seneti catego	Covered Benefit Start Date:	Benefit End Date:	og ar Category Reserved	Le Code Procedure	Code Pos	Modifier Recruited?	und Hadifier Descri	prior unital	jue ve	ited horr, medical keeteral Code De	garindron garage	tine to the schedule. Lt. Sching whee's
Adult Family Home Placement, 1-2 beds	1/1/2004	202.01	0240 S5:	140**	١	U6, U4, U5	U6=1-2 bed U4=Outlier U5=Outlier-Access	Day	N	0240=Adult Family Home Placement (S5140=Foster care, adult; per diem)	Y	Residential care services only. May use outlier modifiers (U4, U5); requires DHS review. **Use Federal Procedure Code (column F) only when applying outlier modifier.
Adult Family Home Placement, 3-4 beds	1/1/2004	202.02	0241 \$55	140**	\	U4, U5, U7	U4=Outlier U5=Outlier-Access U7=3-4 bed	Day	N	Adult Family Home Placement. (S5140=Foster care, adult; per diem)	Y	Residential care services only. May use outlier modifiers (U4, U5); requires DHS review. **Use the federal procedure code only when the outlier modifier is required (column F)
Assistive Technology	1/1/2022	112.99	Т	2028 02 for Remote Service Deliver		GT	GT=Remote Service Delivery	Each	N	Specialized supply, not otherwise specified, waiver	N	Includes items, pieces of equipment, software or application. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Assistive Technology	1/1/2022	112.99	Т	2028 02 for Remote Service Deliver		UA, GT	UA=Medicaid Level of Care 1, as defined by each state GT=Remote Service Delivery	Each	N	Specialized supply, not otherwise specified, waiver	N	Must use "UA" modifier to identify assistive technology services when authorizing service animals. May include initial purchase of a service animal, training and veterinary costs. The provider enters the 02_place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

P-02283 (03/2024)	Covered Benefit Start Date:	Senetit End Date:	og grand code redeath the return code redeath	A Procedure Code	gosi m	differ Recuired Notific	Modifier Descri	grieon Unit Va	jue me	dical Morthedical Federal Code De	etipitor Rate Se	the politice III II2 to detail support and
Case Management (Support & Service Coordination)	1/1/2004	604.00	T1016	02 for Remote Service Delivery	N	U1, U2, U3, U4, GT	U1=Assessment U2=Case planning U3=Ongoing monitoring & service coordination U4=Discharge planning GT=Remote Service Delivery	15 minutes	M	Case management, each 15 minutes	Y	Use modifiers U1-U3 to detail support and service coordination activities. Must use DHS Support and Service Coordination rate setting methodology. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Child Care	6/1/2017	101.00	T2026		Υ	U1, U2, U3, U4, U5	U1=Age 0-5 years U2=6-11 years U3=12+ Years U4=Outlier U5=Outlier Access	Day	N	Specialized childcare, waiver; per diem	Υ	Self-Directed services designated by using support indicator field with value of "S." Must use modifiers U1-U3 to identify age category of child. May use outlier modifiers (U4, U5); requires DHS review.
Child Care	6/1/2017	101.00	T2027		Y	U1, U2, U3, U4, U5	U1=Age 0-5 years U2=6-11 years U3=12+ Years U4=Outlier U5=Outlier Access	15 minutes	N	Specialized child care, waiver; per 15 minutes	Υ	Self-Directed services designated by using support indicator field with value of "S." Must use modifiers U1-U3 to identify age category of child. May use outlier modifiers (U4, U5); requires DHS review.
Child Foster Care (services only)	1/1/2004	203.00	H0041		N			Day	N	Foster care, child, non- therapeutic, per diem	N	State Licensed Level 1-4 Foster Home
Child Foster Care (services only)	1/1/2004	203.00	H0042		N			Month	N	Foster care, child, non- therapeutic, per month	N	State Licensed Level 1-4 Foster Home
Child Foster Care (services only)	1/1/2004	203.00	S5145		Υ	U3	U3=Administrative costs	Day	N	Foster care, therapeutic, child; per diem	N	Foster home administrative costs. Includes foster care home levels 1-5; must use U3 modifier
Child Foster Care (services only)	1/1/2004	203.00	S5146		Υ	U3	U3=Administrative costs	Month	N	Foster care, therapeutic, child; per month	N	Foster home administrative costs. Includes foster home levels 1-5; must use U3 modifier
Child Foster Care-Level 5 Home (services only)	1/1/2004	203.10	S5145		Υ	KX	KX=Specified medical policy met	Day	N	Foster care, therapeutic, child; per diem	N	State Licensed Level 5 Foster Home

P-02283 (03/2024)											
Renefit caregor	Covered	Benefit Start Date: Standard P	Copy of Copy Leafers here the Copy Leafers Leafers	al Procedure Code	polite Recited?	et Modifier Desc	jostor Unit va	ine Me	istal horrinedical feeteral code De	pate set	Interpretative stredule.
Child Foster Care- Level 5 (services only)	1/1/2004	203.10	S5146	Y	KX	KX=Specified medical policy met	Month	N	Foster care, therapeutic, child; per month	N	State Licensed Level 5 Foster Home
Communication Assistance for Community Inclusion (formerly titled Communication Aid)	1/1/2004	112.47		02 for N Remote Service Delivery	UD, GT	UD=Communication Aids Miscellaneous GT=Remote Service Delivery	Each	M	Durable medical equipment, miscellaneous	N	Self-Directed services designated by using support indicator field with a value of "S." Additional codes in the ranges below may also be used: V5010-V5267 for hearing aids; V5268-V5274 for assistive listening devices (other than hearing aids). When authorizing hearing aids use the "UD" modifier to identify "Communication Aids Miscellaneous." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization. Effective 1/1/2022, communication aids devices are no longer a separate service, and are now authorized under communication assistance for community inclusion services (EI399).
Communication Assistance for Community Inclusion (formerly titled Communication Aid)	1/1/2004	112.47		02 for N Remote Service Delivery	UD, GT	GT=Remote Service Delivery	15 minutes	M	Sign language or oral interpretive services, per 15 minutes	N	Self-Directed services designated by using support indicator field with a value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization. Effective 1/1/2022, this service includes translation and interpretation services for individuals with Limited English Proficiency skills.

