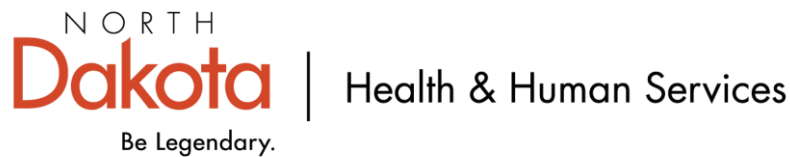


North Dakota

Nursing Facility

Payment System FAQs



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Background

State law requires all nursing facilities to charge both private pay and Medicaid residents the same rate for services based on a case mix system. Additional charges may be made by a facility for a private room or services that are not required to be provided. Nursing facilities in North Dakota have been operating with case mix and equalization of rates since January 1, 1990.

What is a Case Mix Payment System?

North Dakota uses a case mix payment system to pay for nursing facility care. Case Mix is a means of payment for a resident's cost of care that is based on documented evidence of the intensity of care and services provided to the resident. Each nursing facility has a daily base rate that is multiplied by the case mix value to identify the individualized payment rate for a resident. The individual daily rate for a resident who needs more care will be higher than for a resident who needs less care. Equalization of rates requires all residents be charged the same rate for comparable care and services.

Do All Nursing Facilities Have the Same Rates?

No. Each facility will have its own set of rates. The facility's rates are based on costs incurred by the facility for property, administration, chaplain, medical records, plant operations, housekeeping, dietary, pharmacy consultant, food, laundry, social services, activities, therapies, and nursing. Only the portion of the rates related to the case mix classification varies by individual care and services. Facility rates change on January 1. Rate changes may also occur during the year to adjust costs due to audits, property changes, or one-time adjustments.

How is My Rate Determined?

Rates are determined by using a state adjusted Patient Driven Payment Model (ND PDPM) that generates a three-letter classification. Classifications are generated using individual resident assessments. An interdisciplinary team uses documentation in the medical record to complete the assessment. Once completed, the assessment is sent to the North Dakota Department of Health and Human Services, and a classification is assigned based on the information in the resident assessment.

Will My Rate Remain the Same Once I Have Been Classified?

Individual rates will change if the classification changes. Classification changes can only occur at specific times during residence at a nursing facility: within 14 days after admission or return from a hospital stay, and every three months after that. Even if there is a change to an individual's condition, the classification can only be reassessed every three months.

The facility daily base rate will also remain the same unless a rate adjustment creates a change in the facility's rates.

What Types of Things Determine a ND PDPM Classification?

The North Dakota Case Mix System considers three parts of a federal classification system known as the Patient Driven Payment Model (PDPM): Speech Language Pathology (SLP), Nursing, and Non-Therapy Ancillaries (NTA). Each part generates its own case mix letter that affects the classification.

Once the three parts (SLP, Nursing, and NTA) have a letter, they are combined into one case mix value. The case mix value is multiplied by the facility's specific daily base rate to determine the resident's daily reimbursement rate.

Speech Language Pathology (SLP)

The SLP letter is affected by certain diagnoses identified as acute neurologic conditions, related medical conditions, severe mental impairment, and swallowing problems and/or needing a mechanically altered diet (such as pureed foods or thickened liquids). The list of related illness diagnoses that can affect SLP classification include aphasia, stroke (CVA or TIA), hemiplegia or hemiparesis, traumatic brain injury, tracheostomy, ventilator use, laryngeal cancer, apraxia, dysphagia, Amyotrophic Lateral Sclerosis (ALS), oral cancers, and other speech or language deficits. These medical conditions are considered conditions that may contribute to a resident's communication or swallowing needs.

Nursing

The nursing letter is determined by the resident's clinical condition, functional abilities, and the presence of specific care needs or services. This classification is based on factors such as the need for extensive nursing services (e.g., ventilator, tracheostomy care, IV medications), certain medical conditions, level of assistance needed with activities of daily living (ADLs) such as eating, toileting, bed mobility and transferring, and the presence of depression or behavioral symptoms. Medical conditions that may affect the nursing classification include septicemia, pneumonia, pressure ulcers, wounds, chronic obstructive pulmonary disease (COPD), urinary tract infections, and others that require skilled nursing care or monitoring. Participation in a restorative nursing program may also affect this classification.

Non-Therapeutic Ancillary Services (NTA)

The NTA (Non-Therapy Ancillary) letter is based on the presence of specific medical conditions and the use of certain treatments or services that require additional resources beyond therapy and basic nursing care. It is designed to recognize the cost and complexity of caring for residents with high medical needs. Each qualifying condition or service is assigned a point value, and the total number of points determines the resident's NTA classification. Examples of qualifying conditions include diabetes with complications, severe wounds, end-stage renal disease, chemotherapy, dialysis, and use of IV medications.

What will the Classification Notice Show?

The classification notice will have a three-letter code that is known as the 'classification'. The SLP part of ND PDPM will be the first letter, the Nursing part will be the second letter, and the NTA part will be the third letter.

Classification Order

- 1 – Speech Language Pathology (SLP)
- 2 – Nursing
- 3 – Non-Therapy Ancillaries (NTA)

What if I Disagree with My Classification?

You have the right to review the documentation supporting your classification. You also have the right to appeal your classification. If requested, the nursing facility will assist you in this process.

What if I Need More Information?

If you need more information, you may contact your local nursing facility or the Medical Services Division, North Dakota Department of Health and Human Services, 600 E Boulevard Ave – Dept 325, Bismarck, ND 58505-0250. Telephone 701-328-7068 or 800-755-2604 or FAX 701-328-1544. A detailed guide to assigning a nursing facility classification is available at: [Long Term Care Providers](#)

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