

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services**

Order of the Administrator

IN THE CASE OF:	*	MGCRB Case No. 25C0633
	*	
GHS Laurens County	*	
	*	
Provider No. 42-0038	*	
	*	

This case is before the Administrator, Centers for Medicare & Medicaid Services (CMS), for review of the decision entered by the Medicare Geographic Classification Review Board (MGCRB or Board). GHS Laurens County (the Hospital) requested that the Administrator reverse the MGCRB’s dismissal of its application, because while the Hospital did not timely respond with the requested additional information it later showed mitigating circumstances.¹ Accordingly, this case is now before the Administrator for final agency review.

ISSUE AND MGCRB DECISION

The issue involves whether the MGCRB properly dismissed the Hospital’s application. On September 1, 2023, the Hospital timely submitted its initial online application to the MGCRB. On September 7, 2023, the MGCRB wrote the Hospital a letter that that it found the September 1, 2023 digital filing incomplete, particularly requesting further confirmation of its Designated Representative, and current evidence that the Facility is a Rural Referral Center (RRC) and a Sole Community Hospital (SCH). The MGCRB advised that the Hospital that it would close its application if the Board didn’t receive the information needed to complete the same by September 22, 2023. On October 19, 2023, the MGCRB dismissed the application by a letter to the Hospital and closed the case, finding that the Hospital had not timely submitted the requested information.

HOSPITAL’S COMMENTS

The Hospital commented, requesting review by the Administrator. To begin with, the Hospital said that it did not respond by the September 22, 2023 completion deadline, because both its prior Designated Representative and Authorizing Official ended their employment “during and around” this period.² Further, per the Hospital those previously Facility-employed persons were the only ones who knew of the MGCRB’s incomplete status letter with its clarification request and its further proof contents. On October 20, 2023, the Provider discovered the MGCRB’s September 7, 2023, letter only when a new employee received it from information technology as they accessed the new work electronic mail account for the first time.

¹ This appeal falls under 42 C.F.R. §412.256(d) and -.278(a).

² October 30, 2023 letter from Daryl Lewis, Third Party Reimbursement Solutions to OAA appealing, paragraph two, line four.

DISCUSSION

The entire record furnished by the MGCRB has been examined, including any correspondence, position papers, exhibits, and subsequent submissions. All comments received timely are included in the record and have been considered.

Section 1886(d)(10)(C)(iii)(II) of the Social Security Act and the Medicare regulations at 42 C.F.R. § 412.278 provide for the CMS Administrator's review of the MGCRB's decisions. In exercising the MGCRB's authority under § 1886(d)(10) of the Act, the Board must comply with all of the provisions of Title XVIII of the Act and the regulations issued thereunder, including the regulations at 42 C.F.R. § 412.230, *et seq.* Likewise, the regulations promulgated by the Secretary establishing procedures and criteria for the MGCRB bind the agency and the Administrator in reviewing the MGCRB's decisions.

Section 1886(d)(10) of the Act provides for the MGCRB to consider the application of any subsection (d) hospital requesting that the Secretary change that facility's geographic classification for purposes of determining for a fiscal year its wage index. Further, §1886(d)(10)(D)(i)(I) requires the Secretary to publish guidelines for comparing wages, taking into account to the extent the Secretary determines appropriate, the occupational mix in the area in which the hospital is classified and the area in which the hospital is applying to be classified.

Pursuant to the statute, the Secretary established 42 C.F.R. § 412.230, *et seq.* setting forth criteria for an individual hospital seeking redesignation to another rural area or an urban area. Specifically, 42 C.F.R. § 412.256 notes the following, relevant application requirements:

(a) Written application. A request for reclassification must be in writing and must constitute a complete application in accordance with paragraph (b) of this section.

(1) An application must be submitted to the MGCRB according to the method prescribed by the MGCRB.

(2) A complete application must be received not later than the first day of the 13-month period preceding the Federal fiscal year for which reclassification is requested.

(3) The filing date of an application is the date the application is received by the MGCRB.

(b) Criteria for a complete application. An application is complete if the application from an individual hospital or from all hospitals in a county includes the following information:

(1) The Federal fiscal year for which the hospital is applying for redesignation.

(2) Which criteria constitute the basis of the request for reclassification.

(3) An explanation of how the hospital or hospitals meet the relevant criteria in §§412.230 through 412.236, including any necessary data to support the application.

(c) Opportunity to complete a submitted application. (1) The MGCRB will review an application within 15 days of receipt to determine if the application is complete. **If the MGCRB determines that an application is incomplete, the MGCRB will notify the hospital, with a copy to CMS, within the 15-day period, that it has determined that the application is incomplete** and may dismiss the application if a complete application is not filed by September 1.

