

State Demonstrations Group

March 24, 2021

Daniel Tsai Assistant Secretary Executive Office of Health and Human Services One Ashburton Place, 11th Floor Room 1109 Boston, MA 02018

Dear Mr. Tsai:

This letter is to inform you that the Centers for Medicare & Medicaid Services (CMS) has accepted the technical corrections to "Attachment E" of Massachusetts' section 1115(a) Medicaid demonstration, entitled "MassHealth" (Project Number 11-W-00030/1). The revisions to this document include formatting updates and corrections to non-federal share amounts identified for some Safety Net Care Pool Payments for State Fiscal Years (SFY) 2020, 2021, and 2022, including the SFY 2021 and 2022 non-federal shares for the Special Population State-Owned Non-Acute Hospitals Operated by the Department of Public Health. The changes were among the revisions CMS approved on May 20, 2020, where MassHealth was permitted to change distribution of funding in order to respond to the COVID-19 pandemic with no change to the level of total funding allowed under the Safety Net Care Pool. A copy of the revised attachment is included with this letter, will be incorporated by reference into the MassHealth Special Terms and Conditions, and supersedes previous versions of Attachment E.

We look forward to our continued partnership on the MassHealth section 1115(a) demonstration. If you have any questions, please contact your CMS project officer, Ms. Rabia Khan, at (410) 786-6276 or <u>Rabia.Khan1@cms.hhs.gov</u>.

Sincerely, Angela D. Digitally signed by Angela D. Date: 2021.03.24 Is41:34-04/00' Angela D. Garner Director Division of System Reform Demonstrations

Enclosure

cc: Marie DiMartino, State Monitoring Lead, Medicaid and CHIP Operations Group

Safety Net Care Pool. The following charts reflect approved payments under Safety Net Care Pool (SNCP) for the period from July 1, 2017 through June 30, 2022, unless otherwise specified in STCs 52 and 53, consistent with and pursuant to section VIII of the STCs, and subject to the overall budget neutrality limit and the Safety Net Care Pool (SNCP) limits described in section VIII of the STCs. This chart shall be updated pursuant to the process described in STC 74.

Chart A: Approved SNCP Payments for the period from July 1, 2017 through June 30, 2022, unless otherwise specified in STCs 52 and 53 (projected and rounded in millions).

		Applicable	State law or	Eligible	Total SNCP	Payments pe	r SFY			Total SFY	Applicable
#	Payment Type	Caps	regulation	Providers	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	2018-2022	footnotes
	System Transformation	on Incentive Based	l Pools								
1	Delivery System Reform Incentive Payments (DSRIP)	n/a		Participating ACOs, CPs and other uses as specified in STC57-71	\$425.0	\$425.0	\$400.0	\$325.0	\$225.0	\$1,800.0	(1)
2	Public Hospital Transformation and Incentive Initiatives (PHTII)	n/a		Cambridge Health Alliance	\$309.0	\$243.0	\$120.0	\$100.0	\$100.0	\$872.0	
		System Transform	nation Incentive Ba	sed Pools Subtotal	\$734.0	\$668.0	\$520.0	\$425.0	\$325.0	\$2,672.0	
	Disproportionate Sha	re Hospital (DSH)	Pool								
3	Public Service Hospital Safety Net Care Payment	DSH		Boston Medical Center	\$20.0	\$20.0	\$20.0	\$20.0	\$20.0	\$100.0	(2)
4	Health Safety Net Trust Fund Safety Net Care Payment	DSH	101CMR 613.00, 614.00	All acute hospitals and CHCs	\$287.0	\$287.0	\$288.0	\$288.0	\$290.0	\$1,440.0	(3)
5	Institutions for Mental Disease (IMD)	DSH	130 CMR 425.408, 101CMR 346.004	Psychiatric inpatient hospitals Community- based detoxification centers	\$32.0	\$32.0	\$32.0	\$32.0	\$32.0	\$160.0	(4)

Safety Net Care Pool. The following charts reflect approved payments under Safety Net Care Pool (SNCP) for the period from July 1, 2017 through June 30, 2022, unless otherwise specified in STCs 52 and 53, consistent with and pursuant to section VIII of the STCs, and subject to the overall budget neutrality limit and the Safety Net Care Pool (SNCP) limits described in section VIII of the STCs. This chart shall be updated pursuant to the process described in STC 74.

Chart A: Approved SNCP Payments for the period from July 1, 2017 through June 30, 2022, unless otherwise specified in STCs 50 and	51
(projected and rounded in millions).	

6	Special Population State-Owned Non- Acute Hospitals Operated by the Department of Public Health	DSH	Shattuck Hospital Tewksbury Hospital Massachusetts Hospital School Western Massachusetts Hospital	\$51.0	\$52.0	\$37.0	\$52.0	\$52.0	\$244.0	(5)
7	State-Owned Non- Acute Hospitals Operated by the Department of Mental Health	DSH	Cape Cod and Islands Mental Health Center Corrigan Mental Health Center Quincy Mental Health Center SC Fuller Mental Health Center Taunton State Hospital Worcester Recovery Center and Hospital	\$105.0	\$107.0	\$32.0	\$107.0	\$107.0	\$458.0	(5)
8	Safety Net Provider Payments	DSH	Eligible hospitals outlined in Attachment N	\$180.0	\$177.0	\$266.0	\$176.0	\$174.0	\$973.0	(8)
		Disproportionate Share H	Iospital (DSH) Pool Subtotal:	\$675.0	\$675.0	\$675.0	\$675.0	\$675.0	\$3,375.0	

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project	ted and rounded in Health Safety Net	mmons).	101CMR								
9	Trust Fund Safety Net Care Payment	UCC	613.00, 614.00	All acute hospitals and CHCs	\$0.0	\$10.0	\$10.0	\$10.0	\$10.0	\$40.0	(3)
10	Special Population State-Owned Non- Acute Hospitals Operated by the Department of Public Health	UCC		Shattuck Hospital Tewksbury Hospital Massachusetts Hospital School Western Massachusetts Hospital	\$65.0	\$15.0	\$15.0	\$15.0	\$15.0	\$125.0	(5)
11	State-Owned Non- Acute Hospitals Operated by the Department of Mental Health	UCC		Cape Cod and Islands Mental Health Center Corrigan Mental Health Center Quincy Mental Health Center SC Fuller Mental Health Center Taunton State Hospital Worcester Recovery Center and Hospital	\$147.0	\$75.0	\$75.0	\$75.0	\$75.0	\$447.0	(5)
		Unco	mpensated Care (U	CC) Pool Subtotal:	\$212.0	\$100.0	\$100.0	\$100.0	\$100.0	\$612.0	
	ConnectorCare Subsi	dies									

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Safety Net Care Pool. The following charts reflect approved payments under Safety Net Care Pool (SNCP) for the period from July 1, 2017 through June 30, 2022, unless otherwise specified in STCs 52 and 53, consistent with and pursuant to section VIII of the STCs, and subject to the overall budget neutrality limit and the Safety Net Care Pool (SNCP) limits described in section VIII of the STCs. This chart shall be updated pursuant to the process described in STC 74.

Chart A: Approved SNCP Payments for the period from July 1, 2017 through June 30, 2022, unless otherwise specified in STCs 50 and 51 (projected and rounded in millions).

12	DSHP – Health Connector Subsidies	n/a	n/a	\$250.0	\$250.0	\$250.0	\$250.0	\$250.0	\$1,250.0	(6)
			DSHP – Health Connector Subtotal	\$250.0	\$250.0	\$250.0	\$250.0	\$250.0	\$1,250.0	
	Total			\$1,871.0	\$1,693.0	\$1,525.0	\$1,450.0	\$1,350.0	\$7,909.0	
*Under se	action 1002(a)(13)(A)(ix)	v) of the Social Sec	urity Act states are required to make n	avmonte that ta	ka into accour	t the situation	of disproporti	onata shara ha	enital (DSH)	providers As

*Under section 1902(a)(13)(A)(iv) of the Social Security Act, states are required to make payments that take into account the situation of disproportionate share hospital (DSH) providers. As part of this Demonstration project, CMS has waived the requirements of section 1902(a)(13) and has provided in the STCs that Massachusetts will not make such DSH payments but instead will make provider support payments under the SNCP.

