

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-14-28
Baltimore, Maryland 21244-1850



Financial Management Group

April 13, 2023

Lynnette R. Rhodes, Esq.
Executive Director, Medical Assistance Plans
Department of Community Health
2 Peachtree St., 36th Floor
Atlanta, Georgia 30303

RE: State Plan Amendment (SPA) GA-22-0013

Dear Director Rhodes:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State Plan submitted under transmittal number (TN) 22-0013. This State Plan Amendment increases the per-diem reimbursement rate for both State Owned and Non State Owned Long-Term Acute Care Hospitals (LTAC) and Inpatient Rehabilitation Facilities (IRF) by 10%.

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 implementing Federal regulations at 42 CFR 447 Subpart C.

This is to inform you that Medicaid State Plan Amendment GA-22-0013 is approved effective July 1, 2022. The CMS-179 and the amended plan pages are attached.

If you have any questions or need further assistance, please contact James Francis at 857-357-6378 or via email at James.Francis@cms.hhs.gov.

Sincerely,

A handwritten signature in black ink that reads "Rory Howe". The signature is written in a cursive, flowing style.

Rory Howe
Director

METHODS AND STANDARDS FOR RESTABLISHING PAYMENT RATES
INPATIENT SERVICES

Reimbursement of Long-Term Acute Care Hospitals and Institutional Rehabilitation Facilities

For admissions on and after January 1, 2019, Long Term Acute Care Hospitals (LTACHs) and Institutional Rehabilitation Facilities (IRFs) will be reimbursed utilizing a facility specific per diem rate. To qualify for per diem reimbursement, the facility must be permitted as a Long-Term Acute Care Hospital or a Rehabilitation Hospital in the state of Georgia.

The facility specific per diem rate will be based on CY 2016 historical claims submitted for Georgia Medicaid recipients. Charges on each historical claim shall be converted to estimated costs by applying the hospital specific cost to charge ratio from each hospital's submitted cost report. The historical claims costs and days are summarized to calculate the facility-specific per diem cost and the LTACH and IRF average per diem cost.

LTACHs and IRFs will be placed into one of two peer groups based on ownership status: (1) State Owned Peer Group and (2) Non-State Owned Peer Group.

LTACHs and IRFs in the Non-State Owned Peer Group will have a facility-specific per diem rate set at 80.02% of the facility's CY 2016 Medicaid claims cost. LTACHs and IRFs in the State Owned Peer Group will have a facility-specific per diem rate set at 100% of the facility's CY 2016 Medicaid claims cost.

LTACH and IRF facilities that enroll in Georgia Medicaid on or after January 1, 2019 will receive payment under an average per diem rate.

The per diem rate for newly enrolled LTACHs in the Non-State Owned Peer Group will be set at 80.02% of average LTACH CY 2016 Medicaid claims costs. The per diem rate for newly enrolled LTACHs in the State Owned Peer Group will be set at 100% of average LTACH CY 2016 Medicaid claims costs.

The per diem rate for newly enrolled IRFs in the Non-State Owned Peer Group will be set at 80.02% of average IRF CY 2016 Medicaid claims costs. The per diem rate for newly enrolled IRFs in the State Owned Peer Group will be set at 100% of average IRF CY 2016 Medicaid claims costs.

Qualifying LTACHs and IRFs are eligible to receive the Hospital Provider Fee Add-On Amount as described in Attachment 4.19-A, Section II, Subsection (C)(2).

Out-of-state LTACHs and IRFs will be reimbursed under the Inpatient Perspective Payment System (IPPS), as described in Attachment 4.19-A, Section II, Subsection (D)(3).

METHODS AND STANDARDS FOR REESTABLISHING PAYMENT RATES
INPATIENT SERVICES

Reimbursement of Long-Term Acute Care Hospitals and Institutional Rehabilitation Facilities

Effective July 1, 2022, the per diem for Long Term Acute Care Hospitals and Inpatient Rehabilitation Facilities will increase by ten (10%) percent for both State Owned and Non State Owned peer groups.

TN No.: 22-0013
Supersedes
TN No.: 19-0002

Approval Date April 13, 2023

Effective Date: July 1, 2022