

**10-010.03D Payments for Psychiatric Services:** Payments for psychiatric discharges are made on a prospective per diem.

Tiered rates will be used for all acute psychiatric inpatient services. This includes services provided at a facility enrolled as a provider for psychiatric services which is not a licensed psychiatric hospital or a Medicare-certified distinct part unit. Payment for each discharge equals the applicable per diem rate times the number of approved patient days for each tier.

Payment is made for the day of admission, but not the day of discharge.

**10-010.03D1** For payment of inpatient hospital psychiatric services, effective July 1, 2012, the tiered per diem rate will be:

| Days of Service    | Per Diem Rate |
|--------------------|---------------|
| Days 1 and 2       | \$683.93      |
| Days 3 and 4       | \$632.21      |
| Days 5 and 6       | \$603.48      |
| Days 7 and greater | \$574.74      |

**10-010.03E Payments for Rehabilitation Services:** Payments for rehabilitation discharges are made on a prospective per diem.

All rehabilitation services, regardless of the type of hospital providing the service, will be reimbursed on a per diem basis. This includes services provided at a facility enrolled as a provider for rehabilitation services which is not a licensed rehabilitation hospital or a Medicare-certified distinct part unit. The per diem will be the sum of -

1. The hospital-specific base payment per diem rate;
2. The hospital-specific capital per diem rate; and
3. The hospital's direct medical education per diem rate, if applicable.

Payment for each discharge equals the per diem times the number of approved patient days.

Payment is made for the day of admission but not for the day of discharge.

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TN No. NE 12-09

Supersedes

Approved APR 3 2013

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TN No. 11-13

**10-010.03D5 Payment for Psychiatric Adult Inpatient Subacute Hospital Services:** Payments for psychiatric adult inpatient subacute hospital services are made on a per diem basis. This rate may be reviewed annually. Effective April 12, 2008, the payment for psychiatric adult subacute inpatient hospital services identified in state regulations was \$488.13. Beginning July 1, 2008, the per diem rate was \$505.21 and on November 24, 2009 onward the rate is \$512.79. On July 1, 2010, there will be a .5% rate increase. On July 1, 2011, there will be a 2.5% rate decrease. On July 1, 2012 there is a 1.54% increase. The subacute inpatient hospital per diem rate is not a tiered rate. Payment will be an all inclusive per diem, with the exception of physician services.

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TN# NE 12-09

Supersedes

TN # NE 11-26

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