



NEBRASKA MEDICAID ACUTE INPATIENT REHABILITATION HOSPITAL RATES Effective July 1, 2021

REHABILITATION PROVIDER NAME	MEDICAID ID	Class Code	SFY 2022 Rate
Bryan Medical Center	47037655287	87	\$1,005.00
CHI Health - Good Samaritan	47037975587	87	\$1,043.00
CHI Health - Immanuel	47037661508	87	\$902.00
CHI Health - St. Francis Medical Center	10025643200	87	\$1,006.00
Faith Regional Health Services	10025230500	87	\$1,002.00
Madonna Rehabilitation Hospital - Lincoln	47043959902	87	\$1,172.00
Madonna Rehabilitation Hospital - Omaha	10026135901	87	\$1,986.00
Mary Lanning Memorial Hospital	10025477500	87	\$1,006.00
Nebraska Methodist Hospital	47037660487	87	\$1,160.00
Regional West Medical Center	47038512987	87	\$1,006.00
*Out of State Peer Group 6 - Average of State Rehabilitation		87	\$1,129.00