The following notes are incorporated by reference into Chart A

- (1) The Delivery System Reform Incentive Payments will be distributed to participating ACOs, CPs and for other approved uses pursuant to STC 57 through STC 71 and the DSRIP Protocol.
- (2) The provider-specific Public Service Hospital Safety Net Care payments are approved by CMS. Annual payments are for dates of service beginning July 1 and ending June 30 for each fiscal year. The Commonwealth may decrease these payment amounts based on available funding without a demonstration amendment; any increase will require a demonstration amendment.
- (3) Health Safety Net Trust Fund (HSNTF) Safety Net Care Payments are made based on adjudicated claims, and approved by CMS on an aggregate basis. Annual payments are for dates of service beginning July 1 and ending June 30 for each fiscal year. Consequently, actual total and provider- specific payment amounts may vary depending on volume, service mix, rates, and available funding. Only payments for care provided to eligible uninsured patients may be claimed in line 9, under the UC Pool. Expenditures for dental services that wrap to the MassHealth State plan benefit through the HSNTF are inclusive of amounts included in capitation payments to One Care plans for One Care enrollees for dental services beyond those available in the MassHeath State plan.
- (4) IMD claiming is based on adjudicated claims, and approved by CMS on an aggregate basis. Consequently, actual total and providerspecific payment amounts may vary depending on volume, service mix, rates, and available funding. Three payment types make up the IMD category: inpatient services at psychiatric inpatient hospitals, administrative days, and inpatient services at community-based

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detoxification centers.

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- (5) Expenditures for DPH and DMH hospitals in Chart A are based on unreimbursed Medicaid and uninsured costs, and are approved by CMS on an aggregate basis. Annual payments are for dates of service beginning July 1 and ending June 30 for each fiscal year. Consequently, the total and provider-specific amounts expended may vary depending on volume, service mix, and cost growth. Only uninsured costs may be claimed in lines 10-11 under the UC Pool.
- (6) Expenditures for DSHP Health Connector Premium and Cost Sharing Subsidies are approved based on actual enrollment and premium assistance and cost sharing subsidy costs, and HSN Health Connector gap coverage subsidies are approved based on actual enrollment and gap coverage costs. Consequently, the amount of total expenditures may vary. Health Connector Subsidies are not subject to the aggregate SNCP cap or any sub-cap.
- (7) Expenditures for State-Owned Non-Acute Hospitals Operated by the Department of Mental Health are inclusive of amounts included in capitation payments to One Care enrollees ages 21 and over for payments to the facilities listed in item #5.
- (8) The \$90 million in Safety Net Provider Payments (SNPPs) distributed during the COVID-19 emergency (SFY20) will not be subject to the accountability requirements otherwise required for SNPPs as described in STC 54. The \$90 million is to ensure the sustainability of these safety net hospitals who are providing necessary services during the public health emergency.

CHART B

Safety Net Care Pool. The following charts reflect approved payments under Safety Net Care Pool (SNCP) for the date of the approval letter through June 30, 2017, unless otherwise specified in STCs 52 and 53, consistent with and pursuant to section VIII of the STCs, and subject to the overall budget neutrality limit and the Safety Net Care Pool (SNCP) limits described in section VIII of the STCs. This chart shall be updated pursuant to the process described in STC 74.

Chart B: Sources of Funding for Approved SNCP payments for the period from the date of the approval letter through June 30, 2022, unless otherwise specified in STCs 52 and 53 (projected and rounded).

			State law		Total SNC	P Payments	per SFY			Total	
#	Payment Type	Applicable Caps	or regulation	Eligible Providers	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2018- 2022	Source of non-federal share
	System Tran	sformation I	ncentive Base	ed Pools							
1	Delivery System Reform Incentive Payments (DSRIP)	n/a		Participati ng ACOs, CPs and other uses as specified in STC 57 and STC 60.	\$425.0	\$425.0	\$400.0	\$325.0	\$225.0	\$1,800.0	General Fund, including provider assessment funding in the DSRIP Trust Fund
2	Public Hospital Transform ation and Incentive Initiatives (PHTII)	n/a		Cambridge Health Alliance	\$309.0	\$243.0	\$120.0	\$100.0	\$100.0	\$872.0	Inter-Governmental Transfer
	System 2	Transformati	on Incentive	Based Pools Subtotal	\$734.0	\$668.0	\$520.0	\$425.0	\$325.0	\$2,672.0	
	Disproportio	nate Share H	lospital (DSH	I) Pool							

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3	Public Service Hospital Safety Net Care Payment	DSH		Boston Medical Center	\$20.0	\$20.0	\$20.0	\$20.0	\$20.0	\$100.0	General Fund
4	Health Safety Net Trust Fund Safety Net Care Payment	DSH	101CMR 613.00, 614.00	All acute hospitals and CHCs	\$287.0	\$287.0	\$288.0	\$288.0	\$290.0	\$1,440.0	General Fund, including provider assessment funding in the Health Safety Net Trust Fund
5	Institutions for Mental Disease (IMD)	DSH	130 CMR 425.408, 101CMR 346.004	Psychiatric inpatient hospitals Communi ty-based detoxifica tion centers	\$32.0	\$32.0	\$32.0	\$32.0	\$32.0	\$160.0	Certified Public Expenditure and General Fund
6	Special Population State- Owned Non-Acute Hospitals	DSH		Shattuck Hospital Tewksbur y Hospital Massachus etts	\$51.0	\$52.0	\$37.0	\$52.0	\$52.0	\$244.0	Certified Public Expenditure

