Little Sisters Of The Poor 825540700/62002
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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	0	2.22	0.00	0	0.00
RAE	14	1.65	23.10	5	8.25
RAD	10	1.58	15.80	6	9.48
RAC	0	1.36	0.00	0	0.00
RAB	0	1.10	0.00	0	0.00
RAA	0	0.82	0.00	0	0.00
HE2	0	1.88	0.00	0	0.00
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	0	1.23	0.00	0	0.00
HB2	0	1.55	0.00	0	0.00
HB1	0	1.22	0.00	0	0.00
LE2	0	1.61	0.00	0	0.00
LE1	0	1.26	0.00	0	0.00
LD2	0	1.54	0.00	0	0.00
LD1	204	1.21	246.84	183	221.43
LC2	0	1.30	0.00	0	0.00
LC1	725	1.02	739.50	664	677.28
LB2	0	1.21	0.00	0	0.00
LB1	33	0.95	31.35	33	31.35
CE2	0	1.39	0.00	0	0.00
CE1	225	1.25	281.25	215	268.75
CD2	1	1.29	1.29	0	0.00
CD1	94	1.15	108.10	88	101.20
CC2	0	1.08	0.00	0	0.00
CC1	289	0.96	277.44	203	194.88
CB2	0	0.95	0.00	0	0.00
CB1	0	0.85	0.00	0	0.00
CA2	0	0.73	0.00	0	0.00
CA1	194	0.65	126.10	153	99.45
BB2	0	0.81	0.00	0	0.00
BB1	531	0.75	398.25	531	398.25
BA2	0	0.58	0.00	0	0.00
BA1	808	0.53	428.24	808	428.24
PE2	0	1.25	0.00	0	0.00
PE1	2,012	1.17	2,354.04	1,646	1,925.82
PD2	0	1.15	0.00	0	0.00
PD1	884	1.06	937.04	701	743.06
PC2	0	0.91	0.00	0	0.00
PC1	2,771	0.85	2,355.35	2,493	2,119.05
PB2	0	0.70	0.00	0	0.00
PB1	309	0.65	200.85	222	144.30
PA2	0	0.49	0.00	0	0.00
PA1	4,941	0.45	2,223.45	4,586	2,063.70
AAA	0	0.45	0.00	0	0.00
DDF	30	1.00	30.00	6	6.00
	14,075		10,777.99	12,543	9,440.49

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	0	2.77	0.00	0	0.00
HDE2	0	2.27	0.00	0	0.00
HDE1	0	1.88	0.00	0	0.00
HBC2	0	2.12	0.00	0	0.00
HBC1	0	1.76	0.00	0	0.00
LDE2	0	1.97	0.00	0	0.00
LDE1	92	1.64	150.88	92	150.88
LBC2	0	1.63	0.00	0	0.00
LBC1	872	1.35	1,177.20	784	1,058.40
CDE2	0	1.77	0.00	0	0.00
CDE1	263	1.53	402.39	134	205.02
CBC2	0	1.47	0.00	0	0.00
CA2	0	1.03	0.00	0	0.00
CBC1	275	1.27	349.25	275	349.25
CA1	444	0.89	395.16	196	174.44
BAB2	0	0.98	0.00	0	0.00
BAB1	1,701	0.94	1,598.94	1,701	1,598.94
PDE2	0	1.48	0.00	0	0.00
PDE1	2,717	1.39	3,776.63	2,099	2,917.61
PBC2	0	1.15	0.00	0	0.00
PA2	0	0.67	0.00	0	0.00
PBC1	3,438	1.07	3,678.66	3,103	3,320.21
PA1	4,273	0.62	2,649.26	4,159	2,578.58
AAA	0	0.62	0.00	0	0.00
DDF	0	1.00	0.00	0	0.00
	14,075		14,178.37	12,543	12,353.33

