



**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

**November 15, 2016**

Dear Administrator:

RE: ACT 540 UCC Survey

This letter is to clarify the documentation required from all state-owned hospitals and non-state owned hospitals, excluding rural hospitals, as a condition of payment of uncompensated care costs for the disproportionate share payments pursuant to Act No. 540 of the 2008 Regular Session.

Per Act 540, failure to provide the required patient specific data will result in withholding an amount equal to 5% of Medicaid payments. Such withholding shall increase by 5% for each successive month that the required data is not received, but the total amount withheld shall not exceed 25% of the total monthly amount due to the facility. Upon receipt of the required data, the department shall pay the facility all amounts previously withheld as a result of the failure to submit the required data.

Instructions for submission of the uninsured patient data and the forms needed to comply with the Act No. 540 requirements will be available on the Louisiana Medicaid website (<http://www.lamedicaid.com>).

Hospitals must submit documentation by **December 19, 2016**.

All forms (survey form, Exhibit A- Summary of Patient Information for uninsured charges and payments, Exhibit B-Summary of Uninsured Cash Collections (in excel format), the latest filed cost report's ECR file, and consolidated financial statements for the latest fiscal year) should be uploaded to the Myers and Stauffer Web Portal:

<https://dsh.mslc.com>

Sincerely,

A handwritten signature in blue ink that reads "Erin Lee".

Erin Lee  
Program Manager