

**FAMILY HEALTH  
November 2012  
LOCAL ASSISTANCE ESTIMATE  
for  
FISCAL YEARS  
2012-13 and 2013-14**

**GENETICALLY HANDICAPPED  
PERSONS PROGRAM**

Fiscal Forecasting and Data Management Branch  
State Department of Health Care Services  
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**EDMUND G. BROWN JR.**  
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Director  
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**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
**Funding Summary**

**FY 2012-13, November 2012 Estimate Compared to May 2012 Estimate**

	<u>Appropriation FY 2012-13</u>	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Difference Incr./(Decr.)</u>
<b>State-Only Caseload:</b>	858	862	4
<b>Net Dollars:</b>			
4260-111-0001 (General Fund)	\$68,194,500	\$52,699,900	(\$15,494,600)
4260-601-7503 (Federal Title XIX HCSF)	\$23,052,000	\$23,052,000	\$0
4260-601-0995 (Enrollment Fees)	\$452,400	\$502,900	\$50,500
4260-601-3079 (Rebate Special Fund)	\$8,000,000	\$9,000,000	\$1,000,000
<b>Total</b>	<b>\$99,698,900</b>	<b>\$85,254,800</b>	<b>(\$14,444,100)</b>

**November 2012 Estimate, FY 2012-13 Compared to FY 2013-14**

	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Nov. 2012 Est. FY 2013-14</u>	<u>Difference Incr./(Decr.)</u>
<b>State-Only Caseload:</b>	862	889	27
<b>Net Dollars:</b>			
4260-111-0001 (General Fund)	\$52,699,900	\$75,026,300	\$22,326,400
4260-601-7503 (Federal Title XIX HCSF)	\$23,052,000	\$23,052,000	\$0
4260-601-0995 (Enrollment Fees)	\$502,900	\$502,900	\$0
4260-601-3079 (Rebates Special Fund)	\$9,000,000	\$9,000,000	\$0
<b>Total</b>	<b>\$85,254,800</b>	<b>\$107,581,200</b>	<b>\$22,326,400</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
**Funding Sources By Component**  
**Fiscal Year 2012-13**

**November 2012 Estimate Compared to May 2012 Estimate, Total Funds**

	<u>Appropriation FY 2012-13</u>	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Difference Incr./(Decr.)</u>
1. Base Expenditure Estimate	\$ 103,181,000	\$ 100,375,000	\$ (2,806,000)
2. Policy Changes	\$ (3,561,100)	\$ (15,200,200)	\$ (11,639,100)
<b>Total for Services</b>	<b>\$ 99,619,900</b>	<b>\$ 85,174,800</b>	<b>\$ (14,445,100)</b>
Fiscal Intermediary	\$ 79,000	\$ 80,000	\$ 1,000
<b>Total GHPP Program</b>	<b>\$ 99,698,900</b>	<b>\$ 85,254,800</b>	<b>\$ (14,444,100)</b>

**November 2012 Estimate Compared to May 2012 Estimate, General Fund**

	<u>Appropriation FY 2012-13</u>	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Difference Incr./(Decr.)</u>
1. Base Expenditure Estimate	\$ 103,181,000	\$ 100,375,000	\$ (2,806,000)
2. Policy Changes	\$ (35,065,500)	\$ (47,755,100)	\$ (12,689,600)
<b>Total for Services</b>	<b>\$ 68,115,500</b>	<b>\$ 52,619,900</b>	<b>\$ (15,495,600)</b>
Fiscal Intermediary	\$ 79,000	\$ 80,000	\$ 1,000
<b>Total GHPP Program</b>	<b>\$ 68,194,500</b>	<b>\$ 52,699,900</b>	<b>\$ (15,494,600)</b>

**November 2012 Estimate Compared to May 2012 Estimate, Federal Funds**

	<u>Appropriation FY 2012-13</u>	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Difference Incr./(Decr.)</u>
1. Base Expenditure Estimate	-	-	-
2. Policy Changes	\$ 23,052,000	\$ 23,052,000	\$ 0
<b>Total for Services</b>	<b>\$ 23,052,000</b>	<b>\$ 23,052,000</b>	<b>\$ 0</b>
Fiscal Intermediary	-	-	-
<b>Total GHPP Program</b>	<b>\$ 23,052,000</b>	<b>\$ 23,052,000</b>	<b>\$ 0</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
**Funding Sources By Component**  
**Current Year vs Budget Year**

**November 2012 Estimate, FY 2012-13 Compared to FY 2013-14, Total Funds**

	<b>Nov. 2012 Est. FY 2012-13</b>	<b>Nov. 2012 Est. FY 2013-14</b>	<b>Difference Incr./(Decr.)</b>
1. Base Expenditure Estimate	\$ 100,375,000	\$ 109,919,000	\$ 9,544,000
2. Policy Changes	\$ (15,200,200)	\$ (2,396,800)	\$ 12,803,400
<b>Total for Services</b>	<b>\$ 85,174,800</b>	<b>\$ 107,522,200</b>	<b>\$ 22,347,400</b>
Fiscal Intermediary	\$ 80,000	\$ 59,000	\$ (21,000)
<b>Total GHPP Program</b>	<b>\$ 85,254,800</b>	<b>\$ 107,581,200</b>	<b>\$ 22,326,400</b>

**November 2012 Estimate, FY 2012-13 Compared to FY 2013-14, General Fund**

	<b>Nov. 2012 Est. FY 2012-13</b>	<b>Nov. 2012 Est. FY 2013-14</b>	<b>Difference Incr./(Decr.)</b>
1. Base Expenditure Estimate	\$ 100,375,000	\$ 109,919,000	\$ 9,544,000
2. Policy Changes	\$ (47,755,100)	\$ (34,951,700)	\$ 12,803,400
<b>Total for Services</b>	<b>\$ 52,619,900</b>	<b>\$ 74,967,300</b>	<b>\$ 22,347,400</b>
Fiscal Intermediary	\$ 80,000	\$ 59,000	\$ (21,000)
<b>Total GHPP Program</b>	<b>\$ 52,699,900</b>	<b>\$ 75,026,300</b>	<b>\$ 22,326,400</b>

**November 2012 Estimate, FY 2012-13 Compared to FY 2013-14, Federal Funds**

	<b>Nov. 2012 Est. FY 2012-13</b>	<b>Nov. 2012 Est. FY 2013-14</b>	<b>Difference Incr./(Decr.)</b>
1. Base Expenditure Estimate	-	-	-
2. Policy Changes	\$ 23,052,000	\$ 23,052,000	\$ 0
<b>Total for Services</b>	<b>\$ 23,052,000</b>	<b>\$ 23,052,000</b>	<b>\$ 0</b>
Fiscal Intermediary	-	-	-
<b>Total GHPP Program</b>	<b>\$ 23,052,000</b>	<b>\$ 23,052,000</b>	<b>\$ 0</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
**Base Expenditures for Specified Diseases**

<u>Fiscal Year</u>	<u>Diagnosis</u>	<u>Average GHPP Only Caseload 1/</u>	<u>Average Annual Cost/Case</u>	<u>Total Program Expenditures 1/</u>
<b>2011-12 Actuals</b>	<b>Hemophilia</b>	330	\$ 225,000	\$ 74,249,000
	<b>Cystic Fibrosis</b>	296	31,300	9,260,000
	<b>Sickle Cell</b>	107	19,000	2,033,000
	<b>Huntington's</b>	59	1,200	72,000
	<b>Metabolic 2/</b>	36	8,400	302,000
		-----	-----	-----
		828	\$ 103,800	\$ 85,916,000
<b>2012-13 Estimate</b>	<b>Hemophilia</b>	342	\$ 262,100	\$ 89,625,000
	<b>Cystic Fibrosis</b>	305	26,200	7,993,000
	<b>Sickle Cell</b>	114	19,900	2,265,000
	<b>Huntington's</b>	60	3,800	225,000
	<b>Metabolic 2/</b>	41	6,500	267,000
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		862	\$ 116,400	\$ 100,375,000
<b>2013-14 Estimate</b>	<b>Hemophilia</b>	355	\$ 274,800	\$ 97,540,000
	<b>Cystic Fibrosis</b>	309	30,400	9,404,000
	<b>Sickle Cell</b>	117	21,000	2,456,000
	<b>Huntington's</b>	60	2,500	152,000
	<b>Metabolic 2/</b>	48	7,600	367,000
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		889	\$ 123,600	\$ 109,919,000

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 1/ Actual expenditure data is complete through August 2012.

