

State of Wisconsin Department of Health Services

Tony Evers, Governor Andrea Palm, Secretary

April 12, 2019

The Honorable Alberta Darling Co-Chair, Joint Committee on Finance Room 317 East State Capitol Madison, WI 53702

The Honorable John Nygren Co-Chair, Joint Committee on Finance Room 309 East State Capitol Madison, WI 53702

Dear Senator Darling and Representative Nygren:

In accordance with Wis. Stat. § 50.38(7), I am submitting two reports to you. The first is a report on implementation of the hospital assessment during state fiscal year 2018 for hospitals other than those defined as critical access hospitals. The second is a report on the implementation of the assessment for all critical access hospitals for the same period.

Sincepely,

Andrea Palm

Secretary – designee

State Fiscal Year 2018 Hospital Assessment Report

Attached is a report that illustrates the hospital assessment and the effect it has had on hospital rates. The department has not conducted any audits relating to the hospital assessment and thus has no report on audits and/or actions taken by the department as a result of the audits.

Pages 1-2 Individual Hospital Assessment Payments and Revenues

- Column 1, which addresses Wis. Stat. § 50.38 (7) (a), represents the amount each eligible hospital paid under the hospital assessment.
- Column 2, which addresses Wis. Stat. § 50.38 (7) (c), represents the amount of assessment funding each eligible hospital received from the health maintenance organizations (HMOs).
- Column 3, which addresses Wis. Stat. § 50.38 (7) (d), represents the total amount of payment increases the department made in connection with the hospital assessment for inpatient hospital services that are reimbursed on a fee-for-service basis. These amounts include pay-for-performance payments, rural payments, and trauma payments made to hospitals for inpatient services.
- Column 4, which also addresses Wis. Stat. § 50.38 (7) (d), represents the total amount of payment increases the department made in connection with the hospital assessment for outpatient hospital services that are reimbursed on a fee-for-service basis. These amounts include trauma payments made to hospitals for outpatient services.
- Column 5, which also addresses Wis. Stat. § 50.38 (7) (d), represents the total increase in fee-forservice rates due to the assessment (the sum of columns 3 and 4).
- Column 6, which addresses Wis. Stat. § 50.38 (7) (e), represents the total amount of fee-for-service payments the department made to assessed hospitals (access payments, hospital base rates, pay-for-performance payments, rural payments, and trauma payments).

Page 3 Health Maintenance Organization Assessment Payments

This chart, which addresses Wis. Stat. § 50.38 (7) (b), represents the amount the department paid each HMO in connection with the hospital assessment. This is the amount paid for BadgerCare Plus inpatient and outpatient services and Social Security Insurance (SSI) Managed Care inpatient and outpatient services. For state fiscal year 2009, the biennial budget (2009 Act 2) established the basis for how HMOs should pay hospital assessment funds to hospitals. Note the assessment funding provided to HMOs matches the funding HMOs paid to hospitals under column 2 of the Individual Hospital Assessment Payments and Revenues chart.

Page 4 Capitation Rates

The department does not calculate HMO specific capitation rates. Instead, HMO capitation rates are calculated by region for a variety of age/gender groups. These charts, which address Wis. Stat. § 50.38 (7) (f), represent the statewide average for HMO capitation rates based on inpatient and outpatient services. The top charts show the all funds (state and federal funds) amount of the capitation payment. The bottom charts represent the average general purpose revenue portion of the capitation payments.





