

## 107 - Wash State Health Care Authority

### A001 Administrative Activity

This activity supports the administrative functions of the agency, which includes: Management of the organization; communication with clients and other stakeholders; financial and contract services; human resources management; information services support; agency medical director; and building management and safety issues. (General Fund-State; State Health Care Authority Administrative Account-State; General Fund-Federal)

Account	FY 2012	FY 2013	Biennial Total
<b>FTE</b>	99.0	122.9	111.0
<b>001 General Fund</b>			
001-1 State	\$4,477,000	\$3,875,000	\$8,352,000
001-2 Federal	\$511,000	\$528,000	\$1,039,000
001-C Medicaid Federal	\$817,000	\$1,010,000	\$1,827,000
<b>001 Account Total</b>	<b>\$5,805,000</b>	<b>\$5,413,000</b>	<b>\$11,218,000</b>
<b>418 St Health Care Authority Admin Acct</b>			
418-1 State	\$6,757,000	\$6,237,000	\$12,994,000

**Statewide Result Area: Improve the health of Washingtonians**

**Statewide Strategy: Provide access to appropriate health care**

#### Expected Results

Provide leadership and administrative support for the agency’s activities.

### A003 Prescription Drug Program

This activity develops and maintains an evidence-based prescription drug program to identify preferred drugs for use by the participating state programs: Public Employee Health Plans, Department of Labor and Industries, and Department of Social and Health Services-Health and Recovery Services Administration. This activity also provides access to discounted prescription drugs for all Washington residents through a prescription drug purchasing consortium. (General Fund-State; State Health Care Authority Administrative Account-State, General Fund-Federal, Accident and Medical Aid Account)

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<b>Account</b>	<b>FY 2012</b>	<b>FY 2013</b>	<b>Biennial Total</b>
<b>FTE</b>	5.0	5.0	5.0
<b>001 General Fund</b>			
001-1 State	\$706,000	\$697,000	\$1,403,000
001-2 Federal	\$307,000	\$304,000	\$611,000
<b>001 Account Total</b>	<b>\$1,013,000</b>	<b>\$1,001,000</b>	<b>\$2,014,000</b>
<b>609 Medical Aid Account</b>			
609-1 State	\$95,000	\$95,000	\$190,000
<b>418 St Health Care Authority Admin Acct</b>			
418-1 State	\$84,000	\$84,000	\$168,000

**Statewide Result Area: Improve the health of Washingtonians**

**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Make prescription drugs more affordable to Washington residents and state health care programs; and, increase public awareness regarding the safe and cost-effective use of prescription drugs.

**A004 Health Care Planning**

The Health Care Authority engages in health care planning by developing and implementing new programs to improve the quality and efficiency of health care and health care delivery, interpreting federal legislation, and conducting purchasing and policy studies, surveys, evaluations, impact analyses, and planning in support of PEBB and BH. This includes the Health Technology Assessment (HTA) program, and projects related to health information technology (HIT), and medical homes. (General Fund-State, General Fund-Federal)

<b>Account</b>	<b>FY 2012</b>	<b>FY 2013</b>	<b>Biennial Total</b>
<b>FTE</b>	25.5	21.5	23.5
<b>001 General Fund</b>			
001-1 State	\$2,040,000	\$802,000	\$2,842,000
001-2 Federal	\$420,000	\$425,000	\$845,000
001-8 Federal Stimulus	\$7,848,000	\$2,702,000	\$10,550,000
001-C Medicaid Federal	\$23,756,000	\$73,000	\$23,829,000
<b>001 Account Total</b>	<b>\$34,064,000</b>	<b>\$4,002,000</b>	<b>\$38,066,000</b>
<b>609 Medical Aid Account</b>			
609-1 State	\$170,000	\$169,000	\$339,000
<b>418 St Health Care Authority Admin Acct</b>			
418-1 State	\$1,688,000	\$1,655,000	\$3,343,000

**Statewide Result Area: Improve the health of Washingtonians**

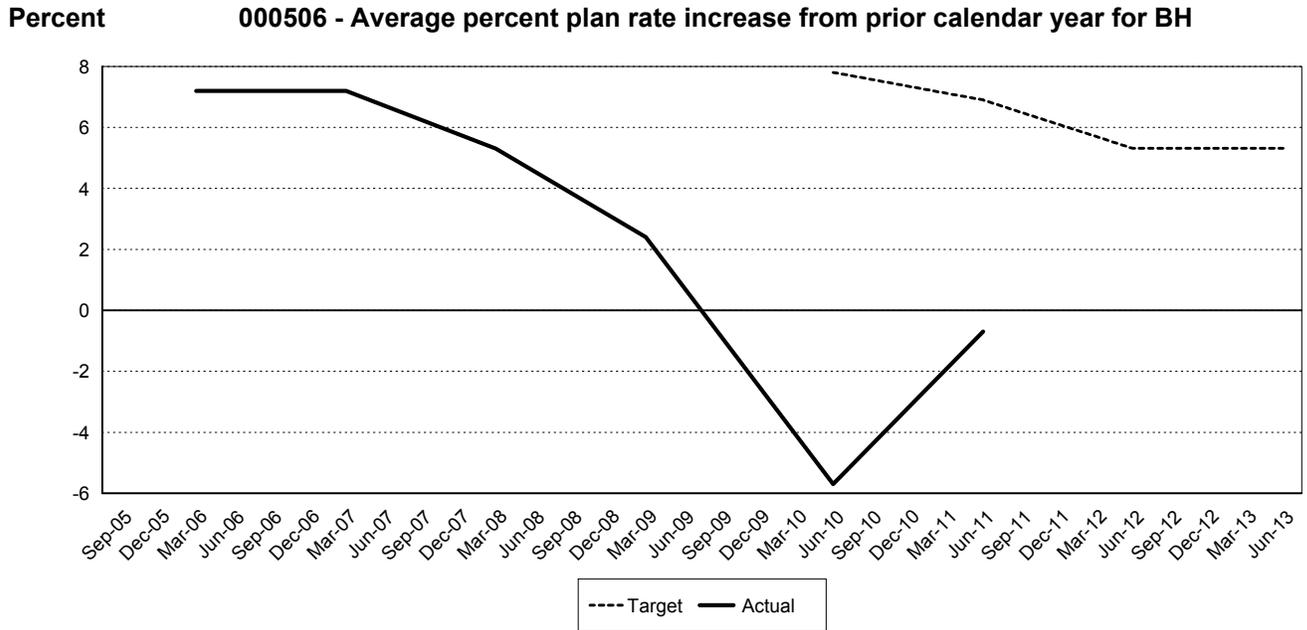
**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Provide policy analysis and make policy recommendations in support of program operations; collect and analyze data to support program policy as well as other statewide health policy initiatives. Successful implementation of initiatives and programs such as HTA, HIT, and medical homes.

000506 Average percent plan rate increase from prior calendar year for Basic Health			
Biennium	Period	Actual	Target
2011-13	A3		
	A3		5.3%
	A2		
	A2		5.3%
	A2		
	A2		
	A1		
	A1		
2009-11	A3		
	A3	(0.7)%	6.9%
	A2		
	A2	(5.7)%	7.8%
	A2		
	A2		
	A1		
	A1		
2007-09	A3	2.4%	
	A3		
	A2	5.3%	
	A2		
	A2		
	A2		
	A1		
	A1		

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**A005 Provide Subsidized Basic Health Coverage for Adults**

The Basic Health Plan provides a basic health insurance package for adults who are otherwise uninsured and whose income is at or below 200 percent of the federal poverty level. The state offers reduced rates for low-income Washington residents. Enrollees also pay portions of the premium costs based on income level and family size.

Account	FY 2012	FY 2013	Biennial Total
<b>FTE</b>	73.0	73.0	73.0
<b>17K Basic Health Plan Stabilization Account</b>			
17K-1 State	\$20,856,000	\$20,856,000	\$41,712,000
<b>761 Basic Health Plan Subscription Acct</b>			
761-6 Non-Appropriated	\$15,149,000	\$25,590,000	\$40,739,000
<b>172 Basic Health Plan Trust Account</b>			
172-6 Non-Appropriated	\$23,809,000	\$22,360,000	\$46,169,000
<b>001 General Fund</b>			
001-1 State	\$26,816,000	\$24,061,000	\$50,877,000
001-2 Federal	\$616,000	\$618,000	\$1,234,000
001-C Medicaid Federal	\$45,003,000	\$42,324,000	\$87,327,000
<b>001 Account Total</b>	<b>\$72,435,000</b>	<b>\$67,003,000</b>	<b>\$139,438,000</b>

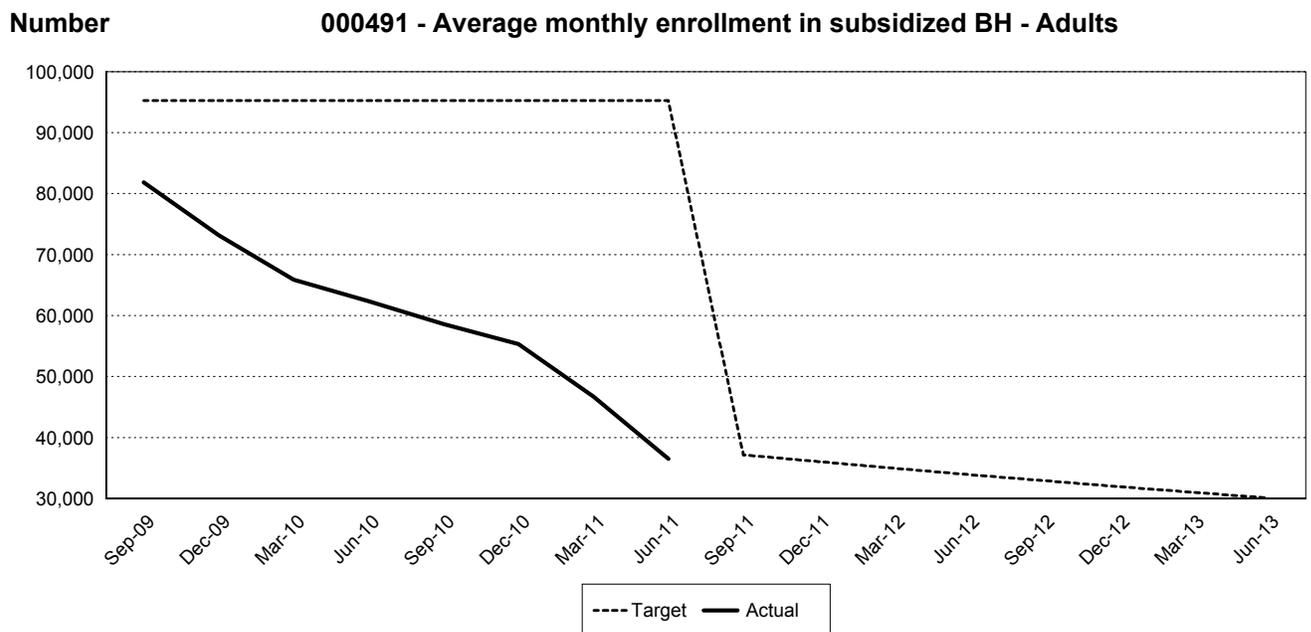
**Statewide Result Area: Improve the health of Washingtonians**

**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Provide access to Basic Health coverage to adults with incomes at or below 200 percent of the federal poverty level.

