	Fee For Service (FFS) CFCO Rate Codes for 7/1/19				
	FFS Home	Delivered and Congregate Meals			
Rate Code	Description	Effective Date	Rate		
3183	HOME DELIVERED MEALS - CFCO	7/1/2019	Reference Range \$4.25- \$12.50		
3184	CONGREGATE MEALS – CFCO	7/1/2019	Reference Range \$4.25- \$12.50		
3185	HOME DELIVERED MEALS - (WKND) - CFCO	7/1/2019	Reference Range \$4.25- \$12.50		
	NHTD Hom	e Delivered and Congregate Meals			
Rate Code	Description	Effective Date	Rate		
9781	NHTDWVR Cong/Home Meals Tot Charge	Current and after 7/1/19	Reference Range \$4.25- \$12.50		
	FFS Personal	Emergency Response Units (PERS)			
Rate Code	Description	Effective Date	Rate		
2513	PERS INSTALLATION CHARGE	Current and after 7/1/19	Average rate is approximately \$45.00		
2514	PERS MONTHLY SERVICE CHARGE	Current and after 7/1/19	Limit of one single unit claim per month. Provider-specific average rate of about \$30.		
	FFS - Assistive	e Technology Annual Cap \$15,000			
Rate Code	Description	Effective Date	Rate		
3186	ASSISTIVE TECHNOLOGY (AT) - CFCO	7/1/2019	Submit charged amount up to \$15,000.		
	TBI - Assistiv	e Technology - Annual Cap \$15,000			
Rate Code	Description	Effective Date	Rate		
9857	TBI Waiver Assistive Technology Total Charges	Current and after 7/1/19	Submit charged amount up to \$15,000.		
		e Technology - Annual Cap \$15,000			
Rate Code	Description	Effective Date	Rate		
9752	NHTD Assist Tech Total Charges	Current and after 7/1/19	Submit charged amount up to \$15,000.		
	CONSOLIDATED CHILDREN'S 1915	5 (c) Assistive-Adaptive Technology	Annual Cap \$15,000		
Rate Code	\$5,000 - One Time Payment	Effective Date	Rate		
8037	ADAPTIVE AND ASSISTIVE EQUIPMENT - \$1.00 UNIT	7/1/2019	\$1.00 PER UNIT.		
8038	ADAPTIVE AND ASSISTIVE EQUIPMENT - \$10.00 UNIT	7/1/2019	\$10.00 PER UNIT.		
8039	ADAPTIVE AND ASSISTIVE EQUIPMENT - \$100.00 UNIT	7/1/2019	\$100.00 PER UNIT.		
8040	ADAPTIVE AND ASSISTIVE EQUIPMENT - \$1000.00 UNIT	7/1/2019	\$1000.00 PER UNIT.		
0010		tive Technology Annual Cap \$15,000			
Rate Code	Description	Effective Date	Rate		
4482	Adaptive Tech \$1/Unit Fee	Current and after 7/1/19	Adaptive Tech \$1/Unit Fee		
4483	Adaptive Tech \$10/Unit Fee	Current and after 7/1/19	Adaptive Tech \$10/Unit Fee		
4484	Adaptive Tech \$100/Unit Fee	Current and after 7/1/19	Adaptive Tech \$100/Unit Fee		
4485	Adaptive Tech \$1000/Unit Fee	Current and after 7/1/19	Adaptive Tech \$1000/Unit Fee		
		/ Mods Annual Cap \$15,000			
Rate Code	Description	Effective Date	Rate		
3193	VEHICLE MODIFICATIONS - CFCO	7/1/2019	Submit charged amount up to \$15,000.		
	OPWDD				
Rate Code	Description	Effective Date	Rate		
3167	VEHICLE ADAPT; OPWDD CFCO;STATE	7/1/2019	\$1.00 PER UNIT.		
	VEHICLE ADAPT: OPWDD CFCO:STATE	7/1/2019	\$10.00 PER UNIT.		
3168	IVERIOLE ADAFT. OF WOOD GEGO. STATE				
3168 3169	VEHICLE ADAPT; OPWDD CFCO;STATE  VEHICLE ADAPT; OPWDD CFCO;STATE	7/1/2019	\$100.00 PER UNIT.		