State of Wisconsin Department of Health Services

Division of Medicaid Services

SFY 2018 Acute Care & Rehabilitation Hospitals Provider Payments and Revenues

		Column 1	Column 2	Column 3
			50.38(7)(c) Total Amount	
			of Assessment Funding	50.38(7)(d) Total Increase
		50.38(7)(a) Hospitals	Received by each Hospital	in IP FFS rates Due to
Provider Name	Location	Assessment Paid by Hospital	from HMOs	Assessment
Appleton Medical Center	Appleton	\$5,030,452	\$4,018,530	\$986,833
Ascension NE Wisconsin - Mercy Campus	Oshkosh	\$2,202,483	\$3,222,475	\$687,437
Ascension SE Wisconsin Hospital	Franklin	\$2,068,414	\$1,295,257	\$313,109
Aspirus Riverview Hospital & Clinics, Inc	Wisconsin Rapids	\$1,880,500	\$3,145,956	\$854,874
Aspirus Wausau Hospital	Wausau	\$8,332,560	\$6,062,549	\$1,606,068
Aurora BayCare Medical Center	Green Bay	\$9,485,394	\$7,974,886	\$2,328,469
Aurora Lakeland Medical Center	Elkhorn	\$2,345,635	\$2,850,374	\$1,145,925
Aurora Medical Center - Grafton LLC	Grafton	\$7,247,411	\$2,562,614	\$636,078
Aurora Medical Center - Kenosha	Kenosha	\$5,960,436	\$4,649,181	\$1,250,623
Aurora Medical Center in Summit	Summit	\$3,244,767	\$1,715,961	\$296,323
Aurora Medical Center of Manitowoc Co Inc	Two Rivers	\$1,882,205	\$2,067,247	\$849,005
Aurora Medical Center of Oshkosh	Oshkosh	\$3,606,622	\$3,371,275	\$618,541
Aurora Medical Center of Washington County Inc	Hartford	\$1,686,683	\$452,650	\$135,750
Aurora Memorial Hospital - Burlington	Burlington	\$2,477,916	\$1,047,034	\$158,502
Aurora Sheboygan Memorial Medical Center	Sheboygan	\$4,251,065	\$4,833,488	\$1,409,838
Aurora West Allis Med. Ctr.	West Allis	\$8,261,245	\$11,223,415	\$2,443,075
Bay Area Medical Center	Marinette	\$2,375,876	\$1,485,545	\$626,169
Beaver Dam Community Hospitals Inc	Beaver Dam	\$2,029,405	\$2,516,714	\$677,514
Bellin Memorial Hospital	Green Bay	\$7,267,814	\$7,338,006	\$1,900,987
Beloit Memorial Hospital Inc	Beloit	\$5,581,286	\$5,944,072	\$1,196,777
Children's Hospital of Wisconsin	Milwaukee	\$10,312,151	\$35,746,933	\$10,886,311
Children's Hospital of Wisconsin - Fox Valley	Neenah	\$329,089	\$1,196,296	\$322,218
Columbia Center LLC	Mequon	\$100,410	\$875,933	\$159,155
Columbia St. Mary's - Ozaukee Campus	Mequon Milwaukee	\$4,450,757	\$867,106	\$403,446
Columbia St. Mary's Hospital - Milwaukee Community Memorial Hospital	Menomonee Falls	\$11,501,079 \$5,116,229	\$23,531,724 \$2,635,120	\$7,115,469 \$1,405,244
Divine Savior Healthcare Inc	Portage	\$1,653,303	\$2,035,120	\$462,599
Fort HealthCare	Fort Atkinson	\$1,053,303	\$2,230,547	\$889,934
Froedtert Memorial Lutheran Hospital	Milwaukee	\$2,004,724	\$22,079,911	\$11,792,317
Froedtert South	Kenosha	\$7,099,138	\$9,339,147	\$1,695,039
Gundersen Lutheran Medical Center	La Crosse	\$11,991,480	\$11,348,287	\$3,028,811
Holy Family Memorial Medical Center	Manitowoc	\$2,520,136	\$1,316,551	\$622,942
Howard Young Medical Center Inc, aka Ministry Health Care	Woodruff	\$1,034,244	\$1,272,785	\$1,227,784
Lakeview Specialty Hospital & Rehab Center	Waterford	\$344,367	\$84,225	\$104,597
LIFECARE Hospitals of Wisconsin	Pewaukee	\$545,598	\$29,654	\$109,144
Marshfield Clinic Health System - Lakeview Med. Ctr.	Rice Lake	\$1,464,845	\$2,586,287	\$882,160
Mayo Clinic Health System-Eau Claire (aka Luther)	Eau Claire	\$7,461,217	\$5,531,464	\$2,086,704
Mayo Clinic Health System-Franciscan Healthcare	La Crosse	\$5,597,453	\$2,417,241	\$1,672,865
Mercy Health System Corporation	Janesville	\$8,783,371	\$3,615,006	\$2,123,823
Meriter Hospital Inc	Madison	\$9,277,378	\$11,418,024	\$4,747,764
Midwest Orthopedic Specialty Hospital, LLC	Franklin	\$1,628,415	\$152,292	\$86,393
Mile Bluff Medical Center (aka Hess Memorial)	Mauston	\$1,264,044	\$1,932,834	\$546,299
Monroe Clinic	Monroe	\$3,155,423	\$1,309,294	\$500,302
Oakleaf Surgical Hospital	Eau Claire	\$1,208,628	\$192,362	\$59,106
Oconomowoc Memorial Hospital	Oconomowoc	\$2,403,858	\$950,254	\$295,656
Orthopaedic Hospital of Wisconsin - Glendale	Glendale	\$1,394,759	\$157,763	\$63,654
Post-Acute Specialty Hospital of Milwaukee	Greenfield	\$910,431	\$57,151	\$482,054
Rehabilitation Hospital of Wisconsin, LLC	Waukesha	\$262,150	\$50,572	\$27,286
Sacred Heart Hospital	Eau Claire	\$5,134,206	\$6,706,311	\$2,214,777
Sacred Heart Rehabilitation Institute	Milwaukee	\$270,770	\$76,671	\$127,335
Sauk Prairie Memorial Hospital	Prairie du Sac	\$1,255,371	\$1,072,852	\$663,871
Select Specialty Hospital-Madison	Madison	\$684,150	\$69,225	\$104,597
Select Specialty Hospital-Milwaukee	West Allis	\$918,457	\$41,678	\$77,311
St Agnes Hospital	Fond du Lac	\$5,116,412	\$4,659,825	\$1,331,873
St Clare Hospital and Health Services	Baraboo	\$1,584,246	\$2,450,617	\$900,351
St Clare's Hospital of Weston Inc	Weston	\$2,251,141	\$3,038,877	\$905,045
St Elizabeth Hospital	Appleton	\$4,228,009	\$7,930,207	\$2,984,002

50.38(7)(d) Total Increa	se
in OP FFS rates Due to	
Assessment	
\$747,5	13
\$499,9	_
\$330,6	
\$735,4	
\$735,4 \$888,2	00
¢1 10(2	9Z
\$1,106,3 \$381,1	48 5 (
\$381,1	56
\$215,1	76
\$728,1	
\$259,3	29
\$392,9	
\$642,9	04
\$171,0	75
\$307,6	
\$528,7	20
\$859,3	85
\$331,5	
\$780,3	
\$1,364,5	
\$1,364,5 \$2,166,6	
\$22,059,6 \$502 F	
\$503,5	
\$4,9	
\$229,6	30
\$3,997,5	
\$489,8	48
\$663,4	
\$524,0	82
\$11,261,5	
\$2,130,1	33
\$4,720,1	
\$434,3	
\$437,9	
\$22,3	40
	\$0
\$560,6	
\$986,8	
\$788,8	_
	_
\$2,107,0 \$1,286,5	
\$1,386,5	_
\$17,3	
\$866,9	
\$742,9	
\$50,7	09
\$197,9	
\$50,6	81
	\$0
	\$0
2002. I	16
\$663,1	
	\$0
\$246,8	\$0 07
\$246,8	\$0 07 \$0
\$246,8	\$0 07 \$0 \$0
\$246,8 \$1,573,3	\$0 07 \$0 \$0 39
\$246,8 \$1,573,3	\$0 07 \$0 \$0 39
\$246,8	\$0 07 \$0 \$0 39 72 54

Column 4

Column 5 50.38(7)(d)Total Increase in FFS rates Due to Assessment \$1,734,346 \$1,187,414 \$643,735 \$1,590,330 \$2,494,360 \$3,434,817 \$1,527,081 \$851,254 \$1,978,766 \$555,652 \$1,241,910 \$1,261,445 \$306,825 \$466,167 \$1,938,558 \$3,302,460 \$957,727 \$1,457,895 \$3,265,517 \$3,363,430 \$32,945,942 \$825,761 \$164,120 \$633,076 \$11,113,056 \$1,895,092 \$1,126,070 \$1,414,016 \$23,053,906 \$3,825,172 \$7,748,993 \$1,057,337 \$1,665,724 \$126,937

