HCPCS	Mod	Prov Type	Procedure Description	FFS Rate	Flagstaff Rate
G0151			Services performed by a qualified physical therapist in the home	$29.18	$29.18
G0152			Services performed by a qualified occupational therapist in the home	$29.18	$29.18
G0153			Services performed by a qualified speech-language pathologist in home	$29.18	$29.18
G0299			Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	$18.86	$18.86
G0299		02	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	$24.73	$24.73
G0299		23	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	$24.73	$24.73
G0299		39	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	$21.69	$21.69
G0299		81	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	$21.69	$21.69
G0299		95	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	$21.69	$21.69
G0300			Direct skilled nursing services of a license practical nurse (LPN) in the home health or hospice setting, each 15 minutes	$18.86	$18.86
G0300		02	Direct skilled nursing services of a license practical nurse (LPN) in the home health or hospice setting, each 15 minutes	$24.73	$24.73
G0300		23	Direct skilled nursing services of a license practical nurse (LPN) in the home health or hospice setting, each 15 minutes	$24.73	$24.73
G0300		39	Direct skilled nursing services of a license practical nurse (LPN) in the home health or hospice setting, each 15 minutes	$21.69	$21.69
G0300		81	Direct skilled nursing services of a license practical nurse (LPN) in the home health or hospice setting, each 15 minutes	$21.69	$21.69
G0300		95	Direct skilled nursing services of a license practical nurse (LPN) in the home health or hospice setting, each 15 minutes	$21.69	$21.69
S5100			Day Care Services, Adult; per 15 min.	$3.20	$3.28
S5101			Day Care Services, Adult; per half day	$38.75	$39.70
S5102			Day Care Services, Adult; per diem	$77.49	$79.38
S5125			Attendant Care Services; 15 min.	$5.19	$5.32
S5130			Homemaker Services, NOS; 15 min.	$6.53	$6.70
S5135			Companion Care, adult; 15 minutes	$5.19	$5.32
S5136			Companion Care, adult, per diem	BR	BR

HCPCS	Mod	Prov Type	Procedure Description	FFS Rate	Flagstaff Rate
S5140			Foster Care, adult; per diem	$74.99	$76.81
S5150			Unskilled Respite Care, not hospice; per 15 min.	$5.19	$5.32
S5151			Unskilled Respite Care, not hospice; per diem	$262.69	$269.10
S5170			Home Delivered Meals	$10.72	$10.97
S5180			Home health respiratory therapy, initial evaluation	$48.79	$48.79
S5181			Home health respiratory therapy, nos, per diem	$292.77	$292.77
S9123			Nursing Care in the Home; RN, per hour	$38.29	$38.29
S9123		02	Nursing Care in the Home; RN, per hour	$64.72	$64.72
S9123		23	Nursing Care in the Home; RN, per hour	$64.72	$64.72
S9123		39	Nursing Care in the Home; RN, per hour	$53.94	$53.94
S9123		81	Nursing Care in the Home; RN, per hour	$53.94	$53.94
S9123		95	Nursing Care in the Home; RN, per hour	$53.94	$53.94
S9124			Nursing Care in the Home; LPN, per hour	$29.81	$29.81
S9124		02	Nursing Care in the Home; LPN, per hour	$49.47	$49.47
S9124		23	Nursing Care in the Home; LPN, per hour	$49.47	$49.47
S9124		39	Nursing Care in the Home; LPN, per hour	$41.96	$41.96
S9124		81	Nursing Care in the Home; LPN, per hour	$41.96	$41.96
S9124		95	Nursing Care in the Home; LPN, per hour	$41.96	$41.96
S9128			Speech therapy, in the home, per diem	$116.70	$116.70
S9129			Occupational therapy, in the home, per diem	$116.70	$116.70
S9131			Physical therapy; in the home, per diem	$116.70	$116.70
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 CNA)	$6.89	$7.08

HCPCS	Mod	Prov Type	Procedure Description	FFS Rate	Flagstaff Rate
T1021			Home Health Aide or Certified Nurse Assistant, per visit	$46.79	$47.94
T2016			Habilitation, Residential, Waiver; Per Diem	BR	BR
T2017			Habilitation, Residential, Waiver; 15 minutes	BR	BR
T2018			Habilitation, supported employment, waiver; per diem	$27.00	$27.64
T2019			Habilitation, supported employment, waiver; per 15 minutes	$4.48	$4.62
T2021			Day Habilitation, Waiver; Per 15 Minutes	BR	BR
T2031			Assisted Living; Waiver,Per Diem	BR	BR
T2033			Residential Care, Not Otherwise Specified (NOS), Waiver; Per Diem	BR	BR
SELF-DIRECTED ATTENDANT CARE					
S5108			Home care training to home care client (training of member through SDAC service)	$4.06	$4.06
S5110			Home care training, family (training of home care worker through SDAC service)	$4.06	$4.06
S5115			Home care training, non-family (training of unrelated home care worker through SDAC service)	$4.06	$4.06
S5125	U2		Attendant Care provided through SDAC service	$3.75	$3.84
T1023			Initiation of FEA service per ACW, no background check	$27.25	$27.25
T1023	UC		Initiation of FEA service per ACW, with background check	$32.19	$32.19
T2040	UA		Initiation of Fiscal/Employer Agent (FEA) service, per member	$56.92	$56.92
T2040	UB		FEA service, monthly	$51.89	$51.89