

FISCAL YEAR 2015

MARK UP

**DEPARTMENT OF SOCIAL SERVICES
DIVISION OF MO HEALTHNET**

HOUSE BILL 2011

**97th General Assembly
Second Regular Session**

Prepared by Senate Appropriations Committee Staff

DEPARTMENT OF SOCIAL SERVICES

Section 11.400 MO HealthNet Division – Administration

Book 5, page 109

The MO HealthNet staff oversees the operation of the Mo HealthNet program. The division is organized into five sections: Administration, Program Management, Finance, Information Services, and Quality Services.

Legal Base: RSMo 208.201; Federal – Social Security Act Section Number: 1902(a) (4) and 42 CFR Part 432

Funding Sources: General Revenue, Federal, Pharmacy Rebates (REBATE), Pharmacy Reimbursement Allowance, MO Rx Plan, Health Initiatives (HIF); Nursing Facility Quality of Care (NFQC); and Third-Party Liability Collections (TPL)

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400												
MO HEALTHNET ADMIN - 90512C												
CORE												
PERSONAL SERVICES	9,366,794	227.11	8,761,779	206.14	9,840,996	234.11	9,840,996	234.11	9,840,996	234.11	9,840,996	234.11
GENERAL REVENUE	2,720,702	64.53	2,639,054	61.91	2,742,689	64.53	2,742,689	64.53	2,742,689	64.53	2,742,689	64.53
FEDERAL FUNDS	4,996,743	118.49	4,916,297	115.33	5,331,318	124.97	5,331,318	124.97	5,331,318	124.97	5,331,318	124.97
OTHER FUNDS	1,649,349	44.09	1,206,428	28.90	1,766,989	44.61	1,766,989	44.61	1,766,989	44.61	1,766,989	44.61
EXPENSE & EQUIPMENT	4,759,629	0.00	4,048,545	0.00	4,784,154	0.00	4,784,154	0.00	4,784,154	0.00	4,784,154	0.00
GENERAL REVENUE	791,357	0.00	767,616	0.00	785,868	0.00	785,868	0.00	785,868	0.00	785,868	0.00
FEDERAL FUNDS	3,367,527	0.00	2,814,524	0.00	3,391,496	0.00	3,391,496	0.00	3,391,496	0.00	3,391,496	0.00
OTHER FUNDS	600,745	0.00	466,405	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00
PROGRAM-SPECIFIC	1,030	0.00	0	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00
FEDERAL FUNDS	1,030	0.00	0	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00
TOTAL	\$14,127,453	227.11	\$12,810,324	206.14	\$14,626,180	234.11	\$14,626,180	234.11	\$14,626,180	234.11	\$14,626,180	234.11

Pay Plan FY14-Cost to Continue - 0000014

PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	58,602	0.00	58,602	0.00	58,602	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	16,144	0.00	16,144	0.00	16,144	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	31,252	0.00	31,252	0.00	31,252	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	11,206	0.00	11,206	0.00	11,206	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$58,602	0.00	\$58,602	0.00	\$58,602	0.00

Cost to continue the FY 2014 pay plan.

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.400													
MO HEALTHNET ADMIN - 90512C													
Pay Plan FY15-COLA - 0000015													
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	136,268	0.00	45,426	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	37,981	0.00	12,661	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	73,817	0.00	24,605	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	24,470	0.00	8,160	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$136,268	0.00	\$45,426	0.00	
General structure adjustment for all state employees. The Governor recommends 3% for the second half of Fiscal Year 2015 (starts January 1, 2015). The House recommends 1% beginning January 1, 2015.													

PAB Recommended Position Incrs - 0000016													
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	10,998	0.00	2,753	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	3,374	0.00	844	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	6,228	0.00	1,557	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,396	0.00	352	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$10,998	0.00	\$2,753	0.00	

Page 41. GOVERNOR REC: This item funds class-specific salary adjustments recommended by the PAB to improve recruitment and retention effective July 1, 2014. Youth Specialist I - Repositioning from range 15 to 16 and a two-step within-grade increase. Youth Specialist II, Youth Group Leader, Children's Service Worker I and II, Children's Service Worker Supervisor - two-step within-grade increase. RN, RN Senior, RN Clinical Operations, and RN Supervisor - 6% salary adjustment. RN Manager Bands I, II and III - 5% salary adjustment. This also includes PAB recommended security differentials for RN positions at Fulton State Hospital and SORTS in the maximum and intermediate security unit (RN staff in direct care at the maximum security units at Biggs and SORTS Fulton - 10%; RN staff in direct care at the intermediate security units at Fulton and Farmington - 5%). HOUSE COMM SUB REC: Same as Gov Rec with the following exceptions: Two-step within-grade increases are recommended as one-step increases, only recommend one-half of the percentage increases, and all salary adjustments effective January 1, 2015.

Medicaid expansion - 1886019													
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	1,564,000	26.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	782,000	13.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	782,000	13.00	0	0.00	
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	321,000	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	160,500	0.00	0	0.00	

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Regular House Bills

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.400													
MO HEALTHNET ADMIN - 90512C													
Medicaid expansion - 1886019													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	321,000	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	160,500	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,885,000	26.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

TOTAL - MO HEALTHNET ADMIN	\$14,127,453	227.11	\$12,810,324	206.14	\$14,626,180	234.11	\$14,684,782	234.11	\$16,717,048	260.11	\$14,732,961	234.11	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.405 MO HealthNet Division – Pharmacy Program (Clinical Services) Management

Book 5, page 123

This section provides funding for the contractor costs that support the Pharmacy and Clinical Services programs. Funding is used for cost containment initiatives and clinical policy decision-making to enhance efforts to provide appropriate and quality medical care to participants. The Division of Medical Services seeks to aid recipients and providers in their efforts to access the Medicaid program by utilizing contractor resources effectively.

Legal Base: RSMo 208.152 and 208.201; Federal – Social Security Act Section Number: 1903(a) and 42 CFR Part 433.15
Funding Sources: General Revenue, Federal, MO Rx Plan, and Third Party Liability (TPL) fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.405													
CLINICAL SRVC MGMT - 90516C													
CORE													
EXPENSE & EQUIPMENT	17,784,931	0.00	12,655,561	0.00	17,775,692	0.00	17,775,692	0.00	17,775,692	0.00	17,775,692	0.00	
GENERAL REVENUE	483,913	0.00	469,397	0.00	476,154	0.00	476,154	0.00	476,154	0.00	476,154	0.00	
FEDERAL FUNDS	12,215,288	0.00	11,126,813	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	
OTHER FUNDS	5,085,730	0.00	1,059,351	0.00	5,085,506	0.00	5,085,506	0.00	5,085,506	0.00	5,085,506	0.00	
PROGRAM-SPECIFIC	0	0.00	48,345	0.00	0	0.00	0	0.00	0	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	48,345	0.00	0	0.00	0	0.00	0	0.00	0	0.00	
TOTAL	\$17,784,931	0.00	\$12,703,906	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	
TOTAL - CLINICAL SRVC MGMT	\$17,784,931	0.00	\$12,703,906	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	\$17,775,692	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.410 **MO HealthNet Division – Women and Minority Health Care Outreach**

Book 5, page 130

This section provides client outreach and education about the MO HealthNet program and reduces disparities in healthcare access for women and minority populations.

Legal Base: RSMo 208.152 and 208.201; Federal – Social Security Act Section Number: 1903(a) and 42 CFR Part 433.15
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.410												
WOMEN & MINORITY OUTREACH - 90513C												
CORE												
EXPENSE & EQUIPMENT	1,114,750	0.00	1,063,072	0.00	1,114,750	0.00	1,114,750	0.00	1,114,750	0.00	1,114,750	0.00
GENERAL REVENUE	546,125	0.00	529,741	0.00	546,125	0.00	546,125	0.00	546,125	0.00	546,125	0.00
FEDERAL FUNDS	568,625	0.00	533,331	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00
TOTAL	\$1,114,750	0.00	\$1,063,072	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00
TOTAL - WOMEN & MINORITY OUTREACH	\$1,114,750	0.00	\$1,063,072	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00	\$1,114,750	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.415 MO HealthNet Division – Third Party Liability (TPL) Contracts

Book 5, page 139

This section provides funding to contract for the identification and collection of resources available to Medicaid recipients from third party sources. The TPL contractors recover from third party sources in cases where liability has not yet been determined, the third party resources were not known at the time of the Medicaid payment and/or for services which are federally mandated to be paid and then pursued for payment, e.g., prenatal medical care, preventive pediatric care, EPSDT and medical support cases.

Legal Base: RSMo 208.153 and 208.215; Federal – Social Security Act Section Number: 1902, 1903, 1906, 1912, 1917 and 42 CFR 433 Subpart D
Funding Sources: Federal and Third-Party Liability Collections (TPL)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.415													
TPL CONTRACTS - 90515C													
CORE													
EXPENSE & EQUIPMENT	6,000,000	0.00	5,107,924	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	
FEDERAL FUNDS	3,000,000	0.00	2,553,962	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	
OTHER FUNDS	3,000,000	0.00	2,553,962	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	
TOTAL	\$6,000,000	0.00	\$5,107,924	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.420 MO HealthNet Divisions – Information Systems

Book 5, page 148

This section provides funding for contractor fees associated with the operation of Missouri's Medicaid Management Information System and the Medicaid Fraud and Abuse Detection system (FADS). MMIS is an automated Medicaid claims payment system.

Legal Base: RSMo 208.201; Federal – Social Security Act Section Number: 1903(a) (3), and 42 CFR 433 Subpart C

Funding Sources: General Revenue, Federal, and Healthcare Technology Fund

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual

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Regular House Bills

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.420 INFORMATION SYSTEMS - 90522C												
CORE												
EXPENSE & EQUIPMENT	52,919,110	0.00	46,319,408	0.00	37,719,110	0.00	37,719,110	0.00	37,719,110	0.00	37,719,110	0.00
GENERAL REVENUE	4,838,940	0.00	4,693,772	0.00	4,838,940	0.00	4,838,940	0.00	4,838,940	0.00	4,838,940	0.00
FEDERAL FUNDS	46,560,170	0.00	40,188,971	0.00	32,880,170	0.00	32,880,170	0.00	32,880,170	0.00	32,880,170	0.00
OTHER FUNDS	1,520,000	0.00	1,436,665	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	0	0.00	0	0.00	8,716,867	0.00	8,716,867	0.00	8,716,867	0.00	8,716,867	0.00
FEDERAL FUNDS	0	0.00	0	0.00	6,695,180	0.00	6,695,180	0.00	6,695,180	0.00	6,695,180	0.00
OTHER FUNDS	0	0.00	0	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00
TOTAL	\$52,919,110	0.00	\$46,319,408	0.00	\$46,435,977	0.00	\$46,435,977	0.00	\$46,435,977	0.00	\$46,435,977	0.00

Sustaining MHD Technology Infr - 1886006

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	875,000	0.00	875,000	0.00	875,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	4,125,000	0.00	4,125,000	0.00	4,125,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00

Funding is requested to ensure that the Medicaid Management Information System (MMIS) is in compliance with federal requirements; to make changes to MMIS to comply with core operating rules; to standardize claims and business transactions; implement ICD-10 (federal deadline of Oct 2014); and begin reprocurement process for services provided under the MMIS and Clinical Management System for Pharmacy Claims and Prior Authorization (CMSP).

Medicaid expansion - 1886019

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	5,850,000	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	585,000	0.00	0	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.420													
INFORMATION SYSTEMS - 90522C													
Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	5,850,000	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	5,265,000	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,850,000	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

TOTAL - INFORMATION SYSTEMS	\$52,919,110	0.00	\$46,319,408	0.00	\$46,435,977	0.00	\$51,435,977	0.00	\$57,285,977	0.00	\$51,435,977	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.422 **MO HealthNet Divisions – Fraud/Abuse Prevention and Detection System**

Book N/A

New section created by the House for the purpose of funding a state-of-the-art fully integrated healthcare fraud, waste and abuse prevention system with HITRUST certification that includes predictive modeling and analytics with a prepayment component that is accessible via the web with the capability to measure return investment performance.

Legal Base:

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

CONFERENCE:

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Regular House Bills

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.422													
FRAUD PREVENTN & DETECTN SYSTM - 90520C													
Fraud Prevention & Detection - 1886031													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	12,000,000	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	3,000,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	9,000,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$12,000,000	0.00	
For the purpose of funding a state-of-the-art fully integrated healthcare fraud, waste and abuse prevention system with HITRUST certification that includes predictive modeling and analytics with a prepayment review component that is accessible via the web with the cabability to measure return investment performance.													

TOTAL - FRAUD PREVENTN & DETECTN SYS	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$12,000,000	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.425

MO HealthNet Division – Electronic Health Records Incentive

Book 5, page 165

This section provides funding for Missouri's MO HealthNet Electronic Health Record (EHR) Incentive program as established by the American Recovery and Reinvestment Act. The EHR Incentive program provides incentive payments for the adoption and meaningful use of certified EHR technology. These incentives are based on the provider's participation in Medicaid programs. The EHR Incentive program provides payments to eligible professionals and eligible hospitals for efforts to adopt, implement, or upgrade to certified EHR technology. Under the program, eligible professionals can receive up to \$63,750 in incentive payments over 6 years and hospital amounts are based on an established formula. The funding for this program was added to the budget in FY 2012

Legal Base: Federal Law - ARRA Section 4201; Federal Regulation – 42 CFR Parts 412,413, 422, & 495
Funding Sources: Federal
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core Reduction: (\$15,000,000) FED PSD core reduction based on expected expenditures for FY 2015

GOVERNOR:

Same as Department – no additional changes

HOUSE:

Same as Department – no additional changes

SENATE:

CONFERENCE:

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	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.425												
ELECTRONIC HLTH RECORDS INCNTV - 90523C												
CORE												
EXPENSE & EQUIPMENT	0	0.00	803,561	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	803,561	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	100,000,000	0.00	61,877,208	0.00	100,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00
FEDERAL FUNDS	100,000,000	0.00	61,877,208	0.00	100,000,000	0.00	85,000,000	0.00	85,000,000	0.00	85,000,000	0.00
TOTAL	\$100,000,000	0.00	\$62,680,769	0.00	\$100,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00
TOTAL - ELECTRONIC HLTH RECORDS INCN	\$100,000,000	0.00	\$62,680,769	0.00	\$100,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00	\$85,000,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.430

MO HealthNet Division – Money Follows the Person Grant Program

Book 5, page 172

This section provides funding the administration of the Money Follows the Person Grant Program. This demonstration grant program aides in the transition of individuals who are elderly, disabled or who have developmental disabilities from nursing facilities or state owned habilitation centers to Home and Community Based Services.

Legal Base: Section 6071 of the Federal Deficit Reduction Act of 2005; PL 109-171

Funding Sources: Federal Funds

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.430													
MONEY FOLLOWS THE PERSON GRANT - 90524C													
CORE													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	127,852	0.00	127,852	0.00	127,852	0.00	127,852	0.00	
PROGRAM-SPECIFIC	0	0.00	0	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	404,697	0.00	404,697	0.00	404,697	0.00	404,697	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.435 MO HealthNet Division – Adult Medicaid Quality Grant

Book 5, page 179

This section provides Federal appropriation authority to expend the Adult Medicaid Quality Measures grant. The purpose of is grant is to show how MO HealthNet will (a) test and evaluate methods for collections and reporting of the Initial Core Set Measures in varying delivery settings; (b) develop staff capacity to report data, analyze and use the data for monitoring and improving access and the quality of care in Medicaid; and (c) conduct at least two Medicaid quality improvement projects related to the Initial Core Measures.

Legal Base: Section 2701 of Health Care and Education Reconciliation Act
Funding Sources: Federal Funds
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.435													
ADULT MEDICAID QUALITY GRANT - 90529C													
CORE													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	
</													

DEPARTMENT OF SOCIAL SERVICES

Section 11.440 MO HealthNet Division – Title XIX - Pharmacy Services

Book 5, page 186

This section provides Medicaid funding for qualifying prescription drugs supplied by manufacturers for which there exists a rebate agreement between the manufacturer and the state or the federal department of Health and Human Services. In addition, this section provides funding for professional fees for pharmacists.

Legal Base: RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1902(a) (12), and 42 CFR 440.120
Funding Sources: General Revenue, Federal, Pharmacy Rebates (REBATE), Health Initiatives (HIF), Pharmacy Federal Reimbursement Allowance (PFRA), Healthy Families Trust Fund Health Care Account (HFTF), Third Party Liability Collections Fund, and Premium Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core Reduction: (\$14,950,905) OTHER PSD core reduction in Pharmacy Rebate funds due to less than expected collections – corresponding NDI from GR

GOVERNOR:

Core Reallocation In: \$42,811,789 GR PSD reallocated in from Medicare Clawback Part D (\$19,408,350); Nursing Facilities (\$7,099,169); Rehab & Specialty (\$7,137,953); Physician (\$1,900,340); Hospital (\$4,883,543); PACE (\$11,415); Dental (\$110,624); Home Health (\$52,512); NEMT (\$530,737); Hospital (\$1,645,885); and Women's Health (\$31,261)

HOUSE:

Core Reallocation Out: (\$42,811,789) GR PSD reallocated out to various Medicaid programs – reversed the Governor's core reallocations
Core Reduction: (\$5,566,822) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$3,167,698) PSD (GR \$617,764; FED \$1,760,276; & OTH \$789,658) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI
(\$1,630,000) PSD (GR \$601,551 & FED \$1,028,449) core reduction due to estimated savings related to Adult Therapies Benefits addition
(\$1,094,975) PSD (GR \$404,101 & FED \$690,874) core reduction due to estimated savings related to Adult Dental Coverage addition
(\$1,000,000) GR PSD core reduction – fund switch to Pharmacy Tax due to estimated savings related to added benefits
(\$912,936) (GR \$207,578 EE & \$705,358 PSD) core reduction

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440												
PHARMACY - 90541C												
CORE												
EXPENSE & EQUIPMENT	415,156	0.00	1,613,088	0.00	415,156	0.00	415,156	0.00	415,156	0.00	207,578	0.00
GENERAL REVENUE	207,578	0.00	1,599,975	0.00	207,578	0.00	207,578	0.00	207,578	0.00	0	0.00
FEDERAL FUNDS	207,578	0.00	13,113	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00
PROGRAM-SPECIFIC	921,361,145	0.00	909,472,778	0.00	954,284,400	0.00	939,333,495	0.00	982,145,284	0.00	926,168,642	0.00
GENERAL REVENUE	66,981,213	0.00	65,588,816	0.00	50,039,608	0.00	50,039,608	0.00	92,851,397	0.00	41,144,012	0.00
FEDERAL FUNDS	580,494,472	0.00	575,731,566	0.00	599,427,937	0.00	599,427,937	0.00	599,427,937	0.00	595,948,338	0.00
OTHER FUNDS	273,885,460	0.00	268,152,396	0.00	304,816,855	0.00	289,865,950	0.00	289,865,950	0.00	289,076,292	0.00
TOTAL	\$921,776,301	0.00	\$911,085,866	0.00	\$954,699,556	0.00	\$939,748,651	0.00	\$982,560,440	0.00	\$926,376,220	0.00

MHD Cost to Continue - 1886008												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	26,840,411	0.00	0	0.00	19,785,785	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	26,840,411	0.00	0	0.00	18,913,604	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	872,181	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$26,840,411	0.00	\$0	0.00	\$19,785,785	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

MHD GR Pickup - 1886002												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	14,950,905	0.00	3,227,722	0.00	14,950,905	0.00

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.440													
PHARMACY - 90541C													
MHD GR Pickup - 1886002													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	14,950,905	0.00	3,227,722	0.00	14,950,905	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	14,950,905	0.00	3,227,722	0.00	14,950,905	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$14,950,905	0.00	\$3,227,722	0.00	\$14,950,905	0.00	

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical-- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950).

Pharmacy PMPM Increase - 1886010													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	40,032,594	0.00	25,273,062	0.00	35,178,963	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	15,200,376	0.00	0	0.00	9,905,901	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	24,832,218	0.00	25,273,062	0.00	25,273,062	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$40,032,594	0.00	\$25,273,062	0.00	\$35,178,963	0.00	

This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.

FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	5,566,822	0.00	5,566,822	0.00	

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.440													
PHARMACY - 90541C													
FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	5,566,822	0.00	5,566,822	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	5,566,822	0.00	5,566,822	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,566,822	0.00	\$5,566,822	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(19,823,392)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(14,135,095)	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(3,346,174)	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(2,342,123)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$19,823,392)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.440													
PHARMACY - 90541C													
Pharmacy Reimbursement Allow - 1886033													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00	
Adds authority from the Pharmacy Reimbursement Allowance Fund (0144) due to increased provider tax revenues from increase prescriptions (as a savings related to added benefits). See GR reduction in core.													

TOTAL - PHARMACY	\$921,776,301	0.00	\$911,085,866	0.00	\$954,699,556	0.00	\$1,021,572,561	0.00	\$996,804,654	0.00	\$1,002,858,695	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.440 continued MO HealthNet Division – Pharmacy Medicare Part D-Clawback

Book 5, Page 199

This section provides funding for a transfer from the Pharmacy section for “Clawback” payments to the federal government. Part D of the Federal Medicare Prescription Drug Act requires states to pay Medicare a portion of the cost of Part D drugs attributable to what would have been paid for by the State absent the Part D drug benefit. Beginning January 1, 2006, the state is required to pay Medicare 90% of an average per person drug cost for each of the state’s full-benefit dual eligible individuals for each month.

Legal Basis: Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.

Funding Sources: General Revenue

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$19,408,350) GR PSD reallocated out to Pharmacy – lower projected cost for FY 2015

HOUSE:

Core Reallocation In: \$19,408,350 GR PSD reallocated back in from Pharmacy – reversed the Governor’s core reallocation

Core Reduction: (\$20,381,218) GR PSD core reduction due to lapse from change in the state’s phase-down contribution percentage of Clawback payment
(\$5,000,000) GR PSD core reduction

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440												
PHARMACY-MED PART D-CLAWBACK - 90543C												
CORE												
PROGRAM-SPECIFIC	193,470,530	0.00	193,470,530	0.00	200,480,745	0.00	200,480,745	0.00	181,072,395	0.00	175,099,527	0.00
GENERAL REVENUE	193,470,530	0.00	193,470,530	0.00	200,480,745	0.00	200,480,745	0.00	181,072,395	0.00	175,099,527	0.00
TOTAL	\$193,470,530	0.00	\$193,470,530	0.00	\$200,480,745	0.00	\$200,480,745	0.00	\$181,072,395	0.00	\$175,099,527	0.00
TOTAL - PHARMACY-MED PART D-CLAWBAC	\$193,470,530	0.00	\$193,470,530	0.00	\$200,480,745	0.00	\$200,480,745	0.00	\$181,072,395	0.00	\$175,099,527	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.440 continued MO HealthNet Division – Missouri RX Plan

Book 5, page 206

This section provides funding for the MO RX Plan under the MMA Medicare Part D Prescription Drug plan. Part D of the Federal Medicare Prescription Drug Act requires states to pay Medicare a portion of the cost of Part D drugs attributable to what would have been paid for by the State absent the Part D drug benefit. Beginning January 1, 2006, the state is required to pay Medicare 90% of an average per person drug cost for each of the state's full-benefit dual eligibles for each month.

Legal Basis: Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.
Funding Sources: General Revenue, Missouri Rx Plan and Health Families Trust Fund
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.440													
MISSOURI RX PLAN - 90538C													
CORE													
PROGRAM-SPECIFIC	24,385,543	0.00	20,274,962	0.00	23,753,091	0.00	23,753,091	0.00	23,753,091	0.00	23,753,091	0.00	
GENERAL REVENUE	0	0.00	0	0.00	6,370,046	0.00	6,370,046	0.00	6,370,046	0.00	6,370,046	0.00	
OTHER FUNDS	24,385,543	0.00	20,274,962	0.00	17,383,045	0.00	17,383,045	0.00	17,383,045	0.00	17,383,045	0.00	
TOTAL	\$24,385,543	0.00	\$20,274,962	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	\$23,753,091	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.445 **MO HealthNet Division – Pharmacy Federal Reimbursement Allowance Payments**

Book 5, page 214

This section provides funding for Pharmacy Reimbursement Allowance payments as provided by law.

Legal Base: RSMo 338.500; Federal – Social Security Act Section Number 1903 (w), 42 CFR 443 Subpart B.
Funding Sources: Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.445													
PHARMACY FRA - 90542C													
CORE													
PROGRAM-SPECIFIC	108,308,926	0.00	93,883,165	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	
OTHER FUNDS	108,308,926	0.00	93,883,165	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	
TOTAL	\$108,308,926	0.00	\$93,883,165	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	
TOTAL - PHARMACY FRA	\$108,308,926	0.00	\$93,883,165	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.450 & 11.455 MO HealthNet Division – Pharmacy Provider Tax Transfers

Book 5, Pages 221 & 227

These sections provide the mechanism to transfer funding between General Revenue and the Pharmacy Federal Reimbursement Allowance Fund for the pharmacy reimbursement program.

Funding Sources: General Revenue and Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.450												
GR PHARMACY FRA TRANSFER - 90535C												
CORE												
FUND TRANSFERS	35,764,609	0.00	35,538,786	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00
GENERAL REVENUE	35,764,609	0.00	35,538,786	0.00	35,764,609	0.00	35,764,609E	0.00	35,764,609E	0.00	35,764,609	0.00
TOTAL	\$35,764,609	0.00	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00
TOTAL - GR PHARMACY FRA TRANSFER	\$35,764,609	0.00	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00

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	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.455													
PHARMACY FRA TRANSFER - 90537C													
CORE													
FUND TRANSFERS	35,764,609	0.00	35,538,786	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	35,764,609	0.00	
OTHER FUNDS	35,764,609	0.00	35,538,786	0.00	35,764,609	0.00	35,764,609E	0.00	35,764,609E	0.00	35,764,609	0.00	
TOTAL	\$35,764,609	0.00	\$35,538,786	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	\$35,764,609	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.460 MO HealthNet Division – Title XIX - Physician's Services

Book 5, page 233

This section provides funding for all non-institutional physician-related services provided to eligible Title XIX recipients. Covered services include office, hospital and nursing home visits; obstetrical services; and typical medical procedures including surgeries, anesthesiology, pathology, laboratory and radiology.

Legal Base: RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1905(a) (2), (3), (5), (6), (9), (17), (21), 1905(r), 1915(d), 42 CFR 440.210, 440.500, 412.113(c), and 441-Subpart B
Funding Sources: General Revenue, Federal, Health Initiatives (HIF), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$5,435,761) GR PSD reallocated out to Pharmacy - \$1,900,340; Medicare Part A & B - \$2,622,698; CHIP - \$13,307; and Blind Medical - \$899,416

HOUSE:

Core Reallocation In: \$5,435,761 GR PSD reallocated back in – reversed the Governor's core reallocation
Core Reduction: (\$10,932,699) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$918,042) PSD (GR \$238,488 & FED \$679,554) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.460												
PHYSICIAN RELATED PROF - 90544C												
CORE												
EXPENSE & EQUIPMENT	5,500,000	0.00	3,894,775	0.00	5,500,000	0.00	5,500,000	0.00	5,500,000	0.00	5,500,000	0.00
GENERAL REVENUE	2,700,000	0.00	1,720,958	0.00	2,700,000	0.00	2,700,000	0.00	2,700,000	0.00	2,700,000	0.00
FEDERAL FUNDS	2,800,000	0.00	2,041,317	0.00	2,800,000	0.00	2,800,000	0.00	2,800,000	0.00	2,800,000	0.00
OTHER FUNDS	0	0.00	132,500	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	612,622,109	0.00	603,244,366	0.00	665,556,989	0.00	665,556,989	0.00	660,121,228	0.00	653,706,248	0.00
GENERAL REVENUE	201,016,460	0.00	201,995,502	0.00	209,403,482	0.00	209,403,482	0.00	203,967,721	0.00	198,232,295	0.00
FEDERAL FUNDS	402,221,427	0.00	392,039,954	0.00	448,675,392	0.00	448,675,392	0.00	448,675,392	0.00	447,995,838	0.00
OTHER FUNDS	9,384,222	0.00	9,208,910	0.00	7,478,115	0.00	7,478,115	0.00	7,478,115	0.00	7,478,115	0.00
TOTAL	\$618,122,109	0.00	\$607,139,141	0.00	\$671,056,989	0.00	\$671,056,989	0.00	\$665,621,228	0.00	\$659,206,248	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	4,896,953	0.00	0	0.00	1,681,029	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	4,896,953	0.00	0	0.00	1,681,029	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$4,896,953	0.00	\$0	0.00	\$1,681,029	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	10,932,699	0.00	10,932,699	0.00
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	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.460													
PHYSICIAN RELATED PROF - 90544C													
FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	10,932,699	0.00	10,932,699	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	10,932,699	0.00	10,932,699	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$10,932,699	0.00	\$10,932,699	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(11,002,715)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(9,710,926)	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(1,291,789)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$11,002,715)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

Primary Care Physician Rate - 1886036													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	26,771,251	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	9,879,930	0.00	

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.460													
PHYSICIAN RELATED PROF - 90544C													
Primary Care Physician Rate - 1886036													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	26,771,251	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	16,891,321	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$26,771,251	0.00	
Federal law allows payments for primary care services furnished by a physician with a primary specialty of family medicine, general internal medicine or pediatric medicine be paid at parity with Medicare beginning January 1, 2013. Federal match of 100% ends December 31, 2014. The increase is to continue the program from January through June of FY 2015 @ 82.5% of gap.													

TOTAL - PHYSICIAN RELATED PROF	\$618,122,109	0.00	\$607,139,141	0.00	\$671,056,989	0.00	\$675,953,942	0.00	\$665,551,212	0.00	\$698,591,227	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.465

MO HealthNet Divisions – Title XIX - Dental Services

Book 5, page 249

This section provides funding to reimburse dentists enrolled in the Missouri Medicaid program.

Legal Base: RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1905(a) (10), 42 CFR 440.100
Fund Sources: General Revenue, Federal, Health Initiatives (HIF), and Healthy Families Trust Fund – Health Care Account (HFTF)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$110,624) GR PSD reallocated out to Pharmacy

HOUSE:

Core Reallocation In: \$110,624 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$198,449) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$110,624) GR PSD core reduction due to estimated lapse

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465												
DENTAL - 90546C												
CORE												
EXPENSE & EQUIPMENT	0	0.00	402,522	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	402,522	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	20,313,841	0.00	16,014,002	0.00	17,978,686	0.00	17,978,686	0.00	17,868,062	0.00	17,669,613	0.00
GENERAL REVENUE	6,783,972	0.00	6,381,450	0.00	5,906,020	0.00	5,906,020	0.00	5,795,396	0.00	5,596,947	0.00
FEDERAL FUNDS	12,609,934	0.00	8,714,752	0.00	11,152,731	0.00	11,152,731	0.00	11,152,731	0.00	11,152,731	0.00
OTHER FUNDS	919,935	0.00	917,800	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00
TOTAL	\$20,313,841	0.00	\$16,416,524	0.00	\$17,978,686	0.00	\$17,978,686	0.00	\$17,868,062	0.00	\$17,669,613	0.00

FMAP Adjustment - 1886018												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	198,449	0.00	198,449	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	198,449	0.00	198,449	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$198,449	0.00	\$198,449	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.												

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.465													
DENTAL - 90546C													
Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(199,476)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(199,476)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$199,476)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

Adult Dental Benefits - 1886037													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	48,231,947	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	17,800,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	30,431,947	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$48,231,947	0.00	
Provides dental coverage for all Medicaid eligible adults. Currently, dental care for adults is only accessible to address trauma or when medically necessary. Individuals in a nursing facility or in an eligibility category for the blind or pregnant have comprehensive benefits (including dental). Dental benefits for children are currently covered.													

TOTAL - DENTAL	\$20,313,841	0.00	\$16,416,524	0.00	\$17,978,686	0.00	\$17,978,686	0.00	\$17,867,035	0.00	\$66,100,009	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.470 MO HealthNet Division – Title XIX - Medicare and Other Health Insurance Premiums

Book 5, page 259

This section provides funding for Medicare Part A (hospital) and Part B (medical) premiums as well as group health insurance premiums when it is more cost effective to do so rather than pay for an equivalent set of services with state funds (Medicaid).

Legal Base: RSMo 208.153; Federal – Social Security Act Section Number: 1905(p) (1), 1902(a) (10), 1906, 42 CFR 406.26 and 431.625

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation In: \$2,622,698 GR PSD reallocated in from Physician services

HOUSE:

Core Reallocation Out: (\$2,622,698) GR PSD reallocated back out – reversed the Governor's core reallocation

Core Reduction: (\$2,362,700) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$250,000) GR PSD core reduction

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470 PREMIUM PAYMENTS - 90547C												
CORE												
PROGRAM-SPECIFIC	178,886,284	0.00	178,886,284	0.00	181,712,730	0.00	181,712,730	0.00	184,335,428	0.00	179,100,030	0.00
GENERAL REVENUE	66,023,871	0.00	66,023,871	0.00	67,609,776	0.00	67,609,776	0.00	70,232,474	0.00	64,997,076	0.00
FEDERAL FUNDS	112,862,413	0.00	112,862,413	0.00	114,102,954	0.00	114,102,954	0.00	114,102,954	0.00	114,102,954	0.00
TOTAL	\$178,886,284	0.00	\$178,886,284	0.00	\$181,712,730	0.00	\$181,712,730	0.00	\$184,335,428	0.00	\$179,100,030	0.00

MHD Cost to Continue - 1886008												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	18,020,845	0.00	11,077,625	0.00	13,193,695	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	6,943,220	0.00	0	0.00	3,764,078	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	11,077,625	0.00	11,077,625	0.00	9,429,617	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$18,020,845	0.00	\$11,077,625	0.00	\$13,193,695	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

Medicare Premium Increase - 1886012												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	8,319,792	0.00	5,563,071	0.00	8,319,792	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,029,916	0.00	2,053,051	0.00	3,070,419	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.470													
PREMIUM PAYMENTS - 90547C													
Medicare Premium Increase - 1886012													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	8,319,792	0.00	5,563,071	0.00	8,319,792	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,289,876	0.00	3,510,020	0.00	5,249,373	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$8,319,792	0.00	\$5,563,071	0.00	\$8,319,792	0.00	
Federal law mandates that the Medicare Part A and Part B premiums cover a certain percentage of the cost of the Medicare program. The Medicaid program pays these premiums for Medicare/Medicaid dual eligibles. Funding is requested for anticipated increases in Medicare Part A (\$7 increase) and Part B (\$5 increase). The Governor's Rec is based on better FMAP rate information.													

FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	2,362,700	0.00	2,362,700	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	2,362,700	0.00	2,362,700	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,362,700	0.00	\$2,362,700	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.470													
PREMIUM PAYMENTS - 90547C													
Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(744,484)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(744,484)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$744,484)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

TOTAL - PREMIUM PAYMENTS	\$178,886,284	0.00	\$178,886,284	0.00	\$181,712,730	0.00	\$208,053,367	0.00	\$202,594,340	0.00	\$202,976,217	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.475 MO HealthNet Division – Title XIX - Nursing Facility Payments

Book 5, page 276

This section provides funding for the care of Medicaid patients in nursing facilities.

Legal Base: RSMo 208.152 and 208.153; Federal – Social Security Act Section Number: 1905(a) (4), 42 CFR 440.40 and 440.210
Funding Sources: General Revenue, Federal, Uncompensated Care (UC), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Transfer Out: (\$16,655,337) (GR \$6,146,652 PSD & FED \$10,508,685 PSD) transferred to Mental Health for the transition of Nursing Home individuals to a community setting
Core Reallocation Out: (\$7,099,169) GR PSD core reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$7,099,169 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$7,099,169) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$1,232,881) PSD (GR \$454,995 & FED \$777,886) core reduction due to estimated savings related to Adult Therapies Benefits addition

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475 NURSING FACILITIES - 90549C												
CORE												
PROGRAM-SPECIFIC	552,824,449	0.00	548,596,022	0.00	577,493,965	0.00	577,493,965	0.00	553,739,459	0.00	552,506,578	0.00
GENERAL REVENUE	140,444,904	0.00	140,444,904	0.00	149,986,646	0.00	149,986,646	0.00	136,740,825	0.00	136,285,830	0.00
FEDERAL FUNDS	342,117,357	0.00	339,877,400	0.00	357,245,131	0.00	357,245,131	0.00	346,736,446	0.00	345,958,560	0.00
OTHER FUNDS	70,262,188	0.00	68,273,718	0.00	70,262,188	0.00	70,262,188	0.00	70,262,188	0.00	70,262,188	0.00
TOTAL	\$552,824,449	0.00	\$548,596,022	0.00	\$577,493,965	0.00	\$577,493,965	0.00	\$553,739,459	0.00	\$552,506,578	0.00

FMAP Adjustment - 1886018												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	7,099,169	0.00	7,099,169	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	7,099,169	0.00	7,099,169	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$7,099,169	0.00	\$7,099,169	0.00

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

Medicaid expansion - 1886019												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(2,382,227)	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(1,369,695)	0.00	0	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.475													
NURSING FACILITIES - 90549C													
Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(2,382,227)	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(1,012,532)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$2,382,227)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

Long Term Care Rate Increase - 1886020													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	22,458,680	0.00	22,458,680	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	8,288,376	0.00	8,288,376	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	14,170,304	0.00	14,170,304	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$22,458,680	0.00	\$22,458,680	0.00	
GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$1,517,410 FED).													

TOTAL - NURSING FACILITIES	\$552,824,449	0.00	\$548,596,022	0.00	\$577,493,965	0.00	\$577,493,965	0.00	\$580,915,081	0.00	\$582,064,427	0.00	
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DEPARTMENT OF SOCIAL SERVICES

HB 11.475 continued MO HealthNet Division – Home Health

Book 5, page 288

This section provides funding for Home Health Services and PACE. These programs help Medicaid recipients remain in their home instead of seeking institutional care.

Legal Base: RSMo 208.152 and 208.168; Federal – Social Security Act Section Number: 1905(a) (7), (24), 1915(c), 42 CFR 440.170(f), 440.210, 440.130 and 440.180
Fund Sources: General Revenue, Federal, and Health Initiatives (HIF)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$52,512) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$52,512 GR PSD reallocated back in – reversed the Governor's core reallocation
Core Reduction: (\$52,512) GR PSD core reduction due to estimated lapse
(\$79,506) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$366,998) PSD (GR \$95,338 & FED \$271,660) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI

SENATE:

CONFERENCE:

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475												
HOME HEALTH - 90564C												
CORE												
PROGRAM-SPECIFIC	7,369,496	0.00	6,421,373	0.00	6,463,900	0.00	6,463,900	0.00	6,411,388	0.00	5,964,884	0.00
GENERAL REVENUE	2,649,210	0.00	2,649,210	0.00	2,305,703	0.00	2,305,703	0.00	2,253,191	0.00	2,078,347	0.00
FEDERAL FUNDS	4,560,981	0.00	3,617,637	0.00	3,998,892	0.00	3,998,892	0.00	3,998,892	0.00	3,727,232	0.00
OTHER FUNDS	159,305	0.00	154,526	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00
TOTAL	\$7,369,496	0.00	\$6,421,373	0.00	\$6,463,900	0.00	\$6,463,900	0.00	\$6,411,388	0.00	\$5,964,884	0.00

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	401,892	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	155,671	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	246,221	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$401,892	0.00	\$0	0.00	\$0	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	79,506	0.00	79,506	0.00
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	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.475													
HOME HEALTH - 90564C													
FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	79,506	0.00	79,506	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	79,506	0.00	79,506	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$79,506	0.00	\$79,506	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(697,054)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(180,644)	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(516,410)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$697,054)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

Long Term Care Rate Increase - 1886020													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	102,764	0.00	1,620,174	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	37,925	0.00	597,925	0.00	

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475												
HOME HEALTH - 90564C												
Long Term Care Rate Increase - 1886020												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	102,764	0.00	1,620,174	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	64,839	0.00	1,022,249	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$102,764	0.00	\$1,620,174	0.00
GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$1,517,410 FED).												

Adult Therapies Benefits - 1886035													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,126,558	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	784,806	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,341,752	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,126,558	0.00	
Provides occupational, speech and physical therapy benefits to all Medicaid eligible adults.													

TOTAL - HOME HEALTH	\$7,369,496	0.00	\$6,421,373	0.00	\$6,463,900	0.00	\$6,865,792	0.00	\$5,896,604	0.00	\$9,791,122	0.00	
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DEPARTMENT OF SOCIAL SERVICES

HB 11.475 continued

MO HealthNet Division – Program for All-Inclusive Care for the Elderly (PACE)

Book 5, page 296

This section provides funding for PACE, which is designed to help a MO HealthNet recipient remain in their home instead of seeking institutional care. In the FY 10 budget, PACE funding is being reallocated from the Home Health section to a new section.

Legal Base: RSMo 208.152 and 208.168; Federal – Social Security Act Section Number: 1905(a) (7), (24), 1915(c), 42 CFR 440.170(f), 440.210, 440.130 and 440.180
Fund Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$11,415) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$11,415 GR PSD reallocated back in – reversed the Governor's core reallocation

Core Reduction: (\$82,161) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

CONFERENCE:

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.475													
PACE - 90568C													
CORE													
PROGRAM-SPECIFIC	6,875,723	0.00	6,653,329	0.00	6,675,723	0.00	6,675,723	0.00	6,664,308	0.00	6,593,562	0.00	
GENERAL REVENUE	2,620,356	0.00	2,544,136	0.00	2,545,837	0.00	2,545,837	0.00	2,534,422	0.00	2,463,676	0.00	
FEDERAL FUNDS	4,255,367	0.00	4,109,193	0.00	4,129,886	0.00	4,129,886	0.00	4,129,886	0.00	4,129,886	0.00	
TOTAL	\$6,875,723	0.00	\$6,653,329	0.00	\$6,675,723	0.00	\$6,675,723	0.00	\$6,664,308	0.00	\$6,593,562	0.00	

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	499,076	0.00	308,826	0.00	272,458	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	190,250	0.00	0	0.00	68,258	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	308,826	0.00	308,826	0.00	204,200	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$499,076	0.00	\$308,826	0.00	\$272,458	0.00	

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

FMAP Adjustment - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	82,161	0.00	82,161	0.00	
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	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.475													
PACE - 90568C													
FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	82,161	0.00	82,161	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	82,161	0.00	82,161	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$82,161	0.00	\$82,161	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													
TOTAL - PACE	\$6,875,723	0.00	\$6,653,329	0.00	\$6,675,723	0.00	\$7,174,799	0.00	\$7,055,295	0.00	\$6,948,181	0.00	

DEPARTMENT OF SOCIAL SERVICES

HB 11.480

MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL) transfer to GR

Book 5, page 305

This section establishes a partnership between privately owned long-term care facilities and publicly operated long-term care related services, such as county nursing homes, which allows Missouri to generate new federal revenue by having private nursing homes assume financial responsibility for publicly funded long-term care services and supports. This shift in financial responsibility frees up public funding that can be used to access additional federal matching funds. The new dollars can be used to offset general revenue, increase reimbursement to providers of long-term care and supports, as well as assist local governments to develop and maintain its long-term service delivery system.

Legal Base: Federal - 42 CFR 447.272

Fund Sources: Federal and Other

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual			HB 2011 - FY 15 SOCIAL SERVICES										Regular House Bills	
FY 2013 BUDGET			FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED			
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.480														
LONG TERM SUPPORT UPL TRANSFER - 90545C														
CORE														
FUND TRANSFERS	10,990,982	0.00	0	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00		
OTHER FUNDS	10,990,982	0.00	0	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00	10,990,982	0.00		
TOTAL	\$10,990,982	0.00	\$0	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00	\$10,990,982	0.00		

DEPARTMENT OF SOCIAL SERVICES

HB 11.485

MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL)

Book 5, page 311

This section establishes a partnership between privately owned long-term care facilities and publicly operated long-term care related services, such as county nursing homes, which allows Missouri to generate new federal revenue by having private nursing homes assume financial responsibility for publicly funded long-term care services and supports. This shift in financial responsibility frees up public funding that can be used to access additional federal matching funds. The new dollars can be used to offset general revenue, increase reimbursement to providers of long-term care and supports, as well as assist local governments to develop and maintain its long-term service delivery system.

Legal Base: Federal - 42 CFR 447.272
Fund Sources: Federal and Other
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual			HB 2011 - FY 15 SOCIAL SERVICES										Regular House Bills
FY 2013 BUDGET			FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.485													
LONG TERM SUPPORT PAYMENTS - 90548C													
CORE													
PROGRAM-SPECIFIC	45,895,112	0.00	0	0.00	45,895,112	0.00	45,895,112	0.00	45,895,112	0.00	45,895,112	0.00	
FEDERAL FUNDS	28,383,118	0.00	0	0.00	28,393,011	0.00	28,393,011	0.00	28,393,011	0.00	28,393,011	0.00	
OTHER FUNDS	17,511,994	0.00	0	0.00	17,502,101	0.00	17,502,101	0.00	17,502,101	0.00	17,502,101	0.00	
TOTAL	\$45,895,112	0.00	\$0	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	
TOTAL - LONG TERM SUPPORT PAYMENTS	\$45,895,112	0.00	\$0	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	\$45,895,112	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.490

MO HealthNet Division – Rehabilitation and Specialty Services

Book 5, page 317

This section provides funding for the reimbursement of all other allowable, non-institutional services as provided by title XIX of the Social Security Act. These services include rehabilitation, optometry, audiology, ambulance, durable medical equipment, hospice, comprehensive day rehabilitation, and diabetics' self-management training.

Legal Base: RSMo 208.152; Federal – Social Security Act Section Number: 1905(a) (15), (18), 1905(o), 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170
Funding Sources: General Revenue, Federal, Health Initiatives (HIF), and Healthy Families Trust Fund – Health Care Account (HFTF)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$7,137,953) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$7,137,953 GR PSD reallocated back in – reversed the Governor's core reallocation

Core Reallocation Out: (\$12,707,330) PSD (GR \$4,689,640 & FED \$8,017,690) reallocated out to new section for Complex Rehabilitation Technology Products

Core Reduction: (\$7,210,737) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490												
REHAB AND SPECIALTY SERVICES - 90550C												
CORE												
EXPENSE & EQUIPMENT	1,716,000	0.00	456,157	0.00	1,716,000	0.00	1,716,000	0.00	1,716,000	0.00	1,716,000	0.00
GENERAL REVENUE	872,000	0.00	425,564	0.00	872,000	0.00	872,000	0.00	872,000	0.00	872,000	0.00
FEDERAL FUNDS	844,000	0.00	30,593	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00
PROGRAM-SPECIFIC	263,214,614	0.00	254,624,446	0.00	268,499,381	0.00	268,499,381	0.00	261,361,428	0.00	248,581,314	0.00
GENERAL REVENUE	84,954,090	0.00	85,400,526	0.00	85,819,317	0.00	85,819,317	0.00	78,681,364	0.00	73,918,940	0.00
FEDERAL FUNDS	158,857,775	0.00	149,827,017	0.00	162,221,014	0.00	162,221,014	0.00	162,221,014	0.00	154,203,324	0.00
OTHER FUNDS	19,402,749	0.00	19,396,903	0.00	20,459,050	0.00	20,459,050	0.00	20,459,050	0.00	20,459,050	0.00
TOTAL	\$264,930,614	0.00	\$255,080,603	0.00	\$270,215,381	0.00	\$270,215,381	0.00	\$263,077,428	0.00	\$250,297,314	0.00

MHD Cost to Continue - 1886008												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	279,768	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	279,768	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$279,768	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

Hospice Rate Increase - 1886011												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	343,078	0.00	343,078	0.00	343,078	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	130,267	0.00	126,613	0.00	126,613	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.490													
REHAB AND SPECIALTY SERVICES - 90550C													
Hospice Rate Increase - 1886011													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	343,078	0.00	343,078	0.00	343,078	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	212,811	0.00	216,465	0.00	216,465	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$343,078	0.00	\$343,078	0.00	\$343,078	0.00	
The MO HealthNet hospice rates are calculated based on the annual hospice rates established under Medicare. The Act provides for an annual increase in payment rates for hospice care services. The request is for a 1.95% increase. The Governor's recommendation is based on better FMAP rate information.													

FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	7,210,737	0.00	7,210,737	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	7,210,737	0.00	7,210,737	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$7,210,737	0.00	\$7,210,737	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(1,636,520)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(1,485,382)	0.00	0	0.00	

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490												
REHAB AND SPECIALTY SERVICES - 90550C												
Medicaid expansion - 1886019												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(1,636,520)	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(151,138)	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$1,636,520)	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.												

Long Term Care Rate Increase - 1886020

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,600,000	0.00	1,600,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	590,480	0.00	590,480	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,009,520	0.00	1,009,520	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,600,000	0.00	\$1,600,000	0.00

GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$1,517,410 FED).

Adult Therapies Benefits - 1886035

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	17,653,960	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	6,515,194	0.00

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.490													
REHAB AND SPECIALTY SERVICES - 90550C													
Adult Therapies Benefits - 1886035													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	17,653,960	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	11,138,766	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$17,653,960	0.00	
Provides occupational, speech and physical therapy benefits to all Medicaid eligible adults.													

Helicopter Emergency Medical - 1886038													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,884,190	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	695,360	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,188,830	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,884,190	0.00	
Provides funds to increase the Medicaid reimbursement base rate for Helicopter Emergency Medical Services (HEMS). This item provides approximately 20% of the funding gap between Medicaid and Medicare rates. This does not increase per patient transport mileage.													

Ambulance Districts Rate Inc - 1886044													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,375,114	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4,870,748	0.00	

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE			
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.490														
REHAB AND SPECIALTY SERVICES - 90550C														
Ambulance Districts Rate Inc - 1886044														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,375,114	0.00		
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	3,504,366	0.00		
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$8,375,114	0.00		
Provides the authority to implement a \$45 base rate increase for Ambulance Districts (A0427 and A0429).														

TOTAL - REHAB AND SPECIALTY SERVICES	\$264,930,614	0.00	\$255,080,603	0.00	\$270,215,381	0.00	\$270,558,459	0.00	\$270,594,723	0.00	\$287,644,161	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.490 continued MO HealthNet Division – Non-Emergency Medical Transportation (NEMT)

Book 5, page 335

This section provides funding for Non-Emergency Medical Transportation (NEMT).

Legal Base: RSMo 208.152; Federal – 42 CFR 431.53
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$530,737) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$530,737 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$530,737) GR PSD core reduction due to estimated lapse
(\$425,706) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.490													
NON-EMERGENCY TRANSPORT - 90561C													
CORE													
PROGRAM-SPECIFIC	36,843,494	0.00	34,074,576	0.00	41,455,931	0.00	41,455,931	0.00	40,925,194	0.00	40,499,488	0.00	
GENERAL REVENUE	11,579,111	0.00	11,579,111	0.00	13,340,917	0.00	13,340,917	0.00	12,810,180	0.00	12,384,474	0.00	
FEDERAL FUNDS	25,264,383	0.00	22,495,465	0.00	28,115,014	0.00	28,115,014	0.00	28,115,014	0.00	28,115,014	0.00	
TOTAL	\$36,843,494	0.00	\$34,074,576	0.00	\$41,455,931	0.00	\$41,455,931	0.00	\$40,925,194	0.00	\$40,499,488	0.00	

FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	425,706	0.00	425,706	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	425,706	0.00	425,706	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$425,706	0.00	\$425,706	0.00	

This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490												
NON-EMERGENCY TRANSPORT - 90561C												
Medicaid expansion - 1886019												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(172,516)	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(172,516)	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$172,516)	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.												

TOTAL - NON-EMERGENCY TRANSPORT	\$36,843,494	0.00	\$34,074,576	0.00	\$41,455,931	0.00	\$41,455,931	0.00	\$41,178,384	0.00	\$40,925,194	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.490 continued MO HealthNet Division – Community Health Access Programs

Book N/A

New section created by the House that provides state matching funds (50/50 State/Local Match) for Community Health Access Programs (CHAPs) focused on meeting the health care needs of their communities and reducing the costs incurred by health care providers when patients inappropriately access health care resources through Emergency Medical Services (EMS) or Emergency Departments (ED). This program will be managed by providers that either operate their own EMS or partner with a local ambulance district(s). Target population is ages 17-64 that, after receiving a full medical screening exam, are deemed to have a non-emergency medical condition that can be more appropriately treated by a primary care provider in a health care home or community resource center. Funding is for Springfield/Green County for \$500,000 and communities surrounding Christian Hospital in St. Louis for \$500,000.

Legal Base:

Funding Sources: General Revenue

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490												
COMMUNITY HEALTH ACCESS PRGRMS - 90579C												
Comm Health Access Prg (CHAPS) - 1886046												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00
Provides state matching funds (50/50 State/Local Match) for Community Health Access Programs (CHAPs) focused on meeting the health care needs of their communities and reducing the costs incurred by health care providers when patients inappropriately access health care resources through Emergency Medical Services (EMS) or Emergency Departments (EDs). This program will be managed by providers that either operate their own EMS or partner with a local ambulance district(s). Target population is ages 17-64 who, after receiving a full medical screening exam, are deemed to have a non-emergent medical condition that can be more appropriately treated by a primary care provider in a health care home or community resource center. Funding is for Springfield/Green County (\$500,000) and communities surrounding Christian Hospital in St. Louis (\$500,000).												
TOTAL - COMMUNITY HEALTH ACCESS PRGI	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.492

MO HealthNet Division – Complex Rehabilitation Technology Products

Book N/A

New section created by the House that provides funding for complex rehabilitation technology (CRT) items classified within the Medicare program as of January 1, 2014 as durable medical equipment that are individually configured for individuals to meet their specific and unique medical, physical, and functional needs and capacities for basic activities of daily living and instrumental activities of daily living identified as medically necessary to prevent hospitalization and/or institutionalization of a complex needs patient. Such items shall include, but not be limited to, complex rehabilitation power wheelchairs, highly configurable manual wheelchairs, adaptive seating and positioning systems, and other specialized equipment such as standing frames and gait trainers. The related Healthcare Common Procedure Coding System (HCPCS) billing codes include, but are not limited to pure complex rehabilitation technology codes and mixed complex rehabilitation technology codes which contain a mix of complex rehabilitation technology products and standard mobility and accessory products.

This section provides funding for HCPCS codes defined by the National Coalition for Assistive and Rehab Technology (NCART) as CRT to MO HealthNet allowables as of 04/01/2010. HCPCS codes adopted after 04/01/2010 shall be reimbursed at the current Medicare allowable. Manually priced items shall be reimbursed at ninety percent (90%) of the Manufacturer's Suggested Retail Price (MSRP) for manual priced manual and custom wheelchairs and accessories and ninety five (95%) of MSRP on manually priced power mobility devices and accessories

Legal Base: RSMo 208.152; Federal – Social Security Act Section Number: 1905(a) (15), (18), 1905(o), 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

Core Reallocation In: \$12,707,330 PSD (GR \$4,689,640 & FED \$8,017,690) reallocated in from Rehabilitation and Specialty Services

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.492													
COMPLEX REHAB TECHN LGY PRDCTS - 90577C													
CORE													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	12,707,330	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4,689,640	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,017,690	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$12,707,330	0.00	
Complex Rehabilitation Tech - 1886039													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,433,057	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	528,870	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	904,187	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,433,057	0.00	
Provides separate funding for complex rehabilitation technology (CRT). The related Healthcare Common Procedure Coding System (HCPCS) billing codes include, but are not limited to: E0637, E0638, E0641, E0642, E0986, E1002, E1003, E1004, E1005, E1006, E1007, E1008, E1009, E1010, E1011, E1014, E1037, E1161, E1220, E1228, E1229, E1231, E1232, E1233, E1234, E1235, E1236, E1237, E1238, E1239, E2209, E2291, E2292, E2293, E2294, E2295, E2300, E2301, E2310, E2311, E2312, E2313, E2321, E2322, E2323, E2324, E2325, E2326, E2327, E2328, E2329, E2330, E2331, E2351, E2373, E2374, E2376, E2377, E2609, E2610, E2617, E8000, E8001, E8002, K0005, K0835, K0836, K0837, K0838, K0839, K0840, K0841, K0842, K0843, K0848, K0849, K0850, K0851, K0852, K0853, K0854, K0855, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0863, K0864, K0868, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886, K0890, K0891, K0898, E0950, E0951, E0952, E0955, E0956, E0957, E0958, E0960, E0967, E0978, E0990, E1015, E1016, E1028, E1029, E1030, E2205, E2208, E2231, E2368, E2369, E2370, E2605, E2606, E2607, E2608, E2613, E2614, E2615, E2616, E2620, E2621, E2624, E2625, K0004, K0009, K0040, K0108, and K0669.													
TOTAL - COMPLEX REHAB TECHN LGY PRDU	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$14,140,387	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.495 & 11.500 MO HealthNet Division – Ground Ambulance Provider Tax Transfers

Book 5, Pages 343 & 349

These two sections provide the mechanism to transfer funding between General Revenue and the Ambulance Service Reimbursement Allowance Fund for Ambulance Services in the MO HealthNet program.

Legal Basis: RSMo. 190.800-190.839
Funding Sources: General Revenue and Ambulance Service Reimbursement Allowance Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

CONFERENCE:

Committee Markup Annual	HB 2011 - FY 15 SOCIAL SERVICES										Regular House Bills	
	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.495												
AMBULANCE SRV REIM ALLOW TRF - 90581C												
CORE												
FUND TRANSFERS	9,069,225	0.00	6,535,001	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00
GENERAL REVENUE	9,069,225	0.00	6,535,001	0.00	18,236,543	0.00	18,236,543 E	0.00	18,236,543 E	0.00	18,236,543	0.00
TOTAL	\$9,069,225	0.00	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00
TOTAL - AMBULANCE SRV REIM ALLOW TRF	\$9,069,225	0.00	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00

Committee Markup Annual	HB 2011 - FY 15 SOCIAL SERVICES										Regular House Bills	
	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.500												
GR AMBULANCE SRV REIM ALL TRF - 90583C												
CORE												
FUND TRANSFERS	9,069,225	0.00	6,535,001	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00	18,236,543	0.00
OTHER FUNDS	9,069,225	0.00	6,535,001	0.00	18,236,543	0.00	18,236,543E	0.00	18,236,543E	0.00	18,236,543	0.00
TOTAL	\$9,069,225	0.00	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00
TOTAL - GR AMBULANCE SRV REIM ALL TRF	\$9,069,225	0.00	\$6,535,001	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00	\$18,236,543	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.505 **MO HealthNet Division – Managed Care**

Book 5, page 355

The Division of Medical Services (DMS) operates an HMO-style managed care program, Managed Care Plus (MC+). Health plans contract with the state and are paid a monthly capitation payment for providing services for each enrollee. Participation in MC+ is mandatory for certain Medicaid eligibility groups within the regions in operation. There are three eligibility groups: (1) TANF Adults and Children, Refugees, Medicaid for Children, and 1115 Waiver Children; (2) Medicaid for Pregnant Women and 1115 Waiver Adults; and (3) children in state care and custody. Those recipients who also receive SSI disability payments have the option of choosing to receive services on a fee-for-service basis.

Legal Base: RSMo 208.166; Federal – Social Security Act Section Number: 1915(b), 42 CFR 434 Subpart C

Funding Sources: General Revenue, Federal, Health Initiatives (HIF), Federal Reimbursement Allowance (FRA), Healthy Families Trust Fund – Health Care Account (HFTF), and Medicaid managed Care Organization Reimbursement Allowance Fund

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

Core Reduction: (\$11,889,461) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$10,050,869) GR PSD core reduction due to estimated lapse
(\$5,220,516) PSD (GR \$1,295,564; FED \$3,691,620; & OTH \$233,332) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI
(\$1,000,000) GR PSD core reduction – funding was redirected to new program for CHAPS

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505												
MANAGED CARE - 90551C												
CORE												
EXPENSE & EQUIPMENT	0	0.00	1,608,701	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	1,605,201	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	3,500	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	1,126,120,521	0.00	1,097,874,612	0.00	1,182,760,062	0.00	1,182,760,062	0.00	1,182,760,062	0.00	1,154,599,216	0.00
GENERAL REVENUE	291,637,169	0.00	290,031,968	0.00	321,095,339	0.00	321,095,339	0.00	321,095,339	0.00	296,859,445	0.00
FEDERAL FUNDS	705,693,852	0.00	679,298,296	0.00	745,188,433	0.00	745,188,433	0.00	745,188,433	0.00	741,496,813	0.00
OTHER FUNDS	128,789,500	0.00	128,544,348	0.00	116,476,290	0.00	116,476,290	0.00	116,476,290	0.00	116,242,958	0.00
TOTAL	\$1,126,120,521	0.00	\$1,099,483,313	0.00	\$1,182,760,062	0.00	\$1,182,760,062	0.00	\$1,182,760,062	0.00	\$1,154,599,216	0.00

Managed Care Acturial Increase - 1886009												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	55,258,971	0.00	34,432,838	0.00	54,573,006	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	20,981,831	0.00	0	0.00	20,140,168	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	34,277,140	0.00	34,432,838	0.00	34,432,838	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$55,258,971	0.00	\$34,432,838	0.00	\$54,573,006	0.00

Funding is needed to fund an increase for Managed Care medical, delivery and Neonatal Intensive Care Unit services to ensure that managed care payments are actuarially sound. Funding is for the Eastern, Central and Western regions for July 2014 through June 2015. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. Federal rules and regulations require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.

FMAP Adjustment - 1886018												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	11,889,461	0.00	11,889,461	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505												
MANAGED CARE - 90551C												
FMAP Adjustment - 1886018												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	11,889,461	0.00	11,889,461	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	11,889,461	0.00	11,889,461	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$11,889,461	0.00	\$11,889,461	0.00
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.												

Medicaid expansion - 1886019												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(28,972,237)	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(13,878,160)	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(7,017,542)	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(8,076,535)	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$28,972,237)	0.00	\$0	0.00
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.												

Ambulance Districts Rate Inc - 1886044												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,109,430	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	699,995	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.505													
MANAGED CARE - 90551C													
Ambulance Districts Rate Inc - 1886044													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,109,430	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	409,435	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,109,430	0.00	
Provides the authority to implement a \$45 base rate increase for Ambulance Districts (A0427 and A0429).													

TOTAL - MANAGED CARE	\$1,126,120,521	0.00	\$1,099,483,313	0.00	\$1,182,760,062	0.00	\$1,238,019,033	0.00	\$1,200,110,124	0.00	\$1,222,171,113	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.510 MO HealthNet Division – Title XIX Payments - Hospital Services

Book 5, page 368

This section provides funding for inpatient and outpatient hospital services provided to eligible Missouri Medicaid recipients.

