



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services
Commissioner's Office
221 State Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-3707
Fax (207) 287-3005; TTY: 1-800-606-0215

June 18, 2012

To: Senator Richard Rosen, Senate Chair
Representative Patrick Flood, House Chair,
Members of the Joint Standing Committee on Appropriations and Financial Affairs

From: Mary C. Mayhew, Commissioner, Department of Health and Human Services

DHHS is providing responses to questions asked by AFA Committee on June 1st and updates on DHHS initiatives.

1. Please provide a breakdown of the \$12.5 million and the categories that will be affected.

Response:

Categories Currently Over-spending include:

- Crossovers
- Hospital – acute care IP/OP
- Certified Seed
- Day Treatment
- Prescription Drugs

2. How far behind is the Department on audits, particularly for residential care?

Response: See Attachment A for an summary of audits by program.

3. Please provide a work plan for retrieving overpayments.

Response: MaineCare members residing in a PNMI are responsible for paying a cost of care towards the services received at the PNMI. The MIHMS system was configured to collect the PNMI cost of care from the room and board portion of claims that are submitted. When the program costs were moved out of the room and board component of the rate it resulted in the system not collecting the full cost of care. MaineCare Services is currently working with providers to collect these overpayments.

Since the collection project began in September of 2011, MaineCare Services has identified \$16,372,801.02 in overpayments. To date we have collected \$7,125,263.38 and have another \$320,230.73 to be offset from future payments.

We have been working with providers for 9 months on the collection of these overpayments. We will be sending Notice of Debt letters to many providers who have not responded to these collection efforts. The total amount that is being noticed is \$4,046,597.71.

Cc: Joint Standing Committee on Health and Human Services
Governor Paul R. LePage
Kathleen Newman, Deputy Chief of Staff, Governor's Office
Katrin Teel, Senior Health Policy Advisor, Governor's Office
Sawin Millett, Commissioner, Department of Administrative and Financial Services (DAFS)
Dawna Lopatosky, State Budget Officer, DAFS
Shirrin Blaisdell, Deputy State Budget Officer, DAFS

AUDIT STATUS - 2012

As of: 06/19/12

NF							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2008	112	0	112	112	0	0	0
2009	111	0	111	105	6	0	6
2010	109	0	109	39	70	2	68
2011	114	3	111	2	109	0	109
TOTAL	446	3	443	258	185	2	183

ICF - MR							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2008	23	0	23	23	0	0	0
2009	18	0	18	17	1	0	1
2010	17	0	17	15	2	0	2
2011	17	0	17	4	13	0	13
TOTAL	75	0	75	59	16	0	16

NF COMBINED							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2008	135	0	135	135	0	0	0
2009	129	0	129	122	7	0	7
2010	126	0	126	54	72	2	70
2011	131	3	128	6	122	0	122
TOTAL	521	3	518	317	201	2	199

RCF							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2006	107	0	107	101	6	0	6
2007	102	0	102	96	6	0	6
2008	99	0	99	85	14	0	14
2009	104	0	104	68	36	2	34
2010	98	0	98	10	88	6	82
2011	100	3	97	0	97	0	97
TOTAL	610	3	607	360	247	8	239

RCF - MR							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2006	34	0	34	34	0	0	0
2007	33	0	33	33	0	0	0
2008	33	0	33	33	0	0	0
2009	35	0	35	20	15	0	15
2010	36	0	36	8	28	2	26
2011	34	3	31	0	31	0	31
TOTAL	138	3	135	61	74	2	72

RCF - COMBINED							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2008	141	0	141	135	6	0	6
2008	135	0	135	129	6	0	6
2008	132	0	132	118	14	0	14
2009	139	0	139	88	51	2	49
2010	134	0	134	18	116	8	108
2011	134	6	128	0	128	0	128
TOTAL	748	6	742	421	321	10	311

PNMI Programs													
Total	No Cost		Current										
	Report	To Do	Done	To Do App-B	Draft App-B	To Do App-D	Draft App-D	To Do App-E	Draft App-E	Total To Do	Total Draft	Total WIP	
2008	164	0	164	164	0	0	0	0	0	0	0	0	0
2009	160	0	160	141	1	0	6	0	12	0	19	0	19
2010	147	0	147	41	13	0	38	0	55	0	106	0	106
2011	136	0	136	65	15	0	0	0	56	0	71	0	71
TOTAL	607	0	607	411	29	0	44	0	123	0	196	0	196

PNMI Programs							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2008	164	0	164	164	0	0	0
2009	160	0	160	141	19	0	19
2010	147	0	147	41	106	0	106
2011	136	0	136	65	71	0	71
TOTAL	607	0	607	411	196	0	196

Day Programs							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2007	141	0	141	133	8	2	6
2008	129	0	129	41	88	0	88
2009	117	1	116	35	81	0	81
2010	92	0	92	24	68	0	68
TOTAL	479	1	478	233	245	2	243

Day Programs							
Total	No Cost		Current				
	Report	To Do	Done	To Do	Draft	WIP	
2007	141	0	141	133	8	2	6
2008	129	0	129	41	88	0	88
2009	117	1	116	35	81	0	81
2010	92	0	92	24	68	0	68
TOTAL	479	1	478	233	245	2	243

AUDIT STATUS - 2012

As of: 06/19/12

SOCIAL SERVICE								
Total	FS	FS	To Do	REPORTS ISSUED				
	REC	Due		Done	To Do	Draft	WIP	
2004	386	386	0	0	385	1	1	0
2005	359	359	0	0	357	2	2	0
2006	354	354	0	0	351	3	3	0
2007	341	341	0	0	332	9	4	5
2008	321	316	5	0	299	22	9	13
2009	338	332	6	0	285	53	9	44
2010	317	288	29	0	230	87	11	76
2011	303	249	54	0	6	297	1	296
TOTAL	2,719	2,625	94	0	2,245	474	40	434

SOCIAL SERVICE						
TOTAL	No FS	DONE	TO DO	DRAFT	WIP	
2004	386	0	385	1	1	0
2005	359	0	357	2	2	0
2006	354	0	351	3	3	0
2007	341	0	332	9	4	5
2008	321	5	299	22	9	13
2009	338	6	285	53	9	44
2010	317	29	230	87	11	76
2011	303	54	6	297	1	296
TOTAL	2719	94	2245	474	40	434

Total All Audits							
Year	Total Audits	No Cost Report	To Do Do	Done	Current To Do	Current Draft	WIP
2004	386	0	386	385	1	1	0
2005	359	0	359	357	2	2	0
2006	461	0	461	452	9	3	6
2007	584	0	584	561	23	6	17
2008	881	0	881	757	124	9	115
2009	883	1	882	671	211	11	200
2010	816	0	816	367	449	21	428
2011	704	9	695	77	618	1	617
Total	5,074	10	5,064	3,627	1,437	54	1,383

MaineCare Caseload, SFY 2011
revised to reflect data changes resulting from the September 2011 upgrade
Maine Department of Health and Human Services

SFY11	Traditional Medicaid ¹	CHIP		Medicaid Expansion Parents		Childless Adult Waiver ⁴	MaineCare AND DEL/Me Rx ⁵	TOTAL	% Change
		Medicaid Expansion ²	"Cub Care" ²	101% FPL To 150% FPL ³	151% FPL To 200% FPL ³				
Jul-10	242,810	9,459	5,381	20,067	6,914	16,139	40,243	341,013	
Aug-10	244,839	9,530	5,434	20,116	6,999	16,706	40,265	343,889	0.84%
Sep-10	245,903	9,633	5,520	20,233	7,027	17,815	40,595	346,726	0.82%
Oct-10	246,600	9,645	5,572	20,302	7,088	17,422	40,866	347,495	0.22%
Nov-10	247,267	9,590	5,641	20,381	7,112	17,146	41,105	348,242	0.21%
Dec-10	247,725	9,650	5,730	20,503	7,218	16,832	41,473	349,131	0.26%
Jan-11	248,561	9,770	5,800	20,667	7,373	18,756	41,790	352,717	1.03%
Feb-11	249,277	9,616	5,790	20,548	7,443	18,373	42,117	353,164	0.13%
Mar-11	250,522	9,691	5,819	20,726	7,612	18,002	42,311	354,683	0.43%
Apr-11	250,497	9,834	5,824	20,955	7,697	17,520	42,600	354,927	0.07%
May-11	251,361	9,911	5,856	21,278	7,709	17,142	42,824	356,081	0.33%
Jun-11	251,147	10,110	5,835	21,465	7,715	16,629	43,090	355,991	-0.03%

¹ Adults and Children in receipt of a financial benefit (TANF, IV-E); Aged and Disabled Persons in receipt of a financial benefit (SSI, SSI Supplement), Institutionalized Persons (NF), and Others not included below

² Medicaid Expansion Children (M S-CHIP) are children with family incomes above 125/133%, based on age, and up to and including 150% of the Federal Poverty Level (FPL)
"Cub Care" Children (S S-CHIP) are children with family incomes above 150% and up to and including 200% of FPL.

³ Persons who function as the primary caretakers of dependent children and whose income is above 100% and up to and including 150% of FPL
Persons who function as the primary caretakers of dependent children and whose income is above 150% and up to and including 200% of FPL.

⁴ Persons who are over 21 and under 65, not disabled, not the primary caretakers of dependent children, and whose income is not more than 125% of FPL

⁵ Persons eligible for Medicaid, but not for "full benefits" (e. g., QMBY, SLMB, QI) who meet the criteria for participation in DEL and/ or Maine Rx

⁶ Persons who meet ONLY the criteria for participation in DEL and/ or Maine Rx

MaineCare Caseload, SFY 2012
Maine Department of Health and Human Services

SFY12	Traditional Medicaid ¹	CHIP		Medicaid Expansion Parents		Childless Adult Waiver ⁴	MaineCare AND DEL/ Me Rx ⁵	TOTAL	% Change
		Medicaid Expansion ²	"Cub Care" ²	101% FPL To 150% FPL ³	151% FPL To 200% FPL ³				
Jul-11	251,756	10,307	5,854	21,641	7,692	16,257	43,292	356,799	0.23%
Aug-11	252,163	10,434	5,841	21,809	7,752	15,853	43,610	357,462	0.19%
Sep-11	250,207	10,588	5,834	22,059	7,713	18,957	43,871	359,229	0.49%
Oct-11	251,932	10,874	5,825	22,566	7,862	18,819	43,437	361,315	0.58%
Nov-11	252,087	10,741	5,829	21,884	7,850	18,496	43,667	360,554	-0.21%
Dec-11	253,016	10,943	5,817	21,977	7,929	18,023	43,940	361,645	0.30%
Jan-12	241,530	10,385	5,664	20,709	6,969	15,231	43,959	344,447	-4.76%
Feb-12	243,780	10,216	5,725	20,736	6,990	14,846	44,162	346,455	0.58%
Mar-12	241,720	9,912	5,668	20,471	6,932	14,308	44,174	343,185	-0.94%
Apr-12	241,764	10,106	5,608	20,854	6,867	13,888	44,202	343,289	0.03%
May-12	0	0	0	0	0	0	0	0	N/A
Jun-12	0	0	0	0	0	0	0	0	N/A

¹ Adults and Children in receipt of a financial benefit (TANF, IV-E); Aged and Disabled Persons in receipt of a financial benefit (SSI, SSI Supplement), Institutionalized Persons (NF), and Others not included below

² Medicaid Expansion Children (M S-CHIP) are children with family incomes above 125/133%, based on age, and up to and including 150% of the Federal Poverty Level (FPL)
 "Cub Care" Children (S S-CHIP) are children with family incomes above 150% and up to and including 200% of FPL.

