



CY2023 INDIAN HEALTH SERVICES RATES

EFFECTIVE JANUARY 1, 2023

Provider Name	Provider Type	Provider Speciality	Provider Number	OP Rates	IP Per Diem
DHHS/IHS/Phoenix Area-Nevada Skies Youth Wellness Center-Nevada	25	70	100266933-00	\$654.00	\$4,333.00
Omaha Tribe of Nebraska	26	70	100253620-01	\$654.00	X
Omaha Tribe of Nebraska-Carl T. Curtis Health Education Center	26	70	470550261-26	\$654.00	X
Pine Ridge IHS Hospital – South Dakota	25	70	460439437-00	\$654.00	\$4,333.00
Ponca Health Services	26	26	100262669-07	\$654.00	X
Ponca Tribe of Nebraska	26	26	100252029-00	\$654.00	X
Ponca Tribe of Nebraska	26	26	100262669-08	\$654.00	X
Ponca Tribe of Nebraska	26	70	100262669-09	\$654.00	X
Ponca Tribe of Nebraska-Fred Leroy Health and Wellness Center	26	70	470744117-01	\$654.00	X
Ponca Tribe of Nebraska-Ponca Hills Health and Wellness Center	26	70	100262608-00	\$654.00	X
Rosebud Indian Health Services IHS Hospital -South Dakota	25	70	460439434-00	\$654.00	\$4,333.00
Santee Health Center	26	70	470533471-10	\$654.00	X
Wagner Indian Health Service HIS Hospital-South Dakota	25	70	100266202-00	\$654.00	\$4,333.00
White Cloud Health Center, LLC-Kansas	25	70	100267810-00	\$654.00	\$4,333.00
Winnebago Tribe	26	26	100265785-01	\$654.00	X
Winnebago Tribe of Nebraska	26	26	100267404-04	\$654.00	X
Winnebago Tribe of Nebraska	26	70	100267404-00	\$654.00	X
Winnebago Tribal 638 Clinic	26	70	470489118-25 100267404-05	\$654.00	X

Special Codes		
T1015	Clinic Visit/Encounter, All-Inclusive	\$ 654.00
T1015SE	Clinic Visit/Encounter, All-Inclusive	\$ 654.00