

DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

Supplemental Payments to Acute Care Hospitals (SPA 16-013)

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS).

Changes to Medicaid State Plan

Effective on or after February 1, 2016, SPA 16-013 implements supplemental inpatient payments to specified acute care hospitals in accordance with the enacted budget, Public Act 15-244, as modified by Public Act 15-5, June Special Session, and as further modified by Public Act 15-1 of the December 2015 Special Session.

Fiscal Information – Estimated Annual Change to Medicaid Expenditures

DSS estimates that this SPA will increase annual aggregate expenditures by approximately \$150.2 million in State Fiscal Year 2016.

Additional Information

In accordance with federal Medicaid requirements, upon request, DSS will provide copies of the proposed SPA. In addition, copies of the proposed SPA may be obtained at any DSS regional office and on the DSS web site: <http://www.ct.gov/dss>. Go to “Publications” and then to “Updates”.

Written, phone, and e-mail requests should be sent to Christopher A. Lavigne, Office of Reimbursement & Certificate of Need, Department of Social Services, 55 Farmington Avenue, Hartford, CT 06105 (Phone: 860-424-5719, Fax: 860-424-4812, E-mail: christopher.lavigne@ct.gov). Please reference: SPA 16-013, Inpatient Supplemental Payments to Acute Care Hospitals.

Members of the public may also send DSS written comments about the SPA. Written comments must be received by DSS at the above contact information no later than January 29, 2016.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Connecticut

(2) **Supplemental Reimbursement for Inpatient Hospital Services.**

Supplemental payments to eligible hospitals shall be made from a pool of funds in the amount of approximately \$151.2 million for the period February 1, 2016 through June 30, 2016. The payments shall be made periodically throughout the fiscal year.

- (a) Hospitals eligible for supplemental payments under this paragraph are short-term general hospitals other than short-term children's general hospitals and short-term acute care hospitals operated exclusively by the State, other than a short-term acute care hospital operated by the State as a receiver.
- (b) Each eligible hospital's share of the supplemental payment pool shall be equal to that hospital's pro rata share of the total Medicaid inpatient revenues of all eligible hospitals in the aggregate. For purposes of this supplemental payment, "Medicaid inpatient revenues" means payments for Medicaid inpatient hospital services provided in federal fiscal year 2013 to each eligible hospital up to \$50 million per year per hospital as reported in each hospital's filing with the State of Connecticut Office of Health Care Access (OHCA).