## Texas Notes and Changes to the UC Limit Calculation Model Template Notes:

- 1. Texas queried the HFS HCRIS database for the worksheet S series for all providers with a Fiscal Year Begin date that fell within Federal Fiscal Year (FFY) 2019 October 1, 2018 to September 30, 2019. The providers in the template are Texas providers who had a value in Line 23, column 1 of worksheet S-10. Line 7, Line 2, and Line 15 were then brought in based on a match to the Medicare Number from S-10 worksheets from the same query.
- 2. Texas also included an additional cost report for Huntsville Hospital (Medicare Number 450347) that had a fiscal year begin date after the federal fiscal year, because Huntsville had a change in ownership in quarter 2 of FFY 2019. The queried cost report included 8 months of data, and the additional cost report that began 2/28/2020 included 4 months of data.
- 3. The HCRIS query returned several duplicate providers in S-10 23.1, Line 7, and Line 2. HHSC deleted all duplicates with less than 12 months of data if the other cost report had 12 months of data (or 13 in the case of North Texas Medical Center). The two cost reports for Scenic Mountain were merged because the cost report months spanned equaled 12 months. The red lines below were removed,

the green lines were kept, and the yellow lines were merged.

| 22 |  |   |   |  |  |   |   |
|----|--|---|---|--|--|---|---|
|    | Cost Report Months Spanned  =DATEDIF( FYB,FYE," D")/30 | Medicare<br>Number<br>HFS<br>S-2 Part I<br>L3.00<br>C2.00 | Fiscal Year<br>Begin<br>HFS<br>S-2 Part I<br>L20.00 C1.(* | Fiscal Year<br>End<br>HFS<br>S-2 Part I<br>L20.00<br>C2.00 | Cost of<br>Charity<br>Care<br>HFS<br>S-10<br>L23.00<br>C1.00 | Hospital Name<br>HFS<br>S-2 Part I L3.00<br>C1.00 | Date Submitted HFS S Part I L0.00 C1.00 |
| ì  | _ //   |   |   |  |  | GOOD SHEPHERD                                     |   |
|    | 12   | 450032  | 7/1/2019  | 6/30/2020  | 41,302,745   | MEDICAL CENTER                                    | 12/9/2020                               |
| Ì  | 12   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                   | 7,1,2015  | 5/ 55/ 2520  | .1,552,715   | GOOD SHEPHERD                                     | 12/ 5/ 2020                             |
|    | 9  | 450032  | 10/1/2018   | 6/30/2019  | 25,408,326   | MEDICAL CENTER                                    | 12/13/2019                              |
| ì  |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                   | 10/1/2010   | 0,00,2013  | 25, 150,520  | COVENANT MEDICAL                                  | 12, 13, 2013                            |
|    | 12   | 450040  | 7/1/2019  | 6/30/2020  | 27,548,071   |   | 12/8/2020                               |
| Ì  |  | ,                   | ., 1, 2015  | 5, 23, 2020  | 2.72.107072  | COVENANT MEDICAL                                  | 11, 1, 2020                             |
|    | 6  | 450040  | 1/1/2019  | 6/30/2019  | 14,408,637   |   | 12/11/2019                              |
| ì  |  | •   | _, _, _   | _,,  |  | NORTH TEXAS MEDICAL                               | ,,                                      |
|    | 13   | 450090  | 12/1/2018   | 12/31/2019   | 2,849,564  |   | 7/22/2020                               |
| ĺ  |  | •   |   |  |  | NORTH TEXAS MEDICAL                               |   |
|    | 2  | 450090  | 10/1/2018   | 11/30/2018   | 112,588  | CENTER  | 6/26/2019                               |
| ĺ  |  |   |   |  |  | COLLEGE STATION                                   |   |
|    | 11   | 450299  | 7/31/2019   | 6/30/2020  | 3,920,584  | MEDICAL CENTER                                    | 1/31/2021                               |
|    | ,  |   |   |  |  | COLLEGE STATION                                   |   |
|    | 10   | 450299  | 10/1/2018   | 7/30/2019  | 3,189,728  | MEDICAL CENTER                                    | 2/20/2020                               |
|    |  |   |   |  |  | SCENIC MOUNTAIN                                   |   |
| ļ  | 9  | 450653  | 4/13/2019   | 12/31/2019   | 3,082,839  | MEDICAL CENTER                                    | 8/7/2020                                |
|    |  | 450550  | 4/4/0-1-  | 4/40/05/5  |  | SCENIC MOUNTAIN                                   | 4/5/0055                                |
|    | 3  | 450653  | 1/1/2019  | 4/12/2019  | 33,457   | MEDICAL CENTER                                    | 1/6/2020                                |
|    | 10   | 672060  | 1/1/2010  | 12/21/2010   | 22.756   | SUGAR LAND REHAB                                  | 0/4/2020                                |
|    | 12   | 673068  | 1/1/2019  | 12/31/2019   | 32,/56   | HOSPITAL  | 8/4/2020                                |

