

Medicaid Adult Expansion Bridge Plan Report

August 8, 2019



Expansion Enrollment by Subgroup

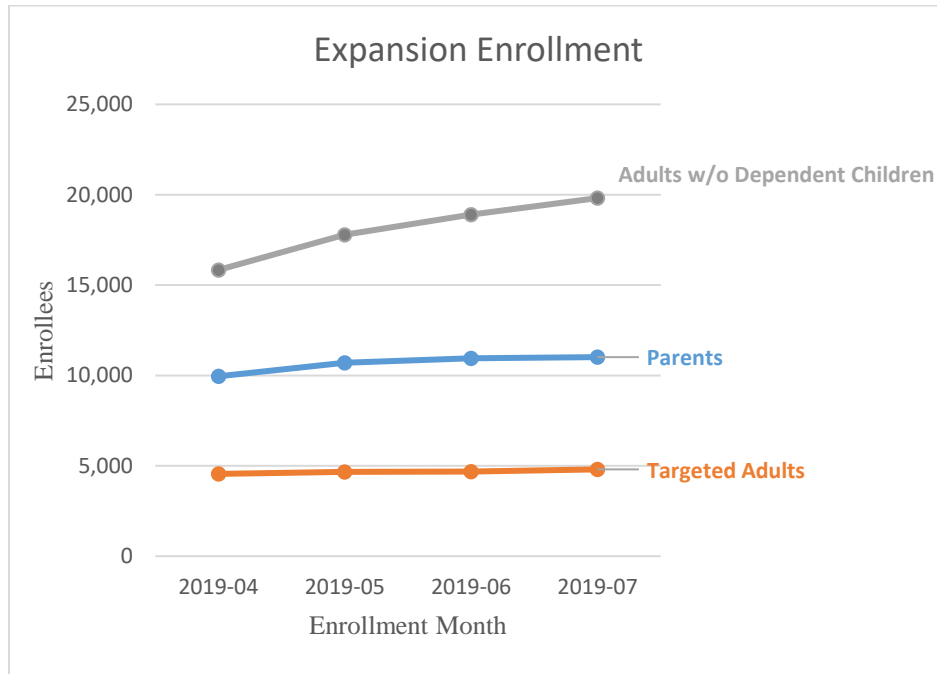


Figure 1

Expansion Enrollment

Category	2019-04	2019-05	2019-06	2019-07
Parents	9,954	10,698	10,955	11,014
Targeted Adults	4,553	4,673	4,681	4,804
Adults w/o Dependent Children	15,840	17,783	18,897	19,814
Total	30,347	33,154	34,533	35,632

Table 1

Notes:

Enrollment as of August 8, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage.