<b>000491 Average monthly enrollment in subsidized BH for adults at all income levels.</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2011-13	Q8		30,066
	Q7		30,986
	Q6		31,935
	Q5		32,913
	Q4		33,921
	Q3		34,958
	Q2		36,029
	Q1		37,133
2009-11	Q8	36,505	95,262
	Q7	46,699	95,262
	Q6	55,310	95,262
	Q5	58,605	95,262
	Q4	62,331	95,262
	Q3	65,895	95,262
	Q2	73,141	95,262
	Q1	81,818	95,262



**A007 Provide Subsidized Basic Health Coverage for Children**

*Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity*

The Basic Health Plan provides a basic health insurance package for children who are otherwise uninsured and whose family income is at or below 200 percent of the federal poverty level. The state offers reduced rates for low-income Washington residents. Enrollees also pay portions of the premium costs based on income level and family size.

<b>Account</b>	<b>FY 2012</b>	<b>FY 2013</b>	<b>Biennial Total</b>
<b>FTE</b>	4.0	4.0	4.0
<b>17K Basic Health Plan Stabilization Account</b>			
17K-1 State	\$1,144,000	\$1,144,000	\$2,288,000
<b>761 Basic Health Plan Subscription Acct</b>			
761-6 Non-Appropriated	\$3,258,000	\$5,504,000	\$8,762,000
<b>172 Basic Health Plan Trust Account</b>			
172-6 Non-Appropriated	\$1,306,000	\$1,226,000	\$2,532,000
<b>001 General Fund</b>			
001-1 State	\$1,471,000	\$1,320,000	\$2,791,000
001-2 Federal	\$34,000	\$34,000	\$68,000
001-C Medicaid Federal	\$2,469,000	\$2,322,000	\$4,791,000
<b>001 Account Total</b>	<b>\$3,974,000</b>	<b>\$3,676,000</b>	<b>\$7,650,000</b>

**Statewide Result Area: Improve the health of Washingtonians**

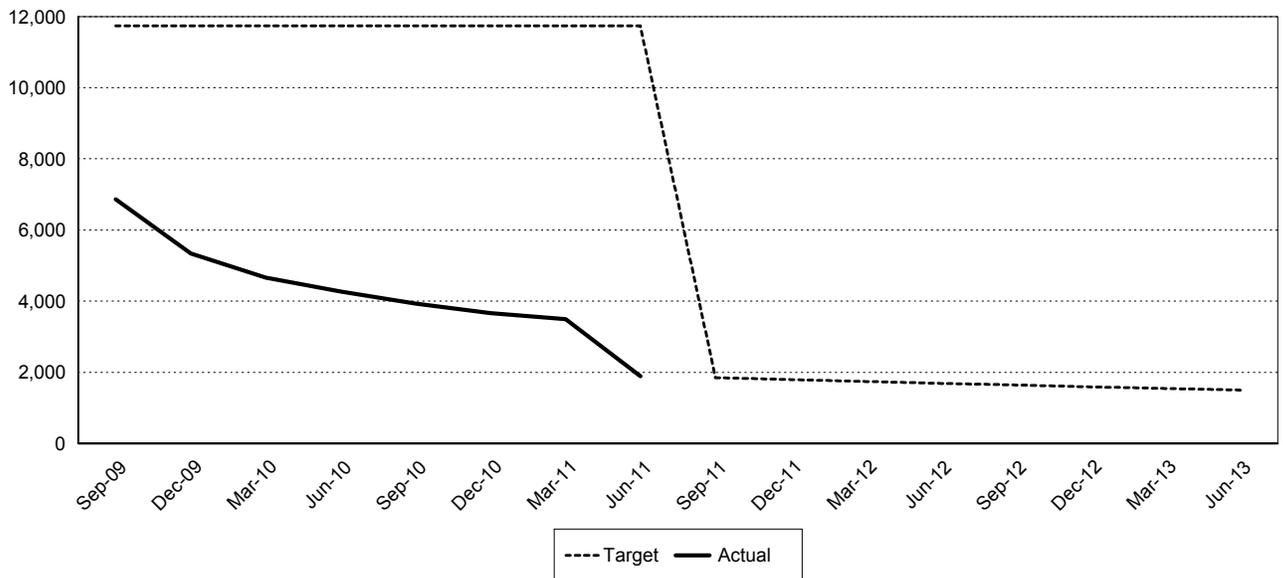
**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Provide access to basic health coverage to children whose family income falls at or below 200 percent of the federal poverty level.

000489 Average monthly enrollment in subsidized BH - Children at all income levels.			
Biennium	Period	Actual	Target
2011-13	Q8		1,496
	Q7		1,542
	Q6		1,589
	Q5		1,637
	Q4		1,687
	Q3		1,739
	Q2		1,792
	Q1		1,846
2009-11	Q8	1,886	11,738
	Q7	3,498	11,738
	Q6	3,667	11,738
	Q5	3,934	11,738
	Q4	4,267	11,738
	Q3	4,662	11,738
	Q2	5,338	11,738
	Q1	6,864	11,738

Number 000489 - Average monthly enrollment in subsidized BH enrollment - Children



A009 PEBB Customer Service

*Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity*

The PEBB Customer Services Program manages eligibility for and administration of state health benefits by employing staff who:

- Answer questions, process enrollment requests, and verify eligibility for retired and self-paying PEBB members.
- Support and train employers to implement PEBB eligibility rules and manage their employees' accounts.
- Inform K-12s and state political subdivisions of their option to participate in PEBB.
- Inform legislation, and develop and revise eligibility rules that allow state employers to attract and retain workers within the state's budget.
- Implement related projects and produce communications that describe eligibility rules, enrollment processes, and state insurance benefits.

Coverage is provided to Washington State agency and higher-education employees, retirees, and their dependents; K-12 retirees; and employees and retirees of participating K-12 public school districts, educational service districts, and political subdivisions

<b>Account</b>	<b>FY 2012</b>	<b>FY 2013</b>	<b>Biennial Total</b>
<b>FTE</b>	73.3	73.3	73.3
<b>08G Flexible Spending Administrative Account</b>			
08G-6 Non-Appropriated	\$713,000	\$773,000	\$1,486,000
<b>418 St Health Care Authority Admin Acct</b>			
418-1 State	\$8,970,000	\$9,001,000	\$17,971,000
<b>438 Uniform Dental Plan Benefits Administration Account</b>			
438-6 Non-Appropriated	\$5,243,000	\$5,355,000	\$10,598,000

**Statewide Result Area: Improve the health of Washingtonians**

**Statewide Strategy: Provide access to appropriate health care**

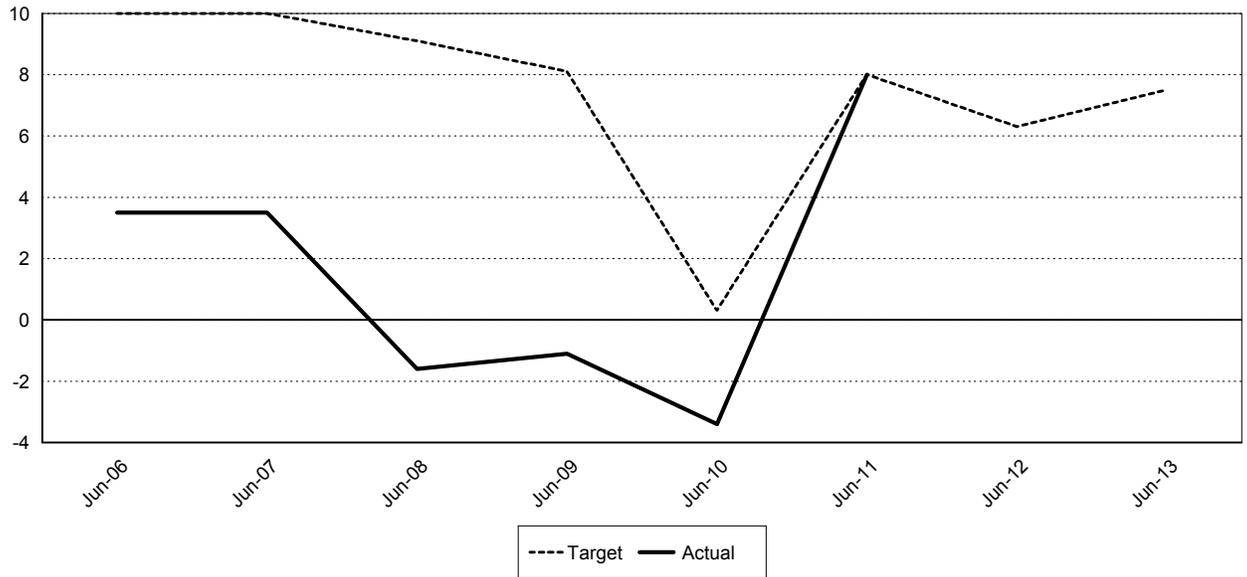
**Expected Results**

- Clear and consistently applied eligibility for state-paid benefits.
- Benefits-related projects and communications which provide the systems and relevant, understandable information so members can make timely benefit choices.

