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**State/Territory Name: CT** 

State Plan Amendment (SPA) #: 13-037

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, M/S S3-13-15 Baltimore, MD 21244-1850



MAR 18 2014

Roderick L. Bremby, Commissioner Department of Social Services 25 Sigourney Street Hartford, CT 06106-5033

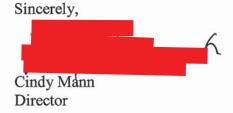
RE: Connecticut 13-037

Dear Mr. Bremby:

We have reviewed the proposed amendment to Attachments 4.19-A, of your Medicaid State plan submitted under transmittal number (TN) 13-037. This amendment revises the state's disproportionate share hospital (DSH) program. Specifically, it establishes a DSH pool of \$100,000 for general acute care hospitals with defined criteria and payment methodology.

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. We are pleased to inform you that Medicaid State plan amendment 13-037 is approved effective October 1, 2013. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please call Novena James-Hailey at (617) 565-1291.



TRANSMITTAL AND NOTICE OF APPROVAL	1. TRANSMITTAL NUMBER: 13-037	2. STATE: CT
OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR, CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. TYPE OF STATE PLAN MATERIAL (Check One):	4. PROPOSED EFFECTIVE DATE 10/01/2013	
NEW STATE PLANAMENDMENT TO	BE CONSIDERED AS NEW PLAN X A	MENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION: Sections 1905 (a)(1) and 1923 of the Social Security Act 42 CFR 440.10 and 42 CFR 447.253(a)(b)and(c)	7. FEDERAL BUDGET IMPACT: a. FFY 2014 \$50,000 costs b. FFY 2015 \$50,000 costs	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-A Page 25	PAGE NUMBER OF THE SUPERSEDED PLA SECTION OR ATTACHMENT (If applicable)     New	AN
10. SUBJECT OF AMENDMENT: This amendment establishes a new DSH program for general acute care hospitals (Attachment 4.19A, section 13) that applies only to hospitals that: (1) qualify under Section 1923(b) of the Social Security Act, (2) have at least two obstetricians with staff privileges at the hospital who agree to provide obstetrical services to Medicaid eligible beneficiaries, and (3) have Medicaid inpatient utilization greater than one standard deviation over the mean.		
11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S OFFICE REPORTED NO COMMENTCOMMENTS OF GOVERNOR'S OFFICE ENCLNO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	X_OTHER, AS SPECIFIED:  Comments if any to follow	
12. SIGNATURE OF STATE AGENCY OFFICIAL:  Describes Communication	16. RETURN TO:	
TYPED NAME: Roderick L. Bremby	State of Connecticut	
14. TITLE: Commissioner	Department of Social Services 25 Sigourney Street Hartford, CT 06106-5033	
15. DATE SUBMITTED: December 30, 2013 FOR REGION	Attention: Ginny Mahoney, Medical Police	. <b>y</b> कृतिकारिक विकास समितिकारिक स्थापन
17. DATE RECEIVED:	18. DATE APPROVED: MAR 1 8 2014	
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: PONT Thompson	Party Dinector Blight Fin	ANCIA) Met CNCS
23. REMARKS:		

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State Connecticut

(13) Additional Disproportionate Share Payments for Acute Care Hospitals (short-term General Hospitals) which provide Uncompensated Care under Section 1923 of the Social Security Act.

In addition to the disproportionate share payments (DSH) set forth in previous sections, disproportionate share payments are made to any qualifying short-term General Hospital lawfully operating within the state which provides uncompensated care. Short-term Children's General Hospitals as defined in Section 19-13D(1)(b)(A) of the Public Health Code of the State of Connecticut are specifically excluded under this Section.

CRITERIA – In order to qualify as a disproportionate share hospital under this section, a hospital must meet the following conditions:

- Be a lawfully operating acute care hospital within the State providing uncompensated care services.
- 2. Meet the obstetrician requirements defined in Section 1923 (d) of the Social Security Act.
- 3. Have a Medicaid inpatient utilization rate at least one standard deviation over the mean Medicaid utilization rate for hospitals receiving Medicaid payments in the State as defined in Section 1923 (b) of the Social Security Act.

PAYMENT ADJUSTMENT – Commencing October 1, 2013, annual disproportionate share payments will be made to qualifying hospitals based on data for the federal fiscal year two years prior to the payment year. Annual payments will total \$100,000 and be allocated as follows:

- 1. For each qualifying hospital, calculate the difference between its Medicaid inpatient utilization rate and the mean Medicaid utilization rate.
- 2. Calculate the sum of the result of (1) for all hospitals.
- 3. Divide the result of (1) by the result of (2).
- 4. The disproportionate share payment shall be the result of multiplying the amount available of \$100,000 by the result of (3).

The DSS will test the calculated disproportionate share payments allocated to each hospital in each year to ensure that payments do not exceed federal limits established under the Omnibus Budget Reconciliation Act of 1993 or Section 1923 of the Social Security Act using protocols established in the DSH Audit procedures developed by CMS.

Following the completion of the DSH Audit pursuant to Section 1923(j)(2) of the Act, the DSH settlement will be limited to reductions for those hospitals over the hospital specific DSH limit with a reallocation to the other hospitals.

Approval Date MAR 18 2014

Effective Date 10/01/2013

TN# <u>13-037</u> Supersedes TN# New