Overview

The Upper Payment Limit (UPL) Holding Account was authorized pursuant to Section 57 of Senate Bill 514 of the 2015 Legislative Session (Appropriations Act) to allow various divisions within the Department of Health and Human Services to transfer savings associated with health care-related contract expenditures that are budgeted, but not incurred, to this budget in the Director’s Office. When needed, funds are transferred to the Division of Health Care Financing and Policy to support the state share of the Private Hospital Collaborative Upper Payment Limit (UPL) supplemental payment program. Excess funding is reverted to the General Fund or Healthy Nevada Fund.
Upper Payment Limit (UPL) Holding Account

UPL Contract Amounts

<table>
<thead>
<tr>
<th>Year</th>
<th>FY16 (14 contracts)</th>
<th>FY17 (20 contracts)</th>
<th>FY18 (31 contracts)</th>
<th>FY19 Projected (40 contracts)</th>
<th>FY20 Budgeted (42 contracts)</th>
<th>FY21 Budgeted (42 contracts)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>General Fund $4</td>
<td>Other Funds $3</td>
<td>General Fund $5</td>
<td>General Fund $8</td>
<td>General Fund $10</td>
<td>General Fund $10</td>
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</table>

Amount Reverted

<table>
<thead>
<tr>
<th>Year</th>
<th>FY16</th>
<th>FY17</th>
<th>FY18</th>
<th>FY19 Projected</th>
<th>FY20 Budgeted</th>
<th>FY21 Budgeted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$2</td>
<td>$2</td>
<td>$2</td>
<td>$3</td>
<td>$5</td>
<td>$6</td>
</tr>
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</table>

Helping People. It’s who we are and what we do.
Overview

The Indigent Hospital Care budget was established to reimburse hospitals for the care provided to indigent persons. The Indigent Hospital Care budget consists of the Fund for Hospital Care to Indigent Persons (Fund), which is administered by a Board of Trustees consisting of four county commissioners and one director of a county social services agency appointed by the Governor. Counties seek reimbursement or partial reimbursement from the Fund for unpaid charges in excess of $25,000. In addition, the Board may enter into an agreement with the Division of Health Care Financing and Policy to provide state share of certain Medicaid expenditures relating to hospital care.
Indigent Hospital Care Revenue

Unmet Freecare Obligation and Ad Valorem Property Tax

<table>
<thead>
<tr>
<th>Year</th>
<th>Unmet Freecare Obligation</th>
<th>Ad Valorem Property Tax (1.5 cent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 14</td>
<td>$1</td>
<td>$12</td>
</tr>
<tr>
<td>FY 15</td>
<td>$1</td>
<td>$12</td>
</tr>
<tr>
<td>FY 16</td>
<td>$3</td>
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<tr>
<td>FY 17</td>
<td>$3</td>
<td>$15</td>
</tr>
<tr>
<td>FY 18</td>
<td>$19</td>
<td>$14</td>
</tr>
<tr>
<td>FY 19 Projected</td>
<td>$19</td>
<td>$14</td>
</tr>
<tr>
<td>FY 20 Budgeted</td>
<td>$14</td>
<td>$14</td>
</tr>
<tr>
<td>FY 21 Budgeted</td>
<td>$22</td>
<td>$22</td>
</tr>
</tbody>
</table>

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Budget Information/Changes

• Funds have four different uses:
  • Nevada Association of Counties (NACO) Contract for Administration
  • Traditional Indigent Accident Fund Claims
  • Offset County Match
  • Transfer to Medicaid for Supplemental Payments
    • Transfer projected at $34 million each year of the biennium
    • Allow Medicaid to pay approximately $95 million in supplemental payments.
Appendix

• Private Hospital Upper Payment Limit Flow Chart
• Indigent Hospital Care Flow Chart
• Acronyms
Private Hospital Upper Payment Limit Program

DHHS Divisions (DPBH, DCFS, ADSD)

DHHS Director’s Office (BA 3260)

General Fund Savings Transferred

Division of Health Care Financing & Policy

Participating Hospitals (16)

UPL Payments

General Fund or Healthy Nevada Fund Reversions

CMS Federal Match

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BA 3244 Indigent Hospital Care

NRS 428.185 Ad Valorem Property Tax Assessment for IAF, 1.5 cents per $100

NRS 439B.340 Unmet Freecare Obligation

Indigent Hospital Care (BA 3244) (Prior to June 2014, this budget account was known as the IAF and Supplemental Account)

Board of Trustees may use funds to offset County Match Program obligations (Note: Senate Bill 3 (2013) established 8 cent cap)

NACO contract for claims management

Board of Trustees may oversee traditional IAF/Supplemental claims program

Board of Trustees may transfer funds to Medicaid to make rate enhancements or supplemental payments

Supplemental Payments made by Medicaid

Federal Match (FMAP applied)

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## Acronyms

- **ADSD**: Aging and Disability Services Division
- **BA**: Budget Account
- **BDR**: Bill Draft Request
- **CMS**: Centers for Medicaid & Medicare Services
- **DCFS**: Division of Child and Family Services
- **DHCFP**: Division of Health Care Financing and Policy (Medicaid)
- **DHHS**: Department of Health and Human Services
- **DO**: Director’s Office
- **DPBH**: Division of Public and Behavioral Health
- **DWSS**: Division of Welfare and Supportive Services
- **FMAP**: Federal Medical Assistance Percentage
- **FY**: Fiscal Year
- **G01**: Governor Recommends Budget
- **NACO**: Nevada Association of Counties
- **NCS**: Nevada Clinical Services
- **NRS**: Nevada Revised Statute
- **UPL**: Upper Payment Limit