Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
CORF/ORF	1	92507			treatment of speech, language, voice, communication, and/ or auditory processing disorder; individual	0-20		$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
CORF/ORF	1	92507			treatment of speech, language, voice, communication, and/ or auditory processing disorder; individual	21-999		$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
HHA	1	92507			**	0-20		$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
HHA	1	92507			**	21-999		$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
Ind Therapists	1	92507			**	0-20		$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
Ind Therapists	1	92507			**	0-20	P2	$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
Ind Therapists	1	92507			**	21-999		$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
Ind Therapists	1	92507			**	21-999	P2	$66.89	$17.86	$67.33	$47.41	$35.40	$14.30	$39.91			$48.31	$30.00	$23.85	$39.55	$37.03	$19.85	$36.63	$37.03	1	1
CORF/ORF	1	92508			treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); group, two or more individuals	0-20		$23.88		$19.70	$8.45	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$17.33	$18.15	1	1
CORF/ORF	1	92508			treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); group, two or more individuals	21-999		$23.88		$19.70	$8.45	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$17.33	$18.15	1	1
HHA	1	92508			**	0-20		$23.88		$19.70	$19.34	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$18.54	$19.34	1	1
HHA	1	92508			**	21-999		$23.88		$19.70	$19.34	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$18.54	$19.34	1	1
Ind Therapists	1	92508			**	0-20		$23.88		$19.70	$8.45	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$17.33	$18.15	1	1
Ind Therapists	1	92508			**	0-20	P2	$23.88		$19.70	$19.34	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$18.54	$19.34	1	1
Ind Therapists	1	92508			**	21-999		$23.88		$19.70	$8.45	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$17.33	$18.15	1	1
Ind Therapists	1	92508			**	21-999	P2	$23.88		$19.70	$19.34	$14.20	$3.47				$23.07	$30.00	$12.57	$26.35	$18.15		$18.54	$19.34	1	1
CORF/ORF	1	92521			Evaluation of Speech fluency (eg, stuttering and articulation, phonological process, apraxia, dysarthia) Added 1-1-2014	0-20		$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$93.24	$45.00		$97.14	$77.67	$37.40	$73.64	$74.50	0	1
CORF/ORF	1	92521			Evaluation of Speech fluency (eg, stuttering and articulation, phonological process, apraxia, dysarthia) Added 1-1-2014	21-999		$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$77.70	$45.00		$97.14	$77.67	$37.40	$72.09	$74.50	0	1
HHA	1	92521			**	0-20		$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$93.24	$45.00		$97.14	$77.67	$37.40	$73.64	$74.50	0	1
HHA	1	92521			**	21-999		$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$77.70	$45.00		$97.14	$77.67	$37.40	$72.09	$74.50	0	1
Ind Therapists	1	92521			**	0-20		$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$93.24	$45.00		$97.14	$77.67	$37.40	$73.64	$74.50	0	1
Ind Therapists	1	92521			**	0-20	P2	$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$93.24	$45.00		$97.14	$77.67	$37.40	$73.64	$74.50	0	1
Ind Therapists	1	92521			**	21-999		$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$77.70	$45.00		$97.14	$77.67	$37.40	$72.09	$74.50	0	1
Ind Therapists	1	92521			**	21-999	P2	$55.07	$27.82	$91.68	$64.53	$97.86		$71.33		$60.54	$77.70	$45.00		$97.14	$77.67	$37.40	$72.09	$74.50	0	1
CORF/ORF	1	92522			Evaluation of Speech fluency (eg, articulation, phonological process, apraxia, dysarthia) Added 1-1-2014	0-20		$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$75.97	$45.00		$78.86	$63.20	$37.40	$62.06	$60.50	1	1
CORF/ORF	1	92522			Evaluation of Speech fluency (eg, articulation, phonological process, apraxia, dysarthia) Added 1-1-2014	21-999		$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$63.31	$45.00		$78.86	$63.20	$37.40	$60.79	$60.50	1	1

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Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	1	92522			**	0-20		$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$75.97	$45.00		$78.86	$63.20	$37.40	$62.06	$60.50	1	1
HHA	1	92522			**	21-999		$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$63.31	$45.00		$78.86	$63.20	$37.40	$60.79	$60.50	1	1
Ind Therapists	1	92522			**	0-20		$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$75.97	$45.00		$78.86	$63.20	$37.40	$62.06	$60.50	1	1
Ind Therapists	1	92522			**	0-20	P2	$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$75.97	$45.00		$78.86	$63.20	$37.40	$62.06	$60.50	1	1
Ind Therapists	1	92522			**	21-999		$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$63.31	$45.00		$78.86	$63.20	$37.40	$60.79	$60.50	1	1
Ind Therapists	1	92522			**	21-999	P2	$68.84	$34.78	$78.42	$55.13	$79.48		$57.80		$49.33	$63.31	$45.00		$78.86	$63.20	$37.40	$60.79	$60.50	1	1
CORF/ORF	1	92523			Evaluation of speech sound production with evaluation of language comprehension and expression. Added 1-1-2014	0-20		$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$157.42	$45.00		$163.81	$131.09	$37.40	$119.40	$125.67	0	1
CORF/ORF	1	92523			Evaluation of speech sound production with evaluation of language comprehension and expression. Added 1-1-2014	21-999		$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$131.19	$45.00		$163.81	$131.09	$37.40	$116.77	$125.67	0	1
HHA	1	92523			**	0-20		$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$157.42	$45.00		$163.81	$131.09	$37.40	$119.40	$125.67	0	1
HHA	1	92523			**	21-999		$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$131.19	$45.00		$163.81	$131.09	$37.40	$116.77	$125.67	0	1
Ind Therapists	1	92523			**	0-20		$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$157.42	$45.00		$163.81	$131.09	$37.40	$119.40	$125.67	0	1
Ind Therapists	1	92523			**	0-20	P2	$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$157.42	$45.00		$163.81	$131.09	$37.40	$119.40	$125.67	0	1
Ind Therapists	1	92523			**	21-999		$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$131.19	$45.00		$163.81	$131.09	$37.40	$116.77	$125.67	0	1
Ind Therapists	1	92523			**	21-999	P2	$91.78	$46.37	$159.60	$112.15	$165.05		$120.25		$102.19	$131.19	$45.00		$163.81	$131.09	$37.40	$116.77	$125.67	0	1
CORF/ORF	1	92524			Behavioral and qualitative analysis of voice and resonance Added 1-1-2014	0-20		$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$79.12	$45.00		$82.12	$66.00	$37.40	$63.39	$63.28	0	1
CORF/ORF	1	92524			Behavioral and qualitative analysis of voice and resonance Added 1-1-2014	21-999		$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$65.93	$45.00		$82.12	$66.00	$37.40	$62.07	$63.25	0	1
HHA	1	92524			**	0-20		$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$79.12	$45.00		$82.12	$66.00	$37.40	$63.39	$63.28	0	1
HHA	1	92524			**	21-999		$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$65.93	$45.00		$82.12	$66.00	$37.40	$62.07	$63.25	0	1
Ind Therapists	1	92524			**	0-20		$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$79.12	$45.00		$82.12	$66.00	$37.40	$63.39	$63.28	0	1
Ind Therapists	1	92524			**	0-20	P2	$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$79.12	$45.00		$82.12	$66.00	$37.40	$63.39	$63.28	0	1
Ind Therapists	1	92524			**	21-999		$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$65.93	$45.00		$82.12	$66.00	$37.40	$62.07	$63.25	0	1
Ind Therapists	1	92524			**	21-999	P2	$45.89	$23.19	$76.71	$53.25	$82.77		$60.56		$50.96	$65.93	$45.00		$82.12	$66.00	$37.40	$62.07	$63.25	0	1
CORF/ORF	1	92526			treatment of swallowing dysfunction and/or oral function for feeding	0-999		$66.89	$17.86	$72.78	$47.57	$75.10			$51.68	$33.00	$61.24				$39.94		$54.47	$51.68	1	1
HHA	1	92526			**	0-20		$66.89	$17.86	$72.78	$49.35	$75.10			$51.68	$33.00	$61.24				$39.94		$54.73	$51.68	1	1
HHA	1	92526			**	21-999		$66.89	$17.86	$72.78	$49.35	$75.10			$51.68	$33.00	$51.03				$39.94		$53.27	$51.03	1	1
Ind Therapists	1	92526			**	0-20		$66.89	$17.86	$72.78	$47.57	$75.10			$51.68	$33.00	$61.24				$39.94		$54.47	$51.68	1	1
