



IDAHO DEPARTMENT OF HEALTH & WELFARE

Aged & Disabled (A&D) Waiver Services – Idaho Medicaid

** This Fee Schedule includes rates for all A&D Waiver Services and associated State Plan Services. Refer to [separate Fee Schedules](#) for rates specific to Residential Assisted Living Facility (RALF), Personal Assistance Agency (PAA), and Certified Family Home (CFH) A&D/PCS Providers.**

Service Category	Procedure Code	Modifier	Description	1 Unit Equiv.	Allowed Amount
A&D Waiver Services					
Non-Medical Transportation (NMT)	A0080		Waiver Agency Transportation	1 mile	\$0.44/mile As Authorized
	A0080		Commercial Transportation Provider – 1 st mile of 1 st trip only	1 mile	\$4.20/1 st mile of 1 st trip As Authorized
	A0080	76	Commercial Transportation Provider – All additional miles on 1 st trip or subsequent miles/trips within the same day	1 mile	\$1.17/mile As Authorized
	A0110		Commercial Bus Pass	1 Pass	Manual Price As Authorized
Specialized Medical Equipment and Supplies	E1399		Specialized Medical Equipment and Supplies	Per Item	As Authorized
Residential Habilitation (ResHab)	H2015		Individual Supported Living	15 min	\$5.31
	H2015	HQ	Group Supported Living	15 min	\$2.71
	H2016		Daily Supported Living – Intense Support	1 day	\$509.76
	H2020		Therapeutic Behavioral Services – Agency	1 day	\$31.97
	H2022		Daily Supported Living – High Support	1 day	\$277.04
Supported Employment	H2023		Supported Employment	15 min	\$5.25
Adult Day Health	S5100		Adult Day Health	15 min	\$1.50
Consultation Services	S5115		Consultation	15 min	\$7.65
Chore Services	S5120		Chore Services – Individual	15 min	\$2.64
	S5120		Chore Services – Agency	15 min	\$4.01

Service Category	Procedure Code	Modifier	Description	1 Unit Equiv.	Allowed Amount
A&D Waiver Services					
Attendant Care	S5125		Attendant Care	15 min	\$4.49
Homemaker Services	S5130		Homemaker Services	15 min	\$4.16
Companion Services	S5135		Companion Services	15 min	\$4.16
Adult Residential Care	S5140		Adult Residential Care – CFH	1 day	See CFH Fee Schedule
	S5140		Adult Residential Care – RALF	1 day	See RALF Fee Schedule
Personal Emergency Response System (PERS)	S5160		PERS Install and 1 st Month’s Rent	1 install	\$56.89 One Time Only
	S5161		PERS Rent	1 month	\$33.83
Environmental Accessibility Adaptations	S5165		Environmental Accessibility Adaptations	Per instance	As Authorized
Home Delivered Meals	S5170		Home Delivered Meals	1 meal	\$5.23
Skilled Nursing	T1001		Nursing Assessment/Evaluation – Agency	1 visit	\$50.95
	T1002		Nursing Services RN – RN Services	15 min	\$10.19
	T1003		Nursing Services LPN – LPN/LVN Services	15 min	\$7.31
Respite Services	T1005		Respite – Individual	15 min	\$4.16
	T1005		Respite – Agency	15 min	\$2.64
Day Habilitation	T2021		Day Habilitation	15 min	\$4.53
Transition Services	T2038		Transition Services – Goods and Services	Per transition	Up to \$2,000 As Authorized
Associated State Plan Services					
Case Management	G9001		Coordinated Care Fee – Initial – Agency	1 visit	\$99.04
	G9002		RN Care Plan Development and Placement	15 min	\$10.19 Initial = 10 units Redetermination = 5 units
Interpretation Services	T1013		Oral Interpretation Service	15 min	\$3.04
	T1013	CG	Sign Language Interpretation Service	15 min	\$12.50
Personal Care Services (PCS)	T1019		PCS – Agency	15 min	\$4.49
	T1019	UM	PCS – Family Alternate Care Home	15 min	\$3.36
Transition Services	T2022	UD	Transition Management	15 min	Up to 288 Units As Authorized

Revised 08/21/2019

For questions regarding these rates, please contact the Office of Reimbursement, Idaho Division of Medicaid at (208) 287-1180 or email MedicaidReimTeam@dhw.idaho.gov.

For questions related to billing services, please contact the appropriate resource:

- **Fee-For-Service Medicaid Participants:**
 - DXC Technology – (866) 686-4272

- **Dual Eligible Members: Idaho Medicaid Plus or Medicare Medicaid Coordinated Plan (MMCP):**
 - Blue Cross of Idaho: (888) 495-2583
 - Molina Healthcare of Idaho: (844) 239-4914

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