

FISCAL YEAR 2018

**TRULY AGREED AND FINALLY PASSED
(AFTER VETO)**

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

HOUSE BILL 11

Vetoed: None

99th General Assembly

First Regular Session

Prepared by Senate Appropriations Committee Staff

DEPARTMENT OF SOCIAL SERVICES

Section 11.400 MO HealthNet Division – Administration

Book 5, Page 128

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (10.00) FED FTE core reduction – vacant positions

HOUSE:

Core transfer out: (\$7,852) GR PS transferred to Office of Administration (HB 5) – funding for Chief Operating Officer (COO)
(\$2,853) GR PS transferred to Office of Administration (HB 5) – funding for boards and commissions
(\$1,769) GR PS transferred to Office of Administration (HB 5) – funding for constituent services
(\$8,809) GR PS & (0.25) GR FTE transferred to Office of Administration (HB 5) – funding for contract review

SENATE:

Three of the four House transfers listed above were transferred to three new sections in HB 12, Section 12.006 – Constituent Services, Section 12.007 – Boards and Commissions, and Section 12.008 – Chief Operating Officer.

Core transfer out: (\$582) GR PS transferred to HB 12 – funding for boards and commissions
(\$237) GR PS transferred to HB 5 – funding for contract review

CONFERENCE:

Same as Senate – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400														
MO HEALTHNET ADMIN - 90512C														
CORE														
PERSONAL SERVICES	9,533,656	210.17	10,009,127	234.11	10,009,127	234.11	10,009,127	224.11	9,987,844	223.86	9,987,025	223.86	9,987,025	223.86
GENERAL REVENUE	2,542,259	56.21	2,673,274	64.53	2,673,274	64.53	2,673,274	64.53	2,651,991	64.28	2,651,172	64.28	2,651,172	64.28
FEDERAL FUNDS	5,266,774	116.60	5,503,213	124.97	5,503,213	124.97	5,503,213	114.97	5,503,213	114.97	5,503,213	114.97	5,503,213	114.97
OTHER FUNDS	1,724,623	37.36	1,832,640	44.61	1,832,640	44.61	1,832,640	44.61	1,832,640	44.61	1,832,640	44.61	1,832,640	44.61
EXPENSE & EQUIPMENT	4,248,644	0.00	4,633,198	0.00	4,633,198	0.00	4,633,198	0.00	4,633,198	0.00	4,633,198	0.00	4,633,198	0.00
GENERAL REVENUE	672,954	0.00	693,067	0.00	693,067	0.00	693,067	0.00	693,067	0.00	693,067	0.00	693,067	0.00
FEDERAL FUNDS	3,026,518	0.00	3,333,341	0.00	3,333,341	0.00	3,333,341	0.00	3,333,341	0.00	3,333,341	0.00	3,333,341	0.00
OTHER FUNDS	549,172	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00	606,790	0.00
PROGRAM-SPECIFIC	0	0.00	1,729	0.00	1,729	0.00	1,729	0.00	1,729	0.00	1,729	0.00	1,729	0.00
GENERAL REVENUE	0	0.00	699	0.00	699	0.00	699	0.00	699	0.00	699	0.00	699	0.00
FEDERAL FUNDS	0	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00
TOTAL	\$13,782,300	210.17	\$14,644,054	234.11	\$14,644,054	234.11	\$14,644,054	224.11	\$14,622,771	223.86	\$14,621,952	223.86	\$14,621,952	223.86

Federal Overtime Change - 0000016

PERSONAL SERVICES	0	0.00	0	0.00	544	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	353	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	191	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$544	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

Increase necessary to comply with new federal overtime rules which are effective December 1, 2016.

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400														
MO HEALTHNET ADMIN - 90512C														
MMIS - Replacement - 1886031														
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	435,448	7.00	0	0.00	435,448	7.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	217,724	3.50	0	0.00	217,724	3.50	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	217,724	3.50	0	0.00	217,724	3.50	0	0.00
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	37,366	0.00	0	0.00	37,366	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	18,683	0.00	0	0.00	18,683	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	18,683	0.00	0	0.00	18,683	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$472,814	7.00	\$0	0.00	\$472,814	7.00	\$0	0.00
MMIS replacement will occur over the next three to five years during which time the existing systems need to be maintained. Funds will pay for data warehouse, support Medicaid reforms, Health Information Network, four staff for upcoming MMIS procurements, and six part-time staff for implementation.														

Ambulance UPL - 1886033														
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	89,634	2.00	89,634	2.00	89,634	2.00	89,634	2.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	44,817	1.00	44,817	1.00	44,817	1.00	44,817	1.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	44,817	1.00	44,817	1.00	44,817	1.00	44,817	1.00
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	10,604	0.00	10,604	0.00	10,604	0.00	10,604	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,302	0.00	5,302	0.00	5,302	0.00	5,302	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	5,302	0.00	5,302	0.00	5,302	0.00	5,302	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$100,238	2.00	\$100,238	2.00	\$100,238	2.00	\$100,238	2.00
Provides additional reimbursement for Ground Emergency Medical Transportation (GEMT) providers who participate in the program. The bill allows MO HealthNet to implement and administer supplemental payments to GEMT providers for allowable expenditures.														

TOTAL - MO HEALTHNET ADMIN	\$13,782,300	210.17	\$14,644,054	234.11	\$14,644,598	234.11	\$15,217,106	233.11	\$14,723,009	225.86	\$15,195,004	232.86	\$14,722,190	225.86
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DEPARTMENT OF SOCIAL SERVICES

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

Book 5, Page 142

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES														Regular House Bills
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.405														
CLINICAL SRVC MGMT - 90516C														
CORE														
EXPENSE & EQUIPMENT	13,563,171	0.00	15,161,455	0.00	15,161,455	0.00	15,161,455	0.00	15,161,455	0.00	15,161,455	0.00	15,161,455	0.00
GENERAL REVENUE	448,059	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00
FEDERAL FUNDS	11,598,523	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00
OTHER FUNDS	1,516,589	0.00	2,485,506	0.00	2,485,506	0.00	2,485,506	0.00	2,485,506	0.00	2,485,506	0.00	2,485,506	0.00
TOTAL	\$13,563,171	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00
TOTAL - CLINICAL SRVC MGMT	\$13,563,171	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 5, Page 151

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.410														
WOMEN & MINORITY OUTREACH - 90513C														
CORE														
EXPENSE & EQUIPMENT	1,066,198	0.00	1,098,421	0.00	1,098,421	0.00	1,098,421	0.00	1,098,421	0.00	1,098,421	0.00	1,098,421	0.00
GENERAL REVENUE	513,902	0.00	529,796	0.00	529,796	0.00	529,796	0.00	529,796	0.00	529,796	0.00	529,796	0.00
FEDERAL FUNDS	552,296	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00
TOTAL	\$1,066,198	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00
TOTAL - WOMEN & MINORITY OUTREACH	\$1,066,198	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 5, Page 160

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 (TPL) Collections
FY 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual

	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.415														
TPL CONTRACTS - 90515C														
CORE														
EXPENSE & EQUIPMENT	5,155,488	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00
FEDERAL FUNDS	2,577,744	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00
OTHER FUNDS	2,577,744	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00
TOTAL	\$5,155,488	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00
TOTAL - TPL CONTRACTS	\$5,155,488	0.00	\$6,000,000	0.00	\$6,000,000	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 170

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation within: \pm \$13,689,210 (GR \$847,343; FED \$10,820,180; & OTH \$2,021,687) PSD reallocated to EE within in section to more closely align budget with planned expenditures

GOVERNOR:

Core reduction: \$15,387,396 FED EE core reduction

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.420														
INFORMATION SYSTEMS - 90522C														
CORE														
EXPENSE & EQUIPMENT	45,161,973	0.00	67,619,110	0.00	81,308,320	0.00	65,920,924	0.00	65,920,924	0.00	65,920,924	0.00	65,920,924	0.00
GENERAL REVENUE	7,164,695	0.00	10,538,940	0.00	11,386,283	0.00	11,386,283	0.00	11,386,283	0.00	11,386,283	0.00	11,386,283	0.00
FEDERAL FUNDS	36,023,342	0.00	57,080,170	0.00	67,900,350	0.00	52,512,954	0.00	52,512,954	0.00	52,512,954	0.00	52,512,954	0.00
OTHER FUNDS	1,973,936	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	2,021,687	0.00
PROGRAM-SPECIFIC	0	0.00	13,689,210	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	847,343	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	10,820,180	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	2,021,687	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$45,161,973	0.00	\$81,308,320	0.00	\$81,308,320	0.00	\$65,920,924	0.00	\$65,920,924	0.00	\$65,920,924	0.00	\$65,920,924	0.00

MMIS - Contract Extensions - 1886018

EXPENSE & EQUIPMENT	0	0.00	0	0.00	1,542,206	0.00	1,542,206	0.00	1,542,206	0.00	1,542,206	0.00	1,542,206	0.00
GENERAL REVENUE	0	0.00	0	0.00	390,866	0.00	390,866	0.00	390,866	0.00	390,866	0.00	390,866	0.00
FEDERAL FUNDS	0	0.00	0	0.00	1,151,340	0.00	1,151,340	0.00	1,151,340	0.00	1,151,340	0.00	1,151,340	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1,542,206	0.00	\$1,542,206	0.00	\$1,542,206	0.00	\$1,542,206	0.00	\$1,542,206	0.00

MO HealthNet contracts with Infocrossing and Xerox to provide development, operation, and support of MMIS, pharmacy, and clinical services programs. This provides a 2.4% annual increase as required under the Infocrossing contract, and a 10% increase to the Xerox base contract.

MMIS - Replacement - 1886031

EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	19,827,728	0.00	0	0.00	19,827,728	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	4,440,332	0.00	0	0.00	4,440,332	0.00	0	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.420														
INFORMATION SYSTEMS - 90522C														
MMIS - Replacement - 1886031														
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	19,827,728	0.00	0	0.00	19,827,728	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	15,387,396	0.00	0	0.00	15,387,396	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$19,827,728	0.00	\$0	0.00	\$19,827,728	0.00	\$0	0.00
MMIS replacement will occur over the next three to five years during which time the existing systems need to be maintained. Funds will pay for data warehouse, support Medicaid reforms, Health Information Network, four staff for upcoming MMIS procurements, and six part-time staff for implementation.														
TOTAL - INFORMATION SYSTEMS	\$45,161,973	0.00	\$81,308,320	0.00	\$82,850,526	0.00	\$87,290,858	0.00	\$67,463,130	0.00	\$87,290,858	0.00	\$67,463,130	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.425 **MO HealthNet Division – Electronic Health Records Incentive**

Book 5, Page 187

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation within: ± \$1,303,000 FED PSD reallocated to EE within in section to more closely align budget with planned expenditures

GOVERNOR:

Core reduction: (\$5,000,000) FED PSD core reduction excess federal appropriation authority based on planned expenditures for FY 2018

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	1,274,583	0.00	0	0.00	1,303,000	0.00	1,303,000	0.00	1,303,000	0.00	1,303,000	0.00	1,303,000	0.00
FEDERAL FUNDS	1,274,583	0.00	0	0.00	1,303,000	0.00	1,303,000	0.00	1,303,000	0.00	1,303,000	0.00	1,303,000	0.00
PROGRAM-SPECIFIC	20,611,352	0.00	40,000,000	0.00	38,697,000	0.00	33,697,000	0.00	33,697,000	0.00	33,697,000	0.00	33,697,000	0.00
FEDERAL FUNDS	20,611,352	0.00	40,000,000	0.00	38,697,000	0.00	33,697,000	0.00	33,697,000	0.00	33,697,000	0.00	33,697,000	0.00
TOTAL	\$21,885,935	0.00	\$40,000,000	0.00	\$40,000,000	0.00	\$35,000,000	0.00	\$35,000,000	0.00	\$35,000,000	0.00	\$35,000,000	0.00

TOTAL - ELECTRONIC HLTH RECORDS INCNTV	\$21,885,935	0.00	\$40,000,000	0.00	\$40,000,000	0.00	\$35,000,000	0.00	\$35,000,000	0.00	\$35,000,000	0.00	\$35,000,000	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.430 **MO HealthNet Division – Money Follows the Person Grant Program**

Book 5, Page 195

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation within: ± \$79,272 FED PSD reallocated to EE within in section to more closely align budget with planned expenditures

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	374,365	0.00	453,277	0.00	532,549	0.00	532,549	0.00	532,549	0.00	532,549	0.00	532,549	0.00
FEDERAL FUNDS	374,365	0.00	453,277	0.00	532,549	0.00	532,549	0.00	532,549	0.00	532,549	0.00	532,549	0.00
PROGRAM-SPECIFIC	0	0.00	79,272	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	79,272	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$374,365	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00	\$532,549	0.00
TOTAL - MONEY FOLLOWS THE PERSON GR	\$374,365	0.00	\$532,549	0.00	\$532,549	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 – Pharmacy Services

Book 5, Page 203

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 2017 GR W/H:	\$42,800,000

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction:	(\$116,583,319) (GR \$25,365,995 PSD & FED \$91,217,324 PSD) core reduction due to anticipated lapse (\$66,877,823) FED PSD core reduction of one-time Federal Funds (\$15,032,914) (GR \$5,527,903 PSD & FED \$9,505,011 PSD) core reduction due to savings related to interchangeable biologic products (SB 875)
Core reallocation out:	(\$17,100,000) GR PSD core reallocation to Physician Services section
Core reallocation in:	\$1,488,810 OTHER PSD reallocated in from Managed Care section

GOVERNOR:

Core reduction:	(\$6,877,550) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
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HOUSE:

Core reduction:	(\$13,989,927) (GR \$5,000,000 PSD & FED \$8,989,927 PSD) core reduction due to polypharmacy savings
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SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435														
PHARMACY - 90541C														
CORE														
EXPENSE & EQUIPMENT	744,008	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00
GENERAL REVENUE	744,008	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00	207,578	0.00
PROGRAM-SPECIFIC	1,174,957,611	0.00	1,443,031,360	0.00	1,228,926,114	0.00	1,222,048,564	0.00	1,208,058,637	0.00	1,208,058,637	0.00	1,208,058,637	0.00
GENERAL REVENUE	159,811,973	0.00	120,721,992	0.00	72,728,094	0.00	65,850,544	0.00	60,850,544	0.00	60,850,544	0.00	60,850,544	0.00
FEDERAL FUNDS	728,067,781	0.00	1,004,320,720	0.00	836,720,562	0.00	836,720,562	0.00	827,730,635	0.00	827,730,635	0.00	827,730,635	0.00
OTHER FUNDS	287,077,857	0.00	317,988,648	0.00	319,477,458	0.00	319,477,458	0.00	319,477,458	0.00	319,477,458	0.00	319,477,458	0.00
TOTAL	\$1,175,701,619	0.00	\$1,443,238,938	0.00	\$1,229,133,692	0.00	\$1,222,256,142	0.00	\$1,208,266,215	0.00	\$1,208,266,215	0.00	\$1,208,266,215	0.00

MHD Cost to Continue - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	17,100,000	0.00	17,100,000	0.00	0	0.00	17,100,000	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	17,100,000	0.00	17,100,000	0.00	0	0.00	17,100,000	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$17,100,000	0.00	\$17,100,000	0.00	\$0	0.00	\$17,100,000	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003

PROGRAM-SPECIFIC	0	0.00	0	0.00	66,877,823	0.00	66,877,823	0.00	66,877,823	0.00	66,877,823	0.00	66,877,823	0.00
GENERAL REVENUE	0	0.00	0	0.00	66,877,823	0.00	66,877,823	0.00	62,877,823	0.00	52,877,823	0.00	62,877,823	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	4,000,000	0.00	4,000,000	0.00	4,000,000	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435														
PHARMACY - 90541C														
MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	66,877,823	0.00	66,877,823	0.00	66,877,823	0.00	66,877,823	0.00	66,877,823	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	10,000,000	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$66,877,823	0.00	\$66,877,823	0.00	\$66,877,823	0.00	\$66,877,823	0.00	\$66,877,823	0.00
Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.														