Ind Therapists	1	92526			**	0-20	P2	$66.89	$17.86	$72.78	$49.35	$75.10			$51.68	$33.00	$61.24				$39.94		$54.73	$51.68	1	1
Ind Therapists	1	92526			**	21-999		$66.89	$17.86	$72.78	$47.57	$75.10			$51.68	$33.00	$51.03				$39.94		$53.01	$51.03	1	1
Ind Therapists	1	92526			**	21-999	P2	$66.89	$17.86	$72.78	$49.35	$75.10			$51.68	$33.00	$51.03				$39.94		$53.27	$51.03	1	1
CORF/ORF	1	92610			Evaluation of oral and pharyngeal swallowing fuction	0-999		$91.78	$46.37	$71.77	$42.24	$73.57			$28.81	$26.00	$58.91			$37.65	$55.73	$18.00	$45.85	$42.24	1	1
HHA	1	92610			**	0-20		$91.78	$46.37	$71.77	$69.58	$73.57			$28.81	$26.00	$58.91			$37.65	$55.73	$18.00	$48.89	$55.73	1	1
HHA	1	92610			**	21-999		$91.78	$46.37	$71.77	$69.58	$73.57			$28.81	$26.00	$49.08			$37.65	$55.73	$18.00	$47.80	$49.08	1	1
Ind Therapists	1	92610			**	0-999		$91.78	$46.37	$71.77	$42.24	$73.57			$28.81	$26.00	$58.91			$37.65	$55.73	$18.00	$45.85	$42.24	1	1
Ind Therapists	1	92610			**	0-999	P2	$91.78	$46.37	$71.77	$69.58	$73.57			$28.81	$26.00	$58.91			$37.65	$55.73	$18.00	$48.89	$55.73	1	1
CORF/ORF	1	97001			physical therapy evaluation	0-20		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$57.45	$59.87			$43.99		$53.29	$54.25	1	1
CORF/ORF	1	97001			physical therapy evaluation	21-999		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$46.88	$59.87			$43.99		$51.97	$48.97	1	1
HHA	1	97001			**	0-20		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$57.45	$59.87			$43.99		$53.29	$54.25	1	1
HHA	1	97001			**	21-999		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$46.88	$59.87			$43.99		$51.97	$48.97	1	1
HHA	1	97001	AT		**	0-20		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$57.45	$59.87			$43.99		$53.29	$54.25	1	1
HHA	1	97001	AT		**	21-999		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$46.88	$59.87			$43.99		$51.97	$48.97	1	1
HHA	C	97001			**	0-20		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$57.45	$59.87			$43.99		$53.29	$54.25	1	1
HHA	C	97001			**	21-999		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$46.88	$59.87			$43.99		$51.97	$48.97	1	1
Ind Therapists	1	97001			**	0-20		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$57.45	$59.87			$43.99		$53.29	$54.25	1	1
Ind Therapists	1	97001			**	0-20	P2	$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$57.45	$59.87			$43.99		$53.29	$54.25	1	1
Ind Therapists	1	97001			**	21-999		$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$46.88	$59.87			$43.99		$51.97	$48.97	1	1
Ind Therapists	1	97001			**	21-999	P2	$55.23	$50.91	$63.58	$44.90	$65.02	$51.05		$40.44		$46.88	$59.87			$43.99		$51.97	$48.97	1	1
CORF/ORF	1	97002			physical therapy re-evaluation	0-20		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
CORF/ORF	1	97002			physical therapy re-evaluation	21-999		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
HHA	1	97002			**	0-20		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
HHA	1	97002			**	21-999		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
HHA	1	97002	AT		**	0-20		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
HHA	1	97002	AT		**	21-999		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
HHA	C	97002			**	0-20		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
HHA	C	97002			**	21-999		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
Ind Therapists	1	97002			**	0-20		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
Ind Therapists	1	97002			**	0-20	P2	$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
Ind Therapists	1	97002			**	21-999		$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
Ind Therapists	1	97002			**	21-999	P2	$32.75	$50.91	$35.27	$25.27	$36.47	$51.05		$16.85						$22.96		$31.31	$30.27	1	1
CORF/ORF	1	97003			occupational therapy evaluation	0-20		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$60.72	$67.23		$49.84	$47.08		$56.85	$51.05	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
CORF/ORF	1	97003			occupational therapy evaluation	21-999		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$57.45	$67.23		$49.84	$47.08		$56.48	$51.05	1	1
HHA	1	97003			**	0-20		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$60.72	$67.23		$49.84	$47.08		$56.85	$51.05	1	1
HHA	1	97003			**	21-999		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$57.45	$67.23		$49.84	$47.08		$56.48	$51.05	1	1
HHA	1	97003	AT		**	0-20		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$60.72	$67.23		$49.84	$47.08		$56.85	$51.05	1	1
HHA	1	97003	AT		**	21-999		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$57.45	$67.23		$49.84	$47.08		$56.48	$51.05	1	1
HHA	C	97003			**	0-20		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$60.72	$67.23		$49.84	$47.08		$56.85	$51.05	1	1
HHA	C	97003			**	21-999		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$57.45	$67.23		$49.84	$47.08		$56.48	$51.05	1	1
Ind Therapists	1	97003			**	0-20		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$60.72	$67.23		$49.84	$47.08		$56.85	$51.05	1	1
Ind Therapists	1	97003			**	0-20	P2	$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$60.72	$67.23		$49.84	$47.08		$56.85	$51.05	1	1
Ind Therapists	1	97003			**	21-999		$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$57.45	$67.23		$49.84	$47.08		$56.48	$51.05	1	1
Ind Therapists	1	97003			**	21-999	P2	$59.47	$55.58	$71.36	$50.96	$72.95	$51.05		$40.44		$57.45	$67.23		$49.84	$47.08		$56.48	$51.05	1	1
CORF/ORF	1	97004			occupational therapy re-evaluation	0-20		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
CORF/ORF	1	97004			occupational therapy re-evaluation	21-999		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
HHA	1	97004			**	0-20		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
HHA	1	97004			**	21-999		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
HHA	1	97004	AT		**	0-20		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
HHA	1	97004	AT		**	21-999		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
HHA	C	97004			**	0-20		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
HHA	C	97004			**	21-999		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
Ind Therapists	1	97004			**	0-20		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
Ind Therapists	1	97004			**	0-20	P2	$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
Ind Therapists	1	97004			**	21-999		$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
Ind Therapists	1	97004			**	21-999	P2	$32.95	$55.58	$43.62	$31.74	$45.62	$51.05		$16.85					$23.84	$22.54		$33.61	$31.74	0	1
CORF/ORF	1	97012			application of a modality to one or more areas; traction, mechanical	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
CORF/ORF	1	97012			application of a modality to one or more areas; traction, mechanical	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012			**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	AT		**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	AT		**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	AT	GO	**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	AT	GO	**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	AT	GP	**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	AT	GP	**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	GO		**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	GO		**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	GP		**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	1	97012	GP		**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	C	97012			**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	C	97012			**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	C	97012	GO		**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	C	97012	GO		**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	C	97012	GP		**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
HHA	C	97012	GP		**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
Ind Therapists	1	97012			**	0-20			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
Ind Therapists	1	97012			**	0-20	P2		$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
