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Maryland Department of Health and Mental Hygiene  
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – John M. Colmers, Secretary

**MARYLAND MEDICAL ASSISTANCE PROGRAM**  
**Waiver for Children with Autism Spectrum Disorder Transmittal No. 9**  
**June 15, 2007**

**To:** Waiver for Children with Autism Spectrum Disorder Providers

**From:** Susan J. Tucker, *Susan J. Tucker* Executive Director  
Office of Health Services

**Note:** Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

**Re:** Fiscal Year 2008 Program Rate Increases

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On July 1, 2007, payment rates will increase for certain services under the Home and Community Based Services Waiver for Children with Autism Spectrum Disorder. The regulatory requirement for these changes may be found in COMAR 10.09.56 under Regulation .22(C)(2). Payment rates affected by this regulation will be increased by 2.5 percent effective July 1 of each year. **Providers may bill using the new rates for services provided on or after July 1, 2007.**

The rates for regular and intensive residential habilitation have been increased in accordance with amendments proposed to become effective July 1, 2007 to more accurately reflect the cost of providing residential habilitation services. Program payment for these services shall be the lesser of the Medicaid fee for service schedule or the provider's actual cost. Providers therefore may not submit claims for reimbursement in excess of their cost to provide the service.

Some waiver services are reimbursed in one hour or ½ hour units. If less than one hour of service is provided, the time may not be rounded up to one hour. Please note that the unit of service for billing Therapeutic Integration is changing from one hour to ½ hour effective July 1, 2007. The service must be provided for a minimum of two hours and a maximum of four hours to qualify for Medicaid reimbursement.

Only services approved on the waiver participant's Plan of Care or Addendum may be reimbursed. Payment for authorized waiver services covered under this program shall be considered as payment in full, and may not be supplemented by payment from other sources, such as the participant, family, a public program or private agency.

Questions regarding this transmittal should be directed to the Division of Waiver Programs at 410-767-5220.

Attachment

cc: Autism Waiver Contacts  
Maryland State Department of Education

**WAIVER FOR CHILDREN WITH AUTISM SPECTRUM DISORDER**  
**Payment Rates Effective July 1, 2007**

<b>Service</b>	<b>Procedure Code</b>	<b>Payment Rate</b>
Residential Habilitation-Regular	Z9300	\$ 191.14 per day
Residential Habilitation-Intensive	Z9301	\$ 382.30 per day
Intensive Individual Support Services	W9306	\$ 28.99 per hour
Therapeutic Integration Services	W9307	\$ 11.59 per half hour (service is to be provided a minimum of 2 hrs. and a maximum of 4 hrs.)
Respite Care	W9314	\$ 22.63 per hour
Family Training	W9315	\$ 95.10 per hour
Supported Employment	W9311	\$ 96.25 per half day
*Environmental Accessibility Adaptation	W9320	\$ 1,500 per 36 month period

Please note that a provider's travel time is not reimbursable by Medicaid. Other billing limitations apply, as specified in COMAR 10.09.56.

\*This rate is not subject to annual inflationary adjustment.