(2) At the request of the hospital, the MGCRB may, for good cause, grant a hospital that has submitted an application by September 1, an extension beyond September 1 to complete its application.

(d) Appeal of MGCRB dismissal. (1) **The hospital may appeal the MGCRB dismissal to the Administrator within 15 days of the date of the dismissal. ...** (bolding mine).

Per MGCRB Rule 3.1 (and see e.g., Rule 3.4 etc.), the Designated Representative is the one, sole individual with whom the MGCRB maintains contact. While a Designated Representative can be one internal employee (e.g., of the health system etc.) or an external source (i.e., attorney), there may be only one representative per application. Accordingly, all contact details for that single person must match (even if they appear in more than one application section).

In this case, the record shows that on September 1, 2023, Jason Sanders timely submitted the Hospital's application, and it named him as its Designated Representative.³ However, the same application Mr. Sanders filed subsequently listed another person named Okey Uzor as a second Authorization Officer. Further, that person further submitted a Letter of Representation.⁴ On September 7, 2023, the MGCRB sent an "Incomplete Application" letter to Mr. Sanders as the Designated Representative, noting the conflict between his and Okey Uzor's information as Authorization Officer. As a result, the MGCRB's letter asked the Hospital to declare the one person acting as its lone Designated Representative, and to show current proof that the Hospital qualified as a rural referral center (RRC) and a sole community hospital (SCH). This letter included a warning that the Hospital's appeal would be dismissed if the above, needed information was not timely filed in 15 days (e.g., on or before September 22, 2023). Sometime presumably between September 1 and 11, 2023, one (or more) of the parties ended the two named employees employment with the Hospital. The record shows that the "Hospital" (as an entity) was notified by the MGCRB of its request for additional information through the designated person(s), by the MGCRB's letter dated and issued on September 11, 2023 (addressed to Mr. Sanders, the prior Designated Representative). However, the record shows there was no response to the MGCRB letter, until after the appeal period expired. Further, no other employee at the Hospital was

³ In the Hospital's application Mr. Sanders identified himself as its Manager of Government Reimbursement Affairs.

⁴ In the same, Okey Uzor identified as its Director of Governmental Reimbursement.

apparently aware of the request or its contents until October 20, 2023, after the deadline for responding had already ended.

The MGCRB was within its authority to dismiss this case as it is the Hospital's responsibility (see the MGCRB's Rule 3.1) to properly designate and update the Board with its Designated Representative. The Administrator recognizes that the Hospital took measures to correct its original error and update this information, but there was a delay before this was done, which caused the application to be dismissed. This delay, while not of significant duration, occurred at a critical time in the application process. Consequently, in light the Hospital's action to correct the error and update the information, the Administrator hereby vacates the dismissal and remands the application to the MGCRB for evaluation of the Hospital's documentation provided by the Hospital in this appeal and uploaded to the MGCRB case management system. The MGCRB shall evaluate this documentation to determine whether the criteria for a complete application are met and process the application in accordance with that determination.

The Hospital is now on notice that, in the future, it is imperative that it follows the MGCRB required application process and filing rules and methods (such as properly filing in its application and updating its single Designated Representative promptly) or risk having its application be dismissed.

Date: November 8, 2023

/s/
Jonathan Blum
Principal Deputy Administrator
Centers for Medicare & Medicaid Services

APPENDIX

From: [Daryl Lewis](#)
To: [Vaughn, Jacqueline \(CMS/OSORA\)](#); [Gassmann, Arlene \(CMS/OSORA\)](#)
Cc: [Sue Gristchuk](#); [CMS Wageindex](#); [Mike Polito](#)
Subject: Appeal of MGCRB Dismissal Case 25C0633 [NOENCRYPT]
Date: Monday, October 30, 2023 9:59:41 AM
Attachments: [Prisma Laurens 42-0038 - MGCRB FFY 25 Dismissal Appeal \(25C0633\).pdf](#)

To whom it may concern,

Please see the attached request for review of the MGCRB Dismissal prior to review of Case No. 25C0633 for 42-0038 – GHS Laurens County Hospital.

The Provider is exercising their right to this appeal under 42 C.F.R. §412.278(a) and §412.256(d).

The Dismissal letter is dated October 19, 2023 and provides 15 days for this request for review. Read and Delivery Receipts are included with this email to confirm it has been timely filed. Please Reply All at your earliest convenience to further confirm receipt.

