Revised 5/17/11

Supplement 2 to Attachment 4.19-B

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State/Territory:	IOWA

Methods and Standards for Establishing Payment Rates for Other Types of Care Outpatient Hospital Care (Cont.)

- 19. Reserved for future use
- 20. Final Settlement for Iowa State-owned Teaching Hospital

Distributions methodology for the \$9,900,000

The \$9,900,000 will first be applied to bring inpatient hospital reimbursement (interim payments plus GME) to 100% of inpatient hospital cost (calculated in accordance with Attachment 4.19-A). The remaining amount of the \$9,900,000 will then be applied to bring outpatient hospital reimbursement to 100% of outpatient hospital cost (calculated in accordance with Attachment 4.19-B and Supplement 2 to Attachment 4.19-B).

If the total \$9,900,000 is used in bringing inpatient hospital reimbursement to 100% of inpatient cost, then no further outpatient payments will be made.

In no case will total outpatient hospital payments exceed 100% of outpatient cost.

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State Plan TN#	MS-10-018	Effective		
Superseded TN#	MS-10-013	Approved	MIN 0 1 2011	