Pharmacy PMPM-Specialty - 1886006

PROGRAM-SPECIFIC	0	0.00	0	0.00	126,078,623	0.00	77,657,578	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	46,361,631	0.00	27,754,818	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	79,716,992	0.00	49,902,760	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$126,078,623	0.00	\$77,657,578	0.00	\$0	0.00	\$0	0.00	\$0	0.00

An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated Specialty PMPM rate increase of 12.273% is expected in FY18. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects a weighted projection of prior 2-year expenditure history and Express Scripts forecast.

Pharmacy PMPM-Non Specialty - 1886007

PROGRAM-SPECIFIC	0	0.00	0	0.00	5,774,065	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	2,123,239	0.00	0	0.00	0	0.00	0	0.00	0	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435														
PHARMACY - 90541C														
Pharmacy PMPM-Non Specialty - 1886007														
PROGRAM-SPECIFIC	0	0.00	0	0.00	5,774,065	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	3,650,826	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$5,774,065	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

Asset Limit Increase - HB 1565 - 1886012

PROGRAM-SPECIFIC	0	0.00	0	0.00	25,419,105	0.00	14,616,924	0.00	14,616,924	0.00	14,616,924	0.00	14,616,924	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,746,417	0.00	1,010,934	0.00	1,010,934	0.00	1,010,934	0.00	1,010,934	0.00
FEDERAL FUNDS	0	0.00	0	0.00	16,071,992	0.00	9,392,835	0.00	9,392,835	0.00	9,392,835	0.00	9,392,835	0.00
OTHER FUNDS	0	0.00	0	0.00	7,600,696	0.00	4,213,155	0.00	4,213,155	0.00	4,213,155	0.00	4,213,155	0.00
TOTAL	\$0	0.00	\$0	0.00	\$25,419,105	0.00	\$14,616,924	0.00	\$14,616,924	0.00	\$14,616,924	0.00	\$14,616,924	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.

FMAP Adjustment - 1886025

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,877,550	0.00	6,877,550	0.00	6,877,550	0.00	6,877,550	0.00
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Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435														
PHARMACY - 90541C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,877,550	0.00	6,877,550	0.00	6,877,550	0.00	6,877,550	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	6,877,550	0.00	6,877,550	0.00	6,877,550	0.00	6,877,550	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$6,877,550	0.00	\$6,877,550	0.00	\$6,877,550	0.00	\$6,877,550	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

TOTAL - PHARMACY	\$1,175,701,619	0.00	\$1,443,238,938	0.00	\$1,470,383,308	0.00	\$1,405,386,017	0.00	\$1,296,638,512	0.00	\$1,313,738,512	0.00	\$1,296,638,512	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.435 cont. MO HealthNet Division – Pharmacy Medicare Part D-Clawback

Book 5, Page 220

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$12,947,791) FED PSD core reduction of one-time Federal Funds

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435														
PHARMACY-MED PART D-CLAWBACK - 90543C														
CORE														
PROGRAM-SPECIFIC	192,945,469	0.00	211,018,979	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00
GENERAL REVENUE	192,945,469	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00	198,071,188	0.00
FEDERAL FUNDS	0	0.00	12,947,791	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$192,945,469	0.00	\$211,018,979	0.00	\$198,071,188	0.00	\$198,071,188	0.00	\$198,071,188	0.00	\$198,071,188	0.00	\$198,071,188	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	3,787,205	0.00	3,765,429	0.00	0	0.00	3,765,429	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	3,787,205	0.00	3,765,429	0.00	0	0.00	3,765,429	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$3,787,205	0.00	\$3,765,429	0.00	\$0	0.00	\$3,765,429	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.435

PHARMACY-MED PART D-CLAWBACK - 90543C

MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00
GENERAL REVENUE	0	0.00	0	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00	12,947,791	0.00
TOTAL	\$0	0.00	\$0	0.00	\$12,947,791	0.00	\$12,947,791	0.00	\$12,947,791	0.00	\$12,947,791	0.00	\$12,947,791	0.00

Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.

Clawback Increase - 1886010														
PROGRAM-SPECIFIC	0	0.00	0	0.00	19,115,216	0.00	17,357,352	0.00	17,357,352	0.00	17,357,352	0.00	17,357,352	0.00
GENERAL REVENUE	0	0.00	0	0.00	19,115,216	0.00	17,357,352	0.00	17,357,352	0.00	17,357,352	0.00	17,357,352	0.00
TOTAL	\$0	0.00	\$0	0.00	\$19,115,216	0.00	\$17,357,352	0.00	\$17,357,352	0.00	\$17,357,352	0.00	\$17,357,352	0.00

Funding is needed for the Centers for Medicare and Medicaid Services (CMS) calculated Clawback for 2017 and an estimated 4% increase in 2018. The Medicare Prescription Drugs Act requires states to pay Medicare a portion of the cost of Part D drugs attributed to what would have been paid for by the state without the Part D drug benefit.

TOTAL - PHARMACY-MED PART D-CLAWBAC	\$192,945,469	0.00	\$211,018,979	0.00	\$233,921,400	0.00	\$232,141,760	0.00	\$228,376,331	0.00	\$232,141,760	0.00	\$228,376,331	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.436 **MO HealthNet Division – Missouri RX Plan**

Book 5, Page 233

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 2017 GR W/H: \$212,035

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$728,077) FED PSD core reduction of one-time Federal Funds

GOVERNOR:

Core reduction: (\$500,000) GR PSD core reduction due to anticipated lapse

HOUSE:

Core reduction: (\$12,000,000) GR PSD core reduction – funding only for dual eligible individuals – created separate section for this program – 11.536

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

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FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.436														
MISSOURI RX PLAN - 90538C														
CORE														
PROGRAM-SPECIFIC	22,287,547	0.00	23,986,247	0.00	23,258,170	0.00	22,758,170	0.00	10,758,170	0.00	10,758,170	0.00	10,758,170	0.00
GENERAL REVENUE	16,493,707	0.00	18,602,844	0.00	18,602,844	0.00	18,102,844	0.00	6,102,844	0.00	6,102,844	0.00	6,102,844	0.00
FEDERAL FUNDS	0	0.00	728,077	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	5,793,840	0.00	4,655,326	0.00	4,655,326	0.00	4,655,326	0.00	4,655,326	0.00	4,655,326	0.00	4,655,326	0.00
TOTAL	\$22,287,547	0.00	\$23,986,247	0.00	\$23,258,170	0.00	\$22,758,170	0.00	\$10,758,170	0.00	\$10,758,170	0.00	\$10,758,170	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,100,000	0.00	0	0.00	1,100,000	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	1,100,000	0.00	0	0.00	1,100,000	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,100,000	0.00	\$0	0.00	\$1,100,000	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	728,077	0.00	728,077	0.00	728,077	0.00	728,077	0.00	728,077	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.436														
MISSOURI RX PLAN - 90538C														
MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	728,077	0.00	728,077	0.00	728,077	0.00	728,077	0.00	728,077	0.00
GENERAL REVENUE	0	0.00	0	0.00	728,077	0.00	728,077	0.00	728,077	0.00	728,077	0.00	728,077	0.00
TOTAL	\$0	0.00	\$0	0.00	\$728,077	0.00	\$728,077	0.00	\$728,077	0.00	\$728,077	0.00	\$728,077	0.00
Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.														

Asset Limit Increase - HB 1565 - 1886012

PROGRAM-SPECIFIC	0	0.00	0	0.00	133,133	0.00	76,556	0.00	76,556	0.00	76,556	0.00	76,556	0.00
GENERAL REVENUE	0	0.00	0	0.00	48,956	0.00	76,556	0.00	76,556	0.00	76,556	0.00	76,556	0.00
FEDERAL FUNDS	0	0.00	0	0.00	84,177	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$133,133	0.00	\$76,556	0.00	\$76,556	0.00	\$76,556	0.00	\$76,556	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

TOTAL - MISSOURI RX PLAN	\$22,287,547	0.00	\$23,986,247	0.00	\$24,119,380	0.00	\$24,662,803	0.00	\$11,562,803	0.00	\$12,662,803	0.00	\$11,562,803	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.440 MO HealthNet Division – Pharmacy Federal Reimbursement Allowance Payments

Book 5, Page 242

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.440														
PHARMACY FRA - 90542C														
CORE														
PROGRAM-SPECIFIC	97,125,829	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00
OTHER FUNDS	97,125,829	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00
TOTAL	\$97,125,829	0.00	\$108,308,926	0.00	\$108,308,926	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	\$97,125,829	0.00	\$108,308,926	0.00	\$108,308,926	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 11.445 & 11.450 MO HealthNet Division – Pharmacy Provider Tax Transfers

Book 6, Pages 563 & 564

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.445														
GR PHARMACY FRA TRANSFER - 90535C														
CORE														
FUND TRANSFERS	33,798,366	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
GENERAL REVENUE	33,798,366	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
TOTAL	\$33,798,366	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00
TOTAL - GR PHARMACY FRA TRANSFER	\$33,798,366	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.450														
PHARMACY FRA TRANSFER - 90537C														
CORE														
FUND TRANSFERS	33,798,366	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
OTHER FUNDS	33,798,366	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
TOTAL	\$33,798,366	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00
TOTAL - PHARMACY FRA TRANSFER	\$33,798,366	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.455 MO HealthNet Division – Physician's Services

Book 5, Page 250

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 2017 GR W/H: \$9,106,547 (*as of March 31, 2017*)

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$5,452,749) FED PSD core reduction of one-time Federal Funds
Core reallocation out: (\$91,826,857) (GR \$33,698,400 PSD & FED \$58,128,457 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents
Core reallocation in: \$17,100,000 GR PSD reallocated in from Pharmacy section

GOVERNOR:

Core reduction: (\$15,551,011) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$9,228,351) (GR \$3,393,449 PSD & FED \$5,834,902 PSD) core reduction – equal to the provider rate increase added in FY 2017
(\$4,200,000) GR PSD core reduction – funding added for increase in reimbursement rates for pediatric related services
Core reallocation out: (\$22,584,675) (GR \$8,383,278 PSD & FED \$14,201,397 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

HOUSE:

Core restoration: \$4,614,176 (GR \$1,696,725 PSD & FED \$2,917,451 PSD) core restoration – restore 1/2 of Governor's provider rate reduction
Core reduction: (\$409,528) (GR \$146,365 PSD & FED \$263,163 PSD) core reduction due to estimated savings from health home recruitment
(\$2,018,048) (GR \$721,250 PSD & FED \$1,296,798) core reduction – funding reallocated for Neonatal Abstinence Syndrome through NDI

SENATE:

Core restoration: \$2,018,048 (GR \$721,250 PSD & FED \$1,296,798 PSD) core restoration – reversed House action

CONFERENCE:

Same as Senate – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455														
PHYSICIAN RELATED PROF - 90544C														
CORE														
EXPENSE & EQUIPMENT	3,452,279	0.00	3,620,737	0.00	3,620,737	0.00	3,620,737	0.00	3,620,737	0.00	3,620,737	0.00	3,620,737	0.00
GENERAL REVENUE	1,137,211	0.00	1,705,342	0.00	1,705,342	0.00	1,705,342	0.00	1,705,342	0.00	1,705,342	0.00	1,705,342	0.00
FEDERAL FUNDS	2,273,818	0.00	1,915,395	0.00	1,915,395	0.00	1,915,395	0.00	1,915,395	0.00	1,915,395	0.00	1,915,395	0.00
OTHER FUNDS	41,250	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	378,323,227	0.00	421,633,110	0.00	341,453,504	0.00	289,889,467	0.00	292,076,067	0.00	294,094,115	0.00	294,094,115	0.00
GENERAL REVENUE	117,662,635	0.00	135,637,591	0.00	119,039,191	0.00	87,511,453	0.00	88,340,563	0.00	89,061,813	0.00	89,061,813	0.00
FEDERAL FUNDS	249,732,216	0.00	272,732,561	0.00	209,151,355	0.00	189,115,056	0.00	190,472,546	0.00	191,769,344	0.00	191,769,344	0.00
OTHER FUNDS	10,928,376	0.00	13,262,958	0.00	13,262,958	0.00	13,262,958	0.00	13,262,958	0.00	13,262,958	0.00	13,262,958	0.00
TOTAL	\$381,775,506	0.00	\$425,253,847	0.00	\$345,074,241	0.00	\$293,510,204	0.00	\$295,696,804	0.00	\$297,714,852	0.00	\$297,714,852	0.00

MHD Cost to Continue - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	82,319,428	0.00	96,581,307	0.00	0	0.00	96,581,307	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	14,705,290	0.00	16,502,940	0.00	0	0.00	16,502,940	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	67,614,138	0.00	80,078,367	0.00	0	0.00	80,078,367	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$82,319,428	0.00	\$96,581,307	0.00	\$0	0.00	\$96,581,307	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003

PROGRAM-SPECIFIC	0	0.00	0	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00
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Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455														
PHYSICIAN RELATED PROF - 90544C														
MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00
GENERAL REVENUE	0	0.00	0	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00	5,452,749	0.00
TOTAL	\$0	0.00	\$0	0.00	\$5,452,749	0.00	\$5,452,749	0.00	\$5,452,749	0.00	\$5,452,749	0.00	\$5,452,749	0.00
Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.														

