

# ACTIVITY CODE DEFINITIONS FY 2026

## Contents

I. LIST OF ACTIVITY CODES .....	3
II. RESIDENTIAL SERVICES.....	4
A. ACTIVITY CODE 3150 (PLACEMENT SERVICES/SHARED LIVING ) .....	4
B. ACTIVITY CODE 3752 (ACQUIRED BRAIN INJURY SHARED LIVING) .....	4
C. ACTIVITY CODE 3153 (ADULT LONG TERM RESIDENTIAL SERVICES).....	5
D. ACTIVITY CODE 3753 (OCCUPANCY FOR ADULT LONG TERM RESIDENTIAL SERVICES) .....	5
E. ACTIVITY CODE 3751 (ACQUIRED BRAIN INJURY RESIDENTIAL SERVICES) .....	6
F. ACTIVITY CODE 3713 (OCCUPANCY FOR ACQUIRED BRAIN INJURY RESIDENTIAL SERVICES) .....	6
G. ACTIVITY CODE 3182 (EMERGENCY STABILIZATION RESIDENTIAL).....	7
III. DAY AND EMPLOYMENT SERVICES .....	8
A. ACTIVITY CODE 3163 (COMMUNITY BASED DAY SUPPORTS) .....	8
B. ACTIVITY CODE 3165 (ADULT DAY HEALTH SERVICES) .....	8
C. ACTIVITY CODE 3168 (INDIVIDUAL AND ONGOING SUPPORTED EMPLOYMENT) ....	9
D. ACTIVITY CODE 3181 (GROUP SUPPORTED EMPLOYMENT).....	9
E. ACTIVITY CODE 3664 (DAY HABILITATION SERVICES) .....	10
IV. SUPPORT SERVICES.....	11
A. ACTIVITY CODE 3700 (FAMILY SUPPORT NAVIGATION).....	11
B. ACTIVITY CODE 3701 (RESPITE IN RECIPIENT’S HOME – DAY).....	11
C. ACTIVITY CODE 3702 (RESPITE IN CARE GIVER’S HOME) .....	11
D. ACTIVITY CODE 3703 (INDIVIDUALIZED HOME SUPPORTS).....	12
E. ACTIVITY CODE 3705 (CHILDREN’S RESPITE IN CARE GIVER’S HOME - DAY) .....	12
F. ACTIVITY CODE 3707 (ADULT COMPANION).....	12
G. ACTIVITY CODE 3710 (BEHAVIORAL SUPPORTS AND CONSULTATION).....	13
H. ACTIVITY CODE 3712 (EMERGENCY STABILIZATION IN CAREGIVER’S HOME) .....	13
I. ACTIVITY CODE 3716 (COMMUNITY PEER SUPPORT/RESIDENTIAL PEER SUPPORT) .....	13
J. ACTIVITY CODE 3731 (RESPITE IN RECIPIENT’S HOME - HOUR).....	14
K. ACTIVITY CODE 3735 (CHILDREN’S RESPITE IN CARE GIVER’S HOME -HOUR) .....	14
L. ACTIVITY CODE 3738 (DDS/DESE DIRECT SUPPORT SERVICES) .....	14
M. ACTIVITY CODE 3759 (SITE BASED RESPITE FACILITY).....	15
N. ACTIVITY CODE 3770 (FAMILY SUPPORT CENTERS) .....	15
O. ACTIVITY CODE 3771 (CULTURALLY LINGUISTIC FAMILY SUPPORT CENTERS) ....	15
P. ACTIVITY CODE 3773 (INTENSIVE FLEXIBLE FAMILY SUPPORT SERVICES) .....	16
Q. ACTIVITY CODE 3774 (MEDICALLY COMPLEX PROGRAMS) .....	16
R. ACTIVITY CODE 3779 (FAMILY SUPPORT CENTER FLEXIBLE FUNDING).....	16
S. ACTIVITY CODE 3798 (IN HOME BASIC LIVING) .....	17
V. CLINICAL SERVICES .....	18
A. ACTIVITY CODE 3170 (CLINICAL TEAM).....	18

