

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

	Service	Ratio	Code	Unit	Rate	Rate Increase through 7.1.2024	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	\$5.45	n/a	Dependent on age and living arrangement	7,320		
		1:2	S5125 U8	15 min	\$2.73	n/a				
	Family PCS	1:1	S5125 U5	15 min	\$2.74	n/a	2,880			
		1:2	S5125 U6	15 min	\$1.37	n/a				
	PCS - Personal Options****	1:1	S5125 UA	15 min	\$2.74	n/a	1,344			
	Crisis Site PCS	1:1	T1005 U7	15 min	\$5.72	n/a	2,920 if in GH or ISS UNLESS in a 3 person ISS when all persons receive 11,680 units	n/a - access Private Duty Nursing when under age 21		
		1:2	T1005 U8	15 min	\$2.87	n/a				
		1:3	T1005 U9	15 min	\$1.91	n/a				
	Crisis Intervention	2:1	T2017	15 min	\$10.00	n/a	1,344			
	Skilled Nursing by LPN	1:1	T1003 U4	15 min	\$11.02	n/a	Those in NF are dependent on age and medical condition Up to 240 Indirect LPN	11,680 15-minute units (w/o Day Service) -OR- 17,520 15-minute units (with Day Service)		
		1:2	T1003 U3	15 min	\$5.50	n/a				
		1:3	T1003 U2	15 min	\$3.67	n/a				
	Facility-Based Day Habilitation	1:1-2	T2021 U5	15 min	\$5.23	\$7.47	6,240	n/a		
		1:3-4	T2021 U6	15 min	\$2.24	\$3.20				
		1:5-6	T2021 U7	15 min	\$1.42	\$2.03				
	Job Development	1:1	T1019 HB	15 min	\$5.26	\$7.52	6,240	n/a		
	Pre-vocational Training	1:1-2	T2021 U1	15 min	\$5.23	\$7.47	6,240	n/a		
		1:3-4	T2021 U2	15 min	\$2.24	\$3.20				
		1:5-6	T2021 U3	15 min	\$1.42	\$2.03				
	Supported Employment	1:1	T2019	15 min	\$5.26	\$7.52	8,320	n/a		
1:2+		T2019 HQ	15 min	\$2.11	\$3.02					
Electronic Monitoring (only for unlicensed sites)	1:1	S5161 U1	1 hour	\$9.08	n/a	2,920 NF 5,840 ISS/GH	n/a			
	1:2	S5161 U2	1 hour	\$4.54	n/a					
	1:3	S5161 U3	1 hour	\$3.03	n/a					
	1:4	S5161 U4	1 hour	\$2.27	n/a					
Licensed Group Home PCS***	1:1	S5125 U1	15 min	\$5.72	n/a	Dependent on age and living arrangement				
	1:2	S5125 U2	15 min	\$2.87	n/a					
	1:3	S5125 U3	15 min	\$1.91	n/a					
	1:4	S5125 U4	15 min	\$1.43	n/a					
Unlicensed Residential PCS***	1:1	S5125 HI	15 min	\$5.72	n/a	Dependent on age and living arrangement	n/a			
	1:2	S5125 UN	15 min	\$2.87	n/a					
	1:3	S5125 UP	15 min	\$1.91	n/a					
Unlicensed Residential PCS - Personal Options***	1:1	S5125 UD	15 min	\$3.63	n/a	Dependent on age and living arrangement				
Respite	In-Home Respite****	1:1	T1005 UA	15 min	\$5.01	n/a	3,650	3,650	3,650	n/a
		1:2	T1005 UB	15 min	\$2.50	n/a				
	In-Home Respite - Personal Options****	1:1	T1005 UD	15 min	\$2.74	n/a				
	Out-of-Home Respite	1:1	T1005 U1	15 min	\$5.01	n/a				
		1:2	T1005 U5	15 min	\$2.50	n/a				
		1:3	T1005 U6	15 min	\$1.67	n/a				
Out-of-Home Respite - Personal Options	1:1	T1005 UC	15 min	\$2.74	n/a					

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CM	Case Management Natural Family	n/a	G9002 U3	Event	\$200.00	n/a	12	12	12	12
	Case Management ISS/SFC/Group Home	n/a	G9002 U4	Event	\$250.00	n/a	12	12	12	12
BSP	Behavior Support Professional I	n/a	T2021 HN	15 min	\$10.41	n/a	768	768	768	768
	Behavior Support Professional II	n/a	T2025 HO	15 min	\$14.90	n/a				
IPP Planning	Behavior Support Professional I - IPP Planning	n/a	T2024 HI	Event	\$53.74	n/a	4	4	4	4
	Behavior Support Professional II - IPP Planning	n/a	T2025 HI	Event	\$78.76	n/a				
	Skilled Nursing by Registered Nurse - IPP Planning	n/a	T2024 TD	Event	\$80.34	n/a				
RN	Skilled Nursing by Registered Nurse	n/a	T1002 HI	15 min	\$16.28	n/a	480	480	480	480
Ex State Plan	Dietary Therapy*	n/a	97802 AE	15 min	\$24.86	n/a	416	416	416	416
	Dietary Therapy* - Personal Options	n/a	97802 AE UG	15 min	\$24.86	n/a				
	Physical Therapy*	n/a	97530 GP	15 min	\$24.86	n/a				
	Physical Therapy* - Personal Options	n/a	97530 GP UG	15 min	\$24.86	n/a				
	Occupational Therapy*	n/a	97530 GO	15 min	\$24.86	n/a				
	Occupational Therapy* - Personal Options	n/a	97530 GO UG	15 min	\$24.86	n/a				
	Speech Therapy*	n/a	92507 GN	Event	\$53.40	n/a	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	n/a					
PDGS, EAA	Participant-Directed Goods and Services - Personal Options	n/a	T2028 SC	\$1	\$1.00	n/a	1000	1000	1000	1000
	Environmental Accessibility Adaptation-Home	n/a	S5165	\$1	\$1.00	n/a				
	Environmental Accessibility Adaptation-Home - Personal Options	n/a	S5165 UG	\$1	\$1.00	n/a				
	Environmental Accessibility Adaptation-Vehicle	n/a	T2039	\$1	\$1.00	n/a				
	Environmental Accessibility Adaptation-Vehicle - Personal Options	n/a	T2039 UG	\$1	\$1.00	n/a				
Transportation	Transportation: Miles**	n/a	A0160 U1	1 mile	\$0.50	n/a	9,600	9,600	9,600	9,600
	Transportation: Miles - Personal Options**	n/a	A0160 U3	1 mile	\$0.50	n/a				
	Transportation: Trips (max 2 one-way trips per day)**	n/a	A0120 HI	1 trip	\$9.89	n/a	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.