



State of Louisiana
Department of Health and Hospitals
Bureau of Health Services Financing

October 29, 2008

Dear Administrator:

RE: FFY 2009 Community Hospital Disproportionate Share Pool

This letter is to clarify both the qualification criteria and the documentation required from qualifying disproportionate share hospitals to determine Federal Fiscal year (FFY) 2009 disproportionate share payments for community hospitals.

In order to qualify for Community Hospital Disproportionate Share payments, a hospital must:

1. Be a community hospital which provided services to uninsured patients in accordance with criteria as specified in ACT 19 (HB 1) of the 2008 Louisiana Regular Session, pages 113-115. Rural and state hospitals are not eligible for FFY 09 Community Hospitals Disproportionate Share payments.
2. Have filed a year-end cost report in accordance with Medicare filing guidelines, including extensions. Hospitals that did not file a year-end cost report will not be eligible to participate in the FFY 09 Community Hospital Disproportionate Share Pool. The electronic cost report (ECR file) for the latest filed cost report period is to be submitted.
3. Meet the federally mandated OB qualification criteria and the 1% Medicaid utilization criteria. The OB qualification for Medicaid Disproportionate Share Payments form must be completed. Hospitals which meet the Medicaid days utilization criteria by including patient days for which a patient is eligible for Medicaid during this cost reporting period, but not covered, must submit a listing

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of patients names with non-covered Medicaid eligible days. All qualifying documentation submitted by hospitals is subject to audit.

4. Complete the disproportionate share survey for the period July 1, 2007 through June 30, 2008.
5. Submit copies of the consolidated financial statements (income statement and balance sheet) for the latest fiscal year.

Instructions for submission of the uninsured patient data and the forms referenced in items 3 and 4 above will be available on the Louisiana Medicaid website (<http://www.lamedicaid.com>) .

Qualifying hospitals must submit documentation by December 3, 2008.

All forms (DSH survey form, OB Qualification form, Exhibit A- Summary of Patient Information for uninsured charges and payments, the latest filed cost report's ECR file, and consolidated financial statements for the latest fiscal year) should be forwarded to:

Nikki Kern
Myers & Stauffer LC
11440 Tomahawk Creek Parkway
Leawood, KS 66211

Sincerely,

Debbie Gough
Program Manager