Dear Ms. Zimmerman:

We have reviewed the proposed amendment to Attachment 4.19-A and 4.19-B of your Medicaid State plan submitted under transmittal number (TN) 13-022. Effective for services on or after July 1, 2013, this SPA amends the supplemental payment related to medical education costs for various provider types, including enrolled hospital, medical center, clinic, practitioner, or other organization that provides accredited clinical training of: physicians (medical students and residents), doctor of pharmacy practitioners, doctors of chiropractic, dentists, advance practice nurses (clinical nurse specialists, certified registered nurse anesthetists, nurse practitioners, and certified nurse midwives), and physician assistants, and effective July 1, 2015, dental therapists, advanced dental therapists, psychologists, clinical social workers, community paramedics, and community health workers.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the regulations at 42 CFR 447 Subpart C. We hereby inform you that Medicaid State plan amendment 13-022 is approved effective July 1, 2013. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Tom Caughey at (517) 487-8598.

Sincerely,

Kristin Fan
Director

Enclosure
Supplemental Payment for Medical Education

In addition to Medical Assistance payments included in this Attachment, Medical Assistance provides for an additional annual payment by April 30 of each year for the previous state fiscal year for distribution to Medical Assistance-enrolled eligible teaching hospitals. A single pool of money equal to $7,575,000 is used to make supplemental payments to qualifying providers that include both institutional eligible training sites, and non-institutional eligible training sites described in Attachment 4.19-B Supplement 2. The Medical Assistance payment is increased in an amount equal to:

(1) $7,575,000, multiplied by a proportion equal to the hospital’s public program revenue divided by the total amount of public program revenue of all qualifying providers eligible training sites. Public program revenue is the sum of a provider’s revenue from medical assistance, prepaid medical assistance, and through June 30, 2014, general assistance medical care and prepaid general assistance medical care.

(2) For hospitals with public program revenue equal to or greater than 0.98 percent of the total public program revenue of all qualifying providers eligible training sites, payments are increased by 20 percent.

(3) Payments to hospitals training sites with public program revenue less than 0.98 percent of the total public program revenue of all qualifying providers eligible training sites are reduced proportionately to fund the payment increases described in sub-item (2).

Effective July 1, 2015:

(4) Subitems (2) and (3) above no longer apply.

(5) Qualifying providers Training sites with no public program revenue, fewer than .1 FTE eligible trainees, or whose payment under subitem (1) would result in less than $5,000, are not eligible for increased payments.

(6) No qualifying provider shall receive a payment that is in excess of the 95th percentile for payment per FTE across all qualified providers. Excess payments shall be redistributed according to the formula above.

For State Fiscal Year 2013 only, the amount available in paragraph (1) above is $7,275,000, and prior to the formula in paragraphs (1) to (4), the annual payment to Gillette Children’s Specialty Healthcare is increased by $300,000.
Qualifying Provider. “Qualifying provider” means a Medical Assistance enrolled hospital, medical center, clinic, practitioner, or other organization that provides accredited clinical training of physicians (medical students and residents), doctor of pharmacy practitioners, doctors of chiropractic, dentists, advance practice nurses (clinical nurse specialists, certified registered nurse anesthetists, nurse practitioners, and certified nurse midwives), and physician assistants, and effective July 1, 2015, dental therapists, advanced dental therapists, psychologists, clinical social workers, community paramedics, and community health workers; and that has successfully applied for this payment, in accordance with Minnesota Statutes § 62J.692.
6.d. Other practitioners’ services. (continued)

The base rate as described in this item is adjusted by the following clauses of Supplement 2 of this Attachment.

A. IHS/638 Facilities
B. Critical Access Hospitals
C. TPL
D. MinnesotaCare Tax Rate Adjustment
E. Modifiers
G. Community and Public health Centers
I. Exceptions to payment methodology and reconstructing a rate
P. Rate Increase Effective July 1, 2007
T. Rate increase July 1, 2010
cc. Supplemental payment for medical education
cc. Supplemental payment for medical education

In addition to Medical Assistance payments included in this Attachment, Medical Assistance provides for an additional annual payment by April 30 of each year for the previous state fiscal year for distribution to Medical Assistance-enrolled qualified providers. A single pool of money equal to $7,575,000 is used to make supplemental payments to qualifying providers that include both non-institutional eligible training sites, and institutional eligible training sites described in Attachment 4.19-A Supplement 3. The Medical Assistance payment is increased in an amount equal to:

(1) $7,575,000, multiplied by a proportion equal to the qualifying provider’s hospital’s public program revenue divided by the total amount of public program revenue of all qualifying providers eligible training sites. Public program revenue is the sum of a provider’s revenue from medical assistance, prepaid medical assistance, and through June 30, 2014, general assistance medical care and prepaid general assistance medical care.

(2) For qualifying providers hospitals with public program revenue equal to or greater than 0.98 percent of the total public program revenue of all qualifying providers eligible training sites, payments are increased by 20 percent.

(3) Payments to qualifying providers training sites with public program revenue less than 0.98 percent of the total public program revenue of all qualifying providers eligible training sites are reduced proportionately to fund the payment increases described in sub-item (2).

Effective July 1, 2015:
(4) Subitems (2) and (3) above no longer apply.

(5) Qualifying providers training sites with no public program revenue, fewer than .1 FTE eligible trainees, or whose payment under subitem (1) would result in less than $5,000, are not eligible for increased payments.

(6) No qualifying provider shall receive a payment that is in excess of the 95th percentile for payment per FTE across all qualified providers. Excess payments shall be redistributed according to the formula above.

For State Fiscal Year 2013 only, the amount available in paragraph (1) above is $7,275,000, and prior to the formula in paragraphs (1) to (4), the annual payment to Gillette Children’s Specialty Healthcare is increased by $300,000.
cc. Supplemental payment for medical education (cont’d)

Qualifying Provider. “Qualifying provider” means a Medical Assistance enrolled hospital, medical center, clinic, practitioner, or other organization that provides accredited clinical training of physicians (medical students and residents), doctor of pharmacy practitioners, doctors of chiropractic, dentists, advance practice nurses (clinical nurse specialists, certified registered nurse anesthetists, nurse practitioners, and certified nurse midwives), and physician assistants, and effective July 1, 2015, dental therapists, advanced dental therapists, psychologists, clinical social workers, community paramedics, and community health workers; and that has successfully applied for this payment, in accordance with Minnesota Statutes § 62J.692.