

AD/TBI Waivers Fee Schedule

Effective July 1, 2026

| Service | Service Code | Waiver | Unit/ Frequency | Maximum Allowable Rate |
|--|--------------|--------|--------------------|------------------------|
| Day Services | | | | |
| Adult Day Health - Agency | 9245 | AD | Day (6+ Hrs) | \$ 81.22 |
| Adult Day Health - Agency | 9245 | AD | Hour | \$ 13.53 |
| Independence Skills Building - Individual (1:1) | 8382 | AD | Hour | \$ 16.00 |
| Independence Skills Building - Group (1:2) | 4934 | AD | Hour | \$ 8.00 |
| Independence Skills Building - Group (1:3) | 5711 | AD | Hour | \$ 5.33 |
| Respite Services | | | | |
| Respite - Agency - In-Home - Individual (1:1) | 1113 | AD | Hour | \$ 29.96 |
| Respite - Agency - In-Home - Group (1:2) | 7388 | AD | Hour | \$ 14.95 |
| Respite - Agency - In-Home - Group (1:3) | 4616 | AD | Hour | \$ 9.98 |
| Respite - Independent - In-Home - Individual (1:1) | 1113 | AD | Hour | \$ 16.00 |
| Respite - Independent - In-Home - Group (1:2) | 7388 | AD | Hour | \$ 8.00 |
| Respite - Independent - In-Home - Group (1:3) | 4616 | AD | Hour | \$ 5.33 |
| Respite - Agency - Out-of-Home - Individual (1:1) | 7395 | AD | Day (8+ Hrs) | \$ 238.68 |
| Respite - Agency - Out-of-Home - Individual (1:1) | 7395 | AD | Hour | \$ 29.96 |
| Respite - Agency - Out-of-Home - Group (1:2) | 7395 | AD | Day (8+ Hrs) | \$ 119.34 |
| Respite - Agency - Out-of-Home - Group (1:2) | 7395 | AD | Hour | \$ 14.98 |
| Respite - Agency - Out-of-Home - Group (1:3) | 4303 | AD | Day (8+ Hrs) | \$ 79.56 |
| Respite - Agency - Out-of-Home - Group (1:3) | 4303 | AD | Hour | \$ 9.98 |
| Respite - Independent - Out-of-Home - Individual (1:1) | 7395 | AD | Day (8+ Hrs) | \$ 128.00 |
| Respite - Independent - Out-of-Home - Individual (1:1) | 7395 | AD | Hour | \$ 16.00 |
| Respite - Independent - Out-of-Home - Group (1:2) | 7395 | AD | Day (8+ Hrs) | \$ 64.00 |
| Respite - Independent - Out-of-Home - Group (1:2) | 7395 | AD | Hour | \$ 8.00 |
| Respite - Independent - Out-of-Home - Group (1:3) | 4303 | AD | Day (8+ Hrs) | \$ 42.66 |
| Respite - Independent - Out-of-Home - Group (1:3) | 4303 | AD | Hour | \$ 5.33 |
| Respite - Agency - Camp | 5711 | AD | Day | Invoice |
| In-Home Services | | | | |
| Personal Care - Agency - Out-of-Home Provider | 5761 | AD | Hour* | \$ 28.00 - 34.00 |
| Personal Care - Agency - Live-in Provider | 8990 | AD | Hour* | \$ 28.00 - 34.00 |
| Personal Care - Independent - Out-of-Home Provider | 5761 | AD | Hour* | \$ 15.00 - 21.00 |
| Personal Care - Independent - Live-in Provider | 8990 | AD | Hour* | \$ 15.00 - 21.00 |
| Companion - Agency - Individual (1:1) | 9510 | AD | Hour* | \$ 28.00 - 34.00 |
| Companion - Agency - Group (1:2) | 2551 | AD | Hour* | \$ 14.00 - 17.00 |

AD/TBI Fee Schedule (Cont.)