Community / Competitive Integrated Employment - Individual (formerly Supported Employment - Individual)	4/1/2012	Benefit Start Date: Coweted Benefit Ernd Date: Standard Proof Proof Code Gasteral G15.01	Reserve Code Feeder Feeder	O2 for Remote Service Delivery	U7, U1, U2, U3, U6, U4, U5, GT	U7=Each U1=Tier 1 U2=Tier 2 U3= Tier 3 U6=Tier 4 U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Unit was	N N	Habilitation, supported employment, waiver; per diem	Rate Set	Must apply U7 modifier to define "Each." "Each" is defined as 1 month. Use modifiers (U1, U2, U3, U6) to identify appropriate tier level services. Self-Directed services are designated by using the support indicator field with a value of "S." May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Community / Competitive Integrated Employment - Small Group (formerly Supported Employment-Small Group)	6/1/2017	615.02	T2019	02 for Y Remote Service Delivery	U7, UN, UP, U4, U5, GT	U7=Each UN=Group of 2 UP=Group, 3 to 8 U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N	Habilitation, supported employment, waiver; per 15 minutes	Y	Must apply U7 modifier to define "Each" "Each" is defined as 1 month. Self-Directed services designated by using support indicator field with value of "S." Must apply UN modifier to define 2 participants receiving this service, or UP modifier for 3 - 8 participants for the tiered rates. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Community Integration Services-Tiers	Covered 4/1/2012	Benefit Statt Date.	Standard Pri 514.00	H2021	Procedure Code Name of Service O2 for Remote Service Delivery	Υ	HN, HO, U4,	HN=Bachelor's Level HO=Master's level U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Unit Vital 15 minutes	sue nei	Community-based wrap- around services, per 15 minutes	Rate Se	Self-Directed services are designated by using the support indicator field with a value of "S." Must use modifier to identify tier: Tier 1 = Bachelor's Level (HN); Tier 2 - Master's Level (HO). May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Community Integration Services-Tiers	4/1/2012	12/31/2019	514.00		02 for Remote Service Delivery		HN, HO, U4, U5, GT	HN = Bachelor's Level HO=Master's level U4=Outlier U5=Outlier-Access GT = Remote Service Delivery	Day	N	Community-based wrap- around services per diem.	Υ	Self-Directed services are designated by using the support indicator field with a value of "S." Must use modifier to identify tier: Tier 1 = Bachelor's Level (HN); Tier 2 = Master's Level (HO). May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Counseling & Therapeutic Services	Conseed benefit start Date. 1/1/2004 Conseed by Conse	Standard Pr. 507.03	Start Cate ord	G0176	Aprocedure Code O2 for Remote Service Delivery	Y Y Y	U1-U3, U6 U9, U4, U5 52, UA; UE UC, HQ, G	- U1=Music ;; U2=Hippotherapy U3=Equine Assisted	Unit Value 45 minute session	N N	Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)	Rate Se	Self-Directed services are designated by using the support indicator field with a value of "S." Must use appropriate U modifiers to identify specific authorized alternative therapy services. May use modifier 52 to authorize sessions scheduled for less than 45 minutes. May use modifiers to detail assessment, evaluation and reevaluation (UA, UB, UC). May use HQ modifier to detail services delivered in a group setting. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Counseling & Therapeutic Services	1/1/2004	507.03		T2036		N			Each	N	Therapeutic camping, overnight, waiver; each session.	N	Self-Directed services designated by using support indicator field with value of "S." Each unit equals a session.
Counseling & Therapeutic Services	1/1/2004	507.03			02 for Remote Service Delivery	N	GT	GT=Remote Service Delivery	Each	N	Therapeutic camping, day, waiver; each session	N	Self-Directed services are designated by using the support indicator field with value of "S." Each session equals a day. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Senetit Categor	Conseed Benefit Start Date.	Standard Pri	Bederald Federald	Federal 197166	paracedure code	POS)	differ Readiffer Madeline GO, U4, U5,	Modifier Descri	Unit Wa	nue nue	acal lunrinedical Eederal Code De	pate set	Each is defined as 1 Unit = 1 date of service.
Therapeutic Services- Occupational Therapy					Remote Service Delivery		GT	under outpatient occupational therapy of care U4=Outlier U5=Outlier-Access GT=Remote Service Delivery			evaluation		May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Counseling & Therapeutic Services- Occupational Therapy	1/1/2019	507.03			02 for Remote Service Delivery	Y	GO, U4, U5, GT	GO=Services delivered under outpatient occupational therapy of care U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	М	Reevaluation of occupational therapy	Y	"Each" is defined as 1 Unit = 1 date of service. May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Counseling & Therapeutic Services- Occupational Therapy	1/1/2019	507.03			02 for Remote Service Delivery	Y	GO, U4, U5, GT	GO=Services delivered under outpatient occupational therapy of care U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	15 Minutes	M	Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one- on-one contact, each 15 minutes	Υ	May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Renefit Categor	Consered Benefit Start Date.	Standard Pr	od gric Code rederate de de la rederate de la rede	ad Procedure Code	L HOS	differ Reduker 1 house	nodifier Descri	Unit Wa	ne Me	Physical therapy	gate se	time to rate stredule. Lits coding nates Lits coding nates
Therapeutic Services- Physical Therapy				Remote Service Delivery		GT	under an outpatient physical therapy plan of care U4=Outlier U5=Outlier-Access GT=Remote Service Delivery			evaluation		May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Counseling & Therapeutic Services- Physical Therapy	1/1/2019	507.03	97164	02 for Remote Service Delivery	Y	GP, U4, U5, GT	GP=Services delivered under an outpatient physical therapy plan of care U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	М	Physical therapy reevaluation	Y	Each is defined as 1 Unit = date of service. May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Counseling & Therapeutic Services- Occupational Therapy or Physical Therapy	1/1/2019	507.03	97110	02 for Remote Service Delivery	Y	GP, U4, U5, GT	GP=Services delivered under an outpatient occupational or physical therapy plan of care U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	15 Minutes	M	Therapeutic procedure(s)(2 or more individuals)	Y	May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Renefit Categor	Covered Benefit Start Date:	standard Partie	Code and Code Rederal Research Code Rederal Re	a Procedure Code	POS N	diffeet Reconstituted? W	a Modifier Descri	girder Julie 14	jue ne	sical hortheestal feeters code the	gridion specific	the to be stredule.
Counseling &	1/1/2019	507.03	97150	02 for	Υ	GP, U4, U5,	GP=Services delivered	Each	М	Therapeutic procedure,	Y	Each defined as 1 Unit = date of service. May
Therapeutic Services- Occupational Therapy				Remote Service		GT	under an outpatient occupational or			one or more areas, each 15 minutes, therapeutic		use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place
or Physical Therapy				Delivery			physical therapy plan			exercises to develop		code and GT modifier for remote service
				,			of care			strength and endurance,		delivery on the claim for service. Do not
							U4=Outlier			gait training		include the place code and modifier for
							U5=Outlier-Access GT=Remote Service					remote service delivery on the service authorization.
							Delivery					dutionzation.
Counseling &	1/1/2019	507.03	92523	02 for			GN=Service delivered	Each	М	Evaluation of language	Υ	1 Unit = 1 date of service. May use outlier
Therapeutic Services- Speech & Language				Remote Service		GT	under an outpatient speech language			comprehension and expression (e.g.,		modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT
Therapy				Delivery			pathology plan of care			receptive and expressive		modifier for remote service delivery on the
							U4=Outlier			language)		claim for service. Do not include the place
							U5=Outlier-Access GT=Remote Service					code and modifier for remote service
							Delivery					delivery on the service authorization.
Counseling &	1/1/2019 12/31/2023	507.03	92507	02 for	Υ	GN, U4, U5,	GN=Service delivered	Each	М	Treatment of speech,	Υ	1 Unit = 1 date of service. May use outlier
Therapeutic Services-				Remote		GT	under an outpatient			language, voice,		modifiers (U4, U5), requires DHS review. The
Speech & Language Therapy				Service Delivery			speech language pathology plan of care			communication, and/or auditory processing		provider enters the 02 place code and GT modifier for remote service delivery on the
							U4=Outlier			disorder; individual		claim for service. Do not include the place
							U5=Outlier-Access					code and modifier for remote service
							GT=Remote Service					delivery on the service authorization.
							Delivery					

