

**TEXAS HEALTH AND HUMAN SERVICES COMMISSION  
RATE ANALYSIS DEPARTMENT**

**Notice of Proposed Adjustments to Fees, Rates or Charges for Physical,  
Occupational, and Speech Therapy provided by Comprehensive Outpatient  
Rehabilitation Facilities/Outpatient Rehabilitation Facilities (CORF/ORF),  
Home Health Agencies (HHA), and Independent Therapists**

**Adjustments are proposed to be effective  
July 15, 2016**

## **SUMMARY OF PROPOSED ADJUSTMENTS**

**To Be Effective July 15, 2016**

Included in this document is information relating to the proposed adjustments to Medicaid payment rates for Physical, Occupational, and Speech Therapy provided by Comprehensive Outpatient Rehabilitation Facilities/Outpatient Rehabilitation Facilities (CORF/ORF), Home Health Agencies (HHA), and Independent Therapists. The Texas Health and Human Services Commission (HHSC) intends to submit an amendment to the Texas State Plan for Medical Assistance under Title XIX of the Social Security Act to update the fee schedules to reflect these proposed adjustments. The rates are proposed to be effective July 15, 2016.

### **Hearing**

The Health and Human Services Commission (HHSC) conducted a public hearing to receive comments regarding the proposed adjustments to Medicaid rates detailed in this document on September 18, 2015, at 9:00 a.m. in the Public Hearing Room of the John H. Winters Building at 701 West 51st Street, Austin, Texas. HHSC considered all concerns expressed at the hearing prior to final rate approval. This public hearing was held in compliance with the provisions of Human Resources Code §32.0282 which requires a public hearing on proposed payment rate adjustments. Should you have any questions regarding the information in this document, please contact:

Megan Wolfe, Rate Analysis for Acute Care Services  
Texas Health and Human Services Commission  
(512) 730-7456; FAX: (512) 730-7475  
E-mail: [megan.wolfe@hhsc.state.tx.us](mailto:megan.wolfe@hhsc.state.tx.us)

### **Background**

HHSC is responsible for the reimbursement determination functions for the Texas Medicaid Program. The proposed rate adjustments presented in this document are based on direction provided by the 2016-2017 General Appropriations Act, 84<sup>th</sup> Legislature, Regular Session, Article II, Rider 50, at pages II-96 through II-98 (Health and Human Services Section, Health and Human Services Commission).

### **Methodology**

The specific administrative rules that govern the establishment of the fees in this proposal include these rules in 1 TAC:

- §355.201(d)(1)(A) and (D), which authorize HHSC to adjust rates for medical assistance if state law is enacted requiring a rate reduction or restricting the availability of appropriated funds.

- §355.8021, which addresses the reimbursement methodology for home health services and durable medical equipment, prosthetics, orthotics, and supplies;
- §355.8085, which addresses the reimbursement methodology for physicians and other practitioners;
- §355.8441, which addresses the reimbursement methodology for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services (known in Texas as Texas Health Steps).

### **Proposed Rate Adjustments**

As indicated above, the proposed rate adjustments are based on direction provided by the 2016-2017 General Appropriations Act, 84th Legislature, Regular Session, Article II, Rider 50, at pages II-96 through II-98.

Proposed rate adjustments were calculated based on an analysis of Medicaid fees paid by other states and previous Texas Medicaid payments for Medicaid-reimbursable therapy services. Where current Texas Medicaid rates exceed 150 percent of the median of other states' rates for the same service, a percentage reduction is applied. An alternative percentage reduction is applied to Texas Medicaid rates that do not exceed 150 percent of the median of other states' rates for the same service and in cases where information on other states' rates is not available.

Specific proposed payment rate adjustments are listed in the attachments outlined below:

- Att 1 – CORFORF Therapies
- Att 2 – HHA Therapies
- Att 3 – Independent Therapists

These rate adjustments are estimated to result in an annual savings of \$30,683,785 for federal fiscal year (FFY) 2016, consisting of \$17,529,646 in federal funds and \$13,154,139 in state general revenue. For FFY 2017, the estimated annual savings are \$129,880,683 consisting of \$72,966,968 in federal funds and \$56,913,715 in state general revenue. For FFY 2018, the estimated annual savings are \$135,171,008 consisting of \$75,939,072 in federal funds and \$59,231,936 in state general revenue.