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	Operated by the Departmen t of Public Health		Hospital School Western Massachus etts Hospital							
7	State- Owned Non-Acute Hospitals Operated by the Departmen t of Mental Health	DSH	Cape Cod and Islands Mental Health Center Corrigan Mental Health Center Quincy Mental Health Center SC Fuller Mental Health Center Taunton State Hospital	\$105.0	\$107.0	\$32.0	\$107.0	\$107.0	\$458.0	Certified Public Expenditure

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unless otherwise specified in STCs 52 and 53 (projected and rounded)

u	ness other w	ise specific	eu m si cs	<u>52 and 55</u>	projecteu	anu roun	lueu)			1	
		_		Worcester	_						
				Recovery							
				Center							
				and							
				Eligible							
	Cofete Net			hospitals							
	Safety Net	DCII		outlined	\$180.0	\$177.0	\$266.0	\$176.0	\$174.0	\$973.0	General Fund
8	Provider	DSH		in							
	Payments			Attachmen							
				t N							
	Disprop	ortionate Sho	are Hospital (DSH) Pool	<i><i>(</i>7</i>	<i>¢(75 0)</i>	<i>¢(75 0)</i>	<i><i>6</i> (7</i>	<i><i>ф</i>(7</i>	¢2 275 0	
			•	Subtotal:	\$675.0	\$675.0	\$675.0	\$675.0	\$675.0	\$3,375.0	
	Uncompens	sated Care (U	UCC) Pool								
	Health		101CMR								
	Safety Net		613.00,	All acute							
	Trust Fund	UCC	614.00	hospitals	\$0.0	\$10.0	\$10.0	\$10.0	\$10.0	\$40.0	General Fund, including provider
9	Safety Net	UCC	01.100	and	ф0.0	\$10.0	\$10.0	\$10.0	\$10.0	\$40.0	assessment funding transferred to the
	Care			CHCs							HSN Trust Fund
	Payment										
	Special			Shattuck							
	Population			Hospital							
	State-			Tewksbur							
	Owned			y Hospital							
10	Non-Acute	UCC		Massachus	\$65.0	\$15.0	\$15.0	\$15.0	\$15.0	\$125.0	Certified Public Expenditure
	Hospitals			etts							
	Operated by			Hospital							
	the			School							
	Department			Western							

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	of Public		Massachus	- J						
	Health		etts							
			Hospital							
			Cape Cod							
			and							
			Islands							
			Mental							
			Health							
			Center							
			Corrigan Mental							
	State-		Health							
	Owned		Center							
	Non-Acute		Quincy							
	Hospitals		Mental							
11	Operated	UCC	Health	\$147.0	\$75.0	\$75.0	\$75.0	\$75.0	\$447.0	Certified Public Expenditure
	by the		Center SC							-
	Department		Fuller							
	of Mental		Mental							
	Health		Health							
			Center							
			Taunton							
			State							
			Hospital							
			Worcester							
			Recovery Center							
			and							

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	Uncompense	ated Care (UC	\$212.0	\$100.0	\$100.0	\$100.0	\$100.0	\$612.0		
	Connector	Care Subsidies								
12	DSHP – Health Connect or Premium and Cost Sharing	n/a	n/a	\$250.0	\$250.0	\$250.0	\$250.0	\$250.0	\$1,250.0	Certified Public Expenditure and General Fund, including provider assessment funding in the Health Safety Net Trust Fund
	DSHP – Health Connector Subtotal			\$250.0	\$250.0	\$250.0	\$250.0	\$250.0	\$1250.0	
	Total		\$1,871.0	\$1,693.0	\$1,525.0	\$1,450.0	\$1,350.0	\$7,909.0		

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will make provider support payments under the SNCP.

Designated State Health Programs (DSHP). The following programs are authorized for claiming as DSHP, subject to the overall budget neutrality limit. No demonstration amendment is required for CMS approval of updates to Chart C of Attachment E to include additional DSHP programs. This chart shall be updated pursuant to the process described in STC 74.

Chart C: Approved Designated State Health Programs (DSHP)

These DSHPs are not subject to the overall SNCP cap.

Agency	Program Name
Health	Health Connector Premium Assistance and Cost Sharing Subsidies, and
Connector	HSN- Health Connector Gap Coverage Subsidies