Ind Therapists	1	97012			**	21-999			$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
Ind Therapists	1	97012			**	21-999	P2		$11.14		$9.61	$13.80			$11.21				$12.26	$15.14	$12.13	$7.70	$11.69	$12.13		0
CORF/ORF	1	97014			application of a modality to one or more areas; electrical stimulation (unattended)	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
CORF/ORF	1	97014			application of a modality to one or more areas; electrical stimulation (unattended)	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014			**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	1	97014	AT		**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	AT		**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	AT	GO	**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	AT	GO	**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	AT	GP	**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	AT	GP	**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	GO		**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	GO		**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	GP		**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	1	97014	GP		**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	C	97014			**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	C	97014			**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	C	97014	GO		**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	C	97014	GO		**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	C	97014	GP		**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
HHA	C	97014	GP		**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
Ind Therapists	1	97014			**	0-20		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
Ind Therapists	1	97014			**	0-20	P2	$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
Ind Therapists	1	97014			**	21-999		$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
Ind Therapists	1	97014			**	21-999	P2	$9.68	$11.14		$9.61	$13.78			$10.11				$10.07	$12.96		$6.50	$10.51	$10.09	0	1
CORF/ORF	1	97016			application of a modality to one or more areas; vasopneumatic devices	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
CORF/ORF	1	97016			application of a modality to one or more areas; vasopneumatic devices	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	1	97016			**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	1	97016	AT		**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	1	97016	AT		**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	1	97016	AT	GO	**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	1	97016	AT	GO	**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	1	97016	AT	GP	**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	1	97016	AT	GP	**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	1	97016	GO		**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	1	97016	GO		**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	1	97016	GP		**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	1	97016	GP		**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	C	97016			**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	C	97016			**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	C	97016	GO		**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	C	97016	GO		**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
HHA	C	97016	GP		**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
HHA	C	97016	GP		**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
Ind Therapists	1	97016			**	0-20		$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
Ind Therapists	1	97016			**	0-20	P2	$9.00	$13.38		$11.70	$16.52			$16.85		$12.14		$10.71	$13.92	$11.22	$7.00	$12.51	$11.92	0	1
Ind Therapists	1	97016			**	21-999		$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
Ind Therapists	1	97016			**	21-999	P2	$9.00	$13.38		$11.70	$16.52			$16.85		$10.12		$10.71	$13.92	$11.22	$7.00	$12.26	$11.46	0	1
CORF/ORF	1	97018			application of a modality to one or more areas; paraffin bath	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
CORF/ORF	1	97018			application of a modality to one or more areas; paraffin bath	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	1	97018			**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	1	97018	AT		**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	1	97018	AT		**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	1	97018	AT	GO	**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	1	97018	AT	GO	**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	1	97018	AT	GP	**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	1	97018	AT	GP	**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	1	97018	GO		**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	1	97018	GO		**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	1	97018	GP		**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	1	97018	GP		**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	C	97018			**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	C	97018			**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	C	97018	GO		**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	C	97018	GO		**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
HHA	C	97018	GP		**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
HHA	C	97018	GP		**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
Ind Therapists	1	97018			**	0-20		$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
Ind Therapists	1	97018			**	0-20	P2	$15.18	$9.50		$6.68	$9.46			$10.11		$6.24		$6.65	$9.54	$4.81	$5.95	$7.43	$6.67	1	1
Ind Therapists	1	97018			**	21-999		$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
Ind Therapists	1	97018			**	21-999	P2	$15.18	$9.50		$6.68	$9.46			$10.11		$5.20		$6.65	$9.54	$4.81	$5.95	$7.30	$6.67	1	1
CORF/ORF	1	97022			application of a modality to one or more areas; whirlpool	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
CORF/ORF	1	97022			application of a modality to one or more areas; whirlpool	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022			**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	AT		**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	AT		**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	AT	GO	**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	AT	GO	**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	AT	GP	**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	AT	GP	**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	GO		**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	GO		**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	GP		**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	1	97022	GP		**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	C	97022			**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	C	97022			**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	C	97022	GO		**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	C	97022	GO		**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	C	97022	GP		**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
HHA	C	97022	GP		**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
Ind Therapists	1	97022			**	0-20			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
Ind Therapists	1	97022			**	0-20	P2		$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
Ind Therapists	1	97022			**	21-999			$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
Ind Therapists	1	97022			**	21-999	P2		$16.66	$19.05	$14.20	$20.18			$10.11					$12.97		$6.50	$13.84	$13.59		0
CORF/ORF	1	97024			application of a modality to one or more areas; diathermy (eg, microwave)	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
