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NOTICE OF FINAL PAYMENT RATES EFFECTIVE January 1, 2026

The Minnesota Department of Human Services has reviewed the Cost Report, required documentation, and other supporting information supplied on behalf of the facility in determining the total payment rate. Specific sections of the rate notice are accompanied by a narrative.

A P P E A L S

An Appeal must meet the following requirement

1. A written Notice of Appeal from the Provider must be received by the Commissioner of Human Services or postmarked within 60 days of the publication date printed on the rate notice.
2. The Notice Of Appeal must identify each disputed item and specify for each item:
- The reason for the dispute
- The total dollar amount in dispute for each separate disallowance, allocation, or adjustment of a cost item or part of a cost item
- The computation the Provider believes is correct, and
- The authority in Statute or Rule upon which the Provider relies.
3. The Notice Of Appeal must include the name and address of the person or firm with whom contacts may be made regarding the Appeal.

Appeals should include the Provider Identification Number. Each separate dispute should be numbered. Each appealed adjustment should be identified by cost report line number.

Appeals should be addressed to:

Minnesota Department of Human Services Appeals Division
Attn: Provider Nursing Facility Rate Appeal
P.O. Box 64941
St. Paul, MN 55164-0941

If you have any policy questions please contact the Policy Center at 651-431-2282. To speak with an auditor or to request copies of work papers call 651-431-4339.
For TDD, contact Minnesota Relay Service at 1-800-627-3529.

RUGS IV Class	9/30/2024 Resident Days	RUGS IV Weight	RUGS IV Standardized Days	Medicaid Days	RUGS IV Medicaid Standardized Days
ES3	0	3.00	0.00	0	0.00
ES2	0	2.23	0.00	0	0.00
ES1	33	2.22	73.26	14	31.08
RAE	80	1.65	132.00	0	0.00
RAD	1,197	1.58	1,891.26	110	173.80
RAC	1,899	1.36	2,582.64	23	31.28
RAB	1,525	1.10	1,677.50	3	3.30
RAA	30	0.82	24.60	0	0.00
HE2	29	1.88	54.52	11	20.68
HE1	0	1.47	0.00	0	0.00
HD2	0	1.69	0.00	0	0.00
HD1	0	1.33	0.00	0	0.00
HC2	0	1.57	0.00	0	0.00
HC1	480	1.23	590.40	96	118.08
HB2	0	1.55	0.00	0	0.00
HB1	245	1.22	298.90	91	111.02
LE2	0	1.61	0.00	0	0.00
LE1	276	1.26	347.76	0	0.00
LD2	2	1.54	3.08	0	0.00
LD1	284	1.21	343.64	32	38.72
LC2	114	1.30	148.20	61	79.30
LC1	2,383	1.02	2,430.66	1,409	1,437.18
LB2	96	1.21	116.16	0	0.00
LB1	348	0.95	330.60	91	86.45
CE2	0	1.39	0.00	0	0.00
CE1	0	1.25	0.00	0	0.00
CD2	0	1.29	0.00	0	0.00
CD1	364	1.15	418.60	62	71.30
CC2	92	1.08	99.36	92	99.36
CC1	2,958	0.96	2,839.68	2,261	2,170.56
CB2	67	0.95	63.65	0	0.00
CB1	419	0.85	356.15	197	167.45
CA2	6	0.73	4.38	0	0.00
CA1	124	0.65	80.60	0	0.00
BB2	0	0.81	0.00	0	0.00
BB1	305	0.75	228.75	188	141.00
BA2	0	0.58	0.00	0	0.00
BA1	115	0.53	60.95	89	47.17
PE2	0	1.25	0.00	0	0.00
PE1	568	1.17	664.56	61	71.37
PD2	0	1.15	0.00	0	0.00
PD1	1,427	1.06	1,512.62	558	591.48
PC2	0	0.91	0.00	0	0.00
PC1	3,448	0.85	2,930.80	1,644	1,397.40
PB2	0	0.70	0.00	0	0.00
PB1	978	0.65	635.70	241	156.65
PA2	0	0.49	0.00	0	0.00
PA1	1,045	0.45	470.25	236	106.20
AAA	0	0.45	0.00	0	0.00
DDF	215	1.00	215.00	0	0.00
	21,152		21,626.23	7,570	7,150.83

