Governor Asa Hutchinson
250 State Capitol
Little Rock, Arkansas 72201

Dear Governor Hutchinson:

Enclosed is the Department of Human Services’ (DHS) Medicaid Transformation Scorecard and Quarterly Reports for the first quarter (Q1) and second quarter (Q2) of State Fiscal Year (SFY) 2021. I am pleased to report that DHS continues to be on track to achieve the five-year savings target of $835 million you established with the Health Care Task Force (HCTF) for the period SFY 2017-2021. Overall, DHS spending for traditional Medicaid has been $1.172 billion lower through SFY 2021 Q2 than the HCTF projected spending. The savings goal for SFY 2021 is $212 million. Spending was $264 million lower through Q2.

In addition, the HCTF projected additional savings of $40 million in SFY 2021 due to the implementation of a provider-led care organization model for individuals with serious mental illness and developmental disabilities. This model would also generate $56 million in premium tax revenues according to the HCTF projections in SFY 2021. The Provider-led Arkansas Shared Savings (PASSE) program was implemented ahead of schedule and the three PASSE organizations took full risk beginning in March 2019. Thus far, the PASSE program has lowered spending by $81 million compared to the baseline and has generated $55 million in premium tax revenue.

The quarterly savings goals for Q1 and Q2 were exceeded. Savings for each of the program areas (Developmental Disabilities, Behavioral Health, Long-term Services and Supports, Pharmacy, Dental, and PASSE) were also achieved. As you know, SFY 2021 is the final year of the five-year Medicaid Transformation Initiative. While the cumulative savings targets will be exceeded, the cost of the Medicaid program is influenced by many factors including economic conditions, advances in medical technology, changes in utilization and the cost of providing services. As SFY 2022 begins, a number of rate increases are due to take effect. Several changes to increase the amount of services available to adults were also made during the most recent legislative session that DHS will implement.

The Public Health Emergency (PHE) due to COVID-19 has had mixed results on health care expenditures nationally as well as in Arkansas. Enrollment, utilization, the use of telemedicine to deliver services, and increased vaccinations all have had various impacts on expenditures. While national health care expenditures slowed for much of 2020, the rate of spending is returning to pre-COVID levels.
The Division of Medical Services (DMS) has completed 11 rate reviews; four draft reports are out for provider comments; and six are under internal review. DMS has begun research on the next round of rates for:

- Non-primary care physician services
- Outpatient behavioral health services
- Inpatient hospital services
- Outpatient hospital services
- Home and Community Based Services (HCBS) and HCBS-like services under the PASSE program
- Autism waiver

DMS will also review potential changes to the nursing facility cost manual due to changes in Medicare allowable costs and the impact of COVID.

With the close of SFY 2021, we will submit the final scorecard for Medicaid Transformation 2017-2021 to you shortly. We greatly appreciate your continued support and leadership in this important matter.

Sincerely,

Cindy Gillespie
Secretary, Arkansas Department of Human Services
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 projected (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.”
1. In addition to the $835 million savings target, the final report to the HCTF projected that a provider-led risk-based care model for the BH and DD populations could be implemented by DHS in SFY 2021. The report estimated the risk-based model would produce $40 million in savings in SFY 2021 when it would go “full risk.” These projected savings have therefore been added onto the $835 million target for the SFY 2017-2021 period. PASSE went “full-risk in March 2019 (16 months ahead of schedule). The HCTF also projected “full risk” would generate $56 million in premium tax in SFY 2021 and $58 million in SFY 2022. DHS has adopted the SFY 2022 targets as the measures for SFY 2021.

2. Act 775 created the risk-based provider organizations (PASSEs) and reserved at least 50% of premium taxes to be used to reduce the DD waitlist.

3. Act 802 also directs DHS to measure (1) increase care management and care coordination; (2) value-based purchasing strategies; (3) reduction in duplication of healthcare services; (4) reduction in unnecessary healthcare services; and (5) the degree of risk assumed by risk-based provider organizations.

4. Three provider-led organizations, Arkansas Total Care, Empower, and Summit Community Care, assumed full-risk for approximately 42,000 Medicaid recipients with high levels of need for BH and/or DD specialty services on March 1, 2019. The PASSEs receive a monthly capitated payment from DHS for each member to cover all specialty services and halo costs.

As services are covered by a PASSE, there are reductions in direct payments to providers in fee-for-service (FFS) Medicaid for the individuals enrolled in a PASSE. DHS has applied a “risk corridor” that allows DHS and the PASSEs to share savings and protect PASSEs against unexpected high costs.

5. Each PASSE is required to provide care coordination. DHS can sanction a PASSE for failure to meet care coordination performance measures.

6. PASSEs are allowed and encouraged to use value-based purchasing strategies with their network providers, but not required to do so.

7. DHS will use encounter claims data analyses to determine reductions in duplication of health care services. Because of the lag time in obtaining clean encounters and the need for sufficient time for the PASSEs to gain experience, such analyses will occur in calendar year 2020 and thereafter.

8. PASSEs have authority to ensure that healthcare is medically necessary for an individual. Encounter claims will be analyzed for this purpose as well.

9. The PASSE program is regulated under federal Medicaid managed care rules and state health insurance rules.
### HCTF Baseline Projected Spending With Traditional Medicaid Transformation Initiatives and DD and BH Provider-Led Model (PASSE)

<table>
<thead>
<tr>
<th>Spending and Savings by Year &amp; Program</th>
<th>SFY 2017</th>
<th>SFY 2018</th>
<th>SFY 2019</th>
<th>SFY 2020</th>
<th>SFY 2021</th>
<th>SFY 2017-21</th>
</tr>
</thead>
<tbody>
<tr>
<td>*HCTF Baseline, Traditional Medicaid</td>
<td>$5,379</td>
<td>$5,648</td>
<td>$5,930</td>
<td>$6,227</td>
<td>$6,538</td>
<td>$29,722</td>
</tr>
<tr>
<td>‡HCTF Projected Traditional Spending with Transformation Initiatives</td>
<td>$5,302</td>
<td>$5,495</td>
<td>$5,757</td>
<td>$6,026</td>
<td>$6,322</td>
<td>$28,902</td>
</tr>
<tr>
<td>HCTF Projected Traditional Spending with Transformation Initiatives and Full-risk Provider-led Model</td>
<td>$5,302</td>
<td>$5,495</td>
<td>$5,757</td>
<td>$6,026</td>
<td>$6,227</td>
<td>$28,806</td>
</tr>
<tr>
<td>HCTF Projected Savings with Traditional and Full-risk Provider-led Model for BH and DD</td>
<td><strong>$77</strong></td>
<td><strong>$153</strong></td>
<td><strong>$173</strong></td>
<td><strong>$201</strong></td>
<td><strong>$311</strong></td>
<td><strong>$915</strong></td>
</tr>
<tr>
<td>HCTF Full-risk Provider-Led Model for BH and DD “PASSE” Projected Savings</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$40</td>
<td>$40</td>
</tr>
<tr>
<td>HCTF Full-risk Provider-Led Model for BH and DD “PASSE” Projected Premium Tax Revenue</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$56</td>
<td>$56</td>
</tr>
</tbody>
</table>

SECTION I
Medicaid Transformation Savings Scorecard
Note(s): (1) SFY 2019 savings were adjusted due to the PASSEs becoming full risk in March 2019. This resulted in a $73M reduction in Overall SFY 2019 savings from $402M to $329M.

(2) In prior scorecards the Dental premium tax was counted towards savings. Starting in SFY 2020, all premium taxes (Dental and PASSE) will be counted as a fiscal impact. Therefore HCTF savings goals for SFY 2018 and SFY 2019 were reduced by $3M each year (the amount of Dental premium tax).
Traditional Medicaid Spending vs HCTF Toplines
SFY 2017-2021

Dollars in Millions ($M)

- HCTF Topline (5% Annual Growth)
- HCTF Transformation w/ PASSE
- HCTF Transformation Topline (4.5% Annual Growth)
- Actual Spending (3.6% Annual Growth)

Note: Q4 SFY2020 Forward Impacted by COVID-19 Public Health Emergency

(2) COS Weekly SFY2017-19 - Week 52
Traditional Medicaid Scorecard
Savings Overview by Program

Overall Savings ($M)

HCTF Savings Goal (SFY17-21) $835
Savings-to-Date (SFY17 - Q1 SFY21) $1,059

Program Savings (SFY17 - Q1 SFY21) compared to their SFY 2017-21 HCTF Savings Goals ($M)

DD $156
BH $167
LTSS $209
Pharmacy $215
Dental $328
PASSE $31

Note(s):
(1) Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.
(2) SFY 2019 savings were adjusted due to the PASSEs becoming full risk in March 2019. This resulted in a $73M reduction in Overall SFY 2019 savings from $402M to $329M.

Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 13

- Bar Charts Not To Scale -
Traditional Medicaid Scorecard
Savings-to-Date (SFY 2017 - Q1 SFY 2021)

Overall Savings-to-Date ($M) (SFY 2017 - Q1 SFY 2021)

HCTF Savings Goal to Date (SFY17 - Q1 SFY21)

$687

$10

Savings-to-Date (SFY17 - Q1 SFY21)

$1,059

Transformation  HCTF  PASSE

Program Savings-to-Date compared to their Savings Goals-to-Date ($M)
(SFY 2017 - Q1 SFY 2021)

DD
$121

$241

BH
$122

$209

LTSS
$178

$318

Pharmacy
$213

$267

Dental
$14

$31

PASSE
$10

$67

Note(s): (1) Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.
(2) SFY 2019 savings were adjusted due to the PASSEs becoming full risk in March 2019. This resulted in a $73M reduction in Overall SFY 2019 savings from $402M to $329M

Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 13 - Bar Charts Not To Scale -
Traditional Medicaid Scorecard
SFY 2021

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Overall Savings ($M)

HCTF SFY21 Savings Goal $212
Savings (Q1 SFY21) $151

Transformation ■ HCTF ■ PASSE

SFY 2021 Savings by Program ($M)

DD $47 $32
BH $60 $15
LTSS $50 $34
Pharmacy $50 $31
Dental $5 $2
PASSE $40 $37

Note(s): Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.
Traditional Medicaid Scorecard
Q1 - SFY 2021

Q1 - SFY 2021 Overall Savings ($M)

- HCTF Savings Goal: $53.0
- Savings: $150.5
  - Transformation
  - HCTF
  - PASSE

Q1 - SFY 2021 Savings by Program ($M)

- DD: $32.3
- BH: $14.5
- LTSS: $33.6
- Pharmacy: $31.2
- Dental: $1.9
- PASSE: $37.0

Note(s): Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.

Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 13
Overall Premium Taxes Collected ($M)

- HCTF Revenue Goal (SFY19-21): $70
- Premium Tax Collected-to-Date (SFY19 - Q4 SFY20): $52
- HCTF Revenue Goal (SFY 2020): $4
- Premium Tax Collected (SFY 2020): $36
- HCTF Revenue Goal (SFY 2019): $3
- Premium Tax Collected (SFY 2019): $15

SFY 2020 by Program

- PASSE: $0
- Dental: $34
- $4
- $2

Program Revenues compared to their SFY 2017-21 HCTF Revenue Goals ($M)

- PASSE: $56
- Dental: $48
- $14
- $4

Note(s): The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter’s premium tax payments. HCTF Revenue Goal for PASSE begins in SFY2021.

