

Health Transformation Medicaid Line Item Summary

Agency	Fund	Funding Source	Line Item	Line Item Description	SFY 12	SFY 13
AGE	GRF	GRF State	490423	Long Term Care Budget- State	\$3,419,250	\$3,419,250
AGE	4U90	Non GRF State	490602	PASSPORT Fund		
AGE	4J40	Non GRF State	490610	PASSPORT/Residential State Supplement		
AGE	3C40	Non GRF Federal	490623	Long Term Care Budget	\$3,525,000	\$3,525,000
				AGE Total	\$6,944,250	\$6,944,250
				AGE GRF State	\$3,419,250	\$3,419,250
				AGE Non GRF State	\$0	\$0
				AGE Non GRF Federal	\$3,525,000	\$3,525,000
ODMH	GRF	GRF State	335501	Mental Health Medicaid Match(GRF)	\$186,400,000	\$0
ODMH	3B10	Non GRF Federal	335635	CMH Expansion-Community Svcs	\$346,200,000	\$0
ODMH	3B10	Non GRF Federal	333635	CMH Expansion-Other	\$13,691,682	\$4,291,682
				ODMH Total	\$546,291,682	\$4,291,682
				ODMH GRF State	\$186,400,000	\$0
				ODMH Non GRF Federal	\$359,891,682	\$4,291,682
ODADAS	GRF	GRF State	038501	Medicaid Match	\$23,959,113	\$0
ODADAS	3I80	Non GRF Federal	038610	Medicaid	\$69,200,000	\$0
ODADAS	4750	Non GRF State	038621	Statewide Treatment and Prevention	\$7,033,199	\$7,033,199
ODADAS	3N80	Non GRF Federal	038611	Administrative Reimbursement	\$120,000	\$120,000
				ODADAS Total	\$100,312,312	\$7,153,199
				ODADAS GRF State	\$23,959,113	\$0
				ODADAS Non GRF State	\$7,033,199	\$7,033,199
				ODADAS Non GRF Federal	\$69,320,000	\$120,000
DDD	1520	Non GRF State	323609	RESIDENTIAL FACILITIES SUPPORT	\$3,414,317	\$3,414,317
DDD	3A40	Non GRF Federal	323605	RESIDENTIAL FACILITIES REIMB	\$164,752,398	\$152,073,583
DDD	3D20	Non GRF Federal	322648	ENHANCED MEDICAID FEDERAL	\$10,000,000	\$0
DDD	3G60	Non GRF Federal	322639	MEDICAID WAIVER	\$840,000,000	\$959,000,000
DDD	3G60	Non GRF Federal	322639	MEDICAID WAIVER	\$17,433,525	\$17,433,525
DDD	3M70	Non GRF Federal	322650	CAFS MEDICAID	\$23,849,502	\$23,849,502
DDD	4890	Non GRF State	323632	OPERATING EXPENSE	\$16,497,170	\$16,497,169
DDD	4K80	Non GRF State	322604	WAIVER-MATCH	\$12,000,000	\$12,000,000
DDD	5CT0	Non GRF State	322632	INTENSIVE BEHAVIORAL NEEDS	\$1,000,000	\$1,000,000
DDD	5D10	Local	322625	TARGETED CASE MANAGEMENT SRVCS	\$21,000,000	\$24,000,000
DDD	5D10	Local	322626	TARGETED CASE MANAGEMENT SRVCS	\$21,000,000	\$24,000,000
DDD	5D10	Non GRF Federal	322626	TARGETED CASE MANAGEMENT SRVCS	\$36,307,357	\$42,000,000
DDD	5S20	Non GRF State	590622	MEDICAID ADMN & OVERSIGHT	\$14,875,567	\$14,927,540
DDD	5Z10	Local	322624	COUNTY BOARD WAIVER MATCH	\$233,267,846	\$285,066,013
DDD	GRF	GRF State	320321	CENTRAL ADMINISTRATION	\$0	\$0
DDD	GRF	GRF State	322413	RESIDENTIAL AND SUPPRT SERVICES	\$0	\$0
DDD	GRF	GRF State	322416	WAIVER STATE MATCH	\$0	\$0
DDD	GRF	GRF State	322504	MARTIN SETTLEMENT AGREEMENT	\$0	\$0
DDD	GRF	GRF State	322647	ICF/MR FRANCHISE FEE- DEV CTRS	\$0	\$0
DDD	GRF	GRF State	323321	RESIDENTIAL FACILITIES OPERTNS	\$0	\$0
DDD	GRF	GRF State	322407	MEDICAID STATE MATCH	\$218,034,162	\$214,902,506
				ODODD Total	\$1,633,431,844	\$1,790,164,155
				ODODD GRF State	\$218,034,162	\$214,902,506
				ODODD Non GRF State	\$47,787,054	\$47,839,026
				ODODD Non GRF Federal	\$1,092,342,782	\$1,194,356,610
				ODODD Local	\$275,267,846	\$333,066,013
ODH	GRF	GRF State	440452	Child and Family Health Services	\$110,003	\$110,464
ODH	GRF	GRF State	440453	Health Care Quality Assurance	\$3,533,624	\$3,510,377
ODH	GRF	GRF State	440459	Help Me Grow	\$1,713,020	\$3,396,134
ODH	3910	Non GRF Federal	440606	Medicaid/Medicare	\$10,888,643	\$10,755,197
ODH	3920	Non GRF Federal	440618	Federal Public Health Programs	\$842,277	\$843,602
ODH	1420	Non GRF State	440646	Agency Health Services	\$5,050,000	\$5,075,000
				ODH Total	\$22,137,567	\$23,690,774
				ODH GRF State	\$5,356,647	\$7,016,975
				ODH Non GRF State	\$5,050,000	\$5,075,000
				ODH Non GRF Federal	\$11,730,920	\$11,598,799
JFS	GRF	Non Federal State	600321	SUPPORT SERVICES	\$ 9,100,089	\$ 8,985,536
JFS	GRF	Federal	600321	SUPPORT SERVICES	\$ 9,322,222	\$ 9,207,441
JFS	GRF	Non Federal State	600416	COMPUTER PROJECTS	\$ 12,807,044	\$ 12,643,570
JFS	GRF	Federal	600416	COMPUTER PROJECTS	\$ 13,105,167	\$ 12,937,222
JFS	GRF	Non Federal State	600417	MEDICAID PROVIDER AUDITS	\$ 1,312,992	\$ 1,312,992
JFS	GRF	Federal	600425	OFFICE OF OHIO HEALTH PLANS	\$ 12,556,921	\$ 12,286,234
JFS	GRF	Non Federal State	600425	OFFICE OF OHIO HEALTH PLANS	\$ 13,149,582	\$ 15,740,987
JFS	GRF	Non Federal State	600521	FAMILY STABILITY SUBSIDY	\$ 37,038,970	\$ 37,038,970
JFS	GRF	Non Federal State	600525	HEALTH CARE/MEDICAID	\$ 4,313,761,372	\$ 4,689,051,017
JFS	GRF	Federal	600525	HEALTH CARE/MEDICAID	\$ 7,530,008,024	\$ 8,429,762,527
JFS	GRF	Non Federal State	600537	CHILDREN'S HOSPITAL	\$ 6,000,000	\$ 6,000,000
JFS	5R20	Non Federal State	600608	MEDICAID-NURSING FACILITIES	\$ 395,716,913	\$ 397,404,064
JFS	4J50	Non Federal State	600613	NURSING FACILITY BED ASSMNTS	\$ -	\$ -
JFS	4K10	Non Federal State	600621	ICF/MR BED ASSESSMENTS	\$ 27,109,965	\$ 30,077,242
JFS	3F00	Federal	600623	HEALTH CARE FEDERAL	\$ 2,637,061,505	\$ 2,720,724,869
JFS	4Z10	Non Federal State	600625	HEALTHCARE COMPLIANCE	\$ 11,551,076	\$ 14,582,000
JFS	5S30	Non Federal State	600629	MR/DD MEDICAID ADMN & OVERSGHT	\$ 9,252,738	\$ 9,147,791
JFS	5FX0	Non Federal State	600638	MEDICAID PAYMENT WITHHOLDING	\$ 5,000,000	\$ 6,000,000
JFS	5DL0	Non Federal State	600639	MEDICAID REVENUE AND COLLECTNS	\$ 89,256,974	\$ 84,156,974
JFS	6510	Non Federal State	600649	HOSPITAL CARE ASSURANCE PROGRM	\$ 212,526,123	\$ 217,008,050
JFS	3F00	Federal	600650	HOSPITAL CARE ASSURANCE MATCH	\$ 372,784,046	\$ 380,645,627
JFS	5U30	Non Federal State	600654	HEALTH CARE SERVICES ADMIN	\$ 24,400,000	\$ 24,400,000
JFS	3G50	Federal	600655	INTERAGENCY REIMBURSEMENT	\$ 18,610,936	\$ 20,555,406
JFS	3G50	Non Federal Local	600655	INTERAGENCY REIMBURSEMENT	\$ 11,905,942	\$ 11,487,316
JFS	5GF0	Non Federal State	600656	MEDICAID - HOSPITAL	\$ 436,000,000	\$ 436,000,000
JFS	5C90	Non Federal State	600671	MEDICAID PROGRAM SUPPORT	\$ 78,690,543	\$ 75,728,931
JFS	5HA0	Non Federal State	600681	HEALTH CARE SERVICES OTHER (Tobacco)	\$ -	\$ -
JFS	5P50	Non Federal State	600692	PRESCRIPTION DRUG REBATE	\$ 220,600,000	\$ 242,600,000
JFS	Local	Non Federal Local	Local	CDJFS Administration Costs	\$ 18,710,591	\$ 18,710,591
				JFS Total	\$ 16,527,339,735	\$ 17,924,195,356
				JFS GRF Total	\$ 11,958,162,383	\$ 13,234,966,496
				JFS GRF-State	\$ 4,393,170,049	\$ 4,770,773,072
				JFS GRF-Federal	\$ 7,564,992,334	\$ 8,464,193,424
				JFS Non GRF State	\$ 1,510,104,332	\$ 1,537,105,052
				JFS Non GRF Federal	\$ 3,028,456,487	\$ 3,121,925,902
				JFS Local	\$ 30,616,533	\$ 30,197,907
				Grand Total	\$ 18,836,457,390	\$ 19,756,439,416
				GRF Total	\$ 12,395,331,555	\$ 13,460,305,227
				GRF State	\$ 4,830,339,221	\$ 4,996,111,803
				GRF Federal	\$ 7,564,992,334	\$ 8,464,193,424
				Non GRF State	\$ 1,569,974,585	\$ 1,597,052,277
				Non GRF Federal	\$ 4,565,266,871	\$ 4,335,817,993
				Local	\$ 305,884,379	\$ 363,263,920

Summary of JFS Medicaid Services - 600525 and Related Line Items

Final

Final - with Policy Changes

SFY11/12/13

Expenditures

Category	SFY08	Chng.	SFY09	Chng.	SFY10	Chng.	SFY11	Chng.	SFY12	Chng.	SFY13	Chng.
Nursing Facility	\$ 2,543,519,828	-1.8%	\$ 2,574,190,960	1.2%	\$ 2,677,199,970	4.0%	\$ 2,676,465,069	0.0%	\$ 2,483,573,047	-7.2%	\$ 2,452,893,205	-1.2%
Dept of Aging Waivers									\$ 618,772,607		\$ 662,261,174	7.0%
Transitions Waiver Aging (JFS)	\$ 38,815,296		\$ 44,248,453	14.0%	\$ 48,115,618	8.7%	\$ 51,985,305	8.0%	\$ 53,700,315	3.3%	\$ 56,868,269	5.9%
ICF/MR	\$ 532,009,513	2.5%	\$ 536,159,195	0.8%	\$ 543,391,659	1.3%	\$ 551,367,501	1.5%	\$ 562,061,632	1.9%	\$ 561,582,383	-0.1%
Transitions Waiver DD (JFS)	\$ 69,318,238		\$ 69,179,609	-0.2%	\$ 65,236,273	-5.7%	\$ 64,115,549	-1.7%	\$ 59,803,660	-6.7%	\$ 57,507,463	-3.8%
Home Care Waiver (JFS)	\$ 198,307,029	-41.6%	\$ 199,201,762	0.5%	\$ 209,575,161	5.2%	\$ 214,048,708	2.1%	\$ 233,082,081	8.9%	\$ 248,352,036	6.6%
Inpatient Hospital	\$ 962,945,002	-20.7%	\$ 1,044,425,187	8.5%	\$ 1,031,630,443	-1.2%	\$ 1,068,381,499	3.6%	\$ 1,031,002,387	-3.5%	\$ 1,007,579,646	-2.3%
Outpatient Hospital	\$ 351,594,026	-34.2%	\$ 399,838,256	13.7%	\$ 414,840,354	3.8%	\$ 433,762,226	4.6%	\$ 411,018,403	-5.2%	\$ 358,664,580	-12.7%
Physician	\$ 303,661,397	-38.9%	\$ 351,890,662	15.9%	\$ 328,916,365	-6.5%	\$ 337,891,691	2.7%	\$ 360,061,571	6.6%	\$ 572,129,316	58.9%
Prescribed Drugs	\$ 468,314,558	-48.2%	\$ 539,763,527	15.3%	\$ 841,129,598	55.8%	\$ 1,719,634,586	104.4%	\$ 932,036,007	-45.8%	\$ 469,973,224	-49.6%
Managed Care - ABD	\$ 1,266,774,499	186.0%	\$ 1,374,560,378	8.5%	\$ 1,434,891,583	4.4%	\$ 1,444,787,970	0.7%	\$ 2,074,095,205	43.6%	\$ 2,717,739,134	31.0%
Managed Care - CFC	\$ 2,577,956,596	9.7%	\$ 3,480,240,771	35.0%	\$ 3,348,739,312	-3.8%	\$ 3,666,764,941	9.5%	\$ 4,605,188,237	25.6%	\$ 5,010,761,596	8.8%
Behavioral Health (MH/ODADAS)									\$ -		\$ 623,742,601	
All Other	\$ 915,233,932	-1.6%	\$ 1,036,206,153	13.2%	\$ 1,066,607,979	2.9%	\$ 1,150,566,164	7.9%	\$ 1,243,411,400	8.1%	\$ 1,341,953,757	7.9%
Medicare Buy In	\$ 294,577,350	8.5%	\$ 310,782,259	5.5%	\$ 349,136,592	12.3%	\$ 396,819,369	13.7%	\$ 445,249,221	12.2%	\$ 504,704,533	13.4%
Medicare Part D	\$ 243,172,531	3.1%	\$ 251,076,115	3.3%	\$ 173,855,239	-30.8%	\$ 187,770,639	8.0%	\$ 277,996,490	48.1%	\$ 296,964,743	6.8%
Total Expenditures	\$ 10,766,199,795	-0.6%	\$ 12,211,763,287	13.4%	\$ 12,533,266,146	2.6%	\$ 13,964,361,217	11.4%	\$ 15,391,052,263	10.2%	\$ 16,943,677,662	10.1%

Funding

Line Item	Actual SFY08	Pct. Chng.	Actual SFY09	Pct. Chng.	Actual SFY10	Pct. Chng.	Actual SFY11	Pct. Chng.	Est SFY12	Pct. Chng.	Est SFY13	Pct. Chng.
525 Current Budget Fiscal Year Disbursement	\$ 8,470,147,205	-5.5%	\$ 9,654,222,974	14.0%	\$ 8,413,761,187	-12.8%	\$ 10,439,311,998	24.1%	\$ 11,897,878,920	14.0%	\$ 13,354,775,315	12.2%
525 Prior Yr Encumbrance Disbursement	\$ 632,520,002	2390.0%	\$ 331,716,196	-47.6%	\$ 23,656,621	-92.9%	\$ 13,697,200	-42.1%	\$ 32,000,000	133.6%	\$ 32,000,000	0.0%
526 Medicare Part D (Current and Prior)	\$ 243,172,531	3.1%	\$ 251,076,115	3.3%	\$ 173,855,239		\$ 187,770,639		\$ 277,996,490		\$ 296,964,743	
Subtotal GRF Disbursement	\$ 9,345,839,738	1.1%	\$ 10,237,015,285	9.5%	\$ 8,611,273,047	-15.9%	\$ 10,640,779,837	23.6%	\$ 12,207,875,410	14.7%	\$ 13,683,740,058	12.1%
525 Disbursement (Current + Prior BFY)	\$ 9,102,667,207	1.3%	\$ 9,985,939,170	9.7%	\$ 8,437,417,808	-15.5%	\$ 10,453,009,198	23.9%	\$ 11,929,878,920	14.1%	\$ 13,386,775,315	12.2%
692 MEDICAL SERVICES	\$ 89,261,895	-49.8%	\$ 97,995,050	9.8%	\$ 62,192,944	-36.5%	\$ 170,912,281	174.8%	\$ 220,600,000	29.1%	\$ 242,600,000	10.0%
623 Drug Rebates (Fed Share)	\$ 134,962,736	-47.7%	\$ 196,682,440	45.7%	\$ 168,865,296	-14.1%	\$ 433,753,133	156.9%	\$ 392,854,544	-9.4%	\$ 433,634,866	10.4%
639 Medicaid Revenue and Collections	\$ 51,238,266	-6.6%	\$ 74,650,499	45.7%	\$ 98,469,204	31.9%	\$ 61,959,787	-37.1%	\$ 89,796,375	44.9%	\$ 85,235,775	-5.1%
623 Revenue/Collections (Fed Share)	\$ 78,524,114	-3.4%	\$ 145,185,310	84.9%	\$ 263,282,954	81.3%	\$ 150,310,175	-42.9%	\$ 145,808,808	-3.0%	\$ 138,099,655	-5.3%
621 ICF/MR FRANCHISE FEE (4K1)	\$ 7,281,090	-0.7%	\$ 11,250,000	54.5%	\$ 16,796,029	49.3%	\$ 15,542,118	-7.5%	\$ 27,109,965	74.4%	\$ 30,077,242	10.9%
623 ICF/MR FRANCHISE FEE (Fed Share)	\$ 11,288,379	3.9%	\$ 22,521,522	99.5%	\$ 46,051,495	104.5%	\$ 40,106,648	-12.9%	\$ 48,321,039	20.5%	\$ 53,820,223	11.4%
671 IMD DSH/MR Drug OFFSET (5C9)	\$ 64,218,490	-10.5%	\$ 61,250,000	-4.6%	\$ 58,350,000	-4.7%	\$ 16,300,000	-72.1%	\$ 78,690,543	382.8%	\$ 75,728,931	-3.8%
623 FED SHARE IMD DSH OFFSET	\$ 99,562,410	-6.9%	\$ 128,927,711	29.5%	\$ 161,589,694	25.3%	\$ 36,280,645	-77.5%	\$ 140,658,466	287.7%	\$ 135,354,856	-3.8%
608 MEDICAID Nursing Facilities (5R2)	\$ 175,000,000	4.1%	\$ 175,000,000	0.0%	\$ 354,032,499	102.3%	\$ 358,117,500	1.2%	\$ 395,716,913	10.5%	\$ 397,404,064	0.4%
623 FED SHARE 608 PAYMENTS	\$ 271,314,714	9.5%	\$ 350,334,753	29.1%	\$ 970,419,214	177.0%	\$ 905,613,232	-6.7%	\$ 701,594,640	-22.5%	\$ 704,965,858	0.5%
653 MANAGED CARE ASSESSMENT (5BG)	\$ 172,178,992	73.2%	\$ 221,484,259	28.6%	\$ 159,680,000	-27.9%	\$ -	-100.0%	\$ -		\$ -	
623 FED SHARE 653 PAYMENTS	\$ 265,528,971	80.6%	\$ 489,466,457	84.3%	\$ 434,635,362	-11.2%	\$ -	-100.0%	\$ -		\$ -	
TBD Fund 5AH0 Tobacco Funds	\$ -		\$ -		\$ -		\$ 129,814,027		\$ -		\$ -	
623 Fund 5AH0 Federal Match	\$ -		\$ -		\$ -		\$ 308,602,717		\$ -		\$ -	
656 Medicaid Hospital (5GF0)	\$ -		\$ -		\$ 299,159,817		\$ 204,613,466		\$ 338,752,392		\$ 345,241,284	
623 Federal Share of Hospital	\$ -		\$ -		\$ 828,468,591		\$ 491,655,651		\$ 603,273,168		\$ 617,774,851	
Subtotal Non GRF	\$ 1,420,360,057	-10.4%	\$ 1,974,748,001	39.0%	\$ 3,921,993,099	98.6%	\$ 3,323,581,380	-15.3%	\$ 3,183,176,853	-4.2%	\$ 3,259,937,605	2.4%
Total Funding	\$ 10,766,199,795	-0.6%	\$ 12,211,763,286	13.4%	\$ 12,533,266,146	2.6%	\$ 13,964,361,217	11.4%	\$ 15,391,052,263	10.2%	\$ 16,943,677,663	10.1%

Estimated Current BFY Expenditures

	\$ 11,897,878,920	\$ 13,354,775,315
525 Yr End Open Enc Current FY	\$ 32,000,000	\$ 32,000,000
Total Current BFY 525 Appropriations	\$ 11,929,878,920	\$ 13,386,775,315

As of 8/1/2011

JFS Policy Change Summary for 600525 and Related Line Items - Final

FMAP FY12

64.04%

SFY 12

Description	GRF 600525		NON GRF		Total SFY12	
	State Share	All Funds GRF	State Share	All Funds NGRF	State Share	Total
Baseline pre policy changes - Conference	\$ 4,562,823,236	\$ 12,537,380,395	\$ 759,372,518	\$ 2,101,160,716	\$ 5,322,195,754	\$ 14,638,541,111

Short Description	Futher Description	Type	Provider	GRF 600525		NON GRF		Total SFY12	
				State Share	All Funds GRF	State Share	All Funds NGRF	State Share	Total
Five Percent Rate Increase (Continuation from FY10/FY11)	Modernize Hospital	Franchise Fee	Hospital	\$ (63,297,192)	\$ (176,021,111)	\$ 63,297,192	\$ 176,021,111	\$ -	\$ -
Hospital Franchise Fee (525 Support)	Modernize Hospital	Franchise Fee	Hospital	\$ (217,200,000)	\$ (604,004,449)	\$ 217,200,000	\$ 604,004,449	\$ -	\$ -
OHA hospital Financing Proposal	Modernize Hospital	Franchise Fee	Hospital			\$ 155,502,808	\$ 432,432,727	\$ 155,502,808	\$ 432,432,727
Hospital UPL Changes/MCP Incentive (hereby appropriated CD136)	Legislative Addition-Hereby Appropriated	Franchise Fee	Hospital/MCO			\$ 58,255,200	\$ 162,000,000	\$ 58,255,200	\$ 162,000,000
Outpatient Services - Use of Fixed Percentages in Payment	Modernize Hospital	Savings	Hospital	\$ (7,947,160)	\$ (22,100,000)			\$ (7,947,160)	\$ (22,100,000)
Outlier Payments	Modernize Hospital	Savings	Hospital	\$ (24,251,424)	\$ (67,440,000)			\$ (24,251,424)	\$ (67,440,000)
Crossover Payments	Modernize Hospital	Savings	Hospital	\$ (11,327,400)	\$ (31,500,000)			\$ (11,327,400)	\$ (31,500,000)
Inpatient Capital Rates	Modernize Hospital	Savings	Hospital/MCP	\$ (15,103,200)	\$ (42,000,000)			\$ (15,103,200)	\$ (42,000,000)
Hospital Acquired Conditions	Modernize Hospital	Savings	Hospital	\$ (55,378)	\$ (154,000)			\$ (55,378)	\$ (154,000)
Rate Methodology \$177.57 to FY12 \$167.25 FY13 \$168.84	Reform Nursing Facility Payments	Savings	NF	\$ (62,900,728)	\$ (174,918,600)			\$ (62,900,728)	\$ (174,918,600)
Leave Days	Reform Nursing Facility Payments	Savings	NF	\$ (1,147,018)	\$ (3,189,705)			\$ (1,147,018)	\$ (3,189,705)
Crossover Claims	Reform Nursing Facility Payments	Savings	NF	\$ (898,739)	\$ (2,499,273)			\$ (898,739)	\$ (2,499,273)
NF Franchise Fee to 6% ; \$11.47 in FY12 and \$11.67 FY13	Reform Nursing Facility Payments	Franchise Fee	NF	\$ (3,127,852)	\$ (8,698,142)	\$ 3,127,852	\$ 8,698,142	\$ -	\$ -
NF Franchise Fee to 6% Rate Impact	Reform Nursing Facility Payments	Franchise Fee	NF			\$ 960,316	\$ 2,670,513	\$ 960,316	\$ 2,670,513
Past unpaid medical bills	Reform Nursing Facility Payments	Savings	NF	\$ (438,619)	\$ (1,219,740)			\$ (438,619)	\$ (1,219,740)
NF Utilization Changes	Reform Nursing Facility Payments	Savings	NF	\$ (4,974,480)	\$ (13,833,370)			\$ (4,974,480)	\$ (13,833,370)
MR Franchise Fee to 6%; \$17.99 in FY12 and 18.32 FY13	Other DD	Franchise Fee	ICF MR	\$ (4,197,125)	\$ (11,671,649)	\$ 4,197,125	\$ 11,671,649	\$ -	\$ -
MR Franchise Fee to 6% Rate Impact	Other DD	Franchise Fee	ICF MR			\$ 3,087,840	\$ 8,586,874	\$ 3,087,840	\$ 8,586,874
Shift June ICF/MR Payment Back to June 2011	Other DD	Payment Shift	ICF MR	\$ (14,488,544)	\$ (46,737,240)			\$ (14,488,544)	\$ (46,737,240)
Pharmacy Benefit (Carve In) - MCP Amount	Reform Managed Care Plan Payments	Cost Other	MCO	\$ 340,577,160	\$ 947,100,000			\$ 340,577,160	\$ 947,100,000
Pharmacy Benefit (Carve In) - FFS Reduction	Reform Managed Care Plan Payments	Savings	FFS	\$ (305,695,960)	\$ (850,100,000)			\$ (305,695,960)	\$ (850,100,000)
Managed Care Expansion - MCP	Provide Accountable Care for Children	Cost Other	MCO	\$ -	\$ -			\$ -	\$ -
Managed Care Expansion - FFS	Provide Accountable Care for Children	Savings	FFS	\$ -	\$ -			\$ -	\$ -
Capitation Rates (Administration and Trend)	Reform Managed Care Plan Payments	Savings	MCO	\$ (8,709,404)	\$ (24,219,700)			\$ (8,709,404)	\$ (24,219,700)
Hospital Contract and Non-Contracting	Reform Managed Care Plan Payments	Savings	MCO	\$ (11,183,560)	\$ (31,100,000)			\$ (11,183,560)	\$ (31,100,000)
Eliminate Hospital Contract and Non-Contracting Provision	Legislative Addition	Cost	MCO	\$ 10,136,027	\$ 28,186,947			\$ 10,136,027	\$ 28,186,947
Eliminate the Children's Buy - In Program	Reform Managed Care Plan Payments	Savings	MCO/Other	\$ (4,000,000)	\$ (4,000,000)			\$ (4,000,000)	\$ (4,000,000)
MCP Incentive / Bonus	Budget Language/Current Estimate	Cost	MCO						
Eliminate Prior Authorization of antidepressants/antipsychotics	Legislative Addition	Cost	Pharmacy	\$ 8,738,280	\$ 24,300,000			\$ 8,738,280	\$ 24,300,000
Physician Payment Codes	Reform Other Benefits and Payments	Savings	Physician	\$ (372,806)	\$ (1,036,724)			\$ (372,806)	\$ (1,036,724)
Promote Health Homes	Care Coordination - Health Home	Cost ACA	Other	\$ 90,000	\$ 900,000			\$ 90,000	\$ 900,000
Nursing and Home Health Services Base Rate	Reform Other Benefits and Payments	Savings	Waiver/Other	\$ (5,394,000)	\$ (15,000,000)			\$ (5,394,000)	\$ (15,000,000)
Nutritional Products	Reform Other Benefits and Payments	Savings	Other	\$ (71,920)	\$ (200,000)			\$ (71,920)	\$ (200,000)
Nutritional Products - Prior Authorization	Reform Other Benefits and Payments	Savings	Other	\$ (539,400)	\$ (1,500,000)			\$ (539,400)	\$ (1,500,000)
Diabetic Supplies Selective Contracting	Reform Other Benefits and Payments	Savings	Other	\$ -	\$ -			\$ -	\$ -
DME Selective Contracting	Reform Other Benefits and Payments	Savings	Other	\$ -	\$ -			\$ -	\$ -
National Correct Coding Initiative (NCCI)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 39,000	\$ 390,000			\$ 39,000	\$ 390,000
National Correct Coding Initiative (NCCI)	Reform Other Benefits and Payments	Savings	Other	\$ (202,949)	\$ (564,375)			\$ (202,949)	\$ (564,375)
Face to Face for DME (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 170,914	\$ 475,290			\$ 170,914	\$ 475,290
Freestanding Birthing Center Coverage (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 71,920	\$ 200,000			\$ 71,920	\$ 200,000
Preventive Services (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 1,960,102	\$ 5,450,785			\$ 1,960,102	\$ 5,450,785
Smoking Cessation for Pregnant Women (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 38,626	\$ 107,415			\$ 38,626	\$ 107,415
Smoking Cessation for Pregnant Women (ACA)	Reform Other Benefits and Payments	Savings	Other	\$ -	\$ -			\$ -	\$ -
Eligibility Option for Family planning (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 781,248	\$ 5,188,065			\$ 781,248	\$ 5,188,065
Eligibility Verification Vendor	Reform Other Benefits and Payments	Savings	Other	\$ (539,400)	\$ (1,500,000)	\$ 539,400	\$ 1,500,000	\$ -	\$ -
Case Management Contract Transition	Reform Other Benefits and Payments	Cost Other	Other	\$ -	\$ -			\$ -	\$ -
Other Baseline Adjustments	Reform Other Benefits and Payments	Cost Other	Other	\$ (1,928,366)	\$ (5,362,532)	\$ 1,928,366	\$ 5,362,532	\$ -	\$ -
Hattie Larlham Community Living	Legislative Addition	Cost	Other	\$ 62,500	\$ 62,500			\$ 62,500	\$ 62,500

Policy Change Subtotal (Appropriations Only)	\$ (407,326,847)	\$ (1,128,209,610)	\$ 508,096,100	\$ 1,412,947,998	\$ 100,769,253	\$ 284,738,388
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Aging Medicaid Programs Move to JFS in FY12	Net of Policy Changes + Legislative Add		\$ 189,399,305	\$ 520,708,135	\$ 35,263,984	\$ 98,064,472	\$ 224,663,289	\$ 618,772,607
Fund Changes for NF (Elimination of 4J50-move earmarks)	Move from ALI 613 to 608				\$ 3,436,395	\$ 3,436,395	\$ 3,436,395	\$ 3,436,395
MH Medicaid Programs Move to JFS in FY13	Net of Policy Changes/Conf. Update						\$ -	\$ -
ODADAS Medicaid Programs Move to JFS in FY13	Net of Policy Changes/Conf. Update						\$ -	\$ -
Structure Change Subtotal (Appropriations Only)			\$ 189,399,305	\$ 520,708,135	\$ 38,700,379	\$ 101,500,867	\$ 228,099,684	\$ 622,209,002

Total 600525 Est (Including reserve)	\$ 4,344,895,694	\$ 11,929,878,920	\$ 1,306,168,997	\$ 3,615,609,580	\$ 5,651,064,691	\$ 15,545,488,500
Medicaid Reserve Fund + Federal Share	\$ (31,134,322)	\$ (86,109,524)				
MCP Withholding (Process TBD)	\$ -	\$ -				
Total 600525 Appropriation	\$ 4,313,761,372	\$ 11,843,769,396				

JFS Policy Change Summary for 600525 and Related Line Items - Final

FMAP FY13 64.15%

Description	GRF 600525		SFY 13 NON GRF		Total SFY13	
	State Share	All Funds GRF	State Share	All Funds NGRF	State Share	Total
Baseline pre policy changes - Conference	\$ 4,868,066,510	\$ 13,554,169,619	\$ 762,002,707	\$ 2,110,490,347	\$ 5,630,069,217	\$ 15,664,659,966

