**Formula Explanation**

**Net Program DGME =**

E-4 31-3

**Total IME Payments =**

E, Part A 29-1 and 29.01-1

**I&R Services Salary =**

B Part 1 21-21 + 22-22

**Base Supplemental if DSH Payment =**

  $49,000 \* Unweighted resident FTE \* (Medicaid Allocation Ration with DSH)

49000 \* E-4 6-1 \* (S-10 2-1 / G-3 1-1)

**Base Supplemental if No DSH Payment =**

$49,000 \* Unweighted resident FTE \* (Medicaid Allocation Ration with No DSH)

49000 \* E-4 6-1 \* (E-3, Part VII 1-1 / B, Part 1 118-24)