Expansion Demographics

Last update: July 2019

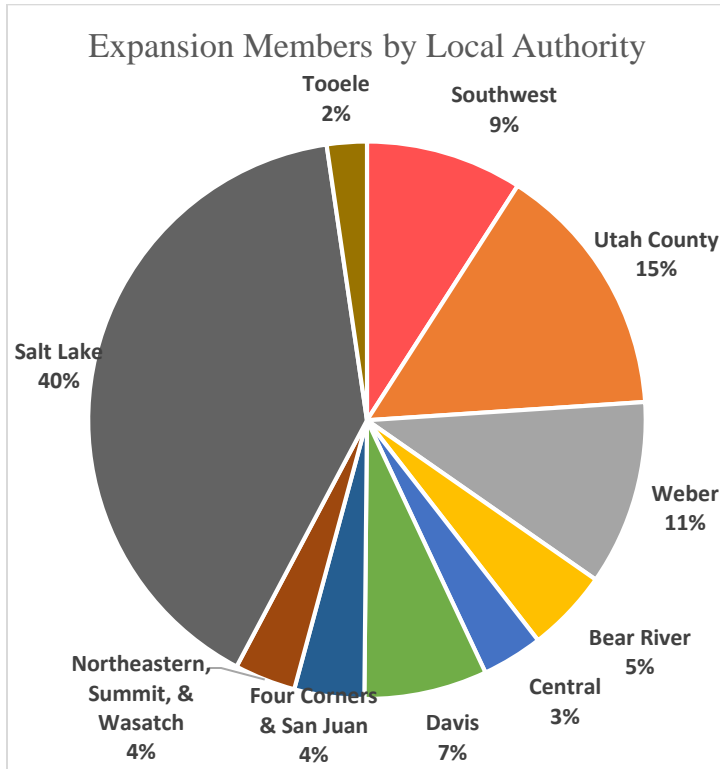


Figure 2

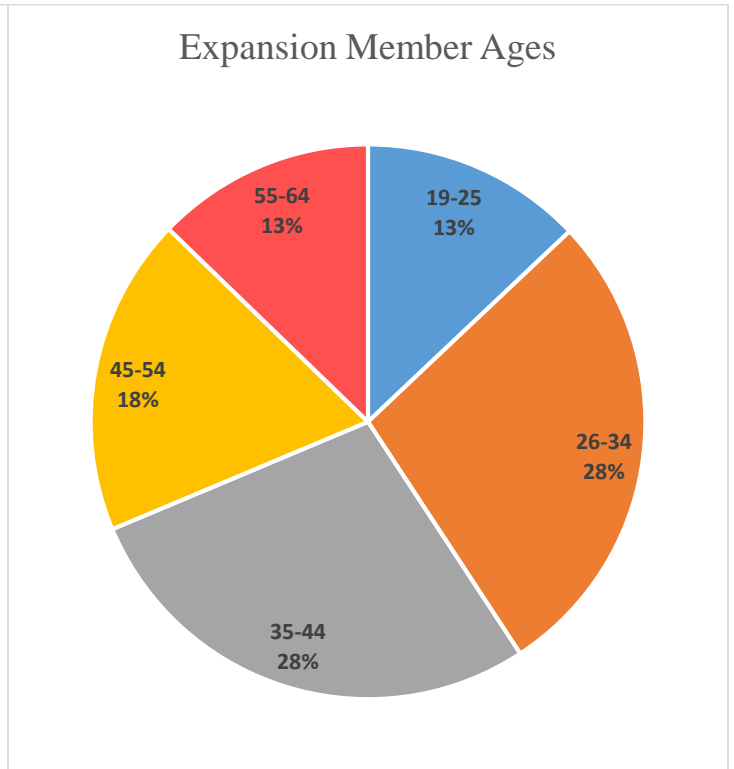


Figure 3

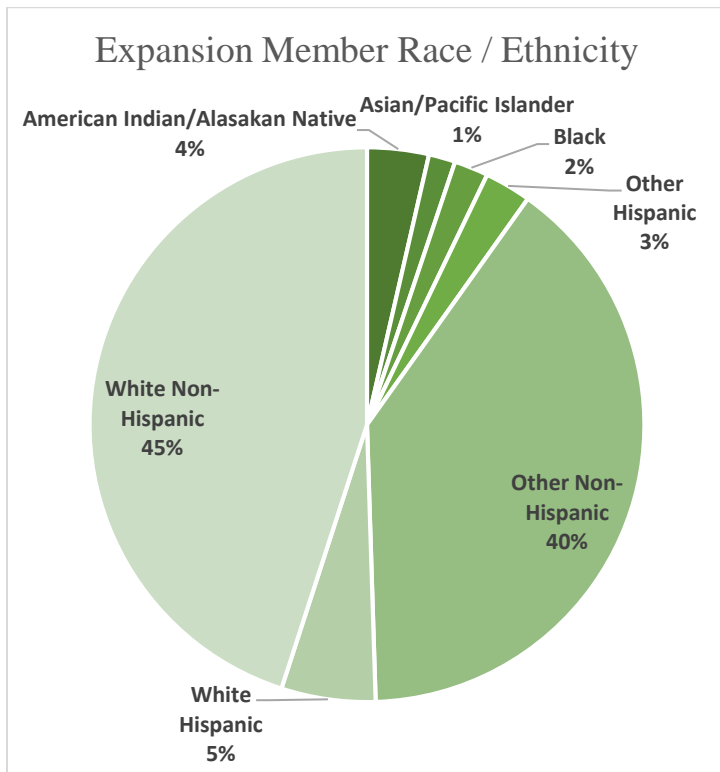


Figure 4

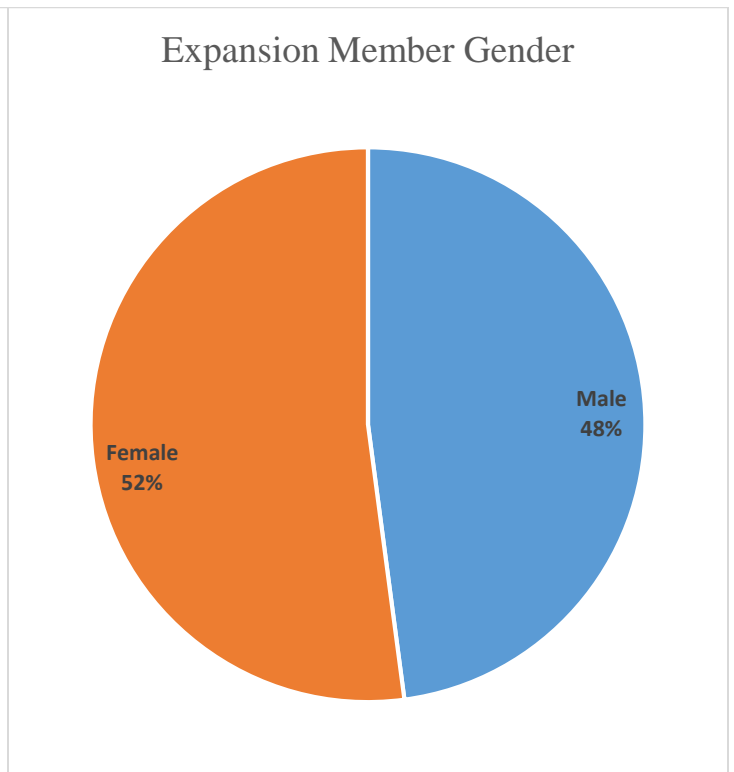


Figure 5

Targeted Adult Medicaid (TAM) Enrollment by Subgroup

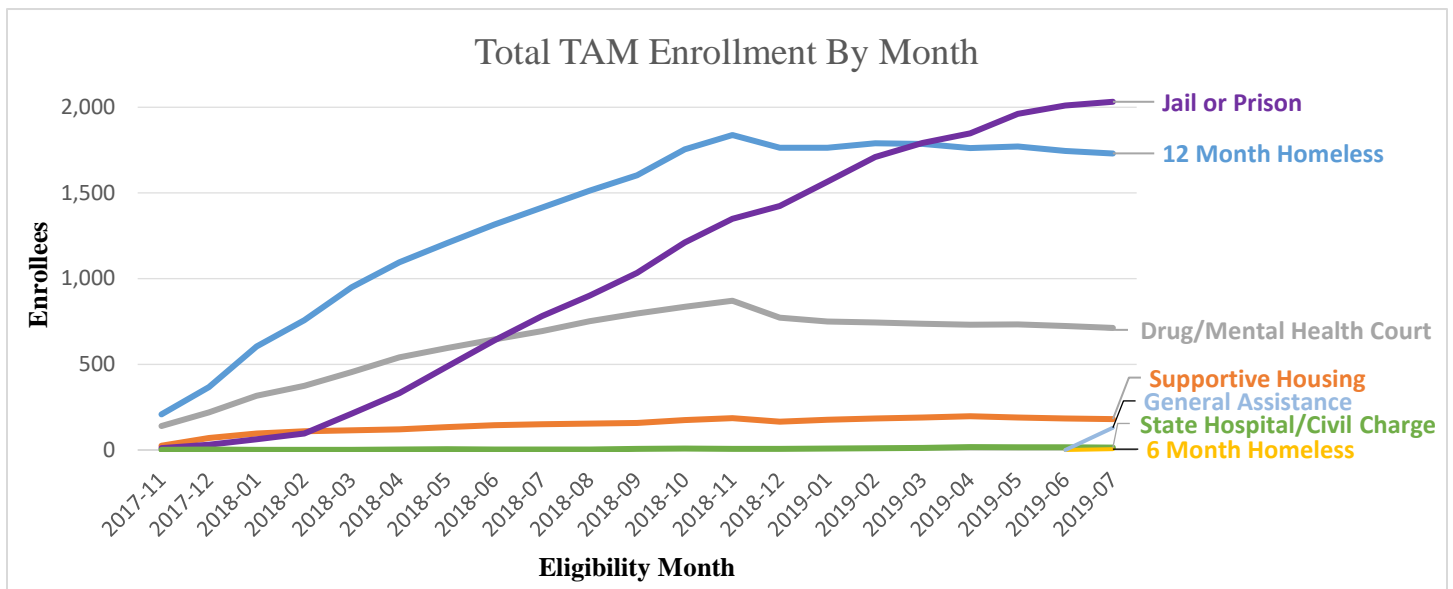


Figure 6

TAM Enrollment by Month

FY18

TAM Category	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06
Total	385	690	1,080	1,338	1,733	2,089	2,427	2,748

Table 2a

FY19

TAM Category	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06
12 Month Homeless	1,415	1,513	1,603	1,754	1,838	1,764	1,764	1,789	1,786	1,761	1,772	1,746
Supportive Housing	151	155	158	174	185	165	176	184	190	197	190	184
Drug/Mental Health Crt	694	752	797	836	871	773	750	744	737	731	733	724
Jail or Prison	782	901	1,033	1,211	1,349	1,424	1,566	1,710	1,791	1,847	1,962	2,011
State Hospital/Civil Chrg	3	3	7	8	6	7	8	11	13	17	16	16
Total	3,045	3,324	3,598	3,983	4,249	4,133	4,264	4,438	4,517	4,553	4,673	4,681

Table 2b

FY20

TAM Category	2019-07
12 Month Homeless	1,731
Supportive Housing	180
Drug/Mental Health Crt	712
Jail or Prison	2,032
State Hospital/Civil Chrg	14
6 Month Homeless	5
General Assistance	130
Total	4,804

Table 2c

Notes:

Enrollment as of August 8, 2019. Enrollment includes retroactive applications processed up to the run date. Enrollment numbers reported here are subject to change with future applications that may include retroactive coverage.

