

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

**August 2011**

**Department of Health and Human Resources**

**MEDICAID REPORT**

**June 2011 Data**

**Joint Committee on Government and Finance**

**August 2011**

**Department of Health and Human Resources**

**MEDICAID REPORT**

**June 2011 Data**

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
 BUREAU FOR MEDICAL SERVICES  
 EXPENDITURES BY PROVIDER TYPE  
 SFY2011

	MONTH OF JUNE 2011		ACTUALS	TOTAL	ACTUALS	ESTIMATED	ACTUALS	DIFFERENCE
	SFY2010	SFY2011	SFY2010	SFY2011	Current Month 06/30/11	Current Month 06/30/11	Year To-Date Thru 06/30/11	Budget Versus Actual
<b>EXPENDITURES:</b>								
Inpatient Hospital - Reg. Payments	204,310,562	166,827,456	13,885,850	15,330,812	162,313,939	4,513,517		
Inpatient Hospital - DSH	54,952,962	54,818,400	-	-	54,802,728	215,672		
Inpatient Hospital - Supplemental Payments	34,034,919	134,060,573	20,910,660	25,981,075	150,374,918	(16,314,345)		
Inpatient Hospital - GME Payments	4,919,343	4,607,200	-	-	5,178,062	(370,862)		
Mental Health Facilities	70,573,546	72,945,200	7,788,853	6,908,370	82,046,487	(9,101,287)		
Mental Health Facilities - DSH Adjustment Payments	18,887,045	18,886,800	-	-	18,870,766	16,034		
Nursing Facility Services - Regular Payments	473,726,322	497,679,618	43,128,921	41,117,817	497,435,114	244,504		
Nursing Facility Services - Supplemental Payments	-	-	-	-	-	-		
Intermediate Care Facilities - Public Providers	-	-	-	-	-	-		
Intermediate Care Facilities - Private Providers	63,010,181	69,762,500	5,155,356	5,813,542	62,295,510	7,466,990		
Intermediate Care Facilities - Supplemental Payments	-	-	-	-	-	-		
Physicians Services - Regular Payments	123,410,076	120,936,363	10,833,241	11,125,548	120,817,110	119,253		
Physicians Services - Supplemental Payments ***	41,046,663	38,978,300	-	-	28,779,948	10,198,352		
Outpatient Hospital Services - Regular Payments	94,162,911	93,716,036	10,535,822	8,591,432	104,865,866	(11,149,850)		
Outpatient Hospital Services - Supplemental Payments	-	-	-	-	-	-		
Prescribed Drugs	331,666,990	353,656,332	34,898,483	34,362,327	355,892,177	(2,235,845)		
Drug Rebate Offset - National Agreement	(147,827,304)	(143,274,400)	(3,378,012)	(13,671,625)	(177,670,225)	34,395,825		
Drug Rebate Offset - State Sidebar Agreement	(21,789,229)	(25,384,200)	(55,022)	(2,422,228)	(18,626,200)	(6,758,000)		
Dental Services	46,303,517	30,286,031	4,958,973	2,888,727	65,108,957	(34,820,926)		
Other Practitioners Services - Regular Payments	11,985,027	12,806,481	1,129,501	1,250,803	11,296,091	1,510,390		
Other Practitioners Services - Supplemental Payments ***	-	-	-	-	-	-		
Clinic Services	5,282,996	4,360,661	591,728	421,885	5,014,428	(653,767)		
Lab & Radiological Services	13,249,742	11,820,236	2,276,193	1,142,536	23,031,162	(11,110,926)		
Home Health Services	39,552,721	37,958,821	4,728,781	3,511,549	44,201,346	(6,242,525)		
Hysterectomies/Sterilizations	224,665	269,962	23,361	25,136	202,721	67,241		
Pregnancy Terminations	-	-	-	-	-	-		
EPSDT Services	1,732,388	2,125,595	111,818	202,669	1,393,791	731,804		
Rural Health Clinic Services	8,319,048	7,337,074	724,731	676,945	7,937,996	(600,922)		
Medicare Health Insurance Payments - Part A Premiums	17,241,148	19,323,600	1,433,413	3,053,933	17,589,540	734,060		
Medicare Health Insurance Payments - Part B Premiums	76,342,310	83,414,100	7,583,747	13,902,350	86,800,107	(3,386,007)		
120% - 134% Of Poverty	5,258,770	-	558,641	-	6,412,164	(6,412,164)		
135% - 175% Of Poverty	-	-	-	-	-	-		
Coinsurance And Deductibles	7,148,856	8,110,300	711,784	779,837	7,200,103	910,197		
Medicaid Health Insurance Payments: Managed Care Organizations (MCO)	330,652,405	417,884,801	27,896,227	37,290,421	331,342,905	86,541,895		
Medicaid Health Insurance Payments: Prepaid Ambulatory Health Plan	-	-	-	-	-	-		
Medicaid Health Insurance Payments: Prepaid Inpatient Health Plan	-	-	-	-	-	-		
Medicaid Health Insurance Payments: Group Health Plan Payments	440,070	461,500	73,862	44,375	430,840	30,660		
Medicaid Health Insurance Payments: Coinsurance	-	-	-	-	-	-		
Medicaid Health Insurance Payments: Other	-	-	-	-	22,935	(22,935)		
Home & Community-Based Services (MR/DD)	245,353,151	272,425,167	23,339,590	26,194,728	250,139,400	22,285,767		
Home & Community-Based Services (Aged/Disabled)	92,398,537	109,519,287	10,188,249	10,530,701	105,382,336	4,136,949		
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	41,252,661	43,764,529	3,926,669	4,218,635	43,261,258	503,270		
Personal Care Services - SDS 1915(j)	-	-	-	409,058	-	-		
Targeted Case Management Services - Com. Case Management	-	-	-	-	-	-		
Targeted Case Management Services - State Wide	3,849,231	4,298,443	327,998	-	3,683,372	615,070		

