



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

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MEMORANDUM

TO: The Honorable Luke E. Torian
Chair, House Appropriations Committee

The Honorable L. Louise Lucas
Chair, Senate Finance and Appropriations Committee

Michael Maul
Director, Department of Planning and Budget

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

SUBJECT: Monthly Expenditure Report – June FY2025

This report is submitted in compliance with Item 292.B.1. of the 2025 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. In addition, the department shall include information on service level detail, including explanations of budget and expenditure variances. 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.

CR/wf
Enclosure

Pc: The Honorable Janet V. Kelly, Secretary of Health and Human Resources

Department of Medical Assistance Services
Detail Report on Medicaid Expenditures - June FY2025

Category	Base Medicaid			Medicaid Expansion		
	FY 2025 Official Forecast ¹	FY 2025 Appropriation ³	Actual Expenditures through June FY 2025	FY 2025 Official Forecast ³	FY 2025 Appropriation ³	Actual Expenditures through June FY 2025
General Medical Care: Managed Care	9,257,845,626	9,229,636,541	9,250,362,277	5,060,745,006	5,082,800,491	4,921,370,558
MCO Capitation Payments: Low-Income Adults & Children	3,215,054,259	3,182,655,174	3,155,939,998	3,653,869,359	3,680,114,844	3,543,984,204
MCO Capitation Payments: CCC+ Program	6,375,127,764	6,375,127,764	6,451,599,266	1,713,079,699	1,713,079,699	1,798,340,582
MCO Pharmacy Rebates (Current Year) ¹	-332,336,397	-328,146,397	-357,176,987	-306,204,052	-310,394,052	-420,954,228
General Medical Care: Fee-For-Service	1,815,585,738	1,815,585,738	1,722,915,156	556,809,443	556,809,443	563,309,403
Inpatient Hospital	160,623,185	160,623,185	175,981,493	192,794,953	192,794,953	222,402,100
Outpatient Hospital	38,480,918	38,480,918	39,082,349	50,868,182	50,868,182	46,708,168
Physician/Practitioner Services	31,164,719	31,164,719	41,011,806	34,163,543	34,163,543	32,939,239
Clinic Services	137,666,742	137,666,742	130,421,794	9,149,746	9,149,746	7,783,402
IHC Clinic Regular FMAP	46,617,869	46,617,869	42,466,377	38,345,020	38,345,020	33,027,542
Pharmacy (Point of Sale Only)	13,605,013	13,605,013	12,512,497	13,978,240	13,978,240	12,833,421
FFS Pharmacy Rebates (Current Year POS, Hospital and Physician)	-29,747,407	-29,747,407	-7,261,190	-3,866,519	-3,866,519	-4,956,153
Medicare Premiums Part A & B	527,710,501	527,710,501	456,629,935	15,785,760	15,785,760	7,061,517
Medicare Premiums Part D	406,081,642	406,081,642	366,991,452	19,219,146	19,219,146	22,027,962
Dental	293,465,333	293,465,333	287,171,614	164,327,923	164,327,923	158,974,036
Transportation	87,461,077	87,461,077	75,145,903	6,961,833	6,961,833	5,824,184
Indian Health Clinics (100% Fed)	76,818,994	76,818,994	74,841,044	11,912,094	11,912,094	15,701,190
All Other (Hospice, HIP Payments, Medical Appliances)	25,637,149	25,637,149	27,920,081	3,169,522	3,169,522	2,982,796
Behavioral Health & Rehabilitative Services: Fee-For-Service	41,620,381	41,620,381	37,482,308	15,799,912	15,799,912	17,915,663
MH Case Management	1,462,334	1,462,334	1,421,122	164,188	164,188	673,041
MH Residential Services (PRTF primarily, also psych commty res svcs)	15,171,430	15,171,430	23,704,742	-	-	24,840
MH Rehabilitative Services	6,899,312	6,899,312	-6,483,326	15,574,274	15,574,274	16,848,023
Early Intervention & EPSDT-Authorized Services	18,087,306	18,087,306	18,839,770	61,450	61,450	369,759
Long-Term Care Services: Fee-For-Service	2,715,130,658	2,715,130,658	2,683,252,592	98,549,283	98,549,283	90,246,953
Nursing Facility	294,693,702	294,693,702	254,085,869	37,709,706	37,709,706	9,858,808
Private ICF/IIDs	149,756,789	149,756,789	136,866,277	693,997	693,997	3,399,390
PACE	142,730,844	142,730,844	137,222,250	864,920	864,920	6,234,626
HCBS Waivers: Personal Support	361,722,598	361,722,598	376,290,910	2,391,308	2,391,308	13,925,882
HCBS Waivers: Habilitation	1,583,294,640	1,583,294,640	1,593,125,514	55,799,128	55,799,128	49,651,255
HCBS Waivers: Nursing, EM/AT, Adult Day Care	97,824,477	97,824,477	99,594,684	481,155	481,155	3,449,488
HCBS Waivers: Case Management & Support	85,107,608	85,107,608	86,067,088	609,069	609,069	3,727,505
Supplemental Payments (DSH, IME/GME, Dr,SGO/NSGO Hosp, SGO/NSGO NP)	894,388,302	894,388,302	847,153,837	210,047,721	210,047,721	192,007,785
DSH/IME/GME Payments	572,606,273		465,445,619	-	-	9,943,750
Multi-settlement	36,992,959		47,583,225	-	-	-
Hospital / Nursing Facility Supplemental Payments	60,761,719		138,365,021	34,150,273		35,581,825
Physician Supplemental Payments	223,928,139		195,759,974	175,818,655		146,482,209
Government & Nonprofit Clinics	99,212		-	78,794		-
Private Acute Care Hospital Enhanced Supplemental Payments	1,852,213,661	1,852,213,661	1,781,775,242	2,542,709,198	2,542,709,198	1,909,166,465
Total Forecasted Medicaid Expenditures	16,576,784,365	16,548,575,280	16,322,941,413	8,484,660,563	8,506,716,048	7,694,016,828
Federal Funds	8,346,628,746	8,318,669,313	8,212,631,217	7,632,097,136	7,627,907,136	6,902,296,820
Rate Assessment	906,720,735	906,720,735	872,198,864	254,270,920	254,270,920	190,916,644
Coverage Assessment	-	-	-	598,292,510	624,537,995	600,803,365
Virginia Health Care Fund (includes Tobacco Tax, Pharmacy Rebates, etc.)	451,670,000	500,515,662	500,515,662	-	-	-
General Funds	6,871,764,884	6,822,669,570	6,737,595,670	-	-	-

