Local Funds Tracking System (LoFTS)

User Guide: Module 1

Texas Health and Human Services
Provider Finance Department
Local Funds Monitoring

October 2023 Reporting

Table of Contents

Texas Health and Human Services ● **hhs.texas.gov**

List of Acronyms

CFR	Code of Federal Regulations
CHIRP	Comprehensive Hospital Increase Reimbursement Program
CHOW	Change of Ownership
CMS	The Centers for Medicare and Medicaid Services
CPE	Certified Public Expenditure
DPP	Directed Payment Program
DPP BHS	Directed Payment Program for Behavioral Health Service
DSH	Disproportionate Share Hospital
DSRIP	Delivery System Reform Incentive Payments
FFY	Federal Fiscal Year
GME	Graduate Medical Education
HARP	Hospital Augmented Reimbursement Program
HHS	U.S. Health and Human Services
HHSC	Texas Health and Human Services Commission
IGT	Intergovernmental Transfer
LEA	Local Education Agencies (Included under LGE)
LFM	Local Funds Monitoring
LGE	Local Governmental Entity (Includes entities historically categorized as Local Education Agencies / LEAs)
LoFTS	Local Funds Tracking System
LPPF	Local Provider Participation Fund
NAIP	Network Access Improvement Program
NPR	Net Patient Revenue
PHP-CCP	Public Health Provider-Charity Care Program
PFD	Provider Finance Department
QIPP	Quality Incentive Payment Program
RAPPS	Rural Access to Primary and Preventive Services
SDA	Service Delivery Area
SHARS	School Health and Related Services
TAC	Texas Administrative Code
TIPPS	Texas Incentives for Physicians and Professional Services
UC	Uncompensated Care (Includes Hospital, Dental, Ambulance, and Physician Groups)

Purpose

This document provides an overview of Module 1 for LoFTS. Module 1 applies to LGEs that IGT to support Medicaid payment programs using funds generated through the administration of a LPPF. This document provides detailed instructions and tips to move through the system most efficiently.

For instructions on registering for and logging into LoFTS, see the **Local Funds Tracking System User Guide: Registration, Login, & Module Determination**.

Assistance

For assistance regarding this LoFTS user guide, contact Texas Health and Human Services Commission (HHSC), Provider Finance Department (PFD) Local Funds Monitoring at: PFD_LFM@hhs.texas.gov or (737)-867-7877.

Introduction

If your LGE operates on a fiscal year other than the federal fiscal year, you may need multiple documents to cover the reporting time period October 1, 2022 through September 30, 2023.

Required Documentation

We recommend that you have these documents and information prepared and available before beginning Module 1:

- ▶ Assessment letters,
- ▶ Public notices, meeting agendas, and meeting minutes for rate setting,
- ▶ List of license numbers for all assessed hospital,
- ▶ Collection or Delinquency letters; and
- ▶ List of all hospital license numbers the LGE supports via IGT – including all hospitals in a SDA if the LGE supports a program that makes payments from pooled funds (such as DSH, UC, CHIRP, DSRIP, etc.).
- ▶ List of relationships with any non-public hospital:
  - o in the LGE's jurisdiction; and/or
  - o that receives a payment generated by the LGE's IGT.
- ▶ List of administrative expenses associated with the LPPF account.
- ▶ Copies of LPPF bank statements from October 2022 – September 2023. If possible, label the transaction either by highlighting or adding a note to the side of the amount for:
  - o Assessment payments by the hospital,
  - o IGT debits by the program (DSRIP, CHIRP, etc.); and
  - o Administrative expenses.

General Tips

Module 1 instructions are included following the General Tips.
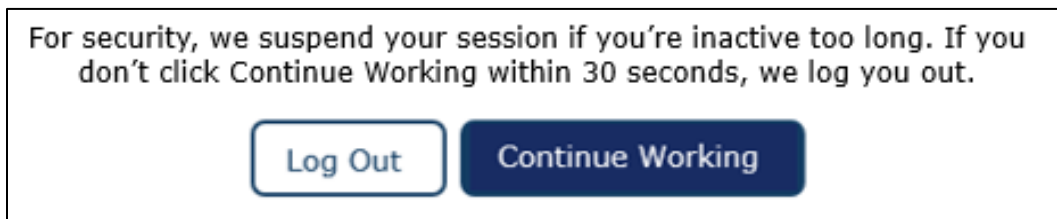
Navigating Pages

For all pages, **DO NOT use the back arrow.** Use the **Home** button or the selections available on the top right side of the page.

If you need to save and come back later, click the **Save and Continue** button. Clicking **Save and Continue** will take you to the next page, but you can navigate to a previous page by using the page selections on the right side of your screen. **If you leave the session without saving, information will be lost**.

System Time Out

The LoFTS system will time out after 30 minutes of inactivity. A popup will appear asking if you want to continue working. You will be logged out if you do not click **Continue Working** within 30 seconds.

> For security, we suspend your session if you're inactive too long. If you don't click Continue Working within 30 seconds, we log you out.
>
> | Log Out | **Continue Working** |

Uploading Documents

After uploading a file, a confirmation of the file upload will appear.

> ## Upload Files
>
> PDF LAST DATE.pdf
> 93 KB ✔
>
> 1 of 1 file uploaded **Done**
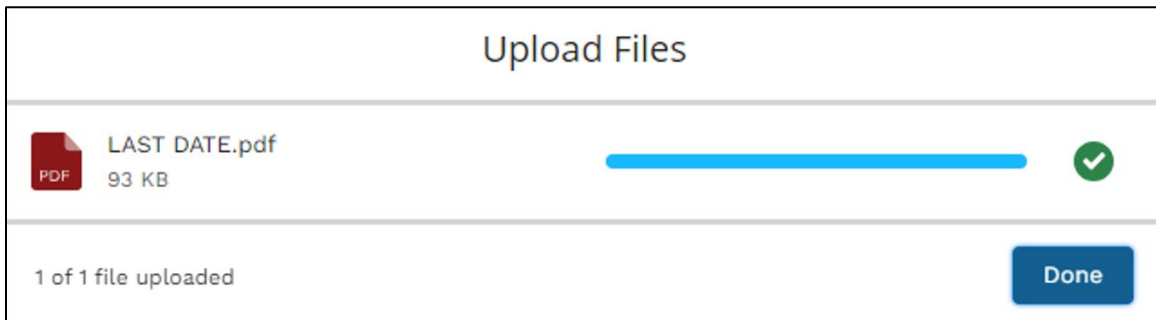
Once a document is uploaded, the **Has Files Uploaded** check box will populate.
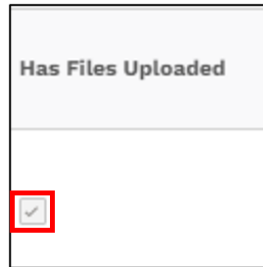
To view the uploaded documents, click on the preview (**eye icon**) to the right of the hospital information.
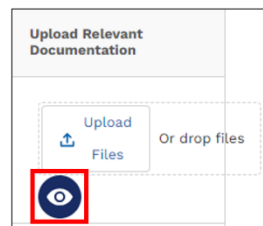
A pop-up of the uploaded documents will appear.

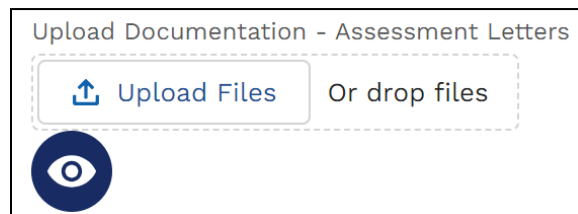## *Delete or Edit an Uploaded Document*

Uploaded documents can be deleted up until the module is submitted. Once the module is submitted, you must contact PFD_LFM@hhs.texas.gov to inform LFM of any needed changes.

To delete a document:

▶ Click on the **eye icon** to see a list of uploaded documents.

▶ Open the document you want to delete by clicking on the document title.

Uploaded Documents

TITLE	FILE TYPE	CREATED BY	CREATED DATE
Unique County Hospital District Document	PDF	Shanon Keogh	Sep 13, 2023

Cancel

▶ A preview will open to give options to:

o Download,

o View File Details,

o Upload a new version; or

o Use the dropdown arrow to either **Edit File Details** or **Delete** the file.

Download ⓘ View File Details ⬆ Upload New Version ▼

▼

✎ Edit File Details

🗑 Delete
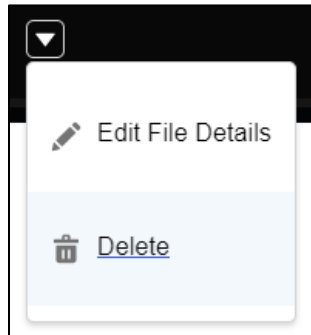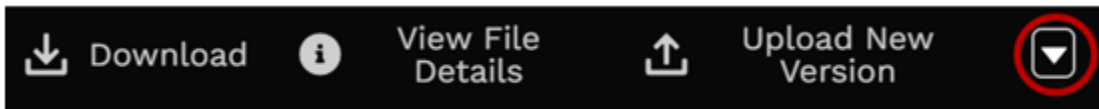
Attestation

**On every page**: The **Data Certifier must attest to the validity of data** and click the attestation check box.

Please note: **Data Entry Preparers** can fill out all sections but will not see a Page XX Attested selection.

Reminder: You must hit **Save & Continue** on every page. If you leave the page without saving, the changes will be lost.

Once the **Save & Continue** button is clicked, the following message will appear at the top of the page:
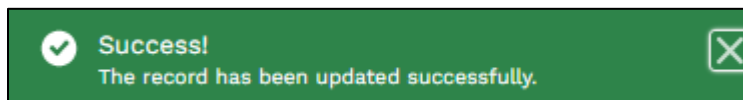
Page 1 - Assessment Rates

On this page, HHSC is collecting information about:

▶ Assessment methodology, and

▶ Annual assessment rates or fees.

Page 1 - Question 1

Does the LGE assess a mandatory payment as a percentage of net patient revenue, a flat fee, or a percentage of other revenue?

This question will require uploading all assessment letters covering FFY 2023.

Page 1 - Assessment Rates

1. Does the GE assess a mandatory payment as a percentage of net patient revenue, a flat fee, or a percentage of other revenue?

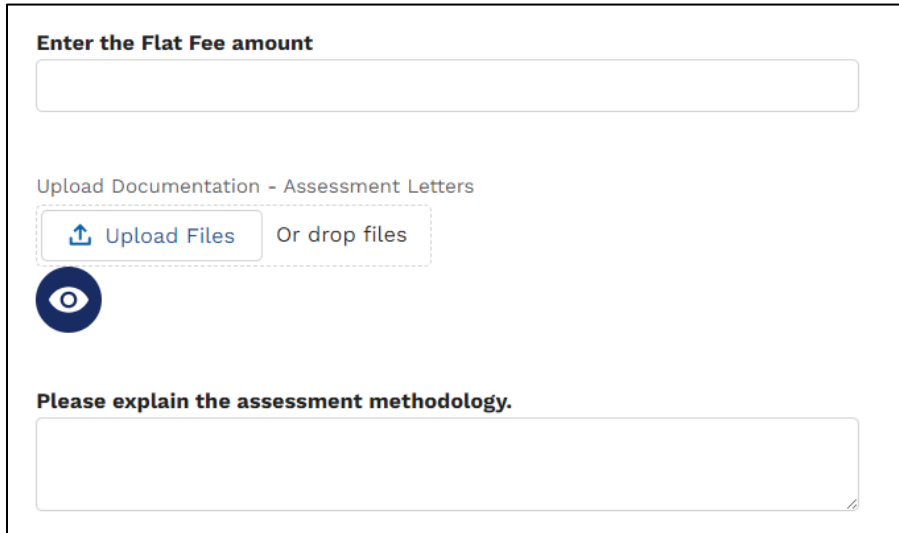☐ - Percentage of Net Patient Revenue

☐ - Flat Fee

☐ - Percentage of Other Revenue

Percentage of Net Patient Revenue

▶ If selecting **Percentage of Net Patient Revenue**, combine the percentage rates into one rate that represents the full year (this is if more than one assessment rate is set for the year):

o Example: Assessment one is 2% and assessment two is 3%, the total will be entered as 5% for the year.

▶ Upload a copy of all assessment letters covering FFY 2023; and

▶ If selecting **No** to the question, "Does the LGE charge the same percentage of net patient revenue for every hospital?" you will need to provide information and/or documentation to explain the reason or assessment methodology.
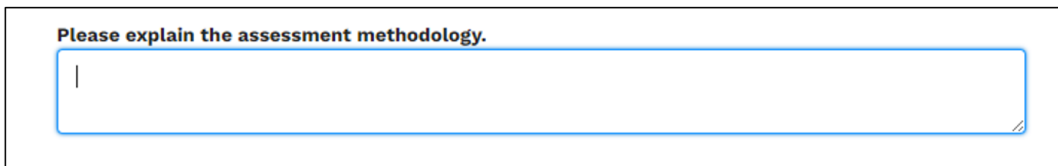
Flat Fee

▶ If selecting **Flat Fee** as an assessment methodology, you will need to enter the fee amount,

▶ Upload a copy of all assessment letters covering FFY 2023; and

▶ Explain the assessment methodology.

Enter the Flat Fee amount

Upload Documentation - Assessment Letters

⬆ Upload Files   Or drop files

👁

Please explain the assessment methodology.

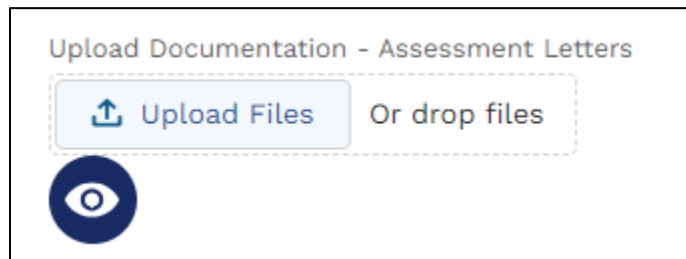## *Percentage of Other Revenue*

▶ If selecting **Percentage of Other Revenue**, you will need to explain the assessment methodology.

Please explain the assessment methodology.

Review of Uploaded Documents

Upload Documentation - Assessment Letters

⬆ Upload Files   Or drop files

👁

▶ Use the **eye icon** to view the uploaded documents.

> ► If the upload containing agreement documents is 10 MB or more in size, please contact LFM at PFD_LFM@hhs.texas.gov to request access to our secure FTP server.

> ► If you need to delete a file, see the instructions [Delete or Edit an Uploaded Document](#) in the General Tips section.

Please note: Documents cannot be deleted after module certification.

Attestation

After all the applicable entries have been made, the **Data Certifier must attest to the validity of data** on this page and click the attestation check box.

Page 2 - Effective Date and Public Hearings

On this page, HHSC is collecting information on:

▶ FFY23 Rates,

▶ Public notices,

▶ Agendas, and

▶ Meeting minutes.

Page 2 - Question 1

Were the hospitals assessed a higher or lower rate than what was approved?

HHSC is requesting a narrative if the governmental entity set an assessment rate for all the hospitals in a jurisdiction, but then assessed them at a higher or lower rate than what was approved. This is intended to capture instances where a governmental entity authorized **up to** or **not to exceed** a certain percentage, but where the ultimate rate assessed was less than the maximum allowable rate.

Page 2 - Effective Date and Public Hearings

1. Were the hospitals assessed a higher or lower rate than what was approved?

Yes ▼

Please explain why the hospital was assessed a higher or lower rate than what was approved.

Page 2 - Question 2

How many distinct rates were set in this federal fiscal year?

▶ Use the drop-down menu to select the number of rate settings in the fiscal year. Options include zero through **More than 4**:

o If **More than 4** is selected, please contact LFM before final submission for additional instructions.

▶ A set of questions will appear for each rate. Certain answers may require answering additional questions.

▶ **Important:** The LoFTS program will allow entry of a rate with up to three decimal places.
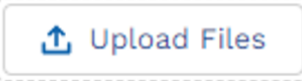
▶ Additional information will be requested for each rate. Required uploads include:

  o Public notices of hearing,

  o Meeting agendas, and

  o Signed or stamped meeting minutes.

Attestation

After all the applicable entries have been made, the **Data Certifier must attest to the validity of data** on this page and click the attestation check box.
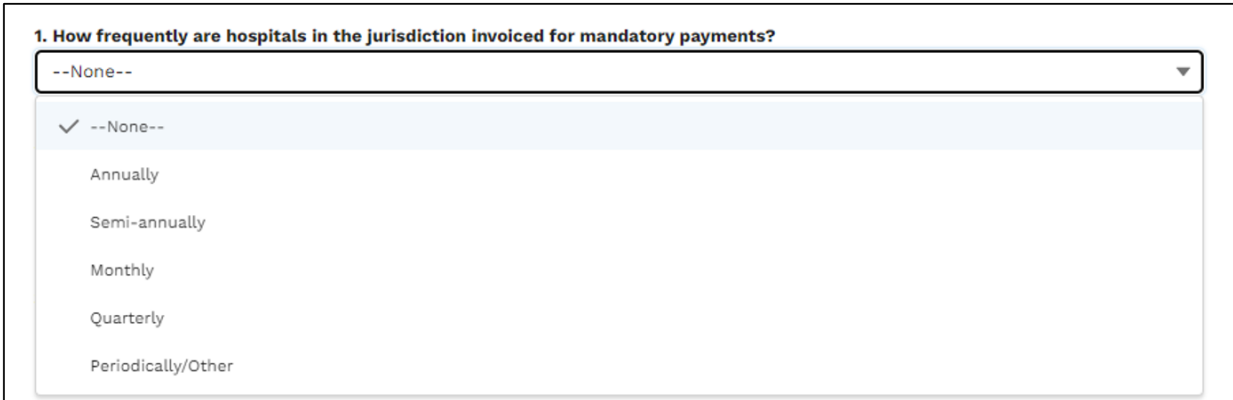
Page 3 - Assessment Frequency and Amounts

On this page, HHSC will require information on **every hospital in the LGE's jurisdiction**. This page collects information on:

▶ How often hospital rates are set,

▶ How often hospitals are invoiced, and

▶ How often hospitals make payments.

Page 3 - Question 1

How frequently are hospitals in the jurisdiction invoiced for mandatory payments?

▶ Use the drop-down menu to select the frequency of hospital payments.

▶ If choosing **Periodically/Other** from the drop-down menu, you must describe your invoicing process and frequency.

Page 3 - Question 2

How frequently do hospitals make payments of mandatory assessments?

On this page, use the narrative box to indicate how frequently hospitals make payments of mandatory assessments.

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Page 3 - Question 3

Please identify what source you use for the Net Patient Revenue.

- ▶ Was more than one year of the AHA Survey used during this reporting period?
  - ○ If you select **Yes**, you will manually input the year for each hospital as shown below.
  - ○ If you select **No**, then enter the year used for all hospitals' Net Patient Revenue.

▶ Next, you will add each hospital in the jurisdiction:

Assessed Hospitals

Add Hospital

▶ After clicking the **Add Hospital** button, a pop-up window will appear. Enter the license number (must be six digits) and use the **Fetch** button to pull the hospital name (the name cannot be edited).

* License

123456

Fetch   Click "Fetch", do not hit enter.

* Hospital Name

Unique County's Best Hospital

▶ You must click **Fetch** first. Hitting **Enter** will produce a red warning box stating you must enter the hospital data first.

▶ Once the hospital is added, you will need to complete additional fields regarding the hospital information.

