

Division of Medical Services



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November 18, 2013

The Honorable Bill Sample, Co-Chairman
The Honorable John Charles Edwards, Co-Chairman
Arkansas Legislative Council
State Capitol Building, Room 315
Little Rock, AR 72201

Dear Senator Sample and Representative Edwards:

Submitted herewith is the Medicaid Report for the 1st quarter of SFY 2014 as required by A.C.A. Section 20-77-111. This report presents Medicaid data for the quarter July 1, 2013, through September 30, 2013.

If you have any questions regarding utilization and expenditure data, please contact Sharon Jordan, Chief Program Administrator, at 682-8489, or Tommy Carlisle, Chief Fiscal officer, at 682-0422.

Sincerely,

andy allisa juj

Director

AA/TC

Attachment

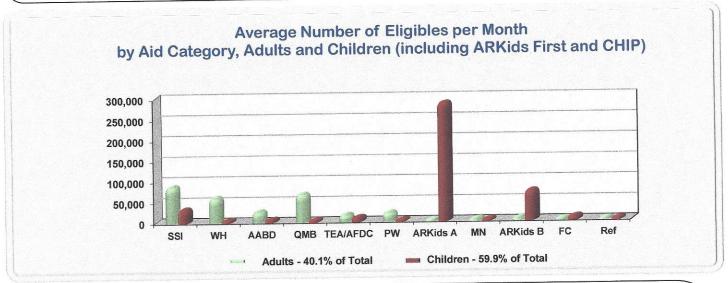
cc: Keith Gober, Analyst, Bureau of Legislative Research Michael Feehan, Analyst, Bureau of Legislative Research Phil Price, Analyst, Bureau of Legislative Research Nell Smith, Analyst, Bureau of Legislative Research Philip Adams, Office of the Governor

MEDICAID QUARTERLY REPORT MEDICAID ELIGIBLES AND RECIPIENTS FIRST QUARTER - SFY 2014

Eligibles and Recipients by Month

	SFY1	Recipients as	
	Eligibles	Recipients	% of Eligibles
Jul	681,933	344,238	50.5%
Aug	680,654	405,899	59.6%
Sep	680,175	361,138	53.1%

SFY1	Recipients as	
Eligibles	Recipients	% of Eligibles
675,192	341,853	50.6%
676,205	392,779	58.1%
672,814	404,002	60.0%
	Eligibles 675,192 676,205	675,192 341,853 676,205 392,779



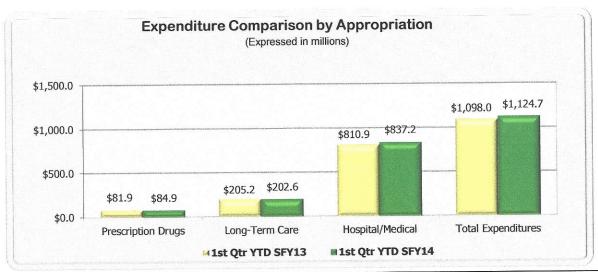
Eligibles (Adults and Children) by Aid Category

(Average for July, August, September 2014) All Adults Children 116,661 31,198 Supplemental Security Income 85.463 SSI 58.389 57,506 883 Women's Health Waiver WH 27,944 24.049 3,895 Aid to the Aged, Blind and Disabled **AABD** 65,342 28 Qualified Medicare Beneficiary 65,314 QMB 23,138 8,503 14.635 Transitional Employment Assistance TEA/AFDC 19,648 19.648 0 Pregnant Women PW 284,541 284.541 0 Low-Income Children ARKids A 2,081 1,912 169 Medically Needy MN 75,513 4,376 71,137 ARKids First Waiver ARKids B 7,396 7,656 260 Foster Care FC 8 8 Refugee Ref 680,921 407,750 Total Average Eligibles - 1st Qtr SFY 2014: 273,171 674,737 403,482 Total Average Eligibles - 1st Qtr SFY 2013: 271,255 0.9% Percentage of Increase from SFY 2013 to SFY 2014: 0.7% 1.1%

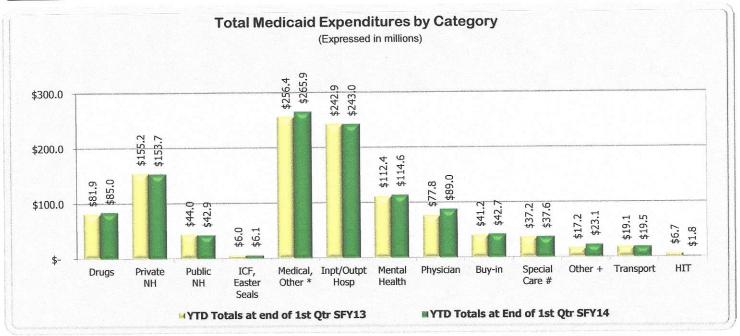
Explanation of Monthly Recipient Counts: Recipient counts include individuals who actually received services. Individuals for whom there was a managed care fee claim as part of the Primary Care Provider Program (Connect Care), but for whom there was no actual medical service, are not counted.