Thank You, Daryl Lewis

Vice President, Strategic Initiatives
Third Party Reimbursement Solutions, LLC Mobile (Preferred):
(352) 262-3339
TPR Office: (704) 246-8620
Office Direct: (980) 256-5337



October 30, 2023

VIA EMAIL: (Jacqueline.Vaughn@cms.hhs.gov)

Centers for Medicare & Medicaid Services
Office of Attorney Advisor
Room C3-01-20
7500 Security Boulevard
Baltimore, Maryland 21244-1850
Att'n: Jacqueline R. Vaughn, Esq., Attorney Advisor

TPR Solutions, LLC
12104 Copper Way
Suite 200
Charlotte, NC 28277
(704) 246-8620 (office)
(704) 578-3468 (Cell)

Re: GHS Laurens County Memorial Hospital CCN 42-0038
MGCRB Case No. 25C0633
Reclassification Period: FFYs 2025-2027
Request for CMS Administrator to Reverse MGCRB Dismissal

Dear Ms. Vaughn:

As the designated representative on record for GHS Laurens County Memorial Hospital (“the Hospital”) in the above-referenced matter, I am writing in accordance with 42 C.F.R. §412.278 to ask the Administrator of the Centers for Medicare & Medicaid Services (“CMS”) to reverse the October 19, 2023 decision (*see Attachment A*) of the Medicare Geographic Classification Review Board (“MGCRB”), dismissing the Hospital’s request for reclassification for federal fiscal years (“FFYs”) 2025-2027. For the reasons set forth below, the Hospital respectfully requests that the Administrator reverse the MGCRB’s dismissal and revert the case to the MGCRB for review.

The Provider understands that additional information was requested from the previous Representative on file with this case. Unfortunately, both the Representative and the Authorizing Official are no longer employed with the Provider. The request for additional information occurred during and around the time of their departure and no appropriate response was provided regarding the request. With their sudden departure, and the fact that these resources were the lone resources with knowledge of the subject and application, the request was not known to any other employees. The request and lack of response was not discovered until October 20th, when the internal information technology department began the forwarding of emails to a new resource hired at the Provider.

Now that the request has been discovered and the Representative on file with the MGCRB changed to myself, all of the documents that were requested to complete the application have been uploaded to the MGCRB portal. The additional requested information is also included as *Attachment B*. We understand that the MGCRB had the authority to dismiss the case due to the lack of response initially, but we also realize that the full review of the application and merits of the application have not been reviewed. The Provider believes that all of the required criteria for

a complete and approved application are met, therefore, we humbly request that the dismissal of the case be overturned, and the case be remanded to the MGCRB to complete their full review of the application and required criteria for reclassification.

Thank you for your consideration and please let me know if you have any questions regarding the application or any of the additional items discussed.

Sincerely,

A handwritten signature in black ink that reads "Daryl Lewis". The signature is written in a cursive, flowing style.

Daryl Lewis
Third Party Reimbursement Solutions, LLC
dlewis@tprsolutions.com
(704) 246-8620

Provider Attachment A – MGCRB Dismissal of Case



DEPARTMENT OF HEALTH & HUMAN SERVICES

Medicare Geographic Classification Review Board
7500 Security Boulevard
Mail Stop: B1-01-31
Baltimore, MD 21244
410-786-1174

October 19, 2023

Jason Sanders
Mgr. Gov. Reimb Affairs
Prisma Health
255 Enterprise Blvd. Suite 190
Greenville, SC 29615

RE: Case Dismissal – Additional Information Not Received
GHS Laurens County Memorial Hospital
Provider Number: 42-0038
MGCRB Case Number: 25C0633
Reclassification Period: FFYs 2025 – 2027

Dear Mr. Sanders:

In our letter dated September 7, 2023, the Medicare Geographic Classification Review Board (“Board” or “MGCRB”) advised that this case would be closed if the information needed to complete your application was not received by September 22, 2023.

Specifically, the Board requested that you provide the following:

- Confirmation of Designated Representative due to conflicting named individual between the application and the Representation Letter.
- *Current* evidence from the Medicare Contractor or CMS Regional Office that indicated that the provider is a Rural Referral Center (RRC).
- *Current* evidence from the Medicare Contractor or CMS Regional Office that indicated that the provider is a Sole Community Hospital (SCH).

Since the Board has not received the necessary information to complete your application, the Board hereby dismisses your application and closes this case. You may appeal this decision to the Administrator of the Centers for Medicare & Medicaid Services. The Office of the Attorney Advisor must receive your request for review no later than **15 days** from the date of this notice.

