Executive Summary of Hospital Settlement Agreement

Background

- Resolves legal claims that potentially expose state to roughly \$4 billion in liability
- Improves the state's financial position in FY 2020 by approximately \$300 million when compared to hospital user fee and payment provisions under PA 17-4, June Special Session
- Requires legislative approval (CGS § 3-125a) and implementing legislation

Settlement Overview

- 7 year term: SFYs 2020-2026
- Second hospital user fee reduced from \$900 million in SFY 2019 to \$820 million by SFY 2026
- Medicaid rate increases effective January 1st of each year of term: 2.0% inpatient; 2.2% most outpatient services
- Supplemental Payments (compared to \$453.3 million in enacted biennial budget)
 - \$548.3 million SFYs 2020-2021; \$568.3 million for SFYs 2022-2026
- One-Time Refunds/Payments: \$70 million user fee refunds; \$9.3 million Medicaid payments
- Other Payment Terms
 - Medicare wage index modification, plus other adjustments
 - For term, Medicaid hospital payment methodology cannot be altered restriction applies to inpatient and outpatient rates and supplemental payment amounts and distribution

Limitation on Taxation of Hospitals

- No changes to hospitals' current tax exemptions, including municipal property taxes, corporation business tax, sales and use taxes, and motor vehicle fuels tax
- For term, no more than 15% of revenue from new or amended taxes can come from hospitals

Funding for Biennium

• Requires \$180.7 million over biennium – \$160 million transferred from SFY 2019 and \$20.7 million from unappropriated General Fund resources in SFY 2020; funds available under PA 19-117, § 50

Mitigating Unanticipated State Costs Due to Federal Actions

- Contingency to protect state from financial impact of federal actions that may occur
- State can negotiate with hospitals for mutually agreed adjustments at any time
 - If no agreement, state costs could increase up to \$50 million per SFY
 - State can ask court to modify agreement for state costs between \$50–100 million per SFY
- State can terminate agreement if increased state costs exceed \$100 million per SFY
 - o If state terminates, hospitals reinstate legal claims, reduced by applicable percentage

Value-Based Payments

- DSS cannot require downside risk in Medicaid hospital payments for term
- DSS may require upside-only Medicaid hospital value-based payments starting SFY 2023

Timing and Enforcement

- Agreement contingent on federal approval of tax waiver and Medicaid State Plan Amendments
- Superior Court retains jurisdiction to enforce agreement

SETTLEMENT AGREEMENT - FINANCIAL SUMMARY (in millions)										
		Enacted								
	SFY 2019	SFY 2020	SFY 2020	SFY 2021	SFY 2022	SFY 2023	SFY 2024	SFY 2025	SFY 2026	
Hospital User Fee	\$900.0	\$900.0	\$890.0	\$882.0	\$850.0	\$850.0	\$850.0	\$850.0	\$820.0	
Supplemental Payments	493.3	453.3	548.3	548.3	568.3	568.3	568.3	568.3	568.3	
Projection of Hospital Rate Increase	175.1	175.1	180.7	202.7	235.9	269.7	304.3	339.5	375.4	
One-Time Payments to Certain Hospitals			9.3	-	-	-	-	-	-	
User Fee Refunds			70.0	-	-	-	-	-	-	
Net Hospital Position	(\$231.6)	(\$271.6)	(\$81.7)	(\$131.0)	(\$45.8)	(\$12.0)	\$22.6	\$57.8	\$123.7	
										Cumulative
									2	Total
State Impact (from SFY 2019)			(\$107.9)	(\$46.0)	(\$95.7)	(\$107.0)	(\$118.5)	(\$130.3)	(\$172.3)	(\$777.7
Hospital Impact (from SFY 2019)			149.9	\$100.6	185.8	219.6	254.2	289.4	355.3	1,554.8
State Impact (from SFY 2020 enacted budget)			(\$121.3)	(\$59.4)	(\$109.1)	(\$120.4)	(\$131.9)	(\$143.7)	(\$185.7)	(\$871.5
Hospital Impact (from SFY 2020 enact	ed budget)		189.9	\$140.6	225.8	259.6	294.2	329.4	395.3	1,834.8
 Medicaid payments to all hospitals totaled \$2.396 billion in SFY 2019. 										
 Funding to cover state costs of \$180.7 million in current biennium available pursuant to PA 19-117. 									9-117.	
 Estimates above assume 66.6% federal reimbursement on hospital payments. 										
 Estimates above assume no enrollment/utilization increases after SFY 2021. 										