

## Nursing Facility 2006 Payment Rates

House Bill (HB) 154 requires the Health and Human Services Commission (HHSC) to ensure that the rate component derived from reported liability insurance costs is paid only to those facilities that purchase liability insurance acceptable to the commission. To comply with HB 154, the portion of the general and administrative rate component derived from reported liability insurance costs has been excluded from the rates listed below. An add-on payment of **\$1.89** per diem will be paid to facilities that verify liability insurance coverage acceptable to HHSC.

### BASE RATE - NO LIABILITY INSURANCE PAYMENT RATES EFFECTIVE JANUARY 1, 2006

Base Rate - No Liability Insurance						
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total
201	\$92.82	\$32.54	\$11.14	\$21.55	\$6.38	\$164.43
202	\$79.71	\$27.94	\$11.14	\$21.55	\$6.38	\$146.72
203	\$73.87	\$25.90	\$11.14	\$21.55	\$6.38	\$138.84
204	\$57.06	\$20.00	\$11.14	\$21.55	\$6.38	\$116.13
205	\$50.94	\$17.86	\$11.14	\$21.55	\$6.38	\$107.87
206	\$51.84	\$18.17	\$11.14	\$21.55	\$6.38	\$109.08
207	\$44.45	\$15.58	\$11.14	\$21.55	\$6.38	\$99.10
208	\$41.97	\$14.71	\$11.14	\$21.55	\$6.38	\$95.75
209	\$37.22	\$13.05	\$11.14	\$21.55	\$6.38	\$89.34
210	\$28.73	\$10.07	\$11.14	\$21.55	\$6.38	\$77.87
211	\$26.65	\$9.34	\$11.14	\$21.55	\$6.38	\$75.06
212	\$26.65	\$9.34	\$11.14	\$21.55	\$6.38	\$75.06
Vent. - Cont	\$65.73	\$23.04				\$88.77
Vent. -< Cont.	\$26.29	\$9.22				\$35.51
Pediatric Trach.	\$39.44	\$13.82				\$53.26

**Level 1 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 1 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 1 and Base Rate
201	\$93.16	\$32.54	\$11.14	\$21.55	\$6.38	\$164.77	\$0.34
202	\$80.05	\$27.94	\$11.14	\$21.55	\$6.38	\$147.06	\$0.34
203	\$74.21	\$25.90	\$11.14	\$21.55	\$6.38	\$139.18	\$0.34
204	\$57.40	\$20.00	\$11.14	\$21.55	\$6.38	\$116.47	\$0.34
205	\$51.28	\$17.86	\$11.14	\$21.55	\$6.38	\$108.21	\$0.34
206	\$52.18	\$18.17	\$11.14	\$21.55	\$6.38	\$109.42	\$0.34
207	\$44.79	\$15.58	\$11.14	\$21.55	\$6.38	\$99.42	\$0.34
208	\$42.31	\$14.71	\$11.14	\$21.55	\$6.38	\$96.09	\$0.34
209	\$37.56	\$13.05	\$11.14	\$21.55	\$6.38	\$89.68	\$0.34
210	\$29.07	\$10.07	\$11.14	\$21.55	\$6.38	\$78.21	\$0.34
211	\$26.99	\$9.34	\$11.14	\$21.55	\$6.38	\$75.40	\$0.34
212	\$26.99	\$9.34	\$11.14	\$21.55	\$6.38	\$75.40	\$0.34
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 2 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 2 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 2 and Base Rate
201	\$93.49	\$32.54	\$11.14	\$21.55	\$6.38	\$165.10	\$0.67
202	\$80.35	\$27.94	\$11.14	\$21.55	\$6.38	\$147.39	\$0.67
203	\$74.54	\$25.90	\$11.14	\$21.55	\$6.38	\$139.51	\$0.67
204	\$57.73	\$20.00	\$11.14	\$21.55	\$6.38	\$116.80	\$0.67
205	\$51.61	\$17.86	\$11.14	\$21.55	\$6.38	\$108.54	\$0.67
206	\$52.51	\$18.17	\$11.14	\$21.55	\$6.38	\$109.75	\$0.67
207	\$45.12	\$15.58	\$11.14	\$21.55	\$6.38	\$99.77	\$0.67
208	\$42.64	\$14.71	\$11.14	\$21.55	\$6.38	\$96.42	\$0.67
209	\$37.89	\$13.05	\$11.14	\$21.55	\$6.38	\$90.01	\$0.67
210	\$29.40	\$10.07	\$11.14	\$21.55	\$6.38	\$78.54	\$0.67
211	\$27.32	\$9.34	\$11.14	\$21.55	\$6.38	\$75.73	\$0.67
212	\$27.32	\$9.34	\$11.14	\$21.55	\$6.38	\$75.73	\$0.67
