

**State of Illinois Department of Healthcare & Family Services
Medicaid FFS Hospital Payment Rate Sheet effective January 1, 2017**

Provider Information:

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- o Medicare ID 458590
 - o Provider Name Harsha Behavioral Center Inc.
 - o Legacy Medicaid ID 261091197001
 - o Medicaid OldID 20005
 - o SMART Act Adjustment Factor 1.000
 - o Trauma Level None
 - o Perinatal Level None

Inpatient Rates:

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- o IP COS 21 Psych Per Diem Rate \$839.72
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