B. ACTIVITY CODE 3202 (REGIONAL MEDICAL SERVICES).....	18
C. ACTIVITY CODE 3208 (PSYCHIATRIC SERVICES) .....	18
D. ACTIVITY CODE 3253 (MOBILITY AND ORIENTATION).....	19
E. ACTIVITY CODE 3777 (NURSING FACILITY ACTIVE TREATMENT).....	19
VI. AUTISM SERVICES.....	20
A. ACTIVITY CODE 3772 (AUTISM SUPPORT CENTERS) .....	20
B. ACTIVITY CODE 7100 (AUTISM COACHING).....	20
B. ACTIVITY CODE 7102 (ASD COLLEGE NAVIGATION).....	20
C. ACTIVITY CODE 7105 (ASD PRE ENGAGEMENT) .....	21
D. ACTIVITY CODE 7210 (INTENSIVE COMMUNITY WRAP AROUND SERVICES) .....	21
VII. MISCELLANEOUS SERVICES.....	22
A. ACTIVITY CODE 3228 (RECRUITMENT SERVICES).....	22
B. ACTIVITY CODE 3274 (CORPORATE REPRESENTATIVE PAYEE SERVICES) .....	22
C. ACTIVITY CODE 3279 (GUARDIANSHIP SERVICES) .....	22
D. ACTIVITY CODE 3280 (LEGAL EDUCATION ADVOCACY).....	23
E. ACTIVITY CODE 3760 (NON WAIVER SERVICES).....	23
F. ACTIVITY CODE 3776 (FAMILY LEADERSHIP PROGRAM) .....	23
G. ACTIVITY CODE 3780 (FINANCIAL ASSISTANCE) .....	24
H. ACTIVITY CODE 3781 (FINANCIAL ASSISTANCE ADMINISTRATION).....	24
I. ACTIVITY CODE 3191 (FURNISHINGS AND EQUIPMENT) .....	24
VIII. TRANSPORTATION SERVICES.....	25
A. TRANSPORTATION (HST) .....	25
B. TRANSPORTATION (NOT HST AND NOT RATE REGULATED) .....	25
C. TRANSPORTATION (RATE REGULATED).....	25
IX. AGENCY WITH CHOICE SERVICES .....	26
A. ACTIVITY CODE 6703 (INDIVIDUALIZED HOME SUPPORTS FOR AGENCY WITH CHOICE) .....	26
B. ACTIVITY CODE 6704 (INDIVIDUALIZED DAY SUPPORTS FOR AGENCY WITH CHOICE) .....	26
C. ACTIVITY CODE 6753 (AGENCY WITH CHOICE ADMIN FEE and NAVIGATION) .....	26
D. ACTIVITY CODE 6780 (FLEXIBLE FUNDING FOR AGENCY WITH CHOICE) .....	27
X. ASSISTIVE TECHNOLOGY & REMOTE SUPPOSTS AND MONITORING.....	28
A. ACTIVITY CODE 3282 (ASSISTIVE TECHNOLOGY DEVICES).....	28
B. ACTIVITY CODE 3289 (ASSISTIVE TECHNOLOGY EVALUATION AND TRAINING)..	28
C. ACTIVITY CODE 3782 (REMOTE SUPPOSTS AND MONITORING SPECIALIZED DEVICES) .....	28
D. ACTIVITY CODE 3786 (REMOTE SUPPORTS AND MONITORING) .....	29

## **I. LIST OF ACTIVITY CODES**

ABI/MFP Residential Services Activity Codes: 3713, 3751, 3752

Residential Services Activity Codes: 3150, 3153, 3753, 3182

Day/Employment Services Activity Codes: 3163, 3165, 3168, 3181, 3664

Support Services Activity Codes: 3700, 3701, 3702, 3703, 3705, 3707, 3710, 3712, 3716, 3731, 3735, 3738, 3759, 3770, 3771, 3773, 3774, 3779, 3798

Clinical Services Activity Codes: 3170, 3202, 3208, 3253, 3777

Autism Services (Non Residential) Activity Codes: 3772, 7100, 7105, 7102, 7120

Miscellaneous Services Activity Codes: 3228, 3274, 3279, 3280, 3760, 3776, 3780, 3781, 3191

Transportation Services Activity Codes: 3196 (HST), 3196 (Unblended), 3196 (to & from job)

Agency with Choice Services Activity Codes: 6703, 6704, 6753, 6780

Assistive Technology/Remote Supports and Monitoring Activity Codes: 3282, 3289, 3782, 3786

## **II. RESIDENTIAL SERVICES**

### **A. ACTIVITY CODE 3150 (PLACEMENT SERVICES/SHARED LIVING )**

Placement Services utilize residential support agencies to provide recruitment, placement, training and oversight of care givers and living situations for individuals who (1) live in the home of a designated care provider who is a single person or member of a family unit or (2) live in their own homes (owned or leased) with designated care providers. Designated care providers are not employees of the residential support Agency. These care providers provide ongoing supports in the areas of daily living, maintaining optimal health care, creating and enhancing relationships with chosen family members and friends and other areas of assistance specified in the ISP.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	1 unit/day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **B. ACTIVITY CODE 3752 (ACQUIRED BRAIN INJURY SHARED LIVING)**

Shared Living is a residential option that matches a participant with a Shared Living caregiver. Shared Living is an individually tailored 24 hour/7 day per week, supportive service which includes supportive services that assist with the acquisition, retention, or improvement of skills related to living in the community. Shared Living integrates the participant into the usual activities of the caregiver's family life. Residential Support agencies recruit caregivers, assess their abilities, coordinate placement of participant or caregiver, train and provide guidance supervision and oversight for caregivers and provide oversight of participants' living situations.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Mass Health - Reference Rate Regulated rates/Service Summary Form
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	1 unit/day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**C. ACTIVITY CODE 3153 (ADULT LONG TERM RESIDENTIAL SERVICES)**

Residential consists of ongoing services and supports by paid staff in a provider operated residential setting that is designed to assist individuals to acquire, maintain or improve the skills necessary to live in a non-institutional setting. Residential services provide individuals with daily staff intervention with care, supervision and skills training in activities of daily living, home management and community integration in a qualified provider-operated residence with 24 hour staffing. This service may also include the provision of medical and health care services that are integral to meeting the daily needs of the participants. Transportation between the participant's place of residence and other service sites or places in the community may be provided as a component of residential services.

