Developmental Disabilities

COLORADO Department of Health Care Policy & Financing

Rates Effective April 1		lune 3	80, 20	21						Policy & Financing		
Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Pre-COVID Rate Effective 07/01/2020	Enl R Eff	COVID nanced Rates fective 01/2021	Unit Value	Comments		
Behavioral Services												
Behavioral Line Staff	H2019	U3				\$ 7.23	\$	7.23	15 Minutes	Maximum of 960 units pe Service Plan year.		
Behavioral Consultation	H2019	U3	22	TG		\$ 25.54	\$	25.54	15 Minutes	Maximum of 80 units per Service Plan year.		
Behavioral Counseling	H2019	U3	TF	TG		\$ 25.54	\$	25.54	15 Minutes	Maximum of 208 combined units of		
Behavioral Counseling, Group	H2019	U3	TF	HQ		\$ 8.61	\$	8.61	15 Minutes	Individual and Group Counseling services per Service Plan year.		
Behavioral Plan Assessment	T2024	U3	22			\$ 25.54	\$	25.54	15 Minutes	Maximum of 40 units and one Behavior Plan Assessment per Service Plan year.		
Service Plan year. Maximoservices, and Supported I	Employme	ent per	Service	e Plan Tier 2	year. : Tradi	tional/Curren	t Mod	el				
Specialized Habilitation	T	Прога	l De C	l I	i virtu	1		or the pt	ublic health eme	I		
Level 1	T2021	U3	HQ			\$ 2.57	\$	3.33	15 Minutes			
Specialized Habilitation Level 2	T2021	U3	22	HQ		\$ 2.83	\$	3.66	15 Minutes			
Specialized Habilitation Level 3	T2021	U3	TF	HQ		\$ 3.15	\$	4.08	15 Minutes			
Specialized Habilitation Level 4	T2021	U3	TF	22	HQ	\$ 3.71	\$	4.80	15 Minutes			
Specialized Habilitation Level 5	T2021	U3	TG	HQ		\$ 4.59	\$	5.94	15 Minutes			
Specialized Habilitation Level 6	T2021	U3	TG	22	HQ	\$ 6.59	\$	8.53	15 Minutes			
Specialized Habilitation Level 7	T2021	U3	SC	HQ		\$ 10.38	\$		15 Minutes			
Tier 3: Individual (All Support Levels) Must be delivered in person.												
Specialized Habilitation, All Support Levels	S5100	U3				\$ 5.36		6.94	15 Minutes			

			Tier 2:	Tradi	tional/Current	Model
0	!	 .: L				

Service	Services may temporarily be delivered virtually through the end of the public health emergency.													
Supported Community Connections Level 1	T2021	U3				\$	3.13	\$	4.05	15 Minutes				
Supported Community Connections Level 2	T2021	U3	22			\$	3.42	\$	4.43	15 Minutes				
Supported Community Connections Level 3	T2021	U3	TF			\$	3.87	\$	5.01	15 Minutes				
Supported Community Connections Level 4	T2021	U3	TF	22		\$	4.44	\$	5.75	15 Minutes				

Version: 1.4 Date: 01/18/2022



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COLORADO Department of Health Care Policy & Financing

