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State/Territory Name: Arizona

State Plan Amendment (SPA) #: 19-0007

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, MD 21244-1850



Financial Management Group

May 13, 2020

Jami Snyder, Director Arizona Health Care Cost Containment System 801 E. Jefferson Phoenix, AZ 85034

RE: Arizona SPA 19-0007

Dear Ms. Snyder:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 19-0007. This amendment, effective September 30, 2019, updates the Arizona disproportionate share hospital (DSH) pool 5 payment amount and participant list, for the DSH state plan rate year ending 2019.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. This is to inform you that Medicaid State plan amendment TN 19-0007 is approved effective September 30, 2019. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please call Mark Wong at (415) 744-3561.

Sincerely,

Kristin Fan Director

Enclosures

CENTERS FOR MEDICARE & MEDICAID SERVICES		ONIB NO. 0936-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 2. ST. 1 9 0 0 7 Arize 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SECURITY ACT (MEDICAID)	ona
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July-1, 2019 September 30, 2019	
5. TYPE OF PLAN MATERIAL (Check One)		
NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT a. FFY ²⁰¹⁹ \$ TBD- \$17,	759 830 13
42 CFR Part 447	b. FFY 2020 \$ TBD- N/A	700,000.10
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)	
Attachment 4.19-A Page 66 -67	Attachment 4.19-A Page 66	
Updates the State Plan to reflect DSH Pool 5 funding and participating hospitals for FY 2020. 11. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGN CY OFFICIAL 1	6. RETURN TO	
13. TYPED NAME Dana Hearn 14. TITLE Assistant Director 15. DATE SUBMITTED September 30, 2019	Dana Hearn 801 E. Jefferson, MD#4200 Phoenix, Arizona 85034	
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED September 30, 2019	DATE APPROVED 05/13/20	
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL September 30, 2019	0. CIAL	
21. TYPED NAME Kristin Fan	2. TITLE Director, Financial Management Group	
23. REMARKS Pen-and-ink changes made to Boxes 4, 7, and 8 by CMS with state concurrence on 5/8/2020.		

STATE OF ARIZONA METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES INPATIENT HOSPITAL CARE

Pool 5

The funding for pool 5 is specified below.

- For SPY 2018, the funding for Pool 5 is the FY 2018 Arizona DSH allotment total computable amount minus \$143,178,200.
- For SPY 2019, the funding for Pool 5 is the FY 2019 Arizona DSH allotment total computable amount minus \$143,178,200.

For SPY 2018, the pool 5 hospitals are:

Benson Hospital
Holy Cross Hospital
Kingman Regional Medical Center
Little Colorado Medical Center
Mt. Graham Regional Medical Center
Northern Cochise Community Hospital
Page Hospital
Yuma Regional Medical Center
Canyon Vista Medical Center
Banner Payson Medical Center

For SPY 2019, the pool 5 hospitals are:

Benson Hospital
Holy Cross Hospital
Kingman Regional Medical Center
Little Colorado Medical Center
Mt. Graham Regional Medical Center
Northern Cochise Community Hospital
Page Hospital
Yuma Regional Medical Center
Canyon Vista Medical Center
Banner Payson Medical Center

Upon reconciliation, Pool 5 funds will be recouped due to changes in hospital qualification or payment limits; Pool 5 overpayments are not redistributed to other hospitals.

TN No. 19-007 Supersedes TN No. 17-007A

Approval Date: <u>05/13/20</u> Effective Date: <u>Sept. 30, 2019</u>