



COMMONWEALTH of VIRGINIA
Department of Medical Assistance Services

SPECIALIZED CARE RATES EFFECTIVE 7/1/2020 thru 6/30/2021

Includes Temporary \$20 Add-On Rate for COVID-19

FACILITY NAME	PROVIDER NPI	SFY21 REIMB RATE (INCLUDES TEMPORARY \$20 ADD-ON RATE FOR COVID-19)
BLAND COUNTY	1205814928S	\$710.39
BRIAN CENTER - FINCASTLE	1942288022S	\$690.98
WOODBINE REHAB AND HEALTHCARE CTR	1174172217S	\$658.79
ACCORDIUS HEALTH AT ROANOKE LLC	1760955116S	\$490.74
RIDGECREST MANOR NH	1679981930S	\$533.47
WATERSIDE HEALTH & REHAB CENTER LLC	1558824227S	\$592.15
STRATFORD HEALTHCARE CENTER	1750516894S	\$757.93
CHILDREN'S HOSPITAL (PEDS)	1003953746S	\$1,061.79
DUNN LORING VA OPCO LLC.	1053965558S	\$666.57

CHANGE LOG

Change Description	Effective Date	Date Entered
Added temporary add-on rate for COVID-19	7/1/2020	6/1/2020