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Benefit Catell	Covered Covered	denent str	standard P	ogispic Code	Revenue code	A Procedure Code	e lan	politier Required? The office	e hodifie descri	grid Unit V	due ne	ical horrheitea	gate set	re policy of the street of the	CLTS Coding Notes
Counseling &	1/1/2019		507.03	<u> </u>	92508	02 for	Y			Each	M	Treatment of speech,	Y		service. May use outlier
Therapeutic Services-						Remote		GT	under an outpatient			language, voice,			, requires DHS review.
Speech & Language						Service			speech language			communication, and/or		The provider enter	s the 02 place code and
Therapy						Delivery			pathology plan of care			auditory processing		GT modifier for rer	mote service delivery on
									U4=Outlier			disorder; Group 2 or		the claim for service	ce. Do not include the
									U5=Outlier-Access			more		place code and mo	difier for remote service
									GT=Remote Service					delivery on the ser	vice authorization.
									Delivery						
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Daily Living Skills Training	Conseed benefit Start Date: 1/1/2004 Conseed by	standard Pare: 110.00	odigo Code redering Code red redering Code red red red red red red red red red r	Aprocedure Code O2 for Remote Service Delivery	N	oblitet Recuired? W Modifi HQ, UN, UP, U4, U5, GT	HQ=Group setting UN=2 Participants UP=3 Participants U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Jritus 1 hour	nte N	Habilitation, educational, waiver; per hour	Rate Se	Self-Directed services are designated by using the support indicator field with a value of "S." Must use HQ modifier if services are delivered in a group setting. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Daily Living Skills Training	1/1/2004	110.00	T2017	02 for Remote Service Delivery		HQ, U4, U5, UN, UP, GT	U4=Outlier U5=Outlier-Access GT=Remote Service Delivery HQ=Group setting UN=2 Participants UP=3 Participants	15 minutes	N	Habilitation, residential, waiver; 15 minutes	Υ	Self-Directed services are designated by using the support indicator field with a value of "S." Must use HQ modifier if services are delivered in a group setting. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

