ND MEDICAID PAYMENT GROUP RATES

	Effective 7-1-2011	Effective 7-1-2012
Group 1	$374.00	$ 385.00
Group 2	$502.00	$ 517.00
Group 3	$574.00	$ 591.00
Group 4	$709.00	$ 730.00
Group 5	$805.00	$ 829.00
Group 6	$932.00	$ 960.00
Group 7	$1,118.00	$ 1,152.00
Group 8	$1,098.00	$ 1,131.00
Group 9	$1,508.00	$ 1,553.00