4. Two hospitals were removed from the HCRIS query because they do not participate in Texas Medicaid. HHSC has identified these hospitals on the "HCRIS Removed" tab.

| Coot Donost |          |             |            | C+      |                            |            |                |
|-------------|----------|-------------|------------|---------|----------------------------|------------|----------------|
| Cost Report |          | E:I.V       | E:I.V      | Cost of |                            | D-4-       |                |
|             |          | Fiscal Year |            | Charity |                            | Date       |                |
| Spanned     | Number   | Begin       |            | Care    | Hospital Name              | Submitted  |                |
|             | HFS      | HFS         | HFS        | HFS     | HFS                        | HFS        |                |
| =DATEDIF(   | S-2 Part | S-2 Part I  | S-2 Part I | S-10    |                            |            |                |
| FYB,FYE,"D  | I L3.00  | L20.00      | L20.00     | L23.00  |                            | S Part I   |                |
| ")/30       | C2.00 🔻  | C1.00       | C2.00 💌    | C1.00   | S-2 Part I L3.00 C1.00     | L0.00 C1.0 | Reason         |
|             |          |             |            |         |                            |            | Does not       |
|             |          |             |            |         | FOUNDATION SURGICAL OF SAN |            | participate in |
| 12          | 670054   | 1/1/2019    | 12/31/2019 | 3,217   | ANTONIO                    | 7/20/2020  | Medicaid       |
|             |          |             |            |         |                            |            | Does not       |
|             |          |             |            |         | BAYLOR ORTHOPEDIC AND      |            | participate in |
| 12          | 670067   | 1/1/2019    | 12/31/2019 | 608,042 | SPINE HOSPITAL             | 7/17/2020  |                |

5. Several IMDs were identified in the S-10 23.1 HCRIS query and were removed from the sizing calculation per CMS direction. HHSC has identified these hospitals on the "HCRIS Removed" tab. If the

IMD had no cost of charity, they were noted as no cost of charity rather than IMD in the Reason for removal column. These are the IMDs that had charity cost:

| Cost Report<br>Months<br>Spanned | Medicare<br>Number | Fiscal Year<br>Begin | End               | Cost of<br>Charity<br>Care | Hospital Name             |             |
|----------------------------------|--------------------|----------------------|-------------------|----------------------------|---------------------------|-------------|
| =DATEDIF(                        | HFS<br>S-2 Part    |                      | HFS<br>S-2 Part I | HFS<br>S-10                | HFS                       |             |
| FYB,FYE,"D                       |                    |                      | L20.00            | L23.00                     |                           |             |
| ")/30                            | C2.00 🔻            | C1.00                | C2.00             | C1.00                      | S-2 Part I L3.00 C1.00    | ▼ Reason -T |
|                                  |                    |                      |                   |                            | ROCK PRAIRIE BEHAVIORAL   |             |
| 12                               | 454125             | 1/1/2019             | 12/31/2019        | 204,082                    | HEALTH                    | IMD         |
| 12                               | 454141             | 1/1/2019             | 12/31/2019        | 90,901                     | PALMS BEHAVIORAL HEALTH   | IMD         |
| 12                               | 670010             | 1/1/2019             | 12/31/2019        | 20,628                     | MAYHILL HOSPITAL          | IMD         |
| 12                               | 673068             | 1/1/2019             | 12/31/2019        | 32,756                     | SUGAR LAND REHAB HOSPITAL | IMD         |

