

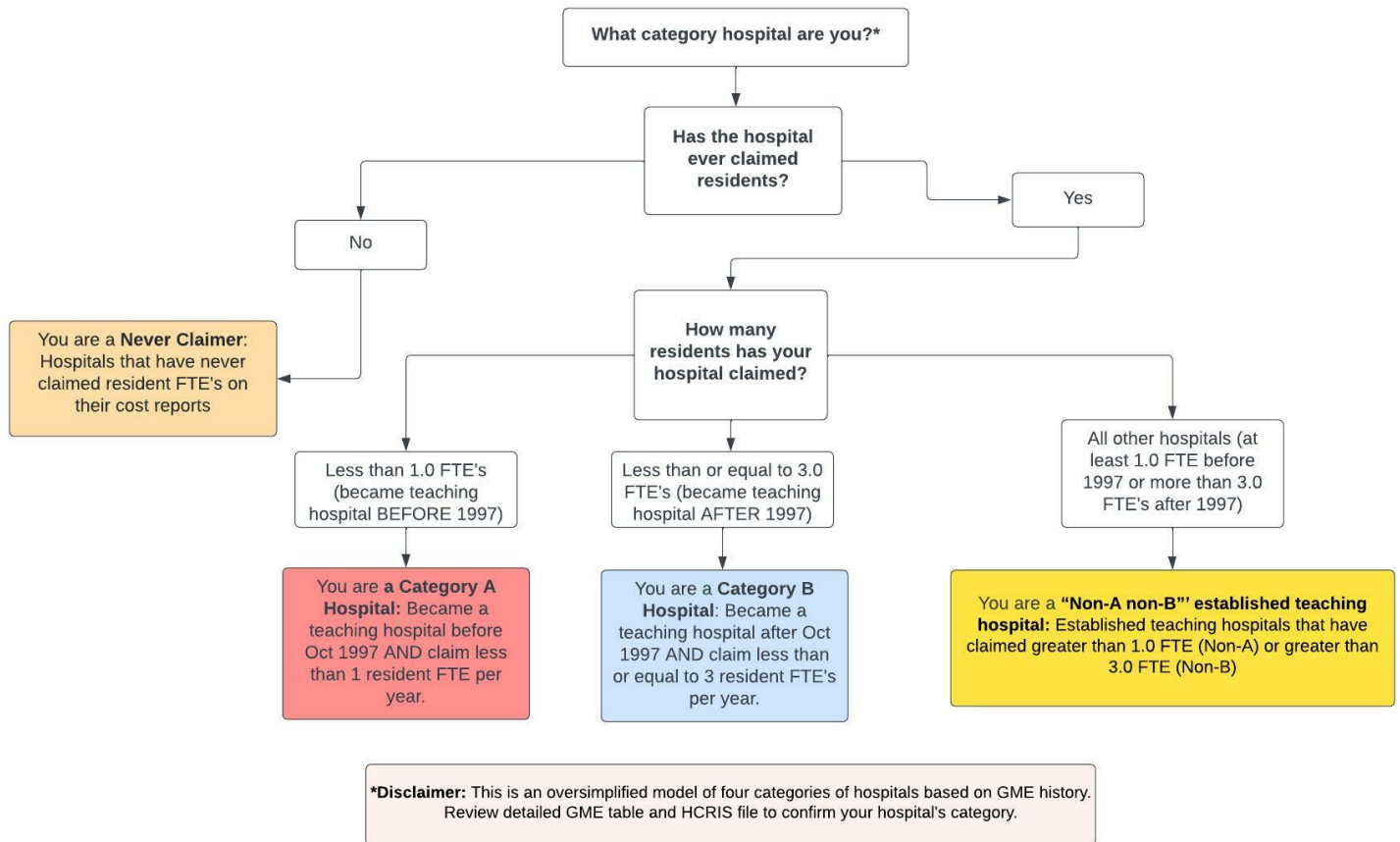
Section 131 GME Tables for Kentucky

This report classifies each hospital in the state into four groups based on data provided by the Centers for Medicare & Medicaid Services to aid in determining a hospital's eligibility to revise certain GME parameters under Section 131 of the CAA. For more details, visit the CMS website here. Classifications were prepared by staff of the Rural Residency Planning and Development (RRPD) and Teaching Health Center Planning and Development (THCPD) Technical Assistance Centers using data provided by CMS; hospitals are encouraged to confirm all data presented. The tables below are presented as a screening, are not definitive, and may differ from the classifications determined by CMS, the MAC, or other regulatory bodies. Further information, including data, presentations, and tools are available at RuralGME.org

Overview

Hospitals — **with the exception of Critical Access Hospitals** – are classified into four categories based on their historical GME funding and expense. **Category A** and **Category B** Hospitals first claimed a few residents. Generally speaking, a Category A hospital first claimed fewer than 1.0 residents prior to October 1, 1997; a Category B hospital first claimed no more than 3.0 residents on or after October 1, 1997. **Never Claimer** hospitals have not claimed GME on a cost report since 1996. **All other hospitals** meet none of the three categories – we call these “Non-A Non-B Hospitals.” Note that **Critical Access Hospitals** are paid for GME by an entirely different mechanism and are omitted from all lists below; information about this is available at RuralGME.org. The following figure presents an oversimplified, high-level overview.