<b>000687 Percent premium increase from prior calendar year for all PEBB Medicare subscribers</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2011-13	A3		7.5%
	A2		6.3%
2009-11	A3	8%	8%
	A2	(3.4)%	0.3%
2007-09	A3	(1.1)%	8.1%
	A2	(1.6)%	9.1%

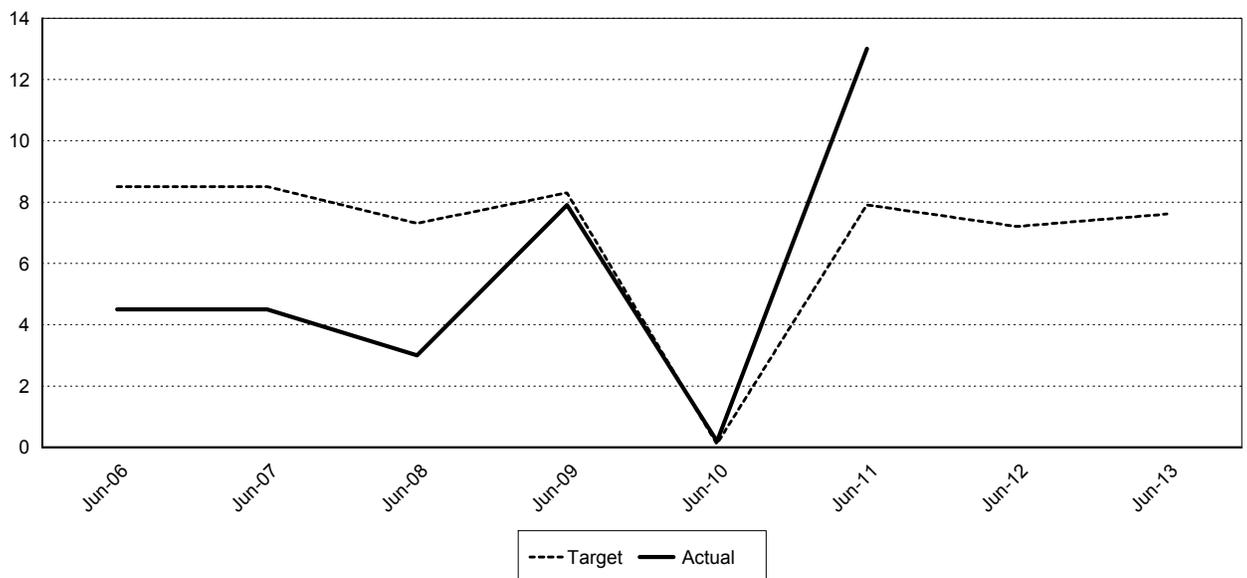
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**Percent 000687 - Percent premium increase from prior calendar year for all PEBB Medicare subscribers**



<b>000682 Average premium increase from prior calendar year for all Public Employees' Benefit non-Medicare members.</b>			
Biennium	Period	Actual	Target
2011-13	A3		7.6%
	A2		7.2%
2009-11	A3	13%	7.9%
	A2	0.2%	0.1%
2007-09	A3	7.9%	8.3%
	A2	3%	7.3%

**Percent 000682 - Percent premium increase from prior calendar year for all PEBB Non-Medicare subscribers**



**A011 PEBB Plan Management**

PEBB Plan Management manages the design and delivery of the entire portfolio of PEBB plans, including health care, dental, life insurance, disability, and home and auto insurance. The PEBB Plan Management portfolio covers more than 300,000 employees, retirees, and dependents. (Health Care Authority Administrative Account-State, Uniform Medical Plan Benefits Administration Account-Nonappropriated)

Account	FY 2012	FY 2013	Biennial Total
<b>439 Uniform Medical Plan Benefits Administration Account</b>			
439-6 Non-Appropriated	\$52,899,000	\$54,067,000	\$106,966,000

**Statewide Result Area: Improve the health of Washingtonians**  
**Statewide Strategy: Provide access to appropriate health care**

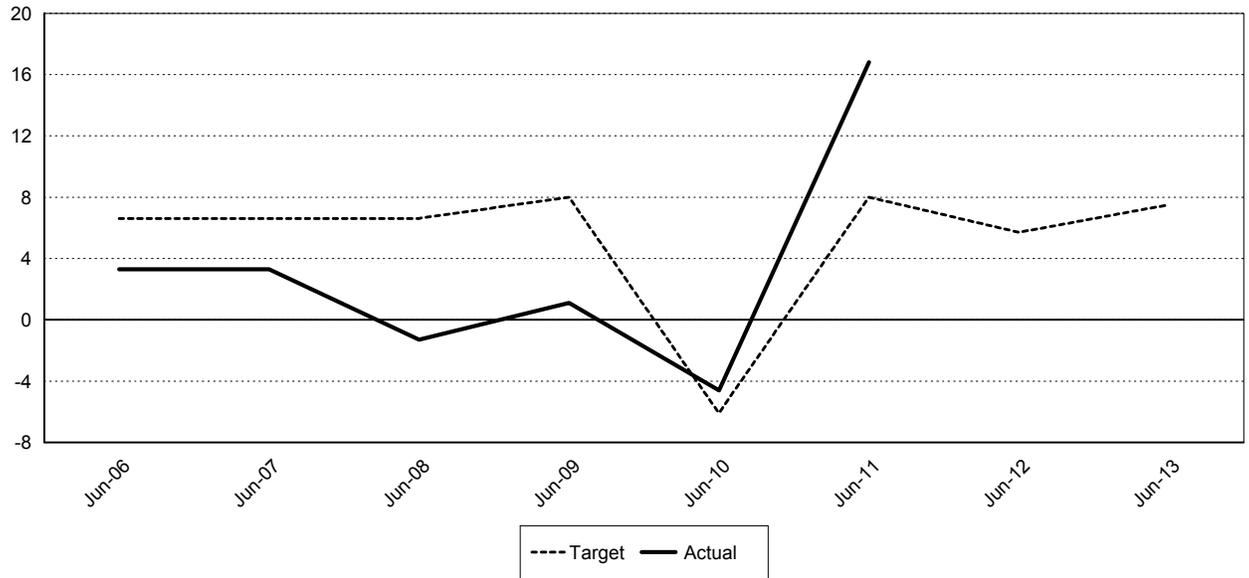
**Expected Results**

Enhance HCA's ability to consistently deliver high-quality benefits and better control costs.

<b>000295 Percent premium increase from prior calendar year for UMP-PPO Medicare subscribers</b>			
Biennium	Period	Actual	Target
2011-13	A3		7.5%
	A2		5.7%
2009-11	A3	16.8%	8%
	A2	(4.6)%	(6.1)%
2007-09	A3	1.1%	8%
	A2	(1.3)%	6.6%

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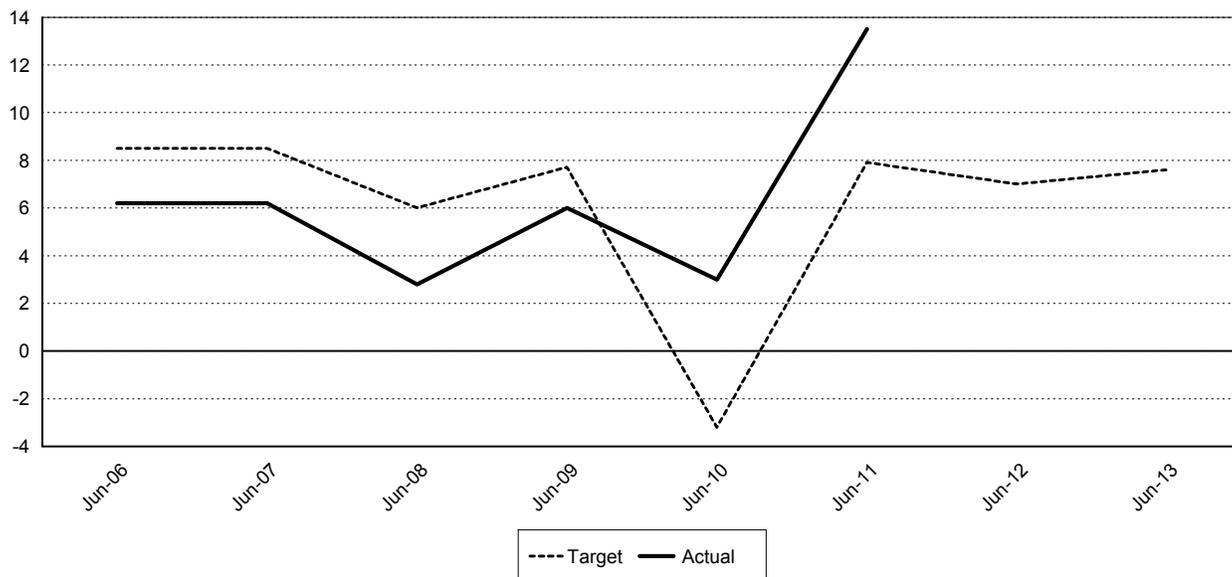
**Percent 000295 - Percent premium increase from prior calendar year for UMP-PPO Medicare subscribers**



<b>000291 Percent premium increase from prior calendar year for UMP-PPO Non-Medicare subscribers</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2011-13	A3		7.6%
	A2		7%
2009-11	A3	13.5%	7.9%
	A2	3%	(3.2)%
2007-09	A3	6%	7.7%
	A2	2.8%	6%

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**Percent 000291 - Percent premium increase from prior calendar year for UMP-PPO Non-Medicare subscribers**



### A012 Insurance Safety Net

As part of this activity, subsidies are provided to eligible Washington State Health Insurance Pool (WSHIP) members. As directed in state law (RCW 70.47), the program provides funding to reduce the cost of high-risk pool insurance for individuals whose income is less than 300 percent of the federal poverty level, who are between 50 and 64 years old, and who have been denied individual health insurance. (General Fund-State)

The Health Coverage Tax Credit (HCTC) is a federal program that pays a portion of the health plan premium for eligible enrollees in qualified health plans. The remaining portion is paid by the enrollee. In Washington State, Basic Health is a "qualified health plan" designated to offer HCTC coverage. The Internal Revenue Service (IRS) administers the HCTC program in partnership with other federal agencies, the states, and the private health care industry. (Basic Health Plan Subscription Account-State)

Account	FY 2012	FY 2013	Biennial Total
<b>761 Basic Health Plan Subscription Acct</b>			
761-6 Non-Appropriated	\$1,695,000	\$2,319,000	\$4,014,000
<b>001 General Fund</b>			
001-1 State	\$62,000	\$62,000	\$124,000

**Statewide Result Area: Improve the health of Washingtonians**

**Statewide Strategy: Provide access to appropriate health care**

#### Expected Results

Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity

Coordinate with the Office of the Insurance Commissioner to provide subsidies to eligible applicants and provide management for the state HCTC program for eligible applicants.

**H001 Administrative Costs**

This activity reflects both the Division of Disability Determination Services and the Medical Assistance Administration's (MAA's) operating costs across all activities. (Health Services Account-State)

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

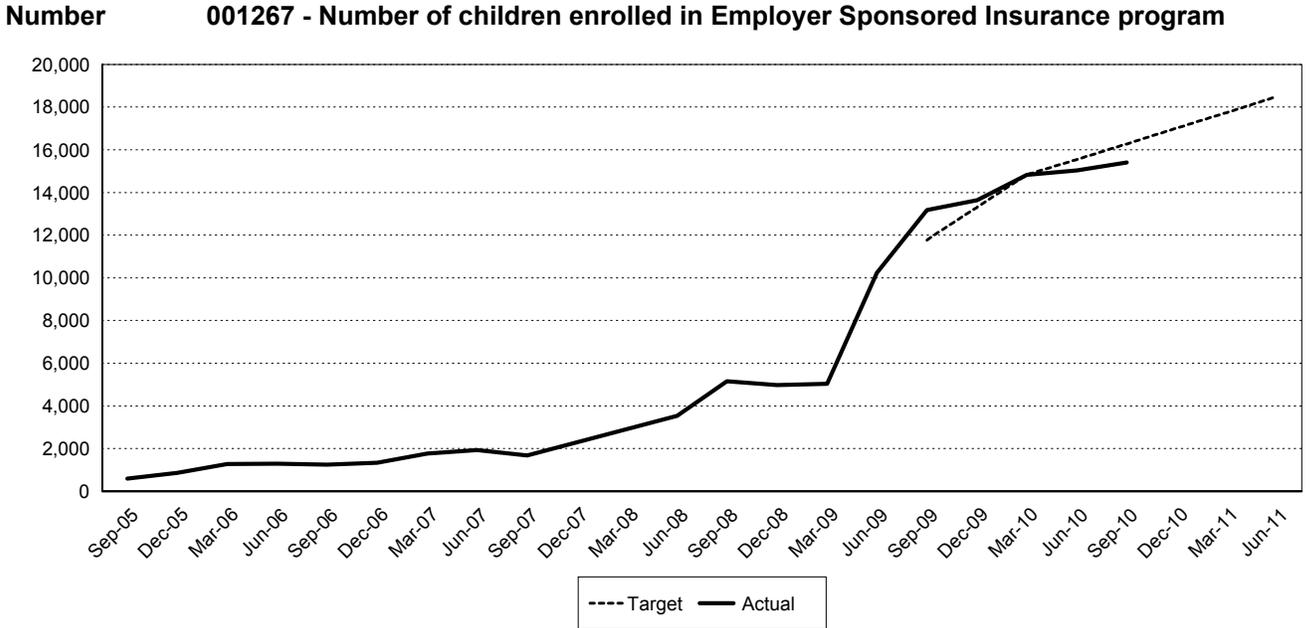
**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Continue to improve processes that promote the effective use of resources. Strengthen information and fiscal monitoring systems. Enhance abilities to be an effective purchaser of health services.

<b>001267 Number of children enrolled in ESI (Employer Sponsored Insurance) pilot project</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2009-11	Q8		18,479
	Q7		17,745
	Q6		17,010
	Q5	15,408	16,275
	Q4	15,028	15,541
	Q3	14,831	14,831
	Q2	13,637	13,299
	Q1	13,173	11,768
2007-09	Q8	10,236	
	Q7	5,031	
	Q6	4,979	
	Q5	5,160	
	Q4	3,539	
	Q3		
	Q2		
	Q1	1,685	

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**H023 Disproportionate Share Hospital/Proshare**

Congress established the Disproportionate Share Hospital (DSH) program to ensure continued operation of those hospitals most heavily impacted by charity and Medicaid caseloads. The Department of Social and Health Services operates DSH and several intergovernmental transfer (IGT) and refinancing programs to maximize federal revenue. In the 1999-01 Biennium, the state opted to expand the IGT programs to include public hospital district nursing homes, and further maximize federal revenue using IGTs with the University of Washington and Harborview Medical Center. In prior biennia, participating hospitals and nursing facilities throughout the state have been allowed to keep a percentage of the revenue earned through some of these programs.

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

**Statewide Strategy: Provide access to appropriate health care**

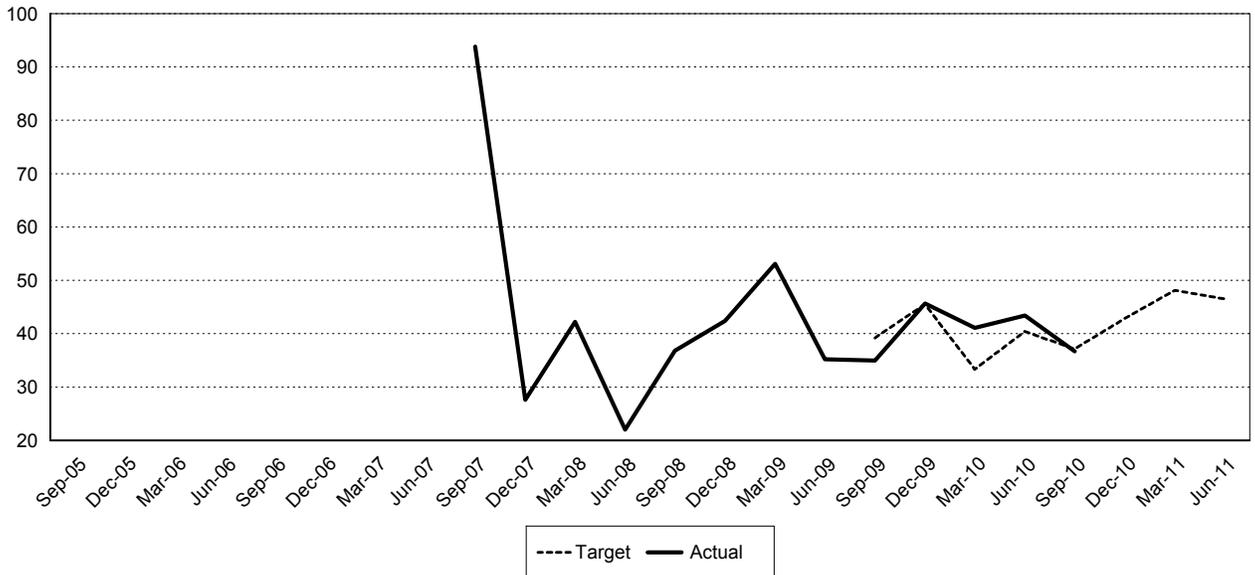
**Expected Results**

The Department will seek to maximize the use of available federal funds and improve health service access and quality.

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001257 DSH proshare cost coverage for state only and indigent patients at eligible hospitals.			
Biennium	Period	Actual	Target
2009-11	Q8		\$46.5
	Q7		\$48.1
	Q6		\$42.8
	Q5	\$36.7	\$37.1
	Q4	\$43.4	\$40.4
	Q3	\$41.1	\$33.3
	Q2	\$45.7	\$45.5
	Q1	\$35	\$39.2
2007-09	Q8	\$35.2	
	Q7	\$53.1	
	Q6	\$42.4	
	Q5	\$36.8	
	Q4	\$22	
	Q3	\$42.2	
	Q2	\$27.6	
	Q1	\$93.8	

Dollars 001257 - DSH proshare cost coverage for state only and indigent patients at eligible hospitals



**H056 Mandatory Medicaid Program for Children and Families**

*Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity*

Mandatory clients of this program are families and children eligible to receive Temporary Assistance to Needy Families (TANF); families and individuals terminated from TANF because they have increased earnings or hours of employment or Social Security Disability Insurance income; individuals who are ineligible for TANF because of requirements that do not apply to Medicaid; eligible pregnant women and their newborns; individuals receiving Social Security Income or those eligible to receive mandatory state supplements; and children in foster care or adoption support. Mandatory Medicaid services for eligible clients include inpatient and outpatient hospital care, rural health clinic services, laboratory and X-ray services, nursing home services for clients 21 years or older (other than those in mental hospitals or institutions for the developmentally disabled), EPSDT (Early and Periodic Screening, Diagnosis, and Treatment) health care program for children, family planning, physician care, and home health.

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

**Statewide Strategy: Provide access to appropriate health care**

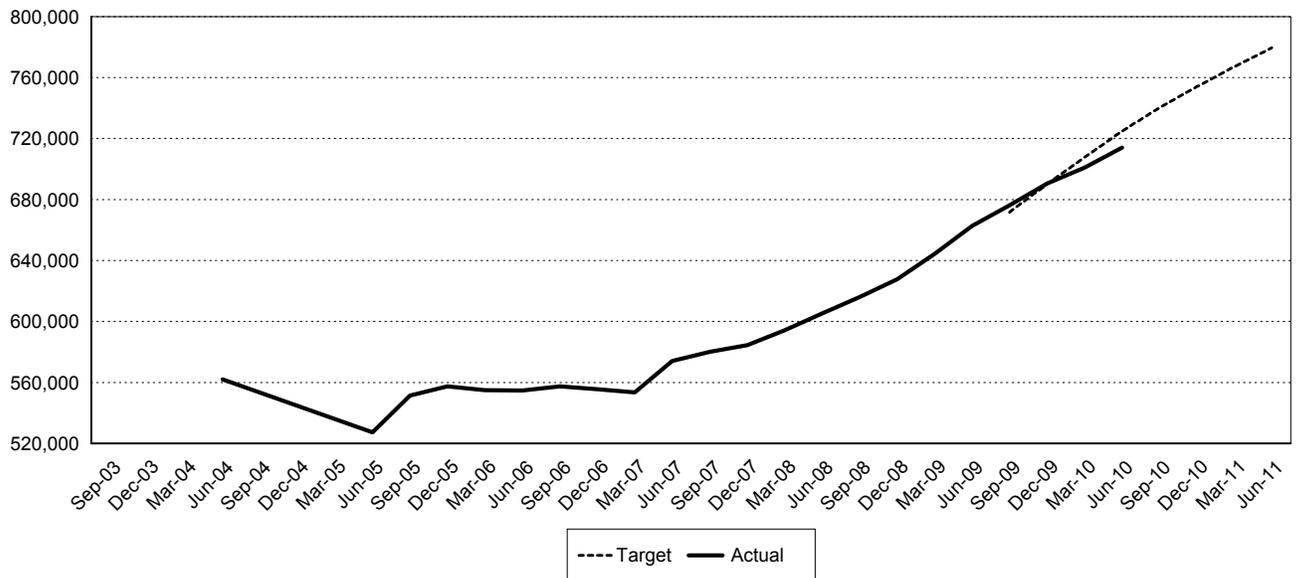
**Expected Results**

Assure access to high quality health care. Enhance contracting capability with health carriers.

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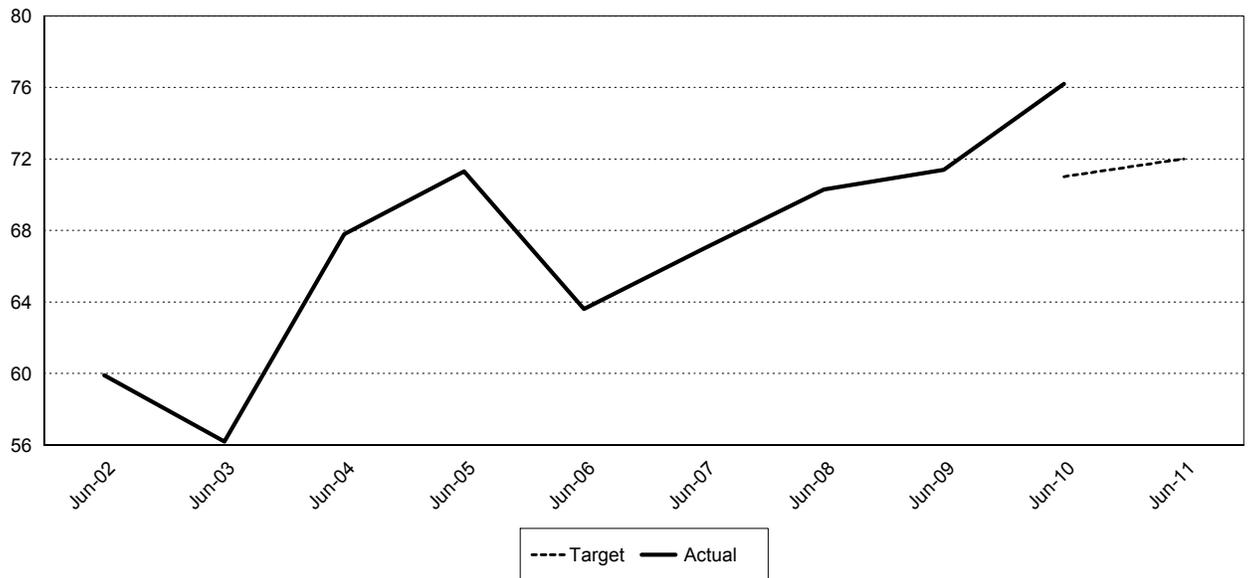
001256 Average monthly enrollment of children in Medical Assistance programs.			
Biennium	Period	Actual	Target
2009-11	Q8		779,267
	Q7		767,119
	Q6		753,992
	Q5		739,959
	Q4	714,083	724,582
	Q3	700,920	707,675
	Q2	690,619	689,871
	Q1	676,235	671,706
2007-09	Q8	662,696	
	Q7	644,371	
	Q6	627,758	
	Q5	615,978	
	Q4	605,332	
	Q3	594,252	
	Q2	584,469	
	Q1	580,196	

Number 001256 - Cumulative fiscal year average monthly enrollment of children in MA programs

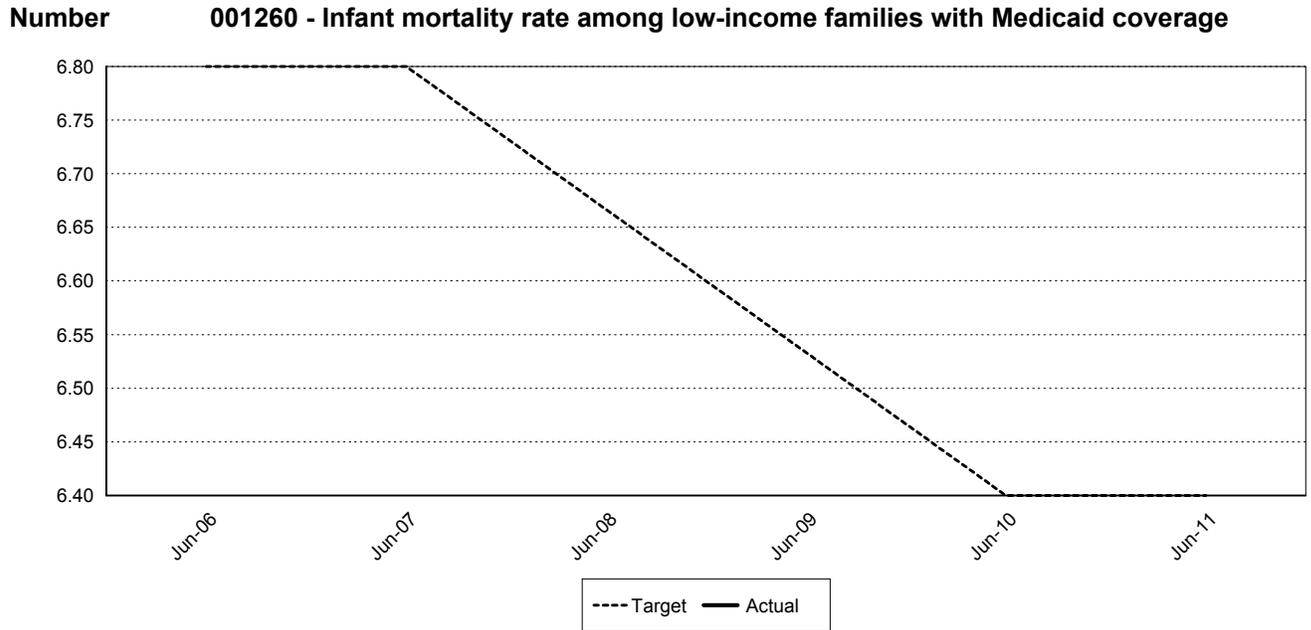


<b>001258 Immunization rate for two-year-olds enrolled in Medicaid health plans.</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2009-11	A3		72%
	A2	76.2%	71%
2007-09	A3	71.4%	
	A2	70.3%	

Percent 001258 - Immunization rate for two-year-olds enrolled in Medicaid managed care health plans



<b>001260 Infant mortality rate among low-income families with Medicaid coverage (expressed as deaths per 1,000 births).</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2009-11	A3		6.4
	A2		6.4
2007-09	A3		
	A2		



**H057 Medicaid for Optional Children**

Medicaid services are provided to those children who do not qualify under the federal mandatory guidelines, but live in families with incomes less than 200 percent of the federal poverty level. (Health Services Account-State)

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

**Statewide Strategy: Provide access to appropriate health care**

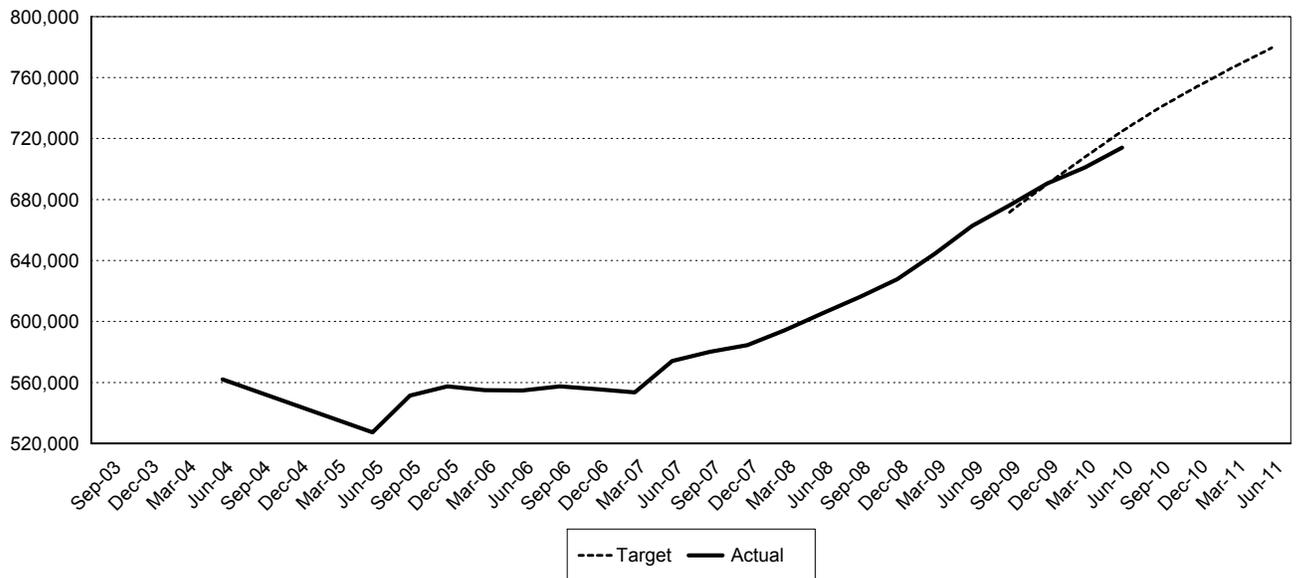
**Expected Results**

Assure access to high quality health care. Enhance contracting capability with health carriers.