Primary Care HH Rate Inc - 1886014														
PROGRAM-SPECIFIC	0	0.00	0	0.00	11,368	0.00	14,659	0.00	14,659	0.00	14,659	0.00	14,659	0.00
GENERAL REVENUE	0	0.00	0	0.00	4,180	0.00	5,188	0.00	5,188	0.00	5,188	0.00	5,188	0.00
FEDERAL FUNDS	0	0.00	0	0.00	7,188	0.00	9,471	0.00	9,471	0.00	9,471	0.00	9,471	0.00
TOTAL	\$0	0.00	\$0	0.00	\$11,368	0.00	\$14,659	0.00	\$14,659	0.00	\$14,659	0.00	\$14,659	0.00
The state plan amendment for Primary Care Health Homes requires MO HealthNet to annually adjust the per member per month (PMPM) rate in January according to the Consumer Price Index. This request funds a 2% rate increase beginning January 2018.														

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	12,470,416	0.00	7,170,949	0.00	7,170,949	0.00	7,170,949	0.00	7,170,949	0.00
GENERAL REVENUE	0	0.00	0	0.00	4,156,759	0.00	2,321,851	0.00	2,321,851	0.00	2,321,851	0.00	2,321,851	0.00
FEDERAL FUNDS	0	0.00	0	0.00	7,884,795	0.00	4,608,052	0.00	4,608,052	0.00	4,608,052	0.00	4,608,052	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455														
PHYSICIAN RELATED PROF - 90544C														
Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	12,470,416	0.00	7,170,949	0.00	7,170,949	0.00	7,170,949	0.00	7,170,949	0.00
OTHER FUNDS	0	0.00	0	0.00	428,862	0.00	241,046	0.00	241,046	0.00	241,046	0.00	241,046	0.00
TOTAL	\$0	0.00	\$0	0.00	\$12,470,416	0.00	\$7,170,949	0.00	\$7,170,949	0.00	\$7,170,949	0.00	\$7,170,949	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	15,551,011	0.00	15,551,011	0.00	15,551,011	0.00	15,551,011	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	15,551,011	0.00	15,551,011	0.00	15,551,011	0.00	15,551,011	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$15,551,011	0.00	\$15,551,011	0.00	\$15,551,011	0.00	\$15,551,011	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

TOTAL - PHYSICIAN RELATED PROF	\$381,775,506	0.00	\$425,253,847	0.00	\$445,328,202	0.00	\$418,280,879	0.00	\$323,886,172	0.00	\$422,485,527	0.00	\$325,904,220	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.455 cont. MO HealthNet Division – MO HealthNet Pilot Program for Neonatal Abstinence Syndrome

Book N/A

This section would provide funding for a pilot program that focuses on providing clinical and case management support for pregnant women who are opioid addicted or display key risk factors which indicate a likelihood for addiction

Legal Base:

Funding Sources: General Revenue and Federal

FY 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

New program recommended by the House

GOVERNOR:

New program recommended by the House

HOUSE:

New program recommended by the House

SENATE:

Senate removed NDI.

CONFERENCE:

Same as House – no additional changes

Conference restored funding for program.

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455														
NEONATAL ABSTINENCE SYNDROME - 90842C														
Neonatal Abstinence Syndrome - 1886052														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,398,993	0.00	0	0.00	1,398,993	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	500,000	0.00	0	0.00	500,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	898,993	0.00	0	0.00	898,993	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,398,993	0.00	\$0	0.00	\$1,398,993	0.00
TOTAL - NEONATAL ABSTINENCE SYNDROM	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,398,993	0.00	\$0	0.00	\$1,398,993	0.00

DEPARTMENT OF SOCIAL SERVICES
Section 11.460 MO HealthNet Divisions – Dental Services

Book 5, Page 271

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation out: (\$10,606,687) (GR \$3,781,691 PSD & FED \$6,824,996 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

GOVERNOR:

Core reduction: (\$485,796) (GR \$178,637 PSD & FED \$307,159 PSD) core reduction – equal to the provider rate increase added in FY 2017
(\$2,563) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
Core reallocation out: (\$72,856) (GR \$25,411 PSD & FED \$47,445 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

HOUSE:

Core restoration: \$242,899 (GR \$89,319 PSD & FED \$153,580 PSD) core restoration – restore 1/2 of Governor’s provider rate reduction

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.460														
DENTAL - 90546C														
CORE														
EXPENSE & EQUIPMENT	110,994	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	74,802	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	36,192	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	4,474,970	0.00	14,772,175	0.00	4,165,488	0.00	3,604,273	0.00	3,847,172	0.00	3,847,172	0.00	3,847,172	0.00
GENERAL REVENUE	651,311	0.00	4,346,912	0.00	565,221	0.00	361,173	0.00	450,492	0.00	450,492	0.00	450,492	0.00
FEDERAL FUNDS	3,342,027	0.00	9,505,328	0.00	2,680,332	0.00	2,323,165	0.00	2,476,745	0.00	2,476,745	0.00	2,476,745	0.00
OTHER FUNDS	481,632	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00
TOTAL	\$4,585,964	0.00	\$14,772,175	0.00	\$4,165,488	0.00	\$3,604,273	0.00	\$3,847,172	0.00	\$3,847,172	0.00	\$3,847,172	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	4,544,013	0.00	3,090,480	0.00	0	0.00	3,090,480	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,963,292	0.00	1,263,321	0.00	0	0.00	1,263,321	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	2,580,721	0.00	1,827,159	0.00	0	0.00	1,827,159	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$4,544,013	0.00	\$3,090,480	0.00	\$0	0.00	\$3,090,480	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	124,735	0.00	71,727	0.00	71,727	0.00	71,727	0.00	71,727	0.00
GENERAL REVENUE	0	0.00	0	0.00	45,868	0.00	25,635	0.00	25,635	0.00	25,635	0.00	25,635	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.460														
DENTAL - 90546C														
Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	124,735	0.00	71,727	0.00	71,727	0.00	71,727	0.00	71,727	0.00
FEDERAL FUNDS	0	0.00	0	0.00	78,867	0.00	46,092	0.00	46,092	0.00	46,092	0.00	46,092	0.00
TOTAL	\$0	0.00	\$0	0.00	\$124,735	0.00	\$71,727	0.00	\$71,727	0.00	\$71,727	0.00	\$71,727	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,563	0.00	2,563	0.00	2,563	0.00	2,563	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	2,563	0.00	2,563	0.00	2,563	0.00	2,563	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,563	0.00	\$2,563	0.00	\$2,563	0.00	\$2,563	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														
TOTAL - DENTAL	\$4,585,964	0.00	\$14,772,175	0.00	\$8,834,236	0.00	\$6,769,043	0.00	\$3,921,462	0.00	\$7,011,942	0.00	\$3,921,462	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.465 **MO HealthNet Division – Medicare and Other Health Insurance Premiums**

Book 5, Page 285

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$3,062,038) FED PSD core reduction of one-time Federal Funds

GOVERNOR:

Core reduction: (\$415,935) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465														
PREMIUM PAYMENTS - 90547C														
CORE														
PROGRAM-SPECIFIC	216,635,043	0.00	241,445,231	0.00	238,383,193	0.00	237,967,258	0.00	237,967,258	0.00	237,967,258	0.00	237,967,258	0.00
GENERAL REVENUE	74,004,090	0.00	78,237,045	0.00	78,237,045	0.00	78,237,045	0.00	78,237,045	0.00	78,237,045	0.00	78,237,045	0.00
FEDERAL FUNDS	142,630,953	0.00	163,208,186	0.00	160,146,148	0.00	159,730,213	0.00	159,730,213	0.00	159,730,213	0.00	159,730,213	0.00
TOTAL	\$216,635,043	0.00	\$241,445,231	0.00	\$238,383,193	0.00	\$237,967,258	0.00	\$237,967,258	0.00	\$237,967,258	0.00	\$237,967,258	0.00

MHD GR Pickup - 1886003

PROGRAM-SPECIFIC	0	0.00	0	0.00	3,062,038	0.00	3,062,038	0.00	3,062,038	0.00	3,062,038	0.00	3,062,038	0.00
GENERAL REVENUE	0	0.00	0	0.00	3,062,038	0.00	3,062,038	0.00	3,062,038	0.00	3,062,038	0.00	3,062,038	0.00
TOTAL	\$0	0.00	\$0	0.00	\$3,062,038	0.00	\$3,062,038	0.00	\$3,062,038	0.00	\$3,062,038	0.00	\$3,062,038	0.00

Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.

Medicare Premium Increase - 1886004

PROGRAM-SPECIFIC	0	0.00	0	0.00	43,270,164	0.00	17,064,441	0.00	17,064,441	0.00	17,064,441	0.00	17,064,441	0.00
GENERAL REVENUE	0	0.00	0	0.00	15,261,680	0.00	5,923,867	0.00	5,923,867	0.00	5,923,867	0.00	5,923,867	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465														
PREMIUM PAYMENTS - 90547C														
Medicare Premium Increase - 1886004														
PROGRAM-SPECIFIC	0	0.00	0	0.00	43,270,164	0.00	17,064,441	0.00	17,064,441	0.00	17,064,441	0.00	17,064,441	0.00
FEDERAL FUNDS	0	0.00	0	0.00	28,008,484	0.00	11,140,574	0.00	11,140,574	0.00	11,140,574	0.00	11,140,574	0.00
TOTAL	\$0	0.00	\$0	0.00	\$43,270,164	0.00	\$17,064,441	0.00	\$17,064,441	0.00	\$17,064,441	0.00	\$17,064,441	0.00
The Medicare Buy-In program allows states to enroll certain groups of eligible individuals in the Medicare Part A (hospital insurance) and Part B (medical insurance) programs and pay their premiums. This allows the state to realize cost savings through Medicare paying the majority of medical costs before Medicaid reimburses for services. This request funds anticipated Part A and Part B premium increases.														

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	4,703,305	0.00	2,704,574	0.00	2,704,574	0.00	2,704,574	0.00	2,704,574	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,729,499	0.00	966,615	0.00	966,615	0.00	966,615	0.00	966,615	0.00
FEDERAL FUNDS	0	0.00	0	0.00	2,973,806	0.00	1,737,959	0.00	1,737,959	0.00	1,737,959	0.00	1,737,959	0.00
TOTAL	\$0	0.00	\$0	0.00	\$4,703,305	0.00	\$2,704,574	0.00	\$2,704,574	0.00	\$2,704,574	0.00	\$2,704,574	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	415,935	0.00	415,935	0.00	415,935	0.00	415,935	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465														
PREMIUM PAYMENTS - 90547C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	415,935	0.00	415,935	0.00	415,935	0.00	415,935	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	415,935	0.00	415,935	0.00	415,935	0.00	415,935	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$415,935	0.00	\$415,935	0.00	\$415,935	0.00	\$415,935	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

TOTAL - PREMIUM PAYMENTS	\$216,635,043	0.00	\$241,445,231	0.00	\$289,418,700	0.00	\$261,214,246	0.00	\$261,214,246	0.00	\$261,214,246	0.00	\$261,214,246	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.470 MO HealthNet Division – Nursing Facility Payments

Book 6, Page 305

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation out: (\$26,116,239) (FED \$16,981,483 PSD & OTH \$9,134,756 PSD) reallocated to Nursing Facilities FRA payment section to align state and federal earnings

GOVERNOR:

Core reduction: (\$45,818,934) (GR \$7,532,816 PSD; FED \$29,443,247 PSD & OTH \$8,842,871 PSD) core reduction due to Level of Care (LOC) point change – 21 to 27
(\$44,068,435) (GR \$16,204,845 PSD & FED \$27,863,590 PSD) core reduction – equal to the provider rate increase added in FY 2017
(\$6,280,436) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

Governor’s Amendment: \$45,818,934 (GR \$7,532,816 PSD; FED \$29,443,247 PSD & OTH \$8,842,871 PSD) core restoration – reversed LOC point change back to 21

HOUSE:

Core reduction: (\$7,532,816) GR PSD core reduction due to fund switch to Senior Services Protection Fund (SSPF) through NDI for LOC point change – House LOC point was at 27 from GR. Fund switch of GR to SSPF took point count to 21

SENATE:

Core restoration: \$4,563,148 GR PSD core restoration to increase LOC point to 24 from GR. Senate removed SSPF funding for LOC point to 21.
Core reduction: (\$15,093,567) (FED \$11,607,435 PSD & OTH \$3,486,132 PSD) core reduction due to removal of SSPF funding for LOC point change.

CONFERENCE:

Core restoration: \$15,093,567 (FED \$11,607,435 PSD & OTH \$3,486,132 PSD) core restoration due to restoration of SSPF funding for LOC point to 21 if HCB 3 was signed into law.

Committee Markup Annual

	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470 NURSING FACILITIES - 90549C														
CORE														
PROGRAM-SPECIFIC	597,660,710	0.00	637,607,510	0.00	611,491,271	0.00	561,142,400	0.00	553,609,584	0.00	543,079,165	0.00	558,172,732	0.00
GENERAL REVENUE	138,551,538	0.00	159,835,552	0.00	159,835,552	0.00	137,350,271	0.00	129,817,455	0.00	134,380,603	0.00	134,380,603	0.00
FEDERAL FUNDS	377,718,073	0.00	403,109,770	0.00	386,128,287	0.00	358,264,697	0.00	358,264,697	0.00	346,657,262	0.00	358,264,697	0.00
OTHER FUNDS	81,391,099	0.00	74,662,188	0.00	65,527,432	0.00	65,527,432	0.00	65,527,432	0.00	62,041,300	0.00	65,527,432	0.00
TOTAL	\$597,660,710	0.00	\$637,607,510	0.00	\$611,491,271	0.00	\$561,142,400	0.00	\$553,609,584	0.00	\$543,079,165	0.00	\$558,172,732	0.00

MHD Cost to Continue - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	1,963,623	0.00	2,914,965	0.00	0	0.00	2,914,965	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	597,992	0.00	770,272	0.00	0	0.00	770,272	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	1,365,631	0.00	2,144,693	0.00	0	0.00	2,144,693	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1,963,623	0.00	\$2,914,965	0.00	\$0	0.00	\$2,914,965	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

FMAP Adjustment - 1886025

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,280,436	0.00	6,280,436	0.00	6,280,436	0.00	6,280,436	0.00
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Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE

HOUSE BILL SECTION 11.470
NURSING FACILITIES - 90549C

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,280,436	0.00	6,280,436	0.00	6,280,436	0.00	6,280,436	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	6,280,436	0.00	6,280,436	0.00	6,280,436	0.00	6,280,436	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$6,280,436	0.00	\$6,280,436	0.00	\$6,280,436	0.00	\$6,280,436	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.