³ Persons who function as the primary caretakers of dependent children and whose income is above 100% and up to and including 150% of FPL
 Persons who function as the primary caretakers of dependent children and whose income is above 150% and up to and including 200% of FPL.

⁴ Persons who are over 21 and under 65, not disabled, not the primary caretakers of dependent children, and whose income is not more than 125% of FPL

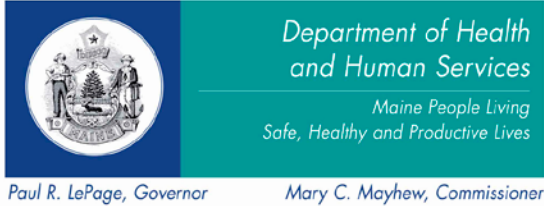
⁵ Persons eligible for Medicaid, but not for "full benefits" (e. g., QMBY, SLMB, QI) who meet the criteria for participation in DEL and/ or Maine Rx

DEL/ ME Rx Caseload, SFY 2012
Maine Department of Health and Human Services

SFY 2012	MaineCare Eligible				NOT MaineCare Eligible				Grand Total			
	DEL and ME				DEL and ME				DEL and ME			
	ME Rx only	Rx	DEL only	TOTAL	ME Rx only	Rx	DEL only	TOTAL	ME Rx only	Rx	DEL only	TOTAL
July-11	0	43,430	0	43,430	0	51,783	0	51,783	0	95,213	0	95,213
August-11	0	43,810	0	43,810	0	52,496	0	52,496	0	96,306	0	96,306
September-11	0	43,871	0	43,871	0	51,174	0	51,174	0	95,045	0	95,045
October-11	0	43,437	0	43,437	0	52,501	0	52,501	0	95,938	0	95,938
November-11	0	43,667	0	43,667	0	53,875	0	53,875	0	97,542	0	97,542
December-11	0	43,940	0	43,940	0	54,831	0	54,831	0	98,771	0	98,771
January-12	0	43,959	0	43,959	0	50,322	0	50,322	0	94,281	0	94,281
February-12	0	44,162	0	44,162	0	51,738	0	51,738	0	95,900	0	95,900
March-12	0	44,174	0	44,174	0	50,966	0	50,966	0	95,140	0	95,140
April-12	0	44,202	0	44,202	0	51,351	0	51,351	0	95,553	0	95,553
May-12	0	0	0	0	0	0	0	0	0	0	0	0
June-12	0	0	0	0	0	0	0	0	0	0	0	0

MaineCare Enrollment Data from March 2011 - February 2012

TRADITIONAL MEDICAID GROUPS	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	12 Month Average	% Change Feb 11 - Jan 12
Under Age 21 - Age 18 and Under	99,442	99,274	99,471	99,475	98,569	99,038	98,419	98,491	94,741	95,738	94,836	95,097	97,716	0.28%
Under Age 21 - Ages 19 and 20	8,568	8,609	8,665	8,807	8,685	8,762	8,774	8,800	7,220	7,327	7,126	7,194	8,211	0.95%
Total Under Age 21	108,010	107,883	108,136	108,282	107,254	107,800	107,193	107,291	101,961	103,065	101,962	102,291	105,927	0.32%
Parents of a child under age 21 with Income <= 100% FPL	51,419	51,237	51,157	50,855	50,033	50,279	50,692	50,999	48,450	49,138	48,640	48,982	50,157	0.70%
Individuals who have a disabling condition (Including Katie Beckett)	51,075	51,031	51,045	51,058	50,890	51,088	50,778	50,991	50,106	50,404	50,452	50,500	50,785	0.10%
Individuals who are 65 years of age or older	22,304	22,344	22,471	22,559	22,624	22,720	22,864	23,118	22,667	22,718	22,580	22,447	22,618	-0.59%
Transitional MaineCare (income > 200% FPL)	8,663	8,577	8,783	9,124	9,488	9,751	10,227	10,135	9,352	9,271	9,177	8,806	9,280	-4.04%
Foster Care (Including Title IV-E & Adult) and Adoption Assistance	3,306	3,322	3,323	3,337	3,356	3,371	3,369	3,382	3,556	3,569	3,616	3,480	3,416	-3.76%
Pregnant women	2,039	2,079	2,038	1,990	1,901	1,874	1,759	1,732	1,713	1,794	1,793	1,804	1,876	0.61%
Temporary Coverage	1,584	1,716	1,799	1,936	1,655	1,739	1,812	1,868	446	503	223	127	1,284	-43.05%
Aged - State Supp Only (Aged, Disabled, Boarding Home)	1,113	1,100	1,094	1,086	1,083	1,085	1,053	1,058	1,042	1,034	1,009	1,011	1,064	0.20%
HIV Waiver Program	416	421	417	420	414	418	422	423	414	420	413	419	418	1.45%
Prisoners	388	396	433	433	463	480	533	545	464	473	453	453	460	0.00%
Alien - Medically Needy and Indigent	369	380	392	418	457	763	833	903	875	920	909	958	681	5.39%
Spenddown (Aged and Disabled)	340	331	328	317	245	224	217	240	219	196	225	214	258	-4.89%
Breast and Cervical Health Program	286	289	290	298	292	287	281	272	202	209	209	211	261	0.96%
Refugee	49	41	50	50	52	53	54	59	63	66	59	61	55	3.39%
Other	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Traditional Medicaid	251,361	251,147	251,756	252,163	250,207	251,932	252,087	253,016	241,530	243,780	241,720	241,764	248,539	0.02%
	62.06%	61.75%	61.62%	61.51%	60.97%	60.88%	60.83%	60.92%	61.18%	61.22%	61.33%	61.26%	61.29%	
OTHER MEDICAID GROUPS														
Medicaid Expansion	9,911	10,110	10,307	10,434	10,588	10,874	10,741	10,741	10,385	10,216	9,912	10,106	10,360	1.96%
Cub Care	5,856	5,835	5,854	5,841	5,834	5,825	5,829	5,829	5,664	5,725	5,668	5,608	5,781	-1.06%
Parents of a child under age 21 with Income>100% but <= 150% FPL	21,278	21,465	21,641	21,809	22,059	22,566	21,884	21,884	20,709	20,736	20,471	20,854	21,446	1.87%
Individuals between the ages of 21 and 64 (non-categoricals)	17,142	16,629	16,257	15,853	18,957	18,819	18,496	18,496	15,231	14,846	14,308	13,888	16,577	-2.94%
Parents of a child under age 21 with Income > 150% but < 200% FPL	7,709	7,715	7,692	7,752	7,713	7,862	7,850	7,850	6,969	6,990	6,932	6,867	7,492	-0.94%
DEL\Buy-In\MainerX Programs	91,800	93,802	95,075	96,106	95,045	95,938	97,542	97,542	94,281	95,900	95,140	95,553	95,310	0.43%
Total Other Medicaid	153,696	155,556	156,826	157,795	160,196	161,884	162,342	162,342	153,239	154,413	152,431	152,876	156,966	0.29%
	37.94%	38.25%	38.38%	38.49%	39.03%	39.12%	39.17%	39.08%	38.82%	38.78%	38.67%	38.74%	38.71%	
Grand Total	405,057	406,703	408,582	409,958	410,403	413,816	414,429	415,358	394,769	398,193	394,151	394,640	405,505	0.12%



