



# IDAHO DEPARTMENT OF HEALTH & WELFARE

## Home Health – Idaho Medicaid

Fee schedules are prepared as tools to assist Medicaid providers and are not intended to grant rights or impose obligations. Every effort is made to ensure the accuracy of the information within the fee schedules as of the date they are posted. Medicaid makes no guarantee that this compilation of fee schedule information is error-free and will bear no responsibility or liability for the results or consequences of the use of these schedules.

Providers must verify member coverage on the date of service by calling (866) 686-4272 or using their trading partner account at IDMedicaid.com. Coverage and criteria information is communicated in the Provider Handbook, Medicaid Newsletters and Information Releases posted on IDMedicaid.com. The Current Procedural Terminology (CPT) codes descriptors, and other data are registered trademarks of the American Medical Association with all rights reserved.

Effective for home health services with dates of service on and after July 01, 2025, through June 30, 2026, Medicaid rates are as follows:

| Revenue Code                | Modifier | Description                                   | Rate on File <sup>1</sup> | Maximum Amount <sup>2</sup> |
|-----------------------------|----------|-----------------------------------------------|---------------------------|-----------------------------|
| 270                         | N/A      | Home Health Supplies                          | *by Fee Table             | *by Fee Table               |
| 291                         | N/A      | Rental Durable Medical Equipment              | *by Fee Table             | *by Fee Table               |
| 421                         | N/A      | Physical Therapy                              | \$118.29                  | \$200.47                    |
| 431                         | N/A      | Occupational Therapy                          | \$97.12                   | \$219.75                    |
| 441,<br>470,<br>471,<br>472 | N/A      | Speech-Language Pathology, Audiology Services | \$159.06                  | \$234.71                    |
| 551                         | N/A      | Skilled Nursing                               | \$98.80                   | \$272.14                    |
| 571                         | N/A      | Home Health Aide                              | \$38.40                   | \$198.55                    |
| 771                         | N/A      | Drugs Requiring Special coding                | Manual Price              | Manual Price                |

If you have any questions about claims processing, please contact Gainwell Technologies at 1 (866) 686-4272.

If you have any financial related questions regarding these rates please contact the Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1180 or email [MedicaidReimTeam@dhw.idaho.gov](mailto:MedicaidReimTeam@dhw.idaho.gov).

\*Reimbursement for revenue codes 0270 and 0291 will be priced from the numerical fee

schedule link below

<http://healthandwelfare.idaho.gov/Providers/MedicaidProviders/MedicaidFeeSchedule/tabid/268/Default.aspx>

Thank you for your continued participation in the Idaho Medicaid Program.

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<sup>1</sup> This is the rate paid prior to cost audit settlements.

<sup>2</sup> The Medicaid percentile cap, revised annually, is established at the seventy fifth percentile of the ranked costs per visit as determined by the Department using the data from the most recent finalized Medicare cost reports on hand in the Department thirty (30) days prior to the effective date.