<b>Contract Type</b>	Unit Rate (Cost Reimbursement for Start Up)
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	1 unit/day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**D. ACTIVITY CODE 3753 (OCCUPANCY FOR ADULT LONG TERM RESIDENTIAL SERVICES)**

The provision of the physical site and associated costs of the building that houses the ALTR program which includes, lease or rental payments, depreciation, interest associated with long-term debt, durable equipment, insurance on buildings and equipment, real estate taxes, maintenance, electricity, heat, water, and meals. Lease payments to related parties cannot exceed the cost of what the provider would pay if the provider directly owned the property.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Occupancy Worksheet/Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**E. ACTIVITY CODE 3751 (ACQUIRED BRAIN INJURY RESIDENTIAL SERVICES)**

Residential consists of ongoing services and supports by paid staff in a provider operated residential setting that are designed to assist individuals to acquire, maintain or improve the skills necessary to live in a non-institutional licensed setting. Residential services provides individuals with daily staff intervention with care, supervision and skills training in activities of daily living, home management and community integration in a qualified provider operated residence with 24 hour staffing. Supports include adaptive skill development, assistance with activities of daily living, community inclusion, non-medical transportation, adult educational supports (such as safety sign recognition and money management), social and leisure skill development that assist the participant to reside in the most integrated setting appropriate to his/her needs. Provider owned or leased facilities where residential habilitation services are furnished must be compliant with the Americans with Disabilities Act.

<b>Contract Type (Cost Reimbursement Option?)</b>	Unit Rate (Cost Reimbursement for Start Up)
<b>Rate Type</b>	Mass Health – Reference ALTR Regulation/Service Summary Form
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	1 unit/day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**F. ACTIVITY CODE 3713 (OCCUPANCY FOR ACQUIRED BRAIN INJURY RESIDENTIAL SERVICES)**

The provision of the physical site and associated costs of the building that houses the ABI Residential program which includes, lease or rental payments, depreciation, interest associated with long-term debt, durable equipment, insurance on buildings and equipment, real estate taxes, maintenance, electricity, heat, water, and meals. Lease payments to related parties cannot exceed the cost of what the provider would pay if the provider directly owned the property.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Mass Health - Reference ALTR Regulation/Service Summary Form
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	No
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**G. ACTIVITY CODE 3182 (EMERGENCY STABILIZATION RESIDENTIAL)**

This service is designed to provide stabilization and support for waiver participants who due to either behavioral or environmental circumstances cannot remain in their current residence. The service is provided in a licensed facility to participants who are unable to care for themselves based on the participant's assessed needs for stabilization and support and the need to develop a new individualized plan of care that will meet the participant's needs. This service includes overnight supervision and support. Occupancy costs will be paid through a separate contract under the 3753 ALTR occupancy activity code.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form/Occupancy Worksheet
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAY/MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **III. DAY AND EMPLOYMENT SERVICES**

#### **A. ACTIVITY CODE 3163 (COMMUNITY BASED DAY SUPPORTS)**

This program of supports is designed to enable an individual to enrich his or her life and enjoy a full range of community activities by providing opportunities for developing, enhancing, and maintaining competency in personal, social and community activities. Services include, but are not limited to, the following service options: career exploration, including assessing interests through volunteer experiences or situational assessments; community integration experiences to support fuller participation in community life; skill development and training; development and assistance with activities of daily living; socialization experiences and support to enhance interpersonal skills; and pursuit of personal interests and hobbies. This service is intended for individuals of working-age who may be on a “pathway” to employment; as a supplemental service for individuals who are employed part-time and need a structured and supervised program of services during the day when they are not working, which may include opportunities for socialization and peer support; and individuals who are of retirement-age and who need and want to participate in a structured and supervised program of services in a group setting.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/Service Limit</b>	6 hours per day. Prior approval required for additional hours.
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

#### **B. ACTIVITY CODE 3165 (ADULT DAY HEALTH SERVICES)**

An Adult Day Health Program is a site-based program that is licensed by the Department of Public Health and has been reviewed and approved by the MassHealth for the provision of ADH services. Services are available to individuals who are receiving adult day health services who temporarily lose their MassHealth and continue to need the services available through this service type, as well as to individuals for whom alternative MassHealth services are being provided and DDS, as a result, is providing Adult Day Health program resources.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Mass Health Rate: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	Refer to Mass Health regulations
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes



**C. ACTIVITY CODE 3168 (INDIVIDUAL AND ONGOING SUPPORTED EMPLOYMENT)**

Individuals enrolled in an Individual Supported Employment program, receive assistance from a provider to obtain a job based on identified needs and interests. Individuals may receive supports at a job in the community or in a self-employed business. Regular or periodic assistance, training and supports are provided for the purpose of developing, maintaining and/or improving job skills, and fostering career advancement opportunities. Natural supports are developed by the provider to help increase inclusion and independence of the individual within the community setting. Activity includes initial supports for those who required regular check ins and assistance, and ongoing supports for individuals who only require periodic check ins. Lower rates were established for on-going support services once an individual is stabilized in their job.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/Service Limit</b>	6 hours per day. Prior approval required for additional hours.
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**D. ACTIVITY CODE 3181 (GROUP SUPPORTED EMPLOYMENT)**