Nursing Home Rate Fund Switch - 1886045														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	22,034,218	0.00	44,068,436	0.00	22,034,218	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,102,423	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	13,931,795	0.00	27,863,590	0.00	13,931,795	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	8,102,423	0.00	8,102,423	0.00	8,102,423	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$22,034,218	0.00	\$44,068,436	0.00	\$22,034,218	0.00

House Draft HCS - Restored half of provider rate GR reduction (1.75%) with MO Senior Services Protection Fund. House Draft HCS and House Perfected – restored half of provider rate federal reduction (1.75%)
Senate SCS – Kept House position and restored other half of provider rate restoration with GR and matching federal funds.
TAFP – House position, however rate increase will only be restored if the Senior Services Protection Fund receives deposits to cover the appropriated amount.

Nursing Home LOC Fund Switch - 1886049														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	7,532,816	0.00	0	0.00	2,969,668	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470														
NURSING FACILITIES - 90549C														
Nursing Home LOC Fund Switch - 1886049														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	7,532,816	0.00	0	0.00	2,969,668	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	7,532,816	0.00	0	0.00	2,969,668	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$7,532,816	0.00	\$0	0.00	\$2,969,668	0.00
House Draft HCS - Fund switched from GR to MO Senior Services Protection Fund. Governor had increased level of care (LOC) point count to 27 with associated reductions to GR, FED, and OTHER; then reversed the LOC change in a Governor's amendment. House reinstated GR reduction and offset with this NDI from Senior Services Protection Fund, thus leaving point count at 21.														
Senate SCS – Senate zeroed out Senior Services Protection Fund for Level of Care, and partially restored with GR, thus leaving the point count at 24.														
TAFP – The point count was funded with GR in the core at 24 points. This NDI was funded with the Senior Services Protection Fund at a level sufficient to lower the Level of Care at 21 points if and only if the Senior Services Protection Fund receives deposits sufficient to satisfy the full appropriated amount.														
TOTAL - NURSING FACILITIES	\$597,660,710	0.00	\$637,607,510	0.00	\$613,454,894	0.00	\$570,337,801	0.00	\$589,457,054	0.00	\$596,343,002	0.00	\$589,457,054	0.00

DEPARTMENT OF SOCIAL SERVICES
HB 11.470 cont. MO HealthNet Division – Home Health

Book 6, Page 320

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
Core reduction: (\$175,612) (GR \$64,576 PSD & FED \$111,036 PSD) core reduction – equal to the provider rate increase added in FY 2017
(\$84,432) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:
Core restoration: \$87,806 (GR \$32,288 PSD & FED \$55,518 PSD) core restoration – restore 1/2 of Governor’s provider rate reduction

SENATE:
Same as House – no additional core changes

CONFERENCE:
Same as House – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470														
HOME HEALTH - 90564C														
CORE														
PROGRAM-SPECIFIC	6,056,339	0.00	7,346,322	0.00	7,346,322	0.00	7,086,278	0.00	7,174,084	0.00	7,174,084	0.00	7,174,084	0.00
GENERAL REVENUE	2,115,294	0.00	2,552,515	0.00	2,552,515	0.00	2,403,507	0.00	2,435,795	0.00	2,435,795	0.00	2,435,795	0.00
FEDERAL FUNDS	3,842,698	0.00	4,634,502	0.00	4,634,502	0.00	4,523,466	0.00	4,578,984	0.00	4,578,984	0.00	4,578,984	0.00
OTHER FUNDS	98,347	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00
TOTAL	\$6,056,339	0.00	\$7,346,322	0.00	\$7,346,322	0.00	\$7,086,278	0.00	\$7,174,084	0.00	\$7,174,084	0.00	\$7,174,084	0.00

Asset Limit Increase - HB 1565 - 1886012

PROGRAM-SPECIFIC	0	0.00	0	0.00	164,649	0.00	94,679	0.00	94,679	0.00	94,679	0.00	94,679	0.00
GENERAL REVENUE	0	0.00	0	0.00	60,545	0.00	33,838	0.00	33,838	0.00	33,838	0.00	33,838	0.00
FEDERAL FUNDS	0	0.00	0	0.00	104,104	0.00	60,841	0.00	60,841	0.00	60,841	0.00	60,841	0.00
TOTAL	\$0	0.00	\$0	0.00	\$164,649	0.00	\$94,679	0.00	\$94,679	0.00	\$94,679	0.00	\$94,679	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.

FMAP Adjustment - 1886025

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	84,432	0.00	84,432	0.00	84,432	0.00	84,432	0.00
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Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470														
HOME HEALTH - 90564C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	84,432	0.00	84,432	0.00	84,432	0.00	84,432	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	84,432	0.00	84,432	0.00	84,432	0.00	84,432	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$84,432	0.00	\$84,432	0.00	\$84,432	0.00	\$84,432	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														
TOTAL - HOME HEALTH	\$6,056,339	0.00	\$7,346,322	0.00	\$7,510,971	0.00	\$7,265,389	0.00	\$7,353,195	0.00	\$7,353,195	0.00	\$7,353,195	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book N/A

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

Contract was cancelled, so funding was eliminated in 2016 Session (FY 2017 budget).

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470														
PACE - 90568C														
CORE														
PROGRAM-SPECIFIC	6,523,214	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	2,392,275	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	4,130,939	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$6,523,214	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
TOTAL - PACE	\$6,523,214	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Page 565

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$10,990,982) OTH TRF core reduction due to appropriation no longer needed

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470														
LONG TERM SUPPORT UPL TRANSFER - 90545C														
CORE														
FUND TRANSFERS	0	0.00	10,990,982	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	0	0.00	10,990,982	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$10,990,982	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
TOTAL - LONG TERM SUPPORT UPL TRANSF	\$0	0.00	\$10,990,982	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.475 **MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL)**

Book 6, Page 330

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$745,292) OTH PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.475														
LONG TERM SUPPORT PAYMENTS - 90548C														
CORE														
PROGRAM-SPECIFIC	10,006,814	0.00	10,950,768	0.00	10,950,768	0.00	10,205,476	0.00	10,205,476	0.00	10,205,476	0.00	10,205,476	0.00
FEDERAL FUNDS	6,332,312	0.00	6,291,672	0.00	6,291,672	0.00	6,291,672	0.00	6,291,672	0.00	6,291,672	0.00	6,291,672	0.00
OTHER FUNDS	3,674,502	0.00	4,659,096	0.00	4,659,096	0.00	3,913,804	0.00	3,913,804	0.00	3,913,804	0.00	3,913,804	0.00
TOTAL	\$10,006,814	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,205,476	0.00	\$10,205,476	0.00	\$10,205,476	0.00	\$10,205,476	0.00

FMAP Adjustment - 1886025

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	745,292	0.00	745,292	0.00	745,292	0.00	745,292	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	745,292	0.00	745,292	0.00	745,292	0.00	745,292	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$745,292	0.00	\$745,292	0.00	\$745,292	0.00	\$745,292	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.

TOTAL - LONG TERM SUPPORT PAYMENTS	\$10,006,814	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.480 MO HealthNet Division – Rehabilitation and Specialty Services

Book 6, Page 337

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 2017 GR W/H: \$22,414

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$3,127,157) FED PSD core reduction of one-time Federal Funds
Core reallocation out: (\$14,355,267) (GR \$6,656,703 PSD & FED \$7,698,564 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents
Core reallocation in: \$17,089,399 (GR \$6,284,114 PSD & FED \$10,805,285 PSD) reallocated in from Children's Division Residential Treatment Services

GOVERNOR:

Core reduction: (\$3,954,473) (GR \$1,454,139 PSD & FED \$2,500,334 PSD) core reduction – equal to the provider rate increase added in FY 2017
(\$512,235) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
Core reallocation out: (\$540,727) (GR \$225,137 PSD & FED \$315,590 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

HOUSE:

Core restoration: \$1,977,237 (GR \$727,070 PSD & FED \$1,250,167 PSD) core restoration – restore 1/2 of Governor's provider rate reduction

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
REHAB AND SPECIALTY SERVICES - 90550C														
CORE														
EXPENSE & EQUIPMENT	335,047	0.00	1,688,334	0.00	1,688,334	0.00	1,688,334	0.00	1,688,334	0.00	1,688,334	0.00	1,688,334	0.00
GENERAL REVENUE	35,411	0.00	844,334	0.00	844,334	0.00	844,334	0.00	844,334	0.00	844,334	0.00	844,334	0.00
FEDERAL FUNDS	43,249	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00	844,000	0.00
OTHER FUNDS	256,387	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	253,600,459	0.00	257,319,816	0.00	256,926,791	0.00	251,919,356	0.00	253,896,593	0.00	253,896,593	0.00	253,896,593	0.00
GENERAL REVENUE	76,090,807	0.00	78,836,270	0.00	78,463,681	0.00	76,784,405	0.00	77,511,475	0.00	77,511,475	0.00	77,511,475	0.00
FEDERAL FUNDS	152,891,874	0.00	153,233,917	0.00	153,213,481	0.00	149,885,322	0.00	151,135,489	0.00	151,135,489	0.00	151,135,489	0.00
OTHER FUNDS	24,617,778	0.00	25,249,629	0.00	25,249,629	0.00	25,249,629	0.00	25,249,629	0.00	25,249,629	0.00	25,249,629	0.00
TOTAL	\$253,935,506	0.00	\$259,008,150	0.00	\$258,615,125	0.00	\$253,607,690	0.00	\$255,584,927	0.00	\$255,584,927	0.00	\$255,584,927	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	13,505,499	0.00	11,292,730	0.00	0	0.00	11,292,730	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	6,189,538	0.00	5,058,725	0.00	0	0.00	5,058,725	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	7,315,961	0.00	6,234,005	0.00	0	0.00	6,234,005	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$13,505,499	0.00	\$11,292,730	0.00	\$0	0.00	\$11,292,730	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
REHAB AND SPECIALTY SERVICES - 90550C														
MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00
GENERAL REVENUE	0	0.00	0	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00	3,127,157	0.00
TOTAL	\$0	0.00	\$0	0.00	\$3,127,157	0.00	\$3,127,157	0.00	\$3,127,157	0.00	\$3,127,157	0.00	\$3,127,157	0.00
Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.														

Hospice Rate Increase - 1886005														
PROGRAM-SPECIFIC	0	0.00	0	0.00	325,964	0.00	325,964	0.00	325,964	0.00	325,964	0.00	325,964	0.00
GENERAL REVENUE	0	0.00	0	0.00	119,922	0.00	116,553	0.00	116,553	0.00	116,553	0.00	116,553	0.00
FEDERAL FUNDS	0	0.00	0	0.00	206,042	0.00	209,411	0.00	209,411	0.00	209,411	0.00	209,411	0.00
TOTAL	\$0	0.00	\$0	0.00	\$325,964	0.00	\$325,964	0.00	\$325,964	0.00	\$325,964	0.00	\$325,964	0.00
Federal law requires that Medicaid hospice rates be adjusted when Medicare hospice rates are adjusted, on an annual basis. The rate paid for any day may vary depending on the level of care furnished. This request funds a 1.9% increase.														

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	3,778,928	0.00	2,173,023	0.00	2,173,023	0.00	2,173,023	0.00	2,173,023	0.00
GENERAL REVENUE	0	0.00	0	0.00	845,529	0.00	470,846	0.00	470,846	0.00	470,846	0.00	470,846	0.00
FEDERAL FUNDS	0	0.00	0	0.00	2,389,341	0.00	1,396,385	0.00	1,396,385	0.00	1,396,385	0.00	1,396,385	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
REHAB AND SPECIALTY SERVICES - 90550C														
Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	3,778,928	0.00	2,173,023	0.00	2,173,023	0.00	2,173,023	0.00	2,173,023	0.00
OTHER FUNDS	0	0.00	0	0.00	544,058	0.00	305,792	0.00	305,792	0.00	305,792	0.00	305,792	0.00
TOTAL	\$0	0.00	\$0	0.00	\$3,778,928	0.00	\$2,173,023	0.00	\$2,173,023	0.00	\$2,173,023	0.00	\$2,173,023	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	512,235	0.00	512,235	0.00	512,235	0.00	512,235	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	512,235	0.00	512,235	0.00	512,235	0.00	512,235	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$512,235	0.00	\$512,235	0.00	\$512,235	0.00	\$512,235	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

Ambulance FRA Increase - 1886048														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	2,981,058	0.00	2,981,058	0.00	2,981,058	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,915,628	0.00	1,915,628	0.00	1,915,628	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
REHAB AND SPECIALTY SERVICES - 90550C														
Ambulance FRA Increase - 1886048														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	2,981,058	0.00	2,981,058	0.00	2,981,058	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,065,430	0.00	1,065,430	0.00	1,065,430	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,981,058	0.00	\$2,981,058	0.00	\$2,981,058	0.00
House - added \$45/trip increase														

DEPARTMENT OF SOCIAL SERVICES

Section 11.480 cont. MO HealthNet Division – Community Health Access Programs

Book 6, Page 376

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.

