

## Rates: Facility Per Diem

Page updated: September 2020

This section contains per diem rates for Nursing Facilities Level A (NF-A), Institutions for Mental Disease (IMD), Intermediate Care Facilities for the Developmentally Disabled (ICF/DD), Intermediate Care Facilities for the Developmentally Disabled/Habilitative (ICF/DD-H), Intermediate Care Facilities for the Developmentally Disabled/Nursing (ICF/DD-N), Distinct Part Nursing Facilities of Acute Care Hospitals Level B (DP/NF-B), Unlimited Swing Bed and Subacute Care. For rates for Facilities with All Beds as ICF/DD Continuous Nursing (ICF/DD-CN), refer to the *Home and Community-Based Services (HCBS) Billing Codes and Reimbursement Rates* section in this manual.

It also contains peer group weighted average reimbursement rates for Free-Standing Nursing Facilities Level B (FS/NF-B). For FS/NF-B facility-specific rates, see the Department of Health Care Services (DHCS) website ([www.dhcs.ca.gov/services/medi-cal/Pages/AB1629/LTCAB1629.aspx](http://www.dhcs.ca.gov/services/medi-cal/Pages/AB1629/LTCAB1629.aspx)).

For general policy information, refer to the *Rates: Facilities* section in this manual.

### NF-A Per Diem Rates

Effective August 1, 2010

«Table of Per Diem Rates»

Accom. Codes	S. F. * Bay Area Counties	Los Angeles County	All Other Counties
31	\$105.10	\$105.10	\$73.81
32	\$99.56	\$99.56	\$68.27
35	NA	NA	NA
37	NA	NA	NA

Effective August 1, 2019

«Table of Per Diem Rates»

Accom. Codes	S. F. * Bay Area Counties	Los Angeles County	All Other Counties
21	\$111.23	\$111.23	\$79.94
22	\$102.88	\$102.88	\$71.59
23	\$102.88	\$102.88	\$71.59

**Note 1:** Effective August 2, 2003, the NF-A per diem rate no longer uses 100+ beds to establish rates. NF-A rates are set solely by geographical location. Effective August 2, 2003, NF-A facilities with licensed bed capacities of 100+ that received a rate of \$89.54 effective August 1, 2002, will continue to receive this rate until their prospective county rate reaches this level.

**Note 2:** Effective August 1, 2019, payment for DP/NF-Bs, regardless of geographical location, is the lesser of projected costs or the class median rate of \$569.56. An exception is state-operated facilities whose payment shall be based on detail at the following website: [http://www.dhcs.ca.gov/services/medi-cal/Pages/DPNF\\_B.aspx](http://www.dhcs.ca.gov/services/medi-cal/Pages/DPNF_B.aspx)

**Note 3:** Effective August 1, 2019, the leave of absence and bed hold for acute hospitalization is \$8.35.

## **FS/NF-B Facility-Specific Peer-Group Weighted Average Reimbursement Rates «with COVID-19 10% Increase»**

Effective August 1, «2020»

**Table of Reimbursement Rates**

<b>«Peer Group #</b>	<b>County Name</b>	<b>County Code #</b>	<b>Weighted Avg Rate Includes QAF</b>
1	Los Angeles Region 1	19	\$246.16
2	Alameda	1	\$294.41
2	San Francisco	38	\$294.41
3	Contra Costa	7	\$298.67
3	El Dorado	9	\$298.67
3	Lassen	18	\$298.67
3	Marin	21	\$298.67
3	Monterey	27	\$298.67
3	Napa	28	\$298.67
3	Nevada	29	\$298.67
3	San Mateo	41	\$298.67
3	Shasta	45	\$298.67
3	Siskiyou	47	\$298.67
3	Sonoma	49	\$298.67
4	Amador	3	\$285.62
4	Butte	4	\$285.62
4	Humboldt	12	\$285.62
4	Placer	31	\$285.62
4	Santa Clara	43	\$285.62
4	Santa Cruz	44	\$285.62
4	Sutter	51	\$285.62»

Table of Reimbursement Rates (continued)