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 3 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 3 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 3 and Base Rate
201	\$93.82	\$32.54	\$11.14	\$21.55	\$6.38	\$165.43	\$1.00
202	\$80.71	\$27.94	\$11.14	\$21.55	\$6.38	\$147.72	\$1.00
203	\$74.87	\$25.90	\$11.14	\$21.55	\$6.38	\$139.84	\$1.00
204	\$58.06	\$20.00	\$11.14	\$21.55	\$6.38	\$117.13	\$1.00
205	\$51.94	\$17.86	\$11.14	\$21.55	\$6.38	\$108.87	\$1.00
206	\$52.84	\$18.17	\$11.14	\$21.55	\$6.38	\$110.08	\$1.00
207	\$45.45	\$15.58	\$11.14	\$21.55	\$6.38	\$100.10	\$1.00
208	\$42.97	\$14.71	\$11.14	\$21.55	\$6.38	\$96.75	\$1.00
209	\$38.22	\$13.05	\$11.14	\$21.55	\$6.38	\$90.34	\$1.00
210	\$29.73	\$10.07	\$11.14	\$21.55	\$6.38	\$78.87	\$1.00
211	\$27.65	\$9.34	\$11.14	\$21.55	\$6.38	\$76.06	\$1.00
212	\$27.65	\$9.34	\$11.14	\$21.55	\$6.38	\$76.06	\$1.00
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 4 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 4 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 4 and Base Rate
201	\$94.15	\$32.54	\$11.14	\$21.55	\$6.38	\$165.76	\$1.33
202	\$81.04	\$27.94	\$11.14	\$21.55	\$6.38	\$148.05	\$1.33
203	\$75.20	\$25.90	\$11.14	\$21.55	\$6.38	\$140.17	\$1.33
204	\$58.39	\$20.00	\$11.14	\$21.55	\$6.38	\$117.46	\$1.33
205	\$52.27	\$17.86	\$11.14	\$21.55	\$6.38	\$109.20	\$1.33
206	\$53.17	\$18.17	\$11.14	\$21.55	\$6.38	\$110.41	\$1.33
207	\$45.78	\$15.58	\$11.14	\$21.55	\$6.38	\$100.43	\$1.33
208	\$43.30	\$14.71	\$11.14	\$21.55	\$6.38	\$97.08	\$1.33
209	\$38.55	\$13.05	\$11.14	\$21.55	\$6.38	\$90.67	\$1.33
210	\$30.06	\$10.07	\$11.14	\$21.55	\$6.38	\$79.20	\$1.33
211	\$27.98	\$9.34	\$11.14	\$21.55	\$6.38	\$76.39	\$1.33
212	\$27.98	\$9.34	\$11.14	\$21.55	\$6.38	\$76.39	\$1.33
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 5 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 5 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 5 and Base Rate
201	\$94.48	\$32.54	\$11.14	\$21.55	\$6.38	\$166.09	\$1.66
202	\$81.37	\$27.94	\$11.14	\$21.55	\$6.38	\$148.38	\$1.66
203	\$75.53	\$25.90	\$11.14	\$21.55	\$6.38	\$140.50	\$1.66
204	\$58.72	\$20.00	\$11.14	\$21.55	\$6.38	\$117.79	\$1.66
205	\$52.60	\$17.86	\$11.14	\$21.55	\$6.38	\$109.53	\$1.66
206	\$53.50	\$18.17	\$11.14	\$21.55	\$6.38	\$110.74	\$1.66
207	\$46.11	\$15.58	\$11.14	\$21.55	\$6.38	\$100.76	\$1.66
208	\$43.63	\$14.71	\$11.14	\$21.55	\$6.38	\$97.41	\$1.66
209	\$38.88	\$13.05	\$11.14	\$21.55	\$6.38	\$91.00	\$1.66
210	\$30.39	\$10.07	\$11.14	\$21.55	\$6.38	\$79.53	\$1.66
211	\$28.31	\$9.34	\$11.14	\$21.55	\$6.38	\$76.72	\$1.66
212	\$28.31	\$9.34	\$11.14	\$21.55	\$6.38	\$76.72	\$1.66
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 6 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 6 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 6 and Base Rate
201	\$94.81	\$32.54	\$11.14	\$21.55	\$6.38	\$166.42	\$1.99
202	\$81.70	\$27.94	\$11.14	\$21.55	\$6.38	\$148.71	\$1.99
203	\$75.86	\$25.90	\$11.14	\$21.55	\$6.38	\$140.83	\$1.99
204	\$59.05	\$20.00	\$11.14	\$21.55	\$6.38	\$118.12	\$1.99
205	\$52.93	\$17.86	\$11.14	\$21.55	\$6.38	\$109.86	\$1.99
206	\$53.83	\$18.17	\$11.14	\$21.55	\$6.38	\$111.07	\$1.99
