Service Code	Modifier	Service Name	Unit Type*****	Provider Type	Taxonomy Code	Geographic Service Area	Current Rates (as of July 1, 2026)	Shared Medical Service?	Medical/Non-Medical*******
S4240		Plethysmograph	Each			All	*Contracted Rate	N	Medical
90863		Medication Management, Psychiatric	Each			All	*Contracted Rate	Y	Medical
92507		Speech/Hearing/Communication Therapy (LTC: RCL and WA Roads only)	Each			All	$0.01-$186.52	Y	Medical
96138	U1	Psychological Testing First 30 Min	Each			All	$0.01-$500.00		Medical
96139	U1	Psychological Testing Addt'l 30 Min	Each			All	$0.01-$500.00		Medical
97755		Assistive Technology assessment	1/4 Hour			All	*Contracted Rate	N	Non-Medical
99366		Behavior Support Treatment Team	Each			All	*Contracted Rate	N	Medical
99499	U1	Risk Assessment: sexual deviancy; each	Each			All	*Contracted Rate	N	Medical
99499	U4	Risk Assessment: non-sexual; hour	Each			All	*Contracted Rate	N	Medical
99499	U5	Risk Assessment: Brief Evaluation, Follow up, Additional Testing	Each			All	*Contracted Rate	N	Medical
H0044		Supportive Housing	Monthly			All	$575.00	N	Non-Medical
H0045	U1	Respite-Daily-Dedicated Bed-Child	Daily			All	*Contracted Rate	N	Non-Medical
H0045	U2	Respite-Daily-Enhanced-Child-Integrated	Daily			All	$376.05	N	Non-Medical
H0045	U2	Respite-Daily-Enhanced-Child-Standalone	Daily			All	$435.00	N	Non-Medical
H0045	U3	Respite-Daily-Dedicated Bed-Adult	Daily			All	*Contracted Rate	N	Non-Medical
H2014	U1	Skills training and dev, 15 min: Interview Skills Training	1/4 Hour			All	$0.01-$20.00	N	Non-Medical
H2014	U2	Skills training and dev, 15 min: Identify and Avoid Abuse Training	1/4 Hour			All	$0.01-$20.00	N	Non-Medical
H2014	UC	Skills training and dev, 15 min (Client Training: Medical)	1/4 Hour			All	$.01-$46.63	Y	Medical
H2014	U5	RN Delegation Per 15 Minute Unit (Individual: 163W0000X and 251J0000X)	1/4 Hour	Individual	163W0000X; 251J0000X	All	$12.86	Y	Medical
H2014	U5	RN Delegation Per 15 Minute Unit (Agency; 251E0000X)	1/4 Hour	Agency	251E0000X	All	$15.43	Y	Medical
H2014	U9	Skills training and dev, 15 min, Technology Support Consultation and Assistance	1/4 Hour			All	$0.01-$17.00	N	Non-Medical
H2014	UD	Skills training and dev, 15 min (Client Training: Non-medical)	1/4 Hour			All	$.01-$46.63	N	Non-Medical
H2014	UD	Skills training and dev *Music Therapist	1/4 Hour			All	$27.00-$31.00	N	Non-Medical
H2019		Behavior Support-Individual	1/4 Hour			All	$15.00-$37.50	Y	Medical
H2019	HQ	Behavior Support - Group	1/4 Hour			All	*Contracted Rate	N	Medical
H2019	U9	AHCA Behavior Support	1/4 Hour			All	*Contracted Rate	N	Medical
H2028		Sexual Deviancy Therapy	1/4 Hour			All	*Contracted Rate	N	Medical
H2028	HQ	Sexual Deviancy Therapy-Group	1/4 Hour			All	*Contracted Rate	N	Medical
K0739		Repair/svc DME non-oxygen eq	1/4 Hour			All	$24.67	N	Non-Medical
S0215	U2	Transportation - Other	Per mile			All	$0.76	N	Non-Medical
S0215	U3	AFH mileage, comm integration	Per mile			All	$0.76	N	Non-Medical
S0215	U4	AFH mileage, med appt	Per mile			All	$0.76	N	Non-Medical