Actual caseload data is complete through August 2012.

2/ Metabolic conditions category includes Von Hippel Lindau syndrome.

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
**Base Estimate Comparisons for Fiscal Years 2012-13 and 2013-14**

**FY 2012-13, November 2012 Estimate Compared to Appropriation**

	<u>Appropriation FY 2012-13</u>	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Difference Incr./.(Decr.)</u>
Hemophilia	\$ 89,303,000	\$ 89,625,000	\$ 322,000
Cystic Fibrosis	11,228,000	7,993,000	(3,235,000)
Sickle Cell	2,075,000	2,265,000	190,000
Huntington's	140,000	225,000	85,000
Metabolic	435,000	267,000	(168,000)
<b>TOTAL</b>	<b>\$ 103,181,000</b>	<b>\$ 100,375,000</b>	<b>\$ (2,806,000)</b>

**November 2012 Estimate, FY 2012-13 Compared to FY 2013-14**

	<u>Nov. 12 Est. FY 2012-13</u>	<u>Nov. 2012 Est. FY 2013-14</u>	<u>Difference Incr./.(Decr.)</u>
Hemophilia	\$ 89,625,000	\$ 97,540,000	\$ 7,915,000
Cystic Fibrosis	7,993,000	9,404,000	1,411,000
Sickle Cell	2,265,000	2,456,000	191,000
Huntington's	225,000	152,000	(73,000)
Metabolic	267,000	367,000	100,000
<b>TOTAL</b>	<b>\$ 100,375,000</b>	<b>\$ 109,919,000</b>	<b>\$ 9,544,000</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
Average Monthly Caseload Estimate

<b>Fiscal Year 2012-13</b>
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	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>
<b>Hemophilia</b>	509	167	342
<b>Cystic Fibrosis</b>	495	190	305
<b>Sickle Cell</b>	334	220	114
<b>Huntington's</b>	149	89	60
<b>Metabolic</b>	<u>107</u>	<u>66</u>	<u>41</u>
<b>Total</b>	<b>1,594</b>	<b>732</b>	<b>862</b>

<b>Fiscal Year 2013-14</b>
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	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>
<b>Hemophilia</b>	527	172	355
<b>Cystic Fibrosis</b>	512	203	309
<b>Sickle Cell</b>	346	229	117
<b>Huntington's</b>	152	92	60
<b>Metabolic</b>	<u>117</u>	<u>69</u>	<u>48</u>
<b>Total</b>	<b>1,654</b>	<b>765</b>	<b>889</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
Average Monthly State-Only Caseload Comparison

<b>FY 2012-13, November 2012 Estimate Compared to May 2012 Estimate</b>
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	<b>Appropriation FY 2012-13</b>	<b>Nov. 2012 Est. FY 2012-13</b>	<b>Difference Incr./(Decr.)</b>
Hemophilia	341	342	1
Cystic Fibrosis	303	305	2
Sickle Cell	111	114	3
Huntington's	61	60	(1)
Metabolic	42	41	(1)
<b>Total</b>	<b>858</b>	<b>862</b>	<b>4</b>

<b>Fiscal Year 2012-13 Compared to Fiscal Year 2013-14</b>
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	<b>Nov. 2012 Est. FY 2012-13</b>	<b>Nov. 2012 Est. FY 2013-14</b>	<b>Difference Incr./(Decr.)</b>
Hemophilia	342	355	13
Cystic Fibrosis	305	309	4
Sickle Cell	114	117	3
Huntington's	60	60	0
Metabolic	41	48	7
<b>Total</b>	<b>862</b>	<b>889</b>	<b>27</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM**  
**Average Monthly Medi-Cal Caseload Comparison**

<b>FY 2012-13, November 2012 Estimate Compared to May 2012 Estimate</b>
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	<u>Appropriation FY 2012-13</u>	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Difference Incr./(Decr.)</u>
Hemophilia	164	167	3
Cystic Fibrosis	198	190	(8)
Sickle Cell	212	220	8
Huntington's	87	89	2
Metabolic	<u>64</u>	<u>66</u>	<u>2</u>
<b>Total</b>	<b>725</b>	<b>732</b>	<b>7</b>

<b>Fiscal Year 2012-13 Compared to Fiscal Year 2013-14</b>
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	<u>Nov. 2012 Est. FY 2012-13</u>	<u>Nov. 2012 Est. FY 2013-14</u>	<u>Difference Incr./(Decr.)</u>
Hemophilia	167	172	5
Cystic Fibrosis	190	203	13
Sickle Cell	220	229	9
Huntington's	89	92	3
Metabolic	<u>66</u>	<u>69</u>	<u>3</u>
<b>Total</b>	<b>732</b>	<b>765</b>	<b>33</b>

**GENETICALLY HANDICAPPED PERSONS PROGRAM  
Comparison of Assumed Fiscal Impacts of Policy Changes**

Fiscal Year 2012-13, November 2012 Estimate Compared to Appropriation								
POLICY CHG. TYPE	NO.	DESCRIPTION	FY 2012-13 APPROPRIATION		NOVEMBER 2012 ESTIMATE		DIFFERENCE, Incr./(Decr.)	
			TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
Other	1	ENROLLMENT FEES	\$0	\$0	\$0	\$0	\$0	\$0
FI	2	FISCAL INTERMEDIARY EXPENDITURES	\$79,000	\$79,000	\$80,000	\$80,000	\$1,000	\$1,000
Benefits	3	BLOOD FACTOR DRUG REBATES AND CONTRACT SAVINGS	\$0	\$0	\$0	\$0	\$0	\$0
Other	4	MH/UCD & BTR - SAFETY NET CARE POOL	\$0	\$0	\$0	\$0	\$0	\$0
Other	5	GHPP PREMIUM COSTS	\$124,000	\$124,000	\$88,000	\$88,000	-\$36,000	-\$36,000
Benefits	6	GHPP PREMIUM SAVINGS	-\$901,600	-\$901,600	-\$233,600	-\$233,600	\$668,000	\$668,000
Benefits	7	10% PROVIDER PAYMENT REDUCTION GHPP	-\$3,411,500	-\$3,411,500	-\$1,246,400	-\$1,246,400	\$2,165,100	\$2,165,100
Benefits	8	GHPP INPATIENT REIMBURSEMENT	-\$1,594,000	-\$1,594,000	-\$3,985,000	-\$3,985,000	-\$2,391,000	-\$2,391,000
Benefits	9	KALYDECO FOR TREATMENT OF CYSTIC FIBROSIS	\$2,222,000	\$2,222,000	\$599,800	\$599,800	-\$1,622,200	-\$1,622,200
Benefits	10	DRG - INPATIENT HOSPITAL PAYMENT METHODOLOGY	\$0	\$0	\$0	\$0	\$0	\$0
Benefits	11	UNITED STATES OF AMERICA V. BIO-MED PLUS, INC.	\$0	\$0	-\$10,423,000	-\$10,423,000	-\$10,423,000	-\$10,423,000
<b>GHPP TOTAL</b>			<b>-\$3,482,100</b>	<b>-\$3,482,100</b>	<b>-\$15,120,200</b>	<b>-\$15,120,200</b>	<b>-\$11,638,100</b>	<b>-\$11,638,100</b>

