



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

CHERYL ROBERTS
DIRECTOR

SUITE 1300
600 EAST BROAD STREET
RICHMOND, VA 23219
804/786-7933
804/343-0634 (TDD)

September 22, 2025

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 J. Roberts
Director, Virginia Department of Medical Assistance Services

SUBJECT: Monthly Medicaid Expenditure Report (August Data)

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.

CJR/wrf

Enclosure

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

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Department of Medical Assistance Services
Detail Report on Medicaid Expenditures - August FY2026

Category	Base Medicaid			Medicaid Expansion		
	FY 2026 Official Forecast ¹	FY 2026 Appropriation ³	Actual Expenditures through August FY 2026	FY 2025 Official Forecast ³	FY 2025 Appropriation ³	Actual Expenditures through August FY 2026
General Medical Care: Managed Care	9,660,587,839	9,667,854,694	1,633,640,690	5,450,172,112	5,455,964,347	905,805,822
MCO Capitation Payments: Low-Income Adults & Children	3,314,429,922	3,321,496,777	523,102,470	3,981,749,985	3,978,315,839	589,052,137
MCO Capitation Payments: CCC+ Program	6,678,494,314	6,678,494,314	1,110,547,927	1,778,492,698	1,787,719,079	316,779,499
MCO Pharmacy Rebates (Current Year) ¹	-332,336,397	-332,336,397	(9,707)	-310,070,571	-310,070,571	(25,814)
General Medical Care: Fee-For-Service	1,720,772,147	1,683,402,493	418,912,227	580,799,135	580,799,135	107,446,066
Inpatient Hospital	155,510,684	155,510,684	29,211,889	204,374,622	204,374,622	47,931,196
Outpatient Hospital	39,775,357	39,775,357	7,525,273	52,341,521	52,341,521	9,271,246
Physician/Practitioner Services	41,610,221	41,610,221	8,166,655	33,886,112	33,886,112	5,927,370
Clinic Services	139,550,306	139,550,306	62,876,853	7,585,479	7,585,479	1,562,454
IHC Clinic Regular FMAP	60,216,599	60,216,599	113,250	66,973,213	66,973,213	200,742
Pharmacy (Point of Sale Only)	14,632,772	14,632,772	2,547,848	15,786,190	15,786,190	2,688,196
FFS Pharmacy Rebates (Current Year POS, Hospital and Physician)	-29,747,407	-29,747,407	-	-	-	-
Medicare Premiums Part A & B	478,690,918	478,690,918	117,475,692	9,639,128	9,639,128	2,966,252
Medicare Premiums Part D	409,670,013	409,670,013	96,454,136	3,658,063	3,658,063	3,296,328
Dental	301,054,455	301,054,455	56,466,611	173,592,010	173,592,010	30,868,221
Transportation	80,384,650	80,384,650	32,574,865	6,552,813	6,552,813	2,392,193
Indian Health Clinics (100% Fed)	2,837,431	(34,532,223)	(108,444)	3,155,806	3,155,806	(200,742)
All Other (Hospice, HIP Payments, Medical Appliances)	26,586,147	26,586,147	5,607,599	3,254,178	3,254,178	542,610
Behavioral Health & Rehabilitative Services: Fee-For-Service	43,154,794	51,309,093	6,810,386	14,794,582	14,794,582	4,234,068
MH Case Management	1,433,978	1,433,978	232,140	-	-	119,376
MH Residential Services (PRTF primarily, also psych commty res svcs)	16,691,989	16,691,989	1,969,362	-	-	1,316
MH Rehabilitative Services	7,037,471	15,191,770	1,553,842	-	-	4,113,068
Early Intervention & EPSDT-Authorized Services	17,991,357	17,991,357	3,055,041	-	-	308
Long-Term Care Services: Fee-For-Service	2,946,862,626	2,948,760,714	497,935,885	103,679,998	105,111,640	20,235,078
Nursing Facility	327,711,439	327,711,439	43,504,451	39,826,243	41,257,885	1,864,441
Private ICF/IIDs	145,160,659	145,160,659	21,787,273	-	-	813,142
PACE	153,099,718	153,099,718	26,123,366	-	-	1,133,832
HCBS Waivers: Personal Support	394,561,628	394,561,628	58,883,477	63,853,755	63,853,755	3,003,371
HCBS Waivers: Habilitation	1,726,975,893	1,726,975,893	311,113,946	-	-	11,486,941
HCBS Waivers: Nursing, EM/AT, Adult Day Care	111,782,872	113,680,960	20,795,364	-	-	1,146,986
HCBS Waivers: Case Management & Support	87,570,417	87,570,417	15,728,006	-	-	786,365
Supplemental Payments (DSH, IME/GME, Dx, SGO/NSGO Hosp, SGO/NSGO NF)	913,606,172	913,606,172	160,666,374	182,458,171	182,458,171	13,020,153
DSH/IME/GME Payments	582,653,613		113,611,159	-		5,966,250
Multi-settlement	146,766,712		43,063,661	77,339,269		6,860,701
Hospital / Nursing Facility Supplemental Payments	42,439,967		3,949,347	-		101,704
Physician Supplemental Payments	141,646,668		42,208	105,040,108		91,498
Government & Nonprofit Clinics	99,212		-	78,794		-
Private Acute Care Hospital Enhanced Supplemental Payments	1,927,420,963	1,927,420,963	452,631,527	2,645,953,388	2,645,953,388	359,736,868
Total Forecasted Medicaid Expenditures	17,212,404,541	17,192,154,129	3,170,597,088	8,977,857,386	8,985,061,263	1,410,478,054
Federal Funds	8,603,793,130	8,609,371,002	1,588,563,436	8,084,828,898	8,091,342,285	1,256,446,963
Rate Assessment	953,345,416	953,345,416	221,834,711	264,595,339	264,595,339	35,973,686
Coverage Assessment	-	-	-	628,433,149	629,143,639	118,057,405
Virginia Health Care Fund (includes Tobacco Tax, Pharmacy Rebates, etc.)	440,698,220	440,500,000	-	-	-	-
General Funds	7,214,567,777	7,188,937,712	1,360,198,941	-	-	-

Unforecasted Medicaid Expenditures			
Mental Health Services CSA	-	79,426,681	20,169,830
Federal Funds	-	48,212,331	37,176,831
State Funds	-	31,214,350	35,601,868
Payments for Graduate Medical Education Residencies (45606)		11,700,000	1,675,001
Federal Funds		5,850,000	854,083
State Funds		5,850,000	820,918
DBHDS Facility Reimbursements (45607)		59,169,094	9,719,472
Federal Funds		30,170,321	4,955,961
State Funds		28,998,773	4,763,511
Pharmacy Rebate Holding Acct Balance to be Reclassed in the following month ²		-	(6,569,108)

CHIP			
FAMIS Expenditures (446)	477,127,901	477,247,426	89,271,161
Federal Funds	313,180,697	313,258,837	60,326,188
Special Funds	14,065,627	14,065,627	-
State Funds	149,881,577	149,922,962	28,944,973
M-CHIP Expenditures (466)	335,637,815	335,777,426	61,114,335
Federal Funds	221,182,468	221,273,794	42,053,314
State Funds	114,455,347	114,503,632	19,061,021

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	115,277,775				142,716,873			
FFS Pharmacy Rebates - Prior Year	2,140,319				1,271,878			

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 275 updated with funding changes.