Overview of Categorization Process



We recommend State Offices of Rural Health encourage **Category A and Category B** hospitals to carefully review their categorization using the Rural GME HCRIS Data Tool, **Never Claimers** to verify that they indeed have not claimed GME, and **Non-A and Non-B Hospitals** to confirm that they do not meet the qualifications for Category A or Category B.

Further details for each category are provided below. Note that hospital names are truncated to 40 characters. An asterisk in the “PRA?” column denotes that the maximum PRA paid by the hospital is less than benchmark PRA for the region. Each table is sorted by the county of the hospital; for hospitals that could not be assigned to a county, the city of the mailing address is provided.

For All Hospital Types: If you check the HCRIS data and believe it is inaccurate then you must electronically submit complete and unambiguous documentation to your MAC **no later than July 1, 2022** contesting the HCRIS data.

1 Category A Hospitals

Category A: Hospitals that became teaching hospitals (set PRA and cap) before October 1997 where that PRA and cap (either or both of DGME and IME) were set based on an FTE of less than 1.0.

- Category A hospitals may be eligible to *reset their PRA* when they train 1.0 or more FTEs from either existing or new programs in the earliest cost reporting period beginning on or after December 27, 2020 and before December 27, 2025.
- Category A Hospitals may be eligible to *reset their resident cap* if they start a new residency program training at least 1.0 FTEs between December 27, 2020 and before December 27, 2025.

Next Step: Category A Hospitals should confirm the accuracy of their PRA/CAP and then may contact their MAC to request a PRA reset and/or resident cap reset before December 27, 2025.

Table 1: Category A

CCN	Name	County	PRA?	Max PRA
180133	NORTON SOUTHWEST HOSPITAL	City: LOUISVILLE	*	24820
180045	ST ELIZABETH FLORENCE	BOONE	*	94979
180048	EPHRAIM MCDOWELL REGIONAL MEDICAL CENTER	BOYLE		754465

An asterisk in the PRA? column denotes that the maximum PRA paid by the hospital is less than benchmark PRA for the region.

2 Category B Hospitals

Category B: Hospitals that became teaching hospitals (set PRA and cap) after October 1997 through January 2021 where that PRA and cap (either or both of DGME and IME) were set based on an FTE of less than 3.0.

- Category B hospitals may be eligible to *reset their PRA* when they train 3.0 or more FTEs from either existing or new programs in the earliest cost reporting period beginning on or after December 27, 2020 and before December 27, 2025.
- Category B Hospitals may be eligible to *reset their resident cap* if they start a new residency program training at least 3.0 FTEs between December 27, 2020 and before December 27, 2025.

Next Step: Category B Hospitals should confirm the accuracy of their PRA/CAP and then may contact their MAC to request a PRA reset and/or resident cap reset before December 27, 2025.

Table 2: Category B

CCN	Name	County	PRA?	Max PRA
180037	STS MARY & ELIZABETH MEDICAL CENTER	City: LOUISVILLE	*	67667
180002	WHITESBURG ARH HOSPITAL	City: WHITESBURG	*	87448
180017	T J SAMSON COMMUNITY HOSPITAL	BARREN	*	87033
184004	EASTERN STATE HOSPITAL	FAYETTE	*	86105
180103	BAPTIST HEALTH LEXINGTON	FAYETTE	*	91038
180005	HIGHLANDS ARH REGIONAL MEDICAL CENTER	FLOYD	*	74072
180036	OUR LADY OF BELLEFONTE HOSPITAL	GREENUP	*	94592
180050	HARLAN ARH HOSPITAL	HARLAN	*	87488
180056	METHODIST HOSPITAL	HENDERSON		106174
182001	KINDRED HOSPITAL LOUISVILLE	JEFFERSON	*	63825
180044	PIKEVILLE MEDICAL CENTER	PIKE	*	93104
180132	LAKE CUMBERLAND REGIONAL HOSPITAL	PULASKI	*	87872
180013	THE MEDICAL CENTER (BOWLING GREEN)	WARREN	*	90611
180080	BAPTIST HEALTH CORBIN	WHITLEY	*	63825

An asterisk in the PRA? column denotes that the maximum PRA paid by the hospital is less than benchmark PRA for the region.

