



IDAHO DEPARTMENT OF HEALTH & WELFARE

Personal Assistance Agency (PAA) Services

** This Fee Schedule includes the rates for PAAs. Please see [separate Fee Schedules](#) for rates specific to Residential Assisted Living Facilities (RALF), Certified Family Homes (CFH) for Aged and Disabled (A&D)/Personal Care Services (PCS), and other A&D Waiver Service Providers**

Procedure Code	Modifier	Description	1 Unit Equiv.	Allowed Amount
A&D Waiver Services				
G9001		Coordinated Care Fee – Initial/Agency	1 visit	\$99.04
G9002		RN Care Plan Development and Placement (Initial – 10 units, Redetermination – 5 units)	15 min	\$10.19
H2020		Therapeutic Behavioral Services - Agency	1 day	\$31.97
S5115		Consultation	15 min	\$7.65
S5120		Chore Services - PAA	15 min	\$4.01
S5125		Attendant Care Services	15 min	\$4.49
S5130		Homemaker Services	15 min	\$4.16
S5135		Companion Services	15 min	\$4.16
S5160		PERS Install/1st Month Rent	1 time only	\$56.89
S5161		PERS Rent	1 month	\$33.83
T1001		Nursing Assessment/Evaluation - Agency	1 visit	\$50.95
T1002		Nursing Services RN - RN Services (up to 15 min)	15 min	\$10.19
T1003		Nursing Services LPN - LPN/LVN Services (up to 15 min)	15 min	\$7.31
T1005		Respite	15 min	\$4.16

Procedure Code	Modifier	Description	1 Unit Equiv.	Allowed Amount
Associated State Plan Services				
T1013		Oral Interpretation Service	15 min	\$3.04
T1013	CG	Sign Language Interpretation Service	15 min	\$12.50
T1019		Personal Care Services – PAA	15 min	\$4.49
T1019		PCS Family Alternate Care Home – PAA	15 min	\$3.36

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.