

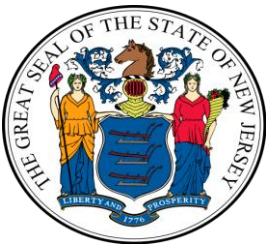
## Fee-for-Service Rate Schedule: Quick Reference Guide

Waiver Service	* Service Description / Tier	Standard Rate per Unit	Billing Unit	** Waiver Program		Medicaid Code
Assistive Technology	Evaluation	R&C	Single	46	07	T2028HI
	Purchase / Customize / Repair / Replace	R&C	Single	46	07	T2028HI22
	Remote Monitoring	R&C	Single	46	07	T2029HI
Behavioral Supports	Assessment / Plan Development	\$19.60	15 Minutes	46	07	H0004HI22
	Monitoring	\$7.34	15 Minutes	46	07	H0004HI
Career Planning	Base	\$13.25	15 Minutes	46	07	H2014HI
Cognitive Rehabilitation	Base	\$36.50	15 Minutes	46	n/a	97532HI
Community Based Supports	Base	\$7.01	15 Minutes	46	n/a	H2021HI
	Acuity Differentiated	\$11.89	15 Minutes	46	n/a	H2021HI22
	Self-Directed Employee	R&C	15 Minutes	46	n/a	H2021HI52
Community Inclusion Services	Tier A	\$2.36	15 Minutes	46	n/a	H2015HIU1
	Tier B	\$2.99	15 Minutes	46	n/a	H2015HIU2
	Tier C	\$3.73	15 Minutes	46	n/a	H2015HIU3
	Tier D	\$5.60	15 Minutes	46	n/a	H2015HIU4
	Tier E	\$7.46	15 Minutes	46	n/a	H2015HIU5
Community Transition Services		R&C	Single	n/a	07	T2038HI22
Day Habilitation	Tier A	\$2.36	15 Minutes	46	07	T2021HIUS
	Tier A / Acuity Differentiated	\$3.43	15 Minutes	46	07	T2021HIU1
	Tier B	\$2.99	15 Minutes	46	07	T2021HIUR
	Tier B / Acuity Differentiated	\$4.35	15 Minutes	46	07	T2021HIU2
	Tier C	\$3.73	15 Minutes	46	07	T2021HIUQ
	Tier C / Acuity Differentiated	\$5.43	15 Minutes	46	07	T2021HIU3
	Tier D	\$5.60	15 Minutes	46	07	T2021HIUP
	Tier D / Acuity Differentiated	\$8.15	15 Minutes	46	07	T2021HIU4
	Tier E	\$7.46	15 Minutes	46	07	T2021HIUN
Tier E / Acuity Differentiated	\$10.87	15 Minutes	46	07	T2021HIU5	
Environmental Modifications		R&C	Single	46	07	S5165HI
Fiscal Management Service		To Be Determined	Month	46	07	T2040HI22
Goods & Services		R&C	Single	46	n/a	T1999HI22
Individual Supports (Licensed Setting)	Tier A	\$70.52	Daily	n/a	07	H2016HI52
	Tier A / Acuity Differentiated	\$149.84	Daily	n/a	07	H2016HIU1
	Tier B	\$141.04	Daily	n/a	07	H2016HIUS
	Tier B / Acuity Differentiated	\$299.68	Daily	n/a	07	H2016HIU2
	Tier C	\$235.07	Daily	n/a	07	H2016HIUR
	Tier C / Acuity Differentiated	\$499.46	Daily	n/a	07	H2016HIU3
	Tier D	\$329.10	Daily	n/a	07	H2016HIUQ
	Tier D / Acuity Differentiated	\$699.25	Daily	n/a	07	H2016HIU4
	Tier E	\$423.13	Daily	n/a	07	H2016HIUP
Tier E / Acuity Differentiated	\$899.04	Daily	n/a	07	H2016HIU5	

R&C = Reasonable and Customary

\* Use of Tier and Acuity Differentiated rates are determined through completion of the New Jersey Comprehensive Assessment Tool (NJ CAT)

\*\* Waiver Program: Code "46" refers to the Supports Program under the Comprehensive Medicaid Waiver and Code "07" refers to the Division of Developmental Disabilities Community Care Waiver (CCW)



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Individual Supports (Own Home)	Base	\$7.01	15 Minutes	n/a	07	H2016HI
	Acuity Differentiated	\$11.89	15 Minutes	n/a	07	H2016HI22
	Self-Directed Employee	R&C	15 Minutes	n/a	07	H2016HIU8
Interpreter Services	American Sign Language (ASL)	\$16.25	15 Minutes	46	n/a	T1013HI22
	Other - Non-ASL	\$6.09	15 Minutes	46	n/a	T1013HI
	Self-Directed Employee	R&C	15 Minutes	46	n/a	T1013HI52
Natural Supports Training		R&C	15 Minutes	46	n/a	S5110HI
Occupational Therapy	Individual	\$26.61	15 Minutes	46	07	97535HI
	Group - Blended	\$7.60	15 Minutes	46	07	97535HIUN
Personal Emergency Response System (PERS)	Purchase / Installation / Testing	R&C	Single	46	07	S5160HI
	Response Center Monitoring	R&C	Month	46	07	S5161HI
Physical Therapy	Individual	\$27.58	15 Minutes	46	07	S8990HI
	Group - Blended	\$7.88	15 Minutes	46	07	S8990HIUN
Prevocational Training	Individual	\$12.73	15 Minutes	46	07	T2015HI22
	Tier A - Group of 2-8	\$2.68	15 Minutes	46	07	T2015HIUS
	Tier B - Group of 2-8	\$3.40	15 Minutes	46	07	T2015HIUR
	Tier C - Group of 2-8	\$4.24	15 Minutes	46	07	T2015HIUQ
	Tier D - Group of 2-8	\$6.37	15 Minutes	46	07	T2015HIUP
	Tier E - Group of 2-8	\$8.49	15 Minutes	46	07	T2015HIUN
Respite	Base	\$4.78	15 Minutes	46	07	T1005HI
	Camp - Overnight	\$76.40	Daily	46	07	T2036HI
	In-Home (CCR Only)	\$141.04	Daily	46	07	S9125HI
	Self-Directed Employee	R&C	Single	46	07	T1005HI52
Speech, Language and Hearing Therapy	Individual	\$25.99	15 Minutes	46	07	92507HI
	Group - Blended	\$7.43	15 Minutes	46	07	92507HIUN
Support Coordination	Per Person / Per Month	\$239.81	Month	46	07	T2024HI
Supported Employment	Individual	\$13.25	15 Minutes	46	07	T2019HI
	Tier A - Group of 2-8	\$2.79	15 Minutes	46	07	T2019HIUS
	Tier B - Group of 2-8	\$3.53	15 Minutes	46	07	T2019HIUR
	Tier C - Group of 2-8	\$4.42	15 Minutes	46	07	T2019HIUQ
	Tier D - Group of 2-8	\$6.62	15 Minutes	46	07	T2019HIUP
	Tier E - Group of 2-8	\$8.83	15 Minutes	46	07	T2019HIUN
Supports Brokerage	Base	\$6.09	15 Minutes	46	n/a	T2041HI22
	Self-Directed Employee	R&C	15 Minutes	46	n/a	T2041HIU7
Transportation	Transportation Provider / Self-Directed Employee	\$0.74	Mile	46	07	A0090HI22
Vehicle Modifications		R&C	Single	46	07	T2039HI

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