

**Freestanding Pediatric Subacute 2018-19 Rates**

<b>91</b>	<b>92</b>	<b>93 / 95</b>	<b>94 / 96</b>	<b>97</b>	<b>98</b>
\$800.39	\$731.76	\$792.47	\$723.84	\$50.35	\$46.94

**Notes:**

Accommodation code 91 = Ventilator Rate

Accommodation code 92 = NonVent Rate

Accommodation code 93/95 = 91 minus bedhold/leave of absence rate

Accommodation code 94/96 = 92 minus bedhold/leave of absence rate

Accommodation code 97 = Rehab Therapy Rate

Accommodation code 98 = Vent Weaning Rate

\* Quality Assurance Fee mandate effective 8/1/2018 \$15.72