Short Description	Futher Description	Type	Provider	GRF 600525		SFY 13 NON GRF		Total SFY13	
				State Share	All Funds GRF	State Share	All Funds NGRF	State Share	Total
Five Percent Rate Increase (Continuation from FY10/FY11)	Modernize Hospital	Franchise Fee	Hospital	\$ (69,964,284)	\$ (195,158,394)	\$ 69,964,284	\$ 195,158,394	\$ -	\$ -
Hospital Franchise Fee (525 Support)	Modernize Hospital	Franchise Fee	Hospital	\$ (217,200,000)	\$ (605,857,741)	\$ 217,200,000	\$ 605,857,741	\$ -	\$ -
OHA hospital Financing Proposal	Modernize Hospital	Franchise Fee	Hospital			\$ 148,835,716	\$ 415,162,387	\$ 148,835,716	\$ 415,162,387
Hospital UPL Changes/MCP Incentive (hereby appropriated CD136)	Legislative Addition-Hereby Appropriated	Franchise Fee	Hospital/MCO			\$ 58,077,000	\$ 162,000,000	\$ 58,077,000	\$ 162,000,000
Outpatient Services - Use of Fixed Percentages in Payment	Modernize Hospital	Savings	Hospital	\$ (15,809,850)	\$ (44,100,000)			\$ (15,809,850)	\$ (44,100,000)
Outlier Payments	Modernize Hospital	Savings	Hospital	\$ (32,239,905)	\$ (89,930,000)			\$ (32,239,905)	\$ (89,930,000)
Crossover Payments	Modernize Hospital	Savings	Hospital	\$ (22,585,500)	\$ (63,000,000)			\$ (22,585,500)	\$ (63,000,000)
Inpatient Capital Rates	Modernize Hospital	Savings	Hospital/MCP	\$ (30,114,000)	\$ (84,000,000)			\$ (30,114,000)	\$ (84,000,000)
Hospital Acquired Conditions	Modernize Hospital	Savings	Hospital	\$ (55,209)	\$ (154,000)			\$ (55,209)	\$ (154,000)
Rate Methodology \$177.57 to FY12 \$167.25 FY13 \$168.84	Reform Nursing Facility Payments	Savings	NF	\$ (63,369,793)	\$ (176,763,719)			\$ (63,369,793)	\$ (176,763,719)
Leave Days	Reform Nursing Facility Payments	Savings	NF	\$ (4,679,729)	\$ (13,053,637)			\$ (4,679,729)	\$ (13,053,637)
Crossover Claims	Reform Nursing Facility Payments	Savings	NF	\$ (2,141,752)	\$ (5,974,205)			\$ (2,141,752)	\$ (5,974,205)
NF Franchise Fee to 6% ;\$11.47 in FY12 and \$11.67 FY13	Reform Nursing Facility Payments	Franchise Fee	NF	\$ (8,042,830)	\$ (22,434,672)	\$ 8,042,830	\$ 22,434,672	\$ -	\$ -
NF Franchise Fee to 6% Rate Impact	Reform Nursing Facility Payments	Franchise Fee	NF			\$ 2,343,578	\$ 6,537,177	\$ 2,343,578	\$ 6,537,177
Past unpaid medical bills	Reform Nursing Facility Payments	Savings	NF	\$ (437,875)	\$ (1,221,410)			\$ (437,875)	\$ (1,221,410)
NF Utilization Changes	Reform Nursing Facility Payments	Savings	NF	\$ (4,974,480)	\$ (13,875,816)			\$ (4,974,480)	\$ (13,875,816)
MR Franchise Fee to 6%; \$17.99 in FY12 and 18.32 FY13	Other DD	Franchise Fee	ICF MR	\$ (6,669,116)	\$ (18,602,835)	\$ 6,669,116	\$ 18,602,835	\$ -	\$ -
MR Franchise Fee to 6% Rate Impact	Other DD	Franchise Fee	ICF MR			\$ 3,583,126	\$ 9,994,773	\$ 3,583,126	\$ 9,994,773
Shift June ICF/MR Payment Back to June 2011	Other DD	Payment Shift	ICF MR					\$ -	\$ -
Pharmacy Benefit (Carve In) - MCP Amount	Reform Managed Care Plan Payments	Cost Other	MCO	\$ 502,007,550	\$ 1,400,300,000			\$ 502,007,550	\$ 1,400,300,000
Pharmacy Benefit (Carve In) - FFS Reduction	Reform Managed Care Plan Payments	Savings	FFS	\$ (495,913,050)	\$ (1,383,300,000)			\$ (495,913,050)	\$ (1,383,300,000)
Managed Care Expansion - MCP	Provide Accountable Care for Children	Cost Other	MCO	\$ 134,545,050	\$ 375,300,000			\$ 134,545,050	\$ 375,300,000
Managed Care Expansion - FFS	Provide Accountable Care for Children	Savings	FFS	\$ (103,319,700)	\$ (288,200,000)			\$ (103,319,700)	\$ (288,200,000)
Capitation Rates (Administration and Trend)	Reform Managed Care Plan Payments	Savings	MCO	\$ (43,092,414)	\$ (119,834,300)			\$ (43,092,414)	\$ (119,834,300)
Hospital Contract and Non-Contracting	Reform Managed Care Plan Payments	Savings	MCO	\$ (31,730,835)	\$ (88,510,000)			\$ (31,730,835)	\$ (88,510,000)
Eliminate Hospital Contract and Non-Contracting Provision	Legislative Addition	Cost	MCO	\$ 15,898,604	\$ 44,347,570			\$ 15,898,604	\$ 44,347,570
Eliminate the Children's Buy - In Program	Reform Managed Care Plan Payments	Savings	MCO/Other	\$ (5,000,000)	\$ (5,000,000)			\$ (5,000,000)	\$ (5,000,000)
MCP Incentive / Bonus	Budget Language/Current Estimate	Cost	MCO						
Eliminate Prior Authorization of antidepressants/antipsychotics	Legislative Addition	Cost	Pharmacy	\$ 13,587,150	\$ 37,900,000			\$ 13,587,150	\$ 37,900,000
Physician Payment Codes	Reform Other Benefits and Payments	Savings	Physician	\$ (743,331)	\$ (2,073,449)			\$ (743,331)	\$ (2,073,449)
Promote Health Homes	Care Coordination - Health Home	Cost ACA	Other	\$ 4,635,000	\$ 46,350,000			\$ 4,635,000	\$ 46,350,000
Nursing and Home Health Services Base Rate	Reform Other Benefits and Payments	Savings	Waiver/Other	\$ (7,170,000)	\$ (20,000,000)			\$ (7,170,000)	\$ (20,000,000)
Nutritional Products	Reform Other Benefits and Payments	Savings	Other	\$ (143,400)	\$ (400,000)			\$ (143,400)	\$ (400,000)
Nutritional Products - Prior Authorization	Reform Other Benefits and Payments	Savings	Other	\$ (1,075,500)	\$ (3,000,000)			\$ (1,075,500)	\$ (3,000,000)
Diabetic Supplies Selective Contracting	Reform Other Benefits and Payments	Savings	Other	\$ (2,868,000)	\$ (8,000,000)			\$ (2,868,000)	\$ (8,000,000)
DME Selective Contracting	Reform Other Benefits and Payments	Savings	Other	\$ (1,971,750)	\$ (5,500,000)			\$ (1,971,750)	\$ (5,500,000)
National Correct Coding Initiative (NCCI)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 39,000	\$ 390,000			\$ 39,000	\$ 390,000
National Correct Coding Initiative (NCCI)	Reform Other Benefits and Payments	Savings	Other	\$ (539,543)	\$ (1,505,000)			\$ (539,543)	\$ (1,505,000)
Face to Face for DME (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 340,783	\$ 950,580			\$ 340,783	\$ 950,580
Freestanding Birthing Center Coverage (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 71,700	\$ 200,000			\$ 71,700	\$ 200,000
Preventive Services (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 3,652,384	\$ 10,187,960			\$ 3,652,384	\$ 10,187,960
Smoking Cessation for Pregnant Women (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 77,043	\$ 214,903			\$ 77,043	\$ 214,903
Smoking Cessation for Pregnant Women (ACA)	Reform Other Benefits and Payments	Savings	Other	\$ (37,024)	\$ (103,275)			\$ (37,024)	\$ (103,275)
Eligibility Option for Family planning (ACA)	Reform Other Benefits and Payments	Cost ACA	Other	\$ 1,560,271	\$ 10,376,131			\$ 1,560,271	\$ 10,376,131
Eligibility Verification Vendor	Reform Other Benefits and Payments	Savings	Other	\$ (1,075,500)	\$ (3,000,000)	\$ 1,075,500	\$ 3,000,000	\$ -	\$ -
Case Management Contract Transition	Reform Other Benefits and Payments	Cost Other	Other	\$ 2,500,000	\$ 5,000,000			\$ 2,500,000	\$ 5,000,000
Other Baseline Adjustments	Reform Other Benefits and Payments	Cost Other	Other	\$ (1,592,276)	\$ (4,441,496)	\$ 1,592,276	\$ 4,441,496	\$ -	\$ -
Hattie Larlham Community Living	Legislative Addition	Cost	Other	\$ 62,500	\$ 62,500			\$ 62,500	\$ 62,500