Source(s): (1) Quarter 1 – SFY 2021 Scorecard Calculations
(2) 2020 RBPO Premium Tax Collections-4thQ_annual update (12.8.20)
# Medicaid Transformation Spend by Quarter

**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q1 - SFY20 Actual</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmentally Disabled (DD)</td>
<td>$83.0</td>
<td>$94.3</td>
<td>$94.6</td>
<td>$67.3</td>
<td>$104.3</td>
<td>$72.0</td>
<td>$32.3</td>
</tr>
<tr>
<td>Behavioral Health (BH)</td>
<td>$15.3</td>
<td>$17.0</td>
<td>$15.1</td>
<td>$16.3</td>
<td>$27.4</td>
<td>$12.9</td>
<td>$14.5</td>
</tr>
<tr>
<td>Long Term Services &amp; Supports (LTSS)</td>
<td>$240.8</td>
<td>$231.1</td>
<td>$235.6</td>
<td>$278.5</td>
<td>$278.2</td>
<td>$244.6</td>
<td>$33.6</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>$71.1</td>
<td>$77.2</td>
<td>$82.7</td>
<td>$72.0</td>
<td>$105.1</td>
<td>$73.9</td>
<td>$31.2</td>
</tr>
<tr>
<td>Dental</td>
<td>$34.8</td>
<td>$35.1</td>
<td>$33.8</td>
<td>$35.0</td>
<td>$38.8</td>
<td>$36.9</td>
<td>$1.9</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>$445.0</strong></td>
<td><strong>$454.6</strong></td>
<td><strong>$461.8</strong></td>
<td><strong>$469.1</strong></td>
<td><strong>$553.8</strong></td>
<td><strong>$440.3</strong></td>
<td><strong>$113.5</strong></td>
</tr>
</tbody>
</table>

**Note(s):**
1. Further details of each section can be found in Section III and the Appendix.
2. The reductions in DD and BH spending from previous scorecards is the result of removing PASSE participants and/or programs affected by the PASSE.
3. Pharmacy savings are based on gross pharmacy expenditures. It does not factor in drug rebates.

**Source(s):**
1. Quarter 1 - SFY 2021 Scorecard Calculations
2. COS Weekly SFY2021 - Week 13
## Savings Attributed to Provider-Led (PASSE) SFY 2021

Note: Q4 SFY2020 forward impacted by COVID-19 public health emergency.

<table>
<thead>
<tr>
<th>Per Member Per Month (PMPM)</th>
<th>Values / Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected Baseline PMPM for SFY 2021</td>
<td>$2,470</td>
</tr>
<tr>
<td>Q1 - 2021 PASSE PMPM (Actual)</td>
<td>$2,188</td>
</tr>
<tr>
<td>PMPM Savings (Q1 2021 Projected - Q1 2021 Actual)</td>
<td>$282</td>
</tr>
<tr>
<td>Q1 - 2021 Quarterly Enrollment Member Months</td>
<td>131,390</td>
</tr>
<tr>
<td>PASSE Savings / (Cost) Q1 - 2021</td>
<td>$37.0 M</td>
</tr>
</tbody>
</table>

**Note(s):** PASSE rates are set on a calendar year basis. To hold the savings target constant, savings are calculated by using the composite PMPM from SFY 2020 indexed by 4.5% annual growth. The savings are the difference between the baseline and the actual PMPM multiplied by member months in the quarter.
### Traditional Medicaid Spend by Quarter
#### SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q1 - SFY20 Actual</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional Medical Services</td>
<td>$147.5</td>
<td>$162.1</td>
<td>$152.8</td>
<td>$166.6</td>
<td>$141.5</td>
</tr>
<tr>
<td>Non-Institutional Medical Services</td>
<td>$119.5</td>
<td>$131.8</td>
<td>$132.0</td>
<td>$100.0</td>
<td>$113.9</td>
</tr>
<tr>
<td>Habilitative &amp; Rehabilitative Services</td>
<td>$112.4</td>
<td>$124.3</td>
<td>$123.8</td>
<td>$72.0</td>
<td>$100.5</td>
</tr>
<tr>
<td>Long-Term Services &amp; Supports</td>
<td>$302.5</td>
<td>$284.8</td>
<td>$295.1</td>
<td>$312.4</td>
<td>$293.5</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>$71.2</td>
<td>$77.2</td>
<td>$82.8</td>
<td>$72.1</td>
<td>$73.9</td>
</tr>
<tr>
<td>Capitated Payments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Includes PASSE, NET, PCMH, and Dental Managed Care)</td>
<td>$446.9</td>
<td>$402.3</td>
<td>$324.3</td>
<td>$293.0</td>
<td>$324.3</td>
</tr>
<tr>
<td>Supplementals/Cost-Settlements/Access Payments</td>
<td>$169.0</td>
<td>$16.1</td>
<td>$207.5</td>
<td>$219.1</td>
<td>$167.0</td>
</tr>
<tr>
<td>Non-Claims Payments</td>
<td>$126.5</td>
<td>$117.7</td>
<td>$141.3</td>
<td>$278.2</td>
<td>$167.3</td>
</tr>
</tbody>
</table>

**Total Traditional Medicaid**

- Q1 - SFY20: $1,495.5
- Q2 - SFY20: $1,316.2
- Q3 - SFY20: $1,459.7
- Q4 - SFY20: $1,513.3
- Q1 - SFY21: $1,382.0

**Note(s):**
1. These categories contain Contracts, HDCs, Part D claw backs, and other programs which are not part of transformation.
2. As the PASSEs pay for Medical Services, Habilitative & Rehabilitative Services, and Prescription Drugs for their members, there will be corresponding reductions in those fee-for-service expenditures.
SECTION II
Medicaid Enrollment & Spending Report
Overall Medicaid Spend by Quarter ($M)
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

**Traditional Medicaid**
- Q1 SFY 2020: $1,495
- Q2 SFY 2020: $1,316
- Q3 SFY 2020: $1,460
- Q4 SFY 2020: $1,513
- Q1 SFY 2021: $1,382

**Arkansas Works**
- Q1 SFY 2020: $461
- Q2 SFY 2020: $461
- Q3 SFY 2020: $436
- Q4 SFY 2020: $463
- Q1 SFY 2021: $487

Source(s): COS Weekly SFY2021 - Week 13
Medicaid Enrollment by Quarter
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th></th>
<th>Q1 SFY 2020</th>
<th>Q2 SFY 2020</th>
<th>Q3 SFY 2020</th>
<th>Q4 SFY 2020</th>
<th>Q1 SFY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>380,689</td>
<td>381,528</td>
<td>375,172</td>
<td>380,364</td>
<td>412,713</td>
</tr>
<tr>
<td>Adults</td>
<td>76,163</td>
<td>74,714</td>
<td>73,078</td>
<td>76,309</td>
<td>88,881</td>
</tr>
<tr>
<td>Disabled</td>
<td>130,260</td>
<td>129,547</td>
<td>129,220</td>
<td>129,399</td>
<td>139,865</td>
</tr>
<tr>
<td>Elderly</td>
<td>51,317</td>
<td>51,693</td>
<td>51,700</td>
<td>52,664</td>
<td>61,343</td>
</tr>
<tr>
<td>ARWorks</td>
<td>262,268</td>
<td>267,193</td>
<td>261,107</td>
<td>274,002</td>
<td>293,346</td>
</tr>
<tr>
<td>Total</td>
<td>900,697</td>
<td>904,675</td>
<td>890,277</td>
<td>912,738</td>
<td>996,148</td>
</tr>
</tbody>
</table>

Note(s): This enrollment report was run on Dec 2, 2020. Enrollment is counted on the last day of each month. Due to the COVID-19 public health emergency starting in Q4, Medicaid suspended disenrollment.

Source(s): Quarterly Enrollment by Group (12.02.20)
# Medicaid Member Months by Quarter

**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th></th>
<th>Q1 SFY 2020</th>
<th>Q2 SFY 2020</th>
<th>Q3 SFY 2020</th>
<th>Q4 SFY 2020</th>
<th>Q1 SFY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>1,139,230</td>
<td>1,144,273</td>
<td>1,133,440</td>
<td>1,136,735</td>
<td>1,229,492</td>
</tr>
<tr>
<td>Adults</td>
<td>228,756</td>
<td>226,316</td>
<td>221,150</td>
<td>226,560</td>
<td>264,781</td>
</tr>
<tr>
<td>Disabled</td>
<td>390,825</td>
<td>389,500</td>
<td>388,416</td>
<td>388,062</td>
<td>416,665</td>
</tr>
<tr>
<td>Elderly</td>
<td>153,256</td>
<td>154,935</td>
<td>155,320</td>
<td>157,138</td>
<td>182,744</td>
</tr>
<tr>
<td>ARWorks</td>
<td>784,528</td>
<td>794,660</td>
<td>789,441</td>
<td>811,556</td>
<td>873,892</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,696,595</strong></td>
<td><strong>2,709,684</strong></td>
<td><strong>2,687,767</strong></td>
<td><strong>2,720,051</strong></td>
<td><strong>2,967,574</strong></td>
</tr>
</tbody>
</table>

**Note(s):** This enrollment report was run on Dec 2, 2020. Enrollment is counted on the last day of each month. Due to the COVID-19 public health emergency starting in Q4, Medicaid suspended disenrollment.
Medicaid Quarterly Per Member Per Month (PMPM)
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Note(s): This enrollment report was run on Dec 2, 2020. Enrollment is counted on the last day of each month.

Source(s): (1) COS Weekly SFY2021 - Week 13
(2) Quarterly Enrollment by Group (12.2.20)
SECTION III
Program Scorecards
The vast majority of ICF and DD Waiver (Autism and CES) users have transitioned over to the PASSEs. As a result, starting in Q1 - SFY 2020 the Scorecard will only measure savings on Therapy Caps and EIDT/ADDT.
Developmentally Disabled (DD)
Spending Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Spending ($M)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>SFY2020</th>
<th>SFY2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td>$83.0</td>
<td>$72.0</td>
</tr>
<tr>
<td>Q2</td>
<td>$94.3</td>
<td></td>
</tr>
<tr>
<td>Q3</td>
<td>$94.6</td>
<td></td>
</tr>
<tr>
<td>Q4</td>
<td>$67.3</td>
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</tr>
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</table>

Per User Per Month by Program

<table>
<thead>
<tr>
<th>Quarter</th>
<th>SFY2020</th>
<th>SFY2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td>$2,000</td>
<td>$1,287</td>
</tr>
<tr>
<td>Q2</td>
<td>$1,800</td>
<td>$1,800</td>
</tr>
<tr>
<td>Q3</td>
<td>$1,600</td>
<td>$1,381</td>
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<td>Q4</td>
<td>$1,400</td>
<td>$1,800</td>
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<tr>
<td>Q1</td>
<td>$1,200</td>
<td>$347</td>
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</table>

Spending by Program ($M)

<table>
<thead>
<tr>
<th>Program</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy Caps</td>
<td>$44.4 $46.5 $49.8 $39.8 $38.3</td>
</tr>
<tr>
<td>EIDT-ADDT</td>
<td>$38.6 $47.8 $44.8 $27.5 $33.7</td>
</tr>
</tbody>
</table>

Source(s): COS Weekly SFY2021 - Week 13

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Developmentally Disabled (DD)
Program Overview

Users by Program

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

Users Months by Program

Source(s): 5151 Scorecard – DD year over year and monthly (10.28.20)
Behavioral Health (BH)
Savings Overview

Due to the vast majority of Inpatient and Outpatient BH users transitioning over to the PASSEs, starting in Q1 - SFY 2020 the Scorecard will only measure savings on Non-PASSE users of Inpatient and Outpatient BH services.