CORF/ORF	1	97024			application of a modality to one or more areas; diathermy (eg, microwave)	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024			**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	AT		**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	AT		**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	AT	GO	**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	AT	GO	**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	AT	GP	**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	AT	GP	**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	GO		**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	GO		**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	GP		**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	1	97024	GP		**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	C	97024			**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	C	97024			**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	C	97024	GO		**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	C	97024	GO		**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	C	97024	GP		**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
HHA	C	97024	GP		**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
Ind Therapists	1	97024			**	0-20		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
Ind Therapists	1	97024			**	0-20	P2	$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
Ind Therapists	1	97024			**	21-999		$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
Ind Therapists	1	97024			**	21-999	P2	$13.69	$5.49		$3.76	$5.50			$10.11					$9.22	$9.92	$4.50	$7.17	$7.36	1	1
CORF/ORF	1	97026			application of a modality to one or more areas; infrared	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
CORF/ORF	1	97026			application of a modality to one or more areas; infrared	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026			**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	AT		**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	AT		**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	AT	GO	**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	AT	GO	**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	AT	GP	**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	AT	GP	**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	GO		**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	GO		**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	GP		**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	1	97026	GP		**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	C	97026			**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	C	97026			**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	C	97026	GO		**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	C	97026	GO		**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	C	97026	GP		**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
HHA	C	97026	GP		**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
Ind Therapists	1	97026			**	0-20		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
Ind Therapists	1	97026			**	0-20	P2	$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
Ind Therapists	1	97026			**	21-999		$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
Ind Therapists	1	97026			**	21-999	P2	$1.72	$5.21		$3.55	$5.19			$7.52				$5.70	$8.89		$4.40	$5.88	$5.45	0	1
CORF/ORF	1	97028			application of a modality to one or more areas; ultraviolet	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
CORF/ORF	1	97028			application of a modality to one or more areas; ultraviolet	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028			**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	AT		**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	AT		**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	AT	GO	**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	AT	GO	**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	AT	GP	**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	AT	GP	**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	GO		**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	GO		**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	GP		**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	1	97028	GP		**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	C	97028			**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	C	97028			**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	C	97028	GO		**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	C	97028	GO		**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	C	97028	GP		**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
HHA	C	97028	GP		**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
Ind Therapists	1	97028			**	0-20		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
Ind Therapists	1	97028			**	0-20	P2	$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
Ind Therapists	1	97028			**	21-999		$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
Ind Therapists	1	97028			**	21-999	P2	$49.34	$6.37		$4.39	$6.42			$4.49				$6.31	$9.53		$4.70	$5.97	$5.51	1	1
CORF/ORF	1	97032			application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
CORF/ORF	1	97032			application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	1	97032			**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	1	97032	AT		**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	1	97032	AT		**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	1	97032	AT	GO	**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	1	97032	AT	GO	**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	1	97032	AT	GP	**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	1	97032	AT	GP	**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	1	97032	GO		**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	1	97032	GO		**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	1	97032	GP		**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	1	97032	GP		**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	C	97032			**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	C	97032			**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	C	97032	GO		**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	C	97032	GO		**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
HHA	C	97032	GP		**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
HHA	C	97032	GP		**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
Ind Therapists	1	97032			**	0-20			$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
Ind Therapists	1	97032			**	0-20	P2		$13.38		$11.49	$16.55			$16.85		$13.22			$14.50	$10.69	$7.40	$12.96	$13.22		0
Ind Therapists	1	97032			**	21-999			$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
Ind Therapists	1	97032			**	21-999	P2		$13.38		$11.49	$16.55			$16.85		$11.01			$14.50	$10.69	$7.40	$12.64	$11.49		0
CORF/ORF	1	97033			application of a modality to one or more areas; iontophoresis, each 15 minutes	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
CORF/ORF	1	97033			application of a modality to one or more areas; iontophoresis, each 15 minutes	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	1	97033			**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	1	97033	AT		**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	1	97033	AT		**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	1	97033	AT	GO	**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	1	97033	AT	GO	**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	1	97033	AT	GP	**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	1	97033	AT	GP	**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	1	97033	GO		**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	1	97033	GO		**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	1	97033	GP		**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	1	97033	GP		**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	C	97033			**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	C	97033			**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	C	97033	GO		**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
HHA	C	97033	GO		**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
HHA	C	97033	GP		**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	C	97033	GP		**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
Ind Therapists	1	97033			**	0-20			$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