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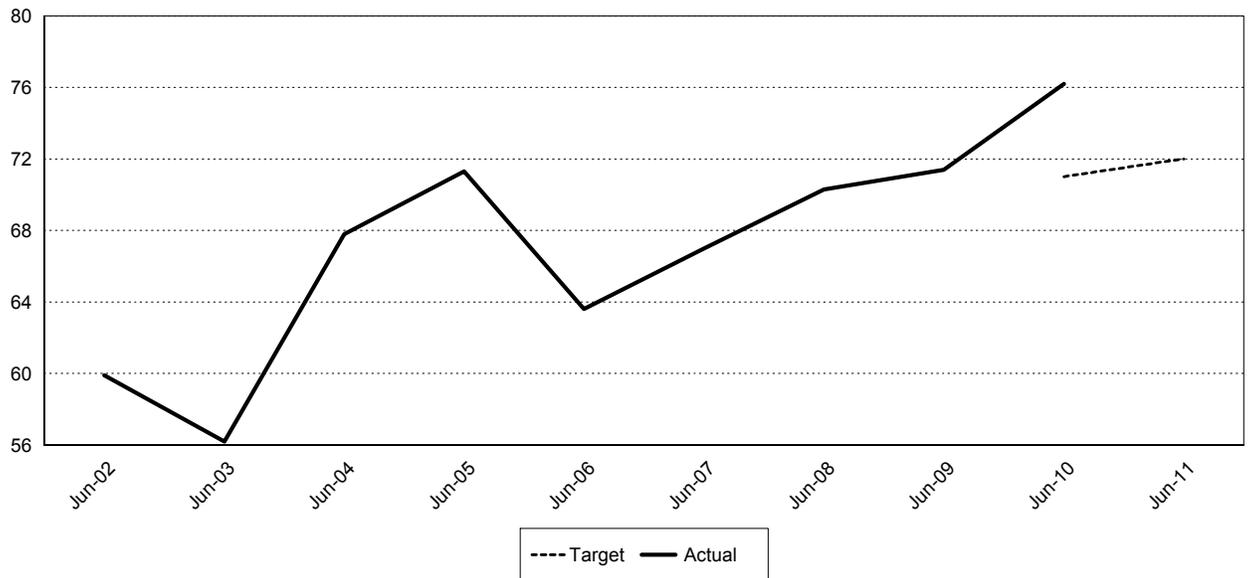
001256 Average monthly enrollment of children in Medical Assistance programs.			
Biennium	Period	Actual	Target
2009-11	Q8		779,267
	Q7		767,119
	Q6		753,992
	Q5		739,959
	Q4	714,083	724,582
	Q3	700,920	707,675
	Q2	690,619	689,871
	Q1	676,235	671,706
2007-09	Q8	662,696	
	Q7	644,371	
	Q6	627,758	
	Q5	615,978	
	Q4	605,332	
	Q3	594,252	
	Q2	584,469	
	Q1	580,196	

Number 001256 - Cumulative fiscal year average monthly enrollment of children in MA programs

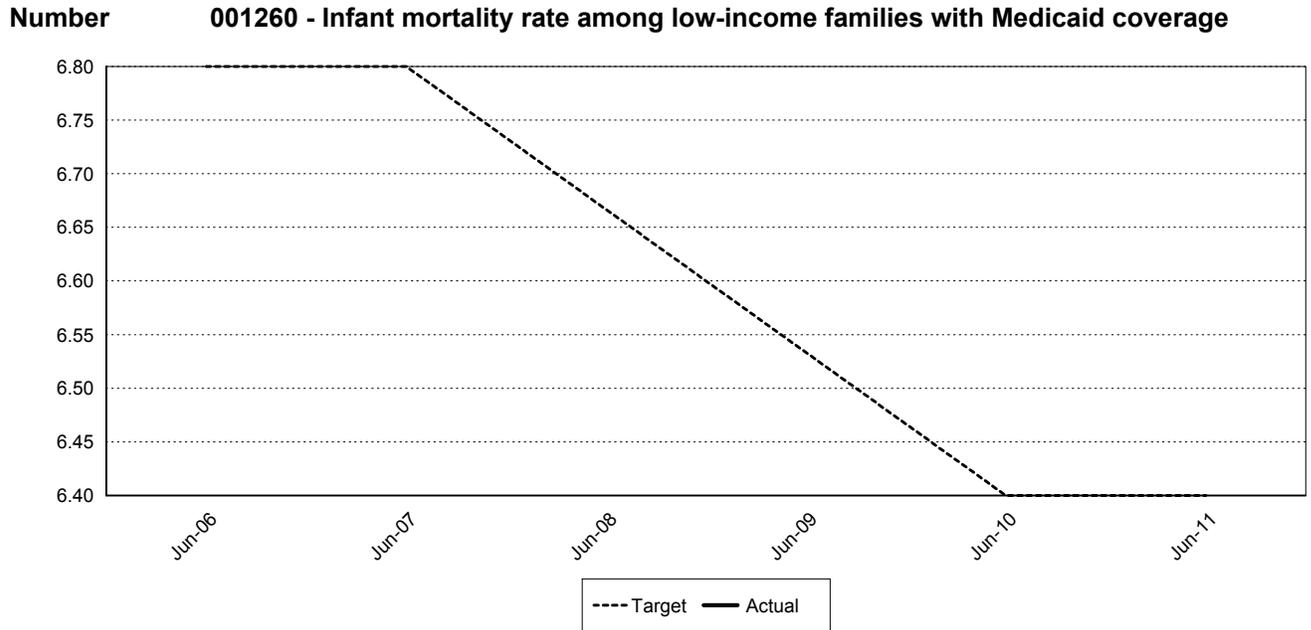


<b>001258 Immunization rate for two-year-olds enrolled in Medicaid health plans.</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2009-11	A3		72%
	A2	76.2%	71%
2007-09	A3	71.4%	
	A2	70.3%	

**Percent 001258 - Immunization rate for two-year-olds enrolled in Medicaid managed care health plans**



<b>001260 Infant mortality rate among low-income families with Medicaid coverage (expressed as deaths per 1,000 births).</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2009-11	A3		6.4
	A2		6.4
2007-09	A3		
	A2		



**H058 Medicaid Program for Aged, Blind and Disabled**

Medically Needy (MN) is a federally and state-funded Medicaid program for aged, blind, or disabled individuals with incomes above \$571 per month and/or resources above \$2,000. Clients with income in excess of this limit are required to spend down excess income before medical benefits can be authorized. (Health Services Account)

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

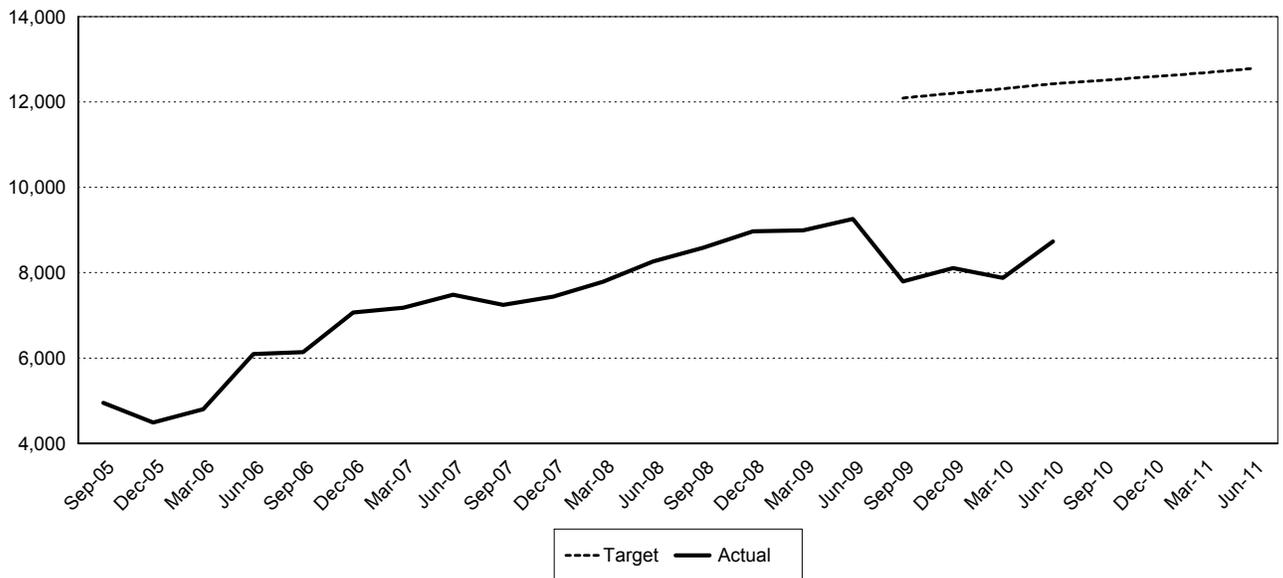
**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Assure access to high quality health care. Improve health service access and quality.

001265 Number of clients enrolled in care management pilots and chronic care programs.			
Biennium	Period	Actual	Target
2009-11	Q8		12,783
	Q7		12,679
	Q6		12,589
	Q5		12,502
	Q4	8,729	12,424
	Q3	7,877	12,306
	Q2	8,109	12,199
	Q1	7,792	12,092
2007-09	Q8	9,258	
	Q7	8,988	
	Q6	8,969	
	Q5	8,586	
	Q4	8,267	
	Q3	7,786	
	Q2	7,440	
	Q1	7,243	

Number 001265 - Number of clients enrolled in care management pilots and chronic care programs



H060 Medical Care for General Assistance Unemployable and ADATSA

*Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity*

General Assistance-Unemployable (GA-U) is a state-funded program that provides limited medical care to persons who are physically and/or mentally incapacitated and unemployable for more than 90 days. Limited medical care is also provided to people participating in the state-funded Alcoholism and Drug Addiction Treatment and Support Act (ADATSA) program which provides cash and/or medical benefits, treatment, and support for persons who are unemployed due to drug or alcohol abuse. (Health Services Account)

