

## **Table of Contents**

**State/Territory Name: PA**

**State Plan Amendment (SPA) #: 22-0035**

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 S3-14-28  
Baltimore, Maryland 21244-1850



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**Financial Management Group**

March 1, 2023

M. Snead  
Acting Secretary of Human Services  
PA Department of Human Services  
Attn: Bureau of Policy Development and Communications Management  
P.O. Box 8025  
Harrisburg, PA 17105-8025

Reference: TN 22-0035

Dear Acting Secretary of Human Services:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 22-0035. This amendment proposes to continue funding for multiple classes of inpatient DSH payments and supplemental payments to Medical Assistance enrolled, qualifying inpatient acute care general hospitals.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C.

This is to inform you that Medicaid State plan amendment PA-22-0035 is approved effective December 25, 2022. The CMS-179 and the amended plan page(s) are attached.

If you have any additional questions or need further assistance, please contact Kristina Mack-Webb at 617-565-1225 or [Kristina.Mack-Webb@cms.hhs.gov](mailto:Kristina.Mack-Webb@cms.hhs.gov).

Sincerely,



Rory Howe  
Director

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 2 — 0 0 3 5

2. STATE

PA

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX  XXI

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

December 25, 2022

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 447 Subpart C

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 290,538,757  
b. FFY 2024 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19A, Pages 21a, 21aa, 21bb, 21cc, 21ee, 21j, 21jj, 21kk, 21mm, 21nn, 21s, 21u, 21x, 21y, 27a, 27aa, 27aaa, 27aaaa

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Attachment 4.19A, Pages 21a, 21aa, 21bb, 21cc, 21ee, 21j, 21jj, 21kk, 21mm, 21nn, 21s, 21u, 21x, 21y, 27a, 27aa, 27aaa, 27aaaa

9. SUBJECT OF AMENDMENT

Additional Classes of Disproportionate Share Payments and Supplemental Payments to Qualifying Hospitals

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Redacted Signature]

12. TYPED NAME  
M. Snead

13. TITLE  
Acting Secretary of Human Services

14. DATE SUBMITTED  
December 29, 2022

15. RETURN TO

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

**FOR CMS USE ONLY**

16. DATE RECEIVED  
December 30, 2022

17. DATE APPROVED  
March 1, 2023

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

19. SIGNATURE OF APPROVING OFFICIAL

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL  
Rory Howe

21. TITLE OF APPROVING OFFICIAL  
Director, Financial Management Group

22. REMARKS

**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 certain qualifying hospitals that advance the Department's goal of enhanced access to multiple types of medical care in economically distressed areas of the Commonwealth.

A hospital is eligible for this additional class of DSH payments, provided it is an acute care general hospital that meets all the following criteria:

(a) The hospital provides in excess of 100,000 inpatient days to Medical Assistance (MA) eligible individuals as reported on its Fiscal Year (FY) 2004-2005 MA-336 Hospital Cost Report;

(b) The hospital has a Low-Income Utilization Rate in excess of the 95<sup>th</sup> percentile of the Low-Income Utilization Rate for all enrolled acute care general hospitals as reported on its FY 2004-2005 MA-336 Hospital Cost Report;

(c) The hospital's ratio of MA revenue to net patient revenue exceeds the 98<sup>th</sup> percentile for all Commonwealth acute care general hospitals as reported in the Pennsylvania Health Care Cost Containment Council's 2006 Financial Analysis, Volume One;

(d) The dollar value of the hospital's uncompensated care equals or exceeds the 94<sup>th</sup> percentile of the value to uncompensated care for all acute care general hospitals as reported in the Pennsylvania Health Care Cost Containment Council's 2006 Financial Analysis, Volume One;

(e) The hospital is located in a Census tract designated by the Bureau of Primary Health Care of the Health Resource and Services Administration as a Medically Underserved Area.

Payments will be divided proportionally among qualifying hospitals based on the percentage of each qualifying hospital's MA inpatient days to the total MA inpatient days of all qualifying facilities.

