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## State Name: Pennsylvania

# State Plan Amendment (SPA)#: 17-0013

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



#### **Financial Management Group**

## NOV 1 7 2017

Mr. Theodore Dallas, Secretary Commonwealth of Pennsylvania Department of Human Services Office of Medical Assistance Programs PO Box 8046 Harrisburg, PA 17105

RE: State Plan Amendment 17-0013

Dear Mr. Dallas:

We have completed our review of State Plan Amendment (SPA) 17-0013. This SPA modifies Attachment 4.19-A of Pennsylvania's Title XIX State Plan. Specifically, the amendment continues certain inpatient supplemental and disproportionate share hospital payments to qualifying hospitals.

We conducted our review of this SPA according to the statutory requirements at sections 1902(a)(3), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act (the Act) and the regulations at 42 CFR 447 Subpart C. We are approving state plan amendment 17-0013 effective September 24, 2017. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, or require additional information, please call Gary Knight at (304) 347-5723.

Sincerely,

'S/

Kristin Fan Director

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION		FORM APPROVED
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	OMB NO. 0938-0193 2. STATE
STATE PLAN MATERIAL	17-0013	Pennsylvania
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) Title XIX	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE September 24, 2017	
5. TYPE OF PLAN MATERIAL (Check One):		
Image: Image: New State plan     Image: Amendment to be considered as new plan     Image: Amendment       COMPLETE PLOCKS (TUPL) 10 IF THIS IS AN ANTINENTIAL TO BE CONSIDERED AS NEW PLAN     Image: Amendment		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 447 Subpart C	7. FEDERAL BUDGET IMPACT: a. FFY 2017 \$0 b. FFY 2018 \$134,372,763	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSE OR ATTACHMENT (If Applicable):	DED PLAN SECTION
Attachment 4.19A, Pages 20a and 21tt	Attachment 4.19A, Pages 20a and 21tt	
Continuation of Disproportionate Share Hospital and Supplemental Payments, New Hospital Payments and Psychiatric and Rehabilitation Hospitals and Units           11. GOVERNOR'S REVIEW (Check One):         Image: Complementation of the complementation of		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	Human Services 16. RETURN TO:	
/S/	Commonwealth of Pennsylvania	
13. TYPED NAME:	Department of Human Services	
Teresa D. Miller	Office of Medical Assistance Programs	
14. TITLE:	Bureau of Policy, Budget and Planning	
Acting Secretary of Human Services	P.O. Box 2675	
15. DATE SUBMITTED: SEP 28 2017	Harrisburg, Pennsylvania 17110	
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED:	18 DATE APPROVED	
	NOV 1 7 20	17
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL: SEP 24 2017	20. SIGNATURE OF PERSIONAL OFFIC	IAL:
21. TYPED NAME: KRISTIN FAN	22. TITLE: Director, Frile	
23. REMARKS:		

### Part V. Aggregate Limits to Inpatient Disproportionate Share, Outpatient Supplemental and Direct Medical Education

For the period January 14, 2007 through December 31, 2007, the Department shall distribute to providers that are eligible for direct medical education and/or disproportionate share payments, including outpatient supplemental, the aggregate annualized amount of \$ 223.608 million, except any additional amount resulting from the Hospital Quality Incentive Pilot Program.

For the period beginning January 1, 2008, the Department shall distribute to providers that are eligible for direct medical education and/or disproportionate share payments, including outpatient supplemental, the aggregate annualized amount of \$228.08 million, except any additional amount resulting from the Hospital Quality Incentive Pilot Program.

For State Fiscal Year 2009-2010, the Department shall distribute to providers that are eligible for direct medical education and/or inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount not to exceed \$193.010 million, except any additional amount resulting from the Hospital Quality Incentive Pilot Program.

For State Fiscal Year 2010-2011, the Department shall distribute to providers that are eligible for direct medical education and/or inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$287.832 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2011-2012, the Department shall distribute to providers that are eligible for direct medical education and/or inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$270.740 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2012-2013, the Department shall distribute to providers that are eligible for direct medical education and/or inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$270.740 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2013-2014, the Department shall distribute to providers that are eligible for direct medical education and/or inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$262.341 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2014-2015, the Department shall distribute to providers that are eligible for direct medical education and/or inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$263.661 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2015-2016, the Department shall distribute to providers that are eligible for direct medical education, inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$262.341 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2016-2017, the Department shall distribute to providers that are eligible for direct medical education, inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$256.520 million, as adjusted to reflect the reconciliation factor described in Part VI.

For State Fiscal Year 2017-2018, the Department shall distribute to providers that are eligible for direct medical education, inpatient disproportionate share and outpatient supplemental payments an aggregate annualized amount of \$256.520 million, as adjusted to reflect the reconciliation factor described in Part VI.

Approval Date: \_\_\_\_\_\_ NOV 1 7 2017

Effective Date: September 24, 2017

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT ATTACHMENT 4.19A STATE: COMMONWEALTH OF PENNSYLVANIA Page 21tt METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-INPATIENT HOSPITAL CARE

- (A) Except as provided in (D), beginning in SFY 2013-2014, for the second and subsequent full SFY of PA MA enrollment of a new hospital that qualifies for one or more of these payments, the payments will be annualized if the first full SFY payment had been prorated as described in (B)(3) and (B)(4), or the source data will be annualized prior to determining the annual payment allocation if the source data was not annualized as described in (B)(1) and (B)(2).
- (D) For each of the payments listed in (B) for new hospitals, the Department will determine a final payment amount using actual MA data relating to the new hospital's first full SFY of enrollment once that data becomes available. The Department will reconcile payments made to final payment amounts subject to available funding.

For FY 2017-2018, the Department will allocate an annualized amount of \$2.787 million (\$1.343 million in State General Funds) for these DSH and supplemental payments adjusted to reflect the reconciliation factor described in Part VI.