

Outlier Thresholds and Payment Percentage

Year	Hospital Multiple Threshold	Community Mental Health Center (CMHC) Multiple Threshold***	Fixed Dollar Threshold	Payment Percentage
August 1, 2000 through December 31, 2000*	2.5	N/A	\$0	75 percent
2001*	2.5	N/A	\$0	75 percent
2002**	3.0	N/A	\$0	50 percent
2003	2.75	N/A	\$0	45 percent
2004	2.6	3.65	\$0	50 percent
2005	1.75	3.5	\$1175	50 percent
2006	1.75	3.4	\$1250	50 percent
2007	1.75	3.4	\$1825	50 percent
2008	1.75	3.4	\$1575	50 percent
2009	1.75	3.4	\$1800	50 percent
2010	1.75	3.4	\$2175	50 percent
2011	1.75	3.4	\$2025	50 percent
2012	1.75	3.4	\$1900	50 percent

* Years in which the outlier payment was made per claim rather than per separately paid service.

** Payment made per claim until April 1, 2002, at which point outlier payments were made on a service basis.

*** CMS determines CMHC eligibility for outlier payments using only a multiple threshold. CMS used the hospital multiple threshold for CMHCs until 2004, when a specific CMHC multiple threshold was established. Beginning in CY 2010, CMS determined CMHC eligibility for outlier payments for either level of Partial Hospitalization using the payment rate for the higher level APC applicable to CMHCs.

**OPPS Rural Sole Community Hospital and Essential Access Community Hospital
Adjustment ***

Year	Rural Adjustment Payment Percentage
2000-2005	N/A
2006	7.1 percent
2007	7.1 percent
2008	7.1 percent
2009	7.1 percent
2010	7.1 percent
2011	7.1 percent
2012	7.1 percent

* The rural SCH and EACH payment adjustment excludes drugs, biologicals, items and services paid at charges reduced to cost, and services paid under the pass-through payment policy in accordance with section 1833(t)(13)(B) of the Act, as added by section 411 of Pub. L. 108-173.