

A) Residential Habilitation and Daily Supported Living (rates based on the ICF Methodology)

Service Description	Procedure Codes
Residential Habilitation Services	
Residential Habilitation (4 people) Basic Support (Level 1)	T2033 U1
Residential Habilitation (4 people) Moderate Support (Level 2)	T2033 U2
Residential Habilitation(4 people) Enhanced Support (Level 3)	T2033 U3
Residential Habilitation(4 people) Intensive Support	T2033 U4
Residential Habilitation(4 people)-with 24 Hr. Skilled Nursing (LPN)	T2033 U1 TE
Residential Habilitation(5/6 people) Basic Support (Level 1)	T2033 U5
Residential Habilitation(5/6 people) Moderate Support (Level 2)	T2033 U6
Residential Habilitation(5/6 people) Enhanced Moderate Support (Level-3)	T2033 U7
Residential Habilitation(5/6 people) Intensive Support	T2033 U8
Residential Habilitation (5/6 people) with 24 Hr. Skilled Nursing (LPN)	T2033 U2 HI
Supported Living Services	
SL (3) Basic Support Level 1	T2016 U1
SL (3) Basic Support Level 1 W/TRANS	T2016 U1 HI
SL (3) Basic Support Level 2	T2016 U2
SL (3) Basic Support Level 2 W/TRANS	T2016 U2 HI
SL (3) Moderate Support Level (1)	T2016 U3
SL (3) Moderate Support Level 1 W/TRANS	T2016 U3 HI
SL (3) Moderate Support Level 2	T2016 U4
SL (3) Moderate Support Level 2 W/TRANS	T2016 U4 HI
SL (3) Intensive Support Level 1	T2016 U5
SL (3) Intensive Support Level 1 W/TRANS	T2016 U5 HI
SL (3) Intensive Support Level 2	T2016 U6
SL (3) Intensive Support Level 2 W/TRANS	T2016 U6 HI
SL (2) Basic Support Level 1	T2016 U7
SL (2) Basic Support Level 1 W/TRANS	T2016 U7 HI
SL (2) Basic Support Level 2	T2016 U8
SL (2) Basic Support Level 2 W/TRANS	T2016 U8 HI
SL (2) Moderate Support Level 1	T2016 U9
SL (2) Moderate Support Level 1 W/TRANS	T2016 U9 HI
SL (2) Moderate Support Level 2	T2016 UA
SL (2) Moderate Support Level 2 W/TRANS	T2016 UA HI
SL (2) Intensive Support Level (1)	T2016 UB
SL (2) Intensive Support Level 1 W/TRANS	T2016 UB HI
SL (1) One to One Asleep Overnight	T2016 UD
SL (1) One to One Asleep Overnight W/TRANS	T2016 UD HI
SL (1) One to One Awake Overnight	T2016 UC
SL (1) One to One Awake Overnight W/TRANS	T2016 UC HI
Supported Living (3) with 24 Skilled Nursing (LPN)	T2017 U1 TE
Supported Living (3) with 24 Skilled Nursing with Transportation	T2017 TE HI

B: In-Home Support; Periodic Supported Living; Hourly Respite; Supported Employment; Group Support

In-Home Supports Services (These rates are governed by the D.C. Living Wage Act of 2006) Rate methodology deve

In Home Supports	99509-U4
In Home Supports Extensions	99509 U4-22
High Intensity In Home Supports	99509-U5
High Intensity In Home Supports extension	99509-U5-22
SL Periodic	T2017 U1
SL Periodic with transportation	T2017 U1 HI
Respite	
Hourly Respite (ONLY PROVIDED IN PERSONS HOME)	T1005-U4
Hourly Respite, extended	T1005-U4-22