Assessed Mandatory Payment

FFY23 PMT collected as of 9/30

PMT collected for a prior FFY

Net Patient Revenue

Source of Reported Net Patient Revenue

--None--

Survey Year (YYYY)

Medicare Cost Report Status

Notes

Texas Health and Human Services ● **hhs.texas.gov**

Note: Once you save the hospital, you must upload the provider's assessment letters and other communications.

> Click on Save, then Upload Collection Effort Documentation
>
> [Save] [Cancel]
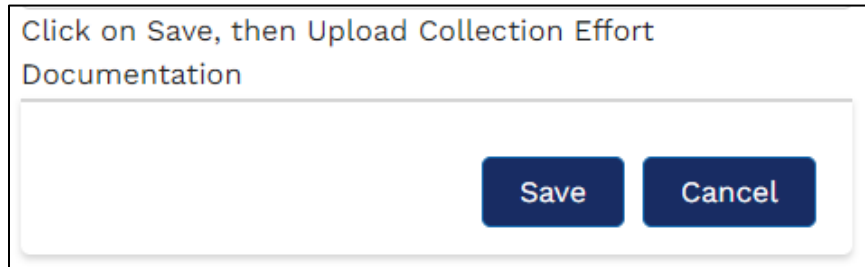
▶ If a hospital has recently gone through a CHOW and the license number is not retrieving a hospital name, try the previous owner's license number and then add a note explaining that the hospital has gone through a CHOW and providing the new license number in the notes.

▶ If multiple NPR sources or years were used, add each hospital multiple times for information on each NPR source/year combination.

Assessed Hospitals

[Add Hospital]

#	* License	* Hospital Name	Assessed Mandatory Payment	FFY23 PMT collected as of 9/30	PMT collected for a prior FFY	Net Patient Revenue	Source of Reported Net Patient Revenue	Survey Year (YYYY)	Medicare Cost Report Status	Notes	Collection Effort Documentation Upload
1	100█ HOSPITAL		$75,000.00	$35,000.00	$45,000.00	$220,022.00	AHA	2020	Audited	Rate for 10/01/22 - 12/31/22	Upload Files 👁
2	100█ HOSPITAL		$78,000.00	$38,000.00	$750,000.00	$35,000,000.00	MCR	2019	Audited	Rate for 01/01/23 - 03/31/23	Upload Files 👁

▶ When entering different NPR sources or years, add a note explaining to which fiscal quarter or time frame the rate applies, as seen below:

  o Some information can be edited:

   ▪ Hover the mouse over the information to find a picture of a pencil.

$2,200,000.22 ✏

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- In the above chart, every field can be edited except license numbers and hospital names.

▶ If payments were collected for prior years, fill in the amount for that payment in the manual field.

#	* License	* Hospital Name	Assessed Mandatory Payment	FFY23 PMT collected as of 9/30	PMT collected for a prior FFY	Net Patient Revenue	Source of Reported Net Patient Revenue	Survey Year (YYYY)	Medicare Cost Report Status	Notes	Collection Effort Documentation Upload
1	100☐	▮ HOSPITAL	$75,000.00	$35,000.00	☐	☐	AHA	2020	Audited ✎	Rate for 10/01/22 – 12/31/22	⬆ Upload Files 👁
2	100☐	▮ HOSPITAL	$78,000.00	$38,000.00	$750,000.00	$35,000,000.00	MCR	2019	Audited	Rate for 01/01/23 – 03/31/23	⬆ Upload Files 👁

Cancel Save Line

Page 3 - Question 4

Were all non-public hospitals licensed in your jurisdiction assessed?

4. Were all non-public hospitals licensed in your jurisdiction assessed?

--None-- ▼

✓ --None--

Yes

No

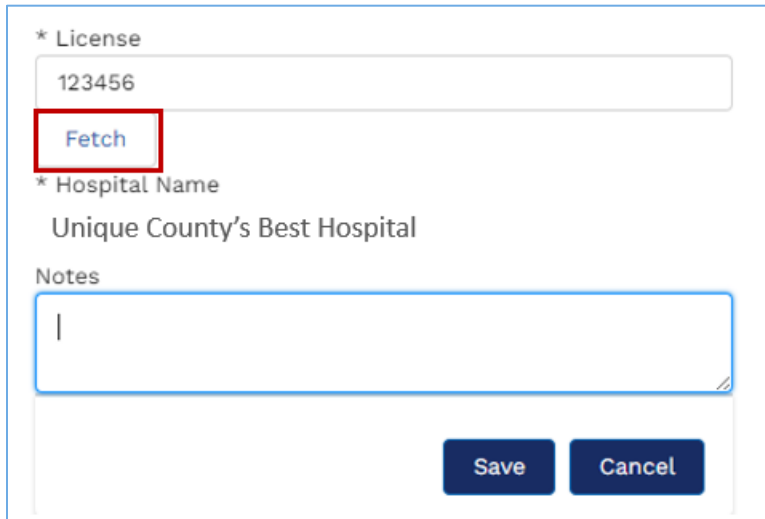▶ If you select is **No**, you will add each hospital in the jurisdiction that was not assessed:

Hospitals Not Assessed

Add Hospital

Click on Add Hospital

17

▶ After clicking the **Add Hospital button**, a pop-up window will appear. Enter the license number (must be six digits) and use the **Fetch** button to pull the hospital name (the name cannot be edited).
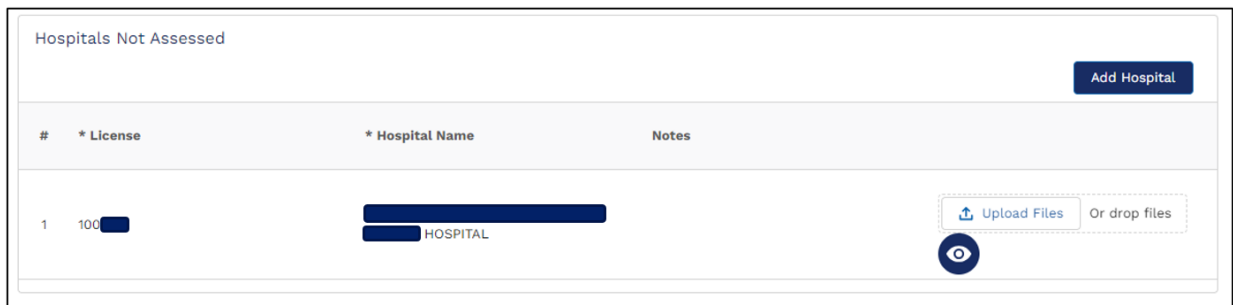
Reminder: Click **Fetch** rather than hitting Enter.

▶ Provide a narrative description of why the non-public hospital was not assessed in the notes section.

▶ Once the entry is saved, it appears in the **Hospitals Not Assessed** table pictured below:

▶ In addition to the notes, please upload any relevant documentation:

o Explain why the non-public hospital was not assessed; and

o Provide any documentation sent to the non-public hospital regarding the exemption from assessment.

Page 3 - Question 5

Please describe any issues you'd like HHSC to consider in its review.

Provide a description of any issues that may have a bearing on HHSC's review.

> **5. Please describe any issues you'd like HHSC to consider in its review.**

For example:

- ▶ If the statute changed since last year.
- ▶ If a hospital was not assessed until the middle of the year.
- ▶ If a hospital filed for bankruptcy.

Attestation

After all the applicable entries have been made, the **Data Certifier must attest to the validity of data** on this page and click the attestation check box.

Page 4 -Administrative, Contract, and Non-Contract Expenses and Amounts

On this page, HHSC is collecting information about expenses accrued by the jurisdiction related to LPPF administration.

Page 4 - Question 1

Please confirm that $XX,XXX is the limit imposed by statute for administrative expenses in your jurisdiction.

▶ The dollar amount will be pre-populated for your jurisdiction.

> **1. Please confirm that 150,000 is the limit imposed by statute for administrative expenses in your jurisdiction.**
>
> --None-- ▼
>
> ✓ --None--
>
> Yes
>
> No

▶ If you select **No**, you will be advised to contact LFM to correct the pre-populated dollar amount.

> **1. Please confirm that 150,000 is the limit imposed by statute for administrative expenses in your jurisdiction.**
>
> No ▼
>
> Please contact PFD_LFM@hhs.texas.gov or (737) 867-7877 to correct before continuing this section. You may save and continue if you wish to complete this section at a later time.

Page 4 - Question 2

Did your jurisdiction collect the full amount during FFY 2023?

Select **Yes** or **No** from the dropdown menu.

▶ If you select **No**, an additional question will appear:

Page 4 - Question 3

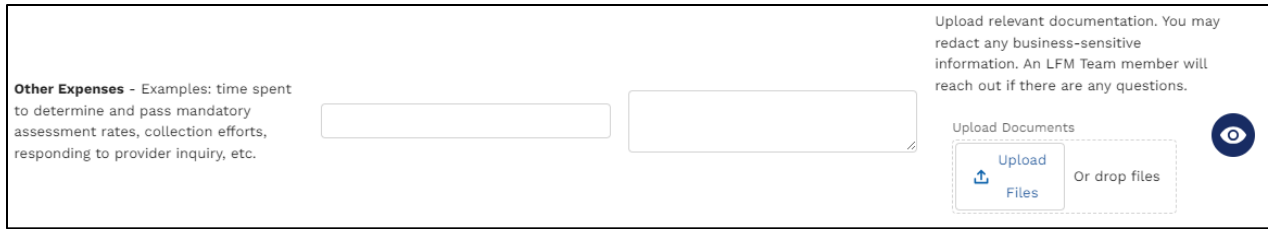*Of the administrative cost collected or retained in FFY 2023, please provide detail on how such funds were used:*

Upon entering an amount, input the amount of expense for each of the following types of expense and upload supporting documentation:

▶ **Contract:** Amount of administrative Expenses and a narrative description.

