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State Name: Pennsylvania

State Plan Amendment (SPA)#: 18-0004

This file contains the following documents in the order listed:

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

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

APR 20 2018

Ms. Teresa D. Miller, Secretary Commonwealth of Pennsylvania Department of Human Services Office of Medical Assistance Programs PO Box 2675 Harrisburg, PA 17110

RE: State Plan Amendment 18-0004

Dear Ms. Miller:

We have completed our review of State Plan Amendment (SPA) 18-0004. This SPA modifies Attachment 4.19-A of Pennsylvania's Title XIX State Plan. Specifically, this SPA continues DSH payment adjustments to qualifying hospitals that serve indigent populations of cities with an average per capita income significantly below statewide averages.

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 18-0004 effective March 25, 2018. 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,

Kristin Fan Director

Enclosures

- cc: Leesa M. Allen, Deputy Secretary, DHS, Office of Medical Assistance Programs Dan De Lellis, Director, DHS, Bureau of Policy, Planning, and Analysis
- bcc: Fran McCullough, ARA, RO3 Teia Miller, Manager, FMB RO3 Sabrina Tillman-Boyd, Manager, POB RO3 Mary McKeon, PA State Lead Lisa Carroll, CO NIRT Official NIRT File

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	18-0004	Pennsylvania
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) Title XIX	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	March 25, 2018	
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 AMI	ENDMENT (Separate Transmittal for each	amendment)
42 CFR 447 Subpart C	7. FEDERAL BUDGET IMPACT: a. FFY 2017 \$ 0 b. FFY 2018 \$ 7,516,928	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS OR ATTACHMENT (If Applicable):	EDED PLAN SECTION
Attachment 4.19A, Pages 21v	Attachment 4.19A, Pages 21v	
10. SUBJECT OF AMENDMENT: Additional Class of Disproportionate Share Payments		
11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED:	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Review and approval and	uthority has
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	been delegated to the D Human Services	epartment of
12. SIGNATIZE OF STATE AGENCY OFFICIAL: $/S/$	16. RETURN TO: Commonwealth of Pennsylvania	
13. TYPED NAME:	Department of Human Services	
Teresa D. Miller	Office of Medical Assistance Programs	
14. TITLE:	Bureau of Policy, Analysis and Planning P.O. Box 2675	
Secretary of Human Services	Harrisburg, Pennsylvania 17105-2675	
15. DATE SUBMITTED: MAR 2 9 2018	Themesurg, Fermsylvama 17103-207	5
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED:	18. DATE APPROVED: APR 2	0 2018
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIALMAR 2 5 2018	20. SIGNATITIRE OF REGIONAL OFFIC	CIAL:
21. TYPED NAME: Wristin Fan	22. TITLE: FICE FMCe	an a de 2000 000 ferrenne en al a de 2000 ferrenne en 2000 ferrenne en 2000 ferrenne en 2000 ferrenne en 2000 fe
23. REMARKS:		

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

ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS

The Department of Human Services (Department) has established an additional class of disproportionate share hospital (DSH) payments for qualifying acute care general hospitals (hospitals) that serve the indigent population of cities with a per capita income significantly below the statewide average for the Commonwealth.

For a hospital to qualify for this class of DSH payment, it must meet all of the following criteria, based on the Fiscal Year 2011-2012 PA Medical Assistance (MA) hospital cost report unless otherwise specified.

- (a) The hospital is enrolled in PA MA as an acute care general hospital;
- (b) The hospital provides at least 20,000 inpatient days of care to MA beneficiaries;
- (c) The hospital has an MA inpatient utilization rate (MIUR) of at least 25% as determined by dividing the hospital's MA inpatient days by its total inpatient days of care;
- (d) The hospital has a negative 3-year average change in net patient revenue according to the Pennsylvania Health Care Cost Containment Council's Fiscal Year 2012 Financial Analysis, Volume One, General Acute Care Hospitals; and
- (e) The hospital is located in a PA county which contains a city with a population of 30,000 or more and that city has a per capita income below 60 percent of the average per capita income for the Commonwealth as documented in the 2010 U.S. census data.

A hospital's payment amount for this class of DSH payments will be determined by dividing the hospital's MA inpatient days by the total MA inpatient days for all qualifying hospitals and multiplying that percentage by the total amount allocated for these payments. The data used for purposes of this determination will be from the Fiscal Year 2011-2012 PA MA hospital cost report.

All payment limitations are still applicable, including those limitations that the Commonwealth may not exceed its aggregate annual DSH allotment and that no hospital may receive DSH payments in excess of its hospital-specific limit. The Department will not redistribute DSH payments made under this additional class of DSH payments to qualifying hospitals as a result of a qualifying hospital exceeding its hospital-specific DSH limit.

For Fiscal Year 2017-2018, the fiscal impact as a result of this additional class of disproportionate share payments, is \$14.506 million (\$6.989 million in State general funds and \$7.517 million in Federal funds).

TN# <u>18-0004</u> Supersedes TN# <u>16-0042</u>

Approval Date: _____APR 20 2018

Effective Date: March 25, 2018