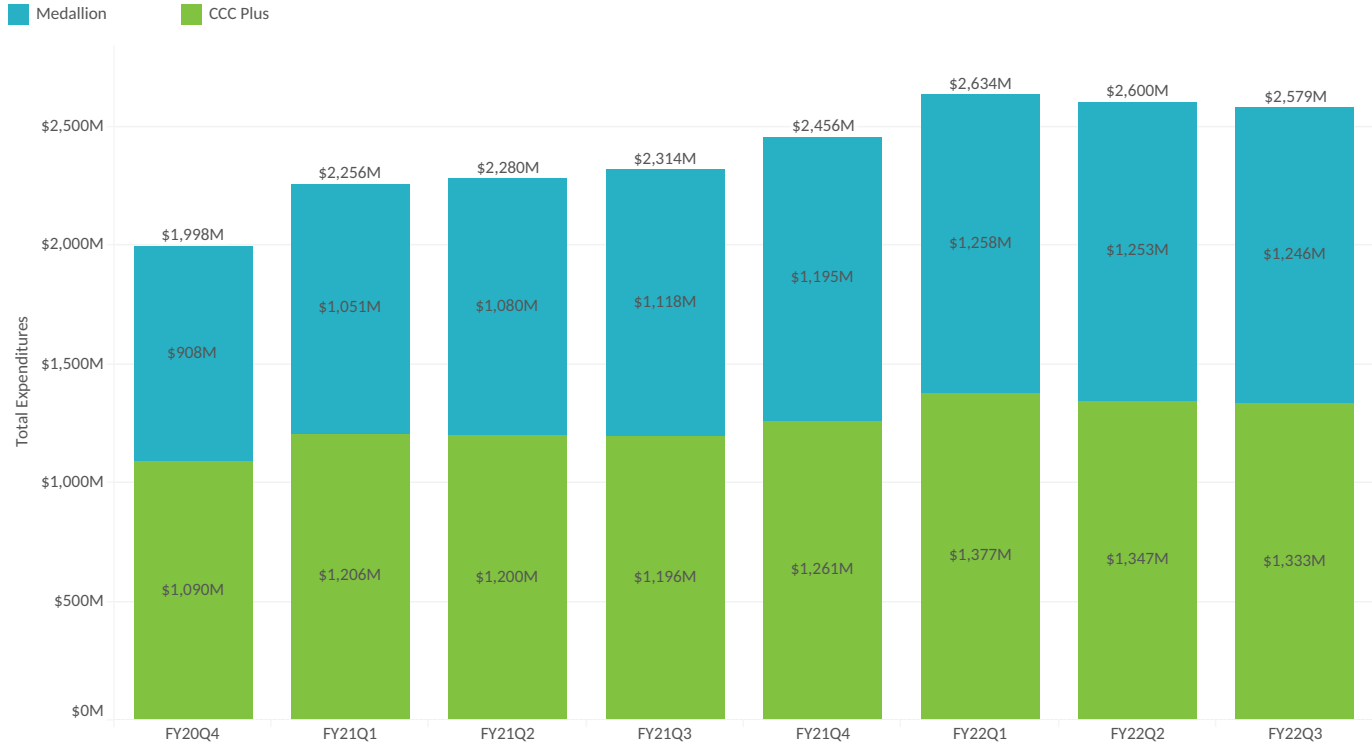


Medicaid and FAMIS Managed Care Healthcare Expenditures by Program

Program: All Member Eligibility Category: All Service Category: All

Healthcare Expenditures by Program

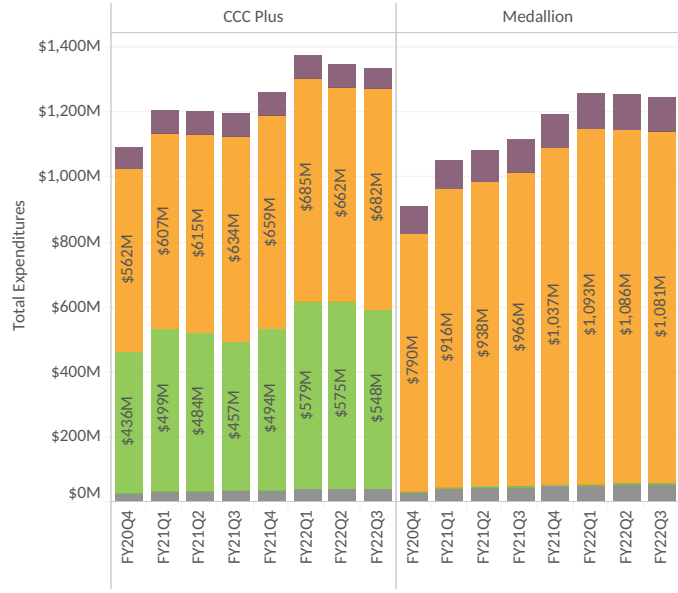


Medicaid and FAMIS Managed Care Healthcare Expenditures by Service Category

Program: All Member Eligibility Category: All Service Category: All

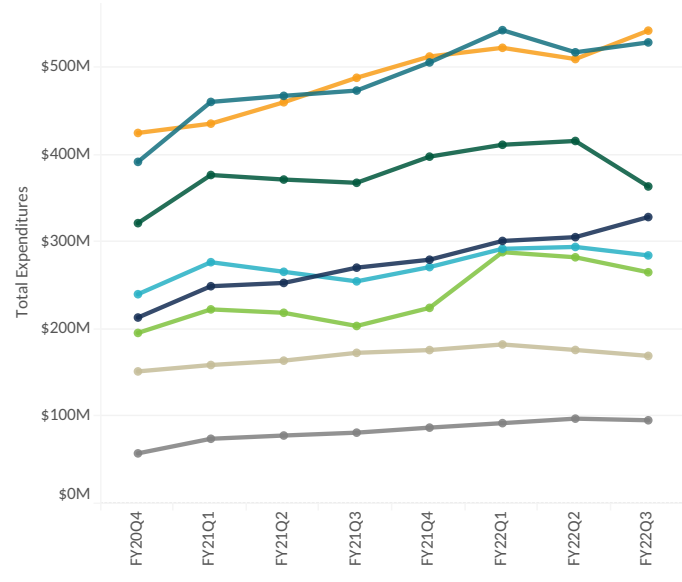
By Overall Service Category

- Community Behavioral Health
- General Medical Care
- Long Term Services and Supports
- Other



By Detailed Service Category

- Inpatient Services
- Outpatient Services
- Pharmacy Services
- Physician Services