Ind Therapists	1	97033			**	0-20	P2		$22.97		$19.84	$27.84					$19.26		$11.61	$15.13		$7.70	$16.90	$17.20		0
Ind Therapists	1	97033			**	21-999			$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
Ind Therapists	1	97033			**	21-999	P2		$22.97		$19.84	$27.84					$16.05		$11.61	$15.13		$7.70	$16.36	$15.59		0
CORF/ORF	1	97034			application of a modality to one or more areas; contrast baths, each 15 minutes	0-20			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
CORF/ORF	1	97034			application of a modality to one or more areas; contrast baths, each 15 minutes	21-999			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
HHA	1	97034	GO		**	0-20			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
HHA	1	97034	GO		**	21-999			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
HHA	1	97034	GP		**	0-20			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
HHA	1	97034	GP		**	21-999			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
Ind Therapists	1	97034			**	0-20			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
Ind Therapists	1	97034			**	0-20	P2		$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
Ind Therapists	1	97034			**	21-999			$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
Ind Therapists	1	97034			**	21-999	P2		$12.62		$10.86	$15.62			$16.85				$9.08	$12.61	$8.87	$6.40	$11.47	$10.86		0
CORF/ORF	1	97035			application of a modality to one or more areas; ultrasound, each 15 minutes	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
CORF/ORF	1	97035			application of a modality to one or more areas; ultrasound, each 15 minutes	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035			**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	AT		**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	AT		**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	AT	GO	**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	AT	GO	**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	AT	GP	**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	AT	GP	**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	GO		**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	GO		**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	GP		**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	1	97035	GP		**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	C	97035			**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	C	97035			**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	C	97035	GO		**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	C	97035	GO		**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	C	97035	GP		**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
HHA	C	97035	GP		**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
Ind Therapists	1	97035			**	0-20			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
Ind Therapists	1	97035			**	0-20	P2		$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
Ind Therapists	1	97035			**	21-999			$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
Ind Therapists	1	97035			**	21-999	P2		$8.83		$7.52	$11.04			$16.85					$10.69	$9.06	$5.50	$10.11	$9.88		0
CORF/ORF	1	97036			application of a modality to one or more areas; hubbard tank, each 15 minutes	0-20			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
CORF/ORF	1	97036			application of a modality to one or more areas; hubbard tank, each 15 minutes	21-999			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
HHA	1	97036	GO		**	0-20			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	1	97036	GO		**	21-999			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
HHA	1	97036	GP		**	0-20			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
HHA	1	97036	GP		**	21-999			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
Ind Therapists	1	97036			**	0-20			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
Ind Therapists	1	97036			**	0-20	P2		$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
Ind Therapists	1	97036			**	21-999			$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
Ind Therapists	1	97036			**	21-999	P2		$23.23		$20.26	$28.15			$16.85				$13.50	$17.67	$14.02	$8.95	$17.06	$16.85		0
CORF/ORF	1	97039			unlisted modality (specify type and time if constant attendance)	0-20		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
CORF/ORF	1	97039			unlisted modality (specify type and time if constant attendance)	21-999		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	1	97039			**	21-999		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	1	97039	AT		**	0-20		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	1	97039	AT		**	21-999		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	1	97039	GO		**	0-20		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	1	97039	GP		**	0-20		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	C	97039			**	0-20		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
HHA	C	97039			**	21-999		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
Ind Therapists	1	97039			**	0-20		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
Ind Therapists	1	97039			**	0-20	P2	$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
Ind Therapists	1	97039			**	21-999		$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
Ind Therapists	1	97039			**	21-999	P2	$15.00	$14.27		$6.47	$9.54							$11.34				$9.12	$9.54	1	1
CORF/ORF	1	97110			therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
CORF/ORF	1	97110			therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	1	97110			**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	1	97110	AT		**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	1	97110	AT		**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	1	97110	AT	GO	**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	1	97110	AT	GO	**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	1	97110	AT	GP	**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	1	97110	AT	GP	**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	1	97110	GO		**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	1	97110	GO		**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	1	97110	GP		**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	1	97110	GP		**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	C	97110			**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	C	97110			**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	C	97110	GO		**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	C	97110	GO		**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
HHA	C	97110	GP		**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
HHA	C	97110	GP		**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
Ind Therapists	1	97110			**	0-20		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1
Ind Therapists	1	97110			**	0-20	P2	$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$22.97	$25.41		$20.07	$16.44	$10.40	$20.42	$19.75	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
Ind Therapists	1	97110			**	21-999		$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
Ind Therapists	1	97110			**	21-999	P2	$40.25	$17.86	$27.14	$19.42	$27.60	$17.86		$16.85		$19.15	$25.41		$20.07	$16.44	$10.40	$20.03	$19.29	1	1
CORF/ORF	1	97112			therapeutic procedure, one or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
CORF/ORF	1	97112			therapeutic procedure, one or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	1	97112			**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	1	97112	AT		**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	1	97112	AT		**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	1	97112	AT	GO	**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	1	97112	AT	GO	**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	1	97112	AT	GP	**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	1	97112	AT	GP	**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	1	97112	GO		**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	1	97112	GO		**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	1	97112	GP		**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	1	97112	GP		**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	C	97112			**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	C	97112			**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	C	97112	GO		**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	C	97112	GO		**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
