

Eleanor Slater Hospital Rates

Interim SFY 2019

	SFY 2019 Interim Rates
Rate 1: Medicaid/ with Medicare A, B, and D	\$1,656.67
Rate 2: Medicaid/ with Medicare Part B only	\$1,585.58
Rate 3: Medicaid with Medicare Part D only	\$1,597.76
Rate 4: Medicaid, with Medicare B & D	\$1,526.67

*Rates are reflected as a per deim.

*Rates are not reflective of any Benton Facility costs.