P-02283 (03/2024) Renefit category Daily Living Skills Training	Conseed Benefit Start Date. 1/1/2004 Conseed B	Standard Pri	Ber Category Federal Re	Federit T2017	procedure code procedure to genite or for Remote Service	Modifie Required? Modifie Required? Modifier Required?	GT=Remote Service Delivery U7=Each	Unit Va	nedical hornnedical Redeat Code December 1 N Habilitation, residential, waiver; 15 minutes	Rate Se	Self-Directed services are designated by using the support indicator field with a value of "S." Must use the "U7" modifier to change
					Delivery						unit to "Each" if authorizing items such as adaptive driving courses at market rate. "Each" is defined as 1 unit of service (class) per participant. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Day Services, Children	1/1/2004 12/31/2019	706.20			02 for Remote Service Delivery	Y U4, U5, GT	U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Day	N Day care services, center- based; services not included in program fee, per diem	Y	Self-Directed services designated by using support indicator field with value of "S." May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Day Services, Children	1/1/2004	706.20			02 for Remote Service Delivery	Y U7, U4, U5, GT	U7=Each U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N Day care services, center- based; services not included in program fee, per diem	Y	Must use U7 modifier to change unit to "Each." "Each" is defined as 15 minutes. Self-Directed services designated by using support indicator field with value of "S." May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

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Benefit Categor	Conered	Benefit Start Date:	Standard P	togram Category Recicode	Reverue Code	al Procedure Code	ice ProSi	odifie Rechified And Michigan	a Modifier Descri	giran Junit was	ine Me	jud horr, nedical Kesteral Code De	scription sate set	ing Approach? White !
Discovery & Career Planning	1/1/2022		108.10		T2014	02 for Remote Service Delivery	Y	U7	U7=Each	Each	N	Habilitation, prevocational, waiver; per diem	N	Self-Directed services are designated by using the support indicator field with a value of "S." Must use "U7" modifier to change unit to "Each" when authorizing goods or services at market rates. "Each" is defined as 1 unit (item) per participant.
Discovery & Career Planning	1/1/2022		108.10			02 for Remote Service Delivery	N		U4=Outlier U5=Outlier-Access GT=Remote Service Delivery HQ=Group Setting UN=2 Participants UP=3 Participants	1 hour		Habilitation, prevocational, waiver; per hour	Y	Self-Directed services are designated by using the support indicator field with a value of "S." Use the HQ modifier for services authorized in a group setting; authorize the rate at a group of 2.
Empowerment and Self-Determination Supports (formerly titled Consumer Education & Training)	1/1/2004		113.00			02 for Remote Service Delivery	Y	U8, GT	U8=Period units GT=Remote Service Delivery	15 minutes		Patient education, not otherwise classified, non-physician provider, individual, per session.	N	Self-Directed services are designated by using the support indicator field with a value of "S." May use modifier U8 to describe period unit. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Empowerment and Self-Determination Supports (formerly titled Consumer Education & Training)	1/1/2004		113.00			02 for Remote Service Delivery	Y	U7, GT	U7=Each GT=Remote Service Delivery	Each		Patient education, not otherwise classified, non-physician provider, individual, per session.	N	Self-Directed services are designated by using the support indicator field with a value of "S." Must use U7 modifier U7 to change unit to "Each" when authorizing services, such as conferences or training sessions at market rates. "Each" is defined as 1 unit (item) per participant. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Family/Unpaid Caregiver Supports and Services, per session (formerly Training for Unpaid Caregiver/Family)	6/1/2017	Standard Pa	object Code Federal Revenue Code Federal S5111	02 for Remote Service Delivery	E POS	UK, GT	UK=Services provided on behalf of participant to caregiver/family member GT=Remote Service Delivery	Unit Va	ne N	Home care training, family; per session	Rate Se	Self-Directed services designated by using support indicator field with value of "S." Must use UK modifier to indicated services delivered to caregiver/family on behalf of participant. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service authorization.
Family/Unpaid Caregiver Supports and Service (formerly Training for Unpaid Caregiver/Family)	6/1/2017	113.2	\$5110	02 for Remote Service Delivery	Y	UK, GT	UK=Services provided on behalf of participant to caregiver/family member GT=Remote Service Delivery	15 minutes	N	Home care training, family; per 15 minutes	N	Self-Directed services designated by using support indicator field with value of "S." Must use UK modifier to indicate services delivered to caregiver/family on behalf of participant. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Financial Management Services-Basic	1/1/2004	619.00	T2040	02 for Remote Service Delivery		U7, U4, U5, GT	U7=Each U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N	Financial management, self-directed, waiver; per 15 minutes	Y	Must use U7 modifier to change unit to "Each." "Each" unit is defined as one participant per month. Self-Directed services are designated by using support indicator field with a value of "S." May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Benefit Catestor	Conered Barein Start Date.	Standard Parker	object Category Federa Benerie Code	a procedure code	POSI	diffee Recounted T	th Modifier Descri	prior unit	jue jue	jud Huon Medical Rederal Code De	ecididin Raje Se	ing Approach Alla Cits Conne notes
Financial Management Services-Enhanced	1/1/2004	619.00	12040	02 for Remote Service Delivery	Υ	U7, 22, U4, U5, GT	U7=Each 22=Increased Procedural Services U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N	Financial management, self-directed, waiver; per 15 minutes.	Y	Must use U7 modifier to change unit to "Each." "Each" unit is defined as one participant per month. Must use 22 modifier to identify Tier 2: Enhanced FMS services. Self-Directed services are designated by using the support indicator field with a value of "S." May use outlier modifiers (U4, U5), requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Financial Management Services; Rep Payee - Basic	1/1/2004	619.00		02 for Remote Service Delivery		U7, U4, U5, GT	U7=Each U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N	Supports brokerage, self- directed, waiver; per 15 minutes	Υ	Must use U7 modifier to change unit to "Each." "Each" is defined as one participant per month. Self-Directed services are designated by using the support indicator field with a value of "S." May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Benefit Categor	Covered Receit, Grant Date:	Standard Pr	Sept. Category Federal	Leder Leder	Andreadure Code	Hodie Redired	n notifier Descri	prior Juny Va	the thetical hoor, the tical potential to the content of the conte	giption paress	the for the streether.
Financial Management Services; Rep Payee - Enhanced	1/1/2004	619.00		12041	02 for Remote Service Delivery	Y 22, U7, U4, U5, GT	22=Increased Procedural Services U7=Each U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N Supports brokerage, self- directed, waiver; per 15 minutes.	Υ	Must use "U7" modifier to change unit to "Each." "Each" is defined as one participant per month. Must use 22 modifier to identify FMS-Rep Payee, Tier 2: Enhanced services. May use outlier modifiers (U4, U5); requires DHS review. Self-Directed services are designated by using the support indicator field with a value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Grief & Bereavement Counseling, Tier 1	1/1/2022	507.02			02 for Remote Service Delivery	Y U1, U4, U5, GT	U1=Level of Care (defined by state) U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	45 minute session	M Mental health services, not otherwise specified	Y	Grief and Bereavement Counseling services must be both authorized and claimed by the provider while the participant is enrolled in the CLTS Waiver Program, but may continue to be delivered for a period of up to 12 months after the participant's death. Use the "U1" modifier for Tier 1 services delivered by a provider that is not licensed or credentialed. A one-time claim for the service must be billed by the provider prior to the child's death. Self-Directed services designated by using support indicator field with a value of "S."

