

The Department of Vermont Health Access
Caseload and Expenditure Report ~ All AHS Medicaid Spend

All AHS YTD '13
 Friday, August 09, 2013

	SFY '13 Appropriated			SFY '13 Budget Adjustment			SFY '13 Actuals thru June 30, 2013			% of Approp.	% of BAA
	Caseload	Expenses	PMPM	Caseload	Expenses	PMPM	Caseload	Expenses *	PMPM	Spent to Date	Spent to date
ABD Adult	14,445	\$ 171,838,251	\$ 991.36	14,189	\$ 168,678,573	\$ 990.65	14,377	\$ 168,884,494	\$ 978.90	98.28%	100.12%
ABD Dual	17,155	\$ 194,934,351	\$ 946.93	17,215	\$ 192,935,162	\$ 933.93	17,171	\$ 191,152,840	\$ 927.71	98.06%	99.08%
General Adult	11,686	\$ 79,100,241	\$ 564.08	11,614	\$ 73,162,753	\$ 524.96	11,454	\$ 70,921,115	\$ 515.99	89.66%	96.94%
VHAP	38,799	\$ 173,502,508	\$ 372.65	37,340	\$ 159,569,907	\$ 356.12	37,669	\$ 159,312,823	\$ 352.44	91.82%	99.84%
VHAP ESI	810	\$ 2,006,576	\$ 206.35	807	\$ 1,429,801	\$ 147.62	788	\$ 931,973	\$ 98.56	46.45%	65.18%
Catamount	11,440	\$ 62,002,768	\$ 451.65	11,582	\$ 59,153,214	\$ 425.61	11,296	\$ 53,960,735	\$ 398.09	87.03%	91.22%
ESIA	874	\$ 2,270,715	\$ 216.52	766	\$ 1,000,629	\$ 108.80	748	\$ 698,879	\$ 77.83	30.78%	69.84%
ABD Child	3,614	\$ 93,601,570	\$ 2,158.44	3,727	\$ 87,208,278	\$ 1,950.14	3,703	\$ 81,850,572	\$ 1,842.15	87.45%	93.86%
General Child	55,564	\$ 228,797,327	\$ 343.14	55,519	\$ 226,071,854	\$ 339.33	55,447	\$ 209,219,218	\$ 314.44	91.44%	92.55%
Underinsured Child	943	\$ 2,088,216	\$ 184.56	1,029	\$ 2,101,240	\$ 170.14	955	\$ 1,939,902	\$ 169.22	92.90%	92.32%
SCHIP	4,017	\$ 10,358,905	\$ 214.90	4,017	\$ 9,289,125	\$ 192.69	3,952	\$ 10,023,964	\$ 211.39	96.77%	107.91%
Pharmacy Only	12,698	\$ 4,777,918	\$ 31.36	12,565	\$ (440,929)	\$ (2.92)	12,659	\$ 1,598,693	\$ 10.52	33.46%	-362.57%
Choices for Care	3,758	\$ 198,654,108	\$ 4,405.70	3,859	\$ 203,142,801	\$ 4,387.16	3,884	\$ 196,459,829	\$ 4,214.79	98.90%	96.71%
GME							\$ 59,628,783			93.71%	96.93%
Total Medicaid	175,802	\$ 1,223,933,456	\$ 580.17	174,230	\$ 1,183,302,408	\$ 565.97	174,103	\$ 1,206,583,819	\$ 577.53	98.58%	101.97%

* \$59 mil in GME expense was not included in SFY '13 BAA Expenses. The GME expense is excluded from the SFY '13 Actual expense per MEG above, but was reported to CMS in SFY'13

