ATTACHMENT N

Safety Net Hospital Provider Payment Eligibility and Allocation Protocol

Hospitals that meet the eligibility criteria to receive a Safety Net Provider Payment pursuant to STC 11.2 and their corresponding potential payments are listed in Table 2 below.

Safety Net Provider Payment Eligibility and Allocation Methodology

Hospitals that are eligible to receive Safety Net Provider Payments must meet the eligibility criteria below and have a demonstrated Medicaid and Uninsured shortfall as reported on the Uncompensated Care Cost and Charge Report (UCCR). The eligibility criteria use hospitals' fiscal year 2019 Center for Health Information and Analysis (CHIA) hospital cost reports.

To be eligible, the hospital must meet the following four criteria:

- 1. Medicaid and Uninsured payer mix by charges of at least 20.00%;
- 2. Commercial payer mix by charges of less than 50.00%;
- 3. Is not a MassHealth Essential hospital as defined in Massachusetts' approved State Plan; and
- 4. Is not a critical access hospital with fewer than 30 beds upon issuance of the 2019 CHIA hospital cost reports.

Eligible hospitals are split into two groups based on these criteria:

- *Group 1*: Any hospital that received Delivery System Transformation Initiative (DSTI) payments in the SFY 2015-2017 demonstration period.
- *Group 2*: Any hospital that did **not** receive DSTI payments in the SFY 2015- 2017 demonstration period.

Twenty percent (20%) of each hospital's total Safety Net Provider Payments for each demonstration year will be at risk and subject to an Accountable Care Organization (ACO) accountability score, which has performance requirements aligned with the Commonwealth's ACO program. Of the twenty percent, 15% will be tied to the quality performance of the hospital's partnered ACO (ACO quality score) and 5% will be tied to the total cost of care (TCOC) performance of the hospital's partnered ACO (ACO TCOC score). Executive Office of Health and Human Services (EOHHS) will calculate the ACO quality score as set forth in Appendix Q of the Accountable Care Partnership Plan (ACPP) contract and Appendix B of the Primary Care ACO (PCACO) contract. EOHHS will determine the ACPP TCOC score based on ACO Plan Corridor performance as set forth in Section 4 of the ACPP contract. EOHHS will determine the PCACO TCOC Score based on TCOC Performance as set forth in Section 4 of the PCACO contract. Table 1 sets forth the relationship between TCOC Performance (Plan Corridor performance for ACPPs) and the ACO's TCOC Score.

Table 1. TCOC Performance and TCOC Score

TCOC Performance (Plan Corridor Performance for ACPPs)	TCOC Score		
>0% gain	100%		
0-5% loss	75%		
5-10% loss	50%		
>10% loss	0%		

The at-risk payments will be withheld until performance results are available or can be estimated as described below.

Table 2. Safety Net Provider Potential Payments by Eligible Hospital Provider (in millions)

Table 2. Safety Net Provider Potenti	DY 27	DY 28	DY 29	DY 30	DY 31	DY 32
Hospital Provider	Oct - Dec 22	CY 23	CY 24	CY 25	CY 26	CY 27
Group 1						
Boston Medical Center	34.865	139.458	139.458	139.458	139.458	139.458
Holyoke Medical Center	2.151	8.603	8.603	8.603	8.603	8.603
Lawrence General Hospital	3.801	15.204	15.204	15.204	15.204	15.204
Mercy Medical Center	3.990	15.959	15.959	15.959	15.959	15.959
Signature Healthcare Brockton Hospital	4.398	17.590	17.590	17.590	17.590	17.590
Steward Carney Hospital Inc.*	1.697	6.787	6.787	-	-	-
Group 2						
Baystate Franklin Medical Center	0.389	1.554	1.554	1.554	1.554	1.554
Baystate Medical Center	4.434	17.735	17.735	17.735	17.735	17.735
Baystate Wing Hospital	0.312	1.247	1.247	1.247	1.247	1.247
Berkshire Medical Center	1.492	5.969	5.969	5.969	5.969	5.969
Heywood Hospital	0.499	1.995	1.995	1.995	1.995	1.995
Lowell General Hospital	1.887	7.549	7.549	7.549	7.549	7.549
Martha's Vineyard Hospital	0.291	1.165	1.165	1.165	1.165	1.165
MetroWest Medical Center	1.606	6.422	6.422	6.422	6.422	6.422
Noble Hospital	0.211	0.845	0.845	0.845	0.845	0.845
North Shore Medical Center	2.303	9.213	9.213	9.213	9.213	9.213
Shriners Hospitals for Children Boston	0.219	0.875	0.875	0.875	0.875	0.875
Shriners Hospitals for Children Springfield*	0.135	0.539	-	-	-	-
Southcoast Hospitals Group	3.631	14.524	14.524	14.524	14.524	14.524
Good Samaritan Medical Center	0.876	3.505	3.505	3.505	3.505	3.505
Holy Family Hospital, Inc.*	0.989	3.954	3.954	-	-	-
Morton Hospital	0.394	1.570	1.570	1.570	1.570	1.570
Tufts Medical Center	4.083	16.333	16.333	16.333	16.333	16.333
Total	74.650	298.600	298.056	287.315	287.315	287.315

* Shriners Hospitals for Children Springfield closed prior to DY29 (CY2024) and will receive no further SNPP payments in or after DY29. Steward Carney Hospital, Inc. closed prior to DY30 (CY2025) and will receive no further SNPP payments in or after DY30. Steward Holy Family Hospital, Inc. was sold to a new owner prior to DY30 and no longer exists as Steward Holy Family Hospital, Inc. The entity purchasing the former Steward Holy Family Hospital, Inc. will not receive any SNPP or SNCP payments for the hospital.

Estimated Payments and Reconciliation

Generally, the Commonwealth will make payments to eligible hospitals for ACO quality and TCOC performance as described above when results become available. For performance measures that rely on claims and/or other lagged sources of data, the state will make estimated payments, which will be subject to final reconciliation. The Commonwealth will perform an annual reconciliation once final quality and TCOC performance results are available to identify the final payment amount due to the hospital. The Commonwealth will pay the hospital any amount due above the estimated payment or recoup from the hospital any amount by which the estimated payment exceeded the final amount due.