P-02283 (03/2024)											
Seneth Careegor	Covered	Benefit Start Date: Standard P	restant category restering code	al Procedure Code	nodifier Required	ifter Brother De	scriptor July vol	ue ne	gical hornnedical Federal Code De	gelithium Rate Set	ing Approach VIN.
Grief & Bereavement Counseling, Tier 2	1/1/2022	507.02	H0046	02 for Remote Service Delivery	Y U2, U4, U5	(defined by state) U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	45 minute session	M	Mental health services, not otherwise specified	Y	Grief and Bereavement Counseling services must be both authorized and claimed by the provider while the participant is enrolled in the CLTS Waiver Program, but may continue to be delivered for a period of up to 12 months after the participant's death. Use the "U2" modifier for Tier 2 services delivered by a provider with a master's degree. A one-time claim for the service must be billed by the provider prior to the child's death. Self-Directed services designated by using support indicator field with a value of "S."
Grief & Bereavement Counseling, Tier 3	1/1/2022	507.02		02 for Remote Service Delivery	Y U3, U4, U5	(defined by state) U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	45 minute session	M	Mental health services, not otherwise specified	Y	Grief and Bereavement Counseling services must be both authorized and claimed by the provider while the participant is enrolled in the CLTS Waiver Program, but may continue to be delivered for a period of up to 12 months after the participant's death. Use the "U3 modifier for Tier 3 services delivered by a provider with a doctoral degree. A one-time claim for the service must be billed by the provider prior to the child's death. Self-Directed services designated by using support indicator field with a value of "S."
Health & Wellness	1/1/2022	609.30		02 for Remote Service Delivery	N U4, U5, G1 HQ, UN, U	U4=Outlier U5=Outlier-Access GT=Remote Service Delivery HQ=Group Setting UN=2 Participants UP=3 Participants	15 minutes	N	Wellness assessment, performed by non- physician	Y	Use the "HQ" modifier for services authorized in a group setting; authorize the rate at a group of 2. Self-Directed services designated by using support indicator field with a value of "S."

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Health & Wellness	1/1/2022	609.30	\$5190	02 for Remote Service Delivery	Υ	U7, U4, U5, GT	U7=Each U4=Outlier U5=Outlier-Access GT=Remote Service Delivery	Each	N	Wellness assessment, performed by non- physician	N	Must use U7 if authorizing services for a class (for example a swimming class) or membership fee at market rate. "Each" is defined as 1 unit (class or fee) per participant. Self-Directed services designated by using support indicator field with a value of "S."
Home Modifications	1/1/2004	112.56	\$5165	02 for Remote Service Delivery	Z	UA-UD, GT	UA-UD=Local agency use GT=Remote Service Delivery	Each	N	Home modifications; per service	N	Self-Directed services designated by using support indicator field with a value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Housing Support Services	1/1/2004	610.00	T2013	02 for Remote Service Delivery	Y	UD, GT	UD=Housing Support Services GT=Remote Service Delivery	1 hour	N	Habilitation, educational, waiver; per hour	N	Must use modifier UD to specify Housing Support Services. Housing support services include services such as searching for housing, housing application processes, requesting reasonable accommodations, and reviewing the lease, home ownership documents, or other related documents, including property rules, prior to signing. This service also includes planning, guidance and assistance in accessing resources related to homeownership, financing, accessibility and architectural services and consultation, as well as health and safety evaluations of physical property.