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 2022-2023 impact, as a result of the funding allocation for these payments is \$105.910 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to qualifying Medical Assistance (MA) enrolled acute care general hospitals that have a low commercial-payer ratio, a negative trend in their net patient revenue and are located in an area of the Commonwealth with a disproportionate need for MA services.

A hospital is eligible for this additional class of DSH payments if the hospital is enrolled in the Pennsylvania MA Program as an acute care hospital and 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.

- (1) The hospital is located in a city of the first class, as defined in the *Pennsylvania Manual* (Volume 121).
- (2) The hospital's 3-year average change in net patient revenue for FYs 2012-2015 is negative according to the Pennsylvania Health Care Cost Containment Council's FY 2015 Financial Analysis.
- (3) The hospital's commercial payer ratio, defined as 100 percent minus the hospital's Medicare share of net patient revenue for FY 2015 (expressed as a percent) minus the hospital's MA share of net patient revenue for FY 2015 (expressed as a percent), is more than one standard deviation lower than the mean for all acute care hospitals in the Pennsylvania Health Care Cost Containment Council's FY 2015 Financial Analysis.
- (4) The hospital does not qualify for payment under State Plan Amendment 4.19A, page 21z.

Payments will be divided proportionally among qualifying hospitals based on the percentage of each qualifying hospital's inpatient MA days to the total inpatient MA days of all qualifying hospitals. 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 DSH 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 2022-2023 impact, as a result of the funding allocation for these payments, is \$1.458 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to qualifying Medical Assistance (MA) enrolled acute care general hospitals to promote access to acute care services for MA eligible persons in less urban areas of the Commonwealth.

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 MA Program as a general acute care hospital.
- b) The hospital is located in a city of the third class, as defined in the *Pennsylvania Manual* (Volume 121) with a population of at least 25,000 persons, based on the 2010 Census.
- c) The hospital has at least 150 beds.
- d) The hospital reported an Inpatient Low-Income Utilization Rate of at least 20.0%.
- e) The hospital's ratio of uncompensated care to net patient revenue was higher than 3.75%, based on the Pennsylvania Health Care Cost Containment Council *Financial Analysis 2015, Volume One*.

A hospital's payment amount for this additional class of DSH payments will be determined as follows:

- 1) Divide the hospital's MA inpatient days by the total MA inpatient days for all qualifying hospitals; and,
- 2) Multiply 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 hospitals-specific DSH limit.

The FY 2022-2023 impact, as a result of the funding allocation for these payments, is \$1.250 million in total funds.

**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 99<sup>th</sup> 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 2022-2023 impact, as a result of the funding allocation for these payments, is \$112.900 million in total funds.

**ADDITIONAL CLASS OF SUPPLEMENTAL PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make supplemental payments to qualifying hospitals that provide medical and surgical services for disease and injuries related to the eye to ensure that Medical Assistance (MA) beneficiaries continue to have access to these critical services.

A hospital is eligible for this additional class of supplemental payments if the hospital meets all criteria listed below:

- a) The hospital is enrolled in the MA Program as an acute care general hospital;
- b) The hospital is located in a city of the first class;
- c) The hospital does not qualify as a children's hospital, as defined by 42 CFR 495.302; and,
- d) The hospital has net patient revenue of less than \$30 million for Fiscal Year (FY) 2016-2017 as reflected in the Pennsylvania Health Care Cost Containment Council 2017 financial report.

Payments will be divided proportionately among qualified hospitals based on each hospital's fee-for-service (FFS) Pennsylvania MA inpatient acute care days of service to total FFS Pennsylvania MA inpatient acute care days for all qualifying hospitals.

Supplemental payments are subject to the regulations at 42 CFR 447.272 and the application of upper payment limits for inpatient services.

For FY 2022-2023, the Department will allocate an annualized amount of \$7.932 million in total funds (State and Federal) for these supplemental payments.