Sources: ACES Report IM-2414, OnDemand HMGR325J

MEDICAID QUARTERLY REPORT MEDICAID PROGRAM EXPENDITURE DATA - VENDOR PAYMENTS FIRST QUARTER - SFY 2014



YTD Amounts	Hospital/ Medical	Drugs	Long Term Care	ARKids First	Medical Expansion	TOTAL
% of Budget Spent	100.1%	100.7%	97.3%	95.4%	112.5%	99.7%
Growth Over SFY13	3.0%	3.6%	-1.2%	-1.8%	28.5%	2.4%



Actual Trust Fund Usage SFY13: \$243,941,612

Actual Trust Fund Usage this Quarter: \$0

Actual Trust Fund Usage Year-to-Date SFY14: \$0

SFY14 Projected Trust Fund Usage per 7/1 Operating Budget: \$45,437,605

SFY14 Revised Projected Trust Fund Usage 1/1/14 Operating Budget: \$0

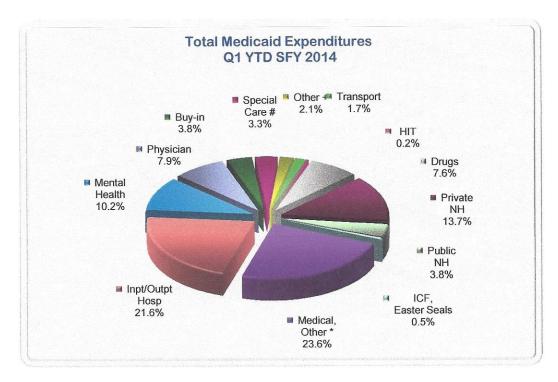
Trust Fund Balance Sept 30, 2013: \$73,907,317

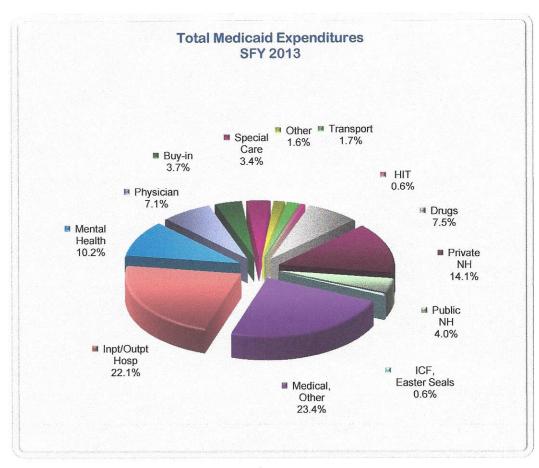
+Other includes - Case Management and Contracts

Source: DHS, DAS, Quarterly Payout Reports
Department of Human Services - Division of Medical Services

^{*}Medical,Other includes - EPSDT Screening, Rural Health Clinics, FQHC, Dental Svcs, DME, Optometrist, ElderChoices, Assisted Living & Therapy Svcs #Special Care includes - Home Health, Personal Care, Private Duty Nursing, Hospice Services

MEDICAID QUARTERLY REPORT MEDICAID PROGRAM EXPENDITURE DATA - VENDOR PAYMENTS FIRST QUARTER - SFY 2014





MEDICAID POLICY CHANGES JULY – SEPTEMBER 2013

Effective Date

Description of Policy Change

7-1-13

Rehabilitative Services for Persons with Mental Illness policy changed to specify the Psychiatric Diagnostic Assessment – Initial is for new patients while the Psychiatric Diagnostic Assessment – Continuing Care is for established patients. The change explains that only one (1) Psychiatric Diagnostic Assessment (whether Initial or Continuing Care) may be conducted without an extension of benefits. The update removes the requirement that a Psychiatric Diagnostic Assessment – Continuing Care must clarify the reason for referral during the interview of a parent (preferably both), the guardian (including the responsible DCFS caseworker) and/or the primary caretaker (including foster parents) for beneficiaries under the age of 18.

7-1-13

The Arkansas Title XIX State Plan has been amended to comply with 1902(a)(77), 1902(a)(39) and 1902(kk) of the Social Security Act which implements new screening methods and imposes an enrollment fee on institutional providers who are not already enrolled in Medicare. Preenrollment and post enrollment on-site visits will be made based on moderate and high risk categories of providers.

8-1-13

The Dental program implemented changes to benefit limits and authorization requirements to be more efficient. The changes to benefit limits focus on interperiodic dental screenings for beneficiaries under the age of 21 and radiographs for beneficiaries of all ages. In addition, prior authorization is required for surgical extractions for beneficiaries under the age of 21.

8-1-13

The Dental Provider Manual was expanded to provide more in depth information and requirements for orthodontic treatment. Specifically, comprehensive orthodontic treatment will now require a score of at least 28 on the HLD index as opposed to 26. The manual also addresses specific requirements for limited orthodontic treatment. Additionally, the update includes the addition of a national best practice for Composite Resin Restorations which allows only one amalgam or composite restoration per surface allowed every 2 years.

9-1-13

Arkansas Medicaid added three additional standardized tests to be available for occupational and physical therapists who treat Arkansas Medicaid beneficiaries. The tests are listed as the following: Wide Range Assessment of Visual–Motor Abilities (WRAVMA)—for Occupational Therapy, Sensory Processing Measure (SPM)—for Occupational and Physical Therapy and Sensory Processing Measure-Preschool (SPM-P)—for Occupational and Physical Therapy.

MEDICAID ELIGIBILITY CHANGES JULY-SEPTEMBER 2013

07-30-13

MS 13-10, Individuals Eligible for Medicaid. Policy MS 2000-2220 was revised to reflect current policies and procedures regarding Medical Services Overview and to comply with Act 98 which requires the use of respectful language.