\$109,144 \$1,442,795 \$3,073,577 \$2,692,008 \$4,230,882 \$6,134,279 \$103,749 \$1,413,295 \$1,243,205 \$109,815 \$493,649 \$114,335 \$482,054 \$27,286 \$2,877,893 \$127,335 \$910,678 \$104,597 \$77,311 \$2,905,212 \$1,885,423 \$1,170,599 \$4,055,626

	e) Total Amount of
	ments made to
-	s (Inc. Base and
Access)	¢ 4 0 40 0 4
	\$4,342,04
	\$2,833,14 \$2,399,184
	\$2,627,21
	\$7,584,12
	\$9,009,03
	\$2,494,20
	\$2,192,73
	\$3,788,43
	\$1,688,65
	\$2,055,14
	\$2,709,72
	\$546,78
	\$1,025,84
	\$3,892,28
	\$8,694,93
	\$1,676,70
	\$2,053,11
	\$6,263,32
	\$5,685,00
	\$115,067,45
	\$1,910,84
	\$220,19 [,]
	\$1,507,48
	\$29,864,19
	\$4,532,69
	\$1,839,59
	\$2,060,79
	\$84,724,39
	\$8,064,19
	\$18,990,53
	\$1,647,01 \$2,719,43
	\$3,441,57
	\$2,336,06
	\$2,274,19
	\$8,362,95
	\$5,523,86
	\$8,564,36
	\$14,678,27
	\$281,22
	\$2,176,87
	\$1,856,57
	\$515,71
	\$942,10 \$304,30
	\$304,30
	\$6,789,51
	\$245,74
	\$7,381,86
	\$2,096,62
	\$1,242,05
	\$1,407,70
	\$3,653,52
	\$5,785,11
	\$2,876,85
	\$3,465,35
	\$9,588,89

		Column 1	Column 2	Column 3	Column 4	Column 5	Column 6
			50.38(7)(c) Total Amount				50.38(7)(e) Total Amount of
			of Assessment Funding	50.38(7)(d) Total Increase	50.38(7)(d) Total Increase	50.38(7)(d)Total Increase	FFS Payments made to
		50.38(7)(a) Hospitals	Received by each Hospital	in IP FFS rates Due to	in OP FFS rates Due to	in FFS rates Due to	Hospitals (Inc. Base and
Provider Name	Location	Assessment Paid by Hospital	from HMOs	Assessment	Assessment	Assessment	Access)
St Joseph's Community Hospital	West Bend	\$3,226,734	\$2,079,352	\$549,005	\$394,546	\$943,551	\$2,456,376
St Joseph's Hospital	Chippewa Falls	\$1,205,130	\$3,473,979	\$945,974	\$585,103	\$1,531,077	\$2,854,396
St Mary's Hospital Inc	Rhinelander	\$2,075,027	\$2,882,389	\$841,244	\$720,563	\$1,561,807	\$2,532,788
St Marys Hospital Medical Center	Madison	\$10,820,270	\$10,003,015	\$3,818,786	\$986,845	\$4,805,632	\$14,507,455
St Mary's Hospital Medical Center	Green Bay	\$3,366,244	\$3,077,012	\$1,031,059	\$1,265,240	\$2,296,299	\$4,222,991
St Michael's Hospital	Stevens Point	\$2,575,161	\$3,953,134	\$1,018,590	\$965,242	\$1,983,832	\$3,304,550
St Nicholas Hospital	Sheboygan	\$2,135,429	\$1,654,321	\$372,967	\$375,529	\$748,496	\$1,420,360
St Vincent Hospital	Green Bay	\$8,762,121	\$5,728,135	\$3,542,699	\$1,741,478	\$5,284,177	\$13,525,709
St. Mary's Hospital	Janesville	\$1,878,456	\$2,698,091	\$682,209	\$394,678	\$1,076,887	\$2,036,148
Theda Clark Medical Center	Neenah	\$3,580,034	\$5,233,206	\$1,446,149	\$860,633	\$2,306,781	\$6,126,087
University of WI Hospital & Clinics Authority	Madison	\$35,576,381	\$14,367,504	\$8,879,958	\$10,505,972	\$19,385,930	\$73,053,327
UW Health Rehabilitation Hospital	Madison	\$331,497	\$70,135	\$90,954	\$0	\$90,954	\$828,537
Watertown Regional Med Ctr	Watertown	\$2,011,951	\$1,974,778	\$804,849	\$480,828	\$1,285,678	\$1,918,140
Waukesha Memorial Hospital Inc	Waukesha	\$12,825,920	\$6,875,785	\$1,530,551	\$1,050,347	\$2,580,898	\$6,110,390
Wheaton Franciscan Healthcare - All Saints	Racine	\$8,280,505	\$24,148,441	\$4,465,619	\$5,189,762	\$9,655,381	\$19,371,943
Wheaton Franciscan Healthcare - St. Francis	Milwaukee	\$5,261,152	\$10,415,676	\$3,150,251	\$2,463,217	\$5,613,468	\$11,484,726
Acute Care Hospitals Combined	7						
· · · · · · · · · · · · · · · · · · ·	Milwoulcoo	¢10.251.540	¢00.707.771	¢Г 201 070	¢/ 100 7/7	¢11 520 020	¢07.1/F.770
Wheaton Franciscan Healthcare	Milwaukee	\$10,251,549	\$28,736,661	\$5,321,273	\$6,198,747	\$11,520,020	\$27,165,772
Marshfield Clinic Health System	Marshfield	\$6,755,747	\$4,649,448	\$3,591,936	\$786,165	\$4,378,101	\$14,266,424
Aurora Metro	Milwaukee	\$47,784,063	\$35,608,304	\$14,276,881	\$7,243,077	\$21,519,958	\$66,322,852
Total		\$414,507,300	\$416,520,133	\$139,591,092	\$115,917,471	\$255,508,563	\$716,010,785