**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING TEACHING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to qualifying teaching hospitals that provide psychiatric services to Medical Assistance (MA) beneficiaries. Across the Commonwealth there is a shortage of psychiatrists, notably those involved in the public health sector. The Department is working to recruit and retain psychiatrists to work in underserved rural and urban areas throughout the Commonwealth. These payments are intended to help offset the medical education costs of psychiatrists which are incurred by the hospitals providing psychiatric services to MA beneficiaries and the uninsured.

The Department will consider any psychiatric unit of a general acute care hospital enrolled in the Pennsylvania (PA) MA Program, with psychiatric medical education costs that exceed \$40,000 according to the Fiscal Year (FY) 2010-2011 MA-336 Hospital Cost Report, eligible for this additional class of DSH payments if it meets one of the following criteria:

1) The hospital provides at least 40,000 psychiatric days of service to PA MA beneficiaries as reported on the FY 2010-2011 MA-336 Hospital Cost Report.

2) The hospital's percentage of PA MA Fee-for-Service (FFS) inpatient psychiatric days to total PA MA FFS inpatient days exceeds 25% as reported on the FY 2010-2011 MA-336 Hospital Cost Report.

Two thirds of the amount appropriated for this payment will be distributed equally to teaching hospitals qualifying under criteria 1) above. One third of the amount appropriated for this payment will be distributed equally to teaching hospitals qualifying under criteria 2) above. Hospitals that qualify under both criteria will be eligible only for payments under criteria 1).

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 2022-2023 impact, as a result of the funding allocation for these payments, is \$0.500 million in total funds.

**ADDITIONAL CLASS OF SUPPLEMENTAL PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make supplemental payments to qualifying hospitals that treat a high volume of opioid use disorder (OUD) patients in their emergency rooms. These payments are intended to provide funding to expand research and treatment protocols for combating opioid addiction.

A hospital is eligible for these supplemental payments if the hospital meets all the criteria below. Unless otherwise stated, the source of the information is the Fiscal Year (FY) 2016-2017 MA-336 Hospital Cost Report, as available to the Department on October 29, 2019.

- a) The hospital is enrolled in the Pennsylvania Medical Assistance (MA) Program as an acute care general hospital, licensed by Pennsylvania's Department of Health;
- b) The hospital provided at least 150,000 total inpatient acute care days;
- c) The hospital provided greater than 60,000 inpatient acute care days of care, both fee-for-service (FFS) and managed care combined, to MA beneficiaries; and,
- d) The hospital treated at least 1,000 OUD patients in the emergency room in calendar year 2019, as determined for purposes of the OUD Quality Improvement Program, using encounter data compiled by the Department for the FY 2019-2020 OUD Quality Improvement Program as of December 10, 2020.

Payments will be divided proportionately among qualified hospitals based on each hospital's fee-for-service (FFS) Pennsylvania MA inpatient acute care days of service to total FFS Pennsylvania MA inpatient acute care days for all qualifying hospitals.

Supplemental payments are subject to the regulation at 42 CFR 447.272 and the application of upper payment limits for inpatient services.

For FY 2022-2023, the Department will allocate an annualized amount of \$89.214 million in total funds for these supplemental payments.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to qualifying Medical Assistance (MA) enrolled acute care general hospitals that provide inpatient services to MA beneficiaries. These payments are intended to provide financial relief to hospitals and promote access to acute care services for MA beneficiaries during the coronavirus pandemic.

A hospital is eligible for this additional class of DSH payments if the hospital is enrolled in the MA Program as an acute care general hospital, and the hospital submitted a Fiscal Year (FY) 2017-2018 MA-336 hospital cost report. The source of the information is the FY 2017-2018 MA-336 Hospital Cost Report, as available to the Department on April 7, 2020.

The Department will determine a qualifying hospital's annual payment amount by multiplying the hospital's number of Pennsylvania MA inpatient acute care days, both fee-for-service and managed care, by either:

- a) \$84.77 for qualifying hospitals with at least 90% MA dependence percent ranking; or,
- b) \$67.82 for qualifying hospitals with at least 75% but less than 90% MA dependence percent ranking; or,
- c) \$50.86 for qualifying hospitals with at least 50% but less than 75% MA dependence percent ranking; or,
- d) \$33.91 for qualifying hospitals with less than 50% MA dependence percent ranking.