PDPM Class	9/30/2024 Resident Days	PDPM Weight	PDPM Standardized Days	Medicaid Days	PDPM Medicaid Standardized Days
ES3	0	3.84	0.00	0	0.00
ES2	0	2.90	0.00	0	0.00
ES1	88	2.77	243.76	0	0.00
HDE2	29	2.27	65.83	11	24.97
HDE1	194	1.88	364.72	0	0.00
HBC2	0	2.12	0.00	0	0.00
HBC1	1,421	1.76	2,500.96	475	836.00
LDE2	34	1.97	66.98	0	0.00
LDE1	1,196	1.64	1,961.44	155	254.20
LBC2	119	1.63	193.97	0	0.00
LBC1	3,181	1.35	4,294.35	1,779	2,401.65
CDE2	92	1.77	162.84	92	162.84
CDE1	1,678	1.53	2,567.34	1,151	1,761.03
CBC2	234	1.47	343.98	0	0.00
CA2	70	1.03	72.10	0	0.00
CBC1	3,530	1.27	4,483.10	1,565	1,987.55
CA1	215	0.89	191.35	91	80.99
BAB2	0	0.98	0.00	0	0.00
BAB1	263	0.94	247.22	185	173.90
PDE2	0	1.48	0.00	0	0.00
PDE1	2,992	1.39	4,158.88	795	1,105.05
PBC2	0	1.15	0.00	0	0.00
PA2	0	0.67	0.00	0	0.00
PBC1	4,596	1.07	4,917.72	1,961	2,098.27
PA1	1,055	0.62	654.10	297	184.14
DDF	165	1.00	165.00	0	0.00
AAA	0	0.62	0.00	0	0.00
	21,152		27,655.64	8,557	11,070.59

Care-Related per diem				
Allowed Direct Care costs	3,531,105		Your 1/1/2025 Direct Care Rate	157.63
Standardized Days	21,626.23		Lesser of CPI-U or 4%	3.22%
Direct Care cost per diem		163.28	Direct Care Rate Limit	162.71
Allowed Other Care Related costs	975,396		Your 1/1/2025 Other Care Related Rate	37.67
Resident Days	21,152		Lesser of CPI-U or 4%	3.22%
Other Care Related cost per diem		46.11	Direct Care CPI-U Rate Limit	38.88
Care-Related cost per diem		209.39		
Care-Related per diem Quality Based limit				
Median	219.08		Quality Based DC Rate Limit	234.46
Quality Score	85.10		Quality Based OCR Rate Limit	66.21
Care Related Limit	300.67			300.67
Care-Related payment rates			Care-Related per diem limits	
Direct Care per diem	162.71		Direct Care per diem limit	162.71
Other Care-Related per diem	38.88		Other Care-Related per diem Limit	38.88
Care-Related per diem	201.59		Care-Related per diem limit	201.59

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Care-Related per diem

Allowed Direct Care costs	3,531,105	
Standardized Days	27,655.64	
Direct Care cost per diem		127.68
Allowed Other Care Related costs	975,396	
Resident Days	21,152	
Other Care Related cost per diem		46.11
Care-Related cost per diem		173.79

Your 10/1/2025 Direct Care Rate	126.01
Lesser of CPI-U or 4%	3.22%
Direct Care Rate Limit	130.07
Your 10/1/2025 Other Care Rate	37.67
Lesser of CPI-U or 4%	3.22%
Other Care Related Rate Limit	38.88

