



## **The Supplemental Security Income/Medicare Beneficiary Data for Fiscal Year 2017 for Inpatient Prospective Payment System Hospitals, Inpatient Rehabilitation Facilities, and Long Term Care Hospitals**

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Related Change Request (CR) Number: 11187

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Related CR Transmittal Number: R2271OTN

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### **PROVIDER TYPE AFFECTED**

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This MLN Matters Article is for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCHs) billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

### **PROVIDER ACTION NEEDED**

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CR11187 provides MACs updated data they need to determine the Disproportionate Share (DSH) adjustment for IPPS hospitals and the Low-Income Patient (LIP) adjustment for IRFs, as well as payments (as applicable) for LTCH discharges (for example, discharges that Medicare pays at the IPPS comparable amount under the short-stay outlier payment adjustment). Make sure that your billing staffs are aware of these changes.

### **BACKGROUND**

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Section 9105 of the Consolidated Omnibus Budget Reconciliation Act of 1985 provides that for discharges occurring on or after May 1, 1986, an additional payment Medicare must pay IPPS hospitals that serve a disproportionate share of low-income patients. Medicare determines this additional payment by multiplying the federal portion of the Diagnosis-Related Group (DRG) payment by the DSH adjustment factor, and beginning for discharges occurring on or after October 1, 2014, by multiplying the DRG payment by the DSH adjustment factor reduced by 75 percent. (See 42 CFR 412.106.)

Under the IRF Prospective Payment System (PPS), IRFs will receive an additional payment amount to account for the cost of furnishing care to low-income patients. Medicare determines the additional payment by multiplying the federal prospective payment by the LIP adjustment formula. (See 42 CFR 412.624(e)(2).)

Under the LTCH PPS, the payment adjustment for Short-Stay Outlier (SSO) cases at 42 CFR 412.529 requires the calculation of an amount comparable to the amount that Medicare would otherwise pay under the IPPS (the “IPPS comparable amount.”). This calculation includes an “IPPS Comparable” DSH adjustment, where applicable, that is determined using the best available Supplemental Security Income (SSI) data at the time of claim payment (See 42 CFR 412.529(d)(4)).

### Updated Medicare Files

The SSI/Medicare beneficiary data for hospitals are available electronically and contain the name of the hospital, The Centers for Medicare & Medicaid Services (CMS) certification number, SSI days, total Medicare days, and the ratio of days for patients entitled to Medicare Part A attributable to SSI recipients. The files are available at:

- IPPS: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-payment/AcuteInpatientPPS/dsh.html>
- IRF: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/SSIData.html>
- LTCH: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/LongTermCareHospitalPPS/download.html>

CMS uses the data for settlement purposes for IPPS hospitals and IRFs with cost reporting periods beginning and during Fiscal Year (FY) 2017 (cost reporting periods beginning on or after October 1, 2016, and before October 1, 2017), except when CMS explicitly directs otherwise.

## ADDITIONAL INFORMATION

The official instruction, CR11187, issued to your MAC regarding this change is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2019Downloads/R2271OTN.pdf>.

If you have questions, your MACs may have more information. Find their website at <http://go.cms.gov/MAC-website-list>.

## DOCUMENT HISTORY

Date of Change	Description
March 29, 2019	Initial article released.

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