207	\$46.44	\$15.58	\$11.14	\$21.55	\$6.38	\$101.09	\$1.99
208	\$43.96	\$14.71	\$11.14	\$21.55	\$6.38	\$97.74	\$1.99
209	\$39.21	\$13.05	\$11.14	\$21.55	\$6.38	\$91.33	\$1.99
210	\$30.72	\$10.07	\$11.14	\$21.55	\$6.38	\$79.86	\$1.99
211	\$28.64	\$9.34	\$11.14	\$21.55	\$6.38	\$77.05	\$1.99
212	\$28.64	\$9.34	\$11.14	\$21.55	\$6.38	\$77.05	\$1.99
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 7 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 7 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 7 and Base Rate
201	\$95.14	\$32.54	\$11.14	\$21.55	\$6.38	\$166.75	\$2.32
202	\$82.03	\$27.94	\$11.14	\$21.55	\$6.38	\$149.04	\$2.32
203	\$76.19	\$25.90	\$11.14	\$21.55	\$6.38	\$141.16	\$2.32
204	\$59.38	\$20.00	\$11.14	\$21.55	\$6.38	\$118.45	\$2.32
205	\$53.26	\$17.86	\$11.14	\$21.55	\$6.38	\$110.19	\$2.32
206	\$54.16	\$18.17	\$11.14	\$21.55	\$6.38	\$111.40	\$2.32
207	\$46.77	\$15.58	\$11.14	\$21.55	\$6.38	\$101.42	\$2.32
208	\$44.29	\$14.71	\$11.14	\$21.55	\$6.38	\$98.07	\$2.32
209	\$39.54	\$13.05	\$11.14	\$21.55	\$6.38	\$91.66	\$2.32
210	\$31.05	\$10.07	\$11.14	\$21.55	\$6.38	\$80.19	\$2.32
211	\$28.97	\$9.34	\$11.14	\$21.55	\$6.38	\$77.38	\$2.32
212	\$28.97	\$9.34	\$11.14	\$21.55	\$6.38	\$77.38	\$2.32
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 8 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 8 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 8 and Base Rate
201	\$95.47	\$32.54	\$11.14	\$21.55	\$6.38	\$167.08	\$2.65
202	\$82.36	\$27.94	\$11.14	\$21.55	\$6.38	\$149.37	\$2.65
203	\$76.52	\$25.90	\$11.14	\$21.55	\$6.38	\$141.49	\$2.65
204	\$59.71	\$20.00	\$11.14	\$21.55	\$6.38	\$118.78	\$2.65
205	\$53.59	\$17.86	\$11.14	\$21.55	\$6.38	\$110.52	\$2.65
206	\$54.49	\$18.17	\$11.14	\$21.55	\$6.38	\$111.73	\$2.65
207	\$47.10	\$15.58	\$11.14	\$21.55	\$6.38	\$101.75	\$2.65
208	\$44.62	\$14.71	\$11.14	\$21.55	\$6.38	\$98.40	\$2.65
209	\$39.87	\$13.05	\$11.14	\$21.55	\$6.38	\$91.99	\$2.65
210	\$31.38	\$10.07	\$11.14	\$21.55	\$6.38	\$80.52	\$2.65
211	\$29.30	\$9.34	\$11.14	\$21.55	\$6.38	\$77.71	\$2.65
212	\$29.30	\$9.34	\$11.14	\$21.55	\$6.38	\$77.71	\$2.65
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 9 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 9 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 9 and Base Rate
201	\$95.80	\$32.54	\$11.14	\$21.55	\$6.38	\$167.41	\$2.98
202	\$82.69	\$27.94	\$11.14	\$21.55	\$6.38	\$149.70	\$2.98
203	\$76.85	\$25.90	\$11.14	\$21.55	\$6.38	\$141.82	\$2.98
204	\$60.04	\$20.00	\$11.14	\$21.55	\$6.38	\$119.11	\$2.98
205	\$53.92	\$17.86	\$11.14	\$21.55	\$6.38	\$110.85	\$2.98
206	\$54.82	\$18.17	\$11.14	\$21.55	\$6.38	\$112.06	\$2.98
207	\$47.43	\$15.58	\$11.14	\$21.55	\$6.38	\$102.08	\$2.98
208	\$44.95	\$14.71	\$11.14	\$21.55	\$6.38	\$98.73	\$2.98
209	\$40.20	\$13.05	\$11.14	\$21.55	\$6.38	\$92.32	\$2.98
210	\$31.71	\$10.07	\$11.14	\$21.55	\$6.38	\$80.85	\$2.98
211	\$29.63	\$9.34	\$11.14	\$21.55	\$6.38	\$78.04	\$2.98
212	\$29.63	\$9.34	\$11.14	\$21.55	\$6.38	\$78.04	\$2.98
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 10 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 10 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 10 and Base Rate
201	\$96.13	\$32.54	\$11.14	\$21.55	\$6.38	\$167.74	\$3.31