- Nursing Facility
- Home and Community Based Services
- Other
- Behavioral Health Services



Expenditures by Program	Expenditures by Service Category	Per Capita Spending	Detailed Data	Footnotes and Definitions
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Medicaid and FAMIS Managed Care Healthcare Expenditures Per Capita Spending

Select a Program or Member Eligibility Category filter to see details for the selected group:

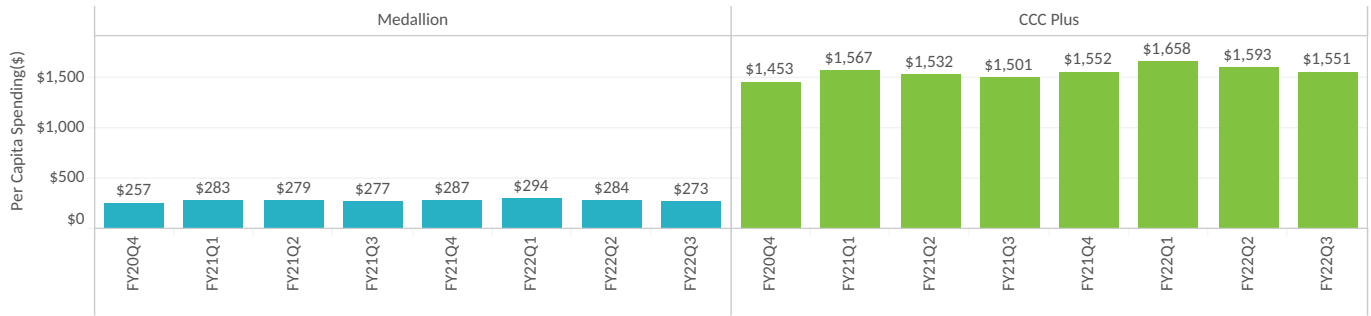
Program
All

Member Eligibility Category
All

Managed Care Program Per Capita Spending

Click on a Program in the chart below to display Service Category Per Capita Spending for that selection:

