



COMMONWEALTH of VIRGINIA
Department of Medical Assistance Services

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June 6, 2019

MEMORANDUM

TO: The Honorable Thomas K. Norment, Jr.
Co-Chairman, Senate Finance Committee

The Honorable Emmett W. Hanger, Jr.
Co-Chairman, Senate Finance Committee

The Honorable S. Chris Jones
Chairman, House Appropriations Committee

Daniel Timberlake
Director, Department of Planning and Budget

FROM: Jennifer S. Lee, M.D. 
Director, Virginia Department of Medical Assistance Services

SUBJECT: Monthly Report on April Medicaid Expenditures due May 20, 2019

This report is submitted in compliance with Item 307.B of the 2018 Appropriation Act which states:

“The Department of Medical Assistance Services shall submit monthly expenditure reports of the Medicaid program by service that shall compare expenditures to the official Medicaid forecast, adjusted to reflect budget actions from each General Assembly Session. The monthly report shall be submitted to the Department of Planning and Budget and the Chairmen of the House Appropriations and Senate Finance Committees within 20 days after the end of each month.”

- The “FY 2019 Budget” column represents the 2019 Appropriation Act effective May 2, 2019.
- “Funding Adjustments” represent budget execution adjustments.

Key Takeaways:

- “Healthcare Coverage for Low-Income Uninsured Adults” (Medicaid Expansion) began January 1st and has experienced only four months of expenditures. The 43% spent in Total Medicaid Expansion is reflective of the initial months of this program.
- The percentage spent in Behavioral Health & Rehabilitative Services for the Base Medicaid population is high at 97%. The majority of these services moved into managed care on a rolling basis through December in the Medallion 4.0 program and current costs are reflected in the section titled “General Medical Care: MCOs.” At this time, we do not expect the balance at the end of the fiscal year to vary significantly from the official forecast for the sum of those services.
- A Budget Execution Adjustment was approved April 4, 2019 to transfer \$8,500,000 General Fund from Children’s Services Act (CSA) to DMAS to cover projected expenditures for the remainder of the fiscal year. These annual adjustments are made to move funds appropriated to CSA and spent by DMAS.
- DMAS expects that the current appropriation will be sufficient to cover projected expenditures for fiscal year 2019.

Should you have any questions or need additional information, please feel free to contact me at (804) 786-8099.

JSL/

Enclosure

pc: The Honorable Daniel Carey, M.D., Secretary of Health and Human Resources

Department of Medical Assistance Services
Summary Report on Medicaid and CHIP Expenditures -- April FY2019

		FY 2019 Budget*	Funding Adjustments	FY 2019 Adjusted Budget	Expenditures through April FY2019	% Spent	
Medicaid	General Medical Care: MCOs	6,452,080,465	(30,799,583)	6,421,280,882	5,085,468,962	79%	
	General Medical Care: Fee-For-Service	1,430,568,461	195,580	1,430,764,041	1,145,866,874	80%	
	Behavioral Health & Rehabilitative Services	186,076,127	-	186,076,127	180,925,229	97%	
	Long-Term Care Services	1,442,690,739	-	1,442,690,739	1,185,971,892	82%	
	Hospital Payments	657,789,477	-	657,789,477	639,079,187	97%	
	Disallowance	76,942,622	(18,969,647)	57,972,975	-	0%	
	Supplemental Rate Assessment Payments	376,883,647	-	376,883,647	169,251,959	45%	
	Mental Health Services CSA	-	80,213,945	80,213,945	64,999,359	81%	
	MHMR Facility Reimbursements (45607)	123,671,762	273,781	123,945,543	102,807,692	83%	
	Total BASE Medicaid Program (456) by Fund	10,746,703,300	30,914,076	10,777,617,376	8,574,371,154	80%	
	Federal Funds	5,272,652,450	15,364,115	5,288,016,565	4,139,782,026	78%	
	Rate Assessment	188,441,824	-	188,441,824	84,625,979	45%	
	Virginia Health Care Fund	410,279,068	-	410,279,068	200,000,000	49%	
	State Funds	4,875,329,958	15,549,961	4,890,879,919	4,149,963,150	85%	
Medicaid Expansion	General Medical Care: MCOs	901,253,203	-	901,253,203	415,518,402	46%	
	General Medical Care: Fee-For-Service	94,595,365	-	94,595,365	53,470,124	57%	
	Behavioral Health & Rehabilitative Services	2,109,471	-	2,109,471	1,292,925	61%	
	Long-Term Care Services	1,619,423	-	1,619,423	887,545	55%	
	Hospital Payments	7,659,970	-	7,659,970	-	0%	
	Supplemental Rate Assessment Payments	86,590,915	-	86,590,915	-	0%	
	Total Medicaid EXPANSION Expenditures	1,093,828,347	-	1,093,828,347	471,168,996	43%	
		Federal Funds	1,017,299,763	-	1,017,299,763	438,190,937	43%
	Rate Assessment	6,061,364	-	6,061,364	-	0%	
	Coverage Assessment	70,467,221	-	70,467,221	32,978,060	47%	
Total Medicaid	Total Medicaid Expenditures (Base + Expansion)	11,840,531,647	30,914,076	11,871,445,723	9,045,540,150	76%	
		Federal Funds	6,289,952,213	15,364,115	6,305,316,328	4,577,972,963	73%
		Rate Assessment	194,503,188	-	194,503,188	84,625,979	44%
		Coverage Assessment	70,467,221	-	70,467,221	32,978,060	47%
		Virginia Health Care Fund	410,279,068	-	410,279,068	200,000,000	49%
		State Funds	4,875,329,958	15,549,961	4,890,879,919	4,149,963,150	85%
CHIP	FAMIS Expenditures (446)	213,752,531	-	213,752,531	165,030,553	77%	
		Federal Funds	188,474,155	-	188,474,155	145,338,573	77%
		Special Funds	14,065,627	-	14,065,627	12,000,000	85%
		State Funds	11,212,749	-	11,212,749	7,691,980	69%
	M-CHIP Expenditures (466)	187,688,174	30,799,583	218,487,757	160,245,684	73%	
		Federal Funds	165,885,593	27,823,633	193,709,226	141,121,858	73%
	State Funds	21,802,581	2,975,950	24,778,531	19,123,826	77%	

*2019 Appropriation Act effective May 2, 2019

**Department of Medical Assistance Services
Detail Report on Medicaid and CHIP Expenditures -- April FY2019**

	FY 2019 Budget*	Funding Adjustments	FY 2019 Adjusted Budget	Expenditures through April FY2019	% Spent
Medicaid	6,452,080,465	(30,799,583)	6,421,280,882	5,085,468,962	79%
General Medical Care: MCOs	2,247,078,855	(30,799,583)	2,216,279,272	1,754,252,757	79%
Capitation Payments: Low-Income Adults & Children	78,164,614	-	78,164,614	66,082,934	85%
Capitation Payments: Aged, Blind & Disabled	4,491,011	-	4,491,011	4,491,011	100%
Capitation Payments: Duals/CCC Program	4,337,525,517	-	4,337,525,517	3,509,629,092	81%
MCO Pharmacy Rebates	(215,179,532)	-	(215,179,532)	(248,986,833)	116%
General Medical Care: Fee-For-Service	1,430,568,461	195,580	1,430,764,041	1,145,866,874	80%
Inpatient Hospital	298,635,198	-	298,635,198	213,754,297	72%
Outpatient Hospital	83,653,363	-	83,653,363	62,304,301	74%
Physician/Practitioner Services	94,131,719	-	94,131,719	71,774,944	76%
Clinic Services	95,540,514	195,580	95,736,094	72,827,720	76%
Pharmacy	53,884,192	-	53,884,192	44,124,425	82%
FFS Pharmacy Rebates	(22,056,422)	-	(22,056,422)	(10,183,787)	46%
Medicare Premiums Part A & B	326,567,029	-	326,567,029	270,954,867	83%
Medicare Premiums Part D	257,991,210	-	257,991,210	215,749,683	84%
Dental	153,213,615	-	153,213,615	126,907,280	83%
Transportation	51,713,777	-	51,713,777	41,659,796	81%
All Other	37,294,265	-	37,294,265	35,993,347	97%
Behavioral Health & Rehabilitative Services	186,076,127	-	186,076,127	180,925,229	97%
MH Case Management	12,981,422	-	12,981,422	15,891,301	122%
MH Residential Services	17,480,605	-	17,480,605	16,555,134	95%
MH Rehabilitative Services	125,236,943	-	125,236,943	117,167,201	94%
Early Intervention & EPSDT-Authorized Services	30,377,156	-	30,377,156	31,311,593	103%
Long-Term Care Services	1,442,690,739	-	1,442,690,739	1,185,971,892	82%
Nursing Facility	162,699,297	-	162,699,297	137,849,603	85%
Private ICF/MRs	117,292,021	-	117,292,021	98,375,947	84%
PACE	62,545,942	-	62,545,942	44,155,184	71%
HCBC Waivers: Personal Support	176,630,259	-	176,630,259	154,750,074	88%
HCBC Waivers: Habilitation	819,698,876	-	819,698,876	668,366,801	82%
HCBC Waivers: Nursing, EM/AT, Adult Day Care, Alzheimers	37,294,735	-	37,294,735	29,952,408	80%
HCBC Waivers: Case Management & Support	66,529,607	-	66,529,607	52,521,875	79%
Hospital Payments	657,789,477	-	657,789,477	639,079,187	97%
Disallowance	76,942,622	(18,969,647)	57,972,975	-	0%
Supplemental Rate Assessment Payments	376,883,647	-	376,883,647	169,251,959	45%
