

**Provider Type 38 Waiver for Individuals with Intellectual
Disabilities and Related Conditions
ICF/ID**

Reimbursement Schedule

Date of last rate review: 11/2016

A rate review may or may not result in a change to the reimbursement rate.

The data contained in the schedule is made available to provide information and is not a guarantee by the State or the Department or its employees as to the present accuracy of the information provided herein. For example, coverage as well as an actual rate may have been revised or updated and may no longer be the same as posted on the website.

Procedure codes with a rate of \$0.00 are reimbursed at 62% of Usual and Customary charges unless noted otherwise in Nevada Medicaid policy.

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Specialty	Proc	Mod	Desc	Rate	Rate Begin
000	96152	HN	Intervene hlth/behave indiv	18.46	10/1/2008
000	96152	HO	Intervene hlth/behave indiv	21.23	10/1/2008
000	97802		Medical nutrition indiv in	14.04	4/1/2016
000	97802	TN	Medical nutrition indiv in	16.37	4/1/2016
000	97803		Med nutrition indiv subseq	14.02	4/1/2016
000	97803	TN	Med nutrition indiv subseq	16.36	4/1/2016
000	S0281		Medical home, maintenance	9.18	12/1/2015
000	S5190		Wellness assessment by nonph	25.57	12/1/2015
000	S5190	U1	Wellness assessment by nonph	6.39	12/1/2015
215	S5190		Wellness assessment by nonph	25.57	12/1/2015
215	S5190	U1	Wellness assessment by nonph	6.39	12/1/2015
000	S9123		Nursing care in home rn	36.73	10/1/2008
000	S9123	TV	Nursing care in home rn	55.10	10/1/2008
000	S9123	U1	Nursing care in home rn	64.28	12/1/2015
000	S9123	U2	Nursing care in home rn	42.85	12/1/2015
000	S9124		Nursing care, in the home; b	27.28	10/1/2008
000	S9124	TV	Nursing care, in the home; b	40.92	10/1/2008
000	S9124	U1	Nursing care, in the home; b	47.76	12/1/2015
000	S9124	U2	Nursing care, in the home; b	31.84	12/1/2015
000	T1001		Nursing assessment/evaluatn	128.68	4/1/2016
000	T1002		Rn services up to 15 minutes	11.87	1/1/2016
000	T1002	TV	Rn services up to 15 minutes	17.81	1/1/2016
000	T1002	U1	Rn services up to 15 minutes	20.78	1/1/2016
000	T1002	U2	Rn services up to 15 minutes	13.85	1/1/2016
000	T1003		LPN/LVN SERVICES UP TO 15MIN	8.84	7/1/2015
000	T1003	TN	LPN/LVN SERVICES UP TO 15MIN	10.32	12/1/2015
000	T1003	TV	LPN/LVN SERVICES UP TO 15MIN	13.26	7/1/2015
000	T1003	U1	LPN/LVN SERVICES UP TO 15MIN	15.48	12/1/2015
000	T2003		N-et; encounter/trip	50.00	10/1/2008
000	T2014		Habilitation Prevocational waiver per diem	153.53	8/1/2016
000	T2017		Habilitation, Residential Waiver (Direct Services) 15 min	6.25	8/1/2016
000	T2017	UJ	Habilitation, Residential Waiver (Night Services) 15 min	3.12	8/1/2016
000	T2020		Day Habilitation waiver per diem	153.53	8/1/2016
000	T2018		Habilitation sup empl waiver per diem	153.53	8/1/2016
000	T2019		Habilitation sup empl waiver 15min	7.81	4/1/2016
000	T2024	HN	Serv asmnt/care plan waiver	18.46	4/1/2016
000	T2024	HO	Serv asmnt/care plan waiver	21.23	4/1/2016