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		515.50		119999	Remote Service Delivery	U4, U5, GT	UN=2 Participants UP=3 Participants U4=Outlier U5=Outlier-Access GT=Remote Service Delivery		per 15 minutes	Y	support indicator field with value of "S." Services to improve a child's ability to interact in their community in socially appropriate ways. Must use HQ modifier when authorizing services delivered in a group setting. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Mentoring Services	4/1/2012	513.00			02 for Remote Service Delivery	Y U7, UK, GT	U7=Each, UK=Caregiver services on behalf of member GT=Remote Service Delivery	Each	N Self-help/peer services, per 15 minutes	N	Must use U7 to modify unit to "Each." "Each is defined as 1 unit per participant. Must use "UK" modified to identify covered mentoring costs associated with the caregiver. Self-Directed services designated by using support indicator field with value of "S." Services to improve a child's ability to interact in their community in socially appropriate ways. Provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Participant & Family Directed Goods and Services	1/1/2022	109.00			02 for Remote Service Delivery	N GT	GT=Remote Service Delivery	Each	N Supply, not otherwise specified	N	Self-Directed services designated by using support indicator field with value of "S."

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Participant & Family Directed Broker Services	1/1/2022	619.01	T2041	02 for Remote Service Delivery	N	U4, U5, GT	U4=Outlier U5=Outlier Access GT=Remote Service Delivery	15 minutes	N	Supports brokerage, self- directed, waiver; per 15 minutes	Y	Self-Directed services designated by using support indicator field with value of "S."
Personal Emergency Response System (PERS) - Installation & Testing	1/1/2004	112.46	\$5160	02 for Remote Service Delivery	N	GT	GT=Remote Service Delivery	Each	N	Emergency response system; installation and testing	N	Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Personal Emergency Response Systems (PERS) - Monthly Service Fee	1/1/2004	112.46	S5161		N	U1-U9	U1-U9=Local agency use	Month	N	Emergency response system; service fee, per month (excludes installation and testing)	N	Self-Directed services designated by using support indicator field with value of "S."
Personal Emergency Response Systems (PERS) - Purchase	1/1/2004	112.46	\$5162		N			Each	N	Emergency response system; purchase only	N	Self-Directed services designated by using support indicator field with value of "S."
Personal Supports - Chore Services, per diem (formerly Supportive Home Care- Chore Services, per diem)	1/1/2004	104.10	S5121	02 for Remote Service Delivery	N	GT	GT=Remote Service Delivery	Day	N	Chore Services, per diem	N	Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Personal Supports - Hourly (formerly Supportive Home Care- Hourly)	Concred Repetit Start Date: 1/1/2004 12/31/2023	Stantand Date: Stantand Profes	sen Category Ser Cade Reserve Co.	getal procedure of Service O2 for Remote Service Delivery	Y U1-U3, U4, U2=Low U2=Medium U3=High U4=Outlier U5=Outlier-Access UF=6:00-11:59 a.m. UG=Noon-5:59 p.m. UJ=Midnight-5:59 a.m. HQ=Group setting GT=Remote Service Delivery	I hour	N Unlisted home visit service or procedure.	Y Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifier (U1-U3). Must use HQ modifier when authorizing group rates. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service authorization.
Personal Supports - Hourly (formerly Supportive Home Care- Hourly)	1/1/2024	104.20	\$5109	02 for Remote Service Delivery	Y U1-U3, U4, U2=Medium U3, U4, U3=High U4=Outlier U5=Outlier-Access U7=Each UF=6:00-11:59 a.m. U6=Noon-5:59 p.m. UH=6:00-11:59 p.m. UJ=Midnight-5:59 a.m. HQ=Group setting UN=2 Participants UP=3 Participants GT=Remote Service Delivery	1 hour	N Home care training to home care client, per session	Y Must use U7 modifier to change unit to "Each." "Each" is defined as one hour. Must indicate participant's care level modifier (U1-U3). Must use HQ modifier if authorizing group rates. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Personal Supports - Attendant care services; per 15 minutes (formerly Supportive Home Care - Attendant care services; per 15 minutes)	Conseted Repetit, Start Date: 1/1/2004 12/31/2020	Standard Problems 104.20	\$5125	O2 for Remote Service Delivery	Y U1-U3, U4, U1=Low U2=Medium U3=High U4=Outlier U5=Outlier-Access UF=6:00-11:59 a.m. UG=Noon-5:59 p.m. UH=6:00-11:59 a.m. UJ=Midnight-5:59 a.m. HQ=Group setting GT=Remote Service Delivery	15 Minutes	N Attendant care services per 15 minutes	Y Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifier (U1-U3). Must use HQ modifier if authorizing group rates. May use modifiers to track attendant care worker schedules (UF-UJ). May use outlier modifier (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Personal Supports- Attendant care services; per 15 minutes (formerly Supportive Home Care- Attendant care services; per 15 minutes)	4/1/2021 12/31/2023	104.20		02 for Remote Service Delivery	Y U1-U3, U4, U2=Medium U2=Medium U3=High U4=Outlier U5=Outlier-Access UF=6:00-11:59 a.m. UG=Noon-5:59 p.m. UH=6:00-11:59 p.m. UJ=Midnight-5:59 a.m. HQ=Group setting GT=Remote Service Delivery	15 Minutes	N Attendant care services per 15 minutes	Y Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifier (U1-U3). Must use HQ modifier if authorizing group rates. May use modifiers to track attendant care worker schedules (UF-UJ). May use outlier modifier (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