| Service | Code | Waiver | Unit | Max Rate |
|--|--------|--------|--------------|------------------|
| In-Home Services (Cont.) | | | | |
| Companion - Agency - Group (1:3) | 2241 | AD | Hour* | \$ 9.34 - 11.33 |
| Companion - Agency - Individual (1:1) | 9510 | AD | Hour* | \$ 15.00 - 21.00 |
| Companion - Agency - Group (1:2) | 2551 | AD | Hour* | \$ 7.50 - 10.50 |
| Companion - Agency - Group (1:3) | 2241 | AD | Hour* | \$ 5.00 - 7.00 |
| <i>*Some In-Home Care rates are negotiated but must be set within a meaningful range as indicated.</i> | | | | |
| LRI Personal Care - Agency | 7995 | AD/TBI | Hour | \$ 32.00 |
| LRI Personal Care - Independent | 5011 | AD/TBI | Hour | \$ 16.00 |
| Extra Care for Children with Disabilities | | | | |
| Extra Care for Ch. - In-Home - Individ. (1:1) or Licensed | 2500 | AD | Hour | Invoice* |
| Extra Care for Ch. - In-Home Lic. Exempt - Group (1:2) | 3865 | AD | Hour | Invoice* |
| Extra Care for Ch. - In-Home Lic. Exempt - Group (1:3) | 7537 | AD | Hour | Invoice* |
| Extra Care for Ch.- Out-of-Home - Individ. (1:1) or Licensed | 9704 | AD | Day (5+ Hrs) | Invoice* |
| Extra Care for Ch.- Out-of-Home - Individ. (1:1) or Licensed | 9704 | AD | Hour | Invoice* |
| Extra Care for Ch.- Out-of-Home Lic. Exempt - Group (1:2) | 6302 | AD | Day (5+ Hrs) | Invoice* |
| Extra Care for Ch.- Out-of-Home Lic. Exempt - Group (1:2) | 6302 | AD | Hour | Invoice* |
| Extra Care for Ch.- Out-of-Home Lic. Exempt - Group (1:3) | 1198 | AD | Day (5+ Hrs) | Invoice* |
| Extra Care for Ch.- Out-of-Home Lic. Exempt - Group (1:3) | 1198 | AD | Hour | Invoice* |
| <i>*This service is subject to Parental Portion payment as specified here.</i> | | | | |
| Supported Residential Living Service | | | | |
| Assisted Living Facility - Single Occupancy | 40, 42 | AD | Month | \$ 2,248.00 |
| Assisted Living Facility - Single Occupancy | 40, 42 | AD | Day | \$ 73.91 |
| Assisted Living Facility - Double Occupancy | 41, 43 | AD | Month | \$ 1,664.00 |
| Assisted Living Facility - Double Occupancy | 41, 44 | AD | Day | \$ 55.71 |
| Assisted Living Facility - Single Occupancy | 30, 32 | TBI | Month | \$ 2,248.00 |
| Assisted Living Facility - Single Occupancy | 30, 32 | TBI | Day | \$ 73.91 |
| Assisted Living Facility - Double Occupancy | 31, 33 | TBI | Month | \$ 1,664.00 |
| Assisted Living Facility - Double Occupancy | 31, 33 | TBI | Day | \$ 55.71 |
| Other Services | | | | |
| Personal Emergency Response System - Agency | 3447 | AD | Occurance | \$ 55.00 |
| Home Delivered Meals - Agency | 9040 | AD/TBI | Occurance | \$ 6.44 |
| Home Again Service (Paid on Reciepts) | 8234 | AD/TBI | Occurance | \$ 1,819.10 |
| Home Again Sponsor (Paid on Reciepts) | 7234 | AD/TBI | Occurance | \$ 363.82 |
| Chore - Agency - Heavy Cleaning | 6496 | AD/TBI | Hour | \$ 50.00 |
| Chore - Agency - Mowing | 6496 | AD/TBI | Hour | \$ 45.00 |
| Chore - Agency - Site Clearance | 6496 | AD/TBI | Hour | \$ 50.00 |
| Chore - Agency - Snow/Ice Removal | 6496 | AD/TBI | Hour | \$ 45.00 |

AD/TBI Fee Schedule (Cont.)