Care-Related per diem				
Allowed Direct Care costs	2,396,347		Your 1/1/2025 Direct Care Rate	211.56
Standardized Days	10,777.99		Lesser of CPI-U or 4%	3.22%
Direct Care cost per diem		222.34	Direct Care Rate Limit	218.37
Allowed Other Care Related costs	435,992		Your 1/1/2025 Other Care Related Rate	24.34
Resident Days	14,075		Lesser of CPI-U or 4%	3.22%
Other Care Related cost per diem		30.98	Direct Care CPI-U Rate Limit	25.12
Care-Related cost per diem		253.32		
Care-Related per diem Quality Based limit				
Median	219.08		Quality Based DC Rate Limit	253.09
Quality Score	75.10		Quality Based OCR Rate Limit	35.26
Care Related Limit	288.35			288.35
Care-Related payment rates			Care-Related per diem limits	
Direct Care per diem	218.37		Direct Care per diem limit	218.37
Other Care-Related per diem	25.12		Other Care-Related per diem Limit	25.12
Care-Related per diem	243.49		Care-Related per diem limit	243.50

Care-Related per diem

Allowed Direct Care costs	2,396,347	
Standardized Days	14,178.37	
Direct Care cost per diem		169.01
Allowed Other Care Related costs	435,992	
Resident Days	14,075	
Other Care Related cost per diem		30.98
Care-Related cost per diem		199.99

Your 10/1/2025 Direct Care Rate	160.58
Lesser of CPI-U or 4%	3.22%
Direct Care Rate Limit	165.75
Your 10/1/2025 Other Care Rate	24.29
Lesser of CPI-U or 4%	3.22%
Other Care Related Rate Limit	25.07

Care-Related per diem limit

Median	178.65
Quality Score	75.10
Care Related Limit	235.13

Quality Based DC Rate Limit	198.71
Quality Based OCR Rate Limit	36.42
	235.13

Care-Related payment rates

Direct Care per diem	165.75
Other Care-Related per diem	25.07
Care-Related per diem	190.82

Care-Related per diem limit

Direct Care per diem	165.75
Related per diem	25.07
Care-Related per diem	190.82

Other Operating Price

Allowed Other Operating costs	2,210,086	
Resident Days	14,075	
Other Operating per diem		157.02
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	190.82
Other Operating per diem	111.35
Operating per diem (at 1.00)	302.17

	Direct Care	Weight	Weighted Direct Care	Other Care Related	Other Operating	1/1/26 Operating Rates
ES3	165.75	3.84	636.48	25.07	111.35	772.90
ES2	165.75	2.90	480.68	25.07	111.35	617.10
ES1	165.75	2.77	459.13	25.07	111.35	595.55
HDE2	165.75	2.27	376.25	25.07	111.35	512.67
HDE1	165.75	1.88	311.61	25.07	111.35	448.03
HBC2	165.75	2.12	351.39	25.07	111.35	487.81
HBC1	165.75	1.76	291.72	25.07	111.35	428.14
LDE2	165.75	1.97	326.53	25.07	111.35	462.95
LDE1	165.75	1.64	271.83	25.07	111.35	408.25
LBC2	165.75	1.63	270.17	25.07	111.35	406.59
LBC1	165.75	1.35	223.76	25.07	111.35	360.18
CDE2	165.75	1.77	293.38	25.07	111.35	429.80
CDE1	165.75	1.53	253.60	25.07	111.35	390.02
CBC2	165.75	1.47	243.65	25.07	111.35	380.07
CA2	165.75	1.03	170.72	25.07	111.35	307.14
CBC1	165.75	1.27	210.50	25.07	111.35	346.92
CA1	165.75	0.89	147.52	25.07	111.35	283.94
BAB2	165.75	0.98	162.44	25.07	111.35	298.86
BAB1	165.75	0.94	155.81	25.07	111.35	292.23
PDE2	165.75	1.48	245.31	25.07	111.35	381.73
PDE1	165.75	1.39	230.39	25.07	111.35	366.81
PBC2	165.75	1.15	190.61	25.07	111.35	327.03
PA2	165.75	0.67	111.05	25.07	111.35	247.47
PBC1	165.75	1.07	177.35	25.07	111.35	313.77
PA1	165.75	0.62	102.77	25.07	111.35	239.19
AAA	165.75	0.62	102.77	25.07	111.35	239.19
DDF	165.75	1.00	165.75	25.07	111.35	302.17