Rates Effective April 1, 2021-June 30, 2021

Service Description Supported Community	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Eff 07/0	e-COVID Rate fective 01/2020	En Ef	COVID hanced Rates ffective /01/2021	Unit Value	Comments
Connections Level 5	T2021	U3	TG			\$	5.35	\$	6.93	15 Minutes	
Supported Community Connections Level 6	T2021	U3	TG	22		\$	7.03	\$	9.10	15 Minutes	
Supported Community Connections Level 7	T2021	U3	SC			\$	10.38	\$	13.44	15 Minutes	
			Ti			•	II Suppo red in per		vels)		
Supported Community Connections, All Support Levels	S5100	U3	НВ			\$	7.03		9.10	15 Minutes	
Dental Services											•
Basic	D2999	U3					-		-	Dollar	Please refer to DIDD Dental Fee Schedule for
Major	D2999	U3	22				-		-	Dollar	rates
Home Delivered Meals	S5170	U3				\$	11.45	\$	11.45	Per Meal	2 Meals per day, 14 meals per week; Available up to 365 after enrollment
Non-Medical Transportat Maximum of 508 units (trip		ervice P	lan yea	ar (all n	nileage	inclu	iding publ	lic cc	onveyance	·).	
Mileage Band 1 (0-10 Miles)	T2003	U3				\$	6.58	\$	8.38	1 Trip	
Mileage Band 2 (11-20 Miles)	T2003	U3	22			\$	13.77	\$	17.54	1 Trip	
Mileage Band 3 (Over 20 Miles)	T2003	U3	TF			\$	20.97	\$	26.71	1 Trip	
Other (public conveyance)	T2004	U3				\$	1.00	\$	1.00	Dollar	Bus passes or other public conveyance may be used only when equivalent to or more cost effective than the applicable mileage range.
Peer Mentorship	H2015	U3				\$	5.92	\$	5.92	15 minutes	Available for 365 days after enrollment
Prevocational Services Maximum of 4,800 combin Service Plan year. Maximu Services, and Supported E	ım of 7,1	12 com	bined u	units of	Specia						vocational Services per
Prevocational Services Level 1	T2015	U3	HQ			\$	2.57	\$	2.62	15 Minutes	
Prevocational Services Level 2	T2015	U3	22	HQ		\$	2.83	\$	2.89	15 Minutes	
Prevocational Services Level 3	T2015	U3	TF	HQ		\$	3.15	\$	3.22	15 Minutes	
Prevocational Services Level 4	T2015	U3	TF	22	HQ	\$	3.71	\$	3.79	15 Minutes	



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Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Ef	e-COVID Rate fective 01/2020	En I Ef	COVID hanced Rates fective 01/2021	Unit Value	Comments
Prevocational Services Level 5	T2015	U3	TG	HQ		\$	4.59	\$	4.69	15 Minutes	
Prevocational Services Level 6	T2015	U3	TG	22	HQ	\$	6.59	\$	6.73	15 Minutes	
Residential Habilitation,	Outside	Denve	r Coun	ty							
Group Residential Services and Supports- Level 1	T2016	U3	HQ			\$	116.82	\$	119.28	Day	
Group Residential Services and Supports- Level 2	T2016	U3	22	HQ		\$	140.71	\$	143.68	Day	
Group Residential Services and Supports- Level 3	T2016	U3	TF	HQ		\$	159.22	\$	162.58	Day	
Group Residential Services and Supports- Level 4	T2016	U3	TF	22	H	\$	181.66	\$	185.49	Day	
Group Residential Services and Supports- Level 5	T2016	U3	TG	HQ		\$	198.98	\$	203.18	Day	
Group Residential Services and Supports- Level 6	T2016	U3	TG	22	HQ	\$	231.12	\$	236.00	Day	
Group Residential Services and Supports- Level 7	T2016	U3	sc	HQ		*NF	₹	*NF	₹	Day	
Individual Residential Services and Supports- Level 1	T2016	U3				\$	70.78	\$	72.27	Day	
Individual Residential Services and Supports- Level 2	T2016	U3	22			\$	114.35	\$	116.77	Day	
Individual Residential Services and Supports- Level 3	T2016	U3	TF			\$	139.74	\$	142.69	Day	
Individual Residential Services and Supports- Level 4	T2016	U3	TF	22		\$	170.12	\$	173.71	Day	
Individual Residential Services and Supports- Level 5	T2016	U3	TG			\$	195.50	\$	199.63	Day	
Individual Residential Services and Supports- Level 6	T2016	U3	TG	22		\$	245.69	\$	250.87	Day	
Individual Residential Services and Supports- Level 7	T2016	U3	SC			*NF	₹	*NF	₹	Day	



