

**Joint Committee on Government and Finance**

**September 2010**

**Department of Health and Human Resources**

**MEDICAID REPORT**

**June 2010 Data**

**Legislative Oversight Commission on  
Health and Human Resources Accountability**

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**MEDICAID REPORT**

June 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 JUNE 2010		ACTUALS	TOTAL	ACTUALS	ESTIMATES	ACTUALS	Difference
	SFY2009	SFY2010	Current Month Jun-10	Current Month Jun-10	Year To-Date Thru 6/30/10	Budget vs Actual		
<b>EXPENDITURES:</b>								
Inpatient Hospital - Reg. Payments	260,946,991	127,598,926	12,374,816	10,645,000	201,336,088	(73,737,142)		
Inpatient Hospital - DSH	54,483,945	55,411,679	-	-	54,952,962	458,717		
Inpatient Hospital - Supplemental Payments	-	114,140,000	12,827,219	28,535,000	34,034,919	80,105,081		
Inpatient Hospital - GME Payments	-	4,073,000	-	-	4,919,343	(846,343)		
Mental Health Facilities	47,960,442	55,718,940	5,490,708	4,647,000	70,562,795	(14,843,855)		
Mental Health Facilities - DSH Adjustment Payments	18,798,469	19,055,754	-	-	18,887,045	168,709		
Nursing Facility Services - Regular Payments	464,023,240	491,237,896	40,061,468	40,930,000	473,417,699	17,820,197		
Nursing Facility Services - Supplemental Payments	-	-	-	-	-	-		
Intermediate Care Facilities - Public Providers	-	-	-	-	-	-		
Intermediate Care Facilities - Private Providers	63,246,071	63,402,719	4,687,924	5,284,000	62,994,030	408,689		
Intermediate Care Facilities - Supplemental Payments	-	-	-	-	-	-		
Physicians Services - Regular Payments	143,420,126	125,926,808	8,196,840	10,078,000	123,304,796	2,622,013		
Physicians Services - Supplemental Payments ***	-	22,755,000	-	-	41,046,663	(18,291,663)		
Outpatient Hospital Services - Regular Payments	120,824,371	118,191,964	6,845,184	9,864,000	94,151,985	24,039,979		
Outpatient Hospital Services - Supplemental Payments	-	-	-	-	-	-		
Prescribed Drugs	341,993,862	367,593,429	21,785,884	30,878,000	331,598,210	35,995,219		
Drug Rebate Offset - National Agreement	(130,951,220)	(126,794,904)	(9,675,283)	(10,566,000)	(147,836,758)	21,041,852		
Drug Rebate Offset - State Sidebar Agreement	(30,810,728)	(30,333,652)	(161,474)	(2,528,000)	(21,780,467)	(8,553,186)		
Dental Services	40,350,098	48,900,576	6,095,419	4,082,000	46,298,195	2,602,381		
Other Practitioners Services - Regular Payments	22,381,183	7,815,652	880,555	698,000	11,984,879	(4,169,227)		
Other Practitioners Services - Supplemental Payments ***	-	-	-	-	-	-		
Clinic Services	39,855,489	14,837,984	582,383	1,247,000	5,282,952	9,555,032		
Lab & Radiological Services	10,177,238	10,836,738	1,591,237	923,000	13,245,278	(2,408,540)		
Home Health Services	32,681,694	35,989,518	2,312,259	3,035,000	39,499,122	(3,509,603)		
Hysterectomies/Sterilizations	516,259	574,054	10,378	48,000	224,665	349,389		
Pregnancy Terminations	-	-	-	-	-	-		
EPSDT Services	2,247,631	2,599,669	84,033	217,000	1,732,388	867,281		
Rural Health Clinic Services	7,793,506	8,537,239	687,966	716,000	8,316,602	220,636		
Medicare Health Insurance Payments - Part A Premiums	14,821,458	19,088,436	1,448,813	1,591,000	17,241,148	1,847,288		
Medicare Health Insurance Payments - Part B Premiums	70,371,344	77,246,842	7,025,628	6,424,000	76,342,310	904,532		
120% - 134% Of Poverty	4,405,674	5,101,770	496,477	432,000	5,258,770	(157,000)		
135% - 175% Of Poverty	-	-	-	-	-	-		
Coinsurance And Deductibles	-	-	484,558	-	7,148,856	(7,148,856)		
Medicaid Health Insurance Payments: Managed Care Organizations (MCO)	294,697,012	265,059,331	27,060,744	22,088,000	330,654,486	(65,595,154)		
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	71,337	35,000	440,070	(24,218)		
Medicaid Health Insurance Payments: Coinsurance	-	-	-	-	-	-		