For purposes of these DSH payments, the Department determines each hospital's MA dependence statistic by dividing the hospital's Pennsylvania MA inpatient acute care days, both fee-for-service and managed care, by the hospital's total hospital inpatient acute care days. The Department determines each hospital's MA dependence percent ranking using the hospital's MA dependence statistic in relation to all eligible hospitals.

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 class of DSH payments to qualifying hospitals as a result of a qualifying hospital exceeding its hospital-specific DSH limit.

The FY 2022-2023, the Department will allocate an annualized amount of \$85.586 million in total funds (State and Federal) for these DSH payments, adjusted to reflect the reconciliation factor described in Part VI.

**ADDITIONAL CLASS OF SUPPLEMENTAL PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make supplemental payments to qualifying acute care general hospitals located in a county with an estimated general population count of less than 1 million that serve a high percent of Medical Assistance (MA) patients. These payments will enable the continuation of quality medical services in these areas.

A hospital is eligible for this additional class of supplemental payments if the hospital meets all the following criteria. Unless otherwise stated, the source of the information is the Fiscal Year (FY) 2018-2019 MA-336 Hospital Cost Report, as available to the Department on June 22, 2021.

- a) The hospital is enrolled in the Commonwealth's MA Program as an acute care general hospital and submitted a FY 2018-2019 MA-336 Hospital Cost Report to the Department available to the Department on June 22, 2021;
- b) The hospital provides an array of inpatient services (acute, psychiatric and rehabilitation) to MA enrollees as evidenced by having provided at least one acute care day, one psychiatric day and one rehabilitation day to MA beneficiaries;
- c) The hospital's main campus is located in a county with an Annual Estimate of the Resident Population for 2019 of less than 1 million according to the U.S. Census Bureau, Population Division (March 2020 release date);
- d) The hospital's combined fee-for-service (FFS) and managed care Pennsylvania MA inpatient acute care days exceeds the statewide average combined FFS and managed care Pennsylvania MA inpatient acute care days for all hospitals enrolled in the MA Program as an acute care general hospital;
- e) The hospital's Medicaid Inpatient Utilization Rate (MIUR) exceeds 30% (for purposes of this eligibility criterion a hospital's MIUR is equal to the hospital's total combined FFS and managed care MA inpatient days divided by the hospital's total inpatient days);
- f) The hospital's inpatient Low Income Utilization Rate exceeds 30%; and,
- g) The hospital's operating margin is less than 1.0% based on the Pennsylvania Health Care Cost Containment Council's *FY 2019 Financial Analysis*.

Payments will be divided proportionately among qualified hospitals based on each hospital's fee-for-service (FFS) Pennsylvania MA inpatient acute care days of service to total FFS Pennsylvania MA inpatient acute care days for all qualifying hospitals.

Supplemental payments are subject to the regulation at 42 CFR 447.272 and the application of upper payment limits for inpatient services.

For FY 2022-2023, the Department will allocate an annualized amount of \$4.783 million in total funds (State and Federal) for these supplemental payments.

**ADDITIONAL CLASS OF SUPPLEMENTAL PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make supplemental payments to qualifying acute care general hospitals that provide a high volume of services to Medical Assistance (MA) eligible and low-income populations in non-rural medically underserved areas according to the Health Resources & Services Administration as of March 8, 2022. These payments will enable the continuation of quality medical services in these areas. These payments will enable the continuation of quality medical services in these areas.

A hospital is eligible for this additional class of supplemental payments if the hospital meets all the following criteria. Unless otherwise stated, the source of the information is the Fiscal Year (FY) 2018-2019 MA-336 Hospital Cost Report, available to the Department on June 22, 2021.

