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State/Territory Name: Arkansas

State Plan Amendment (SPA) #: 23-0026

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

7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, MD 21244-1850



Financial Management Group

January 17, 2024
Janet Mann, Director
Arkansas Department of Human Services
112 West 8th Street, Slot S401
Little Rock, AR 72201-4608

RE: Arkansas State Plan Amendment (SPA) 23-0026

Dear Director Mann:

We have reviewed the proposed amendment to Attachment 4.19-A and of your Medicaid state plan submitted under transmittal number (TN) 23-0026 effective for services on or after December 18, 2023. The proposed amendment is amending its Disproportionate Share Hospital (DSH) payment methodology to allow redistribution to other eligible hospitals after the completion of annual independent certified audit of DSH payments.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act. We hereby inform you that Medicaid State plan amendment 23-0026 is approved effective December 18, 2023. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please contact Diana Dinh at Diana.Dinh@cms.hhs.gov.

Sincerely,

Rory Howe

Director

Enclosure

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER 2. STATE A R
STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE
CENTERS FOR MEDICAID & CHIP SERVICES	12/18/2023
DEPARTMENT OF HEALTH AND HUMAN SERVICES	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
5. FEDERAL STATUTE/REGULATION CITATION	a FFY 2024 \$ 7,883,264
42 CFR 455.301 and 304; 42 CFR 447.299	b FFY 2025 \$ 7,883,264
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
	OR ATTACHMENT (If Applicable)
Att. 4.19-A, page 22a	NEW
Att. 4.19-A, page 22a	
9. SUBJECT OF AMENDMENT	
Annual Disproportionate Share Hospital Audit.	
40 COVERNOR'S REVIEW (Charle Core)	
10 GOVERNOR'S REVIEW (Check One)	
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED:
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
11 SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO
12. (CXPED NAME	Office of Policy and Rules PO Box 1437, Slot S295
Janet Mann	Little Rock, AR 72203-1437
13. TITLE	Entro Nook, All 72200 1407
Deputy Secretary, Department of Human Services	Attn: Mac Golden
14. DATE SUBMITTED	
FOR CMS	USE ONLY
	17. DATE APPROVED
December 14, 2023	January 17, 2024
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL	19 SIGNATURE OF APPROVING OFFICIAL
December 18, 2023	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
Rory Howe	Director, FMG
22. REMARKS	2533, 1.115

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM STATE <u>ARKANSAS</u>

ATTACHMENT 4.19-A Page 22a

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - INPATIENT HOSPITAL SERVICES

INPATIENT HOSPITAL SERVICES Revised: 12-18-2023

3a. Annual Disproportionate Share Hospital (DSH) Audit

In addition to any other audits which may occur, independent certified audits of the DSH payments shall be conducted annually in accordance with 42 CFR 455.301 and 42 CFR 455.304. Reporting of the audit shall follow the guidelines stated in 42 CFR 447.299. In accordance with 42 CFR 455.304(e), any overpayments of DSH funds shall be redistributed to other eligible hospitals within the state, provided each acute care hospital remains below their hospital specific DSH limit in the following manner:

- (a) The amount of the DSH payment made to the acute care hospital will be recouped by the State of Arkansas to the extent necessary to reduce the DSH payment to an allowable amount.
- (b) Amounts recouped from acute care hospitals with payments in excess of the audited hospital specific DSH limits, will be placed into an acute care hospital redistribution pool. Redistribution will be made to remaining acute care hospitals that do not exceed their hospital specific DSH limit. The allocation will be made based on these remaining acute care hospitals available uncompensated care. No acute care hospital shall exceed its hospital specific DSH limit after redistribution.
- (c) Additionally, DSH funds not otherwise paid to qualifying acute hospitals shall be paid, subject to the uncompensated care cost limits and annual DSH allotment, to the Arkansas State Operated Teaching Hospital.

TN: 23-0026 Approval Date: January 17, 2024 Effective Date: 12/18/2023

Supersedes: NEW