

**CHASE Provider Fee Supplemental Payment Summary
(Updated 4/21/21)**

Table 1. Statement of Activities			
Period Begin: October 1, 2020			
Period End: September 30, 2021			
<i>Item</i>	<i>Cash Fund</i>	<i>Federal Fund</i>	<i>Total Fund</i>
Revenue	\$ 1,072,750,000		
HAS Fee	\$ 1,025,740,000		
General Fund Offset Fee	\$ 47,010,000		
Cash Fund Reserve	\$ -		
Expansion and Administration Expenses	\$ 472,200,000	\$ 2,350,120,000	\$ 2,822,430,000
Expansion Estimates	\$ 373,200,000	\$ 2,280,550,000	\$ 2,653,750,000
Administration Estimates	\$ 36,300,000	\$ 69,570,000	\$ 105,980,000
General Fund Offset	\$ 62,700,000	\$ -	\$ 62,700,000
Supplemental Payment Expenses	\$ 600,570,000	\$ 882,390,000	\$ 1,482,960,000
Inpatient Supplemental Payment	\$ 218,500,000	\$ 356,490,000	\$ 574,990,000
Outpatient Supplemental Payment	\$ 215,830,000	\$ 352,120,000	\$ 567,950,000
Essential Access Supplemental Payment	\$ 7,410,000	\$ 12,090,000	\$ 19,500,000
Rural Support Program Supplemental Payment	\$ 4,560,000	\$ 7,440,000	\$ 12,000,000
DSH Supplemental Payment	\$ 109,690,000	\$ 109,680,000	\$ 219,370,000
HQIP Supplemental Payment	\$ 44,580,000	\$ 44,580,000	\$ 89,160,000
Total Expenses	\$ 1,072,770,000	\$ 3,232,510,000	\$ 4,305,390,000

Table 2. Net Reimbursement				
<i>Item</i>	<i>FFY 2020-21</i>	<i>FFY 2019-20</i>	<i>\$ Δ</i>	<i>% Δ</i>
Supplemental Payment	\$ 1,482,960,000	\$ 1,407,500,000	\$ 75,460,000	5.36%
HAS Fee	\$ 1,072,750,000	\$ 1,014,760,000	\$ 57,990,000	5.71%
Total Net Reimbursement	\$ 410,210,000	\$ 392,740,000	\$ 17,470,000	4.45%



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Table 3. UPL Utilization			
<i>Item</i>	<i>IP UPL</i>	<i>OP UPL</i>	<i>Total UPL</i>
UPL	\$ 1,617,410,000	\$ 1,278,090,000	\$ 2,895,500,000
UPL Gap for Supplemental Payments	\$ 754,100,000	\$ 636,240,000	\$ 1,390,340,000
Supplemental Payments	\$ (683,640,000)	\$ (579,950,000)	\$ (1,263,590,000)
Remaining UPL Gap	\$ 70,460,000	\$ 56,290,000	\$ 126,750,000
UPL Utilization Percentage	96.00%	96.00%	96.00%

Table 4. NPR Utilization				
<i>Item</i>	<i>NPR</i>	<i>Fee</i>	<i>NPR Limit</i>	<i>Available Fee</i>
Inpatient	\$ 8,276,610,000	\$ 497,000,000	6.00%	\$ -
Outpatient	\$ 9,587,930,000	\$ 575,750,000	6.00%	\$ -
Total	\$ 17,864,540,000	\$ 1,072,750,000	6.00%	\$ -

Table 5. HAS Fee Return Rate			
<i>Payment Received Per One Fee Dollar Charged</i>			
Hospital Designation	Supplemental Payment	HAS Fee	Return Rate
Rural	\$ 182,880,000	\$ 68,180,000	2.68
Frontier	\$ 39,980,000	\$ 6,770,000	5.91
Urban	\$ 1,260,110,000	\$ 950,790,000	1.33