PRA Disclosure Statement

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Overview

States are required to demonstrate, and Centers for Medicare and Medicaid Services (CMS) has accepted a reasonal Payment Limit (UPL) based on a comparison of Medicaid (MCD) payments to equivalent Medicare (MCR) payment, Medicare principles, or customary/prevailing charges. CMS has developed guidance documents to help states meet requirements that can be downloaded from:

http://www.medicaid.gov/medicaid-chip-program-information/by-topics/financing-and-reimbursement/accountab

CMS is also introducing templates specific to each service and demonstration type, which have been developed to a requirements and increase comparability across states. This workbook contains templates for the Institutions for M demonstrations.

For each facility, please complete the attached IMD template.

States may apply different UPL formulas for state government owned or operated facilities, non-state government of facilities and private facilities; however, the formula should be consistently applied to each provider within the cate facility should only be included in one type of UPL demonstration. In filling out these templates, data for each indivincluded on a separate row. Additionally, any supplemental payments made by the state should be reported separately from regular Medicaid payments. There may be instances where a variable is no calculation. Please leave these variables blank.

Information Requested:

CMS requests the following information for each IMD:

- **Demonstration Information** asks for basic information such as the state, demonstration rate year, service type (IN type (cost, charges, payment)
- **Provider Identification** asks for provider identification numbers and names for each facility included, and the own (private, non-state government owned, state-government owned)
- Customary or Prevailing Charge Data asks for base year data relevant to the calculation of the UPL
- Medicaid Payment and Utilization Data for Base Period asks for Medicaid utilization data used to calculate the UI payment data that is used to determine whether or not the state has made payments in excess of the UPL
- Medicaid Payments Inflated to Demonstration Year asks for inflationary or volume adjustment data that are made changes in the Medicaid program that have occurred between the base and current rate year periods
- UPL Calculation & Inflation to Demonstration Year instructs the state to calculate the UPL and asks for inflationar appropriately trend UPL data from the base to the current rate year
- Adjustments to UPL asks for other adjustments to the UPL that are not included in the UPL calculation
- Calculation of UPL Gap instructs the state to calculate the UPL gap for each facility by subtracting (adjusted/inflate from the calculated UPL

<u>Payment and Cost Data:</u> Enter to the nearest dollar (i.e. \$1,234,567.89 should be entered as \$1,234,568) <u>Proportion and Percentage Data:</u> Enter with no more than four decimal places (i.e., 0.12345 should be entered as 0.12345 should be 0.12345 s

Detailed descriptions for each variable are provided in the next sheet labeled "Data Dictionary." A hypothetical IN entered for each template to provide guidance regarding the data requested for each column.

Table 1. CMS UPL Institutions for Mental Diseases Template Data Dictionary

Variable numbering scheme is used for internal identification of each variable and is not meant to be presented in numerical order