### **Written Comments**

Written comments regarding the proposed payment rate adjustments were accepted in lieu of, or in addition to, oral testimony until 5 p.m. the day of the hearing. Written comments were to be sent by U.S. mail to the Texas Health and Human Services Commission, Attention: Rate Analysis, Mail Code H-400, P.O. Box 149030, Austin, Texas 78714-9030; by fax to Rate Analysis at (512) 730-7475; or by e-mail to RADAcuteCare@hhsc.state.tx.us.

In addition, written comments were accepted by overnight mail or hand delivery to Texas Health and Human Services Commission, Attention: Rate Analysis, Mail Code H-400, Brown-Heatly Building, 4900 North Lamar, Austin, Texas 78751

To review comments or submit additional comments regarding the proposed rate adjustments and/or state plan amendment or to receive copies of the proposed amendment, interested parties may contact Dan Huggins, Director of Rate Analysis for Acute Care Services, by mail at the Rate Analysis Department, Texas Health and Human Services Commission, P.O. Box 149030, H-400, Austin, Texas 78714-9030; by telephone at (512) 707-6071; by facsimile at (512) 730-7475; or by e-mail at [dan.huggins@hsc.state.tx.us](mailto:dan.huggins@hsc.state.tx.us). Copies of the proposal will be available for public review at the local offices of the Texas Department of Aging and Disability Services.

Persons with disabilities who wished to attend the hearing and required auxiliary aids or services were advised to contact Rate Analysis at (512) 730-7401 at least 72 hours in advance, so appropriate arrangements could be made.

**ATTACHMENT 1**

**COMPREHENSIVE OUTPATIENT REHABILITATION  
FACILITY/OUTPATIENT REHABILITATION FACILITY (CORF/ORF)**

**(Effective July 15 2016)**

**ATTACHMENT 1 - COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY/OUTPATIENT REHABILITATION FACILITY (CORF/ORF) (effective July 15, 2016)**

TOS*	Procedure Code	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
				Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	92507	**	0-20	\$39.78	\$39.78	\$28.67	\$28.67	-27.93%
1	92507	**	21-999	\$39.78	\$39.78	\$28.67	\$28.67	-27.93%
1	92508	**	0-20	\$19.90	\$19.90	\$14.93	\$14.93	-24.97%
1	92508	**	21-999	\$19.90	\$19.90	\$14.93	\$14.93	-24.97%
1	92521	**	0-20	\$140.62	\$140.62	\$105.47	\$105.47	-25.00%
1	92521	**	21-999	\$140.62	\$140.62	\$105.47	\$105.47	-25.00%
1	92522	**	0-20	\$175.77	\$175.77	\$131.83	\$131.83	-25.00%
1	92522	**	21-999	\$175.77	\$175.77	\$131.83	\$131.83	-25.00%
1	92523	**	0-20	\$234.36	\$234.36	\$175.77	\$175.77	-25.00%
1	92523	**	21-999	\$234.36	\$234.36	\$175.77	\$175.77	-25.00%
1	92524	**	0-20	\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	92524	**	21-999	\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	92526	**	0-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	92610	**	0-999	\$234.36	\$234.36	\$226.27	\$226.27	-3.45%
1	97001	**	0-20	\$167.40	\$167.40	\$125.55	\$125.55	-25.00%
1	97001	**	21-999	\$167.40	\$167.40	\$125.55	\$125.55	-25.00%
1	97002	**	0-20	\$150.66	\$150.66	\$113.00	\$113.00	-25.00%
1	97002	**	21-999	\$150.66	\$150.66	\$113.00	\$113.00	-25.00%
1	97003	**	0-20	\$167.40	\$167.40	\$125.55	\$125.55	-25.00%
1	97003	**	21-999	\$167.40	\$167.40	\$125.55	\$125.55	-25.00%
1	97004	**	0-20	\$150.66	\$150.66	\$113.00	\$113.00	-25.00%
1	97004	**	21-999	\$150.66	\$150.66	\$113.00	\$113.00	-25.00%
1	97012	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97012	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97014	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97014	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97016	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97016	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97018	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97018	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97022	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97022	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97024	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97024	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97026	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97026	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97028	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97028	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97032	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97032	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97033	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97033	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97034	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97034	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97035	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97035	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97036	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97036	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97039	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97039	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97110	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%

