

Catastrophic Health Care Cost Program

November 17, 2011

Health Care Task Force

Average Claims Paid

	2008	2009	2010	2011	2012 YTD 10/31/2011	2013 (Est)
No. of cases paid on	1101	1187	1298	1333	1500 (4mos.) 538	1500
Provider Payments	\$25,195,047	\$26,433,077	\$31,002,741	\$31,044,251 <u>\$5,548,363</u> \$36,592,614	\$35,988,000 \$13,236,579 *	\$35,988,000
Appropriation	\$22,993,400	\$22,992,700	33,771,700	\$22,596,200	\$22,267,700	
Average cases/month	85	99	108	111	125 134	125
Average payment/mo	\$2,099,587	\$2,202,922	\$2,766,666	\$2,303,232	\$3,309,144	\$2,999,000
Average Amount/case	\$22,883	\$22,270	\$23,885	\$23,289 \$27,451	\$24,603	\$23,992

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Accrual Basis 2012 Projections (Est.)

Cash Balance 10-31-2011 *\$5.5m in cases carried from FY11	\$9,365,783
Less Approved /Outstanding Claims	<u>\$4,385,441</u>
Est. ongoing claims	<u>\$750,000</u>
Cash in the bank after the mtg.	\$4,230,342
Est. Weekly Expenditures X 35 weeks remaining in FY12	\$692,076 <u>X35</u>
Total Est. Remaining Benefits Payments	\$24,222,660
Less Cash in bank	-4,230,242
Est. Reimbursements for Remainder FY12	\$1,000,000
2012 Supplemental Request	\$20,992,418

Projections History

	2009	2010	2011	Total
Our Projections	\$25,774,600	\$35,409,300	\$35,998,000	\$95,665,000
Incurred Claims Paid	\$26,433,077	\$36,586,388 *	\$36,592,614	\$99,614,298
Difference	2.6%	3.2%	2.7%	2.83% Ave

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Indigent Trends

Annual County Cases

Fiscal Yr.	2009	2010	2011
New Case Load	4,323	4,363	4,590
County dollars	\$18,920,000	\$21,790,000	\$24,509,947
CAT (State) dollars	\$25,596,529	\$22,776,305	\$26,605,616
Totals	\$44,516,529	\$44,566,305	\$51,115,564

MEDICAL REVIEW SAVINGS FYTD 2012

Total Medical Reviews conducted FYTD 2012	172	23 Cases \$451,097
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Medicaid Determinations

• July 1 – Sept 30, 2011

<input type="checkbox"/> Total Applications Received	1908
<input type="checkbox"/> Applications Approved	139
<input type="checkbox"/> Applications Denied	1792
<input type="checkbox"/> Applications Pending	105
<input type="checkbox"/> Denials for failure to Cooperate/Provide info	76
<input type="checkbox"/> Average days to resolve Applications	32.9

Combined Application Unit Report: Reoccurring challenges include:

1. No contact information provided
2. Apps are incomplete or completed with inaccurate information
3. Faxes are received, upside down, backwards (blank) and sideways

Alternative Coverage Program

- ❑ Counties looking at ways to assist individuals and also reduce costs: Person must still be deemed indigent
 - ❑ COBRA Coverage – if person becomes unemployed and deemed indigent, may be able to still qualify for COBRA (counties & hospitals work together in some cases)
 - ❑ PCIP (Pre-existing Condition Insurance Plan) focus is with on-going care

Alternative Coverage Program

- Neck Surgery/Fusion: Cost 70,000 Medicaid Rate \$37,100**
PCIP for 6 months 2,435 Savings: 34,665
- Pancreatic Cancer: Cost 150,000 Medicaid Rate \$79,500**
PCIP for 4 months 2,284 Savings: 77,216
- Testicular Cancer: Cost \$82,000 Medicaid Rate \$34,400**
PCIP for 4 months 796 Savings: \$33,644
- Aortic Valve: Cost \$308,880 Medicaid Rate \$129,729**
PCIP for 2 months \$820 Savings \$128,909
- Coronary Bypass: Cost \$724,880 Medicaid Rate \$304,449**
PCIP for 2 months \$846 Savings \$303,603

Other

- Trends in Mental Health
- Trends in Loss of Other Resources
- Trends in Costs
- Federal Health Care Reform
- Alternative Programs: Ada contracting to provide preventative care
- Service contract with IAC

Questions

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