

Ohio Medicaid ALWV Contract 06-19-2024

Procedure Code	Procedure Description	Pricing Indicator	Rate Type	Mod1	Mod2	Mod3	Mod4	Max Fee	Max Fee Eff. Date	Max Fee End Date	PA
T2031	ASSIST LIVING WAIVER/DIEM	MAXFEE	ALW					155	1/1/2024	12/31/2299	N
T2038	COMM TRANS WAIVER/SERVICE	MAXFEE	ALW					2000	7/1/2019	12/31/2299	N