



### Provider Information

|                               |                           |
|-------------------------------|---------------------------|
| o Medicare ID                 | 160080                    |
| o Provider Name               | MERCY MEDICAL CTR CLINTON |
| o Legacy Medicaid ID          | 421336618005              |
| o Medicaid OldID              | 3453                      |
| o Parent OldID                | 3453                      |
| o SMART Act Adjustment Factor | 0.965                     |
| o Trauma Level                | 0                         |
| o Perinatal Level             | 0                         |
| o Medicare IPPS Aggregate CCR | 0.336                     |
| o Rate Enhancement Type       | No                        |

### Inpatient Rates

|                                             |             |
|---------------------------------------------|-------------|
| o IP COS 20 Acute Standardized Amount       | \$3,283.73  |
| o IP COS 20 Acute Wage Index                | 0.9231      |
| 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      | 1.00000     |
| o IP COS 20 Acute Outlier Fixed-Loss Amount | \$21,821.00 |
| o IP COS 20 Acute DRG Rate                  | \$3,127.17  |
| o IP COS 21 Psych Per Diem Rate             | \$371.82    |
| o IP COS 22 Rehab Per Diem Rate             | N/A         |

### Outpatient Rates

|                                                         |          |
|---------------------------------------------------------|----------|
| o OP Wage Index                                         | 0.9231   |
| o OP Labor Portion                                      | 0.6000   |
| o Eligible for High Cost Drug & Device Add-On Payments  | No       |
| o OP COS 24 Acute High Volume Adjustment                | 0.00000  |
| o OP COS 24 Acute Crossover Adjustment                  | 0.98912  |
| o OP COS 24 Acute Standardized Amount                   | \$362.84 |
| o OP COS 24 Acute EAPG Conversion Factor (Base Rate)    | \$342.33 |
| o OP COS 27/28/29 Psych/Rehab High Volume Adjustment    | N/A      |
| o OP COS 27/28 Psych Standardized Amount                | N/A      |
| o OP COS 27/28 Psych EAPG Conversion Factor (Base Rate) | N/A      |
| o OP COS 29 Rehab Standardized Amount                   | N/A      |
| o OP COS 29 Rehab EAPG Conversion Factor (Base Rate)    | N/A      |