

**Home and Community Based Services:**

**Children with Life Limiting Illness (CLLI) Waiver  
(Previously the Pediatric Hospice Waiver)\***



**Rates Effective January 1, 2021-March 31, 2021**

Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 07/01/2020	Rate Effective 01/01/2021	Unit Value	Comments
<b>Expressive Therapy</b>									
Art and Play Therapy	H2032	UD	HA			\$ 16.18	\$ 16.18	15 Minutes	Combined maximum of 156 units (39 hours) for all Expressive Therapy services per Service Plan year.
Art and Play Therapy Group	H2032	UD	HA	HQ		\$ 9.05	\$ 9.05	15 Minutes	
Music Therapy	H2032	UD				\$ 16.18	\$ 16.18	15 Minutes	
Music Therapy Group	H2032	UD	HQ			\$ 9.05	\$ 9.05	15 Minutes	
<b>Integrative Therapy</b>									
Massage Therapy	97124	UD				\$ 18.06	\$ 18.06	15 Minutes	Maximum of 96 units (24 hours) per Service Plan year
<b>Palliative/Supportive Care Skilled</b>									
Care Coordination	G9012	UD				\$ 20.55	\$ 20.55	15 Minutes	
Pain and Symptom Management	S9123	UD				\$ 77.50	\$ 77.50	Hour	
<b>Respite Services</b>									
Unskilled(4 hours or less)	S5150	UD				\$ 5.50	\$ 5.50	15 Minutes	Combined maximum of 30 calendar days per Service Plan year for all Respite Care services.
Unskilled (4 hours or more)	S5151	UD				\$ 98.95	\$ 98.95	Day	
CNA (4 hours or less)	T1005	UD				\$ 7.21	\$ 7.21	15 Minutes	
CNA (4 hours or more)	S9125	UD				\$ 128.11	\$ 128.11	Day	
Skilled RN, LPN (4 hours or less)	T1005	UD	TD			\$ 15.68	\$ 15.68	15 Minutes	
Skilled RN, LPN (4 hours or more)	S9125	UD	TD			\$ 282.06	\$ 282.06	Day	
Camp (Group, Overnight)	T2037	UD				\$ 199.58	\$ 199.58	Day	
<b>Therapeutic Services</b>									
Bereavement Counseling	S0257	UD	HK			\$ 1,126.44	\$ 1,126.44	Lump Sum	One time lump sum payment per client.
Therapeutic Life Limiting Illness Support-Individual	S0257	UD				\$ 25.12	\$ 25.12	15 Minutes	Combined maximum of 392 units (98 hours) per Service Plan year.
Therapeutic Life Limiting Illness Support-Family	S0257	UD	HR			\$ 25.12	\$ 25.12	15 Minutes	
Therapeutic Life Limiting Illness Support-Group	S0257	UD	HQ			\$ 14.82	\$ 14.82	15 Minutes	

Legend	
HA	Child/adolescent program
HK	Specialized Mental Health services for high risk populations
HQ	Group Setting
HR	Relative providing care
TD	RN providing care
UD	Children with Life Limiting Illness



Home and Community Based Services:

Children's Home and Community Based Services (CHCBS) Waiver

Rates Effective January 1, 2021-March 31, 2021



Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 07/01/2020	Rate Effective 01/01/2021	Unit Value	Comments
Case Management	T1016	U5				\$ 8.85	\$ 8.85	15 minutes	
IHSS Health Maintenance, Outside Denver County	H0038	U5				\$ 7.44	\$ 7.44	15 minutes	
IHSS Health Maintenance, Denver County	H0038	U5				\$ -	\$ 7.57	15 minutes	

Legend	
U5	Children's HCBS



Home and Community Based Services:

Children's Habilitation Residential Program (CHRP) Waiver

Rates Effective January 1, 2021-March 31, 2021



Service Description	Proc Code	Mod #1	Mod #2	Mod #3	Mod #4	Rate Effective 07/01/2020	Rate Effective 01/01/2021	Unit Value	Comments
<b>Foster Home</b>									
Foster Home Level 1	H0041	U9				\$ 56.10	\$ 56.10	Day	
Foster Home Level 2	H0041	U9	22			\$ 90.63	\$ 90.63	Day	
Foster Home Level 3	H0041	U9	TF			\$ 110.74	\$ 110.74	Day	
Foster Home Level 4	H0041	U9	TF	22		\$ 134.85	\$ 134.85	Day	
Foster Home Level 5	H0041	U9	TG			\$ 154.92	\$ 154.92	Day	
Foster Home Level 6	H0041	U9	TG	22		\$ 194.73	\$ 194.73	Day	
<b>Group Home</b>									
Group Home Level 1	T2016	U9				\$ 82.26	\$ 82.26	Day	
Group Home Level 2	T2016	U9	22			\$ 108.29	\$ 108.29	Day	
Group Home Level 3	T2016	U9	TF			\$ 127.57	\$ 127.57	Day	
Group Home Level 4	T2016	U9	TF	22		\$ 150.69	\$ 150.69	Day	
Group Home Level 5	T2016	U9	TG			\$ 166.48	\$ 166.48	Day	
Group Home Level 6	T2016	U9	TG	22		\$ 196.31	\$ 196.31	Day	
<b>Residential Child Care Facility (RCCF)</b>									
RCCF Level 1	T2016	U9	HA			\$ -	\$ 510.35	Day	Effective 01/01/2021
RCCF Level 2	T2016	U9	HA	TJ		\$ -	\$ 531.95	Day	
RCCF Level 3	T2016	U9	HA	TF		\$ -	\$ 559.95	Day	
RCCF Level 4	T2016	U9	HA	TG		\$ -	\$ 589.00	Day	
RCCF Level 5	T2016	U9	HA	TT		\$ -	\$ 619.99	Day	
RCCF Level 6	T2016	U9	HA	22		\$ -	NR*	Day	
<b>Intensive Support Services</b>									
Wraparound Plan	H2021	U9	HI	TL		\$ 27.21	\$ 27.21	15 Minutes	
Prevention and Monitoring	H2021	U9	HI	HN		\$ 27.21	\$ 27.21	15 Minutes	
Child and Youth Mentorship	H2021	U9	HI	HM		\$ 7.53	\$ 7.53	15 Minutes	
<b>Professional Services</b>									
Hippo Therapy	S8940	U9				\$ 21.44	\$ 21.44	15 Minutes	
Hippo Therapy Group	S8940	U9	HQ			\$ 9.11	\$ 9.11	15 Minutes	
Movement Therapy-Bachelors	G0176	U9				\$ 16.10	\$ 16.10	15 Minutes	
Movement Therapy-Masters	G0176	U9	22			\$ 23.59	\$ 23.59	15 Minutes	
Massage Therapy	97124	U9				\$ 18.93	\$ 18.93	15 Minutes	
<b>Respite Care</b>									
Individual - In Family Home	S5150	U9	HA			\$ 5.35	\$ 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			\$ 211.58	\$ 211.58	Day	
Individual - In Residential Settings	S5150	U9	HI			\$ 5.35	\$ 5.35	15 Minutes	
Individual Day - In Residential Settings	S5151	U9	HI			\$ 211.58	\$ 211.58	Day	
Community Connector	H2021	U9				\$ 9.85	\$ 9.85	15 Minutes	Limited to 1040 units or 260 hours per year Effective November 30, 2020
<b>Transition Support Services</b>									
Wraparound Plan	H2021	U9	HA	TL		\$ 27.21	\$ 27.21	15 Minutes	



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Rates Effective January 1, 2021-March 31, 2021



Prevention and Monitoring	H2021	U9	HA	HN		\$ 27.21	\$ 27.21	15 Minutes	
Child and Youth Mentorship	H2021	U9	HA	HM		\$ 7.53	\$ 7.53	15 Minutes	

Legend	
22	(CPT Defn: Increased procedural services)
HA	Child/Adolescent Program
HQ	Group Setting
HR	Relative providing care
TF	Intermediate Level of Care
TG	Complex/High Tech Level of Care
TJ	Program Group, Child and/or Adolescent
TT	Individualized service provided to more than one patient in same setting
U9	Children's Habilitation Residential Program





<b>ADJUSTMENT TABLE</b>		
<b>WAIVER TYPE</b>	<b>PERCENT CHANGE</b>	<b>MULTIPLIER</b>
<b>Across the Board Decrease Effective July 1, 2020</b>		
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
<b>Travel Time Targeted Rate Increases Effective January 1, 2021</b>		
Agency Homemaker Services (Adult LTSS Waivers)	7.302%	1.07302
Agency Personal Care Services (Adult LTSS Waivers)	7.302%	1.07302
<b>COVID-19 Related Increases Effective January 1, 2021</b>		
Adult Day Services, All Levels	37.400%	1.37400
Alternative Care Facility	8.000%	1.08000
Brain Injury Supported Living Program	8.000%	1.08000
Group Residential Services and Supports, All Levels	8.000%	1.08000
Non-Medical Transportation, All Adult Waivers	37.400%	1.37400
Specialized Habilitation, All Levels	37.400%	1.37400
Supported Community Connections	37.400%	1.37400
Supported Employment, All Levels	37.400%	1.37400