202	\$83.02	\$27.94	\$11.14	\$21.55	\$6.38	\$150.03	\$3.31
203	\$77.18	\$25.90	\$11.14	\$21.55	\$6.38	\$142.15	\$3.31
204	\$60.37	\$20.00	\$11.14	\$21.55	\$6.38	\$119.44	\$3.31
205	\$54.25	\$17.86	\$11.14	\$21.55	\$6.38	\$111.18	\$3.31
206	\$55.15	\$18.17	\$11.14	\$21.55	\$6.38	\$112.39	\$3.31
207	\$47.76	\$15.58	\$11.14	\$21.55	\$6.38	\$102.41	\$3.31
208	\$45.28	\$14.71	\$11.14	\$21.55	\$6.38	\$99.06	\$3.31
209	\$40.53	\$13.05	\$11.14	\$21.55	\$6.38	\$92.65	\$3.31
210	\$32.04	\$10.07	\$11.14	\$21.55	\$6.38	\$81.18	\$3.31
211	\$29.96	\$9.34	\$11.14	\$21.55	\$6.38	\$78.37	\$3.31
212	\$29.96	\$9.34	\$11.14	\$21.55	\$6.38	\$78.37	\$3.31
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 11 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 11 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 11 and Base Rate
201	\$96.46	\$32.54	\$11.14	\$21.55	\$6.38	\$168.07	\$3.64
202	\$83.35	\$27.94	\$11.14	\$21.55	\$6.38	\$150.36	\$3.64
203	\$77.51	\$25.90	\$11.14	\$21.55	\$6.38	\$142.48	\$3.64
204	\$60.70	\$20.00	\$11.14	\$21.55	\$6.38	\$119.77	\$3.64
205	\$54.58	\$17.86	\$11.14	\$21.55	\$6.38	\$111.51	\$3.64
206	\$55.48	\$18.17	\$11.14	\$21.55	\$6.38	\$112.72	\$3.64
207	\$48.09	\$15.58	\$11.14	\$21.55	\$6.38	\$102.74	\$3.64
208	\$45.61	\$14.71	\$11.14	\$21.55	\$6.38	\$99.39	\$3.64
209	\$40.86	\$13.05	\$11.14	\$21.55	\$6.38	\$92.98	\$3.64
210	\$32.37	\$10.07	\$11.14	\$21.55	\$6.38	\$81.51	\$3.64
211	\$30.29	\$9.34	\$11.14	\$21.55	\$6.38	\$78.70	\$3.64
212	\$30.29	\$9.34	\$11.14	\$21.55	\$6.38	\$78.70	\$3.64
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 12 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 12 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 12 and Base Rate
201	\$96.79	\$32.54	\$11.14	\$21.55	\$6.38	\$168.40	\$3.97
202	\$83.68	\$27.94	\$11.14	\$21.55	\$6.38	\$150.69	\$3.97
203	\$77.84	\$25.90	\$11.14	\$21.55	\$6.38	\$142.81	\$3.97
204	\$61.03	\$20.00	\$11.14	\$21.55	\$6.38	\$120.10	\$3.97
205	\$54.91	\$17.86	\$11.14	\$21.55	\$6.38	\$111.84	\$3.97
206	\$55.81	\$18.17	\$11.14	\$21.55	\$6.38	\$113.05	\$3.97
207	\$48.42	\$15.58	\$11.14	\$21.55	\$6.38	\$103.07	\$3.97
208	\$45.94	\$14.71	\$11.14	\$21.55	\$6.38	\$99.72	\$3.97
209	\$41.19	\$13.05	\$11.14	\$21.55	\$6.38	\$93.31	\$3.97
210	\$32.70	\$10.07	\$11.14	\$21.55	\$6.38	\$81.84	\$3.97
211	\$30.62	\$9.34	\$11.14	\$21.55	\$6.38	\$79.03	\$3.97
212	\$30.62	\$9.34	\$11.14	\$21.55	\$6.38	\$79.03	\$3.97
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 13 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 13 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 13 and Base Rate
201	\$97.12	\$32.54	\$11.14	\$21.55	\$6.38	\$168.73	\$4.30
202	\$84.01	\$27.94	\$11.14	\$21.55	\$6.38	\$151.02	\$4.30
203	\$78.17	\$25.90	\$11.14	\$21.55	\$6.38	\$143.14	\$4.30
204	\$61.36	\$20.00	\$11.14	\$21.55	\$6.38	\$120.43	\$4.30
205	\$55.24	\$17.86	\$11.14	\$21.55	\$6.38	\$112.17	\$4.30
206	\$56.14	\$18.17	\$11.14	\$21.55	\$6.38	\$113.38	\$4.30
207	\$48.75	\$15.58	\$11.14	\$21.55	\$6.38	\$103.40	\$4.30
208	\$46.27	\$14.71	\$11.14	\$21.55	\$6.38	\$100.05	\$4.30
209	\$41.52	\$13.05	\$11.14	\$21.55	\$6.38	\$93.64	\$4.30
210	\$33.03	\$10.07	\$11.14	\$21.55	\$6.38	\$82.17	\$4.30