A request for Administrator review must be submitted to the Office of the Attorney Advisor (“OAA”) at the following email addresses: Jacqueline.Vaughn@cms.hhs.gov and Arlene.Gassmann@cms.hhs.gov.

The Provider must also submit a copy of its request for review to CMS's Hospital and Ambulatory Policy Group at wageindex@cms.hhs.gov. Please refer to 42 C.F.R. § 412.278 for details on Administrator review.

Sincerely,

Board Members:
Steven Long
Michael Richards
Matthew Barr
Bruce Toppin
Bryan Randall

FOR THE BOARD:

A handwritten signature in black ink, appearing to read 'Steven Long', written over a horizontal line.

Steven Long

cc: Office of the Attorney Advisor, OSORA, OA, CMS
Division of Acute Care, Hospital & Ambulatory Policy Group, CM, CMS
GHS Laurens County Memorial Hospital, (42-0038)

Provider Attach. B – Add'l. MGCRB Req. Documents



October 23, 2023

Medicare Geographic Classification Review Board
CMS Office of Hearings
7500 Security Boulevard
Mail Stop: B1-01-31
Baltimore, MD 21244-1850

RE: Representative for MGCRB Reclassification Application & Communication

Provider Name: Prisma Health Laurens
Provider No: 420038
Reclassification Period: FFY's 2025 - 2027
MGCRB Case No: 25C0633

To whom it may concern,

As outlined in the Medicare Geographic Classification Review Board's rules, which were effective as of July 10, 2023, please note the attached information pertaining to our designated case representative.

Representative Name and Contact Information:

Daryl Lewis
Vice President, Strategic Initiatives
Third Party Reimbursement Solutions, LLC ("TPR")
12104 Copper Way Suite 200
Charlotte, NC 28277
dlewis@tprsolutions.com
(352) 262-3339

Contact Information of the Authorizing Official:

Sue Gristchuk
Director, Governmental Reimbursement
Prisma Health Greenville Memorial Hospital
255 Enterprise Blvd-Suite 190
Greenville, SC 29615
Susan.gristchuk@prismahealth.org
(248)890-3103

Please contact me with any questions or comments regarding the above case representative contact information.

Sincerely,

Sue Gristchuk
Director, Governmental Reimbursement
Prisma Health Greenville Memorial Hospital
Prisma Health

October 23, 2023

TPR Solutions, LLC
12104 Copper Way
Suite 200
Charlotte, NC 28277
(704) 246-8620 (office)
(704) 578-3468 (Cell)

Additional Documentation for MGCRB Reclassification Application

Provider Name: GHS Laurens County Memorial Hospital

Provider No: 42-0038

Reclassification Period: FFYs 2025 – 2027

MGCRB Case No: 25C0633

GHS Laurens County Memorial Hospital or (“The Provider”) is providing this additional documentation regarding aspects affecting the application for MGCRB reclassification. Specifically, this documentation confirms the current 412.103 Rural, RRC, and SCH Status of the provider, see copy appended to the end of this document.

The Provider understands that this information was requested from the previous Representative on file with this case. Unfortunately, both the Representative and the Authorizing Official are no longer employed with the Provider. The request for additional information occurred during and around this time and no appropriate response was provided regarding the request.

We understand that there may be the opportunity to appeal the dismissal of this case, but we would greatly appreciate it if the case could be reopened now that the requested documentation is provided. The Representative has been changed to myself, which satisfies the request for a corrected Representative letter, and both the Rural and SCH status of the provider are confirmed via this documentation from the Provider’s MAC: Palmetto GBA.

Thank you for your consideration and please let me know if you have any questions regarding the application or any of the additional items discussed.

Sincerely,



Daryl Lewis
Third Party Reimbursement Solutions, LLC
dlewis@tprsolutions.com
(704) 246-8620



September 18, 2023

Okey Uzor
PH Laurens County Hospital
300 E McBee Ave
Fl 4
Greenville, Sc 29601-2842

Subject: RRC/SCH Status for:
PH Laurens County Hospital

Provider Number: 42-0038

Dear Mr. Uzor:

Per your request, Palmetto GBA records indicate that PH Laurens County Hospital continues to meet qualifications as a Rural Referral Center (RRC) and Sole Community Hospital (SCH).

These qualifications were conducted in accordance with the "Code of Federal Regulations" (CFR) found in 42 CFR §412.92, 42 CFR §412.96 & 42 CFR §412.103

If you have any questions regarding your RRC status, please call the PCC at 855-696-0705 or email JMReimbursement@palmettogba.com.

Sincerely,

Denise Stamps

Denise Stamps
Provider Reimbursement