**State of Illinois Department of Healthcare & Family Services**  
**Medicaid FFS Hospital Payment Rate Sheet**  
**Effective: July 1, 2019**

## Provider Information

- Medicare ID: 160069
- Provider Name: MERCY MEDICAL CENTER DUBUQUE
- Legacy Medicaid ID: 421437483001
- Medicaid OldID: 4011
- Parent OldID: 4011
- SMART Act Adjustment Factor: 0.965
- Trauma Level: 2
- Perinatal Level: 0
- Medicaid IPPS Aggregate CCR: 0.301
- Rate Enhancement Type: No

## Inpatient Rates

- IP COS 20 Acute Standardized Amount: $3,221.03
- IP COS 20 Acute Wage Index: 0.8726
- IP COS 20 Acute Labor Portion: 0.6200
- IP COS 20 Acute Medical Education Add-on: 0.00000
- IP COS 20 Acute Crossover Adjustment: 1.00000
- IP COS 20 Acute Outlier Fixed-Loss Amount: $21,821.00
- IP COS 20 Acute DRG Rate: $2,966.61
- IP COS 21 Psych Per Diem Rate: $371.82
- IP COS 22 Rehab Per Diem Rate: $518.71

## Outpatient Rates

- OP Wage Index: 0.8726
- OP Labor Portion: 0.6000
- Eligible for High Cost Drug & Device Add-On Payments: No
- OP COS 24 Acute High Volume Adjustment: 0.00000
- OP COS 24 Acute Crossover Adjustment: 0.98912
- OP COS 24 Acute Standardized Amount: $353.01
- OP COS 24 Acute EAPG Conversion Factor (Base Rate): $322.48
- OP COS 27/28/29 Psych/Rehab High Volume Adjustment: 0.00000
- OP COS 27/28 Psych Standardized Amount: $155.99
- OP COS 27/28 Psych EAPG Conversion Factor (Base Rate): $144.07
- OP COS 29 Rehab Standardized Amount: $71.40
- OP COS 29 Rehab EAPG Conversion Factor (Base Rate): $65.94