211	\$30.95	\$9.34	\$11.14	\$21.55	\$6.38	\$79.36	\$4.30
212	\$30.95	\$9.34	\$11.14	\$21.55	\$6.38	\$79.36	\$4.30
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 14 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 14 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 14 and Base Rate
201	\$97.45	\$32.54	\$11.14	\$21.55	\$6.38	\$169.06	\$4.63
202	\$84.34	\$27.94	\$11.14	\$21.55	\$6.38	\$151.35	\$4.63
203	\$78.50	\$25.90	\$11.14	\$21.55	\$6.38	\$143.47	\$4.63
204	\$61.69	\$20.00	\$11.14	\$21.55	\$6.38	\$120.76	\$4.63
205	\$55.57	\$17.86	\$11.14	\$21.55	\$6.38	\$112.50	\$4.63
206	\$56.47	\$18.17	\$11.14	\$21.55	\$6.38	\$113.71	\$4.63
207	\$49.08	\$15.58	\$11.14	\$21.55	\$6.38	\$103.73	\$4.63
208	\$46.60	\$14.71	\$11.14	\$21.55	\$6.38	\$100.38	\$4.63
209	\$41.85	\$13.05	\$11.14	\$21.55	\$6.38	\$93.97	\$4.63
210	\$33.36	\$10.07	\$11.14	\$21.55	\$6.38	\$82.50	\$4.63
211	\$31.28	\$9.34	\$11.14	\$21.55	\$6.38	\$79.69	\$4.63
212	\$31.28	\$9.34	\$11.14	\$21.55	\$6.38	\$79.69	\$4.63
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00



**Level 15 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 15 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 15 and Base Rate
201	\$97.78	\$32.54	\$11.14	\$21.55	\$6.38	\$169.39	\$4.96
202	\$84.67	\$27.94	\$11.14	\$21.55	\$6.38	\$151.68	\$4.96
203	\$78.83	\$25.90	\$11.14	\$21.55	\$6.38	\$143.80	\$4.96
204	\$62.02	\$20.00	\$11.14	\$21.55	\$6.38	\$121.09	\$4.96
205	\$55.90	\$17.86	\$11.14	\$21.55	\$6.38	\$112.83	\$4.96
206	\$56.80	\$18.17	\$11.14	\$21.55	\$6.38	\$114.04	\$4.96
207	\$49.41	\$15.58	\$11.14	\$21.55	\$6.38	\$104.06	\$4.96
208	\$46.93	\$14.71	\$11.14	\$21.55	\$6.38	\$100.71	\$4.96
209	\$42.18	\$13.05	\$11.14	\$21.55	\$6.38	\$94.30	\$4.96
210	\$33.69	\$10.07	\$11.14	\$21.55	\$6.38	\$82.83	\$4.96
211	\$31.61	\$9.34	\$11.14	\$21.55	\$6.38	\$80.02	\$4.96
212	\$31.61	\$9.34	\$11.14	\$21.55	\$6.38	\$80.02	\$4.96
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 16 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 16 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 16 and Base Rate
201	\$98.11	\$32.54	\$11.14	\$21.55	\$6.38	\$169.72	\$5.29
202	\$85.00	\$27.94	\$11.14	\$21.55	\$6.38	\$152.01	\$5.29
203	\$79.16	\$25.90	\$11.14	\$21.55	\$6.38	\$144.13	\$5.29
204	\$62.35	\$20.00	\$11.14	\$21.55	\$6.38	\$121.42	\$5.29
205	\$56.23	\$17.86	\$11.14	\$21.55	\$6.38	\$113.16	\$5.29
206	\$57.13	\$18.17	\$11.14	\$21.55	\$6.38	\$114.37	\$5.29
207	\$49.74	\$15.58	\$11.14	\$21.55	\$6.38	\$104.39	\$5.29
208	\$47.26	\$14.71	\$11.14	\$21.55	\$6.38	\$101.04	\$5.29
209	\$42.51	\$13.05	\$11.14	\$21.55	\$6.38	\$94.63	\$5.29
210	\$34.02	\$10.07	\$11.14	\$21.55	\$6.38	\$83.16	\$5.29
211	\$31.94	\$9.34	\$11.14	\$21.55	\$6.38	\$80.35	\$5.29
212	\$31.94	\$9.34	\$11.14	\$21.55	\$6.38	\$80.35	\$5.29
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 17 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 17 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 17 and Base Rate
201	\$98.44	\$32.54	\$11.14	\$21.55	\$6.38	\$170.05	\$5.62
202	\$85.33	\$27.94	\$11.14	\$21.55	\$6.38	\$152.34	\$5.62
203	\$79.49	\$25.90	\$11.14	\$21.55	\$6.38	\$144.46	\$5.62
204	\$62.68	\$20.00	\$11.14	\$21.55	\$6.38	\$121.75	\$5.62
205	\$56.56	\$17.86	\$11.14	\$21.55	\$6.38	\$113.49	\$5.62
