

Joint Committee on Government and Finance

July 2010

Department of Health and Human Resources

MEDICAID REPORT

April 2010 Data

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES
 BUREAU FOR MEDICAL SERVICES
 EXPENDITURES BY PROVIDER TYPE
 SFY2010

Note: The Centers for Medicare and Medicaid Services (CMS) has mandated changes to reporting of Medicaid expenditures. The report below reflects the updated categorizations by provider type, which is the new format for future quarterly CMS 64 reports. The Department is in the process of re-coding the data and reports to comply with the mandated reporting changes. At the present time, we are only able to present provider type detail for the Current Month and Year-to-Date (YTD) Actuals. Prior year Actuals and Projected SFY 2010 Budget provider type detail will be updated when the coding changes are complete and data validation and quality assurance processes have been performed.

MONTH OF APRIL 2010	ACTUALS	TOTAL	ACTUALS	ESTIMATED	ACTUALS	PROJECTED
	SFY2009	SFY2010	Current Month Apr-10	Current Month Apr-10	Year To-Date Thru 4/30/10	5/1/10 Thru 06/30/10
EXPENDITURES:						
Inpatient Hospital - Reg. Payments	260,946,991	127,598,926	15,915,108	10,645,000	178,790,739	(51,191,813)
Inpatient Hospital - DSM	54,483,945	55,411,679	-	-	41,181,039	14,230,640
Inpatient Hospital - Supplemental Payments	-	114,140,000	5,301,925	5,302,000	21,207,700	92,932,300
Inpatient Hospital - GME Payments	-	4,073,000	-	-	3,681,438	411,562
Mental Health Facilities	47,960,442	55,718,940	6,808,705	4,647,000	59,341,695	(3,822,755)
Mental Health Facilities - DSH Adjustment Payments	18,798,469	19,055,754	-	-	14,165,284	4,890,470
Nursing Facility Services - Regular Payments	464,023,240	491,237,896	41,561,038	40,930,000	394,496,152	96,741,744
Nursing Facility Services - Supplemental Payments	-	-	-	-	-	-
Intermediate Care Facilities - Public Providers	-	-	-	-	-	-
Intermediate Care Facilities - Private Providers	63,246,071	63,402,719	5,439,116	5,284,000	53,168,644	10,234,075
Intermediate Care Facilities - Supplemental Payments	-	-	-	-	-	-
Physicians Services - Regular Payments	143,420,126	125,926,808	12,379,127	10,078,000	104,727,343	21,199,466
Physicians Services - Supplemental Payments ***	-	22,755,000	6,985,685	5,689,000	41,046,663	(18,291,663)
Outpatient Hospital Services - Regular Payments	120,824,371	118,191,964	8,599,441	9,864,000	79,390,731	38,801,233
Outpatient Hospital Services - Supplemental Payments	-	-	-	-	-	-
Prescribed Drugs	341,993,862	367,593,429	33,397,686	30,878,000	279,332,304	88,261,125
Drug Rebate Offset - National Agreement	(130,951,220)	(126,794,904)	(29,085,687)	(10,566,000)	(135,646,504)	8,851,600
Drug Rebate Offset - State Sidebar Agreement	(30,810,728)	(30,333,852)	(5,289,452)	(2,528,000)	(21,295,248)	(9,038,407)
Dental Services	40,350,098	48,900,576	4,199,592	4,082,000	37,215,656	11,684,920
Other Practitioners Services - Regular Payments	22,381,183	7,815,652	1,177,107	698,000	10,020,953	(2,205,301)
Other Practitioners Services - Supplemental Payments ***	-	-	-	-	-	-
Clinic Services	39,855,489	14,837,984	321,773	1,247,000	3,925,240	10,912,744
Lab & Radiological Services	10,177,238	10,836,738	1,306,659	923,000	9,833,420	1,003,318
Home Health Services	32,681,694	35,989,518	3,751,468	3,035,000	33,136,378	2,851,141
Hysterectomies/Sterilizations	516,259	574,054	21,810	48,000	197,414	376,640
Pregnancy Terminations	-	-	-	-	-	-
EPSDT Services	2,247,631	2,599,669	140,327	217,000	1,536,935	1,062,734
Rural Health Clinic Services	7,793,506	8,537,239	731,689	716,000	7,034,446	1,502,792
Medicare Health Insurance Payments - Part A Premiums	14,821,458	19,088,436	1,433,602	1,591,000	14,335,465	4,752,971
Medicare Health Insurance Payments - Part B Premiums	70,371,344	77,246,842	6,887,286	6,424,000	62,358,920	14,887,922
120% - 134% Of Poverty	4,405,674	5,101,770	443,326	432,000	4,293,662	808,108
135% - 175% Of Poverty	-	-	-	-	-	-
Coinsurance And Deductibles	-	-	817,938	-	6,018,607	(6,018,607)
Medicaid Health Insurance Payments: Managed Care Organizations (MCO)	294,697,012	265,059,331	29,013,330	22,088,000	279,346,871	(14,267,539)
Medicaid Health Insurance Payments: Prepaid Ambulatory Health Plan	-	-	-	-	-	-
Medicaid Health Insurance Payments: Prepaid Inpatient Health Plan	-	-	-	-	-	-
Medicaid Health Insurance Payments: Group Health Plan Payments	393,790	415,852	38,715	35,000	368,733	47,119
Medicaid Health Insurance Payments: Coinsurance	-	-	-	-	-	-
Medicaid Health Insurance Payments: Other	-	-	-	-	-	-
Home & Community-Based Services (MR/DD)	233,468,853	258,920,094	22,077,410	21,411,000	205,011,678	51,908,416
Home & Community-Based Services (Aged/Disabled)	80,034,343	89,794,000	8,541,278	7,483,000	78,522,442	11,271,558