Department of Health and Human Services
Commissioner's Office
221 State Street
11 State House Station
Augusta, Maine 04333-0011
Tel. (207) 287-3707
Fax (207) 287-3005; TTY (800) 606-0215

To: Members of the Appropriations and Financial Affairs Committee and the Health and Human Services Committee
From: Department of Health and Human Services
Colin Lindley, Director of MaineCare Finance
Date: June 13, 2012
RE: MaineCare expenditures forecast - weekly update

Attached please find the weekly MaineCare Expenditures Report through cycle week #49, which summarizes MaineCare expenses by account and includes data from MIHMS, MEPOPS and Advantage ME, and the MaineCare Cycle Summary Report through week #49 which breaks out MIHMS, and MEPOPS data.

The summary is as follows:

Through Week #49:

- The average paid cycle for the year is \$44.6MM per week.
- Activities that impact the average paid cycle:
 - Week 19 included a \$10M increase in current year claims.
 - Week 31 does not include pharmacy claims (MEPOPS) as none were processed during that time period.
 - Week 32 includes two weeks of pharmacy claims (MEPOPS).
- Activities that impact expenditures but are not included in the MaineCare Cycle Summary Report:
 - Week 11 included payment of the \$29,736,437 targeted case management disallowance.
 - Week 19 included hospital match payments of \$32.0MM for a weekly impact of \$615K over the 52 week period.
 - Week 20 included hospital tax revenue of \$38.2MM for a weekly impact of \$735K over the 52 week period.
 - Week 45 included hospital match payments of \$32.3MM for a weekly impact of \$621K over the 52 week period.
 - Week 47 included hospital tax revenue of \$38.6MM for a weekly impact of \$742K over the 52 week period.

MaineCare Cycle Summary for FY 2012
For Week **49**

WEEK #	MIHMS CYCLE TOTAL	MEPOPS CYCLE TOTAL	CYCLE TOTAL
1	30,019,320.79	5,189,597.77	35,208,918.56
2	46,382,984.44	3,352,652.55	49,735,636.99
3	30,134,911.81	4,533,142.51	34,668,054.32
4	35,060,143.63	4,476,661.50	39,536,805.13
5	35,528,517.89	4,309,088.39	39,837,606.28
6	55,681,875.77	4,644,198.73	60,326,074.50
7	40,699,745.69	4,392,078.11	45,091,823.80
8	39,713,798.35	4,364,771.78	44,078,570.13
9	31,936,812.14	4,214,302.98	36,151,115.12
10	44,313,066.03	4,433,422.94	48,746,488.97
11	35,009,680.72	4,251,486.91	39,261,167.63
12	40,883,494.88	4,660,049.40	45,543,544.28
13	24,917,063.90	4,580,803.68	29,497,867.58
14	32,058,932.32	4,763,713.72	36,822,646.04
15	51,594,616.58	4,635,503.87	56,230,120.45
16	42,622,023.35	4,482,032.55	47,104,055.90
17	38,024,813.59	4,600,518.86	42,625,332.45
18	36,617,040.01	4,634,538.04	41,251,578.05
19	55,911,512.03	4,653,086.40	60,564,598.43
20	42,275,267.97	4,686,746.00	46,962,013.97
21	41,058,178.08	4,652,191.70	45,710,369.78
22	32,302,096.98	4,793,469.87	37,095,566.85
23	35,971,155.20	4,421,496.82	40,392,652.02
24	54,358,473.14	4,969,133.92	59,327,607.06
25	43,809,311.05	4,719,276.50	48,528,587.55
26	32,338,562.08	4,671,412.38	37,009,974.46
27	29,842,228.75	4,268,564.06	34,110,792.81
28	52,721,438.94	4,412,657.30	57,134,096.24
29	40,417,421.75	3,899,529.11	44,316,950.86
30	33,125,137.15	5,553,241.93	38,678,379.08
31	39,134,446.13	-	39,134,446.13
32	49,890,937.25	11,031,644.69	60,922,581.94
33	47,601,984.79	6,057,755.83	53,659,740.62
34	31,826,166.42	4,966,465.44	36,792,631.86
35	34,237,326.94	4,921,977.64	39,159,304.58
36	44,064,703.57	5,489,841.21	49,554,544.78
37	38,474,431.86	5,490,266.83	43,964,698.69
38	41,728,465.63	5,204,097.25	46,932,562.88
39	30,673,054.10	4,969,776.21	35,642,830.31
40	23,331,989.39	5,204,801.96	28,536,791.35
41	56,939,739.84	4,999,010.24	61,938,750.08
42	45,741,967.25	4,792,575.96	50,534,543.21
43	39,668,444.14	4,545,779.15	44,214,223.29
44	39,950,891.86	4,642,879.08	44,593,770.94
45	51,453,028.43	4,761,134.99	56,214,163.42
46	42,492,073.91	4,762,043.78	47,254,117.69
47	44,811,585.03	4,571,146.15	49,382,731.18
48	34,939,785.33	4,943,445.98	39,883,231.31
49	30,199,896.32	4,277,958.72	34,477,855.04
50	-	-	-
51	-	-	-
52	-	-	-
53	-	-	-

