



# *Agency for Health Care Administration*

## *Overview of FY 2012-13 Proposed Schedule VIIIB Reductions*

***Phil Williams, Deputy Secretary for Medicaid Finance  
Agency for Health Care Administration***

***Presented to House Health Care Appropriations  
Subcommittee***

***October 4, 2011***

## *FY 2012-2013 Schedule VIII B Medicaid Related Reduction Issues*

| Description   | GR                     |                        | State TF               | Total                    |
|---|------------------------|------------------------|------------------------|--------------------------|
| Target Reductions   | (\$323,772,778)        |                        | (\$335,097,756)        | (\$658,870,534)          |
|   |                        |                        |                        |                          |
|   | <b>(\$323,772,778)</b> |                        | <b>(\$335,097,756)</b> | <b>(\$658,870,534)</b>   |
| Issues  | GR                     | MCTF                   | Other Trust            | Total                    |
|   |                        |                        |                        |                          |
| Companion to Issues Proposed by Other Agencies  |                        | (\$76,694,355)         | (\$59,029,463)         | (\$135,723,818)          |
| Savings associated with expansion of the Telephony project and the Comprehensive Care Management Pilot Program to prevent fraud | (\$2,753,390)          | (\$3,580,610)          | \$0                    | (\$6,334,000)            |
| Limit Medically Needy Program to Physican Services only   | (\$251,035,037)        | (\$307,921,659)        | (\$56,924,541)         | (\$615,881,237)          |
| Elimination of the MEDS AD waiver   | (\$261,583,127)        | (\$334,630,234)        | (\$33,877,197)         | (\$630,090,557)          |
|   | <b>(\$515,371,554)</b> | <b>(\$722,826,858)</b> | <b>(\$149,831,201)</b> | <b>(\$1,388,029,612)</b> |
|   |                        |                        |                        |                          |
|   |                        |                        |                        |                          |
|   | <b>\$191,598,776</b>   |                        | <b>(\$185,266,555)</b> | <b>\$6,332,221</b>       |



# *Agency for Health Care Administration*

## *Overview of Follow-Up FY 2012-13 Reduction Proposals*

***Justin M. Senior, Acting Deputy Secretary for Medicaid  
Agency for Health Care Administration***

***Presented to House Health Care Appropriations  
Subcommittee***

***October 19, 2011***

## *Potential Reductions*

| Description  | GR                    | MCTF                   | Other Trust           | Total                  |
|--|-----------------------|------------------------|-----------------------|------------------------|
| <b>Issues</b>  |                       |                        |                       |                        |
| Companion to issues proposed by other Agencies   | \$0                   | (\$76,724,674)         | (\$58,999,144)        | (\$135,723,818)        |
| Savings from the Telephony Expansion and Comprehensive Care Management Pilot LBR                     | (\$2,753,390)         | (\$3,580,610)          | \$0                   | (\$6,334,000)          |
| Assessments for Certain Kids to Enter SIPP   | (\$665,321)           | (\$865,207)            | \$0                   | (\$1,530,528)          |
| Elimination of Adult Dental Services   | (\$10,114,611)        | (\$13,153,416)         | (\$219,182)           | (\$23,487,209)         |
| Elimination of the Podiatrist Program  | (\$1,651,993)         | (\$2,153,484)          | (\$17,682)            | (\$3,823,159)          |
| Elimination of Adult Vision & Hearing Services   | (\$6,333,647)         | (\$8,236,507)          | (\$257,312)           | (\$14,827,466)         |
| Elimination the Pharmaceutical Expense Ast   | (\$50,000)            | \$0                    | \$0                   | (\$50,000)             |
| Elimination of the Chiropractic Program  | (\$551,926)           | (\$717,744)            | (\$4,425)             | (\$1,274,095)          |
| Exclude the Dual Eligibles from the HIV/AIDS DM Program  | (\$1,514,720)         | (\$2,068,720)          | \$0                   | (\$3,583,440)          |
| Limit Payment for ER Visits to 12 per year for Adults  | (\$5,154,542)         | (\$7,039,785)          | (\$22,469)            | (\$12,216,796)         |
| Limit Payment IP Days for Each Non-Pregnant Adults to 23 days/ County responsibility begins at day 8 | (\$32,167,143)        | (\$90,510,799)         | (\$33,909,496)        | (\$156,587,438)        |
| Limit Payment for Home Health Visits to 3 per recipient per day                                      | (\$701,066)           | (\$959,969)            | (\$1,825)             | (\$1,662,860)          |
| Limit Payment for General Practice Visits to 2 per month   | (\$1,056,048)         | (\$1,449,820)          | (\$7,806)             | (\$2,513,674)          |
| <b>Total Medicaid Reduction Proposed</b>   | <b>(\$62,714,407)</b> | <b>(\$207,460,735)</b> | <b>(\$93,439,341)</b> | <b>(\$363,614,483)</b> |
| <b>Grand Total State Funds: General Revenue and Grants &amp; Donations</b>                           |                       |                        |                       | <b>(\$155,469,788)</b> |
|  |                       |                        |                       |                        |
|  |                       |                        |                       |                        |
|  |                       |                        |                       |                        |

*Questions?*