Unforecasted Medicaid Expenditures		
Mental Health Services CSA	-	102,732,729
Federal Funds	-	48,212,331
State Funds	-	54,520,398
Payments for Graduate Medical Education Residencies (45606)		11,700,000
Federal Funds		5,850,000
State Funds		5,850,000
DBHDS Facility Reimbursements (45607)		59,602,101
Federal Funds		30,204,343
State Funds		29,397,758
Pharmacy Rebate Holding Acct Balance to be Reclassed in the following month ²		-
		120,870,799

CHIP		
FAMIS Expenditures (446)	448,492,561	448,492,561
Federal Funds	296,126,930	296,126,930
Special Funds	14,065,627	14,065,627
State Funds	138,300,004	138,300,004
M-CHIP Expenditures (466)	311,181,127	262,129,029
Federal Funds	206,347,147	172,831,732
State Funds	104,833,980	89,297,297

Summary of Rebates by Quarter	Base Medicaid				Medicaid Expansion			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
MCO Pharmacy Rebates - Current Year	-		161,945,287	198,410,100	-		179,779,849	253,644,107
FFS Pharmacy Rebates - Current Year	-		3,334,557	(8,003,478)	-		2,464,943	2,574,869
MCO Pharmacy Rebates - Prior Year	115,416,093	166,399,694	34,210,423	2,667,933	123,736,466	183,304,363	37,808,605	3,718,827
FFS Pharmacy Rebates - Prior Year	1,845,248	792,406	534,466	52,308	1,371,155	2,173,427	336,389	162,525

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 11/1/2024. Appropriation is per 2025 Appropriation Act, Chapter 725 updated with funding changes.