Variable Number 100 101 102	Variable Format 2-character text 4-digit number 3-character text	Short Description State State Demonstration Rate Year Service Type	Long Description 2-character state ID (e.g., Maryland = MD) State demonstration rate year (e.g., 2014) Service type: IMD = Institutions for Mental Diseases	Variable Status 0: Variables Included in IMD Template 0: Variables Included in IMD Template 0: Variables Included in IMD Template
104	Text	Demonstration Type (Charge, Cost, Payment)	Demonstration type (Charge = Charge-based, Cost = Cost-based, Payment = Payment-based)	0: Variables Included in IMD Template
105 112 107 108 109	Unspecified 6-digit number Unspecified Text 10-11 digit number	Other State Provider ID Number MCR Certification Number (MCR ID) State-specific Provider ID (MCD ID) Provider Name National Provider ID (NPI)	State provider ID number that is not a MCD ID number (if applicable) MCR ID Number MCD ID number Provider name National Provider Identification Number	O: Variables Included in IMD Template
110	Text	Ownership Category Type (Private, NSGO, SGO)	Ownership category type (private= private; NSGO= non-state government owned; SGO= state government owned)	0: Variables Included in IMD Template
200.1 200.2	Date [DD/MM/YYYY] Date [DD/MM/YYYY]	Begin Date for Charge, Cost or Payment Data Ending Date for Charge, Cost or Payment Data	Begin date of charge, cost or payment data provided that is used to calculate the UPL End date of charge, cost or payment data provided that is used to calculate the UPL	Variables Included in IMD Template Variables Included in IMD Template
223	\$ Amount	Per Diem Charge, Cost or Payment	Per diem charge, cost or payment used to calculate the UPL from the period specified in Variables 200 and 201	0: Variables Included in IMD Template
212.3	\$ Amount	Adjustments to Per Diem Charge, Cost or Payment	Adjustment to per diem charge, cost or payment	0: Variables Included in IMD Template
215	\$ Amount	Adjusted Per Diem Charge, Cost or Payment	Calculated as Per Diem Charge, Cost or Payment (Variable 211) + Adjustments to MCR Per Diem Charges (Variable 212.3)	0: Variables Included in IMD Template
300.1	Date [DD/MM/YYYY]	Time Period of MCD Days - Begin Date	Beginning date of base year MCD days (note: should match charge or cost data period)	0: Variables Included in IMD Template
300.2	Date [DD/MM/YYYY]	Time Period of MCD Days - End Date	End date of base year MCD days (note: should match charge or cost data period)	0: Variables Included in IMD Template
310	Number	MCD Days	MCD days from time period specified in Variables 300.1 and 300.2, used in calculating the UPL for the base period	0: Variables Included in IMD Template
311.1	Date [DD/MM/YYYY]	Time Period of MCD Rates - Begin Date	Beginning date of MCD rates used to determine total MCD payments for purposes of comparing to the UPL $$	0: Variables Included in IMD Template
311.2	Date [DD/MM/YYYY]	Time Period of MCD Rates - End Date	End date of MCD rates used to determine total MCD payments for purposes of comparing to the UPL $$	0: Variables Included in IMD Template
312	\$ Amount	MCD Regular Payment Per Diem	MCD regular payments per diem applicable to the time period specified in Variables 311.1 and 311.2	2 0: Variables Included in IMD Template
313.1	\$ Amount	MCD Supplemental Payment Per Diem	MCD supplemental payments per diem applicable to the time period specified in Variables 311.1 and 311.2 $$	0: Variables Included in IMD Template
313.2	\$ Amount	MCD Supplemental Payment Per Diem - GME/Training	MCD supplemental payments per diem applicable to the time period specified in Variables 311.1 and 311.2 (GME=Graduate Medical Education/Training)	0: Variables Included in IMD Template
313.3	\$ Amount	MCD Supplemental Payment Per Diem - Other	MCD supplemental payments per diem applicable to the time period specified in Variables 311.1 and 311.2 (Other) $$	0: Variables Included in IMD Template
314.1	\$ Amount	Adjustment to MCD Per Diem #1	Adjustment to MCD payments per diem (e.g., drugs, therapy, lab, radiology)	0: Variables Included in IMD Template
314.2	\$ Amount	Adjustment to MCD Per Diem #2	Adjustment to MCD payments per diem (e.g., drugs, therapy, lab, radiology)	0: Variables Included in IMD Template
317	\$ Amount	Total MCD Regular and Supplemental Per Diem with Adjustments	Calculated as MCD Regular Payment Per Diem (Variable 312) + MCD Supplemental Payment Per Diem (Variable 313.1) + MCD Supplemental Payment GME/Training Per Diem (Variable 313.2) + MCD Supplemental Payment Other Per Diem (Variable 313.3) + Adjustment to MCD Per Diem #1 (Variable 314.1) + Adjustment to MCD Per Diem #2 (Variable 314.2)	0: Variables Included in IMD Template
307	Text	MCD Inflation Factor Type	Description of MCD payment trend factor used to reflect changes in the MCD program between the base and current rate year periods (e.g., Market Basket)	0: Variables Included in IMD Template
308	Proportion	MCD Inflation Factor	Cumulative MCD payment trend factor used to reflect changes in the MCD program between the base and current rate year periods (note: 1.00= no change) (use "mid-point to mid-point approach")	0: Variables Included in IMD Template
309	Proportion	Other Adjustment to MCD Payments	Cumulative other adjustment (e.g., volume adjustment) factor used to reflect changes in the MCD program between the base and current rate year periods (note: 1.00= no change) (use "mid-point to mid-point approach")	0: Variables Included in IMD Template
315	\$ Amount	Inflated / Adjusted MCD Payment Per Diem	Calculated as Total MCD Regular and Supplemental Per Diem with Adjustments (Variable 317) x MCD Inflation Factor (Variable 308) x Other Adjustment to MCD Payments (Variable 309)	0: Variables Included in IMD Template
316	\$ Amount	Total MCD Payments (Per Diem * Days)	Calculated as Inflated / Adjusted MCD Payment Per Diem (Variable 315) x MCD Days (Variable 310)	0: Variables Included in IMD Template
404	Text	UPL Inflation Factor Type	Description of trend factor used to inflate the UPL Per Diem Amount from the base year to the rate year (e.g., Market Basket)	0: Variables Included in IMD Template
405	Proportion	UPL Inflation Factor	Cumulative trend factor used to inflate the Calculated MCD UPL Per Diem from the base year to the rate year (note: 1.00= no change) (use "mid-point to mid-point approach")	0: Variables Included in IMD Template

