

Washington State - Health Care Authority

Inpatient Hospital Rates - Final Medicaid Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: July 15, 2015

Last Update:

August 19, 2015

				Hospital Inpatient MEDICAID Payment Rates and Inpatient and Outpatient RCC								
Name	Type	NPI	Mcare	DRG_	Psych_	Detox_	Rehab_	Cup_	Bariatric_	Medicaid	CPE	
				Conv_Fac								OP (See
				tor	Per Diem	Per Diem	Per Diem	Per Diem	Case Rate	RCC	or	
Adventist Medical Center	Bordering_city	1801887658	380060	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Bonner General Hospital	Bordering_city	1154563963	131328	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Capital Medical Center	In_state	1841258639	500139	8,720.87	711.55	993.82	1,276.06	n/a	n/a	0.196	0.094	
Cascade Behavioral Hospital	In_state	1124456967	504011	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.325	0.156	
Cascade Valley Hospital	In_state_CPE	1073566246	500060	8,973.08	719.00	1,023.00	1,313.00	n/a	n/a	0.409	0.194	0.405
Central Washington Hospital	In_state	1306883228	500016	9,016.20	718.67	1,027.47	1,319.27	n/a	n/a	0.401	0.192	
Columbia Memorial Hospital	Bordering_city	1134146939	380026	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Deaconess Hospital	In_state	1356528269	500044	8,874.67	789.06	1,011.35	1,298.56	n/a	n/a	0.212	0.102	
Evergreen Hospital Medical Center	In_state_CPE	1033174933	500124	8,973.08	719.00	1,023.00	1,313.00	n/a	n/a	0.306	0.145	0.303
Fairfax Hospital	In_state	1053327890	504002	n/a	789.95	789.95	n/a	n/a	n/a	0.207	0.099	
Ferry County Memorial Hospital	CAH-detox	1508899816	501322	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	
Good Samaritan Hospital	In_state	1841231461	500079	8,949.11	795.96	1,019.70	1,309.77	n/a	n/a	0.220	0.106	
Good Shepherd Medical Center	Bordering_city	1295789667	381325	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Grays Harbor Community Hospital	SCH - 1.25 Rate	1154378859	500031	10,634.42	889.44	1,211.89	1,556.05	1,108.75	n/a	0.245	0.118	
Gritman Medical Center	Bordering_city	1619988144	131327	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Group Health Central Hospital	In_state	1861522088	1	8,973.47	718.67	1,022.60	1,313.02	n/a	n/a	0.328	0.157	
Harborview Medical Center	In_state_CPE	1053359729	500064	12,295.59	1,294.00	1,401.00	1,799.00	n/a	n/a	0.414	0.197	0.410
Harrison Medical Center - Harrison Bremerton	In_state	1518912609	500039	8,720.87	775.39	993.82	1,276.06	n/a	n/a	0.235	0.113	
Highline Medical Center - Main Campus	In_state	1558333682	500011	8,883.34	790.02	1,012.77	1,299.87	944.91	n/a	0.218	0.105	
Island Hospital	In_state_CPE	1710913140	500007	8,884.62	711.55	1,012.48	1,300.02	n/a	n/a	0.348	0.167	0.348
Kadlec Regional Medical Center	In_state	1972507580	500058	8,301.26	738.54	946.44	1,214.73	n/a	n/a	0.287	0.138	
Kindred Hospital	LTAC	1578632568	502002	n/a	n/a	n/a	n/a	n/a	n/a	0.341	0.164	
Klickitat Valley Hospital	CAH-detox	1386689487	501316	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	
Kootenai Medical Center	Bordering_city	1992798409	130049	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Legacy Emanuel Medical Center	Critical_Border	1831112358	380007	9,501.70	844.81	1,082.80	1,390.31	n/a	n/a	0.375	0.180	
Legacy Good Samaritan Medical Center	Bordering_city	1780608216	380017	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Legacy Salmon Creek Medical Center	In_state	1700809829	500150	8,781.58	780.79	1,000.74	1,284.94	n/a	n/a	0.324	0.156	
Lourdes Counseling Center	In_state	1548342181	504008	n/a	746.00	746.00	n/a	n/a	n/a	0.400	0.192	
Lourdes Medical Center	CAH-Rehab	1831284280	501337	n/a	n/a	n/a	1,214.77	n/a	n/a	n/a	n/a	

