State of Illinois Department of Healthcare & Family Services
Medicaid FFS Hospital Payment Rate Sheet effective January 1, 2016

Provider Information:

---

o Medicare ID	144039
o Provider Name	Garfield Park Hospital
o Legacy Medicaid ID	232983574003
o Medicaid OldID	3021
o SMART Act Adjustment Factor	0.965
o Trauma Level	None
o Perinatal Level	None

Inpatient Rates:

---

o IP COS 21 Psych Per Diem Rate	$839.72

Outpatient Rates:

---

o OP Wage Index	1.0324
o OP Labor Portion	0.600
o OP High Volume Adjustment	No
o OP COS 27/28 Psych Standardized Amount	$140.670
o OP COS 27/28 Psych EAPG Conversion Factor (Base Rate)	$143.40