- a) The hospital is enrolled in the Commonwealth's MA Program as an acute care general hospital;
- b) The hospital submitted a FY 2018-2019 MA-336 Hospital Cost Report to the Department available to the Department on June 22, 2021;
- c) The hospital's main campus is located in a county of the third class with a population between 360,000 and 370,000 under the 2010 federal decennial census (county class for purposes of this payment program as reflected in *Classification of Counties, 2010 Census* within Section 6 of The Pennsylvania Manual, Volume 121);
- d) The hospital provided over 10,000 inpatient days of care to Commonwealth MA beneficiaries and offered an array of inpatient services to Commonwealth MA beneficiaries as evidenced by having provided at least 150 acute care days, 150 psychiatric days and 150 rehabilitation (medical and drug & alcohol) days to Commonwealth MA beneficiaries; and,
- e) The hospital has less than 300 total available beds.

Payments will be divided proportionately among qualified hospitals based on each hospital's fee-for-service (FFS) Pennsylvania MA inpatient acute care days of service to total FFS Pennsylvania MA inpatient acute care days for all qualifying hospitals.

Supplemental payments are subject to the regulation at 42 CFR 447.272 and the application of upper payment limits for inpatient services.

For FY 2022-2023, the Department will allocate an annualized amount of \$5.208 million in total funds (State and Federal) for these supplemental payments.

**ADDITIONAL CLASS OF SUPPLEMENTAL PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) provides additional funding to hospitals enrolled in Pennsylvania (PA) Medical Assistance (MA) as an acute care general hospital that provide a substantial portion of their inpatient services to PA MA patients. To qualify for this additional class of supplemental payments, an acute care general hospital must provide at least 80% of its inpatient days of care (both Fee-for-Service and Managed Care) to PA MA patients as evidenced by the hospitals' Fiscal Year (FY) 2009-2010 MA-336 Hospital Cost Report.

A qualifying hospital's payment is determined by dividing the hospital's PA MA inpatient days of care as specified in its FY 2009-2010 MA-336 Hospital Cost Report by the total PA MA inpatient days for all qualifying hospitals to establish the hospital proportional payment percentage. The hospital's proportional payment percentage is then multiplied by the funds appropriated for these payments to establish the hospital's allocation amount for the FY.

Supplemental payments are subject to the regulation at 42 CFR 447.272 and the application of upper payment limits for inpatient services.

For FY 2022-2023, the Department will allocate an annualized amount of \$2.665 million in total funds (State and Federal) for these supplemental payments.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services will make disproportionate share hospital (DSH) payments to certain Medical Assistance (MA) acute care general hospitals which, in partnership with an independent facility listed as a Cleft and Craniofacial Team by the American Cleft Palate-Craniofacial Association, provide surgical services to patients with cleft palate and craniofacial abnormalities. These payments are intended to promote access to inpatient hospital services for MA eligible and uninsured persons in the Commonwealth with cleft palate and craniofacial abnormalities.

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 FY 2010-2011 MA-336 Hospital Cost Report.

- a) The hospital is enrolled in the MA Program as a general acute care hospital and is licensed to provide obstetrical and neonatal services as reported by the Pennsylvania Department of Health for the period July 1, 2010, through June 30, 2011.
- b) The hospital has a partnership with a facility listed as of January 2013 as both a cleft palate team (CPT) and a craniofacial team (CFT) by the American Cleft Palate-Craniofacial Association and Cleft Palate Foundation.
- c) As of March 2013, the hospital is accredited as a Level I Adult Trauma Center and a Level I Pediatric Trauma Center by the Pennsylvania Trauma System Foundation.
- d) The hospital provided more than 135,000 total acute inpatient days of care.
- e) The hospital ranked at or above the 90<sup>th</sup> percentile for all enrolled acute care hospitals based on the total number of MA inpatient days of care.
- f) The hospital's ratio of uncompensated care to net patient revenue is at least 3.30%, based on the Pennsylvania Health Care Cost Containment Council's *Financial Analysis 2012, Volume One*.

Payments will be divided proportionally among qualified hospitals based on each hospital's total MA inpatient days to total MA inpatient days for all qualified hospitals. 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. Any funds available due to the application of the hospital-specific DSH upper payment limit will be redistributed to other hospitals qualifying under this additional class of DSH payments on a proportionate basis.