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

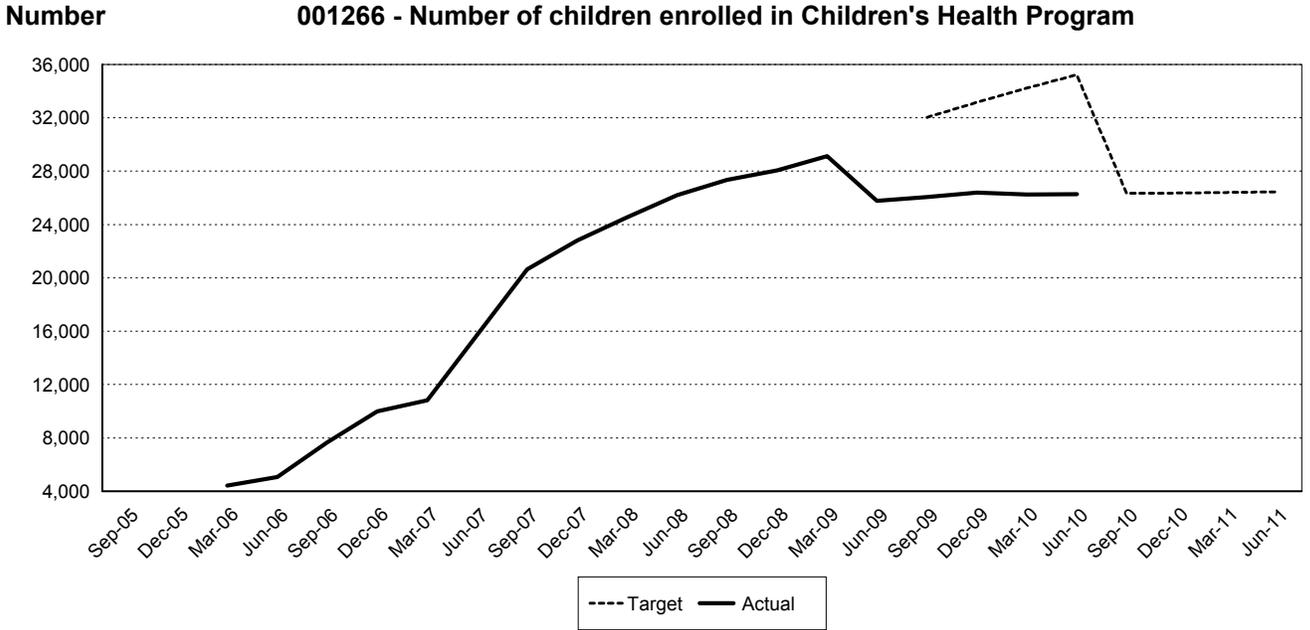
**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Assure access to high quality health care. Improve health service access and quality.

<b>001266 Number of children enrolled in Children's Health Program.</b>			
<b>Biennium</b>	<b>Period</b>	<b>Actual</b>	<b>Target</b>
2009-11	Q8		26,436
	Q7		26,395
	Q6		26,355
	Q5		26,314
	Q4	26,271	35,212
	Q3	26,256	34,208
	Q2	26,389	33,145
	Q1	26,054	32,018
2007-09	Q8	25,775	
	Q7	29,121	
	Q6	28,050	
	Q5	27,336	
	Q4	26,191	
	Q3	24,544	
	Q2	22,791	
	Q1	20,641	

Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity



**H066 Optional Health Benefits: Dental, Vision, and Hearing**

Federal regulations allow states to cover optional services such as hearing, dental, and vision care under Medicaid, as long as those services are listed in the state plan.

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

**Statewide Strategy: Provide access to appropriate health care**

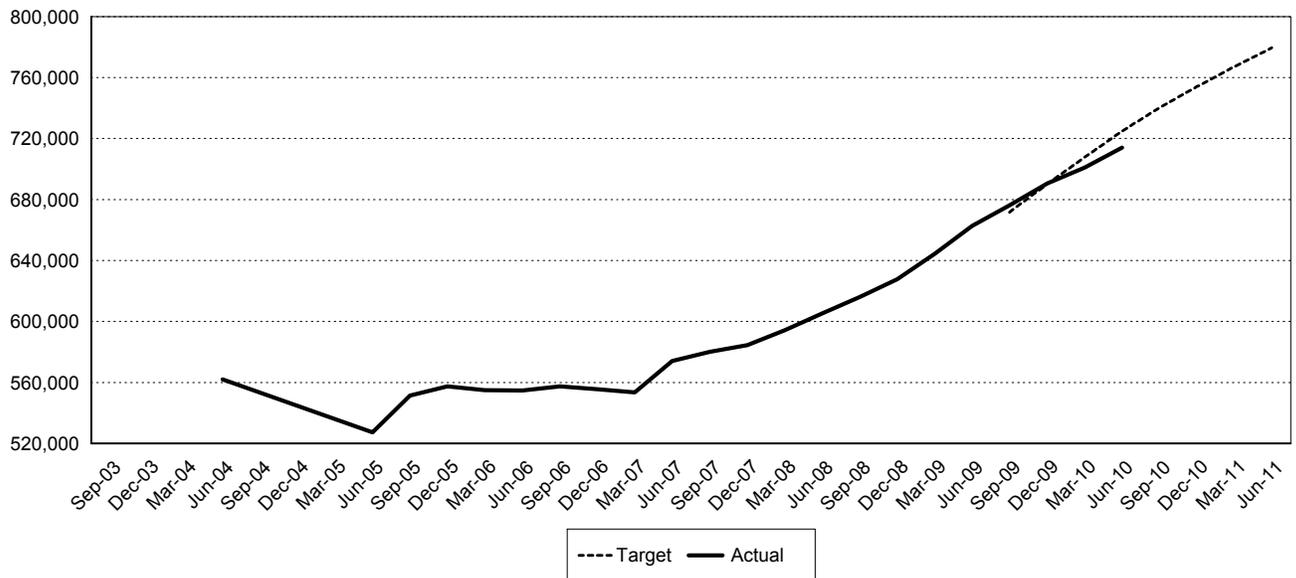
**Expected Results**

Assure access to high quality health care.

Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity

001256 Average monthly enrollment of children in Medical Assistance programs.			
Biennium	Period	Actual	Target
2009-11	Q8		779,267
	Q7		767,119
	Q6		753,992
	Q5		739,959
	Q4	714,083	724,582
	Q3	700,920	707,675
	Q2	690,619	689,871
	Q1	676,235	671,706
2007-09	Q8	662,696	
	Q7	644,371	
	Q6	627,758	
	Q5	615,978	
	Q4	605,332	
	Q3	594,252	
	Q2	584,469	
	Q1	580,196	

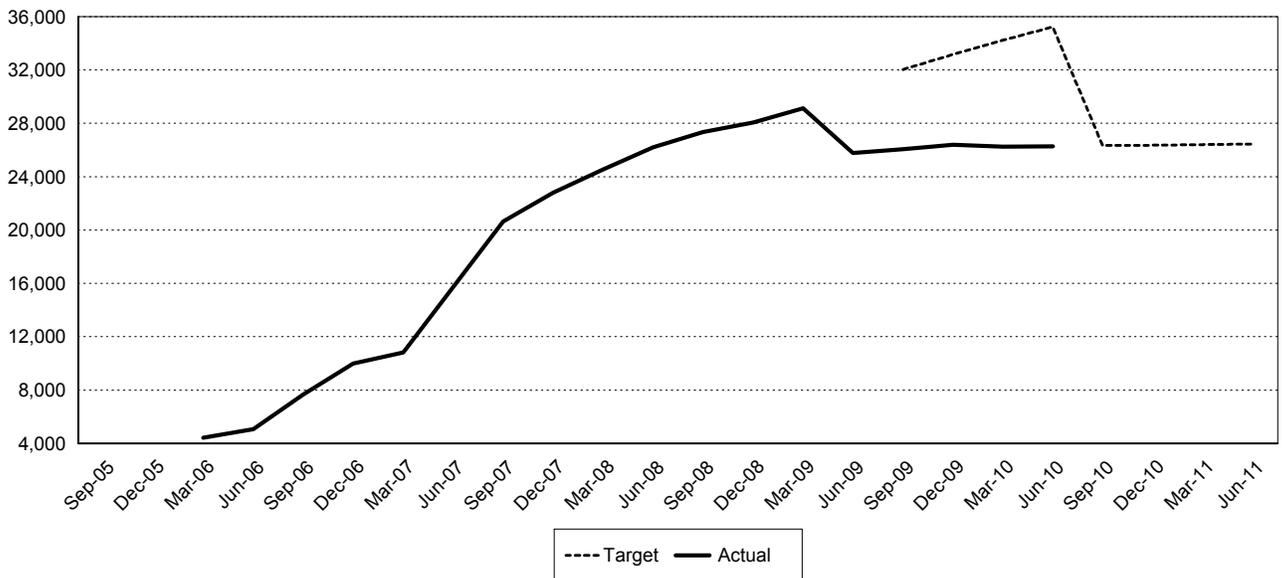
Number 001256 - Cumulative fiscal year average monthly enrollment of children in MA programs



Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity

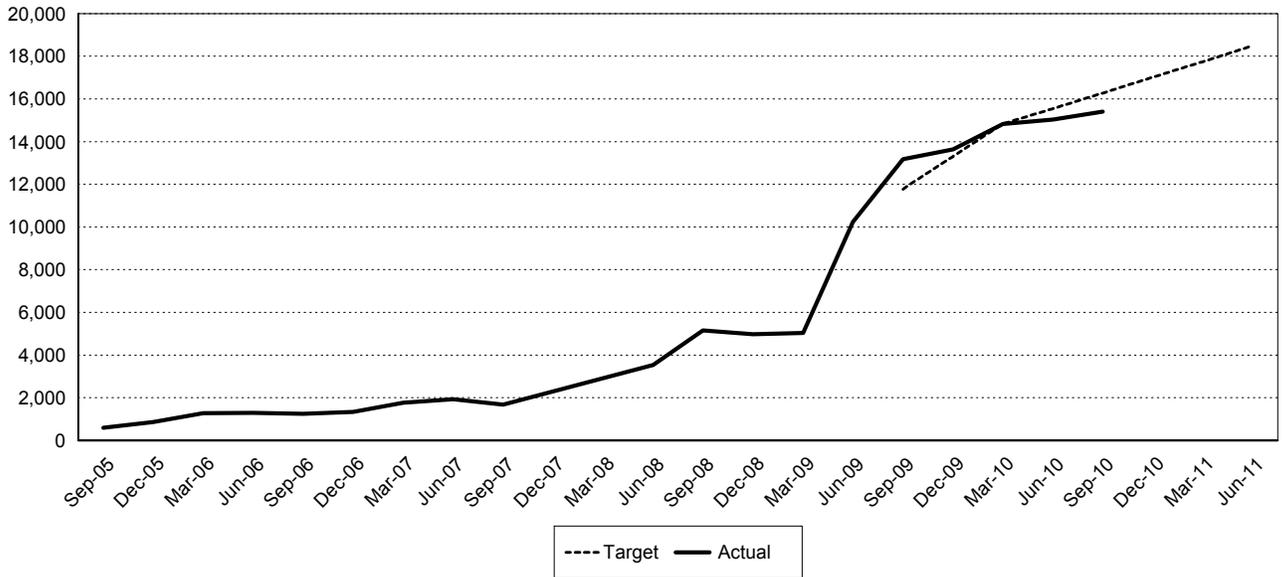
001266 Number of children enrolled in Children's Health Program.			
Biennium	Period	Actual	Target
2009-11	Q8		26,436
	Q7		26,395
	Q6		26,355
	Q5		26,314
	Q4	26,271	35,212
	Q3	26,256	34,208
	Q2	26,389	33,145
	Q1	26,054	32,018
2007-09	Q8	25,775	
	Q7	29,121	
	Q6	28,050	
	Q5	27,336	
	Q4	26,191	
	Q3	24,544	
	Q2	22,791	
	Q1	20,641	