Individual Supported Employment Intake/Assessment/Job

Individual SE Intake & Assessment Professional	T2019-U1-H1
Individual SE Intake & Assessment Paraprofessional	T2019-U2-H1
Individual SE Job Placement Professional	T2019-U3-H1
Individual SE Job Placement Professional, Extended	T2019-U3-H1-22
Individual SE Job Placement Paraprofessional	T2019-U4-H1
Individual SE Job Placement Paraprofessional Extended	T2019-U4-H1-22
Individual SE Job Training & Supports Professional	T2019-U5
Individual SE Job Training & Supports Professional, extended	T2019-U5-22
Individual SE Job Training & Supports Paraprofessional	T2019 U6
Individual SE Job Training & Supports Paraprofessional, extended	T2019 U6 -22
Individual SE Long Term Follow Along Professional	T2019 U9 H1
Individual SE Long Term Follow Along Professional Extended	T2019 U9 H1-22
Individual SE Long Term Follow Along Paraprofessional	T2019 UA H1
Individual SE Long Term Follow Along Paraprofessional Extended	T2019 UA H1-22

Small Group Supported Employment

SE Gp Job Training & Supports Professional	T2019 U5 H1
SE Gp Job Training & Supports Professional Extended	T2019 U5 H1 22
SE Gp Job Training & Supports Paraprofessional	T2019 U6 H1
SE Gp Job Training & Supports Paraprofessional Extended	T2019 U6 H1-22
SE Gp Long Term Follow Along Professional	T2019 U7 H1
SE Gp Long Term Follow Along Professional Extended	T2019 U7 H1-22
SE Gp Long Term Follow Along Paraprofessional	T2019 U8 H1
SE Gp Long Term Follow Along Paraprofessional Extended	T2019 U8 H1-22

(C) Clinical Services/ Physical Therapy, Speech Therapy and Occupational Therapy:

Occupational Therapy Services	
Occupational Therapy Assessment	G0152U1
Occupational Therapy -On-Going	G0152U2
Physical Therapy Services	
Physical Therapy Services Assessment	G0151-U1
Physical Therapy Services On-Going	G0151-U2
Speech Hearing, and Language Services	

Speech, Hearing and Language Assessment	G0153-U1
Speech, Hearing and Language Service – On-Going	G0153-U2
Speech, Hearing and language service-small group	G0153-U2-UP

D) Day Habilitation and Employment Readiness: (They use similar methodology to those in section B)	
Day Habilitation	T2021 U4
Day Habilitation (1:1)	T2021 U5
Small Group Day Hab (1:3)	T2021-U2
Employment Readiness Services	T2015 U4 HI

Day Habilitation with Meals (1:4)	S9977 - U4
Day Habilitation with Meals through third party vendor (1:4)	S5170 - U4
Small Group Day Habilitation with meals	S9977
Small Group Day Habilitation with meals through third party vendor (1:3)	S5170-U4
Day Hab Meal Modifier	includes delivery
Day Hab w/ Meals (1:4 Meal Delivered)	S9977-U4
Day Hab w/ Meals (1:4 Meal including preparation/packaged)	S5170-U4

E) Professional Support Services/ Family Training; Parenting Support: Unit=15minutes	
Parenting Supports (Individual) Professional	S9444-U4
Parenting Support - SM Group 1:2 Professional	S9444-U4-UN
Parenting Support - SM Group Peer 1:3 Professional	S9444-U4-UP
Parenting Support - SM Group Peer (1:4) Professional	S9444-U4-UQ
Parenting Supports Peer (Individual) 1:1	S9444-U4-HE
Parenting Supports Peer (Small Group) 1:2	S9444-U4-UN-HE
Parenting Supports Peer (Small Group) 1:3	S9444-U4-UP-HE
Parenting Supports Peer (Small Group) 1:4	S9444-U4-UQ-HE
Family Training Services	
Family Training (Non-Family)	S5110 U4
Family Training (Professional Support) Small Group 1:4	S5115 U4
Family Training (Professional Support) Small Group 1:4 Extended	S5110-U4-UQ
Family Training (Professional Support) Small Group 1:4 Extended	S5110-U4_UQ-22
Family Training (Peer Supports Small Group)1:4	S5111-U4-UQ
Family Training (Peer Supports) 1:1	S5111-U4
Family Training (Peer Supports) 1:1 Extended	S5111-U4-22

F) Behavioral Support Services: (rates have been reviewed relative to the DC State Plan, DC Behavioral Health system, DC Early Intervent	
BS Diagnostic Assessment	H0031 U4
BS Professional Services	H0025 U4
BS Paraprofessional Services	H0025 U6
BS Non-Professional	H0025 U7

G) Wellness Services : (These rates were reviewed and adjusted as part of previous waiver amendment and compared to variety of compet	
Bereavement Assessment and Counseling (Conduct Assessment within first 2 hours)	96152-HI
Bereavement Counseling Extended	96152-HI-22
Fitness Trainer Assessment and ongoing services (Conduct Assessment within first 2 hours)	S9451-U4

Fitness Trainer Extension	S9451-U4-22
Fitness Small Group	S9451-U1
Fitness Small Group Extended	S9451 U1 22
Wellness Services (Fitness Trainer) group	
Nutritional Assessment and ongoing services (Conduct Assessment within first 2 hours)	S9470-U4
Nutritional Counseling Extended	S9470-U4-22
Massage Therapy Assessment and ongoing services (Conduct Assessment within first 2 hours)97124 U4	97124-U4
Massage Therapy Extended	97124-U4-22
Sexual Education Assessment and ongoing services (Conduct Assessment within first 2 hours)	S9445-U4
Sexual Education Extended	S9445-U4-22

H) Host Home Without Transportation Services (Unit=Daily) (rates have been inflated for associated cost of living increases)

Host Home Basic Acuity	T2033 UA
Host Home Medium Acuity	T2033 UB
Host Home Intense Acuity	T2033 UC
Host Home High Acuity	T2033 UD

(I) Daily Respite: (rates have been inflated for associated cost of living increases aligned with the D.C. Living Wage Act of 2006, rates establish

Daily Respite (ONLY PROVIDED OUTSIDE OF THE PERSONS HOME)	S9125-U4
Daily Respite, extended	S9125-U4-22

(J) Assistive Technology: (rates for maintenance will be comparable with costs in the D.C. Vocational Rehabilitation program, as well as pa

Assistive Technology Goods & Services	T2029-U4
Assistive Technology Services	T2029 U1
Assistive Technology Ongoing	T2029-U2

Personal Emergency Response System Services

Assistive Technology PERS	S5160 U4
Assistive Technology PERS	S5161 U4

K) One Time Transitional Services : (This matches Community Transition, the DC EPD HCBS waiver equivalent service as well as the rat

One-Time Tranmittal Services	T2038 U4
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L) Skilled Nursing Servies, Personal Care, and Companion: (Skilled nursing and PCA are extension services from the State Plan

Skilled Nursing Visits	G0299-U4
Skilled Nursing Initial Assessment	T1001-U4
Extended Nursing RN Services	T1002-U4
Extended Nursing LPN Services (1:1)	T1003-U4
Personal Care Services	T1019-U1-22
Companion Services Individual (1:1)	S5135 - U1
Companion Services Group (1:3)	S5135 - U2

M) Meals (Day Habilitation and Individualized Day Supports): The rate was built at the time of the previous amendment ba

Individualized Day Supports	
Individualized Day Supports	T2021 HI
Individualized Day Supports with meals (1:3)	S9977-U4
Individualized Day Supports (1:1)	T2021-U3
Individualized Day meal modifier	S9977-U4

N) Creative Art Therapies Services (Unit=15 minutes) (Rates determined based on a market research in 2015 and have ben inf