As a result, the totals shown on page 29 and 30 reflect those of Non-PASSE users.

Source(s): Quarter 1 - SFY 2021 Scorecard Calculations
Behavioral Health (BH)
Spending Overview

Spending ($M)

Q1 - SFY20: $15.3
Q2 - SFY20: $17.0
Q3 - SFY20: $15.1
Q4 - SFY20: $16.3
Q1 - SFY21: $12.9

Per User Per Month by Program

Spending by Program ($M)

Percent of Total

Q1 - SFY20: $10.1 $10.5 $9.9 $10.0 $8.0
Q2 - SFY20: $5.2 $6.4 $5.2 $6.3 $4.9
Q3 - SFY20: $5.2 $6.4 $5.2 $6.3 $4.9
Q4 - SFY20: $5.2 $6.4 $5.2 $6.3 $4.9
Q1 - SFY21: $5.2 $6.4 $5.2 $6.3 $4.9

Outpatient
Inpatient

Source(s): COS Weekly SFY2021 – Week 13
Behavioral Health (BH)
Program Overview

Users by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
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</thead>
<tbody>
<tr>
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<td>1,594</td>
<td>1,281</td>
<td>1,155</td>
<td>969</td>
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<td>70%</td>
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<tr>
<td>0%</td>
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</tr>
</tbody>
</table>

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>1,651</td>
<td>2,745</td>
<td>2,139</td>
<td>1,950</td>
<td>1,487</td>
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<tr>
<td>80%</td>
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<td>70%</td>
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</tbody>
</table>

Users Months by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>1,161</td>
<td>1,743</td>
<td>1,380</td>
<td>1,259</td>
<td>1,053</td>
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<tr>
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<td></td>
</tr>
<tr>
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<td>70%</td>
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<tr>
<td>0%</td>
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</tr>
</tbody>
</table>

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Source(s): 9713 Scorecard - BH IP OP with Amt Range (10.28.20)
Long Term Services and Supports (LTSS)
Savings Overview

Savings ($M)

- HCTF Savings Goal (SFY17-21) $215
- Savings to Date (SFY17 - Q1 2021) $313
- HCTF Savings Goal (SFY21) $50
- Savings (Q1 - SFY21) $33.6
- HCTF Savings Goal (Q1 - SFY21) $13
- Savings (Q1 - SFY21) $33.6

In Q1 - SFY 2021, Personal Care and Independent Choices were over their savings targets by $3.7M and $1.5M respectively due to rate increases for both programs.

Savings per Quarter ($M)

Q1 - Q4 SFY 2021 Cumulative Savings ($M)

Independent Choices $18.5
Personal Care $20.3
ARChoices & Other Waivers
Private Long Term Care/SNF

Note(s):
1. In Q1 - SFY 2020, Independent Choices was over their savings target by $116K
2. In Q3 - SFY 2020, Personal Care was over their savings target by $25K
3. In Q4 - SFY 2020, Personal Care and Private SNFs were over their savings targets by $7.2M and $9.8M respectively

Source(s): Quarter 1 - SFY 2021 Scorecard Calculations
Long Term Services and Supports (LTSS)

Spending Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Spending ($M)

<table>
<thead>
<tr>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>$240.8</td>
<td>$231.1</td>
<td>$235.6</td>
<td>$278.5</td>
<td>$244.6</td>
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Spending by Program ($M)

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Private Long Term Care/SNF</th>
<th>ARChoices &amp; Other Waivers</th>
<th>Personal Care</th>
<th>Independent Choices</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>$20.1</td>
<td>$11.8</td>
<td>$175.7</td>
<td>$425</td>
</tr>
<tr>
<td>90%</td>
<td>$33.2</td>
<td>$11.8</td>
<td>$166.7</td>
<td>$429</td>
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<tr>
<td>80%</td>
<td>$30.6</td>
<td>$11.7</td>
<td>$170.6</td>
<td>$588</td>
</tr>
<tr>
<td>70%</td>
<td>$25.7</td>
<td>$11.7</td>
<td>$201.3</td>
<td>$436</td>
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<tr>
<td>60%</td>
<td>$34.3</td>
<td>$11.9</td>
<td></td>
<td>$536</td>
</tr>
<tr>
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<tr>
<td>10%</td>
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</table>

Per User Per Month by Program

<table>
<thead>
<tr>
<th>Q1 SFY20</th>
<th>Q2 SFY20</th>
<th>Q3 SFY20</th>
<th>Q4 SFY20</th>
<th>Q1 SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>$4,311</td>
<td>$4,140</td>
<td>$4,352</td>
<td>$5,030</td>
<td>$4,365</td>
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</table>

<table>
<thead>
<tr>
<th>Private Long Term Care/SNF</th>
<th>ARChoices &amp; Other Waivers</th>
<th>Personal Care</th>
<th>Independent Choices</th>
</tr>
</thead>
<tbody>
<tr>
<td>$978</td>
<td>$912</td>
<td>$1,301</td>
<td>$804</td>
</tr>
<tr>
<td>$795</td>
<td>$748</td>
<td>$841</td>
<td>$975</td>
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<tr>
<td></td>
<td></td>
<td>$1,140</td>
<td>$425</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>$588</td>
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<td></td>
<td>$436</td>
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<tr>
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<td></td>
<td></td>
<td>$536</td>
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</tbody>
</table>
**Long Term Services and Supports (LTSS)**

**Program Overview**

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

### Users by Program

<table>
<thead>
<tr>
<th></th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>9,204</td>
<td>9,119</td>
<td>9,110</td>
<td>9,216</td>
<td>8,879</td>
</tr>
<tr>
<td>75%</td>
<td>8,448</td>
<td>10,048</td>
<td>8,631</td>
<td>9,980</td>
<td>10,648</td>
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<tr>
<td>50%</td>
<td>11,188</td>
<td>10,912</td>
<td>11,063</td>
<td>9,968</td>
<td>10,488</td>
</tr>
<tr>
<td>25%</td>
<td>13,540</td>
<td>13,694</td>
<td>13,042</td>
<td>13,323</td>
<td>13,103</td>
</tr>
<tr>
<td>0%</td>
<td>13,540</td>
<td>13,694</td>
<td>13,042</td>
<td>13,323</td>
<td>13,103</td>
</tr>
</tbody>
</table>

**Note(s):** Users are the number of people who receive services that were billed under various categories of service. Users **DO NOT** reflect the number of people who are enrolled in a waiver program.

### Claims by Program

<table>
<thead>
<tr>
<th></th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>35,148</td>
<td>34,635</td>
<td>39,467</td>
<td>34,542</td>
<td>39,577</td>
</tr>
<tr>
<td>80%</td>
<td>144,660</td>
<td>136,826</td>
<td>125,214</td>
<td>132,780</td>
<td>136,310</td>
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<tr>
<td>60%</td>
<td>185,509</td>
<td>170,979</td>
<td>254,736</td>
<td>161,665</td>
<td>171,093</td>
</tr>
<tr>
<td>40%</td>
<td>327,636</td>
<td>280,227</td>
<td>191,039</td>
<td>236,397</td>
<td>192,084</td>
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<tr>
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<tr>
<td>0%</td>
<td>0</td>
<td>0</td>
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</tr>
</tbody>
</table>

### Users Months by Program

<table>
<thead>
<tr>
<th></th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>27,758</td>
<td>27,468</td>
<td>27,372</td>
<td>27,340</td>
<td>26,883</td>
</tr>
<tr>
<td>80%</td>
<td>25,242</td>
<td>20,934</td>
<td>28,632</td>
<td>30,118</td>
<td>31,849</td>
</tr>
<tr>
<td>60%</td>
<td>33,999</td>
<td>33,591</td>
<td>34,822</td>
<td>31,270</td>
<td>31,651</td>
</tr>
<tr>
<td>40%</td>
<td>40,759</td>
<td>40,271</td>
<td>39,202</td>
<td>40,019</td>
<td>39,777</td>
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<tr>
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<td>40</td>
<td>40</td>
<td>40</td>
<td>40</td>
<td>40</td>
</tr>
<tr>
<td>0%</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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</tr>
</tbody>
</table>

**Arkansas Department of Human Services**

Source(s): 5118_LTSS Quarterly and Monthly Exps with Financial Capitation (10.28.20)
Pharmacy
Savings Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Savings ($M)

<table>
<thead>
<tr>
<th>HCTF Savings Goal (SFY17-21)</th>
<th>$250</th>
</tr>
</thead>
<tbody>
<tr>
<td>Savings to Date (SFY17 - Q4 2020)</td>
<td>$267</td>
</tr>
<tr>
<td>HCTF Savings Goal (Q1 - SFY21)</td>
<td>$50</td>
</tr>
<tr>
<td>Savings (Q1 - Q4 SFY21)</td>
<td>$31</td>
</tr>
<tr>
<td>HCTF Savings Goal (Q1 - SFY21)</td>
<td>$12</td>
</tr>
<tr>
<td>Savings (Q1 - SFY21)</td>
<td>$31</td>
</tr>
</tbody>
</table>

Savings per Quarter ($M)

Note(s): Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.

Source(s): Quarter 1 - SFY 2021 Scorecard Calculations
Pharmacy
Spending Overview

Note(s): Rebates are collected from drug manufacturers. If the cost of prescription drugs were to appropriately account for rebate, it would reduce spending by more than 50-percent. The dotted line represents spending net of rebates. In Q1 - SFY 2020 there were more drug rebates ($78M) than actual prescription drug spending ($71M).

Source(s): (1) COS Weekly SFY2021 - Week 13
(2) Q1-SFY 2021 rebate (12.08.20)
Pharmacy
Program Overview

Users by Program

<table>
<thead>
<tr>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>148,027</td>
<td>155,246</td>
<td>162,978</td>
<td>120,485</td>
<td>133,944</td>
</tr>
</tbody>
</table>

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users **DO NOT** reflect the number of people who are enrolled in a waiver program.

