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State/Territory Name: Pennsylvania

State Plan Amendment (SPA) #: 20-0020

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



Financial Management Group

March 8, 2021

Ms. Teresa D. Miller, Secretary Commonwealth of Pennsylvania Department of Human Services Office of Medical Assistance Programs Bureau of Policy, Analysis and Planning P.O. Box 2675 Harrisburg, PA 17105-2675

RE: State Plan Amendment (SPA) 20-0020

Dear Ms. Miller:

We have completed our review of State Plan Amendment (SPA) 20-0020. This SPA modifies Attachment 4.19-A of Pennsylvania's Title XIX State Plan. Specifically, the amendment continues an additional class of disproportionate share hospital payment to qualifying facilities that promote access to comprehensive inpatient services.

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 Pennsylvania's State plan amendment with an effective date of December 13, 2020. We are enclosing the CMS-179 and the amended plan page.

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

Sincerely,

For

Rory Howe Acting Director

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 20-0020	2. STATE Pennsylvania
	2 PROCEAN IDENTIFICATION TITL	E VIV OF THE
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) Title XIX	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	December 13, 2020	
5. TYPE OF PLAN MATERIAL (Check One)		
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 2020 \$0	
12 of IV III Suspant S	b. FFY 2021 \$54,518,478	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEI OR ATTACHMENT (If Applicable)	DED PLAN SECTION
Attachment 4.19A, Page 21cc	Attachment 4.19A, Page 21cc	
10. SUBJECT OF AMENDMENT		
Additional class of Disproportionate Share Payments to Qualifying Hospitals		
11. 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		
12 NCY OFFICIAL	16. RETURN TO	
	Commonwealth of Pennsylvania Department of Human Services	
13. TYPED NAME	Office of Medical Assistance Programs	
Teresa D. Miller	Bureau of Policy, Analysis and Planning P.O. Box 2675	
14. TITLE Secretary of Human Services	arrisburg, Pennsylvania 17105-2675	
15. DATE SUBMITTED		
December 11, 2020		
17. DATE RECEIVED 18. DATE APPROVED		
December 11, 2020	3/8/21	
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL	²	L
December 13, 2020	00 7171 5	For
21. TYPED NAME	22. TITLE	
Rory Howe	Acting Director, Financial Managemen	t Group
23. REMARKS		

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

ATTACHMENT 4.19A

STATE: COMMONWEALTH OF PENNSYLVANIA

Page: 21cc

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES-INPATIENT HOSPITAL CARE

ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS

The Department of Human Services (Department) will make an additional class of disproportionate share hospital (DSH) payments to qualifying Medical Assistance (MA) hospitals to promote access to comprehensive inpatient services for MA eligible persons by assuring an adequate supply of health care professionals, who have been trained in high volume MA enrolled hospital settings.

A hospital is eligible for this additional class of DSH payments if the hospital meets all criteria listed below. Unless otherwise stated, the source of the information is the Fiscal Year (FY) 2013-2014 MA-336 Hospital Cost Report available to the Department as of October 2016.

- a) The hospital is enrolled in the Pennsylvania MA Program as a general acute care hospital.
- b) The hospital provides acute, psychiatric and medical rehabilitation services to MA eligible individuals.
- c) The total number of MA inpatient days provided by the hospital in FY ending 2014 exceeded the 99th percentile for all acute care hospitals in the Commonwealth.
- d) The hospital had more than 700 full-time equivalent residents in programs approved by the Accreditation Council for Graduate Medical Education.

A hospital's payment amount for these disproportionate share 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 FY 2013-2014 MA-336 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.

The FY 2020-2021 impact, as a result of the funding allocation for these payments, is \$93.354 million.

TN# <u>20-0020</u> Supersedes TN# 20-0003

Approval Date: March 8, 2021 Effective Date: December 13, 2020