

**Elderly Waiver Services Paid**

Service Name	Service Unit	Procedure Code	Mod. 1	Mod. 2
Adult Day Service	15 Minutes	S5100		
Adult Day Service-FADS	15 Minutes	S5100	U7	
Adult Day Service	Daily	S5102		
Adult Day Services-FADS	Daily	S5102	U7	
Caregiver Training & Education	Session	S5116		
CDCS Background Check	One Print	T2040		
Chore Service	15 minutes	S5120		
Companion Service	15 Minutes	S5135		
Consumer Directed Community Supports (CDCS)	Per Service	T2028		
Customized Living Service	Monthly	T2030		
24 hour Customized Living Services	Monthly	T2030	TG	
Home Health Service Aide <b>Extended</b>	15 Minutes	T1004		
<b>Extended</b> Home Health Supplies/Equipment	Per Item	T2029		
<b>Extended</b> PCA 1:1 Ratio	15 Minutes	T1019	UC	
<b>Extended</b> PCA Care Assist. Shared 1:2 Ratio	15 Minutes	T1019	TT	UC
<b>Extended</b> PCA Care Assist. Shared 1:3 Ratio	15 Minutes	T1019	HQ	UC
Foster Care, Adult, Corporate	Monthly	S5141	HQ	
Foster Care, Adult, Family	Monthly	S5141	HQ	
Home Delivered Meals	1 meal per day	S5170		
Homemaker Services	15 Minutes	S5130		
Homemaker Services	Day	S5131		
<b>Extended</b> LPN Complex	15 Minutes	T1003	TG	UC

<b>Extended, LPN Regular</b>	15 Minutes	T1003	UC	
<b>Extended, LPN Shared 1:2 Ratio</b>	15 Minutes	T1003**	TT	UC
Modifications/Adaptations	Annual Limit	S5165		
Residential Care Services	Monthly	T2032		
Respite Certified Facility	Daily	H0045		
Respite Hospital, 24 hours	Daily	H0045		
Respite, in Home	15 Minutes	S5150		
Respite, in Home	Daily	S5151		
Respite Care Services, out of Home	15 Minutes	S5150	UB	
<b>Extended RN Complex***</b>	15 Minutes	T1002	TG	UC
<b>Extended RN Regular 1:1 Ratio</b>	15 Minutes	T1002	UC	
<b>Extended RN Shared 1:2 Ratio***</b>	15 Minutes	T1002	TT	UC
Transitional Services	Per Occurance	T2038		
Transportation, Mileage (non commercial vehicle)	Per Mile	S0215	UC	
Transportation	One Way Trip	T2003 UC		