▶ **Other Expenses:** Amount of administrative Expenses and a narrative description.

▶ The **Data Certifier** should double-check all information. Numbers are easily transposed, so please check these details.

Attestation

After all the applicable entries have been made, the **Data Certifier must attest to the validity of data** on this page and click the attestation check box.
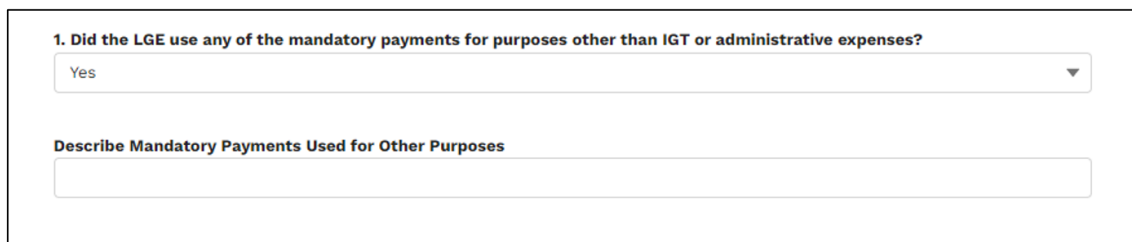
Page 5 - Refunds, Bank Information, and LPPF Account Balance

On this page, HHSC is collecting information about the jurisdiction's financial accounts relating to the LPPF.

Page 5 - Question 1

Did the LGE use any of the mandatory payments for purposes other than IGT or administrative expenses?

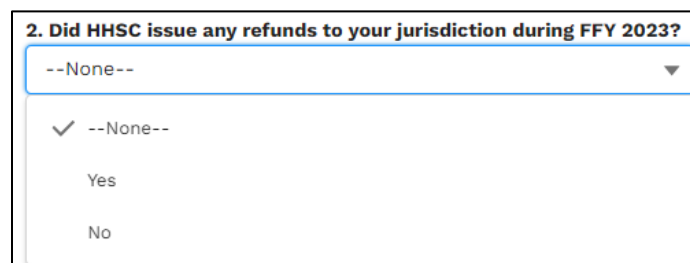▶ Selecting **Yes** will produce a narrative box where a description can be included.

> **1. Did the LGE use any of the mandatory payments for purposes other than IGT or administrative expenses?**
>
> Yes ▼
>
> **Describe Mandatory Payments Used for Other Purposes**
>
> [   ]

Page 5 - Question 2

Did HHSC issue any refunds to your jurisdiction in FFY 2023?

Funds collected by the jurisdiction through mandatory assessments must be retained in a dedicated account. Question 2 collects information to confirm transfers of local funds raised through the imposition of a mandatory assessment are kept in a dedicated account separate from other local funds transferred to HHSC. This information will also help HHSC coordinate with the State Comptroller on TexNet issues.

▶ Selecting Yes will produce additional questions regarding where the refunds were allocated.

> **2. Did HHSC issue any refunds to your jurisdiction during FFY 2023?**
>
> --None-- ▼
>
> ✓ --None--
>
>   Yes
>
>   No

Page 5 - Question 3

Question 3 continues to collect information to confirm transfers of local funds raised through the imposition of a mandatory assessment are kept in a dedicated account separate from other local funds transferred to HHSC. This information will also help HHSC coordinate with the State Comptroller on TexNet issues.

Identify the bank account information used for LPPF collections:

Use the narrative boxes to provide required information for LPPF collections.

3. Identify the bank account information used for LPPF collections to ensure LPPF funds are not comingled with other jurisdiction resources:

Bank Name

Bank Account Number

TEXNET Location Number

Page 5 - Question 4

Identify the bank account information used for non-LPPF LGE funds:

Use the narrative boxes to provide required information for non-LPPF funds.

4. Identify the bank account information used for Non-LPPF collections to ensure LPPF funds are not comingled with other jurisdiction resources:

Bank Name

Bank Account Number

TEXNET Location Number

Please note: These numbers are entered manually so double-check for inversions and typos.

Page 5 - Question 5

Do you have any unique circumstances regarding how you transfer funds to HHSC? If so, please use this narrative box to describe any information you would like HHSC to consider in its review.

Use the narrative box to provide a description of unique circumstances regarding how you transfer funds to HHSC.

> **5. Do you have a unique circumstance regarding how you transfer funds to HHSC? If so, please use this narrative box to describe any information you would like HHSC to consider in its review.**

Please upload relevant documentation:

▶ You may redact any business-sensitive information.

▶ LFM will contact your **Data Certifier** if there are any questions.

> Upload Documents
>
> ⬆ Upload Files   Or drop files
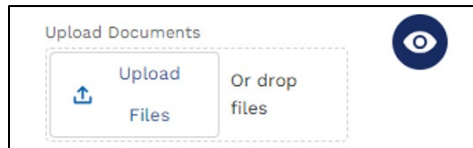
Page 5 - Question 6

Upload Bank statement summary for the dedicated LPPF account from 10/01/2022 through 9/30/2023:

When uploading bank statements, if possible, please identify IGT transfers to HHSC by category (DSRIP, CHIRP, etc.) either by highlighting or adding a note to side of the amount. This should be done prior to uploading the bank statements.