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
 BUREAU FOR MEDICAL SERVICES  
 EXPENDITURES BY PROVIDER TYPE  
 SFY2011

	MONTH OF JUNE 2011					
	ACTUALS SFY2010	TOTAL SFY2011	ACTUALS Current Month 06/30/11	ESTIMATED Current Month 06/30/11	ACTUALS Year To-Date Thru 06/30/11	DIFFERENCE Budget Versus Actual
Primary Care Case Management Services	401,843	543,100	24,333	52,221	311,397	231,703
Hospice Benefits	17,828,513	16,010,005	2,454,797	1,515,650	23,029,094	(7,019,089)
Emergency Services Undocumented Aliens	159,722	230,700	32,023	22,183	250,549	(19,849)
Federally Qualified Health Center	18,187,657	19,548,542	1,579,166	1,837,620	17,061,605	2,486,937
Non-Emergency Medical Transportation	9,410,142	5,606,896	1,821,331	541,308	22,846,997	(17,240,101)
Physical Therapy	1,884,062	1,884,156	209,190	171,092	1,950,631	(66,475)
Occupational Therapy	200,012	187,031	31,991	17,077	259,351	(71,720)
Services for Speech, Hearing & Language	281,219	300,101	48,971	27,959	322,095	(21,994)
Prosthetic Devices, Dentures, Eyeglasses	1,871,774	1,892,499	188,289	175,369	1,749,819	142,880
Diagnostic Screening & Preventive Services	373,901	366,118	52,682	33,825	506,980	(140,882)
Nurse Mid-Wife	338,875	435,890	20,928	41,456	241,124	194,766
Emergency Hospital Services	9,259,934	9,130,131	(7,881)	836,700	1,340,493	7,789,638
Critical Access Hospitals	26,282,186	25,626,567	3,020,584	2,344,995	31,130,701	(5,504,133)
Nurse Practitioner Services	1,087,368	1,025,679	130,667	93,715	1,296,506	(270,827)
School Based Services	51,825,905	49,265,728	5,850,455	4,740,337	56,963,314	(7,697,586)
Rehabilitative Services (Non-School Based)	74,166,286	75,742,323	8,120,165	6,271,935	76,039,459	(297,138)
Private Duty Nursing	3,281,647	2,903,648	503,851	266,208	4,856,304	(1,952,656)
Other Care Services	33,718,524	19,864,624	1,887,341	1,813,017	20,936,578	(1,071,952)
Less: Recoupments	-	-	(134,858)	-	(248,948)	248,948
<b>NET EXPENDITURES:</b>	<b>2,542,009,600</b>	<b>2,754,227,102</b>	<b>259,919,423</b>	<b>260,504,025</b>	<b>2,718,471,524</b>	<b>35,755,578</b>
Collections: Third Party Liability (line 9A on CMS-64)	(8,100,072)	-	-	-	(7,677,332)	7,677,332
Collections: Probate (line 9B on CMS-64)	(190,018)	-	-	-	(53,381)	53,381
Collections: Identified through Fraud & Abuse Effort (line 9C on CMS-64)	(1,584)	-	-	-	(396)	396
Collections: Other (line 9D on CMS-64)	(3,703,645)	-	-	-	(6,568,546)	6,568,546
<b>NET EXPENDITURES and CMS-64 ADJUSTMENTS:</b>	<b>2,530,054,281</b>	<b>2,754,227,102</b>	<b>259,919,423</b>	<b>260,504,025</b>	<b>2,704,171,869</b>	<b>50,055,233</b>
Plus: Medicaid Part D Expenditures	23,838,817	25,863,823	2,278,084	2,215,700	18,156,396	7,707,227
Plus: State Only Medicaid Expenditures ***	6,078,436	4,629,603	453,763	423,457	4,750,829	(121,226)
<b>TOTAL MEDICAID EXPENDITURES</b>	<b>2,560,069,534</b>	<b>\$2,784,720,328</b>	<b>\$262,651,270</b>	<b>263,143,182</b>	<b>\$2,727,079,093</b>	<b>\$57,641,235</b>
Plus: Reimbursables (1)	5,579,968	6,129,005	524,433	574,979	5,304,734	824,271
<b>TOTAL EXPENDITURES</b>	<b>\$2,565,649,502</b>	<b>\$2,790,849,333</b>	<b>\$263,175,703</b>	<b>263,718,161</b>	<b>\$2,732,383,827</b>	<b>\$58,465,506</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  
 SFY2011