Total Amount of Increased Medicaid Payments Received by Hospitals	\$672,028,696
Total HMO and FFS Payment Increase Required Under Assessment	\$672,028,696
Over/Under Payment in Medicaid Payments Made to Hospitals	\$0
Tax to Payment Increase Ratio Per Statutory Language	61.68%
ASSESSMENT REFUND REQUIRED TO HOSPITALS	\$0

HMO Name	Wis. Stat. § 50.38(7)(b) the amount of assessment funding the Department paid to the HMOs
Anthem Blue Cross & Blue Shield	\$ 48,179,971.19
Care Wisconsin	\$ 2,985,018.54
Children's Community Health Plan	\$ 82,560,617.00
Compcare	\$ 2,811,333.70
Dean Health Plan	\$ 18,343,197.70
GHC SCW	\$ 1,160,920.38
Group Health Cooperative Eau Claire	\$ 15,348,958.84
Group Health Cooperative South Central Wisco	\$ 564,008.83
Gunderson Lutheran	\$ 5,502,380.72
Health Tradition	\$ 1,249,601.22
iCare	\$ 18,173,342.80
Managed Health Services	\$ 19,484,119.36
MercyCare	\$ 3,563,725.31
Molina Healthcare	\$ 39,607,431.19
Network	\$ 18,098,303.79
Physician's Plus	\$ 5,551,406.18
Quartz	\$ 9,380,278.02
Security Health Plan	\$ 22,109,111.11
Trilogy	\$ 5,726,639.11
United HealthCare	\$ 89,622,337.60
Unity Health Plan	\$ 6,497,430.43
Total	\$ 416,520,133.02

Health Maintenance Organization Assessment Payments

Per Act 2: Wis. Stat. § 50.38(7)(f)

ALL FUNDS										
Calendar Year 2017										
Family Medicaid Managed Care										
Statewide Statewide										
Inpatient Outpatient								utpatient		
Standard P	an I	Excluding	Ma	ternity	\$	30.20	\$	22.63		
Standard P	an I	ncluding	Ma	ternity*	\$	34.63	\$	23.82		
Childess Ac	lults	Excludin	g M	laternity**	\$	98.05	\$	53.51		
SSI Managed Care (Region 6)										
		Statewide	e Inp	patient		Statewide	e Ou	tpatient		
		MA		Dual		MA		Dual		
SSI	\$	214.41	\$	4.76	\$	83.92	\$	12.45		
MAPP	\$	444.38	\$	1.75	\$	184.10	\$	16.25		
		SSI Mar	nage	ed Care (I	Reç	gion 5)				
		Statewide	e Inp	patient		Statewide	e Ou	tpatient		
		MA		Dual		MA	Dual			
SSI	\$	166.96	\$	2.11	\$	77.16	\$	5.04		
MAPP	\$	444.38	\$	1.75	\$	184.10	\$	16.25		

ALL FUNDS									
Calendar Year 2018									
Family Medicaid Managed Care									
Statewide Statewide									
	Inpatient								
Standard Plan Excluding Maternity	\$	30.43	\$	23.02					
Standard Plan Including Maternity*	\$	35.00	\$	24.16					
Childess Adults Excluding Maternity**	ng Maternity** \$ 100.68		\$	60.11					

SSI Managed Care (Region 6)										
	Statewide Inpatient					Statewide Outpatient				
		MA		Dual		MA		Dual		
SSI	\$	211.28	\$	5.30	\$	94.14	\$	8.76		
MAPP	\$	361.95	\$	1.90	\$	242.59	\$	14.66		

SSI Managed Care (Region 5)										
		Statewid	le In	patient		Statewide O	utpa	atient		
		MA		Dual	MA			Dual		
SSI	\$	154.13	\$	2.79	\$	95.93	\$	6.68		
MAPP	\$	361.95	\$	1.90	\$	242.59	\$	14.66		

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Family Medicaid Managed Care										
					St	atewide	S	tatewide		
					In	patient	0	utpatient		
Standard Pla	an Excludir	\$	0.22	\$	0.40					
Standard Pla	an Including	g Maternity*			\$	0.37	\$	0.34		
Childess Ad	lults Exclud	ing Maternity*	*		\$	2.63	\$	6.59		
SSI Managed Care (Region 6)										
		Statewide Inp	Statewide Outpatient							
		MA		Dual		MA		Dual		
SSI	\$	(3.13)	\$	0.54	\$	10.22	\$	(3.69)		
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)		
	S	SI Managed	Ca	e (Regio	n 5)	1				
		Statewide Inp	oatie	ent		Statewid	e O	utpatient		
		MA	Dual		MA		Dual			
SSI	\$	(12.83)	\$	0.68	\$	18.77	\$	1.64		
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)		

Family Medicaid Managed Care								
					St	atewide	S	Statewide
		In	patient	Outpatient				
Standard Plan I	Exclu	iding Maternity			\$	0.22	\$	0.40
Standard Plan I	nclu	ding Maternity*			\$	0.37	\$	0.34
Childess Adults	Exc	luding Maternity*	*		\$	2.63	\$	6.59
		-						
		SSI Managed	Ca	re (Regioi	า 6)			
		Statewide Inp	oatie	ent	Statewide Outpatient			
		MA		Dual		MA		Dual
SSI	\$	(3.13)	\$	0.54	\$	10.22	\$	(3.69)
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)
SSI Managed Care (Region 5)								
		Statewide Inp	S	Statewid	e O	utpatient		
		MA		Dual		MA		Dual
SSI	\$	(12.83)	\$	0.68	\$	18.77	\$	1.64
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)

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Family Medicaid Managed Care								
					Sta	atewide	S	tatewide
		In	patient	Outpatient				
Standard Pl	an Excludii	\$	(0.01)	\$	0.08			
Standard Pl	an Includin	g Maternity			\$	0.03	\$	0.06
Childess Ac	lults Exclud	ling Maternity*	*		\$	0.74	\$	2.52
<u>.</u>		SI Managad	Car	o (Pogio	a 6)			
SSI Managed Care (Region 6) Statewide Inpatient Statewide Outpatient								
		Statewide Inpatient MA Dual				MA	Dual	
			<u>_</u>	Dual	^		^	2 0.0.1
SSI	\$	(2.03)				3.91		(1.56
MAPP	\$	(35.39)	\$	0.06	\$	23.39	\$	(0.71
SSI Managed Care (Region 5)								
		Statewide Inp	Statewide Outpatient					
		MA		Dual		MA		Dual
SSI	\$	(5.85)	\$	0.27	\$	7.44	\$	0.66
MAPP	\$	(35.39)	\$	0.06	\$	23.39	\$	(0.71