**ATTACHMENT 1 - COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY/OUTPATIENT REHABILITATION FACILITY (CORF/ORF) (effective July 15, 2016)**

TOS*	Procedure Code	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
				Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97110	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97112	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97112	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97113	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97113	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97116	**	0-20	\$39.78	\$39.78	\$30.08	\$30.08	-24.38%
1	97116	**	21-999	\$39.78	\$39.78	\$30.08	\$30.08	-24.38%
1	97124	**	0-20	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97124	**	21-999	\$39.78	\$39.78	\$29.84	\$29.84	-24.99%
1	97139	**	0-20	\$39.78	\$39.78	\$39.00	\$39.00	-1.96%
1	97139	**	21-999	\$39.78	\$39.78	\$39.00	\$39.00	-1.96%
1	97140	**	0-20	\$39.78	\$39.78	\$30.84	\$30.84	-22.47%
1	97140	**	21-999	\$39.78	\$39.78	\$30.84	\$30.84	-22.47%
1	97150	**	0-20	\$19.90	\$19.90	\$19.21	\$19.21	-3.47%
1	97150	**	21-999	\$19.90	\$19.90	\$19.21	\$19.21	-3.47%
1	97530	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97530	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97535	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97537	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97542	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97750	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97750	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97760	**	0-20	\$39.78	\$39.78	\$38.87	\$38.87	-2.29%
1	97761	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97762	**	0-20	\$40.36	\$40.36	\$35.09	\$35.09	-13.06%
1	97799	**	0-20	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	97799	**	21-999	\$39.78	\$39.78	\$38.41	\$38.41	-3.44%
1	S8990	Physical or manipulative therapy performed for maintenance rather than restoration	0-999	\$52.33	\$52.33	\$39.00	\$39.00	-25.47%
1	S9152	Speech therapy, re-evaluation	0-999	\$210.92	\$210.92	\$203.64	\$203.64	-3.45%

<b>*Type of Service (TOS)</b>	
1	Medical Services

\*\*Required Notice: The five-character code included in this notice is obtained from the Current Procedural Terminology (CPT®), copyright 2015 by the American Medical Association (AMA). CPT is developed by the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures performed by physicians. The responsibility for the content of this notice is with HHSC and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in this notice. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained.