Claims by Program

<table>
<thead>
<tr>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,718,668</td>
<td>1,915,805</td>
<td>1,551,016</td>
<td>1,207,874</td>
<td>1,270,467</td>
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</table>

Users Months by Program

<table>
<thead>
<tr>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
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</thead>
<tbody>
<tr>
<td>480,699</td>
<td>519,094</td>
<td>506,314</td>
<td>377,600</td>
<td>398,823</td>
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</tbody>
</table>

Source(s): 4700 Scorecard - Pharmacy Yearly Quarterly Monthly (10.28.20)
Dental Savings Overview

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Savings ($M)

- HCTF Savings Goal (SFY17-21) $18
- Savings to Date (SFY17 - Q1 2021) $31
- HCTF Savings Goal (SFY21) $5
- Savings (Q1 - SFY21) $2
- HCTF Savings Goal (Q1 - SFY21) $1
- Savings (Q1 - SFY21) $2

$2.3M
Premium Taxes paid by Dental MC0s in Q1 – Q4 of SFY 2020

Savings per Quarter ($M)

- Q1 - SFY20 $1.5
- Q2 - SFY20 $1.3
- Q3 - SFY20 $2.5
- Q4 - SFY20 $3.3
- Q1 - SFY21 $1.9

Note(s): The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter’s premium tax payments.

Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) 2020 RBPO Premium Tax Collections-4thQ_annual update (12.8.20)

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Dental Spending Overview

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Spending ($M)

$40
$30
$20
$10
$0
$34.8 $35.1 $33.8 $35.0 $36.9
Q1 - SFY20 Q2 - SFY20 Q3 - SFY20 Q4 - SFY20 Q1 - SFY21

Per User Per Month by Program

$140
$120
$100
$80
$60
$40
$20
$0
Q1 SFY20 Q2 SFY20 Q3 SFY20 Q4 SFY20 Q1 SFY21

Managed Care

Fee-for-Service (FFS)

 Managed Care  Fee-for-Service (FFS)

$20 $18 $19 $20 $20
$121 $108 $101 $96 $104

Source(s): COS Weekly SFY2021 – Week 13
Dental
Program Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Users by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFS</td>
<td>2,214</td>
<td>2,046</td>
<td>2,202</td>
<td>1,080</td>
<td>2,209</td>
</tr>
<tr>
<td>Managed Care</td>
<td>543,241</td>
<td>578,286</td>
<td>575,175</td>
<td>602,291</td>
<td>625,081</td>
</tr>
</tbody>
</table>

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFS</td>
<td>16,943</td>
<td>9,025</td>
<td>5,005</td>
<td>3,189</td>
<td>4,160</td>
</tr>
<tr>
<td>Managed Care</td>
<td>1,064,454</td>
<td>1,755,018</td>
<td>1,740,968</td>
<td>1,777,634</td>
<td>1,892,874</td>
</tr>
</tbody>
</table>

Users Months by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFS</td>
<td>7,105</td>
<td>7,009</td>
<td>6,613</td>
<td>2,572</td>
<td>3,778</td>
</tr>
<tr>
<td>Managed Care</td>
<td>1,712,486</td>
<td>1,882,262</td>
<td>1,720,665</td>
<td>1,771,432</td>
<td>1,846,652</td>
</tr>
</tbody>
</table>

Source(s): (1) 6281 Dental Managed Care Assignments and Capitation Summary (10.28.20)
(2) 6313 Dental Fee for Service for Scorecard (10.28.20)
SECTION IV
Provider-led Arkansas Shared Savings Entity (PASSE)
Provider-Led (PASSE)
Savings Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Savings ($M)

- HCTF Savings Goal (SFY17-21)
  - Savings to Date (SFY17 - Q1 2021): $67
  - HCTF Savings Goal (SFY21)
    - Savings (Q1 - Q4 SFY21): $37
    - HCTF Savings Goal (Q1 - SFY21)
      - Savings (Q1 - SFY21): $10

$34.0M
Premium Taxes paid by the PASSEs in Q1 - Q4 of SFY 2020

Transforming

Savings per Quarter ($M)

- Q1 - SFY20 ($47.0)
- Q2 - SFY20 ($6.1)
- Q3 - SFY20 $20.5
- Q4 - SFY20 $62.1
- Q1 - SFY21 $37.0

Note(s):
(1) See page 13 for how PASSE savings is calculated.
(2) The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter's premium tax payments.

Source(s):
(1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) 2020 RBPO Premium Tax Collections 4thQ_annual update (12.8.20)
**Provider-Led (PASSE)**

**Spending Overview**

**Spending ($M)**

- Q1 - SFY20: $425.2
- Q2 - SFY20: $351.9
- Q3 - SFY20: $322.2
- Q4 - SFY20: $326.4
- Q1 - SFY21: $321.7

**Per Member Per Month by Program**

<table>
<thead>
<tr>
<th></th>
<th>Q1 SFY20</th>
<th>Q2 SFY20</th>
<th>Q3 SFY20</th>
<th>Q4 SFY20</th>
<th>Q1 SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empower</td>
<td>$2,773</td>
<td>$2,425</td>
<td>$2,329</td>
<td>$2,365</td>
<td>$2,194</td>
</tr>
<tr>
<td>Summit</td>
<td>$3,744</td>
<td>$2,526</td>
<td>$2,944</td>
<td>$2,979</td>
<td>$2,810</td>
</tr>
<tr>
<td>Arkansas TC</td>
<td>$2,869</td>
<td>$3,031</td>
<td>$2,421</td>
<td>$2,532</td>
<td>$2,368</td>
</tr>
</tbody>
</table>

**Note(s):**
1. PASSEs assumed full-risk (Phase II) on March 1, 2019.

**Source(s):** 8665 Scorecard - PASSE Enrollment Statistics (10.28.20)
Provider-Led (PASSE)
Program Overview

PASSE Enrollment by Quarter

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>11,756</td>
<td>11,771</td>
<td>10,215</td>
<td>10,887</td>
<td>11,429</td>
</tr>
<tr>
<td>80%</td>
<td>15,370</td>
<td>14,913</td>
<td>13,721</td>
<td>14,364</td>
<td>14,814</td>
</tr>
<tr>
<td>60%</td>
<td>18,680</td>
<td>18,268</td>
<td>16,645</td>
<td>17,337</td>
<td>17,857</td>
</tr>
<tr>
<td>40%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>45,806</td>
<td>44,952</td>
<td>40,581</td>
<td>42,588</td>
<td>44,100</td>
</tr>
</tbody>
</table>

Member Months by Entity

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q1 - SFY20</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>34,785</td>
<td>34,376</td>
<td>32,272</td>
<td>31,603</td>
<td>33,958</td>
</tr>
<tr>
<td>50%</td>
<td>45,805</td>
<td>44,171</td>
<td>42,211</td>
<td>42,267</td>
<td>44,215</td>
</tr>
<tr>
<td>0%</td>
<td>55,525</td>
<td>54,116</td>
<td>51,419</td>
<td>50,954</td>
<td>53,337</td>
</tr>
</tbody>
</table>

Note(s): (1) This point-in-time report was run on Jul. 10, 2019. Enrollment for each quarter is counted on the last day of each month and DOES NOT include retroactive eligibility for each month and as a result do not change Scorecard to Scorecard.
(2) PASSEs assumed full-risk (Phase II) on March 1, 2019.
APPENDIX
Detailed Spending by State Fiscal Quarter
## Developmentally Disabled (DD)

**SFY 2020-21**

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q1 - SFY20 Actual</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy Caps</td>
<td>$38.6</td>
<td>$47.8</td>
<td>$44.8</td>
<td>$27.5</td>
<td>$49.5</td>
<td>$33.7</td>
<td>$15.8</td>
</tr>
<tr>
<td>Day Treatment (EIDT/ADDT)</td>
<td>$44.4</td>
<td>$46.5</td>
<td>$49.8</td>
<td>$39.8</td>
<td>$54.8</td>
<td>$38.3</td>
<td>$16.5</td>
</tr>
<tr>
<td><strong>Total DD</strong></td>
<td><strong>$83.0</strong></td>
<td><strong>$94.3</strong></td>
<td><strong>$94.6</strong></td>
<td><strong>$67.3</strong></td>
<td><strong>$104.3</strong></td>
<td><strong>$72.0</strong></td>
<td><strong>$32.3</strong></td>
</tr>
</tbody>
</table>

**Note(s):** The vast majority of ICF and DD Waiver (Autism and CES) users have transitioned over to the PASSEs. As a result, the Scorecard will only measure savings on Therapy Caps and EIDT/ADDT going forward.

Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations  
(2) COS Weekly SFY2021 - Week 13
# Behavioral Health (BH)

**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q1 - SFY20 Actual</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient</td>
<td>$5.2</td>
<td>$6.4</td>
<td>$5.2</td>
<td>$6.3</td>
<td>$10.4</td>
<td>$4.9</td>
<td>$5.5</td>
</tr>
<tr>
<td>Outpatient</td>
<td>$10.1</td>
<td>$10.5</td>
<td>$9.9</td>
<td>$10.0</td>
<td>$17.0</td>
<td>$8.0</td>
<td>$9.0</td>
</tr>
<tr>
<td>Total BH</td>
<td>$15.3</td>
<td>$17.0</td>
<td>$15.1</td>
<td>$16.3</td>
<td>$27.4</td>
<td>$12.9</td>
<td>$14.5</td>
</tr>
</tbody>
</table>

**Note(s):** Due to the vast majority of Inpatient and Outpatient BH users transitioning over to the PASSE, the Scorecard will only measure savings on Non-PASSE users of Inpatient and Outpatient BH services. As a result, the totals shown above reflect those of Non-PASSE users.

**Source(s):**
1. Quarter 1 - SFY 2021 Scorecard Calculations
2. COS Weekly SFY2021 - Week 13
## Long Term Services and Supports (LTSS)

**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program Dollars in Millions ($M)</th>
<th>Q1 - SFY20 Actual</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent Choices</td>
<td>$11.8</td>
<td>$11.8</td>
<td>$11.7</td>
<td>$11.9</td>
<td>$12.9</td>
<td>$14.4</td>
<td>($1.5)</td>
</tr>
<tr>
<td>Personal Care</td>
<td>$20.1</td>
<td>$21.9</td>
<td>$25.7</td>
<td>$34.3</td>
<td>$27.4</td>
<td>$31.1</td>
<td>($3.7)</td>
</tr>
<tr>
<td>ARChoices &amp; Other Waivers</td>
<td>$33.2</td>
<td>$30.6</td>
<td>$27.6</td>
<td>$31.0</td>
<td>$44.0</td>
<td>$25.5</td>
<td>$18.5</td>
</tr>
<tr>
<td>Private Long Term Care / SNF</td>
<td>$175.7</td>
<td>$166.7</td>
<td>$170.6</td>
<td>$201.3</td>
<td>$193.9</td>
<td>$173.6</td>
<td>$20.3</td>
</tr>
<tr>
<td><strong>Total LTSS</strong></td>
<td><strong>$240.8</strong></td>
<td><strong>$231.1</strong></td>
<td><strong>$235.6</strong></td>
<td><strong>$278.5</strong></td>
<td><strong>$278.2</strong></td>
<td><strong>$244.6</strong></td>
<td><strong>$33.6</strong></td>
</tr>
</tbody>
</table>

Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 13

**ARKANSAS DEPARTMENT OF HUMAN SERVICES**
## Pharmacy and Dental

**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q1 - SFY20 Actual</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Pharmacy</td>
<td>$71.1</td>
<td>$77.2</td>
<td>$82.7</td>
<td>$72.0</td>
<td>$105.1</td>
<td>$73.9</td>
<td>$31.2</td>
</tr>
<tr>
<td>Managed Care</td>
<td>$34.0</td>
<td>$34.4</td>
<td>$33.1</td>
<td>$34.7</td>
<td>$37.7</td>
<td>$36.5</td>
<td>$1.3</td>
</tr>
<tr>
<td>Fee for Service</td>
<td>$0.9</td>
<td>$0.8</td>
<td>$0.7</td>
<td>$0.2</td>
<td>$1.0</td>
<td>$0.4</td>
<td>$0.6</td>
</tr>
<tr>
<td>Total Dental</td>
<td>$34.8</td>
<td>$35.1</td>
<td>$33.8</td>
<td>$35.0</td>
<td>$38.3</td>
<td>$35.0</td>
<td>$1.9</td>
</tr>
</tbody>
</table>

*Source(s): (1) Quarter 1 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 13*
A Four 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.”
1. In addition to the $835 million savings target, the final report to the HCTF projected that a provider-led risk-based care model for the BH and DD populations could be implemented by DHS in SFY 2021. The report estimated the risk-based model would produce $40 million in savings in SFY 2021 when it would go “full risk.” These projected savings have therefore been added onto the $835 million target for the SFY 2017-2021 period. PASSE went “full-risk in March 2019 (16 months ahead of schedule). The HCTF also projected “full risk” would generate $56 million in premium tax in SFY 2021 and $58 million in SFY 2022. DHS has adopted the SFY 2022 targets as the measures for SFY 2021.

2. Act 775 created the risk-based provider organizations (PASSEs) and reserved at least 50% of premium taxes to be used to reduce the DD waitlist.

3. Act 802 also directs DHS to measure (1) increase care management and care coordination; (2) value-based purchasing strategies; (3) reduction in duplication of healthcare services; (4) reduction in unnecessary healthcare services; and (5) the degree of risk assumed by risk-based provider organizations.

4. Three provider-led organizations, Arkansas Total Care, Empower, and Summit Community Care, assumed full-risk for approximately 42,000 Medicaid recipients with high levels of need for BH and/or DD specialty services on March 1, 2019. The PASSEs receive a monthly capitated payment from DHS for each member to cover all specialty services and halo costs.

As services are covered by a PASSE, there are reductions in direct payments to providers in fee-for-service (FFS) Medicaid for the individuals enrolled in a PASSE. DHS has applied a “risk corridor” that allows DHS and the PASSEs to share savings and protect PASSEs against unexpected high costs.

5. Each PASSE is required to provide care coordination. DHS can sanction a PASSE for failure to meet care coordination performance measures.

6. PASSEs are allowed and encouraged to use value-based purchasing strategies with their network providers, but not required to do so.

7. DHS will use encounter claims data analyses to determine reductions in duplication of health care services. Because of the lag time in obtaining clean encounters and the need for sufficient time for the PASSEs to gain experience, such analyses will occur in calendar year 2020 and thereafter.

8. PASSEs have authority to ensure that healthcare is medically necessary for an individual. Encounter claims will be analyzed for this purpose as well.

9. The PASSE program is regulated under federal Medicaid managed care rules and state health insurance rules.
## HCTF Baseline Projected Spending With Traditional Medicaid Transformation Initiatives and DD and BH Provider-Led Model (PASSE)

<table>
<thead>
<tr>
<th>Spending and Savings by Year &amp; Program</th>
<th>SFY 2017</th>
<th>SFY 2018</th>
<th>SFY 2019</th>
<th>SFY 2020</th>
<th>SFY 2021</th>
<th>SFY 2017-21</th>
</tr>
</thead>
<tbody>
<tr>
<td>*HCTF Baseline, Traditional Medicaid</td>
<td>$5,379</td>
<td>$5,648</td>
<td>$5,930</td>
<td>$6,227</td>
<td>$6,538</td>
<td>$29,722</td>
</tr>
<tr>
<td>‡HCTF Projected Traditional Spending with Transformation Initiatives</td>
<td>$5,302</td>
<td>$5,495</td>
<td>$5,757</td>
<td>$6,026</td>
<td>$6,322</td>
<td>$28,902</td>
</tr>
<tr>
<td>HCTF Projected Traditional Spending with Transformation Initiatives and Full-risk Provider-led Model</td>
<td>$5,302</td>
<td>$5,495</td>
<td>$5,757</td>
<td>$6,026</td>
<td>$6,227</td>
<td>$28,806</td>
</tr>
<tr>
<td>HCTF Projected Savings with Traditional and Full-risk Provider-led Model for BH and DD</td>
<td>$77</td>
<td>$153</td>
<td>$173</td>
<td>$201</td>
<td>$311</td>
<td>$915</td>
</tr>
<tr>
<td>HCTF Full-risk Provider-Led Model for BH and DD “PASSE” Projected Savings</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$40</td>
<td>$40</td>
</tr>
<tr>
<td>HCTF Full-risk Provider-Led Model for BH and DD “PASSE” Projected Premium Tax Revenue</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$56</td>
<td>$56</td>
</tr>
</tbody>
</table>

Traditional Medicaid Scorecard
Savings Overview

Overall Savings ($M)

- HCTF Savings Goal (SFY17 - SFY21)
  - Savings to Date (SFY17 - Q2 SFY21): $1,172
  - Savings (SFY2021 Q1 - Q2): $212
  - Savings (SFY2020): $264
  - Savings (SFY2019): $237
  - Savings (SFY2018): $170
  - Savings (SFY2017): $150

- HCTF Savings Goal (SFY2020)
  - Savings (SFY2020): $291

- HCTF Savings Goal (SFY2019)
  - Savings (SFY2019): $329

- HCTF Savings Goal (SFY2018)
  - Savings (SFY2018): $195

- HCTF Savings Goal (SFY2017)
  - Savings (SFY2017): $93

$835
$40

$77
$93

Note(s):
1. SFY 2019 savings were adjusted due to the PASSEs becoming full risk in March 2019. This resulted in a $73M reduction in Overall SFY 2019 savings from $402M to $329M.
2. In prior scorecards the DentaP plans was counted towards savings. Starting in SFY 2020, all premium taxes (Dental and PASSE) will be counted as a fiscal impact. Therefore HCTF savings goals for SFY 2018 and SFY 2019 were reduced by $3M each year (the amount of Dental premium tax).
Traditional Medicaid Spending vs HCTF Toplines
SFY 2017-2021

Dollars in Millions ($M)

- HCTF Topline (5% Annual Growth)
- HCTF Transformation w/ PASSE
- HCTF Transformation Topline (4.5% Annual Growth)
- Actual Spending (3.6% Annual Growth)

Note: Q4 SFY 2020 Forward Impacted By COVID-19 Public Health Emergency

(2) COS Weekly SFY 2017-19 - Week 52
Traditional Medicaid Spending vs HCTF Toplines
SFY 2017-2021

Dollars in Millions ($M)

- HCTF Topline (5% Annual Growth)
- HCTF Transformation w/ PASSE
- Actual Savings from HCTF Topline (SFY 2017-20)
- HCTF Transformation Topline (4.5% Annual Growth)
- Actual Spending (3.6% Annual Growth)

Actual Savings from HCTF Topline (SFY 2017-20) $1.4B

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

(2) COS Weekly SFY2017-19 – Week 52

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Traditional Medicaid Scorecard
Savings Overview by Program

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Overall Savings ($M)

HCTF Savings Goal (SFY17-21) $835
Savings-to-Date (SFY17 - Q2 SFY21) $1,172
$40

Program Savings (SFY17 - Q2 SFY21) compared to their SFY 2017-21 HCTF Savings Goals ($M)

DD
BH
LTSS
Pharmacy
Dental
PASSE

$156
$255
$224
$226
$358
$250
$40
$81

Note(s):
1. Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.
2. SFY 2019 savings were adjusted due to the PASSEs becoming full risk in March 2019. This resulted in a $73M reduction in Overall SFY 2019 savings from $402M to $329M

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 27

- Bar Charts Not To Scale -
Traditional Medicaid Scorecard
Savings-to-Date (SFY 2017 - Q1 SFY 2021)

Overall Savings-to-Date ($M) (SFY 2017 - Q2 SFY 2021)

HCTF Savings Goal to Date (SFY17 - Q2 SFY21)
$698
$20

Savings-to-Date (SFY17 - Q2 SFY21)
$1,172

Program Savings-to-Date compared to their Savings Goals-to-Date ($M)
(SFY 2017 - Q2 SFY 2021)

DD $132 $224 $113
BH $10 $224 $24
LTSS $90 $358 $224
Pharmacy $291 $224
Dental $15 $32
PASSE $20 $81

Note(s): (1) Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.
(2) SFY 2019 savings were adjusted due to the PASSEs becoming full risk in March 2019. This resulted in a $73M reduction in Overall SFY 2019 savings from $402M to $329M

Source(s): (1) Quarter 2 – SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 27

- Bar Charts Not To Scale -
Traditional Medicaid Scorecard
SFY 2021

Overall Savings ($M)

HCTF SFY21 Savings Goal

Savings (Q1 - Q2 SFY21)

$212

$264

$40

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

SFY 2021 Savings by Program ($M)

DD $47 $46
BH $50 $60
LTSS $50 $70
Pharmacy $50 $55
Dental $5 $3
PASSE $40 $52

Note(s): Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 27
Traditional Medicaid Scorecard
Q2 – SFY 2021

Q2 – SFY 2021 Overall Savings ($M)

- Savings Goal: $53.0
- Savings: $113.4
- Transformation: $10.0

Q2 – SFY 2021 Savings by Program ($M)

- DD: $14.0
- BH: $14.6
- LTSS: $45.1
- Pharmacy: $24.2
- Dental: $0.8
- PASSE: $14.7

Note(s): Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.