| Service | Code | Waiver | Unit | Max Rate |
|--|-------------|---------------|--------------|------------------|
| TBI In-Home Services | | | | |
| TBI Personal Care - Agency - Out-of-Home Provider | 5761 | AD | Hour* | \$ 28.00 - 34.00 |
| TBI Personal Care - Agency - Live-in Provider | 8990 | AD | Hour* | \$ 28.00 - 34.00 |
| TBI Personal Care - Independent - Out-of-Home Provider | 5761 | AD | Hour* | \$ 15.00 - 21.00 |
| TBI Personal Care - Independent - Live-in Provider | 8990 | AD | Hour* | \$ 15.00 - 21.00 |
| TBI Companion - Agency - Individual (1:1) | 9510 | AD | Hour* | \$ 28.00 - 34.00 |
| TBI Companion - Agency - Group (1:2) | 2551 | AD | Hour* | \$ 14.00 - 17.00 |
| TBI Companion - Agency - Group (1:3) | 2241 | AD | Hour* | \$ 9.34 - 11.33 |
| TBI Companion - Agency - Individual (1:1) | 9510 | AD | Hour* | \$ 15.00 - 21.00 |
| TBI Companion - Agency - Group (1:2) | 2551 | AD | Hour* | \$ 7.50 - 10.50 |
| TBI Companion - Agency - Group (1:3) | 2241 | AD | Hour* | \$ 5.00 - 7.00 |
| <i>*Some In-Home Care rates are negotiated but must be set within a meaningful range as indicated.</i> | | | | |
| TBI Day Services | | | | |
| TBI Adult Day Health - Agency | 3336 | TBI | Day (6+ Hrs) | \$ 81.22 |
| TBI Adult Day Health - Agency | 3337 | TBI | Hour | \$ 13.53 |
| TBI Respite Services | | | | |
| TBI Respite - Agency - In-Home - Individual (1:1) | 6688 | TBI | Hour | \$ 29.96 |
| TBI Respite - Agency - In-Home - Group (1:2) | 2269 | TBI | Hour | \$ 14.95 |
| TBI Respite - Agency - In-Home - Group (1:3) | 7549 | TBI | Hour | \$ 9.98 |
| TBI Respite - Independent - In-Home - Individual (1:1) | 6688 | TBI | Hour | \$ 16.00 |
| TBI Respite - Independent - In-Home - Group (1:2) | 2269 | TBI | Hour | \$ 8.00 |
| TBI Respite - Independent - In-Home - Group (1:3) | 7549 | TBI | Hour | \$ 5.33 |
| TBI Respite - Agency - Out-of-Home - Individual (1:1) | 3471 | TBI | Day (8+ Hrs) | \$ 238.68 |
| TBI Respite - Agency - Out-of-Home - Individual (1:1) | 3471 | TBI | Hour | \$ 29.96 |
| TBI Respite - Agency - Out-of-Home - Group (1:2) | 3621 | TBI | Day (8+ Hrs) | \$ 119.34 |
| TBI Respite - Agency - Out-of-Home - Group (1:2) | 3621 | TBI | Hour | \$ 14.98 |
| TBI Respite - Agency - Out-of-Home - Group (1:3) | 7966 | TBI | Day (8+ Hrs) | \$ 79.56 |
| TBI Respite - Agency - Out-of-Home - Group (1:3) | 7966 | TBI | Hour | \$ 9.98 |
| TBI Respite - Independent - Out-of-Home - Individual (1:1) | 3471 | TBI | Day (8+ Hrs) | \$ 128.00 |
| TBI Respite - Independent - Out-of-Home - Individual (1:1) | 3471 | TBI | Hour | \$ 16.00 |
| TBI Respite - Independent - Out-of-Home - Group (1:2) | 3621 | TBI | Day (8+ Hrs) | \$ 64.00 |
| TBI Respite - Independent - Out-of-Home - Group (1:2) | 3621 | TBI | Hour | \$ 8.00 |
| TBI Respite - Independent - Out-of-Home - Group (1:3) | 7966 | TBI | Day (8+ Hrs) | \$ 42.66 |
| TBI Respite - Independent - Out-of-Home - Group (1:3) | 7966 | TBI | Hour | \$ 5.33 |
| TBI Respite - Agency - Camp | 7355 | TBI | Day | Invoice |

AD/TBI Fee Schedule (Cont.)

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Effective July 1, 2026

| Service | Code | Waiver | Unit | Max Rate |
|---|------|--------|------------|----------|
| TBI Specialty Services | | | | |
| TBI Communiy Connections - Agency | 2202 | TBI | Hour | \$29.96 |
| TBI Communiy Connections | 2202 | TBI | Hour | \$16.00 |
| TBI Supported Employment - Individual - Agency | 2207 | TBI | Hour | \$ 60.89 |
| TBI Supported Employment - Individual - Independent | 2207 | TBI | Hour | \$ 32.96 |
| TBI Supported Employment - Follow Along - Agency | 8190 | TBI | Hour | \$ 57.48 |
| TBI Supported Employment - Follow Along - Independent | 8190 | TBI | Hour | \$ 31.18 |
| Transportation Services | | | | |
| Transportation - Independent | 6579 | AD/TBI | Mile | \$ 0.725 |
| Transportation - Public Transit | 9660 | AD/TBI | One-Way | Invoice |
| Transportation - Agency - Wheelchair Accessible Van (WAV) | 7122 | AD/TBI | Base Rate | \$ 46.12 |
| Transportation - Agency - Wheelchair Accessible Van (WAV) | 7593 | AD/TBI | Add'l Mile | \$ 1.85 |
| Transportation - Agency - In Lincoln/Omaha (Not WAV) | 2556 | AD/TBI | Base Rate | \$ 19.69 |
| Transportation - Agency - Outside Lincoln/Omaha (Not WAV) | 2772 | AD/TBI | Base Rate | \$ 9.41 |
| Transportation - Agency | 4677 | AD/TBI | Add'l Mile | \$ 1.85 |
| Escort/Attendant - Agency | 4592 | AD/TBI | 15 Min | \$ 6.05 |
| Escort/Attendant - Independent | 7272 | AD/TBI | 15 Min | \$ 2.87 |