Attachment 9
Allocation of County Fees to County Option Programs
Ocean County

		Total	Children's Specialized Hospital
County Location of Hospital Main Campus		All	Middlesex
Estimated Assessment		$ 764,855	$ 764,855
State (DHS) Portion	1%	$ 7,649	$ 7,649
Ocean County Portion	9%	$ 68,837	$ 68,837
Estimated Hospital Funding Allocable to Other Counties	90%	**$ 688,369**	**$ 688,369**

Attachment 1
Licensed Hospitals
Ocean County

Hospital Name	Address	Hospital Ownership	Hospital Type
Community Medical Center, RWJBH	99 Route 37S, Toms River, NJ 08755-6423	Private	Acute Care
Monmouth Medical Center-Southern, RWJBH	600 River Avenue, Lakewood, NJ 08701-5237	Private	Acute Care
Saint Barnabas Behavioral Health Center, RWJBH	1691 Route 9, Toms River, NJ 08754	Private	Psychiatric
Ocean Medical Center	425 Jack Martin Blvd, Brick, NJ 08724	Private	Acute Care
Southern Ocean Medical Center	1140 Route 72 West, Manahawkin, NJ 08050	Private	Acute Care
Encompass Rehab of Toms River	14 Hospital Drive, Toms River, NJ 08755	Private	Rehabilitation
Specialty Hospital of Central Jersey	600 River Avenue, Lakewood, NJ 08701	Private	Long Term Acute Care
Children's Specialized Hospital	1251 Highway 37 West, Toms River, NJ 08755	Private	Outpatient Center

Attachment 2
Hospital Consultative Activities prior to Fee and Expenditure Report Submission
Ocean County

Activity
Initial meeting with the county
Introductory meeting with hospitals
Issued e-mail to each hospital requesting DHS data forms.
Issued e-mail to each hospital requesting additional DHS data forms.
E-mail follow-up with each hospital regarding outstanding DHS forms and documentation.
E-mail to each hospital requesting comment on program proposal.

Attachment 3
Proposed Hospital Assessment Fee
Ocean County

	Assessment Basis	Assessment Rate
Inpatient	Non-Medicare Discharges	$1,665.10
Outpatient	Percent of NPR (OP)	5.956%

Medicare ID	Medicaid ID	Hospital Name	Inpatient Assessment Units		Modeled Assessment
31-0041	3674606	Community Medical Center	9,531	$	15,870,068
31-0052	630659	Ocean Medical Center	6,164	$	10,263,676
31-0084	469351	Monmouth Medical Center-Southern	2,734	$	4,552,383
31-0113	643033	Southern Ocean Medical Center	3,233	$	5,383,268
31-2017	0	Specialty Hospital of Central Jersey	21	$	34,967
31-3029	4143604	Encompass Rehab Toms River	253	$	421,270
31-4022	7161000	Saint Barnabas Behavioral Health Center	556	$	925,796
31-3300	0	Children's Specialized Hospital	-	$	-
			22,492	$	37,451,429

Total net patient revenue (inpatient and outpatient)	$	1,894,828,483
NJAC 10:52B-2.1 Limit (5% of total net patient revenue)	$	94,741,424
Net patient revenue limit due to payment maximum (1.76% of total net patient revenue)		
Fee Amount Under / (Over) Limit	$	11,240,915

