

WSR 23-11-157

HEALTH CARE AUTHORITY

[Filed May 24, 2023, 10:17 a.m.]

NOTICE

Title or Subject: Medicaid State Plan Amendment (SPA) 23-0031 Inpatient Hospital Supplemental Payments (Safety Net Program).

Effective Date: January 1, 2024.

Description: The health care authority (HCA) intends to submit medicaid SPA 23-0031 in order to update inpatient hospital supplemental payment amounts for the new safety net program. Prospective payment system hospitals total supplemental payment pool will be reduced to \$43,600,000. SPA 23-0031 will also change "state fiscal year" to "calendar year."

SPA 23-0031 is expected to decrease the annual aggregate expenditures/payments for prospective payment system hospitals that receive supplemental payments by \$16,185,000.

A copy of SPA 23-0031 is available for review. HCA would appreciate any input or concerns regarding this SPA. To request a copy of the SPA or submit comments, please contact the person named below (please note that all comments are subject to public review and disclosure, as are the names of those who comment).

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