



Division of Medical Services

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May 4, 2012

The Honorable Mary Anne Salmon, Co-Chairman
The Honorable Tommy Lee Baker, Co-Chairman
Arkansas Legislative Council
State Capitol Building, Room 315
Little Rock, AR 72201

Dear Senator Salmon and Representative Baker:

Submitted herewith is the Medicaid Report for the 3rd quarter of SFY 2012 as required by A.C.A. Section 20-77-111. This report presents Medicaid data for the quarter January 1, 2012, through March 31, 2012.

If you have any questions regarding utilization and expenditure data, please contact Sharon Jordan, Chief Program Administrator, at 682-8489.

Sincerely,

A handwritten signature in cursive script, reading "Andrew Allison".

Andrew Allison, PhD
Director

AA/TC

Attachment

cc: Keith Gober, Analyst, Bureau of Legislative Research
Phil Price, Legislative Analyst, Bureau of Legislative Research
Joyce Dees, Office of the Governor

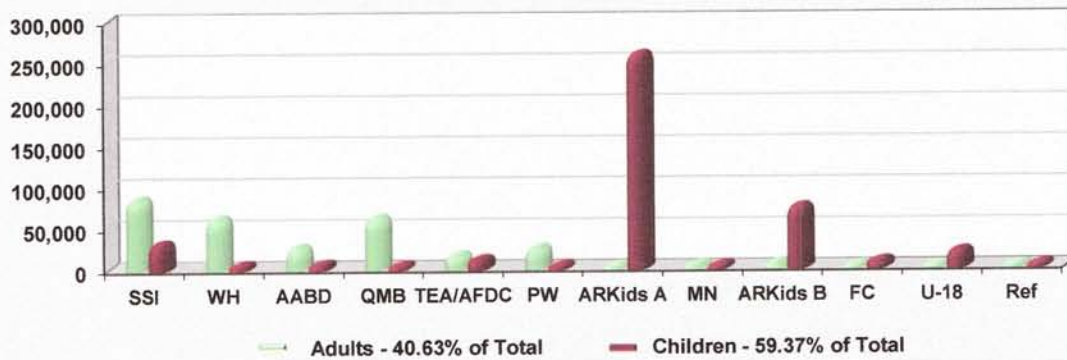
MEDICAID QUARTERLY REPORT **MEDICAID ELIGIBLES AND RECIPIENTS** **THIRD QUARTER - SFY 2012**

Eligibles and Recipients by Month

SFY12			Recipients as
	Eligibles	Recipients	% of Eligibles
Jan	676,593	350,173	51.76%
Feb	676,515	382,789	56.58%
Mar	677,856	425,511	62.77%

SFY11			Recipients as
	Eligibles	Recipients	% of Eligibles
Jan	665,578	365,574	54.93%
Feb	666,811	366,120	54.91%
Mar	671,205	403,286	60.08%

Average Number of Eligibles per Month **by Aid Category, Adults and Children (including ARKids First and CHIP)**



Eligibles (Adults and Children) by Aid Category

(Average for January, February, March 2012)

		Adults	Children	All
SSI	Supplemental Security Income	83,785	29,799	113,584
WH	Women's Health Waiver	60,150	1,222	61,372
AABD	Aid to the Aged, Blind and Disabled	24,661	3,718	28,379
QMB	Qualified Medicare Beneficiary	60,439	26	60,465
TEA/AFDC	Transitional Employment Assistance	15,043	10,201	25,244
PW	Pregnant Women	23,828	0	23,828
ARKids A	Low-Income Children	0	257,738	257,738
MN	Medically Needy	2,593	227	2,819
ARKids B	ARKids First Waiver	4,313	73,074	77,387
FC	Foster Care	247	6,910	7,157
U-18	Under Age 18	5	19,006	19,011
Ref	Refugee	4	1	5
Total Average Eligibles - 3rd Qtr SFY 2012:		275,067	401,921	676,988
Total Average Eligibles - 3rd Qtr SFY 2011:		270,793	396,919	667,712
Percentage of Increase from SFY 2011 to SFY 2012:		1.58%	1.26%	1.39%

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

THIRD QUARTER - SFY 2012

Expenditure Comparison by Appropriation

(Expressed in millions)

Note: Expenditure Comparison by Appropriation based on 39 weeks for both SFY 2011 and SFY 2012.