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·	, 2021-3		-, -								
Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Ef	e-COVID Rate ffective 01/2020	En I Ef	COVID hanced Rates fective 01/2021	Unit Value	Comments
Individual Residential Services and Supports/Host Home- Level 1	T2016	U3	ТТ			\$	65.65	\$	67.03	Day	
Individual Residential Services and Supports/Host Home- Level 2	T2016	U3	22	П		\$	106.06	\$	108.30	Day	
Individual Residential Services and Supports/Host Home- Level 3	T2016	U3	TF	TT		\$	129.58	\$	132.32	Day	
Individual Residential Services and Supports/Host Home- Level 4	T2016	U3	TF	22	TT	\$	157.79	\$	161.12	Day	
Individual Residential Services and Supports/Host Home- Level 5	T2016	U3	TG	тт		\$	181.30	\$	185.12	Day	
Individual Residential Services and Supports/Host Home- Level 6	T2016	U3	TG	22	тт	\$	227.87	\$	232.68	Day	
Individual Residential Services and Supports/Host Home- Level 7	T2016	U3	SC	тт		*NF	₹	*NF	₹	Day	
Residential Habilitation,	Denver C	County								•	
Group Residential Services and Supports- Level 1	T2016	U3	HQ			\$	122.73	\$	125.32	Day	
Group Residential Services and Supports- Level 2	T2016	U3	22	HQ		\$	148.24	\$	151.37	Day	
Group Residential Services and Supports- Level 3	T2016	U3	TF	HQ		\$	168.40	\$	171.95	Day	
Group Residential Services and Supports- Level 4	T2016	U3	TF	22	HQ	\$	192.96	\$	197.03	Day	
Group Residential Services and Supports- Level 5	T2016	U3	TG	HQ		\$	212.65	\$	217.14	Day	
Group Residential Services and Supports- Level 6	T2016	U3	TG	22	HQ	\$	248.70	\$	253.95	Day	
Group Residential Services and Supports- Level 7	T2016	U3	sc	HQ		\$	-	*NF	₹	Day	



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Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Pre-COVID Rate Effective 07/01/2020	COVID Enhanced Rates Effective 04/01/2021	Unit Value	Comments
Individual Residential Services and Supports- Level 1	T2016	U3				\$ 75.44	\$ 77.03	Day	
Individual Residential Services and Supports- Level 2	T2016	U3	22			\$ 122.50	\$ 125.08	Day	
Individual Residential Services and Supports- Level 3	T2016	U3	TF			\$ 150.57	\$ 153.75	Day	
Individual Residential Services and Supports- Level 4	T2016	U3	TF	22		\$ 184.52	\$ 188.41	Day	
Individual Residential Services and Supports- Level 5	T2016	U3	TG			\$ 213.67	\$ 218.18	Day	
Individual Residential Services and Supports- Level 6	T2016	U3	TG	22		\$ 270.88	\$ 276.60	Day	
Individual Residential Services and Supports- Level 7	T2016	U3	sc			*NR	*NR	Day	
Individual Residential Services and Supports/Host Home- Level 1	T2016	U3	Π			\$ 69.58	\$ 71.05	Day	
Individual Residential Services and Supports/Host Home- Level 2	T2016	U3	22	ТТ		\$ 112.97	\$ 115.35	Day	
Individual Residential Services and Supports/Host Home- Level 3	T2016	U3	TF	TT		\$ 138.78	\$ 141.71	Day	
Individual Residential Services and Supports/Host Home- Level 4	T2016	U3	TF	22	П	\$ 170.09	\$ 173.68	Day	
Individual Residential Services and Supports/Host Home- Level 5	T2016	U3	TG	TT		\$ 196.90	\$ 201.05	Day	
Individual Residential Services and Supports/Host Home- Level 6	T2016	U3	TG	22	TT	\$ 249.62	\$ 254.89	Day	
Individual Residential Services and Supports/Host Home- Level 7 Specialized Medical Equi	T2016	U3	SC	TT		*NR	*NR	Day	