Legal Base: RSMo 208.152, 208.153, 208.453; Federal – Social Security Act Section Number: 1903(w), 1905(a) (1), (2), 1923(a-f), 42 CFR 440.10, 440.20, 412.106, and 433 Subpart B.
Funding Sources: General Revenue, Federal, Uncompensated Care (UC), Federal Reimbursement Allowance (FRA), Health Initiatives (HIF), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reduction: (\$10,011,950) OTHER PSD core reduction for one-time use of fund balance in FY 2014 budget
Core Reallocation Out: (\$10,210,491) GR PSD reallocated out to Pharmacy - \$6,529,428 and Blind Pension Medical - \$3,681,063

HOUSE:

Core Reallocation In: \$10,210,491 GR PSD reallocated back in – reversed the Governor's core reallocation
Core Transfer In: \$353,092 GR PSD transferred in from Dept. of Corrections for healthcare for Medicaid eligible inmates
Core Reduction: (\$8,564,606) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$1,645,885) GR PSD core reduction due to estimated lapse
(\$2,814,303) PSD (GR \$629,915; FED \$1,764,445; & \$419,943) core reduction due to estimated savings from DMH ADA Health Home Savings
(\$2,535,428) PSD (GR \$456,216; FED \$1,299,956; & OTH \$779,256) core reduction due to estimated savings related to the Fraud/Abuse Prevention and Detection System NDI
(\$1,447,166) PSD (GR \$534,077 & FED \$913,089) core reduction due to estimated savings related to Adult Dental Coverage addition

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510												
HOSPITAL CARE - 90552C												
CORE												
EXPENSE & EQUIPMENT	430,000	0.00	3,530,964	0.00	730,000	0.00	730,000	0.00	730,000	0.00	730,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	150,000	0.00	150,000	0.00	150,000	0.00	150,000	0.00
FEDERAL FUNDS	215,000	0.00	2,526,749	0.00	365,000	0.00	365,000	0.00	365,000	0.00	365,000	0.00
OTHER FUNDS	215,000	0.00	1,004,215	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00
PROGRAM-SPECIFIC	810,321,203	0.00	778,846,584	0.00	813,040,245	0.00	813,040,245	0.00	792,817,804	0.00	786,373,999	0.00
GENERAL REVENUE	20,943,641	0.00	20,943,641	0.00	30,330,998	0.00	30,330,998	0.00	20,120,507	0.00	18,853,391	0.00
FEDERAL FUNDS	513,645,249	0.00	483,237,025	0.00	510,523,697	0.00	510,523,697	0.00	510,523,697	0.00	506,546,207	0.00
OTHER FUNDS	275,732,313	0.00	274,665,918	0.00	272,185,550	0.00	272,185,550	0.00	262,173,600	0.00	260,974,401	0.00
TOTAL	\$810,751,203	0.00	\$782,377,548	0.00	\$813,770,245	0.00	\$813,770,245	0.00	\$793,547,804	0.00	\$787,103,999	0.00

MHD GR Pickup - 1886002												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	10,011,950	0.00	10,011,950	0.00	10,011,950	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	10,011,950	0.00	10,011,950	0.00	10,011,950	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$10,011,950	0.00	\$10,011,950	0.00	\$10,011,950	0.00

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950).

FMAP Adjustment - 1886018												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	8,564,606	0.00	8,564,606	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE			
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.510														
HOSPITAL CARE - 90552C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	8,564,606	0.00	8,564,606	0.00		
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	8,564,606	0.00	8,564,606	0.00		
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$8,564,606	0.00	\$8,564,606	0.00		
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(33,602,417)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(11,154,546)	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(4,235,582)	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(18,212,289)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$33,602,417)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510												
HOSPITAL CARE - 90552C												
Medicaid for DOC Inmates - 1886040												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	603,667	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	603,667	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$603,667	0.00

Department of Corrections inmates who leave state or local facilities for at least 24 hours to receive treatment in local hospitals or nursing facilities could be covered by Medicaid if otherwise eligible. In addition to those incarcerated, those on probation or parole or under house arrest could participate. This item provides federal Medicaid match authority for this purpose. The General Revenue (\$353,092) is being transferred to DSS from DOC in the core budget for the state match portion.

In-Home Telemonitoring - 1886047													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$100,000	0.00	

TOTAL - HOSPITAL CARE	\$810,751,203	0.00	\$782,377,548	0.00	\$813,770,245	0.00	\$823,782,195	0.00	\$778,521,943	0.00	\$806,384,222	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.515 **MO HealthNet Divisions – Tier 1 Safety Net Hospitals**

Book 5, page 382

This section provides ongoing funding to reimburse for health care services provided to Medicaid clients and the uninsured through Tier 1 Safety Net Hospitals. Enhanced payments are made to Truman Medical Center Physicians and UM-Kansas City Physicians.

Legal Base: 208.152, 208.153, RSMo; Social Security Act Sections 1905(a) (1) and (2), 1923(a)-(f); Federal Regulations 42 CFR 440.10 and 440.20

Funding Sources: Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual	HB 2011 - FY 15 SOCIAL SERVICES										Regular House Bills	
	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.515												
PHYSICIAN PAYMENTS SAFETY NET - 90558C												
CORE												
PROGRAM-SPECIFIC	8,000,000	0.00	5,588,529	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00
FEDERAL FUNDS	8,000,000	0.00	5,588,529	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00	8,000,000	0.00
TOTAL	\$8,000,000	0.00	\$5,588,529	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00
TOTAL - PHYSICIAN PAYMENTS SAFETY NET	\$8,000,000	0.00	\$5,588,529	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.520

MO HealthNet Divisions – Federally Qualified Health Centers FQHCs

Book 5, page 389

This section provides funding for FQHCs to expand access to primary care services for underserved individuals by expanding hours of operation, defraying costs for the uninsured and funding provider staff and infrastructure.

Legal Base: RSMo 208.152, 208.166, 660.026; Federal – Social Security Act Section Number: 1905(a) (2), 42 CFR 440.210 and 440.500.

Funding Sources: General Revenue and Healthcare Technology Fund

FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reduction: (\$3,270,000) OTHER PSD core reduction of one-time funding from the MO Senior Services Protection Fund
(\$3,170,310) FED PSD core reduction due to change in enhanced FMAP for Health Home model program – corresponding NDI to increase GR

HOUSE:

Same as Governor – no additional changes

SENATE:

CONFERENCE:

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.520												
FQHC DISTRIBUTION - 90559C												
CORE												
PROGRAM-SPECIFIC	14,820,000	0.00	10,400,213	0.00	15,570,000	0.00	9,129,690	0.00	9,129,690	0.00	9,129,690	0.00
GENERAL REVENUE	4,020,000	0.00	3,899,400	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
FEDERAL FUNDS	10,800,000	0.00	6,500,813	0.00	10,800,000	0.00	7,629,690	0.00	7,629,690	0.00	7,629,690	0.00
OTHER FUNDS	0	0.00	0	0.00	3,270,000	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$14,820,000	0.00	\$10,400,213	0.00	\$15,570,000	0.00	\$9,129,690	0.00	\$9,129,690	0.00	\$9,129,690	0.00

MHD GR Pickup - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,270,000	0.00	3,270,000	0.00	3,270,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$3,270,000	0.00	\$3,270,000	0.00	\$3,270,000	0.00

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950).

FQHC Health Homes - 1886007

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,170,310	0.00	2,049,459	0.00	2,049,459	0.00
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	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.520													
FQHC DISTRIBUTION - 90559C													
FQHC Health Homes - 1886007													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,170,310	0.00	2,049,459	0.00	2,049,459	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,170,310	0.00	2,049,459	0.00	2,049,459	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$3,170,310	0.00	\$2,049,459	0.00	\$2,049,459	0.00	

The MO HealthNet Division has implemented a Health Home provider program in accordance with Section 2703 of the Affordable Care Act of 2010. Health Home sites receive per-member-per-month (PMPM) payments for the additional services they are required to perform. Most of the primary care sites in the Health Home program are FQHC sites. Currently, Health Homes are funded at 90% federal match, which will continue through December 2013. For Health Home payments beginning January 1, 2014, the federal match rate reverts to the standard FMAP.

TOTAL - FQHC DISTRIBUTION	\$14,820,000	0.00	\$10,400,213	0.00	\$15,570,000	0.00	\$15,570,000	0.00	\$14,449,149	0.00	\$14,449,149	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.525 MO HealthNet Division – IGT Health Care Homes

Book 5, page 402

This section provides funding for payments for MO HealthNet participants with chronic conditions through intergovernmental transfers for health home sites affiliated with public entities. Health home sites will receive per-member-per-month (PMPM) payments for the additional services they will be required to perform.

Legal Base: Federal law – Section 2703 of the Affordable Care Act & Section 1945 of Title XIX of the Social Security Act

Funding Sources: Federal funds and Intergovernmental Transfer (IGT) fund

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.525												
IGT HEALTH CARE HOME - 90574C												
CORE												
PROGRAM-SPECIFIC	7,600,000	0.00	2,575,887	0.00	7,600,000	0.00	7,600,000	0.00	7,600,000	0.00	7,600,000	0.00
FEDERAL FUNDS	6,900,000	0.00	2,318,135	0.00	6,900,000	0.00	6,900,000	0.00	6,900,000	0.00	6,900,000	0.00
OTHER FUNDS	700,000	0.00	257,752	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00
TOTAL	\$7,600,000	0.00	\$2,575,887	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00
TOTAL - IGT HEALTH CARE HOME	\$7,600,000	0.00	\$2,575,887	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00	\$7,600,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.527 **MO HealthNet Division – Foster Kids Health Home Pilot Program**

Book N/A

New section created by the House that provides funding for a Medical and Behavior Health Home pilot program at SSM Cardinal Glennon Children's Medical Center in St. Louis for kids in Foster Care.

Legal Base:

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE			
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.527														
FOSTER KIDS HEALTH HOME - 90575C														
Foster Kids Medical & BH Home - 1886034														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,500,000	0.00		
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	250,000	0.00		
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,250,000	0.00		
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,500,000	0.00		
Provides funding for a Medical and Behavior Health Home for Kids in Foster Care for a pilot program at SSM Cardinal Glennon Children's Medical Center in St. Louis.														

TOTAL - FOSTER KIDS HEALTH HOME	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,500,000	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.528 MO HealthNet Division – Asthma Services

Book N/A

New section created by the House that provides funding for asthma educational services and environmental home assessments.

Legal Base:

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE			
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.528														
ASTHMA SERVICES - 90576C														
Asthma Services - 1886032														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	5,240,330	0.00		
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	524,033	0.00		
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4,716,297	0.00		
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,240,330	0.00		
Provides funding for asthma educational services and enviornmental home assessments.														

TOTAL - ASTHMA SERVICES	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,240,330	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.529

MO HealthNet Division – Regional Care Coordination Model

Book N/A

New section created by the House that provides funding to develop a Regional Care Coordination Model(s) among networks of health care providers to meet the needs of and costs incurred by Medicaid beneficiaries that frequently and inefficiently utilize emergency department (ED) services. This pilot project, with communities surrounding the Christian Hospital in St. Louis, shall create a model to be replicated across the state.

Legal Base:

Funding Sources: General Revenue and Federal

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the House

GOVERNOR:

New section recommended by the House

HOUSE:

New section recommended by the House

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.529													
REGIONAL CARE COORDINATION - 90578C													
Regional Care Coordination - 1886041													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	5,000,000	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	500,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4,500,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,000,000	0.00	
The Department of Social Services shall develop a Regional Care Coordination Model(s) among existing network(s) of health care providers to meet the needs of and reduce the costs incurred by Medicaid beneficiaries that frequently and inefficiently utilize emergency department (ED) services. This pilot project in the St. Louis region, shall create a model to be replicated across the state.													

TOTAL - REGIONAL CARE COORDINATION	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$5,000,000	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.530 MO HealthNet Division – Federal Reimbursement Allowance

Book 5, page 409

This section provides funding for the federal reimbursement allowance hospital care program under Title XIX of the Social Security Act.

Legal Base: RSMo 208.453; Federal – Social Security Act Section Number: 1903(w), 42 CFR 433 Subpart B.
Funding Sources: Federal Reimbursement Allowance (FRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.530												
FED REIMB ALLOWANCE - 90553C												
CORE												
EXPENSE & EQUIPMENT	0	0.00	437,675	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	437,675	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	988,018,734	0.00	1,011,146,024	0.00	1,022,818,734	0.00	1,022,818,734	0.00	1,022,818,734	0.00	1,022,818,734	0.00
OTHER FUNDS	988,018,734	0.00	1,011,146,024	0.00	1,022,818,734E	0.00	1,022,818,734E	0.00	1,022,818,734E	0.00	1,022,818,734	0.00
TOTAL	\$988,018,734	0.00	\$1,011,583,699	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00
Authority Increase Removed E - 1886042												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	429,411,080	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	429,411,080	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$429,411,080	0.00
TOTAL - FED REIMB ALLOWANCE												
	\$988,018,734	0.00	\$1,011,583,699	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,022,818,734	0.00	\$1,452,229,814	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.535

MO HealthNet Division – Intergovernmental Transfer (IGT)

Book 5, page 417

This section provides the accounting mechanism for the transfer of funds from the DSS Intergovernmental Transfer (IGT) Fund to the General Revenue Fund for the purpose of providing the state match for Medicaid payments.