«Peer Group #	County Name	County Code #	Weighted Avg Rate Includes QAF
5	Calaveras	5	\$275.20
5	Mendocino	23	\$275.20
5	Sacramento	34	\$275.20
5	Santa Barbara	42	\$275.20
5	Solano	48	\$275.20
5	Ventura	56	\$275.20
6	Inyo	14	\$265.16
6	Orange	30	\$265.16
6	San Luis Obispo	40	\$265.16
6	Tuolumne	55	\$265.16
6	Yolo	57	\$265.16
6	Yuba	58	\$265.16
7	San Diego	37	\$260.40
7	San Joaquin	39	\$260.40
7	Stanislaus	50	\$260.40
8	Riverside	33	\$248.26
8	San Bernardino	36	\$248.26
9	Colusa	6	\$231.00
9	Del Norte	8	\$231.00
9	Fresno	10	\$231.00
9	Glenn	11	\$231.00
9	Imperial	13	\$231.00
9	Kern	15	\$231.00
9	Kings	16	\$231.00
9	Lake	17	\$231.00
9	Madera	20	\$231.00
9	Merced	24	\$231.00
9	Plumas	32	\$231.00
9	Tehama	52	\$231.00
9	Tulare	54	\$231.00
10	Los Angeles Region 2	19	\$255.20
11	Los Angeles Region 3	19	\$246.74»

**Note 1:** Out-of-state or border providers will be reimbursed at the statewide weighted average of «\$262.08.»

**Note 2:** The rate reduction for leave of absence and bed hold for acute hospitalization is «\$8.49» per diem for dates of service on or after August 1, «2020.»

**Note 3:** For dates of service on or after August 1, «2020,» the Quality Assurance Fee (QAF) for facilities reporting fewer than 100,000 days is \$15.68. For facilities reporting 100,000 days or more, the QAF is \$14.80.

## **IMD Per Diem Rates**

Effective July 1, 2019

### **Total Beds 1 to 59**

<b>Accommodation Code</b>	<b>S.F. ¥ Bay Area Counties</b>	<b>Los Angeles County</b>	<b>All Other Counties</b>
01	\$220.83	\$178.32	\$191.87
02	\$212.48	\$169.97	\$183.52
03	\$212.48	\$169.97	\$183.52
11	\$226.55	\$184.04	\$197.59
12	\$218.20	\$175.69	\$189.24

### **Total Beds 60 Plus**

<b>Accommodation Code</b>	<b>S.F. ¥ Bay Area Counties</b>	<b>Los Angeles County</b>	<b>All Other Counties</b>
01	\$232.10	\$178.56	\$199.22
02	\$223.75	\$170.21	\$190.87
03	\$223.75	\$170.21	\$190.87
11	\$237.82	\$184.28	\$204.94
12	\$229.47	\$175.93	\$196.59

The rates shown above for accommodation codes 11 and 12 include the Special Treatment Program (STP) supplement of \$5.72 per day.

Also effective for dates of service on or after July 1, «2020,» the rate reduction for IMD leave of absence and bed hold for acute hospitalization is updated to «\$8.75» per diem.

## **Facilities with ICF/DD, ICF/DD-H and ICF/DD-N Services Rates**

Effective August 1, <<2020>> €

**Table of Service Rates**

Facility Type	LTC Accommodation Code	Temporary COVID-19 Increased 2020-21 Rate	Bed Hold Accommodation Code	2020-21 Rate Temporary COVID-19 Increased Rate Minus Bedhold (\$8.75)
ICF/DD	41 (1 to 59 beds)	\$236.89	43	\$228.14
ICF/DD	41 (60 plus beds)	\$220.17	43	\$211.42
ICF/DD-H	61 (4 to 6 beds)	\$261.80	63	\$253.05
ICF/DD-H	65 (7 to 15 beds)	\$278.46	68	\$269.71
ICF/DD-N	62 (4 to 6 beds)	\$293.53	64	\$284.78
ICF/DD-N	66 (7 to 15 beds)	\$298.32	69	\$289.57

## **Rural Hospital Swing Bed**

**Table of Accommodation Code Rates**

Effective August 1, 2019

Accommodation Code	Rate
04	\$312.07 α
05	\$303.72 β

Effective August 1, 2019, (exempt from Assembly Bill 97) for DP/NF-B providers located in designated rural/frontier areas only

**Table of Accommodation Code Rates**

Accommodation Code	Rate
04	\$436.64 μ
05	\$428.29 Ω

**Note:** Effective August 1, 2019, the leave of absence and bed hold rate for acute hospitalization is \$8.35.

## **Distinct-Part Adult Subacute Rates $\pi$**

Effective August 1, 2019

### «Table of Regular Service Rates»

Accommodation Code Regular Service	Rate
71	\$1,120.55
72	\$1,074.19

### «Table of Bed Hold Rates»

Accommodation Code Bed Hold $\Sigma$	Rate
73	\$1,112.20
74	\$1,065.84

### «Table of Leave of Absence Rates»

Accommodation Code Leave of Absence $\Sigma$	Rate
79	\$1,112.20
80	\$1,065.84

**Note:** Accommodation codes 71, 72, 73, 74, 79 and 80 are the median for distinct-part adult subacute facilities. Facility-specific subacute rates are posted on the DHCS website at [www.dhcs.ca.gov/services/medi-cal/Pages/Subacute.aspx](http://www.dhcs.ca.gov/services/medi-cal/Pages/Subacute.aspx).

