

**Fee Schedule Rates For Consolidated and Community Living Residential Services Effective January 1, 2023**

The modifier HI is used when the individual is not receiving Waiver-funded service during the day.

The modifier SE is used when the Life Sharing Service is being provided by a family member.

Modifier TD is used to identify services rendered by a RN.

Modifier TE is used to identify services rendered by a LPN.

Modifiers U5, U6, U7 and U8 are Needs Group Modifiers.

Modifier U1 is utilized with the appropriate procedure code to allow providers, who are approved by the Department, to receive the Enhanced Communication Services Rate.

All rates in the table are per day unless otherwise noted.

<b>Service Group</b>	<b>Needs Group</b>	<b>Program Capacity or Staffing Level</b>	<b>Procedure Code</b>	<b>Modifier 1</b>	<b>Modifier 2</b>	<b>Statewide Fee</b>	<b>Enhanced Communication Statewide Fee (U1 Modifier)</b>
Licensed Residential Habilitation With Day	Needs Group 1	1 person	W9000	U5	U1	\$408.54	\$483.85
		2 people	W9029	U5	U1	\$408.54	\$483.85
		3 people	W9045	U5	U1	\$294.49	\$348.86
		4 people	W9047	U5	U1	\$232.07	\$273.03
		5-8 people	W9064	U5	U1	\$212.03	\$249.80
	Needs Group 2	1 person	W9000	U6	U1	\$515.01	\$616.78
		2 people	W9029	U6	U1	\$515.01	\$616.78
		3 people	W9045	U6	U1	\$341.21	\$407.36

		4 people	W9047	U6	U1	\$268.22	\$318.28	
		5-8 people	W9064	U6	U1	\$250.71	\$296.52	
	Needs Group 3	1 person	W9000	U7	U1	\$746.22	\$904.71	
		2 people	W9029	U7	U1	\$630.70	\$763.82	
		3 people	W9045	U7	U1	\$440.90	\$533.42	
		4 people	W9047	U7	U1	\$341.91	\$411.61	
		5-8 people	W9064	U7	U1	\$314.42	\$377.36	
	Needs Group 4	1 person	W9000	U8	U1	\$822.23	\$1,001.00	
		2 people	W9029	U8	U1	\$689.49	\$839.39	
		3 people	W9045	U8	U1	\$484.03	\$588.28	
		4 people	W9047	U8	U1	\$376.12	\$454.77	
		5-8 people	W9064	U8	U1	\$338.58	\$409.29	
	Licensed Residential Habilitation Without Day	Needs Group 1	1 person	W9000	U5	HI	\$523.00	\$625.89
			2 people	W9029	U5	HI	\$523.00	\$625.89
			3 people	W9045	U5	HI	\$387.76	\$464.60
4 people			W9047	U5	HI	\$304.14	\$362.46	
5-8 people			W9064	U5	HI	\$267.15	\$318.19	
Needs Group 2		1 person	W9000	U6	HI	\$606.92	\$731.03	
		2 people	W9029	U6	HI	\$606.92	\$731.03	

		3 people	W9045	U6	HI	\$441.87	\$532.49	
		4 people	W9047	U6	HI	\$347.00	\$416.21	
		5-8 people	W9064	U6	HI	\$311.99	\$372.69	
	Needs Group 3	1 person	W9000	U7	HI	\$924.89	\$1,127.34	
		2 people	W9029	U7	HI	\$685.68	\$832.32	
		3 people	W9045	U7	HI	\$514.20	\$624.76	
		4 people	W9047	U7	HI	\$401.47	\$485.81	
		5-8 people	W9064	U7	HI	\$360.24	\$434.44	
	Needs Group 4	1 person	W9000	U8	HI	\$1,118.74	\$1,371.94	
		2 people	W9029	U8	HI	\$820.15	\$1,002.85	
		3 people	W9045	U8	HI	\$624.74	\$764.32	
		4 people	W9047	U8	HI	\$481.66	\$586.80	
		5-8 people	W9064	U8	HI	\$429.04	\$522.45	
	Unlicensed Residential Habilitation	N/A	1 person	W7078	TD and TE	U1	\$132.49	\$148.08
			2 people	W7080	TD and TE	U1	\$83.20	\$95.08
3 people			W7082	TD and TE	U1	\$60.10	\$69.68	
	N/A	First Payment	W0400			\$15,000	N/A	

Transition to Independent Living Payment						(paid when outcome achieved)	
	N/A	Second Payment	W0401			\$15,000 (paid when outcome achieved)	N/A
Life Sharing – Over 30 Hours Per Week On Average	Needs Group 1	1 person	W8593	U5	SE	\$171.35	\$175.71
		2 people	W8595	U5	SE	\$120.79	\$123.14
	Needs Group 2	1 person	W8593	U6	SE	\$204.29	\$211.85
		2 people	W8595	U6	SE	\$144.84	\$148.79
	Needs Group 3	1 person	W8593	U7	SE	\$279.58	\$300.48
		2 people	W8595	U7	SE	\$197.06	\$208.48
	Needs Group 4	1 person	W8593	U8	SE	\$355.61	\$394.90
		2 people	W8595	U8	SE	\$237.16	\$257.42
Medically Complex Life Sharing Needs Group 4	Needs Group 4	1-person home	W0062	U8	SE	\$435.94	\$501.33
		2-person home	W0063	U8	SE	\$274.00	\$315.10
Life Sharing – Under 30 Hours Per Week On Average	N/A	1 person	W7037	SE	TD and TE	\$147.63	\$149.02
		2 people	W7039	SE	TD and TE	\$105.13	\$105.97