General Purpose Revenues Calendar Year 2017 Family Medicaid Managed Care Statewide Statewide Outpatient Inpatient Standard Plan Excluding Maternity \$ 12.51 \$ 9.37 Standard Plan Including Maternity 9.87 \$ 14.35 \$ Childess Adults Excluding Maternity** \$ 40.62 \$ 22.17

SSI Managed Care (Region 6)									
	Statewide Inpatient					Statewide Outpatient			
		MA		Dual	MA			Dual	
SSI	\$	88.82	\$	1.97	\$	34.77	\$	5.16	
MAPP	\$	184.08	\$	0.72	\$	76.26	\$	6.73	
SSI Managed Care (Region 5)									
		SSI Mar	nage	d Care (Reg	ion 5)			
		SSI Mar Statewide				ion 5) Statewide	e Ou	tpatient	
			e Inpa				e Ou	tpatient Dual	
SSI	\$	Statewide	e Inpa	atient		Statewide	e Ou \$		
SSI MAPP		Statewide MA	e Inpa	atient Dual	S	Statewide MA		Dual	

General Purpose Revenues						
Calendar Year 2018						
Family Medicaid Managed Care						
		Statewide	S	statewide		
		Inpatient	0	utpatient		
Standard Plan Excluding Maternity	\$	12.50	\$	9.46		
Standard Plan Including Maternity	\$	14.38	\$	9.92		
Childess Adults Excluding Maternity**	\$	41.36	\$	24.69		

SSI Managed Care (Region 6)								
	Statewide Inpatient					Statewide O	utpa	itient
		MA		Dual		MA		Dual
SSI	\$	86.79	\$	2.18	\$	38.67	\$	3.60
MAPP	\$	148.69	\$	0.78	\$	99.66	\$	6.02

SSI Managed Care (Region 5)								
	Statewide Inpatient				Statewide Outpatient			
		MA		Dual		MA		Dual
SSI	\$	63.32	\$	1.15	\$	39.41	\$	2.74
MAPP	\$	148.69	\$	0.78	\$	99.66	\$	6.02

Does not include portion of capitation payments related to hospital access payments

Estimated based on rate development. Actual portions will vary based on case mix, enrollment and by HMO

PMPM amounts include administration associated with hospital services

CY17 State Share of FMAP Rate

CY18 State Share of FMAP Rate 0.4108

*Estimated Maternity PMPMs = final kick payment * # of annual deliveries / projected member months

0.4143

**Childess Adults started in April, 2014. 2016 was the first period to have a full year of data

neral Purpose Revenues

State Fiscal Year 2018 Critical Access Hospital Assessment Report

Attached is a report that illustrates the critical access hospital assessment and the effect it has had on critical access hospital rates. The department has not conducted any audits relating to the critical access hospital assessment and thus has no report on audits and/or actions taken by the department as a result of the audits.

Pages 1-2 Individual Critical Access Hospital Assessment Payments and Revenues

- Column 1, which addresses Wis. Stat. § 50.38 (7) (a), represents the amount each eligible critical access hospital paid under the critical access hospital assessment.
- Column 2, which addresses Wis. Stat. § 50.38 (7) (c), represents the amount of assessment funding each eligible critical access hospital received from the health maintenance organizations (HMOs).
- Column 3, which addresses Wis. Stat. § 50.38 (7) (d), represents the total amount of payment increases the department made in connection with the critical access hospital assessment for inpatient critical access hospital services that are reimbursed on a fee-for-service basis.
- Column 4, which also addresses Wis. Stat. § 50.38 (7) (d), represents the total amount of payment increases the department made in connection with the critical access hospital assessment for outpatient critical access hospital services that are reimbursed on a fee-for-service basis.
- Column 5, which also addresses Wis. Stat. § 50.38 (7) (d), represents the total increase in fee-forservice rates due to the assessment (the sum of columns 3 and 4).
- Column 6, which addresses Wis. Stat. § 50.38 (7) (e), represents the total amount of fee-for-service payments the department made to assessed critical access hospitals (access payments and critical access hospital base rates).

Page 3 Health Maintenance Organization Assessment Payments

This chart, which addresses Wis. Stat. § 50.38 (7) (b), represents the amount the department paid each HMO in connection with the critical access hospital assessment. This is the amount paid for BadgerCare Plus inpatient and outpatient services and Social Security Insurance (SSI) Managed Care inpatient and outpatient services. For state fiscal year 2009, the biennial budget (2009 Act 2) established the basis for how HMOs should pay critical access hospital assessment funds to critical access hospitals. Note the assessment funding provided to HMOs matches the funding HMOs paid to critical access hospitals under column 2 of the Individual Critical Access Hospital Assessment Payments and Revenues chart.

Page 4 Capitation Rates

The department does not calculate HMO specific capitation rates. Instead, HMO capitation rates are calculated by region for a variety of age/gender groups. These charts, which address Wis. Stat. § 50.38 (7) (f), represent the statewide average for HMO capitation rates based on inpatient and outpatient services. The top charts show the all funds (state and federal funds) amount of the capitation payment. The bottom charts represent the average general purpose revenue portion of the capitation payments.



