Friday of each week from 8:30 a.m. to 4 p.m. To schedule an appointment to view public comments, phone 1–800–743–3951.

**FOR FURTHER INFORMATION CONTACT:** Lisa Marie Gomez, (410) 786–1175.

SUPPLEMENTARY INFORMATION: On December 31, 2015, we published a request for information in the Federal Register (80 FR 81824) entitled, "Request for Information: Certification Frequency and Requirements for the Reporting of Quality Measures Under CMS Programs" (referred to in this document as "the December 31 RFI"). That request for information seek public comment regarding several items related to the certification of health information technology (IT), including electronic health records (EHR) products used for reporting to certain CMS quality reporting programs such as, but not limited to, the Hospital Inpatient Quality Reporting (IQR) Program and the Physician Quality Reporting System (PQRS). In addition, it requested feedback on how often to require recertification, the number of clinical quality measures (COMs) a certified Health IT Module should be required to certify to, and testing of certified Health IT Module(s).

We have received inquiries from stakeholders regarding the 30-day comment period to submit comments regarding the December 31 RFI. The stakeholders stated that they need additional time to respond to the questions posed in the December 31 RFI. Since we requested the public's comments on several options, we believe that it is important to allow ample time for the public to prepare their comments. Therefore, we have decided to extend the comment period for an additional 15 days. This document announces the extension of the public comment period to February 16, 2016.

Dated: January 28, 2016.

## Andrew M. Slavitt,

 $Acting \ Administrator, Centers \ for \ Medicare \\ \mathcal{C} \ Medicaid \ Services.$ 

[FR Doc. 2016-01937 Filed 2-1-16; 8:45 am]

BILLING CODE 4120-01-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-2398-N]

RIN 0983-ZB24

Medicaid Program; Final FY 2013 and Preliminary FY 2015 Disproportionate Share Hospital Allotments, and Final FY 2013 and Preliminary FY 2015 Institutions for Mental Diseases Disproportionate Share Hospital Limits

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the final federal share disproportionate share hospital (DSH) allotments for federal fiscal year (FY) 2013 and the preliminary federal share DSH allotments for FY 2015. This notice also announces the final FY 2013 and the preliminary FY 2015 limitations on aggregate DSH payments that states may make to institutions for mental disease and other mental health facilities. In addition, this notice includes background information describing the methodology for determining the amounts of states' FY DSH allotments.

**DATES:** This notice is effective March 3, 2016. The final allotments and limitations set forth in this notice are effective for the fiscal years specified.

FOR FURTHER INFORMATION CONTACT: Stuart Goldstein, (410) 786–0694 and Richard Cuno, (410) 786–1111.

### SUPPLEMENTARY INFORMATION:

## I. Background

### A. Fiscal Year DSH Allotments

A state's federal fiscal year (FY) disproportionate share hospital (DSH) allotment represents the aggregate limit on the federal share amount of the state's payments to DSH hospitals in the state for the FY. The amount of such allotment is determined in accordance with the provisions of section 1923(f)(3) of the Social Security Act (the Act). Under such provisions, in general a state's FY DSH allotment is calculated by increasing the amount of its DSH allotment for the preceding FY by the percentage change in the Consumer Price Index for all Urban Consumers (CPI-U) for the previous FY.

The Affordable Care Act amended Medicaid DSH provisions, adding section 1923(f)(7) of the Act which would have required reductions to states' FY DSH allotments beginning with FY 2014, the calculation of which

was described in the Disproportionate Share Hospital Payment Reduction final rule published in the September 18, 2013 Federal Register (78 FR 57293). Under the DSH reduction methodology, first, each state's unreduced FY DSH allotment would have been calculated in accordance with the provisions of section 1923(f) of the Act, excluding section 1923(f)(7) of the Act; then, the reduction amount for each state would have been determined under the provisions of section 1923(f)(7) of the Act and implementing regulations at 42 CFR 447.294; and, finally, the net FY DSH allotment for each state would have been determined by subtracting the DSH reduction amount for the state from its unreduced FY 2014 DSH allotment

The reductions under section 1923(f)(7) of the Act were most recently delayed and modified by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) (Pub. L. 114–10), enacted on April 16, 2015. The reductions of states' fiscal year DSH allotments under section 1923(f)(7) of the Act that were applicable to FY 2017 were repealed, and are instead scheduled to begin in FY 2018 at modified levels. MACRA also extended DSH allotment reductions through 2025.

Because there is no reduction to DSH allotments for FY 2015 under section 1923(f)(7) of the Act, this notice contains only the state-specific preliminary FY 2015 DSH allotments, as calculated under the statute without application of the reductions that would have otherwise been imposed. This notice also provides information on the calculation of such FY DSH allotments, the calculation of the states' IMD DSH limits, and the amounts of states' preliminary FY 2015 IMD DSH limits.

# B. Determination of Fiscal Year DSH Allotments

Generally, in accordance with the methodology specified under section 1923(f)(3) of the Act, a state's FY DSH allotment is calculated by increasing the amount of its DSH allotment for the preceding FY by the percentage change in the CPI–U for the previous FY. Also in accordance with section 1923(f)(3) of the Act, a state's DSH allotment for a FY is subject to the limitation that an increase to a state's DSH allotment for a FY cannot result in the DSH allotment exceeding the greater of the state's DSH allotment for the previous FY or 12 percent of the state's total medical assistance expenditures for the allotment year (this is referred to as the 12 percent limit).

Furthermore, under section 1923(h) of the Act, federal financial participation (FFP) for DSH payments to institutions for mental diseases (IMDs) and other mental health facilities is limited to state-specific aggregate amounts. Under this provision, the aggregate limit for DSH payments to IMDs and other mental health facilities is the lesser of a state's FY 1995 total computable (state and federal share) IMD and other mental health facility DSH expenditures applicable to the state's FY 1995 DSH allotment (as reported on the Form CMS-64 as of January 1, 1997), or the amount equal to the product of the state's current year total computable DSH allotment and the applicable percentage specified in section 1902(h) of the Act (the applicable percentage is the IMD share of DSH total computable expenditures as of FY 1995).

In general, we determine states' DSH allotments for a FY and the IMD DSH limits for the same FY using the most recent available estimates of or actual medical assistance expenditures, including DSH expenditures in their Medicaid programs and the most recent available change in the CPI–U used for the FY in accordance with the methodology prescribed in the statute. The indicated estimated or actual expenditures are obtained from states for each relevant FY from the most recent available quarterly Medicaid budget reports (Form CMS-37) or quarterly Medicaid expenditure reports (Form CMS-64), respectively, submitted by the states. For example, as part of the initial determination of a state's FY DSH allotment (referred to as the preliminary DSH allotments) that is determined before the beginning of the FY for which the DSH allotments and IMD DSH limits are being determined, we use estimated expenditures for the FY obtained from the August submission of the CMS-37 submitted by states prior to the beginning of the FY; such estimated expenditures are subject to update and revision during the FY before such actual expenditure data become available. We also use the most recent available estimated CPI-U percentage change that is available before the beginning of the FY for determining the states' preliminary FY DSH allotments; such estimated CPI-U percentage change is subject to update and revision during the FY before the actual CPI-U percentage change becomes available. In determining the final DSH allotments and IMD DSH limits for a FY we use the actual expenditures for the FY and actual CPI-U percentage change for the previous FY.

#### II. Provisions of the Notice

A. Calculation of the Final FY 2013 Federal Share State DSH Allotments and the Preliminary FY 2015 Federal Share State DSH Allotments

1. Final FY 2013 Federal Share State DSH Allotments

Addendum 1 to this notice provides the states' final FY 2013 DSH allotments determined in accordance with section 1923(f)(3) of the Act. As described in the background section of this notice, in general, the DSH allotment for a FY is calculated by increasing the FY DSH allotment for the preceding FY by the CPI-U increase for the previous fiscal year. For purposes of calculating the states' final FY 2013 DSH allotments, the preceding final fiscal year DSH allotments (for FY 2012) were published in the July 26, 2013 Federal Register (78 FR 45217). For purposes of calculating the states' final FY 2013 DSH allotments we are using the actual Medicaid expenditures for FY 2013. Finally, for purposes of calculating the states' final FY 2013 DSH allotments, the applicable historical percentage change in the CPI-U for the previous FY (FY 2012) was 2.4 percent; we note that this is the same as the estimated 2.4 percentage change in the CPI-U for FY 2012 that was available and used in the calculation of the preliminary FY 2013 DSH allotments which were published in the July 26, 2013 Federal Register (78 FR 45217).

2. Calculation of the Preliminary FY 2015 Federal Share State DSH Allotments

Addendum 2 to this notice provides the preliminary FY 2015 DSH allotments determined in accordance with section 1923(f)(3) of the Act. The preliminary FY 2015 DSH allotments contained in this notice were determined based on the most recent available estimates from states of their FY 2015 total computable Medicaid expenditures. Also, the preliminary FY 2015 allotments contained in this notice were determined by increasing the preliminary FY 2014 DSH allotments as contained in the notice published in the February 28, 2014 Federal Register (79 FR 11436) by 1.6 percent, representing the most recent available estimate of the percentage increase in the CPI-U for FY 2014 (the previous FY to FY 2015).

We will publish states' final FY 2015 DSH allotments in future notices based on the states' four quarterly Medicaid expenditure reports (Form CMS–64) for FY 2015 available following the end of FY 2015 and the actual change in the CPI–U for FY 2014.

B. Calculation of the Final FY 2013 and Preliminary FY 2015 IMD DSH Limits

Section 1923(h) of the Act specifies the methodology to be used to establish the limits on the amount of DSH payments that a state can make to IMDs and other mental health facilities. FFP is not available for IMD or DSH payments that exceed the IMD limits. In this notice, we are publishing the final FY 2013 and the preliminary FY 2015 IMD DSH Limits determined in accordance with the provisions discussed above.

Addendums 3 and 4 to this notice detail each state's final FY 2013 and preliminary FY 2015 IMD DSH Limit, respectively, determined in accordance with section 1923(h) of the Act.

# III. Collection of Information Requirements

This notice does not impose any new or revised information collection or recordkeeping requirements. The requirements and burden associated with form CMS–37 (OMB control number 0938–1265) and form CMS–64 (OMB control number 0938–1265) are unaffected by this notice. As it pertains to the content of this notice, CMS–37 and CMS–64 are not subject to formal Office of Management and Budget review under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.).

#### IV. Regulatory Impact Statement

We have examined the impact of this notice as required by Executive Order 12866 on Regulatory Planning and Review (September 1993), the Regulatory Flexibility Act (RFA) (September 19, 1980, Pub. L. 96–354), section 1102(b) of the Act, section 202 of the Unfunded Mandates Reform Act of 1995 (March 22, 1995; Pub. L. 104–4), Executive Order 13132 on Federalism (August 4, 1999) and the Congressional Review Act (5 U.S.C. 804(2)).

Executive Order 12866 directs agencies to assess all costs and benefits of available regulatory alternatives and, if regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety effects, distributive impacts, and equity). A regulatory impact analysis (RIA) must be prepared for major rules with economically significant effects (\$100 million or more in any 1 year). This notice reaches the \$100 million economic threshold and thus is considered a major rule under the Congressional Review Act.

The final FY 2013 DSH allotments being published in this notice are equal

to the preliminary FY 2013 DSH allotments published in the July 26, 2013 **Federal Register** (78 FR 45217). This is due to the actual percentage change in the CPI-U for FY 2012 used in the calculation of the final FY 2013 allotments (2.4 percent) being equal to the estimated percentage change in the CPI-U for FY 2012 used in the calculation of the preliminary FY 2013 allotments (2.4 percent). The final FY 2013 IMD DSH limits being published in this notice are also equal to the preliminary FY 2013 IMD DSH limits published in the July 26, 2013 Federal Register (78 FR 45217). Since the final FY 2013 DSH allotments were equal to the preliminary FY 2013 DSH allotments, the associated FY 2013 IMD DSH limits also remained the same.

The preliminary FY 2015 DSH allotments being published in this notice are about \$240 million more than the preliminary FY 2014 DSH allotments published in the February 28, 2014 Federal Register (79 FR 11436). The increase in the DSH allotments is due to the application of the statutory formula for calculating DSH allotments under which the prior fiscal year allotments are increased by the percentage increase in the CPI-U for the prior fiscal year. The preliminary FY 2015 IMD DSH limits being published in this notice are about \$14 million more than the preliminary FY 2014 IMD DSH limits published in the February 28, 2014 Federal Register (79 FR 11436). The increase in the IMD DSH limits is because the DSH allotment for a FY is a factor in the determination of the IMD DSH limit for the FY. Since the preliminary FY 2015 DSH allotments are greater than the preliminary FY 2014 DSH allotments, the associated preliminary FY 2015 IMD DSH limits for some states also increased.

The RFA requires agencies to analyze options for regulatory relief of small businesses, if a rule has a significant impact on a substantial number of small entities. For purposes of the RFA, small entities include small businesses, nonprofit organizations, and small governmental jurisdictions. Most hospitals and most other providers and suppliers are small entities, either by nonprofit status or by having revenues of less than \$7.5 million to \$38.5 million in any 1 year. Individuals and states are not included in the definition of a small entity. We are not preparing an analysis for the RFA because the Secretary has determined that this notice will not have significant economic impact on a substantial number of small entities. Specifically,

any impact on providers is due to the effect of the various controlling statutes; providers are not impacted as a result of the independent regulatory action in publishing this notice. The purpose of the notice is to announce the latest distributions as required by the statute.