Attachment 4
Data Elements for Proposed Hospital Assessment Fee
Ocean County

Medicare ID	Medicaid ID	Hospital Name	FYE Begin	FYE End	FY Days	Ownership	Medicare Discharges, W/S S-3, Part I, Col 13					Total Discharges, W/S S-3, Part I, Col 15					Non-Medicare Discharges	Inpatient & Outpatient NPR
							Total A&P and HMO	Sub IPF	Sub IRF	Sub Oth.	TOTAL - Annualized	Total A&P and HMO	Sub IPF	Sub IRF	Sub Oth.	TOTAL - Annualized		
31-0041	3674606	Community Medical Center	1/1/2023	12/31/2023	365	Private	13,885	-	-	-	13,885	23,416	-	-	-	23,416	**9,531**	**$ 631,463,561**
31-0052	630659	Ocean University Medical Center	1/1/2023	12/31/2023	365	Private	9,755	-	671	-	10,426	15,699	-	891	-	16,590	**6,164**	**$ 630,732,947**
31-0084	469351	Monmouth Medical Center-Southern	1/1/2023	12/31/2023	365	Private	2,929	-	-	-	2,929	5,663	-	-	-	5,663	**2,734**	**$ 205,876,915**
31-0113	643033	Southern Ocean Medical Center	1/1/2023	12/31/2023	365	Private	5,544	-	-	-	5,544	8,777	-	-	-	8,777	**3,233**	**$ 311,554,961**
31-2017		Specialty Hospital of Central Jersey	9/1/2022	8/31/2023	365	Private	206	-	-	-	206	227	-	-	-	227	**21**	**$ 22,173,703**
31-3029	4143604	Encompass Rehab Toms River	1/1/2023	12/31/2023	365	Private	1,872	-	-	-	1,872	2,125	-	-	-	2,125	**253**	**$ 62,536,784**
31-4022	7161000	Saint Barnabas Behavioral Health Ce	1/1/2023	12/31/2023	365	Private	509	-	-	-	509	1,065	-	-	-	1,065	**556**	**$ 17,647,856**
31-3300		Children's Specialized Hospital	1/1/2023	12/31/2023	365	Private	-	-	-	-	-	-	-	-	-	-		**$ 12,841,755**
		Total					34,700	-	671	-	35,371	56,972	-	891	-	57,863	**22,492**	**1,894,828,483**

Attachment 5
Proposed Hospital Expenditure Model
Ocean County

Estimated Assessment		$	83,500,509
State (DHS) Portion	1%	$	835,005
Ocean County Portion	9%	$	7,515,046
Estimated New Medicaid Hospital Funding	90%	$	75,150,458
D. Estimated Medicaid Hospital Funding Allocated to Other Counties		$	(688,369)
Estimated Federal Medical Assistance Percentage (FMAP) for Managed Care			70.56%
Estimated New Medicaid Hospital Funding with Federal Matching Funds		$	252,952,221
MCO Administrative Fee for Health Plan Assessment	6.1%	$	15,430,085
Estimated New Medicaid Hospital Funding with Federal Matching Funds (less MCO administrative fee)		$	237,522,136

** Medicaid payment estimates incorporate a weighted average FMAP of 70.56% based on 2023 encounters reported by DHS. 1% of the assessment fee is estimated for State administrative costs. 6.1% of the total pool of funds available for hospital payments is estimated for administrative costs of the Medicaid health plans, which represents a 1% increase from the SFY2025 State computations.*

Uniform Per-Discharge Payment Increase - Class 1 Hospitals	$	17,205.83
Uniform Per-Day Payment Increase - Class 2: Rehabilitation Hospitals	$	1,169.59
Uniform Per-Encounter Payment Increase - Outpatient	$	1,782.91

			Medicaid Managed Care Data		
Hospital Name	Hospital Class for Directed Payment	Medicare ID	Inpatient Discharges (Days if Class 2)	Outpatient Visits	Inpatient Directed Payment
Community Medical Center	Class 1	31-0041	2,473	$ 23,518	$ 42,550,015
Ocean Medical Center	Class 1	31-0052	1,194	$ 21,472	$ 20,543,760
Monmouth Medical Center-Southern	Class 1	31-0084	1,149	$ 15,383	$ 19,769,498
Southern Ocean Medical Center	Class 1	31-0113	811	$ 15,474	$ 13,953,927
Specialty Hospital of Central Jersey	Class 1	31-2017	4	$ -	$ 68,823
Encompass Rehab Toms River	Class 2	31-3029	525	$ -	$ 614,034
Saint Barnabas Behavioral Health Center	Class 1	31-4022	278	$ 5	$ 4,783,220
Total			**6,434**	**75,852**	**$ 102,283,278**

Attachment 6
DHS Inpatient Discharges and and Days and Outpatient Visits from Encounter Data
Ocean County

