

Brief Description of DSH and UPL Programs in a Selection of States

	South Carolina	Texas	Florida	Massachusetts
Funding	<ul style="list-style-type: none"> • IGTs from Public Hospitals • For SFY 05/06: Publics Self Fund with IGTs; Tax on Privates Only 	<ul style="list-style-type: none"> • IGTs from the nine largest Hospital Districts • IGTs supported by local property taxes • CPEs from state hospitals 	<ul style="list-style-type: none"> • IGTs from public hospitals and counties 	<ul style="list-style-type: none"> • Taxes on hospitals & insurers • Some general revenue
Eligibility	<ul style="list-style-type: none"> • All public hospitals • MUR greater than 100% of statewide average • LIUR greater than 22% • SC newborn discharges greater than 200% of average • State teaching hospitals • For SFY 05/06: all SC hospitals 	<ul style="list-style-type: none"> • MUR greater than one standard deviation of the statewide mean • LIUR greater than 25% • Children's Hospitals 	<ul style="list-style-type: none"> • Teaching hospitals • Trauma centers • Children's Hospitals • Hospitals with Medicaid and charity care days greater than 11% 	<ul style="list-style-type: none"> • Gross Patient Service Revenue from Medicaid, Medicare, other government payers, and free care equal to or greater than 63%
Payment Method	<ul style="list-style-type: none"> • DSH & UPL Combined • UPL: Medicaid cost settlement for publics and privates • DSH: all uninsured costs for publics and privates (slightly reduced pro rata to comply with federal DSH allotment) 	<ul style="list-style-type: none"> • State hospitals receive full DSH cap off the top • Rural hospital bucket equals 5.5% of remaining funds • Distribution based on Medicaid days and "low income" days (uninsured days) • UPL paid to the 9 hospitals making IGTs for DSH, selection of rural hospitals, and a few other public hospitals 	<ul style="list-style-type: none"> • DSH & UPL combined • Only public hospitals receive DSH in order to maximize financing opportunities • Main benefit is eligible hospitals are paid Medicaid costs • "Policy Silos" reward hospitals doing teaching, trauma, designated primary care programs or making IGTs on behalf of DSH & UPL program 	<ul style="list-style-type: none"> • Free Care Pool • Each hospital reimbursed a percentage of their free care