The FY 2022-2023 impact, as a result of the funding allocation for these payments, is \$1.188 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to qualifying Medical Assistance (MA) enrolled acute care general hospitals that provide a high volume of inpatient services to MA eligible and low-income populations.

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) 2011-2012 MA-336 Hospital Cost Report.

- a) The hospital is enrolled in the MA Program as an acute care general hospital.
- b) The hospital is located in a county with a total population of less than 500,000 residents, based on the 2010 Federal decennial census.
- c) The hospital has at least 400 total beds available.
- d) The hospital ranked at or above the 90th percentile, among MA enrolled acute care hospitals located in counties with a total population of less than 500,000 residents, on the total number of MA inpatient days of care provided.
- e) The hospital ranked in excess of one standard deviation above the mean among MA enrolled acute care hospitals located in counties with a total population of less than 500,000 residents, on the ratio of MA psychiatric inpatient days provided to total psychiatric inpatient days.
- f) The hospital's ratio of uncompensated care to net patient revenue, based on the Pennsylvania Health Care Cost Containment Council *Financial Analysis 2013*, exceeded 3.40%.

Payments will be divided proportionally among qualified hospitals based on each hospital's total MA inpatient days to total MA inpatient days for all qualified hospitals. 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 2022-2023 impact, as a result of the funding allocation for these payments, is \$0.726 million in total funds.



**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

A hospital is eligible for this additional class of disproportionate share hospital (DSH) payments if the hospital is a general acute care hospital that meets all criteria listed below. Unless otherwise stated, the source of the information is the Fiscal Year (FY) 2011-2012 MA-336 Hospital Cost Report.

- a) The hospital is enrolled in the Medical Assistance (MA) Program as a general acute care hospital and provides a comprehensive array of inpatient services (acute, psychiatric and rehabilitation), including inpatient obstetrical and neonatal services to MA beneficiaries.
- b) The hospital is accredited as an adult Level I Trauma Center according to the Pennsylvania Trauma Systems Foundation 2013 Annual Report.
- c) The hospital ranked at least three standard deviations above the mean for the total number of inpatient days provided to MA beneficiaries.
- d) The hospital ranked above the 99<sup>th</sup> percentile of all acute care hospitals for the total number of MA discharges.
- e) The hospital is an independent academic medical center and a member of the Alliance of Independent Academic Medical Centers.

Payments will be divided proportionally among all qualified hospitals based on each hospital's total MA inpatient days to total MA inpatient days for all qualified hospitals. 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 of Human Services 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 2022-2023 impact, as a result of the funding allocation for these payments, is \$4.271 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO CERTAIN ACADEMIC MEDICAL CENTERS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to certain academic medical centers to assure that the critical services they provide to the Medical Assistance (MA) population will continue. These payments are also intended to help offset the MA share of the medical education costs incurred by these hospitals to assure the continued availability of professional medical services to the Medical Assistance population.

To qualify for this additional class of DSH payments, the academic medical center must meet the following criteria as documented on the hospitals' Fiscal Year (FY) 2002-2003 MA-336 Hospital Cost Report:

1. Have total medical education costs of at least \$25 million.
2. Have Pennsylvania MA Education costs of at least \$1.5 million; and
3. Provide over 50,000 Pennsylvania MA days of care or have less than 500 set-up and staffed beds.

The Department will distribute payments to qualifying hospitals based on the hospitals' FY 2002-2003 MA-336 Hospital Cost Report as follows:

1. 47.191453% of available funding to a large hospital, defined as having 750 set up and staffed beds; and
2. 26.4042735% of available funding to each of the other qualifying hospitals.
3. To ensure that payments do not exceed available funds, the Department will adjust payments to each hospital using the following formula:
  - a. The calculated total amount of payments for each hospital under steps (1) and (2) in this section is divided by the total calculated amount for all hospitals to obtain a percentage, which is a ratio of each hospital's respective share of the calculated amount.
  - b. The resulting percentage for each hospital in clause (a) is multiplied by the total available funds to obtain a proportional payment for each hospital.