Developmental Disabilities

COLORADO Department of Health Care Policy & Financing

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Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	E	Pre-COVID Rate Effective 07/01/2020		COVID Enhanced Rates Effective 4/01/2021	Unit Value	Comments
Disposable Supplies	T2028	U3				\$	1.00	\$	1.00	Dollar	
Equipment	T2029	U3				\$	1.00	\$	1.00	Dollar	
Supported Employment The maximum Supported I Habilitation, Supported Co											
Job Coaching, Group- Level 1	T2019	U3	HQ			\$	3.44	\$	4.45	15 Minutes	
Job Coaching, Group- Level 2	T2019	U3	22	HQ		\$	3.78	\$	4.89	15 Minutes	
Job Coaching, Group- Level 3	T2019	U3	TF	HQ		\$	4.20	\$	5.44	15 Minutes	
Job Coaching, Group- Level 4	T2019	U3	TF	22	HQ	\$	4.86	\$	6.29	15 Minutes	
Job Coaching, Group- Level 5	T2019	U3	TG	HQ		\$	5.79	\$	7.50	15 Minutes	
Job Coaching, Group- Level 6	T2019	U3	TG	22	HQ	\$	7.57	\$	9.80	15 Minutes	
Job Coaching-Individual	T2019	U3	sc			\$	14.20	\$	18.39	15 Minutes	
Job Development-Group	H2023	U3	HQ			\$	4.53	\$	5.87	15 Minutes	
Job Development, Individual-Levels 1-2	H2023	U3				\$	14.20	\$	18.39	15 Minutes	
Job Development, Individual-Levels 3-4	H2023	U3	22			\$	14.20	\$	18.39	15 Minutes	
Job Development, Individual-Levels 5-6	H2023	U3	TF			\$	14.20	\$	18.39	15 Minutes	
Job Placement	H2024	U3				\$	1.00	\$		Dollar	
Job Placement Group	H2024	U3	HQ			\$	1.00	\$	1.00	Dollar	
Community Transition S	ervices										
Coordinator	T2038	U3				\$	7.66	\$	7.66	15 minutes	40 units (10 hours); available up to 30 days after enrollment
Items Purchased	A9900	U3				\$	1,500.00	\$	1,500.00	One Time Payment	Up to \$2,000.00 by request; available up to 30 days after enrollment
Vision	V2799	U3				\$	1.00	\$	1.00	Dollar	

	Legend
NR*	Individually approved DDD rate
22	(CPT Defn: Increased procedural services)
HB	Adult program, non-geriatric
HQ	Group Setting
SC	Medically Necessary Service or Supply
TF	Intermediate Level of Care
TG	Complex/High Tech Level of Care
TT	Individualized service provided to more one patient in the same setting
U3	Developmentally Disabled (HCPCS Defn: Medicaid Level of Care 1, as defined by each state)



Supported Living Services



Rates Effective April 1, 2021-June 30, 2021

									COVID		
Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	F Eff	-COVID Rate ective 01/2020	Er E	COVID hanced Rates ffective /01/2021	Unit Value	Comments
Assistive Technology	T2035	U8				\$	1.00	\$	1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24).
Behavioral Services											
Behavioral Line Staff	H2019	U8				\$	7.23	\$	7.23	15 Minutes	Maximum of 960 units per Service Plan year.
Behavioral Consultation	H2019	U8	22	TG		\$	25.54	\$	25.54	15 Minutes	Maximum of 80 units per Service Plan year.
Behavioral Counseling	H2019	U8	TF	TG		\$	25.54	\$	25.54	15 Minutes	Maximum of 208 combined units of Individual and Group
Behavioral Counseling Group	H2019	U8	TF	HQ		\$	8.61	\$	8.61	15 Minutes	Counseling services per Service Plan year.
Behavioral Plan Assessment	T2024	U8	22			\$	25.54	\$	25.54	15 Minutes	Maximum of 40 units and one Behavior Plan Assessment per Service Plan year.
Consumer Directed Atter	ndant Su	pport S	Service	es (CD.	ASS), (Outsi	de Denv	er C	ounty		
CDASS Homemaker	T2025	U8				\$	4.44	\$	4.44	15 Minutes	
CDASS Enhanced Homemaker	T2025	U8				\$	7.21	\$	7.21	15 Minutes	
CDASS Personal Care	T2025	U8				\$	5.85	\$	5.85	15 Minutes	
CDASS Health Maintenance	T2025	U8	SE			\$	7.43	\$	7.43	15 Minutes	
Consumer Directed Atter			Service	es (CD	ASS), I		er Count				
CDASS Homemaker	T2025	U8				\$	-	\$	4.59	15 Minutes	
CDASS Enhanced Homemaker	T2025					\$	-	\$		15 Minutes	
CDASS Personal Care CDASS Health Maintenance	T2025 T2025	U8 U8	SE			\$	-	\$		15 Minutes 15 Minutes	
CDASS Per Member Per	Month P	v FMS	Vendo	or				_			
Acumen- FEA	T2040	U8	. 5.140			\$	85.00	\$	85.00	Month	
Public Partnerships, LLC- FEA	T2040	U8				\$	103.21	\$		Month	
Palco- FEA	T2040	U8				\$	85.00	\$	85.00	Month	
Day Habilitation Maximum of 7,112 combin Supported Employment pe	ed units o	of Spec		Habilit	ation, S					•	tional Services, and
Service	es may te	mporar	rily be d				/Current			ublic health eme	rgency.
Specialized Habilitation Level 1	T2021	U8	HQ			\$	2.57	\$	3.33	15 Minutes	