In addition, section 1102(b) of the Act requires us to prepare a regulatory impact analysis if a rule may have a significant impact on the operations of a substantial number of small rural hospitals. This analysis must conform to the provisions of section 604 of the RFA. For purposes of section 1102(b) of the Act, we define a small rural hospital as a hospital that is located outside of a Core-Based Statistical Area for Medicaid payment regulations and has fewer than 100 beds. We are not preparing analysis for section 1102(b) of the Act because the Secretary has determined that this notice will not have a significant impact on the operations of a substantial number of small rural hospitals.

The Medicaid statute specifies the methodology for determining the amounts of states' DSH allotments and IMD DSH limits; and as described previously, the application of the methodology specified in statute results in the decreases or increases in states' DSH allotments and IMD DSH limits for the applicable FYs. The statute applicable to these allotments and limits does not apply to the determination of the amounts of DSH payments made to specific DSH hospitals; rather, these allotments and limits represent an overall limit on the total of such DSH payments. In this regard, we do not believe that this notice will have a significant economic impact on a substantial number of small entities.

Section 202 of the Unfunded Mandates Reform Act of 1995 also requires that agencies assess anticipated costs and benefits before issuing any rule whose mandates require spending in any 1 year of \$100 million in 1995 dollars, updated annually for inflation. In 2015, that is approximately \$144 million. This notice will have no consequential effect on state, local, or tribal governments, in the aggregate, or on the private sector.

Executive Order 13132 establishes certain requirements that an agency must meet when it issues a proposed rule (and subsequent final rule) that imposes substantial direct requirement costs on state and local governments, preempts state law, or otherwise has Federalism implications. Since this notice does not impose any costs on state or local governments, the

requirements of E.O. 13132 are not applicable.

#### A. Alternatives Considered

The methodologies for determining the states' fiscal year DSH allotments and IMD DSH Limits, as reflected in this notice, were established in accordance with the methodologies and formula for determining states' allotments as specified in the statute. This notice does not put forward any further discretionary administrative policies for determining such allotments.

### B. Accounting Statement

As required by OMB Circular A-4 (available at http:// www.whitehouse.gov/omb/circulars/ a004/a-4.pdf), in the Table 1, we have prepared an accounting statement showing the classification of the estimated expenditures associated with the provisions of this notice. Table 1 provides our best estimate of the change (decrease) in the federal share of states' Medicaid DSH payments resulting from the application of the provisions of the Medicaid statute relating to the calculation of states' FY DSH allotments and the increase in the FY DSH allotments from FY 2014 to FY 2015.

TABLE 1—ACCOUNTING STATEMENT: CLASSIFICATION OF ESTIMATED EXPENDITURES, FROM THE FY 2014 TO FY 2015

#### [In millions]

Category	Transfers
Annualized Monetized Transfers.	\$240.
From Whom To Whom?	Federal Government to States.

## Congressional Review Act

This proposed regulation is subject to the Congressional Review Act provisions of the Small Business Regulatory Enforcement Fairness Act of 1996 (5 U.S.C. 801 *et seq.*) and has been transmitted to the Congress and the Comptroller General for review.

In accordance with the provisions of Executive Order 12866, this notice was reviewed by the Office of Management and Budget.

Dated: December 3, 2015.

#### Andrew M. Slavitt,

 $\label{lem:acting Administrator, Centers for Medicare} Acting Administrator, Centers for Medicare \\ & Medicaid Services. \\$ 

Dated: January 20, 2016.

#### Sylvia M. Burwell,

Secretary, Department of Health and Human Services.

## KEY TO ADDENDUM 1—FINAL DSH ALLOTMENTS FOR FY 2013

[The Final FY 2013 DSH Allotments for the NON-Low DSH States are presented in the top section of this addendum, and the Final FY 2013 DSH Allotments for the Low-DSH States are presented in the bottom section of this addendum]

Column	Description
Column A	State.
Column B	FY 2013 FMAPs.
	This column contains the States' FY 2013 Federal Medical Assistance Percentages.
Column C	
	This column contains the States' prior FY 2012 DSH Allotments.
Column D	Prior FY (2012) DSH Allotments (Col C) × (100 percent + Percentage Increase in CPIU): 102.4 percent.
	This column contains the amount in Column C increased by 1 plus the percentage increase in the CPI-U for the prior FY
Calumn F	(102.4 percent).
Column E	FY 2013 TC MAP Exp. Including DSH.
	This column contains the amount of the States' FY 2013 total computable (TC) medical assistance expenditures including DSH expenditures.
Column F	FY 2013 TC DSH Expenditures.
Oolullii	This column contains the amount of the States' FY 2013 total computable DSH expenditures.
Column G	FY 2013 TC MAP Exp. Net of DSH.
	This column contains the amount of the States' FY 2013 total computable medical assistance expenditures net of DSH ex-
	penditures, calculated as the amount in Column E minus the amount in Column F.
Column H	12 percent Amount.
	This column contains the amount of the "12 percent limit" in Federal share, determined in accordance with the provisions of
	section 1923(f)(3) of the Act.
Column I	
	This column contains the greater of the State's prior FY (FY 2012) DSH allotment or the amount of the 12 percent Limit, de-
	termined as the maximum of the amount in Column C or Column H
Column J	FY 2013 DSH Allotment.
	This column contains the States' final FY 2013 DSH allotments, determined as the minimum of the amount in Column I or Column D.
	For states with "na" in Columns I or D, refer to the footnotes in the addendum.

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Appendim 1—F	

State  ALABAMA ARIZONA CALIFORNIA COLORADO			Prior FY (2012)	0		EV 2019 TO MAD	"12% Amount" =	Greater of Col H	FY 2013 DSH
A A NINIA DO	FY 2013 FIMAPS (percent)	Prior FY (2012) DSH allotments	DSH allotment (Col C) × 100% + Pct increase in CPIU: 102.4%	FY 2013 TC MAP Exp. including DSH	FY 2013 TC DSH expenditures	EXP. net of DSH Col E-F	Col G × .12/(1– .12/Col B)* (in FS)	or Col C (12% limit, FY 2012 Allotment)	allotment MIN Col I, Col D
NIA DO	В	O	D	Е	ц	g	I	_	ŋ
	68.53 65.68 50.00	\$315,520,769 103,890,985 1,124,844,365	\$323,093,267 106,384,369 1,151,840,630	\$4,999,646,843 8,437,380,837 61,425,894,719	\$470,923,104 173,082,813 2,119,710,409	\$4,528,723,739 8,264,298,024 59,306,184,310	\$658,807,935 1,213,410,792 9,364,134,365	\$658,807,935 1,213,410,792 9,364,134,365	\$323,093,267 106,384,369 1,151,840,630
CONNECTICUT	50.00 50.00	94,912,751 205,216,760	97,190,657 210,141,962	5,048,193,724 6,415,388,481	194,191,858 272,860,246	4,854,001,866 6,142,528,235	766,421,347 969,872,879	766,421,347 969,872,879	97,190,657 210,141,962
DISTRICT OF COLUMBIA	70.00	62,847,632	64,355,975	2,275,681,171	56,387,767	2,219,293,404	321,414,907	321,414,907	64,355,975
GEORGIA	98.08	275,760,021	282,378,262	8,887,641,041	429,964,548	8,457,676,493	1,242,312,033	1,242,312,033	282,378,262
ILLINOIS	50.00	220,608,017	225,902,609	15,493,580,784	337 536 579	15,046,508,599	2,375,764,516	2,375,764,516	225,902,609
KANSAS	56.51	42,325,957	43,341,780	2,544,769,057	76,622,785	2,468,146,272	376,027,713	376,027,713	43,341,780
KENTUCKY LOUISIANA/1	70.55	148,782,151 na	152,352,923	5,726,056,802	216,263,666	5,509,793,136	796,685,033	796,685,033	152,352,923 731.960.000
, <u>(</u>	62.57	107,738,799	110,324,530	2,826,874,563	37,489,437	2,789,385,126		414,155,018	110,324,530
MARYLAND	50.00	312,955,559	80,116,623	12.999.170.453	134,340,816	7,553,805,924	1,192,706,199	1,192,706,199	80,116,623
MICHIGAN	66.39	271,912,207	278,438,100	12,308,409,960	387,951,247	11,920,458,713		1,746,054,614	278,438,100
MISSISSIPPI	73.43	156,477,779	160,233,246	4,708,563,005	217,999,554	4,490,563,451	644,132,328	644,132,328	160,233,246
NEVADA	59.74	47,456,375	48,595,328	1,797,228,664	81,373,600	1,715,855,064		257,658,605	48,595,328
NEW HAMPSHIRE	50.00	164,274,500	168,217,088	1,188,634,372	40,923,914	1,147,710,458	181,217,441	181,217,441	168,217,088
NEW JERSEY	20.00	660,541,446	676,394,441	10,480,866,440	1,298,115,161	9,182,751,279	1,449,908,097	1,449,908,097	676,394,441
NORTH CAROLINA	65.51	302,694,721	309,959,394	11,721,921,735	617,376,633	11,104,545,102	1,631,378,246	1,631,378,246	309,959,394
	63.58	416,846,544	426,850,861	16,628,494,101	649,120,744	15,979,373,357		2,363,633,714	426,850,861
PENNSYLVANIA	54.28	575,889,532	589,710,881	20,922,389,122	847,055,684	20,075,333,438	3,092,778,900	3,092,778,900	589,710,881
SOUTH CAROLINA	70.43	336,042,444	344,107,463	4,690,094,944	457,173,209	4,232,921,735	612,270,432	612,270,432	344,107,463
TENNESSEE/2	na	na	na	na	na	na	na	na	53,100,000
LEXAS	59.30	981,192,634	1,004,741,257	1 452 095 084	226,747,941	27,525,270,362	4,141,011,076	4,141,011,076	1,004,741,257
VIRGINIA	50.00	89,892,713	92,050,138	7,218,485,856	186,468,433	7,032,017,423	1,110,318,540	1,110,318,540	92,050,138
WASHINGTON	50.00	189,825,503 69,260,656	194,381,315 70,922,912	7,805,501,929 3,007,417,198	366,733,930 75,434,137	7,438,767,999 2,931,983,061	1,174,542,316 422,158,680	1,174,542,316 422,158,680	194,381,315 70,922,912
Total	0.00	10,004,528,519	10,244,637,203	366,054,779,932	15,047,983,957	351,006,795,975	53,874,035,598	53,874,035,598	11,029,697,203
				LOW DSH STATES	ATES				
ALASKA	20.00	20,901,012	21,402,636	1,340,719,400	21,706,474	1,319,012,926	208,265,198.84	208,265,199	21,402,636
ARKANSAS	70.17	44,262,980	45,325,292	4,156,350,929	61,000,000	4,095,350,929	592,822,640	592,822,640	45,325,292
DELAWARE	55.67	9,289,338	9,512,282	1,557,544,100	10,8/4,669	1,546,669,431	236,601,110	236,601,110	9,512,282
DAHO	71.90	16.866.254	17.271.044	1.641.925.393	23.708.980	1.618.216.413	233.681.421.00	233.681.421	17.271.044
	59.59	40,408,349	41,378,149	3,622,873,642	54,606,370	3,568,267,272	536,162,337	536,162,337	41,378,149
MINNESOTA	20.00	76,637,045	78,476,334	8,781,239,289	46,287,099	8,734,952,190	1,379,202,977	1,379,202,977	78,476,334
MONTANA	00.99	11,646,847	11,926,371	996,801,715	17,703,206	979,098,509	143,601,115	143,601,115	11,926,371
NEW MEXICO	69.07	20,000,047	21.402.636	3.280.561.202	25.164.146	3.255.397.056	472.788.382	472.788.382	21.402.636
NORTH DAKOTA	52.27	9,801,133	10,036,360	775,035,726	1,265,931	773,769,795	120,521,323	120,521,323	10,036,360
OKLAHOMA	64.00	37,157,353	38,049,129	4,481,944,280	41,759,650	4,440,184,630	655,781,115	655,781,115	38,049,129
OKEGON	62.44 56.19	46,446,693	47,561,414	5,070,815,864	76,536,235	4,994,279,629	115 454 450	115 454 450	47,561,414
	69.61	20,129,695	20,612,808	2,087,187,059	28,794,708	2,058,392,351	298,457,958	298,457,958	20,612,808
WISCONSIN	59.74	96,998,597	99,326,563	7,034,898,860	581,325	7,034,317,535	1,056,296,932	1,056,296,932	99,326,563
	20.00	232,233	237,807	546,576,901	463,560	546,113,341	86,228,422	86,228,422	237,807

<sup>1</sup> FY 2013 DSH allotment for Louisiana determined under the provisions of section 1903(f)(3)(C) and (D) of the Act.

<sup>2</sup> Tennessee's DSH allotments are determined under section 1923(f)(6)(A)(v)(II) of the Act. Under this provision, Tennessee's DSH payments for FY 2013 are limited to \$53,100,000.

<sup>2</sup> Beginning FY 2013, under section 1923(f)(6)(B)(II) of the Act, Hawaii's DSH allotments are determined as for low-DSH states. This means its allotments are determined as for all States, by increasing the previous fiscal year.

## KEY TO ADDENDUM 2—PRELIMINARY DSH ALLOTMENTS FOR FY 2015

[The Preliminary FY 2015 DSH Allotments for the NON-Low DSH States are presented in the top section of this addendum, and the Preliminary FY 2015 DSH Allotments for the Low-DSH States are presented in the bottom section of this addendum]

Column	Description
Column A	State.
Column B	FY 2015 FMAPs.
Column C	This column contains the States' FY 2015 Federal Medical Assistance Percentages.  Prior FY (2014) DSH Allotments.
COIGITITI C	This column contains the States' prior FY 2014 DSH Allotments
Column D	Prior FY (2014) DSH Allotments (Col C) × (100 percent + Percentage Increase in CPIU): 101.6 percent.
	This column contains the amount in Column C increased by 1 plus the estimated percentage increase in the CPI–U for the prior FY (101.6 percent).
Column E	FY 2015 TC MAP Exp. Including DSH.
	This column contains the amount of the States' projected FY 2015 total computable (TC) medical assistance expenditures including DSH expenditures.
Column F	FY 2015 TC DSH Expenditures.
0.1	This column contains the amount of the States' projected FY 2015 total computable DSH expenditures.
Column G	FY 2015 TC MAP Exp. Net of DSH.  This column contains the amount of the States' projected FY 2015 total computable medical assistance expenditures net of
	DSH expenditures, calculated as the amount in Column E minus the amount in Column F.
Column H	12 percent Amount.
	This column contains the amount of the "12 percent limit" in Federal share, determined in accordance with the provisions of section 1923(f)(3) of the Act.
Column I	
	This column contains the greater of the State's prior FY (FY 2014) DSH allotment or the amount of the 12 percent Limit, determined as the maximum of the amount in Column C or Column H.
Column J	FY 2015 DSH Allotment.
	This column contains the States' preliminary FY 2015 DSH allotments, determined as the minimum of the amount in Column I or Column D.
	For states with "na" in Columns I or D, refer to the footnotes in the addendum.

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ADDENDUM 2—PRELIMINARY DSH ALLOTMENTS FOR FY 2015—Continued

State	FY 2015 FMAPs (percent)	Prior FY (2014) DSH allotments	Prior FY (2014) DSH Allotment (Col C) × 100% + Pct increase in CPIU: 101.6%	FY 2015 TC MAP Exp. Including DSH <sup>4</sup>	FY 2015 TC DSH Expenditures 4	FY 2015 TC MAP EXP. Net Of DSH Col E-F	"12% Amount" = Col G × .12/(1– .12/Col B)* (in FS)	Greater of Col H or Col C (12% Limit, FY 2014 allotment)	FY 2015 DSH Allotment Min Col I, Col D
А	В	С	D	Е	Ь	G	Ι	1	٦
Total Low DSH States		521,808,214	530,157,145	64,250,954,000	742,479,000	63,508,475,000	9,591,292,512	9,591,292,512	530,157,145
Total	Total	11,652,074,976	=	,838,508,176 554,788,411,000	18,241,527,000	536,546,884,000	82,315,050,141	82,315,050,141	11,891,608,175

<sup>1</sup>Louisiana's FY 2015 DSH allotment is determined under the provisions of section 1923(f)(3)(C) and (D) of the Act.

<sup>2</sup>Tennessee's DSH allotment for FY 2015 determined under section 1923(f)(6)(A)(vi) of the Act

<sup>3</sup>Beginning FY 2013, under section 1923(f)(B)(B)(I) of the Act, Hawaii's DSH allotment for a fiscal year is determined as for low-DSH states. This means Hawaii's DSH allotment for a fiscal year is determined as for all States, in the Percentage increase in the CPIU for the previous fiscal year.

<sup>4</sup>Expenditures based on the amounts reported by States on the Form CMS-37.

<sup>5</sup>FMAP for Vermont for FY 2015 determined in accordance with section 1905(2)(1)(A) of the Act.

## KEY TO ADDENDUM 3—FINAL IMD DSH LIMITS FOR FY 2013

[The final FY 2013 IMD DSH Limits for the Non-Low DSH States are presented in the top section of this addendum and the preliminary FY 2013 IMD DSH Limits for the Low-DSH States are presented in the bottom section of the addendum]

Column	Description
Column A	State.
Column B	Inpatient Hospital Services FY 95 DSH Total Computable This column contains the States' total computable FY 1995 inpatient hospital DSH expenditures as reported on the Form CMS-64.
Column C	1 2
Column D	Total Inpatient Hospital & IMD & Mental Health FY 95 DSH Total
	Computable, Col. B + C. This column contains the total computation of all inpatient hospital DSH expenditures and mental health facility DSH expenditures for FY 1995 as reported on the Form CMS-64 as of January 1, 1997 (representing the sum of Column B and Column C).
Column E	Applicable Percentage, Col. C/D.  This column contains the "applicable percentage" representing the total Computable FY 1995 mental health facility DSH expenditures divided by total computable all inpatient hospital and mental health facility DSH expenditures for FY 1995 (the amount in Column C divided by the amount in Column D) Per section 1923(h)(2)(A)(ii)(III) of the Act, for FYs after FY 2002, the applicable percentage can be no greater than 33 percent.
Column F	
	This column contains the states' FY 2013 DSH allotments from Column J Addendum 1.
Column G	
Column H	
	This column contains states' FY 2013 total computable DSH allotment (determined as Column F/Column G).
Column I	,
	This column contains the applicable percentage of FY 2012 total computable DSH allotment (calculated as the percentage in Column E multiplied by the amount in Column H).
Column J	FY 2013 TC IMD DSH Limit. Lesser of Col.
	I or C. This column contains the total computable FY 2013 TC IMD DSH Limit equal to the lesser of the amount in Column I or Column C.
Column K	FY 2013 IMD DSH Limit in Federal Share, Col. G × J.
	This column contains the FY 2013 Federal Share IMD DSH limit determined by converting the total computable FY 2013 IMD DSH Limit from Column J into a federal share amount by multiplying it by the FY 2013 FMAP in Column G.

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	MMA LOW DSH Status	_				LOW	DSH	LOW	LOWH	LOS	LOS	LOS	LON C	LOS	LON C	LOW
	FY 2013 IMD Limit In FS Col G × J	¥	\$3.050,798 18,702,314 27,786,863 64,581,595 69,346,84 74,114,413 74,114,413 14,302,787 26,415,088 80,310,122 36,407,095 26,817,527 91,884,573 127,179,885 173,697 173,697 173,697 173,697 173,697 173,496 50,763,367 173,460,550 50,763,367 173,460,550 50,763,367 173,460,597 173,460,591 174,604,548 174,604,604 17	1,921,150,660		\$7,062,870	574,939	0	0	0	2,628,607	0	1,010,002	175,981	516,677	2,094,879
	FY 2013 TC IMD Limit (Lesser Of Col I or Col C)	7	\$4,451,770 28,474,900 1,555,919 1,555,919 1,557,3725 1,19,355,136 1,10,355,136 1,10,355,136 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,25,592,157 1,26,133 1	3,410,261,852		\$14,125,740	819,351	0	0	0	5,257,214	0	1,811,337	254,786	988,478	3,273,248
	Applicable percentage applied to FY 2013 allotments in TC Col E × Col H	-	\$5,027,674 1,035,027,674 1,035,014 1	3,709,617,180		\$14,125,740	16,324,734	0	0	0	27,973,278	0	11,692,713	1,170,535	6,336,328	8,354,379
1 2013	FY 2013 Allotments in TC Col F/G	I	471,462,553 1,61,973,765 1,943,811,340 1943,811,310 361,814,673 361,814,673 361,814,673 451,005,218 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,599 1,117,325,398	19,545,491,877		\$42,805,272	64,593,547	19,745,469	24,325,414	69,438,075	156,952,668	18,070,259	53,323,563	30,986,877	19,200,995	59,451,764
ר אטר ע	FY 2013 FMAPs (per- cent)	g	88.60.000 88.60.0000 88.60.000 88.60.0000 88.		-	20.00	70.17	51.86	71.00	59.59	50.00	00.99	55.76	69.07	52.27	64.00
TINAL IIMID DON LIMITS FOR L	FY 2013 Allotment In FS	ш	\$323,093,267 1,106,384,369 1,719,06,530 210,141,962 210,141,962 210,141,962 225,902,609 224,589,223 225,902,609 224,589,223 320,466,492 320,466,492 320,466,492 320,466,492 320,466,492 320,466,492 320,466,492 330,993,394 48,595,328 48,595,328 48,595,328 48,595,328 309,959,394 426,859,394 426,859,394 426,859,394 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463 34,107,463	11,029,697,203	V DSH STATES	\$21,402,636	45,325,292	10,240,000	17,271,044	41,378,149	78,476,334	11,926,371	29,733,219	21,402,636	10,036,360	38,049,129
- LINAL	Applica- ble percent Col C/D (per- cent)	ш	- : : : : : : : : : : : : : : : : : : :		LOW	33.00	25.27	0.00	00.00	00.00	17.82	00.00	21.93	3.78	33.00	14.05
ADDEINDOM S-	Total inpatient & IMD & mental health FY 95 DSH total computable Col B + C	۵	\$417,457,999 1,22,391,000 1,44,495,462 1,44,495,462 1,44,607,300 3,44,183,000 1,513,00	17,521,219,750		\$20,118,592	3,242,000	0	2,081,429	12,011,250	29,497,214	237,048	8,260,439	6,744,801	1,203,001	23,293,217
	IMD And mental health services FY 95 DSH Total computable	O	\$4,451,770 28,474,900 1,555,919 6,545,136 149,772 6,545,136 149,774 0 89,408,276 153,566,302 152,917,149 105,683,503 37,446,18 304,765,552 207,234,618 387,370,461 605,000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,0000 236,00000 236,000000000000000000000000000000000000	4,118,758,904		\$17,611,765	819,351	0	0	0	5,257,214	0	1,811,337	254,786	988,478	3,273,248
	Inpatient Hospital services FY 95 DSH Total computable	В	\$413,0006,229 2,188,739,00,4543 1739,004,5443 1739,004,5443 184,468,014 407,343,557 315,868,508 179,960,783 11,587,208 1,078,512,169 22,226,467 469,653,946 133,228,800 182,608,033 521,946,524 73,560,000 92,755,916 193,201,966 538,721,966	13,402,460,846		\$2,506,827	2,422,649	0	2,081,429	12,011,250	24,240,000	237,048	6,449,102	6,490,015	214,523	20,019,969
	State	A	ALABAMA ARIZONA ARIZONA COLORADO COLORADO CONNECTICUT CONNECTICOUT CON	Total		ALASKA	ARKANSAS	HAWAII	Ірано	IOWA	MINNESOTA	MONTANA	NEBRASKA	NEW MEXICO	NORTH DAKOTA	ОКГАНОМА

OREGON	11,437,908	19,975,092	31,413,000	33.00	47,561,414	62.44	76,171,387	25,136,558	19,975,092	12,472,447	LOW
SOUTH DAKOTA	321,120	751,299	1,072,419	33.00	11,604,719	56.19	20,652,641	6,815,372	751,299	422,155	LOW
ОТАН	3,621,116	934,586	4,555,702	20.51	20,612,808	69.61	29,611,849	6,074,765	934,586	650,565	LOSH
WISCONSIN	6,609,524	4,492,011	11,101,535	33.00	99,326,563	59.74	166,264,752	54,867,368	4,492,011	2,683,527	LOW
WYOMING	0	0	0	0.00	237,807	50.00	475,614	0	0	0	DSH
C	000	1000	10000				1		000		DSH
lotal Low DSH States	98,662,480	63,238,167	161,900,647		514,096,763		869,157,055	184,510,449	58,321,822	33,431,702	
Total	13,501,123,326	4,181,997,071	17,683,120,397		11,543,793,966		20,414,648,932	3,894,127,630	20,414,648,932 3,894,127,630 3,468,583,674 1,954,582,362	1,954,582,362	

## KEY TO ADDENDUM 4—PRELIMINARY IMD DSH LIMITS FOR FY 2015

[The preliminary FY 2015 IMD DSH Limits for the Non-Low DSH States are presented in the top section of this addendum and the preliminary FY 2015 IMD DSH Limits for the Low-DSH States are presented in the bottom section of the addendum]

Column	Description
Column A	State.
Column B	Inpatient Hospital Services FY 95 DSH Total Computable. This column contains the States' total computable FY 1995 inpatient hospital DSH expenditures as reported on the Form CMS-64.
Column C	IMD and Mental Health Services FY 95 DSH Total Computable. This column contains the total computable FY 1995 mental health facility DSH expenditures as reported on the Form CMS-64 as of January 1, 1997.
Column D	Total Inpatient Hospital & IMD & Mental Health FY 95 DSH Total
	Computable, Col. B + C. This column contains the total computation of all inpatient hospital DSH expenditures and mental health facility DSH expenditures for FY 1995 as reported on the Form CMS–64 as of January 1, 1997 (representing the sum of Column B and Column C).
Column E	Applicable Percentage, Col. C/D.  This column contains the "applicable percentage" representing the total Computable FY 1995 mental health facility DSH expenditures divided by total computable all inpatient hospital and mental health facility DSH expenditures for FY 1995 (the amount in Column C divided by the amount in Column D) Per section 1923(h)(2)(A)(ii)(III) of the Act, for FYs after FY 2002, the applicable percentage can be no greater than 33 percent.
Column F	FY 2015 Federal Share DSH Allotment.
	This column contains the states' preliminary FY 2015 DSH allotments from Column J Addendum 1.
Column G	
Column H	FY 2015 DSH Allotments in Total Computable, Col. F/G.
	This column contains states' FY 2015 total computable DSH allotment (determined as Column F/Column G).
Column I	Applicable Percentage Applied to FY 2015 Allotments in TC, Col E x Col H.
	This column contains the applicable percentage of FY 2014 total computable DSH allotment (calculated as the percentage in Column E multiplied by the amount in Column H).
Column J	FY 2015 TC IMD DSH Limit. Lesser of Col.
	I or C. This column contains the total computable FY 2015 TC IMD DSH Limit equal to the lesser of the amount in Column I or Column C.
Column K	
	This column contains the FY 2015 Federal Share IMD DSH limit determined by converting the total computable FY 2015 IMD DSH Limit from Column J into a federal share amount by multiplying it by the FY 2015 FMAP in Column G.

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AMA	LOW DSH Status	_	<del> </del>	A/S	4	Z Z Z Z	<b>∀</b>	( <b>4</b> :	4 A	A/N	<b>₹</b> ₹	A/S	₹ ₹ Ž Z	A S	4 4 2 2	A/N	4 4 2 Z	N/A	4 ×	ΣZ	Α× Z	₹ ₹ Ž Z	Α <u>Σ</u>	X			LOW		LOW	LOW	NO S	LOW 2	100 E	LOSH
	IMD limit in FS Col G × J	¥	\$3,071,276	777,960	303,395 52 786 863	4,581,595	71,513,243	45,383,641	14 749 607	26,187,685	81,595,084 37.544.452	27,264,424	52,817,527 94,755,047	0 00	131,490,365	47,376,974	178,685,231	105,482,034	58,526,280	1,198,917	50,914,727	169,804,140	5,098,976	66,149,750		_	7,283,514	580,756	3,237,117	0	0	0	2,628,607	0
		7	\$4,451,770	1,555,919	594,776	6,545,136	119,747,560	89,408,276	76.045.571	37,443,073	131,498,927	54,528,848	105,635,054 144,575,904	0	207,234,618	94,753,948	357,370,461	160,112,376	93,432,758	2,397,833	72,076,341	292,513,592	9,071,297	132,220,168	3,471,761,983	-	14,567,028	819,351	6,036,019	0	0	0	5,257,214	0
Applicable percentage		_	\$5,150,169	1,686,710	669,729	13,467,332	119,747,560	101,247,749	26.045.571	42,859,905	131,498,927	54,528,848	121,365,252	0	229,925,432 0	114,491,645	455,665,607 696,430,885	160,112,376	104,356,372	3,045,575	82,522,262	345,072,669	13,543,363	132,220,168	3,845,561,828		14,567,028	16,666,086	6,036,019	0	0	0	28,847,163	0
	FY 2015 allotments in TC Col. F/G	I	\$482,949,269	2,375,648,262	196,484,793	94,809,223	362,871,393	458,943,668	348,174,068	224,638,873	1,198,503,400	165,238,932	438,108,799	224,570,444	809,021,633	346,944,380	1,395,050,008	485,189,019	702,722,992	140,859,418	502,346,234	1,784,891,256	43,372,202	400,667,176	20,240,755,414		44,142,510	65,944,207	18,290,966	20,218,070	24,823,125	76,828,956	161,855,870	18,663,052
FY 2015	FMAPs (per-	Ø	68.99	50.00	51.01	70.00	59.72	50.76	56.52	69.94	62.05	50.00	50.00 65.54	73.58	63.45 64.36	20.00	20.00	65.88	62.64	50.00	70.64	58.05	56.21	50.03	3		20.00	70.88	53.63	52.23	71.75	55.54	20.00	65.90
	FY 2015 allotment in FS	ш	\$333,186,701	1,187,824,131	100,226,893	66,366,456	216,706,796	232,959,806	231,605,390	157,112,428	743,671,360	82,619,466	330,477,865	165,238,933	513,324,226	173,472,190	697,525,004	319,642,526	440,185,682	70,429,709	354,857,380	53,100,000 1,036,129,374	24,379,515	200,453,788 72,120,544	11,361,451,030	LOW DSH STATES	22,071,255	46,741,254	9,809,445	10,559,898	17,810,592	42,670,802	80,927,935	12,298,951
Applica-	ble percent Col C/D	ш	1.07	0.07	0.34	14.20	33.00	22.06	33.00	19.08	10.97 33.00	33.00	33.00	0.00	28.42	33.00	32.66	33.00	14.85	2.16	16.43	19.33	31.23	33.00	3	ľ	33.00	25.27	33.00	0.00	0.00	0.00	17.82	0.00
Total inpatient &	IMD & mental health FY 95 DSH total computable Col B + C	Q	\$417,457,999	2,191,435,462	174,495,217		334,183,000	405,276,784	233,527,085	196,247,981	1,211,429,318	143,099,998	575,289,000	182,608,033	729,181,142	187,429,864	1,094,113,000	429,274,593	629,164,714	110,901,000	438,757,705	1,513,028,993	29,050,549	335,562,250	17,521,219,750		20,118,592	3,242,000	7,069,000	0	2,081,429	12,011,250	29,497,214	237,048
IMD and mental	health services FY 95 DSH total computable	O	\$4,451,770	1,555,919	594,776	6,545,136	149,714,986	89,408,276	76,663,508	37,443,073	132,917,149	120,873,531	105,635,054 304,765,552	0	207,234,618	94,753,948	357,370,461	236,072,627	93,432,758	2,397,833	72,076,341	292,513,592	9,071,297	163,836,435	4,118,758,904	-	17,611,765	819,351	7,069,000	0	0	0	5,257,214	0
	services FY 95 DSH total com- putable	В	\$413,006,229	2,189,879,543	173,900,441	39,532,234	184,468,014	315,868,508	11.587.208	158,804,908	1,078,512,169	22,226,467	469,653,946 133,258,800	182,608,033	521,946,524 73,560.000	92,675,916	736,742,539	193,201,966	535,731,956	108,503,167	366,681,364	1,220,515,401	19,979,252	171,725,815	13,402,460,846		2,506,827	2,422,649	0	0	2,081,429	12,011,250	24,240,000	237,048
	State	4	ALABAMA		COLORADO	DISTRICT OF COLUMBIA	FLORIDAGEORGIA	ILLINOIS	KANSAS	KENTUCKY	LOUISIANA MAINE	MARYLAND	MASSACHUSE I I S	MISSISSIPPI	MISSOURI	NEW HAMPSHIRE	NEW JERSEY	NORTH CAROLINA	OHIO	RHODE ISLAND	SOUTH CAROLINA	TEXAS	_	WASHINGTON WEST VIDE INTO	Total		ALASKA	ARKANSAS	DELAWARE	HAWAII	Ірано	IOWA	MINNESOTA	MONTANA

