

## KIRKHAVEN FEE SCHEDULE

(effective February 1, 2021)

### Medically Necessary Services

		<u>Medicare B Covered</u>
Routine Care Services & Supplies	<b>\$445.00/day (1)</b>	No
Transitional Care Services & Supplies	<b>\$485.00/day (1)</b>	No (2)
Physical Therapy Evaluation	Medicare Allowable Charge	Yes
Physical Therapy Restorative Treatment	Medicare Allowable Charge	Yes
Occupational Therapy Evaluation	Medicare Allowable Charge	Yes
Occupational Therapy Restorative Treatment	Medicare Allowable Charge	Yes
Speech Therapy Evaluation	Medicare Allowable Charge	Yes
Speech Therapy Restorative Treatment	Medicare Allowable Charge	Yes
Prescription Drugs	Pharmacy Prevailing Charge	No
Lab Services	Medicare Allowable Charge	Yes
X-Ray Services	Medicare Allowable Charge	Yes
Physician Services	Medicare Allowable Charge	Yes
Dental Services (non-routine)	Clinic's Prevailing Charge	No
Specialty Supplies & Services	Medicare Allowable Charge or Supplier's Prevailing Charge	Varies (3)
Emergency Ambulance Treatment	Medicare Allowable Charge	Yes

### Optional Services

Private Room Differential	\$15/day	No
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As in the past, Kirkhaven will make available certain personal care items at your option for additional fees; beautician and barber services, telephone, cable TV, newspaper, non-emergency transport and transport aide.

### Notes

- (1) Routine and Transition Care services include: room and board, meals, nursing care, maintenance therapy, routine supplies, laundry, recreation, social work, pastoral care, audiology, podiatry, routine dental care.
- (2) Transitional Care admissions will most likely qualify for Medicare A or HMO coverage. A self-pay co-insurance fee may apply.
- (3) Medicare B covered items include: tube feedings, IV therapy, prosthetics, specialty supplies, durable medical equipment. Non-Medicare B covered items include: oxygen tank or concentrators, eye exams, glasses, hearing aids.
- (4) Subject to an additional charge of 6.8% per day New York State Assessment

**Bold denotes changes from prior year**