Data Dictionary 3

Variable Number	Variable Format	Short Description	Long Description	Variable Status
400	\$ Amount	Inflated / Adjusted UPL Per Diem	Calculated as Adjusted Per Diem Charge (Variable 215) x UPL Inflation Factor (Variable 405)	0: Variables Included in IMD Template
406	\$ Amount	Inflated UPL Amount	Total UPL amount calculated as Inflated / Adjusted UPL Per Diem (Variable 400) x MCD Days (Variable 310)	0: Variables Included in IMD Template
401	\$ Amount	MCD Provider Tax Cost	For cost-based demonstrations, MCD provider tax costs can be added to the UPL separately	0: Variables Included in IMD Template
402	\$ Amount	Other Adjustments to the UPL Amount	Adjustments made to the UPL that are not otherwise accounted for in the UPL calculation (e.g., adjustments for managed care transition)	0: Variables Included in IMD Template
403	\$ Amount	Adjusted MCD UPL Amount	Calculated as Inflated UPL Amount (Variable 406) + Other Adjustments to the UPL Amount (Variable 402) [+ MCD Provider Tax Cost (Variable 401) for cost-based demonstrations]	0: Variables Included in IMD Template
407	\$ Amount	UPL Gap Amount	Calculated as Adjusted MCD UPL Amount (Variable 403) - Inflated MCD Payments to Demonstration Year (Variable 316)	0: Variables Included in IMD Template
408	\$ Amount	Adjustment to the UPL Gap	Adjustments made to the UPL gap that are not otherwise accounted for in MCD payments or the UPL calculation	0: Variables Included in IMD Template
409	\$ Amount	Adjusted UPL Gap	Calculated as UPL Gap Amount (Variable 407) + Adjustment to the UPL Gap (Variable 408)	0: Variables Included in IMD Template

