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State Name: Pennsylvania

State Plan Amendment (SPA)#: 19-0004

This file contains the following documents in the order listed:

1) Approval Letter

2) CMS 179 Form/Summary Form (with 179-like data)

3) One (1) SPA Page

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

May 30, 2019

Ms. Teresa D. Miller, Secretary Commonwealth of Pennsylvania Department of Human Services Office of Medical Assistance Programs PO Box 2675 Harrisburg, PA 17110

RE: State Plan Amendment 19-0004

Dear Ms. Miller:

We have completed our review of State Plan Amendment (SPA) 19-0004. This SPA modifies Attachment 4.19-A of Pennsylvania's Title XIX State Plan. Specifically, the amendment authorizes an additional class of disproportionate share hospital payments acute care general hospitals to promote access to comprehensive inpatient services by assuring an adequate supply of health care professionals.

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 state plan amendment 19-0004 effective April 21, 2019. We are enclosing the HCFA-179 and the amended plan pages.

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

Sincerely,

Kristin Fan Director

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES		FORM APPROVE OMB, No. 0938-011	
TRANSMITTAL AND NOTICE OF APPROVAL OF		2. STATE	
STATE PLAN MATERIAL	19-0004	Pennsylvania	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TIT SOCIAL SECURITY ACT (MEDICA Title XIX		
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE		
CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	April 21, 2019		
5. TYPE OF PLAN MATERIAL (Check One)	40-40-40-40-40-40-40-40-40-40-40-40-40-4		
☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONS	BIDERED AS NEW PLAN	AMENDMENT	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	NDMENT (Separate transmittal for each an	nendment)	
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT		
42 CFR 447 Subpart C	a. FFY 2019 \$33,735,528 b. FFY 2020 \$0	_	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSE OR ATTACHMENT (If Applicable)	DED PLAN SECTION	
Attachment 4.19A, Page 21cc	Attachment 4.19A, Page 21cc		
10. SUBJECT OF AMENDMENT			
Disproportionate Share Payments to Qualifying Hospitals			
11. GOVERNOR'S REVIEW (Check One)	And the second s		
☐ GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS		
SPECIFIED COMMENTS OF GOVERNOR'S OFFICE ENCLO			
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	V		
12. SIGN /C /	16. RETURN TO		
/5/	Commonwealth of Pennsylvania Department of Human Services	.00	
13. TYPED NAME	Office of Medical Assistance Programs	fice of Medical Assistance Programs	
Teresa D. Miller	Bureau of Policy, Analysis and Planning P.O. Box 2675	reau of Policy, Analysis and Planning	
14. TITLE Secretary of Human Services	Harrisburg, Pennsylvania 17105-2675		
15. DATE SUBMITTED MAY 6 7 2019			
FOR BEGINNIA			
FOR REGIONAL O 17 DATE RECEIVED	18. DATE APPROVED		
TO DATE RECEIVED	MAY 3 0 2	010	
PLAN APPROVED - O	NE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL APR 2 1 2019	20. SIGNATURE DE PENIONAL OFFICIAL		
	22. TITLE Director, FM	G	
23. REMARKS			
FORM CMS-179 (07/92) Instructions	on Rack		

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: COMMONWEALTH OF PENNSYLVANIA

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 2018-2019 impact, as a result of the funding allocation for these payments, is \$64,566 million (\$30.830 million in State general funds and \$33,736 million in Federal funds).

TN# 19-0004 Supersedes TN# 18-0016

Approval Date:

MAY 3 0 2019

Effective Date: April 21, 2019