Legal Base:

Funding Sources: General Revenue

FY 2017 GR W/H: \$600,000

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$1,631,676) (GR \$600,000 PSD & FED \$1,031,676 PSD) core reduction – FY17 withhold

HOUSE:

Core restoration: \$1,398,993 (GR \$500,000 PSD & FED \$898,993 PSD) partial core restoration of Governor’s reduction

SENATE:

Core reduction: (\$1,398,993) (GR \$500,000 PSD & FED \$898,993 PSD) core reduction – reversed House action

CONFERENCE:

Core restoration: \$1,398,993 (GR \$500,000 PSD & FED \$898,993 PSD) partial core restoration of Governor’s reduction

Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
COMMUNITY HEALTH ACCESS PRGRMS - 90579C														
CORE														
PROGRAM-SPECIFIC	0	0.00	1,631,676	0.00	1,631,676	0.00	0	0.00	1,398,993	0.00	0	0.00	1,398,993	0.00
GENERAL REVENUE	0	0.00	600,000	0.00	600,000	0.00	0	0.00	500,000	0.00	0	0.00	500,000	0.00
FEDERAL FUNDS	0	0.00	1,031,676	0.00	1,031,676	0.00	0	0.00	898,993	0.00	0	0.00	898,993	0.00
TOTAL	\$0	0.00	\$1,631,676	0.00	\$1,631,676	0.00	\$0	0.00	\$1,398,993	0.00	\$0	0.00	\$1,398,993	0.00
TOTAL - COMMUNITY HEALTH ACCESS PRGI	\$0	0.00	\$1,631,676	0.00	\$1,631,676	0.00	\$0	0.00	\$1,398,993	0.00	\$0	0.00	\$1,398,993	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.480 cont. MO HealthNet Division – Non-Emergency Medical Transportation (NEMT)

Book 6, Page 360

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation out: (\$1,995,465) (GR \$925,320 PSD & FED \$1,070,145 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

GOVERNOR:

Core reduction: (\$2,283,234) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
Core reallocation out: (\$590,858) (GR \$198,362 PSD & FED \$392,496 PSD) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
NON-EMERGENCY TRANSPORT - 90561C														
CORE														
PROGRAM-SPECIFIC	37,750,415	0.00	46,604,497	0.00	44,609,032	0.00	41,734,940	0.00	41,734,940	0.00	41,734,940	0.00	41,734,940	0.00
GENERAL REVENUE	13,421,906	0.00	15,626,583	0.00	14,701,263	0.00	12,219,667	0.00	12,219,667	0.00	12,219,667	0.00	12,219,667	0.00
FEDERAL FUNDS	24,328,509	0.00	30,977,914	0.00	29,907,769	0.00	29,515,273	0.00	29,515,273	0.00	29,515,273	0.00	29,515,273	0.00
TOTAL	\$37,750,415	0.00	\$46,604,497	0.00	\$44,609,032	0.00	\$41,734,940	0.00	\$41,734,940	0.00	\$41,734,940	0.00	\$41,734,940	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	151,766	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	151,766	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$151,766	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

NEMT Actuarial Increase - 1886008														
PROGRAM-SPECIFIC	0	0.00	0	0.00	2,465,180	0.00	2,465,180	0.00	2,465,180	0.00	2,465,180	0.00	2,465,180	0.00
GENERAL REVENUE	0	0.00	0	0.00	906,496	0.00	881,055	0.00	881,055	0.00	881,055	0.00	881,055	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
NON-EMERGENCY TRANSPORT - 90561C														
NEMT Actuarial Increase - 1886008														
PROGRAM-SPECIFIC	0	0.00	0	0.00	2,465,180	0.00	2,465,180	0.00	2,465,180	0.00	2,465,180	0.00	2,465,180	0.00
FEDERAL FUNDS	0	0.00	0	0.00	1,558,684	0.00	1,584,125	0.00	1,584,125	0.00	1,584,125	0.00	1,584,125	0.00
TOTAL	\$0	0.00	\$0	0.00	\$2,465,180	0.00	\$2,465,180	0.00	\$2,465,180	0.00	\$2,465,180	0.00	\$2,465,180	0.00
Federal law required rates to be actuarially sound. Funding is needed for a contracted 6.4% cost increase of the existing NEMT contract. NEMT services are provided for MO HealthNet fee-for-service participants who do not have access to free transportation to scheduled MO HealthNet-covered services.														

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	955,334	0.00	549,352	0.00	549,352	0.00	549,352	0.00	549,352	0.00
GENERAL REVENUE	0	0.00	0	0.00	351,295	0.00	196,338	0.00	196,338	0.00	196,338	0.00	196,338	0.00
FEDERAL FUNDS	0	0.00	0	0.00	604,039	0.00	353,014	0.00	353,014	0.00	353,014	0.00	353,014	0.00
TOTAL	\$0	0.00	\$0	0.00	\$955,334	0.00	\$549,352	0.00	\$549,352	0.00	\$549,352	0.00	\$549,352	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,283,234	0.00	2,283,234	0.00	2,283,234	0.00	2,283,234	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480														
NON-EMERGENCY TRANSPORT - 90561C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,283,234	0.00	2,283,234	0.00	2,283,234	0.00	2,283,234	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	2,283,234	0.00	2,283,234	0.00	2,283,234	0.00	2,283,234	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,283,234	0.00	\$2,283,234	0.00	\$2,283,234	0.00	\$2,283,234	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														
TOTAL - NON-EMERGENCY TRANSPORT	\$37,750,415	0.00	\$46,604,497	0.00	\$48,181,312	0.00	\$47,032,706	0.00	\$47,032,706	0.00	\$47,032,706	0.00	\$47,032,706	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.485 **MO HealthNet Division – Ground Emergency Medical Transportation**

Book 5, Page 122

This new section provides funding for payments to providers of ground emergency medical transportation. Senate Bill 607 (2016) created two new sections in Chapter 208, RSMo, which authorize the MO HealthNet Division to implement and administer supplemental payments to providers of ground emergency medical transportation (GEMT) for allowable medical expenditures.

Legal Base: RSMo 208.1030
Funding Sources: Federal and Ground Emergency Medical Transportation Fund
FY 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section recommended by the Governor through NDI.

GOVERNOR:

New section recommended by the Governor through NDI.

HOUSE:

Same as Governor – no additional changes

SENATE:

Same as Governor – no additional changes

CONFERENCE:

Same as Governor – no additional changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.485														
GROUND EMER MED TRANSPORT - 90588C														
Ambulance UPL - 1886033														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	83,960,246	0.00	83,960,246	0.00	83,960,246	0.00	83,960,246	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	53,084,513	0.00	53,084,513	0.00	53,084,513	0.00	53,084,513	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	30,875,733	0.00	30,875,733	0.00	30,875,733	0.00	30,875,733	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00
Provides additional reimbursement for Ground Emergency Medical Transportation (GEMT) providers who participate in the program. The bill allows MO HealthNet to implement and administer supplemental payments to GEMT providers for allowable expenditures.														

TOTAL - GROUND EMER MED TRANSPORT	\$0	0.00	\$0	0.00	\$0	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.490 MO HealthNet Division – Complex Rehabilitation Technology Products

Book 6, Page 383

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$315,635) (GR \$115,065 PSD & FED \$199,569 PSD) core reduction – equal to the provider rate increase added in FY 2017
(\$6,368) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Core restoration: \$157,818 (GR \$58,033 PSD & FED \$99,785 PSD) core restoration – restore 1/2 of Governor’s provider rate reduction

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
COMPLEX REHAB TECHNLOGY PRDUCTS - 90577C														
CORE														
PROGRAM-SPECIFIC	10,169,454	0.00	11,666,969	0.00	11,666,969	0.00	11,345,967	0.00	11,503,785	0.00	11,503,785	0.00	11,503,785	0.00
GENERAL REVENUE	3,929,896	0.00	4,178,400	0.00	4,178,400	0.00	4,056,967	0.00	4,115,000	0.00	4,115,000	0.00	4,115,000	0.00
FEDERAL FUNDS	6,186,081	0.00	7,488,569	0.00	7,488,569	0.00	7,289,000	0.00	7,388,785	0.00	7,388,785	0.00	7,388,785	0.00
OTHER FUNDS	53,477	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$10,169,454	0.00	\$11,666,969	0.00	\$11,666,969	0.00	\$11,345,967	0.00	\$11,503,785	0.00	\$11,503,785	0.00	\$11,503,785	0.00

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	252,825	0.00	145,384	0.00	145,384	0.00	145,384	0.00	145,384	0.00
GENERAL REVENUE	0	0.00	0	0.00	92,969	0.00	51,960	0.00	51,960	0.00	51,960	0.00	51,960	0.00
FEDERAL FUNDS	0	0.00	0	0.00	159,856	0.00	93,424	0.00	93,424	0.00	93,424	0.00	93,424	0.00
TOTAL	\$0	0.00	\$0	0.00	\$252,825	0.00	\$145,384	0.00	\$145,384	0.00	\$145,384	0.00	\$145,384	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,368	0.00	5,368	0.00	5,368	0.00	5,368	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490														
COMPLEX REHAB TECHN LGY PRDUCTS - 90577C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,368	0.00	5,368	0.00	5,368	0.00	5,368	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,368	0.00	5,368	0.00	5,368	0.00	5,368	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$5,368	0.00	\$5,368	0.00	\$5,368	0.00	\$5,368	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														
TOTAL - COMPLEX REHAB TECHN LGY PRDU	\$10,169,454	0.00	\$11,666,969	0.00	\$11,919,794	0.00	\$11,496,719	0.00	\$11,654,537	0.00	\$11,654,537	0.00	\$11,654,537	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Pages 566 & 567

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	7,509,382	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00
GENERAL REVENUE	7,509,382	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00
TOTAL	\$7,509,382	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00
Ambulance FRA Increase - 1886048														
FUND TRANSFERS	0	0.00	0	0.00	0	0.00	0	0.00	1,314,576	0.00	1,314,576	0.00	1,314,576	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	1,314,576	0.00	1,314,576	0.00	1,314,576	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,314,576	0.00	\$1,314,576	0.00	\$1,314,576	0.00
House - added \$45/trip increase														
TOTAL - AMBULANCE SRV REIM ALLOW TRF	\$7,509,382	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	7,509,382	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00
OTHER FUNDS	7,509,382	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00	19,522,756	0.00
TOTAL	\$7,509,382	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00
Ambulance FRA Increase - 1886048														
FUND TRANSFERS	0	0.00	0	0.00	0	0.00	0	0.00	1,314,576	0.00	1,314,576	0.00	1,314,576	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,314,576	0.00	1,314,576	0.00	1,314,576	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,314,576	0.00	\$1,314,576	0.00	\$1,314,576	0.00
House - added \$45/trip increase														
TOTAL - GR AMBULANCE SRV REIM ALL TRF	\$7,509,382	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$19,522,756	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.505 MO HealthNet Division – Managed Care

Book 6, Page 390

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$18,299,340) FED PSD core reduction of one-time Federal Funds
(\$5,000) OTH PSD core reduction of one-time Other Funds that utilized a fund balance

Core reallocation out: (\$1,488,810) OTHER PSD reallocated to Pharmacy section

Core reallocation in: \$333,727,731 (GR \$63,320,922 PSD, FED \$178,974,322 PSD, & OTH \$91,432,487 PSD) core reallocated in from Physician, Dental, Rehabilitation & Specialty services, NEMT, & Hospital sections

GOVERNOR:

Core reduction: (\$28,704,413) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$17,455,620) GR PSD core reduction due to fund switch to Other Funds through NDI

Core reallocation in: \$40,329,227 (GR \$9,571,005 PSD, FED \$27,058,534 PSD, & OTH \$3,699,688 PSD) core reallocated in from Physician, Dental, Rehabilitation & Specialty services, NEMT, & Hospital sections

Governor's amendment: **(\$50,000,000) GR PSD fund switch to Life Science Research Trust Fund and Healthy Families Trust Fund (Related to Tobacco Funds)**

HOUSE:

Core restoration: \$20,000,000 GR PSD – reversed part of the Governor's amendment – fund switch Other Funds back to GR

Core reduction: (\$58,313,932) (GR \$20,723,329 PSD & FED \$37,590,603 PSD) core reduction

SENATE:

Core reduction: (\$30,000,000) GR PSD core reduction due to fund switch to Life Science Research Trust Fund and Healthy Families Trust Fund (Related to Tobacco Funds)

CONFERENCE:

Core restoration: \$5,000,000 GR PSD core restoration – reversed part of Senate fund switch

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
CORE														
EXPENSE & EQUIPMENT	427,776	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	427,776	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	1,225,557,325	0.00	1,888,226,425	0.00	2,202,161,006	0.00	2,146,330,200	0.00	2,108,016,268	0.00	2,078,016,268	0.00	2,083,016,267	0.00
GENERAL REVENUE	314,949,896	0.00	467,559,953	0.00	530,880,875	0.00	444,291,847	0.00	443,568,518	0.00	413,568,518	0.00	418,568,518	0.00
FEDERAL FUNDS	782,279,262	0.00	1,235,543,176	0.00	1,396,218,158	0.00	1,423,276,692	0.00	1,385,686,089	0.00	1,385,686,089	0.00	1,385,686,089	0.00
OTHER FUNDS	128,328,167	0.00	185,123,296	0.00	275,061,973	0.00	278,761,661	0.00	278,761,661	0.00	278,761,661	0.00	278,761,660	0.00
TOTAL	\$1,225,985,101	0.00	\$1,888,226,425	0.00	\$2,202,161,006	0.00	\$2,146,330,200	0.00	\$2,108,016,268	0.00	\$2,078,016,268	0.00	\$2,083,016,267	0.00

MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	18,299,340	0.00	18,299,340	0.00	18,299,340	0.00	18,299,340	0.00	18,299,340	0.00
GENERAL REVENUE	0	0.00	0	0.00	18,299,340	0.00	18,299,340	0.00	18,299,340	0.00	18,299,340	0.00	18,299,340	0.00
TOTAL	\$0	0.00	\$0	0.00	\$18,299,340	0.00	\$18,299,340	0.00	\$18,299,340	0.00	\$18,299,340	0.00	\$18,299,340	0.00

Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.

FY 2018 Managed Care Rates - 1886009														
PROGRAM-SPECIFIC	0	0.00	0	0.00	18,972,789	0.00	20,403,308	0.00	20,403,308	0.00	20,403,308	0.00	20,403,308	0.00
GENERAL REVENUE	0	0.00	0	0.00	6,976,674	0.00	7,292,142	0.00	7,292,142	0.00	7,292,142	0.00	7,292,142	0.00

Committee Markup Annual

	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
FY 2018 Managed Care Rates - 1886009														
PROGRAM-SPECIFIC	0	0.00	0	0.00	18,972,789	0.00	20,403,308	0.00	20,403,308	0.00	20,403,308	0.00	20,403,308	0.00
FEDERAL FUNDS	0	0.00	0	0.00	11,996,115	0.00	13,111,166	0.00	13,111,166	0.00	13,111,166	0.00	13,111,166	0.00
TOTAL	\$0	0.00	\$0	0.00	\$18,972,789	0.00	\$20,403,308	0.00	\$20,403,308	0.00	\$20,403,308	0.00	\$20,403,308	0.00
Federal rule requires payments made on behalf of managed care participants be actuarially sound. This increase is based on the FY18 rates that are set in the statewide managed care Request for Proposal (RFP).														

Statewide Mgd Care Transition - 1886011

PROGRAM-SPECIFIC	0	0.00	0	0.00	99,196,623	0.00	98,837,172	0.00	40,523,240	0.00	40,523,240	0.00	40,523,240	0.00
GENERAL REVENUE	0	0.00	0	0.00	36,476,582	0.00	35,124,286	0.00	14,400,957	0.00	14,400,957	0.00	14,400,957	0.00
FEDERAL FUNDS	0	0.00	0	0.00	62,720,041	0.00	63,712,886	0.00	26,122,283	0.00	26,122,283	0.00	26,122,283	0.00
TOTAL	\$0	0.00	\$0	0.00	\$99,196,623	0.00	\$98,837,172	0.00	\$40,523,240	0.00	\$40,523,240	0.00	\$40,523,240	0.00

Funding to transition medical service payments associated with moving fee-for-service (FFS) participants to managed care. Funding is needed for a delayed managed care capitation payment and FFS claims run out both to be paid in FY18.

