Medicare

Provider Reimbursement Manual - Part 1
Chapter 22, Determination of Cost of Services to Beneficiaries

Department of Health & Human Services (DHHS)
Centers for Medicare & Medicaid Services (CMS)

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HEADER SECTION NUMBERS	PAGES TO INSERT	PAGES TO DELETE
2231 (Cont.) – 2231 (Cont.)	22-81 (1 p.)	

NEW/REVISED MATERIAL--*EFFECTIVE DATE: For services furnished on or after January 1, 2013 and for services furnished on or after January 1, 2014*

Section 2231, Regional Medicare Swing-Bed-Rates, adds Table 24 and 25 to update the Medicare Payment Rates for routine SNF-type services by swing-bed hospitals during calendar years 2013 and 2014. These rates should be used to carve out swing-bed costs on the hospital cost report.

DISCLAIMER: The revision date and transmittal number apply to the redlined *italicized material* only. Any other material was previously published and remains unchanged.

TABLE 24

Medicare Swing-Bed SNF Rates – For Services Furnished During CALENDAR Year 2013

Region	*Routine Payment*
1	*234.06*
2	*217.31*
3	*201.32*
4	*197.90*
5	*175.53*
6	*186.91*
7	*171.70*
8	*204.98*
9	*222.35*

TABLE 25

Medicare Swing-Bed SNF Rates – For Services Furnished During CALENDAR Year 2014

Region	*Routine Payment*
1	*239.51*
2	*222.37*
3	*206.01*
4	*202.51*
5	*179.62*
6	*191.26*
7	*175.70*
8	*209.75*
9	*227.53*