Legal Base: N/A

Funding Sources: Intergovernmental Transfer (IGT) Fund

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an "E"

GOVERNOR:

Recommended an "E"

HOUSE:

House removed the "E"

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.535												
IGT EXPEND TRANSFER - 90570C												
CORE												
FUND TRANSFERS	86,141,041	0.00	86,141,041	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00	86,456,256	0.00
OTHER FUNDS	86,141,041	0.00	86,141,041	0.00	86,456,256	0.00	86,456,256 E	0.00	86,456,256 E	0.00	86,456,256	0.00
TOTAL	\$86,141,041	0.00	\$86,141,041	0.00	\$86,456,256	0.00	\$86,456,256	0.00	\$86,456,256	0.00	\$86,456,256	0.00

MHD Transfer Authority - 1886014

FUND TRANSFERS	0	0.00	0	0.00	0	0.00	10,428,959	0.00	10,428,959	0.00	10,428,959	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	10,428,959E	0.00	10,428,959E	0.00	10,428,959	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$10,428,959	0.00	\$10,428,959	0.00	\$10,428,959	0.00	
Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.													

TOTAL - IGT EXPEND TRANSFER	\$86,141,041	0.00	\$86,141,041	0.00	\$86,456,256	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.540 MO HealthNet Division – Payments to Tier 1 Safety Net Hospitals with Intergovernmental Transfer (IGT)

Book 5, Page 424

This section provides the accounting mechanism for the payment of funds to Tier 1 Safety Net Hospitals using Intergovernmental transfers. Payments from this program are made to MU Hospitals and Clinics; MO Rehabilitation Center; and Truman Medical Center.

Legal Base: N/A
Funding Sources: Intergovernmental Transfer (IGT) Fund & Federal Funds
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

Committee Markup Annual			HB 2011 - FY 15 SOCIAL SERVICES								Regular House Bills	
FY 2013 BUDGET			FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.540												
IGT SAFETY NET HOSPITALS - 90571C												
CORE												
PROGRAM-SPECIFIC	199,854,549	0.00	168,379,866	0.00	199,854,549	0.00	199,854,549	0.00	199,854,549	0.00	199,854,549	0.00
FEDERAL FUNDS	129,505,748	0.00	104,861,346	0.00	129,505,748	0.00	129,505,748	0.00	129,505,748	0.00	129,505,748	0.00
OTHER FUNDS	70,348,801	0.00	63,518,520	0.00	70,348,801	0.00	70,348,801	0.00	70,348,801	0.00	70,348,801	0.00
TOTAL	\$199,854,549	0.00	\$168,379,866	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00
TOTAL - IGT SAFETY NET HOSPITALS	\$199,854,549	0.00	\$168,379,866	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00	\$199,854,549	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.545 MO HealthNet Division – Intergovernmental Transfer (IGT) for DMH Medicaid Program

Book 5, Page 431

This section provides funding to allow MO HealthNet to pay DMH for CSTAR and CPR services using the certified public expenditures (CPE) process and Intergovernmental Transfer (IGT). This transfer proves to CMS that the state match is available for the CPR and CSTAR programs.

Legal Base: N/A
Funding Sources: Intergovernmental Transfer (IGT) Fund
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.545												
IGT DMH MEDICAID PROGRAM - 90572C												
CORE												
PROGRAM-SPECIFIC	275,518,237	0.00	261,060,282	0.00	292,590,597	0.00	292,590,597	0.00	292,590,597	0.00	292,590,597	0.00
FEDERAL FUNDS	170,518,237	0.00	162,205,417	0.00	181,011,173	0.00	181,011,173E	0.00	181,011,173E	0.00	181,011,173	0.00
OTHER FUNDS	105,000,000	0.00	98,854,865	0.00	111,579,424	0.00	111,579,424E	0.00	111,579,424E	0.00	111,579,424	0.00
TOTAL	\$275,518,237	0.00	\$261,060,282	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00
Authority Increase Removed E - 1886042												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	21,000,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	13,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$21,000,000	0.00
TOTAL - IGT DMH MEDICAID PROGRAM	\$275,518,237	0.00	\$261,060,282	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$292,590,597	0.00	\$313,590,597	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.550 MO HealthNet Division – Women’s Health Services

Book 5, page 438

Provides funding for women’s health services provided to MO HealthNet participants covered through the 1115 Waiver.

Legal Base: RSMo 208.453, 208.152, 208.153; Federal – Social Security Act Section Number 1115, 2100, 1903(w), 1923 (a-f), 42 CFR 433 Subpart B and 412.106.
Funding Sources: General Revenue, Federal, Federal Reimbursement Allowance (FRA), and Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation Out: (\$31,261) GR PSD reallocated out to the Pharmacy section

HOUSE:

Core Reallocation In: \$31,261 GR PSD reallocated back in – reversed the Governor’s core reallocation
Core Reduction: (\$31,261) GR PSD core reduction due to estimated lapse
(\$31,033) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550												
WOMEN'S HEALTH SRVC - 90554C												
CORE												
PROGRAM-SPECIFIC	11,089,177	0.00	9,262,406	0.00	10,540,915	0.00	10,540,915	0.00	10,509,654	0.00	10,478,621	0.00
GENERAL REVENUE	1,845,337	0.00	1,845,337	0.00	1,259,044	0.00	1,259,044	0.00	1,227,783	0.00	1,196,750	0.00
FEDERAL FUNDS	8,791,150	0.00	7,155,930	0.00	9,065,081	0.00	9,065,081	0.00	9,065,081	0.00	9,065,081	0.00
OTHER FUNDS	452,690	0.00	261,139	0.00	216,790	0.00	216,790	0.00	216,790	0.00	216,790	0.00
TOTAL	\$11,089,177	0.00	\$9,262,406	0.00	\$10,540,915	0.00	\$10,540,915	0.00	\$10,509,654	0.00	\$10,478,621	0.00

MHD Cost to Continue - 1886008												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	126,860	0.00	0	0.00	36,133	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	126,860	0.00	0	0.00	36,133	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$126,860	0.00	\$0	0.00	\$36,133	0.00

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

Pharmacy PMPM Increase - 1886010												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	205,537	0.00	184,983	0.00	205,537	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	20,554	0.00	0	0.00	20,554	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE			
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.550														
WOMEN'S HEALTH SRVC - 90554C														
Pharmacy PMPM Increase - 1886010														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	205,537	0.00	184,983	0.00	205,537	0.00		
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	184,983	0.00	184,983	0.00	184,983	0.00		
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$205,537	0.00	\$184,983	0.00	\$205,537	0.00		
This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.														

FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	31,033	0.00	31,033	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	31,033	0.00	31,033	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$31,033	0.00	\$31,033	0.00	
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.													

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(765,108)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(630,866)	0.00	0	0.00	

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.550													
WOMEN'S HEALTH SRVC - 90554C													
Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(765,108)	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(134,242)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$765,108)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

TOTAL - WOMEN'S HEALTH SRVC	\$11,089,177	0.00	\$9,262,406	0.00	\$10,540,915	0.00	\$10,873,312	0.00	\$9,960,562	0.00	\$10,751,324	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.555 MO HealthNet Division – Children’s Health Insurance Program (CHIP)

Book 5, page 447

For the purpose of funding programs approved by the Director of Social Services designed to enhance access to care for uninsured children. The state children’s health insurance program (CHIP) Title XXI funds are used for this expanded MO HealthNet population.

Legal Base: RSMo 208.453, 208.152, 208.153; Federal – Social Security Act Section Number 1115, 2100, 1903(w), 1923 (a-f), 42 CFR 433 Subpart B and 412.106.
Funding Sources: General Revenue, Federal, Federal Reimbursement Allowance (FRA), Health Initiatives (HIF), Pharmacy Rebates (REBATE), Premium (PREMIUM), Medicaid Managed Care Organization Reimbursement Allowance, and Pharmacy Reimbursement Allowance
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

Core Reallocation In: \$13,307 GR PSD reallocated in from the Physician section

HOUSE:

Core Reallocation Out: (\$13,307) GR PSD reallocated out – reversed the Governor’s core reallocation

Core Reduction: (\$1,554,551) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.555												
CHILDREN'S HEALTH INS PROGRAM - 90556C												
CORE												
PROGRAM-SPECIFIC	177,733,545	0.00	171,919,507	0.00	180,875,309	0.00	180,875,309	0.00	180,888,616	0.00	179,320,758	0.00
GENERAL REVENUE	27,758,255	0.00	27,758,255	0.00	30,607,523	0.00	30,607,523	0.00	30,620,830	0.00	29,052,972	0.00
FEDERAL FUNDS	130,434,010	0.00	125,688,850	0.00	132,920,538	0.00	132,920,538	0.00	132,920,538	0.00	132,920,538	0.00
OTHER FUNDS	19,541,280	0.00	18,472,402	0.00	17,347,248	0.00	17,347,248	0.00	17,347,248	0.00	17,347,248	0.00
TOTAL	\$177,733,545	0.00	\$171,919,507	0.00	\$180,875,309	0.00	\$180,875,309	0.00	\$180,888,616	0.00	\$179,320,758	0.00

MHD Cost to Continue - 1886008												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4,214,783	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,042,125	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,172,658	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$4,214,783	0.00
To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.												

Pharmacy PMPM Increase - 1886010												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,123,881	0.00	1,559,353	0.00	2,123,881	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	564,528	0.00	0	0.00	564,528	0.00

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.555													
CHILDREN'S HEALTH INS PROGRAM - 90556C													
Pharmacy PMPM Increase - 1886010													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,123,881	0.00	1,559,353	0.00	2,123,881	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,559,353	0.00	1,559,353	0.00	1,559,353	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,123,881	0.00	\$1,559,353	0.00	\$2,123,881	0.00	
This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.													

Managed Care Acturial Increase - 1886009													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	4,191,862	0.00	3,077,665	0.00	4,877,827	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	1,114,197	0.00	0	0.00	1,800,162	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	3,077,665	0.00	3,077,665	0.00	3,077,665	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$4,191,862	0.00	\$3,077,665	0.00	\$4,877,827	0.00	
Funding is needed to fund an increase for Managed Care medical, delivery and Neonatal Intensive Care Unit services to ensure that managed care payments are actuarially sound. Funding is for the Eastern, Central and Western regions for July 2014 through June 2015. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. Federal rules and regulations require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.													

FMAP Adjustment - 1886018													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,554,551	0.00	1,554,551	0.00	

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE			
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED			
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.555														
CHILDREN'S HEALTH INS PROGRAM - 90556C														
FMAP Adjustment - 1886018														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,554,551	0.00	1,554,551	0.00		
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,554,551	0.00	1,554,551	0.00		
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,554,551	0.00	\$1,554,551	0.00		
This funding is requested to address the change in the Federal Medical Assistance Percentage (FMAP). The blended match rate changes are regular rate from 61.865% to 63.095% and enhanced rate from 73.305% to 74.170%. Each year the Centers for Medicare and Medicaid Services (CMS) revised the percentage of Medicaid costs that the federal government will reimburse to each state. The enhanced rate is paid on the CHIP and the Women with Breast and Cervical Cancer programs. The increased costs of this decision item have an equal offset in the affected program cores as core reductions.														

Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(9,808,765)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(1,988,879)	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(7,275,161)	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	(544,725)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$9,808,765)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

TOTAL - CHILDREN'S HEALTH INS PROGRAM	\$177,733,545	0.00	\$171,919,507	0.00	\$180,875,309	0.00	\$187,191,052	0.00	\$177,271,420	0.00	\$192,091,800	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.560 MO HealthNet Division – Transitional Medicaid (ACA Medicaid Expansion)

Book 5, Page 82

New section recommended by the Governor to expand Medicaid coverage to non-elderly, low income adults up to 138% of the Federal Poverty Level.

Legal Base: Affordable Care Act

Funding Sources: Federal Funds

FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the Governor.

GOVERNOR:

New section recommended by the Governor.

HOUSE:

Removed section from budget

SENATE:

CONFERENCE:

Committee Markup Annual			HB 2011 - FY 15 SOCIAL SERVICES										Regular House Bills	
FY 2013 BUDGET			FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED			
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.560														
TRANSITIONAL MEDICAID - 90584C														
Medicaid expansion - 1886019														
PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	0	0.00	1,642,736,262	0.00	0	0.00	
FEDERAL FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	1,642,736,262	0.00	0	0.00	
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,642,736,262	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.														
TOTAL - TRANSITIONAL MEDICAID		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,642,736,262	0.00	\$0	0.00	

DEPARTMENT OF SOCIAL SERVICES

Section 11.565 & 11.570 MO HealthNet Division – Federal Reimbursement Allowance Transfer

Book 5, Page 458 & 464

These transfer sections allow funding to be transferred between General Revenue and the Federal Reimbursement Allowance Fund.

Funding Sources: General Revenue and Federal Reimbursement Allowance Fund
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.565												
GR FRA-TRANSFER - 90840C												
CORE												
FUND TRANSFERS	538,406,226	0.00	538,406,226	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00
GENERAL REVENUE	538,406,226	0.00	538,406,226	0.00	569,173,828	0.00	569,173,828E	0.00	569,173,828E	0.00	569,173,828	0.00
TOTAL	\$538,406,226	0.00	\$538,406,226	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00	\$569,173,828	0.00

MHD Transfer Authority - 1886014												
FUND TRANSFERS	0	0.00	0	0.00	0	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	15,438,909E	0.00	15,438,909E	0.00	15,438,909	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00
Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.												