Personal Supports- Attendant care services; per 15 minutes (formerly Supportive Home Care- Attendant care services; per 15 minutes)	Covered the refit start Date: 1/1/2024 Covered the	standard Profession 104.20	\$5108	Approach to the service of servic	Y	UF=6:0 UG=No UH=6:0 UJ=Mio HQ=Gr UN=2 F UP=3 P	edium gh utlier utlier-Access 00-11:59 a.m. 00-11:59 p.m. 00-11:59 p.m. dnight-5:59 a.m. roup setting Participants Participants emote Service	or Unit val	N	Home care training to home care client, per 15 minutes	Rate Se	Must indicate participant's care level modifier (U1-U3). Must use HQ modifier if authorizing group rates. May use modifiers to track attendant care worker schedules (UF-UJ). May use outlier modifier (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Personal Supports- Chore Services, per 15 minutes (formerly Supportive Home Care- Chore Services, per 15 minutes)	1/1/2004	104.20		02 for Remote Service Delivery	N	GT GT=Re Delive		.5 Minutes	N	Chore Services, per 15 minutes	N	Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Personal Supports, Worker Room & Board (formerly Supportive Home Care, Worker Room & Board)	1/1/2004	104.88	S9976		N			Day		Lodging, per diem, not otherwise classified	N	Self-Directed services designated by using support indicator field with value of "S."

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Relocation Services, Housing Start-Up	1/1/2004	106.03		T2038		Z			Each	N	Community transition, waiver; per service	N	Self-Directed services are designated by using support indicator field with value of "S." Service includes supports and essential items needed to establish a community living arrangement for participants who are relocating from an institution, foster home or who are moving out of the family home to a less restrictive or independent setting, such as: household furnishings, phones, cooking utensils, household supplies, etc.
Relocation Services, Initial Utilities	6/1/2017	106.03		T2038		Y	SE	SE=State and/or Federally funded programs/services	Each	N	Community transition, waiver; per service	N	Must use "SE" modifier to identify initial utilities for relocation services. Self-Directed services designated by using support indicator field with value of "S."
Respite Care, Residential	1/1/2004	103.22		S5150			U1-U3, HQ, UN, UP, U4 U5	U2=Medium U3=High HQ=Group setting UN=2 Participants UP=3 Participants U4=Outlier U5=Outlier-Access	15 Minutes	N	Unskilled respite care, not hospice, per 15 minutes	Y	Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifiers (U1-U3). Must use HQ modifier when authorizing group rates; authorize at a group of 2. May use outlier modifiers (U4, U5); requires DHS review.
Respite Care, Residential	1/1/2004	103.22		S5151			U1-U3, HQ UN, UP, U4 U5	, U1=Low	Day	N	Unskilled respite care, not hospice, per diem	Y	Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifiers (U1-U3). Use the HQ modifier for respite services authorized at the day rate in a group setting; authorize rate at a group of 2. May use outlier modifiers (U4, U5); requires DHS review.

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Respite Care, Institutional	1/1/2004	103.24		S5151		Y TF, TG, U4, U5	TF=Intermediate level of care TG=Complex / high tech level of care U4=Outlier U5=Outlier-Access	Day	М	Respite care, not in the home, per diem.	Y	Self-Directed services designated by using support indicator field with value of "S." Must use TF modifier for respite services delivered in a group home. Must use TG modifier for respite services delivered in a residential care center (RCC). May use outlier modifiers (U4, U5), requires DHS review.
Respite Care, Institutional	1/1/2004	103.24	0663			N		Day	М	Respite care - daily respite charge.	Υ	Must use Revenue Code 0663 for institutional respite care services delivered in settings other than a group home or residential care center.
Respite Care, Home- Based	1/1/2004	103.26		S9125		Y U1-U3, HQ, UN, UP, U4, U5,	U1=Low U2=Medium U3=High HQ=Group setting UN=2 Participants UP=3 Participants U4=Outlier U5=Outlier-Access	Day	N	Respite care, in the home, per diem.	Y	Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifiers (U1-U3). Use the HQ modifier for respite services authorized at the day rate in a group setting; authorize rate at a group of 2. May use outlier modifiers (U4, U5); requires DHS review.
Respite Care, Home- Based	1/1/2004	103.26		T1005		Y U1-U3, HQ, UN, UP, U4, U5	U1=Low U2=Medium U3=High HQ=Group setting UN=2 Participants UP=3 Participants U4=Outlier U5=Outlier-Access	15 minutes	N	Respite care services, up to 15 minutes.	Y	Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifiers (U1-U3). Must use HQ modifier when authorizing group rates; authorize rate at a group of 2. May use outlier modifiers (U4, U5); requires DHS review.

Respite Care, Other	Conseed Recent Grant Date: 1/1/2004 Conseed Recent Grant Date:	Standard Pr. 103.99	od specificate of the specific	G0176	aprocedure code or Remote Service Delivery	Y EY, 52, U1-	EY=No physician or , licensed health care	grion Unit Wa	N Activity therapy, such as music, hippotherapy, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling health problems, per session (45 minutes or more).	Roster's Y	"Each" unit value defined as one session (45 minutes or more). Must use EY modifier to indicate service delivered by unlicensed provider. Self-Directed services designated by using support indicator field with value of "S." May use 52 modifier to identify sessions shorter than 45 minutes. Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifier (U1-U3). Must use HQ when authorizing group rates; authorize rate at group of 2. May use outlier modifiers (U4, U5); requires DHS review. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service authorization.
Respite Care, Other	1/1/2004	103.99		S5150		Y U1-U3, HQ, UN, UP, U4, U5		15 minutes	N Unskilled respite care; not hospice; per 15 minutes.	Y	Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifier (U1-U3). Must use HQ modifier when authorizing group rates; authorize at group of 2. May use outlier modifiers (U4, U5); requires DHS review.