■ Medallion
 ■ CCC Plus



Service Category Per Capita Spending

Expenditures by Program	Expenditures by Service Category	Per Capita Spending	Detailed Data	Footnotes and Definitions
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Member Eligibility Category	Program	Service Category	Quarter					FY22Q1
			FY20Q4	FY21Q1	FY21Q2	FY21Q3	FY21Q4	
Aged (65 or older)	CCC Plus	Community Behavioral Health	\$4,179,216.88	\$4,235,254.79	\$4,089,033.98	\$4,049,674.26	\$4,265,896.56	\$4,132,500.00
		General Medical Care	\$48,526,759.39	\$51,608,142.95	\$53,222,984.39	\$59,844,819.66	\$54,764,290.56	\$57,821,900.00
		Long Term Services and Supports	\$300,468,884.97	\$340,743,006.62	\$328,642,507.89	\$309,866,312.33	\$331,723,739.30	\$375,932,000.00
		Other	\$6,278,733.74	\$7,889,512.64	\$8,080,912.85	\$8,463,332.70	\$8,927,220.95	\$9,516,000.00
Persons with a Disability or Blindness	CCC Plus	Community Behavioral Health	\$48,880,200.69	\$49,211,741.26	\$47,585,817.81	\$48,725,772.79	\$47,689,390.62	\$48,269,000.00
		General Medical Care	\$392,599,296.56	\$414,359,888.96	\$413,245,842.38	\$412,692,955.77	\$424,437,871.68	\$433,932,000.00
		Long Term Services and Supports	\$120,823,356.30	\$139,563,299.59	\$135,209,550.12	\$126,701,783.84	\$137,646,041.90	\$171,733,000.00
		Other	\$14,231,841.41	\$17,983,469.44	\$18,552,192.01	\$18,504,900.31	\$20,082,839.54	\$21,401,000.00
Non-Expansion Adults	CCC Plus	Community Behavioral Health	\$276,708.17	\$251,755.43	\$263,862.21	\$294,581.45	\$266,230.78	\$354,000.00
		General Medical Care	\$1,913,069.95	\$2,097,962.46	\$2,184,128.15	\$3,140,960.81	\$3,226,680.42	\$3,332,000.00
		Long Term Services and Supports	\$1,324,234.55	\$1,560,708.40	\$1,761,241.29	\$1,762,446.41	\$2,145,169.34	\$2,852,000.00
		Other	\$108,444.59	\$135,181.23	\$140,514.14	\$177,853.48	\$200,724.92	\$213,000.00
	Medallion	Community Behavioral Health	\$14,143,211.45	\$15,269,316.37	\$15,864,273.18	\$16,146,721.71	\$16,643,333.41	\$17,404,000.00
		General Medical Care	\$111,653,960.99	\$131,910,510.79	\$132,437,092.38	\$136,442,498.62	\$149,020,341.75	\$156,927,000.00
		Long Term Services and Supports	\$138,783.17	\$263,139.32	\$291,535.35	\$274,953.41	\$271,890.13	\$297,000.00
		Other	\$6,522,438.23	\$8,251,931.04	\$8,952,178.54	\$9,243,173.26	\$9,472,450.16	\$9,573,000.00
Pregnant Members	CCC Plus	Community Behavioral Health	\$54,701.95	\$54,602.32	\$28,700.47	\$41,829.20	\$66,260.57	\$72,000.00
		General Medical Care	\$104,162.24	\$137,167.54	\$98,725.57	\$155,766.65	\$165,225.02	\$199,000.00
		Long Term Services and Supports	\$8,680.65	\$22,642.04	\$12,131.00	\$12,748.57	\$28,653.68	\$50,000.00
		Other	\$11,634.23	\$10,240.15	\$17,376.01	\$27,131.89	\$17,214.16	\$15,000.00
	Medallion	Community Behavioral Health	\$1,052,895.52	\$1,197,255.25	\$1,162,177.10	\$1,196,032.13	\$1,227,306.75	\$1,463,000.00
		General Medical Care	\$44,107,743.73	\$45,497,306.86	\$41,872,643.09	\$41,060,240.66	\$40,007,491.30	\$41,999,000.00
		Long Term Services and Supports	\$16,004.22	\$20,066.71	\$14,861.17	\$22,154.39	\$11,030.05	\$17,000.00
		Other	\$3,340,512.42	\$3,424,184.99	\$3,096,176.34	\$3,079,604.18	\$3,085,842.98	\$3,046,000.00
Children	CCC Plus	Community Behavioral Health	\$280,413.85	\$313,364.81	\$341,745.56	\$326,999.74	\$333,103.62	\$333,000.00
		General Medical Care	\$7,872,896.04	\$10,287,758.91	\$8,441,217.85	\$9,204,500.95	\$8,754,417.58	\$10,680,000.00
		Long Term Services and Supports	\$1,048,632.86	\$1,186,340.48	\$1,090,713.07	\$1,179,346.76	\$1,138,608.43	\$1,242,000.00
		Other	\$35,242.35	\$61,286.78	\$61,648.60	\$84,682.17	\$85,869.07	\$183,000.00
	Medallion	Community Behavioral Health	\$37,342,025.29	\$36,245,343.74	\$38,082,628.37	\$41,635,365.52	\$42,133,350.58	\$41,657,000.00
		General Medical Care	\$247,319,865.31	\$285,968,279.30	\$294,000,423.84	\$289,838,942.73	\$311,730,865.14	\$349,020,000.00
		Long Term Services and Supports	\$971,113.22	\$1,353,660.31	\$1,488,556.59	\$1,680,857.68	\$1,915,583.79	\$2,091,000.00
		Other	\$5,085,809.38	\$7,353,418.15	\$7,802,266.48	\$8,307,892.50	\$9,567,104.96	\$12,697,000.00
Medicaid Expansion Adults	CCC Plus	Community Behavioral Health	\$13,843,846.10	\$15,426,719.66	\$17,159,691.30	\$17,904,565.08	\$19,125,202.27	\$21,174,000.00
		General Medical Care	\$113,436,244.40	\$130,667,171.59	\$140,717,081.76	\$151,773,951.09	\$170,236,619.43	\$181,552,000.00

