



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

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MEMORANDUM

TO: The Honorable Barry D. Knight
Chair, House Appropriations Committee

The Honorable Janet D. Howell
Chair, Senate Finance and Appropriations Committee

Michael Maul
Director, Virginia Department of Planning and Budget

FROM: Cheryl J. Roberts
Director, Virginia Department of Medical Assistance Services

SUBJECT: Monthly Medicaid Expenditure Report (July Data)

This report is submitted in compliance with item 308.B.1. of the *2022 Appropriations Act*, which states:

“The Department of Medical Assistance Services (DMAS) 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 and Appropriations Committees within 20 days after the end of each month.”

Should you have any questions or need additional information, please feel free to contact me at (804) 664-2660.

CJR/wrf

Enclosure

Pc: The Honorable John Littell, Secretary of Health and Human Resources

**Department of Medical Assistance Services
Detail Report on Medicaid Expenditures -- July FY2024**

Category	Base Medicaid			Medicaid Expansion		
	FY 2024 Official Forecast ³	FY 2024 Appropriation ³	Actual Expenditures through July FY 2024	FY 2024 Official Forecast ³	FY 2024 Appropriation ³	Actual Expenditures through July FY 2024
	General Medical Care: Managed Care	8,953,232,433	8,521,098,907	10,268,101	5,323,176,881	4,675,414,290
MCO Capitation Payments: Low-Income Adults & Children	3,120,791,212	2,903,191,113	9,297,446	3,952,962,519	3,552,018,524	339,594,917
MCO Capitation Payments: CCC+ Program	6,181,652,982	5,987,881,490	970,655	1,715,739,111	1,352,735,524	151,335,912
MCO Pharmacy Rebates (Current Year) ¹	-349,211,761	-369,973,696	-	-345,524,749	-229,339,758	-
General Medical Care: Fee-For-Service	1,458,874,295	1,422,256,292	129,771,587	370,524,764	408,047,120	33,399,074
Inpatient Hospital	123,917,029	181,042,004	12,250,335	201,746,433	219,980,218	8,737,494
Outpatient Hospital	30,432,391	32,499,573	3,025,876	36,493,034	47,239,921	2,307,125
Physician/Practitioner Services	30,982,143	40,206,644	2,828,358	27,650,490	34,788,809	1,980,869
Clinic Services	124,464,899	79,360,992	8,607,470	8,739,490	16,403,323	2,020,081
Pharmacy (Point of Sale Only)	10,750,757	9,585,495	935,010	5,507,400	17,457,321	571,873
FFS Pharmacy Rebates (Current Year POS, Hospital and Physician)	-10,334,988	-30,102,209	-	-24,595,262	-16,959,959	-
Medicare Premiums Part A & B	468,398,538	426,343,869	39,809,619	-	-	-
Medicare Premiums Part D	349,029,023	328,888,487	27,325,893	-	-	5,872,130
Dental	242,781,636	258,242,394	23,778,822	106,225,114	80,350,938	11,143,648
Transportation	58,362,680	53,580,482	6,111,699	3,330,589	2,371,959	355,596
Indian Health Clinics (100% Fed)	8,297,109	8,297,109	2,944,308	-	-	-
All Other (Hospice, HIP Payments, Medical Appliances)	21,793,078	34,311,452	2,154,198	5,427,476	6,414,590	410,259
Behavioral Health & Rehabilitative Services: Fee-For-Service	33,118,423	48,618,265	5,301,886	11,678,877	8,004,121	826,417
MH Case Management	4,463,085	1,525,320	112,030	-	-	106,153
MH Residential Services (PRTF primarily, also psych commty res svcs)	7,585,161	24,642,373	3,592,976	-	-	-
MH Rehabilitative Services	5,725,496	6,645,309	540,637	-	-	720,264
Early Intervention & EPSDT-Authorized Services	15,344,681	15,805,263	1,056,243	-	-	-
Long-Term Care Services: Fee-For-Service	2,206,810,298	2,341,528,396	191,353,612	66,131,490	52,306,111	6,161,106
Nursing Facility	170,935,885	213,430,256	12,629,149	21,148,922	10,699,441	1,193,317
Private ICF/IDs	129,488,093	132,381,818	15,084,623	-	-	211,272
PACE	97,877,274	80,718,949	9,908,422	-	-	507,287
HCBS Waivers: Personal Support	319,088,816	294,705,190	13,694,514	-	-	918,913
HCBS Waivers: Habilitation	1,339,513,475	1,452,625,672	125,314,322	44,982,568	41,606,670	2,758,607
HCBS Waivers: Nursing, EM/AT, Adult Day Care	69,777,876	70,116,111	6,815,771	-	-	302,894
HCBS Waivers: Case Management & Support	80,128,879	97,550,399	7,906,812	-	-	268,817
Hospital Supplemental Payments (DSH, IME/GME, Dx, SGO/NSGO Hosp, SGO/NSGO NF)	542,340,583	586,016,148	8,056,442	145,179,303	92,483,933	200,253
Hospital Supplemental Rate Assessment Payments	1,223,502,972	849,995,680	-	1,224,915,050	910,380,095	-
Total Forecasted Medicaid Expenditures	14,417,879,004	13,769,513,689	344,751,628	7,141,606,365	6,146,635,670	531,517,600
Federal Funds	7,240,333,644	6,967,731,476	175,497,967	6,430,609,325	5,533,261,448	473,186,984
Rate Assessment	598,494,601	424,997,840	-	122,491,505	91,038,009	-
Coverage Assessment	-	-	-	588,505,537	522,336,213	58,330,695
Virginia Health Care Fund (Includes Tobacco Tax, Pharmacy Rebates, etc.)	653,561,390	653,561,390	-	-	-	-
General Funds	5,925,489,368	5,723,222,984	169,253,659	-	-	-

Unforecasted Medicaid Expenditures			
Mental Health Services CSA	-	79,426,681	7,333,134
Federal Funds	-	48,212,331	3,897,561
State Funds	-	31,214,350	3,435,573
Payments for Graduate Medical Education Residencies (45606)	-	8,700,000	-
Federal Funds	-	4,350,000	-
State Funds	-	4,350,000	-
DBHDS Facility Reimbursements (45607)	-	61,635,858	3,721,814
Federal Funds	-	30,817,929	1,978,604
State Funds	-	30,817,929	1,743,210
Pharmacy Rebate Holding Acct Balance to be Reclassed in the following month ²	-	-	(229,600,931)

CHIP			
FAMIS Expenditures (446)	310,259,591	331,516,495	8,723,437
Federal Funds	215,156,039	217,678,257	5,907,037
Special Funds	14,065,627	14,065,627	-
State Funds	81,037,925	99,772,611	2,816,400
M-CHIP Expenditures (466)	259,514,165	256,045,283	9,795,749
Federal Funds	180,722,226	162,973,242	6,659,899
State Funds	78,791,939	93,072,041	3,135,850

Summary of Rebates by Quarter	Base Medicaid				Medicaid Expansion			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
MCO Pharmacy Rebates - Current Year								
FFS Pharmacy Rebates - Current Year								
MCO Pharmacy Rebates - Prior Year								
FFS Pharmacy Rebates - Prior Year								

¹ Pharmacy rebates received in the first half of the year are from prior year invoices and treated as revenue in the Virginia Health Care Fund.
² This represents the Pharmacy Rebate receipts currently in the holding account, which will be reclassified in the following month into revenue or expenditure refunds in Base Medicaid or Expansion, MCO or FFS.
³ Forecast is Official Forecast as of 11/1/2022. Appropriation is per 2022 Appropriation Act, Chapter 2 updated with funding changes.