**ATTACHMENT 2**

**HOME HEALTH AGENCY (HHA)**

**(Effective July 15 2016)**

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	92507			**	0-20	\$135.14	\$135.14	\$100.34	\$100.34	-25.75%
1	92507			**	21-999	\$115.46	\$115.46	\$100.34	\$100.34	-13.10%
1	92508			**	0-20	\$67.57	\$67.57	\$50.68	\$50.68	-25.00%
1	92508			**	21-999	\$67.57	\$67.57	\$50.68	\$50.68	-25.00%
1	92521			**	0-20	\$120.00	\$120.00	\$90.00	\$90.00	-25.00%
1	92521			**	21-999	\$70.33	\$70.33	\$67.90	\$67.90	-3.46%
1	92522			**	0-20	\$150.00	\$150.00	\$112.50	\$112.50	-25.00%
1	92522			**	21-999	\$87.92	\$87.92	\$84.89	\$84.89	-3.45%
1	92523			**	0-20	\$200.00	\$200.00	\$150.00	\$150.00	-25.00%
1	92523			**	21-999	\$117.22	\$117.22	\$113.18	\$113.18	-3.45%
1	92524			**	0-20	\$100.00	\$100.00	\$75.00	\$75.00	-25.00%
1	92524			**	21-999	\$58.61	\$58.61	\$56.59	\$56.59	-3.45%
1	92526			**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	92526			**	21-999	\$115.46	\$115.46	\$111.48	\$111.48	-3.45%
1	92610			**	0-20	\$200.00	\$200.00	\$193.10	\$193.10	-3.45%
1	92610			**	21-999	\$117.22	\$117.22	\$113.18	\$113.18	-3.45%
1	97001			**	0-20	\$137.20	\$137.20	\$102.90	\$102.90	-25.00%
1	97001			**	21-999	\$114.03	\$114.03	\$85.52	\$85.52	-25.00%
1	97001	AT		**	0-20	\$114.03	\$114.03	\$85.52	\$85.52	-25.00%
1	97001	AT		**	21-999	\$114.03	\$114.03	\$85.52	\$85.52	-25.00%
C	97001			**	0-20	\$114.03	\$114.03	\$85.52	\$85.52	-25.00%
C	97001			**	21-999	\$114.03	\$114.03	\$85.52	\$85.52	-25.00%
1	97002			**	0-20	\$123.48	\$123.48	\$92.61	\$92.61	-25.00%
1	97002			**	21-999	\$102.63	\$102.63	\$76.97	\$76.97	-25.00%
1	97002	AT		**	0-20	\$102.63	\$102.63	\$76.97	\$76.97	-25.00%
1	97002	AT		**	21-999	\$102.63	\$102.63	\$76.97	\$76.97	-25.00%
C	97002			**	0-20	\$102.63	\$102.63	\$76.97	\$76.97	-25.00%
C	97002			**	21-999	\$102.63	\$102.63	\$76.97	\$76.97	-25.00%
1	97003			**	0-20	\$137.20	\$137.20	\$102.90	\$102.90	-25.00%
1	97003			**	21-999	\$116.25	\$116.25	\$89.21	\$89.21	-23.26%
1	97003	AT		**	0-20	\$116.25	\$116.25	\$89.21	\$89.21	-23.26%
1	97003	AT		**	21-999	\$116.25	\$116.25	\$89.21	\$89.21	-23.26%
C	97003			**	0-20	\$116.25	\$116.25	\$89.21	\$89.21	-23.26%
C	97003			**	21-999	\$116.25	\$116.25	\$89.21	\$89.21	-23.26%
1	97004			**	0-20	\$123.48	\$123.48	\$92.61	\$92.61	-25.00%
1	97004			**	21-999	\$104.63	\$104.63	\$78.47	\$78.47	-25.00%
1	97004	AT		**	0-20	\$104.63	\$104.63	\$78.47	\$78.47	-25.00%
1	97004	AT		**	21-999	\$104.63	\$104.63	\$78.47	\$78.47	-25.00%
C	97004			**	0-20	\$104.63	\$104.63	\$78.47	\$78.47	-25.00%
C	97004			**	21-999	\$104.63	\$104.63	\$78.47	\$78.47	-25.00%
1	97012			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97012	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97012	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97012	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97012	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97012	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97012	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97012	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97012	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97012	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97012	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97012			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97012			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97012	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
C	97012	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97012	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97012	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97014			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97014	AT		**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97014	AT		**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97014	AT	GO	**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97014	AT	GO	**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97014	AT	GP	**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97014	AT	GP	**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97014	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97014	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97014	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97014	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97014			**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97014			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97014	GO		**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97014	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97014	GP		**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97014	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97016			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97016	AT		**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97016	AT		**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97016	AT	GO	**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97016	AT	GO	**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97016	AT	GP	**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97016	AT	GP	**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97016	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97016	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97016	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97016	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97016			**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97016			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97016	GO		**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97016	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97016	GP		**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97016	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97018			**	21-999	\$113.05	\$113.05	\$91.08	\$91.08	-19.43%
1	97018	AT		**	0-20	\$113.05	\$113.05	\$91.08	\$91.08	-19.43%
1	97018	AT		**	21-999	\$113.05	\$113.05	\$91.08	\$91.08	-19.43%
1	97018	AT	GO	**	0-20	\$114.51	\$114.51	\$91.08	\$91.08	-20.46%
1	97018	AT	GO	**	21-999	\$114.51	\$114.51	\$91.08	\$91.08	-20.46%
1	97018	AT	GP	**	0-20	\$112.32	\$112.32	\$91.08	\$91.08	-18.91%
1	97018	AT	GP	**	21-999	\$112.32	\$112.32	\$91.08	\$91.08	-18.91%
1	97018	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97018	GO		**	21-999	\$114.51	\$114.51	\$91.08	\$91.08	-20.46%
1	97018	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97018	GP		**	21-999	\$112.32	\$112.32	\$91.08	\$91.08	-18.91%
C	97018			**	0-20	\$113.05	\$113.05	\$91.08	\$91.08	-19.43%
C	97018			**	21-999	\$113.05	\$113.05	\$91.08	\$91.08	-19.43%
C	97018	GO		**	0-20	\$114.51	\$114.51	\$91.08	\$91.08	-20.46%
C	97018	GO		**	21-999	\$114.51	\$114.51	\$91.08	\$91.08	-20.46%
C	97018	GP		**	0-20	\$112.32	\$112.32	\$91.08	\$91.08	-18.91%
C	97018	GP		**	21-999	\$112.32	\$112.32	\$91.08	\$91.08	-18.91%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97022			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97022	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97022	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97022	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97022	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97022	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97022	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97022	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97022	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97022	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97022	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97022			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97022			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97022	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97022	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97022	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97022	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97024			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97024	AT		**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97024	AT		**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97024	AT	GO	**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97024	AT	GO	**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97024	AT	GP	**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97024	AT	GP	**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97024	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97024	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97024	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97024	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97024			**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97024			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97024	GO		**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97024	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97024	GP		**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97024	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97026			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97026	AT		**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97026	AT		**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97026	AT	GO	**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97026	AT	GO	**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97026	AT	GP	**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97026	AT	GP	**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97026	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97026	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97026	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97026	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97026			**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97026			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97026	GO		**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97026	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97026	GP		**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97026	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97028			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97028	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97028	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97028	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97028	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97028	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97028	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97028	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97028	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97028	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97028	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97028			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97028			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97028	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97028	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97028	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97028	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97032			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97032	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97032	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97032	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97032	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97032	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97032	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97032	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97032	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97032	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97032	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97032			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97032			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97032	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97032	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97032	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97032	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97033			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97033	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97033	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97033	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97033	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97033	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97033	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97033	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97033	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97033	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97033	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97033			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97033			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97033	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97033	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97033	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97033	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97034	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97034	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97034	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97034	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97035			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97035	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97035	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97035	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97035	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97035	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97035	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97035	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97035	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97035	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97035	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97035			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97035			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97035	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97035	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97035	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97035	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97036	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97036	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97036	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97036	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97039			**	21-999	\$112.32	\$112.32	\$90.00	\$90.00	-19.87%
