

**Prescribed Pediatric Extended Care Services Fee Schedule**  
**July 1, 2025**

<b>CODE</b>	<b>DESCRIPTION OF SERVICE</b>	<b>MAXIMUM FEE</b>
<b>T1025</b>	Full Day PPEC Services (five to twelve hours)*	\$281.68
<b>T1026</b>	Partial Day PPEC Services (four hours or less per day billed in units of one hour)*	\$44.73

*\*Any portion of the hour that exceeds 15 minutes may be rounded up to the next hour after the first hour.*