	NH1	FD V Mods Annual Cap \$15,000	
Rate Code	Description	Effective Date	Rate
9750	NHTDWVR Vehicle Adaptation	Current and after 7/1/19	Submit charged amount up to \$15,000.
	CONSOLIDATED CH	HILDREN'S 1915 (c) V Mods Annual Cap	\$15,000
Rate Code	Description	Effective Date	Rate
8041	VEHICLE MODIFICATIONS - \$1.00 UNIT	7/1/2019	\$1.00 PER UNIT.
8042	VEHICLE MODIFICATIONS - \$10.00 UNIT	7/1/2019	\$10.00 PER UNIT.
8043	VEHICLE MODIFICATIONS - \$100.00 UNIT	7/1/2019	\$100.00 PER UNIT.
8044	VEHICLE MODIFICATIONS - \$1000.00 UNIT	7/1/2019	\$1000.00 PER UNIT.
	FFS Environ	mental Modifications Annual Cap \$15,000	
Rate Code	Description	Effective Date	Rate
3192	ENVIRONMENTAL MODIFICATIONS - CFCO	7/1/2019	Submit charged amount up to \$15,000.
	OPWDD Envi	ironmental Modifications Annual Cap 15,0	
Rate Code	Description	Effective Date	Rate
4476	ENV MODS; OPWDD CFCO;	Current and after 7/1/19	\$1 PER UNIT FEE; STATE.
4477	ENV MODS; OPWDD CFCO;	Current and after 7/1/19	\$10 PER UNIT FEE; STATE.
4478	ENV MODS; OPWDD CFCO;	Current and after 7/1/19	\$100 PER UNIT FEE; STATE.
4479	ENV MODS; OPWDD CFCO;	Current and after 7/1/19	\$1000 PER UNIT FEE; STATE.
	TBI Environ	mental Modifications Annual Cap \$15,000	
Rate Code	Description	Effective Date	Rate
9874	TBI WVR ENVIRON MODS \$1000.00 PER UNIT FEE	Current and after 7/1/19	\$1000.00 UNIT.
	NHTD Enviro	nmental Modifications Annual Cap \$15,00	00
Rate Code	Description	Effective Date	Rate
9762	NHTDWVR ENVIRON MOD TOT CHARGES	Current and after 7/1/19	Submit charged amount up to \$15,000.
	CONSOLIDATED CHILDREN'S	S 1915 (c) Environmental Modifications A	nnual Cap \$15,000
