

DAIL Adult Services Division: Medicaid Claims Codes and Reimbursement Rates

Version 7/1/2018

HP Revenue Code	CFC Home-Based Setting	Unit	Max Amount Per Unit/Other	Hourly Equivilant	Effective Date
070	Case Management by HHA or AAA (48 hrs/calendar year max)	15 min	\$18.41	\$73.64	7/1/2018
072	Personal Care by HHA	15 min	\$7.34	\$29.36	7/1/2018
077	Personal Care by Consumer-Directed Personnel - minimum rate	15 min	\$3.20	\$12.78	7/1/2018
081	Personal Care by Surrogate-Directed Personnel - minimum rate	15 min	\$3.20	\$12.78	7/1/2018
073	*Respite or Companion Care by HHA	15 min	\$5.88	\$23.52	7/1/2018
075	*Respite or Companion Care Consumer-Directed - Max Rate Cap	15 min	\$3.20	\$12.78	7/1/2018
080	*Respite or Companion Care Surrogate-Directed - Max Rate Cap	15 min	\$3.20	\$12.78	7/1/2018
074	*Respite in Residential Care Home	15 min	\$99.76	n/a	7/1/2018
084	*Respite by Adult Day Service provider	15 min	\$4.10	\$16.40	7/1/2018
088	Companion by Senior Companion Agency	15 min	\$2.07	\$8.28	7/1/2017
078	Home-Based Waiver Adult Day Service	15 min	\$4.10	\$16.40	7/1/2018
076	Assistive Devices & Modifications - per calendar year	As billed	\$ 825	n/a	7/1/2018
082	Personal Emergency Response Systems-Installation & 1st Month	1-time	\$ 60	n/a	7/1/2018
083	Personal Emergency Response Systems-Ongoing	1 month	\$32.78	n/a	7/1/2018
089	Group Directed Attendant Care (<i>approved providers only</i>)	1 day	\$214.00	n/a	6/1/2017
097	ARIS F/EA Employer Support Services #047W070	1 month	\$75.00	n/a	2/1/2018
220	ARIS F/EA CFC Flexible Choices Support Services #047W070	1 month	\$75.00	n/a	2/1/2018
071	Flexible Choices Services	As billed	individual budgets	n/a	9/1/2016
079	Flexible Choices Consultant Pre-admission Service	15 min	\$18.41	\$73.64	7/1/2018
n/a	Flexible Choices Supportive ISO Fee (reimbursed through the budget)	1 month	\$179	na	7/1/2018
n/a	AFC Daily Respite via Authorized Agency	1 day	\$191.57	na	7/1/2018

* *Respite & Companion = 720 hours combined per calendar/year max.*

HP Revenue Code	CFC Adult Family Care (AFC)	Unit	Max Amount Per Unit/Other	Hourly or Daily Rate	Effective Date
086	Tier 1 - Adult Family Care	1 day	\$80.11	n/a	7/1/2018
086	Tier 2 - Adult Family Care	1 day	\$91.56	n/a	7/1/2018
086	Tier 3 - Adult Family Care	1 day	\$97.80	n/a	7/1/2018
086	Tier 4 - Adult Family Care	1 day	\$103.00	n/a	7/1/2018
086	Tier 5 - Adult Family Care	1 day	\$108.20	n/a	7/1/2018
086	Tier 6 - Adult Family Care	1 day	\$114.44	n/a	7/1/2018
086	Tier 7 - Adult Family Care	1 day	\$120.69	n/a	7/1/2018
086	Tier 8 - Adult Family Care	1 day	\$127.97	n/a	7/1/2018
086	Tier 9 - Adult Family Care	1 day	\$140.45	n/a	7/1/2018
086	Tier 10 - Adult Family Care	1 day	\$162.30	n/a	7/1/2018
086	AFC In-Patient Hospital Days = 94% of applicable tier	1 day	94% of Tier	n/a	7/1/2018

**In-patient hospital day = if the person is admitted to the hospital and still there at midnight.*

HP Revenue Code	CFC Enhanced Residential Care Setting	Unit	Max Amount Per Unit	Hourly Equivilant	Effective Date
092	ERC-tier 1	1 day	\$53.82	n/a	7/1/2018
		1 day	\$59.55	n/a	7/1/2018
093	ERC-tier 2	1 day	\$61.26	n/a	7/1/2018
		1 day	\$66.97	n/a	7/1/2018
094	ERC-tier 3	1 day	\$68.71	n/a	7/1/2018
		1 day	\$74.43	n/a	7/1/2018
090	ERC Special Rate (rate set for individual by prior approval)	1 day	Varies by provider	Provider Rate by individual	7/1/2007

HP Revenue Code	MFP Demonstration Grant	Unit	Max Amount Per Unit	Hourly or Daily Rate	Effective Date
087	MFP Transition Funds (Prior Authorization Required)	1 Unit=1 Service (PA)	\$2,500 per person One-time	n/a	4/1/2012