Hospital Name	CY 2023 IP Enc Discharges	CY 2023 IP Enc Days	CY 2023 Outpatient Visits
Community Medical Center	2,473		$ 23,518
Ocean University Medical Center	1,194		$ 21,472
Monmouth Medical Center-Southern	1,149		$ 15,383
Southern Ocean Medical Center	811		$ 15,474
Specialty Hospital of Central Jersey	4		$ -
Encompass Rehab Toms River		525	$ -
Saint Barnabas Behavioral Health Center	278		$ 5
	5,909	**525**	**75,852**

Attachment 7
Net Patient Revenue
Ocean County

Medicare ID	Medicaid ID	Hospital Name	FYE Begin	FYE End	FY Days	W/S G-2 Row Column	1 1	2 1	3 1	5 1	7 1	10 1	11 1	11.01 1	11.02 1	12 1	15 1	16 1	17 1	18 1	19 1	27 1	28 1			18 2	19 2	27 2	28 2			3 1	Annualized	Annualized	Annualized	Annualized						
						INPATIENT (S-2 Column 1)	Hospital	Subprovider - IPF	Subprovider IRF	Swing Bed - SNF	Skilled Nursing Facility	Total General Inpatient Care Services	ICU	Premature ICU	NICU	CCU	Other Special Care	Total Intensive Care Type Inpatient hospital Services (sum of 11-15)	Total Inpatient Routine Care Services (sum of 10 & 16)	Ancillary Services	Outpatient Services	Other (specify) 1	Total Patient Revenues	Sum of Yellow Shaded Columns - Inpatient Gross	OUTPATIENT (S-2 Column 2)	Ancillary Services	Outpatient Services	Other (specify)	Total Patient Revenues	Sum of Green Shaded Columns - Outpatient Gross	Sum of Orange Shaded Columns - IP and OP Gross	Net Patient Revenue (NPR), W/S G-3	Inpatient Gross	Outpatient Gross	Total IP and OP Gross	Net Patient Revenue (NPR)	**Inpatient NPR for Tax Model (Inflated)**	**Outpatient NPR for Tax Model (Inflated)**	SNF Adjustments (SNF Worksheet S-10, Column 3)	SNF % of Routine	SNF Ancillary Revenue	Inflation for Cost Report NPR	**Estimated SFY 2026** Medicaid Inpatient Directed Payments	**Estimated SFY 2026** Medicaid Outpatient Directed Payments	Inpatient & Outpatient NPR, Participating Hospitals
31-0041	3674606	Community Medical Center	1/1/2023	12/31/2023	365		532,184,060	-	-	-	18,119,997	550,304,057	471,365,736	-	-	-	-	515,301,697	1,065,605,754	549,733,673	162,650,022	-	1,777,989,449	1,759,869,452		610,183,555	289,995,498	-	900,179,053	900,179,053	2,678,168,502	512,802,887	1,759,869,452	900,179,053	2,678,168,502	512,802,887	**360,223,904**	**185,239,657**	1.70%	9,347,897	1.0747	$42,500,000	$43,500,000	$ 631,463,561
31-0052	630659	Ocean Medical Center	1/1/2023	12/31/2023	365		558,131,365	-	63,488,358	-	-	621,619,723	73,031,155	-	-	-	-	73,031,155	694,650,878	477,877,507	83,679,856	-	1,256,208,241	1,256,208,241		663,644,749	203,531,135	-	867,175,884	867,175,884	2,123,384,125	531,056,149	1,256,208,241	867,175,884	2,123,384,125	531,056,149	**337,649,426**	**233,083,521**	0.00%	-	1.0747	$20,500,000	$39,500,000	$ 630,732,947
31-0084	469351	Monmouth Medical Center-Southern	1/1/2023	12/31/2023	365		283,889,684	-	-	-	-	283,889,684	35,299,621	-	-	-	-	35,299,621	319,189,305	88,937,287	36,240,925	-	444,367,517	444,367,517		203,443,378	109,373,496	-	312,816,874	312,816,874	757,184,391	144,575,263	444,367,517	312,816,874	757,184,391	144,575,263	**91,185,786**	**64,191,129**	0.00%	-	1.0747	$19,500,000	$31,000,000	$ 205,876,915
