



March 25, 2019

Mr. Christopher LaVigne
Director, Reimbursement and CON
Division of Health Services
CT Department of Social Services
55 Farmington Avenue, 9th Floor
Hartford, CT 06105-3730

Dear Mr. LaVigne:

Attached is a copy of the Medicaid Uncompensated Care Cost Calculations Addenda and Schedule of Annual Reporting Requirements Addenda for DSH state plan years 2011 - 2015. The attached documents incorporate the withdrawal of FAQs 33 and 34 by CMS on December 31, 2018.

1. SRPY 2011 - Medicaid DSH Uncompensated Care Cost Calculations Addendum #2 and Schedule of Annual Reporting Requirements Addendum #2
2. SPRY 2012 - Medicaid DSH Uncompensated Care Cost Calculations Addendum #3 and Schedule of Annual Reporting Requirements Addendum #3
3. SPRY 2013 - Medicaid DSH Uncompensated Care Cost Calculations Addendum #2 and Schedule of Annual Reporting Requirements Addendum #2
4. SPRY 2014 - Medicaid DSH Uncompensated Care Cost Calculations Addendum #1 and Schedule of Annual Reporting Requirements Addendum #1



**MYERS AND
STAUFFER**^{LC}
CERTIFIED PUBLIC ACCOUNTANTS

5. SPRY 2015 - Medicaid DSH Uncompensated Care Cost Calculations Addendum #1 and Schedule of Annual Reporting Requirements Addendum #1

If you have any questions concerning the items listed above or any part of the attached schedules, please contact us at the e-mail address or phone number below.

Sincerely,

John Kraft, CPA, CHFP
Member
PH 410.581.4543 (Direct)
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State of Connecticut
 Medicaid Uncompensated Care Cost Calculations
 For the Medicaid State Plan Rate Year Ended September 30, 2012
 Addendum #3

