

**CFR Att A(3) - Autism Services (Proposed to be effective March 1, 2024)**

TOS*	Procedure Code	Long Description	Modifier 1	Age Range	Non-Facility (N)/ Facility	CURRENT		3/1/2024		Percent Change from Current Medicaid
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Proposed Medicaid Fee	Proposed Adjusted Medicaid Fee	
1	97151	**	HO	0-999	N/F	\$24.71	\$24.71	\$20.35	\$20.35	-17.64%
1	97153	**		0-999	N/F	\$11.25	\$11.25	\$12.73	\$12.73	13.16%
1	97154	**		0-999	N/F	\$1.88	\$1.88	\$1.59	\$1.59	-15.43%
1	97155	**	HN	0-999	N/F	\$16.85	\$16.85	\$18.00	\$18.00	6.82%
1	97155	**	HO	0-999	N/F	\$21.06	\$21.06	\$22.50	\$22.50	6.84%
1	97156	**	HN	0-999	N/F	\$16.00	\$16.00	\$16.50	\$16.50	3.13%
1	97156	**	HO	0-999	N/F	\$20.00	\$20.00	\$20.63	\$20.63	3.15%
1	97158	**	HN	0-999	N/F	\$2.81	\$2.81	\$2.25	\$2.25	-19.93%
1	97158	**	HO	0-999	N/F	\$3.51	\$3.51	\$2.81	\$2.81	-19.94%
1	99366	**		0-20	N	\$9.54	\$9.54	\$33.96	\$33.96	255.97%
1	99366	**		0-20	F	\$8.98	\$8.98	\$33.12	\$33.12	268.82%
1	99366	**		21-999	N	\$9.09	\$9.09	\$32.34	\$32.34	255.78%
1	99366	**		21-999	F	\$8.55	\$8.55	\$31.54	\$31.54	268.89%

*Type of Service (TOS)	
1	Medical Services
Modifier	
HN	Licensed assistant behavioral analyst
HO	Licensed behavior analyst

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