Phase in Adjustment Calculation	RUGS IV	PDPM	
Medicaid Days			
Resident Days (Annual)	12543	12543	
Standardized Days (Annual)	9440.49	12353.33	
Medicaid Case mix Index	0.75	0.98	
Direct Care Rate	218.37	165.75	
Medicaid Casemix index	0.75	0.98	
Medicaid Casemix adjusted Direct Care	164.36	163.24	
Phase - in percentage	0.75	0.25	
Phase - in amounts	123.27	40.81	
Blended Medicaid Casemix adjusted Direct Care Rate			164.08
Less PDPM Medicaid Casemix adjusted Direct Care Rate			-163.24
PDPM Phase-in Adjustment			0.83

Surcharge		
Percent of beds licensed as NF	55%	
Base surcharge rate	8.86	
Allowed surcharge rate		4.85
Other Fees		
Allowed MDH license fees	7,751	
Allowed scholarship costs	0	
Allowed health insurance	185,942	
Allowed real estate taxes or payments in lieu of	0	
Allowed special assessments	0	
Allowed PERA costs	0	
Subtotal	193,693	
Resident days	14,075	
Per diem amount		13.76
Quality Improvement Incentive Payment (QIIP)		0.00
Previous planned closure rate adjustments		1.17
Previous single-bed incentives		0.35
Family and resident advisory council costs		0.01
External fixed rate		20.14
Property Rate		
Property rate from prior year	22.76	
Subtotal		22.76
Property inflation rate		.000%
01/01/2026 property rate		22.76

	1/1/26 Operating Rate	Property Rate	External Fixed Rate	PDPM Phase-In Adj	825540700 1/1/26 Total Rate	825540700 01/01/26 Total Rate*	825540700 10/01/26 Total Rate*
ES3	772.90	22.76	20.14	0.83	828.17	828.17	822.60
ES2	617.10	22.76	20.14	0.83	672.37	672.37	666.80
ES1	595.55	22.76	20.14	0.83	650.82	650.82	645.25
HDE2	512.67	22.76	20.14	0.83	567.94	567.94	562.37
HDE1	448.03	22.76	20.14	0.83	503.30	503.30	497.73
HBC2	487.81	22.76	20.14	0.83	543.08	543.08	537.51
HBC1	428.14	22.76	20.14	0.83	483.41	483.41	477.84
LDE2	462.95	22.76	20.14	0.83	518.22	518.22	512.65
LDE1	408.25	22.76	20.14	0.83	463.52	463.52	457.95
LBC2	406.59	22.76	20.14	0.83	461.86	461.86	456.29
LBC1	360.18	22.76	20.14	0.83	415.45	415.45	409.88
CDE2	429.80	22.76	20.14	0.83	485.07	485.07	479.50
CDE1	390.02	22.76	20.14	0.83	445.29	445.29	439.72
CBC2	380.07	22.76	20.14	0.83	435.34	435.34	429.77
CA2	307.14	22.76	20.14	0.83	362.41	362.41	356.84
CBC1	346.92	22.76	20.14	0.83	402.19	402.19	396.62
CA1	283.94	22.76	20.14	0.83	339.21	339.21	333.64
BAB2	298.86	22.76	20.14	0.83	354.13	354.13	348.56
BAB1	292.23	22.76	20.14	0.83	347.50	347.50	341.93
PDE2	381.73	22.76	20.14	0.83	437.00	437.00	431.43
PDE1	366.81	22.76	20.14	0.83	422.08	422.08	416.51
PBC2	327.03	22.76	20.14	0.83	382.30	382.30	376.73
PA2	247.47	22.76	20.14	0.83	302.74	302.74	297.17
PBC1	313.77	22.76	20.14	0.83	369.04	369.04	363.47
PA1	239.19	22.76	20.14	0.83	294.46	294.46	288.89
AAA	239.19	22.76	20.14	0.83	294.46	294.46	288.89
DDF	302.17	22.76	20.14	0.83	357.44	357.44	351.87
Max additional charge for private pay in single rooms					35.87	35.87	35.31

Adjustments To Rate

* 01/01/2026 256R.495 WSB adjustment $5.97
* 01/01/2026 Temp Surcharge Increase $5.57
* 10/01/2026 End Surcharge Increase $-5.57