

471-000-515 NEBRASKA MEDICAID PERSONAL ASSISTANCE SERVICES RATE LISTING

The following fee schedule is used to determine payment rates for personal assistance services provided on or after January 1, 2016:

<b>N-FOCUS CODE</b>	<b>DESCRIPTION</b>	<b>MEDICAID ALLOWABLE</b>
4475	Basic Personal Assistance	\$9.00 per hour, paid in 15 minute increments
4475	Specialized Personal Assistance	\$10.16 per hour, paid in 15 minute increments

The following fee schedule is used to determine payment rates for Adult Day Care providers effective July 1, 2015:

**Center-Based Adult Day Add-On Services**

<b>MMIS CODE</b>	<b>DESCRIPTION</b>	<b>MEDICAID ALLOWABLE</b>
S5105 TD	RN service in Adult Day Service center setting**	\$12.33 per day unit
S5105	Aide service in Adult Day Service center setting**	\$7.71 per day unit

*\*\*Bill only when service is not included in Adult Day Service per diem rate.*