

**DWIHN**  
**I/DD Residential - Contract Program**  
**for In-Home Supports in Unlicensed settings and Specialized Residential Group Homes**  
**Effective 10-01-2022 -Version 2**

This version includes the 5% rate increase that was effective on 10-01-2022, plus the DCW Hazzard Pay which is now a permanent rate increase, plus an additional DWINH rate increase for DCW services and Peer services. Unlicensed residential services must be authorized with a Buldled Authorization Only code, highlighted in yellow. DWIHN has deployed five local modifiers to indicate the number of staff on duty (i.e., 21, S1, S2, S3, and S4) and the CH modifier for wheelchair van. Licensed residential services continue to report local modifier for the intensity of services (i.e., L1, L2, L3, L4 and L5).

**UNLICENSED RESIDENTIAL SETTING - In-Home Supports**

Code_Description	Modifiers	Notes	UnitType	New Rate
H2X15 - Community Living Supports, Unlicensed, 15-minutes.- Bundled Authorization only code for H2015.	N/A	Bundled Authorization Only.	15 Minutes	\$0.00
H2015 - Comprehensive Community Support Services	21	One Member/Two Staff.	15 Minutes	\$12.10
H2015 - Comprehensive Community Support Services	CH;21	One Member/Two Staff; Wheelchair Van.	15 Minutes	\$58.42
H2015 - Comprehensive Community Support Services	S1	One Member/One Staff.	15 Minutes	\$6.05
H2015 - Comprehensive Community Support Services	S1;CH	One Member/One Staff; Wheelchair Van.	15 Minutes	\$52.35
H2015 - Comprehensive Community Support Services	UN;S1	2 Members; 1 Staff	15 Minutes	\$3.03
H2015 - Comprehensive Community Support Services	UN;S1;CH	2 Members; 1 Staff; Wheelchair Van.	15 Minutes	\$26.18
H2015 - Comprehensive Community Support Services	UN;S2	2 Members; 2 Staff	15 Minutes	\$6.05
H2015 - Comprehensive Community Support Services	UN;S2;CH	2 Members; 2 Staff; Wheelchair Van.	15 Minutes	\$29.20
H2015 - Comprehensive Community Support Services	UN;S3	2 Members; 3 Staff	15 Minutes	\$9.08
H2015 - Comprehensive Community Support Services	UN;S3;CH	2 Members; 3 Staff; Wheelchair Van.	15 Minutes	\$32.23
H2015 - Comprehensive Community Support Services	UN;S4	2 Members; 4 Staff	15 Minutes	\$12.10
H2015 - Comprehensive Community Support Services	UN;S4;CH	2 Members; 4 Staff; Wheelchair Van.	15 Minutes	\$35.25
H2015 - Comprehensive Community Support Services	UP;S1	3 Members; 1 Staff	15 Minutes	\$2.02
H2015 - Comprehensive Community Support Services	UP;S1;CH	3 Members; 1 Staff; Wheelchair Van.	15 Minutes	\$17.46
H2015 - Comprehensive Community Support Services	UP;S2	3 Members; 2 Staff	15 Minutes	\$4.03
H2015 - Comprehensive Community Support Services	UP;S2;CH	3 Members; 2 Staff; Wheelchair Van.	15 Minutes	\$19.47
H2015 - Comprehensive Community Support Services	UP;S3	3 Members; 3 Staff	15 Minutes	\$6.05
H2015 - Comprehensive Community Support Services	UP;S3;CH	3 Members; 3 Staff; Wheelchair Van.	15 Minutes	\$21.49
H2015 - Comprehensive Community Support Services	UP;S4	3 Members; 4 Staff	15 Minutes	\$8.07
H2015 - Comprehensive Community Support Services	UP;S4;CH	3 Members; 4 Staff; Wheelchair Van.	15 Minutes	\$23.51

