

WSR 21-09-017

HEALTH CARE AUTHORITY

[Filed April 9, 2021, 12:56 p.m.]

NOTICE

Title or Subject: Medicaid State Plan Amendment (SPA) 21-0015
Small Rural Disproportionate Share Hospital Payment Pool Amount.
Effective Date: April 10, 2021.

Description: The health care authority (HCA) intends to submit
medicaid SPA 21-0015 to reflect the current total amount of the small
rural disproportionate share hospital (SRDSH) total "payment pool"
through which SRDSH payments are made. The total payment pool amount
currently described in the state plan reflects the previous total
amount.

SPA 21-0015 is expected to have no effect on annual aggregate ex-
penditures/payments as it reflects the current payment pool amount.

HCA is in the process of developing the SPA. HCA would appreciate
any input or concerns regarding this SPA. To request a copy of the SPA
when it becomes available or submit comments, you may contact the peo-
ple named below (please note that all comments are subject to public
review and disclosure, as are the names of those who comment).

Contact: Mary O'Hare, Hospital Finance, 626 8th Avenue S.E.,
Olympia, WA 98504, TRS 711, email mary.ohare@hca.wa.gov.