Fiscal Year 2012-13 Compared to Fiscal Year 2013-14								
POLICY CHG. TYPE	NO.	DESCRIPTION	Nov. 2012 Est. for FY 2012-13		Nov. 2012 Est. for FY 2013-14		DIFFERENCE, Incr./(Decr.)	
			TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS	TOTAL FUNDS	STATE FUNDS
Other	1	ENROLLMENT FEES	\$0	\$0	\$0	\$0	\$0	\$0
FI	2	FISCAL INTERMEDIARY EXPENDITURES	\$80,000	\$80,000	\$59,000	\$59,000	-\$21,000	-\$21,000
Benefits	3	BLOOD FACTOR DRUG REBATES AND CONTRACT SAVINGS	\$0	\$0	\$0	\$0	\$0	\$0
Other	4	MH/UCD & BTR - SAFETY NET CARE POOL	\$0	\$0	\$0	\$0	\$0	\$0
Other	5	GHPP PREMIUM COSTS	\$88,000	\$88,000	\$130,000	\$130,000	\$42,000	\$42,000
Benefits	6	GHPP PREMIUM SAVINGS	-\$233,600	-\$233,600	-\$892,500	-\$892,500	-\$658,900	-\$658,900
Benefits	7	10% PROVIDER PAYMENT REDUCTION GHPP	-\$1,246,400	-\$1,246,400	\$0	\$0	\$1,246,400	\$1,246,400
Benefits	8	GHPP INPATIENT REIMBURSEMENT	-\$3,985,000	-\$3,985,000	-\$1,594,000	-\$1,594,000	\$2,391,000	\$2,391,000
Benefits	9	KALYDECO FOR TREATMENT OF CYSTIC FIBROSIS	\$599,800	\$599,800	\$109,700	\$109,700	-\$490,100	-\$490,100
Benefits	10	DRG - INPATIENT HOSPITAL PAYMENT METHODOLOGY	\$0	\$0	-\$150,000	-\$150,000	-\$150,000	-\$150,000
Benefits	11	UNITED STATES OF AMERICA V. BIO-MED PLUS, INC.	-\$10,423,000	-\$10,423,000	\$0	\$0	\$10,423,000	\$10,423,000
<b>GHPP TOTAL</b>			<b>-\$15,120,200</b>	<b>-\$15,120,200</b>	<b>-\$2,337,800</b>	<b>-\$2,337,800</b>	<b>\$12,782,400</b>	<b>\$12,782,400</b>

<sup>1</sup> Funds are referenced separately in the GHPP Funding Summary pages.

**ENROLLMENT FEES**

**POLICY CHANGE NUMBER:** 1  
**IMPLEMENTATION DATE:** 7/1993  
**ANALYST:** Yumie Park

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	- TOTAL FUNDS	\$0	\$0
	- GENERAL FUND	-\$502,900	-\$502,900
	- ENROLLMENT FEES FUND	\$502,900	\$502,900
<b>PAYMENT LAG</b>		1.0000	1.0000
<b>% REFLECTED IN BASE</b>		0.00%	0.00%
<b>APPLIED TO BASE</b>	- TOTAL FUNDS	\$0	\$0
	- GENERAL FUND	-\$502,900	-\$502,900
	- ENROLLMENT FEES FUND	\$502,900	\$502,900

**Purpose:**

The policy change estimates the Genetically Handicapped Persons Program (GHPP) enrollment fees.

**Authority:**

Health & Safety Code 125166

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Families that receive GHPP services may be assessed enrollment fees. As part of automating GHPP case management with the Children's Medical Services Net, collection of enrollment fees occurs on each client's enrollment anniversary date.

GHPP enrollment fees are currently assessed based on a sliding scale. Effective December 1, 2009, the Department increased GHPP enrollment fees to 1.5% of Adjusted Gross Income (AGI) for families with incomes between 200% and 299% of the Federal Poverty Level (FPL), and 3% of AGI for families with incomes 300% or greater than the FPL.

**Reason for Change from Prior Estimate:**

Revised based on updated enrollment data.

**Methodology:**

1. Based on actual enrollment fees of \$490,254 collected in FY 2011-12, and \$96,419 collected in the first two months of FY 2012-13, base fee collections are estimated to be approximately \$502,900 for FY 2012-13 and FY 2013-14.

**FY 2012-13:  $$(490,254 + 96,419) \div 14 \times 12 = \$502,900$  (\$502,900 GF)**

**FY 2013-14:  $$(490,254 + 96,419) \div 14 \times 12 = \$502,900$  (\$502,900 GF)**

**Funding:**

State Only General Fund (4260-111-0001)

**FISCAL INTERMEDIARY EXPENDITURES**

**POLICY CHANGE NUMBER:** 2  
**IMPLEMENTATION DATE:** 7/2003  
**ANALYST:** Randolph Alarcio

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	<b>\$80,000</b>	<b>\$59,000</b>
	<b>- GENERAL FUND</b>	<b>\$80,000</b>	<b>\$59,000</b>
<b>PAYMENT LAG</b>		<b>1.0000</b>	<b>1.0000</b>
<b>% REFLECTED IN BASE</b>		<b>0.00%</b>	<b>0.00%</b>
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	<b>\$80,000</b>	<b>\$59,000</b>
	<b>- GENERAL FUND</b>	<b>\$80,000</b>	<b>\$59,000</b>

**Purpose:**

This policy change estimates the expenditures paid to the fiscal intermediary (FI) for the administrative cost of adjudicating Genetically Handicapped Persons Program (GHPP) medical and dental claims.

**Authority:**

Health & Safety Code 125130

**Interdependent Policy Changes:**

Not Applicable

**Background:**

GHPP medical and dental claims are paid by the fiscal intermediaries. Administrative costs are reimbursed based on cost per adjudicated claim line (ACL) and Treatment Authorization Requests (TARs).

**Reason for Change from Prior Estimate:**

Updated data became available for claim months.

**Methodology:**

1. A new FI contractor, Xerox, assumed operation of the California Medicaid Management Information System (CA-MMIS) beginning October 3, 2011.

## 2. The estimated medical FI administrative costs are:

<b>FY 2012-13</b>	<b><u>Estimated ACLs</u></b>	<b><u>Ave Cost</u></b>	<b><u>Estimated ACL</u></b>
		<b><u>per ACLs</u></b>	<b><u>Expenditure</u></b>
General ACLs	74,184	\$ 0.74	\$ 55,000
Online ACLs	56,356	\$ 0.42	\$ 24,000
Total FY 2012-13			\$ 79,000

<b>FY 2013-14</b>	<b><u>Estimated ACLs</u></b>	<b><u>Ave Cost</u></b>	<b><u>Estimated ACL</u></b>
		<b><u>per ACLs</u></b>	<b><u>Expenditure</u></b>
General ACLs	76,508	\$ 0.55	\$ 42,000
Online ACLs	58,121	\$ 0.28	\$ 16,000
Total FY 2013-14			\$ 58,000

## 3. The estimated dental FI administrative costs are:

<b>FY 2012-13</b>	<b><u>Estimated</u></b>	<b><u>Rates</u></b>	<b><u>Estimated</u></b>
	<b><u>Claims</u></b>		<b><u>Expenditure</u></b>
ACLs	439	\$ 1.38	\$ 606
TARs	69	\$ 8.07	\$ 557
Total FY 2012-13			\$ 1,163

<b>FY 2013-14</b>			
ACLs	439	\$ 1.38	\$ 606
TARs	69	\$ 8.07	\$ 557
Total FY 2013-14			\$ 1,163

	<b>FY 2012-13</b>	<b>FY 2013-14</b>
<b>Medical</b>	<b>\$ 79,000</b>	<b>\$ 58,000</b>
<b>Dental</b>	<b>\$ 1,000</b>	<b>\$ 1,000</b>
<b>Total</b>	<b>\$ 80,000</b>	<b>\$ 59,000</b>

**Funding:**

State General Fund (4260-111-0001)

**BLOOD FACTOR DRUG REBATES AND CONTRACT SAVINGS**

**POLICY CHANGE NUMBER:** 3  
**IMPLEMENTATION DATE:** 7/2003  
**ANALYST:** Randolph Alarcio

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	- TOTAL FUNDS	\$0	\$0
	- GENERAL FUND	-\$9,000,000	-\$9,000,000
	- REBATE SPECIAL FUND	\$9,000,000	\$9,000,000
<b>PAYMENT LAG</b>		1.0000	1.0000
<b>% REFLECTED IN BASE</b>		0.00%	0.00%
<b>APPLIED TO BASE</b>	- TOTAL FUNDS	\$0	\$0
	- GENERAL FUND	-\$9,000,000	-\$9,000,000
	- REBATE SPECIAL FUND	\$9,000,000	\$9,000,000

**Purpose:**

This policy change estimates the savings for Genetically Handicapped Persons Program (GHPP) drug rebates.

**Authority:**

SB 1100 (Chapter 560, Statutes of 2005)  
 Medi-Cal Hospital/Uninsured Care Section 1115(a) Medicaid Demonstration (MH/UCD)  
 California Bridge to Reform Section 1115(a) Medicaid Demonstration (BTR)

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Effective September 1, 2005, the Department began claiming Title XIX federal reimbursement for GHPP State-Only service expenditures as certified public expenditures through the Safety Net Care Pool. Because of this federal funding, the program no longer qualifies as a State Pharmaceutical Assistance Program and is ineligible to collect rebates under its independent rebate contracts. However, it enabled GHPP to participate in the Medi-Cal factor rebates.