MONTH OF APRIL 2010	ACTUALS	TOTAL	ACTUALS	ESTIMATED	ACTUALS	PROJECTED
	SFY2009	SFY2010	Current Month Apr-10	Current Month Apr-10	Year To-Date Thru 4/30/10	5/1/10 Thru 06/30/10
EXPENDITURES:						
Home & Community-Based Services (State Plan 1915(i) Only)	-	-	-	-	-	-
Home & Community-Based Services (State Plan 1915(j) Only)	-	-	-	-	-	-
Community Supported Living Services	-	-	-	-	-	-
Programs Of All-Inclusive Care Elderly	-	-	-	-	-	-
Personal Care Services - Regular Payments	37,675,865	42,577,777	3,761,120	3,550,000	34,474,202	8,103,575
Personal Care Services - SDS 1915(j)	-	-	-	-	-	-
Targeted Case Management Services - Com. Case Management	-	0	-	-	-	0
Targeted Case Management Services - Institutional Transitioning	-	-	-	-	-	-
Targeted Case Management Services - State Wide	4,309,095	5,611,539	308,299	472,000	3,206,585	2,404,954
Primary Care Case Management Services	609,744	691,427	28,695	56,000	344,778	346,649
Hospice Benefits	14,499,070	15,246,730	1,838,318	1,271,000	14,128,697	1,118,033
Emergency Services Undocumented Aliens	59,318	-	12,384	-	135,240	(135,240)
Federally Qualified Health Center	16,761,540	20,208,125	1,499,632	1,693,000	15,451,641	4,754,484
Non-Emergency Medical Transportation	-	4,502,000	1,880,882	375,000	5,701,648	(1,199,648)
Physical Therapy	-	2,076,000	191,170	173,000	1,547,177	528,823
Occupational Therapy	-	656,000	18,090	55,000	170,750	485,250
Services for Speech, Hearing & Language	-	504,000	21,356	42,000	244,192	259,808
Prosthetic Devices, Dentures, Eyeglasses	-	680,000	170,903	57,000	1,602,881	(922,881)
Diagnostic Screening & Preventive Services	-	-	40,890	-	302,378	(302,378)
Nurse Mid-Wife	-	-	27,919	-	300,043	(300,043)
Emergency Hospital Services	-	-	894,840	-	7,649,609	(7,649,609)
Critical Access Hospitals	-	5,507,000	2,815,115	459,000	22,359,150	(16,852,150)
Nurse Practitioner Services	-	1,550,000	123,550	129,000	896,714	653,286
School Based Services	-	44,095,000	6,865,201	3,674,000	43,528,139	566,861
Rehabilitative Services (Non-School Based)	-	64,792,000	6,565,688	5,399,000	62,289,519	2,522,481
Private Duty Nursing	-	3,119,000	332,826	260,000	2,676,815	442,185
Other Care Services	128,150,532	51,022,601	1,856,232	4,362,000	30,313,158	20,709,442
Less: Recoupments	-	-	(119,055)	-	(119,055)	119,055
NET EXPENDITURES:	2,410,196,304	2,514,532,515	212,049,857	202,682,000	2,113,911,062	400,621,454
Collections: Third Party Liability (line 9A on CMS-64)	(8,038,342)				(5,207,838)	5,207,838
Collections: Probate (line 9B on CMS-64)	(122,220)				(145,347)	145,347
Collections: Identified through Fraud & Abuse Effort (line 9C on CMS-64)	(13,769)				(1,188)	1,188
Collections: Other (line 9D on CMS-64)	(5,509,009)				(2,641,676)	2,641,676
NET EXPENDITURES and CMS-64 ADJUSTMENTS:	2,398,512,964	2,514,532,515	212,049,857	202,682,000	2,105,915,013	406,617,503
Plus: Medicaid Part D Expenditures	27,747,652	31,999,237	-	3,076,850	23,936,817	8,062,420
Plus: State Only Medicaid Expenditures ***	4,583,431	3,848,891	835,155	381,934	5,268,257	(1,421,367)
TOTAL MEDICAID EXPENDITURES	2,430,844,047	\$2,550,378,643	\$212,885,011	206,120,784	\$2,135,120,086	\$415,258,556
Plus: Reimbursables (1)	4,329,882	4,787,564	584,179	419,581	4,635,439	152,125
TOTAL EXPENDITURES	\$2,435,173,930	\$2,555,166,207	\$213,469,191	206,540,365	\$2,139,755,525	\$415,410,681