As Reported on 2012 Final DSH Examination Report Dated 1/7/2016			Revisions based on Addendum #1		Revisions based on Addendum #1 Issued 6/9/2016			Revisions based on Addendum #2		Addendum #2 dated 3/8/2018			Revisions based on Addendum #3		Addendum #3 dated 3/25/2019				
Hospital	Medicare Provider Number	DSH Payment for Medicaid State Plan Rate Year	Total Uncompensated Care Costs for Medicaid State Plan Rate Year	DSH Payment Under or <Over> Total Uncompensated Care Costs (UCC)	DSH Payment Redistributions	Change in UCC	DSH Payment for Medicaid State Plan Rate Year	Total Uncompensated Care Costs for Medicaid State Plan Rate Year	DSH Payment Under or <Over> Total Uncompensated Care Costs (UCC)	DSH Payment Redistributions	Change in UCC	DSH Payment for Medicaid State Plan Rate Year	Total Uncompensated Care Costs for Medicaid State Plan Rate Year	DSH Payment Under or <Over> Total Uncompensated Care Costs (UCC)	DSH Payment Redistributions	Change in UCC	DSH Payment for Medicaid State Plan Rate Year	Total Uncompensated Care Costs for Medicaid State Plan Rate Year	DSH Payment Under or <Over> Total Uncompensated Care Costs (UCC)
BRIDGEPORT HOSPITAL	070010	9,722,573	28,707,423	18,984,850	N/A	-	9,722,573	28,707,423	18,984,850	N/A	-	9,722,573	28,707,423	18,984,850	N/A	-	9,722,573	28,707,423	18,984,850
BRISTOL HOSPITAL	070029	877,892	5,269,944	4,392,052	N/A	-	877,892	5,269,944	4,392,052	N/A	-	877,892	5,269,944	4,392,052	N/A	-	877,892	5,269,944	4,392,052
CHARLOTTE HUNGERFORD HOSPITAL	070011	3,535,153	7,582,304	4,047,151	N/A	-	3,535,153	7,582,304	4,047,151	N/A	-	3,535,153	7,582,304	4,047,151	N/A	-	3,535,153	7,582,304	4,047,151
CT CHILDRENS MEDICAL CENTER	073300	10,050,240	28,349,018	18,298,778	N/A	-	10,050,240	28,349,018	18,298,778	N/A	-	10,050,240	28,349,018	18,298,778	N/A	-	10,050,240	28,349,018	18,298,778
CT MENTAL HEALTH CENTER	074011	4,363,868	13,176,751	8,812,883	N/A	-	4,363,868	13,176,751	8,812,883	N/A	-	4,363,868	13,176,751	8,812,883	N/A	-	4,363,868	13,176,751	8,812,883
CT VALLEY HOSPITAL	074003	89,713,777	162,388,405	72,674,628	N/A	-	89,713,777	162,388,405	72,674,628	N/A	-	89,713,777	162,388,405	72,674,628	N/A	-	89,713,777	162,388,405	72,674,628
CT VETERANS HOME & HOSPITAL (DVA)	072006	7,818,785	1,140,730	(6,678,055)	N/A	-	7,818,785	1,140,730	(6,678,055)	N/A	-	7,818,785	1,140,730	(6,678,055)	N/A	1,591,991	7,818,785	2,732,721	(5,086,064)
DANBURY HOSPITAL	070033	14,373,378	38,666,523	24,293,145	N/A	-	14,373,378	38,666,523	24,293,145	N/A	-	14,373,378	38,666,523	24,293,145	N/A	-	14,373,378	38,666,523	24,293,145
DAY KIMBALL HOSPITAL	070003	2,369,776	4,164,813	1,795,037	N/A	-	2,369,776	4,164,813	1,795,037	N/A	-	2,369,776	4,164,813	1,795,037	N/A	-	2,369,776	4,164,813	1,795,037
GREENWICH HOSPITAL ASSOCIATION	070018	3,527,830	11,366,991	7,839,161	N/A	-	3,527,830	11,366,991	7,839,161	N/A	-	3,527,830	11,366,991	7,839,161	N/A	-	3,527,830	11,366,991	7,839,161
GRIFFIN HOSPITAL	070031	2,750,281	3,712,661	962,380	N/A	-	2,750,281	3,712,661	962,380	N/A	-	2,750,281	3,712,661	962,380	N/A	-	2,750,281	3,712,661	962,380
HARTFORD HOSPITAL	070025	27,763,681	51,366,802	23,603,121	N/A	-	27,763,681	51,366,802	23,603,121	N/A	-	27,763,681	51,366,802	23,603,121	N/A	-	27,763,681	51,366,802	23,603,121
HOSPITAL OF CENTRAL CT (former NBGH)	070035	10,572,782	33,565,572	22,992,790	N/A	-	10,572,782	33,565,572	22,992,790	N/A	-	10,572,782	33,565,572	22,992,790	N/A	-	10,572,782	33,565,572	22,992,790
HOSPITAL OF ST RAPHAEL	070001	10,519,732	17,546,994	7,027,262	N/A	-	10,519,732	17,546,994	7,027,262	N/A	-	10,519,732	17,546,994	7,027,262	N/A	-	10,519,732	17,546,994	7,027,262
JOHN DEMPSEY HOSPITAL	070036	14,732,003	21,289,052	6,557,049	N/A	-	14,732,003	21,289,052	6,557,049	N/A	(5,438,937)	14,732,003	15,850,115	1,118,112	N/A	-	14,732,003	15,850,115	1,118,112