Art Therapy	G0176-U5
Art Therapy Extension	G0176-U5-22
Art Therapy Group	G0176-U5-HQ
Art Therapy Group Extension	G0176-U5-HQ-22
Dance Therapy	G0176-U6
Dance Therapy Extension	G0176-U6-22
Dance Therapy Group	G0176-U6-HQ
Dance Therapy Group Extension	G0176-U6-HQ-22
Drama Therapy	G0176-U7
Drama Therapy Extension	G0176-U7-22
Drama Therapy Group	G0176-U7-HQ
Drama Therapy Group Extension	G0176-U7-HQ-22
Music Therapy	G0176-U8
Music Therapy Extension	G0176-U8-22
Music Therapy Group	G0176-U8-HQ
Music Therapy Group Extension	G0176-U8-HQ-22

O) Dental (The Dental rate is an enhancement to the State Plan rate that was developed through a collaborative process that involved the state

Forecasted DC LW increas

Billable Unit	Effective Jan. 1. i.e. FY2020	Effective July 1, 2020
One Day	\$283.94	\$ 286.46
One Day	\$398.78	\$ 403.08
One Day	\$447.04	\$ 452.12
One Day	\$543.68	\$ 551.97
One Day	\$645.31	\$645.31
One Day	\$307.74	\$ 307.89
One Day	\$380.27	\$380.27
One Day	\$423.51	\$423.51
One Day	\$527.88	\$527.88
One Day	\$539.79	\$539.79
Daily	\$245.98	\$ 260.08
One Day	\$333.23	\$333.23
One Day	\$256.91	\$ 260.08
One Day	\$344.16	\$344.16
One Day	\$347.21	\$ 362.84
One Day	\$434.45	\$434.45
One Day	\$358.14	\$ 362.84
One Day	\$445.38	\$445.38
One Day	\$399.84	\$399.84
One Day	\$487.09	\$487.09
One Day	\$452.32	\$ 460.16
One Day	\$539.56	\$539.56
One Day	\$335.89	\$ 354.29
One Day	\$414.18	\$ 433.36
One Day	\$349.46	\$ 354.58
One Day	\$427.75	\$ 433.64
One Day	\$417.52	\$ 423.34
One Day	\$495.82	\$ 502.41
One Day	\$468.53	\$ 475.55
One Day	\$546.83	\$ 554.62
One Day	\$548.58	\$ 556.73
One Day	\$626.87	\$ 635.79
One Day	\$647.18	\$ 678.18
One Day	\$782.93	\$ 815.93
One Day	\$667.49	\$ 678.18
One Day	\$803.24	\$ 815.93
One Day	\$535.92	\$ 535.92
One Day	\$595.06	\$ 595.06

and Employment; and, Individualized Day services

Developed based on CMS guidance and methodologies employed by other states

15 Minutes	\$6.22	\$6.37
15 Minutes	\$6.22	\$6.37
15 minutes	\$6.81	\$6.96
15 minutes	\$6.81	\$6.96
15 Minutes	\$6.61	\$6.76
15 Minutes	\$7.46	\$7.56
15 Minutes	\$5.90	\$6.03
15 Minutes	\$5.90	\$6.03

15 Minutes	\$12.85	\$12.85
15 Minutes	\$7.12	\$7.12
15 Minutes	\$12.85	\$12.85
15 Minutes	\$12.85	\$12.85
15 Minutes	\$7.12	\$7.12
15 Minutes	\$7.12	\$7.12
15 Minutes	\$12.85	\$12.85
15 Minutes	\$12.85	\$12.85
15 Minutes	\$7.12	\$7.12
15 Minutes	\$7.12	\$7.12
15 Minutes	\$7.12	\$7.12
15 Minutes	\$7.12	\$7.12
15 Minutes	\$7.12	\$7.12
15 Minutes	\$7.12	\$7.12
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45
15 Minutes	\$3.45	\$3.45

This rates are adopted from from the D.C. EPSDT program. Rate are inflated using the Cost of Living inflation factor for the DC Living Wage act of 2006.