A small group of individuals, (typically 2 to 8), working in the community under the supervision of a provider agency. Emphasis is on work in an integrated environment, with the opportunity for individuals to have contact with co-workers, customers, supervisors, and others without disabilities. Group Supported Employment may include small groups in industry (enclave); provider businesses/small business model; mobile work crews which allow for integration, and temporary services which may assist in securing an individual position within a business.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/Service Limit</b>	6 hours per day. Prior approval required for additional hours.
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**E. ACTIVITY CODE 3664 (DAY HABILITATION SERVICES)**

Day Habilitation Services is a program of services for individuals with intellectual disabilities (ID) that is based on a day habilitation service plan which sets forth measurable goals and objectives and prescribes an integrated program of activities and therapies necessary to reach the stated goals and objectives. This code is primarily available for individuals receiving day habilitation services who temporarily lose their MassHealth coverage and continue to need the service as well as for individuals for whom alternative MassHealth services are being provided and DDS, as a result, is providing Day Habilitation program resources

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Mass Health: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	6 hours per day (no exceptions)
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

#### **IV. SUPPORT SERVICES**

##### **A. ACTIVITY CODE 3700 (FAMILY SUPPORT NAVIGATION)**

Family support navigation consists of the provision of information and referral supports that are designed to assist families to identify needs and to facilitate and gain access to local generic supports through coordination between family and other service providers. The Family Navigator acts as a guide and resource development expert to ensure that families have knowledge and access to a broad array of generic community resources, helps in navigating the system, and promotes the value of natural supports.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

##### **B. ACTIVITY CODE 3701 (RESPITE IN RECIPIENT'S HOME – DAY)**

Services provided in the home of the participant, in the family home, or in the home of an individual family provider to waiver participants who are unable to care for themselves. Services are provided on a short-term overnight basis because of either the absence or need for relief of those persons who normally provide care for the participant or due to the needs of the participant.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	30 Days/Year
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

##### **C. ACTIVITY CODE 3702 (RESPITE IN CARE GIVER'S HOME)**

Supervision and care provided in the caregiver's home on a short-term basis, including on a short-term overnight basis, where there is an absence or need for relief of those persons who normally provide care for the participant.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	30 Days/Year
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**D. ACTIVITY CODE 3703 (INDIVIDUALIZED HOME SUPPORTS)**

Individualized Home Supports consists of services and supports for individuals who live with their families. Service includes a variety of activities that may be provided regularly and are determined necessary to prevent institutionalization. It may include teaching and fostering the acquisition, retention or improvement of skills related to personal finance, health, shopping, use of community resources, community safety, and other social and adaptive skills to live in the community as specified in the POC. It may also include training and education in self determination/ self-advocacy to enable the participant to acquire skills to exercise control and responsibility over the services and supports they receive.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	23 hours/day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**E. ACTIVITY CODE 3705 (CHILDREN'S RESPITE IN CARE GIVER'S HOME - DAY)**

Supervision and care provided in the caregiver's home on a short-term basis, including on a short-term overnight basis, where there is an absence or need for relief of those persons who normally provide care for the participant. The arrangement of respite in the home of a caregiver by an Agency requires licensure by the Department of Early Education and Care.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**F. ACTIVITY CODE 3707 (ADULT COMPANION)**

Non-medical care, supervision and socialization provided to an adult. Services may include assistance with meals and basic activities of daily living incidental to the support and supervision of the individual. The service is provided to carry out personal outcomes identified in the individual plan that support the individual to successfully reside in his/her home or in the family home.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	23 hours/day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**G. ACTIVITY CODE 3710 (BEHAVIORAL SUPPORTS AND CONSULTATION)**

Behavioral Supports and Consultative services necessary to improve an individual's independence and integration in their community. This service is available to participants, to unpaid caregivers, and or paid staff in carrying out individual support plans which are designed to remediate identified challenging behaviors or to acquire socially appropriate behaviors.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	NA
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**H. ACTIVITY CODE 3712 (EMERGENCY STABILIZATION IN CAREGIVER'S HOME)**

This service is designed to provide stabilization and support for waiver participants who due to either behavioral or environmental circumstances cannot remain in their current residence. The service is provided in the home of an individual family provider to waiver participants who are unable to care for themselves. Services are based on the participant's assessed needs for stabilization and support and the need to develop a new individualized plan of care which will meet the participant's needs.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**I. ACTIVITY CODE 3716 (COMMUNITY PEER SUPPORT/RESIDENTIAL PEER SUPPORT)**

Peer Support is designed to provide training, instruction and mentoring to individuals about self-advocacy, participant direction, civic participation, leadership, benefits, and participation in the community. The service is also designed to promote understanding in families and other service providers about the role of self-advocacy in community life.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**J. ACTIVITY CODE 3731 (RESPIRE IN RECIPIENT'S HOME - HOUR)**

Services provided in either a) the home of the participant, b) or in the family home, c) or in the home of an individual family provider to waiver participants who are unable to care for themselves. Services are provided on an hourly basis because of either the absence or need for relief of those persons who normally provide care for the participant or due to the needs of the participant.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	30 days/year
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**K. ACTIVITY CODE 3735 (CHILDREN'S RESPIRE IN CARE GIVER'S HOME -HOUR)**

Supervision and care provided in the caregiver's home on a short-term basis, including on a short-term overnight basis, where there is an absence or need for relief of those persons who normally provide care for the participant.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**L. ACTIVITY CODE 3738 (DDS/DESE DIRECT SUPPORT SERVICES)**

Reimbursements to providers for costs related to services and/or goods arranged for families receiving alllocations under the DDS/DESE program. Expenses are subject to approval of a service plan.

<b>Contract Type</b>	Unit Rate/Cost Reimbursement
<b>Rate Type</b>	Family Navigation Regulated Rate/Cost-Reimbursement
<b>Attendance Unit Type</b>	UNIT AND COST
<b>Reimbursement Unit of Service</b>	HOURLY AND COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**M. ACTIVITY CODE 3759 (SITE BASED RESPITE FACILITY)**

Temporary placement of an individual outside his/her home (either own home, family home, DDS or other residential setting) on a short-term basis to relieve a crisis and restore or maintain the well-being of the individual and/or family. Supports include short term placement away from home, 24-hour supervision, continuation and maintenance of other supports delivered to an individual according to his/her service plan.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Reference ALTR Regulation: Service Summary Form/ Occupancy Worksheet
<b>Attendance Unit Type</b>	DAY
<b>Reimbursement Unit of Service</b>	DAY/MONTH
<b>Cost/ Service Limit</b>	30 days/year
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

**N. ACTIVITY CODE 3770 (FAMILY SUPPORT CENTERS)**

Family Support Centers will establish a local presence and act as a hub for offering a wide range of general family support services and activities to families of children and adults who are eligible for DDS services. It is expected that Family Support Centers will conduct broad outreach and provide services to families from diverse cultural, ethnic and linguistic communities in the geographic area they are serving. This may involve creating partnerships with community organizations and other resources in order to provide culturally responsive services.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Roster for extended navigation/Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**O. ACTIVITY CODE 3771 (CULTURALLY LINGUISTIC FAMILY SUPPORT CENTERS)**

Cultural/Linguistic-Specific Family Support Centers respond to the unique needs of specific cultural and linguistic family groups in specified areas or regions of the state. Families to receive services are typically designated groups of families for whom English is not their primary language, and as a result face linguistic barriers in accessing services and require more individualized and specialized assistance to learn about and access the service system..

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Roster for extended navigation/Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**P. ACTIVITY CODE 3773 (INTENSIVE FLEXIBLE FAMILY SUPPORT SERVICES)**

The primary goal of Intensive Flexible Family Support programs is to help support families with one or more members with a disability who are experiencing significant challenges, which are causing the child/individual to be at risk of out-of-home placement. This is a time-limited (6 to 12 months) and goal-oriented service providing more focused and intensive supports in response to identified areas of need and difficulty, and to build family capacity to support their child at home.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	DAYS
<b>Reimbursement Unit of Service</b>	DAYS
<b>Cost/ Service Limit</b>	6 to 12 Months
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**Q. ACTIVITY CODE 3774 (MEDICALLY COMPLEX PROGRAMS)**

Medically Complex Programs provide a family-driven model of care which supports families with children and young adults having significant cognitive, physical, and complex health care needs who are living at home. The goal is to provide comprehensive wrap-around supports, which consist of a specialized case management activities that help families integrate the variety of resources and supports they are receiving in order to care for their family member at home.

<b>Contract Type</b>	<b>Unit Rate</b>
<b>Rate Type</b>	<b>Rate Regulated: Roster</b>
<b>Attendance Unit Type</b>	<b>MONTH</b>
<b>Reimbursement Unit of Service</b>	<b>MONTH</b>
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**R. ACTIVITY CODE 3779 (FAMILY SUPPORT CENTER FLEXIBLE FUNDING)**

Family Support Center Stipends are used to give individuals/families direct cash stipend payments, and/or to provide reimbursements and payments as outlined in the Family Support Program Manual and Guidelines, January 2019.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes



**S. ACTIVITY CODE 3798 (IN HOME BASIC LIVING)**

On-going services and supports by paid staff designed to assist individuals who live independently to acquire, maintain or improve the skills necessary to live in a non-institutional setting.

Individual/Community Supports are provided to individuals who require 23 hours or less per day of assistance by paid staff. This service provides supports necessary for individuals to develop the skills that enable them to become more independent, integrated, and productive in their communities. The service enables adults to retain or improve skills related to personal finance, health, shopping, use of community resources, community safety, and other adaptive skills needed to live in the community.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	23 Hrs/Day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

## **V. CLINICAL SERVICES**

### **A. ACTIVITY CODE 3170 (CLINICAL TEAM)**

DDS funded service that provides a resource team with expertise in behavior management, counseling, physical, recreational, occupational therapies, and other clinical interventions available through referral from an Area or Regional Office. Team members provide consultation and/or direct services to individuals with intellectual disabilities, their families and community agencies and are often used in an emergency situation to help stabilize an individual.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

### **B. ACTIVITY CODE 3202 (REGIONAL MEDICAL SERVICES)**

Provide high quality 24 hours-a-day primary preventive medical care through a combination of on-site, on-call and consultative services (in conjunction with 24-hour facility nursing and generic services) to the consumers living in a facility. Services are primarily targeted to individuals residing at Hogan or Wrentham Development Center. Contracts and procurements are managed by the Regional Offices. Services include, but are not limited to, providing prompt detection and referral of health problems through adequate medical surveillance, periodic evaluations, and regular medical examinations.

<b>Contract Type</b>	Cost-Reimbursement or Negotiated Unit Rate
<b>Rate Type</b>	VARIES
<b>Attendance Unit Type</b>	VARIES
<b>Reimbursement Unit of Service</b>	Unit and Cost
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

### **C. ACTIVITY CODE 3208 (PSYCHIATRIC SERVICES)**

Provide high quality psychiatric care through a combination of on-site, on-call and consultative services to the consumers living in the community or at a facility. This includes, but is not limited to, providing prompt detection and referral of psychiatric problems through adequate medical surveillance, periodic evaluations, and regular psychiatric examinations. The purpose of the program is to evaluate, diagnose and treat acute and chronic psychiatric conditions, as well as implement long-term treatment plans.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Agreement
<b>Attendance Unit Type</b>	NA
<b>Reimbursement Unit of Service</b>	Varies
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**D. ACTIVITY CODE 3253 (MOBILITY AND ORIENTATION)**

Programs that work with individuals served by the Department of Development Services who have been identified as blind or visually impaired. Individuals may have intellectual disability, ASD, and/or Acquired Brain Injury. Components include: Orientation and Mobility, Low Vision Service (Environmental Adaptation) and Vocational Rehab services.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	15 minutes
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**E. ACTIVITY CODE 3777 (NURSING FACILITY ACTIVE TREATMENT)**

Individuals with intellectual disability (ID) or development disability (DD) are subject to screening prior to admission to a nursing facility and /or periodically pursuant to federal Preadmission Screening and Resident Review (PASRR) regulation 42 CFR § 483.110 et seq. The regulation requires that individuals with a confirmed ID/DD diagnosis and a PASRR determination receive specialized services while residing in nursing facilities and that there is a consistent coordination and implementation of care and services across all settings designed to improve and/or maintain an individual's skills and abilities.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated – Service Summary Form
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	15 mins
<b>Cost/ Service Limit</b>	8 Hrs/Day
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

## **VI. AUTISM SERVICES**

### **A. ACTIVITY CODE 3772 (AUTISM SUPPORT CENTERS)**

The goal of the Autism Support Centers is to provide an array of information and referral services, resources and supports to children and young adults with autism spectrum disorders. The array of services and supports to families includes outreach to family, information and referral, family clinics, support groups, access to the latest information on autism, family trainings, parent networking and mentoring, and social/recreational events, among other activities. The Autism Support Center needs to establish a local presence and demonstrate an expertise in autism spectrum disorders, including Asperger's.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

### **B. ACTIVITY CODE 7100 (AUTISM COACHING)**

Coaching is an individualized one on one service between a DDS eligible adult on the autism spectrum and a qualified profession coach who works for a provider and has both extensive knowledge about individuals with autism spectrum disorders and significant expertise in mental health issues. Coaching is a form of support which is therapeutic in nature based on the strength of the relationship.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	HOURL
<b>Cost/ Service Limit</b>	144 hours (includes Pre-Engagement Service)
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

### **B. ACTIVITY CODE 7102 (ASD COLLEGE NAVIGATION)**

Program designed for DDS eligible individuals who are enrolled in a post-secondary college program. This service is an individualized one-to-one service between the student and the Navigator. Depending on the support needs identified, the service may be provided by individual support workers or more skilled "clinical" support workers who have experience working with adults with autism and a recent familiarity with the college experience both academic and social.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	15 minutes
<b>Cost/ Service Limit</b>	144 hours
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**C. ACTIVITY CODE 7105 (ASD PRE ENGAGEMENT)**

Pre-engagement is a one-to-one individualized support service for DDS eligible individuals with autism with severe social isolation due to mental health challenges. Individuals referred to the pre-engagement service will require assistance in managing thoughts, mood, or perceptions which impair judgment, behavior, capacity to recognize reality or the ability to meet the ordinary demands of life. Pre-engagement services are reviewed at three-month intervals.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	Hour
<b>Reimbursement Unit of Service</b>	15 minutes
<b>Cost/ Service Limit</b>	144 hours (includes ASD Coaching)
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**D. ACTIVITY CODE 7210 (INTENSIVE COMMUNITY WRAP AROUND SERVICES)**

Joint proof-of-concept model of intensive community wrap-around services between DDS and DMH to support adults in their home and community who are between ages 18 and 30, eligible for DDS community developmental disability support based on autism spectrum disorder (ASD), and also have a Serious Mental Illness (SMI) or other significant mental health challenges. The goal of this shared service delivery model is to maintain overall individual stability and effective functionality for these young adults in their homes and communities.

<b>Contract Type</b>	Unit Rate
<b>Rate/Accommodation Type</b>	Rate Regulated: Clinical Team Rates
<b>Attendance Unit Type</b>	Day
<b>Reimbursement Unit of Service</b>	Month
<b>Cost/ Service Limit</b>	None
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

## **VII. MISCELLANEOUS SERVICES**

### **A. ACTIVITY CODE 3228 (RECRUITMENT SERVICES)**

Contract Type	Cost-Reimbursement
Rate Type	Cost-Reimbursement
Attendance Unit Type	COST
Reimbursement Unit of Service	COST
Cost/ Service Limit	N/A
Waiver Eligible?	No
Meditech Enrollment?	No

### **B. ACTIVITY CODE 3274 (CORPORATE REPRESENTATIVE PAYEE SERVICES)**

This contracted service will provide individualized financial supports and advocacy for DDS individuals who experience difficulty in managing their own funds. This assistance will support each individual in his/her personal movement toward integration into the larger community by offering the individual and his/her family peace-of-mind regarding his/her money and fiscal accountability. Providers will serve as a corporate representative payee to members of the community who are referred by DDS.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

### **C. ACTIVITY CODE 3279 (GUARDIANSHIP SERVICES)**

Qualified individuals and individuals in non-profit corporations who serve as guardians and/or conservators for individuals receiving services from DDS who lack the capacity to make informed decisions with respect to the conduct of personal and financial affairs which creates an unreasonable risk to the individual's health or welfare.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Agreement
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	HOURL
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**D. ACTIVITY CODE 3280 (LEGAL EDUCATION ADVOCACY)**

Qualified attorneys that provide advice, counsel and representation to education decision makers on matters affecting transition-aged individuals supported by DDS. These attorneys represent parents, foster parents, guardians and other special education decision makers.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Agreement
<b>Attendance Unit Type</b>	HOURL
<b>Reimbursement Unit of Service</b>	HOURL
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**E. ACTIVITY CODE 3760 (NON WAIVER SERVICES)**

Services that are provided to participants that cannot be billed through the federal waiver program. These include: recreational or diversional services that don't have a therapeutic goal; services available through the Medicaid State Plan at the allowable level; services available through the Vocational Rehabilitation Act or Chapter 766; and housing searches.

<b>Contract Type</b>	Cost Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No

**F. ACTIVITY CODE 3776 (FAMILY LEADERSHIP PROGRAM)**

The Family Leadership Program is designed to provide education, leadership training and mentoring for families with children and adults with disabilities living in the community. One goal of these activities is to provide information on best practices and opportunities to support individuals and families to fully participate in all aspects of community life. A key feature of this program is that all the family leadership training and mentoring is developed and provided by family members who have a child or adult family member with a disability.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**G. ACTIVITY CODE 3780 (FINANCIAL ASSISTANCE)**

Financial Assistance Services: It is the responsibility of the provider to administer payments for expenses on behalf of individuals, as needed, which can include but is not limited to costs associated with room and board, payment for utilities and supplemental food costs.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes
<b>Object Code</b>	M04

**H. ACTIVITY CODE 3781 (FINANCIAL ASSISTANCE ADMINISTRATION)**

Fees paid to a provider to address administrative and/or operational costs relating to processing payments for necessary expenses to support individuals and families in their efforts to live independently.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	NA
<b>Reimbursement Unit of Service</b>	Transaction fee
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**I. ACTIVITY CODE 3191 (FURNISHINGS AND EQUIPMENT)**

This activity code is used in conjunction with an Attachment 6 Capital Budget form for the purpose of purchasing furnishings and/or equipment consistent with the provisions of the Purchase of Service (POS) Capital Items Procurement Policy issued by the Operational Services Division (OSD).

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement/Capital Budget
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	No



## **VIII. TRANSPORTATION SERVICES**

*Transportation services have been broken out into three types.*

### **A. TRANSPORTATION (HST)**

Transportation services between an individual's home and a day/work location on a daily or routine basis.

Trips are delivered through contracts that the Executive Office of Health and Human Service, Human Services Transportation (HST) Office through local Regional Transit Authorities.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	TRIP
<b>Attendance Unit Type</b>	TRIP
<b>Reimbursement Unit of Service</b>	TRIP
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **B. TRANSPORTATION (NOT HST AND NOT RATE REGULATED)**

Transportation services for individuals between home and a day program that are not provided through HST. Examples include: 3181 (Group Employment), transportation from a program to a work location, and transportation to a CBDS program site (3163).

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Accommodation Rate: Roster/Service Summary Form
<b>Attendance Unit Type</b>	TRIP
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **C. TRANSPORTATION (RATE REGULATED)**

Transportation for individual enrolled in Supported Employment programs, 3168 activity code, who are working at a business in the community and require ongoing rides/transportation from the provider site to their job to maintain their employment.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	TRIP
<b>Reimbursement Unit of Service (by trip time)</b>	15 minutes, 30 minutes, 45 minutes, 60 minutes
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

## **IX. AGENCY WITH CHOICE SERVICES**

### **A. ACTIVITY CODE 6703 (INDIVIDUALIZED HOME SUPPORTS FOR AGENCY WITH CHOICE)**

In-Home Supports consists of services and supports in a variety of activities that may be provided regularly, but that are less than 24 hours per day, that are determined necessary to allow an individual to live successfully in the community. This service provides the support and supervision necessary for the individual to establish, live in and maintain on an on-going basis a household of their choosing, in a personal home or the family home, to meet their habilitative needs. These services assist and support the individual and may include teaching and fostering the acquisition, retention or improvement of skills related to personal finance, health, shopping, use of community resources, community safety, and other social and adaptive skills to live in the community.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type (Used on ID#)</b>	HOURS
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	23 Hrs/Day
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **B. ACTIVITY CODE 6704 (INDIVIDUALIZED DAY SUPPORTS FOR AGENCY WITH CHOICE)**

Services and supports provided to individuals tailored to their specific personal goals and outcomes related to the acquisition, improvement, and/or retention of skills and abilities to prepare and support an individual for work and/or community participation and/or meaningful retirement activities and could not do so without this direct support. A qualified family member or relative, support worker, or independent contractor, may provide services. This service originates from the home of the individual and is generally delivered in the community.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type</b>	HOURS
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	184 hours/month (aggregate number of day and employment supports)
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **C. ACTIVITY CODE 6753 (AGENCY WITH CHOICE ADMIN FEE and NAVIGATION)**

Agency with Choice Providers will be paid a unit rate for management of the Agency with Choice Program for individuals directing their own services. In this manner, providers will be paid for the administrative time required to manage the service. Service Navigation hours for individuals will be included with 6753 accommodation rate calculation.

<b>Contract Type</b>	Accommodation Rate
<b>Rate Type</b>	Rate Regulated: Service Summary Form
<b>Attendance Unit Type</b>	MONTH
<b>Reimbursement Unit of Service</b>	MONTH
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

**D. ACTIVITY CODE 6780 (FLEXIBLE FUNDING FOR AGENCY WITH CHOICE)**

Flexible Funding is intended to help individuals achieve their goals and support implementation of the AWC support services they are receiving. It can cover allowable expenses that are incurred in the delivery of Individualized Home Supports and/or Individualized Day Supports, such as mileage, membership, or entrance fees, etc. and for other approved and allowable expenditures that support the individual in meeting the goals outlined in their plan for which there is no other funding source.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost-Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	No
<b>Meditech Enrollment?</b>	Yes

## **X. ASSISTIVE TECHNOLOGY & REMOTE SUPPORTS AND MONITORING**

### **A. ACTIVITY CODE 3282 (ASSISTIVE TECHNOLOGY DEVICES)**

Assistive Technology devices and equipment purchases approved by a DDS Area Office following an Assistive Technology evaluation by a qualified vendor. This equipment may include equipment and subscription services used for remote support such as motion sensing system, radio frequency identification and live video feed.

<b>Contract Type</b>	Cost-Reimbursement
<b>Rate Type</b>	Cost Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	\$3,000/Item
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	No

### **B. ACTIVITY CODE 3289 (ASSISTIVE TECHNOLOGY EVALUATION AND TRAINING)**

Evaluation by a qualified profession to determine the assistive technology needs of an individual. Includes a functional assessment of technologies available to address the individual's assessed need and to support the individual to achieve outcomes identified in her/her ISP. Activity also includes set up of equipment, education and training that aids an individual in the use of assistive technology equipment as well as training for the individual's support network.

<b>Contract Type</b>	Unit Rate
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	HOUR
<b>Reimbursement Unit of Service</b>	HOUR
<b>Cost/ Service Limit</b>	12 hours for evaluation; 15 hours for support/training. Prior approval required for additional hours
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes

### **C. ACTIVITY CODE 3782 (REMOTE SUPPORTS AND MONITORING SPECIALIZED DEVICES)**

Purchase of specialized equipment that cannot be purchased through any other contracting mechanism, Any purchases for equipment will be made in accordance with the Operational Services Division Purchase of Service Capital Items Procurement Policy. Specialized equipment must be recommended by an Assistive Technology evaluation that demonstrates it is necessary for the individual to participate in remote supports and monitoring.

<b>Contract Type</b>	Cost Reimbursement
<b>Rate Type</b>	Cost Reimbursement
<b>Attendance Unit Type</b>	COST
<b>Reimbursement Unit of Service</b>	COST
<b>Cost/ Service Limit</b>	N/A
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	No

**D. ACTIVITY CODE 3786 (REMOTE SUPPORTS AND MONITORING)**

This is a service that combines technology and direct care professionals to support eligible adults with ID/DD. Remote Supports uses two way communication in real time, including home based sensors, and other devices, to provide a less invasive means of providing instruction/guidance monitoring and responding to the needs of individuals living in the community. The software platform used by staff at another location must be capable of monitoring and supporting several people at the same time and must always be staffed.

<b>Contract Type</b>	Unit (Cost Reimbursement for Start Up)
<b>Rate Type</b>	Rate Regulated: Roster
<b>Attendance Unit Type</b>	DAY
<b>Reimbursement Unit of Service</b>	DAY
<b>Cost/ Service Limit</b>	NA
<b>Waiver Eligible?</b>	Yes
<b>Meditech Enrollment?</b>	Yes