

Medicaid Program Enrollment and Expenditures Report

Q4 SFY 2017

**Quarterly Report to the General Assembly
Pursuant to 33 V.S.A. § 1901f**

Al Gobeille, Secretary
Vermont Agency of Human Services

Cory Gustafson, Commissioner
Department of Vermont Health Access

September 1, 2017



Key Terms

Caseload – Average monthly member enrollment

MEG – Medicaid Eligibility Group

ABD Adult – Beneficiaries age 19 or older; categorized as aged, blind, disabled, and/or medically needy

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

General Adult – Beneficiaries age 19 or older; pregnant women or parents/caretaker relatives of minor children receiving cash assistance and those receiving transitional Medicaid after the receipt of cash assistance

New Adult - Beneficiaries age 19 or older and under 65; who are at or below 133% of the FPL

Vermont Premium Assistance - Individuals enrolled in qualified health plans (QHP) with incomes at or below 300% FPL

Vermont Cost Sharing - Individuals enrolled in qualified health plans (QHP) with incomes at or below 300% FPL

ABD Child – Beneficiaries under age 19; categorized as blind, disabled, and/or medically needy

General Child – Beneficiaries under age 19, 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)

Underinsured Child – Beneficiaries under age 19 or under with household income 237-312% FPL with other (primary) insurance

CHIP – Children's Health Insurance Program – Beneficiaries under age 19 with household income 237-312% FPL with no other insurance

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, and/or enhanced residential care (ERC)

PMPM – Per Member Per Month

The Department of Vermont Health Access
Caseload and Expenditure Report ~ All AHS and AoE Medicaid Expenditures
All AHS and AoE YTD '17

	SFY '17 Appropriated			SFY '17 Actuals thru June 30, 2017			% of Approp. Spent to Date
	Caseload	Expenses	PMPM	Caseload	Expenses	PMPM	
ABD Adult	8,791	\$ 158,618,312	\$ 1,503.56	8,470	\$ 150,586,971	\$ 1,481.66	94.94%
ABD Dual	17,758	\$ 229,776,003	\$ 1,078.28	17,601	\$ 214,721,288	\$ 1,016.60	93.45%
General Adult	15,848	\$ 95,900,502	\$ 504.26	15,140	\$ 89,853,697	\$ 494.58	93.69%
New Adult	59,021	\$ 285,093,609	\$ 402.53	60,102	\$ 293,599,896	\$ 407.09	102.98%
Vermont Premium Assistance	15,831	\$ 6,065,475	\$ 31.93	17,961	\$ 6,100,378	\$ 28.30	100.58%
Vermont Cost Sharing	5,358	\$ 1,232,289	\$ 19.17	5,816	\$ 1,355,318	\$ 19.42	109.98%
ABD Child	2,490	\$ 83,165,401	\$ 2,783.31	2,368	\$ 71,540,812	\$ 2,517.36	86.02%
General Child	60,003	\$ 295,934,148	\$ 411.00	60,114	\$ 295,676,075	\$ 409.88	99.91%
Underinsured Child	833	\$ 2,415,745	\$ 241.72	845	\$ 2,440,929	\$ 240.87	101.04%
CHIP	5,280	\$ 12,130,576	\$ 191.45	5,142	\$ 11,615,325	\$ 188.25	95.75%
Pharmacy Only	11,640	\$ 6,266,029	\$ 44.86	11,399	\$ 3,155,724	\$ 23.07	50.36%
Choices for Care	4,310	\$ 225,786,465	\$ 4,365.92	4,290	\$ 225,042,484	\$ 4,371.28	99.67%
Total Medicaid Claims Paid	207,163	\$ 1,402,384,554	\$ 564.12	209,247	\$ 1,365,875,586	\$ 543.97	97.40%

The Department of Vermont Health Access
Caseload and Expenditure Report ~ All AHS Medicaid Expenditures
All AHS YTD '17

	SFY '17 Appropriated			SFY '17 Actuals thru June 30, 2017			% of Approp. Spent to Date
	Caseload	Expenses	PMPM	Caseload	Expenses	PMPM	
ABD Adult	8,791	\$ 157,169,654	\$ 1,489.83	8,470	\$ 149,149,847	\$ 1,467.52	94.90%
ABD Dual	17,758	\$ 229,528,791	\$ 1,077.12	17,601	\$ 214,594,895	\$ 1,016.00	93.49%
General Adult	15,848	\$ 95,676,736	\$ 503.08	15,140	\$ 89,701,744	\$ 493.75	93.76%
New Adult	59,021	\$ 285,046,469	\$ 402.47	60,102	\$ 293,487,912	\$ 406.93	102.96%
Vermont Premium Assistance	15,831	\$ 6,065,475	\$ 31.93	17,961	\$ 6,100,378	\$ 28.30	100.58%
Vermont Cost Sharing	5,358	\$ 1,232,289	\$ 19.17	5,816	\$ 1,355,318	\$ 19.42	109.98%
ABD Child	2,490	\$ 66,398,766	\$ 2,222.18	2,368	\$ 55,658,763	\$ 1,958.51	83.82%
General Child	60,003	\$ 264,618,665	\$ 367.51	60,114	\$ 263,519,747	\$ 365.31	99.58%
Underinsured Child	833	\$ 1,971,880	\$ 197.31	845	\$ 2,009,308	\$ 198.27	101.90%
CHIP	5,280	\$ 10,766,803	\$ 169.93	5,142	\$ 9,872,896	\$ 160.01	91.70%
Pharmacy Only	11,640	\$ 6,266,029	\$ 44.86	11,399	\$ 3,155,724	\$ 23.07	50.36%
Choices for Care	4,310	\$ 225,779,225	\$ 4,365.78	4,290	\$ 225,039,504	\$ 4,371.23	99.67%
Total Medicaid Claims Paid	207,163	\$ 1,350,520,781	\$ 543.26	209,247	\$ 1,313,832,726	\$ 523.24	97.28%

The Department of Vermont Health Access
Caseload and Expenditure Report ~ DVHA Only Medicaid Expenditures
DVHA YTD '17

	SFY '17 Appropriated			SFY '17 Actuals thru June 30, 2017			% of Approp. Spent to Date
	Caseload	Expenses	PMPM	Caseload	Expenses	PMPM	
ABD Adult	8,791	\$ 70,363,336	\$ 666.98	8,470	\$ 68,865,433	\$ 677.58	97.87%
ABD Dual	17,758	\$ 57,665,231	\$ 270.61	17,601	\$ 52,597,445	\$ 249.02	91.21%
General Adult	15,848	\$ 82,715,184	\$ 434.93	15,140	\$ 77,460,396	\$ 426.37	93.65%
New Adult	59,021	\$ 255,945,079	\$ 361.38	60,102	\$ 264,105,297	\$ 366.19	103.19%
Vermont Premium Assistance	15,831	\$ 6,065,475	\$ 31.93	17,961	\$ 6,100,378	\$ 28.30	100.58%
Vermont Cost Sharing	5,358	\$ 1,232,289	\$ 19.17	5,816	\$ 1,355,318	\$ 19.42	109.98%
ABD Child	2,490	\$ 24,874,655	\$ 832.49	2,368	\$ 23,032,607	\$ 810.47	92.59%
General Child	60,003	\$ 153,506,519	\$ 213.19	60,114	\$ 153,917,906	\$ 213.37	100.27%
Underinsured Child	833	\$ 1,210,126	\$ 121.09	845	\$ 1,095,901	\$ 108.14	90.56%
CHIP	5,280	\$ 9,400,484	\$ 148.37	5,142	\$ 7,893,710	\$ 127.94	83.97%
Pharmacy Only	11,640	\$ 6,266,029	\$ 44.86	11,399	\$ 3,155,724	\$ 23.07	50.36%
Choices for Care	4,310	\$ 223,201,934	\$ 4,315.94	4,290	\$ 222,772,830	\$ 4,327.20	99.81%
Total Medicaid Claims Paid	207,163	\$ 892,446,342	\$ 359.00	209,247	\$ 882,539,930	\$ 351.48	98.89%