

Daily Rate	\$5,750.00									
Facility	Payor	TE (Acute Inpatient)	Inpatient Hospitalization	Outpatient P	REHAB	PRTF	IP	OP	Bridge	23 Hr Obser
Sunrise	Aetna- Commercial	\$883.00	\$440.00	\$225.00	N/A	UNSURE	\$883.00	\$225.00	UNSURE	UNSURE
Sunrise	Aetna- Medicare	DRG		97151- \$27.32	N/A	UNSURE	DRG	97151- \$27.32	UNSURE	UNSURE
Sunrise	Aetna Medicaid	\$1,515.59			N/A	UNSURE	\$1,515.59		UNSURE	UNSURE
Sunrise	er Health-Ohio Ris	\$1,515.59		90853- \$296.43; 9	N/A	UNSURE	\$1,515.59	90853- \$296.43; 9	UNSURE	UNSURE
Sunrise	na Better Health- d	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	nthem- Commercial	\$725.00	\$275.00	\$155.00	N/A	UNSURE	\$725.00	\$155.00	UNSURE	UNSURE
Sunrise	Anthem- Medicare	DRG	Not reimbursed	Not reimbursed	N/A	UNSURE	DRG	Not reimbursed	UNSURE	UNSURE
Sunrise	Anthem-Medicaid	\$1,515.59			N/A	UNSURE	\$1,515.59		UNSURE	UNSURE
Sunrise	Bright Health	not contracted								
Sunrise	mmercial Ambetter	DRG			N/A	UNSURE	DRG		Unsure	Unsure
Sunrise	Buckeye Medicare	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	Buckeye-Medicaid	\$1,515.59		90853- \$296.43; 9	N/A	UNSURE	\$1,515.59	90853- \$296.43; 9	UNSURE	UNSURE
Sunrise	BWC	not contracted								
Sunrise	reSource- MKTPLA	DRG			N/A	UNSURE	DRG		Unsure	Unsure
Sunrise	reSource-MEDICAF	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	CareSource- DUAL	DRG		90853- \$296.44	N/A	UNSURE	DRG	90853- \$296.43	UNSURE	UNSURE
Sunrise	areSource- Medica	\$1,515.59		90853- \$296.43; H	N/A	UNSURE	\$1,515.59	90853- \$296.43; H	UNSURE	UNSURE
Sunrise	Humana Medicare	DRG		90853- \$296.43; 9	N/A	UNSURE	DRG	90853- \$296.43; 9	UNSURE	UNSURE
Sunrise	Humana Medicaid	\$1,515.59		H2020-HE-AJ- \$20	N/A	UNSURE	\$1,515.59	H2020-HE-AJ- \$20	UNSURE	UNSURE
Sunrise	eridian- Commerci	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	Meridian- Medicare	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	MMO-Commercial	\$850.00	\$500.00	\$240.00	N/A	UNSURE	\$850.00	\$240.00	UNSURE	UNSURE
Sunrise	MMO- Medicare	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	Molina- MKTPLACE	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	Molina- Medicare	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	Molina- Medicaid	\$1,515.59			N/A	UNSURE	\$1,515.59		UNSURE	UNSURE
Sunrise	aramount- Commerc	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	aramount-Medicar	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	aramount- Medical	\$1,515.59			N/A	UNSURE	\$1,515.59		UNSURE	UNSURE
Sunrise	Health Plan- Comm	\$800.00	\$262.00	\$150.00	N/A	UNSURE	\$800.00	\$150.00	UNSURE	UNSURE
Sunrise	Health Plan- Medi	DRG			N/A	UNSURE	DRG		UNSURE	UNSURE
Sunrise	Valor Health Plan	Not contracted							UNSURE	UNSURE