(1) This amount will revert to State Only if not reimbursed.

*** CMS is currently reviewing portions of these payments. Until review is completed these expenses will be classified as state-only on the CMS-64. With all outside reviews, there is a potential for a portion of these costs to remain state-only if any of them are disallowed.

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR MEDICAL SERVICES
MEDICAID CASH REPORT
SFY2010

10 Months Actuals 2 Months Remaining

MONTH OF APRIL 2010	ACTUALS	ACTUALS	ACTUALS	PROJECTED	TOTAL
	SFY2009	Current Month Ended 4/30/10	Year-To-Date Thru 4/30/10	5/1/2010 Thru 6/30/10	SFY2010
REVENUE SOURCES					
Beg. Bal. (5084/1020 prior mth)	34,933,055	142,218,083	\$116,583,948		\$116,583,948
MATCHING FUNDS					
General Revenue (0403/189)	393,705,687	30,892,934	190,559,337	76,756,231	267,315,568
MRDD Waiver (0403/466)	-	8,838,883	62,675,717	17,677,766	80,353,483
Rural Hospitals Under 150 Beds (0403/940)	2,596,000	216,334	2,163,334	432,666	2,596,000
Tertiary Funding (0403/547)	4,856,000	529,667	5,296,667	1,059,333	6,356,000
Lottery Waiver (Less 550,000) (5405/539)	23,272,578	900,000	22,772,578	500,000	23,272,578
Lottery Transfer (5405/871)	10,300,000		7,500,000	1,170,000	8,670,000
Trust Fund Appropriation (5185/189)	19,784,219		0	30,556,594	30,556,594
Provider Tax (5090/189)	165,400,000	12,695,673	131,359,320	33,298,970	164,658,290
Certified Match	19,399,722	1,568,737	11,573,388	4,256,954	15,830,340
Reimbursables - Amount Reimbursed	4,348,906	787,949	4,367,951	419,613	4,787,564
Other Revenue (MWIN, Escheated Warrants, etc.) 5084/4010 & 4015	428,344	51,232	(561,517)	561,517	0
CMS - 64 Adjustments	1,098,690		(210,128)	210,128	0
TOTAL MATCHING FUNDS	680,123,202	\$198,699,492	\$554,080,593	\$166,899,772	\$720,980,365
FEDERAL FUNDS	1,874,489,691	175,431,040	1,747,585,008	\$342,206,962	\$2,089,791,970
TOTAL REVENUE SOURCES	2,554,612,893	\$374,130,532	\$2,301,665,601	\$509,106,734	\$2,810,772,335
TOTAL EXPENDITURES:					
Provider Payments	2,435,173,930	\$213,469,191	2,139,755,525	\$415,410,681	\$2,555,166,207
TOTAL	119,438,964	\$160,661,341	\$161,910,076	\$94,716,053	\$255,606,128

Note: FMAP (09' - 83.05% applicable July - Sept. 2009) (10' - 83.05% applicable Oct. 2009 - June 2010)
 (1) This amount will revert to State Only if not reimbursed.