**Reason for Change from Prior Estimate:**

Revised based on additional data for rebate savings.

**Methodology:**

1. The estimate is based on FY 2011-12 rebates received.
2. GHPP factor rebate collections of \$9,000,000 are estimated for FY 2012-13 and FY 2013-14.

**Funding:**

Rebates Special Fund (4260-601-3079)

**MH/UCD & BTR - SAFETY NET CARE POOL**

**POLICY CHANGE NUMBER:** 4  
**IMPLEMENTATION DATE:** 9/2005  
**ANALYST:** Cang Ly

	<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST - TOTAL FUNDS</b>	<b>\$0</b>	<b>\$0</b>
<b>- GENERAL FUND</b>	<b>\$0</b>	<b>\$0</b>
<b>PAYMENT LAG</b>	<b>1.0000</b>	<b>1.0000</b>
<b>% REFLECTED IN BASE</b>	<b>0.00%</b>	<b>0.00%</b>
<b>APPLIED TO BASE - TOTAL FUNDS</b>	<b>\$0</b>	<b>\$0</b>
<b>- GENERAL FUND</b>	<b>\$0</b>	<b>\$0</b>

**Purpose:**

This policy change reflects the federal reimbursement received by the Department for a portion of the Genetically Handicapped Persons Program (GHPP) claims based on the certification of public expenditures (CPEs).

**Authority:**

SB 1100 (Chapter 560, Statutes of 2005), Welfare and Institutions Code, section 14166.22  
 Medi-Cal Hospital/Uninsured Care Section 1115(a) Medicaid Demonstration (MH/UCD)  
 California Bridge to Reform Section 1115(a) Medicaid Demonstration (BTR)

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Effective September 1, 2005, based on the Special Terms and Conditions of MH/UCD, the Department may claim federal reimbursement for the GHPP from the Safety Net Care Pool (SNCP) funding established by the MH/UCD. The GHPP program provides comprehensive health care coverage for persons over 21 with specified genetic diseases including: cystic fibrosis; hemophilia; sickle cell disease and thalassemia; and chronic degenerative neurological diseases, including phenylketonuria.

The MH/UCD was extended for two months until October 31, 2010. Effective November 1, 2010, CMS approved a new five-year demonstration, the BTR. The Special Terms and Conditions of the new demonstration allow the State to claim federal financial participation (FFP) using the CPEs of approved Designated State Health Programs (DSHP). The GHPP program are included in the list of DSHP. Funding for the two-month extension of the prior MH/UCD SNCP is included in the BTR. This policy change includes the impact of the BTR.

**Reason for Change from Prior Estimate:**

There is no change.

**Methodology:**

1. Total eligible expenditures have been reduced by 17.79% under the MH/UCD and 13.95% under the BTR to adjust for services provided to undocumented persons. The FFP received for GHPP will be deposited in the Health Care Support Fund, Item 4260-601-7503. These funds are transferred to the Family Health Estimate. The GF savings is reflected in the Family Health Estimate. The GF savings created will be used to support safety net hospitals under the MH/UCD and BTR.
2. Under the American Recovery and Reinvestment Act of 2009 (ARRA), California's Financial Medical Assistance Percentage (FMAP) increased from 50% to 61.59% for October 1, 2008 through December 31, 2010. The Education, Jobs and Medicaid Assistance Act of 2010 added six additional months of increased FMAP. California's FMAP will be 58.77% for January 1, 2011 through March 31, 2011, and 56.88% for April 1, 2011 through June 30, 2011. Because of the increased FMAP, the annual SNCP federal funds allotment will increase for expenditures incurred from October 1, 2008 to August 31, 2010, resulting in additional \$423.769 million federal funds available in the SNCP. The Department claims these funds using certified public expenditures. This policy change budgets those federal funds that are claimed using CPEs from the GHPP program.
3. The Department will conduct the final reconciliation for DY 2009-10 in FY 2012-13 and estimates that the Department will have to repay the federal government \$4.595 million in FY 2012-13 as a result of the final reconciliations. The GHPP federal reimbursements are reduced by the final reconciliation amounts in this policy change.
4. The final reconciliation for DY 2010-11, anticipated to be completed in FY 2013-14, is estimated to be the same as the final reconciliation for DY 2009-10.

<b>FY 2012-13</b>	<u>CCS</u>	<u>GHPP</u>	<u>Total</u>
DSHP-BTR (DY 2012-13)	\$ 59,324,000	\$ 27,647,000	\$ 86,971,000
DY 2009-10 Final Reconciliation	<u>\$ (11,372,000)</u>	<u>\$ (4,595,000)</u>	<u>\$ (15,967,000)</u>
FY 2012-13	\$ 47,952,000	<b>\$ 23,052,000</b>	\$ 71,004,000
<b>FY 2013-14</b>			
DSHP-BTR (DY 2013-14)	\$ 59,324,000	\$ 27,647,000	\$ 86,971,000
DY 2010-11 Final Reconciliation	<u>\$ (11,372,000)</u>	<u>\$ (4,595,000)</u>	<u>\$ (15,967,000)</u>
FY 2013-14	\$ 47,952,000	<b>\$ 23,052,000</b>	\$ 71,004,000

**Funding:**

Health Care Support Fund (4260-601-7503)  
GF (4260-111-0001)

**GHPP PREMIUM COSTS**

**POLICY CHANGE NUMBER:** 5  
**IMPLEMENTATION DATE:** 12/2009  
**ANALYST:** Yumie Park

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	<b>\$88,000</b>	<b>\$130,000</b>
	<b>- GENERAL FUND</b>	<b>\$88,000</b>	<b>\$130,000</b>
<b>PAYMENT LAG</b>		<b>1.0000</b>	<b>1.0000</b>
<b>% REFLECTED IN BASE</b>		<b>0.00%</b>	<b>0.00%</b>
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	<b>\$88,000</b>	<b>\$130,000</b>
	<b>- GENERAL FUND</b>	<b>\$88,000</b>	<b>\$130,000</b>

**Purpose:**

This policy change estimates the cost of the premium payments for the Genetically Handicapped Persons Program (GHPP) clients who enroll in a commercial insurance plan.

**Authority:**

Health & Safety Code 125157(c)

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Effective December 1, 2009, GHPP implemented a health insurance premium reimbursement program for GHPP clients, who are eligible to enroll in or are enrolled in commercial insurance product lines. The program will fund premium payments for insurance coverage that reimburses a GHPP client's full range of health care services. Program savings for GHPP clients who will enroll in a commercial insurance plan is budgeted in the GHPP Premium Savings policy change.

The Department may, when it determines that it is cost effective, pay the premium for, or otherwise subsidize the subscriber cost-sharing obligation for third-party health coverage.

**Reason for Change from Prior Estimate:**

Less clients enrolled in FY 2011-12 than previously estimated.

**Methodology:**

1. Assume the premium costs are \$600 per Hemophilia enrollee, \$400 per Sickle Cell enrollee and \$400 per Cystic Fibrosis enrollee per month based on prior enrollment records.

2. Sixteen clients were enrolled in FY 2011-12, among which fourteen remained in the program after the first quarter of FY 2012-13.
3. No clients enrolled in the first quarter of FY 2012-13. Assume six additional clients will enroll in FY 2012-13, two clients will have Hemophilia, four clients will have Cystic Fibrosis and zero clients will have Sickle Cell.
4. Assume eight clients will enroll in FY 2013-14, two clients with Hemophilia, five clients with Cystic Fibrosis, and one client with Sickle Cell Disease.

	<u>TF</u>	<u>GF</u>
<b>FY 2012-13</b>	<b>\$ 88,000</b>	<b>\$ 88,000</b>
<b>FY 2013-14</b>	<b>\$ 130,000</b>	<b>\$ 130,000</b>

**Funding:**

State Only General Fund (4260-111-0001)

**GHPP PREMIUM SAVINGS**

**POLICY CHANGE NUMBER:** 6  
**IMPLEMENTATION DATE:** 12/2009  
**ANALYST:** Yumie Park

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	<b>-\$1,337,000</b>	<b>-\$2,092,000</b>
	<b>- GENERAL FUND</b>	<b>-\$1,337,000</b>	<b>-\$2,092,000</b>
<b>PAYMENT LAG</b>		<b>0.9746</b>	<b>0.9805</b>
<b>% REFLECTED IN BASE</b>		<b>82.07%</b>	<b>56.49%</b>
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	<b>-\$233,600</b>	<b>-\$892,500</b>
	<b>- GENERAL FUND</b>	<b>-\$233,600</b>	<b>-\$892,500</b>

**Purpose:**

This policy change estimates the program savings for the Genetically Handicapped Persons Program (GHPP) clients covered by a commercial insurance plan.

