

# Psychiatric Residential Treatment Facility Rates

## SFY2025 | CY 2025

### Psychiatric Residential Treatment Facility | Average Daily Rate

North Dakota Medicaid	Medicare	<u>Minnesota Medicaid</u>	<u>Montana Medicaid</u>	<u>South Dakota Medicaid</u>
\$ 1,199.09	-	\$952.76	\$509.81	\$408.43

### Private PRTF Provider Rates, CY 2025

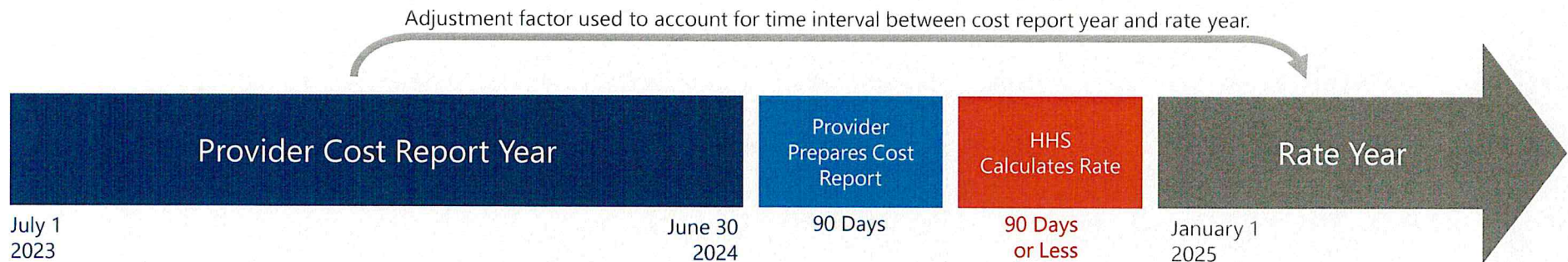
Provider	Location	CY2025 Rate
Dakota Boys & Girls Ranch	Fargo	\$1,301.50
	Minot	\$1,043.25
	Bismarck	\$1,252.51
Pride Manchester House	Bismarck	\$720.44
Nexus-PATH Luther Hall	Fargo	\$705.68
<b>Average</b>		<b>\$1,199.09</b>

# What is a cost report?

A cost report is a financial document submitted by health care providers and outline the expenses incurred in delivering patient care and include data on operating costs, salaries, supplies, and other expenditures. Cost report data is used to set provider reimbursement rates.

- Cost reports cover a defined time period and are used to detail provider costs during that timeframe.
- Costs are generally broken into a few distinct categories:
  - Direct Care
  - Indirect Care
  - Property
  - Other
- Some costs are not allowable (ex. lobbying) for use in calculating reimbursement rates.
- Cost categories have limits to ensure that costs are reasonable and efficient.

# How are cost reports used to set rates?

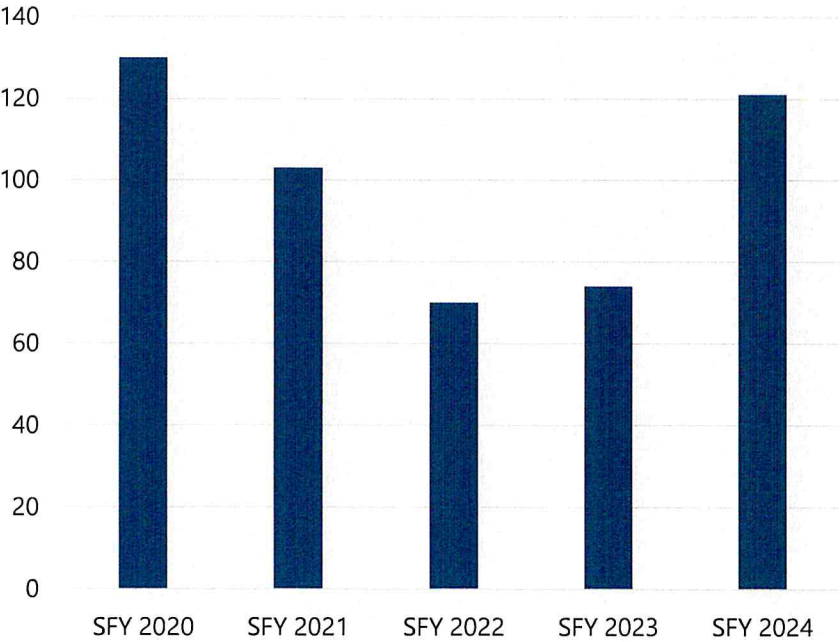


The rate methodology for the service uses cost report data to calculate provider rates.

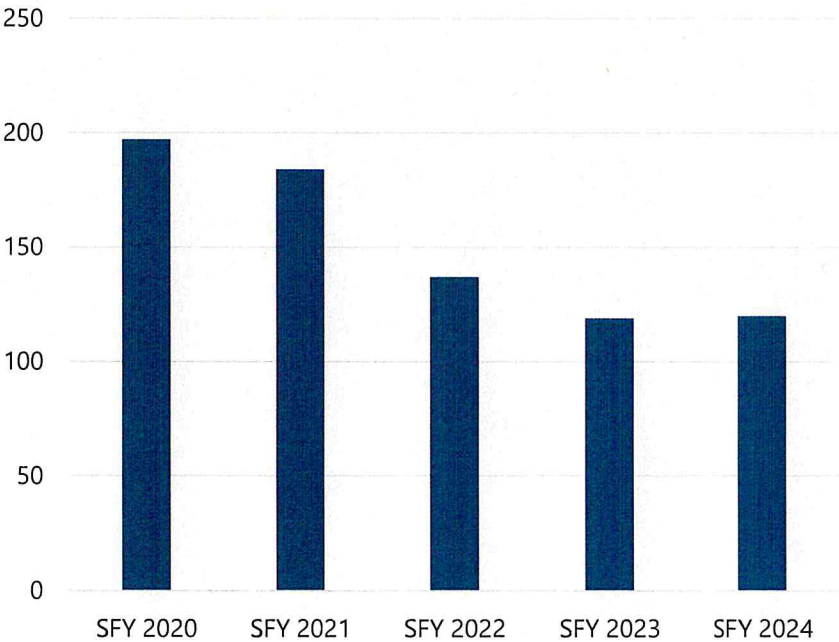
- An adjustment factor is used to inflate costs forward from the cost report year to the rate year.
- Provider cost reports and underlying data may be audited to ensure that costs were appropriately reported and allocated.
- The department must prepare/calculate rates for multiple providers within the same 90 day timeframe.

# Psychiatric Residential Treatment Facilities

PRTF Admissions



PRTF Average Length of Stay



# Psychiatric Residential Treatment Facility Expenditures