GRAND-TOTAL	1,952,490,543.20	231,851,971.39	2,184,342,514.59
AVERAGE CYCLE FOR SFY12	39,846,745.78	4,731,672.89	44,578,418.67

Average Cycle less Hospital Settlement Impact			
	MIHMS	MEPOPS	Total
Total YTD (from above)	1,952,490,543.20	231,851,971.39	2,184,342,514.59
Less: Hospital Settlements	-	-	0.00
Net Total YTD Cycle Payments	1,952,490,543.20	231,851,971.39	2,184,342,514.59

Average Weekly Cycle	39,846,745.78	4,731,672.89	44,578,418.67
Avg Cycle less Hospital Settlements	39,846,745.78	4,731,672.89	44,578,418.67



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services
Commissioner's Office
221 State Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-3707
Fax (207) 287-3005; TTY: 1-800-606-0215

Value-Based Purchasing Update

For background and more information on the Department's Value-Based Purchasing Strategy, please visit <http://www.maine.gov/dhhs/oms/vbp>.

Emergency Department Collaborative Care Management Initiative

MaineCare has been actively engaging with hospitals across the state since last September, 2011 to identify and provide care management for high utilizers of the Emergency Department. Whenever possible, community-based practice and hospital resources provide care management for members, with MaineCare staff facilitating information-sharing and providing direct care management as needed.

This initiative has served over 1000 total members to date, with about 650 members being served at this point in time—members “graduate” from the program as they stabilize, or are dropped if they lose MaineCare eligibility. We are currently on track to achieve \$4.64M total savings, state and federal, by June 30. These cost savings will not be realized until hospital cost reports are filed and settled.

Next Steps:

- MaineCare is collaborating with some of the state's health systems to better leverage existing community-based care management efforts to assist the ED initiative and to problem solve around other process improvements
- MaineCare will be partnering with MaineGeneral and HealthInfoNet on a pilot to test realtime notification of care managers when high utilizing members visit the ED or have an inpatient admission or discharge. MaineCare hopes to roll out this functionality to the ED initiative as a whole based on the success of the initial pilot.

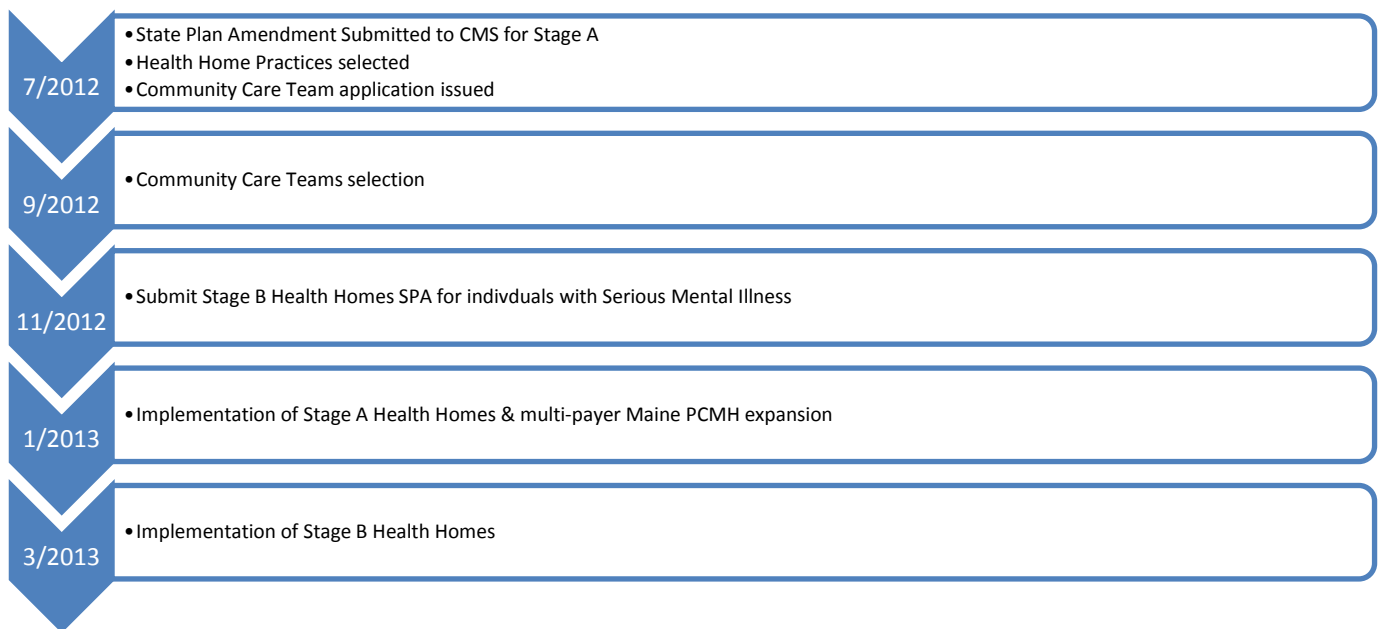
Health Homes

The federal Health Homes Initiative provides enhanced 90/10 federal funding to enable states to build off the foundation of the medical home concept to provide care coordination and intensive care management to Medicaid members with multiple chronic conditions and high needs. MaineCare has been working closely with the health care quality improvement organization Maine Quality Counts in order to align its work on the federal Health Homes Initiative with the multi-payer Maine Patient Centered Medical Home (PCMH) Pilot. In April, MaineCare and Maine Quality Counts issued a joint application to which 108 practices statewide have responded. MaineCare is anticipating that all 108 of the applicants plus the 26 existing PCMH practices will join the Health Homes Initiative, for a total of 134 practices.