12 Months Actuals      0 Months Remaining

**MONTH OF JUNE 2011**

**REVENUE SOURCES**

Beg. Bal. (5084/1020 prior mth)

**MATCHING FUNDS**

General Revenue (0403/189)

MRDD Waiver (0403/466)

Rural Hospitals Under 150 Beds (0403/940)

Tertiary Funding (0403/547)

Title XIX Waiver for Seniors (0403-533)

Lottery Waiver (Less 550,000) (5405/539)

Lottery Transfer (5405/871)

Trust Fund Appropriation (5185/189)

Provider Tax (5090/189)

Certified Match

Reimbursables - Amount Reimbursed

Other Revenue (MWIN, Escheated Warrants, etc.) 5084/4010 & 4015

CMS - 64 Adjustments

**TOTAL MATCHING FUNDS**

**FEDERAL FUNDS**

**TOTAL REVENUE SOURCES**

**TOTAL EXPENDITURES:**

Provider Payments

**TOTAL**

	ACTUALS SFY2010	ACTUALS Current Month Ended 6/30/11	ACTUALS Year-To-Date Thru 6/30/11	DIFFERENCE Budget vs Actual	TOTAL SFY2011
Beg. Bal. (5084/1020 prior mth)	116,583,948	204,991,448	\$213,690,990		\$213,690,990
<b>MATCHING FUNDS</b>					
General Revenue (0403/189)	252,345,204	26,864,659	222,471,412	4,000,000	226,471,412
MRDD Waiver (0403/466)	-	9,652,883	87,753,483	0	87,753,483
Rural Hospitals Under 150 Beds (0403/940)	2,596,000	0	2,596,000	0	2,596,000
Tertiary Funding (0403/547)	6,356,000	0	6,356,000	0	6,356,000
Title XIX Waiver for Seniors (0403-533)	-	825,000	7,500,000	0	7,500,000
Lottery Waiver (Less 550,000) (5405/539)	25,772,578	0	23,272,578	8,000,000	31,272,578
Lottery Transfer (5405/871)	8,670,000	0	16,670,000	-8,000,000	8,670,000
Trust Fund Appropriation (5185/189)	-	0	0	30,556,594	30,556,594
Provider Tax (5090/189)	162,659,512	25,615,929	152,750,473	104,422	152,854,895
Certified Match	13,731,424	1,852,616	17,106,226	-634,512	16,471,714
Reimbursables - Amount Reimbursed	5,195,782	160,490	3,688,478	2,440,527	6,129,005
Other Revenue (MWIN, Escheated Warrants, etc.) 5084/4010 & 4015	(446,371)	67,433	712,458	(712,458)	0
CMS - 64 Adjustments	69,986		849,016	-849,016	0
<b>TOTAL MATCHING FUNDS</b>	673,887,546	\$270,030,457	\$755,417,114	\$34,905,557	\$790,322,671
<b>FEDERAL FUNDS</b>	2,108,528,674	204,181,260	2,191,395,795	\$44,111,298	\$2,235,507,093
<b>TOTAL REVENUE SOURCES</b>	<b>2,782,416,220</b>	<b>\$474,211,717</b>	<b>\$2,946,812,909</b>	<b>\$79,016,855</b>	<b>\$3,025,829,764</b>
<b>TOTAL EXPENDITURES:</b>					
Provider Payments	2,565,649,502	\$263,175,703	\$2,732,383,827	\$58,465,506	\$2,790,849,333
<b>TOTAL</b>	<b>216,766,718</b>	<b>\$211,036,015</b>	<b>\$214,429,082</b>		<b>\$234,980,431</b>

Note: FMAP (83.05% applicable July - Dec. 2010) (80.05% applicable Jan. 2011 - Mar. 2011) (78.05% applicable Apr. 2011 - Jun. 2011)