JOHNSON MEMORIAL HOSPITAL	070008	1,766,473	4,536,566	2,770,093	N/A	-	1,766,473	4,536,566	2,770,093	N/A	-	1,766,473	4,536,566	2,770,093	N/A	-	1,766,473	4,536,566	2,770,093
LAWRENCE & MEMORIAL HOSPITAL	070007	9,599,159	22,537,170	12,938,011	N/A	-	9,599,159	22,537,170	12,938,011	N/A	-	9,599,159	22,537,170	12,938,011	N/A	-	9,599,159	22,537,170	12,938,011
MANCHESTER MEMORIAL HOSPITAL	070027	3,838,352	7,493,643	3,655,291	N/A	-	3,838,352	7,493,643	3,655,291	N/A	-	3,838,352	7,493,643	3,655,291	N/A	-	3,838,352	7,493,643	3,655,291
MIDDLESEX HOSPITAL	070020	9,768,636	13,324,451	3,555,815	N/A	-	9,768,636	13,324,451	3,555,815	N/A	-	9,768,636	13,324,451	3,555,815	N/A	-	9,768,636	13,324,451	3,555,815
MIDSTATE MEDICAL CENTER	070017	4,356,575	16,736,670	12,380,095	N/A	-	4,356,575	16,736,670	12,380,095	N/A	-	4,356,575	16,736,670	12,380,095	N/A	-	4,356,575	16,736,670	12,380,095
MILFORD HOSPITAL	070019	4,387,517	6,955,186	2,567,669	N/A	-	4,387,517	6,955,186	2,567,669	N/A	-	4,387,517	6,955,186	2,567,669	N/A	-	4,387,517	6,955,186	2,567,669
NEW MILFORD HOSPITAL	070015	1,645,593	4,402,360	2,756,767	N/A	-	1,645,593	4,402,360	2,756,767	N/A	-	1,645,593	4,402,360	2,756,767	N/A	-	1,645,593	4,402,360	2,756,767
NORWALK HOSPITAL	070034	13,208,474	22,304,571	9,096,097	N/A	-	13,208,474	22,304,571	9,096,097	N/A	-	13,208,474	22,304,571	9,096,097	N/A	-	13,208,474	22,304,571	9,096,097
ROCKVILLE GENERAL HOSPITAL	070012	1,040,872	4,447,124	3,406,252	N/A	-	1,040,872	4,447,124	3,406,252	N/A	-	1,040,872	4,447,124	3,406,252	N/A	-	1,040,872	4,447,124	3,406,252
SHARON HOSPITAL/ESSENT HEALTHCARE	070004	1,590,044	3,297,853	1,707,809	N/A	-	1,590,044	3,297,853	1,707,809	N/A	-	1,590,044	3,297,853	1,707,809	N/A	-	1,590,044	3,297,853	1,707,809
SOUTHWEST CT MENTAL HEALTH SYSTEM	074012	11,496,080	22,586,483	11,090,403	N/A	-	11,496,080	22,586,483	11,090,403	N/A	-	11,496,080	22,586,483	11,090,403	N/A	-	11,496,080	22,586,483	11,090,403
ST FRANCIS HOSPITAL MEDICAL CENTER	070002	18,478,073	34,175,981	15,697,908	N/A	-	18,478,073	34,175,981	15,697,908	N/A	-	18,478,073	34,175,981	15,697,908	N/A	-	18,478,073	34,175,981	15,697,908
ST MARYS HOSPITAL	070016	6,138,553	3,725,494	(2,413,059)	N/A	1,105,629	6,138,553	4,831,123	(1,307,430)	N/A	-	6,138,553	4,831,123	(1,307,430)	N/A	29,332,949	6,138,553	34,164,072	28,025,519
ST VINCENTS MEDICAL CENTER	070028	12,850,650	15,908,889	3,058,239	N/A	-	12,850,650	15,908,889	3,058,239	N/A	-	12,850,650	15,908,889	3,058,239	N/A	-	12,850,650	15,908,889	3,058,239
STAMFORD HOSPITAL	070006	15,659,594	26,948,813	11,289,219	N/A	-	15,659,594	26,948,813	11,289,219	N/A	-	15,659,594	26,948,813	11,289,219	N/A	-	15,659,594	26,948,813	11,289,219
WATERBURY HOSPITAL	070005	3,531,081	11,739,871	8,208,790	N/A	-	3,531,081	11,739,871	8,208,790	N/A	-	3,531,081	11,739,871	8,208,790	N/A	-	3,531,081	11,739,871	8,208,790
WILLIAM W BACKUS HOSPITAL	070024	10,736,154	19,022,162	8,286,008	N/A	-	10,736,154	19,022,162	8,286,008	N/A	-	10,736,154	19,022,162	8,286,008	N/A	-	10,736,154	19,022,162	8,286,008
WINDHAM COMM MEM HOSPITAL	070021	878,873	6,159,322	5,280,449	N/A	-	878,873	6,159,322	5,280,449	N/A	-	878,873	6,159,322	5,280,449	N/A	-	878,873	6,159,322	5,280,449
YALE NEW HAVEN HOSPITAL	070022	62,949,012	176,811,007	113,861,995	N/A	-	62,949,012	176,811,007	113,861,995	N/A	-	62,949,012	176,811,007	113,861,995	N/A	-	62,949,012	176,811,007	113,861,995

Note on Addendum #3-For State Plan Year 2012, only Connecticut Veterans/DVA's and St. Mary's DSH payment exceeded the hospital specific DSH limit. For those hospitals only, Medicare and third party payments were removed and the UCC recalculated. No breakdown of Other Medicaid Eligible payments by Medicare, Medicaid and private insurance was provided for the remaining hospitals. As such, Medicare and private insurance payments were not removed for the calculation of UCC for these hospitals.