Washington State - Health Care Authority

Inpatient Hospital Rates - Final Medicaid Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: July 15, 2015

Last Update:

August 19, 2015

				Hospital Inpatient MEDICAID Payment Rates and Inpatient and Outpatient RCC									
Name	Type	NPI	Mcare	DRG_	Psych_	Detox_	Rehab_	Cup_	Bariatric_	RCC	Medicaid & State OP (See Notes)	CPE Cost_Factor	
				Conv_Fac									Per Diem
Madigan Army Medical Center	Federal	1841390077	2	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0.325	0.156	
Mary Bridge Children's Hospital	In_state	1306952726	503301	9,423.72	837.88	1,073.91	1,378.90	n/a	n/a	n/a	0.275	0.132	
Mid-Columbia Medical Center	Bordering_city	1306842752	380001	8,302.00	711.55	946.09	1,214.77	n/a	n/a	n/a	0.172	0.083	
Mid-Valley Hospital	CAH-detox	1255387403	501328	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	n/a	
Multicare Auburn Medical Center	In_state	1255327201	500015	8,973.47	718.67	1,022.60	1,313.02	n/a	n/a	n/a	0.204	0.098	
Navos - West Seattle Campus	In_state	1184764227	504009	n/a	789.95	789.95	n/a	n/a	n/a	n/a	0.575	0.276	
Newport Community Hospital	CAH-detox	1780778423	501310	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	n/a	
North Valley Hospital	CAH-detox	1164580700	501321	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	n/a	
Northern Idaho Advanced Care Hospital	LTAC Out of State	1023079092	132001	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0.183	0.088	
Northwest Hospital And Medical Center	In_state	1700861580	500001	8,991.91	1,088.00	1,025.00	1,316.00	n/a	n/a	n/a	0.280	0.133	
Olympic Medical Center	In_state_CPE	1306845557	500072	8,385.02	718.67	955.55	1,226.92	n/a	n/a	n/a	0.463	0.220	0.458
Oregon Health And Sciences University Hospital	Critical_Border	1609824010	380009	12,031.21	1,069.71	1,371.06	1,760.43	n/a	15,322.00	n/a	0.447	0.215	
Out of State	n/a		1 111111	8,302.00	711.55	n/a	1,123.24	n/a	n/a	n/a	0.172	0.083	
Overlake Hospital Medical Center	In_state	1861432726	500051	8,973.47	957.56	1,022.60	1,313.02	n/a	n/a	n/a	0.278	0.133	
Peacehealth Peace Island Medical Center	In_state	1487917233	501340	8,302.00	711.55	946.09	1,214.77	n/a	n/a	n/a	1.000	0.480	
Peacehealth Southwest Medical Center	In_state	1134178999	500050	9,209.53	1,424.71	1,049.50	1,347.55	n/a	n/a	n/a	0.267	0.128	
Peacehealth St. John Medical Center	In_state	1073510277	500041	8,781.58	1,293.25	1,000.74	1,284.94	n/a	n/a	n/a	0.356	0.171	
Peacehealth St. Joseph Medical Center	In_state	1487904546	500030	8,302.00	1,001.56	946.09	1,214.77	n/a	n/a	n/a	0.312	0.150	
Providence Centralia Hospital	In_state	1376624981	500019	8,352.31	711.81	951.39	1,221.66	n/a	n/a	n/a	0.226	0.108	
Providence Holy Family Hospital	In_state	1225289895	500077	8,647.86	719.00	985.00	1,265.00	n/a	n/a	n/a	0.258	0.124	
Providence Hood River Memorial Hospital	Bordering_city	1255429338	381318	8,302.00	711.55	946.09	1,214.77	n/a	n/a	n/a	0.172	0.083	
Providence Mount Carmel Hospital	CAH-detox	1003067679	501326	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	n/a	
Providence Portland Medical Center	Bordering_city	1003991845	380061	8,302.00	711.55	946.09	1,214.77	n/a	n/a	n/a	0.172	0.083	
Providence Regional Medical Center Everett	In_state	1700037801	500014	8,884.62	789.95	1,012.48	1,300.02	n/a	n/a	n/a	0.283	0.136	
Providence Sacred Heart Medical Center And Childrens	In_state	1144471715	500054	9,002.09	891.41	1,025.87	1,317.20	n/a	14,830.00	n/a	0.271	0.130	
Providence St. Joseph's Hospital	CAH-detox	1750532321	501309	n/a	n/a	946.09	n/a	n/a	n/a	n/a	0.398	n/a	
Providence St. Mary Medical Center	In_state	1386895886	500002	8,385.02	745.53	955.55	1,226.92	n/a	n/a	n/a	0.310	0.149	
Providence St. Peter Hospital	In_state	1346250594	500024	9,244.75	1,191.00	1,053.00	1,353.00	1,018.08	n/a	n/a	0.219	0.105	
Providence St. Vincent Medical Center	Bordering_city	1114015971	380004	8,302.00	711.55	946.09	1,214.77	n/a	n/a	n/a	0.172	0.083	