FMAP Adjustment - 1886025

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	28,704,413	0.00	28,704,413	0.00	28,704,413	0.00	28,704,413	0.00
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Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	28,704,413	0.00	28,704,413	0.00	28,704,413	0.00	28,704,413	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	28,704,413	0.00	28,704,413	0.00	28,704,413	0.00	28,704,413	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$28,704,413	0.00	\$28,704,413	0.00	\$28,704,413	0.00	\$28,704,413	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

Other Fund Offset - 1886032														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	17,455,620	0.00	17,455,620	0.00	17,455,620	0.00	17,455,620	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	10,000,000	0.00	10,000,000	0.00	10,000,000	0.00	10,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	7,455,620	0.00	7,455,620	0.00	7,455,620	0.00	7,455,620	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$17,455,620	0.00	\$17,455,620	0.00	\$17,455,620	0.00	\$17,455,620	0.00
Other fund balances used to offset GR need.														

Tobacco Fund Swap - 1886037														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	50,000,000	0.00	30,000,000	0.00	59,999,999	0.00	55,000,000	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE - 90551C														
Tobacco Fund Swap - 1886037														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	50,000,000	0.00	30,000,000	0.00	59,999,999	0.00	55,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	50,000,000	0.00	30,000,000	0.00	59,999,999	0.00	55,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$50,000,000	0.00	\$30,000,000	0.00	\$59,999,999	0.00	\$55,000,000	0.00
Ambulance FRA Increase - 1886048														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	697,106	0.00	697,106	0.00	697,106	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	447,960	0.00	447,960	0.00	447,960	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	249,146	0.00	249,146	0.00	249,146	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$697,106	0.00	\$697,106	0.00	\$697,106	0.00
House - added \$45/trip increase														
TOTAL - MANAGED CARE	\$1,225,985,101	0.00	\$1,888,226,425	0.00	\$2,338,629,758	0.00	\$2,380,030,053	0.00	\$2,264,099,295	0.00	\$2,264,099,294	0.00	\$2,264,099,294	0.00

DEPARTMENT OF SOCIAL SERVICES
MO HealthNet Division – Managed Care Expansion

Book

This section includes funding for the expansion of Managed Care statewide for those population groups currently in Managed Care. 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 2017 GR W/H: N/A

Funding was core reallocated to Managed Care section in 2016 Session (2017 Budget).

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505														
MANAGED CARE EXPANSION - 90586C														
CORE														
PROGRAM-SPECIFIC	614,135,857	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	165,255,542	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	396,244,988	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	52,635,327	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	614,135,857	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
TOTAL - MANAGED CARE EXPANSION	614,135,857	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.506 **MO HealthNet Division – Fee-For-Services run-out claims**

Book 5, Page 66

This section includes transitional funding for the remaining Fee-For-Services run-out claims from FY17 which will be paid in FY18 as the state transitions to statewide Managed Care statewide those population groups currently in Managed Care. 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.

Legal Base: RSMo 208.166; Federal – Social Security Act Section Number: 1915(b), 42 CFR 434 Subpart C
Funding Sources: General Revenue and Federal
FY 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New section created by the House.

GOVERNOR:

New section created by the House.

HOUSE:

Core reallocation in: \$58,313,932 (GR \$20,723,329 PSD & FED \$37,590,603 PSD) reallocated from Managed Care for FFS run-out claims

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.506														
FFS CLAIMS RUNOUT - 90841C														
FFS Claims Runout - 1886040														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	58,313,932	0.00	58,313,932	0.00	58,313,932	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	20,723,329	0.00	20,723,329	0.00	20,723,329	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	37,590,603	0.00	37,590,603	0.00	37,590,603	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$58,313,932	0.00	\$58,313,932	0.00	\$58,313,932	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.510 **MO HealthNet Division – Hospital Services**

Book 5, Page 423

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 2017 GR W/H:	\$550,000

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction:	(\$1,525,425) FED PSD core reduction of one-time Federal Funds
Core reallocation out:	(\$214,943,455) (GR \$18,258,808 PSD, FED \$105,252,160 PSD, & OTH \$91,432,487) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

GOVERNOR:

Core reduction:	(\$7,678,423) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP) (\$800,000) (GR \$400,000 PSD & FED \$400,000 PSD) core reduction to Tele-monitoring program – FY17 withhold (\$300,000) (GR \$150,000 EE & FED \$150,000 EE) core reduction to the pager project – FY17 withhold
Core reallocation out:	(\$16,540,111) (GR \$738,817 PSD, FED \$12,101,606 PSD, & OTH \$3,699,688) reallocated to Managed Care section to align budget with planned expenditures for expansion of Managed Care statewide for children, pregnant women, and low-income custodial parents

HOUSE:

Core reduction:	(\$3,869,115) (GR \$1,382,822 PSD & FED \$2,486,293 PSD) core reduction due to estimated savings from health home recruitment
Core restoration:	\$200,000 (GR \$100,000 PSD & FED \$100,000 PSD) core restoration for Pager Project (wireless medication notification program) \$200,000 (GR \$100,000 EE & FED \$100,000 EE) core restoration for Tele-monitoring program

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual

	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510 HOSPITAL CARE - 90552C														
CORE														
EXPENSE & EQUIPMENT	3,380,774	0.00	730,000	0.00	730,000	0.00	430,000	0.00	630,000	0.00	630,000	0.00	630,000	0.00
GENERAL REVENUE	0	0.00	150,000	0.00	150,000	0.00	0	0.00	100,000	0.00	100,000	0.00	100,000	0.00
FEDERAL FUNDS	2,157,019	0.00	365,000	0.00	365,000	0.00	215,000	0.00	315,000	0.00	315,000	0.00	315,000	0.00
OTHER FUNDS	1,223,755	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00
PROGRAM-SPECIFIC	628,985,941	0.00	604,676,682	0.00	388,207,802	0.00	363,189,268	0.00	359,520,153	0.00	359,520,153	0.00	359,520,153	0.00
GENERAL REVENUE	39,486,081	0.00	35,823,431	0.00	17,564,623	0.00	8,747,383	0.00	7,464,561	0.00	7,464,561	0.00	7,464,561	0.00
FEDERAL FUNDS	372,787,192	0.00	350,886,343	0.00	244,108,758	0.00	231,607,152	0.00	229,220,859	0.00	229,220,859	0.00	229,220,859	0.00
OTHER FUNDS	216,712,668	0.00	217,966,908	0.00	126,534,421	0.00	122,834,733	0.00	122,834,733	0.00	122,834,733	0.00	122,834,733	0.00
TOTAL	\$632,366,715	0.00	\$605,406,682	0.00	\$388,937,802	0.00	\$363,619,268	0.00	\$360,150,153	0.00	\$360,150,153	0.00	\$360,150,153	0.00

MHD Cost to Continue - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	122,687,977	0.00	127,268,389	0.00	0	0.00	127,268,389	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	35,879,365	0.00	32,678,768	0.00	0	0.00	32,678,768	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	86,808,612	0.00	94,589,621	0.00	0	0.00	94,589,621	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$122,687,977	0.00	\$127,268,389	0.00	\$0	0.00	\$127,268,389	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003

PROGRAM-SPECIFIC	0	0.00	0	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00
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Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510														
HOSPITAL CARE - 90552C														
MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00	1,525,425	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1,525,425	0.00	\$1,525,425	0.00	\$1,525,425	0.00	\$1,525,425	0.00	\$1,525,425	0.00
Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.														

Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	27,590,948	0.00	15,865,813	0.00	15,865,813	0.00	15,865,813	0.00	15,865,813	0.00
GENERAL REVENUE	0	0.00	0	0.00	88,726	0.00	17,806	0.00	17,806	0.00	17,806	0.00	17,806	0.00
FEDERAL FUNDS	0	0.00	0	0.00	17,445,205	0.00	10,195,371	0.00	10,195,371	0.00	10,195,371	0.00	10,195,371	0.00
OTHER FUNDS	0	0.00	0	0.00	10,057,017	0.00	5,652,636	0.00	5,652,636	0.00	5,652,636	0.00	5,652,636	0.00
TOTAL	\$0	0.00	\$0	0.00	\$27,590,948	0.00	\$15,865,813	0.00	\$15,865,813	0.00	\$15,865,813	0.00	\$15,865,813	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	7,678,423	0.00	7,678,423	0.00	7,678,423	0.00	7,678,423	0.00

Committee Markup Annual

	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510														
HOSPITAL CARE - 90552C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	7,678,423	0.00	7,678,423	0.00	7,678,423	0.00	7,678,423	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	7,678,423	0.00	7,678,423	0.00	7,678,423	0.00	7,678,423	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$7,678,423	0.00	\$7,678,423	0.00	\$7,678,423	0.00	\$7,678,423	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

Medicaid ER Reduction Program - 1886042														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	0	0.00	100,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	0	0.00	100,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$100,000	0.00	\$0	0.00	\$100,000	0.00

TOTAL - HOSPITAL CARE	\$632,366,715	0.00	\$605,406,682	0.00	\$540,742,152	0.00	\$515,957,318	0.00	\$385,319,814	0.00	\$512,488,203	0.00	\$385,319,814	0.00
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DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Page 426

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

[illegible]

Physician Payments Safety Net - 1886029														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	5,722,792	0.00	5,722,792	0.00	5,722,792	0.00	5,722,792	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,722,792	0.00	5,722,792	0.00	5,722,792	0.00	5,722,792	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$5,722,792	0.00	\$5,722,792	0.00	\$5,722,792	0.00	\$5,722,792	0.00
Enhanced physician reimbursement payments for services provided to MO HealthNet participants by safety net hospitals. This request for funding increase aligns the budget with planned spending.														

TOTAL - PHYSICIAN PAYMENTS SAFETY NET	\$8,000,000	0.00	\$8,000,000	0.00	\$8,000,000	0.00	\$13,722,792	0.00	\$13,722,792	0.00	\$13,722,792	0.00	\$13,722,792	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.520

MO HealthNet Divisions – Federally Qualified Health Centers FQHCs

Book 6, Page 438

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$2,526,002) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$204,696) (GR \$75,271 PSD & FED \$129,425 PSD) core reduction – equal to the provider rate increase added in FY 2017

HOUSE:

Core restoration: \$102,349 (GR \$37,636 PSD & FED \$64,713 PSD) core restoration – restore 1/2 of Governor’s provider rate reduction

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.520 FQHC DISTRIBUTION - 90559C														
CORE														
PROGRAM-SPECIFIC	10,254,867	0.00	14,942,945	0.00	14,942,945	0.00	12,212,247	0.00	12,314,596	0.00	12,314,596	0.00	12,314,596	0.00
GENERAL REVENUE	5,858,668	0.00	6,183,830	0.00	6,183,830	0.00	6,108,559	0.00	6,146,195	0.00	6,146,195	0.00	6,146,195	0.00
FEDERAL FUNDS	4,396,199	0.00	8,759,115	0.00	8,759,115	0.00	6,103,688	0.00	6,168,401	0.00	6,168,401	0.00	6,168,401	0.00
TOTAL	\$10,254,867	0.00	\$14,942,945	0.00	\$14,942,945	0.00	\$12,212,247	0.00	\$12,314,596	0.00	\$12,314,596	0.00	\$12,314,596	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	59,026	0.00	0	0.00	59,026	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	57,369	0.00	0	0.00	57,369	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,657	0.00	0	0.00	1,657	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$59,026	0.00	\$0	0.00	\$59,026	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

Primary Care HH Rate Inc - 1886014														
PROGRAM-SPECIFIC	0	0.00	0	0.00	159,050	0.00	54,126	0.00	54,126	0.00	54,126	0.00	54,126	0.00
GENERAL REVENUE	0	0.00	0	0.00	58,486	0.00	19,155	0.00	19,155	0.00	19,155	0.00	19,155	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.520														
FQHC DISTRIBUTION - 90559C														
Primary Care HH Rate Inc - 1886014														
PROGRAM-SPECIFIC	0	0.00	0	0.00	159,050	0.00	54,126	0.00	54,126	0.00	54,126	0.00	54,126	0.00
FEDERAL FUNDS	0	0.00	0	0.00	100,564	0.00	34,971	0.00	34,971	0.00	34,971	0.00	34,971	0.00
TOTAL	\$0	0.00	\$0	0.00	\$159,050	0.00	\$54,126	0.00	\$54,126	0.00	\$54,126	0.00	\$54,126	0.00
The state plan amendment for Primary Care Health Homes requires MO HealthNet to annually adjust the per member per month (PMPM) rate in January according to the Consumer Price Index. This request funds a 2% rate increase beginning January 2018.														
FQHC Increase - 1886043														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,782,876	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	637,200	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,145,676	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,782,876	0.00	\$0	0.00	\$0	0.00
TOTAL - FQHC DISTRIBUTION	\$10,254,867	0.00	\$14,942,945	0.00	\$15,101,995	0.00	\$12,325,399	0.00	\$14,151,598	0.00	\$12,427,748	0.00	\$12,368,722	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.525 MO HealthNet Division – FRA Health Care Homes

Book 6, Page 448

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$600,000) OTH PSD core reduction to align budget with planned expenditures

GOVERNOR:

Core reduction: (\$559,922) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.525														
FRA HEALTH CARE HOME - 90574C														
CORE														
PROGRAM-SPECIFIC	5,128,405	0.00	7,353,934	0.00	6,753,934	0.00	6,194,012	0.00	6,194,012	0.00	6,194,012	0.00	6,194,012	0.00
FEDERAL FUNDS	3,274,471	0.00	4,900,000	0.00	4,900,000	0.00	4,340,078	0.00	4,340,078	0.00	4,340,078	0.00	4,340,078	0.00
OTHER FUNDS	1,853,934	0.00	2,453,934	0.00	1,853,934	0.00	1,853,934	0.00	1,853,934	0.00	1,853,934	0.00	1,853,934	0.00
TOTAL	\$5,128,405	0.00	\$7,353,934	0.00	\$6,753,934	0.00	\$6,194,012	0.00	\$6,194,012	0.00	\$6,194,012	0.00	\$6,194,012	0.00

Primary Care HH Rate Inc - 1886014

PROGRAM-SPECIFIC	0	0.00	0	0.00	188,311	0.00	53,685	0.00	53,685	0.00	53,685	0.00	53,685	0.00
FEDERAL FUNDS	0	0.00	0	0.00	119,065	0.00	34,686	0.00	34,686	0.00	34,686	0.00	34,686	0.00
OTHER FUNDS	0	0.00	0	0.00	69,246	0.00	18,999	0.00	18,999	0.00	18,999	0.00	18,999	0.00
TOTAL	\$0	0.00	\$0	0.00	\$188,311	0.00	\$53,685	0.00	\$53,685	0.00	\$53,685	0.00	\$53,685	0.00

The state plan amendment for Primary Care Health Homes requires MO HealthNet to annually adjust the per member per month (PMPM) rate in January according to the Consumer Price Index. This request funds a 2% rate increase beginning January 2018.