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Division of Medicaid Services SFY 2018 Critical Access Hospitals Provider Payments and Revenues

		Column 1	Column 2	Column 3
			50.38(7)(c) Total Amount of	
			Assessment Funding	50.38(7)(d) Total Increase
		50.38(7)(a) Hospitals	Received by each Hospital	in IP FFS rates Due to
Provider Name	Location	Assessment Paid by Hospital	from HMOs	Assessment
Amery Regional Medical Center	Amery	\$127,311	\$211,886	\$46,957
Aspirus Langlade Memorial Hospital	Antigo	\$197,490	\$342,217	\$98,183
Aspirus Medford Hospital & Clinics	Medford	\$120,188	\$291,092	\$61,898
Black River Memorial Hospital	Black River Falls	\$147,403	\$162,443	\$45,890
Boscobel Area Health Care	Boscobel	\$35,965	\$48,371	\$1,067
Burnett Medical Center Inc	Grantsburg	\$44,145	\$44,177	\$6,403
Calumet Medical Center	Chilton	\$70,326	\$38,383	\$1,067
Chippewa Valley Hospital	Durand	\$45,265	\$7,857	\$0
Columbus Community Hospital Inc	Columbus	\$189,920	\$148,499	\$19,210
Crossing Rivers Health	Prairie du Chien	\$180,626	\$112,071	\$27,747
Cumberland Memorial Hospital	Cumberland	\$87,231	\$52,661	\$24,546
Door County Memorial Hospital	Sturgeon Bay	\$258,583	\$216,856	\$33,083
Eagle River Memorial Hospital aka Howard Young Health Care	Eagle River	\$46,778	\$37,144	\$1,067
Edgerton Hospital and Health Services	Edgerton	\$111,021	\$30,534	\$3,202
Flambeau Hospital Inc	Park Falls	\$67,981	\$57,547	\$7,470
Good Samaritan Health Center	Merrill	\$33,315	\$82,472	\$11,739
Grant Regional Health Center Inc	Lancaster	\$80,505	\$147,917	\$34,150
Gundersen Tri-County Hospital & Clinics	Whitehall	\$44,094	\$32,714	\$6,403
Gunderson Moundview Memorial Hospital	Friendship	\$22,851	\$71,253	\$3,202
Hayward Area Memorial Hospital	Hayward	\$129,168	\$150,818	\$124,863
Hudson Hospital	Hudson	\$205,203	\$391,126	\$59,763
Indianhead Medical Center Shell Lake Inc	Shell Lake	\$24,556	\$15,833	\$8,538
Ladd Memorial dba Osceola Medical Center	Osceola	\$90,941	\$104,175	\$11,739
Marshfield Med. Ctr Ladysmith fka Rusk Cty.	Ladysmith	\$71,797	\$65,956	\$6,403
Mayo Clinic Health System - Chippewa Valley	Chippewa Valley	\$119,021	\$7,387	\$1,067
Mayo Clinic Health System - Oakridge	Oakridge	\$101,322	\$11,697	\$1,067
Mayo Clinic Health System-Franciscan Health Care in Sparta	Sparta	\$73,739	\$38,716	\$2,134
Mayo Clinic Health System-Northland	Northland	\$153,896	\$100,263	\$25,613
Mayo Clinic Health System-Red Cedar	Red Cedar	\$158,122	\$255,623	\$73,637
Memorial Hospital Inc	Neillsville	\$58,559	\$57,728	\$6,403
Memorial Hospital of Lafayette County	Darlington	\$53,794	\$14,503	\$1,067
Memorial Medical Center	Ashland	\$224,752	\$352,498	\$248,658
Mercy Walworth Hospital and Med Center	Lake Geneva	\$391,857	\$202,604	\$51,226
Oconto Hospital and Medical Ctr. (aka Bond)	Oconto	\$19,464	\$10,610	\$1,067
Our Lady of Victory Hospital	Stanley	\$38,003	\$49,384	\$4,269
Reedsburg Area Medical Center	Reedsburg	\$172,556	\$317,231	\$50,158
Richland Hospital Inc	Richland Center	\$157,025	\$62,423	\$137,669
Ripon Medical Center	Ripon	\$107,157	\$46,993	\$9,605
River Falls Area Hospital	River Falls	\$133,212	\$91,572	\$16,008
Sacred Heart Hospital Inc	Tomahawk	\$36,137	\$45,372	\$3,202
Shawano Medical Center	Shawano	\$133,937	\$304,516	\$193,163
Southwest Health Center Inc	Platteville	\$149,732	\$243,901	\$46,957
Spooner Health	Spooner	\$60,839	\$49,157	\$10,672
St Clare Memorial Hospital	Oconto Falls	\$80,569	\$55,530	\$7,470
St Croix Regional Medical Center	St. Croix Falls	\$294,709	\$331,543	\$69,368
St Joseph's Community Health Services Inc	Hillsboro	\$45,111	\$36,056	\$4,269
St Mary's Hospital of Superior	Superior	\$50,906	\$101,360	\$14,941
Stoughton Hospital Association	Stoughton	\$145,961	\$78,538	\$1,067
	~			

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Column 4	
50.38(7)(d) Total	
Increase in OP FFS	
rates Due to	
Assessment	
\$72,4	135
\$63,4	185
\$38,2	211
\$31,3	335
\$26,7	770
\$15,0	
\$12,7	705
\$7,2	
\$19,4	
\$17,3	
\$10,5	
\$30,	
\$30, \$9,9	
\$9,3	
\$16,5	
\$16,	
\$10,1	
\$22,5	
\$17, \$33,3	
\$33,3 \$61,2	
\$19,6	$\frac{040}{2}$
\$8,3	_
\$13,8	
\$25,3	
\$4,2	
\$5,5	
\$23,4	165
\$23,2	
\$38,7	178
\$15,3	
\$5,5	
\$99,7	
\$42,6	
\$15,3	330
\$17,9	955
\$56,2	263
\$53,9	962
\$14,4	
\$11,7	700
\$9,7	
\$102,6	
\$32,0	
\$19,6	
\$29,0	
\$46,	
\$23,	
\$29,3	
\$19,8	_
ψ17,0	

Column 5	
Columna	
50.38(7)(d)Tota	l Increase
in FFS rates Du	
Assessment	
	\$119,392
	\$161,667
	\$100,109
	\$77,224
	\$27,838
	\$21,409
	\$13,772
	\$7,227
	\$38,688
	\$45,054
	\$35,079
	\$63,192 \$11,001
	\$11,001 \$12,600
	\$12,000
	\$28,527
	\$57,096
	\$23,515
	\$36,583
	\$186,149
	\$79,403
	\$16,899
	\$25,578
	\$31,780
	\$5,345
	\$6,609
	\$25,599
	\$48,883
	\$111,815
	\$21,765
	\$6,642
	\$348,447
	\$93,909 \$16,397
	\$10,397 \$22,224
	\$106,421
	\$100,421
	\$24,054
	\$27,708
	\$12,957
	\$295,837
	\$79,042
	\$30,312
	\$36,509
	\$115,552
	\$28,057
	\$44,336
	\$20,902