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ABD Adult	14,445	\$ 171,838,251	\$ 991.36	14,189	\$ 168,678,573	\$ 990.65	14,377	\$ 178,956,858	\$ 1,037.29	104.14%	106.09%
ABD Dual	17,155	\$ 194,934,351	\$ 946.93	17,215	\$ 192,935,162	\$ 933.93	17,171	\$ 194,354,293	\$ 943.25	99.70%	100.74%
General Adult	11,686	\$ 79,100,241	\$ 564.08	11,614	\$ 73,162,753	\$ 524.96	11,454	\$ 79,771,934	\$ 580.38	100.85%	109.03%
VHAP	38,799	\$ 173,502,508	\$ 372.65	37,340	\$ 159,569,907	\$ 356.12	37,669	\$ 177,748,055	\$ 393.23	102.45%	111.39%
VHAP ESI	810	\$ 2,006,576	\$ 206.35	807	\$ 1,429,801	\$ 147.62	788	\$ 940,758	\$ 99.49	46.88%	65.80%
Catamount	11,440	\$ 62,002,768	\$ 451.65	11,582	\$ 59,153,214	\$ 425.61	11,296	\$ 53,960,735	\$ 398.09	87.03%	91.22%
ESIA	874	\$ 2,270,715	\$ 216.52	766	\$ 1,000,629	\$ 108.80	748	\$ 699,507	\$ 77.90	30.81%	69.91%
ABD Child	3,614	\$ 93,601,570	\$ 2,158.44	3,727	\$ 87,208,278	\$ 1,950.14	3,703	\$ 83,880,303	\$ 1,887.84	89.61%	96.18%
General Child	55,564	\$ 228,797,327	\$ 343.14	55,519	\$ 226,071,854	\$ 339.33	55,447	\$ 225,987,291	\$ 339.64	98.77%	99.96%
Underinsured Child	943	\$ 2,088,216	\$ 184.56	1,029	\$ 2,101,240	\$ 170.14	955	\$ 1,986,567	\$ 173.29	95.13%	94.54%
SCHIP	4,017	\$ 10,358,905	\$ 214.90	4,017	\$ 9,289,125	\$ 192.69	3,952	\$ 10,023,964	\$ 211.39	96.77%	107.91%
Pharmacy Only	12,698	\$ 4,777,918	\$ 31.36	12,565	\$ (440,929)	\$ (2.92)	12,659	\$ 1,813,724	\$ 11.94	37.96%	-411.34%
Choices for Care	3,758	\$ 198,654,108	\$ 4,405.70	3,859	\$ 203,142,801	\$ 4,387.16	3,884	\$ 196,459,829	\$ 4,214.79	98.90%	96.71%
Total Medicaid	175,802	\$ 1,223,933,456	\$ 580.17	174,230	\$ 1,183,302,408	\$ 565.97	174,103	\$ 1,206,583,819	\$ 577.53	98.58%	101.97%

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	Caseload	Expenses	PMPM	Caseload	Expenses	PMPM	Caseload	Expenses *	PMPM	Spent to Date	Spent to Date
ABD Adult	14,445	\$ 100,440,442	\$ 579.46	14,189	\$ 97,260,433	\$ 571.21	14,377	\$ 94,163,879	\$ 545.80	93.75%	96.82%
ABD Dual	17,155	\$ 48,138,865	\$ 233.84	17,215	\$ 46,097,874	\$ 223.14	17,171	\$ 45,022,699	\$ 218.51	93.53%	97.67%
General Adult	11,686	\$ 71,664,326	\$ 511.06	11,614	\$ 65,724,721	\$ 471.59	11,454	\$ 64,228,882	\$ 467.30	89.62%	97.72%
VHAP	38,799	\$ 161,957,523	\$ 347.86	37,340	\$ 148,021,635	\$ 330.34	37,669	\$ 147,517,392	\$ 326.35	91.08%	99.66%
VHAP ESI	810	\$ 2,006,576	\$ 206.35	807	\$ 1,429,801	\$ 147.62	788	\$ 927,939	\$ 98.13	46.24%	64.90%
Catamount	11,440	\$ 62,002,768	\$ 451.65	11,582	\$ 59,153,214	\$ 425.61	11,296	\$ 53,960,735	\$ 398.09	87.03%	91.22%
ESIA	874	\$ 2,270,715	\$ 216.52	766	\$ 1,000,629	\$ 108.80	748	\$ 698,879	\$ 77.83	30.78%	69.84%
ABD Child	3,614	\$ 35,654,068	\$ 822.18	3,727	\$ 29,244,275	\$ 653.96	3,703	\$ 30,764,843	\$ 692.40	86.29%	105.20%
General Child	55,564	\$ 123,109,797	\$ 184.64	55,519	\$ 120,354,228	\$ 180.65	55,447	\$ 114,521,390	\$ 172.12	93.02%	95.15%
Underinsured Child	943	\$ 677,890	\$ 59.91	1,029	\$ 690,513	\$ 55.91	955	\$ 744,344	\$ 64.93	109.80%	107.80%
SCHIP	4,017	\$ 7,598,806	\$ 157.64	4,017	\$ 6,528,240	\$ 135.42	3,952	\$ 7,279,703	\$ 153.52	95.80%	111.51%
Pharmacy Only	12,698	\$ 4,777,918	\$ 31.36	12,565	\$ (440,929)	\$ (2.92)	12,659	\$ 1,598,693	\$ 10.52	33.46%	-362.57%
Choices for Care	3,758	\$ 198,654,108	\$ 4,405.70	3,859	\$ 203,142,801	\$ 4,387.16	3,884	\$ 196,459,829	\$ 4,214.79	98.90%	96.71%
GME							\$ 59,628,783			92.54%	97.39%
Total Medicaid	175,802	\$ 818,953,805	\$ 388.20	174,230	\$ 778,207,433	\$ 372.21	174,103	\$ 817,517,989	\$ 391.30	99.82%	105.05%

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ABD Adult	14,445	\$ 100,440,442	\$ 579.46	14,189	\$ 97,260,433	\$ 571.21	14,377	\$ 104,236,243	\$ 604.18	103.78%	107.17%
ABD Dual	17,155	\$ 48,138,865	\$ 233.84	17,215	\$ 46,097,874	\$ 223.14	17,171	\$ 48,224,153	\$ 234.04	100.18%	104.61%
General Adult	11,686	\$ 71,664,326	\$ 511.06	11,614	\$ 65,724,721	\$ 471.59	11,454	\$ 73,079,701	\$ 531.69	101.98%	111.19%
VHAP	38,799	\$ 161,957,523	\$ 347.86	37,340	\$ 148,021,635	\$ 330.34	37,669	\$ 165,952,625	\$ 367.13	102.47%	112.11%
VHAP ESI	810	\$ 2,006,576	\$ 206.35	807	\$ 1,429,801	\$ 147.62	788	\$ 936,724	\$ 99.06	46.68%	65.51%
Catamount	11,440	\$ 62,002,768	\$ 451.65	11,582	\$ 59,153,214	\$ 425.61	11,296	\$ 53,960,735	\$ 398.09	87.03%	91.22%
ESIA	874	\$ 2,270,715	\$ 216.52	766	\$ 1,000,629	\$ 108.80	748	\$ 699,507	\$ 77.90	30.81%	69.91%
ABD Child	3,614	\$ 35,654,068	\$ 822.18	3,727	\$ 29,244,275	\$ 653.96	3,703	\$ 32,794,574	\$ 738.08	91.98%	112.14%
General Child	55,564	\$ 123,109,797	\$ 184.64	55,519	\$ 120,354,228	\$ 180.65	55,447	\$ 131,289,464	\$ 197.32	106.64%	109.09%
Underinsured Child	943	\$ 677,890	\$ 59.91	1,029	\$ 690,513	\$ 55.91	955	\$ 791,009	\$ 69.00	116.69%	114.55%
SCHIP	4,017	\$ 7,598,806	\$ 157.64	4,017	\$ 6,528,240	\$ 135.42	3,952	\$ 7,279,703	\$ 153.52	95.80%	111.51%
Pharmacy Only	12,698	\$ 4,777,918	\$ 31.36	12,565	\$ (440,929)	\$ (2.92)	12,659	\$ 1,813,724	\$ 11.94	37.96%	-411.34%
Choices for Care	3,758	\$ 198,654,108	\$ 4,405.70	3,859	\$ 203,142,801	\$ 4,387.16	3,884	\$ 196,459,829	\$ 4,214.79	98.90%	96.71%
Total Medicaid	175,802	\$ 818,953,805	\$ 388.20	174,230	\$ 778,207,433	\$ 372.21	174,103	\$ 817,517,989	\$ 391.30	99.82%	105.05%

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Glossary of Terms

PMPM – Per Member Per Month

MEG – Medicaid Eligibility Group

ABD Adult – Beneficiaries over age 18; categorized as aged, blind, disabled, and/or medically needy

ABD Child – Beneficiaries age 18 or under; categorized as blind, disabled, and/or medically needy

ABD Dual – Beneficiaries eligible for both Medicare and Medicaid; categorized as blind, disabled, and/or medically needy

General Adult – Beneficiaries over age 18; pregnant women or parents/caretaker relatives of minor children receiving cash assistance and those receiving transitional Medicaid after the receipt of cash assistance

General Child – Beneficiaries age 18 or under, and below the protected income level, categorized as those eligible for cash assistance including Reach Up (Title V) and foster care payments (Title IV-E)

VHAP – Beneficiaries over age 18 without children who have a household income below 150% FPL or beneficiaries 18 and older with children who have a household income below 185% FPL

VHAP ESI – Adults who are eligible for the Vermont Health Access Plan (VHAP) and who have access to an approved cost-effective, employer-sponsored insurance plan

ESIA – Adults who are uninsured and not eligible for VHAP and who have access to an approved cost-effective employer-sponsored insurance plan

Underinsured Child – Beneficiaries age 18 or under with household income 225-300% FPL with other insurance

CHIP – Beneficiaries under 18 with household income 225-300% FPL with no other insurance

Catamount – Beneficiaries over age 18 with income under 300% who are ineligible for existing state-sponsored coverage programs and do not have access to insurance through their employer

Pharmacy Only – Assistance to help pay for prescription medicines based on income, disability status, and age

Choices for Care - Vermont's Long Term Care Medicaid Program; for Vermonters in nursing homes, home-based settings, enhanced residential care (ERC), and program for all-inclusive care for the elderly (PACE)