

Medicaid Certified School Match Program Fee Schedule

2026

*Reimbursement amount is the Federal Share of these fees; however, reimbursement can also be based on the individual school district's cost and vary from school district to school district.

Occupational Therapy Services				
Code	Modifier	Description of Service	Maximum Fee	Maximum Allowable Units
97165		Occupational Therapy Evaluation, Low Complexity	\$51.05	1 per year
97166		Occupational Therapy Evaluation, Moderate Complexity	\$51.05	1 per year
97167		Occupational Therapy Evaluation, High Complexity	\$51.05	1 per year
97168		Occupational Therapy Re-Evaluation	\$51.05	1 per 6 months
97530		Occupational Therapy Individual Session Provided by an Occupational Therapist	\$17.86	4 per day, 14 per week
97530	HM	Occupational Therapy Individual Session Provided by an Occupational Therapy Assistant	\$14.30	4 per day, 14 per week
97150	GO	Occupational Therapy Group Session Provided by an Occupational Therapist	\$3.47	4 per day, 14 per week
97150	UC	Occupational Therapy Group Session Provided by an Occupational Therapy Assistant	\$2.74	4 per day, 14 per week
97542	GO	Wheelchair Evaluation and Fitting Provided by an Occupational Therapist	\$51.05	1 per 5 years
92597	GO	AAC Initial Evaluation Provided by an Occupational Therapist	\$102.63	1 per 5 years
29799	HA	Application of Casting or Strapping	\$19.56	2 per day

Physical Therapy Services				
Code	Modifier	Description of Service	Maximum Fee	Maximum Allowable Units
97161		Physical Therapy Evaluation, Low Complexity	\$51.05	1 per year
97162		Physical Therapy Evaluation, Moderate Complexity	\$51.05	1 per year
97163		Physical Therapy Evaluation, High Complexity	\$51.05	1 per year
97164		Physical Therapy Re-Evaluation	\$51.05	1 per 6 months
97110		Physical Therapy Individual Session Provided by a Physical Therapist	\$17.86	4 per day, 14 per week
97110	HM	Physical Therapy Individual Session Provided by a Physical Therapist Assistant	\$14.29	4 per day, 14 per week
97150	GP	Physical Therapy Group Session Provided by a Physical Therapist	\$3.47	4 per day, 14 per week
97150	HM	Physical Therapy Group Session Provided by a Physical Therapist Assistant	\$2.74	4 per day, 14 per week
97542	GP	Wheelchair Evaluation and Fitting Provided by a Physical Therapist	\$51.05	1 per 5 years
92597	GP	AAC Initial Evaluation Provided by a Physical Therapist	\$102.63	1 per 5 years
29799	HA	Application of Casting or Strapping	\$19.56	2 per day

Speech-Language Pathology Services				
Code	Modifier	Description of Service	Maximum Fee	Maximum Allowable Units
92521		Evaluation/Re-evaluation of speech fluency (e.g., stuttering, cluttering)	\$51.05	1 per 6 months
92522		Evaluation/Re-evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria)	\$51.05	1 per 6 months
92523		Evaluation/Re-evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (e.g., receptive and expressive language)	\$51.05	1 per 6 months
92524		Evaluation/Re-evaluation of behavioral and qualitative analysis of voice and resonance	\$51.05	1 per 6 months
92610		Evaluation/Re-evaluation of oral and pharyngeal swallowing function	\$51.05	1 per 6 months
92526		Treatment of swallowing dysfunction and/or function for feeding	\$51.05	1 per day
92507		Speech-Language Pathology Individual Session Provided by a Speech-Language Pathologist	\$17.86	4 per day, 14 per week
92507	HM	Speech-Language Pathology Individual Session Provided by a Speech Therapy Assistant	\$14.30	4 per day, 14 per week
92508		Speech-Language Pathology Group Session Provided by a Speech-Language Pathologist	\$3.47	4 per day, 14 per week
92508	HM	Speech-Language Pathology Group Session Provided by a Speech-Language Pathology Assistant	\$2.74	4 per day, 14 per week
92597		AAC Initial Evaluation Provided by a Speech-Language Pathologist	\$102.63	1 per 5 years
92597	GN	AAC Re-Evaluation Provided by a Speech-Language Pathologist	\$52.63	1 per 6 months
92609		AAC Fitting, Adjustment, and Training Visit	\$42.11	8 per year

Behavioral Services					
Code	Modifier 1	Modifier 2	Description of services	Maximum Fee	Maximum Allowable Units
H0031	AH		Psychologist - Individual Service-Evaluation	\$9.66	32 units per school district staff member, per day
H0046	AH		Psychologist - Individual Service-All Else	\$9.66	32 units per school district staff member, per day
H0046	AH	HQ	Psychologist - Group Service	\$4.95	32 units per school district staff member, per day
H0031	SE		Certified Behavior Analyst - Individual Service-Evaluation	\$8.00	32 units per school district staff member, per day
H2019	HA		Certified Behavior Analyst - Individual Service-All Else	\$10.41	32 units per school district staff member, per day
H2019	HA	HQ	Certified Behavior Analyst - Group Service	\$3.24	32 units per school district staff member, per day
H0002	HA		Certified Behavior Analyst (Bachelor's Level) and Certified Assistant Behavior Analyst - Individual Service-Evaluation	\$6.70	32 units per school district staff member, per day
H2014	HA		Certified Behavior Analyst (Bachelor's Level) and Certified Assistant Behavior Analyst - Individual Service-All Else	\$6.70	32 units per school district staff member, per day
H2014	HA	HQ	Certified Behavior Analyst (Bachelor's Level) and Certified Assistant Behavior Analyst - Group Service	\$3.35	32 units per school district staff member, per day
H0031	HU		Social Worker (Master's Level); Marriage and Family Therapist; Mental Health and Guidance Counselors - Individual Service-Evaluation	\$8.97	32 units per school district staff member, per day
H0046	SE		Social Worker (Master's Level); Marriage and Family Therapist; Mental Health and Guidance Counselors - Individual Service-All Else	\$8.97	32 units per school district staff member, per day

Behavioral Services (continued)					
Code	Modifier 1	Modifier 2	Description of services	Maximum Fee	Maximum Allowable Units
H0046	SE	HQ	Social Worker (Master's Level); Marriage and Family Therapist; Mental Health and Guidance Counselors - Group Service	\$4.25	32 units per school district staff member, per day
H0002	HN		Social Worker (Bachelor's Level) - Individual Service-Evaluation	\$7.17	32 units per school district staff member, per day
H0046	HN		Social Worker (Bachelor's Level) - Individual Service-All Else	\$7.17	32 units per school district staff member, per day
H0046	HN	HQ	Social Worker (Bachelor's Level) - Group Service	\$3.40	32 units per school district staff member, per day

Nursing Services				
Code	Modifier	Description of Service	Maximum Fee	Maximum Allowable Units
T1002		Nursing Service - Registered Nurse	\$6.20	32 units per school district staff member, per day
T1003		Nursing Service - Licensed Practical Nurse	\$4.80	32 units per school district staff member, per day
T1004		Nursing Service - School Health Aide	\$3.80	32 units per school district staff member, per day
T1002	KO	Medication Administration - Registered Nurse	\$2.07	32 units per school district staff member, per day
T1003	KO	Medication Administration - Licensed Practical Nurse	\$1.06	32 units per school district staff member, per day
T1004	KO	Medication Administration - School Health Aide	\$0.80	32 units per school district staff member, per day

Transportation

Transportation fees vary for each school district. They are not included in this appendix, instead each district is notified of its fee.