



New Hampshire State Senate **NEWS RELEASE**

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Media Contact:
Carole Alfano, 271-7585
carole.alfano@leg.state.nh.us

Sen. Odell offers revised funding formula for uncompensated care
New amendment seeks proportional share for hospitals regarding DSH payments

CONCORD – The Senate moved today to improve the way hospitals in New Hampshire are reimbursed for the uncompensated care they provide for individuals without health insurance.

Sen. Bob Odell, R-Lempster, will offer an amendment to HB 1361 when the Finance Committee meets on Thursday afternoon. Commenting on the urgent need to make changes, he said, "We are attempting to return to a previous formula that provides payments based on the proportion of uncompensated care provided by a hospital under the Disproportionate Share Hospital (DSH) program. This will be more equitable going forward."

The senator noted the difficult decisions Finance Committee members were forced to make in 2011 based on the \$800 million budget deficit they inherited. He acknowledged many hospitals experienced reductions following those budget shortfalls which reduced the state's ability to put more money towards the DSH program. Odell stressed the goal is to see the amount of state funding for DSH restored to prior levels in future budgets.

Sen. Odell's Amendment 1881s may be found at
<http://www.gencourt.state.nh.us/legislation/amendments/2012-1881S.html>

Background:

According to the U.S. Department of Health & Human Services:

Disproportionate Share Hospital (DSH) adjustment payments provide additional help to those hospitals that serve a significantly disproportionate number of low-income patients; eligible hospitals are referred to as DSH hospitals. States receive an annual DSH allotment to cover the costs of DSH hospitals that provide care to low-income patients that are not paid by other payers, such as Medicare, Medicaid, the Children's Health Insurance Program (CHIP) or other health insurance. This annual allotment is calculated by law and includes requirements to ensure that the DSH payments to individual DSH hospitals are not higher than these actual uncompensated costs.

For more information, visit: www.hhs.gov/recovery/cms/dsh.html

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