Total Forecasted BASE Medicaid Expenditures	10,623,031,538	(49,573,650)	10,573,457,888	8,406,564,103	80%
Federal Funds	5,210,816,569	(27,823,633)	5,182,992,936	4,055,878,499	78%
Rate Assessment	188,441,824	-	188,441,824	84,625,979	45%
Virginia Health Care Fund	410,279,068	-	410,279,068	200,000,000	49%
State Funds	4,813,494,077	(21,750,017)	4,791,744,060	4,066,059,625	85%
Mental Health Services CSA	-	80,213,945	80,213,945	64,999,359	81%
Federal Funds	-	43,187,748	43,187,748	32,499,680	75%
State Funds	-	37,026,197	37,026,197	32,499,680	88%
MHMR Facility Reimbursements (45607)	123,671,762	273,781	123,945,543	102,807,692	83%
Federal Funds	61,835,881	-	61,835,881	51,403,847	83%
State Funds	61,835,881	273,781	62,109,662	51,403,845	83%
Total BASE Medicaid Program (456) by Fund	10,746,703,300	30,914,076	10,777,617,376	8,574,371,154	80%
Federal Funds	5,272,652,450	15,364,115	5,288,016,565	4,139,782,026	78%
Rate Assessment	188,441,824	-	188,441,824	84,625,979	45%
Virginia Health Care Fund	410,279,068	-	410,279,068	200,000,000	49%
State Funds	4,875,329,958	15,549,961	4,890,879,919	4,149,963,150	85%
Medicaid Expansion	901,253,203	-	901,253,203	415,518,402	46%
General Medical Care: MCOs	656,374,135	-	656,374,135	302,127,125	46%
Capitation Payments: Low-Income Adults & Children	244,879,068	-	244,879,068	113,391,277	46%
Capitation Payments: CCC+ Program	94,595,365	-	94,595,365	53,470,124	57%
General Medical Care: Fee-For-Service	66,411,184	-	66,411,184	24,593,918	37%
Inpatient Hospital	6,478,183	-	6,478,183	10,981,586	170%
Physician/Practitioner Services	11,369,914	-	11,369,914	7,449,539	66%
Clinic Services	724,194	-	724,194	949,654	131%
Pharmacy	2,661,334	-	2,661,334	3,884,418	146%
Dental	6,084,530	-	6,084,530	2,900,047	48%
Transportation	430,112	-	430,112	2,320,643	540%
All Other	435,914	-	435,914	390,320	90%
Behavioral Health & Rehabilitative Services	2,109,471	-	2,109,471	1,292,925	61%
MH Case Management	114,927	-	114,927	136,804	119%
MH Residential Services	-	-	-	133,705	n/a
MH Rehabilitative Services	1,994,544	-	1,994,544	1,022,416	51%
Long-Term Care Services	1,619,423	-	1,619,423	887,545	55%
Nursing Facility	-	-	-	408,688	n/a
PACE	-	-	-	23,998	n/a
HCBC Waivers: Personal Support	1,391,975	-	1,391,975	95,253	7%
HCBC Waivers: Habilitation	-	-	-	303,230	n/a
HCBC Waivers: Case Management & Support	227,448	-	227,448	56,376	25%
Hospital Payments	7,659,970	-	7,659,970	-	0%
Supplemental Rate Assessment Payments	86,590,915	-	86,590,915	-	0%
Total Medicaid EXPANSION Expenditures	1,093,828,347	-	1,093,828,347	471,168,996	43%
Federal Funds	1,017,299,763	-	1,017,299,763	438,190,937	43%
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