



Provider Information

o Medicare ID	140280
o Provider Name	TRINITY MEDICAL CENTER
o Legacy Medicaid ID	362739299001
o Medicaid OldID	18015
o Parent OldID	18015
o SMART Act Adjustment Factor	0.965
o Trauma Level	2
o Perinatal Level	II+
o Medicare IPPS Aggregate CCR	0.348
o Rate Enhancement Type	Yes

Inpatient Rates

o IP COS 20 Acute Standardized Amount	\$3,555.19
o IP COS 20 Acute Wage Index	0.9389
o IP COS 20 Acute Labor Portion	0.6200
o IP COS 20 Acute Medical Education Add-on	0.00000
o IP COS 20 Acute Crossover Adjustment	0.99859
o IP COS 20 Acute Outlier Fixed-Loss Amount	\$21,821.00
o IP COS 20 Acute DRG Rate	\$3,415.69
o IP COS 21 Psych Per Diem Rate	\$371.82
o IP COS 22 Rehab Per Diem Rate	\$701.16

Outpatient Rates

o OP Wage Index	0.9389
o OP Labor Portion	0.6000
o Eligible for High Cost Drug & Device Add-On Payments	Yes
o OP COS 24 Acute High Volume Adjustment	0.44810
o OP COS 24 Acute Crossover Adjustment	0.98374
o OP COS 24 Acute Standardized Amount	\$446.07
o OP COS 24 Acute EAPG Conversion Factor (Base Rate)	\$612.16
o OP COS 27/28/29 Psych/Rehab High Volume Adjustment	0.32180
o OP COS 27/28 Psych Standardized Amount	\$166.10
o OP COS 27/28 Psych EAPG Conversion Factor (Base Rate)	\$211.50
o OP COS 29 Rehab Standardized Amount	N/A
o OP COS 29 Rehab EAPG Conversion Factor (Base Rate)	N/A