

**Arizona Health Care Cost Containment System
Home and Community Based Services - Rates Effective January 1, 2016**

HCPCS	MOD	PROVIDER TYPE	SERVICES	RATE
G0151			Services performed by a qualified physical therapist in the home	\$27.26
G0152			Services performed by a qualified occupational therapist in the home	\$27.26
G0153			Services performed by a qualified speech-language pathologist in home	\$27.26
G0299			Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	\$17.62
G0299		02	Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	\$23.11
G0299		23	Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	\$23.11
G0299		39	Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	\$20.26
G0299		81	Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	\$20.26
G0299		95	Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	\$20.26
G0300			Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	\$17.62
G0300		02	Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	\$23.11
G0300		23	Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	\$23.11
G0300		39	Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	\$20.26
G0300		81	Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	\$20.26

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G0300		95	Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	\$20.26
S5100			Day Care Services, Adult; per 15 min.	\$2.51
S5101			Day Care Services, Adult; per half day	\$30.41
S5102			Day Care Services, Adult; per diem	\$60.81
S5125			Attendant Care Services; 15 min.	\$4.08
S5130			Homemaker Services, NOS; 15 min.	\$5.13
S5135			Companion Care, adult; 15 minutes	\$4.08
S5136			Companion Care, adult, per diem	BR
S5140			Foster care, adult; per diem	\$58.85
S5150			Unskilled Respite Care, not hospice; per 15 min.	\$4.08
S5151			Unskilled Respite Care, not hospice; per diem	\$206.19
S5170			Home Delivered Meals	\$8.41
S5180			Home health respiratory therapy, initial evaluation	\$45.59
S5181			Home health respiratory therapy, nos, per diem	\$273.54

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HCPCS	MOD	PROVIDER TYPE	SERVICES	RATE
S9123			Nursing Care in the Home; RN, per hour	\$35.77
S9123		02	Nursing Care in the Home; RN, per hour	\$60.47
S9123		23	Nursing Care in the Home; RN, per hour	\$60.47
S9123		39	Nursing Care in the Home; RN, per hour	\$50.40
S9123		81	Nursing Care in the Home; RN, per hour	\$50.40
S9123		95	Nursing Care in the Home; RN, per hour	\$50.40
S9124			Nursing Care in the Home; LPN, per hour	\$27.85
S9124		02	Nursing Care in the Home; LPN, per hour	\$46.23
S9124		23	Nursing Care in the Home; LPN, per hour	\$46.23
S9124		39	Nursing Care in the Home; LPN, per hour	\$39.21
S9124		81	Nursing Care in the Home; LPN, per hour	\$39.21
S9124		95	Nursing Care in the Home; LPN, per hour	\$39.21
S9128			Speech therapy, in the home, per diem	\$109.04
S9129			Occupational therapy, in the home, per diem	\$109.04

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S9131			Physical therapy; in the home, per diem	\$109.04
T1019			Personal Care Services, per 15 min. (not for inpatient or resident of a hospital, NF, ICF/MR, or IMD; not to be used for services provided by home health aide or CAN)	\$5.41
T1021			Home Health Aide or Certified Nurse Assistant, per visit	\$36.72
T2018			Habilitation, supported employment, waiver; per diem	\$21.19
T2019			Habilitation, supported employment, waiver; per 15 minutes	\$3.53
SELF-DIRECTED ATTENDANT CARE				
S5108			Home care training to home care client (training of member through SDAC service)	\$3.79
S5110			Home care training, family (training of home care worker through SDAC service)	\$3.79
S5115			Home care training,non-family (training of unrelated home care worker through SDAC service)	\$3.79
S5125	U2		Attendant Care provided through SDAC service	\$2.93
T1023			Initiation of FEA service per ACW, no background check	\$25.46
T1023	UC		Initiation of FEA service per ACW, with background check	\$30.08
T2040	UA		Initiation of Fiscal/Employer Agent (FEA) service, per member	\$53.19
T2040	UB		FEA service, monthly	\$48.48