Data Dictionary 4

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		Demo Info:	Demo Info:	Demo Info:	Demo Info:	Provider Info:		Provider Info:	Provider Info:	Provider Info:	Provider Info:	Customary or Prevailing Charge info:	Customary or Prevailing Charge info:
2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Begin Date for Charge, Cost or Payment Data	Ending Date for Charge, Cost or Payment Data
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[200.1]	[200.2]
3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Begin Date for Charge, Cost or Payment Data	Ending Date for Charge, Cost or Payment Data
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[200.1]	[200.2]
3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Begin Date for Charge, Cost or Payment Data	Ending Date for Charge, Cost or Payment Data
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[200.1]	[200.2]
3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Begin Date for Charge, Cost or Payment Data	Ending Date for Charge, Cost or Payment Data
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[200.1]	[200.2]
3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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2	Database Description &	State	State Demonstration Rate Year	Service Type	Demonstration Type	Other State Provider ID Number	National Provider ID (NPI)	Medicare Certification Number (Medicare ID)	State-specific Provider ID (Medicaid ID)	Provider Name	Ownership Category Type	Begin Date for Charge, Cost or Payment Data	Ending Date for Charge, Cost or Payment Data
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[200.1]	[200.2]
3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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2	Database Description &	Demo Info: State	Demo Info: State Demonstration Rate Year	Demo Info: Service Type		Provider Info: Other State Provider ID Number	Provider Info: National Provider ID (NPI)	Provider Info: Medicare Certification Number (Medicare ID)	Provider Info: State-specific Provider ID (Medicaid ID)	Provider Info: Provider Name	Provider Info: Ownership Category Type	Charge info:	Customary or Prevailing Charge info: Ending Date for Charge, Cost or Payment Data
	Variable Number	[100]	[101]	[102]	[104]	[105]	[109]	[112]	[107]	[108]	[110]	[200.1]	[200.2]
3	EXAMPLE	MD	2015	IMD	Charge	RA53433	1234567890	210000	65745234	EXAMPLE IMD	Private	7/1/2012	6/30/2013
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2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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	Customary or Prevailing Charge info:	Customary or Prevailing Charge info:	Customary or Prevailing Charge info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:
2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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		Customary or Prevailing Charge info:			MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:	MCD Payment and Utilization Info:
2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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2	Per Diem Charge, Cost or Payment	Adjustments to Per Diem Cost or Charge	Adjusted Per Diem Charge, Cost or Payment	Time Period of Medicaid Days - Begin Date	Time Period of Medicaid Days - End Date	Medicaid Days	Time Period of Medicaid Rates - Begin Date	Time Period of Medicaid Rates - End Date	Medicaid Regular Payment Per Diem	Medicaid Supplemental Payment Per Diem
	[223]	[212.3]	[215]	[300.1]	[300.2]	[310]	[311.1]	[311.2]	[312]	[313.1]
3	\$210.11	\$0.00	\$210.11	7/1/2012	6/30/2013	3,124	7/1/2014	6/30/2015	\$185.00	\$4.80
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2	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor
	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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2	Medicaid Supplemental Payment Per Diem (GME/Training)	Medicaid Supplemental Payment Per Diem (Other)	Adjustment to Medicaid Per Diem #1	Adjustment to Medicaid Per Diem #2	Total Medicaid Regular and Supplemental Per Diem with Adjustments	MCD Inflation Factor Type	MCD Inflation Factor	Other Adjustment to Medicaid Payments	Inflated / Adjusted Medicaid Payment Per Diem	Total Medicaid Payments	UPL Inflation Factor Type	UPL Inflation Factor
	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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	[313.2]	[313.3]	[314.1]	[314.2]	[317]	[307]	[308]	[309]	[315]	[316]	[404]	[405]
3	\$4.80	\$4.80	\$1.20	\$0.00	\$200.60	None	1.000	1.000	\$200.60	\$626,674	Market Basket	1.055
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2	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap										
	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]										
3	\$221.67	\$692,485	\$130,000	\$0	\$822,485	\$195,810	\$ 0	\$195,810										
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2	Adjusted UPL	Amount - UPL Per	Medicaid	Adjustments to	Adjusted Medicaid UPL	Amount	Adjustment to the UPL Gap	Gap										
-	Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid	Provider Tax Cost	the UPL Amount	Amount		•	·										
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	[400]	[404]	[401]	[402]	[400]	[407]	[400]	[400]										
	[400]	[406]		[402]	[403]	[407]	[408]	[409]										
3	\$221.67	\$692,485	\$130,000	\$0	\$822,485	\$195,810	\$0	\$195,810										
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2	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap										
	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]										
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2	Inflated / Adjusted UPL Per Diem	Inflated UPL Amount - UPL Per Diem * Medicaid Days	Medicaid Provider Tax Cost	Other Adjustments to the UPL Amount	Adjusted Medicaid UPL Amount	UPL Gap Amount	Adjustment to the UPL Gap	Adjusted UPL Gap										
	[400]	[406]	[401]	[402]	[403]	[407]	[408]	[409]										
3	\$221.67	\$692,485	\$130,000	\$0	\$822,485	\$195,810	\$0	\$195,810										
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