1	97039	AT		**	0-20	\$112.32	\$112.32	\$90.00	\$90.00	-19.87%
1	97039	AT		**	21-999	\$112.32	\$112.32	\$90.00	\$90.00	-19.87%
1	97039	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97039	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
C	97039			**	0-20	\$112.32	\$112.32	\$90.00	\$90.00	-19.87%
C	97039			**	21-999	\$112.32	\$112.32	\$90.00	\$90.00	-19.87%
1	97110			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97110	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97110	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97110	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97110	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97110	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97110	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97110	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97110	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97110	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97110	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97110			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97110			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97110	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97110	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97110	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97110	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97112			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97112	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97112	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97112	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97112	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97112	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97112	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97112	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97112	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97112	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97112	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
C	97112			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97112			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97112	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97112	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97112	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97112	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97116			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97116	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97116	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97116	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97116	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97116	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97116	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97116	GO		**	0-20	\$135.14	\$135.14	\$120.30	\$120.30	-10.98%
1	97116	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97116	GP		**	0-20	\$135.14	\$135.14	\$120.30	\$120.30	-10.98%
1	97116	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97116			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97116			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97116	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97116	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97116	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97116	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97124			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97124	AT		**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97124	AT		**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
1	97124	AT	GO	**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97124	AT	GO	**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97124	AT	GP	**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97124	AT	GP	**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97124	GO		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97124	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
1	97124	GP		**	0-20	\$135.14	\$135.14	\$101.36	\$101.36	-25.00%
1	97124	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97124			**	0-20	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97124			**	21-999	\$113.05	\$113.05	\$84.79	\$84.79	-25.00%
C	97124	GO		**	0-20	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97124	GO		**	21-999	\$114.51	\$114.51	\$85.88	\$85.88	-25.00%
C	97124	GP		**	0-20	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
C	97124	GP		**	21-999	\$112.32	\$112.32	\$84.24	\$84.24	-25.00%
1	97139			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97139	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97139	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97139	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97139	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97139	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97139	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97139	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97139	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97139	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97139	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97139			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97139			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97139	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
C	97139	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97139	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97139	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97140			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97140	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97140	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97140	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97140	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97140	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97140	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97140	GO		**	0-20	\$135.14	\$135.14	\$123.36	\$123.36	-8.72%
1	97140	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97140	GP		**	0-20	\$135.14	\$135.14	\$123.36	\$123.36	-8.72%
1	97140	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97140			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97140			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97140	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97140	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97140	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97140	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97150			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97150	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97150	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97150	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97150	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97150	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97150	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97150	GO		**	0-20	\$67.57	\$67.57	\$65.24	\$65.24	-3.45%
1	97150	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97150	GP		**	0-20	\$67.57	\$67.57	\$65.24	\$65.24	-3.45%
1	97150	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97150			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97150			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97150	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97150	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97150	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97150	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97530			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97530	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97530	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97530	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97530	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97530	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97530	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97530	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97530	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97530	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97530	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97530			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97530			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97530	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97530	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97530	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97530	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97535			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97535	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97535	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97535	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97535	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97535	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97535	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97535	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97535	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97535	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97535	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97535			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97535			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97535	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97535	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97535	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97535	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97537			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97537	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97537	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97537	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97537	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97537	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97537	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97537	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97537	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97537	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97537	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97537			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97537			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97537	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97537	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97537	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97537	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97542			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97542	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97542	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97542	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97542	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97542	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97542	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97542	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97542	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97542	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97542	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97542	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97542			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97542			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97542	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97542	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97542	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97542	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97750	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97750	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%