Source(s): (1) Quarter 2 – SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 – Week 27
Traditional Medicaid Scorecard
HCTF Premium Tax Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Overall Premium Taxes Collected ($M)

<table>
<thead>
<tr>
<th></th>
<th>HCTF Revenue Goal (SFY19-21)</th>
<th>Premium Tax Collected-to-Date (SFY19 - Q1 SFY21)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$70</td>
<td>$60</td>
</tr>
<tr>
<td>HCTF Revenue Goal (SFY 2020)</td>
<td>$4</td>
<td>$36</td>
</tr>
<tr>
<td>Premium Tax Collected (SFY 2020)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$3</td>
<td>$15</td>
</tr>
<tr>
<td>HCTF Revenue Goal (SFY 2019)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premium Tax Collected (SFY 2019)</td>
<td>$15</td>
<td></td>
</tr>
</tbody>
</table>

- Premium Tax (Revenue)  HCTF

SFY 2021 by Program

<table>
<thead>
<tr>
<th>Program</th>
<th>Revenue ($M)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PASSE</td>
<td>$56</td>
</tr>
<tr>
<td>Dental</td>
<td>$4</td>
</tr>
</tbody>
</table>

Program Revenues compared to their SFY 2017-21 HCTF Revenue Goals ($M)

<table>
<thead>
<tr>
<th>Program</th>
<th>Revenue ($M)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PASSE</td>
<td>$56</td>
</tr>
<tr>
<td>Dental</td>
<td>$55</td>
</tr>
</tbody>
</table>

- Bar Charts Not To Scale -

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) 2020 RBPO Premium Tax Collections-4thQ_annual update (12.8.20)

Note(s): The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter's premium tax payments. HCTF Revenue Goal for PASSE begins in SFY2021.
Traditional Medicaid Scorecard
HCTF Premium Tax Collections-to-Date (SFY 2017-21)

Premium Tax Collections-to-Date ($M) (SFY 2019 – Q1 SFY 2021)

- HCTF Revenue Goal (SFY19-21) $70
- Premium Tax (Revenue)
- HCTF

Premium Tax Collected-to-Date (SFY19 - Q1 SFY21) $60

Premium Tax Collections-to-Date compared to their Revenue Goals-to-Date ($M) (SFY 2019 – Q1 SFY 2021)

- PASSE $56
- Dental $14
- $5

Note(s): The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter's premium tax payments. HCTF Revenue Goal for PASSE begins in SFY 2021.

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) 2020 RBPO Premium Tax Collections-4thQ_annual update (12.8.20)
<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program Dollars in Millions ($)</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
<th>Q2 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q2 - SFY21 Actual</th>
<th>Q2 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmentally Disabled (DD)</td>
<td>$94.3</td>
<td>$94.6</td>
<td>$67.3</td>
<td>$72.0</td>
<td>$105.6</td>
<td>$91.6</td>
<td>$14.0</td>
</tr>
<tr>
<td>Behavioral Health (BH)</td>
<td>$17.0</td>
<td>$15.1</td>
<td>$16.3</td>
<td>$12.9</td>
<td>$27.8</td>
<td>$13.2</td>
<td>$14.6</td>
</tr>
<tr>
<td>Long Term Services &amp; Supports (LTSS)</td>
<td>$231.1</td>
<td>$235.6</td>
<td>$278.5</td>
<td>$244.6</td>
<td>$281.7</td>
<td>$236.6</td>
<td>$45.1</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>$77.2</td>
<td>$82.7</td>
<td>$72.0</td>
<td>$73.9</td>
<td>$106.4</td>
<td>$82.2</td>
<td>$24.2</td>
</tr>
<tr>
<td>Dental</td>
<td>$35.1</td>
<td>$33.8</td>
<td>$35.0</td>
<td>$36.9</td>
<td>$39.3</td>
<td>$38.5</td>
<td>$0.8</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>$454.6</strong></td>
<td><strong>$461.8</strong></td>
<td><strong>$469.1</strong></td>
<td><strong>$440.3</strong></td>
<td><strong>$560.8</strong></td>
<td><strong>$462.1</strong></td>
<td><strong>$98.7</strong></td>
</tr>
</tbody>
</table>

**Note(s):**
1. Further details of each section can be found in Section III and the Appendix.
2. The reductions in DD and BH spending from previous scorecards is the result of removing PASSE participants and/or programs affected by the PASSE.
3. Pharmacy savings are based on gross pharmacy expenditures. It does not factor in drug rebates.

**Source(s):**
1. Quarter 2 - SFY 2021 Scorecard Calculations
2. COS Weekly SFY2021 – Week 27
### Savings Attributed to Provider-Led (PASSE)

**SFY 2021**

<table>
<thead>
<tr>
<th>Per Member Per Month (PMPM)</th>
<th>Values / Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected Baseline PMPM for SFY 2021</td>
<td>$2,498</td>
</tr>
<tr>
<td>Q2 - 2021 PASSE PMPM (Actual)</td>
<td>$2,390</td>
</tr>
<tr>
<td><strong>PMPM Savings (Q2 2021 Projected - Q1 2022 Actual)</strong></td>
<td>$107</td>
</tr>
<tr>
<td>Q2 - 2021 Quarterly Enrollment Member Months</td>
<td>136,709</td>
</tr>
<tr>
<td><strong>PASSE Savings / (Cost) Q2 - 2021</strong></td>
<td><strong>$14.7 M</strong></td>
</tr>
</tbody>
</table>

**Note(s):** PASSE rates are set on a calendar year basis. To hold the savings target constant, savings are calculated by using the composite PMPM from SFY 2020 indexed by 4.5% annual growth. The savings are the difference between the baseline and the actual PMPM multiplied by member months in the quarter.
# Traditional Medicaid Spend by Quarter

**SFY 2020-21**

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
<th>Q2 - SFY21 Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional Medical Services</td>
<td>$162.1</td>
<td>$152.8</td>
<td>$166.6</td>
<td>$141.5</td>
<td>$148.6</td>
</tr>
<tr>
<td>Non-Institutional Medical Services</td>
<td>$131.8</td>
<td>$132.0</td>
<td>$100.0</td>
<td>$113.9</td>
<td>$131.5</td>
</tr>
<tr>
<td>Habilitative &amp; Rehabilitative Services</td>
<td>$124.3</td>
<td>$123.8</td>
<td>$72.0</td>
<td>$100.5</td>
<td>$119.5</td>
</tr>
<tr>
<td>Long-Term Services &amp; Supports</td>
<td>$284.8</td>
<td>$295.1</td>
<td>$312.4</td>
<td>$293.5</td>
<td>$298.6</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>$77.2</td>
<td>$82.8</td>
<td>$72.1</td>
<td>$73.9</td>
<td>$81.2</td>
</tr>
<tr>
<td>Capitated Payments (Includes PASSE, NET, PCMH, and Dental Managed Care)</td>
<td>$402.3</td>
<td>$324.3</td>
<td>$293.0</td>
<td>$324.3</td>
<td>$377.6</td>
</tr>
<tr>
<td>Supplementals/Cost-Settlements/Access Payments</td>
<td>$16.1</td>
<td>$207.5</td>
<td>$219.1</td>
<td>$167.0</td>
<td>$147.7</td>
</tr>
<tr>
<td>Non-Claims Payments</td>
<td>$117.7</td>
<td>$141.3</td>
<td>$278.2</td>
<td>$167.3</td>
<td>$152.6</td>
</tr>
<tr>
<td><strong>Total Traditional Medicaid</strong></td>
<td><strong>$1,316.2</strong></td>
<td><strong>$1,459.7</strong></td>
<td><strong>$1,513.3</strong></td>
<td><strong>$1,382.0</strong></td>
<td><strong>$1,459.3</strong></td>
</tr>
</tbody>
</table>

**Note(s):**
1. These categories contain Contracts, HDCs, Part D claw backs, and other programs which are not part of transformation.
2. As the PASSEs pay for Medical Services, Habilitative & Rehabilitative Services, and Prescription Drugs for their members, there will be corresponding reductions in those fee-for-service expenditures.

**Source(s):**
1. Quarter 2 – SFY 2021 Scorecard Calculations
2. COS Weekly SFY2021 – Week 27
SECTION II
Medicaid Enrollment & Spending Report
Overall Medicaid Spend by Quarter ($M)
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

- Traditional Medicaid
- Arkansas Works

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Traditional Medicaid</th>
<th>Arkansas Works</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q2 SFY 2020</td>
<td>$1,316</td>
<td>$461</td>
</tr>
<tr>
<td>Q3 SFY 2020</td>
<td>$1,460</td>
<td>$436</td>
</tr>
<tr>
<td>Q4 SFY 2020</td>
<td>$1,513</td>
<td>$463</td>
</tr>
<tr>
<td>Q1 SFY 2021</td>
<td>$1,382</td>
<td>$487</td>
</tr>
<tr>
<td>Q2 SFY 2021</td>
<td>$1,459</td>
<td>$559</td>
</tr>
</tbody>
</table>

Source(s): COS Weekly SFY2021 – Week 27
Medicaid Enrollment by Quarter
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th></th>
<th>Q2 SFY 2020</th>
<th>Q3 SFY 2020</th>
<th>Q4 SFY 2020</th>
<th>Q1 SFY 2021</th>
<th>Q2 SFY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>381,528</td>
<td>375,172</td>
<td>380,364</td>
<td>412,713</td>
<td>419,674</td>
</tr>
<tr>
<td>Adults</td>
<td>74,714</td>
<td>73,078</td>
<td>76,309</td>
<td>88,881</td>
<td>93,151</td>
</tr>
<tr>
<td>Disabled</td>
<td>129,547</td>
<td>129,220</td>
<td>129,399</td>
<td>139,865</td>
<td>139,355</td>
</tr>
<tr>
<td>Elderly</td>
<td>51,693</td>
<td>51,700</td>
<td>52,664</td>
<td>61,343</td>
<td>62,129</td>
</tr>
<tr>
<td>ARWorks</td>
<td>267,193</td>
<td>261,107</td>
<td>274,002</td>
<td>293,346</td>
<td>311,989</td>
</tr>
<tr>
<td>Total</td>
<td>904,675</td>
<td>890,277</td>
<td>912,738</td>
<td>996,148</td>
<td>1,026,298</td>
</tr>
</tbody>
</table>

Note(s): This enrollment report was run on Feb 11, 2021. Enrollment is counted on the last day of each month. Due to the COVID-19 public health emergency starting in Q4, Medicaid suspended disenrollment.

Source(s): Quarterly Enrollment by Group (02.11.21)
Medicaid Member Months by Quarter
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th></th>
<th>Q2 SFY 2020</th>
<th>Q3 SFY 2020</th>
<th>Q4 SFY 2020</th>
<th>Q1 SFY 2021</th>
<th>Q2 SFY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>1,144,273</td>
<td>1,133,440</td>
<td>1,136,735</td>
<td>1,229,492</td>
<td>1,259,022</td>
</tr>
<tr>
<td>Adults</td>
<td>226,316</td>
<td>221,150</td>
<td>226,560</td>
<td>264,781</td>
<td>279,453</td>
</tr>
<tr>
<td>Disabled</td>
<td>389,500</td>
<td>388,416</td>
<td>388,062</td>
<td>416,665</td>
<td>418,065</td>
</tr>
<tr>
<td>Elderly</td>
<td>154,935</td>
<td>155,320</td>
<td>157,138</td>
<td>182,744</td>
<td>186,387</td>
</tr>
<tr>
<td>ARWorks</td>
<td>794,660</td>
<td>789,441</td>
<td>811,556</td>
<td>873,892</td>
<td>935,967</td>
</tr>
<tr>
<td>Total</td>
<td>2,709,684</td>
<td>2,687,767</td>
<td>2,720,051</td>
<td>2,967,574</td>
<td>3,078,894</td>
</tr>
</tbody>
</table>

Note(s): This enrollment report was run on Feb 11, 2021. Enrollment is counted on the last day of each month. Due to the COVID-19 public health emergency starting in Q4, Medicaid suspended disenrollment.

