

Montana Medicaid - Fee Schedule
Home and Community Based Services (HCBS) for
Adults with Severe Disabling Mental Illness (SDMI)
Effective July 1, 2023

Description- Procedure code short description. You must refer to the appropriate official CPT or HCPCS coding manual for complete definitions in order to assure correct coding.

Modifier - SDMI Home and Community Based Services procedure codes must be followed by a HD modifier.

Other modifiers to follow after HD modifier:

TE- nurse supervision/oversight must be used with procedure code T1019 (self-directed)

Notes- Prior Authorization is required on all services listed within the HCBS SDMI fee schedule excluding H0032 Case Management.

* Nursing Facility Medicaid rate can be found at:

<https://medicaidprovider.mt.gov/26>

Montana Medicaid - Fee Schedule -Home and Community Based Services - SDMI Waiver

Proc	Mod	Description	Unit	Fee
H0032	HD	Case Management	day	\$14.20
H0045	HD	Respite Care - Assisted Living	diem	\$188.63
H0045	HD	Respite Care - Nursing Facility	diem	*Medicaid
H2015	HD	Consultative Clinical and Therapeutic Services	service	\$403.94
H2032	HD	Health and Wellness	Session	\$190.78
-	HD	Adaptive Recreational Therapy	Session	\$59.97
-	HD	Exercise Classes	Class	\$70.86
-	HD	Health Club Membership	Monthly	\$70.86
-	HD	Hippotherapy	Session	\$49.06
-	HD	Wellness Classes	Session	\$190.78
S0215	HD	Transportation - Miles	mile	\$.51
S5100	HD	Adult Day Care	15 min	\$2.90
H2019	HD	Behavioral Intervention Assistant	15 min	\$11.14
S5131	HD	Homemaker Chores	diem	\$309.96
S5161	HD	Personal Emergency Response - Rental	month	\$75.22
S5165	HD	Environmental Accessibility Adaptations - Home Modifications	service	<u>\$4360.60</u>

Proc	Mod	Description	Unit	Fee
S5170	HD	Nutrition (Meals)	meal	\$8.05
T1002	HD	Private Duty Nursing - RN	15 min	\$17.02
T1003	HD	Private Duty Nursing - LPN	15 min	\$12.67
T1005	HD	Respite Care	15 min	\$5.59
T1019	HD	Personal Assistance Attendant	15 min	\$8.01
T1019	HD TE	Personal Assistance Attendant - Agency-Based	15 min	\$6.55
T1019	HD TE	Personal Assistance Oversight - Self-Directed	15 min	\$6.55
T2003	HD	Transportation - Trip	trip	\$14.32
T2016	HD	Residential Habilitation – Adult Group Home	diem	\$166.58
T2016	HD	Residential Habilitation – Mental Health Group Home	diem	\$243.20
T2016	HD	Residential Habilitation – Intensive Mental Health Group Home	diem	\$323.55
T2019	HD	Supported Employment	15 min	\$14.17
T2021	HD	Life Coach	15 min	\$12.69
T2025	HD	Pain and Symptom Management	Session	\$708.60
-	HD	Acupuncture	Session	\$75.42
-	HD	Chiropractic	Session	\$81.75
-	HD	CranioSacral Therapy	Session	\$76.32
-	HD	Hyperbaric Oxygen Therapy	Session	Negotiated
-	HD	Massage Therapy	Session	\$76.32
-	HD	Mind-Body Therapies	Session	\$136.27
-	HD	Specialized Nursing Services	Session	\$76.32
-	HD	Pain Mitigation Counseling/Coaching	Treatment	\$708.60
-	HD	Reflexology	Session	\$76.32

Proc	Mod	Description	Unit	Fee
T2028	HD	Specialized Medical Supplies	item	<u>\$2180.30</u>
T2029	HD	Specialized Medical Equipment	item	<u>\$2180.30</u>
T2031	HD	Residential Habilitation - Assisted Living Facilities and Adult Foster Homes	day	<u>\$118.50</u>
T2038	HD	Community Transition Services	service	<u>\$2180.30</u>