



Office of Director

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October 31, 2017

Marty Garrity
Staff Member, Arkansas Legislative Council
Director, Arkansas Bureau of Legislative Research
State Capitol Room 315
Little Rock, Arkansas 72201

Roger A. Norman
Legislative Auditor
Arkansas Legislative Audit
State Capitol Suite 172
Little Rock, Arkansas 72201

Dear Director Garrity and Mr. Norman:

I am pleased to submit to you the second Medicaid Transformation Savings Scorecard and Quarterly Report as requested by the Health Care Task Force (HCTF) and Act 802. This latest version covers the First Quarter of State Fiscal Year 2018. Spending for Traditional Medicaid in Q1 is \$52 million lower than the HCTF baseline which assumes a five percent annual growth rate in Medicaid spending. Of this amount, \$24 million in savings occurred in the areas of Medicaid Transformation.

This Report also contains a more robust Section II that provides additional data on Medicaid enrollment and spending over the past five quarters. We believe this data is useful to understand trends over time.

We expect to submit the next quarterly report for Q2 by January 31, 2018. If you have any questions, please do not hesitate to call me at (501) 682-8650.

Sincerely,

A handwritten signature in black ink, reading "Dawn Stehle".

Dawn Stehle
Deputy Director for Health and Medicaid Director

Medicaid Transformation Savings Scorecard and Quarterly Report

Q1 SFY2018 Report

A Three Section Report to Track Medicaid and Savings

- DHS is obligated to provide a quarterly report beginning with the first quarter of SFY18 that:
 - Includes a dashboard or scorecard to track savings from reforms approved by the Health Care Task Force (HCTF). The reforms target “at least \$835 million” in savings from traditional Medicaid.
 - Reports on all Medicaid programs to monitor spending and savings across the programs.
 - Measures the impact on Medicaid spending and other quality/performance indicators from implementation of provider-led organized care in Arkansas.
- Act 802 requires DHS to submit to the Bureau of Legislative Research an initial report on September 1, 2017, to establish the baseline for the quarterly reports.
- Act 802 further provides:
 - If project (sic) savings in an amount less than five percent (5%) of the goal are not achieved during any two (2) consecutive quarters unrelated to non-claims based performance, the department **shall develop additional reforms to achieve the savings goals** (emphasis added.)”
 - “If legislative action is required to implement the additional reforms ..., the Department may take the action to the Legislative Council or the Executive Subcommittee of the Legislative Council for immediate action.”
- DHS will submit these quarterly reports to BLR on or before the thirtieth day following the end of a quarter.

SECTION I: MEDICAID TRANSFORMATION SAVINGS SCORECARD

HCTF Baseline Spending Models

Spending by Year & Program Dollars in Millions (\$M)	SFY17	SFY18	SFY19	SFY20	SFY21	SFY17-21
*HCTF Baseline, Traditional Medicaid	\$5,379	\$5,648	\$5,930	\$6,227	\$6,538	\$29,722
‡HCTF "Current Model" Spending Traditional Medicaid only	\$5,302	\$5,495	\$5,757	\$6,026	\$6,322	\$28,902
‡HCTF "Current Model" Net Fiscal Impact of Reforms	(\$77)	(\$153)	(\$173)	(\$201)	(\$216)	(\$820)
‡HCTF "Current Model" with Provider-led	\$5,302	\$5,495	\$5,757	\$6,026	\$6,227	\$28,806
**HCTF Net Fiscal Impact of "Current Model" with Provider-led	(\$77)	(\$153)	(\$173)	(\$201)	(\$311)	(\$916)

* HCTF assumed 5% annual growth in spending

‡ HCTF "Current Model" reflects revised annual spending based on achieving annual savings targets

** HCTF assumed Provider-Led would not show savings until SFY21

Total Traditional Medicaid Spend by Quarter (SFY 2017-18)

	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Total Hospital/Medical Expenditures	\$885,474,131	\$954,100,185	\$1,022,376,275	\$1,013,384,069	\$956,950,874	\$918,961,780	(\$37,989,094)
Total Prescription Drugs Expenditures*	\$101,164,602	\$105,944,995	\$115,803,175	\$105,381,709	\$106,723,069	\$102,486,370	(\$4,236,699)
Total Long Term Care Expenditures	\$223,007,381	\$231,888,291	\$218,036,931	\$227,777,445	\$235,930,857	\$226,564,860	(\$9,365,997)
Total Traditional Medicaid	\$1,209,646,114	\$1,291,933,472	\$1,356,216,381	\$1,346,543,223	\$1,299,604,800	\$1,248,013,010	(\$51,591,790)

* Includes Contracts and Part D claw backs which are not part of transformation

HCTF Baseline for Net Savings in Targeted Areas

"Current Model" Savings and Costs by Year & Program Dollars in Millions (\$M)	SFY17	SFY18	SFY19	SFY20	SFY21	SFY17-21
DD Savings – Therapy Caps	\$0	\$18	\$18	\$18	\$18	\$72
DD Savings – Changes to CHMS and DDTCS	\$0	\$14	\$14	\$14	\$14	\$56
DD Savings – Independent Assessment & Tiers/Waiver Changes	\$0	\$0	\$0	\$17	\$17	\$34
DD Cost – Independent Assessment	\$0	\$0	(\$2)	(\$2)	(\$2)	(\$6)
Net DD Savings	\$0	\$32	\$30	\$47	\$47	\$156
BH Savings – Updated Outpatient Benefits Policy	\$12	\$16	\$33	\$33	\$33	\$127
BH Savings – Inpatient	\$0	\$15	\$25	\$35	\$50	\$125
BH Cost – Independent Assessment	\$0	(\$1)	(\$2)	(\$2)	(\$2)	(\$7)
BH Cost – Care Coordination	\$0	(\$15)	(\$21)	(\$21)	(\$21)	(\$78)
Net BH Savings	\$12	\$15	\$35	\$45	\$60	\$167
LTSS MOU (Note: TSG did not model; these numbers were arbitrary)	\$15	\$50	\$50	\$50	\$50	\$215
Pharmacy (These savings were for all FFS, not just Traditional)	\$50	\$50	\$50	\$50	\$50	\$250
Dental Savings – Capitated Managed Care	\$0	\$3	\$5	\$5	\$5	\$18
Dental Premium Tax	\$0	\$3	\$3	\$4	\$4	\$14
Net Dental All-Funds Impact	\$0	\$6	\$8	\$9	\$9	\$32
Net Fiscal Impacts	\$77	\$153	\$173	\$201	\$216	\$820



Medicaid Transformation Spend by Quarter (SFY 2017-18)

	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Developmental Disability (DD) – Therapy Caps	\$37,790,417	\$44,098,822	\$42,015,279	\$46,121,316	\$38,294,693	\$36,774,468	(\$1,520,225)
Developmental Disability (DD) – CHMS/DDTCS	\$54,769,345	\$57,955,535	\$53,921,827	\$81,481,836	\$54,927,335	\$52,746,826	(\$2,180,509)
Developmental Disability (DD) – Waiver	\$55,510,836	\$55,708,897	\$54,789,192	\$56,858,519	\$60,170,555	\$57,781,900	(\$2,388,654)
Developmental Disability (DD) – ICF	\$12,791,137	\$12,753,794	\$12,668,555	\$21,650,545	\$13,531,190	\$12,994,028	(\$537,162)
Total Developmental Disability (DD)	\$160,861,735	\$170,517,047	\$163,394,853	\$206,112,217	\$166,923,772	\$160,297,222	(\$6,626,550)
Behavioral Health (BH) – Inpatient	\$30,008,230	\$31,870,942	\$31,835,842	\$33,629,957	\$31,753,202	\$30,492,661	(\$1,260,541)
Behavioral Health (BH) – Outpatient	\$71,457,428	\$71,394,015	\$69,130,536	\$73,260,007	\$69,993,307	\$67,214,709	(\$2,778,599)
Total Behavioral Health (BH)	\$101,465,658	\$103,264,957	\$100,966,378	\$106,889,964	\$101,746,509	\$97,707,370	(\$4,039,139)
LTSS MOU – Independent Choices	\$9,990,673	\$12,416,371	\$13,624,055	\$13,679,543	\$14,545,157	\$13,967,742	(\$577,415)
LTSS MOU – Personal Care	\$23,271,478	\$25,460,005	\$23,124,805	\$23,558,229	\$24,229,437	\$23,267,575	(\$961,862)
LTSS MOU – ARChoices & Other Waivers	\$28,207,039	\$31,931,857	\$32,185,967	\$32,436,127	\$35,192,062	\$33,795,006	(\$1,397,057)
LTSS MOU – Private Long Term Care / SNF	\$166,647,289	\$168,260,827	\$164,420,763	\$164,898,612	\$177,311,926	\$170,272,986	(\$7,038,940)
Total LTSS MOU	\$228,116,479	\$238,069,061	\$233,355,590	\$234,572,511	\$251,278,582	\$241,303,309	(\$9,975,272)
Total Pharmacy	\$88,780,184	\$93,754,188	\$101,557,857	\$90,843,358	\$91,530,526	\$87,896,942	(\$3,633,584)
Grand Total	\$579,224,056	\$605,605,254	\$599,274,679	\$638,418,050	\$611,479,389	\$587,204,843	(\$24,274,546)

Traditional Medicaid Scorecard by Quarter (SFY 2018)

Savings By Quarter (\$M)										
Division/ Reform	Projected SFY17 Savings	Actual SFY 17 Savings	HCTF Projected SFY 18 Savings	SFY 18 Q1	SFY 18 Q2	SFY 18 Q3	SFY 18 Q4	Actual SFY 18 Savings	SFY 18 Difference	Total Savings (SFY 17- 21)
DD	\$0	\$16	\$32	\$7	\$0	\$0	\$0	\$7	\$25	\$23
BH	\$12	\$25	\$15	\$4	\$0	\$0	\$0	\$4	\$11	\$29
LTSS MOU	\$15	\$2	\$50	\$10	\$0	\$0	\$0	\$10	\$40	\$12
Pharmacy	\$50	\$50*	\$50	\$4	\$0	\$0	\$0	\$4	\$46	\$54
Dental†	\$0	\$0	\$6	\$0	\$0	\$0	\$0	\$0	\$6	\$0
Total	\$77	\$93	\$153	\$24	\$0	\$0	\$0	\$24	\$128	\$117

Note(s): Savings will occur at various times due to divisions implementing new codes on different schedules.

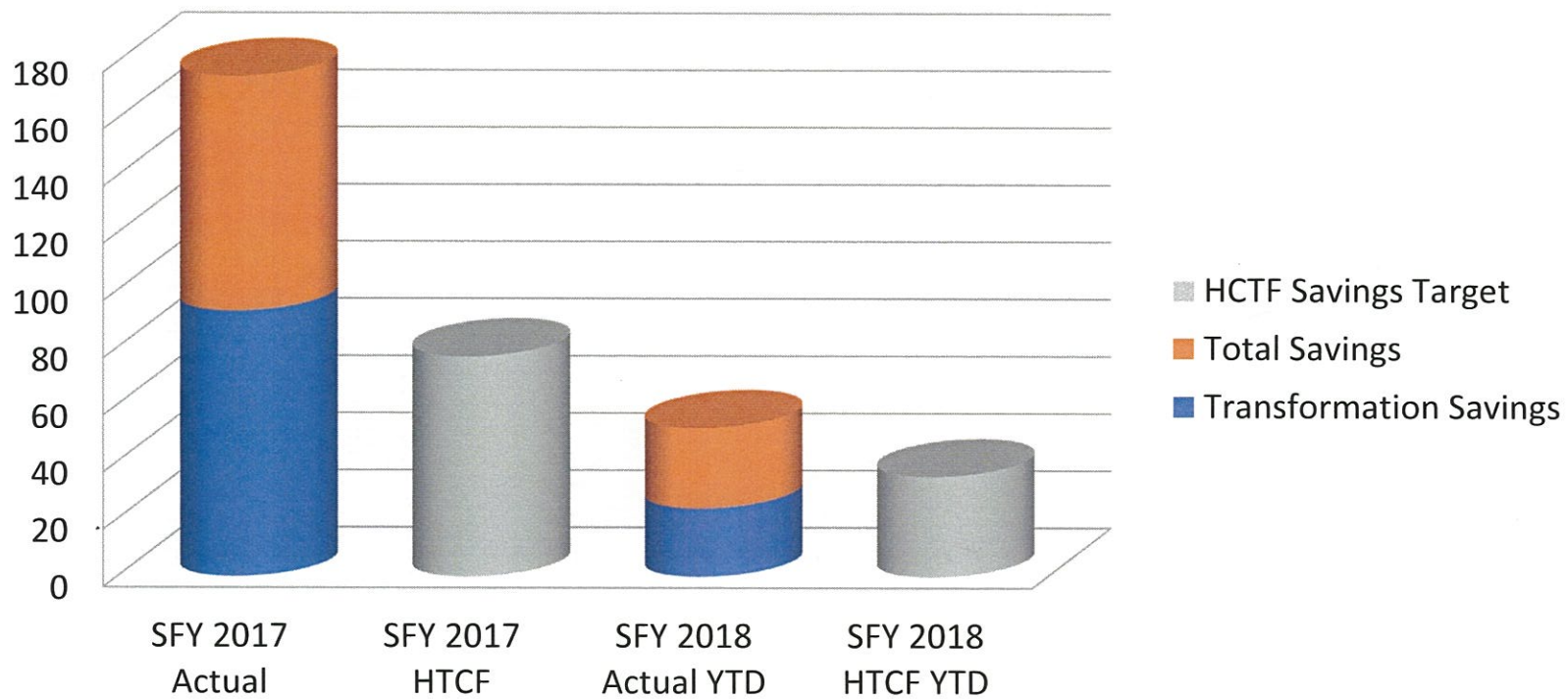
Due to rounding, numbers presented in this chart may not add up precisely to totals provided in the previous page.

† Dental will not see savings until Q4 of SFY 2018

* Pharmacy achieved \$50 million in savings from Fee-for-service; half was credited to Arkansas Works beneficiaries; half to traditional Medicaid Beneficiaries

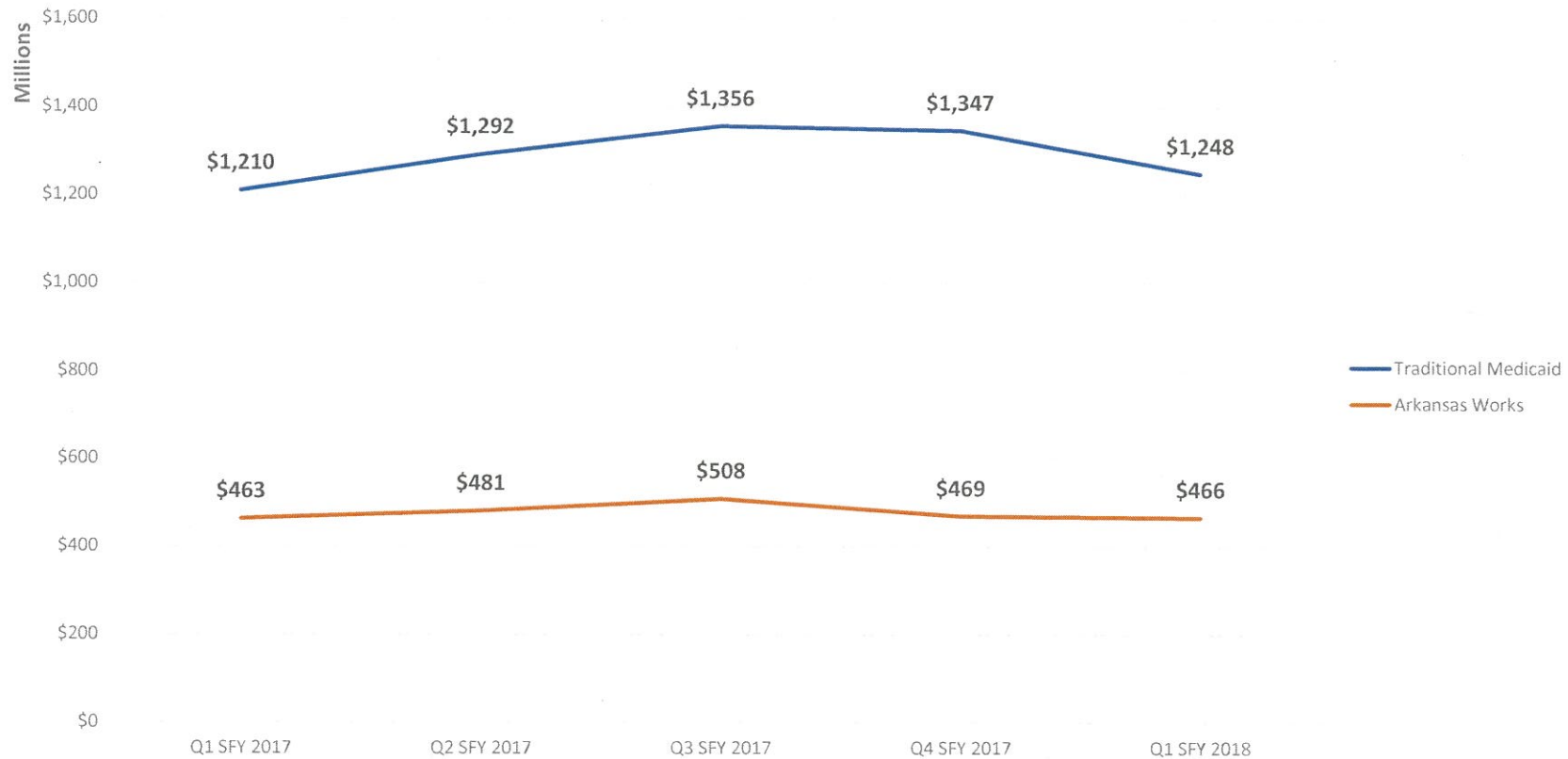
Transformation vs HCTF Baseline Savings (\$M)

Actual Savings Versus HCTF Savings Targets

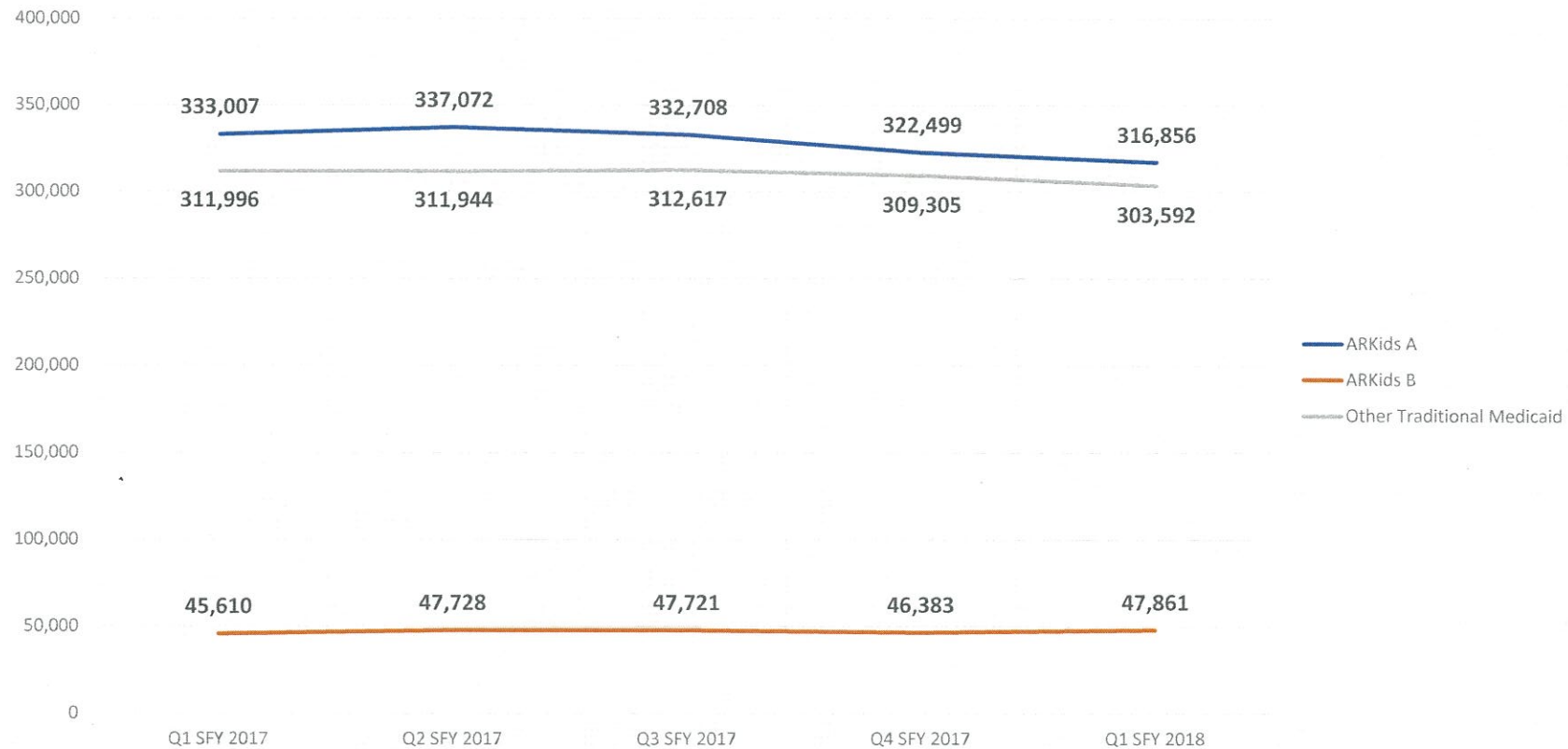


SECTION II: ALL ARKANSAS MEDICAID ENROLLMENT AND SPENDING REPORT

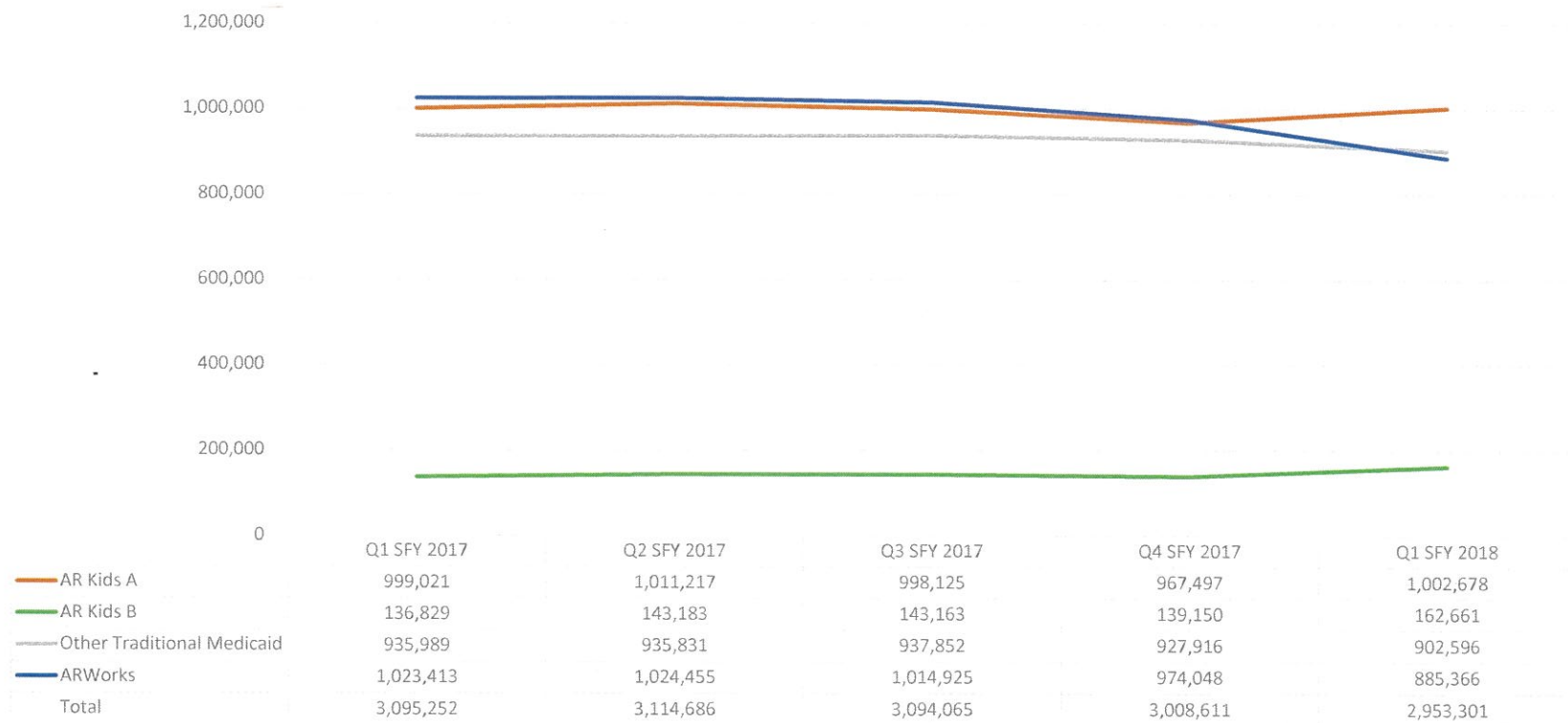
Medicaid Spend by Quarter, SFY 2017-18 (\$M)



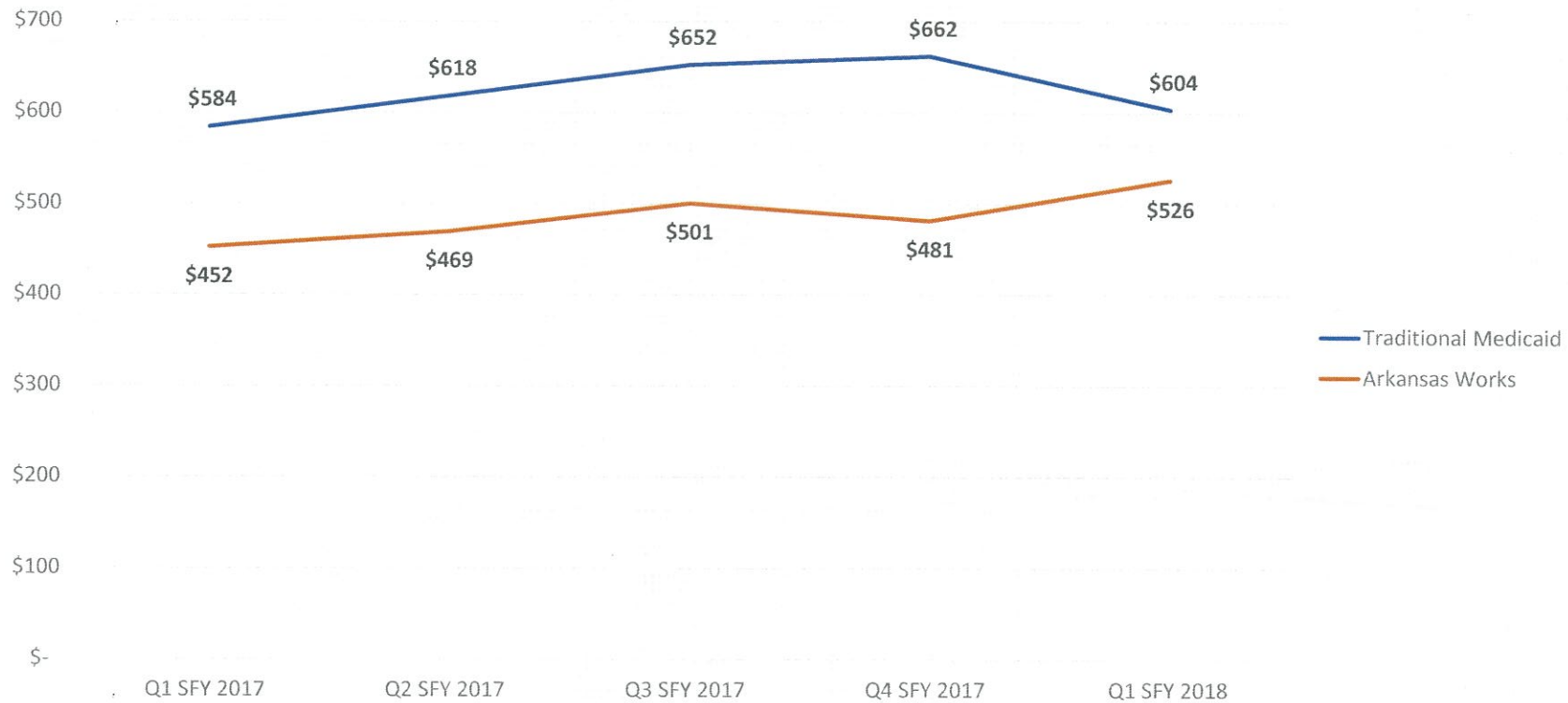
Medicaid Enrollment by Quarter (SFY 2017-18)



Medicaid Enrollee Months by Quarter (SFY 2017-18)

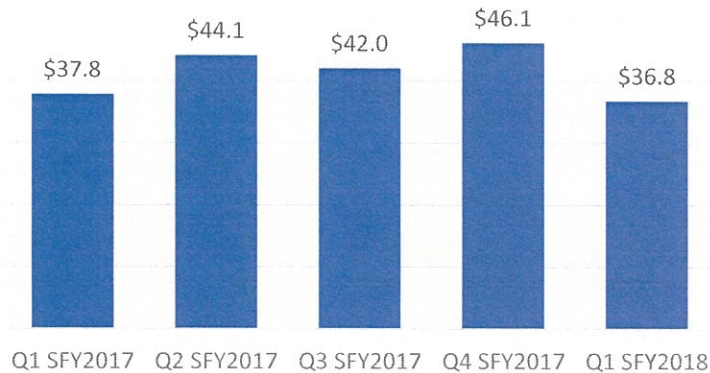


Medicaid Average Cost Per Enrollee Per Month by Quarter (SFY 2017-18)

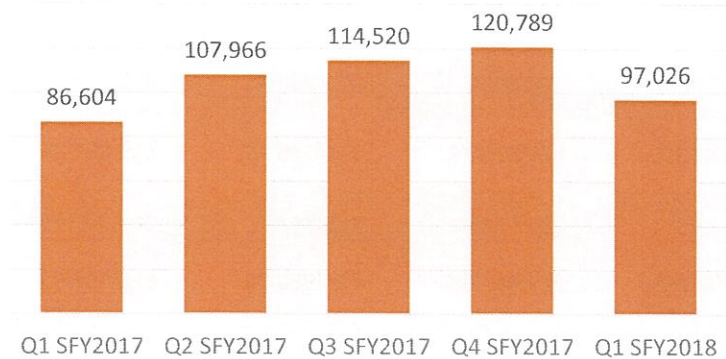


DD – Therapy Caps by Quarter (SFY 2017-18)

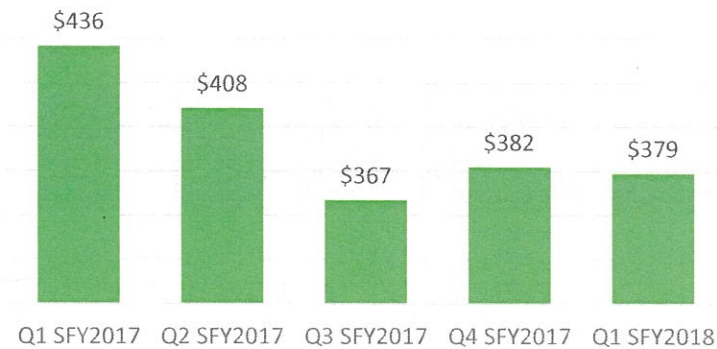
Amount Paid (\$M)



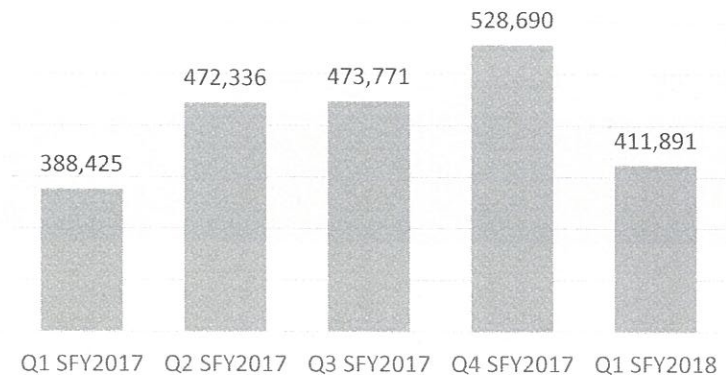
Total User Months per Quarter



Average Monthly Payment Per User



Claims

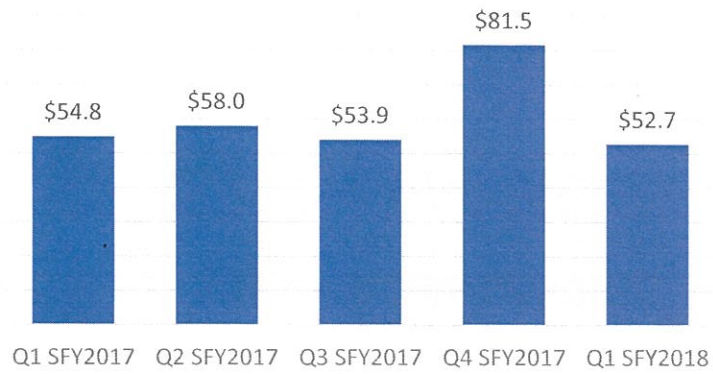


DD – Therapy Cap Spend by Quarter (SFY 2017-18)

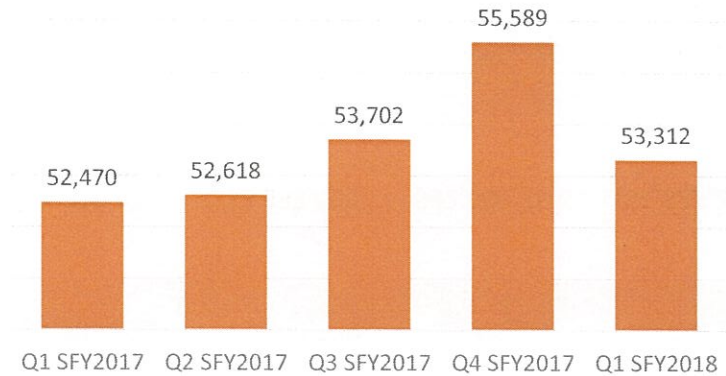
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Physical Therapy CHMS	\$3,274,092	\$3,211,343	\$2,980,994	\$3,208,703	\$3,112,515	\$2,988,955	(\$123,561)
Occupational Therapy - CHMS	\$3,583,755	\$3,713,728	\$3,502,913	\$3,997,703	\$3,795,241	\$3,644,577	(\$150,664)
Speech & Lannguage Therapy - CHMS	\$5,052,692	\$5,066,561	\$4,499,387	\$5,118,979	\$4,801,225	\$4,610,626	(\$190,599)
Physical Therapy General	\$4,059,479	\$4,287,078	\$3,890,686	\$4,248,657	\$4,237,922	\$4,069,685	(\$168,237)
Physical Therapy School Based	\$488,362	\$1,617,119	\$1,562,755	\$1,732,227	\$457,707	\$439,537	(\$18,170)
Occupational Therapy general	\$5,738,508	\$5,899,820	\$5,398,863	\$5,890,339	\$6,036,512	\$5,796,874	(\$239,638)
Occupational Therapy School Based	\$911,160	\$2,813,130	\$3,194,550	\$3,304,546	\$911,093	\$874,925	(\$36,169)
Speech & Language Therapy General	\$8,018,518	\$8,008,292	\$7,481,269	\$8,188,547	\$7,943,444	\$7,628,104	(\$315,339)
Speech & Language Therapy School Based Only	\$903,468	\$3,322,221	\$3,750,474	\$3,861,060	\$1,000,520	\$960,801	(\$39,719)
DDTCS - Disabled Day Treatment Clinic Services Therapy	\$5,760,383	\$6,159,530	\$5,753,387	\$6,570,555	\$5,998,512	\$5,760,383	(\$238,129)
Total Developmental Disability (DD) - Therapy Caps	\$37,790,417	\$44,098,822	\$42,015,279	\$46,121,316	\$38,294,693	\$36,774,468	(\$1,520,225)

DD – CHMS/DDTCS by Quarter (SFY 2017-18)

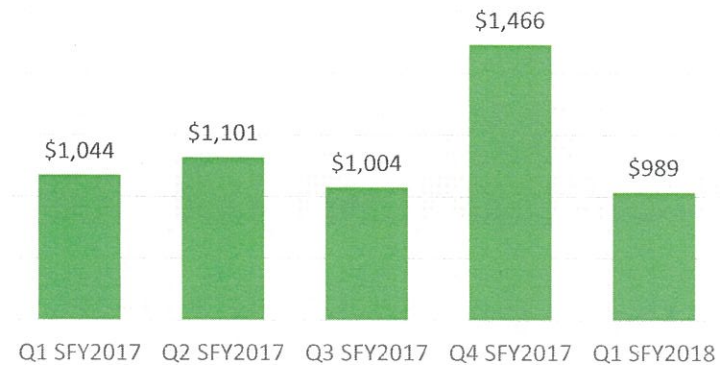
Amount Paid (\$M)



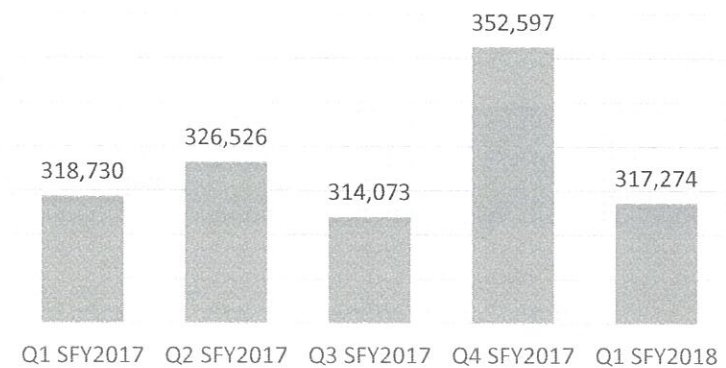
Total User Months per Quarter



Average Monthly Payment Per User



Claims

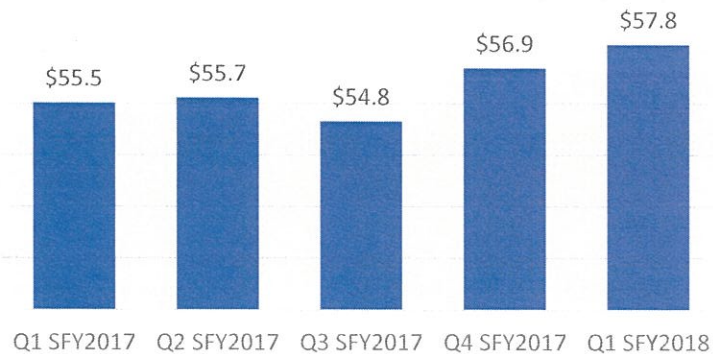


DD – CHMS/DDTCS Spend by Quarter (SFY 2017-18)

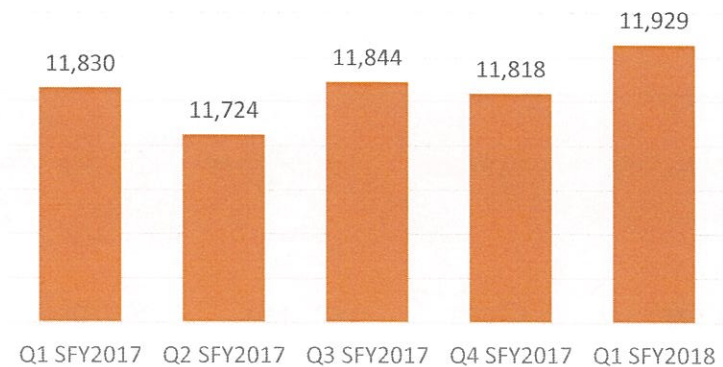
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
EPSDT - CHMS	\$14,650,066	\$15,407,337	\$14,718,246	\$36,672,954	\$15,575,120	\$14,956,818	(\$618,302)
Rehab Services School Based CHMS	\$2,075,195	\$1,967,467	\$2,016,841	\$2,396,620	\$2,086,427	\$2,003,600	(\$82,827)
DDTCS Transportation	\$3,891,880	\$4,031,699	\$3,745,080	\$4,263,852	\$3,932,779	\$3,776,655	(\$156,124)
DDTCS - Disabled Day Treatment Clinic Services	\$34,152,204	\$42,309,415	\$39,601,190	\$43,901,798	\$33,333,009	\$32,009,754	(\$1,323,256)
Total Developmental Disability (DD) - CHMS/DDTCS	\$54,769,345	\$63,715,918	\$60,081,357	\$87,235,223	\$54,927,335	\$52,746,826	(\$2,180,509)

DD – Waivers by Quarter (SFY 2017-18)

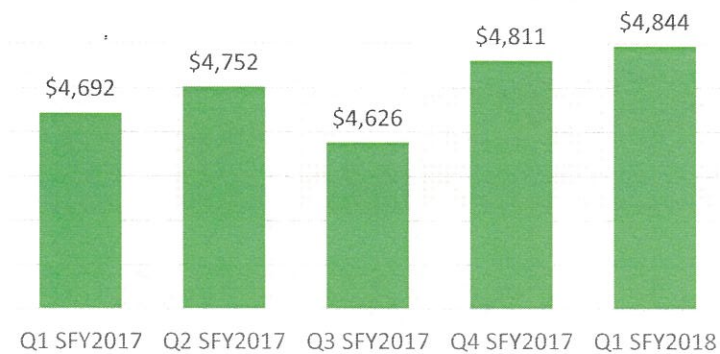
Amount Paid (\$M)



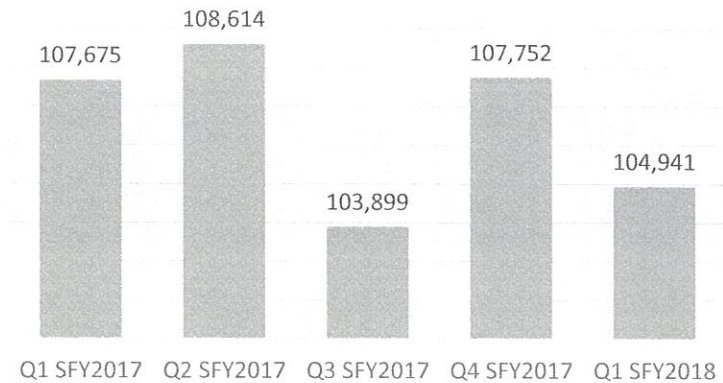
Total User Months per Quarter



Average Monthly Payment Per User



Claims



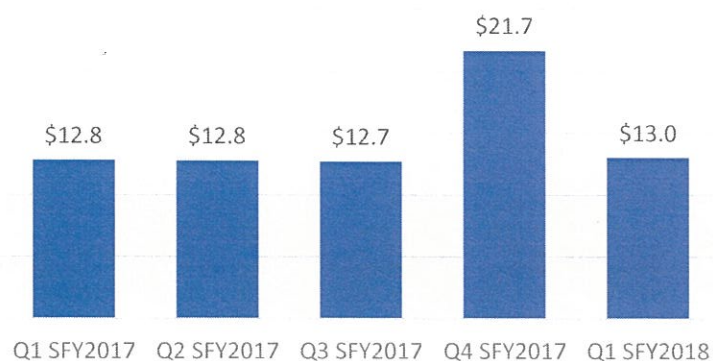
DD – Waiver Spend by Quarter (SFY 17-18)

	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
DDS Community & Employee Supports Waiver*	\$54,947,980	\$55,147,949	\$54,195,335	\$56,190,530	\$59,522,700	\$57,159,764	(\$2,362,936)
Autism Intensive Intervention Provider Waiver	\$562,856	\$560,948	\$593,857	\$667,990	\$647,854	\$622,136	(\$25,719)
Total Developmental Disability Services (DD) - Waiver	\$55,510,836	\$55,708,897	\$54,789,192	\$56,858,519	\$60,170,555	\$57,781,900	(\$2,388,654)

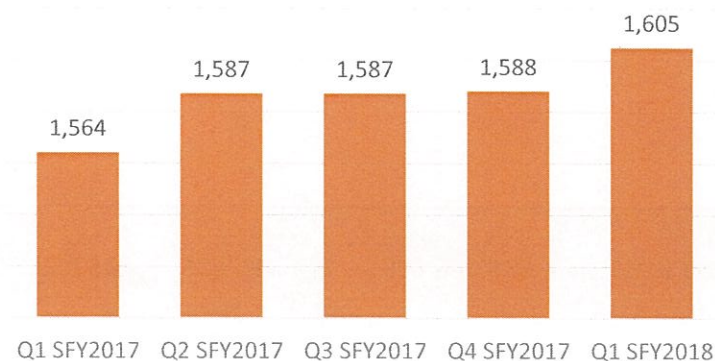
* Formerly known as the Alternative Community Services Waiver

DD – ICF by Quarter (SFY 2017-18)

Amount Paid (\$M)



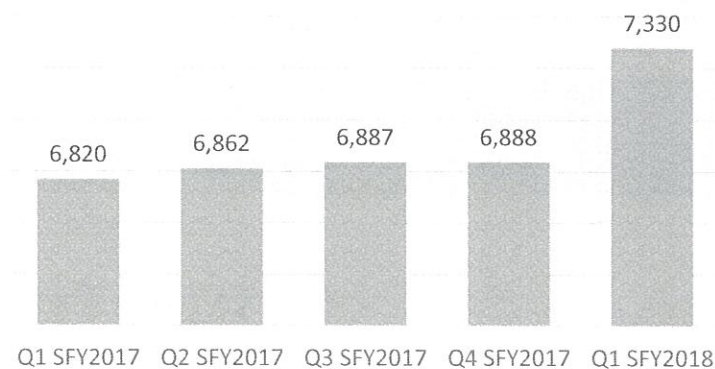
Total User Months per Quarter



Average Monthly Payment Per User



Claims



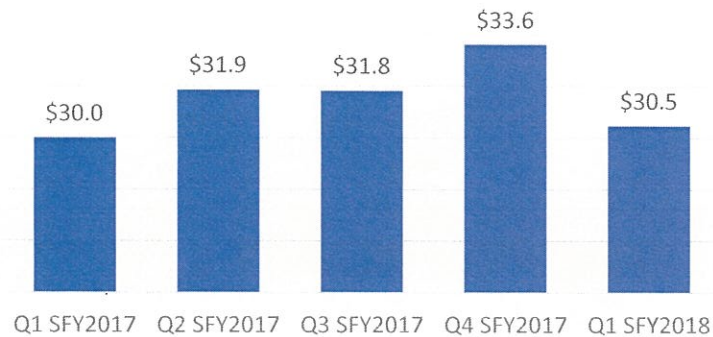
DD – ICF Spend by Quarter (SFY 2017-18)

	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
ICF/Infant Infirmaries	\$6,921,789	\$6,897,139	\$6,840,233	\$6,945,303	\$7,292,548	\$7,003,048	(\$289,500)
Public - ICF	\$5,869,348	\$5,856,655	\$5,828,322	\$14,705,242	\$6,238,641	\$5,990,980	(\$247,662)
Total Developmental Disability Services (DD) - ICF	\$12,791,137	\$12,753,794	\$12,668,555	\$21,650,545	\$13,531,190	\$12,994,028	(\$537,162)

Note(s): These numbers do not include HDC providers

BH – Inpatient by Quarter (SFY 2017-18)

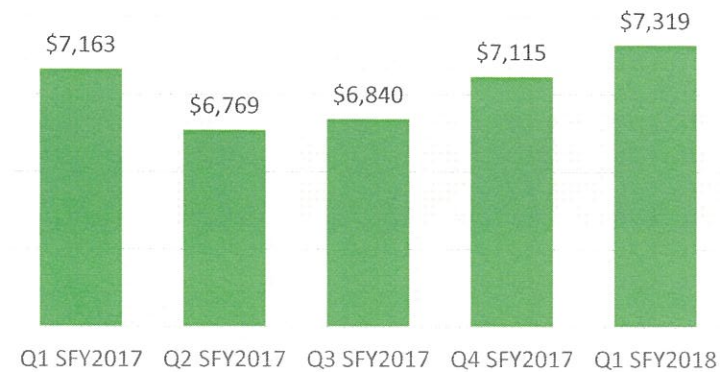
Amount Paid (\$M)



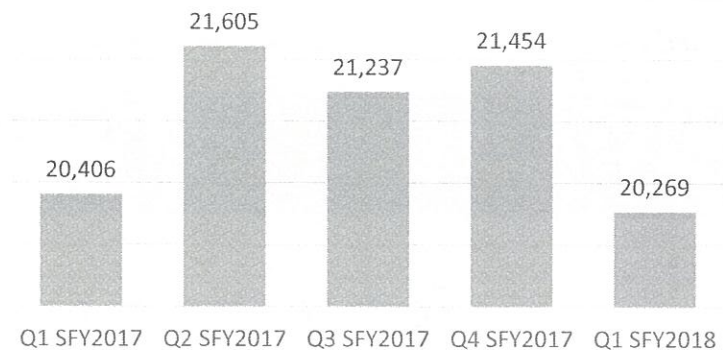
Total User Months per Quarter



Average Monthly Payment Per User



Claims

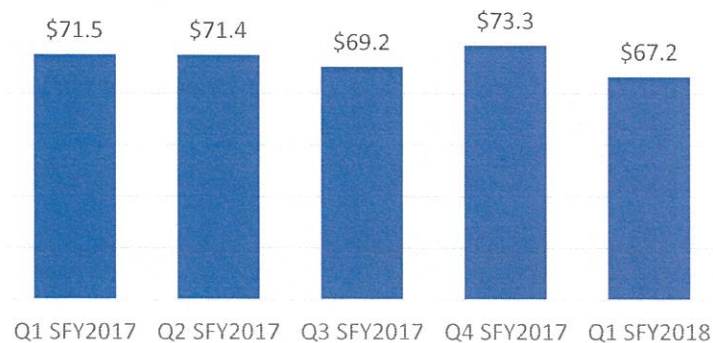


BH – Inpatient Spend by Quarter (SFY 2017-18)

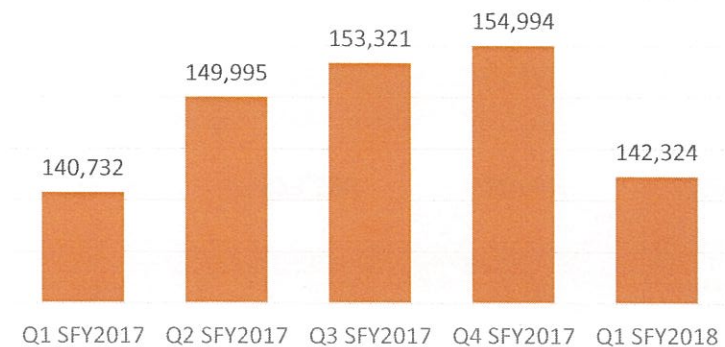
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Inpatient Psychiatric, U-21	\$29,645,026	\$31,539,378	\$31,408,675	\$33,204,289	\$31,318,328	\$30,075,052	(\$1,243,277)
Inpatient Psychiatric Crossover, U-21	\$346,138	\$310,634	\$404,893	\$401,675	\$411,277	\$394,950	(\$16,327)
Total Behavioral Health (BH) – Inpatient	\$29,991,164	\$31,850,012	\$31,813,568	\$33,605,964	\$31,729,605	\$30,470,002	(\$1,259,604)

BH – Outpatient by Quarter (SFY 2017-18)

Amount Paid (\$M)



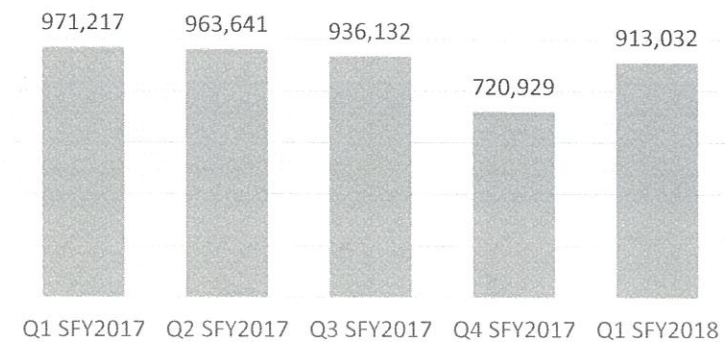
Total User Months per Quarter



Average Monthly Payment Per User



Claims

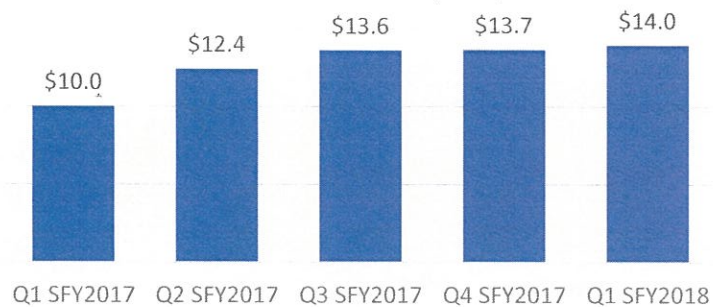


BH – Outpatient Spend by Quarter (SFY 2017-18)

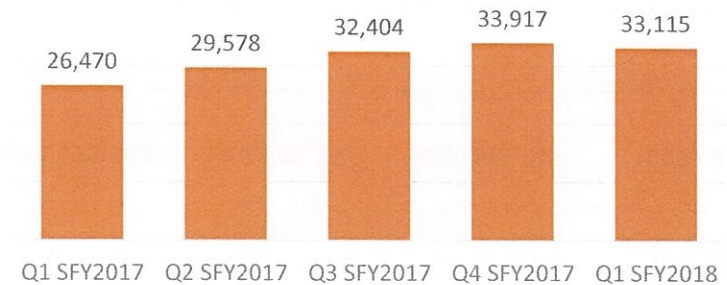
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Mental Health Clinic RSPMI	\$70,929,701	\$70,780,816	\$68,612,868	\$72,568,659	\$69,427,280	\$66,671,151	(\$2,756,128)
Rehab Services - School Based RSPMI	\$526,671	\$606,206	\$511,765	\$684,582	\$565,556	\$543,104	(\$22,451)
School-Based Mental Health Services	\$1,056	\$6,993	\$5,904	\$6,765	\$472	\$453	(\$19)
Substance Abuse Program	\$17,066	\$20,930	\$22,275	\$23,993	\$23,596	\$22,659	(\$937)
Total Behavioral Health (BH) – Outpatient	\$71,474,494	\$71,414,945	\$69,152,812	\$73,283,999	\$70,016,904	\$67,237,367	(\$2,779,535)

LTSS MOU – Independent Choices by Quarter (SFY 2017-18)

Amount Paid (\$M)



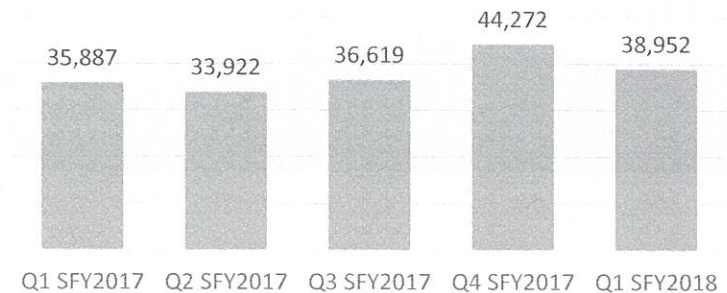
Total User Months Per Quarter



Average Monthly Payment Per User



Claims



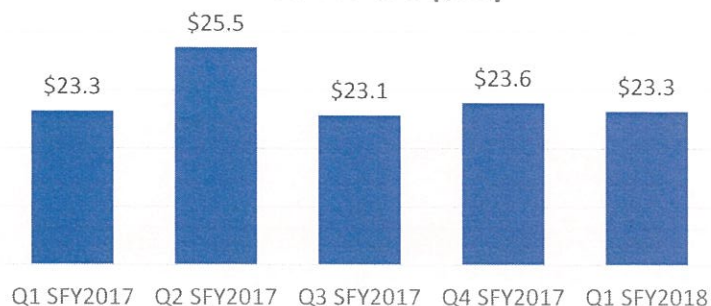
Note(s): The following Provider Types were used to determine Personal Care: '32' & '87'

LTSS MOU – Independent Choices Spend by Quarter (SFY 2017-18)

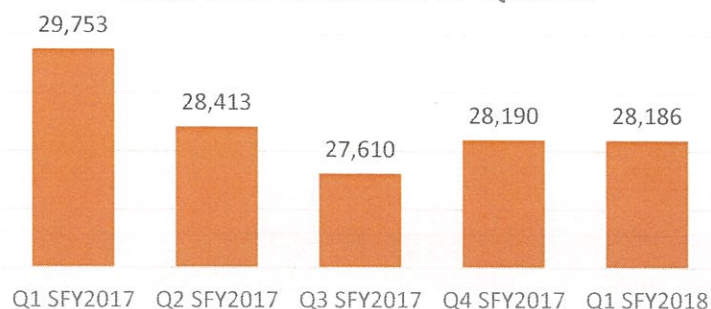
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Treatment Elderly	\$8,667,789	\$10,449,076	\$11,464,855	\$11,361,068	\$12,146,406	\$11,664,217	(\$482,189)
Refusers	\$631,125	\$694,925	\$790,300	\$815,625	\$849,030	\$815,325	(\$33,705)
Counseling/Fiscal Intermediary	\$728,660	\$1,294,344	\$1,372,302	\$1,502,850	\$1,549,721	\$1,488,200	(\$61,521)
LTSS MOU Services - Independent Choices	\$10,027,574	\$12,438,345	\$13,627,457	\$13,679,543	\$14,545,157	\$13,967,742	(\$577,415)

LTSS MOU – Personal Care by Quarter (SFY 2017-18)

Amount Paid (\$M)



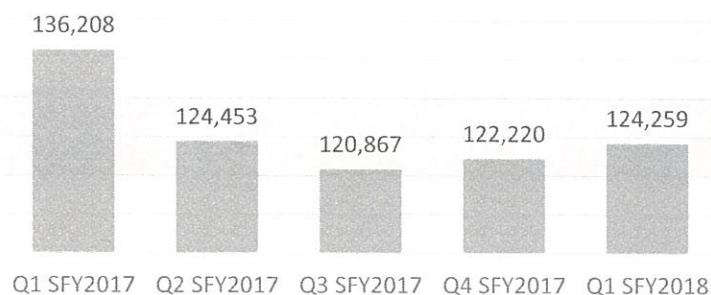
Total User Months Per Quarter



Average Monthly Payment Per User



Claims



Note(s): The following Provider Types were used to determine Personal Care: '32' & '87'

LTSS MOU – Personal Care Spend by Quarter (SFY 2017-18)

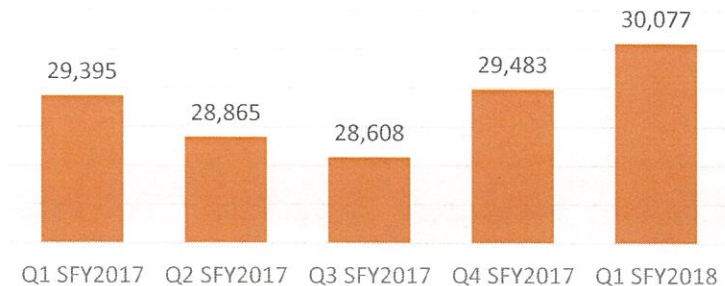
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Personal Care - Regular	\$23,251,647	\$25,297,844	\$22,642,019	\$22,788,758	\$24,086,948	\$23,130,743	(\$956,205)
Personal Care - School Based	\$19,831	\$162,161	\$482,786	\$769,471	\$142,489	\$136,833	(\$5,657)
Total LTSS MOU - Personal Care	\$23,271,478	\$25,460,005	\$23,124,805	\$23,558,229	\$24,229,437	\$23,267,575	(\$961,862)

LTSS MOU – AR Choices & Other Waivers by Quarter (SFY 2017-18)

Amount Paid (\$M)



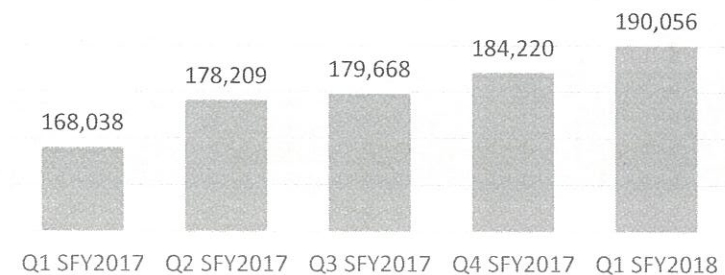
Total User Months Per Quarter



Average Monthly Payment Per User



Claims



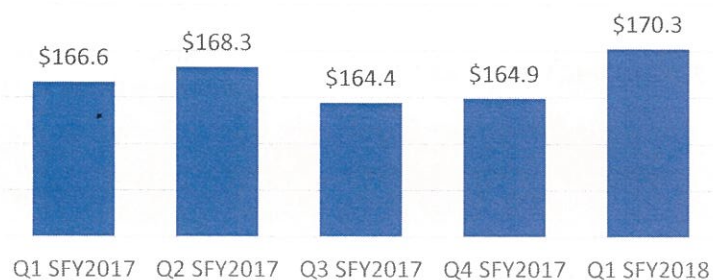
Note(s): The following Provider Types were used to determine Personal Care: '32' & '87'

LTSS MOU – AR Choices & Other Waiver Spend by Quarter (SFY 2017-18)

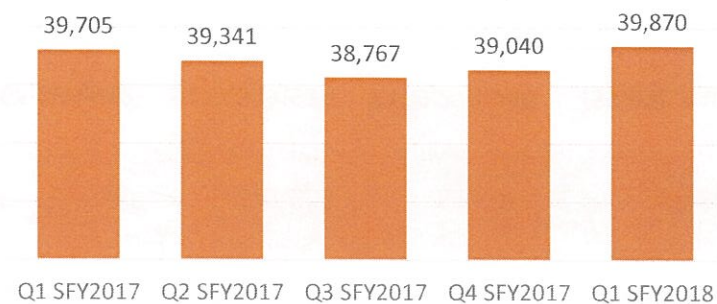
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
ARChoices in Home Care	\$26,345,508	\$29,871,786	\$29,881,084	\$30,182,548	\$32,908,151	\$31,601,761	(\$1,306,390)
ARSeniors	\$1,876,780	\$2,035,453	\$2,418,306	\$2,270,440	\$2,310,941	\$2,219,202	(\$91,740)
Former Elderchoices & APD Waivers	(\$52,151)	\$2,644	(\$116,826)	(\$16,860)	(\$27,030)	(\$25,957)	\$1,073
Total LTSS MOU - Waivers	\$28,170,137	\$31,909,883	\$32,182,564	\$32,436,127	\$35,192,062	\$33,795,006	(\$1,397,057)

LTSS MOU – Private Long Term Care/SNF by Quarter (SFY 2017-18)

Amount Paid (\$M)



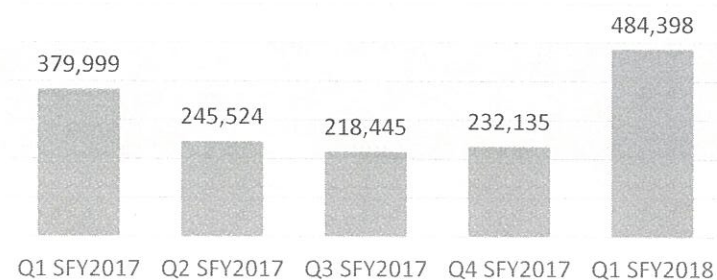
Total User Months Per Quarter



Average Monthly Payment Per User



Claims



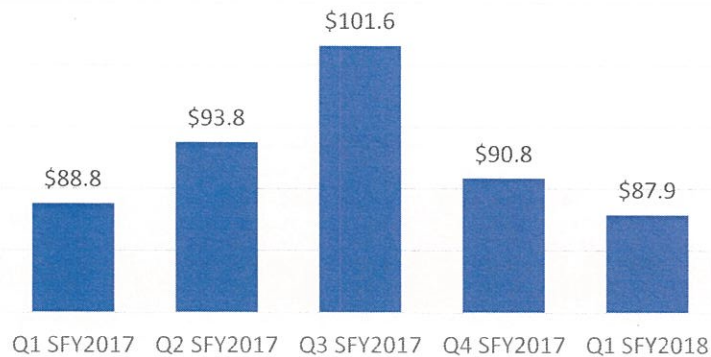
Note(s): The following Provider Types were used to determine Personal Care: '32' & '87'

LTSS MOU – Private Long Term Care/SNF Spend by Quarter (SFY 2017-18)

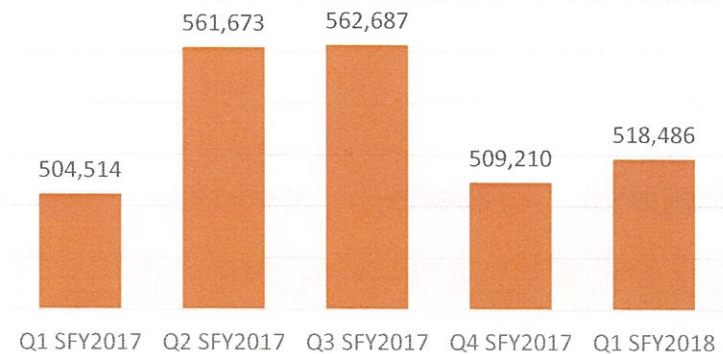
	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Private SNF	\$160,625,150	\$161,712,694	\$157,880,947	\$158,486,081	\$171,007,914	\$164,219,231	(\$6,788,683)
Private SNF Crossover	\$6,077,620	\$6,485,670	\$6,512,329	\$6,412,531	\$6,282,099	\$6,032,711	(\$249,387)
Private Long Term Care Adjustment	(\$55,480)	\$62,463	\$27,487	\$0	\$21,913	\$21,043	(\$870)
Total LTSS MOU – Private Long Term Care / SNF	\$166,647,289	\$168,260,827	\$164,420,763	\$164,898,612	\$177,311,926	\$170,272,986	(\$7,038,940)

Pharmacy by Quarter (SFY 2017-18)

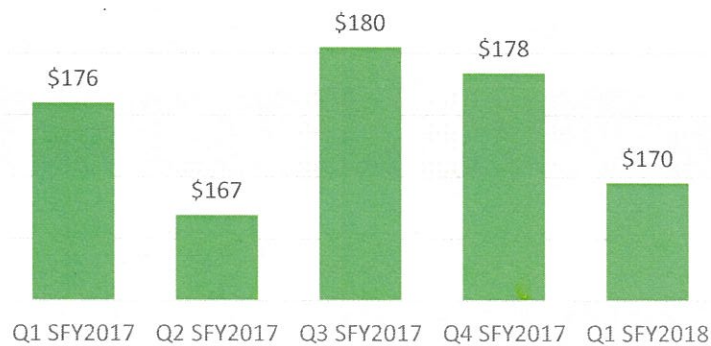
Amount Paid (\$M)



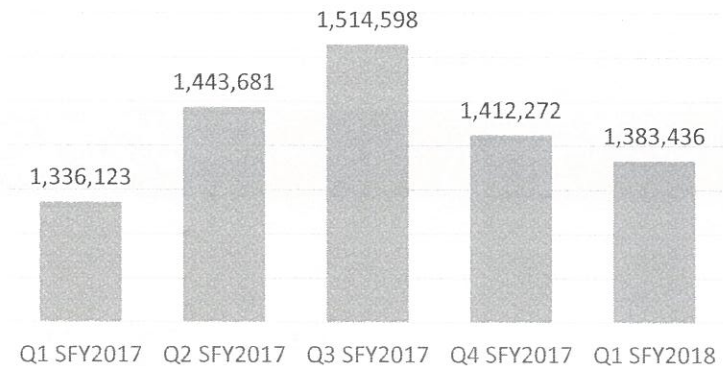
Total User Months Per Quarter



Average Monthly Payment Per User



Claims



Pharmacy Spend by Quarter (SFY 2017-18)

	Q1 SFY 2017 Actual	Q2 SFY 2017 Actual	Q3 SFY 2017 Actual	Q4 SFY 2017 Actual	Q1 SFY 2018 HCTF Baseline (5% Annual Increase)	Q1 SFY 2018 Actual	Difference
Prescription Services	\$87,898,618	\$92,703,443	\$100,523,782	\$89,866,307	\$90,517,802	\$86,924,421	(\$3,593,381)
Family Planning Drugs	\$939,965	\$992,490	\$1,034,075	\$977,051	\$1,012,724	\$972,520	(\$40,203)
Prescription Drug Adjustments	(\$58,398)	\$58,256	\$0	\$0	\$0	\$0	\$0
Total Pharmacy Cost	\$88,780,184	\$93,754,188	\$101,557,857	\$90,843,358	\$91,530,526	\$87,896,942	(\$3,633,584)

SECTION III: PROVIDER-LED PROGRAM REPORT

PASSE Enrollment by Quarter (SFY 2018-19)

Enrollment By Quarter							
	SFY 18 Q2	SFY 18 Q3	SFY 18 Q4	SFY 19 Q1	SFY 19 Q2	SFY 19 Q3	SFY 19 Q4
PASSE 1	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 2	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 3	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 4	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 5	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0	\$0	\$0	\$0

PASSE Spend by Quarter (SFY 2019-20)

Expenditures By Quarter

	SFY 19 Q3	SFY 19 Q4	SFY 20 Q1	SFY 20 Q2	SFY 20 Q3	SFY 20 Q4	Total SFY 19 Spending	Total SFY 20 Spending
PASSE 1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 2	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 3	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 4	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 5	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

PASSE Savings by Quarter (SFY 2019)

Expenditures By Quarter

	Projected SFY 19 Q3	Actual SFY 19 Q3	Projected SFY 19 Q3	Actual SFY 19 Q4	Projected SFY 19 Q4	Actual SFY 19 Q4	Projected SFY 19 Spending	Actual SFY 19 Spending	SFY 19 Difference
PASSE 1	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 2	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 3	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 4	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
PASSE 5	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0