Source(s): Quarterly Enrollment by Group (02.11.21)
Medicaid Quarterly Per Member Per Month (PMPM)
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

---

Traditional Medicaid — Arkansas Works

$687 — $769 — $793 — $660 — $693

$580 — $552 — $571 — $556 — $620

Q2 SFY 2020 — Q3 SFY 2020 — Q4 SFY 2020 — Q1 SFY 2021 — Q2 SFY 2021

---

Note(s): This enrollment report was run on Feb 11, 2021. Enrollment is counted on the last day of each month.

Source(s): (1) COS Weekly SFY2021 – Week 27
(2) Quarterly Enrollment by Group (02.11.21)
Developmentally Disabled (DD)
Savings Overview

Savings ($M)

- HCTF Savings Goal (SFY17-21): $156
- Savings to Date (SFY17 - Q2 2021): $255
- HCTF Savings Goal (SFY21): $47
- Savings (Q1 SFY21 - Q2 SFY21): $46
- HCTF Savings Goal (Q2 - SFY21): $12
- Savings (Q2 - SFY21): $14

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

The vast majority of ICF and DD Waiver (Autism and CES) users have transitioned over to the PASSEs. As a result, starting in Q1 - SFY 2020 the Scorecard will only measure savings on Therapy Caps and EIDT/ADDT.

Savings per Quarter ($M)

- Q2 - SFY20: $4.9
- Q3 - SFY20: $1.5
- Q4 - SFY20: $21.4
- Q1 - SFY21: $15.8
- Q2 - SFY21: $9.6

Q1 – Q4 SFY 2021 Cumulative Savings ($M)

- EIDT/ADDT: $26.1
- Therapy Caps: $20.2

Source(s): Quarter 2 - SFY 2021 Scorecard Calculations
Developmentally Disabled (DD)
Spending Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Spending ($M)

Per User Per Month by Program

Spending by Program ($M)

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Source(s): COS Weekly SFY2021 – Week 27
Developmentally Disabled (DD)
Program Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Users by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>12,436</td>
<td>12,378</td>
<td>8,747</td>
<td>9,982</td>
<td>10,126</td>
</tr>
<tr>
<td>75%</td>
<td>46,320</td>
<td>50,443</td>
<td>32,819</td>
<td>34,714</td>
<td>44,638</td>
</tr>
<tr>
<td>50%</td>
<td>93,719</td>
<td>103,283</td>
<td>167,375</td>
<td>186,184</td>
<td>205,943</td>
</tr>
<tr>
<td>25%</td>
<td>189,315</td>
<td>198,883</td>
<td>235,142</td>
<td>260,732</td>
<td>279,222</td>
</tr>
<tr>
<td>0%</td>
<td>376,811</td>
<td>387,283</td>
<td>417,635</td>
<td>436,943</td>
<td>451,638</td>
</tr>
</tbody>
</table>

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>593,715</td>
<td>618,184</td>
<td>559,943</td>
<td>692,222</td>
<td></td>
</tr>
<tr>
<td>80%</td>
<td>589,283</td>
<td>607,332</td>
<td>518,164</td>
<td>620,222</td>
<td></td>
</tr>
<tr>
<td>60%</td>
<td>585,383</td>
<td>597,332</td>
<td>507,322</td>
<td></td>
<td></td>
</tr>
<tr>
<td>40%</td>
<td>581,426</td>
<td>507,322</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20%</td>
<td>571,426</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0%</td>
<td>561,426</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Users Months by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>376,811</td>
<td>387,283</td>
<td>398,445</td>
<td>397,031</td>
<td>407,758</td>
</tr>
<tr>
<td>80%</td>
<td>360,322</td>
<td>371,060</td>
<td>388,445</td>
<td>387,031</td>
<td>397,758</td>
</tr>
<tr>
<td>60%</td>
<td>137,446</td>
<td>148,060</td>
<td>158,445</td>
<td>157,031</td>
<td></td>
</tr>
<tr>
<td>40%</td>
<td>137,446</td>
<td>148,060</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20%</td>
<td>137,446</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0%</td>
<td>137,446</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Behavioral Health (BH) Savings Overview

Savings ($M)

- HCTF Savings Goal (SFY17-21) $167
- Savings to Date (SFY17 - Q2 2021) $224
- HCTF Savings Goal (SFY21) $60
- Savings (Q1 SFY21 - Q2 SFY21) $29.1
- HCTF Savings Goal (Q2 - SFY21) $15.0
- Savings (Q2 - SFY21) $14.6

Due to the vast majority of Inpatient and Outpatient BH users transitioning over to the PASSEs, starting in Q1 - SFY 2020 the Scorecard will only measure savings on Non-PASSE users of Inpatient and Outpatient BH services.

As a result, the totals shown on page 29 and 30 reflect those of Non-PASSE users.

Savings per Quarter ($M)

Q1 - Q4 SFY 2021 Cumulative Savings ($M)

Source(s): Quarter 2 - SFY 2021 Scorecard Calculations

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Behavioral Health (BH)
Spending Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Spending ($M)

Per User Per Month by Program

Spending by Program ($M)

Percent of Total

Outpatient
Inpatient

Source(s): COS Weekly SFY2021 – Week 27
Behavioral Health (BH)
Program Overview

Users by Program

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

Users Months by Program

Source(s): 9713 Scorecard – BH IP OP with Amt Range (02.11.21)
In Q2 - SFY 2021, Personal Care and Independent Choices were over their savings targets by $5.1M and $1.5M respectively due to rate increases for both programs.

(Q1 - Q4 SFY 2021 Cumulative Savings ($M))

Note(s): (1) In Q3 - SFY 2020, Personal Care was over their savings target by $25K
(2) In Q4 - SFY 2020, Personal Care and Private SNFs were over their savings targets by $7.2M and $9.8M respectively
(3) In Q1 - SFY 2021, Personal Care and Independent Choices were over their savings targets by $3.7M and $1.5M respectively.
Long Term Services and Supports (LTSS)

Spending Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

Spending ($M)

Q2 - SFY20: $231.1
Q3 - SFY20: $235.6
Q4 - SFY20: $278.5
Q1 - SFY21: $244.6
Q2 - SFY21: $236.6

Per User Per Month by Program

Private Long Term Care/SNF
Q2 SFY20: $4,140
Q3 SFY20: $4,352
Q4 SFY20: $5,030
Q1 SFY21: $4,365
Q2 SFY21: $4,047

ARChoices & Other Waivers
Q2 SFY20: $912
Q3 SFY20: $1,301
Q4 SFY20: $990
Q1 SFY21: $804
Q2 SFY21: $707

Personal Care
Q2 SFY20: $748
Q3 SFY20: $841
Q4 SFY20: $1,140
Q1 SFY21: $975
Q2 SFY21: $958

Independent Choices
Q2 SFY20: $429
Q3 SFY20: $588
Q4 SFY20: $436
Q1 SFY21: $536
Q2 SFY21: $534

Source(s): COS Weekly SFY2020 - Week 27
Long Term Services and Supports (LTSS)
Program Overview

Users by Program

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

Users Months by Program

PRIVATE Long Term Care/SNF
ARCHchoices & Other Waivers
Personal Care
Independent Choices

Source(s): 5118_LTSS Quarterly and Monthly Exps with Financial Capitation (02.11.21)
Pharmacy Savings Overview

Savings ($M)

- HCTF Savings Goal (SFY17-21)
  - Savings to Date (SFY17 - Q2 2021): $250
  - Savings (Q1 - Q2 SFY21): $50
- HCTF Savings Goal (SFY21)
  - Savings (Q1 - Q2 SFY21): $55
- HCTF Savings Goal (Q2 - SFY21)
  - Savings (Q2 - SFY21): $12

Savings per Quarter ($M)

- Q2 - SFY20: $21.6
- Q3 - SFY20: $15.8
- Q4 - SFY20: $31.8
- Q1 - SFY21: $31.2
- Q2 - SFY21: $24.2

Note(s): Pharmacy savings does not factor in drug rebates. It is calculated using gross pharmacy expenditures.

Source(s): Quarter 2 - SFY 2021 Scorecard Calculations
Pharmacy Spending Overview

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Spending ($M)

Per User Per Month by Program

Rebates by Type ($M)

Note(s): Rebates are collected from drug manufacturers. If the cost of prescription drugs were to appropriately account for rebate, it would reduce spending by more than 50-percent. The dotted line represents spending net of rebates.

Source(s): (1) COS Weekly SFY2021 – Week 27
(2) Q2-SFY 2021 rebate (2/22/21)
Pharmacy Program Overview

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Users by Program

Q2 - SFY20: 156,246
Q3 - SFY20: 162,978
Q4 - SFY20: 120,485
Q1 - SFY21: 133,944
Q2 - SFY21: 143,434

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

Q2 - SFY20: 1,915,805
Q3 - SFY20: 1,551,016
Q4 - SFY20: 1,207,874
Q1 - SFY21: 1,270,467
Q2 - SFY21: 1,404,243

Users Months by Program

Q2 - SFY20: 519,094
Q3 - SFY20: 506,314
Q4 - SFY20: 377,600
Q1 - SFY21: 398,823
Q2 - SFY21: 434,032

Source(s): 4700 Scorecard - Pharmacy Yearly Quarterly Monthly (02.11.21)
Dental Savings Overview

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Savings ($M)

<table>
<thead>
<tr>
<th>HCTF Savings Goal (SFY17-21)</th>
<th>$18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Savings to Date (SFY17 - Q2 2021)</td>
<td>$31</td>
</tr>
<tr>
<td>HCTF Savings Goal (SFY21)</td>
<td>$5</td>
</tr>
<tr>
<td>Savings (Q1 - Q2 SFY21)</td>
<td>$3</td>
</tr>
<tr>
<td>HCTF Savings Goal (Q2 - SFY21)</td>
<td>$1</td>
</tr>
<tr>
<td>Savings (Q2 - SFY21)</td>
<td>$1</td>
</tr>
</tbody>
</table>

$710K
Premium Taxes paid by Dental MCOs in Q1 of SFY 2021

Savings per Quarter ($M)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Savings ($M)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q2 - SFY20</td>
<td>$1.3</td>
</tr>
<tr>
<td>Q3 - SFY20</td>
<td>$2.5</td>
</tr>
<tr>
<td>Q4 - SFY20</td>
<td>$3.3</td>
</tr>
<tr>
<td>Q1 - SFY21</td>
<td>$1.9</td>
</tr>
<tr>
<td>Q2 - SFY21</td>
<td>$0.8</td>
</tr>
</tbody>
</table>

Note(s): The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter’s premium tax payments.

