

Home and Community Based Services:

Children's Habilitation Residential Program (CHRP) Waiver

Rates Effective July 1, 2020-June 30, 2021



Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 01/01/2020	Rate Effective 07/01/2020	Unit Value	Comments
Foster Home									
Foster Home Level 1	H0041	U9				\$ 56.67	\$ 56.10	Day	
Foster Home Level 2	H0041	U9	22			\$ 91.55	\$ 90.63	Day	
Foster Home Level 3	H0041	U9	TF			\$ 111.86	\$ 110.74	Day	
Foster Home Level 4	H0041	U9	TF	22		\$ 136.21	\$ 134.85	Day	
Foster Home Level 5	H0041	U9	TG			\$ 156.49	\$ 154.92	Day	
Foster Home Level 6	H0041	U9	TG	22		\$ 196.70	\$ 194.73	Day	
Group Home									
Group Home Level 1	T2016	U9				\$ 83.09	\$ 82.26	Day	
Group Home Level 2	T2016	U9	22			\$ 109.38	\$ 108.29	Day	
Group Home Level 3	T2016	U9	TF			\$ 128.86	\$ 127.57	Day	
Group Home Level 4	T2016	U9	TF	22		\$ 152.22	\$ 150.69	Day	
Group Home Level 5	T2016	U9	TG			\$ 168.17	\$ 166.48	Day	
Group Home Level 6	T2016	U9	TG	22		\$ 198.29	\$ 196.31	Day	
Intensive Support Services									
Wraparound Plan	H2021	U9	HI	TL		\$ 27.48	\$ 27.21	15 Minutes	
Prevention and Monitoring	H2021	U9	HI	HN		\$ 27.48	\$ 27.21	15 Minutes	
Child and Youth Mentorship	H2021	U9	HI	HM		\$ 7.61	\$ 7.53	15 Minutes	
Professional Services									
Hippo Therapy	S8940	U9				\$ 21.65	\$ 21.44	15 Minutes	
Hippo Therapy Group	S8940	U9	HQ			\$ 9.20	\$ 9.11	15 Minutes	
Movement Therapy-Bachelors	G0176	U9				\$ 16.26	\$ 16.10	15 Minutes	
Movement Therapy-Masters	G0176	U9	22			\$ 23.83	\$ 23.59	15 Minutes	
Massage Therapy	97124	U9				\$ 19.12	\$ 18.93	15 Minutes	
Respite Care									
Individual - In Family Home	S5150	U9	HA			\$ 5.40	\$ 5.35	15 Minutes	Use Individual Day rate when Respite services exceed 40 units (10 hours) in a 24 hour period. No more than 7 consecutive days per month and not to exceed 28 days in a calendar year.
Individual Day - In Family Home	S5151	U9	HA			\$ 213.72	\$ 211.58	Day	
Individual - In Residential Settings	S5150	U9	HI			\$ 5.40	\$ 5.35	15 Minutes	
Individual Day - In Residential Settings	S5151	U9	HI			\$ 213.72	\$ 211.58	Day	
Community Connector	H2021	U9				\$ 9.95	\$ 9.85	15 Minutes	Limited to 1040 units or 260 hours per year Effective November 30, 2020
Transition Support Services									
Wraparound Plan	H2021	U9	HA	TL		\$ 27.48	\$ 27.21	15 Minutes	
Prevention and Monitoring	H2021	U9	HA	HN		\$ 27.48	\$ 27.21	15 Minutes	
Child and Youth Mentorship	H2021	U9	HA	HM		\$ 7.61	\$ 7.53	15 Minutes	

Legend	
22	(CPT Defn: Increased procedural services)
HQ	Group Setting



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COLORADO
Department of Health Care
Policy & Financing

HR	Relative providing care
TF	Intermediate Level of Care
TG	Complex/High Tech Level of Care
U9	Children's Habilitation Residential Program





ADJUSTMENT TABLE		
WAIVER TYPE	PERCENT CHANGE	MULTIPLIER
Across the Board Decrease Effective July 1, 2020		
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 CHRPF	-1.000%	0.99000