Washington State - Health Care Authority

Inpatient Hospital Rates - Final Medicaid Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: July 15, 2015

Last Update:

August 19, 2015

				Hospital Inpatient MEDICAID Payment Rates and Inpatient and Outpatient RCC								
Name	Type	NPI	Mcare	DRG_	Psych_	Detox_	Rehab_	Cup_	Bariatric_	Medicaid	CPE	
				Conv_Fac								OP (See
				tor	Per Diem	Per Diem	Per Diem	Per Diem	Case Rate	RCC	Notes)	or
Regional Hospital For Respiratory And Complex Care	LTAC	1245242486	502001	n/a	n/a	n/a	n/a	n/a	n/a	0.456	0.219	
Samaritan Hospital	In_state_CPE	1902818883	500033	8,385.02	718.67	955.55	1,226.92	n/a	n/a	0.336	0.160	0.333
Seattle Cancer Care Alliance	In_state	1164493847	500138	12,545.64	n/a	n/a	n/a	n/a	n/a	0.464	0.223	
Seattle Children's Hospital	In_state	1467536276	503300	12,922.22	1,872.00	1,473.00	1,891.00	n/a	n/a	0.371	0.176	
Shriners Hospital For Children - Portland	Bordering_city	1982793139	383300	8,302.00	711.55	946.09	1,214.77	n/a	n/a	0.172	0.083	
Shriners Hospital For Children - Spokane	In_state	1992848857	503302	8,647.86	719.00	985.00	n/a	n/a	n/a	0.487	0.234	
Skagit Valley Hospital	In_state_CPE	1053357244	500003	9,028.62	1,070.19	1,028.61	1,320.66	n/a	n/a	0.279	0.134	0.279
Skyline Hospital	CAH-detox	1760455687	501315	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	
St. Anthony Hospital	In_state	1447406699	500151	8,908.87	792.00	1,014.75	1,303.83	n/a	n/a	0.226	0.108	
St. Clare Hospital	In_state	1689672693	500021	8,908.87	792.00	1,014.75	1,303.83	n/a	n/a	0.210	0.101	
St. Francis Hospital	In_state	1093713091	500141	9,231.86	1,285.00	1,052.00	1,351.00	n/a	n/a	0.219	0.104	
St. Joseph Medical Center	In_state	1952309098	500108	8,958.96	1,271.75	1,020.95	1,310.89	n/a	n/a	0.222	0.107	
St. Joseph Regional Medical Center	Critical_Border	1225090954	130003	8,385.02	718.67	874.80	1,123.24	n/a	n/a	0.355	0.170	
St. Luke's Rehabilitation Institute	In_state	1497752091	503025	n/a	n/a	975.73	1,252.83	n/a	n/a	0.527	0.253	
Swedish Cherry Hill Campus	In_state	1356496582	500025	9,910.08	1,788.93	1,129.59	1,450.35	n/a	n/a	0.215	0.103	
Swedish Edmonds Campus	In_state	1033107214	500026	8,973.08	1,339.00	1,023.00	1,313.00	n/a	n/a	0.265	0.127	
Swedish First Hill Campus	In_state	1306992151	500027	9,677.84	860.48	1,102.88	1,416.08	1,060.50	n/a	0.241	0.116	
Swedish Issaquah Campus	In_state	1851686059	500152	8,973.08	860.00	1,023.00	n/a	n/a	n/a	0.300	0.144	
Tacoma General Hospital	In_state	1366556227	500129	9,267.13	823.96	1,056.07	1,355.99	n/a	n/a	0.210	0.101	
Three Rivers Hospital	CAH-detox	1356305395	501324	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	
Toppenish Community Hospital	In_state	1164461455	500037	8,385.02	718.67	955.55	1,226.92	n/a	n/a	0.240	0.115	
Trios Health	In_state_CPE	1255367611	500053	8,385.08	745.53	955.55	1,226.92	n/a	n/a	0.341	0.162	0.338
University Of Washington Medical Center	In_state_CPE	1326002049	500008	13,382.28	1,325.00	1,525.00	1,958.00	n/a	15,475.22	0.439	0.211	0.439
Valley General Hospital	In_state_CPE	1013074061	500084	8,973.08	798.00	1,023.00	1,313.00	954.45	n/a	0.430	0.204	0.426
Valley Hospital	In_state	1538345251	500119	8,573.50	711.55	977.03	1,254.49	n/a	n/a	0.207	0.099	
Valley Medical Center	In_state_CPE	1649209230	500088	9,424.21	838.00	1,074.00	1,379.00	n/a	n/a	0.274	0.132	0.274
Vibra Specialty Hospital Of Portland	LTAC_Bordering_city	1558436006	382004	n/a	n/a	n/a	n/a	n/a	n/a	0.183	n/a	
Virginia Mason Medical Center	In_state	1801851258	500005	10,748.36	711.81	1,224.63	1,573.11	n/a	n/a	0.433	0.208	
Walla Walla General Hospital	In_state	1760466114	500049	8,301.26	711.81	946.44	1,214.73	n/a	n/a	0.371	0.178	

Washington State - Health Care Authority

Inpatient Hospital Rates - Final Medicaid Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: July 15, 2015

Last Update:

August 19, 2015

Hospital Inpatient MEDICAID Payment Rates and Inpatient and Outpatient RCC												
Name	Type	NPI	Mcare	DRG_ Conv_Fac tor	Psych_ Per Diem	Detox_ Per Diem	Rehab_ Per Diem	Cup_ Per Diem	Bariatric_ Case Rate	RCC	Medicaid & State OP (See Notes)	CPE Cost_Fact or
Wenatchee Valley Hospital	In_state	1306183314	500148	8,385.12	719.00	956.00	1,227.00	n/a	n/a	0.400	0.192	
Whitman Hospital And Medical Center	CAH-detox	1922009448	501327	n/a	n/a	946.09	n/a	n/a	n/a	n/a	n/a	
Yakima Regional Medical And Cardiac Center	In_state	1043241508	500012	8,638.02	711.55	984.38	1,263.93	n/a	n/a	0.172	0.083	
Yakima Valley Memorial Hospital	In_state	1053373480	500036	8,430.95	1,010.54	960.78	1,233.64	n/a	n/a	0.399	0.192	

Notes:

- \* Rates reflect July 2014 rebasing and quality incentive adjustments (for qualifying hospitals)
- \* The in-state average ratio of cost to charges is 0.325. The instate average outpatient rate is 0.156
- \* The administrative day rate is \$198.94. Long Term Acute Care per diem is \$902.79, military subsistence is \$17.65
- \* Hospital rates are for non-critical access hospitals
- \*For critical access hospitals (CAH) distinct parts (detox,psych, rehab) rates are shown above- for CAH rates, see HCA's website - Hospital Reimbursement Information-Critical Access Hospital
- \* As of January 1, 2014 an additional payment of \$8.10 will be added to hospital payments for all newborns. This will offset the new fee on hospitals to fund screening of newborn babies for severe combined immunodeficiency
- \* Inpatient rate determination, payment methodology are described in the Inpatient Medicaid Provider Guide and WAC 182-550
- \* As of 7/1/2014 outlier threshold is \$40,000 plus the DRG allowed amount; outlier percents are by DRG SOI: 1 & 2 are 0.80; 3 & 4 are 0.95
- \*For CPE Hospitals- the CPE Cost Factor is used to pay all inpatient FFS claims; Medicaid and State-administered claims. DRG and per diem rates are used for the hold harmless calculation
- \*The CPE cost factor is utilized only during FFS inpatient CPE preliminary payments
- \*Cascade Behavioral Hospital added August 2014

Washington State - Health Care Authority

Inpatient Hospital Rates -Final State Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: August 3, 2015

Last Update:

July 15, 2015

Name	Type	NPI	Mcare Prov	Hospital Inpatient STATE Payment Rates and STATE RCC						
				DRG_ Conv_Factor	Psych_ Per Diem	Detox_ Per Diem	Rehab_ Per Diem	Cup_ Per Diem	Bariatric_ Case Rate	RCC
Adventist Medical Center	Bordering_city	1801887658	380060	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Bonner General Hospital	Bordering_city	1154563963	131328	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Capital Medical Center	In_state	1841258639	500139	1,706.67	604.49	405.89	521.15	n/a	n/a	0.081
Cascade Behavioral Hospital	In_state	1124456967	504011	2,032.91	605.10	488.83	627.65	n/a	n/a	0.169
Cascade Valley Hospital	In_state_CPE	1073566246	500060	2,305.63	611.72	579.04	743.19	n/a	n/a	0.231
Central Washington Hospital	In_state	1306883228	500016	2,459.65	611.17	679.36	872.29	n/a	n/a	0.267
Columbia Memorial Hospital	Bordering_city	1134146939	380026	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Deaconess Hospital	In_state	1356528269	500044	2,507.56	671.14	580.47	745.31	n/a	n/a	0.123
Evergreen Hospital Medical Center	In_state_CPE	1033174933	500124	1,668.53	611.27	411.72	528.43	n/a	n/a	0.123
Fairfax Hospital	In_state	1053327890	504002	n/a	671.67	407.98	n/a	n/a	n/a	0.108
Ferry County Memorial Hospital	CAH-detox	1508899816	501322	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Good Samaritan Hospital	In_state	1841231461	500079	1,890.29	677.27	548.88	705.01	n/a	n/a	0.119
Good Shepherd Medical Center	Bordering_city	1295789667	381325	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Grays Harbor Community Hospital	SCH - 1.25 Rate	1154378859	500031	2,919.79	756.09	792.65	1,017.75	725.19	n/a	0.162
Gritman Medical Center	Bordering_city	1619988144	131327	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Group Health Central Hospital	In_state	1861522088	1	2,197.33	611.06	528.13	678.12	n/a	n/a	0.171
Harborview Medical Center	In_state_CPE	1053359729	500064	2,806.12	1,101.13	774.94	995.09	n/a	n/a	0.229
Harrison Medical Center - Harrison Bremerton	In_state	1518912609	500039	2,094.74	659.07	590.11	757.70	n/a	n/a	0.141
Highline Medical Center - Main Campus	In_state	1558333682	500011	2,212.75	671.42	572.25	734.47	533.90	n/a	0.124
Island Hospital	In_state_CPE	1710913140	500007	1,386.69	605.07	415.51	533.52	n/a	n/a	0.144
Kadlec Regional Medical Center	In_state	1972507580	500058	1,996.02	627.96	510.37	655.05	n/a	n/a	0.156
Kindred Hospital	LTAC	1578632568	502002	n/a	n/a	n/a	n/a	n/a	n/a	0.184
Klickitat Valley Hospital	CAH-detox	1386689487	501316	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Kootenai Medical Center	Bordering_city	1992798409	130049	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Legacy Emanuel Medical Center	Critical_Border	1831112358	380007	2,326.68	718.32	924.62	1,187.21	n/a	n/a	0.195
Legacy Good Samaritan Medical Center	Bordering_city	1780608216	380017	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Legacy Salmon Creek Medical Center	In_state	1700809829	500150	2,288.49	664.14	578.35	742.59	n/a	n/a	0.189
Lourdes Counseling Center	In_state	1548342181	504008	n/a	634.57	445.18	n/a	n/a	n/a	0.241
Lourdes Medical Center	CAH-Rehab	1831284280	501337	n/a	n/a	n/a	617.75	n/a	n/a	n/a
Madigan Army Medical Center	Federal	1841390077	2	n/a	n/a	n/a	n/a	n/a	n/a	0.169
Mary Bridge Children's Hospital	In_state	1306952726	503301	2,214.57	712.62	532.28	683.45	n/a	n/a	0.138