S0215	U9	Transportation - (AHCA)	Per mile			All	$0.76	N	Non-Medical
S5100		Adult Day Care High Cost	1/4 Hour			King, Pierce, and Snohomish Counties	$5.38		Non-Medical
S5100		Adult Day Care Standard Cost	1/4 Hour			All other counties	$4.90		Non-Medical
S5100	U1	Adult Day Care Remote High Cost	1/4 Hour			King, Pierce, and Snohomish Counties	$5.13		Non-Medical
S5100	U1	Adult Day Care Remote Standard Cost	1/4 Hour			All other counties	$4.66		Non-Medical
S5100	U2	Adult Day Health Remote High Cost	1/4 Hour			King, Pierce, and Snohomish Counties	$7.32	Y	Medical
S5100	U2	Adult Day Health Remote Standard Cost	1/4 Hour			All other counties	$6.83	Y	Medical
S5102	U9	Adult Day Trial	Daily			All	$86.17	N	Medical
S5102	CG	Adult Day Health intake evaluation	Daily			All	$137.43	Y	Medical
S5102	TG	Adult Day Health High Cost	Daily			King, Pierce, and Snohomish Counties	$129.65	Y	Medical
S5102	TG	Adult Day Health Standard Cost	Daily			All other counties	$121.17	Y	Medical
S5102	HQ	Adult Day Care High Cost	Daily			King, Pierce, and Snohomish Counties	$86.01	N	Non-Medical
S5102	HQ	Adult Day Care Standard Cost	Daily			All other counties	$78.28	N	Non-Medical
S5102	UA	Adult Day Care Intake Evaluation	Daily			All	$137.43	N	Medical
S5160		PERS Installation	Each			All	*Contracted Rate	N	Non-Medical
S5161		PERS Monthly Service	Monthly			All	*Contracted Rate	N	Non-Medical
S5161	U1	PERS Monthly Service: Fall Detection	Monthly			All	*Contracted Rate	N	Non-Medical
S5161	U2	PERS Monthly Service: GPS	Monthly			All	*Contracted Rate	N	Non-Medical
S5161	U3	PERS Monthly Service: Medication Reminder	Monthly			All	*Contracted Rate	N	Non-Medical
S5165	UA	Environmental Modifications	Each			All	*Contracted Rate	N	Non-Medical
S5165	UB	Residential Environmental Modifications (RCL only)	Each			All	*Contracted Rate	N	Non-Medical
S5165	U3	Enviro Adaptations In-Home: General Utility or Repairs	Each			All	$0.01-$5,000.00 (ETR allowed)	N	Non-Medical
S5170		Home Delivered Meals	Each			All	$8.50	N	Non-Medical
S5125	U1	AFH Medical Escort	1/4 Hour			All	$6.01	N	Non-Medical
SA075		Assistive Technology	Each			All	$0.01-$5,000.00	N	Non-Medical
SA075	U1	Assistive Technology: CFC	Each			All	$0.01-$10,000.00	N	Non-Medical
SA075	U2	Assistive Technology: Non-CFC	Each			All	$0.01-$5,000.00	N	Non-Medical
SA106		Caregiver Support	Each			All	$15.00 - $186.52	N	Non-Medical
SA263		Community Choice Guide	1/4 Hour			All	$0.27 - $18.00	N	Non-Medical
SA266		Issuing Payment for approved Assistive Technology Goods	1/4 Hour			All	$10.00	N	Non-Medical
SA290		Residential Care Discharge Allowance - Not subject to VRI	Each			All	Total to $816.00 (ETR allowed to $2500)	N	Non-Medical
SA290, SA296		Community Transition/Stabilization - Items	Each			All	Total to $850 (ETR allowed)	N	Non-Medical
SA291, SA297		Community Transition/Stabilization - Service	Each			All	Total to $850 (ETR allowed)	N	Non-Medical
SA294	U1	Housing Subsidies (Interim Housing Federal)	Each			All	$.01-$5,000.00	N	Non-Medical
SA294	U2	Housing Subsidies (Interim Housing State)	Each			All	$.01-$5,000.00	N	Non-Medical
SA298		Emergency Rental Assistance (WA Roads only)				All	$0.01-$4,000.00	N	Non-Medical
SA299	U1	Supportive Housing Specialist (Pre-Tenancy)	1/4 Hour			All	$16.25	N	Non-Medical
SA330	U1	Wellness Programs and Activities - Care Receiver	Each			All	$0.01-$100.00	N	Non-Medical
SA330	U2	Wellness Programs and Activities - Caregiver	Each			All	$0.01-$100.00	N	Non-Medical
SA390		Vehicle Modifications	Each			All	$0.01-$10,000	N	Non-Medical
SA391	U1	Specialized Deep Cleaning (MAC-TSOA)	Each			All	$0.01-$2500.00 (ETR allowed to $10,000)	N	Non-Medical
SA392		Housework & Errands (Home Care Agency - 2532HE000L)	1/4 Hour	Home Care Agency	2532HE000L	All	$11.31	N	Non-Medical
SA392	U1	Heavy Housework - 1 Worker	1/4 Hour			All	$10.73 + $0.75	N	Non-Medical
		Heavy Housework - 2 Workers	1/4 Hour			All	$10.73 + $1.50	N	Non-Medical
		Heavy Housework - 3 Workers	1/4 Hour			All	$10.73 + $4.50	N	Non-Medical
SA392	U2	Yardwork	1/4 Hour			All	$0.01-$15.00	N	Non-Medical
SA393	U2	Pest Eradication (MAC-TSOA)	Each			All	$0.01-$2,500.00 (ETR allowed to $5,000.00)	N	Non-Medical
SA396		Bath Aide (Home Care Agency -253Z00000X)	1/4 Hour	Home Care Agency	253Z00000X	All	$.01-10.00	N	Non-Medical
SA420	U1	Pantry Stocking	Each			All	$0.01-$500.00	N	Non-Medical
SA421		Non-Medical Equipment & Supplies	Each			All	$0.01-$10,000	N	Non-Medical
SA421	U2	Non-Medical Equipment & Supplies - Wipes	Each			All	$0.01-$500.00	N	Non-Medical
SA604	U1	1099 Vendor Supplemental Payment	Each			All	$0.01-$10,000.00	N	Non-Medical
SA604	U2	APS Intervention Services Supplemental Vendor Payment	Each			All	$0.01-$2,000.00	N	Non-Medical
SA636	U1	Assistive Technology Services: Evaluation	Each			All	$60.00		Non-Medical
SA636	U2	Assistive Technology Services: Installation or Repair	Each			All	$60.00		Non-Medical
SA636	U3	Assistive Technology Services: Training	Each			All	$60.00		Non-Medical
SA685		Bed-Hold - First Seven Days (New as of July 1, 2003)	Daily			All	See Bed Hold Tab	N	Non-Medical
SA686		Bed-Hold - Days Eight Through Twenty (New as of July 1, 2003) AFH and AL	Daily			All	See Bed Hold Tab	N	Non-Medical
SA888		Physical Therapy (LTC: RCL and WA Roads only)	Each			All	$0.01-$186.52 (not to exceed Medicaid rate)	Y	Medical
SA889		Occupational Therapy (LTC: RCL and WA Roads only)	Each			All	$0.01-$186.52 (not to exceed Medicaid rate)	Y	Medical
SA890		Dietitian/Nutritionist	Each			All	$0.01-$186.52 (not to exceed Medicaid rate)	Y	Medical
SA892		Speech/Hearing/Communication Evaluation (LTC: WA Roads only)	Each			All	$0.01-$186.52 (not to exceed Medicaid rate)	Y	Medical
SA896	U1	Massage Therapy - Care Receiver	1/4 Hour			All	$0.01 - $30.00	N	Non-Medical
SA896	U2	Massage Therapy - Caregiver	1/4 Hour			All	$0.01 - $30.00	N	Non-Medical
SA897	U1	Acupuncture - Care Receiver	1/4 Hour			All	$0.01 - $20.00	N	Non-Medical
SA897	U2	Acupuncture - Caregiver	1/4 Hour			All	$0.01 - $20.00	N	Non-Medical
T1000	TD	Private Duty Nursing: RN, Individual	1/4 Hour	Individual Provider	163W00000X	All	$14.15	Y	Medical
T1000	TD	Private Duty Nursing: RN, Agency	1/4 Hour	Agency	251E00000X;251J00000X	All	$16.97	Y	Medical
T1000		Private Duty Nursing: LPN	1/4 Hour			All	$11.62	N	Medical
T1000	TE	Private Duty Nursing: LPN, Individual	1/4 Hour	Individual Provider		All	$11.62	N	Medical
T1000	TE	Private Duty Nursing: LPN, Agency	1/4 Hour	Agency		All	$13.95	N	Medical
T1000	TD,TV	PDN Hourly Holiday Pay RN, Individual	1/4 Hour	Individual Provider		All	$21.22	N	Medical
T1000	TE,TV	PDN Hourly Holiday Pay LPN, Individual	1/4 Hour	Individual Provider		All	$17.44	N	Medical
T1000	TD,TV	PDN Hourly Holiday Pay RN, Agency	1/4 Hour	Agency		All	$25.46	N	Medical
T1000	TE,TV	PDN Hourly Holiday Pay LPN, Agency	1/4 Hour	Agency		All	$20.92	N	Medical
T1001	CG	Nurse Consultation	Each			All	$0.01-$33.00	Y	Medical
T1002		Skilled Nursing - RN - quarter hour, Individual (163W00000X)	1/4 Hour	Individual Provider	163W00000X	All	$14.15	N	Medical
T1002		Skilled Nursing - RN - quarter hour, Agency (251E00000X and 251J00000X)	1/4 Hour	Agency	251E00000X;251J00000X	All	$16.97	N	Medical
T1002	U2	Nurse Consultation Skin Observation, Individual (163W00000X)	1/4 Hour	Individual Provider	163W00000X	All	$12.86	N	Medical
T1002	U2	Nurse Consultation Skin Observation, Agency (251E00000X)	1/4 Hour	Agency	251E00000X	All	$15.43	N	Medical
T1003		Skilled Nursing - LPN - quarter hour, Individual (164W00000X)	1/4 Hour	Individual Provider	164W00000X	All	$11.62	N	Medical
T1003		Skilled Nursing- Agency (251J00000X)	1/4 Hour	Agency	251J00000X	All	$16.97	N	Medical
T1003		Skilled Nursing - LPN - quarter hour, Agency (251E00000X)	1/4 Hour	Agency	251E00000X	All	$13.95	N	Medical
T1005		253Z00CDEL Consumer Directed Employer - Respite Care	1/4 Hour	Individual Provider	253Z00CDEL	All	$9.91	N	Non-Medical
T1005	U1	Respite in an Adult Family Home (up to 9 hours per day) - MAC & TSOA clients only	1/4 Hour			All	$6.01	N	Non-Medical
T1005	U1	Respite in an Adult Family Home (9 hours or more in a 24-hour period) - MAC & TSOA clients only	Daily			All	$216.36	N	Non-Medical
T1005	U3	Respite in an Adult Day setting	1/4 Hour			All	*Contracted Rate	N	Non-Medical
T1005	U5	Respite in an Adult Day Health Setting	1/4 Hour			All	*Contracted Rate	N	Non-Medical
T1005		Home Care Agency	1/4 Hour	Home Care Agency		All	$11.31	N	Non-Medical
T1019	U5	AFH Medical Escort (replaced by S5125, U1 effective 10/1/2025)	1/4 Hour			All	$5.92	N	Non-Medical
T1019	HQ,U2,U3,U4, U6	Home Care Agency - Personal Care	1/4 Hour	Home Care Agency		All	$11.31	N	Non-Medical
T1019	U2, U3, U4, U6	253Z00CDEL Consumer Directed Employer - Personal Care	1/4 Hour	Individual Provider	253Z00CDEL	All	$9.91	N	Non-Medical
T1020	U1	Adult Family Home	Daily			All	See Community Rates Tab	N	Non-Medical
T1020	U1	AFH HIV******	Daily			All	$179.37	N	Non-Medical
T1020	U2	Adult Residential Care	Daily			All	See Community Rates Tab	N	Non-Medical
T1020	U3	EARC	Daily			All	See Community Rates Tab	N	Non-Medical