Version: 1.4

Our mission is to Improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

Date: 01/18/2022





COLORADO Department of Health Care Policy & Financing

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Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	F Eff	-COVID Rate ective 01/2020	En F	COVID hanced Rates fective 01/2021	Unit Value	Comments
Specialized Habilitation Level 2	T2021	U8	22	HQ		\$	2.83	\$	3.66	15 Minutes	
Specialized Habilitation Level 3	T2021	U8	TF	HQ		\$	3.15	\$	4.08	15 Minutes	
Specialized Habilitation Level 4	T2021	U8	TF	22	HQ	\$	3.71	\$	4.80	15 Minutes	
Specialized Habilitation Level 5	T2021	U8	TG	HQ		\$	4.59	\$	5.94	15 Minutes	
Specialized Habilitation Level 6	T2021	U8	TG	22	HQ	\$	6.59	\$		15 Minutes	
			Ti			•	I l Suppo ed in pers		vels)		
Specialized Habilitation, All Support Levels	S5100	U8				\$	5.36	\$	6.94	15 Minutes	
Service	es may te	mporai	rily be d				/Current			ıblic health emei	rgency.
Supported Community Connections Level 1	T2021	U8				\$	3.13	\$	4.05	15 Minutes	
Supported Community Connections Level 2	T2021	U8	22			\$	3.42	\$	4.43	15 Minutes	
Supported Community Connections Level 3	T2021	U8	TF			\$	3.87	\$	5.01	15 Minutes	
Supported Community Connections Level 4	T2021	U8	TF	22		\$	4.44	\$	5.75	15 Minutes	
Supported Community Connections Level 5	T2021	U8	TG			\$	5.35	\$	6.93	15 Minutes	
Supported Community Connections Level 6	T2021	U8	TG	22		\$	7.03	\$	9.10	15 Minutes	
			Ti				II Suppo		vels)		
Supported Community Connections, All Support Levels	S5100	U8	НВ			\$	7.03		9.10	15 Minutes	
Dental Services											
Basic	D2999	U8					-		-	Dollar	Please refer to DIDD Dental Fee Schedule for
Major	D2999	U8	22				-		-	Dollar	rates
Home Accessibility Adaptations	S5165	U8				\$	1.00	\$	1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24).

Version: 1.4

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

Www.colorado.gov/hcpf





Rates Effective April 1, 2021-June 30, 2021



Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Ef	e-COVID Rate fective 01/2020	Er E	COVID hanced Rates ffective /01/2021	Unit Value	Comments
Home Delivered Meals	S5170	U8				\$	11.45	\$	11.45	Per Meal	2 Meals per day, 14 meals per week; Available up to 365 after enrollment
Homemaker											
Basic, Outside Denver County	S5130	U8				\$	4.45	\$	4.54	15 Minutes	
Enhanced, Outside Denver County	S5130	U8	22			\$	7.21	\$		15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.
Basic, Denver County	S5130	U8				\$	5.68	\$	5.80	15 Minutes	
Enhanced, Denver County	S5130	U8	22			\$	7.93	\$	8.10	15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.
Life Skills Training	H2014	U8				\$	11.91	\$	11.91	15 minutes	24 units (6 hours) per day; up to 160 units (40 hours) per week. Available for 365 days after enrollment
Mentorship	H2021	U8				\$	10.91	\$	11.14	15 Minutes	Maximum of 192 units per Service Plan year.
Non-Medical Transportat Maximum of 508 units (trip		rvica P	lan ves	ar (all n	ممحمانه	hand	de includi	na ni	ublic conv	evance)	
Mileage Band 1 (0-10 Miles)	T2003		lan you	ar (dii ii	liioago	\$	6.58	T		1 Trip	
Mileage Band 2 (11-20 Miles)	T2003	U8	22			\$	13.77	\$	17.54	1 Trip	
Mileage Band 3 (Over 20 Miles)	T2003	U8	TF			\$	20.97	\$	26.71	1 Trip	
Other (public conveyance)	T2004	U8				\$	1.00	\$	1.00	Dollar	Bus passes or other public conveyance may be used only when equivalent to or more cost effective than the applicable mileage range.
Mileage-Not in Day Program	T2003	U8	SC			\$	6.58	\$	6.58	4 Trips per week	All Distances. Maximum of 208 units (4 trips per week) per Service Plan year.
Peer Mentorship	H2015	U8				\$	5.92	\$	5.92	15 minutes	Available for 365 days after enrollment





