	x	N/A	N/A	x	x	x	W6110	N/A	N/A	N/A	N/A	Per One-Way Trip/Per Item		x
Participant-Directed Community Supports	x	x	N/A	N/A	N/A	N/A	W1900	N/A	N/A	N/A	N/A	Per Purchase		x
Participant-Directed Goods and Services	x	x	N/A	N/A	N/A	N/A	W1901	N/A	N/A	N/A	N/A	Per Purchase		x
Personal Emergency Response System (Installation)	x	x	x	x	x	x	W1894	N/A	N/A	N/A	N/A	Per Purchase		x
Personal Emergency Response System (Monthly Maintenance)	x	x	x	x	x	x	W1895	N/A	N/A	N/A	N/A	Per Purchase		x
Specialized Medical Equipment and Supplies***	x	N/A	N/A	x	x	x	W0137	N/A	N/A	N/A	N/A	Per Purchase		x
Telecare Equipment Installation and Removal	x	N/A	N/A	N/A	N/A	N/A	W2024	\$ 90.00	\$ 90.00	\$ 90.00	\$ 90.00	One Time		x
TeleCare Activity and Sensor Monitoring Ongoing	x	N/A	N/A	N/A	N/A	N/A	W9006	\$ 80.00	\$ 80.00	\$ 80.00	\$ 80.00	Monthly		x
Telecare Equipment Installation and Removal with Training	x	N/A	N/A	N/A	N/A	N/A	W2025	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	One Time		x
Telecare Specialized Supplies DME for Remote Monitoring	x	N/A	N/A	N/A	N/A	N/A	T2029 GT	N/A	N/A	N/A	N/A	Per Purchase		x
Telecare Health Status Measuring and Monitoring Remote	x	N/A	N/A	N/A	N/A	N/A	T2025 GT	\$ 10.00	\$ 10.00	\$ 10.00	\$ 10.00	Per Day		x
Telecare Specialized Supplies for Remote Monitoring	x	N/A	N/A	N/A	N/A	N/A	T2028 GT	N/A	N/A	N/A	N/A	Per Purchase		x
TeleCare Medication Dispensing and Monitoring	x	N/A	N/A	N/A	N/A	N/A	S5185 32	\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00	Monthly		x
Vehicle Modifications***	N/A	N/A	N/A	x	x	x	W0139	N/A	N/A	N/A	N/A	Per Purchase		x

*CC= CommCare IW = Independence OW = OBRA

***Assistive Technology, Home Adaptations, Specialized Medical Equipment and Supplies, and Vehicle Modifications eff Oct 28, 2015

Therapy and Counseling Svcs (Counseling) procedure code change from H0004 to W0093 eff June 1, 2012 **In facility respite will be reimbursed at the nursing facility's case-mix per diem rate.

*****Financial Management Services rate information can be found on OLTL's website

*****Adult Daily Living Enhanced Half Day is effective October 28, 2015

*****PAS (Consumer Overtime) and Respite (Consumer Overtime) effective January 1, 2016