



Northern Light Home Care and Hospice Rate Schedule

Procedure Code	Home Care	Price
G0299	Skilled Nursing Services	\$ 248.00 Visit
G0151	Physical Therapy	\$ 270.00 Visit
G0152	Occupational Therapy	\$ 272.00 Visit
G0153	Speech Therapy per visit	\$ 294.00 Visit
G0155	Medical Social Worker	\$ 397.00 Visit
G0156	Home Health Aide	\$ 112.00 Visit

Procedure Code	Hospice	Price
Q5001	Routine hospice Care -first 60 days	\$ 323.00 Day
Q5001	Rountine Hospice Care- days 61+	\$ 254.00 Day
Q5001	Continuous Hospice Care	\$ 98.00 Hour
Q5005	Inpatient Respite Care	\$ 745.00 Day
Q5005	General Inpatient Care	\$ 1,678.00 Day

Procedure Code	Other Charges	Price
S9110	Telemonitoring	\$ 135.00 Month

Rates effective as of 01.01.2026