

**UNCOMPENSATED CARE AND DELIVERY SYSTEM REFORM INCENTIVE PAYMENTS
FOR REGIONAL HEALTHCARE PARTNERSHIP 8* (\$ in Millions)**

	DY 2 / FFY 2013			DY 3 / FFY 2014			DY 4 / FFY 2015			DY 5 / FFY 2016		
	IGT	Federal	Total	IGT	Federal	Total	IGT	Federal	Total	IGT	Federal	Total
Uncompensated Care Allocation	\$ 26.97	\$ 37.58	\$ 64.55	\$ 24.44	\$ 34.05	\$ 58.49	\$ 23.15	\$ 32.26	\$ 55.41	\$ 21.44	\$ 29.87	\$ 51.31

	Maximum % for 1st Pass	DY 2 / FFY 2013			DY 3 / FFY 2014			DY 4 / FFY 2015			DY 5 / FFY 2016		
		IGT	Federal	Total	IGT	Federal	Total	IGT	Federal	Total	IGT	Federal	Total
HHSC DSRIP Allocation		\$ 15.91	\$ 22.16	\$ 38.07	\$ 18.44	\$ 25.69	\$ 44.13	\$ 19.72	\$ 27.48	\$ 47.20	\$ 21.44	\$ 29.87	\$ 51.31
First Pass Funding													
Hospital Performing Providers	75%	\$ 11.93	\$ 16.62	\$ 28.55	\$ 13.83	\$ 19.27	\$ 33.10	\$ 14.79	\$ 20.61	\$ 35.40	\$ 16.08	\$ 22.40	\$ 38.48
Local Mental Health Authorities	10%	\$ 1.59	\$ 2.22	\$ 3.81	\$ 1.84	\$ 2.57	\$ 4.41	\$ 1.97	\$ 2.75	\$ 4.72	\$ 2.14	\$ 2.99	\$ 5.13
AHC Physician Practice Plans	10%	\$ 1.59	\$ 2.22	\$ 3.81	\$ 1.84	\$ 2.57	\$ 4.41	\$ 1.97	\$ 2.75	\$ 4.72	\$ 2.14	\$ 2.99	\$ 5.13
Local Health Departments	5%	\$ 0.80	\$ 1.11	\$ 1.90	\$ 0.92	\$ 1.28	\$ 2.21	\$ 0.99	\$ 1.37	\$ 2.36	\$ 1.07	\$ 1.49	\$ 2.57

First Pass Projects must:

- Include the minimum of 2 projects from Categories 1 & 2 required for RHP 8
- Meet the threshold for DSRIP participation by non-profit and private hospitals

Second Pass Funding

- Includes funding unallocated in the First Pass
- Can fund new projects in Categories 1-3
- New projects must meet the RHP's overall goals and be consistent with the RHP's community needs assessment
- Performing Providers from First Pass Funding may participate
- In addition, physician practices not affiliated with an Academic Health Science Center may participate
- Second pass project values are limited and are not to exceed the highest value of a single project adopted by the Performing Provider in First Pass Funding

	DY 2 FFY 2013	DY 3 FFY 2014	DY 4 FFY 2015	DY 5 FFY 2016
Limitations on DSRIP Category Funding Distribution for Hospital Providers				
Category 1 & 2	<=85%	<=80%	<=80%	<75%
Category 3	>=10%	>=10%	>=10%	>15%
Category 4	5%	>=10%	>=10%	>=10%
• Certain small hospital providers that do not report Category 4 measures will allocate those funds to Categories 1 & 2				

* Figures and Methodologies based on the draft "RHP Program Funding and Mechanics Protocol" dated 6/29/2012.

Note 1 : The split between IGT/Federal funds is based on the 2012 Federal Medical Assistance Percentage (FMAP) of 58.22% or 41.78% federal and is subject to annual change.

Note 2: Hospitals are assigned a potential DSRIP allocation for First Pass Funding. This is based on a provider's size and role in serving Medicaid patients and is determined by equally weighing a hospital's percent share of 2011 State Medicaid acute care payments and the hospital's percent of 2011 Medicaid supplemental payments.