

Revised: October 8, 2007

Legislative Oversight Commission on
Health and Human Resources Accountability

OCTOBER 2007

Department of Health and Human Resources

MEDICAID REPORT

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR MEDICAL SERVICES
SFY 2007 MEDICAID CASH REPORT
AS OF SEPTEMBER 26, 2007

DESCRIPTION	ACTUALS	PROJECTED
	SFY2007 To Date	SFY2007
REVENUE SOURCES		
Beg. Bal. 7/01/06 (5084/1020 prior mth)	\$22,969,601	\$22,969,601
MATCHING FUNDS		
Medical Services	394,405,687	394,405,687
Rural Hospitals Under 150 Beds (0403/940)	2,596,000	2,596,000
Tertiary Funding (0403/547)	3,356,000	3,356,000
Lottery Waiver (Less 450,000) (5405/539)	12,550,000	12,550,000
Lottery Transfer (5405/871)	10,300,000	10,300,000
Trust Fund Appropriation (5185/189)	0	30,556,594
Provider Tax (5090/189)	157,259,353	155,600,000
Certified Match	21,036,252	22,881,010
Reimbursables ⁽¹⁾	3,996,057	5,099,481
CMS - 64 Adjustments	(2,423,890)	0
TOTAL MATCHING FUNDS	\$626,045,060	\$660,314,373
FEDERAL FUNDS	\$1,562,997,558	\$1,645,670,917
TOTAL REVENUE SOURCES	\$2,189,042,618	\$2,305,985,290
TOTAL EXPENDITURES:		
Provider Payments	\$2,162,476,230	\$2,218,560,229
TOTAL	\$26,566,388	\$87,425,061

Note: Proj. FMAP (06' - 72.99% applicable July - Sept. 2006) (07' - 72.82% applicable Oct. 2006 - June 2007)

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

**WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR MEDICAL SERVICES
SFY 2007 EXPENDITURES BY PROVIDER TYPE
AS OF SEPTEMBER 26, 2007**

DESCRIPTION	TOTAL	ESTIMATED	ACTUALS
	SFY 2006	SFY 2007	SFY 2007 To-Date
EXPENDITURES:			
Inpatient Hospital Services	223,854,909	248,593,096	226,282,408
Inpatient Hospital Services - DSH Adjustment Payments	53,916,150	53,935,110	54,096,937
Mental Health Facilities	36,085,565	42,090,761	40,250,781
Mental Health Facilities - DSH Adjustment Payments	20,354,226	18,887,045	18,924,239
Nursing Facility Services	402,903,863	416,786,290	413,063,985
Intermediate Care Facilities - Public Providers	160	-	-
Intermediate Care Facilities - Private Providers	53,642,336	59,538,870	58,706,822
Physicians Services	126,950,184	117,945,021	128,612,962
Outpatient Hospital Services	93,921,521	103,013,506	98,279,923
Prescribed Drugs	378,095,030	310,458,195	305,342,895
Drug Rebate Offset - National Agreement	(112,878,531)	(116,033,400)	(93,163,811)
Drug Rebate Offset - State Sidebar Agreement	(29,528,976)	(29,276,640)	(31,467,242)
Dental Services	38,320,543	40,972,725	37,032,509
Other Practitioners Services	20,069,824	21,174,205	20,319,941
Clinic Services	46,750,545	37,478,034	38,178,813
Lab & Radiological Services	13,045,112	13,892,145	7,948,506
Home Health Services	26,490,072	27,896,140	27,688,972
Hysterectomies/Sterilizations	682,237	693,464	571,881
Pregnancy Terminations	-	39,092	-
EPSDT Services	3,450,995	10,881,433	2,458,929
Rural Health Clinic Services	7,652,987	7,621,694	6,602,490
Medicare Health Insurance Payments - Part A Premiums	17,903,197	17,191,600	16,768,356
Medicare Health Insurance Payments - Part B Premiums	61,584,326	64,000,000	62,881,209
120% - 134% Of Poverty	2,861,904	-	3,492,445
Medicaid Health Insurance Payments: Managed Care Organizations (MCO)	213,950,846	241,784,020	241,130,268
Medicaid Health Insurance Payments: Group Health Plan Payments	289,548	346,380	360,065
Home & Community-Based Services (MR/DD)	185,607,767	207,361,030	200,535,722
Home & Community-Based Services (Aged/Disabled)	60,658,000	59,874,724	56,417,341

WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR MEDICAL SERVICES
SFY 2007 EXPENDITURES BY PROVIDER TYPE
AS OF SEPTEMBER 26, 2007

DESCRIPTION	TOTAL	ESTIMATED	ACTUALS
	SFY 2006	SFY 2007	SFY 2007 To-Date
Community Supported Living Services	-	-	38
Personal Care Services	27,037,173	36,554,021	36,793,019
Targeted Case Management Services	9,026,219	9,285,672	7,800,004
Primary Care Case Management Services	599,865	796,780	738,666
Hospice Benefits	6,545,960	9,357,560	9,736,788
Federally Qualified Health Center	17,133,735	16,681,010	15,204,205
Other Care Services	117,082,516	132,236,166	126,149,153
Less: Recoupments	0	-	(1)
NET EXPENDITURES: (line 6 on CMS-64)	2,124,059,808	2,182,055,749	2,137,739,218
Collections: Third Party Liability (line 9A on CMS-64)	(6,144,253)		(4,618,212)
Collections: Probate (line 9B on CMS-64)	(117,505)		(98,465)
Collections: Identified through Fraud & Abuse Effort (line 9C on CMS-64)	(246)		(389,328)
Collections: Other (line 9D on CMS-64)	(7,731,974)		(6,565,965)
NET EXPENDITURES and CMS-64 ADJUSTMENTS:	2,110,065,831	2,182,055,749	2,126,067,248
Plus: Medicaid Part D Expenditures	8,942,213	29,504,480	28,577,768
Plus: State Only Medicaid Expenditures	4,507,995	3,500,000	4,557,527
TOTAL MEDICAID EXPENDITURES	\$2,123,516,039	2,215,060,229	2,159,202,543
Plus: Reimbursables ⁽¹⁾	4,446,206	3,500,000	3,273,687
TOTAL EXPENDITURES	\$2,127,962,245	\$2,218,560,229	\$2,162,476,230

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

BUREAU FOR MEDICAL SERVICES
SFY 2007 Medicaid Approved Claims Report
As of September 28, 2007