206	\$57.46	\$18.17	\$11.14	\$21.55	\$6.38	\$114.70	\$5.62
207	\$50.07	\$15.58	\$11.14	\$21.55	\$6.38	\$104.72	\$5.62
208	\$47.59	\$14.71	\$11.14	\$21.55	\$6.38	\$101.37	\$5.62
209	\$42.84	\$13.05	\$11.14	\$21.55	\$6.38	\$94.96	\$5.62
210	\$34.35	\$10.07	\$11.14	\$21.55	\$6.38	\$83.49	\$5.62
211	\$32.27	\$9.34	\$11.14	\$21.55	\$6.38	\$80.68	\$5.62
212	\$32.27	\$9.34	\$11.14	\$21.55	\$6.38	\$80.68	\$5.62
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 18 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 18 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 18 and Base Rate
201	\$98.77	\$32.54	\$11.14	\$21.55	\$6.38	\$170.38	\$5.95
202	\$85.66	\$27.94	\$11.14	\$21.55	\$6.38	\$152.67	\$5.95
203	\$79.82	\$25.90	\$11.14	\$21.55	\$6.38	\$144.79	\$5.95
204	\$63.01	\$20.00	\$11.14	\$21.55	\$6.38	\$122.08	\$5.95
205	\$56.89	\$17.86	\$11.14	\$21.55	\$6.38	\$113.82	\$5.95
206	\$57.79	\$18.17	\$11.14	\$21.55	\$6.38	\$115.03	\$5.95
207	\$50.40	\$15.58	\$11.14	\$21.55	\$6.38	\$105.05	\$5.95
208	\$47.92	\$14.71	\$11.14	\$21.55	\$6.38	\$101.70	\$5.95
209	\$43.17	\$13.05	\$11.14	\$21.55	\$6.38	\$95.29	\$5.95
210	\$34.68	\$10.07	\$11.14	\$21.55	\$6.38	\$83.82	\$5.95
211	\$32.60	\$9.34	\$11.14	\$21.55	\$6.38	\$81.01	\$5.95
212	\$32.60	\$9.34	\$11.14	\$21.55	\$6.38	\$81.01	\$5.95
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 19 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 19 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 19 and Base Rate
201	\$99.10	\$32.54	\$11.14	\$21.55	\$6.38	\$170.71	\$6.28
202	\$85.99	\$27.94	\$11.14	\$21.55	\$6.38	\$153.00	\$6.28
203	\$80.15	\$25.90	\$11.14	\$21.55	\$6.38	\$145.12	\$6.28
204	\$63.34	\$20.00	\$11.14	\$21.55	\$6.38	\$122.41	\$6.28
205	\$57.22	\$17.86	\$11.14	\$21.55	\$6.38	\$114.15	\$6.28
206	\$58.12	\$18.17	\$11.14	\$21.55	\$6.38	\$115.36	\$6.28
207	\$50.73	\$15.58	\$11.14	\$21.55	\$6.38	\$105.38	\$6.28
208	\$48.25	\$14.71	\$11.14	\$21.55	\$6.38	\$102.03	\$6.28
209	\$43.50	\$13.05	\$11.14	\$21.55	\$6.38	\$95.62	\$6.28
210	\$35.01	\$10.07	\$11.14	\$21.55	\$6.38	\$84.15	\$6.28
211	\$32.93	\$9.34	\$11.14	\$21.55	\$6.38	\$81.34	\$6.28
212	\$32.93	\$9.34	\$11.14	\$21.55	\$6.38	\$81.34	\$6.28
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 20 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 20 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 20 and Base Rate
201	\$99.43	\$32.54	\$11.14	\$21.55	\$6.38	\$171.04	\$6.61
202	\$86.32	\$27.94	\$11.14	\$21.55	\$6.38	\$153.33	\$6.61
203	\$80.48	\$25.90	\$11.14	\$21.55	\$6.38	\$145.45	\$6.61
204	\$63.67	\$20.00	\$11.14	\$21.55	\$6.38	\$122.74	\$6.61
205	\$57.55	\$17.86	\$11.14	\$21.55	\$6.38	\$114.48	\$6.61
206	\$58.45	\$18.17	\$11.14	\$21.55	\$6.38	\$115.69	\$6.61
207	\$51.06	\$15.58	\$11.14	\$21.55	\$6.38	\$105.71	\$6.61
208	\$48.58	\$14.71	\$11.14	\$21.55	\$6.38	\$102.36	\$6.61
209	\$43.83	\$13.05	\$11.14	\$21.55	\$6.38	\$95.95	\$6.61
210	\$35.34	\$10.07	\$11.14	\$21.55	\$6.38	\$84.48	\$6.61
211	\$33.26	\$9.34	\$11.14	\$21.55	\$6.38	\$81.67	\$6.61
212	\$33.26	\$9.34	\$11.14	\$21.55	\$6.38	\$81.67	\$6.61
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 21 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 21 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 21 and Base Rate