MONTH OF JUNE 2010	ACTUALS	TOTAL	ACTUALS	ESTIMATES	ACTUALS	Difference
	SFY2009	SFY2010	Current Month Jun-10	Current Month Jun-10	Year To-Date Thru 6/30/10	Budget vs Actual
Medicaid Health Insurance Payments: Other	-	-	-	-	-	-
Home & Community-Based Services (MR/DD)	233,468,853	256,920,094	19,957,058	22,123,000	245,352,486	11,567,608
Home & Community-Based Services (Aged/Disabled)	80,034,343	89,794,000	6,747,380	6,771,000	92,376,723	(2,582,723)
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	3,473,441	3,550,000	41,133,119	1,444,658
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	5,811,539	306,418	472,000	3,849,231	1,762,308
Primary Care Case Management Services	609,744	691,427	28,194	58,000	401,643	289,784
Hospice Benefits	14,499,070	15,246,730	1,709,061	1,271,000	17,627,752	(2,381,022)
Emergency Services Undocumented Allens	59,318	-	540	-	159,722	(159,722)
Federally Qualified Health Center	16,761,540	20,206,125	1,171,721	1,693,000	18,151,763	2,054,362
Non-Emergency Medical Transportation	-	4,502,000	1,762,933	375,000	9,410,142	(4,908,142)
Physical Therapy	-	2,076,000	155,988	173,000	1,883,973	192,027
Occupational Therapy	-	656,000	11,889	55,000	200,012	455,988
Services for Speech, Hearing & Language	-	504,000	16,095	42,000	281,219	222,781
Prosthetic Devices, Dentures, Eyeglasses	-	680,000	125,920	57,000	1,871,185	(1,191,185)
Diagnostic Screening & Preventive Services	-	-	32,523	-	373,901	(373,901)
Nurse Mid-Wife	-	-	13,874	-	336,875	(336,875)
Emergency Hospital Services	-	-	761,431	-	9,259,934	(9,259,934)
Critical Access Hospitals	-	5,507,000	798,122	459,000	26,262,098	(20,755,098)
Nurse Practitioner Services	-	1,550,000	81,609	129,000	1,087,368	462,632
School Based Services	-	44,095,000	5,078,127	3,674,000	53,754,209	(9,659,209)
Rehabilitative Services (Non-School Based)	-	64,792,000	5,351,355	5,399,000	74,166,286	(9,374,286)
Private Duty Nursing	-	3,119,000	217,445	280,000	3,281,647	(162,647)
Other Care Services	128,150,532	51,022,601	1,373,611	4,362,000	33,683,953	17,338,647
Less: Recoupments	-	-	(342,707)	-	(535,417)	535,417
<b>NET EXPENDITURES:</b>	<b>2,410,196,304</b>	<b>2,514,532,515</b>	<b>200,097,121</b>	<b>220,226,000</b>	<b>2,539,628,836</b>	<b>(25,096,321)</b>
Collections: Third Party Liability (line 9A on CMS-64)	(6,038,342)				(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
<b>NET EXPENDITURES and CMS-64 ADJUSTMENTS:</b>	<b>2,398,512,984</b>	<b>2,514,532,515</b>	<b>200,097,121</b>	<b>220,226,000</b>	<b>2,531,632,787</b>	<b>(17,100,272)</b>
Plus: Medicaid Part D Expenditures	27,747,652	31,999,237	-	2,461,480	23,936,817	8,062,420
Plus: State Only Medicaid Expenditures ***	4,583,431	3,846,891	389,964	289,548	6,078,436	(2,231,546)
<b>TOTAL MEDICAID EXPENDITURES</b>	<b>2,430,844,047</b>	<b>\$2,550,378,643</b>	<b>\$200,487,085</b>	<b>\$222,977,028</b>	<b>\$2,561,648,040</b>	<b>(\$11,269,397)</b>
Plus: Reimbursables <sup>(1)</sup>	4,329,882	4,787,564	440,007	335,665	5,579,968	(792,404)
<b>TOTAL EXPENDITURES</b>	<b>\$2,435,173,930</b>	<b>\$2,555,166,207</b>	<b>\$200,927,093</b>	<b>\$223,312,693</b>	<b>\$2,567,228,008</b>	<b>(\$12,061,801)</b>

(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

12 Months Actuals      0 Months Remaining

MONTH OF JUNE 2010	ACTUALS	ACTUALS	ACTUALS	Difference	TOTAL
	SFY2009	Current Month Ended 6/30/10	Year-To-Date Thru 6/30/10	Budget vs Actual	SFY2010
<b>REVENUE SOURCES</b>					
Beg. Bal. (5084/1020 prior mth)	34,933,055	185,332,472	\$116,583,948		\$116,583,948
<b>MATCHING FUNDS</b>	-				
General Revenue (0403/189)	393,705,687	30,892,933	252,345,204	14,970,364	267,315,568
MRDD Waiver (0403/466)	-	8,838,883	80,353,483	0	80,353,483
Rural Hospitals Under 150 Beds (0403/940)	2,596,000	216,333	2,596,000	0	2,596,000
Tertiary Funding (0403/547)	4,856,000	529,666	6,356,000	0	6,356,000
Lottery Waiver (Less 550,000) (5405/539)	23,272,578		25,772,578	-2,500,000	23,272,578
Lottery Transfer (5405/871)	10,300,000		8,670,000	0	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	14,222,005	162,659,512	1,998,778	164,658,290
Certified Match	19,399,722	1,237,070	14,058,468	1,771,872	15,830,340
Reimbursables - Amount Reimbursed	4,348,906	791,840	5,195,782	-408,219	4,787,564
Other Revenue (MWIN, Escheated Warrants, etc.) 5084/4010 & 4015	428,344	63,685	(446,371)	446,371	0
CMS - 64 Adjustments	1,098,690		(210,128)	210,128	0
<b>TOTAL MATCHING FUNDS</b>	680,123,202	\$242,124,888	\$673,934,477	\$47,045,888	\$720,980,365
<b>FEDERAL FUNDS</b>	1,874,489,691	172,589,069	2,108,528,674	-\$18,736,704	\$2,089,791,970
<b>TOTAL REVENUE SOURCES</b>	<b>2,554,612,893</b>	<b>\$414,713,957</b>	<b>\$2,782,463,151</b>	<b>\$28,309,184</b>	<b>\$2,810,772,335</b>
<b>TOTAL EXPENDITURES:</b>					
Provider Payments	2,435,173,930	\$200,927,093	\$2,567,228,008	-\$12,061,801	\$2,555,166,207
<b>TOTAL</b>	<b>119,438,964</b>	<b>\$213,786,864</b>	<b>\$215,235,143</b>		<b>\$255,606,128</b>

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.