ATTACHMENT 2 - HOME HEALTH AGENCY (HHA) (effective July 15, 2016)

TOS *	Procedure Code	Modifier 1	Modifier 2	Long Description **	Age Range	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97750	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97750	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97760	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97760	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97761	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97761	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97762	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97762	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97799			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97799	AT		**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97799	AT		**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
1	97799	AT	GO	**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97799	AT	GO	**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97799	AT	GP	**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97799	AT	GP	**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	97799	GO		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97799	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
1	97799	GP		**	0-20	\$135.14	\$135.14	\$130.48	\$130.48	-3.45%
1	97799	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97799			**	0-20	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97799			**	21-999	\$113.05	\$113.05	\$109.15	\$109.15	-3.45%
C	97799	GO		**	0-20	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97799	GO		**	21-999	\$114.51	\$114.51	\$110.56	\$110.56	-3.45%
C	97799	GP		**	0-20	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
C	97799	GP		**	21-999	\$112.32	\$112.32	\$108.44	\$108.44	-3.45%
1	S8990			Physical or manipulative therapy performed for maintenance rather than restoration	0-999	\$57.14	\$57.14	\$55.17	\$55.17	-3.45%
1	S9152			Speech therapy, re-evaluation	0-20	\$180.00	\$180.00	\$173.79	\$173.79	-3.45%
1	S9152			Speech therapy, re-evaluation	21-999	\$105.50	\$105.50	\$101.86	\$101.86	-3.45%

*Type of Service (TOS)	
1	Medical Services
C	Home Health Agency
Modifiers	
AT	Acute Treatment
GO	Occupational Therapy
GP	Physical Therapy

\*\*Required Notice: The five-character code included in this notice is obtained from the Current Procedural Terminology (CPT®), copyright 2015 by the American Medical Association (AMA). CPT is developed by the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures performed by physicians. The responsibility for the content of this notice is with HHSC and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in this notice. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained.

**ATTACHMENT 3**

**INDEPENDENT THERAPIST**

**(Effective July 15 2016)**

ATTACHMENT 3 - INDEPENDENT THERAPIST (effective July 15 2016)