HP Revenue Code	CFC Home-Based Setting, Moderate Needs	Unit	Max Amount Per Unit	Hourly or Daily Rate	Effective Date
070	Case Management (max of 12 hrs per calendar year)	15 min	\$18.41	\$73.64	7/1/2018
095	Homemaker (Max of 6 hours per week)	15 min	\$5.27	\$21.08	7/1/2018
096	*Adult Day (Max of 50 hours per week)	15 min	\$4.10	\$16.40	7/1/2018
071	Flexible Funding Allowance	As billed	Pay as billed	allowance	4/1/2014
n/a	ARIS F/EA for MNG self-hired (via case management agency)	1 month	\$60.00	n/a	2/1/2018
n/a	MNG Flex Funds Admim Fee - Case Management Agency	1 month	\$35	n/a	7/1/2018
n/a	MNG Flex Funds Self-Hire - Minimum Hourly (via case management agency)	15 min	\$3.20	\$12.78	7/1/2018

*Maximum of 50 hours (200 units) a week may be billed up to 934 units (233.5 hours) per month.

HP Revenue Code	CFC Nursing Home Setting	Unit	Max Amount Per Unit	Hourly or Daily Rate	Effective Date
120	Room and Board, 2 Bed Semiprivate, General Classification	1 day	Set per Provider	Daily	varies
128	Room and Board, 2 Bed Semi-private, Rehabilitation	1 day	Set per Provider	Daily	varies
130	Room and Board, 3-4 Bed Semiprivate, General	1 day	Set per Provider	Daily	varies
169	Level 2/Swing Bed	1 day	Set per Provider	Daily	varies
182	Nursing Home Leave of Absence Day	1 day	Set per Provider	Daily	varies
185	Nursing Home Bed Hold	1 day	Set per Provider	Daily	varies

HP HCPCS Code	Attendant Services Program	Unit	Max Amount Per Unit	Hourly Rate	Effective Date
S5126	*ARIS F/EA Employer Support Services #1008601	1 month	\$75.00	n/a	2/1/2018
s5125	ASP - Medicaid	15 min	\$3.17	\$12.68	7/1/2018

n/a	ASP - General Fund	1 hour	\$12.31	\$12.31	7/1/2018
n/a	ARIS F/EA Employer Support Services - General Funds	1 month	\$55.00	n/a	2/1/2018

HP Procedure Code	Traumatic Brain Injury (TBI) Services	Unit	Max Amount Per Unit	Hourly or Daily Rate	Effective Date
T2038 U8	Community Supports: Rehab/Long Term	1 day	\$77.06	\$77.06	11/1/2013
T2038 HI	Community Supports: Mental Health Funded	1 day	\$77.06	\$77.06	11/1/2013
S9125 U8	Respite: Rehab/Long Term	1 day	\$191.57	\$191.57	7/1/2018
S9125 HI	Respite: Mental Health Funded	1 day	\$191.57	\$191.57	7/1/2018
T1016 U8	Case Management: Rehab/Long Term	15 min	\$12.50	\$50.00	11/1/2013
T1016 HI	Case Management: Mental Health Funded	15 min	\$12.50	\$50.00	11/1/2013
T2017 U8	Rehabilitation: Rehab/Long Term	15 min	\$5.27	\$21.08	11/1/2013
T2017 HI	Rehabilitation: Mental Health Funded	15 min	\$5.27	\$21.08	11/1/2013
T2025 U8	Environmental & Assitive Technology: Rehab/Long Term	1 Unit=Lifetime	\$4,000.00	\$4000/Lifetime	
T2025 HI	Environmental & Assistive Technology: Mental Health Funded	1 Unit=Lifetime	\$4,000.00	\$4000/Lifetime	
T2034 U8	Crisis Support: Rehab/Long Term	1 day	\$513.75	\$513.75	11/1/2013
T2034 HI	Crisis Support: Mental Health Funded	1 day	\$513.75	\$513.75	11/1/2013
H0036 U8	Psychology & Counseling Supports: Rehab/Long Term	15 min	\$16.70	\$66.80	11/1/2013
H0036 HI	Psychology & Counseling Supports: Mental Health Funded	15 min	\$16.70	\$66.80	11/1/2013
T2019 U8	Employment Supports: Rehab/Long Term	15 min	\$5.27	\$21.08	11/1/2013
T2019 HI	Employment Supports: Mental Health Funded	15 min	\$5.27	\$21.08	11/1/2013
T1020 U8	TBI Personal Care Daily Rate: Rehab/Long Term	1 day	\$303.11	individual rates	11/1/2013
T1020 UD	TBI Personal Care Daily Rate: Mental Health Funded	1 day	\$303.11	individual rates	11/1/2013
T2024 U8	Pre-Admission Planning: Rehab/Long Term	15 min	\$12.50	\$50.00	11/1/2013
T2024 HI	Pre-Admission Planning: Mental Health Funded	15 min	\$12.50	\$50.00	11/1/2013