3 Never Claimer Hospitals

Never Claimers: Hospitals that have never claimed residents for GME payment on any cost report. This includes hospitals that have had documented resident rotators in the past that were not claimed to establish a Per Resident Amount (PRA), and also hospitals that have never trained residents. For those hospitals that *have* trained residents in the past and never reported them, there is a risk of inadvertently setting a new PRA of zero and of establishing a cap in the future if 1.0 or more FTE of residents are being trained in a fiscal cost report year after 12/27/2020. In some circumstances the data may be incorrect and should be contested by contacting the MAC.

- Check to confirm that you do not have a claimed PRA/cap for all years.
- If you are not training greater than 1.0 FTEs right now, you do not need to contact your MAC until you begin training 1.0 or more FTEs.

Next Step: Any hospital that is in this category of “Never Claimer” that has trained 1.0 or more FTE in any fiscal cost report year following 12/27/20 MUST begin claiming those resident FTE as of that cost report year. The documentation maintained by the hospital regarding the costs it incurred in training those FTE will establish the PRA for that hospital, and may or may not start the cap-setting period. Note that such a hospital that reports no costs is at high risk of establishing a PRA of ZERO, that will remain established into the future.

Table 3: Never Claimers

CCN	Name	County
184006	SUN BEHAVIORAL HEALTH	City: ERLANGER
183300	SHRINERS HOSPITAL FOR CHILDREN	City: LEXINGTON
184013	RIVERVALLEY BEHAVIORAL HEALTH HOSPITAL	City: OWENSBORO
180104	BAPTIST HEALTH PADUCAH	City: PADUCAH
180154	PINEVILLE COMMUNITY HEALTH CENTER, INC	City: PINEVILLE
180016	JEWISH HOSPITAL - SHELBYVILLE	City: SHELBYVILLE
180149	TJ HEALTH COLUMBIA	ADAIR
180021	PINEVILLE COMMUNITY HEALTH CENTER, INC	BELL

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Table 3 – Continued from previous page

CCN	Name	County
180020	MIDDLESBORO ARH HOSPITAL	BELL
183030	GATEWAY REHABILITATION HOSPITAL	BOONE
180046	BOURBON COMMUNITY HOSPITAL	BOURBON
180009	KING’S DAUGHTERS’ MEDICAL CENTER	BOYD
182003	SELECT SPECIALTY HOSPITAL - CENTRAL KENT	BOYLE
180139	KENTUCKY RIVER MEDICAL CENTER	BREATHITT
180027	MURRAY-CALLOWAY COUNTY HOSPITAL	CALLOWAY
182004	SELECT SPECIALTY HOSPITAL-NORTHERN KENTU	CAMPBELL
180001	ST ELIZABETH FT THOMAS	CAMPBELL
180051	JENNIE STUART MEDICAL CENTER	CHRISTIAN
184002	WESTERN STATE HOSPITAL	CHRISTIAN
184014	CUMBERLAND HALL	CHRISTIAN
180092	CLARK REGIONAL MEDICAL CENTER	CLARK
180043	MANCHESTER MEMORIAL HOSPITAL	CLAY
180106	THE MEDICAL CENTER AT ALBANY	CLINTON
180095	CRITTENDEN COMMUNITY HOSPITAL	CRITTENDEN
180038	OWENSBORO HEALTH REGIONAL HOSPITAL	DAVISS
180143	SAINTE JOSEPH EAST	FAYETTE
182002	CONTINUING CARE HOSPITAL, INC	FAYETTE
180053	FLEMING COUNTY HOSPITAL	FLEMING
180127	FRANKFORT REGIONAL MEDICAL CENTER	FRANKLIN
180117	PARKWAY REGIONAL HOSPITAL	FULTON
180116	JACKSON PURCHASE MEDICAL CENTER	GRAVES
180070	TWIN LAKES REGIONAL MEDICAL CENTER	GRAYSON
183028	ENCOMPASS HEALTH REHABILITATION HOSPITAL	HARDIN
180012	BAPTIST HEALTH HARDIN	HARDIN
184012	LINCOLN TRAIL BEHAVIORAL HEALTH SYSTEM	HARDIN
180079	HARRISON MEMORIAL HOSPITAL	HARRISON
182009	CONTINUECARE HOSPITAL AT BAPTIST HLTH MA	HOPKINS
180152	CONTINUECARE HOSPITAL AT BAPTIST HEALTH	HOPKINS COUNTY
184008	THE BROOK HOSPITAL - KMI	JEFFERSON
184007	THE BROOK HOSPITAL - DUPONT	JEFFERSON
180130	BAPTIST HEALTH LOUISVILLE	JEFFERSON
180078	PAUL B HALL REGIONAL MEDICAL CENTER	JOHNSON
183027	ENCOMPASS HEALTH REHABILITATION HOSPITAL	KENTON
180011	SAINTE JOSEPH LONDON	LAUREL
180128	THREE RIVERS MEDICAL CENTER	LAWRENCE
180066	LOGAN MEMORIAL HOSPITAL	LOGAN
180049	BAPTIST HEALTH RICHMOND	MADISON
180024	SPRING VIEW HOSPITAL	MARION
180019	MEADOWVIEW REGIONAL MEDICAL CENTER	MASON
180102	LOURDES HOSPITAL	MC CRACKEN
182008	CONTINUECARE HOSPITAL AT BAPTIST HEALTH	MC CRACKEN
180153	CONTINUECARE HOSPITAL AT BAPTIST HEALTH	MCCRACKEN
180105	MONROE COUNTY MEDICAL CENTER	MONROE
180064	SAINTE JOSEPH MOUNT STERLING	MONTGOMERY
180004	OWENSBORO HEALTH MUHLENBERG COMMUNITY HO	MUHLENBERG
180025	FLAGET MEMORIAL HOSPITAL	NELSON
180138	BAPTIST HEALTH LAGRANGE	OLDHAM
180069	TUG VALLEY ARH REGIONAL MEDICAL CENTER	PIKE
180115	ROCKCASTLE COUNTY HOSPITAL, INC.	ROCKCASTLE
180101	GEORGETOWN COMMUNITY HOSPITAL	SCOTT
180087	TAYLOR REGIONAL HOSPITAL	TAYLOR
182005	COMMONWEALTH REGIONAL SPECIALTY HOSPITA	WARREN

