**Provider Information**

- Medicare ID: 141326
- Provider Name: HAMILTON MEMORIAL HOSPITAL
- Legacy Medicaid ID: 376019589001
- Medicaid OldID: 13023
- Parent OldID: 13023
- SMART Act Adjustment Factor: 1.000
- Trauma Level: 0
- Perinatal Level: 0
- Medicare IPPS Aggregate CCR: 0.312
- Rate Enhancement Type: Yes

**Inpatient Rates**

- IP COS 20 Acute Standardized Amount: **$3,436.26**
- IP COS 20 Acute Wage Index: 0.8486
- IP COS 20 Acute Labor Portion: 0.6200
- IP COS 20 Acute Medical Education Add-on: 0.00000
- IP COS 20 Acute Crossover Adjustment: 0.99859
- IP COS 20 Acute Outlier Fixed-Loss Amount: **$21,821.00**

- IP COS 20 Acute DRG Rate: **$3,109.31**
- IP COS 21 Psych Per Diem Rate: N/A
- IP COS 22 Rehab Per Diem Rate: N/A

**Outpatient Rates**

- OP Wage Index: 1.0000
- OP Labor Portion: 0.6000
- Eligible for High Cost Drug & Device Add-On Payments: Yes

- OP COS 24 Acute High Volume Adjustment: 0.44810
- OP COS 24 Acute Crossover Adjustment: 0.98374
- OP COS 24 Acute Standardized Amount: **$1,058.89**
- OP COS 24 Acute EAPG Conversion Factor (Base Rate): **$1,508.45**

- OP COS 27/28/29 Psych/Rehab High Volume Adjustment: N/A
- OP COS 27/28 Psych Standardized Amount: N/A
- OP COS 27/28 Psych EAPG Conversion Factor (Base Rate): N/A

- OP COS 29 Rehab Standardized Amount: N/A
- OP COS 29 Rehab EAPG Conversion Factor (Base Rate): N/A