

COMMENTS ON GME
Rec'd as of 10/13/15

#	Commentor and Date Comments were rec'd	Rule Subsection	Comment	Response
1.	Linda Hunt Dignity Health Rec'd comment 10/12/15	R9-22-712.05	On behalf of Dignity Health I would like to express our support for the Proposed Amendment to R9-22-712.05 pursuant to A.R.S. 36-2903.01 amending the Graduate Medical Education fund Allocation. I sincerely appreciate Governor Ducey's foresight and commitment to ensuring the needs of our healthcare workforce is met and your leadership on this desperately needed Rule change.	The AHCCCS Administration appreciates the support provided.
2.	Linda Hunt Dignity Health Rec'd comment 10/12/15	R9-22-712.05	Our Creighton University School of Medicine Regional Campus at St Joseph's Medical Center is an accredited Graduate Medical Education (GME) program which provides 3 rd and 4 th year medical students the training they need to become successful physicians. Dignity Health is committed to training and recruiting the best physician's. We are able to do this through many of our own resources but would not be able to accomplish it without the assistance of the GME program. The proposed Rule change to GME allocation will have a distinct positive impact on our program as well as attracting and keeping physicians in our great state.	The AHCCCS Administration appreciates the support provided.

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3.	Linda Hunt Dignity Health Rec'd comment 10/12/15	R9-22-712.05 (D)(1)(b)	It is not clear how the CHGME payment program or other future specialty specific funding is factored in the calculation methodology paragraph (D) section (4) subsection (b). This could be a factor for specialty hospitals considering opening a residency in Psychiatry or Physical Medicine and Rehabilitation.	It is not factored into the calculation methodology; it is an element of eligibility to receive the payment.
4.	Linda Hunt Dignity Health Rec'd comment 10/12/15	R9-22-712.05 (D)(1)(b)	Institutions that either sponsor a free-standing residency that is not fully under Medicare reimbursement (e.g., Pediatrics, Psychiatry, Physical Medicine and Rehabilitation, Medical genetics, etc.) or by their demography have a low Medicare population may be disadvantaged in the methodology.	Under this provision if there are any indirect costs at all reported on the Medicare Cost Report or that are reimbursable by CHGME, then the hospital will be eligible to receive reimbursement of indirect costs.
5.	Linda Hunt Dignity Health Rec'd comment 10/12/15	R9-22-712.05 (D)(1)(b)	While the federal GME funding program for Pediatrics (CHGME) addresses this inequity, and will be used as a replacement in the AHCCCS GME methodology, new hospitals considering sponsoring one of the residencies as described above may be at a disadvantage.	The proposed changes clarify that children's hospitals that incur indirect costs are qualified for reimbursement even though the costs may not appear on the Medicare Cost Report but are otherwise reflected in the CHGME program. The proposed changes in (D)(1)(b) do not replace or alter elements for the IME calculation; this section merely describes the hospitals which are eligible to receive IME payments.

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6.	Barbara Fanning Director, Government Affairs AzHHA Rec'd comment 10/13/15	R9-22-712.05	The Arizona Hospital and Healthcare Association would like to thank Governor Ducey, Director Betlach and their staffs for the proposed changes to the indirect Graduate Medical Education (GME) formula. We are very supportive of this change that will make additional funding available to hospitals with residency programs. As I am sure you know, the GME program is vital to ensuring the state has adequately trained physicians who are ready to meet the increasingly critical needs of Arizona's patients. This change will not only allow hospitals to continue to do this, but will help strengthen existing residency programs.	The AHCCCS Administration appreciates the support provided.