**Authority:**

Health & Safety Code 125157(c)

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Effective December 1, 2009, GHPP implemented a health insurance premium reimbursement program for GHPP clients, who are eligible to enroll in or are enrolled in commercial insurance product lines. The program will fund premium payments for insurance coverage that reimburses a GHPP client's full range of health care services.

**Reason for Change from Prior Estimate:**

Current year savings are lower than prior estimate due to less clients enrolled in the program in FY 2011-12.

**Methodology:**

1. Sixteen clients were enrolled in FY 2011-12, among which fourteen remained in the program after the first quarter of FY 2012-13.
2. No clients enrolled in the first quarter of FY 2012-13. Assume six additional clients will enroll in FY 2012-13, two clients will have Hemophilia, four clients will have Cystic Fibrosis and zero clients will have Sickle Cell.

3. Assume eight clients will enroll in FY 2013-14, two clients with Hemophilia, five clients with Cystic Fibrosis, and one client with Sickle Cell Disease.
4. Assume the savings per client enrolled is equal to the Annual Cost per Case in the November 2012 Family Health Estimate:

	<u>FY 2012-13</u>	<u>FY 2013-14</u>
Hemophilia	\$ 262,100	\$ 274,800
Cystic Fibrosis	\$ 26,200	\$ 30,400
Sickle Cell	\$ 19,900	\$ 21,000

5. Projected Savings (Rounded):

	<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>Total Funds</b>	<b>\$ 1,337,000</b>	<b>\$ 2,092,000</b>
<b>General Funds</b>	<b>\$ 1,337,000</b>	<b>\$ 2,092,000</b>

**Funding:**

General Fund (4260-111-0001)

**10% PROVIDER PAYMENT REDUCTION GHPP**

**POLICY CHANGE NUMBER:** 7  
**IMPLEMENTATION DATE:** 01/2012  
**ANALYST:** Randolph Alarcio

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	<b>-\$7,310,000</b>	<b>-\$7,310,000</b>
	<b>- GENERAL FUND</b>	<b>-\$7,310,000</b>	<b>-\$7,310,000</b>
<b>PAYMENT LAG</b>		<b>1.0000</b>	<b>1.0000</b>
<b>% REFLECTED IN BASE</b>		<b>82.95%</b>	<b>100.00%</b>
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	<b>-\$1,246,400</b>	<b>\$0</b>
	<b>- GENERAL FUND</b>	<b>-\$1,246,400</b>	<b>\$0</b>

**Purpose:**

This policy change estimates an additional 9% reduction to provider's payments.

**Authority:**

AB 1183 (Chapter 758, Statutes of 2008)  
 AB 97 (Chapter 3, Statutes of 2011)

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Effective March 1, 2009, as required by AB 1183, provider payments were reduced by 1%. AB 97 provides for a total of 10% provider payment reduction beginning June 1, 2011. This reduction affects all providers except those specifically exempted by statute.

**Reason for Change from Prior Estimate:**

Revised based on additional data.

**Methodology:**

1. The additional 9% provider payment reduction was implemented in January 2012 and will be retroactive to June 1, 2011.
2. The following services are exempt from the 10% reduction:
  - Hospital inpatient and outpatient services,
  - Critical access hospital,
  - Federal rural referral centers and FQHCs/RHCs,
  - Services provided through the Breast and Cervical Cancer Treatment and Family Planning, Access, Care and Treatment (Family PACT) programs, and
  - Hospice services.

Payments to facilities owned or operated by the State Department of Mental Health or the State Department of Developmental Services and payments funded by certified public expenditure and intergovernmental transfer are exempt.

3. Pharmacy payments are currently being reduced by 5% and will increase to a 10% provider payment reduction.
4. The savings are estimated to be \$7,310,000 TF.

	<u>GF</u>	<u>TF</u>
<b>FY 2012-13</b>	<b>(\$7,310,000)</b>	<b>(\$7,310,000)</b>
<b>FY 2013-14</b>	<b>(\$7,310,000)</b>	<b>(\$7,310,000)</b>

**Funding:**

State General Fund (4260-111-0001)

**GHPP INPATIENT REIMBURSEMENT**

**POLICY CHANGE NUMBER:** 8  
**IMPLEMENTATION DATE:** 01/2011  
**ANALYST:** Randolph Alarcio

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	<b>-\$3,985,000</b>	<b>-\$1,594,000</b>
	<b>- GENERAL FUND</b>	<b>-\$3,985,000</b>	<b>-\$1,594,000</b>
<b>PAYMENT LAG</b>		<b>1.0000</b>	<b>1.0000</b>
<b>% REFLECTED IN BASE</b>		<b>0.00%</b>	<b>0.00%</b>
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	<b>-\$3,985,000</b>	<b>-\$1,594,000</b>
	<b>- GENERAL FUND</b>	<b>-\$3,985,000</b>	<b>-\$1,594,000</b>

**Purpose:**

This policy change estimates the savings resulting in the change in reimbursement methodology for inpatient services for Genetically Handicapped Persons Program (GHPP).

**Authority:**

Welfare & Institutions (W&I) Code 14105.18

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Prior to January 1, 2011, the GHPP programs reimbursed contract hospitals for inpatient services rendered to GHPP clients at the Medi-Cal interim rates as required by the W&I code. This provision ended on January 1, 2011. The W&I code also requires rates of payment to hospitals for California Children's Services (CCS), GHPP, and other programs to be identical to the Medi-Cal rates of payment for the same service performed by the same provider type. The provisions of this section became operative on January 1, 2011. Contract hospitals will be reimbursed at their California Medical Assistance Commission negotiated rates. System modifications were completed in May 2012. The erroneous payment correction (EPC) to recover GHPP inpatient reimbursement overpayments made between January 2011 and May 2012 was completed in July 2012.

**Reason for Change from Prior Estimate:**

Retroactive payments were delayed to FY 2012-13.

**Methodology:**

1. The estimated savings is based on contract hospital claims from January 1 – December 31, 2009.
2. The annual savings is estimated to be \$1,594,000.
3. The retroactive savings for January 1, 2011 – June 30, 2011 is \$797,000.
4. The retroactive savings for FY 2011-12 is \$1,594,000.
5. The FY 2012-13 and FY 2013-14 savings is estimated as follows:

<b>FY 2012-13</b>	<u><b>TF</b></u>	<u><b>GF</b></u>
FY 2010-11 Retro Savings	(\$797,000)	(\$797,000)
FY 2011-12 Retro Savings	(\$1,594,000)	(\$1,594,000)
FY 2012-13 Savings	(\$1,594,000)	(\$1,594,000)
<b>Total FY 2012-13 Savings</b>	<b>(\$3,985,000)</b>	<b>(\$3,985,000)</b>
 <b>FY 2013-14 Savings</b>	 <b>(\$1,594,000)</b>	 <b>(\$1,594,000)</b>

**Funding:**

General Fund (4260-111-0001)

**KALYDECO FOR TREATMENT OF CYSTIC FIBROSIS**

**POLICY CHANGE NUMBER:** 9  
**IMPLEMENTATION DATE:** 2/2012  
**ANALYST:** Randolph Alarcio

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	- TOTAL FUNDS	\$2,400,000	\$2,400,000
	- GENERAL FUND	\$2,400,000	\$2,400,000
<b>PAYMENT LAG</b>		0.9980	1.0000
<b>% REFLECTED IN BASE</b>		74.96%	95.43%
<b>APPLIED TO BASE</b>	- TOTAL FUNDS	\$599,800	\$109,700
	- GENERAL FUND	\$599,800	\$109,700

**Purpose**

This policy change estimates the costs of Kalydeco for the treatment of patients, six years of age and older, with cystic fibrosis (CF).