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H2015 - Comprehensive Community Support Services	UQ;S1	4 Members; 1 Staff	15 Minutes	\$1.52
H2015 - Comprehensive Community Support Services	UQ;S1;CH	4 Members; 1 Staff; Wheelchair Van.	15 Minutes	\$13.10
H2015 - Comprehensive Community Support Services	UQ;S2	4 Members; 2 Staff	15 Minutes	\$3.03
H2015 - Comprehensive Community Support Services	UQ;S2;CH	4 Members; 2 Staff; Wheelchair Van.	15 Minutes	\$14.61
H2015 - Comprehensive Community Support Services	UQ;S3	4 Members; 3 Staff	15 Minutes	\$4.54
H2015 - Comprehensive Community Support Services	UQ;S3;CH	4 Members; 3 Staff; Wheelchair Van.	15 Minutes	\$16.13
H2015 - Comprehensive Community Support Services	UQ;S4	4 Members; 4 Staff	15 Minutes	\$6.05
H2015 - Comprehensive Community Support Services	UQ;S4;CH	4 Members; 4 Staff; Wheelchair Van.	15 Minutes	\$17.64
H2015 - Comprehensive Community Support Services	UR;S1	5 Members; 1 Staff	15 Minutes	\$1.21
H2015 - Comprehensive Community Support Services	UR;S2	5 Members; 2 Staff	15 Minutes	\$2.43
H2015 - Comprehensive Community Support Services	UR;S3	5 Members; 3 Staff	15 Minutes	\$3.62
H2015 - Comprehensive Community Support Services	UR;S4	5 Members; 4 Staff	15 Minutes	\$4.85
H2015 - Comprehensive Community Support Services	US;S1	6 or More Members; 1 Staff	15 Minutes	\$1.01
H2015 - Comprehensive Community Support Services	US;S2	6 or More Members; 2 Staff	15 Minutes	\$2.02
H2015 - Comprehensive Community Support Services	US;S3	6 or More Members; 3 Staff	15 Minutes	\$3.03
H2015 - Comprehensive Community Support Services	US;S4	6 or More Members; 4 Staff	15 Minutes	\$4.03
T1005 - Respite; Authorization Only for T1005	N/A	Authorization Only for T1005 with all modifiers.	Up to 15 min	\$0.00
T1005 - Respite	HM	Less than Bachelor's Level; Individual member served.	Up to 15 min	\$5.43
T1005 - Respite	HM;UN	Less than Bachelor's Level; 2 patients served.	Up to 15 min	\$4.30
T1005 - Respite	HM;UP	Less than Bachelor's Level; 3 patients served.	Up to 15 min	\$4.30
T1005 - Respite	HM;UQ	Less than Bachelor's Level; 4 patients served.	Up to 15 min	\$4.30
T1005 - Respite	HM;UR	Less than Bachelor's Level; 5 patients served.	Up to 15 min	\$4.30
T1005 - Respite	HM;US	Less than Bachelor's Level; 6 or more patients served.	Up to 15 min	\$4.30

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T1005 - Respite	TD	Registered Nurse; Individual member served.	Up to 15 min	\$4.49
T1005 - Respite	TD;UN	Registered Nurse; 2 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TD;UP	Registered Nurse; 3 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TD;UQ	Registered Nurse; 4 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TD;UR	Registered Nurse; 5 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TD;US	Registered Nurse; 6 or more patients served.	Up to 15 min	\$3.36
T1005 - Respite	TE	Licensed Practical Nurse; Individual member served.	Up to 15 min	\$4.49
T1005 - Respite	TE;UN	Licensed Practical Nurse; 2 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TE;UP	Licensed Practical Nurse; 3 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TE;UQ	Licensed Practical Nurse; 4 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TE;UR	Licensed Practical Nurse; 5 patients served.	Up to 15 min	\$3.36
T1005 - Respite	TE;US	Licensed Practical Nurse; 6 or more patients served.	Up to 15 min	\$3.36
<b>T2X27 - Overnight Health &amp; Safety Supports, HAB Waiver - Bundled Authorization only code for T2027.</b>	<b>N/A</b>	<b>Bundled Authorization Only</b>	<b>15 Minutes</b>	<b>\$0.00</b>
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	21	Two Staff/One Member (HAB Waiver Only)	15 Minutes	\$11.66
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	S1	One Member/One Staff (HAB Waiver Only)	15 Minutes	\$5.84
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UN;S1	2 Members; 1 Staff (HAB Waiver Only)	15 Minutes	\$2.92
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UN;S2	2 Members; 2 Staff (HAB Waiver Only)	15 Minutes	\$5.84