Care-Related per diem limit

Median	178.65
Quality Score	85.10
Care Related Limit	245.18

Quality Based DC Rate Limit	180.13
Quality Based OCR Rate Limit	65.05
	245.18

Care-Related payment rates

Direct Care per diem	127.68
Other Care-Related per diem	38.88
Care-Related per diem	166.56

Care-Related per diem limit

Direct Care per diem	130.07
Related per diem	38.88
Care-Related per diem	168.95

Other Operating Price

Allowed Other Operating costs	2,548,604	
Resident Days	21,152	
Other Operating per diem		120.49
Median		107.68
105% of the median		105%
Other Oper price		113.06
01/01/25 Other Operating Payment rate		107.88
Lesser of CPI-U or 4%		3.22%
Limited Other Operating price		111.35
Other Operating price for all facilities		111.35

Operating Rate Summary

Care-Related per diem	166.56
Other Operating per diem	111.35
Operating per diem (at 1.00)	277.91

	Direct Care	Weight	Weighted Direct Care	Other Care Related	Other Operating	1/1/26 Operating Rates
ES3	127.68	3.84	490.29	38.88	111.35	640.52
ES2	127.68	2.90	370.27	38.88	111.35	520.50
ES1	127.68	2.77	353.67	38.88	111.35	503.90
HDE2	127.68	2.27	289.83	38.88	111.35	440.06
HDE1	127.68	1.88	240.04	38.88	111.35	390.27
HBC2	127.68	2.12	270.68	38.88	111.35	420.91
HBC1	127.68	1.76	224.72	38.88	111.35	374.95
LDE2	127.68	1.97	251.53	38.88	111.35	401.76
LDE1	127.68	1.64	209.40	38.88	111.35	359.63
LBC2	127.68	1.63	208.12	38.88	111.35	358.35
LBC1	127.68	1.35	172.37	38.88	111.35	322.60
CDE2	127.68	1.77	225.99	38.88	111.35	376.22
CDE1	127.68	1.53	195.35	38.88	111.35	345.58
CBC2	127.68	1.47	187.69	38.88	111.35	337.92
CA2	127.68	1.03	131.51	38.88	111.35	281.74
CBC1	127.68	1.27	162.15	38.88	111.35	312.38
CA1	127.68	0.89	113.64	38.88	111.35	263.87
BAB2	127.68	0.98	125.13	38.88	111.35	275.36
BAB1	127.68	0.94	120.02	38.88	111.35	270.25
PDE2	127.68	1.48	188.97	38.88	111.35	339.20
PDE1	127.68	1.39	177.48	38.88	111.35	327.71
PBC2	127.68	1.15	146.83	38.88	111.35	297.06
PA2	127.68	0.67	85.55	38.88	111.35	235.78
PBC1	127.68	1.07	136.62	38.88	111.35	286.85
PA1	127.68	0.62	79.16	38.88	111.35	229.39
DDF	127.68	1.00	127.68	38.88	111.35	277.91
AAA	127.68	0.62	79.16	38.88	111.35	229.39

Phase in Adjustment Calculation	RUGS IV	PDPM	
Medicaid Days			
Resident Days (Annual)	7570	8557	
Standardized Days (Annual)	7150.83	11070.59	
Medicaid Case mix Index	0.94	1.29	
Direct Care Rate	162.71	127.68	
Medicaid Casemix index	0.94	1.29	
Medicaid Casemix adjusted Direct Care	153.70	165.19	
Phase - in percentage	0.75	0.25	
Phase - in amounts	115.28	41.30	
Blended Medicaid Casemix adjusted Direct Care Rate			156.57
Less PDPM Medicaid Casemix adjusted Direct Care Rate			-165.19
PDPM Phase-in Adjustment			-8.61

