

N:\Templates\HC\PDPM Calc 10-1-23 Rate.xlsm\Input

Facility Name

Provider #

[Redacted] **must enter for VBP adj to work**

**Instructions:**

**Enter Facility Name and Provider #. Provider # is required if you want VBP adjustment. Then, select applicable state and county from the drop down box**

Select State and County in drop down below:

\*\*\*\*\* **must select** \*\*\*\*\*

OH-Allen

CBSA # 30620

CBSA Name Lima, OH

Urban or Rural	Urban MSA	Urban CBSA	URBAN CBSA 10/14	Urban CBSA 10/20
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URBAN or RURAL test	True	MSA	True	CBSA	True	CBSA 10/14	TRUE	CBSA 10/20
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OHIO or NOT test FALSE

Lookup Value 2046

CBSA/MSA Adjustment	10/1/2016	10/1/2017	10/1/2018	10/1/2019	10/1/2020	10/1/2021	10/1/2022	10/1/2023
	0.9004	0.9203	0.882	0.8701	0.8635	0.8291	0.8433	0.8309
		2.2%	-4.2%	-1.3%	-0.8%	-4.0%	1.7%	-1.5%

	<b>10/1/2016</b>	<b>10/1/2017</b>	<b>10/1/2018</b>	<b>10/1/2019</b>	<b>10/1/2020</b>	<b>10/1/2021</b>	<b>10/1/2022</b>	<b>10/1/2023</b>
Labor Related Portion	0.68800	0.70800	0.70500	0.70900	0.71300	0.70400	0.70800	0.71100
Non-Labor Related Portion	0.31200	0.29200	0.29500	0.29100	0.28700	0.29600	0.29200	0.28900