FMAP Adjustment - 1886025

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	559,922	0.00	559,922	0.00	559,922	0.00	559,922	0.00
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Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.525														
FRA HEALTH CARE HOME - 90574C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	559,922	0.00	559,922	0.00	559,922	0.00	559,922	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	559,922	0.00	559,922	0.00	559,922	0.00	559,922	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$559,922	0.00	\$559,922	0.00	\$559,922	0.00	\$559,922	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														
FRA Health Home Authority - 1886030														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,297,547	0.00	1,297,547	0.00	1,297,547	0.00	1,297,547	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	833,804	0.00	833,804	0.00	833,804	0.00	833,804	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	463,743	0.00	463,743	0.00	463,743	0.00	463,743	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,297,547	0.00	\$1,297,547	0.00	\$1,297,547	0.00	\$1,297,547	0.00
Authority increase to align budget with anticipated health home costs paid from FRA.														
TOTAL - FRA HEALTH CARE HOME	\$5,128,405	0.00	\$7,353,934	0.00	\$6,942,245	0.00	\$8,105,166	0.00	\$8,105,166	0.00	\$8,105,166	0.00	\$8,105,166	0.00

DEPARTMENT OF SOCIAL SERVICES
MO HealthNet Division – Regional Care Coordination Model

Book 6, Page 460

This section 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 2017 GR W/H: \$200,000

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$1,440,403) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)
(\$559,597) (GR \$200,000 PSD & FED \$359,597 PSD) core reduction – FY17 withhold

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.525														
REGIONAL CARE COORDINATION - 90578C														
CORE														
PROGRAM-SPECIFIC	0	0.00	2,000,000	0.00	2,000,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	200,000	0.00	200,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	1,800,000	0.00	1,800,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$2,000,000	0.00	\$2,000,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

TOTAL - REGIONAL CARE COORDINATION	\$0	0.00	\$2,000,000	0.00	\$2,000,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.530 **MO HealthNet Division – Federal Reimbursement Allowance**

Book 6, Page 467

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes
Requested an “E”.

GOVERNOR:

No core changes
Recommended an “E”.

HOUSE:

No core changes
Removed the “E” and increased OTH appropriation by \$155,000,000 through NDI.

SENATE:

Restored the “E” and decreased OTH appropriation by \$155,000,000 through NDI added by House.

CONFERENCE:

Removed the “E” and increased OTH appropriation by \$155,000,000 through NDI.
Same as House – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.530														
FED REIMB ALLOWANCE - 90553C														
CORE														
EXPENSE & EQUIPMENT	190,716	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	190,716	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	1,100,351,593	0.00	1,125,818,734	0.00	1,125,818,734	0.00	1,125,818,734	0.00	1,125,818,734	0.00	1,125,818,734	0.00	1,125,818,734	0.00
OTHER FUNDS	1,100,351,593	0.00	1,125,818,734 E	0.00	1,125,818,734 E	0.00	1,125,818,734 E	0.00	1,125,818,734	0.00	1,125,818,734 E	0.00	1,125,818,734	0.00
TOTAL	\$1,100,542,309	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00
FRA Removal of E Increase - 1886044														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	155,000,000	0.00	0	0.00	155,000,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	155,000,000	0.00	0	0.00	155,000,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$155,000,000	0.00	\$0	0.00	\$155,000,000	0.00
TOTAL - FED REIMB ALLOWANCE	\$1,100,542,309	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00	\$1,125,818,734	0.00	\$1,280,818,734	0.00	\$1,125,818,734	0.00	\$1,280,818,734	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.535

MO HealthNet Division – Intergovernmental Transfer (IGT)

Book 6, Page 476

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.535														
IGT EXPEND TRANSFER - 90570C														
CORE														
FUND TRANSFERS	82,770,769	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00
OTHER FUNDS	82,770,769	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00
TOTAL	\$82,770,769	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00

TOTAL - IGT EXPEND TRANSFER	\$82,770,769	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	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 6, Page 568

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$35,323,099) (FED \$20,323,099 PSD & OTH \$15,000,000 PSD) core reduction due to excess appropriation authority

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	32,937,195	0.00	99,854,549	0.00	64,531,450	0.00	64,531,450	0.00	64,531,450	0.00	64,531,450	0.00	64,531,450	0.00
FEDERAL FUNDS	22,666,760	0.00	61,505,748	0.00	41,182,649	0.00	41,182,649	0.00	41,182,649	0.00	41,182,649	0.00	41,182,649	0.00
OTHER FUNDS	10,270,435	0.00	38,348,801	0.00	23,348,801	0.00	23,348,801	0.00	23,348,801	0.00	23,348,801	0.00	23,348,801	0.00
TOTAL	\$32,937,195	0.00	\$99,854,549	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00
TOTAL - IGT SAFETY NET HOSPITALS	\$32,937,195	0.00	\$99,854,549	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Page 484

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual

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Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	331,206,702	0.00	350,426,731	0.00	350,426,731	0.00	350,426,731	0.00	350,426,731	0.00	350,426,731	0.00	350,426,731	0.00
FEDERAL FUNDS	209,876,162	0.00	221,900,719	0.00	221,900,719	0.00	221,900,719	0.00	221,900,719	0.00	221,900,719	0.00	221,900,719	0.00
OTHER FUNDS	121,330,540	0.00	128,526,012	0.00	128,526,012	0.00	128,526,012	0.00	128,526,012	0.00	128,526,012	0.00	128,526,012	0.00
TOTAL	\$331,206,702	0.00	\$350,426,731	0.00	\$350,426,731	0.00	\$350,426,731	0.00	\$350,426,731	0.00	\$350,426,731	0.00	\$350,426,731	0.00

MHD Transfer Authority - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	27,080,892	0.00	74,599,149	0.00	74,599,149	0.00	74,599,149	0.00	74,599,149	0.00
FEDERAL FUNDS	0	0.00	0	0.00	16,789,801	0.00	55,148,154	0.00	55,148,154	0.00	55,148,154	0.00	55,148,154	0.00
OTHER FUNDS	0	0.00	0	0.00	10,291,091	0.00	19,450,995	0.00	19,450,995	0.00	19,450,995	0.00	19,450,995	0.00
TOTAL	\$0	0.00	\$0	0.00	\$27,080,892	0.00	\$74,599,149	0.00	\$74,599,149	0.00	\$74,599,149	0.00	\$74,599,149	0.00

Based on projected MO HealthNet and DMH expenditures for fiscal year 2018, additional authority is requested to support increased DMH payments through the DMH Intergovernmental Transfer.

TOTAL - IGT DMH MEDICAID PROGRAM	\$331,206,702	0.00	\$350,426,731	0.00	\$377,507,623	0.00	\$425,025,880	0.00	\$425,025,880	0.00	\$425,025,880	0.00	\$425,025,880	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.550 **MO HealthNet Division – Women’s Health Services**

Book 6, Page 497

This section provides funding for women’s health services and family planning services.

Legal Base: RSMo 208.453, 208.152, 208.153

Funding Sources: General Revenue

FY 2017 GR W/H: \$4,000,000

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$4,000,000) GR PSD core reduction due to estimated lapse – FY17 withhold

HOUSE:

Core reduction: (\$637,200) GR PSD core reduction

SENATE:

Core transfer out: (\$6,153,723) GR PSD transferred out to HB 10 Department of Health and Senior Services

CONFERENCE:

Same as Senate – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	7,107,453	0.00	10,790,923	0.00	10,790,923	0.00	6,790,923	0.00	6,153,723	0.00	0	0.00	0	0.00
GENERAL REVENUE	1,153,367	0.00	10,790,923	0.00	10,790,923	0.00	6,790,923	0.00	6,153,723	0.00	0	0.00	0	0.00
FEDERAL FUNDS	5,877,658	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	76,428	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$7,107,453	0.00	\$10,790,923	0.00	\$10,790,923	0.00	\$6,790,923	0.00	\$6,153,723	0.00	\$0	0.00	\$0	0.00

Pharmacy PMPM-Specialty - 1886006														
PROGRAM-SPECIFIC	0	0.00	0	0.00	131,629	0.00	81,076	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	131,629	0.00	81,076	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$131,629	0.00	\$81,076	0.00	\$0	0.00	\$0	0.00	\$0	0.00

An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated Specialty PMPM rate increase of 12.273% is expected in FY18. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects a weighted projection of prior 2-year expenditure history and Express Scripts forecast.

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550														
WOMEN'S HEALTH SRVC - 90554C														
Pharmacy PMPM-Non Specialty - 1886007														
PROGRAM-SPECIFIC	0	0.00	0	0.00	6,028	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	6,028	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$6,028	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
TOTAL - WOMEN'S HEALTH SRVC	\$7,107,453	0.00	\$10,790,923	0.00	\$10,928,580	0.00	\$6,871,999	0.00	\$6,153,723	0.00	\$0	0.00	\$0	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Page 508

This section provides funding for the State Children’s Health Insurance Program (CHIP), which is 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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$858,844) FED PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.555														
CHILDREN'S HEALTH INS PROGRAM - 90556C														
CORE														
EXPENSE & EQUIPMENT	2,063,154	0.00	1,200,000	0.00	1,200,000	0.00	1,200,000	0.00	1,200,000	0.00	1,200,000	0.00	1,200,000	0.00
GENERAL REVENUE	195,089	0.00	504,000	0.00	504,000	0.00	504,000	0.00	504,000	0.00	504,000	0.00	504,000	0.00
FEDERAL FUNDS	1,868,065	0.00	696,000	0.00	696,000	0.00	696,000	0.00	696,000	0.00	696,000	0.00	696,000	0.00
PROGRAM-SPECIFIC	67,720,341	0.00	91,552,778	0.00	91,552,778	0.00	90,693,934	0.00	90,693,934	0.00	90,693,934	0.00	90,693,934	0.00
GENERAL REVENUE	3,623,936	0.00	14,000,145	0.00	14,000,145	0.00	14,000,145	0.00	14,000,145	0.00	14,000,145	0.00	14,000,145	0.00
FEDERAL FUNDS	61,463,475	0.00	69,833,429	0.00	69,833,429	0.00	68,974,585	0.00	68,974,585	0.00	68,974,585	0.00	68,974,585	0.00
OTHER FUNDS	2,632,930	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00
TOTAL	\$69,783,495	0.00	\$92,752,778	0.00	\$92,752,778	0.00	\$91,893,934	0.00	\$91,893,934	0.00	\$91,893,934	0.00	\$91,893,934	0.00

Pharmacy PMPM-Specialty - 1886006														
PROGRAM-SPECIFIC	0	0.00	0	0.00	1,871,993	0.00	1,153,046	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	481,795	0.00	288,434	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	1,390,198	0.00	864,612	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1,871,993	0.00	\$1,153,046	0.00	\$0	0.00	\$0	0.00	\$0	0.00

An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated Specialty PMPM rate increase of 12.273% is expected in FY18. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects a weighted projection of prior 2-year expenditure history and Express Scripts forecast.

Pharmacy PMPM-Non Specialty - 1886007														
PROGRAM-SPECIFIC	0	0.00	0	0.00	85,732	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	22,065	0.00	0	0.00	0	0.00	0	0.00	0	0.00

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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-Non Specialty - 1886007														
PROGRAM-SPECIFIC	0	0.00	0	0.00	85,732	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	63,667	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$85,732	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

FY 2018 Managed Care Rates - 1886009														
PROGRAM-SPECIFIC	0	0.00	0	0.00	236,298	0.00	236,298	0.00	236,298	0.00	236,298	0.00	236,298	0.00
GENERAL REVENUE	0	0.00	0	0.00	60,816	0.00	59,110	0.00	59,110	0.00	59,110	0.00	59,110	0.00
FEDERAL FUNDS	0	0.00	0	0.00	175,482	0.00	177,188	0.00	177,188	0.00	177,188	0.00	177,188	0.00
TOTAL	\$0	0.00	\$0	0.00	\$236,298	0.00	\$236,298	0.00	\$236,298	0.00	\$236,298	0.00	\$236,298	0.00

Federal rule requires payments made on behalf of managed care participants be actuarially sound. This increase is based on the FY18 rates that are set in the statewide managed care Request for Proposal (RFP).

Statewide Mgd Care Transition - 1886011														
PROGRAM-SPECIFIC	0	0.00	0	0.00	529,622	0.00	529,622	0.00	529,622	0.00	529,622	0.00	529,622	0.00
GENERAL REVENUE	0	0.00	0	0.00	136,309	0.00	136,309	0.00	136,309	0.00	136,309	0.00	136,309	0.00

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.555														
CHILDREN'S HEALTH INS PROGRAM - 90556C														
Statewide Mgd Care Transition - 1886011														
PROGRAM-SPECIFIC	0	0.00	0	0.00	529,622	0.00	529,622	0.00	529,622	0.00	529,622	0.00	529,622	0.00
FEDERAL FUNDS	0	0.00	0	0.00	393,313	0.00	393,313	0.00	393,313	0.00	393,313	0.00	393,313	0.00
TOTAL	\$0	0.00	\$0	0.00	\$529,622	0.00	\$529,622	0.00	\$529,622	0.00	\$529,622	0.00	\$529,622	0.00
Funding to transition medical service payments associated with moving fee-for-service (FFS) participants to managed care. Funding is needed for a delayed managed care capitation payment and FFS claims run out both to be paid in FY18.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	858,844	0.00	858,844	0.00	858,844	0.00	858,844	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	858,844	0.00	858,844	0.00	858,844	0.00	858,844	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$858,844	0.00	\$858,844	0.00	\$858,844	0.00	\$858,844	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														

TOTAL - CHILDREN'S HEALTH INS PROGRAM	\$69,783,495	0.00	\$92,752,778	0.00	\$95,476,423	0.00	\$94,671,744	0.00	\$93,518,698	0.00	\$93,518,698	0.00	\$93,518,698	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.560

MO HealthNet Division – Show-Me Healthy Babies Program

Book 6, Page 521

This section would provide funding for approximately 1,800 – 1,850 unborn children up to 300% of the Federal Poverty Level (FPL) as authorized by Senate Bill 754 (2014). This program provides all prenatal care and pregnancy-related services that benefit the health of the unborn and promote healthy labor, delivery, and birth. For an unborn child to be eligible for enrollment in the program, the mother of the child must not be eligible for coverage under the Medicaid Program and must not have access to other affordable health care coverage. Coverage for the unborn child is for the period of conception to birth and shall continue up to one year after birth. Pregnancy-related and postpartum coverage for the mother shall begin on the day the pregnancy ends and extend through the last day of the month that includes the sixtieth day after pregnancy ends.