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations (2) 2020 RBPO Premium Tax Collections-4th Q_annual update (12.8.20)
Dental Spending Overview

Note: Q4 SFY2020 Forward Impacted by COVID-19 Public Health Emergency

Spending ($M)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>SFY2020</th>
<th>Q3</th>
<th>SFY2020</th>
<th>Q4</th>
<th>SFY2020</th>
<th>Q1</th>
<th>SFY21</th>
<th>Q2</th>
<th>SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$35.1</td>
<td>$33.8</td>
<td>$35.0</td>
<td>$36.9</td>
<td>$38.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Per User Per Month by Program

<table>
<thead>
<tr>
<th>Quarter</th>
<th>SFY2020</th>
<th>Q3</th>
<th>SFY2020</th>
<th>Q4</th>
<th>SFY2020</th>
<th>Q1</th>
<th>SFY21</th>
<th>Q2</th>
<th>SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managed Care</td>
<td>$18</td>
<td>$19</td>
<td>$20</td>
<td>$20</td>
<td>$20</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fee-for-Service (FFS)</td>
<td>$108</td>
<td>$101</td>
<td>$96</td>
<td>$104</td>
<td>$115</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source(s): COS Weekly SFY2021 - Week 27

ARKANSAS DEPARTMENT OF HUMAN SERVICES
Dental Program Overview

Users by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFS</td>
<td>2,046</td>
<td>2,202</td>
<td>1,080</td>
<td>2,209</td>
<td>2,098</td>
</tr>
<tr>
<td>Managed Care</td>
<td>578,286</td>
<td>575,175</td>
<td>602,291</td>
<td>625,081</td>
<td>638,873</td>
</tr>
</tbody>
</table>

Note(s): Users are the number of people who receive services that were billed under various categories of service. Users DO NOT reflect the number of people who are enrolled in a waiver program.

Claims by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>9,025</td>
<td>5,005</td>
<td>3,189</td>
<td>4,160</td>
<td>3,593</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,785,015</td>
<td>1,740,968</td>
<td>1,777,634</td>
<td>1,862,874</td>
<td>1,928,842</td>
<td></td>
</tr>
</tbody>
</table>

Users Months by Program

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>7,009</td>
<td>6,613</td>
<td>2,572</td>
<td>3,778</td>
<td>3,252</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,882,262</td>
<td>1,726,685</td>
<td>1,771,432</td>
<td>1,846,652</td>
<td>1,905,376</td>
<td></td>
</tr>
</tbody>
</table>

Source(s): (1) 6281 Dental Managed Care Assignments and Capitation Summary (02.11.21)
(2) 6313 Dental Fee for Service for Scorecard (02.11.21)
SECTION IV
Provider-led Arkansas Shared Savings Entity (PASSE)
Provider-Led (PASSE)

Savings Overview

Note: Q4 SFY2020 Forward Impacted
By COVID-19 Public Health Emergency

$7.5M
Premium Taxes paid by the
PASSEs in Q1 - SFY 2021

Savings ($M)

- HCTF Savings Goal (SFY17-21) $40
- Savings to Date (SFY17 - Q1 2021) $81
- HCTF Savings Goal (SFY21) $40
- Savings (Q1 - Q4 SFY21) $52
- HCTF Savings Goal (Q2 - SFY21) $10
- Savings (Q2 - SFY21) $15

Savings per Quarter ($M)

- Q2 - SFY20 ($6.1) $20.5
- Q3 - SFY20 $62.1
- Q4 - SFY20 $37.0
- Q1 - SFY21 $14.7

Note(s): (1) See page 13 for how PASSE savings is calculated.
(2) The Arkansas Insurance Department (AID) collects premium taxes on Dental Managed Care and PASSE organizations 45 days following the end of the quarter. As a result, the scorecard can only report the previous quarter’s premium tax payments.

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) 2020 RBPO Premium Tax Collections-4thQ_annual update (12.8.20)
Provider-Led (PASSE) Spending Overview

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

Spending ($M)

Per Member Per Month by Program

Spending by Entity ($M)

Note(s): (1) PASSEs assumed full-risk (Phase II) on March 1, 2019.

Source(s): 8665 Scorecard – PASSE Enrollment Statistics (02.12.21)
Provider-Led (PASSE) Program Overview

PASSE Enrollment by Quarter

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>11,771</td>
<td>10,215</td>
<td>10,887</td>
<td>11,429</td>
<td>12,325</td>
</tr>
<tr>
<td>80%</td>
<td>14,913</td>
<td>13,721</td>
<td>14,364</td>
<td>14,814</td>
<td>15,440</td>
</tr>
<tr>
<td>60%</td>
<td>18,268</td>
<td>16,645</td>
<td>17,337</td>
<td>17,857</td>
<td>18,612</td>
</tr>
<tr>
<td>40%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>44,952</td>
<td>40,581</td>
<td>42,588</td>
<td>44,100</td>
<td>46,377</td>
</tr>
</tbody>
</table>

Member Months by Entity

<table>
<thead>
<tr>
<th>Percent of Total</th>
<th>Q2 - SFY20</th>
<th>Q3 - SFY20</th>
<th>Q4 - SFY20</th>
<th>Q1 - SFY21</th>
<th>Q2 - SFY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>34,376</td>
<td>32,272</td>
<td>31,603</td>
<td>33,968</td>
<td>36,356</td>
</tr>
<tr>
<td>50%</td>
<td>44,171</td>
<td>42,211</td>
<td>42,267</td>
<td>44,215</td>
<td>46,066</td>
</tr>
<tr>
<td>0%</td>
<td>54,116</td>
<td>51,419</td>
<td>50,954</td>
<td>53,337</td>
<td>55,434</td>
</tr>
</tbody>
</table>

Note(s): (1) This point-in-time report was run on Jul. 10, 2019. Enrollment for each quarter is counted on the last day of each month and DOES NOT include retro-active eligibility for each month and as a result do not change Scorecard to Scorecard.
(2) PASSEs assumed full-risk (Phase II) on March 1, 2019.
APPENDIX
Detailed Spending by State Fiscal Quarter
### Developmentally Disabled (DD)
SFY 2020-21

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q1 - SFY21 Actual</th>
<th>Q1 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapy Caps</td>
<td>$47.8</td>
<td>$44.8</td>
<td>$27.5</td>
<td>$33.7</td>
<td>$50.1</td>
<td>$45.7</td>
<td>$4.4</td>
</tr>
<tr>
<td>Day Treatment (EIDT/ADDT)</td>
<td>$46.5</td>
<td>$49.8</td>
<td>$39.8</td>
<td>$38.3</td>
<td>$55.5</td>
<td>$45.9</td>
<td>$9.6</td>
</tr>
<tr>
<td><strong>Total DD</strong></td>
<td><strong>$94.3</strong></td>
<td><strong>$94.6</strong></td>
<td><strong>$67.3</strong></td>
<td><strong>$72.0</strong></td>
<td><strong>$105.6</strong></td>
<td><strong>$91.6</strong></td>
<td><strong>$14.0</strong></td>
</tr>
</tbody>
</table>

**Note(s):** The vast majority of ICF and DD Waiver (Autism and CES) users have transitioned over to the PASSEs. As a result, the Scorecard will only measure savings on Therapy Caps and EIDT/ADDT going forward.

**ARKANSAS DEPARTMENT OF HUMAN SERVICES**

**Source(s):**
(1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 27
## Behavioral Health (BH)

### SFY 2020-21

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
<th>Q2 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q2 - SFY21 Actual</th>
<th>Q2 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient</td>
<td>$6.4</td>
<td>$5.2</td>
<td>$6.3</td>
<td>$4.9</td>
<td>$10.6</td>
<td>$5.0</td>
<td>$5.6</td>
</tr>
<tr>
<td>Outpatient</td>
<td>$10.5</td>
<td>$9.9</td>
<td>$10.0</td>
<td>$8.0</td>
<td>$17.2</td>
<td>$8.2</td>
<td>$9.0</td>
</tr>
<tr>
<td>Total BH</td>
<td>$17.0</td>
<td>$15.1</td>
<td>$16.3</td>
<td>$12.9</td>
<td>$27.8</td>
<td>$13.2</td>
<td>$14.6</td>
</tr>
</tbody>
</table>

Note(s): Due to the vast majority of Inpatient and Outpatient BH users transitioning over to the PASSE, the Scorecard will only measure savings on Non-PASSE users of Inpatient and Outpatient BH services. As a result, the totals shown above reflect those of Non-PASSE users.

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 27
# Long Term Services and Supports (LTSS)

**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
<th>Q2 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q2 - SFY21 Actual</th>
<th>Q2 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent Choices</td>
<td>$11.8</td>
<td>$11.7</td>
<td>$11.9</td>
<td>$14.4</td>
<td>$13.0</td>
<td>$14.5</td>
<td>($1.5)</td>
</tr>
<tr>
<td>Personal Care</td>
<td>$21.9</td>
<td>$25.7</td>
<td>$34.3</td>
<td>$31.1</td>
<td>$27.8</td>
<td>$32.9</td>
<td>($5.1)</td>
</tr>
<tr>
<td>ARChoices &amp; Other Waivers</td>
<td>$30.6</td>
<td>$27.6</td>
<td>$31.0</td>
<td>$25.5</td>
<td>$44.6</td>
<td>$23.3</td>
<td>$21.3</td>
</tr>
<tr>
<td>Private Long Term Care / SNF</td>
<td>$166.7</td>
<td>$170.6</td>
<td>$201.3</td>
<td>$173.6</td>
<td>$196.3</td>
<td>$165.9</td>
<td>$30.4</td>
</tr>
<tr>
<td>Total LTSS</td>
<td>$231.1</td>
<td>$235.6</td>
<td>$278.5</td>
<td>$244.6</td>
<td>$281.7</td>
<td>$236.6</td>
<td>$45.1</td>
</tr>
</tbody>
</table>

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations
(2) COS Weekly SFY2021 - Week 27
# Pharmacy and Dental
**SFY 2020-21**

Note: Q4 SFY2020 Forward Impacted By COVID-19 Public Health Emergency

<table>
<thead>
<tr>
<th>Spending &amp; Savings by Year &amp; Program</th>
<th>Q2 - SFY20 Actual</th>
<th>Q3 - SFY20 Actual</th>
<th>Q4 - SFY20 Actual</th>
<th>Q1 - SFY21 Actual</th>
<th>Q2 - SFY21 HCTF Topline (5% Annual Increase)</th>
<th>Q2 - SFY21 Actual</th>
<th>Q2 - SFY21 Savings / (Cost)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Pharmacy</td>
<td>$77.2</td>
<td>$82.7</td>
<td>$72.0</td>
<td>$73.9</td>
<td>$106.4</td>
<td>$82.2</td>
<td>$24.2</td>
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<tr>
<td>Managed Care</td>
<td>$34.4</td>
<td>$33.1</td>
<td>$34.7</td>
<td>$36.5</td>
<td>$38.24</td>
<td>$38.1</td>
<td>$0.1</td>
</tr>
<tr>
<td>Fee for Service</td>
<td>$0.8</td>
<td>$0.7</td>
<td>$0.2</td>
<td>$0.4</td>
<td>$1.0</td>
<td>$0.4</td>
<td>$0.7</td>
</tr>
<tr>
<td>Total Dental</td>
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<td>$33.8</td>
<td>$35.0</td>
<td>$35.0</td>
<td>$39.3</td>
<td>$38.5</td>
<td>$0.8</td>
</tr>
</tbody>
</table>

Source(s): (1) Quarter 2 - SFY 2021 Scorecard Calculations  
(2) COS Weekly SFY2021 - Week 27