TOS *	Procedure Code	Long Description **	Age Range	Place of Service	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
					Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	92507	**	0-20		\$31.25	\$31.25	\$28.67	\$28.67	-8.26%
1	92507	**	0-20	P2	\$33.79	\$33.79	\$28.67	\$28.67	-15.15%
1	92507	**	21-999		\$31.25	\$31.25	\$28.67	\$28.67	-8.26%
1	92507	**	21-999	P2	\$33.79	\$33.79	\$28.67	\$28.67	-15.15%
1	92508	**	0-20		\$15.63	\$15.63	\$11.72	\$11.72	-25.02%
1	92508	**	0-20	P2	\$15.63	\$15.63	\$11.72	\$11.72	-25.02%
1	92508	**	21-999		\$15.63	\$15.63	\$11.72	\$11.72	-25.02%
1	92508	**	21-999	P2	\$15.63	\$15.63	\$11.72	\$11.72	-25.02%
1	92521	**	0-20		\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	92521	**	0-20	P2	\$120.00	\$120.00	\$90.00	\$90.00	-25.00%
1	92521	**	21-999		\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	92521	**	21-999	P2	\$120.00	\$120.00	\$90.00	\$90.00	-25.00%
1	92522	**	0-20		\$146.48	\$146.48	\$109.86	\$109.86	-25.00%
1	92522	**	0-20	P2	\$150.00	\$150.00	\$112.50	\$112.50	-25.00%
1	92522	**	21-999		\$146.48	\$146.48	\$109.86	\$109.86	-25.00%
1	92522	**	21-999	P2	\$150.00	\$150.00	\$112.50	\$112.50	-25.00%
1	92523	**	0-20		\$195.30	\$195.30	\$146.48	\$146.48	-25.00%
1	92523	**	0-20	P2	\$200.00	\$200.00	\$150.00	\$150.00	-25.00%
1	92523	**	21-999		\$195.30	\$195.30	\$146.48	\$146.48	-25.00%
1	92523	**	21-999	P2	\$200.00	\$200.00	\$150.00	\$150.00	-25.00%
1	92524	**	0-20		\$97.65	\$97.65	\$73.24	\$73.24	-25.00%
1	92524	**	0-20	P2	\$100.00	\$100.00	\$75.00	\$75.00	-25.00%
1	92524	**	21-999		\$97.65	\$97.65	\$73.24	\$73.24	-25.00%
1	92524	**	21-999	P2	\$100.00	\$100.00	\$75.00	\$75.00	-25.00%
1	92526	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	92526	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	92526	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	92526	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	92610	**	0-999		\$195.30	\$195.30	\$188.56	\$188.56	-3.45%
1	92610	**	0-999	P2	\$200.00	\$200.00	\$193.10	\$193.10	-3.45%
1	97001	**	0-20		\$130.20	\$130.20	\$97.65	\$97.65	-25.00%
1	97001	**	0-20	P2	\$137.20	\$137.20	\$102.90	\$102.90	-25.00%
1	97001	**	21-999		\$130.20	\$130.20	\$97.65	\$97.65	-25.00%
1	97001	**	21-999	P2	\$137.20	\$137.20	\$102.90	\$102.90	-25.00%
1	97002	**	0-20		\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	97002	**	0-20	P2	\$123.48	\$123.48	\$92.61	\$92.61	-25.00%
1	97002	**	21-999		\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	97002	**	21-999	P2	\$123.48	\$123.48	\$92.61	\$92.61	-25.00%
1	97003	**	0-20		\$130.20	\$130.20	\$97.65	\$97.65	-25.00%
1	97003	**	0-20	P2	\$137.20	\$137.20	\$102.90	\$102.90	-25.00%
1	97003	**	21-999		\$130.20	\$130.20	\$97.65	\$97.65	-25.00%
1	97003	**	21-999	P2	\$137.20	\$137.20	\$102.90	\$102.90	-25.00%
1	97004	**	0-20		\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	97004	**	0-20	P2	\$123.48	\$123.48	\$92.61	\$92.61	-25.00%
1	97004	**	21-999		\$117.18	\$117.18	\$87.89	\$87.89	-25.00%
1	97004	**	21-999	P2	\$123.48	\$123.48	\$92.61	\$92.61	-25.00%
1	97012	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97012	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97012	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97012	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97014	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97014	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97014	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97014	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%

ATTACHMENT 3 - INDEPENDENT THERAPIST (effective July 15 2016)

TOS *	Procedure Code	Long Description **	Age Range	Place of Service	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
					Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97016	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97016	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97016	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97016	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97018	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97018	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97018	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97018	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97022	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97022	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97022	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97022	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97024	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97024	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97024	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97024	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97026	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97026	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97026	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97026	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97028	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97028	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97028	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97028	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97032	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97032	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97032	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97032	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97033	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97033	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97033	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97033	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97034	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97034	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97034	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97034	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97035	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97035	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97035	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97035	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97036	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97036	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97036	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97036	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97039	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97039	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97039	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97039	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97110	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97110	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97110	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97110	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97112	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97112	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%

ATTACHMENT 3 - INDEPENDENT THERAPIST (effective July 15 2016)

TOS *	Procedure Code	Long Description **	Age Range	Place of Service	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
					Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	97112	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97112	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97113	**	0-20		\$36.70	\$36.70	\$35.43	\$35.43	-3.46%
1	97113	**	0-20	P2	\$39.69	\$39.69	\$38.32	\$38.32	-3.45%
1	97113	**	21-999		\$36.70	\$36.70	\$35.43	\$35.43	-3.46%
1	97113	**	21-999	P2	\$39.69	\$39.69	\$38.32	\$38.32	-3.45%
1	97116	**	0-20		\$31.25	\$31.25	\$30.08	\$30.08	-3.74%
1	97116	**	0-20	P2	\$33.79	\$33.79	\$30.08	\$30.08	-10.98%
1	97116	**	21-999		\$31.25	\$31.25	\$30.08	\$30.08	-3.74%
1	97116	**	21-999	P2	\$33.79	\$33.79	\$30.08	\$30.08	-10.98%
1	97124	**	0-20		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97124	**	0-20	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97124	**	21-999		\$31.25	\$31.25	\$23.44	\$23.44	-24.99%
1	97124	**	21-999	P2	\$33.79	\$33.79	\$25.34	\$25.34	-25.01%
1	97139	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97139	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97139	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97139	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97140	**	0-20		\$31.25	\$31.25	\$30.84	\$30.84	-1.31%
1	97140	**	0-20	P2	\$33.79	\$33.79	\$30.84	\$30.84	-8.73%
1	97140	**	21-999		\$31.25	\$31.25	\$30.84	\$30.84	-1.31%
1	97140	**	21-999	P2	\$33.79	\$33.79	\$30.84	\$30.84	-8.73%
1	97150	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97150	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97150	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97150	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97530	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97530	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97530	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97530	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97535	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97535	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97537	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97537	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97542	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97542	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97750	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97750	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97750	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97750	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97760	**	0-20		\$32.76	\$32.76	\$31.63	\$31.63	-3.45%
1	97760	**	0-20	P2	\$35.42	\$35.42	\$34.20	\$34.20	-3.44%
1	97761	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97761	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97762	**	0-20		\$39.73	\$39.73	\$35.09	\$35.09	-11.68%
1	97762	**	0-20	P2	\$42.97	\$42.97	\$35.09	\$35.09	-18.34%
1	97799	**	0-20		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97799	**	0-20	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	97799	**	21-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%
1	97799	**	21-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	S8990	Physical or manipulative therapy performed for maintenance rather than restoration	0-999		\$31.25	\$31.25	\$30.17	\$30.17	-3.46%

ATTACHMENT 3 - INDEPENDENT THERAPIST (effective July 15 2016)

TOS *	Procedure Code	Long Description **	Age Range	Place of Service	CURRENT		EFFECTIVE JULY 15, 2016		Percent Change from Current Medicaid Fee
					Current Medicaid Fee	Current Adjusted Medicaid Fee	Effective July 15, 2016, Medicaid Fee	Effective July 15, 2016, Adjusted Medicaid Fee	
1	S8990	Physical or manipulative therapy performed for maintenance rather than restoration	0-999	P2	\$33.79	\$33.79	\$32.62	\$32.62	-3.46%
1	S9152	Speech therapy, re-evaluation	0-20		\$180.00	\$180.00	\$173.79	\$173.79	-3.45%
1	S9152	Speech therapy, re-evaluation	0-20	P2	\$180.00	\$180.00	\$173.79	\$173.79	-3.45%
1	S9152	Speech therapy, re-evaluation	21-999		\$175.77	\$175.77	\$169.71	\$169.71	-3.45%

<b>*Type of Service (TOS)</b>	
1	Medical Services
<b>Place of Service</b>	
P2	Home

\*\*Required Notice: The five-character code included in this notice is obtained from the Current Procedural Terminology (CPT®), copyright 2015 by the American Medical Association (AMA). CPT is developed by the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures performed by physicians. The responsibility for the content of this notice is with HHSC and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in this notice. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained.