

# Consolidated Waiver, Person Family Directed Support Waiver and Base Funded Services Definitions

A ISO/Payment Agent	B Funding	C Transaction Code	D Modifier	E Service Name	F Service Description	G Unit
				Home and Community Services	Direct service and services to meet regulatory requirements and/or contract conditions provided in home and community settings to assist individuals in acquiring, retaining, and improving self-help, socialization and adaptive skills. For the most part, these services differ only with respect to setting or regulatory requirements. This service can only be provided when the county program determines it will prevent institutionalization.	
			Rate	Base and Modifiers	Modifiers enable services to be enriched through lower staff to individual ratios and program content. Individuals and families have increased program options from which to choose and levels of service are available to appropriately address individuals' health and safety needs and/or to achieve the purpose of the provision of the service.	
Yes - Individual, No - Agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Home and Community Habilitation</b>	This service may be made available to individuals in their own home or in other residential or community settings not subject to licensing regulations. Recreation is not an eligible service. Camp day or overnight can only be provided under respite/family aid. Entrance fees to events are not covered. Standard of a contiguous state with regional approval in writing.	15 minutes
		W7057		Base Staff Support	The provision of the service at a staff to individual ratio of no less than 1:6.	
		W7058		Staff Support Level 1	The provision of the service at a staff to individual ratio range of <1:6 - 1:3.5.	
		W7059		Staff Support Level 2	The provision of the service at a staff to individual ratio range of <1:3.5 - >1:1.	
		W7060		Staff Support Level 3	The provision of the service at a staff to individual ratio of 1:1	
		W7061		Level 3 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	

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No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Community Habilitation (Title 55, Chapter 2380 Adult Training Facilities)</b>	This service is made available to individuals in an Adult Training Facility.	1/2 day (2.5 hours)-cannot exceed 2 units per day	
		W7072		Base Staff Support	The provision of the service at a staff to individual ratio of no less than 1:6.		
			W7073		Staff Support Level 1	The provision of the service at a staff to individual ratio range of <1:6 - 1:3.5.	
			W7074		Staff Support Level 2	The provision of the service at a staff to individual ratio range of <1:3.5 - >1:1.	
			W7075		Staff Support Level 3	The provision of the service at a staff to individual ratio of 1:1.	
			W7076		Level 3 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1. Services with code W7072 through W7076 may be made available to individuals by providers in states contiguous to Pennsylvania when services meet comparable standards. Must have regional approval in writing.	
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Pre-Vocational Services (Title 55, Chapter 2390 Vocational Facilities)</b>	This service is made available to individuals in a Vocational Facility. Handicapped employment as defined in Title 55, Chapter 2390 is not a service that may be funded through the waiver.	1/2 day (2.5 hours)-cannot exceed 2 units per day	
		W7087		Base Staff Support	The provision of the service at a staff to individual ratio of 1:15.		
			W7088		Staff Support Level 1	The provision of the service at a staff to individual ratio range of <1:15 - 1:7.5.	
			W7089		Staff Support Level 2	The provision of the service at a staff to individual ratio range of <1:7.5 - >1:1.	
			W7090		Staff Support Level 3	The provision of the service at a staff to individual ratio of 1:1.	
			W7091		Level 3 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1. Services with code W7087 through W7091 may be made available to individuals by providers in states contiguous to Pennsylvania when services meet comparable standards. Must have regional approval in writing.	

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Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7094		<b>Older Adult Day Service (Title 6, Chapter 11, Older Adult Daily Living Centers)</b>	Direct service to meet regulatory requirements and/or contract conditions for older individuals with mental retardation. Services are provided to individuals to assist in meeting their personal care and social needs. Standard of a contiguous state apply, with regional approval in writing.	1/2 day (2.5 hours)-cannot exceed 2 units per day
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7096		<b>JCAHO Accredited/ MA Certified Non-Residential Agencies Providing Community Habilitation</b>	Direct service and services to meet regulatory requirements and/or contract conditions provided in home and community settings to assist individuals in acquiring, retaining, and improving self-help, socialization and adaptive skills.	15 minutes
				<b>Residential Home and Community Habilitation - Licensed Homes</b>	Direct service and services to meet regulatory requirements and contract conditions provided in licensed community homes to assist individuals in acquiring, retaining, and improving self-help, socialization and adaptive skills. Services under code W7097 through W7227 are residential services that differ in setting and regulatory requirements. All homes must be integrated and dispersed, homes on campuses are not eligible for waiver. Rates are based on the individual's needs and are/may be unique to each person in each setting.	
				Rate Setting Methodology		
No	Consolidated, Base			<b>Child Residential Services (The residential section of Title 55, Chapter 3800 Child Residential and Day Treatment Facilities)</b>	The Title 55, Chapter 3800 services that may be funded through the waiver are limited to residential service settings. Child residential services provided in secure settings, detention centers, and residential treatment facilities accredited by JCAHO may <b>not</b> be funded through the waiver. Service costs eligible for waiver funding.	1/2 month (11 to 21 days is 1/2 month)
		W7097		Eligible		
		W7098		Ineligible	Service costs not eligible for waiver funding.	
No	Consolidated, Base			<b>Community Residential Rehabilitation Services for the Mentally III (Title 55, Chapter 5310)</b>	Community residential rehabilitation services (CRRS) are characterized as transitional residential programs in community settings for persons with chronic psychiatric disability. Full-care CRRS for adults. Excludes host homes. This is a service for people with mental retardation and mental illness. Service costs eligible for waiver funding.	1/2 month (11 to 21 days)
		W7202		Eligible		
		W7203		Ineligible	Costs not eligible for waiver funding.	

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Yes	Consolidated, Base			<b>Family Living Homes (Title 55, Chapter 6500)</b>	A Title 55, Chapter 6500 setting is a private home in which residential care is provided to one or two individuals with mental retardation and who are not relatives of the home owners.	
				Adults		1/2 month (11 to 21 days)
		W7208		Eligible	Service costs eligible for waiver funding.	
		W7209		Ineligible	Costs not eligible for waiver funding.	
Yes				Children		1/2 month (11 to 21 days)
		W7214		Eligible	Service costs eligible for waiver funding.	
		W7215		Ineligible	Costs not eligible for waiver funding.	
NO	Consol. & Base			<b>Community Homes for Individuals with MR (Title 55, Chapter 6400)</b>	This service is made available to individuals in Title 55, Chapter 6400 settings.	1/2 month (11 to 21 days)
		W7220		Eligible	Service costs eligible for waiver funding.	
		W7221		Ineligible	Costs not eligible for waiver funding.	
NO	Consolidated, Base			<b>Residential Home and Community Habilitation - Unlicensed Homes</b>	Direct service and services to meet contract conditions provided in agency owned, leased, or rented homes to assist individuals in acquiring, retaining, and improving self-help, socialization and adaptive skills.	1/2 month (11 to 21 days)
		W7226		Eligible	Service costs eligible for waiver funding.	
		W7227		Ineligible	Costs not eligible for waiver funding.	
					<b>Supported Employment Services</b>	Direct and indirect services that must meet contractual conditions provided in community employment work sites with co-workers who are not disabled for the purposes of finding and supporting individuals in competitive jobs of their choice. Individuals must receive minimum wage or higher. Codes W7232 through W7235 allow for standard of a contiguous state with regional approval in Services directed towards supporting individuals in transition to integrated competitive employment through work that occurs in a location other than a facility subject to Title 55, Chapter 2390. The provision of the service is at a maximum staff to individual ratio of 1:20.
Yes - Individual No-agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7233		<b>Job Finding Service</b>		15 minutes
Yes - Individual No-agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7235		<b>Job Support Service</b>	The provision of the service at a maximum staff to individual ratio of 1:20.	15 minutes

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ISO/Payment Agent	Funding	Transaction Code	Modifier	Service Name	Service Description	Unit
Yes - Individual No-agency				<b>Transitional Work Services</b>	Services directed towards supporting individuals in transition to integrated, competitive employment through work that occurs in a location other than a facility subject to Title 55, Chapter 2380 or Chapter 2390. Transitional work service options include, but are not limited to: mobile work force, work station in industry, affirmative industry, and enclave.	
	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7237		Base Staff Support	The provision of the service at a staff to individual ratio range of <1:10 - >1:1.	15 minutes
		W7239		Staff Support Level 1	The provision of the service at a staff to individual ratio range of <1:6 - 1:3.5.	15 minutes
		W7241		Staff Support Level 2	The provision of the service at a staff to individual ratio range of <1:3.5 - >1:1.	15 minutes
		W7243		Staff Support Level 3	The provision of the service at a staff to individual ratio of 1:1.	15 minutes
		W7245		Level 3 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	15 minutes
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7246		<b>Visual/Mobility Therapy</b>	Evaluation and consultation for individuals who are blind or have visual impairments.	15 minutes

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				<b>Respite Services</b>	Direct service and services to meet regulatory requirements and/or contractual conditions that are provided to supervise/support individuals on a short term basis because of the absence or need for relief of those persons normally providing care. 24 hour respite care is limited to four (4) weeks per fiscal year. Respite that is less than 24 hours is limited to a recommended maximum of four (4) times per month but may be adjusted by the County MH/MR Office based on individual need. Waivers of these limitations may be approved on an individual basis by the Regional Offices in accordance with Title 55, Chapter 6350, Family Resource Services, Section 6350.16. Waiver option. These limitations also apply to the respite services in camp settings.	
				Rate Base and Modifiers	Modifiers enable services to be enriched through lower staff to individual ratios and program content. Individuals and families have increased program options from which to choose and levels of service are available to appropriately address individuals' health and safety needs.	
				<b>Respite-In Home-24 hours</b>	This service is provided in the private homes of individuals or the homes of their family or friends. The service may also be provided in other unlicensed homes acceptable to individuals/families.	Day
Yes - Individual, No - Agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7247		Base Staff Support	The provision of the service at a staff to individual ratio of 1:4.	
		W7248		Staff Support Level 1	The provision of the service at staff to individual ratio range of <1:4 - >1:1.	
		W7249		Staff Support Level 2	The provision of the service at a staff to individual ratio range of	
		W7250		Staff Support Level 2 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	

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Yes - Individual, No - Agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Respite- In Home- 15 minutes</b>	This service is provided in the private homes of individuals or the homes of their family or friends. The service may also be provided in other unlicensed homes acceptable to individuals/families.	15 minutes
		W7255		Base Staff Support	The provision of the service at a staff to individual ratio of 1:4.	
		W7256		Staff Support Level 1	The provision of the service at a staff to individual ratio of <1:4->1:1	
		W7257		Staff Support Level 2	The provision of the service at a staff to individual ratio range of	
		W7258		Staff Support Level 2 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Respite - Out-of-Home - 24 hours</b>	This service is provided in licensed (6400and 6500) homes.	Day
		W7259		Base Staff Support	The provision of the service at a staff to individual ratio of 1:4.	
		W7260		Staff Support Level 1	The provision of the service at a staff to individual ratio of <1:4->1:1	
		W7261		Staff Support Level 2	The provision of the service at a staff to individual ratio range of	
		W7262		Staff Support Level 2 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Respite- Out of Home- 15 minutes</b>	This service is provided in licensed (6400and 6500) homes.	15 minutes
		W7267		Base Staff Support	The provision of the service at a staff to individual ratio of 1:4.	
		W7268		Staff Support Level 1	The provision of the service at a staff to individual ratio of <1:4->1:1	
		W7269		Staff Support Level 2	The provision of the service at a staff to individual ratio range of	
		W7270		Staff Support Level 2 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	

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ISO/Payment Agent	Funding	Transaction Code	Modifier	Service Name	Service Description	Unit
				<b>Transportation Service</b>	Direct service and services to meet regulatory requirements and/or contractual conditions to provide transportation for individuals, enabling them access to services/activities in accordance with their ISP's.	
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7271		<b>Transportation (Mile)</b>	Transportation by family, friends, or others not affiliated with a provider agency. When transportation is provided to more than one individual at a time, the total number of units of service provided are equitably divided among the individuals for whom transportation is provided. The mileage cost may not exceed the state rate.	per mile
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7272		<b>Public Transportation</b>	Public transportation for individuals enabling access to services/activities in accordance with their ISPs.	outcome based
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7273		<b>Transportation</b>	Individual, non-emergency transportation.	per diem
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10			<b>Transportation (Trip)</b>	Transportation by a provider agency (excluding transportation for residential services) for which costs are determined on a per trip basis.	per trip (one way)
		W7274	Zone 1		A defined geographical area that is the shortest distance from the program site.	
		W7275	Zone 2		A defined geographical area that represents a middle distance from the program site.	
		W7276	Zone 3		A defined geographical area that is the longest distance from the program site.	
Yes, Individual- No, agency	Consol., Base	W7277		<b>Home Finding</b>	Direct and indirect services directed towards assisting individuals in finding homes and establishing households in accordance with their needs. <b>SERVICE PROVIDED UNDER CONSOLIDATED WAIVER ONLY.</b>	flat fee

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ISO/Payment Agent	Funding	Transaction Code	Modifier	Service Name	Service Description	Unit
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7278		<b>Environmental Accessibility Adaptations</b>	Adaptations to vehicles for improved access and/or safety.	outcome based
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7279		<b>Environmental Accessibility Adaptations</b>	Adaptations to homes for improved access and/or safety.	outcome based
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7280		<b>Adaptive Appliances/Equipment</b>	The purchase or modification of items for increased functional involvement by individuals in activities of daily living.	outcome based
Yes - Individual No - Agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7281		<b>Habilitation Supplies</b>	Supplies for direct use by individuals and/or caregivers to address health and safety needs. Supplies are limited to those listed in the long definitions document.	outcome based
Yes Individual, No Agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7282		<b>Chore</b>	Indirect services including household cleaning/maintenance and homemaker activities such as meal preparation. The initial duration of this service is limited to one month. A mandatory 2-week interval must be observed for evaluation purposes prior to any extension of this service. After six (6) weeks, additional criteria must be met to extend the service. Consolidated Waiver funding for this service may not exceed \$2000 in a fiscal year. There is no funding cap for this service in the P/FDSW.	1 hour
Yes-Individual, No-Agency	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7283		<b>Homemaker</b>	Indirect services including household cleaning/maintenance and homemaker activities such as meal preparation. The initial duration of this service is limited to one month. A mandatory 2-week interval must be observed for evaluation purposes prior to any extension of this service. After six (6) weeks, additional criteria must be met to extend the service. There is no funding cap for this service in the P/FDS Waiver. The consolidated waiver has a limit	1 hour

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Yes	Consol., Base	W7284		<b>Career Education</b>	Support, in the form of payment, for continuing education courses and training beyond high school that enables an individual to pursue a career. <b>AVAILABLE UNDER CONSOLIDATED WAIVER ONLY.</b>	outcome based
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7285		<b>Respite - Overnight Camp</b>	The temporary support/supervision of individuals in the absence/relief of their regular caregivers. This service is provided in residential camp settings. Respite in a residential camp is not contingent upon an emergency situation. This service shall not exceed four (4) weeks within a fiscal year except by waiver by Regional Offices on an individual basis.	Day
Yes	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7286		<b>Respite - Day Camp</b>	The temporary support/supervision of individuals in the absence/relief of their regular caregivers. Respite in a day camp setting is not contingent upon an emergency situation. The recommended maximum of four (4) sessions per family per month may be adjusted by County MH/MR Offices based on individual need.	Day
				<b>Family Support Services</b>	Family-Driven Family Support Services (FD-FSS) are designed to offer a variety of services to the family of an individual with mental retardation or to the individual who is mentally retarded for the purpose of enabling the individual to remain with his/her family in a community setting or to maintain independence in a community setting.	
Yes - Individual No - Agency				<b>Respite Care-24 Hours- Out of Home</b>	This service is the same as in home respite services, with one exception related to sites in which the service may be provided. The Family Resource Services Program permits respite care in a general hospital or nursing home when there is documented medical need and the County MH/MR Administrator approves the person's placement in a medical facility.	
	Base	W7287		Base Staff Support	The provision of the service at a staff to individual ratio of 1:4.	Day
		W7288		Staff Support Level 1	The provision of the service at a staff to individual ratio of <1:4->1:1	
		W7289		Staff Support Level 2	The provision of the service at a staff to individual ratio range of	
		W7290		Staff Support Level 2 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	

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Yes - Individual No - Agency				<b>Respite Care-Out of Home- 15 minutes</b>	This service is the same as in home respite services, with one exception related to sites in which the service may be provided. The Family Resource Services Program permits respite care in a general hospital or nursing home when there is documented medical need and the County MH/MR Administrator approves the person's placement in a medical facility.	15 minutes
	Base	W7301		Base Staff Support	The provision of the service at a staff to individual ratio of 1:4.	
		W7302		Staff Support Level 1	The provision of the service at a staff to individual ratio of <1:4->1:1	
		W7303		Staff Support Level 2	The provision of the service at a staff to individual ratio range of	
		W7304		Staff Support Level 2 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	
Yes - Individual No - Agency				<b>Family Aide</b>	The family aide may be responsible for the care and supervision of family members other than the family member with mental retardation.	
	Base	W7310		Base Staff Support	The provision of the service at a staff to individual ratio of no less than 1:6.	15 minutes
		W7311		Staff Support Level 1	The provision of the service at a staff to individual ratio range of <1:6 - 1:3.5.	
		W7312		Staff Support Level 2	The provision of the service at a staff to individual ratio range of <1:3.5 - >1:1.	
		W7313		Staff Support Level 3	The provision of the service at a staff to individual ratio of 1:1	
		W7314		Level 3 Enhanced	The provision of the service with a staff member who has had the training and experience to appropriately address the exceptional needs of an individual. This also includes service at a staff to individual ratio of 2:1.	
Yes - Individual No - Agency	Base	W7315		<b>Special Diet Preparation</b>	This service is assistance in the planning or preparation of meals for individuals who require significant modification to a routine diet.	outcome based
Yes-Individual- No-agency	Base	W7316		<b>Recreation/Leisure Time Activities</b>	This service is to enable individuals to participate in regular community activities of a recreational nature.	outcome based
Yes	Base	W7317		<b>Home Rehabilitation</b>	This service is the minor renovation to a family's home to enable the continued care and support of the individual with mental retardation in the home.	outcome based
	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	W7318		<b>Intermediary Service Organization (ISO) Vendor Fiscal/Employer Agent</b>	An indirect service that must meet contractual conditions that facilitates individuals/representatives in the employment and management of individual providers of service of their choice.	per month

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	Base	W7320		<b>FSS/Consumer Payment</b>	This is an indirect service to allow cash and/or voucher payments to individuals/families for Family Support Services rendered.	dollar
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	GP	<b>Physical Therapy</b>	Waiver service not otherwise specified. Service delivered under an outpatient physical therapy plan of care. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	GO	<b>Occupational Therapy</b>	Waiver service not otherwise specified. Service delivered under an outpatient occupational therapy plan of care. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	GN	<b>Speech and Language Therapy</b>	Waiver service not otherwise specified. Service delivered under an outpatient speech language pathology plan of care. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	TD	<b>Nursing Service-RN</b>	Waiver service not otherwise specified. Consultation, and training within scope of practice. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	TE	<b>Nursing Service-LPN</b>	Waiver service not otherwise specified. Consultation, and training within scope of practice. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes

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No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UG (6 Hours) and TD	<b>Nursing Service</b>	RN Afternoon. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UH (6Hours) and TD	<b>Nursing Service</b>	RN Evening. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UJ (6 Hours) and TD	<b>Nursing Service</b>	RN Night. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UF (6 Hours); and TE	<b>Nursing Service</b>	LPN Morning. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UG (6 Hours) and TE	<b>Nursing Service</b>	LPN Afternoon. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours

# Consolidated Waiver, Person Family Directed Support Waiver and Base Funded Services Definitions

A	B	C	D	E	F	G
ISO/Payment Agent	Funding	Transaction Code	Modifier	Service Name	Service Description	Unit
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UH (6 Hours) and TE	<b>Nursing Service</b>	LPN Evening. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	UJ (6 Hours) and TE	<b>Nursing Service</b>	LPN Night. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	6 Hours
				<b>Behavior Therapy</b>	The treatment, by psychological means, of the problem of an emotional nature in which a trained person deliberately establishes a professional relationship with an individual, in an attempt to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior, and promote positive personality growth and development. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	HE	<b>Individual Therapy</b>	Individual therapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, 20 to 30 minutes face-to face with the patient. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes
No	Consolidated, PFDSW, Base @ 90/10, FSS&FD, Pennhurst Dispersal @ 90/10	T2025	HE, HQ	<b>Group Therapy</b>	Interactive group psychotherapy. A denial letter from medical assistance fee for service or managed care must be received prior to any healthcare related service being provided.	15 minutes