Policy Change Subtotal (Appropriations Only)	\$ (495,579,613)	\$ (1,335,414,304)	\$ 517,383,426	\$ 1,443,189,475	\$ 21,803,813	\$ 107,775,171
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Aging Medicaid Programs Move to JFS in FY12	Net of Policy Changes + Legislative Add			\$ 204,238,553	\$ 563,895,807	\$ 35,263,984	\$ 98,365,367	\$ 239,502,537	\$ 662,261,174
Fund Changes for NF (Elimination of 4J50-move earmarks)	Move from ALI 613 to 608							\$ 3,436,396	\$ 3,436,396
MH Medicaid Programs Move to JFS in FY13	Net of Policy Changes/Conf. Update			\$ 184,301,276	\$ 526,575,077			\$ 184,301,276	\$ 526,575,077
ODADAS Medicaid Programs Move to JFS in FY13	Net of Policy Changes/Conf. Update			\$ 26,003,759	\$ 77,549,116	\$ 7,033,199	\$ 19,618,407	\$ 33,036,958	\$ 97,167,523
Structure Change Subtotal (Appropriations Only)				\$ 414,543,588	\$ 1,168,020,000	\$ 42,297,183	\$ 117,983,774	\$ 460,277,167	\$ 1,289,440,170

Total 600525 Est (Including reserve)	\$ 4,787,030,485	\$ 13,386,775,315	\$ 1,321,683,316	\$ 3,671,663,596	\$ 6,112,150,197	\$ 17,061,875,307
Medicaid Reserve Fund + Federal Share	\$ (97,979,468)	\$ (267,961,771)				
MCP Withholding (Process TBD)	\$ -	\$ -				
Total 600525 Appropriation	\$ 4,689,051,017	\$ 13,118,813,544				