Washington State - Health Care Authority

Inpatient Hospital Rates -Final State Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: August 3, 2015

Last Update:

July 15, 2015

Name	Type	NPI	Mcare Prov	Hospital Inpatient STATE Payment Rates and STATE RCC						
				DRG_Conv_Factor	Psych_Per Diem	Detox_Per Diem	Rehab_Per Diem	Cup_Per Diem	Bariatric_Case Rate	RCC
Mid-Columbia Medical Center	Bordering_city	1306842752	380001	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Mid-Valley Hospital	CAH-detox	1255387403	501328	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Multicare Auburn Medical Center	In_state	1255327201	500015	1,483.03	611.15	530.16	680.72	n/a	n/a	0.107
Navos - West Seattle Campus	In_state	1184764227	504009	n/a	671.86	537.97	n/a	n/a	n/a	0.395
Newport Community Hospital	CAH-detox	1780778423	501310	n/a	n/a	488.62	n/a	n/a	n/a	n/a
North Valley Hospital	CAH-detox	1164580700	501321	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Northern Idaho Advanced Care Hospital	LTAC Out of State	1023079092	132001	n/a	n/a	n/a	n/a	n/a	n/a	0.095
Northwest Hospital And Medical Center	In_state	1700861580	500001	1,929.89	925.81	513.11	658.79	n/a	n/a	0.141
Olympic Medical Center	In_state_CPE	1306845557	500072	2,124.76	610.85	685.79	880.55	n/a	n/a	0.332
Oregon Health And Sciences University Hospital	Critical_Border	1609824010	380009	2,946.08	909.54	1,170.77	1,503.26	n/a	13,083.75	0.233
Overlake Hospital Medical Center	In_state	1861432726	500051	1,818.23	813.88	416.63	534.95	n/a	n/a	0.114
Peacehealth Peace Island Medical Center	In_state	1487917233	501340	2,032.91	605.01	488.62	627.38	n/a	n/a	0.521
Peacehealth Southwest Medical Center	In_state	1134178999	500050	2,370.70	1,212.53	589.88	757.40	n/a	n/a	0.151
Peacehealth St. John Medical Center	In_state	1073510277	500041	2,923.63	1,100.24	835.82	1,073.18	n/a	n/a	0.205
Peacehealth St. Joseph Medical Center	In_state	1487904546	500030	2,272.49	851.84	573.02	735.76	n/a	n/a	0.191
Providence Centralia Hospital	In_state	1376624981	500019	2,266.37	605.03	564.91	725.39	n/a	n/a	0.135
Providence Holy Family Hospital	In_state	1225289895	500077	2,611.79	611.56	558.51	717.27	n/a	n/a	0.148
Providence Hood River Memorial Hospital	Bordering_city	1255429338	381318	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Providence Mount Carmel Hospital	CAH-detox	1003067679	501326	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Providence Portland Medical Center	Bordering_city	1003991845	380061	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Providence Regional Medical Center Everett	In_state	1700037801	500014	2,112.99	671.85	526.92	676.56	n/a	n/a	0.149
Providence Sacred Heart Medical Center And Children	In_state	1144471715	500054	2,266.40	757.68	566.43	727.29	n/a	8,188.31	0.151
Providence St. Joseph's Hospital	CAH-detox	1750532321	501309	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Providence St. Mary Medical Center	In_state	1386895886	500002	3,748.25	633.91	493.51	633.65	n/a	n/a	0.162
Providence St. Peter Hospital	In_state	1346250594	500024	2,340.16	1,013.15	524.03	673.33	506.66	n/a	0.126
Providence St. Vincent Medical Center	Bordering_city	1114015971	380004	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a
Regional Hospital For Respiratory And Complex Care	LTAC	1245242486	502001	n/a	n/a	n/a	n/a	n/a	n/a	0.238
Samaritan Hospital	In_state_CPE	1902818883	500033	1,856.67	611.05	394.99	507.16	n/a	n/a	0.139
Seattle Cancer Care Alliance	In_state	1164493847	500138	1,351.54	n/a	n/a	n/a	n/a	n/a	0.159
Seattle Children's Hospital	In_state	1467536276	503300	2,391.77	1,591.83	605.97	777.93	n/a	n/a	0.152
Shriners Hospital For Children - Portland	Bordering_city	1982793139	383300	2,032.91	605.10	488.62	627.38	n/a	n/a	n/a