Targeted Adult Medicaid Reimbursements

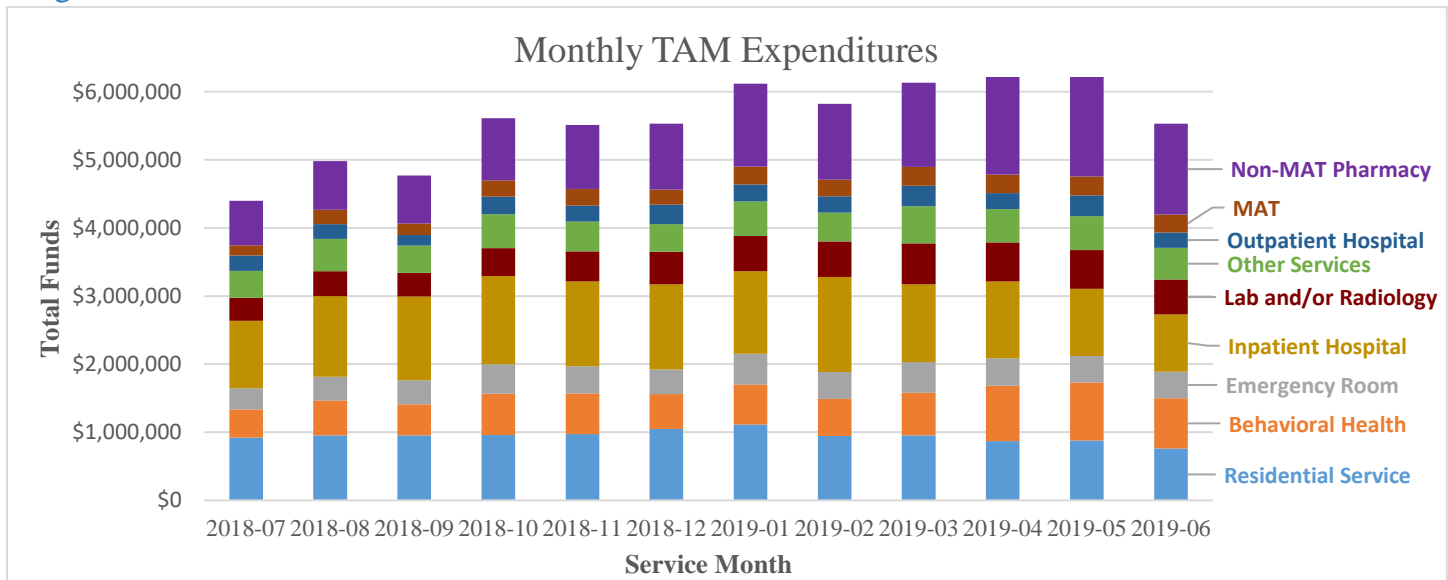


Figure 7

Service Type	FY19												Total
	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06	
Residential Serv.	\$921	\$955	\$956	\$961	\$973	\$1,049	\$1,114	\$945	\$955	\$871	\$879	\$762	\$11,338
Behavioral Health	\$416	\$512	\$451	\$605	\$598	\$510	\$586	\$547	\$624	\$812	\$852	\$738	\$7,252
Emergency Room	\$310	\$348	\$355	\$433	\$401	\$365	\$450	\$395	\$453	\$402	\$391	\$389	\$4,692
Inpatient Hospital	\$991	\$1,185	\$1,229	\$1,296	\$1,244	\$1,250	\$1,214	\$1,395	\$1,139	\$1,131	\$985	\$840	\$13,899
Lab & Radiology	\$337	\$363	\$348	\$409	\$441	\$476	\$518	\$519	\$602	\$570	\$566	\$511	\$5,659
Other Services	\$397	\$475	\$401	\$496	\$438	\$404	\$507	\$424	\$547	\$489	\$502	\$469	\$5,549
Outpatient Hosp.	\$222	\$218	\$158	\$257	\$234	\$290	\$251	\$241	\$299	\$236	\$305	\$225	\$2,938
MAT	\$151	\$211	\$169	\$242	\$243	\$220	\$260	\$243	\$276	\$273	\$275	\$260	\$2,823
Non-MAT Pharm.	\$652	\$712	\$702	\$911	\$941	\$967	\$1,217	\$1,113	\$1,236	\$1,518	\$1,621	\$1,338	\$12,929
Grand Total	\$4,397	\$4,979	\$4,769	\$5,611	\$5,513	\$5,530	\$6,117	\$5,821	\$6,131	\$6,303	\$6,377	\$5,532	\$67,080

Table 3

Service Type	FY19											
	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12	2019-01	2019-02	2019-03	2019-04	2019-05	2019-06
Residential Serv.	315	332	330	327	349	364	368	347	362	313	319	275
Behavioral Health	821	934	980	1,064	1,139	1,079	1,090	1,145	1,142	1,158	1,179	1,077
Emergency Room	405	443	446	516	510	467	574	491	517	520	497	542
Inpatient Hospital	86	124	94	113	101	104	118	115	104	112	105	101
Lab & Radiology	514	574	606	672	744	756	819	827	903	880	864	806
Other Services	2,864	3,194	3,466	3,817	4,121	3,977	4,093	4,254	4,362	4,438	4,556	4,580
Outpatient Hosp.	209	307	279	338	353	323	368	367	402	394	411	350
MAT	241	286	290	373	398	374	399	413	444	451	466	444
Non-MAT Pharm.	1,065	1,208	1,234	1,451	1,519	1,457	1,585	1,573	1,681	1,729	1,717	1,656
Grand Total	2,919	3,248	3,521	3,863	4,167	4,043	4,174	4,325	4,429	4,475	4,606	4,625

Table 4

- Monthly expenditures represent total fund payments to providers. Expenditures may not precisely sum up to total due to rounding.
- These total fund amounts consist of federal funds, state restricted funds, and hospital share.
- Pharmacy expenses shown here are subject to future reductions due to rebates.
- The months shown here represent the month of service, which is not necessarily the month of payment. They are subject to change with future billings and adjustments. Providers may bill up to one year after the date of service.