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Respite Care, Other	1/1/2004	103.99	S5151		Y	U1-U3, HQ, UN, UP, U4, U5	U1=Low U2=Medium U3=High HQ=Group Setting UN=2 Participants UP=3 Participants U4=Outlier U5=Outlier-Access	Day	N	Unskilled respite care; not hospice; per diem.	Y	Self-Directed services designated by using support indicator field with value of "S." Must indicate participant's care level modifiers (U1-U3). Use the HQ modifier for respite services authorized at the day rate in a group setting; authorize at group of 2. May use outlier modifiers (U4, U5); requires DHS review.
Respite Care, Other	1/1/2004	103.99	T2036		Y	EY	EY=No physician or licensed health care provider order for this item or service	Each	N	Therapeutic camping, overnight, waiver; each session	N	Each unit equals a session. Self-Directed services designated by using support indicator field with value of "S."
Respite Care, Other	1/1/2004	103.99	T2037	02 for Remote Service Delivery	Y	EY, GT	EY=No physician or licensed health care provider order for this item or service GT=Remote Service Delivery	Day	N	Therapeutic camping, day, waiver	N	"Each" unit equals a day. Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Safety Planning & Prevention	1/1/2022	609.40	E0700	02 for Remote Service Delivery	N	U4, U5, GT	U4=Outlier U5=Outlier Access GT=Remote Service Delivery	15 minutes	N	Safety equipment, device or accessory, any type	Y	Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.

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Safety Planning & Prevention	1/1/2022		609.40		E0700	02 for Remote Service Delivery	Y	U7, GT	U7=Each GT=Remote Service Delivery	Each	N	Safety equipment, device or accessory, any type	N	Self-Directed services designated by using support indicator field with value of "S." Must use the "U7" modifier to change the unit to "Each" when authorizing goods, supplies, or safety training sessions, such as a CPR class, at market rates. "Each" is defined as 1 unit (item) per participant. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Specialized Medical & Therapeutic Supplies	1/1/2004		112.55		A9999	02 for Remote Service Delivery	N	GT	GT=Remote Service Delivery	Each	M	Miscellaneous DME supply or accessory, not otherwise specified	N	Self-Directed services designated by using the support indicator field with a value of "S." Codes in the ranges below may also be used: A4000-A9999 for miscellaneous medical and surgical supplies; B4000-B9999 for enteral and parenteral therapy supplies. The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization. Effective 1/1/2022, this service includes adaptive aid services, with the exception of service animals and vehicle modifications. Service animals are now listed under Assistive Technology and Vehicle Modifications is listed as a new service category (T2039).

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Therapeutic Supplies and Services	1/1/2004 6/30/2022	507.04		11999	02 for Remote Service Delivery	N UA-UD, G	UA-UD=Local agency use GT=Remote Service Delivery	Each	N	Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in "remarks"	IN .	Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Specialized Medical & Therapeutic Supplies and Services - Non medical	7/1/2022	112.55			02 for Remote Service Delivery	N UA-UD, G	UA-UD=Local agency use GT=Remote Service Delivery	Each	N	Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in "remarks"	N	Self-Directed services designated by using support indicator field with value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Transportation- Commercial Vehicle Pass-Bus	1/1/2004	107.50		A0110		N U1-U3	U1-U3=Local agency use	Each	N	Non-emergency transportation and bus, intra or inter state carrier.	N	Self-Directed services are designated by using the support indicator field with a value of "S." Units refer to the transportation pass itself, not number of uses on the pass. Bus passes paid at market rate.
Transportation & Escort	1/1/2004	107.30		T2003		N U4, U5	U4=Outlier U5=Outlier Access	1 trip	N	Non-emergency transportation; encounter/trip	Y	Self-Directed services designated by using support indicator field with value of "S." May use outlier modifiers (U4, U5), requires DHS review.
Transportation & Escort	1/1/2004	107.40		S0215		N U4, U5	U4=Outlier U5=Outlier Access	Miles	N	Non-emergency transportation; mileage, per mile	Y	Self-Directed services are designated by using the support indicator field with a value of "S." May use outlier modifiers (U4, U5), requires DHS review.

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Transportation - Multi- Passenger Vehicle	1/1/2004	107.30	T2004		N	22, U4, U5 22= Pro U4:	elncreased ocedural Services =Outlier =Outlier-Access	1 trip N	Non-emergency transport; commercial carrier, multi-pass	Y	Self-Directed services are designated by using the support indicator field with a value of "S." May use 22 modifier to pay wheelchair accommodated vehicle at both trip and mileage rates. May use outlier modifiers (U4, U5), requires DHS review.
Vehicle Modifications	1/1/2022	112.57		02 for Remote Service Delivery	N		=Remote Service ivery	Each	Vehicle modifications, waiver; per service	N	Self-Directed services are designated by using the support indicator field with a value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.
Virtual Equipment & Supports	1/1/2022	609.50		02 for Remote Service Delivery	N		=Remote Service ivery	Each	Brief communication technology-based service	N	Self-Directed services are designated by using the support indicator field with a value of "S." The provider enters the 02 place code and GT modifier for remote service delivery on the claim for service. Do not include the place code and modifier for remote service delivery on the service authorization.