HHA	C	97112	GP		**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
HHA	C	97112	GP		**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
Ind Therapists	1	97112			**	0-20		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
Ind Therapists	1	97112			**	0-20	P2	$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$23.51			$21.03	$16.93	$10.90	$21.49	$21.75	1	1
Ind Therapists	1	97112			**	21-999		$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
Ind Therapists	1	97112			**	21-999	P2	$32.90	$23.48	$27.99	$20.26	$28.82			$22.47		$19.59			$21.03	$16.93	$10.90	$21.00	$20.65	1	1
CORF/ORF	1	97113			therapeutic procedure, one or more areas, each 15 minutes; aquatic therapy with therapeutic exercises	0-20		$78.34	$30.55	$35.46	$26.11	$37.05			$22.47					$22.32	$19.38	$11.50	$24.90	$22.47	1	1
CORF/ORF	1	97113			therapeutic procedure, one or more areas, each 15 minutes; aquatic therapy with therapeutic exercises	21-999		$78.34	$30.55	$35.46	$26.11	$37.05			$22.47					$22.32	$19.38	$11.50	$24.90	$22.47	1	1
Ind Therapists	1	97113			**	0-20		$78.34	$30.55	$35.46	$26.11	$37.05			$22.47					$22.32	$19.38	$11.50	$24.90	$22.47	1	1
Ind Therapists	1	97113			**	0-20	P2	$78.34	$30.55	$35.46	$26.11	$37.05			$22.47					$22.32	$19.38	$11.50	$24.90	$22.47	1	1
Ind Therapists	1	97113			**	21-999		$78.34	$30.55	$35.46	$26.11	$37.05			$22.47					$22.32	$19.38	$11.50	$24.90	$22.47	1	1
Ind Therapists	1	97113			**	21-999	P2	$78.34	$30.55	$35.46	$26.11	$37.05			$22.47					$22.32	$19.38	$11.50	$24.90	$22.47	1	1
CORF/ORF	1	97116			therapeutic procedure, one or more areas, each 15 minutes; gait training (includes stair climbing)	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
CORF/ORF	1	97116			therapeutic procedure, one or more areas, each 15 minutes; gait training (includes stair climbing)	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	1	97116			**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	1	97116	AT		**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	1	97116	AT		**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	1	97116	AT	GO	**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	1	97116	AT	GO	**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	1	97116	AT	GP	**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	1	97116	AT	GP	**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	1	97116	GO		**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	1	97116	GO		**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	1	97116	GP		**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	1	97116	GP		**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	C	97116			**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	C	97116			**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	C	97116	GO		**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	C	97116	GO		**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
HHA	C	97116	GP		**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
HHA	C	97116	GP		**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
Ind Therapists	1	97116			**	0-20		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
Ind Therapists	1	97116			**	0-20	P2	$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$20.06			$18.85	$14.41	$9.75	$17.97	$17.99	1	1
Ind Therapists	1	97116			**	21-999		$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
Ind Therapists	1	97116			**	21-999	P2	$20.05	$19.94	$23.89	$17.12	$24.53			$15.16		$16.72			$18.85	$14.41	$9.75	$17.55	$16.92	1	1
CORF/ORF	1	97124			therapeutic procedure, one or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
CORF/ORF	1	97124			therapeutic procedure, one or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	1	97124			**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	1	97124	AT		**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	1	97124	AT		**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	1	97124	AT	GO	**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	1	97124	AT	GO	**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	1	97124	AT	GP	**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	1	97124	AT	GP	**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	1	97124	GO		**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	1	97124	GO		**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	1	97124	GP		**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	1	97124	GP		**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	C	97124			**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	C	97124			**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	C	97124	GO		**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	C	97124	GO		**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
HHA	C	97124	GP		**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
HHA	C	97124	GP		**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
Ind Therapists	1	97124			**	0-20		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
Ind Therapists	1	97124			**	0-20	P2	$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$18.23				$13.00	$8.90	$16.59	$15.87	0	1
Ind Therapists	1	97124			**	21-999		$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
Ind Therapists	1	97124			**	21-999	P2	$12.54	$18.43	$22.28	$15.87	$22.68			$15.16		$15.20				$13.00	$8.90	$16.16	$15.20	0	1
CORF/ORF	1	97139			unlisted therapeutic procedure (specify)	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
CORF/ORF	1	97139			unlisted therapeutic procedure (specify)	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	1	97139			**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	1	97139	AT		**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	1	97139	AT		**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	1	97139	AT	GO	**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	1	97139	AT	GO	**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	1	97139	AT	GP	**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	1	97139	AT	GP	**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	1	97139	GO		**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	1	97139	GO		**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	1	97139	GP		**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	1	97139	GP		**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	C	97139			**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	C	97139			**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	C	97139	GO		**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	C	97139	GO		**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
HHA	C	97139	GP		**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
HHA	C	97139	GP		**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
Ind Therapists	1	97139			**	0-20		$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
Ind Therapists	1	97139			**	0-20	P2	$26.00	$10.28		$8.98	$12.90					$14.36						$12.08	$12.90	1	1
Ind Therapists	1	97139			**	21-999		$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
Ind Therapists	1	97139			**	21-999	P2	$26.00	$10.28		$8.98	$12.90					$6.65						$9.51	$8.98	1	1
CORF/ORF	1	97140			manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
CORF/ORF	1	97140			manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	1	97140			**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	1	97140	AT		**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	1	97140	AT		**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	1	97140	AT	GO	**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	1	97140	AT	GO	**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	1	97140	AT	GP	**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	1	97140	AT	GP	**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	1	97140	GO		**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	1	97140	GO		**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	1	97140	GP		**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	1	97140	GP		**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	C	97140			**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	C	97140			**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	C	97140	GO		**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	C	97140	GO		**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
