

**WV I/DD Waiver
Services, Units, Rates and Limitations**

	Service	Ratio	Code	Unit	Rate	Annual Service Limit-Units	NF Age 3-17 Limit-Units	NF Age 18+ Limit-Units	ISS/GH Limit-Units
Direct Care Services	Home-Based PCS****	1:1	S5125 U7	15 min	\$6.36	Dependent on age and living arrangement	7,320		
		1:2	S5125 U8	15 min	\$3.18				
	Family PCS	1:1	S5125 U5	15 min	\$4.73				
		1:2	S5125 U6	15 min	\$2.37				
	PCS - Personal Options****	1:1	S5125 UA	15 min	\$3.00				
	Crisis Site PCS	1:1	T1005 U7	15 min	\$8.18				
		1:2	T1005 U8	15 min	\$4.10				
		1:3	T1005 U9	15 min	\$2.73				
	Crisis Intervention	2:1	T2017	15 min	\$14.54	1,344			
	Skilled Nursing by LPN	1:1	T1003 U4	15 min	\$12.86	2,920 if in GH or ISS UNLESS in a 3 person ISS when all persons receive 11,680 units Those in NF are dependent on age and medical condition Up to 240 Indirect LPN	n/a - access Private Duty Nursing when under age 21	11,680 15-minute units (w/o Day Service) -OR- 17,520 15-minute units (with Day Service)	
		1:2	T1003 U3	15 min	\$6.43				
		1:3	T1003 U2	15 min	\$4.29				
	Facility-Based Day Habilitation	1:1-2	T2021 U5	15 min	\$7.47	6,240	n/a		
		1:3-4	T2021 U6	15 min	\$3.20				
		1:5-6	T2021 U7	15 min	\$2.03				
	Job Development	1:1	T1019 HB	15 min	\$7.52	6,240	n/a		
	Pre-vocational Training	1:1-2	T2021 U1	15 min	\$7.47	6,240	n/a		
		1:3-4	T2021 U2	15 min	\$3.20				
		1:5-6	T2021 U3	15 min	\$2.03				
	Supported Employment	1:1	T2019	15 min	\$7.52	8,320	n/a		
1:2+		T2019 HQ	15 min	\$3.02					
Electronic Monitoring (only for unlicensed sites)	1:1	S5161 U1	1 hour	\$9.08	2,920 NF 5,840 ISS/GH	n/a			
	1:2	S5161 U2	1 hour	\$4.54					
	1:3	S5161 U3	1 hour	\$3.03					
	1:4	S5161 U4	1 hour	\$2.27					
Licensed Group Home PCS***	1:1	S5125 U1	15 min	\$6.57	Dependent on age and living arrangement				
	1:2	S5125 U2	15 min	\$3.29					
	1:3	S5125 U3	15 min	\$2.19					
	1:4	S5125 U4	15 min	\$1.65					
Unlicensed Residential PCS***	1:1	S5125 HI	15 min	\$6.57	Dependent on age and living arrangement	n/a	n/a		
	1:2	S5125 UN	15 min	\$3.29					
	1:3	S5125 UP	15 min	\$2.19					
Unlicensed Residential PCS - Personal Options***	1:1	S5125 UD	15 min	\$3.63	Dependent on age and living arrangement				
Respite	In-Home Respite****	1:1	T1005 UA	15 min	\$6.36	3,650	3,650	3,650	n/a
		1:2	T1005 UB	15 min	\$3.18				
	In-Home Respite - Personal Options****	1:1	T1005 UD	15 min	\$3.00				
	Out-of-Home Respite	1:1	T1005 U1	15 min	\$6.36				
		1:2	T1005 U5	15 min	\$3.18				
		1:3	T1005 U6	15 min	\$2.12				
Out-of-Home Respite - Personal Options	1:1	T1005 UC	15 min	\$3.00					

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CM	Case Management Natural Family	n/a	G9002 U3	Event	\$200.00	12	12	12	12
	Case Management ISS/SFC/Group Home	n/a	G9002 U4	Event	\$250.00	12	12	12	12
BSP	Behavior Support Professional I	n/a	T2021 HN	15 min	\$12.80	768	768	768	768
	Behavior Support Professional II	n/a	T2025 HO	15 min	\$15.34				
IPP Planning	Behavior Support Professional I - IPP Planning	n/a	T2024 HI	Event	\$53.74	4	4	4	4
	Behavior Support Professional II - IPP Planning	n/a	T2025 HI	Event	\$78.76				
	Skilled Nursing by Registered Nurse - IPP Planning	n/a	T2024 TD	Event	\$80.34				
RN	Skilled Nursing by Registered Nurse	n/a	T1002 HI	15 min	\$19.51	480	480	480	480
Ex State Plan	Dietary Therapy*	n/a	97802 AE	15 min	\$24.86	416	416	416	416
	Dietary Therapy* - Personal Options	n/a	97802 AE UG	15 min	\$24.86				
	Physical Therapy*	n/a	97530 GP	15 min	\$24.86				
	Physical Therapy* - Personal Options	n/a	97530 GP UG	15 min	\$24.86				
	Occupational Therapy*	n/a	97530 GO	15 min	\$24.86				
	Occupational Therapy* - Personal Options	n/a	97530 GO UG	15 min	\$24.86				
	Speech Therapy*	n/a	92507 GN	Event	\$53.40	Dependent on age	96	Under Age 24 = 96 Age 24 & Older = 48	48
	Speech Therapy* - Personal Options	n/a	92507 GN UG	Event	\$53.40				
PDGS, EAA	Participant-Directed Goods and Services - Personal Options	n/a	T2028 SC	\$1	\$1.00	1000	1000	1000	1000
	Environmental Accessibility Adaptation-Home	n/a	S5165	\$1	\$1.00				
	Environmental Accessibility Adaptation-Home - Personal Options	n/a	S5165 UG	\$1	\$1.00				
	Environmental Accessibility Adaptation-Vehicle	n/a	T2039	\$1	\$1.00				
	Environmental Accessibility Adaptation-Vehicle - Personal Options	n/a	T2039 UG	\$1	\$1.00				
Transportation	Transportation: Miles**	n/a	A0160 U1	1 mile	\$0.50	9,600	9,600	9,600	9,600
	Transportation: Miles - Personal Options**	n/a	A0160 U3	1 mile	\$0.50				
	Transportation: Trips (max 2 one-way trips per day)**	n/a	A0120 HI	1 trip	\$9.89	520	520	520	520

*Rate based on RBRVS and subject to change.
 **Rate based on state mileage reimbursement and subject to change.
 ***The annual service limit during a leap year is 35,136 direct care units (plus up to 240 Indirect LPN units). This only applies to those residing in ISS/GH settings.
 ****Service code is billed through the use of Electronic Visit Verification (EVV). PCS:PO only applies to non-live-in workers.