Number 001266 - Number of children enrolled in Children's Health Program



001267 Number of children enrolled in ESI (Employer Sponsored Insurance) pilot project			
Biennium	Period	Actual	Target
2009-11	Q8		18,479
	Q7		17,745
	Q6		17,010
	Q5	15,408	16,275
	Q4	15,028	15,541
	Q3	14,831	14,831
	Q2	13,637	13,299
	Q1	13,173	11,768
2007-09	Q8	10,236	
	Q7	5,031	
	Q6	4,979	
	Q5	5,160	
	Q4	3,539	
	Q3		
	Q2		
	Q1	1,685	

Number 001267 - Number of children enrolled in Employer Sponsored Insurance program



**H067 Optional Health Care for Workers with Disability**

This program provides the Medicaid benefit package to Washington residents who are between ages 16 through 64, meet federal disability requirements, are employed (including self-employment) full or part-time, and have monthly gross income at or below 450 percent of the federal poverty level. (Health Services Account-State)

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

**Statewide Strategy: Provide access to appropriate health care**

**Expected Results**

Assure access to high quality health care. Promote self-sufficiency and self-determination for individuals with disabilities.

**H089 SCHIP**

The State Children's Health Insurance Program (SCHIP) currently provides health coverage to about 12,000 children up to age 19, who live in households with income between 200 and 250 percent of the federal poverty level. (Health Services Account-State)

Account	Biennial Total
<b>FTE Total</b>	

**Statewide Result Area: Unknown**

**Statewide Strategy: Provide access to appropriate health care**

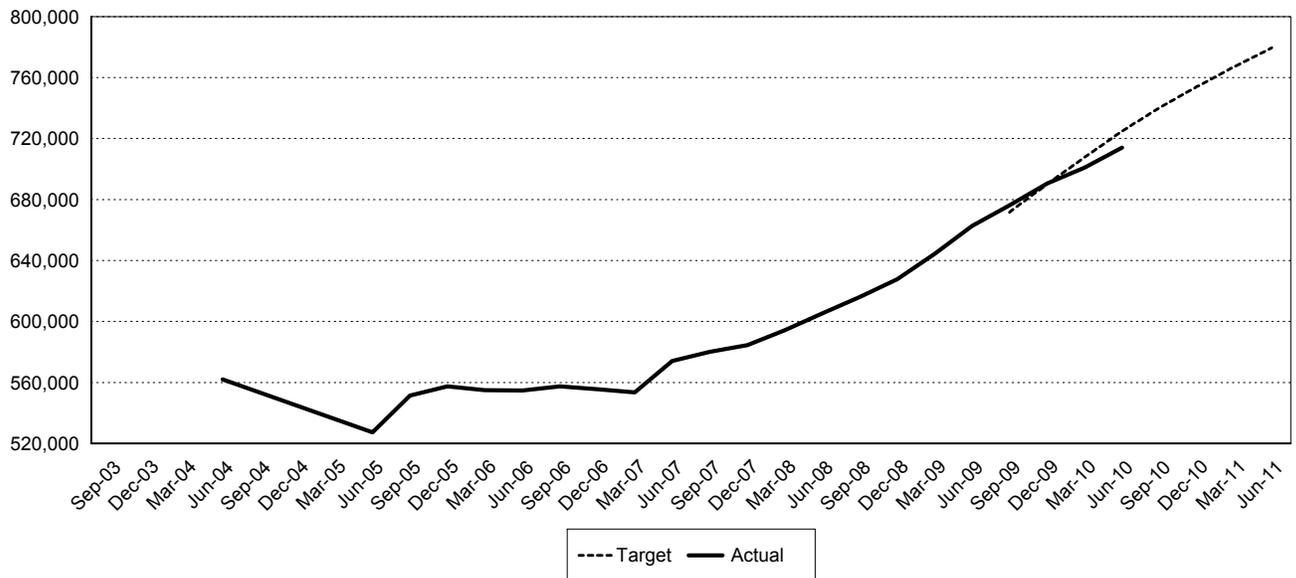
**Expected Results**

Assure access to high quality health care. Enhance contracting capability with health carriers.

Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity

001256 Average monthly enrollment of children in Medical Assistance programs.			
Biennium	Period	Actual	Target
2009-11	Q8		779,267
	Q7		767,119
	Q6		753,992
	Q5		739,959
	Q4	714,083	724,582
	Q3	700,920	707,675
	Q2	690,619	689,871
	Q1	676,235	671,706
2007-09	Q8	662,696	
	Q7	644,371	
	Q6	627,758	
	Q5	615,978	
	Q4	605,332	
	Q3	594,252	
	Q2	584,469	
	Q1	580,196	

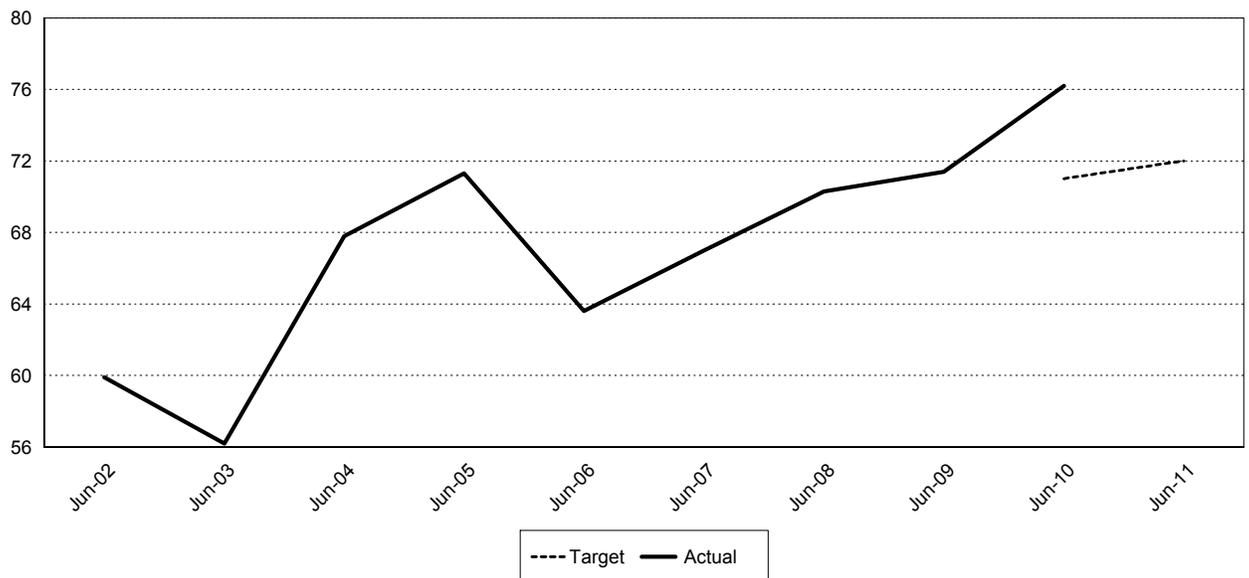
Number 001256 - Cumulative fiscal year average monthly enrollment of children in MA programs



Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity

001258 Immunization rate for two-year-olds enrolled in Medicaid health plans.			
Biennium	Period	Actual	Target
2009-11	A3		72%
	A2	76.2%	71%
2007-09	A3	71.4%	
	A2	70.3%	

Percent 001258 - Immunization rate for two-year-olds enrolled in Medicaid managed care health plans



### H091 Special Programs

This activity includes family planning and pass-through dollars to school health services, school districts, Indian nations, etc. (Health Services Account-State)

Account	Biennial Total
<b>FTE Total</b>	

Statewide Result Area: Unknown

Statewide Strategy: Provide access to appropriate health care

### Expected Results

The department will seek to maximize the use of available federal funds.

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**Grand Total**

	<b>FY 2012</b>	<b>FY 2013</b>	<b>Biennial Total</b>
<b>FTE's</b>	1,078.6	1,108.2	1,093.4
<b>GFS</b>	\$2,195,580,000	\$2,263,679,000	\$4,459,259,000
<b>Other</b>	\$3,140,820,000	\$3,247,328,000	\$6,388,148,000
<b>Total</b>	\$5,336,400,000	\$5,511,007,000	\$10,847,407,000

*Appropriation Period: 2011-13 Activity Version: 2C - Enacted Recast Sort By: Activity*

<b><u>Parameter</u></b>	<b><u>Entered As</u></b>
Budget Period	2011-13
Agency	107
Version	2C - Enacted Recast
Result Area	All Result Areas
Activity	All Activities
Program	All Programs
Sub Program	All Sub Programs
Account	All Accounts
Expenditure Authority Type	All Expenditure Authority Types
Theme	All
Sort By	Activity
Display All Account Types	Yes
Include Policy Level	Yes
Include Activity Description	Yes
Include Statewide Result Area	Yes
Include Statewide Strategy	Yes
Include Expected Results Text	Yes
Include Charts	Yes
Chart Type	Line
Include Parameter Selections	Yes
Version Source	OFM