6. Texas surveyed all hospitals that marked "yes" on S-10 Line 4
Column 1, that Line 2 includes all DSH or supplemental payments
from Medicaid. If the hospital marked yes, responded to the survey,
and included DSH or UC payments in line 2, net Medicaid revenue,
these amounts were removed from the net Medicaid revenue. Below
are the amounts and types of adjustment to net Medicaid revenue:

| Medicare<br>Number<br>HFS | Fiscal Year<br>Begin<br>HFS | Fiscal Year<br>End<br>HFS | Hospital Emails         | Hospital Emails |                              | Hospital Name<br>HFS                 | Date<br>Submitted<br>HFS | UHRIP Class<br>UHRIP |
|---------------------------|-----------------------------|---------------------------|-------------------------|-----------------|------------------------------|--------------------------------------|--------------------------|----------------------|
| S-2 Part I<br>L3.00       | S-2 Part I                  | S-2 Part I<br>L20.00      | Supplemental<br>Payment |                 | Amount to<br>Remove from Net |                                      | S Part I<br>L0.00        |                      |
| C2.00                     | L20.00 C1.0(~               | C2.00                     | Amount include          | Туре            | Medicaid Revenue             | S-2 Part I L3.00 C1.00               | C1.00                    | Class                |
| 450659                    | 8/1/2019                    | 7/31/2020                 | \$ 2,410,764            | UC              | \$2,410,764                  | HOUSTON HEALTHCARE MEDICAL<br>CENTER | 12/28/2020               | Other                |
| 450674                    | 3/1/2019                    | 2/29/2020                 | \$ 8,350,630            | DSH/UC          | \$8,350,630                  | WOMANS HOSPITAL OF TEXAS             | 5/17/2021                | Other                |
| 451306                    | 10/1/2018                   | 9/30/2019                 | \$ 1,814,962            | UC              | \$1,814,962                  | KIMBLE HOSPITAL                      | 3/4/2020                 | Rural Private        |
| 451325                    | 10/1/2018                   | 9/30/2019                 | \$ 121,870              | DSH             | \$121,870                    | CONCHO COUNTY HOSPITAL               | 3/11/2020                | Rural Public         |
| 451338                    | 4/1/2019                    |                           |                         |                 |                              | CULBERSON HOSPITAL                   |                          | Rural Private        |
| 451361                    | 1/1/2019                    | 12/31/2019                | \$ 367,273              | UC              | \$367,273                    | PREFERRED HOSPITAL LEASING           | 6/9/2020                 | Rural Private        |

7. Texas used the Demonstration Year 10 DSH/UC applications for Non-S-10 hospitals and hospitals that did not have cost of charity in their Medicare cost report if an application was available. Here are the hospitals that did not have S-10 charity cost so application data was used instead:

| Medicare<br>Provider<br>Number | Medicaid<br>Provider<br>Number | Hospital Name                      |
|--------------------------------|--------------------------------|------------------------------------|
| 451392                         | 121792903                      | HAMILTON GENERAL HOSPITAL          |
| 670043                         | 192622201                      | CEDAR PARK REGIONAL MEDICAL CENTER |
| 450658                         | 376537203                      | FREESTONE MEDICAL CENTER           |

## Then non S-10 Hospitals are below:

| Medicare<br>Provider<br>Number | Medicaid<br>Provider<br>Number | Hospital Name                               |
|--------------------------------|--------------------------------|---|
| ▼                              |                                | <u>1</u>                                    |
| 453315                         | 020844903                      | CHRISTUS SANTA ROSA HEALTH CARE CORPORATION |
| 453300                         | 021184901                      | COOK CHILDREN'S MEDICAL CENTER              |
| 450076                         | 112672402                      | THE UNIVERSITY OF TEXAS MD ANDERSON CANCER  |
| 453306                         | 127319504                      | METHODIST CHILDRENS HOSPITAL                |
| 453301                         | 132812205                      | DRISCOLL CHILDREN'S HOSPITAL                |
| 453302                         | 138910807                      | CHILDREN'S MEDICAL CENTER DALLAS            |
| 453304                         | 139135109                      | TEXAS CHILDREN'S HOSPITAL                   |
| 453313                         | 291854201                      | EL PASO CHILDREN'S HOSPITAL CORPORATION     |
| 453314                         | 315440301                      | TEXAS SCOTTISH RITE HOSPITAL FOR CHILDREN   |
| 453316                         | 354178101                      | CHILDREN'S HEALTH PLANO                     |