Legal Base: RSMo 208.662.
Funding Sources: General Revenue and Federal
FY 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$69,985) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.560														
SHOW-ME BABIES - 88855C														
CORE														
EXPENSE & EQUIPMENT	113,275	0.00	40,000	0.00	40,000	0.00	40,000	0.00	40,000	0.00	40,000	0.00	40,000	0.00
GENERAL REVENUE	55,775	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00
FEDERAL FUNDS	57,500	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00
PROGRAM-SPECIFIC	2,294,933	0.00	13,557,790	0.00	13,557,790	0.00	13,487,805	0.00	13,487,805	0.00	13,487,805	0.00	13,487,805	0.00
GENERAL REVENUE	682,193	0.00	3,461,466	0.00	3,461,466	0.00	3,391,481	0.00	3,391,481	0.00	3,391,481	0.00	3,391,481	0.00
FEDERAL FUNDS	1,612,740	0.00	10,096,324	0.00	10,096,324	0.00	10,096,324	0.00	10,096,324	0.00	10,096,324	0.00	10,096,324	0.00
TOTAL	\$2,408,208	0.00	\$13,597,790	0.00	\$13,597,790	0.00	\$13,527,805	0.00	\$13,527,805	0.00	\$13,527,805	0.00	\$13,527,805	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	5,462,494	0.00	11,111,593	0.00	0	0.00	11,111,593	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,425,084	0.00	2,883,419	0.00	0	0.00	2,883,419	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	4,037,410	0.00	8,228,174	0.00	0	0.00	8,228,174	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$5,462,494	0.00	\$11,111,593	0.00	\$0	0.00	\$11,111,593	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

FY 2018 Managed Care Rates - 1886009														
PROGRAM-SPECIFIC	0	0.00	0	0.00	280,503	0.00	280,503	0.00	280,503	0.00	280,503	0.00	280,503	0.00
GENERAL REVENUE	0	0.00	0	0.00	72,193	0.00	70,168	0.00	70,168	0.00	70,168	0.00	70,168	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.560														
SHOW-ME BABIES - 88855C														
FY 2018 Managed Care Rates - 1886009														
PROGRAM-SPECIFIC	0	0.00	0	0.00	280,503	0.00	280,503	0.00	280,503	0.00	280,503	0.00	280,503	0.00
FEDERAL FUNDS	0	0.00	0	0.00	208,310	0.00	210,335	0.00	210,335	0.00	210,335	0.00	210,335	0.00
TOTAL	\$0	0.00	\$0	0.00	\$280,503	0.00	\$280,503	0.00	\$280,503	0.00	\$280,503	0.00	\$280,503	0.00
Federal rule requires payments made on behalf of managed care participants be actuarially sound. This increase is based on the FY18 rates that are set in the statewide managed care Request for Proposal (RFP).														

Statewide Mgd Care Transition - 1886011														
PROGRAM-SPECIFIC	0	0.00	0	0.00	110,509	0.00	110,509	0.00	110,509	0.00	110,509	0.00	110,509	0.00
GENERAL REVENUE	0	0.00	0	0.00	28,441	0.00	28,441	0.00	28,441	0.00	28,441	0.00	28,441	0.00
FEDERAL FUNDS	0	0.00	0	0.00	82,068	0.00	82,068	0.00	82,068	0.00	82,068	0.00	82,068	0.00
TOTAL	\$0	0.00	\$0	0.00	\$110,509	0.00	\$110,509	0.00	\$110,509	0.00	\$110,509	0.00	\$110,509	0.00
Funding to transition medical service payments associated with moving fee-for-service (FFS) participants to managed care. Funding is needed for a delayed managed care capitation payment and FFS claims run out both to be paid in FY18.														

FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	69,985	0.00	69,985	0.00	69,985	0.00	69,985	0.00

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.560														
SHOW-ME BABIES - 88855C														
FMAP Adjustment - 1886025														
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	69,985	0.00	69,985	0.00	69,985	0.00	69,985	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	69,985	0.00	69,985	0.00	69,985	0.00	69,985	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$69,985	0.00	\$69,985	0.00	\$69,985	0.00	\$69,985	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There are also corresponding GR and federal reductions in order to realign the match rate within programs. The FY17 blended FMAP rate is 63.228% and the FY18 blended FMAP rate is 64.260%.														
TOTAL - SHOW-ME BABIES	\$2,408,208	0.00	\$13,597,790	0.00	\$19,451,296	0.00	\$25,100,395	0.00	\$13,988,802	0.00	\$25,100,395	0.00	\$13,988,802	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Pages 569 & 570

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.565														
GR FRA-TRANSFER - 90840C														
CORE														
FUND TRANSFERS	605,032,611	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00
GENERAL REVENUE	605,032,611	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00
TOTAL	\$605,032,611	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00

FRA - Increase Authority - 1886013

FUND TRANSFERS	0	0.00	0	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00
GENERAL REVENUE	0	0.00	0	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00
TOTAL	\$0	0.00	\$0	0.00	\$21,593,878	0.00	\$21,593,878	0.00	\$21,593,878	0.00	\$21,593,878	0.00	\$21,593,878	0.00
Federal Medicaid regulation requires states to establish they have sufficient state dollars available in order to receive federal Medicaid matching funds. The Federal Reimbursement Allowance Transfers are used as accounting mechanisms to meet this requirement.														

TOTAL - GR FRA-TRANSFER	\$605,032,611	0.00	\$632,107,500	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00
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Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	605,032,611	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00
OTHER FUNDS	605,032,611	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00	632,107,500	0.00
TOTAL	\$605,032,611	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00	\$632,107,500	0.00

FRA - Increase Authority - 1886013

FUND TRANSFERS	0	0.00	0	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00
OTHER FUNDS	0	0.00	0	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00	21,593,878	0.00
TOTAL	\$0	0.00	\$0	0.00	\$21,593,878	0.00	\$21,593,878	0.00	\$21,593,878	0.00	\$21,593,878	0.00	\$21,593,878	0.00
Federal Medicaid regulation requires states to establish they have sufficient state dollars available in order to receive federal Medicaid matching funds. The Federal Reimbursement Allowance Transfers are used as accounting mechanisms to meet this requirement.														

TOTAL - FED REIMBURSE ALLOW-TRANSFEI	\$605,032,611	0.00	\$632,107,500	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00
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DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Pages 571 & 572

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.575														
GR NFFRA-TRANSFER - 90850C														
CORE														
FUND TRANSFERS	191,448,558	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
GENERAL REVENUE	191,448,558	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
TOTAL	\$191,448,558	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
TOTAL - GR NFFRA-TRANSFER	\$191,448,558	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	191,448,558	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
OTHER FUNDS	191,448,558	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
TOTAL	\$191,448,558	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
TOTAL - NURSING FACILITY REIM-TRANSFERS	\$191,448,558	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Page 573

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	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	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	\$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	\$1,500,000	0.00

DEPARTMENT OF SOCIAL SERVICES

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

Book 6, Page 530

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 2017 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation out: \$26,116,239 OTH PSD reallocated in from Nursing Facilities section to align state and federal earnings

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	318,920,466	0.00	325,332,526	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00
OTHER FUNDS	318,920,466	0.00	325,332,526	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00
TOTAL	\$318,920,466	0.00	\$325,332,526	0.00	\$351,448,765	0.00	\$351,448,765	0.00	\$351,448,765	0.00	\$351,448,765	0.00	\$351,448,765	0.00

MHD Cost to Continue - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	7,094,330	0.00	7,630,857	0.00	0	0.00	7,630,857	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	7,094,330	0.00	7,630,857	0.00	0	0.00	7,630,857	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$7,094,330	0.00	\$7,630,857	0.00	\$0	0.00	\$7,630,857	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

TOTAL - NURSING FACILITY FED REIMB AL	\$318,920,466	0.00	\$325,332,526	0.00	\$358,543,095	0.00	\$359,079,622	0.00	\$351,448,765	0.00	\$359,079,622	0.00	\$351,448,765	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 6, Page 541

This section provides funding for the federal match related to 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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Committee Markup Annual

FY 2018 - HB 11 SOCIAL SERVICES

Regular House Bills

	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.595														
SCHOOL DISTRICT CLAIMING - 90569C														
CORE														
EXPENSE & EQUIPMENT	1,350,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	1,350,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
PROGRAM-SPECIFIC	30,149,446	0.00	34,896,295	0.00	34,896,295	0.00	34,896,295	0.00	34,896,295	0.00	34,896,295	0.00	34,896,295	0.00
GENERAL REVENUE	151,448	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00
FEDERAL FUNDS	29,997,998	0.00	34,653,770	0.00	34,653,770	0.00	34,653,770	0.00	34,653,770	0.00	34,653,770	0.00	34,653,770	0.00
TOTAL	\$31,499,446	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00

TOTAL - SCHOOL DISTRICT CLAIMING	\$31,499,446	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.600 **MO HealthNet Division – Blind Pension Medical**

Book 6, Page 552

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 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$1,004,600) FED PSD core reduction of one-time Federal Funds

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Committee Markup Annual	FY 2018 - HB 11 SOCIAL SERVICES												Regular House Bills	
	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	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	25,966,864	0.00	26,672,798	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00
GENERAL REVENUE	25,966,864	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00	25,668,198	0.00
FEDERAL FUNDS	0	0.00	1,004,600	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$25,966,864	0.00	\$26,672,798	0.00	\$25,668,198	0.00	\$25,668,198	0.00	\$25,668,198	0.00	\$25,668,198	0.00	\$25,668,198	0.00

MHD Cost to Continue - 1886001														
PROGRAM-SPECIFIC	0	0.00	0	0.00	1,101,721	0.00	548,684	0.00	0	0.00	548,684	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,101,721	0.00	548,684	0.00	0	0.00	548,684	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1,101,721	0.00	\$548,684	0.00	\$0	0.00	\$548,684	0.00	\$0	0.00

Corresponding FY18 NDI to a FY17 supplemental request for the additional cost of existing Medicaid programs.

MHD GR Pickup - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00

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	FY 2016 ACTUAL		FY 2017 BUDGET		FY 2018 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		SENATE RECOMMENDED		TRULY AGREED FINALLY PASSED	
	DOLLAR	FTE	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 - 1886003														
PROGRAM-SPECIFIC	0	0.00	0	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00
GENERAL REVENUE	0	0.00	0	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00	1,004,600	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1,004,600	0.00	\$1,004,600	0.00	\$1,004,600	0.00	\$1,004,600	0.00	\$1,004,600	0.00
Funding is required to backfill one-time federal funds budgeted in FY 17. One time sources of federal funds include: Division of Youth Services retro Medicaid rehab claims, enhanced CHIP federal match from FY16 expenditures, and three quarters of FY18 federal funds from enhanced CHIP match because the enhanced match ends October 1, 2017.														

Pharmacy PMPM-Specialty - 1886006														
PROGRAM-SPECIFIC	0	0.00	0	0.00	589,351	0.00	363,008	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	589,351	0.00	363,008	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$589,351	0.00	\$363,008	0.00	\$0	0.00	\$0	0.00	\$0	0.00
An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated Specialty PMPM rate increase of 12.273% is expected in FY18. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects a weighted projection of prior 2-year expenditure history and Express Scripts forecast.														

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.600														
BLIND PENSION MEDICAL BENEFITS - 90573C														
Pharmacy PMPM-Non Specialty - 1886007														
PROGRAM-SPECIFIC	0	0.00	0	0.00	26,991	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	26,991	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$26,991	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
TOTAL - BLIND PENSION MEDICAL BENEFITS	\$25,966,864	0.00	\$26,672,798	0.00	\$28,390,861	0.00	\$27,584,490	0.00	\$26,672,798	0.00	\$27,221,482	0.00	\$26,672,798	0.00

DEPARTMENT OF SOCIAL SERVICES
MO HealthNet Division – HB 1565 Asset Limit

Book 5, Page 81

This section provides funding for services provided by the Department of Mental Health and Health & Senior Services for additional individuals and couples who will become eligible for full Medicaid benefits as a result of HB 1565 (2016). The bill raised the MO HealthNet asset limit for MO HealthNet permanent and totally disabled, blind, and elderly individuals from \$1,000 to \$2,000 individuals and \$2,000 to \$4,000 for married couples.

Legal Base: RSMo 208.151, 208.152
Funding Sources: General Revenue and Federal Funds
FY 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
New section created by the Department through NDI.

GOVERNOR:
New section created by the Department through NDI.

HOUSE:
Core transfer out: (\$19,363,231) (GR \$6,920,419 PSD & FED \$12,442,812 PSD) transferred to Department of Mental Health (HB 10)
(\$10,003,789) (GR \$3,575,354 PSD & FED \$6,428,435 PSD) transferred to Department of Health & Senior Services (HB 10)

SENATE:
Same as House – no additional core changes

CONFERENCE:
Same as House – no additional core changes

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.605														
DMH ASSET LIMIT - 90590C														
Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	33,673,024	0.00	19,363,231	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	12,382,244	0.00	6,920,419	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	21,290,780	0.00	12,442,812	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$33,673,024	0.00	\$19,363,231	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														
TOTAL - DMH ASSET LIMIT	\$0	0.00	\$0	0.00	\$33,673,024	0.00	\$19,363,231	0.00	\$0	0.00	\$0	0.00	\$0	0.00

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.605														
DHSS ASSET LIMIT - 90591C														
Asset Limit Increase - HB 1565 - 1886012														
PROGRAM-SPECIFIC	0	0.00	0	0.00	17,396,777	0.00	10,003,789	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	6,397,143	0.00	3,575,354	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	10,999,634	0.00	6,428,435	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$17,396,777	0.00	\$10,003,789	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanent and totally disabled, blind, and aged claimants from \$1,000 to \$2,000 for individuals and \$2,000 to \$4,000 for married couples in 2018.														

TOTAL - DHSS ASSET LIMIT	\$0	0.00	\$0	0.00	\$17,396,777	0.00	\$10,003,789	0.00	\$0	0.00	\$0	0.00	\$0	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.610 **Department of Social Services – Legal Expense Fund**

Book 6, Page 552

This section provides for the transfer of General Funds to Legal Expense Fund for the payment of claims, premiums, and expenses as provided by Section 105.711 through 105.726, RSMo.

Legal Base: RSMo 105.711 – 105.726
Funding Sources: General Revenue
FY 2017 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

New section created by the House.

GOVERNOR:

New section created by the House.

HOUSE:

New section created by the House with 3% flexibility from various sections in HB 11.

SENATE:

Same as House – no additional changes

CONFERENCE:

Same as House – no additional changes

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	FY 2016		FY 2017		FY 2018		GOV AS		HOUSE		SENATE		TRULY AGREED	
	ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		RECOMMENDED		FINALLY PASSED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.610														
DSS LEGAL EXPENSE FUND TRF - 90599C														
Legal Expense Transfer - 1886046														
FUND TRANSFERS	0	0.00	0	0.00	0	0.00	0	0.00	1	0.00	1	0.00	1	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	1	0.00	1	0.00	1	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1	0.00	\$1	0.00	\$1	0.00
TOTAL - DSS LEGAL EXPENSE FUND TRF	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1	0.00	\$1	0.00	\$1	0.00