Expenditures by Program	Expenditures by Service Category	Per Capita Spending	Detailed Data	Footnotes and Definitions
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Footnotes and Definitions

1. **Managed care organizations** (MCO) are contracted private health plans that manage membercare needs. Plans are paid on a monthly capitated basis.
2. The **CCPlus program** is a long-term services and supports program. This mandatory Medicaid managed care program serves individuals with complex care needs through an integrated delivery model that includes medical services, behavioral health services and long-term services and supports. Additional information is available at <http://www.dmas.virginia.gov/#/ccplus>.
3. The **Medallion Program** covers (1) children, (2) low income parents and caretaker relatives living with children, (3) pregnant members, (4) FAMIS members, (5) current and former foster care and adoption assistance children and (6) newly eligible Medicaid Expansion adults. Visit <http://dmas.virginia.gov/#/med4> to learn more.
4. The **Service Category** is the type of medical care provided.
5. **Community Behavioral Health** includes services such as behavioral therapy, day treatment and partial hospitalization, community treatment, and other mental health services.
6. **General Medical Care** includes services such as inpatient and outpatient care, pharmacy services, and physician services.
7. **Long-Term Services and Supports** are for members who are elderly or have a chronic disability that requires ongoing services and supports in order to meet their functional needs. LTSS under Medicaid include, but are not limited to, Personal Care, Respite Care, Companion Care, Adult Day Care, nursing, and other rehabilitative and habilitative services and supports that help maximize their independence.
8. The **Other** service category includes services such as non-emergency medical transportation and Early and Periodic Screening, Diagnostic and Treatment (EPSDT) for children.
9. **Expenditures** are based on the date a service was provided per submitted claims. To account for lag time between when a service was rendered and claim submission, quarter expenditures are presented 4 months after the end of the quarter. Data for each quarter will be updated with additional "run out" at each quarterly update.
10. **Medicaid expanded eligibility** in the third quarter of SFY19 to includes adults up to 133% of the Federal Poverty Level (FPL).
11. **Category totals** may not match overall program totals due to rounding; Expenditures by Service Category do not show service categories under \$1 million in a given quarter, however the Detailed Data section includes all expenditures in a quarter.
12. **Per Capita Spending** is the total MCO expenditures per quarter divided by the total number of member months for a selected program and/or member eligibility category. Per Capita Spending represents per member per month health care expenditures and may not reflect capitation payments for a given service line.
13. The **Other** eligibility category includes services for members whose eligibility category is unassigned at time of billing. Claims may be adjudicated when additional information is provided.