

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM

Model Waiver Program Transmittal No. 62
EPSDT: Nursing Services Transmittal No. 57
July 1, 2024

TO: Model Waiver Nursing Services Providers

EPSDT Nursing Services Providers

FROM: Jamie Smith, Director Jamie Smith

Office of Long Term Services and Supports

RE: Fiscal Year 2025 Rates for Nursing Services

NOTE: Please ensure the appropriate staff members in your organization are

informed of the contents of this transmittal.

Effective July 1, 2024, the Maryland Medical Assistance Program will increase rates for nursing services rendered to Medicaid participants under Code of Maryland Regulations (COMAR) 10.09.53, 10.09.27, and 10.09.69 by 3 percent based on FY 2025 budget allocations. Attached is a chart of the revised fee schedule. Providers may bill the new rates for services provided on or after July 1, 2024.

For questions regarding the rate increase, please contact Dawnn Williams, Chief, Division of Nursing Services, at (410) 767-1448 or dawnn.williams@maryland.gov.

Attachment (1)

Nursing/Certified Nursing Assistant/Home Health Aide Services Payment Rates Effective July 1, 2024

Service	Procedure Code	Payment Rate
*Assessment	T1001	\$150.00
Registered nurse supervisory visit	W1002	\$79.44 per visit
Registered nurse/1 participant	T1002	\$19.8739
		per 15-minute unit
**Registered nurse/2 or more	T1030	\$13.7094
participants		per 15-minute unit
Licensed practical nurse/1 participant	T1003	\$12.8813
		per 15-minute unit
**Licensed practical nurse/2 or more	T1031	\$8.8854
participants		per 15-minute unit
Certified nursing assistant or Home	W1000	\$6.8088
health aide/1 participant (EPSDT: must also be a Certified		per 15-minute unit
Medicine Technician)		
**Certified nursing assistant or Home	T1021	\$4.6979
health aide/2 or more participants (EPSDT: must also be a Certified		per 15-minute unit
Medicine Technician)		
Certified nursing assistant or Home	T1004	\$5.6520
health aide/1 participant		per 15-minute unit
**Certified nursing assistant or Home	T1004	\$3.8983
health aide/2 or more participants	(TT Modifier)	per 15-minute unit

^{*}Please note that the rate for the Assessment visit is not subject to the State's budgetary increase of 3 percent.

^{**}Rates for 2 or more participants are set at 69 percent of the single-participant rate.