The Department is planning to implement two Health Homes models:

1. Stage A: medical home practices will serve members with multiple chronic conditions in partnership with Community Care Teams, which provide wrap-around support to the practice to deliver intensive care management to the highest need members.
2. Stage B: Community Care Teams with expertise in behavioral health will partner with practices to serve as Health Homes for members with serious mental illness.

MaineCare has met its obligation to consult with and receive approval from the Substance Abuse and Mental Health Services Administration (SAMHSA) for its Stage A model, and is engaged with conversation with CMS around its draft State Plan Amendment (SPA). Under the centralized Health Homes SPA process, CMS prefers to work through issues with states prior to formal submission of the SPA in order to facilitate timely approval.



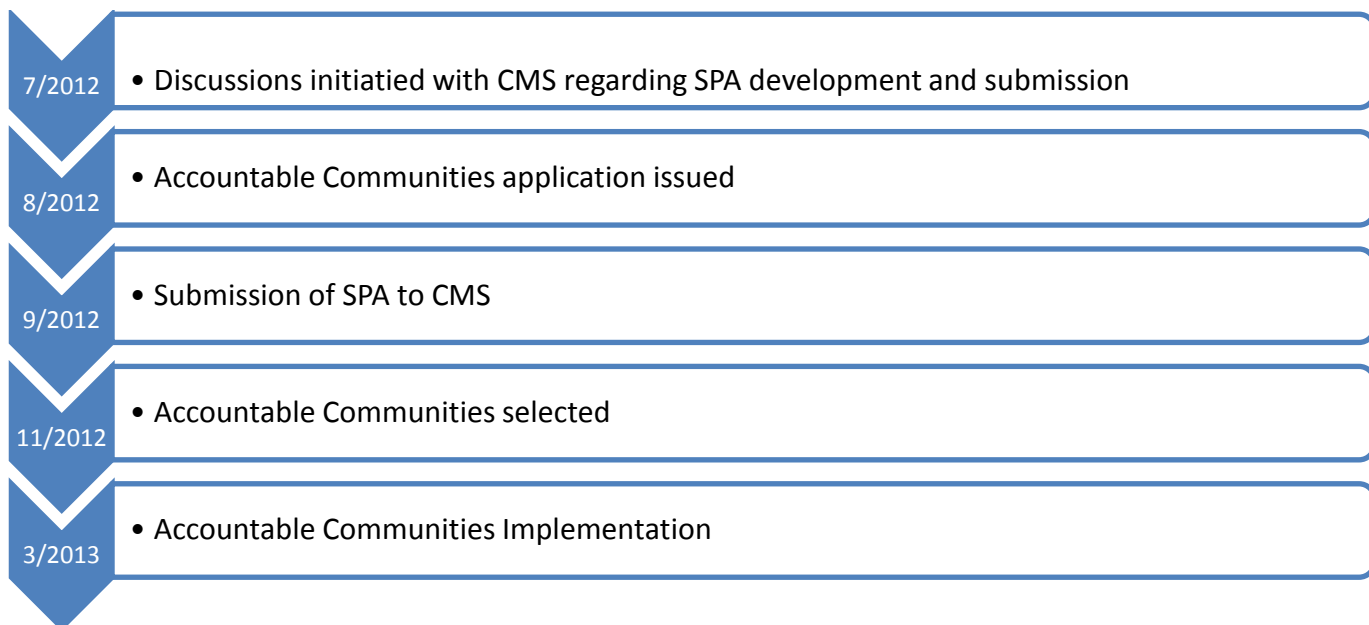
Accountable Communities

The Department's Accountable Communities initiative is based on a shared savings Accountable Care Organization (ACO) model for the Medicaid population. Under the initiative, providers will be able to come together to engage in an alternative contract with the Department to share in any savings achieved for an assigned population. The amount of shared savings will depend on the attainment of quality benchmarks. The initiative will be open to any willing and qualified providers statewide, and will require that providers partner with community based organizations and collaborate

The Department held four Value-Based Purchasing (VBP) regional forums in Bangor, Lewiston, Portland and Augusta over the month of April to provide an overview of the Department's Value-Based Purchasing Strategy for MaineCare and to solicit feedback on the details of its proposed model for the Accountable Communities Initiative, a key part of the VBP strategy. Attendance was strong at each of the forums, ranging from 45 to 75 stakeholders at each forum from behavioral health, hospital, health system, primary care practice, long term care, advocacy and consumer organizations.

During the months of May and June the Department has been working to address and incorporate feedback from these forums into the proposal that will submit to CMS. In addition, MaineCare has initiated the actuarial analysis necessary to develop the baseline per member per month costs against which Accountable Communities will be measured in concert with their performance on quality metrics.

The Department continues to conference with CMS, national organizations and other states for guidance with the Accountable Communities Initiative. Maine has been informing CMS' development of CMS guidance to states on the development of shared savings models such as Accountable Care Organizations, and plans to initiate conversations with CMS around the details of its proposals later this summer.





Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

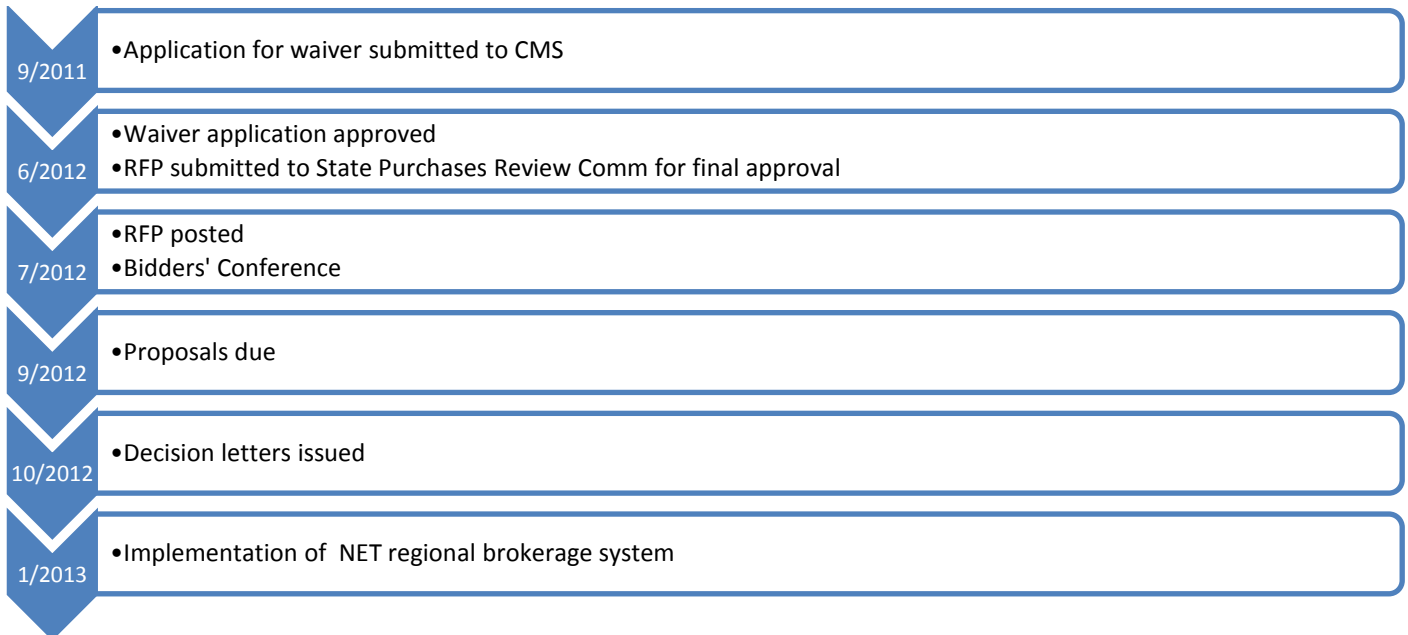
Department of Health and Human Services
Commissioner's Office
221 State Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-3707
Fax (207) 287-3005; TTY: 1-800-606-0215

MaineCare Non Emergency Transportation Update

The Department is pleased to announce that on June 5, 2012, the Centers for Medicare and Medicaid Services (CMS) approved the state's waiver application to establish a risk-based regional brokerage system for MaineCare Non-Emergency Transportation. Under the waiver, regional brokers selected through a competitive bidding process will receive monthly capitated rates to support the full range of transportation options to eligible members under the State Plan, including participants in Maine's Home and Community Based Services waivers. The waiver is approved for one year initially, at which point the State plans to request a longer renewal period.

Now that the waiver has been approved, the Department is securing final approval to release its Request for Proposals (RFP) for the program, and to formally initiate the rule-making process.

The Department believes that the approved redesign of MaineCare's Non-Emergency Transportation system will result in greater accountability for the provision of accessible, cost effective, reliable, quality transportation to eligible MaineCare members without alternate means of accessing their MaineCare-covered services.