HP Procedure Code	High Tech Services	Unit	Max Amount Per Unit	Hourly or Daily Rate	Effective Date
G0299HTHB	Skilled Nursing Care- RN	15 min	\$13.00	\$52.00	7/1/2018
G0300HTHB	Skilled Nursing Care- LPN	15 min	\$13.00	\$52.00	7/1/2018
G0156HTHB	Services by High Tech LNA	15 min	\$7.02	\$28.08	7/1/2018
T1001HTHB	Nursing Assessment RN/LPN	1 visit	1 unit/month	\$70.09	7/1/2018
T1016	Discharge Planning/Blood Draw	15 min	\$14.38	\$57.50	1/1/2001

HP Revenue Code	Global Commitment Services: ACCS and DHRS	Unit	Max Amount Per Unit	Hourly or Daily Rate	Effective Date
98	Assistive Community Care Services (ACCS)	1 day	\$37.25	\$37.25	7/01/2012
99	*Day Health Rehabilitation Services (DHRS)	15 min	\$4.10	\$16.40	7/1/2018

*Maximum of 50 hours (200 units) per week.

Located online at: <http://www.ddas.vermont.gov/ddas-publications/publications-ddas/updated-september-2013-service-codes>

SFY18 Caps: CFC Moderate Needs Group- Flex Funds Caps

CFC Provider Number	Provider	SFY18 payment cap	effective date
047W013	Age Well	\$73,481	7/1/2018-6/30/2019
047W014	Central VT Council on Aging	\$42,520	7/1/2018-6/30/2019
047W003	Northeast Kingdom Council on Aging	\$29,570	7/1/2018-6/30/2019
047W015	Senior Solutions	\$42,224	7/1/2018-6/30/2019
047W024	Southwestern VT Council on Aging	\$40,195	7/1/2018-6/30/2019
		Total:	\$227,990

SFY18 Caps: CFC Moderate Needs Group- Homemaker Funding Allocations **PENDING - NOT FINAL**

Total: \$3,557,207

SFY18 Caps: CFC Moderate Needs Group- Adult Day Funding Allocations

CFC Provider Number	Provider	SFY18 payment cap	effective date
047W030	Bennington Project Independence	\$178,866	7/1/2018-6/30/2019
047W032	Brattleboro Area Adult Day Services	\$169,146	7/1/2018-6/30/2019
047W164	CarePartners	\$163,765	7/1/2018-6/30/2019
047W031	Elderly Services, Inc.	\$344,119	7/1/2018-6/30/2019
047W371	Gifford Medical Center (Includes Barre PI)	\$240,331	7/1/2018-6/30/2019
047W063	Green Mountain Adult Day Services	\$13,399	7/1/2018-6/30/2019
047W272	Meeting Place	\$60,699	7/1/2018-6/30/2019
047W021	Out & About	\$196,305	7/1/2018-6/30/2019
047W028	Oxbow Senior Independence Program, Inc.	\$32,115	7/1/2018-6/30/2019
047W026	Riverside Life Enrichment Center	\$153,769	7/1/2018-6/30/2019
047W033	Rutland Community Programs, Inc.	\$49,342	7/1/2018-6/30/2019
047W069	Springfield Hospital	\$218,063	7/1/2018-6/30/2019
047W192	*VNA of Chittenden and Grand Isle Counties	\$306,900	7/1/2018-6/30/2019
		Total:	\$2,126,819

Caregiver Wages (Established through Collective Bargaining Agreement)

Service	minimum wage	max. hourly wage	Date
CFC Personal Care by Consumer-Directed Personnel - Hourly	\$11.30	\$25.00	7/1/2018
CFC Personal Care by Surrogate-Directed Personnel - Hourly	\$11.30	\$25.00	7/1/2018
CFC Respite Care or Companion by Consumer-Directed Personnel - Hourly	\$11.30	\$25.00	7/1/2018
CFC Respite Care or Companion by Surrogate-Directed Personnel - Hourly	\$11.30	\$25.00	7/1/2018
Moderate Needs Flex Funds - Self-Hire - Hourly	\$11.30	\$25.00	7/1/2018
Attendant Services Program- Medicaid - Hourly	\$11.30	\$25.00	7/1/2018

Attendant Services Program-General Fund - Hourly	\$11.30	\$25.00	7/1/2018
All Daily Respite (AFC, TBI, Flex Funds)	\$172.00	n/a	7/1/2018

Workers Comp/Unemployment/Sick Leave Multipliers	7/1/2018
Choices for Care	13.09%
Attendant Services Program - Medicaid	12.15%
Attendant Services Program - General Funds	8.90%
Traumatic Brain Injury	11.38%