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Table 3 – Continued from previous page

CCN	Name	County
183029	SOUTHERN KENTUCKY REHABILITATION HOSPITAL	WARREN
180124	GREENVIEW REGIONAL HOSPITAL	WARREN
184017	RIVENDELL BEHAVIORAL HEALTH SERVICES	WARREN
182006	CONTINUECARE HOSPITAL AT BAPTIST HEALTH	WHITLEY

4 All Other Hospitals

“Non-A Non-B” established teaching hospitals: Hospitals that don’t appear to qualify for a PRA/cap reset because they have claimed FTE greater than the eligibility criteria for category A (at least 1.0 FTE) or category B (more than 3.0 FTE).

Next Step: “Non-A Non-B” should confirm that they are not in fact eligible for a PRA/cap reset.

Table 4: Neither Category A nor Category B

CCN	Name	County	PRA?	Max PRA
180014	NORTON AUDUBON HOSPITAL	City: LOUISVILLE	*	52805
180010	SAINT JOSEPH HOSPITAL	FAYETTE	*	88292
183026	CARDINAL HILL REHABILITATION HOSPITAL	FAYETTE	*	89497
180067	UNIVERSITY OF KENTUCKY HOSPITAL	FAYETTE	*	88162
184009	THE RIDGE BEHAVIORAL HEALTH SYSTEM	FAYETTE	*	60740
180093	BAPTIST HEALTH MADISONVILLE	HOPKINS	*	86477
180141	UNIVERSITY OF LOUISVILLE HOSPITAL	JEFFERSON	*	88181
184015	CENTRAL STATE HOSPITAL	JEFFERSON	*	88162
180088	NORTON HOSPITALS, INC	JEFFERSON	*	87318
180040	JEWISH HOSPITAL & ST MARY’S HEALTHCARE	JEFFERSON	*	92296
180035	ST ELIZABETH EDGEWOOD	KENTON	*	95928
180029	HAZARD ARH REGIONAL MEDICAL CENTER	PERRY	*	88378
180018	ST CLAIRE REGIONAL MEDICAL CENTER	ROWAN	*	88162

An asterisk in the PRA? column denotes that the maximum PRA paid by the hospital is less than benchmark PRA for the region.

Additional Resources:

- **Rural GME HCRIS Data Tool:** Tool used to determine whether a hospital potentially qualifies for a PRA reset.
- **CMS Provider Number Lookup:** Tool used to determine your hospital provider number. You can also find your provider number using the Rural GME HCRIS Data Tool in the state list.
- **Impact of CMS Rule Changes on Rural GME: A Deeper Dive into Section 131:** RRPD-TAC webinar on Section 131.
- **CMS Guidance on Section 131:** FAQ published by CMS on hospitals eligible to reset PRA/Cap.
- **How to contact a Medicare Administrative Contractor (MAC):** CMS website with MAC contact information.
- **The FY22 IPPS Final Rule,** beginning page 73416, contains the formal regulations.

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