Expansion Parents Enrollment

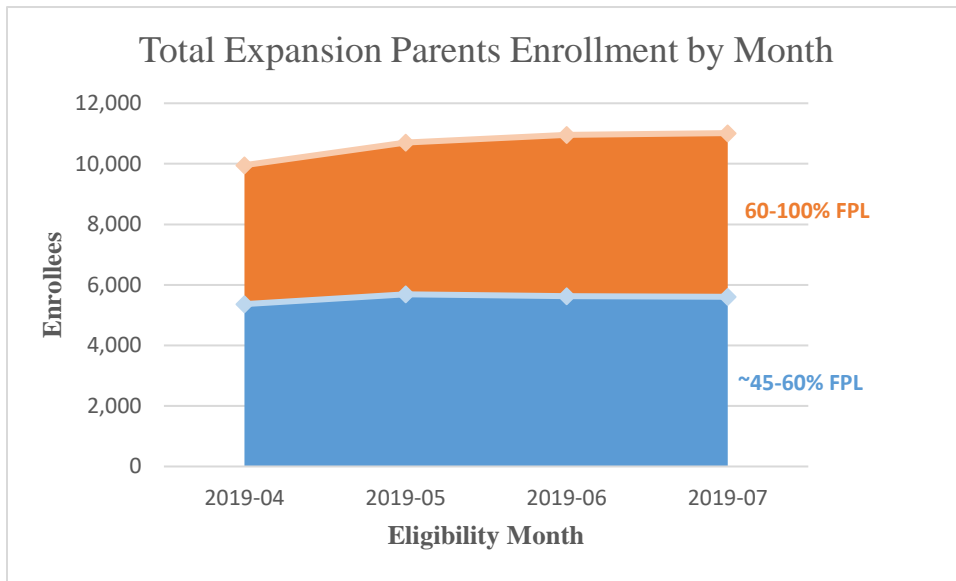


Figure 8

Expansion Parents Enrollment by Month

Category	2019-04	2019-05	2019-06	2019-07
~45-60% FPL	4,590	5,010	5,325	5,403
60-100% FPL	5,364	5,688	5,630	5,611
Total	9,954	10,698	10,955	11,014

Table 5

Notes:

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Expansion Parents Reimbursements

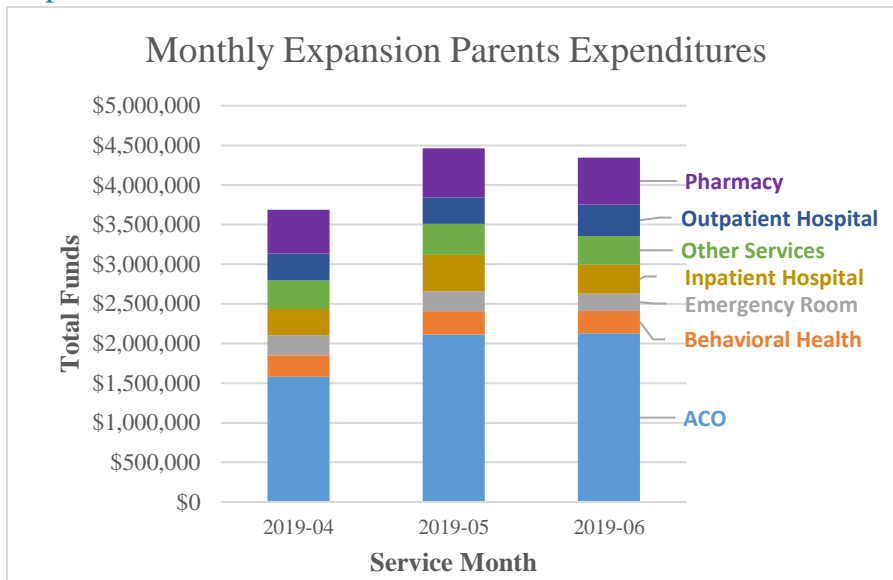


Figure 9

Monthly Expenditures (in thousands)				
Service Type	2019-04	2019-05	2019-06	Total
ACO	\$1,581	\$2,112	\$2,128	\$5,822
Behavioral Health	\$269	\$293	\$285	\$847
Emergency Room	\$255	\$253	\$216	\$724
Inpatient Hospital	\$331	\$458	\$366	\$1,155
Other Services	\$359	\$392	\$361	\$1,113
Outpatient Hospital	\$341	\$332	\$396	\$1,069
Pharmacy	\$551	\$621	\$594	\$1,766
Grand Total	\$3,686	\$4,461	\$4,347	\$12,494