HHA	C	97140	GP		**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
HHA	C	97140	GP		**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
Ind Therapists	1	97140			**	0-20		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
Ind Therapists	1	97140			**	0-20	P2	$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$21.26			$22.98	$15.36	$11.80	$20.20	$21.30	1	1
Ind Therapists	1	97140			**	21-999		$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
Ind Therapists	1	97140			**	21-999	P2	$20.56	$22.21	$25.12	$17.96	$25.76			$21.34		$17.72			$22.98	$15.36	$11.80	$19.76	$19.65	1	1
CORF/ORF	1	97150			therapeutic procedure(s), group (2 or more individuals)	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
CORF/ORF	1	97150			therapeutic procedure(s), group (2 or more individuals)	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150			**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	AT		**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	AT		**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	AT	GO	**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	AT	GO	**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	AT	GP	**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	AT	GP	**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	GO		**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	GO		**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	GP		**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	1	97150	GP		**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	C	97150			**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	C	97150			**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	C	97150	GO		**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	C	97150	GO		**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	C	97150	GP		**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
HHA	C	97150	GP		**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
Ind Therapists	1	97150			**	0-20			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
Ind Therapists	1	97150			**	0-20	P2		$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
Ind Therapists	1	97150			**	21-999			$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
Ind Therapists	1	97150			**	21-999	P2		$14.81	$14.81	$10.44	$15.03			$14.60				$13.17	$16.39	$12.84	$8.40	$13.21	$13.89		0
CORF/ORF	1	97530			therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
CORF/ORF	1	97530			therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	1	97530			**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	1	97530	AT		**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	1	97530	AT		**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	1	97530	AT	GO	**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	1	97530	AT	GO	**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	1	97530	AT	GP	**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	1	97530	AT	GP	**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	1	97530	GO		**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	1	97530	GO		**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	1	97530	GP		**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	1	97530	GP		**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	C	97530			**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	C	97530			**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	C	97530	GO		**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	C	97530	GO		**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
HHA	C	97530	GP		**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
HHA	C	97530	GP		**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
Ind Therapists	1	97530			**	0-20		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
Ind Therapists	1	97530			**	0-20	P2	$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$24.03	$27.65		$19.52	$17.64	$22.15	$21.77	$21.09	1	1
Ind Therapists	1	97530			**	21-999		$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
Ind Therapists	1	97530			**	21-999	P2	$73.77	$24.49	$29.06	$21.09	$30.03	$17.86	$17.87	$12.58		$20.02	$27.65		$19.52	$17.64	$22.15	$21.41	$20.02	1	1
CORF/ORF	1	97535			self-care/home management training (eg, activities of daily living (adl) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact by provider, eac	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535			**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	AT		**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	AT		**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	AT	GO	**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	AT	GO	**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	AT	GP	**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	AT	GP	**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	GO		**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	GO		**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	GP		**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	1	97535	GP		**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	C	97535			**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	C	97535			**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	C	97535	GO		**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	C	97535	GO		**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	C	97535	GP		**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
HHA	C	97535	GP		**	21-999		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
Ind Therapists	1	97535			**	0-20		$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
Ind Therapists	1	97535			**	0-20	P2	$40.00	$29.53	$29.10	$21.09	$30.04								$20.91	$21.39	$11.20	$22.29	$21.24	1	1
CORF/ORF	1	97537			community/work reintegration training (eg, shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment), direct one-on-one cont	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537			**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	AT		**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	AT		**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	AT	GO	**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	AT	GO	**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	AT	GP	**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	AT	GP	**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
HHA	1	97537	GO		**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	GO		**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	GP		**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	1	97537	GP		**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	C	97537			**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	C	97537			**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	C	97537	GO		**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	C	97537	GO		**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	C	97537	GP		**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
HHA	C	97537	GP		**	21-999			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
Ind Therapists	1	97537			**	0-20			$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
Ind Therapists	1	97537			**	0-20	P2		$25.51		$18.17	$26.07									$19.46	$11.00	$18.68	$18.82		0
