

Jun 25, 2025 Webinar Q&A Summary

Question (Hospital Representative): The attestation deadline of August 20th may not provide enough time for our hospital to complete the submission. Is there any flexibility?

Answer (hMetrix): Yes, there will be an option within the DAVE system for hospitals to formally request an extension if the attestation cannot be completed by the deadline.

Question (Hospital Representative): Will the Case Mix vs. Financial comparison report be categorized by Total Charges, Medicare FFS, and In-State/Out-of-State, similar to our quarterly reconciliation report?

Answer (hMetrix): Yes, the Case Mix vs. Financial comparison in DAVE will be in the same format as the reconciliation report you currently use. More details on this are covered in the presentation slides.

Question (Hospital Representative): As a new user, when can I expect to be granted access to the DAVE system?

Answer (hMetrix): New users will have their accounts activated by July 7, 2025.

Question (Hospital Representative): Regarding the experience data template, I thought the "total" columns were going to be removed. Has that plan changed?

Answer (hMetrix): After consulting with hospitals for feedback, the decision was made to keep the "total" columns in the template. However, to simplify the process, these columns will now be auto-populated based on the data you enter in the other columns.

Question (Hospital Representative): When submitting data revisions, should we upload the entire original file again, or only the specific lines that have been changed?

Answer (hMetrix): When submitting corrections for **Experience** data, you should only submit the lines that have been changed from the previous submission. However, it is critical that this new file containing the corrected lines is completely error-free. If any errors are found in the revision

file, all records in that file will be rejected and will need to be corrected and resubmitted. Important to note, **for FSA and FSB** data all revisions should contain all the lines in the template with the corrected information.

Question (Hospital Representative): Are we still required to email the HSCRC monthly with our financials, Supplemental Financial Information (SFI), and a letter regarding rates that are out of compliance?

Answer (HSCRC): There has been an update to these reporting requirements. The following monthly reports are **no longer required** to be submitted to the HSCRC monthly delegated mailbox:

- Volume and Revenue
- Income Statements (FSA)
- Global Budget Revenue Report (GBR)
- Supplemental Financial Information (SFI)
- Supplemental Birth Schedule (SB)
- Internal Financial Statements

However, hospitals must **continue to submit** the Monthly Unit Rate Compliance Letter to hsrc.monthly@maryland.gov, but the accompanying financial statistics are no longer required.