

**Hospital Indigent Fund (Indigent Accident Fund)
Supplemental Payment Program**

SFY 2020 Reports

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SFY 2020 HIF / IAF Calculation 2

SFY 2020 IAF Supplemental Payment

(Non Federal Share SFY 2020) \$37,402,882= \$ 104,375,281 (Total Computable Supplemental Payment)

Total Supplemental Payment Allocation for Trauma Cases: \$3,131,258.00 (3% of Total Computable)							
		Fee per Level I and Level II cases	\$6,250.02				
		Fee per Level III cases	\$3,125.01				
Provider ID	Facility Name	Trauma Level	Weight	Total Count of Trauma Cases	Admin Skilled Beds	Final Trauma Cases (Less Admin Skilled Beds)	Total Payment for Trauma Cases
001102877	University Medical Center of Southern Nevada	I	100%	237	0	237	\$1,481,253.78
001116885	Renown Regional Medical Center	II	100%	146	0	146	\$912,502.33
001102878	Sunrise Hospital & Medical Center	II	100%	116	0	116	\$725,001.85
				499	0	499	\$3,118,757.97
001102300	St Rose Dominican Hospital - Siena	III	50%	4	0	4	\$12,500.03
				503	0	503	\$3,131,258.00

Total Supplemental Payment Allocation for Med/Surg/ICU Bed Days: \$101,244,023.15 (97% of Total Computable)							
		Supplemental Payment per Med/Surg/ICU Bed Day		\$409.79			
Provider ID	Facility Name	Provider Type	Hospital Total Days	Hospital CMI (Medicaid)	Adjusted Days per Medicaid CMI (Days*CMI)	Total Payment for Bed Day Component (Adjusted Bed Days * Supplemental Payment per Bed Day)	% of Bed Day Component
001113843	Carson Tahoe Regional Healthcare	11	13,461	1.189354	16,010	\$6,560,716.29	6.48%
100515068	Centennial Hills Hospital Medical Center	11	3,957	1.208940	4,784	\$1,960,428.90	1.94%
001102847	Desert Springs Hospital Inc	11	5,531	1.332758	7,371	\$3,020,552.14	2.98%
100549671	Henderson Hospital	11	1,264	1.374718	1,738	\$712,212.67	0.70%
100545126	Mountain's Edge Hospital	11	29	0.914217	27	\$11,064.29	0.01%
001102006	Mountainview Hospital	11	7,991	1.369433	10,943	\$4,484,317.20	4.43%
100502299	North Vista Hospital	11	14,079	1.274223	17,940	\$7,351,608.39	7.26%
001104851	Northeastern Nevada Regional Hospital	11	1,145	0.946721	1,084	\$444,210.90	0.44%
001116400	Northern Nevada Medical Center	11	841	1.496810	1,259	\$515,923.91	0.51%
001116885	Renown Regional Medical Center	11	23,454	1.697083	39,803	\$16,310,817.66	16.11%
100502741	Renown South Meadows Medical Center	11	443	1.429188	633	\$259,396.22	0.26%
100502481	Southern Hills Hospital	11	2,289	1.312448	3,004	\$1,231,005.11	1.22%
100501835	Spring Valley Medical Center	11	6,948	1.489795	10,351	\$4,241,722.32	4.19%
100527744	St Marys Regional Medical Center	11	3,590	1.436178	5,156	\$2,112,870.28	2.09%
001102873	St Rose Dominican Hospital - De Lima	11	1,739	1.370650	2,384	\$976,936.14	0.96%
100511423	St Rose Dominican Hospital - San Martin	11	1,866	1.203283	2,245	\$919,975.52	0.91%
001102300	St Rose Dominican Hospital - Siena	11	4,207	1.238074	5,209	\$2,134,589.08	2.11%
001102008	Summerlin Hospital Medical Center	11	8,760	1.225664	10,737	\$4,399,900.74	4.35%
001102878	Sunrise Hospital & Medical Center	11	29,421	1.403770	41,300	\$16,924,271.28	16.72%
001102877	University Medical Center of Southern Nevada	11	24,428	1.527415	37,312	\$15,290,034.13	15.10%
001102881	Valley Hospital Medical Center	11	20,795	1.335628	27,774	\$11,381,469.98	11.24%
Totals			176,238		247,064	\$101,244,023.15	100.00%

Notes:

- a) Days are based on Medicaid FFS Data
- b) Days Calendar Year 2017 Days
- c) Days Count by Date of Service (CRS Reports)
- d) Medicaid CMI Report produced by CHIA
- e) Admin Skilled claims are excluded from the Trauma Component

Bed Day Component \$101,244,023.15
Trauma Component \$3,131,258.00

Total IAF 2020 \$104,375,281.15

IAF to UMC: \$16,771,287.91

IAF to Public Hospitals: \$16,771,287.91

IAF to Private Hospitals: \$87,603,993.24

\$104,375,281.15