Surcharge		
Percent of beds licensed as NF	100%	
Base surcharge rate	8.86	
Allowed surcharge rate		8.86
Other Fees		
Allowed MDH license fees	7,223	
Allowed scholarship costs	88,007	
Allowed health insurance	350,038	
Allowed real estate taxes or payments in lieu of	0	
Allowed special assessments	0	
Allowed PERA costs	0	
Subtotal	445,268	
Resident days	21,152	
Per diem amount		21.05
Consolidation Rate Adj (MS144A.071 Subd.4d)		38.76
Quality Improvement Incentive Payment (QIIP)		2.41
Previous single-bed incentives		0.00
Family and resident advisory council costs		0.01
External fixed rate		71.09
Property Rate		
Property rate from prior year	18.48	
Subtotal		18.48
Property inflation rate		.000%
01/01/2026 property rate		18.48

	1/1/26 Operating Rate	Property Rate	External Fixed Rate	PDPM Phase-In Adj	064742000 1/1/26 Total Rate	064742000 01/01/26 Total Rate*	064742000 10/01/26 Total Rate*
ES3	640.52	18.48	71.09	-8.61	740.46	740.46	730.30
ES2	520.50	18.48	71.09	-8.61	620.44	620.44	610.28
ES1	503.90	18.48	71.09	-8.61	603.84	603.84	593.68
HDE2	440.06	18.48	71.09	-8.61	540.00	540.00	529.84
HDE1	390.27	18.48	71.09	-8.61	490.21	490.21	480.05
HBC2	420.91	18.48	71.09	-8.61	520.85	520.85	510.69
HBC1	374.95	18.48	71.09	-8.61	474.89	474.89	464.73
LDE2	401.76	18.48	71.09	-8.61	501.70	501.70	491.54
LDE1	359.63	18.48	71.09	-8.61	459.57	459.57	449.41
LBC2	358.35	18.48	71.09	-8.61	458.29	458.29	448.13
LBC1	322.60	18.48	71.09	-8.61	422.54	422.54	412.38
CDE2	376.22	18.48	71.09	-8.61	476.16	476.16	466.00
CDE1	345.58	18.48	71.09	-8.61	445.52	445.52	435.36
CBC2	337.92	18.48	71.09	-8.61	437.86	437.86	427.70
CA2	281.74	18.48	71.09	-8.61	381.68	381.68	371.52
CBC1	312.38	18.48	71.09	-8.61	412.32	412.32	402.16
CA1	263.87	18.48	71.09	-8.61	363.81	363.81	353.65
BAB2	275.36	18.48	71.09	-8.61	375.30	375.30	365.14
BAB1	270.25	18.48	71.09	-8.61	370.19	370.19	360.03
PDE2	339.20	18.48	71.09	-8.61	439.14	439.14	428.98
PDE1	327.71	18.48	71.09	-8.61	427.65	427.65	417.49
PBC2	297.06	18.48	71.09	-8.61	397.00	397.00	386.84
PA2	235.78	18.48	71.09	-8.61	335.72	335.72	325.56
PBC1	286.85	18.48	71.09	-8.61	386.79	386.79	376.63
PA1	229.39	18.48	71.09	-8.61	329.33	329.33	319.17
DDF	277.91	18.48	71.09	-8.61	377.85	377.85	367.69
AAA	229.39	18.48	71.09	-8.61	329.33	329.33	319.17
Max additional charge for private pay in single rooms							N/A

Adjustments To Rate

* 01/01/2026 256R.495 WSB adjustment $8.82
* 01/01/2026 Temp Surcharge Increase $10.16
* 10/01/2026 End Surcharge Increase -10.16

'N/A' - Law does not limit the price the facility may set for private paying residents for single-bed rooms as long as it is at least equal to what Medicaid pays for a medically necessary private room - currently this amount is 11.5% of an individual`s MN PDPM rate. Facilities choosing to charge a lower amount to private pay residents in a single-bed room than 11.5% of their PDPM rate, must notify DHS because the Medicaid payments for medically necessary single-bed rooms cannot exceed the facility`s usual and customary charges to the private pay residents. Please submit notification to: greg.leahy@state.mn.us