> **6. Upload Bank statement detail for the dedicated local provider participation fund (LPPF) account from 10/01/2022 through 9/30/2023.**
>
> Upload Documents
>
> ⬆ Upload Files   Or drop files

Attestation

After all the applicable entries have been made, the **Data Certifier must attest to the validity of data** on this page and click the attestation check box.

Page 6: Intergovernmental Transfers (IGTs) – Provider Relationships

On this page, HHSC is collecting information about the relationship between each hospital and the LGE.

Page 6 - Question 1

Please see the links to the following information:

▶ Clicking on Click Here to add all hospitals listed earlier in the report will pull data from **Page 2**.

Page 6 - Intergovernmental Transfers (IGTs) - Provider Relationships

1. Please see the links to the following information

   • Comprehensive Hospitals List FFY 2022 from HHS Regulatory Data

   • Local Provider Participation Funds Map (texas.gov)

   • Texas Medicaid CHIP SDA Map effective January 2022

   Please list every hospital for which the governmental entity provides LPPF funds to HHSC as the non-federal share of Medicaid payments, including programs where the IGT is on behalf of specific hospitals and programs where the IGT is used proportionately for all participating hospitals in the SDA. If you transfer on behalf of an SDA, please use the above links to create an inclusive list. The first link provides the Texas HHS General and Specialty Hospitals list by County, the second link and third links will show you the counties that comprise your SDA. Please note in future reporting you will be able to carry this information forward and make modifications as necessary to minimize administrative burden.

   Click Here to add all the hospitals listed earlier in the report

   Note: If you select No for Relationship between Governmental Entity and Non-Public Hospital do not enter a list of all relationships or upload documents.

▶ Hit **Save line** before uploading documents or continuing.

   o **IMPORTANT**: Before you click the **Save Line** button, please be aware that once a hospital is added, it cannot be deleted.

   Cancel   Save Line

▶ If a hospital is accidentally added, leave a note in the **List of all Relationships** column for LFM staff to delete the row.

▶ Once the hospitals are populated, hover over the question, and a **pencil** will appear. Click on the **pencil** to edit.

When adding to the **List of all Relationships between Taxing Entity and Non-Public Hospital**, please err on the side of over-inclusion.

Please note: If you uploaded or supplied HHSC with a relationship document for FFY 2022 reporting, and the document remains **UNCHANGED**, you do not need to upload the document again. New or amended agreements must be uploaded here.

Examples of types of relationships between the LGE and non-public hospitals:

- ▶ Any financial agreements related to the LGEs IGT,

- ▶ Indigent Care Agreements,

- ▶ Foundation or Charity Agreements,

- ▶ Leases or Management Agreements, and

- ▶ Coverage or Training Agreements.

Attestation

After all the applicable entries have been made, the **Data Certifier must attest to the validity of data** on this page and click the attestation check box.

Page 7: Certification

Data Entry Preparers can fill out all sections but will not be able to check the attestation box or submit.

Only the **Data Certifier** can complete the **Certification** page by clicking the attestation check box and Submit button.

On this page, HHSC is verifying:

▶ The Data Certifier has reviewed and attested to all information.

▶ Attestation that the local funds used for IGT are in accordance with 42 Code of Federal Regulations (CFR) §§ 433.50–433.74.

▶ A copy of the input data can be viewed via the **Preview Report** button shown below. Viewing this document DOES NOT submit the information but provides an avenue to review the information. Once the module has been certified and submitted, an official copy will be emailed to the LoFTS Users.

Page 7 – Certification

Preview Report

☐ I attest that I have examined the information contained in this report, prepared for the above-named government entity. To the best of my knowledge and belief, it is true, correct, and complete statement prepared from the records of the government entity in accordance with applicable instructions. By certifying this information, I also attest that the local funds used for intergovernmental transfers are in accordance with **42 CFR §§433.50-433.74**. After submission of this report, if I become aware of additional information that is relevant to this report, I will notify HHSC.

NOTE: Reporting is not considered complete until all required Modules have been attested and certified, including the Funding Source Statement.

Submit

Confirmation

Upon submission of the module, the users registered for the LGE will receive a notification to the email address used for registration and login. The email will contain a PDF of submitted answers for the LGE to keep.

Reminder: Once submitted, no more changes can be made to any of the pages. You may go back and view the data submission but will not be able to save any changes.

- ▶ The email will come from noreply@salesforce.com; on behalf of LoFTS LFM Email PFD_LFM@hhs.texas.gov.

- ▶ Because the email comes from Salesforces and not HHSC, you may need to right click on the email message to read the content.

- ▶ If you do not receive the email within thirty minutes, check your junk or spam folders.

- ▶ Please contact LFM at PFD_LFM@hhs.texas.gov if you still did not receive a copy of the final PDF submission via email or if you need to request any change.