31-0113	643033	Southern Ocean Medical Center	1/1/2023	12/31/2023	365		288,110,879	-	-	-	-	288,110,879	23,223,780	-	-	-	-	23,223,780	311,334,659	216,437,095	59,961,145	6,374,768	594,107,667	594,107,667		436,372,229	145,886,743	-	582,258,972	582,258,972	1,176,366,639	250,629,667	594,107,667	582,258,972	1,176,366,639	250,629,667	**136,033,990**	**133,320,971**	0.00%	-	1.0747	$13,700,000	$28,500,000	$ 311,554,961
31-2017		Specialty Hospital of Central Jersey	9/1/2022	8/31/2023	365		63,997,600	-	-	-	-	63,997,600	-	-	-	-	-	-	63,997,600	47,597,328	-	1,048,528	112,643,456	111,594,928		194,455	-	-	194,455	194,455	112,837,911	20,592,173	111,594,928	194,455	112,837,911	20,592,173	**22,069,203**	**38,456**	0.00%	-	1.0837	$ 66,045	$ -	$ 22,173,703
31-3029	4143604	Encompass Rehab Toms River	1/1/2023	12/31/2023	365		36,825,411	-	-	-	-	36,825,411	-	-	-	-	-	-	36,825,411	32,568,478	-	-	69,393,889	69,393,889		-	-	-	-	-	69,393,889	57,621,694	69,393,889	-	69,393,889	57,621,694	**61,926,784**	-	0.00%	-	1.0747	$ 610,000	$ -	$ 62,536,784
31-3022	7161000	Saint Barnabas Behavioral Health Center	1/1/2023	12/31/2023	365		13,203,820	-	-	-	-	13,203,820	-	-	-	-	-	-	13,203,820	2,504,716	-	-	15,708,536	15,708,536		-	2,706,144	-	2,706,144	2,706,144	18,414,680	12,226,386	15,708,536	2,706,144	18,414,680	12,226,386	**11,208,878**	**1,930,978**	0.00%	-	1.0747	$ 4,500,000	$ 8,000	$ 17,647,856
31-3300		Children's Specialized Hospital	1/1/2023	12/31/2023	365		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	11,949,009	-	-	11,949,009	-	**-**	**12,841,755**			1.0747		$ -	$ 12,841,755
		Total					1,776,342,819	-	63,488,358	-	18,119,997	1,857,951,174	602,920,292	-	-	-	-	646,856,253	2,504,807,427	1,415,656,084	342,531,948	7,423,296	4,270,418,755	4,251,250,230		1,913,838,366	751,493,016	-	2,665,331,382	2,665,331,382	6,935,750,137	1,541,453,228	4,251,250,230	2,665,331,382	6,935,750,137	1,541,453,228	**1,020,297,970**	**630,646,467**		9,347,897			**101,376,045**	**142,508,000**	**1,894,828,483**

Note 1:
Based upon a review of Specialty Hospital of Central Jersey's cost report (31-2017), the revenue is "Professional Fees". This is not patient revenue and will be excluded from the calculation of Inpatient Gross Revenue.
Based upon a review of Southern Ocean Medical Center's cost report (31-0113), the revenue is related to Nursery services. This is patient revenue and will be included in the calculation of Inpatient Gross Revenue.

Attachment 8
Inflation
Ocean County

Table 1 - Inflation for Net Patient Revenue from Cost Report Data

Cost Report FYE	Midpoint of Cost Report FYE	Inflation Factor - Midpoint of Cost Report Period	Midpoint of Implementation State Fiscal Year (1/1/2026)	Inflation
08/31/23	Q1 2023	2.7610	2.9920	1.0837
12/31/23	Q3 2023	2.7840	2.9920	1.0747

Inflation: IHS Markit Hospital Market Basket, IHS Markit Healthcare Cost Review Q2 2024, Table 6.3