PUBLIC NOTICE

September 30, 2022

Pursuant to 42 C.F.R. Section 447.205, public notice is hereby given for the submission of a Medicaid State Plan Amendment (SPA) 22-0025 Disproportionate Share Hospital (DSH). The Division of Medicaid, in the Office of the Governor, will submit this proposed SPA to the Centers for Medicare and Medicaid Services (CMS) effective October 1, 2022, contingent upon approval from CMS, our Transmittal #22-0025.

- 1. SPA 22-0025 is being submitted to change redistribution methodology for DSH payments in order to allow all providers who were underpaid to receive some benefit, effective October 1, 2022.
- 2. This expected annual aggregate expenditure for this SPA is \$0.00 for Federal Fiscal Year (FFY) 2023 and 2024.
- 3. The Division of Medicaid is submitting this proposed SPA to be in compliance with 42 C.F.R. § 447.201 which requires all policy and methods used in setting payment rates for services be included in the State Plan.
- 4. A copy of the proposed SPA will be available in each county health department office and in the Department of Human Services office in Issaquena County for review. A hard copy can be downloaded and printed from www.medicaid.ms.gov, or requested at 601-359-3984 or by emailing at DOMPolicy@medicaid.ms.gov.
- 5. Written comments will be received by the Division of Medicaid, Office of the Governor, Office of Policy, Walter Sillers Building, Suite 1000, 550 High Street, Jackson, Mississippi 39201, or DOMPolicy@medicaid.ms.gov for thirty (30) days from the date of publication of this notice. Comments will be available for public review at the above address and on the Division of Medicaid's website at www.medicaid.ms.gov.
- 6. A public hearing on this SPA will not be held.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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share hospitals is determined for a rate fiscal year, no additional hospitals will receive

disproportionate share status. A hospital will be deleted from disproportionate share

status if the hospital fails to continue providing nonemergency obstetric services during

the DSH rate year, if the hospital is required to provide such services for DSH eligibility.

5-4 <u>Timing of Disproportionate Share Payments</u>

The DSH payments shall be paid on or before December 31, March 31, and June 30 of

each fiscal year, in increments of one-third (1/3) of the total calculated DSH amounts.

5-5 Audit of Disproportionate Share Payments

As required by Section 1923(j) of the Social Security Act related to auditing and

reporting of disproportionate share hospital payments, the Division of Medicaid will

implement procedures to comply with the Disproportionate Share Hospital Payments

final rule issued in the December 19, 2008, Federal Register, with effective date of

January 19, 2009, to ensure that the hospital specific DSH limits have not been exceeded.

For audits conducted prior to Federal Fiscal Year (FFY) 2023, any funds recouped as a

result of audits or other corrections shall be redistributed to other DSH eligible hospitals

within the state, provided each hospital remains below their hospital specific DSH limit.

Funds shall be redistributed to the state hospital with the highest Medicaid Inpatient

Utilization Rate (I\11UR). Any remaining funds available for redistribution shall be

redistributed first to other state hospitals in the order of MIUR

TN No. 22-0025

Supercedes

TN No. <u>2012-008</u>

Date Received:

Date Approved:

Date Effective: 10/01/2022

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

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from highest to lowest, then to government non-state hospitals in the order of MIUR from

highest to lowest, then to private hospitals in the order of MIUR from highest to lowest.

Beginning with the audit of the FFY 2023 DSH payments and thereafter, all facilities

meeting the criteria to be a DSH eligible hospital will be audited to determine the

uncompensated cost and OBRA limit for each facility for the fiscal period. The allowed

uncompensated cost will be compared to any DSH payments received to determine each

facility's overpayment or underpayment applicable to the period. Any funds recouped as

a result of overpayments determined during the audits or other corrections shall be

redistributed to other DSH eligible hospitals within the state, provided each hospital

remains below their hospital specific DSH limit. The funds shall be redistributed to those

facilities under-compensated for the period based upon the ratio of each facility's under-

compensation to the total of all amounts under-compensated. This redistribution will

provide each under-compensated facility with a pro-rata share of any recouped funds.

5-6 DSH Allotment Adjustments

If the federal government adjusts the DSH allotment available to Mississippi prior to the

month of a scheduled payment within the DSH payment year, this revised Mississippi

DSH allotment will be utilized in the next scheduled DSH payment. However, if the

federal government revises the Mississippi DSH allotment after June I of the DSH

payment year, this revised DSH allotment will be incorporated into an additional DSH

distribution, negative or positive, that will be with the next DSH payment but based on

the DSH calculation for the DSH payment year. All DSH payments are subject to the

State's lower DSH payment limit.

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