T1020	U4	Specialized Dementia Care	Daily			All	See Community Rates Tab	N	Non-Medical
T1020	U4	Specialized Dementia Care - Enhanced (SSRC 22C000)	Daily			All	See Community Rates Tab	N	Non-Medical
T1020	U5	ESF Base	Daily			All	See ESF Rates Tab	N	Non-Medical
T1020	TD	AFH PDN Spec Home	Daily			All	$898.95	N	Medical
T1021		Home Health Aide	Per visit			All	$0.01-$18.43	N	Non-Medical
T2003		Non-emergency Transportation	Each			All	*Contracted Rate	N	Non-Medical
T2025	U1	Chronic Disease Self-management Program (CDSMP)	Each			All	$50.00	N	Non-Medical
T2025	U2	Program to Encourage Active, Rewarding Lives for Seniors (PEARLS)	Each			All	$75.00-$167.00	N	Non-Medical
T2025	U3	Client Training - Intensive Behavior Support	Each			All	$150.00		Medical
T2025	UA	Client Training EBT EnhanceFitness	Each			All	$0.01-$150.00	N	Non-Medical
T2031		Assisted Living	Daily			All	See Community Rates Tab	N	Non-Medical
T2033	U1	ECS for AFH	Daily			All	See Community Rates Tab		Non-Medical
T2033	U3	ECS add on for AL and EARC	Daily			All	See Community Rates Tab		Non-Medical
T2033	U4	Community Stability Supports	Daily			All	See CSS Rates Tab		Non-Medical
T2033	U5	AFH SBS	Daily			All	$178.00		Non-Medical
T2033	U7	EARC Medically Complex Add-On	Daily			All	$45.00		Non-Medical

*For contracted rates, the case manager should look in the AAA contractor list for the correct rate.
**Metropolitan Counties: Benton, Clark, Franklin, Island, Kitsap, Pierce, Snohomish, Spokane, Thurston, Whatcom, and Yakima Counties.

***Non-Metropolitan Counties: Adams, Asotin, Chelan, Clallam, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Grays Harbor, Jefferson,Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, San Juan, Skagit, Skamania, Stevens, Wahkiakum, Walla Walla, and Whitman.
****Shared Medical Service are services offered by both ALTSA and HCA. HCA sets the rate for shared services.
*****Unit Type Key:

EA	Each
1/4 HR	One-quarter hour (15 minutes)
15 mins	One-quarter hour (15 minutes)

QF	One-quarter hour (15 minutes)
DL	Daily
HR	Hourly
MI	Per mile
MN	Monthly
VS	Per visit

******The AFH HIV rate for FY26 includes $0.62 as reimbursement for the increase in the annual license renewal fee paid on beds used by Medicaid clients.

*******Attention Providers: Use the 'Submitting and Adjusting Social Services Claims' guide to submit claims for 'Non-Medical' service codes and use the 'Submitting and Adjusting Social Services Medical Claims' guide to submit claims for 'Medical' service codes. Both billing guides can be found on HCA's ProviderOne for Social Services webpage: https://www.hca.wa.gov/billers-providers-partners/providerone/providerone-social-services

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- ECS: James Selby
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- Private Duty Nursing: Kaila O'Dell
- Nurse Delegation: Janet Wakefield
- Adult Day Services: Susan Worthington
- MAC and TSOA: Debbie Johnson, Adrienne Cotton, Resa Lee-Bell