CORF/ORF	1	97542			wheelchair management (eg, assessment, fitting, training), each 15 minutes	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542			**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	AT		**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	AT		**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	AT	GO	**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	AT	GO	**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	AT	GP	**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	AT	GP	**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	GO		**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	GO		**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	GO		**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	GP		**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	1	97542	GP		**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	C	97542			**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	C	97542			**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	C	97542	GO		**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	C	97542	GO		**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	C	97542	GP		**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
HHA	C	97542	GP		**	21-999		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
Ind Therapists	1	97542			**	0-20		$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
Ind Therapists	1	97542			**	0-20	P2	$46.02	$25.80	$25.76	$18.38	$26.38		$16.39	$9.87					$13.94		$7.55	$16.90	$16.39	1	1
CORF/ORF	1	97750			physical performance test or measurement (eg, musculoskeletal, functional capacity), with written report, each 15 minutes	0-20		$70.38			$19.84	$28.79			$11.23		$23.51			$20.98	$18.47	$22.15	$20.71	$20.98	1	1
CORF/ORF	1	97750			physical performance test or measurement (eg, musculoskeletal, functional capacity), with written report, each 15 minutes	21-999		$70.38			$19.84	$28.79			$11.23		$19.59			$20.98	$18.47	$22.15	$20.15	$19.84	1	1
HHA	1	97750	GO		**	0-20		$70.38			$19.84	$28.79			$11.23		$23.51			$20.98	$18.47	$22.15	$20.71	$20.98	1	1
HHA	1	97750	GO		**	21-999		$70.38			$19.84	$28.79			$11.23		$19.59			$20.98	$18.47	$22.15	$20.15	$19.84	1	1
HHA	1	97750	GP		**	0-20		$70.38			$19.84	$28.79			$11.23		$23.51			$20.98	$18.47	$22.15	$20.71	$20.98	1	1
HHA	1	97750	GP		**	21-999		$70.38			$19.84	$28.79			$11.23		$19.59			$20.98	$18.47	$22.15	$20.15	$19.84	1	1
Ind Therapists	1	97750			**	0-20		$70.38			$19.84	$28.79			$11.23		$23.51			$20.98	$18.47	$22.15	$20.71	$20.98	1	1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
Ind Therapists	1	97750			**	0-20	P2	$70.38			$19.84	$28.79			$11.23		$23.51			$20.98	$18.47	$22.15	$20.71	$20.98	1	1
Ind Therapists	1	97750			**	21-999		$70.38			$19.84	$28.79			$11.23		$19.59			$20.98	$18.47	$22.15	$20.15	$19.84	1	1
Ind Therapists	1	97750			**	21-999	P2	$70.38			$19.84	$28.79			$11.23		$19.59			$20.98	$18.47	$22.15	$20.15	$19.84	1	1
CORF/ORF	1	97760			orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes	0-20		$25.91	$32.70	$31.60	$22.97	$33.06			$13.48		$25.98				$29.97		$26.18	$27.98	0	1
HHA	1	97760	GO		**	0-20		$25.91	$32.70	$31.60	$22.97	$33.06			$13.48		$25.98				$29.97		$26.18	$27.98	0	1
HHA	1	97760	GP		**	0-20		$25.91	$32.70	$31.60	$22.97	$33.06			$13.48		$25.98				$29.97		$26.18	$27.98	0	1
Ind Therapists	1	97760			**	0-20		$25.91	$32.70	$31.60	$22.97	$33.06			$13.48		$25.98				$29.97		$26.18	$27.98	0	1
Ind Therapists	1	97760			**	0-20	P2	$25.91	$32.70	$31.60	$22.97	$33.06			$13.48		$25.98				$29.97		$26.18	$27.98	0	1
CORF/ORF	1	97761			prosthetic training, upper and/or lower extremity(s), each 15 minutes	0-20			$28.40	$27.70	$19.84	$28.79					$23.25				$20.50		$24.02	$23.25		0
HHA	1	97761	GO		**	0-20			$28.40	$27.70	$19.84	$28.79					$23.25				$20.50		$24.02	$23.25		0
HHA	1	97761	GP		**	0-20			$28.40	$27.70	$19.84	$28.79					$23.25				$20.50		$24.02	$23.25		0
Ind Therapists	1	97761			**	0-20			$28.40	$27.70	$19.84	$28.79					$23.25				$20.50		$24.02	$23.25		0
Ind Therapists	1	97761			**	0-20	P2		$28.40	$27.70	$19.84	$28.79					$23.25				$20.50		$24.02	$23.25		0
CORF/ORF	1	97762			checkout for orthotic/prosthetic use, established patient, each 15 minutes	0-20		$23.39	$41.43	$38.58	$29.45	$40.95					$26.03				$18.53		$30.71	$29.45	0	1
HHA	1	97762	GO		**	0-20		$23.39	$41.43	$38.58	$29.45	$40.95					$26.03				$18.53		$30.71	$29.45	0	1
HHA	1	97762	GP		**	0-20		$23.39	$41.43	$38.58	$29.45	$40.95					$26.03				$18.53		$30.71	$29.45	0	1
Ind Therapists	1	97762			**	0-20		$23.39	$41.43	$38.58	$29.45	$40.95					$26.03				$18.53		$30.71	$29.45	0	1
Ind Therapists	1	97762			**	0-20	P2	$23.39	$41.43	$38.58	$29.45	$40.95					$26.03				$18.53		$30.71	$29.45	0	1
CORF/ORF	1	97799			unlisted physical medicine/rehabilitation service or procedure	0-20		$38.09	$0.00		MP	MP					MP									1
CORF/ORF	1	97799			unlisted physical medicine/rehabilitation service or procedure	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799			**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	AT		**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	AT		**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	AT	GO	**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	AT	GO	**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	AT	GP	**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	AT	GP	**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	GO		**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	GO		**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	GP		**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	1	97799	GP		**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	C	97799			**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	C	97799			**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	C	97799	GO		**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	C	97799	GO		**	21-999		$38.09	$0.00		MP	MP					MP									1
HHA	C	97799	GP		**	0-20		$38.09	$0.00		MP	MP					MP									1
HHA	C	97799	GP		**	21-999		$38.09	$0.00		MP	MP					MP									1
Ind Therapists	1	97799			**	0-20		$38.09	$0.00		MP	MP					MP									1
Ind Therapists	1	97799			**	0-20	P2	$38.09	$0.00		MP	MP					MP									1

Attachment C to Attachment 1 to Attachment to Block 7 of CMS Form 179.: Comparison of Median of Other States' Medicaid Rates from Truven Database to Medicaid Rates from 11 Additional States

Provider Type	TOS*	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	Place of Service	Truven 11-State Medicaid Rate (Median)	Median Rate of Available Medicaid Rates from Other States (from A&M Study)	OK	WA	AZ	FL	NY	AL (Outpatient Hospital)	AL (Physicians)	LA (Professional services)	LA (Freestanding Rehab Ceners)	GA (Outpatient Providers)	GA (Physicians)	OH	IL	Mean of Available States	Median of Available States	Truven 11-State Rate Lower or Higher than Median of Available States	Total Procedure Codes with Truven Rate
Ind Therapists	1	97799			**	21-999		$38.09	$0.00		MP	MP					MP									1
Ind Therapists	1	97799			**	21-999	P2	$38.09	$0.00		MP	MP					MP									1
CORF/ORF	1	S8990			Physical or manipulative therapy performed for maintenance rather than restoration	0-999		$26.00	$10.28		$15.30												$15.30	$15.30	1	1
HHA	1	S8990			Physical or manipulative therapy performed for maintenance rather than restoration	0-999		$26.00	$10.28		$15.30												$15.30	$15.30	1	1
Ind Therapists	1	S8990			Physical or manipulative therapy performed for maintenance rather than restoration	0-999		$26.00	$10.28		$15.30												$15.30	$15.30	1	1
Ind Therapists	1	S8990			Physical or manipulative therapy performed for maintenance rather than restoration	0-999	P2	$26.00	$10.28		$15.30												$15.30	$15.30	1	1
CORF/ORF	1	S9152			Speech therapy, re-evaluation	0-999			$41.68	MP	$49.60												$49.60	$49.60		0
HHA	1	S9152			Speech therapy, re-evaluation	0-20			$41.68	MP	$49.60												$49.60	$49.60		0
HHA	1	S9152			Speech therapy, re-evaluation	21-999			$41.68	MP	$49.60												$49.60	$49.60		0
Ind Therapists	1	S9152			Speech therapy, re-evaluation	0-20			$41.68	MP	$49.60												$49.60	$49.60		0
Ind Therapists	1	S9152			Speech therapy, re-evaluation	0-20	P2		$41.68	MP	$49.60												$49.60	$49.60		0
Ind Therapists	1	S9152			Speech therapy, re-evaluation	21-999			$41.68	MP	$49.60												$49.60	$49.60		0
																									353	514

Percentage of 11-State Truven Rates that are HIGHER than research of other states reimbursement rates	**68.68%**