Washington State - Health Care Authority

Inpatient Hospital Rates -Final State Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: August 3, 2015

Last Update:

July 15, 2015

Name	Type	NPI	Mcare Prov	Hospital Inpatient STATE Payment Rates and STATE RCC						
				DRG_Conv_Factor	Psych_Per Diem	Detox_Per Diem	Rehab_Per Diem	Cup_Per Diem	Bariatric_Case Rate	RCC
Shriners Hospital For Children - Spokane	In_state	1992848857	503302	2,117.60	611.35	508.71	n/a	n/a	n/a	0.254
Skagit Valley Hospital	In_state_CPE	1053357244	500003	2,715.13	910.73	586.30	752.76	n/a	n/a	0.160
Skyline Hospital	CAH-detox	1760455687	501315	n/a	n/a	488.62	n/a	n/a	n/a	n/a
St. Anthony Hospital	In_state	1447406699	500151	1,751.95	672.81	468.76	602.29	n/a	n/a	0.105
St. Clare Hospital	In_state	1689672693	500021	2,634.71	673.51	561.29	721.20	n/a	n/a	0.117
St. Francis Hospital	In_state	1093713091	500141	1,705.16	1,091.44	463.02	594.62	n/a	n/a	0.096
St. Joseph Medical Center	In_state	1952309098	500108	1,957.89	1,081.65	451.37	579.56	n/a	n/a	0.099
St. Joseph Regional Medical Center	Critical_Border	1225090954	130003	2,053.24	611.06	747.01	959.16	n/a	n/a	0.185
St. Luke's Rehabilitation Institute	In_state	1497752091	503025	n/a	n/a	639.34	820.90	n/a	n/a	0.348
Swedish Cherry Hill Campus	In_state	1356496582	500025	2,424.44	1,520.94	616.98	792.18	n/a	n/a	0.118
Swedish Edmonds Campus	In_state	1033107214	500026	2,477.03	1,138.41	558.76	717.16	n/a	n/a	0.146
Swedish First Hill Campus	In_state	1306992151	500027	2,004.28	731.96	476.66	612.03	458.35	n/a	0.105
Swedish Issaquah Campus	In_state	1851686059	500152	1,349.55	730.38	324.51	n/a	n/a	n/a	0.096
Tacoma General Hospital	In_state	1366556227	500129	2,105.04	700.42	562.17	721.82	n/a	n/a	0.113
Three Rivers Hospital	CAH-detox	1356305395	501324	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Toppenish Community Hospital	In_state	1164461455	500037	1,788.57	611.61	414.89	532.70	n/a	n/a	0.105
Trios Health	In_state_CPE	1255367611	500053	1,989.70	634.36	514.34	660.41	n/a	n/a	0.184
University Of Washington Medical Center	In_state_CPE	1326002049	500008	2,410.52	1,126.22	654.57	840.42	n/a	6,642.37	0.190
Valley General Hospital	In_state_CPE	1013074061	500084	2,575.91	678.52	528.34	678.11	492.93	n/a	0.222
Valley Hospital	In_state	1538345251	500119	2,227.34	605.31	548.18	703.85	n/a	n/a	0.117
Valley Medical Center	In_state_CPE	1649209230	500088	1,841.14	712.77	471.64	605.57	n/a	n/a	0.121
Vibra Specialty Hospital Of Portland	LTAC_Bordering_city	1558436006	382004	n/a	n/a	n/a	n/a	n/a	n/a	0.095
Virginia Mason Medical Center	In_state	1801851258	500005	1,832.26	605.28	489.23	628.44	n/a	n/a	0.174
Walla Walla General Hospital	In_state	1760466114	500049	3,386.44	605.24	488.79	627.36	n/a	n/a	0.193
Wenatchee Valley Hospital	In_state	1306183314	500148	3,490.55	611.35	493.73	633.70	n/a	n/a	0.208
Whitman Hospital And Medical Center	CAH-detox	1922009448	501327	n/a	n/a	488.62	n/a	n/a	n/a	n/a
Yakima Regional Medical And Cardiac Center	In_state	1043241508	500012	1,772.46	604.79	438.13	562.56	n/a	n/a	0.077
Yakima Valley Memorial Hospital	In_state	1053373480	500036	2,090.30	859.85	554.30	711.72	n/a	n/a	0.232

