

STATEWIDE WAGE INDEX
Geographic Reclassification Request for Hospitals
Under the Medicare Inpatient Hospital Prospective Payment System

This package contains the joint application and instructions for completing the application that an appropriate statewide entity will need to apply for a statewide wage index for geographic reclassification in 2004 on behalf of all of the Medicare inpatient prospective payment system (IPPS) hospitals in the State. Completed applications are due to the Medicare Geographic Classification Review Board (Board) office no later than **5:00 p.m. EDT, September 1, 2004**. Reclassifications granted by the Board will be effective for all IPPS hospitals in the State, for the Wage Index only, for a 3-year period, FFYs 2006 through 2008 (October 1, 2005 through September 30, 2008).

Hospitals applying for reclassification should read the instructions carefully. The statewide entity submitting the application must complete this application and furnish all required supporting documentation. Failure to submit appropriate or complete information as explained in the instructions may result in a delayed review or dismissal by the Board.

A hospital may apply for reclassification individually and as a member of a group of hospitals or a Statewide Wage Index area.

To request an individual and/or group application, or to receive other information, hospitals should call (410) 786-1174. The individual and group applications and instructions will be available via the Internet at <http://cms.hhs.gov/providers/prrb/mgcinfo.asp>.

PLEASE NOTE: These instructions and corresponding application are being printed and distributed before the Final Hospital IPPS Rule is issued. The Final IPPS Rule should be published in the Federal Register on or about August 1, 2004. This application reflects the Proposed IPPS Rule found in the May 18, 2004 Federal Register (69 Fed. Reg. 28196). Applicants are encouraged to review the Final IPPS Rule for changes or clarifications prior to filing an application as the Board will base its decisions on the Final IPPS Rule. The Board will be unable to issue further instructions prior to the date by which hospitals must submit an application for geographic reclassification (September 1, 2004).

Enclosures: (1) General Instructions
(2) Instructions for Completing the Application
(3) Application

MEDICARE GEOGRAPHIC CLASSIFICATION REVIEW BOARD

2004 JOINT APPLICATION FOR HOSPITAL STATEWIDE WAGE INDEX GEOGRAPHIC RECLASSIFICATION EFFECTIVE FEDERAL FISCAL YEARS 2006 THROUGH 2008

GENERAL INSTRUCTIONS

GENERAL

Section 304 of Public Law 106-554, the Medicare, Medicaid, and SCHIP (State Children's Health Insurance Program) Benefits and Improvement and Protection Act of 2000, provides for a process under which an appropriate statewide entity can apply to have all of the geographic areas in the State treated as a single geographic area for purposes of computing and applying the area wage index for reclassifications. Federal regulations at 42 C.F.R. § 412.235 contain the criteria for hospitals in a State seeking a wage index redesignation.

In accordance with the statutory and regulatory provisions mentioned above, an appropriate statewide entity may file a joint statewide wage index application with the Board on behalf of all of the Medicare acute care, IPPS hospitals in a State. Every IPPS hospital in the State must be a member of the statewide wage index application. The statewide wage index reclassification granted by the Board would be for a period of 3-years, FFYs 2006 through FFY 2008 (October 1, 2005 through September 30, 2008). An approved application by the Board would mean that the data of all of the acute care, IPPS hospitals in the State would be used in computing and applying the wage index for that State.

The Board will rule on a statewide wage index application before it rules on either a group or individual application. If the Board reclassifies each acute care, IPPS hospital in the State as part of a statewide wage index application, it will dismiss any reclassification applications filed by those hospitals, either individually or as part of a group.

The Board ordinarily issues an on-the-record decision. However, the Board may hold an oral hearing on its own motion or if the applicant demonstrates to the Board's satisfaction that an oral hearing is necessary. The Board will issue all of its decisions no later than 180 days after the deadline for receipt of applications. The deadline for receipt of the applications is September 1, 2004.

THE APPLICATION

In accordance with the legislative mandate of section 304 of P.L. 106-554, the statewide wage index application is to be submitted by an appropriate statewide entity. The statewide entity submitting the application must use the statewide wage index application in this package. If the appropriate application is not used, or if all of the required information is not furnished, the Board may dismiss the request for statewide wage index reclassification. Submission of inappropriate documentation will also delay Board review.

The statewide wage index application consists of a few questions that must be completed and an affidavit that the appropriate official for each hospital must sign. The completed affidavits signify each hospital's official participation in the statewide wage index application. The Board may dismiss an application that fails to include a properly completed and signed affidavit for each hospital by the due date of the application, i.e., September 1, 2004. The statewide entity submitting the application must also submit several attachments, all of which are specified in the application.

FILING AN APPLICATION

A complete application package consists of an original and two legible unbound copies of the application and its attachments. The Board does not accept applications submitted through the facsimile process or by other electronic means, nor does it accept applications completed in pencil, i.e., applications must be typed or clearly printed in ink.

The Board must receive all application packages by **5:00 p.m. EDT, September 1, 2004**. The Board will dismiss a statewide wage index request for reclassification if it does not receive the completed application by this deadline. The Board may, for good cause and at the request of the statewide entity submitting the application, grant the statewide entity that has submitted an application by September 1 an extension beyond this date to complete the application.

The statewide entity must send an original and two copies of their completed application to the Board's mailing address:

**Medicare Geographic Classification Review Board
2520 Lord Baltimore Drive
Suite L
Baltimore, Maryland 21244-2670**

The statewide entity may want to send the application by a delivery method that guarantees a signed receipt, indicating delivery and date of delivery of their packages to the Board. The same address for the Board is applicable for both U.S. mail and courier service. Applications submitted to the Centers for Medicare and Medicaid Services (CMS) or any other address may be delayed and not received timely by the Board.