Table 6

Distinct Members Served			
Service Type	2019-04	2019-05	2019-06
ACO	3,148	4,271	4,314
Behavioral Health	5,427	5,753	5,684
Emergency Room	302	301	301
Inpatient Hospital	51	49	48
Other Services	1,416	1,422	1,370
Outpatient Hospital	513	530	551
Pharmacy	2,618	2,748	2,548
Grand Total	7,098	7,637	7,564

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Expansion Adults without Dependent Children Enrollment

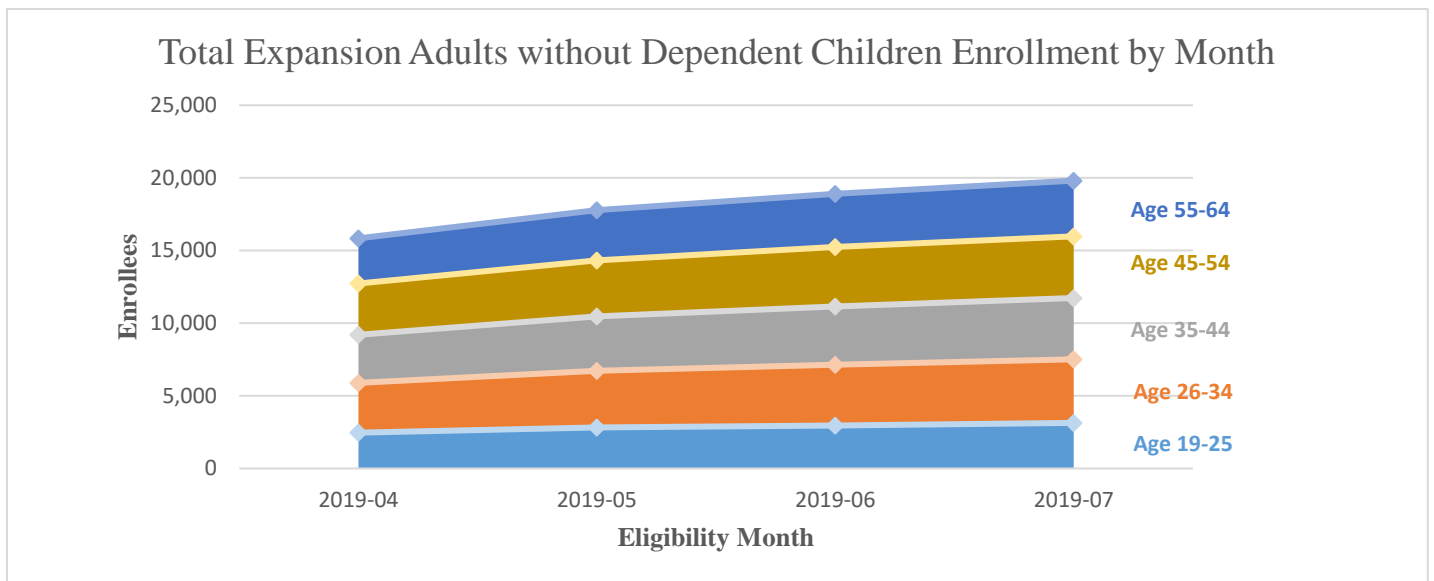


Figure 10

Expansion Adults without Dependent Children Enrollment by Month

Category	2019-04	2019-05	2019-06	2019-07
Age 55-64	3,109	3,459	3,657	3,836
Age 45-54	3,527	3,847	4,079	4,243
Age 35-44	3,311	3,745	4,022	4,221
Age 26-34	3,427	3,914	4,171	4,374
Age 19-25	2,466	2,818	2,968	3,140
Total	15,840	17,783	18,897	19,814

Table 8

Notes:

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Expansion Adults without Dependent Children Reimbursements