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T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UN;S3	2 Members; 3 Staff (HAB Waiver Only)	15 Minutes	\$8.74
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UN;S4	2 Members; 4 Staff (HAB Waiver Only)	15 Minutes	\$11.66
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UP;S1	3 Members; 1 Staff (HAB Waiver Only)	15 Minutes	\$1.94
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UP;S2	3 Members; 2 Staff (HAB Waiver Only)	15 Minutes	\$3.90
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UP;S3	3 Members; 3 Staff (HAB Waiver Only)	15 Minutes	\$5.84
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UP;S4	3 Members; 4 Staff (HAB Waiver Only)	15 Minutes	\$7.79
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UQ;S1	4 Members; 1 Staff (HAB Waiver Only)	15 Minutes	\$1.47
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UQ;S2	4 Members; 2 Staff (HAB Waiver Only)	15 Minutes	\$2.92
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UQ;S3	4 Members; 3 Staff (HAB Waiver Only)	15 Minutes	\$4.39
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UQ;S4	4 Members; 4 Staff (HAB Waiver Only)	15 Minutes	\$5.84
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UR;S1	5 Members; 1 Staff (HAB Waiver Only)	15 Minutes	\$1.16
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UR;S2	5 Members; 2 Staff (HAB Waiver Only)	15 Minutes	\$2.35
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UR;S3	5 Members; 3 Staff (HAB Waiver Only)	15 Minutes	\$3.49
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	UR;S4	5 Members; 4 Staff (HAB Waiver Only)	15 Minutes	\$4.66
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	US;S1	6 Members; 1 Staff (HAB Waiver Only)	15 Minutes	\$0.98

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T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	US;S2	6 Members; 2 Staff (HAB Waiver Only)	15 Minutes	\$1.94
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	US;S3	6 Members; 3 Staff (HAB Waiver Only)	15 Minutes	\$2.92
T2027 - Specialized childcare (Overnight Health and Safety), waiver; per 15 minutes	US;S4	6 Members; 4 Staff (HAB Waiver Only)	15 Minutes	\$3.90

**SPECIALIZED LICENSED RESIDENTIAL - Group Homes**

Code_Description	Modifiers	Notes	UnitType	New Rate
H2016 - Comprehensive Community Supports Services per Diem	N/A	Authorization only code.	Day	\$0.00
H2016 - Comprehensive Community Supports Services per Diem	L1	(Staff intensity: 5 to 7 hours per day.)	Day	\$145.33
H2016 - Comprehensive Community Supports Services per Diem	L2	(Staff intensity: 8 to 10 hours per day.)	Day	\$217.99
H2016 - Comprehensive Community Supports Services per Diem	L3	(Staff intensity: 11 to 14 hours per day.)	Day	\$302.79
H2016 - Comprehensive Community Supports Services per Diem	L4	(Staff intensity: 15 to 20 hours per day.)	Day	\$423.91
T1020 - Personal Care Per Diem	N/A	Authorization only code.	Day	\$0.00
T1020 - Personal Care Per Diem	L1	(Staff intensity: 1 hour/day; up to 60 min.)	Day	\$24.23
T1020 - Personal Care Per Diem	L2	(Staff intensity: 2 hours/day; 61 to 120 min.)	Day	\$48.44
T1020 - Personal Care Per Diem	L3	(Staff intensity: 3 hours/day; 121 to 180 min)	Day	\$72.66
T1020 - Personal Care Per Diem	L4	(Staff intensity: 4 hours/day; 181 to 24 min)	Day	\$96.89