Addendum 4—Preliminary IMD DSH Limits for FY 2015—Continued

State	Inpatient hospital services FY 95 DSH total com- putable	IMD and mental health services FY 95 DSH total computable	Total inpatient & IMD & mental health FY 95 DSH total computable Col B + C	Applica- ble percent Col C/D	FY 2015 allotment in FS	FY 2015 FMAPs (per-	FY 2015 allotments in TC Col. F/G	Applicable percentage applied to FY 2015 allotments in TC Col E × Col H	FY 2015 TC IMD Limit (Lesser Of Col I or Col C)	FY 2015 TC IMD limit in FS Col G × J	MMA LOW DSH Status
А	В	С	D	Е	Ц	g	п	_	ſ	¥	٦
NEBRASKA	6,449,102	1,811,337	8,260,439	21.93	30,662,084	53.27	57,559,760	12,621,620	1,811,337	964,899	LOW
NEW MEXICO	6,490,015	254,786	6,744,801	3.78	22,071,255	69.65	31,688,808	1,197,050	254,786	177,458	NON
NORTH DAKOTA	214,523	988,478	1,203,001	33.00	10,349,895	20.00	20,699,790	6,830,931	988,478	494,239	LOW
ОКГАНОМА	20,019,969	3,273,248	23,293,217	14.05	39,237,784	62.30	62,981,997	8,850,460	3,273,248	2,039,234	LOW
OREGON	11,437,908	19,975,092	31,413,000	33.00	49,047,232	64.06	76,564,521	25,266,292	19,975,092	12,796,044	LON I
SOUTH DAKOTA	321,120	751,299	1,072,419	33.00	11,967,251	51.64	23,174,382	7,647,546	751,299	387,971	LOW
UTAH	3,621,116	934,586	4,555,702	20.51	21,256,752	70.56	30,125,782	6,180,197	934,586	659,444	NO C
WISCONSIN	6,609,524	4,492,011	11,101,535	33.00	102,429,524	58.27	175,784,321	58,008,826	4,492,011	2,617,495	LOW
WYOMING	0	0	0	0.00	245,236	50.00	490,472	0	0	0	LOW
Total Low DSH States	98,662,480	63,238,167	161,900,647		530,157,145		909,836,589	192,719,219	59,160,449	33,866,778	
Total	13,501,123,326	4,181,997,071	17,683,120,397		11,891,608,175		21,150,592,003	4,038,281,047	3,530,922,432	1,978,394,746	

\*Tennessee's DSH allotment for FY 2015 determined under section 1923( $\hat{\eta}(\hat{\theta})(A)(vi)$  of the Act. \*\* Vermont's FMAP for FY 2015 determined in accordance with section 1905(z)(1)(A) of the Act

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# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Medicare & Medicaid Services

[CMS-1661-NC]

Medicare Program; Request for an Exception to the Prohibition on Expansion of Facility Capacity Under the Hospital Ownership and Rural Provider Exceptions to the Physician Self-Referral Prohibition

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS. **ACTION:** Notice with request for comment.

SUMMARY: The Social Security Act (the Act) prohibits a physician-owned hospital from expanding its facility capacity, unless the Secretary of the Department of Health and Human Services (the Secretary) grants the hospital's request for an exception to that prohibition after considering input on the hospital's request from individuals and entities in the community where the hospital is located. The Centers for Medicare & Medicaid Services (CMS) has received a request from a physician-owned hospital for an exception to the prohibition against expansion of facility capacity. This notice solicits comments on the request from individuals and entities in the community in which the physician-owned hospital is located. Community input may inform our determination regarding whether the requesting hospital qualifies for an exception to the prohibition against expansion of facility capacity.

**DATES:** Comment Date: To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on March 3, 2016.

**ADDRESSES:** In commenting, please refer to file code CMS-1661-NC. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of four ways (please choose only one of the ways listed):

- 1. *Electronically.* You may submit electronic comments on this regulation to *http://www.regulations.gov.* Follow the "Submit a comment" instructions.
- 2. By regular mail. You may mail written comments to the following address only: Centers for Medicare & Medicaid Services, Department of

Health and Human Services, Attention: CMS-1661-NC, P.O. Box 8010, Baltimore, MD 21244-8010.

Please allow sufficient time for mailed comments to be received before the close of the comment period.

- 3. By express or overnight mail. You may send written comments to the following address only: Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1661-NC, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850.
- 4. By hand or courier. Alternatively, you may deliver (by hand or courier) your written comments only to the following addresses:
- a. For delivery in Washington, DC—Centers for Medicare & Medicaid Services, Department of Health and Human Services, Room 445–G, Hubert H. Humphrey Building, 200 Independence Avenue SW., Washington, DC 20201.

(Because access to the interior of the Hubert H. Humphrey Building is not readily available to persons without Federal government identification, commenters are encouraged to leave their comments in the CMS drop slots located in the main lobby of the building. A stamp-in clock is available for persons wishing to retain a proof of filing by stamping in and retaining an extra copy of the comments being filed.)

b. For delivery in Baltimore, MD— Centers for Medicare & Medicaid Services, Department of Health and Human Services, 7500 Security Boulevard, Baltimore, MD 21244–1850.

If you intend to deliver your comments to the Baltimore address, call telephone number (410) 786–9994 in advance to schedule your arrival with one of our staff members.

Comments erroneously mailed to the addresses indicated as appropriate for hand or courier delivery may be delayed and received after the comment period.

FOR FURTHER INFORMATION CONTACT: POH-ExceptionRequests@cms.hhs.gov. SUPPLEMENTARY INFORMATION:

### **Inspection of Public Comments**

All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment. We post all comments received before the close of the comment period on the following Web site as soon as possible after they have been received: <a href="http://www.regulations.gov">http://www.regulations.gov</a>. Follow the search instructions on that Web site to view public comments.

We will allow stakeholders 30 days from the date of this notice to submit written comments. Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of this notice, at the headquarters of the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244, Monday through Friday of each week from 8:30 a.m. to 4 p.m. To schedule an appointment to view public comments, please phone 1–800–743–3951.

### I. Background

Section 1877 of the Social Security Act (the Act), also known as the physician self-referral law—(1) prohibits a physician from making referrals for certain "designated health services" (DHS) payable by Medicare to an entity with which he or she (or an immediate family member) has a financial relationship (ownership or compensation), unless the requirements of an applicable exception are satisfied; and (2) prohibits the entity from filing claims with Medicare (or billing another individual, entity, or third party payer) for those DHS furnished as a result of a prohibited referral.

Section 1877(d)(2) of the Act provides an exception for physician ownership or investment interests in rural providers (the "rural provider exception"). In order for an entity to qualify for the rural provider exception, the DHS must be furnished in a rural area (as defined in section 1886(d)(2) of the Act) and substantially all the DHS furnished by the entity must be furnished to individuals residing in a rural area.

Section 1877(d)(3) of the Act provides an exception, known as the hospital ownership exception, for physician ownership or investment interests held in a hospital located outside of Puerto Rico, provided that the referring physician is authorized to perform services at the hospital and the ownership or investment interest is in the hospital itself (and not merely in a subdivision of the hospital).

Section 6001(a)(3) of the Patient
Protection and Affordable Care Act
(Pub. L. 111–148) as amended by the
Health Care and Education
Reconciliation Act of 2010 (Pub. L. 111–
152) (hereafter referred to together as
"the Affordable Care Act") amended the
rural provider and hospital ownership
exceptions to the physician self-referral
prohibition to impose additional
restrictions on physician ownership and
investment in hospitals and rural
providers. Since March 23, 2010, a
physician-owned hospital that seeks to