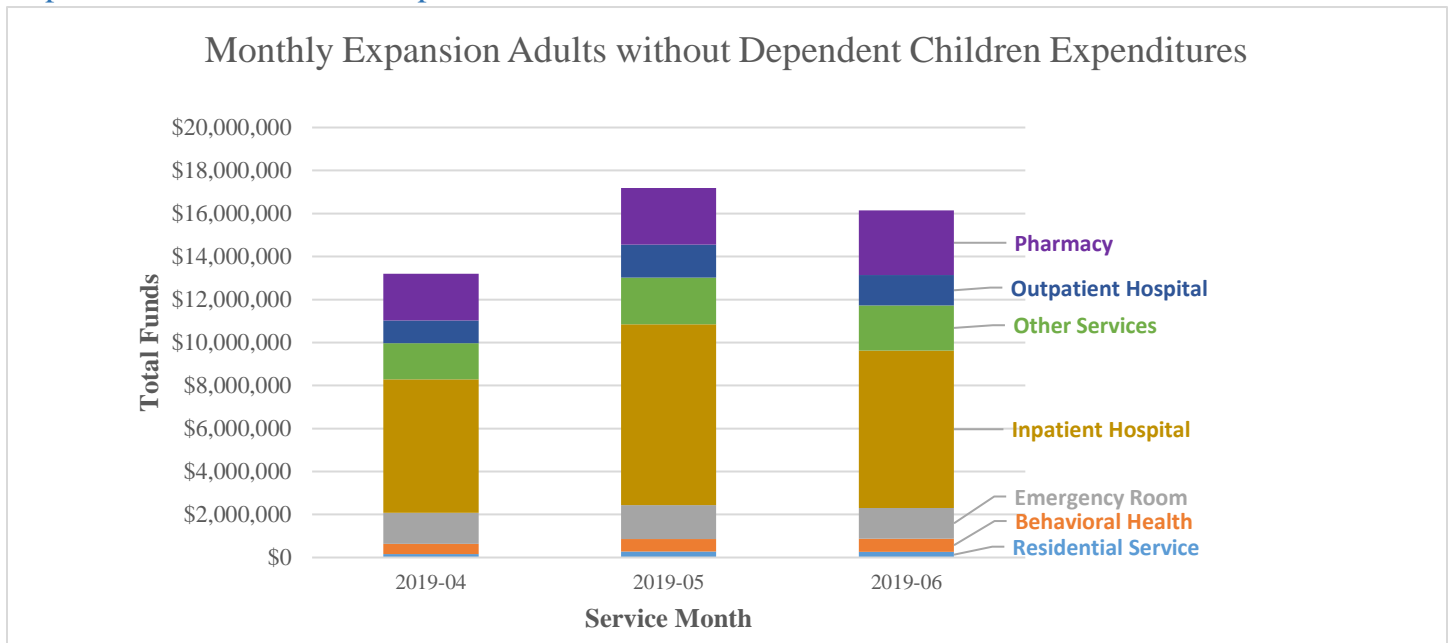


Figure 11

Monthly Expenditures (in thousands)				
Service Type	2019-04	2019-05	2019-06	Total
Behavioral Health	\$473	\$582	\$616	\$1,671
Emergency Room	\$1,442	\$1,579	\$1,418	\$4,440
Inpatient Hospital	\$6,205	\$8,406	\$7,331	\$21,942
Other Services	\$1,684	\$2,173	\$2,096	\$5,953
Outpatient Hospital	\$1,051	\$1,531	\$1,405	\$3,987
Pharmacy	\$2,171	\$2,637	\$3,015	\$7,824
Residential Service	\$164	\$276	\$266	\$706
Grand Total	\$13,191	\$17,184	\$16,148	\$46,523

Table 9

Distinct Members Served			
Service Type	2019-04	2019-05	2019-06
Behavioral Health	1,001	1,225	1,357
Emergency Room	1,774	1,952	1,907
Inpatient Hospital	594	683	609
Other Services	14,426	16,390	17,615
Outpatient Hospital	1,505	1,919	1,906
Pharmacy	5,468	6,566	6,771
Residential Service	72	109	119
Grand Total	15,039	16,993	18,103

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