Rates Effective April 1, 2021-June 30, 2021

Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	E	re-COVID Rate ffective /01/2020	En Ef	COVID hanced Rates ffective //01/2021	Unit Value	Comments
Personal Care Services											
Personal Care, Outside Denver County	T1019	U8				\$	5.78	\$	5.90	15 Minutes	
Personal Care, Denver County	T1019	U8				\$	6.53	\$	6.67	15 Minutes	
Personal Emergency Response System (PERS)	S5161	U8				\$	1.00	\$	1.00	Dollar	
Prevocational Services Maximum of 7,112 combined units of Specialized Habilitation, Supported Community Connections, Prevocational Services, and Supported Employment per Service Plan year.											
Prevocational Services Level 1	T2015	U8	HQ			\$	2.57	\$	2.62	15 Minutes	
Prevocational Services Level 2	T2015	U8	22	HQ		\$	2.83	\$	2.89	15 Minutes	
Prevocational Services Level 3	T2015	U8	TF	HQ		\$	3.15	\$	3.22	15 Minutes	
Prevocational Services Level 4	T2015	U8	TF	22	HQ	\$	3.71	\$	3.79	15 Minutes	
Prevocational Services Level 5	T2015	U8	TG	HQ		\$	4.59	\$	4.69	15 Minutes	
Prevocational Services Level 6	T2015	U8	TG	22	HQ	\$	6.59	\$	6.73	15 Minutes	
Professional Services				1						I . =	
Massage Therapy	97124	U8				\$	19.10	\$	19.10	15 Minutes	
Movement Therapy Bachelors	G0176	U8				\$	15.93	\$	15.93	15 Minutes	
Movement Therapy Masters	G0176	U8	22			\$	23.34	\$	23.34	15 Minutes	
Hippotherapy Individual Hippotherapy Group	S8940 S8940	U8 U8	HQ			\$	21.22 9.02	\$	21.22	15 Minutes 15 Minutes	
Recreational Facility Fees / Passes	S5199	U8	TIQ			\$	1.00			Dollar	
Respite Care											
Individual, Base Rate	S5150	U8				\$	5.64	\$	5.76	15 Minutes	Use Individual Day rate
Indiviual, Rate Enhancement	S5150	U8	TU			\$	-	\$	1.41	15 Minutes	when Respite services exceed 40 units (10 hours) in a 24 hour period.
Individual Day, Base Rate	S5151	U8				\$	225.72	\$	230.48	Day	
Individual Day, Rate Enhancement	S5151	U8	TU			\$	-	\$	56.43	Day	
Group	S5151	U8	HQ			\$	1.00	\$	1.00	Dollar	Group Respite rates may
Camp (Group, Overnight)	T2036	U8				\$	1.00	\$	1.00	Dollar	not exceed the rate paid for Individual Respite.