201	\$99.76	\$32.54	\$11.14	\$21.55	\$6.38	\$171.37	\$6.94
202	\$86.65	\$27.94	\$11.14	\$21.55	\$6.38	\$153.66	\$6.94
203	\$80.81	\$25.90	\$11.14	\$21.55	\$6.38	\$145.78	\$6.94
204	\$64.00	\$20.00	\$11.14	\$21.55	\$6.38	\$123.07	\$6.94
205	\$57.88	\$17.86	\$11.14	\$21.55	\$6.38	\$114.81	\$6.94
206	\$58.78	\$18.17	\$11.14	\$21.55	\$6.38	\$116.02	\$6.94
207	\$51.39	\$15.58	\$11.14	\$21.55	\$6.38	\$106.04	\$6.94
208	\$48.91	\$14.71	\$11.14	\$21.55	\$6.38	\$102.69	\$6.94
209	\$44.16	\$13.05	\$11.14	\$21.55	\$6.38	\$96.28	\$6.94
210	\$35.67	\$10.07	\$11.14	\$21.55	\$6.38	\$84.81	\$6.94
211	\$33.59	\$9.34	\$11.14	\$21.55	\$6.38	\$82.00	\$6.94
212	\$33.59	\$9.34	\$11.14	\$21.55	\$6.38	\$82.00	\$6.94
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 22 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 22 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 22 and Base Rate
201	\$100.09	\$32.54	\$11.14	\$21.55	\$6.38	\$171.70	\$7.27
202	\$86.98	\$27.94	\$11.14	\$21.55	\$6.38	\$153.99	\$7.27
203	\$81.14	\$25.90	\$11.14	\$21.55	\$6.38	\$146.11	\$7.27
204	\$64.33	\$20.00	\$11.14	\$21.55	\$6.38	\$123.40	\$7.27
205	\$58.21	\$17.86	\$11.14	\$21.55	\$6.38	\$115.14	\$7.27
206	\$59.11	\$18.17	\$11.14	\$21.55	\$6.38	\$116.35	\$7.27
207	\$51.72	\$15.58	\$11.14	\$21.55	\$6.38	\$106.37	\$7.27
208	\$49.24	\$14.71	\$11.14	\$21.55	\$6.38	\$103.02	\$7.27
209	\$44.49	\$13.05	\$11.14	\$21.55	\$6.38	\$96.61	\$7.27
210	\$36.00	\$10.07	\$11.14	\$21.55	\$6.38	\$85.14	\$7.27
211	\$33.92	\$9.34	\$11.14	\$21.55	\$6.38	\$82.33	\$7.27
212	\$33.92	\$9.34	\$11.14	\$21.55	\$6.38	\$82.33	\$7.27
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 23 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 23 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 23 and Base Rate
201	\$100.42	\$32.54	\$11.14	\$21.55	\$6.38	\$172.03	\$7.60
202	\$87.31	\$27.94	\$11.14	\$21.55	\$6.38	\$154.32	\$7.60
203	\$81.47	\$25.90	\$11.14	\$21.55	\$6.38	\$146.44	\$7.60
204	\$64.66	\$20.00	\$11.14	\$21.55	\$6.38	\$123.73	\$7.60
205	\$58.54	\$17.86	\$11.14	\$21.55	\$6.38	\$115.47	\$7.60
206	\$59.44	\$18.17	\$11.14	\$21.55	\$6.38	\$116.68	\$7.60
207	\$52.05	\$15.58	\$11.14	\$21.55	\$6.38	\$106.70	\$7.60
208	\$49.57	\$14.71	\$11.14	\$21.55	\$6.38	\$103.55	\$7.60
209	\$44.82	\$13.05	\$11.14	\$21.55	\$6.38	\$96.94	\$7.60
210	\$36.33	\$10.07	\$11.14	\$21.55	\$6.38	\$85.47	\$7.60
211	\$34.25	\$9.34	\$11.14	\$21.55	\$6.38	\$82.66	\$7.60
212	\$34.25	\$9.34	\$11.14	\$21.55	\$6.38	\$82.66	\$7.60
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 24 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 24 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 24 and Base Rate
201	\$100.75	\$32.54	\$11.14	\$21.55	\$6.38	\$172.36	\$7.93
202	\$87.64	\$27.94	\$11.14	\$21.55	\$6.38	\$154.65	\$7.93
203	\$81.80	\$25.90	\$11.14	\$21.55	\$6.38	\$146.77	\$7.93
204	\$64.99	\$20.00	\$11.14	\$21.55	\$6.38	\$124.06	\$7.93
205	\$58.87	\$17.86	\$11.14	\$21.55	\$6.38	\$115.80	\$7.93
206	\$59.77	\$18.17	\$11.14	\$21.55	\$6.38	\$117.01	\$7.93
207	\$52.38	\$15.58	\$11.14	\$21.55	\$6.38	\$107.03	\$7.93
208	\$49.90	\$14.71	\$11.14	\$21.55	\$6.38	\$103.68	\$7.93