TOTAL - GR FRA-TRANSFER	\$538,406,226	0.00	\$538,406,226	0.00	\$569,173,828	0.00	\$584,612,737	0.00	\$584,612,737	0.00	\$584,612,737	0.00
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	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.570												
FED REIMBURSE ALLOW-TRANSFER - 90845C												
CORE												
FUND TRANSFERS	538,406,226	0.00	538,406,226	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00
OTHER FUNDS	538,406,226	0.00	538,406,226	0.00	569,173,828	0.00	569,173,828 E	0.00	569,173,828 E	0.00	569,173,828	0.00
TOTAL	538,406,226	0.00	538,406,226	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00	569,173,828	0.00

MHD Transfer Authority - 1886014

FUND TRANSFERS	0	0.00	0	0.00	0	0.00	15,438,909	0.00	15,438,909	0.00	15,438,909	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	15,438,909 E	0.00	15,438,909 E	0.00	15,438,909	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$15,438,909	0.00	\$15,438,909	0.00	\$15,438,909	0.00

Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.

TOTAL - FED REIMBURSE ALLOW-TRANSFEI	538,406,226	0.00	538,406,226	0.00	569,173,828	0.00	584,612,737	0.00	584,612,737	0.00	584,612,737	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.575 & 11.580 MO HealthNet Division – Nursing Facility FRA Transfer

Book 5, Pages 470 & 476

These transfer sections allow funding to be transferred between General Revenue and the Nursing Facility Federal reimbursement Allowance Fund.

Legal Basis: N/A
Funding Sources: General Revenue and Nursing Facility Federal Reimbursement Allowance (NFFRA)
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Requested an “E”

GOVERNOR:

Recommended an “E”

HOUSE:

House removed the “E”

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.575													
GR NFFRA-TRANSFER - 90850C													
CORE													
FUND TRANSFERS	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	
GENERAL REVENUE	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866E	0.00	161,893,866E	0.00	161,893,866	0.00	
TOTAL	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	

MHD Transfer Authority - 1886014

FUND TRANSFERS	0	0.00	0	0.00	0	0.00	49,056,644	0.00	49,056,644	0.00	49,056,644	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	49,056,644E	0.00	49,056,644E	0.00	49,056,644	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$49,056,644	0.00	\$49,056,644	0.00	\$49,056,644	0.00	

Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.

TOTAL - GR NFFRA-TRANSFER	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	
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	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.580												
NURSING FACILITY REIM-TRANSFER - 90855C												
CORE												
FUND TRANSFERS	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00
OTHER FUNDS	161,893,866	0.00	161,893,866	0.00	161,893,866	0.00	161,893,866 E	0.00	161,893,866 E	0.00	161,893,866	0.00
TOTAL	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00

MHD Transfer Authority - 1886014

FUND TRANSFERS	0	0.00	0	0.00	0	0.00	49,056,644	0.00	49,056,644	0.00	49,056,644	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	49,056,644 E	0.00	49,056,644 E	0.00	49,056,644	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$49,056,644	0.00	\$49,056,644	0.00	\$49,056,644	0.00

Aligns budget authority with planned transfers. Intergovernmental transfers and transfer appropriations related to the provider taxes demonstrate to the federal government that there is state match to draw down Medicaid federal funds for allowable costs under the Medicaid program.

TOTAL - NURSING FACILITY REIM-TRANSFER	\$161,893,866	0.00	\$161,893,866	0.00	\$161,893,866	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.585 **MO HealthNet Division – Nursing Home Program - NFFRA Transfer to Quality of Care Fund**

Book 5, Page 483

This section transfers moneys from the Nursing Facility Federal Reimbursement Allowance Fund to the Nursing Facility Quality of Care Fund to be used for additional inspections and other quality of care activities.

Funding Sources: Nursing Facility Federal Reimbursement Allowance (NFFRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE:

CONFERENCE:

	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.585												
NURSING FACILITY QLTY-TRANSFER - 90860C												
CORE												
FUND TRANSFERS	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
OTHER FUNDS	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
TOTAL	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00
TOTAL - NURSING FACILITY QLTY-TRANSFEE	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.590 **MO HealthNet Division – Nursing Facility Federal Reimbursement Allowance Payments**

Book 5, page 490

This section provides funding for per diem payments for patient care provided in nursing facilities under Title XIX of the Social Security Act.

Legal Base: RSMo 198.401; Federal – Social Security Act Section Number 1903 (w), 42 CFR 443 Subpart B.
Funding Sources: Nursing Facility Federal Reimbursement Allowance (NFFRA)
FY 2014 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

No changes

SENATE

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.590												
NURSING FACILITY FED REIMB AL - 90567C												
CORE												
PROGRAM-SPECIFIC	301,027,717	0.00	284,584,398	0.00	301,027,717	0.00	301,027,717	0.00	301,027,717	0.00	301,027,717	0.00
OTHER FUNDS	301,027,717	0.00	284,584,398	0.00	301,027,717	0.00	301,027,717	0.00	301,027,717	0.00	301,027,717	0.00
TOTAL	\$301,027,717	0.00	\$284,584,398	0.00	\$301,027,717	0.00	\$301,027,717	0.00	\$301,027,717	0.00	\$301,027,717	0.00

Long Term Care Rate Increase - 1886020												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	10,429,340	0.00	10,429,340	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	10,429,340	0.00	10,429,340	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$10,429,340	0.00	\$10,429,340	0.00
GOVERNOR REC: Funding for a rate increase to long term care providers. Includes a \$2.50 per diem rate increase for nursing facilities with an additional \$1.25 trend factor increase from NFFRA (\$3.75 Total), and a 2% rate increase for hospice and home health providers. HOUSE COMM SUB REC: Same as Gov Rec with an additional rate increase for home health of \$1,517,410 (\$560,000 GR and \$1,517,410 FED).												

TOTAL - NURSING FACILITY FED REIMB AL	\$301,027,717	0.00	\$284,584,398	0.00	\$301,027,717	0.00	\$301,027,717	0.00	\$311,457,057	0.00	\$311,457,057	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.595 MO HealthNet Division – Department of Elementary and Secondary Education (DESE) Services

Book 5, page 500

This section provides funding for the federal match related DESE Medicaid services, including school based administrative services and Early Periodic Screening, Diagnosis, and Treatment (EPSDT) services.

Legal Base: N/A
Funding Sources: General Revenue and Federal
FY 2014 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No changes

GOVERNOR:
No changes

HOUSE:
No changes

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.595												
SCHOOL DISTRICT CLAIMING - 90569C												
CORE												
PROGRAM-SPECIFIC	54,723,724	0.00	19,622,983	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00
GENERAL REVENUE	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00	69,954	0.00
FEDERAL FUNDS	54,653,770	0.00	19,553,029	0.00	54,653,770	0.00	54,653,770	0.00	54,653,770	0.00	54,653,770	0.00
TOTAL	54,723,724	0.00	19,622,983	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00
TOTAL - SCHOOL DISTRICT CLAIMING	54,723,724	0.00	19,622,983	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00	54,723,724	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.600 MO HealthNet Division – Blind Pension Medical

Book 5, page 509

This section provides funding for a state only health care benefit for non-Medicaid blind individuals who qualify for the Blind Pension benefit.

Legal Base: RSMo 208.151, 208.152
Funding Sources: General Revenue, Health Initiatives (HIF), and Pharmacy Federal Reimbursement Allowance (PFRA)
FY 2013 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core Reduction: (\$25,122,517) OTHER PSD core reduction of one-time funding from the Mo Senior Services Protection Fund (\$21,489,941) and Blind Pension Premium Fund (\$3,632,576)

GOVERNOR:

Core Reallocation In: \$4,580,479 GR PSD reallocated in from the Physician section - \$899,416 and Hospital section - \$3,681,063

HOUSE:

Core Reallocation Out: (\$4,580,479) GR PSD reallocated out – reversed the Governor's core reallocation

SENATE:

CONFERENCE:

Committee Markup Annual

HB 2011 - FY 15 SOCIAL SERVICES

Regular House Bills

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.600													
BLIND PENSION MEDICAL BENEFITS - 90573C													
CORE													
PROGRAM-SPECIFIC	0	0.00	0	0.00	25,122,517	0.00	0	0.00	4,580,479	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	4,580,479	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	25,122,517	0.00	0	0.00	0	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$25,122,517	0.00	\$0	0.00	\$4,580,479	0.00	\$0	0.00	

MHD Cost to Continue - 1886008

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,446,982	0.00	0	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	6,446,982	0.00	0	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$6,446,982	0.00	\$0	0.00	\$0	0.00	

To ensure adequate funding is available, on-going funding is requested for items in the FY 2014 supplemental budget. The amounts requested are based on FY 2014 Medicaid costs projections.

MHD GR Pickup - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	25,122,517	0.00	25,122,517	0.00	0	0.00	
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	FY 2013		FY 2013		FY 2014		FY 2015		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.600													
BLIND PENSION MEDICAL BENEFITS - 90573C													
MHD GR Pickup - 1886002													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	25,122,517	0.00	25,122,517	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	25,122,517	0.00	25,122,517	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$25,122,517	0.00	\$25,122,517	0.00	\$0	0.00	

General Revenue funding is requested to replace Pharmacy Rebates funding (\$14,950,905). Revenues are projected to be less than appropriated amounts in FY 2014. In addition, the FY 2014 budget included the Missouri Senior Services Protection Fund in Blind Medical (\$21,489,941) (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) and Federally Qualified Health Center (\$3,270,000) programs as one-time. GR is requested to replace this one-time funding. General Revenue is requested to replace Blind Pension Premium Fund (\$3,632,576) budgeted in Blind Pension Medical -- (HOUSE COMM SUB does not recommend funding for this portion of NDI - see section 11.128) Also, GR is requested to replace one-time Premium Fund cash balance in Hospital program (\$10,011,950).

Pharmacy PMPM Increase - 1886010													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	458,176	0.00	0	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	458,176	0.00	0	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$458,176	0.00	\$0	0.00	\$0	0.00	

This decision item requests funding for the on-going inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures due to increased utilization and therapies.

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.600													
BLIND PENSION MEDICAL BENEFITS - 90573C													
Medicaid expansion - 1886019													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	(559,770)	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	(559,770)	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	(\$559,770)	0.00	\$0	0.00	
Funding for Medicaid coverage for Missourians up to 138 percent FPL and associated state savings.													

TOTAL - BLIND PENSION MEDICAL BENEFIT	\$0	0.00	\$0	0.00	\$25,122,517	0.00	\$32,027,675	0.00	\$29,143,226	0.00	\$0	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.605 MO HealthNet Division – Medicaid Supplemental Pool

Book 5, page 517

This section provides additional funding for any Medicaid program or the state medical program that was provided an appropriation for the fiscal year. This pool is meant to prevent large Medicaid supplemental appropriations resulting from significant caseload growth.

Legal Base: various Medicaid citations previously noted.

Fund Sources: Federal, Uncompensated Care (UC), Pharmacy Rebates (REBATES), Third Party Liability Collections (TPL), Federal Reimbursement Allowance (FRA), Premium (PREM), and Nursing Facility Federal Reimbursement Allowance

FY 2013 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No changes

GOVERNOR:

No changes

HOUSE:

Core Reduction: (\$35,698,082) (FED \$1,555,525 EE & \$22,551,961 PSD and OTHER \$1,292,625 EE & \$10,297,971 PSD) core reduction – eliminates section

SENATE:

CONFERENCE:

	FY 2013 BUDGET		FY 2013 ACTUAL		FY 2014 BUDGET		FY 2015 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.605												
MO HLTHNET SUPP POOL - 90582C												
CORE												
EXPENSE & EQUIPMENT	2,848,150	0.00	126,195	0.00	2,848,150	0.00	2,848,150	0.00	2,848,150	0.00	0	0.00
FEDERAL FUNDS	1,555,525	0.00	34,488	0.00	1,555,525	0.00	1,555,525	0.00	1,555,525	0.00	0	0.00
OTHER FUNDS	1,292,625	0.00	91,707	0.00	1,292,625	0.00	1,292,625	0.00	1,292,625	0.00	0	0.00
PROGRAM-SPECIFIC	32,849,932	0.00	31,533,382	0.00	32,849,932	0.00	32,849,932	0.00	32,849,932	0.00	0	0.00
FEDERAL FUNDS	22,551,961	0.00	20,225,460	0.00	22,551,961	0.00	22,551,961	0.00	22,551,961	0.00	0	0.00
OTHER FUNDS	10,297,971	0.00	11,307,922	0.00	10,297,971	0.00	10,297,971	0.00	10,297,971	0.00	0	0.00
TOTAL	\$35,698,082	0.00	\$31,659,577	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$0	0.00
TOTAL - MO HLTHNET SUPP POOL	\$35,698,082	0.00	\$31,659,577	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$35,698,082	0.00	\$0	0.00