

Montana Medicaid - Fee Schedule
Home and Community Based Services (HCBS) for
Adults with Severe Disabling Mental Illness (SDMI)
Effective July 1, 2024-2025

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)~~

U9 - Self-Direct service

CG-service provided by a legally responsible person

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	Primary Modifier	Secondary Modifier	Description	Unit	Fee
H0032	HD		Case Management	day	\$14.70 \$15.14
H0045	HD		Respite Care - Assisted Living	diem day	\$192.64 \$198.42
H0045	HD		Respite Care – Nursing Facility	diem day	*Medicaid
H2015	HD		Consultative Clinical and Therapeutic Services	service	\$403.94 \$416.06
H2032	HD		Health and Wellness		
-	HD		Adaptive Recreational Therapy Costs associated for participating in adaptive sports and recreational activities.	Session	\$59.97 \$61.77
-	HD		Exercise Classes	Class	\$70.86 \$72.99
-	HD		Health Club Membership	Monthly	\$70.86 \$72.99
-	HD		Hippotherapy	Session	\$49.06 \$50.53
-	HD		Wellness Classes	Session	\$190.78 \$196.50
S0215	HD	CG	Transportation – Miles	mile	\$.59 \$0.61
S5100	HD		Adult Day Care	15 min	\$3.16 \$3.25
H2019		U9	Behavioral Intervention Assistant	15 min	\$12.54

Proc	Primary Modifier	Secondary Modifier	Description	Unit	Fee
	HD	CG			\$12.92
S5131	HD		Homemaker Chores	Diem per job	\$331.04 \$340.98
S5161	HD		Personal Emergency Response - Rental	month	\$75.22 \$77.48
S5165	HD		Environmental Accessibility Adaptations - Home Modifications	service	\$4360.60 \$4491.42
S5170	HD		Nutrition (Meals)	meal	\$8.97 \$9.24
T1002	HD	CG	Private Duty Nursing – RN	15 min	\$19.30 \$19.88
T1003	HD	CG	Private Duty Nursing - LPN	15 min	\$14.12 \$14.54
T1005	HD	CG	Respite Care	15 min	\$6.02 \$6.20
T1019	HD	CG	Personal Assistance Attendant – Agency-Based	15 min	\$8.92 \$9.19
T1019	HD	TE U9 CG	Personal Assistance Attendant –Self-Directed	15 min	\$7.35 \$7.57
T1019	HD TE	TE CG	Personal Assistance Oversight – Self-Directed	15 min	\$7.35
T2003	HD	CG	Transportation - Trip	trip	\$14.90 \$15.35
T2016	HD		Residential Habilitation – Adult Group Home	diem day	\$167.22 \$172.24
T2016	HD		Residential Habilitation – Mental Health Group Home	diem day	\$258.58 \$266.34
T2016	HD		Residential Habilitation – Intensive Mental Health Group Home	diem day	\$334.26 \$344.29
T2019	HD		Supported Employment	15 min	\$14.37 \$14.80
T2021	HD	U9 CG	Life Coach	15 min	\$12.75 \$13.13
T2025	HD		Pain and Symptom Management		
-	HD		Acupuncture	Session	\$76.32 \$78.61
-	HD		Chiropractic	Session	\$81.75 \$84.20
-	HD		CranioSacral Therapy	Session	\$76.32 \$78.61
-	HD		Hyperbaric Oxygen Therapy	Session	Negotiated
-	HD		Massage Therapy	Session	\$76.32

Proc	Primary Modifier	Secondary Modifier	Description	Unit	Fee
					\$78.61
-	HD		Mind-Body Therapies	Session	\$136.27 \$140.36
-	HD		Specialized Nursing Services	Session	\$76.32 \$78.61
-	HD		Pain Mitigation Counseling/Coaching	Treatment	\$708.60 \$729.86
-	HD		Reflexology	Session	\$76.32 \$78.61
T2028	HD		Specialized Medical Supplies	item	\$2180.30 \$2245.71
T2029	HD		Specialized Medical Equipment	item	\$2180.30 \$2245.71
T2031	HD		Residential Habilitation - Assisted Living Facilities and Adult Foster Homes	day	\$124.75 \$128.49
T2038	HD		Community Transition Services	service	\$2180.30 \$2245.71