209	\$45.15	\$13.05	\$11.14	\$21.55	\$6.38	\$97.27	\$7.93
210	\$36.66	\$10.07	\$11.14	\$21.55	\$6.38	\$85.80	\$7.93
211	\$34.58	\$9.34	\$11.14	\$21.55	\$6.38	\$82.99	\$7.93
212	\$34.58	\$9.34	\$11.14	\$21.55	\$6.38	\$82.99	\$7.93
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 25 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 25 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 25 and Base Rate
201	\$101.08	\$32.54	\$11.14	\$21.55	\$6.38	\$172.69	\$8.26
202	\$87.97	\$27.94	\$11.14	\$21.55	\$6.38	\$154.98	\$8.26
203	\$82.13	\$25.90	\$11.14	\$21.55	\$6.38	\$147.10	\$8.26
204	\$65.32	\$20.00	\$11.14	\$21.55	\$6.38	\$124.39	\$8.26
205	\$59.20	\$17.86	\$11.14	\$21.55	\$6.38	\$116.13	\$8.26
206	\$60.10	\$18.17	\$11.14	\$21.55	\$6.38	\$117.34	\$8.26
207	\$52.71	\$15.58	\$11.14	\$21.55	\$6.38	\$107.36	\$8.26
208	\$50.23	\$14.71	\$11.14	\$21.55	\$6.38	\$104.01	\$8.26
209	\$45.48	\$13.05	\$11.14	\$21.55	\$6.38	\$97.60	\$8.26
210	\$36.99	\$10.07	\$11.14	\$21.55	\$6.38	\$86.13	\$8.26
211	\$34.91	\$9.34	\$11.14	\$21.55	\$6.38	\$83.32	\$8.26
212	\$34.91	\$9.34	\$11.14	\$21.55	\$6.38	\$83.32	\$8.26
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 26 - NO LIABILITY INSURANCE  
PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

<b>Level 26 - No Liability Insurance</b>							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 26 and Base Rate
201	\$101.41	\$32.54	\$11.14	\$21.55	\$6.38	\$173.02	\$8.59
202	\$88.30	\$27.94	\$11.14	\$21.55	\$6.38	\$155.31	\$8.59
203	\$82.46	\$25.90	\$11.14	\$21.55	\$6.38	\$147.43	\$8.59
204	\$65.65	\$20.00	\$11.14	\$21.55	\$6.38	\$124.72	\$8.59
205	\$59.53	\$17.86	\$11.14	\$21.55	\$6.38	\$116.46	\$8.59
206	\$60.43	\$18.17	\$11.14	\$21.55	\$6.38	\$117.67	\$8.59
207	\$53.04	\$15.58	\$11.14	\$21.55	\$6.38	\$107.69	\$8.59
208	\$50.56	\$14.71	\$11.14	\$21.55	\$6.38	\$104.34	\$8.59
209	\$45.81	\$13.05	\$11.14	\$21.55	\$6.38	\$97.93	\$8.59
210	\$37.32	\$10.07	\$11.14	\$21.55	\$6.38	\$86.46	\$8.59
211	\$35.24	\$9.34	\$11.14	\$21.55	\$6.38	\$83.65	\$8.59
212	\$35.24	\$9.34	\$11.14	\$21.55	\$6.38	\$83.65	\$8.59
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00

**Level 27 - NO LIABILITY INSURANCE**  
**PAYMENT RATES EFFECTIVE JANUARY 1, 2006**

Level 27 - No Liability Insurance							
TILE	Direct Care Staff	Other Resident Care	Dietary	General and Admin.	Fixed Capital	Total	Difference Between Level Rate 27 and Base Rate
201	\$101.74	\$32.54	\$11.14	\$21.55	\$6.38	\$173.35	\$8.92
202	\$88.63	\$27.94	\$11.14	\$21.55	\$6.38	\$155.64	\$8.92
203	\$82.79	\$25.90	\$11.14	\$21.55	\$6.38	\$147.76	\$8.92
204	\$65.98	\$20.00	\$11.14	\$21.55	\$6.38	\$125.05	\$8.92
205	\$59.86	\$17.86	\$11.14	\$21.55	\$6.38	\$116.79	\$8.92
206	\$60.76	\$18.17	\$11.14	\$21.55	\$6.38	\$118.00	\$8.92
207	\$53.37	\$15.58	\$11.14	\$21.55	\$6.38	\$108.02	\$8.92
208	\$50.89	\$14.71	\$11.14	\$21.55	\$6.38	\$104.67	\$8.92
209	\$46.14	\$13.05	\$11.14	\$21.55	\$6.38	\$98.26	\$8.92
210	\$37.65	\$10.07	\$11.14	\$21.55	\$6.38	\$86.79	\$8.92
211	\$35.57	\$9.34	\$11.14	\$21.55	\$6.38	\$83.98	\$8.92
212	\$35.57	\$9.34	\$11.14	\$21.55	\$6.38	\$83.98	\$8.92
Vent. - Cont	\$65.73	\$23.04				\$88.77	\$0.00
Vent. -< Cont.	\$26.29	\$9.22				\$35.51	\$0.00
Pediatric Trach.	\$39.44	\$13.82				\$53.26	\$0.00