

# Mental Health & Disability Services Redesign

February 11, 2014



#### Accounts Receivable

- Medicaid balance typically ~1.5 months behind in aggregate
  - Average balance of roughly \$25M
  - A few counties 10 to 22 months behind
- From March to June 2012 balance climbed from \$24M to \$61M
- SF452 required payment by June 30, 2013 or a payment plan to support release of equalization funding (full payment required by June 30, 2014).
- Current Medicaid balance is \$2.5M
- Current balance all receivables (billed by June 30) is \$3.4M

<sup>\*</sup> All balances are non-disputed



### **Current Medicaid Balance**

Current Medicaid balance is largely owed by 11 counties

<ul><li>Union</li></ul>	\$803,072	reduced levy (\$158.5K)		
<ul><li>Johnson</li></ul>	493,747	rec'd equalization \$3.2M		
<ul> <li>Hamilton</li> </ul>	355,898	reduced levy (\$125.6K)		
<ul> <li>Delaware</li> </ul>	292,457	reduced levy (\$92.1K)		
<ul><li>Adair</li></ul>	207,739	rec'd equalization \$46.8K		
<ul> <li>Osceola</li> </ul>	187,818	rec'd equalization \$105.3K		
<ul><li>Taylor</li></ul>	157,712	rec'd equalization \$\$157.8K		
<ul><li>Adams</li></ul>	110,809	reduced levy (\$1,973)		
<ul><li>Clarke</li></ul>	89,725	rec'd equalization \$11.8K		
<ul><li>Davis</li></ul>	40,001	reduced levy (\$11.4K)		
<ul><li>Wayne</li></ul>	34,307	rec'd equalization \$44.2K		



### **Total Accounts Receivable**

- Current balance all receivables billed by June 30 is \$3.4M
- Current balance all receivables billed through January is \$4M
- Current balances:

	Medicaid	MHI	GRC	WRC	MtP-DD	Oakdale	Toledo	Total
Billed at								
6/30/13	\$2,547,733	\$139,515	\$67,925	\$86,370	\$14,585	\$478,495	\$95,051	\$3,429,673
Billed at								
1/31/14	\$2,547,733	\$543,647	\$67,925	\$86,370	\$124,637	\$549,614	\$120,315	\$4,040,241

<sup>\*</sup> All balances are non-disputed



## Equalization

- SFY14 equalization is \$29,820,478
- Per capita approach to county funding
  - supports counties in bringing a relatively equal amount of per capita funding to regionalization
- Max levy for SFY14 & SFY15 is smaller of county's previous net levy dollar amount or an effective per capita levy of \$47.28
- Counties with levy more than the effective \$47.28 per capita reduced their levies (total of \$10.8M)
  - 45 counties reduced their levy
  - reduction ranged from \$1,973 (Adams) to \$1.4M (Jasper)



## Equalization

- Counties with levy less than the effective \$47.28 per capita receive equalization
  - 54 counties received equalization
  - equalization ranged from \$6.2M (Polk) to \$597 (Keokuk)
- Status of payments
  - 52 counties have rec'd full or partial payments
  - Working on offset for Adair and Taylor (\$46.8K and \$157.8K)
  - Johnson has rec'd \$2.6M; working on offset for \$497K
  - Johnson and Woodbury have minor amounts in dispute (\$12.6K and \$10.2K respectively)



## **Equalization Pros & Cons**

- Pros
  - Supports level per capita funding going into regionalization
  - Increases funding in some counties w/out increasing taxes
  - Decreases taxes in some counties
  - Simplifies administrative and funding processes
- Cons
  - Some counties do not directly receive general funds
  - Funding is not matched to true need
  - Reduces county discretion



## Potential County Problems - Methodology

- + SFY14 levy, equalization and State Payment Program funding
- + SFY13 ending cash balances
- less Estimated SFY14 cash expenditures based on SFY13 adjusted for Medicaid and resource center payments
- less Medicaid and resource center payables remaining at 12/31/2013
- = ending balance

Does not adjust for Residency vs. Legal Settlement



## Potential County Problems – 25% reserve

- Assuming a 25% cash reserve at year-end
  - 15 counties may lack sufficient year-end reserves
  - Balance under 25% reserve ranges from \$11,281 to \$1.2M
  - Total potential problem identified \$4.4M
  - However, only one region lacks overall 25% reserve
- With IHAWP benefit\*, potential problem is reduced to \$1.6M
  - 10 counties may lack sufficient year-end reserves
  - Balance under 25% reserve ranges from \$10,976 to \$428,047

<sup>\*</sup> Assumes \$15M in aggregate benefit for SFY14



## Potential County Problems – 15% reserve

- Assuming a 15% cash reserve at year-end
  - 10 counties may lack sufficient year-end reserves
  - Balance under 15% reserve ranges from \$16,742 to \$531,744
  - Total potential problem identified \$1.9M
- With IHAWP benefit\*, potential problem is reduced to \$395,266
  - 5 counties may lack sufficient year-end reserves
  - Balance under 15% reserve ranges from \$9,029 to \$248,937

<sup>\*</sup> Assumes \$15M in aggregate benefit for SFY14



#### Factors & Influences

- Impact of Medicaid buyout
- Residency vs. Legal Settlement
- Levy limit?
- Fiscal management including Medicaid "float"



## **Big Picture**

- Significant reduction in receivables
- Regionalization eases financial concerns
- Seven counties had waitlists at July 1, SFY14 (Delaware, Dickinson, Lucas, O'Brien, Osceola, Sac, Sioux);
  - three counties have waitlists today (Delaware, Lucas, Osceola)
- Cash balances increasing
  - SFY12 ending balances w/ residual ARRA impact \$102.6M
  - SFY13 reported ending balances \$79.3M
  - SFY14 estimated ending balances \$96.1M
- IHAWP impact \$30 to \$60M annual impact
  - Counties retain 100% in SFY14 (6 months)
  - Counties retain 20% SFY15 and forward



### **Medicaid Offset**

- Department shall adopt rules
  - In consultation with the County Finance Committee
  - Specifying information to be used
- Critical dates
  - Base period for establishing offset is January 1, 2014 through June 30, 2014
  - First certified offset submitted October 15, 2014
  - First payment obligation due January 1, 2015
- Subject to review by the county auditor or independent audit

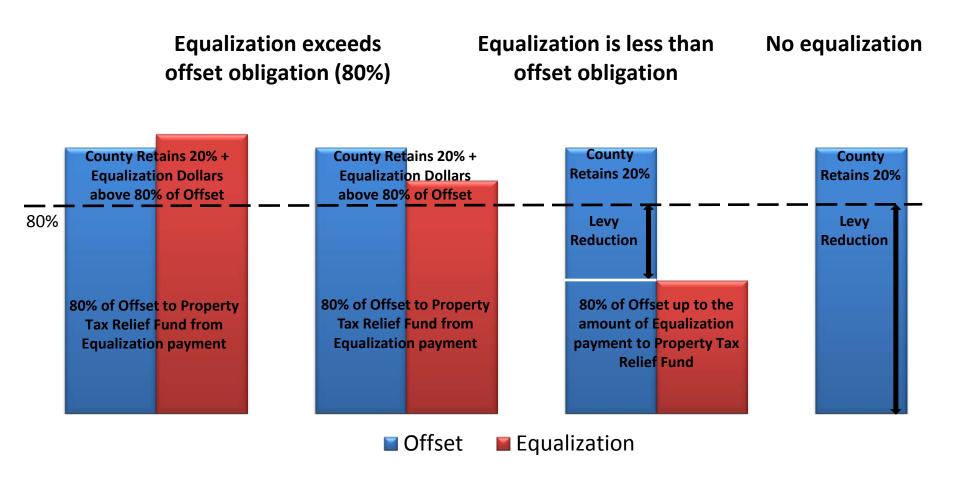


### **Medicaid Offset**

- IHAWP is only age 18-64
- Crosswalk IHAWP benefits with county-based services (based on codes in county system)
- Pull claims data based on these benefits/services.
- Total claims paid through IHAWP for these services = offset

#### Senate File 446 - Medicaid Offset

#### **Conceptual Illustration of Intent**





## Medicaid Offset – Distribution options

- Per capita distribution of offset
  - Preserves the intent and benefits of equalization
- Distribution based on county-by-county claims data
  - Recognizes variation in county demographics that impact eligibility and enrollment



## Medicaid Offset – Estimated impact (per capita)

- \$30M in IHAWP benefit (savings to counties)
  - Effect is a \$39.44 per capita levy
  - 31 counties have a maximum levy below \$39.44
  - \$14.9M in equalization is retained by counties
  - \$14.9M credited to Property Tax Relief Fund
  - Levy's are reduced (offset) \$9.1M



## Medicaid Offset – Estimated impact (per capita)

- \$60M in IHAWP benefit (savings to counties)
  - Effect is a \$31.61 per capita levy
  - 13 counties have a maximum levy below \$31.61
  - \$5.2M in equalization is retained by counties
  - \$24.6M credited to Property Tax Relief Fund
  - Levy's are reduced (offset) \$23.4M



## Moving forward

- Existing sources of funds
  - Increasing cash balances
  - IHAWP benefit (savings to counties)
  - Offset credited to Property Tax Relief Fund
  - Impact of enrolling those previously eligible for Medicaid but not enrolled



## Moving forward

- Potential uses of funds
  - Waitlists
  - Ensuring core services
  - Core plus
  - Crisis
  - Should avoid new populations and/or increased eligibility until above are satisfied