

## Budget Neutrality Form

Explain the sources and methodology used for the actual and/or estimated historical data. If actual data have been provided, explain the source of the data (MMIS data, other state system Medicaid data, other program data, etc.) and the program(s) and source(s) of program funding that the data represent. Indicate if the data represent all Medicaid expenditures for the population. For example, are they inclusive of long-term care expenditures? Were the expenditures reported on the CMS-64? If the data provided are a combination of actual and estimated data, provide the dates pertaining to each type of data. If any of the data are estimated, provide a detailed explanation concerning how the estimated data were developed.

**RESPONSE:** The number of total MO HealthNet participants that used a family planning service is reported. Adhocs reports were run from the MMIS system to determine the total number of participants using Family Planning Services:

Adhoc 1– This is to report Managed Care participants using family planning services. It extracts all encounter claim types, excluding voided claims, with a Family Planning Indicator = Y, and provides an unduplicated count of DCNs and ME Code.

Adhoc 2 – This is to report FFS participants using family planning services. It extracts all FFS paid claims, with no adjustment overlays, with a Family Planning Indicator = Y, and provides an unduplicated count of DCNs, Paid Amount, ME Code, Claim Type, DOB, Race, Sex, Units, and TPL Indicator.

No adjustment overlays are included since the budget neutrality is reported on Paid date.

The actual number of unduplicated FFS and Managed Care DCNs are added together to determine the Number of Persons.

The future persons are trended by the average growth rate of Medicaid State Plan enrollees as reported on the Base Year tab. This trend is developed by historical actual trends.

The data represents all Medicaid expenditures for the population and all expenditures are reported on the CMS-64.