

December 8, 2025

COMPREHENSIVE HOSPITAL INCREASE REIMBURSEMENT PROGRAM (CHIRP) PROVIDER RATE INCREASES FOR SFY 2026

BACKGROUND

On Sept. 4, 2025, HHSC received federal approval for the amended Comprehensive Hospital Increase Reimbursement Program (CHIRP) preprint from the Center for Medicaid and Medicare Services (CMS) for Fiscal Year 2026 (FY2026), the period covering Sept. 1, 2025, through August 31, 2026. The approval is retroactive to Sept. 1, 2025.

KEY DETAILS

MCOs received the DPP rates the first week of October and have been directed by HHSC to load FY2026 rates no later than Dec. 1, 2025.

CHIRP retroactive claim adjustments must be completed within 60 Business Days after HHSC publishes the FY2026 rates and adjusts capitation. MCOs will have 60 Business Days from Dec. 1, 2025, to retroactively adjust claims with dates of discharge on or after Sept. 1, 2025. Accounting for state approved holidays, MCOs should complete reprocessing claims as soon as possible, but no later than Wednesday, Feb. 4, 2026.

FY2026 capitation rates will be amended retroactively to Sept. 1, 2025.

ADDITIONAL INFORMATION

The explanation of payment (including for all reprocessed CHIRP claims), regardless of method and format, includes the base payment amount, supplemental amount, total amount, and an indicator specifying which DPP program the payment applies to.

QUESTIONS

For any questions regarding this notice, please contact your Community Provider Performance Manager (provider representative). E-mail: ProviderRelationsInquiries@CommunityHealthChoice.org