



NEW YORK STATE DEPARTMENT OF HEALTH

OFFICE OF HEALTH INSURANCE PROGRAMS

OASAS CERTIFIED INPATIENT CHEMICAL DEPENDENCY DETOX PER DIEM RATES

Effective 1/1/2020 - 12/31/2020

WORKERS' COMPENSATION - NO FAULT RATE SCHEDULE

OPCERT	HOSPITAL NAME	MMD w or w/o OBS days (operating cost) (4800)	MSIW w/o OBS days (operating cost) (4801)	MSIW w 1 OBS day (operating cost) (4802)	MSIW w 2 OBS days (operating cost) (4803)	Detox Capital Cost (4804)
7002001	BELLEVUE HOSPITAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$183.51
3535001	BON SECOURS COMMUNITY HOSP	\$905.25	\$678.94	\$678.94	\$678.94	\$45.95
7000001	BRONXCARE HOSPITAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$70.50
7001003	BROOKLYN HOSPITAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$205.09
7001009	CONEY ISLAND HOSPITAL	\$1,068.34	\$801.26	\$801.26	\$801.26	\$81.77
1401005	ERIE COUNTY MEDICAL CENTER	\$995.93	\$746.95	\$746.95	\$746.95	\$69.49
7003001	FLUSHING HOSPITAL MED CTR	\$1,068.34	\$801.26	\$801.26	\$801.26	\$9.84
4329000	GOOD SAMARITAN / SUFFERN	\$905.25	\$678.94	\$678.94	\$678.94	\$55.55
7002009	HARLEM HOSPITAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$202.96
5501000	HEALTHALLIANCE HOSP MARYS AVE CAMPUS	\$905.25	\$678.94	\$678.94	\$678.94	\$34.30
7001046	INTERFAITH MEDICAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$61.12
7000002	JACOBI MEDICAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$61.72
7001016	KINGS COUNTY HOSPITAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$346.17
7002021	METROPOLITAN HOSPITAL CENTER	\$1,068.34	\$801.26	\$801.26	\$801.26	\$68.90
5957001	MID HUDSON VALLEY DIV OF WMC	\$905.25	\$678.94	\$678.94	\$678.94	\$121.53
4324000	MONTEFIORE NYACK HOSPITAL	\$905.25	\$678.94	\$678.94	\$678.94	\$47.21
7002002	MOUNT SINAI BETH ISRAEL	\$1,068.34	\$801.26	\$801.26	\$801.26	\$111.95
7002032	MOUNT SINAI MORNINGSIDE	\$1,068.34	\$801.26	\$801.26	\$801.26	\$786.26
2950002	NASSAU UNIV MED CTR	\$846.22	\$634.67	\$634.67	\$634.67	\$37.22
7000014	SBH HEALTH SYSTEM	\$1,068.34	\$801.26	\$801.26	\$801.26	\$129.09
5149001	ST CHARLES HOSPITAL	\$846.22	\$634.67	\$634.67	\$634.67	\$57.45
5907001	ST JOHNS RIVERSIDE HOSPITAL	\$905.25	\$678.94	\$678.94	\$678.94	\$8.94
0101004	ST PETERS HOSPITAL	\$624.64	\$468.48	\$468.48	\$468.48	\$22.42
7004003	STATEN ISLAND UNIV HOSP	\$1,068.34	\$801.26	\$801.26	\$801.26	\$150.06
5151001	STONY BROOK EASTERN LONG ISLAND	\$846.22	\$634.67	\$634.67	\$634.67	\$64.68
7001045	WOODHULL MEDICAL & MENTAL HEALTH CTR	\$1,068.34	\$801.26	\$801.26	\$801.26	\$53.56
MMD = Medically Managed Detox						
MSIW = Medically Supervised Inpatient Withdrawal						
OBS = Observation						