24-Hour Respite (Licensed Respite Group Homes)	Needs Group 1	2 people	W9791	U5	U1	\$474.70	\$550.01	
		3 people	W9792	U5	U1	\$348.80	\$403.17	
		4 people	W9793	U5	U1	\$278.56	\$319.52	
	Needs Group 2	2 people	W9791	U6	U1	\$581.17	\$682.94	
		3 people	W9792	U6	U1	\$395.52	\$461.67	
		4 people	W9793	U6	U1	\$314.71	\$364.77	
	Needs Group 3	1 person	W9790	U7	U1	\$855.36	\$1,013.85	
		2 people	W9791	U7	U1	\$696.86	\$829.98	
		3 people	W9792	U7	U1	\$495.21	\$587.73	
		4 people	W9793	U7	U1	\$388.40	\$458.10	
	Needs Group 4	1 person	W9790	U8	U1	\$931.37	\$1,110.14	
		2 people	W9791	U8	U1	\$755.65	\$905.55	
		3 people	W9792	U8	U1	\$538.34	\$642.59	
		4 people	W9793	U8	U1	\$422.61	\$501.26	
	24-Hour Respite (Respite Only Home)	Needs Group 1	2 people	W9865	U5	U1	\$541.71	\$627.66
			3 people	W9866	U5	U1	\$398.05	\$460.09
4 people			W9871	U5	U1	\$317.88	\$364.62	
Needs Group 2		2 people	W9865	U6	U1	\$663.22	\$779.36	
		3 people	W9866	U6	U1	\$451.36	\$526.85	

		4 people	W9871	U6	U1	\$359.14	\$416.27
	Needs Group 3	2 people	W9865	U7	U1	\$795.25	\$947.16
		3 people	W9866	U7	U1	\$565.12	\$670.71
		4 people	W9871	U7	U1	\$443.23	\$522.77
	Needs Group 4	2 people	W9865	U8	U1	\$862.33	\$1,033.39
		3 people	W9866	U8	U1	\$614.34	\$733.31
		4 people	W9871	U8	U1	\$482.27	\$572.03
Supplemental Habilitation	N/A	1:1	W7070	U1		\$5.77 (15-minute unit)	\$7.56 (15-minute unit)
		2:1	W7084	U1		\$11.53 (15-minute unit)	\$15.12 (15-minute unit)
Supported Living	Needs Group 1	1 person	W9872	U5	U1	\$151.12	\$183.39
		2 people	W9873	U5	U1	\$105.79	\$128.37
		3 people	W9874	U5	U1	\$75.56	\$91.70
	Needs Group 2	1 person	W9872	U6	U1	\$253.26	\$307.60
		2 people	W9873	U6	U1	\$202.61	\$246.08
		3 people	W9874	U6	U1	\$134.19	\$162.97
	Needs Group 3	1 person	W9872	U7	U1	\$404.38	\$490.99
		2 people	W9873	U7	U1	\$338.62	\$411.13
		3 people	W9874	U7	U1	\$235.07	\$285.43

	Needs Group 4	1 person	W9872	U8	U1	\$543.72	\$660.72
		2 people	W9873	U8	U1	\$543.72	\$660.72
		3 people	W9874	U8	U1	\$378.48	\$459.90

**FEE SCHEDULE RATES FOR RESIDENTIAL HABILITATION NEEDS GROUP 5 IN THE CONSOLIDATED WAIVER  
EFFECTIVE JANUARY 1, 2024**

The modifier HI is used when the individual is not receiving Waiver-funded service during the day.

Modifiers U9 is the Needs Group Modifier.

Modifier U1 is utilized with the appropriate procedure code to allow providers, who are approved by the Department, to receive the Enhanced Communication Services Rate.

All rates in the table are per day.

<b>Service Group</b>	<b>Needs Group</b>	<b>Program Capacity or Staffing Level</b>	<b>Procedure Code/ Modifier</b>	<b>Modifier 1</b>	<b>Modifier 2</b>	<b>Statewide Fee</b>	<b>Enhanced Communication Statewide Fee (U1 Modifier)</b>
Licensed Residential Habilitation With Day	Needs Group 5	1 person	W9000	U9	U1	\$1,265.90	\$1,519.08
		2 people	W9029	U9	U1	\$1,146.38	\$1,375.66
		3 people	W9045	U9	U1	\$788.17	\$945.80
		4 people	W9047	U9	U1	\$606.45	\$727.74
		5-8 people	W9064	U9	U1	\$546.93	\$656.32

<p style="text-align: center;">Licensed Residential Habilitation Without Day</p>	<p style="text-align: center;">Needs Group 5</p>	1 person	W9000	U9	HI	\$1,655.20	\$1,986.24
		2 people	W9029	U9	HI	\$1,238.27	\$1,485.92
		3 people	W9045	U9	HI	\$947.47	\$1,136.96
		4 people	W9047	U9	HI	\$722.91	\$867.49
		5-8 people	W9064	U9	HI	\$644.85	\$773.82