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At the beginning of demonstration year 5, \$700 million will be available. At the beginning of demonstration year 5, an additional \$150 million will be available at the completion of milestones due on or before demonstration year 4 ending June 30, 2010. An additional \$150 million will be available at the completion of milestones due on or before October 31, 2010.

- 1) The Florida Agency for Health Care Administration will:
 - (a) Develop a draft reconciliation review tool and instructions, in consultation with CMS, to be used for the reconciliation of LIP expenditures by April 30, 2010. CMS will have 30 days to review the draft reconciliation tool, request additional information or approve the tool. The 'tool' will implement the following recommendations provided to the State in the Financial Management Review (FMR).
 - i. Written procedures to calculate the Medicaid Shortfall Amount will be provided to participating providers to ensure correct calculations.
 - ii. Written instructions and definitions and review procedures regarding allowable costs will be provided to participating providers to ensure that only allowable costs are being included.
 - iii. Written procedures will be provided to participating providers to ensure that the LIP cost limit forms are consistently completed.
 - (b) Provide CMS a schedule for the completion of provider reconciliations statewide for demonstration years 1, 2, 3, and 4 by June 30, 2010.
 - (c) Provide completed reconciliations, by demonstration year and by provider, for all providers for demonstration years 1 and 2 by October 31, 2010. Demonstration year 1 LIP expenditure reconciliations must use the DSH audit reports for verification of reconciliation results and method.
 - (d) Provide completed reconciliations for all providers for demonstration year 3 by March 31, 2011.
 - (e) Provide reconciliations for providers for demonstration year 4 by March 31, 2011.

For LIP hospitals that receive DSH funding, DSH audit results and a supplemental LIP report for primary care and ancillary provider distributions and STC #96, may be used as part of the LIP reconciliation. The results of the reconciliations must be reported to CMS with summary by provider and in aggregate for the LIP with sufficient details included or made available upon request for validation.

- 2) The Florida Agency for Health Care Administration will provide:
 - (a) A report of the LIP dollars currently allocated (by the State and/or health system) to participating providers that are within the operating budgets for State fiscal year 2009 – 2010 (SFY) to fund alternative delivery systems that provide ambulatory and preventive care services in non-inpatient settings by May 31, 2010. The report will provide a baseline assessment of current administrative capabilities and develop a reporting process to prospectively track the use of LIP funds allocated to hospital entities and subsequently used to fund uncompensated care in ambulatory and preventative care settings.

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(b) An update with SFY 2010-11 projections for LIP dollars allocated (as described in 2 a) to participating providers by June 30, 2010. This update will include descriptions of increases to allocations and changes to current allocations.

Table – CMS Deadlines to Implement Amended STC 105

Deadline	Milestone(s)	Description
April 30, 2010	1(a)	A review tool and instructions to be used for the reconciliation of the LIP expenditures to allowable provider costs. Specifically: Written procedures to calculate the Medicaid Shortfall Amount.
		Written instructions, definitions and review procedures regarding allowable costs that may be included.
		Written procedures that help ensure that LIP cost limit forms are consistently completed.
May 31, 2010	2(a)	A report of the LIP dollars currently allocated to fund alternative delivery systems that provide ambulatory and preventative care services in non-inpatient settings.
June 30, 2010	1(b)	Schedule for the completion of provider reconciliations statewide for Demonstration Years 1, 2, 3, and 4
June 30, 2010	2(b)	SFY 10-11 projections for LIP dollars allocated to providers as in 2(a) describing increases and changes to current allocations.
October 31, 2010	1(c)	Completed LIP reconciliations, by Demonstration Year, by provider, for all providers for Demonstration Years 1 and 2. ¹
March 31, 2011	1(d), 1(e)	Completed LIP reconciliations by provider for providers for Demonstration Years 3 and 4.