The Free-Standing Adult Subacute Nursing Facility Level B (FSSA/NF-B) rates are posted on the on the DHCS website at [www.dhcs.ca.gov/services/medical/Pages/AB1629/LTCAB1629.aspx](http://www.dhcs.ca.gov/services/medical/Pages/AB1629/LTCAB1629.aspx).

## **Pediatric Subacute Care Rates**

«Effective August 1, 2020, through the expiration of the COVID-19 public health emergency or national emergency, whichever occurs first.»

### **Regular Service**

«Temporary COVID-19 Increased Rates – »Hospital Based Distinct-Part Pediatric Subacute DP/PSA

<b>Accommodation Code</b>	<b>Rate</b>
85	«\$1,324.11»
86	«\$1,212.82»

«Temporary COVID-19 Increased Rates – »Free-Standing Pediatric Subacute (FS/PSA)

<b>Accommodation Code</b>	<b>Rate</b>
91	«\$879.81»
92	«\$804.32»

### **Bed Hold**

«Temporary COVID-19 Increased Rates – Free-Standing » Hospital Based DP/PSA

<b>Accommodation Code</b>	<b>Rate Ψ</b>
87	«\$1,315.56»
88	«\$1,204.07»

«Temporary COVID-19 Increased Rates – Free-Standing » FS/PSA

<b>Accommodation Code</b>	<b>Rate Ψ</b>
93	«\$871.06»
94	«\$795.57»

## Leave of Absence

### «Temporary COVID-19 Increased Rates – »Hospital Based DP/PSA

Accommodation Code	Rate Ψ
89	«\$1,315.36»
90	«\$1,204.07»

### «Temporary COVID-19 Increased Rates – Free-Standing »FS/PSA

Accommodation Code	Rate Ψ
95	«\$871.06»
96	«\$795.57»

## Pediatric Subacute: Supplemental Rehabilitation Therapy Services and Ventilator Weaning Services

Effective August 1, «2020»

### DP/PSA Rates

Accommodation Code	Rehab. Therapy Supplement	Ventilator Weaning
83	«\$82.21»	N/A
84	N/A	«\$76.64»

### FS/PSA Rates

Accommodation Code	Rehab. Therapy Supplement	Ventilator Weaning
97	«\$55.39»	N/A
98	N/A	«\$51.63»

## Legend

Symbols used in the document above are explained in the following table.

Symbol	Description
«	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
»	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.
*	San Francisco Bay Area counties and county codes: San Francisco Bay Area counties include San Francisco (38), Marin (21), Alameda (01), Contra Costa (07), Santa Clara (43), San Mateo (41), Napa (28) and Sonoma (49).
¥	San Francisco Bay Area counties include Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara and Sonoma.
€	ICF/DD, ICF/DD-H and ICF/DD-N providers will receive the above temporary COVID-19 increased rates with a rate reduction for leave of absence and bed hold of \$8.75 per diem for dates of service on or after August 1, 2020. Provider rates are posted on the DHCS website at <a href="http://www.dhcs.ca.gov/services/medi-cal/Pages/LTCRU.ICF_DD.aspx">www.dhcs.ca.gov/services/medi-cal/Pages/LTCRU.ICF_DD.aspx</a> .
α	2008 rate of \$305.15 plus 2019 \$6.92 add-ons
β	\$312.07 rate minus 2019 – 2020 leave of absence/bed hold rate of \$8.35
μ	Includes 2019 \$1.62 add-ons
Ω	2019 leave of absence/bed hold rate of \$8.35
Σ	The rate reduction for LOA and BH for acute hospitalization is \$8.35 per diem for dates of service on or after August 1, 2019.
π	A distinct-part adult subacute provider is reimbursed at the lesser of its projected costs or the maximum reimbursement rate shown above.
Ψ	The rate reduction for leave of absence and bed hold for acute hospitalization is \$8.35 per diem for the period August 1, «2020», through July 31, «2021, rate year.» The rate reduction for leave of absence and bed hold for «DP/PSAs and» FS/PSAs is «\$8.75» per diem for the period August 1, «2020,» through July 31, «2021, rate year.»