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# IDAHO DEPARTMENT OF HEALTH & WELFARE

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## MEDICAID INFORMATION RELEASE MA22-09

**To:** Medicaid Providers

**From:** Juliet Charron, Administrator

**Subject:** Change in Reimbursement for Adult DD, A&D, and PAA services

The table below summarizes the changes to reimbursement for services rendered by an Adult Developmental Disability (DD) Services provider. These rates will be effective July 1, 2022 and posted to the [Idaho Medicaid Numerical Fee Schedule](#).

Adult Developmental Disability (DD) Services			
Codes	Description	Unit	Rate
S5100	Adult Day Health	15 Minute	\$2.79
H2000	Developmental Therapy Evaluation	15 Minute	\$16.95
97537	Home/Community - Individual and/or Group Developmental Therapy for Adults	15 Minute	\$6.26
H2032	Center Based - Individual and/or Group Developmental Therapy for Adults	15 Minute	\$4.17

The table below summarizes the changes to reimbursement rates for services rendered by a Personal Assistance Agency (PAA). These rates will not be applicable to Adult DD providers. These rates will be effective July 1, 2022 and posted to the [Idaho Medicaid Numerical Fee Schedule](#).

Personal Assistance Agency (PAA) Services			
Codes	Description	Unit	Rate
T1019	Personal Care Services	15 Minute	\$5.28
S5125	Attendant Care	15 Minute	\$5.28
S5130	Homemaker Service	15 Minute	\$4.74
S5120	Chore Service	15 Minute	\$4.47

Personal Assistance Agency (PAA) Services			
Codes	Description	Unit	Rate
S5135	Companion Service	15 Minute	\$4.99
T1005	Respite Service	15 Minute	\$4.99

The tables below summarize the changes to reimbursement rates for Home and Community Based (HCBS) services rendered by an approved rendering provider. These rates will be effective the later of July 1, 2022 or upon approval by the Centers for Medicare & Medicaid Services (CMS). Once approved, these codes and rates will be posted to the [Idaho Medicaid Numerical Fee Schedule](#).

Adult Developmental Disability Services			
Codes	Description	Unit	Rate
T2033 HB	Supported Living - Level 1	Per Diem	\$229.46
T2033 HQ HB	Supported Living - Level 2	Per Diem	\$295.02
T2033 TF HB	Supported Living - Level 3	Per Diem	\$377.58
T2033 TT HB	Supported Living - Level M/B	Per Diem	\$613.52
T2017 HB	Supported Living - Individual (Hourly)	15 Minute	\$7.54
T2017 HQ HB	Supported Living - Group (Hourly)	15 Minute	\$4.10
T2017 TG HB	Supported Living - 2:1 - (Hourly)	15 Minute	\$12.55
T2033 TG HB	Supported Living - 2:1 Daily	Per Diem	\$1,044.62
T2047 HB	Career Planning Services - Individual	15 Minute	\$14.80
T2019 HB	Prevocational Services - Individual	15 Minute	\$14.80
T2019 HQ HB	Prevocational Services - Group (1:3)	15 Minute	\$4.93
T2021 HB	Community Habilitation 1:1	15 Minute	\$10.84
T2021 TF HB	Community Habilitation 1:2	15 Minute	\$5.42
T2021 HQ HB	Community Habilitation 1:3	15 Minute	\$3.61
T2021 TT HB	Community Habilitation 2:1	15 Minute	\$16.79
A0080 SE	Non-Medical Transportation	Per Mile	\$0.56

Aged & Disabled (A&D) Services			
Codes	Description	Unit	Rate
T2033 HC	Supported Living - Level 1	Per Diem	\$229.46
T2033 HQ HC	Supported Living - Level 2	Per Diem	\$295.02
T2033 TF HC	Supported Living - Level 3	Per Diem	\$377.58
T2033 TT HC	Supported Living - Level M/B	Per Diem	\$613.52
T2017 HC	Supported Living - Individual (Hourly)	15 Minute	\$7.54
T2017 HQ HC	Supported Living - Group (Hourly)	15 Minute	\$4.10
T2017 TG HC	Supported Living - 2:1 - (Hourly)	15 Minute	\$12.55
T2033 TG HC	Supported Living - 2:1 Daily	Per Diem	\$1,044.62

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If you have questions about how these rates were developed, please contact the Office of Reimbursement in the Idaho Division of Medicaid at (208) 287-1180 or email [MedicaidReimTeam@dhw.idaho.gov](mailto:MedicaidReimTeam@dhw.idaho.gov).

Thank you for participating in the Idaho Medicaid Program.

JC/as