Oshama (
Column 6
50.38(7)(e) Total Amount
of FFS Payments made
to Hospitals (Inc. Base
and Access)
\$1,419,575
\$2,131,879
\$974,803
\$2,017,960
\$499,889
\$334,958
\$192,791
\$172,930
\$586,329
\$793,926
\$397,365
\$628,185
\$304,044
\$364,113
\$311,404
\$681,387
\$450,072
\$336,217
\$487,143
\$2,603,997
\$1,642,051
\$179,631
\$330,207
\$570,469
\$147,258
\$220,392
\$633,431
\$780,664
\$1,486,711
\$380,835
\$170,121
\$5,925,365
\$1,335,706
\$308,087
\$315,980
\$1,254,142
\$2,567,127
\$592,350
\$627,623
\$276,222
\$3,610,091
\$710,882
\$624,639
\$627 172
\$627,172 \$1,034,531
\$541,349
\$819,645
\$311,520

		Column 1	Column 2	Column 3	Column 4	Column 5	Column 6
			50.38(7)(c) Total Amount of		50.38(7)(d) Total		50.38(7)(e) Total Amount
			Assessment Funding	50.38(7)(d) Total Increase	Increase in OP FFS	50.38(7)(d)Total Increase	of FFS Payments made
		50.38(7)(a) Hospitals	Received by each Hospital	in IP FFS rates Due to	rates Due to	in FFS rates Due to	to Hospitals (Inc. Base
Provider Name	Location	Assessment Paid by Hospital	from HMOs	Assessment	Assessment	Assessment	and Access)
Theda Care Medical Center - New London	New London	\$69,654	\$146,567	\$23,478	\$25,636	\$49,114	\$718,426
Theda Care Medical Center - Wild Rose	Wild Rose	\$31,439	\$27,590	\$4,269	\$10,171	\$14,440	\$362,386
ThedaCare Medical Center - Berlin	Berlin	\$298,937	\$178,077	\$48,024	\$27,440	\$75,464	\$1,052,288
ThedaCare Medical Center-Waupaca aka Riverside	Waupaca	\$82,860	\$149,651	\$39,486	\$33,155	\$72,641	\$857,166
Tomah Memorial Hospital Inc	Tomah	\$123,101	\$255,056	\$58,696	\$46,994	\$105,690	\$1,282,896
Upland Hills Health Inc	Dodgeville	\$193,409	\$208,468	\$62,965	\$33,382	\$96,347	\$870,936
Vernon Memorial Hospital	Viroqua	\$294,153	\$205,493	\$34,150	\$49,133	\$83,283	\$1,060,168
Waupun Memorial Hospital	Waupun	\$174,891	\$148,811	\$65,099	\$18,639	\$83,738	\$2,098,003
Western Wis. Health aka Baldwin Med. Ctr.	Baldwin	\$66,044	\$145,105	\$27,747	\$25,798	\$53,545	\$844,638
Westfields Hospital	New Richmond	\$119,241	\$232,328	\$20,277	\$54,772	\$75,049	\$1,145,605
Total		\$6,846,768	\$7,426,352	\$2,009,540	\$1,664,576	\$3,674,116	\$54,005,677

Total Amount of Increased Medicaid Payments Received by Hospitals	\$11,100,467
Total HMO and FFS Payment Increase Required Under Assessment	\$11,100,467
Over/Under Payment in Medicaid Payments Made to Hospitals	\$0
Tax to Payment Increase Ratio Per Statutory Language	61.68%
ASSESSMENT REFUND REQUIRED TO HOSPITALS	\$0

HMO Name	Wis. Stat. § 50.38(7)(b) the amount of assessment funding the Department paid to the HMOs
Anthem Blue Cross & Blue Shield	\$ 265,753.36
Care Wisconsin	\$ 11,470.24
Children's Community Health Plan	\$ 19,699.01
Compcare	\$ 405,089.22
Dean Health Plan	\$ 777,935.63
GHC SCW	\$ 1,712.31
Group Health Cooperative Eau Claire	\$ 1,557,148.40
Group Health Cooperative South Central Wisco	\$ 719.95
Gunderson Lutheran	\$ 277,980.59
Health Tradition	\$ 71,479.60
iCare	\$ -
Managed Health Services	\$ 277,574.95
MercyCare	\$ 179,082.97
Molina Healthcare	\$ 87,713.00
Network	\$ 292,561.92
Physician's Plus	\$ 10,976.60
Quartz	\$ 262,115.21
Security Health Plan	\$ 999,650.93
Trilogy	\$ 10,251.06
United HealthCare	\$ 1,901,606.95
Unity Health Plan	\$ 15,830.28
Total	\$ 7,426,352.18

Health Maintenance Organization Assessment Payments

Per Act 2: Wis. Stat. § 50.38(7)(f)

ALL FUNDS										
Calendar Year 2017										
		Family N	ledi	icaid Man	age	ed Care				
Statewide Statewide										
Inpatient Outpatient										
Standard P	an I	Excluding	Ma	ternity	\$	30.20	\$	22.63		
Standard P	an I	ncluding	Ma	ternity*	\$	34.63	\$	23.82		
Childess Ac	lults	Excludin	g M	laternity**	\$	98.05	\$	53.51		
		SSI Mar	nage	ed Care (I	Reg	gion 6)				
		Statewide	e Inp	patient		Statewide	e Ou	tpatient		
		MA		Dual		MA		Dual		
SSI	\$	214.41	\$	4.76	\$	83.92	\$	12.45		
MAPP	\$	444.38	\$	1.75	\$	184.10	\$	16.25		
		SSI Mar	nage	ed Care (I	Reç	gion 5)				
		Statewide	e Inp	patient		Statewide	e Ou	tpatient		
		MA		Dual		MA	Dual			
SSI	\$	166.96	\$	2.11	\$	77.16	\$	5.04		
MAPP	\$	444.38	\$	1.75	\$	184.10	\$	16.25		