Revised: October 8, 2007

REF#	CMS 64 Category Of Service	SFY 2006	SFY 2007 APPROVED CLAIMS				Year to Date
			JUL-SEP 2006	OCT-DEC 2006	JAN-MAR 2007	APR-JUN 2007	
1A	Inpatient Hospital Services	229,707,885	59,005,876	45,421,002	66,720,735	58,217,912	229,365,525
1B	Inpatient Hospital Services - DSH	53,908,979	13,487,307	13,398,746	13,766,769	13,567,949	54,220,771
2A	Mental Health Facilities	39,229,124	9,611,036	9,654,321	10,474,049	10,889,353	40,628,759
2B	Mental Health Facilities - DSH	20,354,226	4,707,635	4,689,840	4,712,576	4,690,354	18,800,405
3	Nursing Facility Services	393,536,290	97,869,357	102,858,858	101,811,138	103,254,835	405,794,188
4B	Intermediate Care Facilities - Private Providers	53,659,229	14,866,833	14,906,184	14,332,092	14,592,632	58,697,741
5	Physicians Services	131,707,310	27,270,085	32,865,572	31,412,893	30,779,096	122,327,646
6	Outpatient Hospital Services	98,443,210	24,877,119	24,044,406	26,344,955	25,604,096	100,870,576
7	Prescribed Drugs	378,942,276	73,996,270	79,099,519	83,977,772	80,229,349	317,302,910
7	Part D Premium - State Only	13,703,710	7,036,703	6,973,264	7,171,635	7,396,166	28,577,768
7A1	Drug Rebate Offset - National	(112,874,193)	(24,866,438)	(23,717,131)	(18,757,397)	(26,070,352)	(93,411,318)
7A2	Drug Rebate Offset - State	(29,533,312)	(6,169,739)	(7,473,084)	(7,636,145)	(9,960,309)	(31,239,277)
///	Total Rebates	(142,407,505)	(31,036,177)	(31,190,215)	(26,393,542)	(36,030,661)	(124,650,595)
///	NET DRUG COST	250,238,481	49,996,796	54,882,568	64,755,865	51,594,854	221,230,083
8	Dental Services	39,749,744	9,747,726	10,030,160	8,767,992	9,400,102	37,945,980
9	Other Practitioners Services	22,526,001	5,427,284	5,064,183	5,315,974	4,955,486	20,762,927
10	Clinic Services	37,348,651	7,646,302	8,289,217	9,205,678	10,001,742	35,142,939
11	Lab & Radiological Services	12,711,427	4,271,178	4,337,276	4,538,777	3,003,612	16,150,843
12	Home Health Services	29,135,956	6,686,817	6,549,259	8,644,136	6,678,251	28,558,463
13	Hysterectomies/Sterilizations	693,327	156,700	161,378	132,905	109,132	560,115
14	Pregnancy Termination	347,900	64,401	34,849	84,150	36,778	220,178
15	EPSDT Services	6,954,084	738,892	643,606	507,950	560,470	2,450,918
16	Rural Health Clinic Services	8,033,096	1,691,196	1,651,828	1,792,683	1,560,779	6,696,486
17A	Medicare - Part A Premiums	18,143,564	2,784,018	4,185,821	4,245,061	4,251,010	15,465,910
17B	Medicare - Part B Premiums	60,608,011	10,649,879	16,255,310	17,021,684	17,570,119	61,496,992
18A	Managed Care Organizations	213,951,922	60,065,447	68,259,290	53,713,498	75,862,421	257,900,656
18C	Group Health Plan Payments	289,547	85,876	0	159,219	84,633	329,728
19	Home & Community-Based Services (MR/DD)	185,718,505	46,908,118	47,174,803	53,073,494	53,999,834	201,156,249
20	Home & Community-Based Services (Aged/Disabled)	60,771,882	13,700,224	13,512,164	14,314,401	14,978,868	56,505,657
23	Personal Care Services	26,844,048	8,931,805	8,741,935	8,865,553	9,450,009	35,989,302
24	Targeted Case Management	9,487,138	2,125,577	2,022,279	1,907,015	1,796,125	7,850,996
25	Primary Care Case Management	596,073	187,173	234,987	186,357	191,622	800,139
26	Hospice Benefits	6,762,433	2,525,227	2,043,526	2,869,003	2,553,635	9,991,391

BUREAU FOR MEDICAL SERVICES
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REF#	CMS 64 Category Of Service	SFY 2006	SFY 2007 APPROVED CLAIMS				Year to Date
			JUL-SEP 2006	OCT-DEC 2006	JAN-MAR 2007	APR-JUN 2007	
28	Federally Qualified Health Center	17,851,263	3,423,359	3,928,177	4,478,858	3,639,172	15,469,566
29	Other Care Services	111,635,012	28,703,280	30,005,089	27,072,310	26,072,486	111,853,165
	Unclassified	28,398	211,611	53	(20)	0	211,644
///	TOTALS	2,140,972,716	518,424,134	535,846,687	561,227,750	559,947,367	2,175,445,938

This report's data is prepared based on claims received and approved for payment (Modified Accrual basis of Accounting). Therefore, the data presented in this report will not match the CMS-64 Quarterly Reports which are prepared on a cash basis.

The following report approximates the Medicare Part-D Prescription Drug Expenditures related to WV's Part-D Premium (clawback) payments.

REF#	CMS 64 Category Of Service	SFY 2006	SFY 2007 APPROVED CLAIMS				Year to Date
			JUL-SEP 2006	OCT-DEC 2006	JAN-MAR 2007	APR-JUN 2007	
7	Medicaid Prescribed Drugs	378,942,276	73,996,270	79,099,519	83,977,772	80,229,349	317,302,910
7.2	Medicare Part D (Estimated)	56,372,986	28,946,904	29,045,471	29,871,738	30,806,969	118,671,082
///	Estimated Medicaid & Medicare Prescription Drug Payments	435,315,262	102,943,174	108,144,990	113,849,510	111,036,318	435,973,992