**Authority**

Social Security Act 1927 [42 U.S.C. 1396r-8]

**Interdependent Policy Changes**

Not Applicable

**Background**

Effective January 31, 2012, the U.S. Food and Drug Administration approved Kalydeco for the treatment of CF in patients ages six years and older who have the specific mutation in the Cystic Fibrosis Transmembrane Regulator (CFTR) gene.

**Reason for Change from Prior Estimate**

There is no change.

**Methodology**

1. It is estimated that only 4% of the population nationwide, with CF, have the specific mutation.
2. There are 185 Genetically Handicapped Persons Program (GHPP) beneficiaries with CF who are six years of age and older.

$$185 \times 4\% = 8 \text{ GHPP beneficiaries with specific mutation}$$

3. Assume the annual cost of Kalydeco will be \$300,000 per beneficiary.

$$8 \times \$300,000 = \$2,400,000 \text{ annually}$$

**Funding**

State Only GF (4260-111-0001)

**DRG - INPATIENT HOSPITAL PAYMENT METHODOLOGY**

**POLICY CHANGE NUMBER:** 10  
**IMPLEMENTATION DATE:** 7/2013  
**ANALYST:** Cang Ly

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	\$0	-\$197,000
	<b>- GENERAL FUND</b>	\$0	-\$197,000
<b>PAYMENT LAG</b>		0.0000	0.7610
<b>% REFLECTED IN BASE</b>		0.00%	0.00%
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	\$0	-\$150,000
	<b>- GENERAL FUND</b>	\$0	-\$150,000

**Purpose:**

This policy change estimates savings that will occur in the Genetically Handicapped Person's Program (GHPP) by implementing the Diagnosis Related Group (DRG) payment methodology for private hospital inpatient services and freezing rates at the 2012-13 level.

**Authority:**

SB 853 (Chapter 717, Statutes of 2010), Welfare & Institutions (W&I) Code, section 14105.28

**Interdependent Policy Changes:**

Not Applicable

**Background:**

Currently, private hospitals receive reimbursement for Medi-Cal fee-for-service (FFS) acute inpatient services according to the negotiated per-diem rates under the Selective Provider Contracting Program (SPCP). Contract hospitals bill for some services carved-out of the per-diem charges separately. For non-contract private hospitals, Medi-Cal reimburses FFS inpatient services with cost-based interim per-diem rates.

Under the current payment system, private hospitals bill Medi-Cal the daily inpatient service charges on a per day usage. Providers receive payment for the actual number of days a beneficiary remains in their care, and not on a diagnosis or treatment strategy basis.

On July 1, 2013, the Department will transition to a DRG payment system which correlates reimbursement to the Medi-Cal beneficiary's assigned DRG. Each DRG category is designed to treat all patients assigned to a specific DRG as having a similar clinical condition requiring similar interventions and the same number of days of inpatient stay. The payment system pays the average cost for treating patients in the same DRG.

Pursuant to section 14105.18 of the W&I Code, payments to hospitals in the GHPP program are to be identical to the rates paid to Medi-Cal providers.

**Reason for Change from Prior Estimate:**

This is a new policy change.

**Methodology:**

1. Assume the DRG payment methodology will be implemented on July 1, 2013.
2. Assume GHPP annual savings are (\$197,000) TF.

	<u>TF</u>	<u>GF</u>
Annual	\$ (195,000)	\$ (195,000)

**Funding:**

General Fund (4260-111-0001)

**UNITED STATES OF AMERICA V. BIO-MED PLUS, INC.**

**POLICY CHANGE NUMBER:** 11  
**IMPLEMENTATION DATE:** 6/2013  
**ANALYST:** Randolph Alarcio

		<u>FY 2012-13</u>	<u>FY 2013-14</u>
<b>FULL YEAR COST</b>	<b>- TOTAL FUNDS</b>	<b>-\$10,423,000</b>	<b>\$0</b>
	<b>- GENERAL FUND</b>	<b>-\$10,423,000</b>	<b>\$0</b>
<b>PAYMENT LAG</b>		<b>1.0000</b>	<b>0.0000</b>
<b>% REFLECTED IN BASE</b>		<b>0.00%</b>	<b>0.00%</b>
<b>APPLIED TO BASE</b>	<b>- TOTAL FUNDS</b>	<b>-\$10,423,000</b>	<b>\$0</b>
	<b>- GENERAL FUND</b>	<b>-\$10,423,000</b>	<b>\$0</b>

**Purpose:**

This policy change estimates the settlement amount expected to be received by the Department from Bio-Med Plus, Inc. related to provider fraud against the Genetically Handicapped Person Program (GHPP).

**Authority:**

Not Applicable

**Interdependent Policy Changes:**

Not Applicable

**Background:**

The Department will receive restitution as the result of a federal criminal conviction in an inter-state conspiracy to defraud health insurers including GHPP and Medi-Cal.

The 11th Circuit Court of Appeals affirmed the convictions of all defendants on June 29, 2011. In September 2011, the 11th Circuit denied the defendants request for an en banc review. The defendants have filed a petition for a writ of certiorari with the U.S. Supreme Court.

**Reason for Change from Prior Estimate:**

This is a new policy change.

**Methodology:**

1. Assume the Department will receive payment in FY 2012-13.

**Funding:**

State General Fund (4260-111-0001)

**GHPP Trend Report**  
(Includes Actuals & Projected Base Values)

<b>Total</b>				
<u>Quarter</u>	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>	<u>Total GHPP Only Payments</u>
1	1,827	425	1,402	\$ 0
2	1,830	522	1,308	37,317,466
3	1,739	807	932	21,158,970
4	1,625	776	849	23,280,360
<b>2010-11</b>	<b>1,754</b>	<b>632</b>	<b>1,122</b>	<b>\$ 81,757,000</b>
1	1,601	774	827	\$ 20,831,485
2	1,495	685	810	22,919,037
3	1,528	691	837	20,413,182
4	1,549	710	839	21,752,552
<b>2011-12</b>	<b>1,543</b>	<b>715</b>	<b>828</b>	<b>\$ 85,916,000</b>
1	1,575	723	852	\$ 24,486,912
2	1,582	725	857	24,672,464
3	1,596	733	863	25,296,352
4	1,613	743	870	25,920,234
<b>2012-13</b>	<b>1,594</b>	<b>732</b>	<b>862</b>	<b>\$ 100,375,000</b>
1	1,629	752	877	\$ 26,544,120
2	1,643	759	884	27,168,007
3	1,659	768	891	27,791,893
4	1,676	778	898	28,415,778
<b>2013-14</b>	<b>1,654</b>	<b>765</b>	<b>889</b>	<b>\$ 109,919,000</b>

Note: 1) Expenditures reflect Total Cash Payments, Not accrued expenses.  
 2) FY 2012-13 reflects actuals and projected base estimate values.  
 3) FY 2013-14 reflects projected base estimate values.

**GHPP Trend Report**  
**(Includes Actuals & Projected Base Values)**

<b>Hemophilia</b>				
<u>Quarter</u>	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>	<u>Total GHPP Only Payments</u>
1	534	105	429	\$ 0
2	539	121	418	32,776,964
3	526	170	356	19,118,398
4	502	163	339	20,158,234
<b>2010-11</b>	<b>525</b>	<b>140</b>	<b>385</b>	<b>\$ 72,054,000</b>
1	498	163	335	\$ 17,743,614
2	480	159	321	19,747,628
3	491	159	332	17,543,139
4	496	164	332	19,214,858
<b>2011-12</b>	<b>491</b>	<b>161</b>	<b>330</b>	<b>\$ 74,249,000</b>
1	503	165	338	\$ 22,046,981
2	506	166	340	21,995,058
3	510	167	343	22,526,160
4	515	169	346	23,057,262
<b>2012-13</b>	<b>509</b>	<b>167</b>	<b>342</b>	<b>\$ 89,625,000</b>
1	520	170	350	\$ 23,588,363
2	524	171	353	24,119,465
3	530	173	357	24,650,566
4	534	174	360	25,181,668
<b>2013-14</b>	<b>527</b>	<b>172</b>	<b>355</b>	<b>\$ 97,540,000</b>

**Note:** 1) Expenditures reflect Total Cash Payments, Not accrued expenses.  
2) FY 2012-13 reflects actuals and projected base estimate values.  
3) FY 2013-14 reflects projected base estimate values.

