



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Residential Assisted Living Facility (RALF) – Idaho Medicaid

** Please see separate fee tables for Personal Assistance Agency, Certified Family Home (A&D/PCS), and other Aged and Disabled Waiver service provider rates**

Procedure Code	Modifier	Description	Allowed Amount
S5100		Adult Day Health (1 unit = 15 min)	\$1.50
S5140		Adult Residential Care (Services provided in a Residential Care or Assisted Living Facility or Certified Family Home)	Participant
T1001		Nursing Assessment/Evaluation (Agency) (1 unit = 1 visit)	\$50.95
T1002		Nursing Services RN (RN services up to 15 min) (1 unit = 15mins)	\$10.19
T1003		Nursing Services LPN (LPN/LVN services up to 15 min) (1 unit = 15mins)	\$7.31
T1005		Respite (1 unit = 15 min)	\$2.64
T1013		Oral Interpretation Service (1 unit = 15 min)	\$3.04
T1013	CG	Sign Language Interpretation Service (1 unit = 15 min)	\$12.50
T1019		Personal Care Services (1 unit = 15 min)	\$4.73

If you have any questions regarding these rates please contact the Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1150.

Thank you for your continued participation in the Idaho Medicaid Program.