ALL FUNDS									
Calendar Year 2018									
Family Medicaid Managed Care									
Statewide Statewide									
		Inpatient	Outpatient						
Standard Plan Excluding Maternity	\$	30.43	\$	23.02					
Standard Plan Including Maternity*	\$	35.00	\$	24.16					
Childess Adults Excluding Maternity**	dults Excluding Maternity** \$		\$	60.11					

SSI Managed Care (Region 6)											
		Statewid	e In	patient		Statewide O	utpa	atient			
		MA		Dual		MA		Dual			
SSI	\$	211.28	\$	5.30	\$	94.14	\$	8.76			
MAPP	\$	361.95	\$	1.90	\$	242.59	\$	14.66			

SSI Managed Care (Region 5)											
		Statewid	le In	patient		Statewide O	atient				
		MA		Dual		MA	Dual				
SSI	\$	154.13	\$	2.79	\$	95.93	\$	6.68			
MAPP	\$	361.95	\$	1.90	\$	242.59	\$	14.66			

Ch

Family Medicaid Managed Care									
Statewide Statewide									
		In	patient	Outpatient					
Standard Pla	an Excludir		\$	0.22	\$	0.40			
Standard Pla	an Including	g Maternity*			\$	0.37	\$	0.34	
Childess Ad	lults Exclud	ing Maternity*	*		\$	2.63	\$	6.59	
	S	SI Managed	Ca	re (Regio	n 6)				
		Statewide Inp	oatie	ent	Statewide Outpatient				
		MA		Dual		MA	Dual		
SSI	\$	(3.13)	\$	0.54	\$	10.22	\$	(3.69)	
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)	
	S	SI Managed	Ca	e (Regio	n 5)	1			
		Statewide Inpatient Statewide Outpatient							
		MA Dual					Dual		
SSI	\$	(12.83)	\$	0.68	\$	18.77	\$	1.64	
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)	

Family Medicaid Managed Care									
		St	atewide	S	Statewide				
					In	patient	Outpatient		
Standard Plan I	Exclu	\$	0.22	\$	0.40				
Standard Plan I	nclu	ding Maternity*			\$	0.37	\$	0.34	
Childess Adults	Exc	luding Maternity*	*		\$	2.63	\$	6.59	
		-							
		SSI Managed	Ca	re (Regioi	า 6)				
		Statewide Inp	oatie	ent	Statewide Outpatient				
		MA		Dual		MA	Dual		
SSI	\$	(3.13)	\$	0.54	\$	10.22	\$	(3.69)	
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)	
SSI Managed Care (Region 5)									
		Statewide Inp	ent	S	Statewid	e O	utpatient		
		MA		MA	Dual				
SSI	\$	(12.83)	\$	0.68	\$	18.77	\$	1.64	
MAPP	\$	(82.43)	\$	0.16	\$	58.49	\$	(1.58)	

Family Medicaid Managed Care											
Statewide Statewide											
		In	patient	Outpatient							
Standard P	lan Excludii	\$	(0.01)	\$	0.08						
Standard P	lan Includin	\$	0.03	\$	0.06						
Childess Ac	dults Exclud		\$	0.74	\$	2.52					
					-						
		SSI Managed			,						
		Statewide Inp	S	Statewid	e Outpatient						
		MA		MA	Dual						
SSI	\$	(2.03)	\$	0.21	\$	3.91	\$	(1.56			
MAPP	\$	(35.39)	0.06	\$	23.39	\$	(0.71				
	Ę	SSI Managed	Car	e (Regio	n 5)						
		Statewide Inpatient Statewide Outpatient									
		MA		MA		Dual					
SSI	\$	(5.85)	\$	0.27	\$	7.44	\$	0.66			
MAPP	\$	(35.39)	\$	0.06	\$	23.39	\$	(0.71			

General Purpose Revenues Calendar Year 2017 Family Medicaid Managed Care Statewide Statewide Outpatient Inpatient Standard Plan Excluding Maternity \$ 12.51 \$ 9.37 Standard Plan Including Maternity 9.87 \$ 14.35 \$ Childess Adults Excluding Maternity** \$ 40.62 \$ 22.17

SSI Managed Care (Region 6)											
		Statewide	e Inpa	atient	Statewide Outpatient						
	MA Dual			MA			Dual				
SSI	\$	88.82	\$	1.97	\$	34.77	\$	5.16			
MAPP	\$	184.08	\$	0.72	\$	76.26	\$	6.73			
SSI Managed Care (Region 5)											
		SSI Mar	nage	d Care (Reg	ion 5)					
		SSI Mar Statewide				ion 5) Statewide	e Ou	tpatient			
			e Inpa				e Ou	tpatient Dual			
SSI	\$	Statewide	e Inpa	atient		Statewide	• Ou \$				
SSI MAPP		Statewide MA	e Inpa	atient Dual	S	Statewide MA		Dual			

General Purpose Revenues								
Calendar Year 2018								
Family Medicaid Managed Care								
Statewide Statewide								
Inpatient Outpatient								
Standard Plan Excluding Maternity	\$	12.50	\$	9.46				
Standard Plan Including Maternity	\$	14.38	\$	9.92				
Childess Adults Excluding Maternity**	\$	41.36	\$	24.69				

SSI Managed Care (Region 6)											
	Statewide Inpatient Statewide Outpatient										
		MA		Dual		Dual					
SSI	\$	86.79	\$	2.18	\$	38.67	\$	3.60			
MAPP	\$	148.69	\$	0.78	\$	99.66	\$	6.02			

SSI Managed Care (Region 5)											
		Statewid	e In	patient	Statewide Outpatient						
		MA		Dual	MA Du			Dual			
SSI	\$	63.32	\$	1.15	\$	39.41	\$	2.74			
MAPP	\$	148.69	\$	0.78	\$	99.66	\$	6.02			

Does not include portion of capitation payments related to hospital access payments

Estimated based on rate development. Actual portions will vary based on case mix, enrollment and by HMO

PMPM amounts include administration associated with hospital services

CY17 State Share of FMAP Rate

CY18 State Share of FMAP Rate 0.4108

*Estimated Maternity PMPMs = final kick payment * # of annual deliveries / projected member months

0.4143

**Childess Adults started in April, 2014. 2016 was the first period to have a full year of data

neral Purpose Revenues