**GHPP Trend Report**  
(Includes Actuals & Projected Base Values)

<b>Cystic Fibrosis</b>				
<u>Quarter</u>	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>	<u>Total GHPP Only Payments</u>
1	514	96	418	\$ 0
2	515	114	401	3,571,516
3	496	167	329	1,641,917
4	478	175	303	2,627,305
<b>2010-11</b>	<b>501</b>	<b>138</b>	<b>363</b>	<b>\$ 7,841,000</b>
1	477	182	295	\$ 2,497,032
2	474	183	291	2,578,745
3	478	182	296	2,220,199
4	483	182	301	1,963,878
<b>2011-12</b>	<b>478</b>	<b>182</b>	<b>296</b>	<b>\$ 9,260,000</b>
1	487	184	303	\$ 1,730,747
2	492	188	304	2,012,296
3	496	191	305	2,087,569
4	501	195	306	2,162,841
<b>2012-13</b>	<b>495</b>	<b>190</b>	<b>305</b>	<b>\$ 7,993,000</b>
1	505	198	307	\$ 2,238,114
2	509	201	308	2,313,387
3	513	204	309	2,388,660
4	518	208	310	2,463,933
<b>2013-14</b>	<b>512</b>	<b>203</b>	<b>309</b>	<b>\$ 9,404,000</b>

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**GHPP Trend Report**  
(Includes Actuals & Projected Base Values)

<b>Sickle Cell</b>				
<u>Quarter</u>	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>	<u>Total GHPP Only Payments</u>
1	410	128	282	\$ 0
2	416	165	251	638,004
3	401	269	132	330,218
4	364	255	109	370,642
<b>2010-11</b>	<b>397</b>	<b>204</b>	<b>193</b>	<b>\$ 1,339,000</b>
1	356	251	105	\$ 514,400
2	305	202	103	504,572
3	315	205	110	530,761
4	323	212	111	483,669
<b>2011-12</b>	<b>325</b>	<b>218</b>	<b>107</b>	<b>\$ 2,033,000</b>
1	333	220	113	\$ 557,451
2	330	217	113	556,531
3	333	219	114	569,319
4	337	222	115	582,105
<b>2012-13</b>	<b>334</b>	<b>220</b>	<b>114</b>	<b>\$ 2,265,000</b>
1	340	225	115	\$ 594,892
2	344	228	116	607,679
3	347	230	117	620,466
4	351	233	118	633,252
<b>2013-14</b>	<b>346</b>	<b>229</b>	<b>117</b>	<b>\$ 2,456,000</b>

Note: 1) Expenditures reflect Total Cash Payments, Not accrued expenses.  
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**GHPP Trend Report**  
(Includes Actuals & Projected Base Values)

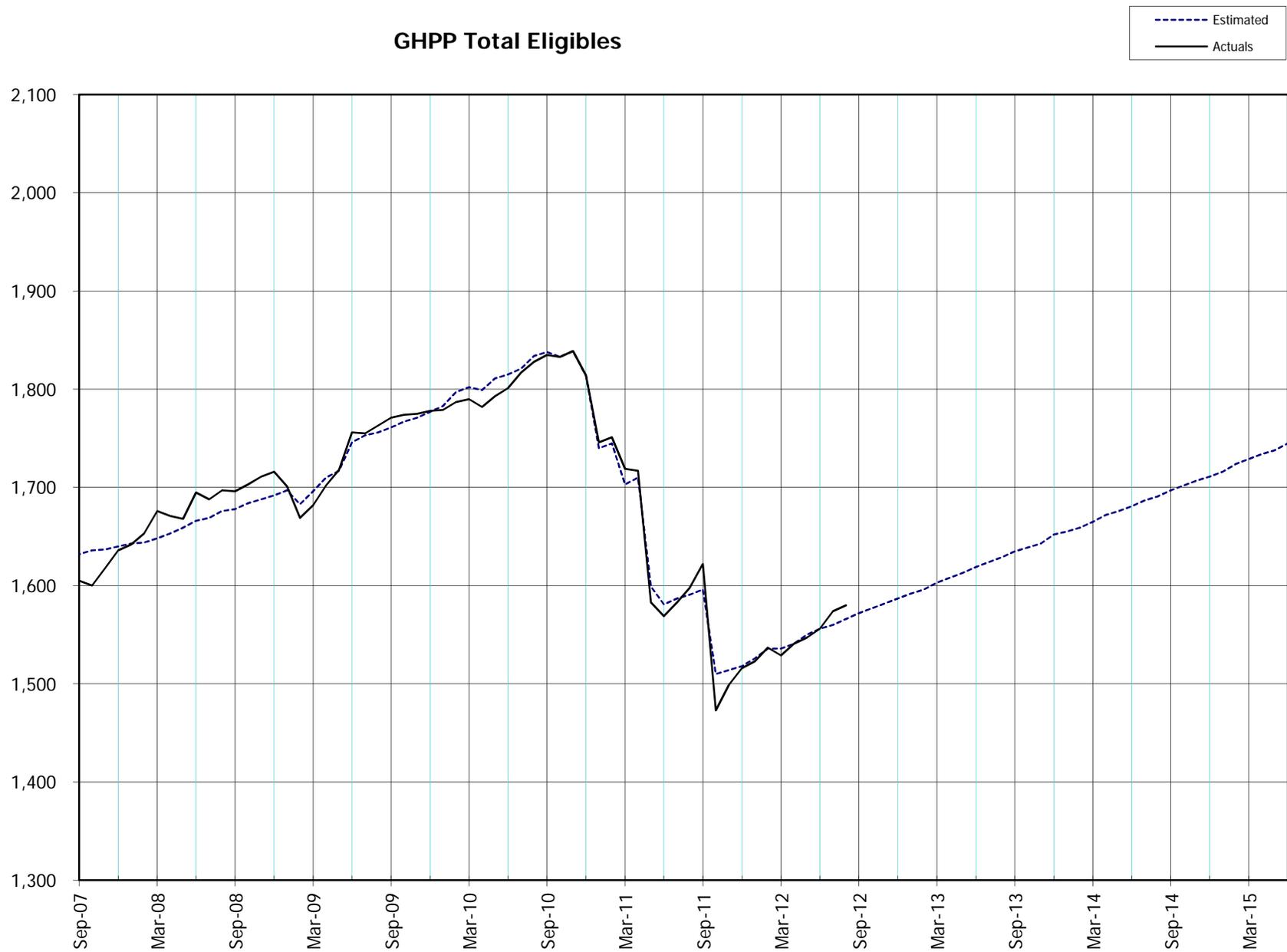
<b>Huntington</b>				
<u>Quarter</u>	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>	<u>Total GHPP Only Payments</u>
1	220	62	158	\$ 0
2	219	75	144	55,391
3	190	120	70	79
4	164	105	59	49,927
<b>2010-11</b>	<b>198</b>	<b>90</b>	<b>108</b>	<b>\$ 105,000</b>
1	156	101	55	\$ 16,713
2	141	80	61	15,490
3	145	84	61	23,750
4	146	88	58	16,142
<b>2011-12</b>	<b>147</b>	<b>88</b>	<b>59</b>	<b>\$ 72,000</b>
1	149	89	60	\$ 123,775
2	149	89	60	32,289
3	150	90	60	33,576
4	150	90	60	34,863
<b>2012-13</b>	<b>149</b>	<b>89</b>	<b>60</b>	<b>\$ 225,000</b>
1	151	91	60	\$ 36,150
2	151	91	60	37,437
3	152	92	60	38,724
4	153	93	60	40,011
<b>2013-14</b>	<b>152</b>	<b>92</b>	<b>60</b>	<b>\$ 152,000</b>