Notes:

\* Rates reflect July 2014 rebasing and quality incentive increases (for qualifying hospitals)

Washington State - Health Care Authority

Inpatient Hospital Rates -Final State Rates\_Assessment Program

Effective August 1, 2015

See Notes related to rates

First Posted: August 3, 2015

Last Update:

July 15, 2015

Hospital Inpatient STATE Payment Rates and STATE RCC										
Name	Type	NPI	Mcare Prov	DRG_ Conv_Factor	Psych_ Per Diem	Detox_ Per Diem	Rehab_ Per Diem	Cup_ Per Diem	Bariatric_ Case Rate	RCC

Name	Type	NPI	Mcare Prov	DRG_ Conv_Factor	Psych_ Per Diem	Detox_ Per Diem	Rehab_ Per Diem	Cup_ Per Diem	Bariatric_ Case Rate	RCC
------	------	-----	------------	---------------------	--------------------	--------------------	--------------------	------------------	-------------------------	-----

\* The in-state average ratio of cost to charges is 0.325. The instate average outpatient rate is 0.156

\* The administrative day rate is \$198.94. Long Term Acute Care per diem is \$902.79, military subsistence is \$17.65

\* Hospital rates are for non-critical access hospitals

\*For critical access hospitals (CAH) distinct parts (detox,psych, rehab) rates are shown above- for CAH rates, see HCA's website - Hospital Reimbursement Information-Critical Access Hospital

\* As of January 1, 2014 an additional payment of \$8.10 will be added to hospital payments for all newborns. This will offset the new fee on hospitals to fund screening of newborn babies for severe combined immunodeficiency (SCID).

\* Inpatient rate determination, payment methodology are described in the Inpatient Medicaid Provider Guide and WAC 182-550

\* As of 7/1/2014 outlier threshold is \$40,000 plus the DRG allowed amount; outlier percents are by DRG SOI: 1 & 2 are 0.80; 3 & 4 are 0.95

\* Wenatchee NPIs prior to 7/21/2013: 1215956941 and 1649383993; on or after that is 1295071520, 1750627089, and 1306183314

\*For CPE Hospitals- the CPE Cost Factor is used to pay all inpatient FFS claims; Medicaid and State-administered claims. DRG and per diem rates are used for the hold harmless calculation

\*The CPE cost factor is utilized only during FFS inpatient CPE preliminary payments

\*Cascade Behavioral Hospital added August 2014