The group must simultaneously send a copy of their completed application to:

Centers for Medicare and Medicaid Services
Center for Medicare Management
Hospital & Ambulatory Policy Group
Division of Acute Care
7500 Security Boulevard
Mail Stop C4-07-07
Baltimore, Maryland 21244-1850
Re: MGCRB Application

The CMS Hospital & Ambulatory Policy Group address is also applicable for both U.S. mail and courier service. Again, applications submitted to CMS may be delayed and not received timely by the Board.

WITHDRAWALS AND TERMINATIONS

Federal regulations at 42 C.F.R. § 412.235 indicate that there must be unanimous support for the termination or withdrawal of a statewide wage index among the IPPS hospitals in the State. Further, it requires a signed affidavit by all of the Medicare acute care, IPPS hospitals in the State in order to demonstrate unanimous agreement for withdrawal or termination.

A statewide wage index entity may withdraw the statewide wage index application it submitted on behalf of the Medicare IPPS hospitals in the State before the Board issues a decision. After a decision granting reclassification, the statewide entity may withdraw a reclassification up to 45 days from the date of CMS's annual notice of proposed rulemaking for hospital inpatient prospective payment under Medicare. CMS publishes the notice in early spring and it specifies the final date by which the Board must receive a withdrawal request.

The Statewide entity may also terminate a statewide wage index reclassification in the second and/or third year(s) of the 3-year wage index reclassification. Similar to a withdrawal, the statewide entity's request to terminate the second and/or third year(s) of an approved 3-year wage index reclassification must be received by the MGCRB within 45 days of the publication of the annual notice of proposed rulemaking concerning changes to the inpatient hospital PPS and proposed payment rates for the fiscal year for which the termination is to apply.

All withdrawal and termination requests by the statewide entity must be in writing and, as stated above, include a signed affidavit by each Medicare acute care, IPPS hospital in the State. All requests must be directed to the Board at the address given in the preceding section. The statewide entity should also send a copy of the request to the CMS Hospital & Ambulatory Policy Group at the address listed above.

NOTE: Federal regulations at 42 C.F.R. § 412.235(c)(2) indicate that the procedures and timeframes specified in 42 C.F.R. § 412.273 apply to withdrawals of applications for redesignation to a statewide wage index and terminations of approved statewide wage index reclassifications. Applicants are encouraged to review 42 C.F.R. § 412.273 of the federal regulations.

PLEASE READ THESE INSTRUCTIONS
BEFORE COMPLETING THE APPLICATION

MEDICARE GEOGRAPHIC CLASSIFICATION REVIEW BOARD

**2004 JOINT APPLICATION FOR HOSPITAL STATEWIDE
WAGE INDEX GEOGRAPHIC RECLASSIFICATION
EFFECTIVE FEDERAL FISCAL YEARS 2006 THROUGH 2008**

**INSTRUCTIONS FOR COMPLETING
THE APPLICATION**

The joint hospital statewide wage index application consists of a few questions that the statewide entity submitting the application must answer. The application also lists several required attachments and the letter designations for these attachments. The statewide entity must complete the application by typing or printing its responses in ink.

The statewide entity must send the completed application, including all supporting documentation, so that the Board receives the package by **5:00 p.m. EDT, September 1, 2004**. If the group fails to comply with this deadline, the Board will dismiss its reclassification request. The Board does not accept applications submitted through the facsimile process or by other electronic means.

It is imperative that the statewide applicant read these instructions before filling in the application.

APPLICATION INSTRUCTIONS

1. Self-explanatory. All Medicare acute care, IPPS hospitals in the State must be members of the statewide wage index application.
2. The statewide entity submitting the application must show the mailing address the Board should use for all correspondence. It should also show the person (and telephone number) the Board should contact if it has questions about the application.
3. As **Attachment A** of the application, the statewide entity should provide a printed or typed list of the names of all acute care, IPPS hospitals in the State, their addresses, and provider numbers (Columns A, B, and C of Attachment A) that will be operational as of the deadline for submitting an application in 2004 (September 1, 2004). In addition, the statewide entity should also indicate whether any hospital listed in the statewide wage index application is filing a separate application with the Board for FFY 2006 either individually or through a group application (Column D).

All of the hospitals listed in Attachment A must be a part of the statewide wage index application. The statewide entity must follow the format provided in the application in completing Attachment A.

In addition, as **Attachment B** of the application, the applicant should provide a current letter from the appropriate CMS Regional Office which lists the Medicare licensed acute care, IPPS hospitals in the State which will be in operation as of the due date for submitting applications to the Board in 2004 (September 1, 2004).

4. A fully completed and notarized affidavit is required from each hospital in the Statewide group. (See Attachment A.) The original affidavit from each hospital in the Statewide group must be included at **Attachment C**.

AFFIDAVIT

The affidavit must be signed by an officer of the hospital, e.g., the Administrator, vice president for finance, etc. or by a corporate officer of the hospital's parent corporation. The official signing the affidavit must have the authority to sign the application for geographic reclassification on behalf of the hospital. The affidavit of each hospital must be fully completed, notarized, signed and submitted as part of a timely filed application. The Board may dismiss the statewide application if the officer's signature for each hospital in the State is not on the affidavit of a timely submitted application.