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 2022-2023 impact, as a result of the funding allocation for these payments, is \$23.606 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to certain Medical Assistance (MA) acute care general hospitals to ensure their participation in the MA Program. This payment promotes access to inpatient hospital specialty services for MA eligible persons in the Commonwealth. These funds will be used to support the medical education and operation of an academic medical program, which will foster the supply of health care professionals to treat the MA population.

A hospital is eligible for this additional class of DSH payments if the hospital meets all criteria listed below.

- a) The hospital is enrolled in the MA Program as an acute care general hospital and is licensed to provide inpatient obstetrical and neonatal services as reported by the Pennsylvania Department of Health for the period from July 1, 2014 through June 30, 2015.
- b) The hospital is located in a county with a population of less than 100,000 persons, based on the 2010 Census.
- c) The hospital is accredited as an adult Level I Trauma Center by the Pennsylvania Trauma System Foundation during Fiscal Year (FY) 2016-2017.
- d) The hospital's ratio of total MA inpatient discharges to total inpatient discharges exceeds 20.0%, based on its FY 2013-2014 MA-336 Hospital Cost Report available to the Department as of March 2018.
- e) The hospital's ratio of MA revenue to net patient revenue exceeds 13.0%, based on the Pennsylvania Health Care Cost Containment Council *Financial Analysis 2015, Volume One*.

A hospital's payment amount for this additional class of DSH payments will be determined as follows:

- 1) Divide the hospital's MA inpatient discharges by the total MA inpatient discharges for all qualifying hospitals; and
- 2) Multiply that share by the total amount allocated for these payments.

The data used for purposes of this determination will be obtained 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 2022-2023 impact, as a result of the funding allocation for these payments, is \$7.292 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services will make disproportionate share hospital (DSH) payments to qualifying hospitals to promote additional access to inpatient and ancillary outpatient services and to support academic medical programs for integrated patient centered medical services.

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) 2010-2011 MA-336 Hospital Cost Report.

- a) The hospital is enrolled in the Pennsylvania (PA) Medical Assistance (MA) Program as a general acute care hospital.
- b) The hospital is ranked at or above the 92<sup>nd</sup> percentile of all acute care hospitals on the total acute care inpatient days provided to MA beneficiaries.
- c) The hospital is ranked at or above the 94<sup>th</sup> percentile of all acute care hospitals on net PA MA Outpatient Revenues.
- d) The hospital is accredited as an Adult Level I Trauma Center and a Pediatric Level I Trauma Center according to the Pennsylvania Trauma Systems Foundation's *2012 Annual Report*.
- e) The hospital is part of an academic medical center that includes a regional medical campus in a county of the fourth class.

Payments will be divided proportionally among all qualifying hospitals based on each hospital's total MA acute care inpatient days to total MA acute care inpatient days for all qualified hospitals. 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. Any funds available due to the application of the hospital-specific DSH upper payment limit will be redistributed to other hospitals qualifying under this additional class of disproportionate share payments on a proportionate basis.

The FY 2022-2023 impact, as a result of the funding allocation for these payments, is \$9.375 million in total funds.

**ADDITIONAL CLASS OF DISPROPORTIONATE SHARE PAYMENTS TO QUALIFYING HOSPITALS**

The Department of Human Services (Department) will make disproportionate share hospital (DSH) payments to qualifying acute care general hospitals to promote the availability of professional medical services to the Medical Assistance (MA) population in less urbanized areas of the Commonwealth.

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) 2010-2011 MA-336 Hospital Cost Report.

- 1) The hospital is enrolled in the Pennsylvania (PA) MA Program as an acute care general hospital.
- 2) The hospital is located in a county of the third class with a population between 279,000 and 282,000 under the 2010 federal decennial census.
- 3) The hospital's PA MA Fee-for-Service Medical Education costs exceed \$500,000.

Payments to qualifying hospitals will be divided equally among all qualifying hospitals. 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 2022-2023 impact, as a result of the funding allocation for these payments, is \$5.833 million in total funds.