SUPPLEMENTAL TO FORM CMS-2552-10

PAYMENT ADJUSTMENT FOR ESTABLISHING AND MAINTAINING ACCESS TO A BUFFER STOCK OF ESSENTIAL MEDICINES

This supplemental form calculates the inpatient payment adjustment for the additional resource costs of establishing and maintaining access to no less than a 6-month buffer stock of one or more essential medicines for cost reporting periods beginning on or after October 1, 2024. The payment adjustment is limited to 1886(d) hospitals that have 100 or fewer beds, as defined in 42 CFR 412.105(b), and are not part of a chain organization (independent). The qualifying hospital must complete and submit this supplemental form with its Medicare Hospital and Hospital Health Care Complex Cost Report, Form CMS-2552-10, to receive the essential medicines payment adjustment.

Definitions.--

Essential medicines--As defined in proposed 42 CFR 412.113(g).

<u>Independent hospital</u>--A hospital that is not part of a chain organization, defined as a group of two or more health care facilities that are owned, leased, or through any other device, controlled by one organization.

<u>Part I - Essential Medicines Payment Adjustment Eligibility.</u>--This part determines the hospital's eligibility to receive a payment adjustment for additional resource costs of establishing and maintaining access to no less than a 6-month buffer stock of one or more essential medicines.

<u>Line 1</u>--Transfer the number of beds, as defined in 42 CFR 412.105(b), from the Medicare Hospital and Hospital Healthcare Complex Cost Report, Form CMS 2552-10, Worksheet E, Part A, line 4.

Line 2--Is this hospital defined as an independent hospital according to proposed 42 CFR 412.113(g)(3)? If this hospital answered "Y" for "yes" on the Medicare Hospital and Hospital Health Care Complex Cost Report, Form CMS 2552-10, Worksheet S-2, Part I, line 140, column 1, or completes any part of the Medicare Hospital and Hospital Health Care Complex Cost Report, Form CMS 2552-10, Worksheet S-2, Part I, lines 141 through 143, then the response to this line will default to an "N" for "no", as this hospital is considered to be part of a chain organization and not independent according to 42 CFR 412.113(g)(3). If this hospital answered "N" for "no" on the Medicare Hospital and Hospital Health Care Complex Cost Report, Form CMS 2552-10, Worksheet S-2, Part I, line 140, column 1, then the response to this line will default to a "Y" for "yes".

<u>Line 3--Did</u> the hospital incur cost, either directly or through a contract with an outside supplier to establish and maintain access to no less than a 6-month buffer stock of one or more essential medicines according to 42 CFR 412.113(g)? Enter "Y" for yes or "N" for no.

<u>Part II - Additional Resource Cost of Essential Medicines.</u>--This part identifies the additional resource cost of establishing and maintaining access to no less than a 6-month buffer stock of one or more essential medicines. Do not include the cost of the medication. Do not include cost to establish and maintain a buffer stock for nonreimbursable cost centers.

<u>Line 1</u>--Enter the additional resource cost directly incurred by the hospital to establish and maintain no less than a 6-month buffer stock of one or more essential medicines according to 42 CFR 412.113(g).

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<u>Line 2</u>--Enter the contractual amount paid to outside suppliers to establish and maintain no less than a 6-month buffer stock of one or more essential medicines according to 42 CFR 412.113(g).

<u>Line 3</u>--Sum lines 1 and 2.

Part III - Calculation of Medicare Payment Adjustment for Essential Medicines.--This part calculates the Medicare portion of the additional resource cost incurred by the hospital for establishing and maintaining access to no less than a 6-month buffer stock of one or more essential medicines. Enter the data below from the Medicare Hospital and Hospital Health Care Complex Cost Report, Form CMS-2552-10.

<u>Line 1</u>--Enter the Medicare routine and ancillary cost reported from the IPPS hospital Worksheet D-1, Part II, line 49.

<u>Line 2</u>--Enter the sum of Medicare acquisition cost reported from Worksheet E, Part A, line 55, and Worksheet E, Part A, line 55.01.

<u>Line 3</u>--Enter the cost of physicians' services in a teaching hospital reported from Worksheet E, Part A, line 56.

<u>Line 4</u>--Sum lines 1 through 3.

Line 5--Enter the total facility cost reported from Worksheet C, Part I, line 202, column 5.

<u>Line 6</u>--Calculate the Medicare percentage by dividing line 4 by line 5, rounding the result to two decimal places.

<u>Line 7</u>--Calculate the Medicare payment adjustment for essential medicines by multiplying line 6 by Part II, line 3. Transfer the payment adjustment to the Medicare Hospital and Hospital Health Care Complex Cost Report, Form CMS-2552-10, Worksheet E, Part A, subscripted line 70.76, labeled Essential Medicines Payment Adjustment.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-XXXX. The time required to complete this information collection is estimated to be 1.00 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s), or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Report Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. Please do not send applications, claims, payments, medical records, or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact 1-800-MEDICARE.