

Negotiated Rates by Service and Payor

Inpatient

For Commercial products, our DRG (Diagnosis Related Group) rate is typically 100% of our current Medicare case neutral rate.
 For Medicaid Managed Care products our DRG (Diagnosis Related Group) rate ranges from 100% to 120% of our current NYS Medicaid base case rate. Beacon and Value Options are reimbursed based on a Per Diem.
 For Medicare Managed products our DRG (Diagnosis Related Group) rate ranges from 93% to 100% of our current Medicare blended case rate.

Emergency Room

For Commercial products, our rate ranges from \$225 to \$1,400 based on the payor and level of service.
 For Medicaid products our rates are based on the APG (Ambulatory Patient Group). The actual payor rate ranges from 100% to 143% of the current Medicaid APG rate.
 For Medicare products our APC (Ambulatory Payment Classification) rate is 100% of our current Medicare rate.

Outpatient

For Commercial products, our rate ranges from to based on the payor and the service.
 For Medicaid products our rates are based on the APG (Ambulatory Patient Group). The actual payor rate ranges from 100% to 125% of the current Medicaid APG rate.
 For Medicare products our DRG (Diagnosis Related Group) rate ranges from 95% to 100% of our current Medicare case neutral rate.

Product:

| Payor | Commerical | Medicaid * | Medicare |
|-----------------|------------|------------|----------|
| 1199 | X | | |
| Aetna | X | | |
| Affinity | | X | X |
| Beacon | | X | |
| Cigna | X | | |
| Elderplan | | X | X |
| Emblem | X | X | X |
| Empire BX | X | | X |
| The Empire Plan | X | | |
| Fidelis | | X | X |
| Healthfirst | | X | X |
| Healthplus | | X | |
| Oxford | X | | |
| TriCare | X | | X |
| UHC | X | X | X |
| Value Options | | X | |
| Wellcare | | X | |
| Magnacare - TPA | N/A | N/A | N/A |
| Multiplan - TPA | N/A | N/A | N/A |

* May include Child Plus and Essential Plans

The current NYS Medicaid base case rate is \$7,766.71
 The current Medicare blended case rate is \$7,403,05
 Patient responsibility is determined by the insurance payor based on the benefits as outlined in your policy