15 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87

15 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87
15 Minutes	\$12.61	\$12.61

15 Minutes	\$5.80	\$6.08
15 Minutes	\$10.98	\$10.98
15 Minutes	\$8.75	\$8.75
15 Minutes	\$4.99	\$5.24

Daily	\$7.71	\$7.71
Daily	\$5.29	\$5.29
Daily	\$7.71	\$7.71
Daily	\$5.29	\$5.29
flat rate	\$13.00	\$13.00
Daily	\$7.71	\$7.71
Daily	\$5.29	\$5.29

15 minutes	\$15.73	\$15.73
15 minutes	\$6.35	\$6.35
15 minutes	\$8.65	\$8.65
15 minutes	\$2.55	\$2.55
15 minutes	\$8.65	\$8.65
15 minutes	\$2.55	\$2.55
15 minutes	\$2.55	\$2.55
15 minutes	\$2.55	\$2.55

15 Minutes	\$15.74	\$15.74
15 minutes	\$15.74	\$15.74
15 minutes	\$6.35	\$6.35
15 minutes	\$6.35	\$6.35
15 minutes	\$2.55	\$2.55
15 minutes	\$8.65	\$8.65
15 minutes	\$8.65	\$8.65

ion Program and MD DD waiver program and are inflated using the Cost of Living inflation

One Assessment	\$260.21	\$260.21
15 Minutes	\$27.89	\$27.89
15 Minutes	\$17.17	\$17.17
15 Minutes	\$6.37	\$6.53

etive sources) are inflated using the Cost of Living inflation factor for the DC Living Wage act o

15 Minutes	\$16.82	\$16.82
15 Minutes	\$16.82	\$16.82
15 Minutes	\$19.40	\$19.40

15 Minutes	\$19.40	\$19.40
15 minutes	\$11.64	\$11.64
15 minutes	\$11.64	\$11.64
15 Minutes	\$17.17	\$17.17
15 Minutes	\$17.17	\$17.17
15 Minutes	\$16.07	\$16.07
15 Minutes	\$16.07	\$16.07
15 Minutes	\$20.06	\$20.06
15 Minutes	\$20.06	\$20.06

aligned with the D.C. Living Wage Act of 2006)

One Day	\$162.27	\$166.14
One Day	\$181.48	\$185.81
One Day	\$235.92	\$241.55
One Day	\$533.76	\$546.51

ed in FY15)

One Day	\$427.01	\$437.21
One Day	\$427.01	\$437.21

st experience with services like Personal Emergency Response Systems are inflated annually u

1 Unit	\$10,000 over 5 year period	\$10,000 over 5 year period
15 minutes	26.42	\$26.42
15 minutes	26.42	\$26.42
One Installation	52.30	\$52.30
Monthly	32.14	\$32.14

te through the Money Follows the Person rates are inflated using the Cost of Liv

One Service	\$5,000.00	\$5,000.00
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i and match the State Plan rates. Companion Services also match the State Plan Rate for PCA) a

Per Visit/15 minutes	\$15.09	\$15.09
One Assessment	\$120.74	\$120.74
15 Minutes	\$15.09	\$15.09
15 Minutes	\$12.58	\$12.58
15 Minutes	\$5.34	\$5.47
15 Minutes	\$5.34	\$5.46
15 Minutes	\$2.57	\$2.64

sed upon actual cost of services from local vendors and have been inflated in 2016 and 2017

15 Minutes	\$6.31	\$6.46
Daily	\$7.71	\$7.71
15 Minutes	\$9.16	\$9.16
Daily	\$7.71	\$7.71

lated by the CPI since then).in the future they will be inflated using

45 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87
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15 Minutes	\$25.87	\$25.87
15 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87
45 Minutes	\$25.87	\$25.87

DD and Medicaid agencies)

2.389%