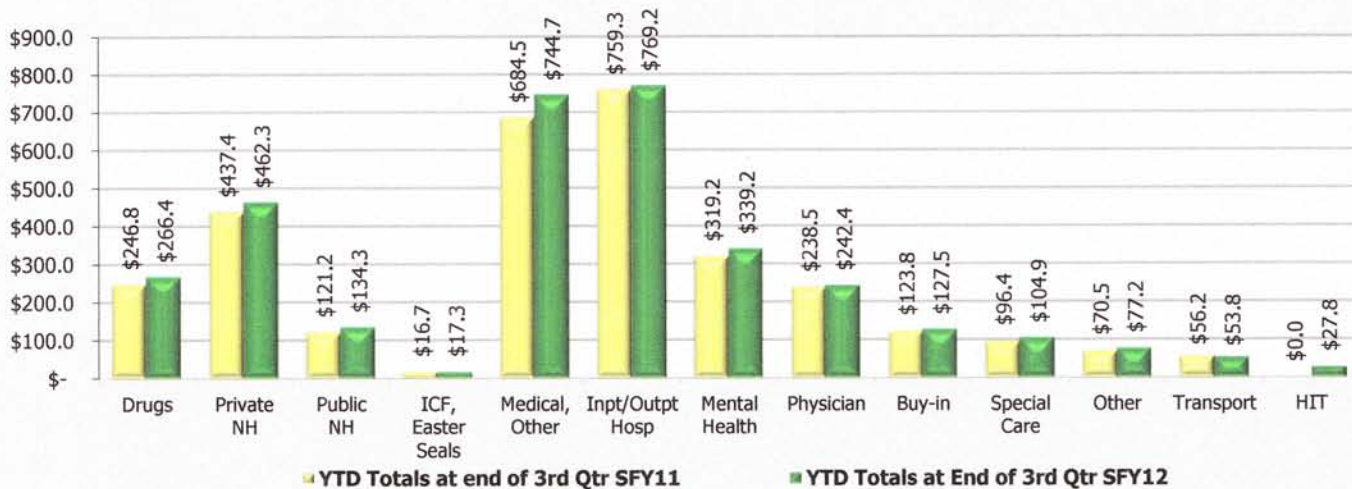
YTD Amounts

	Hospital/ Medical	Drugs	Long Term Care	ARKids First	Medical Expansion	TOTAL
% of Budget Spent	100.30%	99.70%	99.70%	101.50%	95.30%	100.10%
Growth Over SFY11	5.50%	7.60%	6.70%	10.00%	23.20%	6.20%

Total Medicaid Expenditures by Category

(Expressed in millions)

Note: Expenditure Comparison based on 39 weeks for both SFY 2011 and SFY 2012.



Actual Trust Fund Usage SFY11:	\$0
Actual Trust Fund Usage this Quarter:	\$0
Actual Trust Fund Usage Year-to-Date SFY12:	\$0
SFY12 Projected Trust Fund Usage per 7/1 Operating Budget:	\$237,287,163
SFY12 Revised Projected Trust Fund Usage 12/30/11 Operating Budget:	\$155,060,319

Source: DHS, DAS, Quarterly Payout Reports

MEDICAID POLICY CHANGES

January – March 2012

<u>Effective Date</u>	<u>Description of Policy Change</u>
1-1-12	New standards were implemented in electronically conducting certain health care administrative transactions at the heart of daily operations, including claims, remittance, eligibility and claims status requests and responses by using updated 5010 ASC X12 version to comply with the federal mandate.
1-15-12	The Rehabilitative Services for Persons with Mental Illness (RSPMI) manual was updated to clarify the retrospective review process and update how providers can obtain information regarding reports from the Quality Improvement Organization (QIO-like), ValueOptions®.
3-10-12	The Rehabilitative Services for Persons with Mental Illness (RSPMI) manual was updated to mandate disclosure of all covered health care practitioners who perform services at each enrolled site. This update specifies the data elements that must be disclosed to the Division of Medical Services Program Integrity Unit.
3-10-12	The Rehabilitative Services for Persons with Mental Illness (RSPMI) manual was updated to add a modifier to the current procedure code for a Psychiatric Diagnostic Assessment to indicate a Psychiatric Diagnostic Assessment – Continuing Care. It requires that a Psychiatric Diagnostic Assessment – Continuing Care be performed every 12 months during an episode of care. It also changed the name of the current Psychiatric Diagnostic Assessment to Psychiatric Diagnostic Assessment – Initial and can be provided to a beneficiary at the start of an episode of care.

MEDICAID ELIGIBILITY CHANGES
January - March 2012

Effective Date	Description of Eligibility Change
01-01-12	MS 12-01, 2012 Appendix S (SSI and Quarters of Coverage Charts). Changes are due to the COLA increase for January 1, 2012.
01-01-12	MS 12-02, Medicare Savings Resource Limit Increase. The resource limit for the Medicare Savings Program increased January 1, 2012.
01-05-12	MS 12-03, Appendix V-Voter Registration. Revised program name from Food Stamps to Supplemental Nutrition Assistance Program. Revised the name of Family Support Specialist to Program Eligibility Specialist. Referenced the link for instructions on how to register to vote with Access Arkansas. Added instructions on registering to vote with SNAP/MSP review.
01-18-12	MS 12-04, ARKids Self Declaration. Requirements to check WESD screen for consistency with what was reported by the client has been removed from policy.
02-21-12	MS 12-05, Breast and Cervical Cancer Medicaid. Revised the enrollment procedures for enrollment in the Breast and Cervical Cancer program.
03-23-12	MS 12-06, ARKids Renewal Process. Revised the renewal process for ARKids. Added a new form, DCO-975R, as a replacement notice to be sent to the client when the client reports non-receipt of the original DCO-975.