COLORADO Department of Health Care Policy & Financing

Rates Effective April 1, 2021-June 30, 2021

Service Description Specialized Medical Equi	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Е	re-COVID Rate Effective 7/01/2020	E	COVID Inhanced Rates Effective 4/01/2021	Unit Value	Comments
•	•	_	plies			Φ.	4.00	Φ.	4.00	In-II	
Disposable Supplies	T2028	U8				\$	1.00	\$ 6		Dollar	
Equipment	T2029	U8				\$	1.00	\$	1.00	Dollar	
Supported Employment Maximum combined units of Specialized Habilitation, Supported Community Connections, Prevocational and Supported Employment is 7,112 units per plan year.											
Job Coaching, Group- Level 1	T2019	U8	HQ			\$	3.44	\$	4.45	15 Minutes	
Job Coaching, Group- Level 2	T2019	U8	22	HQ		\$	3.78	\$	4.89	15 Minutes	
Job Coaching, Group- Level 3	T2019	U8	TF	HQ		\$	4.20	\$	5.44	15 Minutes	
Job Coaching, Group- Level 4	T2019	U8	TF	22	HQ	\$	4.86	\$	6.29	15 Minutes	
Job Coaching, Group- Level 5	T2019	U8	TG	HQ		\$	5.79	\$	7.50	15 Minutes	
Job Coaching, Group- Level 6	T2019	U8	TG	22	HQ	\$	7.57	\$	9.80	15 Minutes	
Job Coaching-Individual	T2019	U8	SC			\$	14.20	\$	18.39	15 Minutes	
Job Development-Group	H2023	U8	HQ			\$	4.53	\$	5.87	15 Minutes	
Job Development, Individual-Levels 1-2	H2023	U8				\$	14.20	\$	18.39	15 Minutes	
Job Development, Individual-Levels 3-4	H2023	U8	22			\$	14.20	\$	18.39	15 Minutes	
Job Development, Individual-Levels 5-6	H2023	U8	TF			\$	14.20	\$	18.39	15 Minutes	
Job Placement-Individual	H2024	U8				\$	1.00	\$	1.00	Dollar	
Job Placement-Group	H2024	U8	HQ			\$	1.00	\$	1.00	Dollar	
Community Transition Se	ervices										
Coordinator	T2038	U8				\$	7.66	\$	7.66	15 minutes	40 units (10 hours); available up to 30 days after enrollment
Items Purchased	A9900	U8				\$	1,500.00	\$	1,500.00	One Time Payment	Up to \$2,000.00 by request; available up to 30 days after enrollment
Vehicle Modifications	T2039	U8				\$	1.00	\$		Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24).
Vision	V2799	U8				\$	1.00	\$	1.00	Dollar	

Support Level Authorization Limits (SPAL)

Version: 1.4

Our mission is to Improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

Date: 01/18/2022





Rates Effective April 1, 2021-June 30, 2021

Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Pre-COVID Rate Effective 07/01/2020	COVID Enhanced Rates Effective 04/01/2021	Unit Value	Comments
Support Leve	el 1				\$	18,157.13			
Support Leve	el 2				\$:	24,250.08			
Support Leve	el 3				\$2	27,269.44			
Support Leve			\$	31,327.55					
Support Leve	el 5				\$:	37,746.10	·		
Support Level 6					\$-	49,473.58			

Overall Service Plan Limit
\$63,542.91

	Legend								
22	(CPT Defn: Increased procedural services)								
НВ	Adult program, non-geriatric								
HQ	Group Setting								
SC	Medically Necessary Service or Supply								
TF	Intermediate Level of Care								
TG	Complex/High Tech Level of Care								
TT	Individualized service provided to more one patient in the same setting								
U8	Supported Living Services (HCPCS Defn: Medicaid Level of Care 1, as defined by each state)								

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Children's Extensive Supports Waiver

COLORADO Department of Health Care Policy & Financing

Rates Effective April 1, 2021-June 30, 2021

Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Eff	Rate fective 01/2020		Rate ffective /01/2021	Unit Value	Comments
Adapted Therapeutic Rec	creationa	ıl Equi	pment	and Fo	ees						T
Equipment	T1999	U7				\$	1.00	\$	1.00	Dollar	Maximum \$1,000 units
Fees	S5199	U7				\$	1.00	\$	1.00	Dollar	per year (i.e., \$1,000.00 per year combined limit)
Assistive Technology	T2035	U7				\$	1.00	\$	1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24).
Community Connector	H2021	U7				\$	9.08	\$	9.27	15 Minutes	
Home Accessible Adaptations	S5165	U7				\$	1.00	\$	1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24).
Homemaker	•					•				•	•
Basic, Outside Denver County	S5130	U7				\$	4.45	\$	4.54	15 Minutes	
Enhanced, Outside Denver County	S5130	U7	22			\$	7.21	\$	7.36	15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.
Basic, Denver County	S5130	U7				\$	5.68	\$	5.80	15 Minutes	
Enhanced, Denver County	S5130	U7	22			\$	7.93	\$	8.10	15 Minutes	Requires a habilitative plan as described in the waiver or extraordinary cleaning due to individual behavioral or medical needs.
Parent Education	H1010	U7				\$	1.00	\$	1.00	Dollar	Maximum of \$1,000 per Service Plan year.
Professional Services											
Hippo Therapy	S8940	U7				\$	21.22	_		15 Minutes	
Hippo Therapy Group	S8940	U7	HQ			\$	9.02	_		15 Minutes	
Massage Movement Therapy-	97124	U7		-		\$	19.10	\$		15 Minutes	
Bachelors	G0176	U7				\$	15.93	\$	15.93	15 Minutes	
Movement Therapy- Masters	G0176	U7	22			\$	23.34	\$	23.34	15 Minutes	
Respite Maximum of 30 days and 1	1,880 add	litional	15 min	ute uni	ts per	Servic	e Plan ye	ear.			