Paul R. LePage, Governor

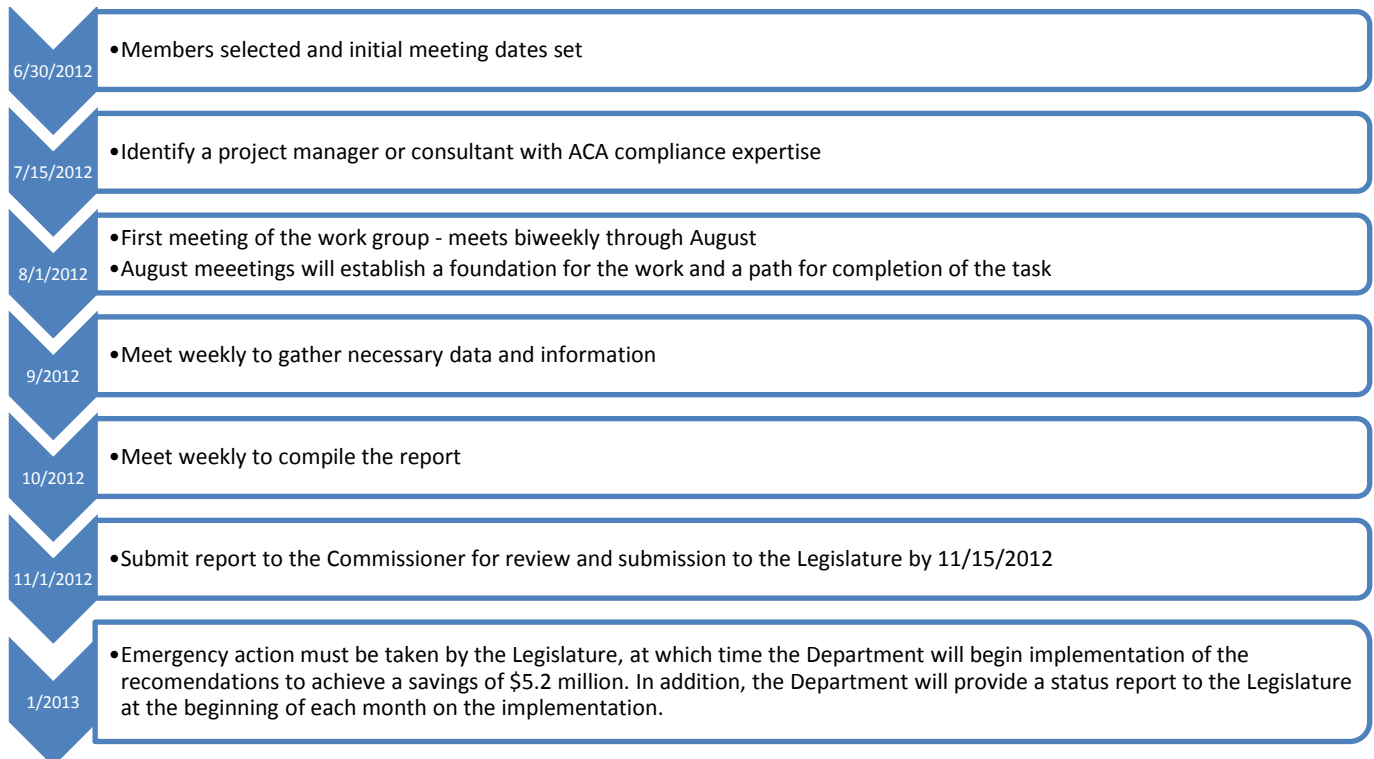
Mary C. Mayhew, Commissioner

Department of Health and Human Services
Commissioner's Office
221 State Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-3707
Fax (207) 287-3005; TTY: 1-800-606-0215

MaineCare Redesign Task Force

The 125th Legislature directed the Department to develop the MaineCare Redesign Task Force. This task force was designed to make recommendations to the Legislature to redesign MaineCare in a way that will maintain high quality and cost effective services to populations in need, to bring it into compliance with the ACA and to realize General Fund savings in SFY 13 of \$5.2 million.

The Task Force is mandated to begin meeting by September 1, 2012. The Department has begun the process of selecting members for the committee and anticipate work to begin by August 1, 2012.

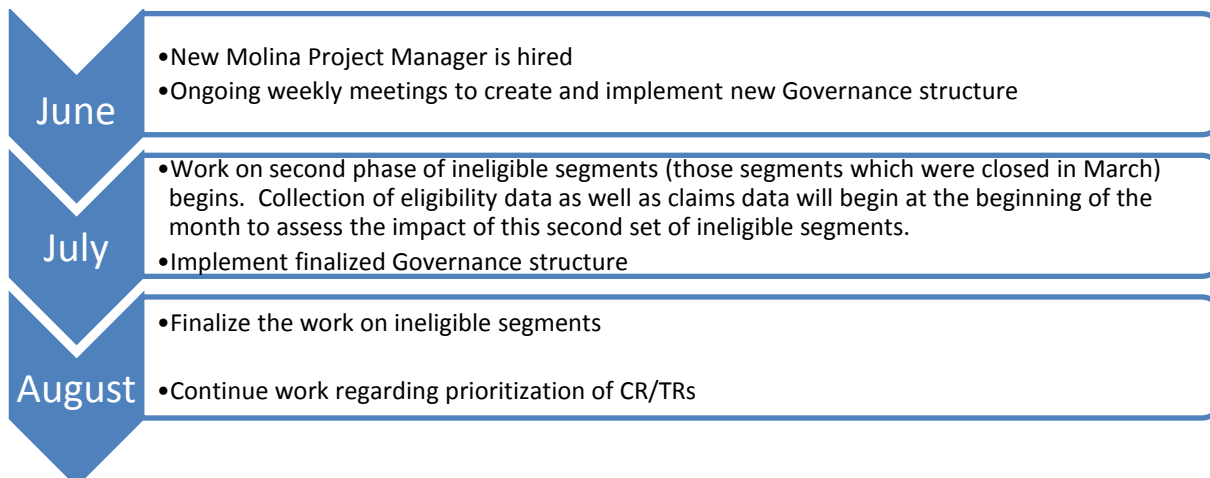


MIHMS Status Update

Since our last update to this committee, the following work has occurred:

- An in-depth analysis of all current Change Requests (CRs) and Trouble Reports/defects (TRs) in order to prioritize the work of State and Molina staff involved with this project. The goal of this work is to identify the impact of changes/defects to the system, the budget and the members we serve. There are weekly meetings focused on prioritizing the 500 +/- CR/TRs that still exist. Our goal is to have a streamlined process in place to that allows us to strategically plan our release of changes to the system. This will also allow us to have more informed communications to the provider community regarding fixes to the system.
- We continue to meet on a weekly basis regarding the end-to-end process flow that reviews our source systems for eligibility and how that flow interacts with the MIHMS system. This is a critical audit that will review the business rules in place for all eligibility systems, how that information flows through to the data hub and the eventual end point of MIHMS, and the effect on claims processing. This work is being done in conjunction with the Office of Information Technology as well as subject matter experts in the Department.
- A twice weekly meeting is occurring to review and prioritize defects and changes to all source eligibility systems as well as MIHMS. This work has convened subject matter experts from various eligibility areas from within the Department as well as the Office of Information Technology and the Office of the State Controller. The goal of these meetings is to do a holistic review of the approach to all eligibility system changes and to analyze the downstream effect to MIHMS.

The following timeline identifies the work the Department will undertake over the summer months:



General Assistance Work Group

The 125th Legislature directed the Department to develop a General Assistance Work Group that would be slated with the responsibility of restructuring the State General Assistance program to achieve a savings of \$500,000 in SFY '13. The Work Group held its first meeting on June 8, 2012.

Members of the Work Group include:

Mary Mayhew, Commissioner, DHHS
Dale Denno, Director, Office for Family Independence, DHHS
Doug Gardner, Director, City of Portland Public Health Division
Kate Dufour, Senior Legislative Advocate, Maine Municipal Association
Stacey Parra, President, Maine Welfare Directors Association
Chris Hastedt, Director of Public Policy, Maine Equal Justice Partners
Peter Merrill, Acting Director, Maine State Housing Association
Peter Ogden, Director, Bureau of Veterans' Services
John Anton, Community Development and Housing Consultant

All information for the Work Group meetings including, meeting minutes, agendas, schedules and all data and information submitted for discussion can be found at www.maine.gov/dhhs/ga. To be added to the interested parties list or obtain more information on the Work Group, please contact Nick Adolphsen at nick.adolphsen@maine.gov.