Rate Code	Description	Effective Date	Rate
8032	ENVIRONMENTAL MODIFICATIONS - \$1.00 UNIT	7/1/2019	\$1.00 PER UNIT.
8034	ENVIRONMENTAL MODIFICATIONS - \$10.00 UNIT	7/1/2019	\$10.00 PER UNIT.
8035	ENVIRONMENTAL MODIFICATIONS - \$100.00 UNIT	7/1/2019	\$100.00 PER UNIT.
8036	ENVIRONMENTAL MODIFICATIONS - \$1000.00 UNIT	7/1/2019	\$1000.00 PER UNIT.
	FFS- MOVING	S ASSISTANCE \$5,000.00 One Time Payn	nent
Rate Code	Description	Effective Date	Rate
3188	MOVING ASSISTANCE (HOURLY) -CFCO	7/1/2019	Submit charged amount up to \$5,000.
	NHTD MOVIN	G ASSISTANCE \$5,000.00 One Time Pay	
Rate Code	Description	Effective Date	Rate
9787	NHTDWVR MOV ASS'T PROG TOTAL CHARGE	Current and after 7/1/19	Submit charged amount up to \$5,000.
	OPWDD MOVIN	G ASSISTANCE \$5,000.00 One Time Pay	ment
Rate Code	Description	Effective Date	Rate
7449	MOVING ASSISTANCE	7/1/2019	\$10.00 Per Unit. Max \$990.00 per day
		S CTS \$5,000 One Time Payment	
Rate Code	Description	Effective Date	Rate
3187	COMMUNITY TRANSITION SERVICES (CFCO)	7/1/2019	Submit charged amount up to \$5,000.
		TD CTS \$5,000 One Time Payment	
Rate Code	Description	Effective Date	Rate
9758	NHTDWVR COM TRANSIT SVR TOT CHARGE	7/1/2019	Submit charged amount up to \$5,000.
9867	TBI WAIVER COMM TRANS RATE CD 20 - \$1000.00 PER UNIT	7/1/2019	Submit charged amount up to \$5,000.

Rate Code	Description	Effective Date	Rate
4786	COM TRANS SVCS; VIA FI: Vol;	Current and after 7/1/19	\$10.00 Per Unit. Max \$990.00 per day
	OPWDD Communit	ty Habilitation(COM HAB)(SAME	E)
Rate Code	Description	Effective Date	Rate
4722	Comm/Res Hab Vol; INDIV 1/4 HR - Downstate	7/1/2019	\$10.43
4722	Comm/Res Hab Vol; INDIV 1/4 HR - Upstate	7/1/2019	\$10.40
4723	Comm/Res Hab Vol; Group-2; 1/4 HR - Downstate	7/1/2019	\$6.51
4723	Comm/Res Hab Vol; Group-2; 1/4 HR - Upstate	7/1/2019	\$6.50
4724	Comm/Res Hab Vol; Group-3; 1/4 HR - Downstate	7/1/2019	\$5.20
4724	Comm/Res Hab Vol; Group-3; 1/4 HR - Upstate	7/1/2019	\$4.92
4741	Comm/Res Hab: STATE: Group-1; 1/4 HR - Downstate	7/1/2019	\$10.43
4741	Comm/Res Hab: STATE: Group-1; 1/4 HR - Upstate	7/1/2019	\$10.40
4742	Comm/Res Hab: STATE: Group-2; 1/4 HR - Downstate	7/1/2019	\$6.51
4742	Comm/Res Hab: STATE: Group-2; 1/4 HR - Upstate	7/1/2019	\$6.50
4743	Comm/Res Hab: STATE: Group-3; 1/4 HR - Downstate	7/1/2019	\$5.20
4743	Comm/Res Hab: STATE: Group-3; 1/4 HR - Upstate	7/1/2019	\$4.92
4755	COM HAB: Agy Sup: Vol; INDIV 1/4 HR - Downstate	7/1/2019	\$10.43
4755	COM HAB: Agy Sup: Vol; INDIV 1/4 HR - Upstate	7/1/2019	\$10.40
4756	COM HAB: Agy Sup: Vol; Group 1/4 HR - Downstate	7/1/2019	\$6.51
4756	COM HAB: Agy Sup: Vol; Group 1/4 HR - Upstate	7/1/2019	\$6.50
	CONSOLIDATED CHILDREN'S 191	5 (c) Community Habilitation (CO	M HAB) (SAME)
Rate Code	Description	Effective Date	Rate
8012	Individual - hourly/downstate habilitation	7/1/2019	\$41.70
8012	Individual - hourly/upstate habilitation	7/1/2019	\$41.61
8013	Group of 2 hourly/downstate habilitation	7/1/2019	\$26.04
8013	Group of 2 hourly/upstate habilitation	7/1/2019	\$26.01
8014	Group of 3+ hourly/downstate habilitation	7/1/2019	\$20.78
8014	Group of 3+ hourly/upstate habilitation	7/1/2019	\$19.67
		NON WAIVER - SAME	
		new companion add on code when	n applicable
Rate Code	Description	Effective Date	Rate
3171	ADL/IADL SKILL ACQUISITION SVCS - CFCO NON-DD (Rate code 3171 for upstate and downstate is the same),	As of 7/1/19	NYC \$5.50, Rest of State \$11.00

		CDPAP - SAME	
Rate Code	Description	Effective Date	Rate
2401	CDPAP 1 CLIENT, HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2402	CDPAP 2 OR MORE CLIENTS HOURLY, PER CLIENT	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2403	CDPAP 1 CLIENT, HOURLY, ENHANCED	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2404	CDPAP 2 OR MORE CLIENTS HOURLY PER CLIENT EN	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2405	CDPAP 1 CLIENT LIVE-IN	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2406	CDPAP 2 OR MORE CLIENTS, PER CLIENT LIVE-IN	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2422	CDPAP 1 CLIENT, QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2423	CDPAP 2 CLIENTS, PER CLIENT, QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2424	CDPAP 1 CLIENT ENHANCED RATE QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2425	CDPAP 2 CLIENTS, PER CLIENT, ENHANCED RATE QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
	CERTIFIE	D HOME HEALTH AIDE SAME	
Rate Code	Description	Effective Date	Rate
2499	HOME HEALTH SHARED AIDE	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/chha/rates
2610	HOME HEALTH AIDE		https://www.health.ny.gov/facilities/long_term_care/reimbursement/chha/rates
	PERSON	AL CARE LEVELS I & II SAME	
Rate Code	Description	Effective Date	Rate
2501	PCA LEVEL 1, SHARED AIDE, BASIC, HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2502	PCA LEVEL II, SHARED AIDE, BASIC, HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2507	PCA LEVEL 1, SHARED AIDE, BASIC, QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2508	PCA LEVEL II, SHARED AIDE, BASIC, QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2593	PCA LEVEL I, 1 CLIENT, QUARTER HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2594	PCA LEVEL I, 2 CLIENTS, PER CLIENT 1/4 HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2595	PCA LEVEL II, 1 CLIENT, 1/4 HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2596	PCA LEVEL II, 2 CLIENTS PER CLIENT 1/4 HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2597	PCA LEVEL II, 1 CLIENT, HARD TO SERVE, 1/4 HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2598	PCA LEVEL II, 2 CLIENTS, HARD TO SERVE 1/4 HOUR	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2601	PCA LEVEL I, ONE CLIENT HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2602	PCA LEVEL 1 TWO CLIENTS HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2623	PCA LEVEL 2 TWO CLIENTS HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2622	PCA LEVEL 2 ONE CLIENT HOURLY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2626	PCA LEVEL 2 ONE CLIENT HOURLY- SECONDARY CODE	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2627	PCA LEVEL 2 2 CLIENTS HOURLY- PER CLIENT, SECONDARY CODE	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2632	PCA LEVEL 2, ONE CLIENT DAILY	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr
2633	PCA LEVEL 2, 2 CLIENTS DAILY (PER CLIENT)	1/1/2018	https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr