

located in Non-Regional Counties

1. Outpatient Services Reimbursement Methodology

- a. The State reimburses all eligible providers of Outpatient Services in Non-Regional Counties on a fee for service basis pursuant to a fee schedule established by the State. Eligible providers claim reimbursement for Outpatient Services using appropriate Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS) codes. The fee schedule contains a rate for each county where the eligible provider is located and combination of Provider Type and CPT®/HCPCS code. Except as otherwise noted in the state plan, state-developed fee schedule rates are the same for both governmental and private providers.
- b. The fee schedule that is effective July 1, 2023, and annually thereafter, is posted to the following [webpage](#).
- c. The State will annually increase the per-unit rates for HCPCS and CPT Codes effective July 1, 2023 by the percentage change in the four-quarter average Home Health Agency Market Basket Index. The updated rates will be posted to the following webpage annually.

2. Day Services Reimbursement Methodology

- a. The State reimburses all eligible providers of Day Services in Non-Regional Counties on a fee for service basis pursuant to a fee schedule established by the State. Level 1 – WM and Level 2 – WM are reimbursed an hourly rate. Partial Hospitalization is reimbursed a daily rate. The fee schedule contains a rate for each county where the provider is located and each Day Service. Except as otherwise noted in the state plan, state-developed fee schedule rates are the same for both governmental and private providers.
- b. The fee schedule for Day Services that is effective November 3, 2024 and annually thereafter, is posted to the following [webpage](#).
- c. The State will annually increase the day service rates effective November 3, 2024 by the percentage change in the four-quarter average Home Health Agency Market Basket Index. The updated rates will be posted to the webpage linked above annually.

3. Twenty-Four Hour Services Reimbursement Methodology

- a. The State reimburses all eligible providers of Twenty-Four Services in Non-Regional Counties on a fee for service basis pursuant to a fee schedule established by the State. Twenty-Four Hour Services are reimbursed a per diem rate for all service components described in Section 13.d.6 in Supplement 3 to Attachment 3.1-A of this State Plan, except for Care Coordination, Recovery Support Services, Peer Support Specialist Services, MAT for OUD, and MAT for AUD. The fee schedule contains a rate for each county where the provider is located and each Twenty-Four- Hour Service. Except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers.