

Georgia NOW/COMP Program Code Description
Revised November 2024* (DBHDD Effective 7/1/24) DCI EFFECTIVE 7/1/24
(Annual limits as authorized in the PA, up to the maximums noted below)

Service Code	Service Description	Billing Code	Unit Description	Medicaid Program Limits
OTT	Adult OT Therapeutic Services	97530-GO/UC	15 minutes	Maximum rate per unit = \$30.23 6 units per day Annual limit for all therapies \$10,800
OTL	Adult OT Evaluation – Low Complexity	97165-UC	One evaluation	Maximum rate per unit = \$71.98 Limit = one evaluation per year Annual limit for all therapies \$10,800
OTM	Adult OT Evaluation – Moderate Complexity	97166-UC	One evaluation	Maximum rate per unit = \$71.98 Limit = one evaluation per year Annual limit for all therapies \$10,800
OTH	Adult OT Evaluation – High Complexity	97167-UC	One evaluation	Maximum rate per unit = \$71.98 Limit = one evaluation per year Annual limit for all therapies \$10,800
OTR	Adult OT Re-Evaluation	97168-UC	One evaluation	Maximum rate per unit = \$47.55 Limit = one evaluation every 180 days (2/yr) Annual limit for all therapies \$10,800
OTS	Adult OT Sensory Integrative Techniques	97533-GO/UC	15 minutes	Maximum rate per unit = \$26.19 4 units per day Annual limit for all therapies \$10,800
OFT	Adult Orthotic & Prosthetic Fitting & Training	97760-GO/UC	15 minutes	Maximum rate per unit = \$29.33 6 units per day Annual limit for all therapies \$10,800
PRT	Prosthetic Training	97761-GO/UC	15 minutes	Maximum rate per unit = \$26.75 6 units per day Annual limit for all therapies \$10,800
OPC	Orthotic and Prosthetic Check Out	97763-GO/UC	15 minutes	Maximum rate per unit = \$25.05 6 units per day Annual limit for all therapies \$10,800
PTL	Adult PT Evaluation – Low Complexity	97161-GP/UC	One evaluation	Maximum rate per unit = \$74.27 Limit = one evaluation per year Annual limit for all therapies \$10,800

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PTM	Adult PT Evaluation – Moderate Complexity	97162-GP/UC	One evaluation	Maximum rate per unit = \$74.27 Limit = one evaluation per year Annual limit for all therapies \$10,800
PTH	Adult PT Evaluation – High Complexity	97163-GP/UC	One evaluation	Maximum rate per unit = \$74.27 Limit = one evaluation per year Annual limit for all therapies \$10,800
PTR	Adult PT Re-Evaluation	97164-GP/UC	One evaluation	Maximum rate per unit = \$50.49 Limit = one evaluation every 180 days (2/yr) Annual limit for all therapies \$10,800
PTT	Adult PT Therapeutic Procedure	97110/UC	15 minutes	Maximum rate per unit = \$27.75 Limit = 6 units per day Annual limit for all therapies \$10,800
NMR	Neuro-Muscular Re-Education	97112-GO/UC	15 minutes	Maximum rate per unit = \$28.99 Limit = 4 units per day Annual limit for all therapies \$10,800
SLE	Adult Speech and Language - Evaluation	92523-UC	One evaluation	Maximum rate per unit = \$175.44 Limit = one evaluation every 180 days (2/yr) Annual limit for all therapies \$10,800
SLT	Adult Speech and Language Therapy	92507-GN/UC	One visit	Maximum rate per unit = \$66.97 1 session per day Annual limit for all therapies \$10,800
SGE	Adult Speech Generating Device Evaluation	92607-UC	One evaluation	Maximum rate per unit = \$117.03 Limit = one evaluation every 180 days (2/yr) Annual limit for all therapies \$10,800
SGD	Adult Speech –Generating Device Therapy	92609-UC	One visit	Maximum rate per unit = \$58.64 1 session per day Annual limit for all therapies \$10,800
SFT	Adult Swallowing / Feeding Therapy	92526-UC	One visit	Maximum rate per unit = \$47.83 1 session per day Annual limit for all therapies \$10,800
SFE	Adult Swallowing / Feeding Evaluation	92610-UC	One evaluation	Maximum rate per unit = \$125.89 Limit = one evaluation every 180 days (2/yr) Annual limit for all therapies \$10,800

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BS2	Behavioral Supports Services - Level 2	H2019-UB/UC	\$1=1 unit	No Annual Limit – NOW ONLY
BS1	Behavioral Supports Services - Level 1	H2019-UA/UC	\$1=1 unit	No Annual Limit – NOW ONLY
CAG	Community Access Group	T2025-HQ/UC	\$1=1 unit	Annual limit of \$21,900.00
CAI	Community Access Individual	T2025-UB/UC	\$1=1 unit	Annual limit of \$15,192.00
CGS	Community Guide Services	H2015-UC	\$1=1 unit	Annual limit of \$2,143.00 – NOW ONLY
CLB	Community Living Support – Basic (2.99 hours or less)	T2025-U5-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
CLE	Community Living Support – Extended (3 hours or more)	T2025-U4-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
CB2	Community Living Support – Basic – 2 Persons (2.99 hours or less)	T2025-U5-UN-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
CE2	Community Living Support – Extended – 2 Persons (3 hours or more)	T2025-U4-UN-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
CB3	Community Living Support – Basic – 3 Persons (2.99 hours or less)	T2025-U5-UP-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
CE3	Community Living Support – Extended – 3 Persons (3 hours or more)	T2025-U4-UP-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
PAR	Personal Assistance Retainer	T2025-U5-CG-UC	\$1=1 unit	Annual limit for NOW CLS = \$65,000.00 Annual limit for COMP CLS = \$83,520.00
EAA	Environmental Accessibility Adaptation	S5165-UC	Per Invoice	\$15,000.00 (Every 5 years)
GNS	Individual Directed Goods and Services	T2025 –U7/UC	\$1=1 unit	Annual limit = \$1,606.00
NST	Natural Support Training Services	T2025-UD/UC	\$1=1 unit	Annual limit = \$1,914.00 – NOW ONLY

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RSH	Respite Services – Hourly (7.49 hours or less and cannot be used on the same day as Respite Daily)	S5150-UC	\$1=1 unit	Annual limit = \$5,541.00 (CAT1)/ \$7,468.00 (CAT2)
RS2	Respite Services – 2 Persons (7.49 hours or less and cannot be used on the same day as Respite Daily)	S5150-UN-UC	\$1=1 unit	Annual limit = \$5,541.00 (CAT1)/ \$7,468.00 (CAT2)
RS3	Respite Services – 3 Persons (7.49 hours or less and cannot be used on the same day as Respite Daily)	S5150-UP-UC	\$1=1 unit	Annual limit = \$5,541.00 (CAT1)/ \$7,468.00 (CAT2)
RO1	Respite – Out of Home – Category 1 (7.49 hours or less and cannot be used on the same day as Respite Daily)	S5150 – U1-UC	\$1=1 unit	Annual Limit = \$5,541.00
RO2	Respite – Out of Home – Category 2 (7.49 hours or less and cannot be used on the same day as Respite Daily)	S5150-U3-UC	\$1=1 unit	Annual Limit = \$7,468.00
RD1	Respite Daily – Category 1 (7.5 hours or more and cannot be used on the same day as Respite Hourly)	S5151-UJ-UC	One Day (7.5 hours in one day) or overnight shift	Maximum rate per unit = \$184.72 (Max pay rate of \$156.10/day) Annual limit = \$5,541.60 Annual limit = 30 units
RD2	Respite Daily – Category 2 (7.5 hours or more and cannot be used on the same day as Respite Hourly)	S5151-U1-UJ-UC	One Day (7.5 hours in one day) or overnight shift	Maximum rate per unit = \$248.94 (Max pay rate of \$210.37/day) Annual limit = \$7,468.20 Annual limit = 30 units
SME	Specialized Medical Equipment	T2029-UC	\$1=1 unit	Annual limit = \$5,569.00
SMS	Specialized Medical Supplies	T2028-UC	\$1= unit	Annual limit = \$4,069.00
SEG	Supported Employment Services Group	T2019–HQ/UC	\$1=1 unit	Annual limit = \$21,686.00– NOW ONLY
SEI	Supported Employment Services Individual	T2019-UB/UC	\$1=1 unit	Annual limit = \$21,686.00– NOW ONLY
TET	Transportation Services Encounter/Trip	T2003-UC	\$1=1 unit	Annual limit for all transportation of \$2,995.00

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TCC	Transportation Commercial Carrier, Multi-Pass	T2004-UC	\$1=1 unit	Annual limit for all transportation of \$2,995.00
VAS	Vehicle Adaptation Services	T2039-UC	\$1=1 unit	\$6,683.00 (every 5 years)