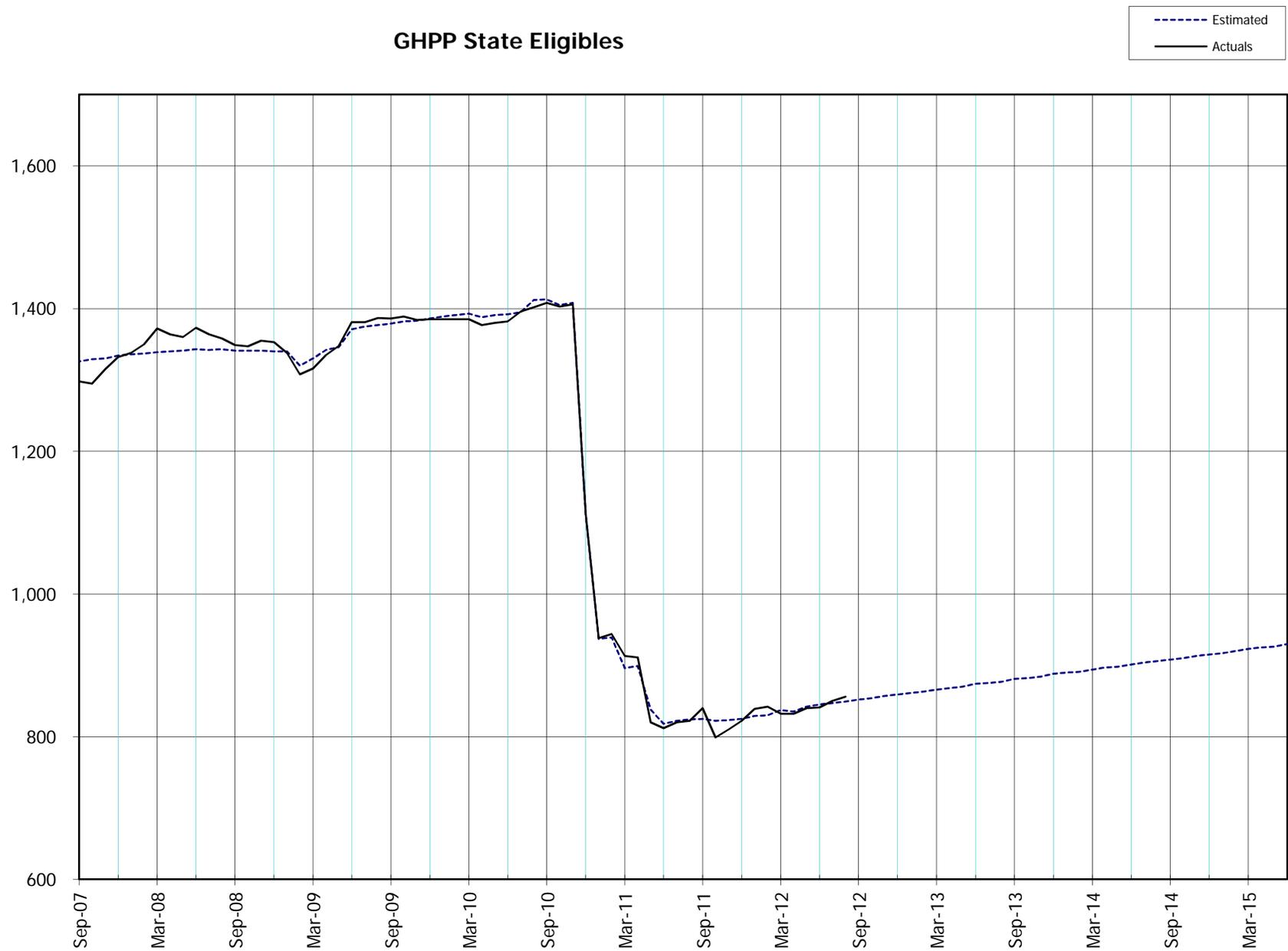
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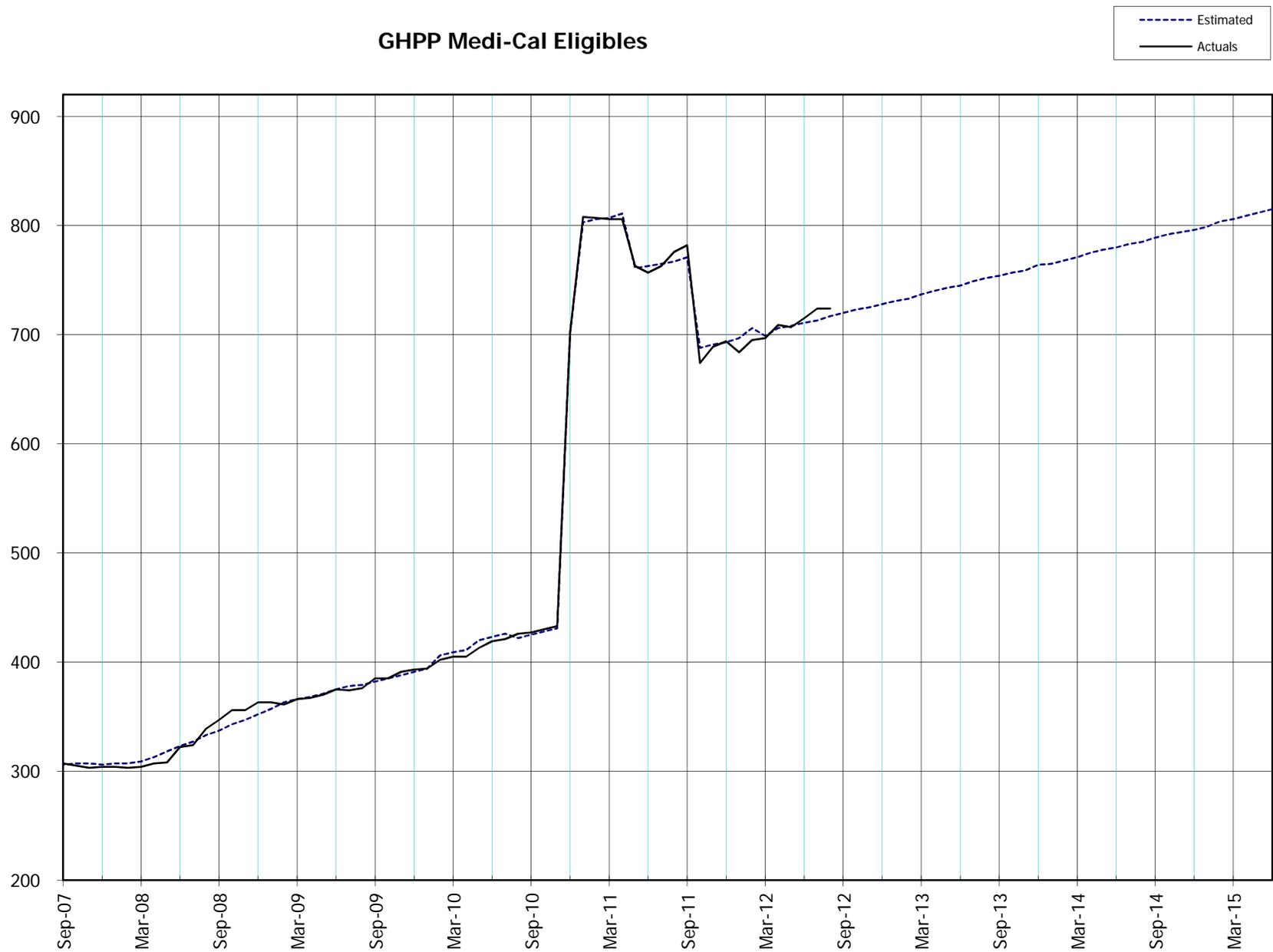
**GHPP Trend Report**  
(Includes Actuals & Projected Base Values)

<b>Metabolic</b>				
<u>Quarter</u>	<u>Total Caseload</u>	<u>Medi-Cal Caseload</u>	<u>GHPP Only Caseload</u>	<u>Total GHPP Only Payments</u>
1	149	34	115	\$ 0
2	141	47	94	275,591
3	126	81	45	68,358
4	117	78	39	74,252
<b>2010-11</b>	<b>133</b>	<b>60</b>	<b>73</b>	<b>\$ 418,000</b>
1	114	77	37	\$ 59,726
2	95	61	34	72,602
3	99	61	38	95,333
4	101	64	37	74,005
<b>2011-12</b>	<b>102</b>	<b>66</b>	<b>36</b>	<b>\$ 302,000</b>
1	103	65	38	\$ 27,958
2	105	65	40	76,290
3	107	66	41	79,728
4	110	67	43	83,163
<b>2012-13</b>	<b>107</b>	<b>66</b>	<b>41</b>	<b>\$ 267,000</b>
1	113	68	45	\$ 86,601
2	115	68	47	90,039
3	117	69	48	93,477
4	120	70	50	96,914
<b>2013-14</b>	<b>117</b>	<b>69</b>	<b>48</b>	<b>\$ 367,000</b>

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### GHPP State-Only Monthly Expenditures

Estimated  
Actuals

