



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
One Ashburton Place, Room 1109
Boston, Massachusetts 02108

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

Tel: (617) 573-1600
Fax: (617) 573-1891
www.mass.gov/eohhs

Administrative Bulletin 17-09 (Revised July 11, 2017)

101 CMR 701.00: Community Hospital Reinvestment Trust Fund Payments and Funding

Effective June 2, 2017

Allocation and Requirements of Trust Fund Payments with Revised Attestation Due Date and Updated Payment Amounts

The Executive Office of Health and Human Services (EOHHS) is issuing this Administrative Bulletin pursuant to 101 CMR 701.01(2) to identify amounts and recipients of payments from the Community Hospital Reinvestment Trust Fund (the "Trust Fund") for state fiscal year 2017 (SFY17) and to set forth compliance criteria and reporting requirements relating to Trust Fund payments. Payment amounts are determined by EOHHS, using the methodology described in 101 CMR 701.04(4), based on data reported to the Center for Health Information and Analysis.

1. State Fiscal Year 2017 Payments by Eligible Acute Care Hospital

- a. Anticipated SFY17 payments to eligible acute care hospitals are identified in the table below.

Eligible Acute Care Hospital	Payment ¹
Anna Jaques Hospital	\$177,201
Athol Memorial Hospital	\$65,669
Baystate Franklin Medical Center	\$50,856
Baystate Mary Lane Hospital	\$43,593
Baystate Medical Center	\$42,365
Baystate Noble Hospital	\$237,456
Baystate Wing Hospital	\$182,392
Beth Israel Deaconess Hospital - Milton	\$174,717
Beth Israel Deaconess Hospital - Needham	\$51,566
Beth Israel Deaconess Hospital - Plymouth	\$111,648
Beth Israel Deaconess Medical Center	\$20,832
Boston Medical Center	\$42,262
Brigham and Women's Faulkner Hospital	\$26,749

¹ Payment amounts are subject to budget appropriation and availability of funds.



Eligible Acute Care Hospital	Payment¹
Cambridge Health Alliance	\$152,127
Clinton Hospital	\$69,421
Cooley Dickinson Hospital	\$42,573
Emerson Hospital	\$120,397
Hallmark Health Systems	\$85,867
Harrington Memorial Hospital	\$87,975
Health Alliance Hospitals	\$161,049
Heywood Hospital	\$180,219
Holyoke Medical Center	\$203,072
Lahey Health - Winchester Hospital	\$95,188
Lahey Hospital & Medical Center	\$41,376
Lawrence General Hospital	\$180,237
Lowell General Hospital	\$136,573
Marlborough Hospital	\$117,482
Massachusetts Eye & Ear Infirmary	\$127,780
Mercy Medical Center	\$144,877
MetroWest Medical Center	\$114,716
Milford Regional Medical Center	\$123,724
Morton Hospital	\$114,025
Mount Auburn Hospital	\$72,303
Nashoba Valley Medical Center	\$47,848
New England Baptist Hospital	\$73,528
Newton-Wellesley Hospital	\$39,843
North Shore Medical Center	\$43,703
Northeast Hospital	\$108,870
Saint Vincent Hospital	\$127,093
Shriners Hospital for Children Boston	\$77,617
Shriners Hospital for Children Springfield	\$84,943
Signature Healthcare Brockton Hospital	\$159,261
South Shore Hospital	\$4,363
Southcoast Hospitals Group	\$89,751
Steward Carney Hospital	\$92,639
Steward Good Samaritan Medical Center	\$87,362
Steward Holy Family Hospital	\$113,033
Steward Norwood Hospital	\$92,257
Steward Saint Anne's Hospital	\$74,288
Steward Saint Elizabeth's Medical Center	\$14,369
Sturdy Memorial Hospital	\$24,486
Tufts Medical Center	\$25,555
UMass Memorial Medical Center	\$20,904

- b. EOHHS anticipates that SFY17 payments will be disbursed during or around July 2017, provided each eligible acute care hospital identified in the table above must submit a valid attestation, as

described in Section 2 of this Administrative Bulletin, before the eligible acute care hospital's payment will be disbursed.

2. Attestation

- a. As a condition of receiving a SFY17 payment from the Trust Fund, each eligible acute care hospital must provide an attestation to EOHHS agreeing (1) to an independent financial and operational audit to recommend steps to increase sustainability and efficiency of the acute care hospital, as described in 101 CMR 701.04(2)(a); and (2) to use payments received from the Trust Fund to conduct the independent financial and operational audit and/or to advance steps recommended in the audit for improving or continuing health care services that benefit the uninsured, underinsured, and MassHealth populations, as described in 101 CMR 701.04(2)(b).
- b. Each eligible acute care hospital must make its attestation by submitting a signed attestation form (Attachment A to this Administrative Bulletin). Signed attestation forms must be submitted no later than June 23, 2017, via e-mail to Stephanie.buckler@massmail.state.ma.us.

3. Use of Funds

Each eligible acute care hospital must (1) use its payment to conduct an independent financial and operational audit that will result in recommended steps to increase sustainability and efficiency of the acute care hospital; and/or (2) use any unspent Trust Fund payment amount remaining after the audit has been conducted to advance steps recommended in the audit for improving or continuing health care services that benefit the uninsured, underinsured, and MassHealth populations.

4. Required Reports

By July 31, 2018, each eligible acute care hospital that receives a SFY17 Trust Fund payment will be required to submit a final report to EOHHS detailing activities supported by the acute care hospital's SFY17 Trust Fund payment. Each acute care hospital will submit its final report on a template that EOHHS will issue at a later date. Though EOHHS has not finalized its report template, a sample template is attached to this bulletin for illustrative purposes. At a minimum, the final report will document the goals of the audit, how the audit was conducted, findings from the audit and recommended next steps, progress, if any, on the recommended next steps, a budget for how the SFY17 Trust Fund payments were utilized, and such other items as may be specified by EOHHS.

5. Noncompliance

EOHHS may deny, reduce, or withhold payment to an eligible acute care hospital that fails to comply with any condition of payment or reporting requirement set forth in 101 CMR 701.00 or this Administrative Bulletin. EOHHS will notify the acute care hospital of its intention to deny, reduce, or withhold payment.