Version: 1.5 Date: 10/10/2022





Rates Effective April 1, 2021-June 30, 2021

Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Ef	Rate fective 01/2020		Rate ffective /01/2021	Unit Value	Comments
Respite Services- Individual Base Rate	S5150	U7				\$	5.64	\$	5.76	15 Minutes	
Respite Services- Individual Rate Enhancement	S5150	U7	TU			\$	-	\$	1.41	15 Minutes	Use Individual Day rate when Respite services
Respite Services- Individual, Per Diem Base Rate	S5151	U7				\$	225.72	\$	230.48	Day	exceed 40 units (10 hours) in a 24 hour period.
Respite Services- Individual, Per Diem Rate Enhancement	S5151	U7	TU			\$	-	\$	56.43	Day	
Respite Services-Group	S5151	U7	HQ			\$	1.00	\$	1.00	Dollar	Group Respite rates may
Camp (Group, Overnight)	T2036	U7				\$	1.00	\$	1.00	Dollar	not exceed the rate paid for Individual Respite.
Specialized Medical Equi Services may be authorize	•		•	shed Co	CB thre	shol	ds, beyon	d wh	nich DDD	prior authorizatio	n is required.
Disposable Supplies	T2028	U7				\$	1.00	\$	1.00	Dollar	
Equipment	T2029	U7				\$	1.00	\$	1.00	Dollar	
Vehicle Modifications	T2039	U7				\$	1.00	\$	1.00	Dollar	Maximum of \$10,000 of Assistive Technology, Home Accessibility Adaptations, and Vehicle Modifications combined per Waiver Renewal Period (7/1/19 - 6/30/24).
Youth Day Services Services limited to clients ages 12 through 17. Limited to ten (10) hours per calendar day.											
Individual	T2027	U7				\$	5.64	\$	5.64	15 Minutes	
Group	T2027	U7	HQ			\$	1.88	\$	1.88	15 Minutes	

Overall Service Plan Limit
\$49,154.75

	Legend								
22	(CPT Defn: Increased procedural services)								
HQ	Group Setting								
HR	Relative providing care								
TF	Intermediate Level of Care								
TG	Complex/High Tech Level of Care								
U7	Children's Extensive Support								

Version: 1.5 Date: 10/10/2022



ADJUSTMENT TAE	BLE				
WAIVER TYPE	PERCENT	MULTIPLIER			
	CHANGE				
Across the Board Decrease Effect		020			
HCBS EBD	-1.000%	0.99000			
HCBS CMHS	-1.000%	0.99000			
HCBS BI	-1.000%	0.99000			
HCBS SCI	-1.000%	0.99000			
HCBS DD	-1.000%	0.99000			
HCBS SLS	-1.000%	0.99000			
HCBS/DDD/DHS CES	-1.000%	0.99000			
HCBS/DDD/DHS CLLI	-1.000%	0.99000			
HCBS/DDD/DHS CHCBS	-1.000%	0.99000			
HCBS/DDD/DHS CHRP	-1.000%	0.99000			
COVID-19 Related Increases Effective	e January 1,	, 2021			
Adult Day Services, All Levels	27.400%	1.27400			
Non-Medical Transportation, All Adult					
Waivers	27.400%	1.27400			
Specialized Habilitation, All Levels	27.400%	1.27400			
Supported Community Connections	27.400%	1.27400			
Supported Employment, All Levels	27.400%	1.27400			
American Rescue Plan Act (ARPA)	2.110%	1.02110			
American Rescue Plan Act (ARPA), Respite					
Services	25.000%	1.25000			

