

**DEPARTMENT OF HEALTH  
LOUISIANA MEDICAID PROGRAM  
BUREAU OF HEALTH SERVICES FINANCING**

**FORECAST REPORT  
STATE FISCAL YEAR 2017/18**

**April 2018**



**LOUISIANA MEDICAID PROGRAM**  
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## LOUISIANA MEDICAID PROGRAM

Table-1: Revenue Forecast - Means of Finance - SFY 2017/18

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Financing Category	Budget Appropriation (1.1) A	Forecast Revenue Collections B	Over / (Under) C = B - A	Percent Difference D = (C/A)*100
State General Fund	1,935,282,553	1,935,282,553	0	0.0
Interagency Transfers	24,603,787	13,746,633	(10,857,154)	(44.1)
Self Generated Revenue	456,023,321	456,023,321	0	0.0
Statutory Dedications	821,238,138	806,238,138	(15,000,000)	(1.8)
State Total	3,237,147,799	3,211,290,645	(25,857,154)	(0.8)
Federal	8,784,329,277	8,784,329,277	0	0.0
<b>Total Means of Finance</b>	<b>12,021,477,076</b>	<b>11,995,619,922</b>	<b>(25,857,154)</b>	<b>(0.2)</b>

Table-2: Expenditure Forecast by Budget Program - SFY 2017/18

Program	Budget Appropriation (1.1) A	Current Forecast (2) B	(Over) / Under C = A - B	Percent Difference D = (C/A)*100
Private Providers	10,176,297,689	9,483,518,948	692,778,741	6.8
Public Providers	220,123,243	184,880,411	35,242,832	16.0
Buy-Ins & Supplements	522,424,563	505,163,981	17,260,582	3.3
Uncompensated Care *	1,102,631,581	1,102,631,581	0	0.0
<b>Total Program</b>	<b>\$12,021,477,076</b>	<b>\$11,276,194,921</b>	<b>\$745,282,155</b>	<b>6.2</b>

\* Budget Adjustments: A BA-7 will be proposed to reverse a hospital base rate payment adjustment associated with changes to hospital payment methods intended for implementation in SFY18 but deferred pending the outcome of a hospital payment study in progress.

## LOUISIANA MEDICAID PROGRAM

Table-3: Expenditure Forecast by Budget Category of Service - SFY 2017/18

		Initials (1.2)	Current Forecast (2)	Difference
<b>A: Private Providers Sub-Programs</b>		A	B	C = A - B
Ambulatory Surgical Clinics	A_01	2,143,341	2,016,749	126,592
Applied Behavioral Analysis (3)	A_02	28,043,436	24,936,879	3,106,557
Case Management Services	A_03	7,126,518	7,296,230	(169,712)
Durable Medical Equipment	A_04	12,096,199	11,163,912	932,287
EPSDT (Screening and Early Diagnosis)	A_05	23,803,035	20,323,043	3,479,992
Early Steps	A_06	9,568,562	10,043,675	(475,113)
Family Planning	A_07	528,278	521,248	7,030
Federally Qualified Health Centers	A_08	2,026,010	1,881,054	144,956
Hemodialysis Services	A_09	19,707,005	19,407,541	299,464
Home Health Services	A_10	19,406,735	16,992,021	2,414,714
Hospice Services	A_11	65,646,448	62,340,082	3,306,366
Hospital - Inpatient Services	A_12	164,361,640	123,635,870	40,725,770
Hospital - Outpatient Services	A_13	51,236,483	43,997,385	7,239,098
ICF-DD Community Homes	A_14	254,652,900	243,272,397	11,380,503
Laboratory and X - Ray Services	A_15	6,862,804	6,387,775	475,029
Long Term Personal Care Services (LT - PCS)	A_16	158,917,012	153,394,466	5,522,546
Mental Health - Inpatient Services	A_17	7,989,209	7,127,633	861,576
Nursing Homes	A_18	1,032,575,671	1,027,430,273	5,145,398
Program for All Inclusive Care for the Elderly (PACE)	A_19	19,123,790	15,621,817	3,501,973
Pediatric Day Health Care (PDHC)	A_20	2,950,392	3,011,718	(61,326)
Pharmacy Payments	A_21	99,866,230	89,161,893	10,704,337
Physician Services	A_22	38,742,707	33,709,713	5,032,994
Rural Health Clinics	A_23	4,325,276	4,393,520	(68,244)
Transportation: Emergency-Ambulance	A_24	6,245,870	5,456,346	789,524
Transportation: Non-Emergency-Ambulance	A_25	1,340,611	1,018,349	322,262
Waiver: Adult Day Health	A_26	8,946,888	7,466,185	1,480,703
Waiver: Children's Choice	A_27	13,852,466	11,310,203	2,542,263
Waiver: Community Choices	A_28	111,052,502	106,326,432	4,726,070
Waiver: New Opportunities (NOW)	A_29	450,043,854	452,485,615	(2,441,761)
Waiver: Residential Options (ROW)	A_30	6,717,377	1,786,943	4,930,434
Waiver: Supports	A_31	15,079,129	12,786,213	2,292,916
Other Private Providers	A_32	3,519,024	737,521	2,781,503
Supplemental	A_33	141,164,346	141,164,346	0
<b>Sub-Total Traditional Private Providers</b>		<b>2,789,661,748</b>	<b>2,668,605,046</b>	<b>121,056,702</b>
<b>Managed Care Organizations</b>				
Managed Care - Regular	A_34	4,270,050,305	4,287,507,423	(17,457,118)
Managed Care - Expansion	A_35	3,416,937,565	2,867,515,720	549,421,845
Dental Benefit Program - Regular	A_36	156,940,481	152,526,477	4,414,004
Dental Benefit Program - Expansion	A_37	14,021,404	13,685,106	336,298
Behavioral Health Partnership	A_38	25,043,284	15,430,376	9,612,908
<b>Sub-Total MCOs</b>		<b>7,882,993,039</b>	<b>7,336,665,101</b>	<b>546,327,938</b>
Pharmacy Rebates - Regular	A_39	(369,798,447)	(346,739,490)	(23,058,957)
Pharmacy Rebates - Expansion	A_40	(126,558,651)	(175,011,709)	48,453,058
<b>Sub-Total Rebates: YTD (\$461,935,775)</b>		<b>(496,357,098)</b>	<b>(521,751,199)</b>	<b>25,394,101</b>
<b>Total Private Providers</b>		<b>10,176,297,689</b>	<b>9,483,518,948</b>	<b>692,778,741</b>

## LOUISIANA MEDICAID PROGRAM

Table-3: Expenditure Forecast by Budget Category of Service - SFY 2017/18.. Continued

		Initials (1.2)	Current Forecast (2)	Difference
		A	B	C = A - B
<b>B: Public Providers Sub-Programs</b>				
LSU - Facilities	B_01	3,294,291	2,453,094	841,197
LSU - Physicians	B_02	14,889,037	8,958,261	5,930,776
LDH - State Developmental Facilities	B_03	114,728,008	108,442,000	6,286,008
LDH - Villa Feliciana Nursing Home	B_04	18,751,841	16,828,346	1,923,495
LDH - Office of Public Health	B_05	4,006,602	64,508	3,942,094
LDH - Office of Behavioral Health	B_06	3,419,479	2,814,745	604,734
LDH - Human Services Districts	B_07	1,466,660	681,429	785,231
State - Education	B_08	16,814,566	18,634,629	(1,820,063)
Local Education Agencies	B_09	42,752,759	26,003,400	16,749,359
<b>Total Public Providers</b>		<b>\$220,123,243</b>	<b>\$184,880,411</b>	<b>\$35,242,832</b>
<b>C: Buy-Ins &amp; Supplements Sub-Programs</b>				
Medicare Premiums & Supplements	C_01	368,887,737	368,083,804	803,933
Part-D Clawback (4)	C_02	153,536,826	137,080,177	16,456,649
<b>Total Buy-Ins</b>		<b>\$522,424,563</b>	<b>\$505,163,981</b>	<b>\$17,260,582</b>
<b>D: Uncompensated Care Sub-Programs</b>				
LSU - Facilities	D_01	13,572,737	13,572,737	0
LDH - Office of Behavioral Health	D_02	63,705,633	63,705,633	0
Private Hospitals *	D_03	1,025,353,211	1,025,353,211	0
<b>Total Uncompensated Care</b>		<b>\$1,102,631,581</b>	<b>\$1,102,631,581</b>	<b>\$0</b>
<b>Grand Total Medical Vendor Program</b>				
		<b>\$12,021,477,076</b>	<b>\$11,276,194,921</b>	<b>\$745,282,155</b>

\* Budget Adjustments: A BA-7 will be proposed to reverse a hospital base rate payment adjustment associated with changes to hospital payment methods intended for implementation in SFY18 but deferred pending the outcome of a hospital payment study in progress.

## LOUISIANA MEDICAID PROGRAM

Table-4: Public Private Partnership - Projected Payments - SFY 2017/18

Hospital	UPL	UCC/DSH	Total Payments
Bogalusa (Wash/St. Tamm)	15,979,476	18,883,228	34,862,704
Houma (LJ Chabert)	58,616,970	75,891,316	134,508,286
Baton Rouge - OLOL	103,500,000	0	103,500,000
Baton Rouge - Woman's	10,203,122	0	10,203,122
New Orleans (ILH)	144,247,827	243,672,891	387,920,718
Lafayette (Univ Med Cntr)	62,006,681	56,225,260	118,231,941
Independence (Lallie Kemp)	6,117,224	13,572,737	19,689,961
Lake Charles (WO Moss)	3,500,000	38,082,958	41,582,958
Monroe (EA Conway)	117,099,066	0	117,099,066
Alexandria (Huey P. Long)	0	46,078,961	46,078,961
Shreveport (LSU-HSC)	0	134,070,590	134,070,590
<b>Total</b>	<b>\$521,270,366</b>	<b>\$626,477,941</b>	<b>\$1,147,748,307</b>

## LOUISIANA MEDICAID PROGRAM State Fiscal Year 2017/18 Expansion

**Table-5: Original Distribution of Members and Member Months vs. Actual Distribution of Members and Member Months:**

Rate Cell	Statewide PMPM Avg	Original Distribution Assumed	Original Member Months	= PMPM * MM	Updated Statewide PMPM Avg	Updated Distribution	Updated Member Months	= PMPM * MM	Difference <sup>1</sup> (Actual - Original)
Female, 19-24	335.62	13.3%	753,869	\$253,013,614	\$316.29	13.3%	717,034	226,787,828	(\$26,225,786)
Male, 19-24	291.35	7.7%	437,704	\$127,523,648	\$267.40	7.9%	428,719	114,638,704	(\$12,884,944)
Female, 25-39	446.34	25.7%	1,460,105	\$651,699,641	\$429.66	25.7%	1,390,194	597,312,857	(\$54,386,785)
Male, 25-39	404.95	13.4%	761,619	\$308,419,816	\$404.58	13.9%	751,501	304,044,917	(\$4,374,899)
Female, 40-49	633.10	10.4%	591,916	\$374,741,979	\$631.12	10.3%	558,906	352,735,463	(\$22,006,516)
Male, 40-49	619.59	6.4%	365,142	\$226,238,939	\$617.42	6.6%	357,043	220,445,969	(\$5,792,970)
Female, 50-64	732.96	13.6%	772,253	\$566,033,713	\$746.73	13.0%	705,436	526,772,103	(\$39,261,609)
Male, 50-64	821.27	9.3%	529,881	\$435,177,091	\$822.32	9.2%	496,477	408,264,633	(\$26,912,458)
High Need	1,475.83	0.2%	10,046	\$14,825,979	\$1,145.94	0.0%	2,205	2,527,236	(\$12,298,743)
Kickpayments				\$298,345,769				\$113,986,010	(\$184,359,758)
Budget Adjustments <sup>2</sup>				\$193,972,023				\$0	(\$193,972,023)
<b>Total</b>			<b>5,682,535</b>	<b>\$3,449,992,211</b>			<b>5,407,517</b>	<b>\$2,867,515,720</b>	<b>(\$582,476,491)</b>

<sup>1</sup>Difference is due to several factors:

- a. Reduction in PMPMs by an average of -10% effective with the 2/1/18 rate certification.
- b. Reduction in member months due to slowed enrollment growth.
- c. Kickpayment adjustment to reflect slowed shift of pregnant women into the New Adult Group.

<sup>2</sup>Budget Adjustments: To reverse a hospital "base rate" payment adjustment associated with changes to hospital payment methods intended for implementation in SFY18 but deferred pending the outcome of a hospital payment study in progress.

**Table-6: Medicaid Expansion Enrollment Projections**

July-17	Actuals	432,463
August-17	Actuals	435,195
September-17	Actuals	438,594
October-17	Actuals	444,137
November-17	Actuals	453,815
December-17	Actuals	459,783
January-18	Actuals	463,679
February-18	Actuals	466,936
March-18	Actuals	469,935
April-18	Projection	475,481
May-18	Projection	492,834
June-18	Projection	497,070

**LOUISIANA MEDICAID PROGRAM**  
**(Numbered Notes to the Monthly Financial Report)**

- 1.1 This column represents the Appropriation (Act 3) for the Medicaid Program's four (4) budget categories: (A) Payments to Private Providers, (B) Payments to Public Providers, (C) Medicare Buy-Ins, Part-D, and Supplements, and (D) Uncompensated Care Costs.
- 1.2 This column represents initial spread of Act 3 Medical Vendor Appropriation for private provider sub-programs, public providers, Medicare Buy-Ins & Supplements, and Uncompensated care payments.
- 2 This column represents SFY 2017/18 expenditures forecast based on the latest available data/information and reflects projected payments through the end of the State Fiscal Year.
- 3 Applied Behavior Analysis (ABA) services for children age 0-20 pursuant to federal court order in pending lawsuit Chisholm v. Kliebert. ABA services must be provided to class members who have a diagnosis of Autism Spectrum Disorder (ASD), for whom services are determined medically necessary.
- 4 Part-D Clawback Expenditures - All State Funds.