

Department of Social Services

**Presentation to the Medicaid
Managed Care Council**

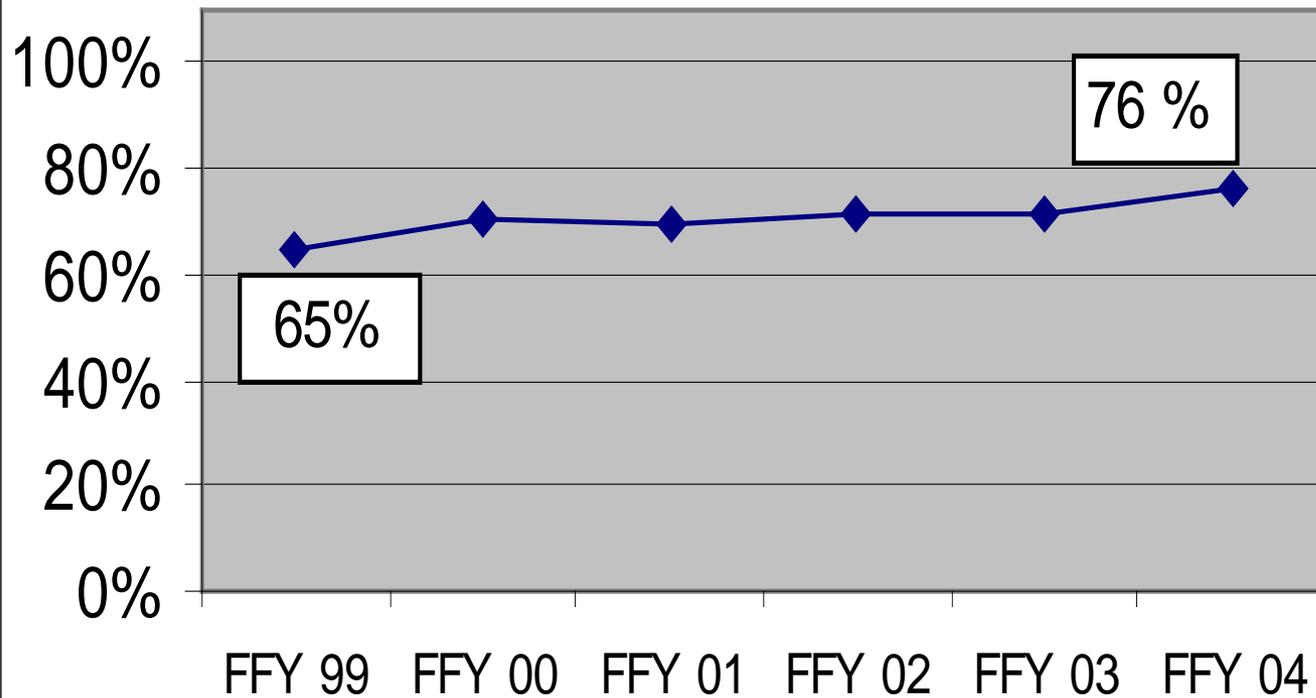
CMS 416 Report (continued)

- Includes well child care screenings, dental services and lead screenings
- Screening ratio equals the percent of all screens due that were received for each age range. This is based on member months, so that partial years of eligibility are taken into account.
- Participation ratio equals the percent of all children and youth that should have gotten a screen during the year that received one.

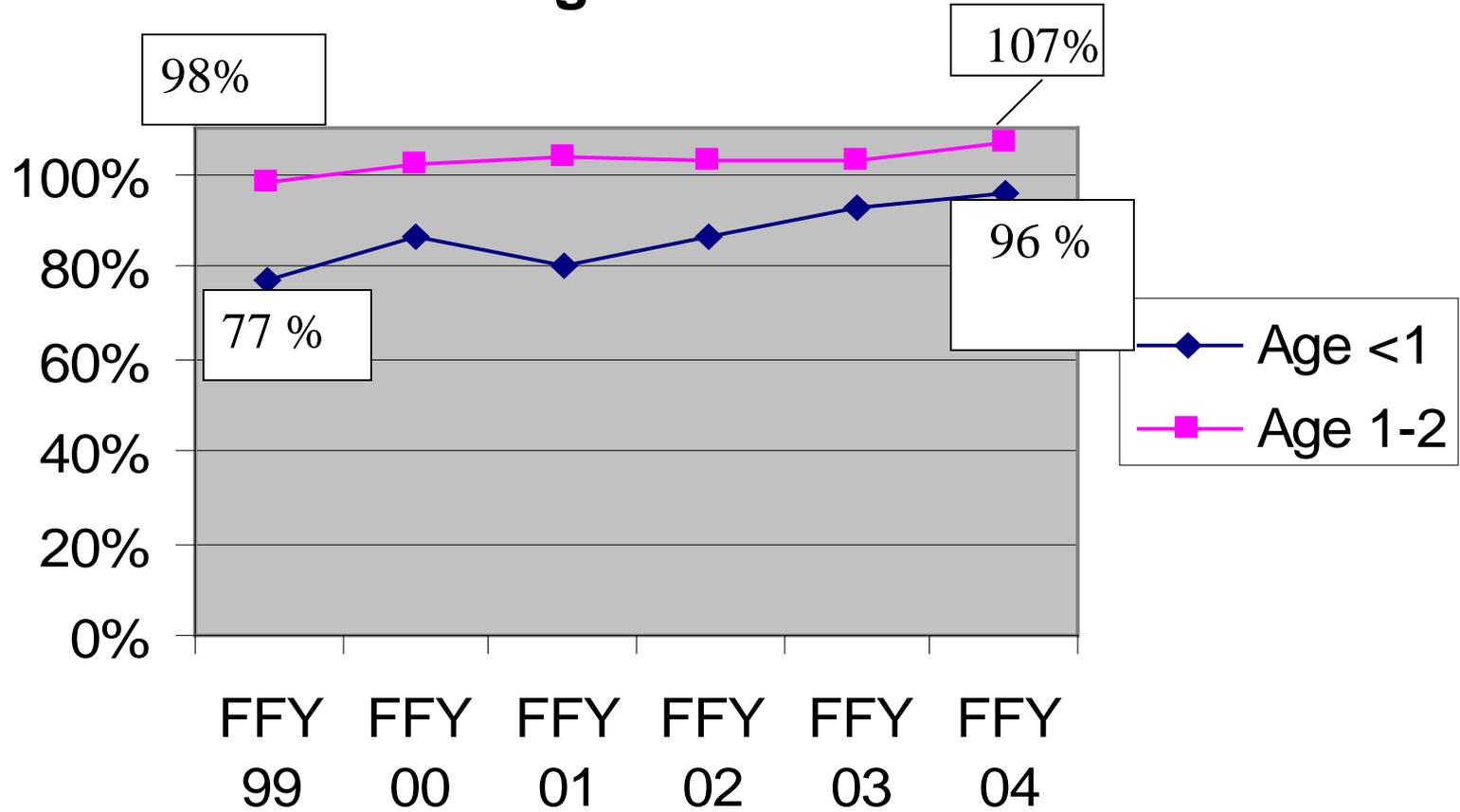
CMS 416 Report

- Annual report, submitted to the Federal government every April, with Federal government determining age ranges and specifications
- Latest submission covers services received 10/03-9/04
- Source: Encounter data and fee-for-service claims

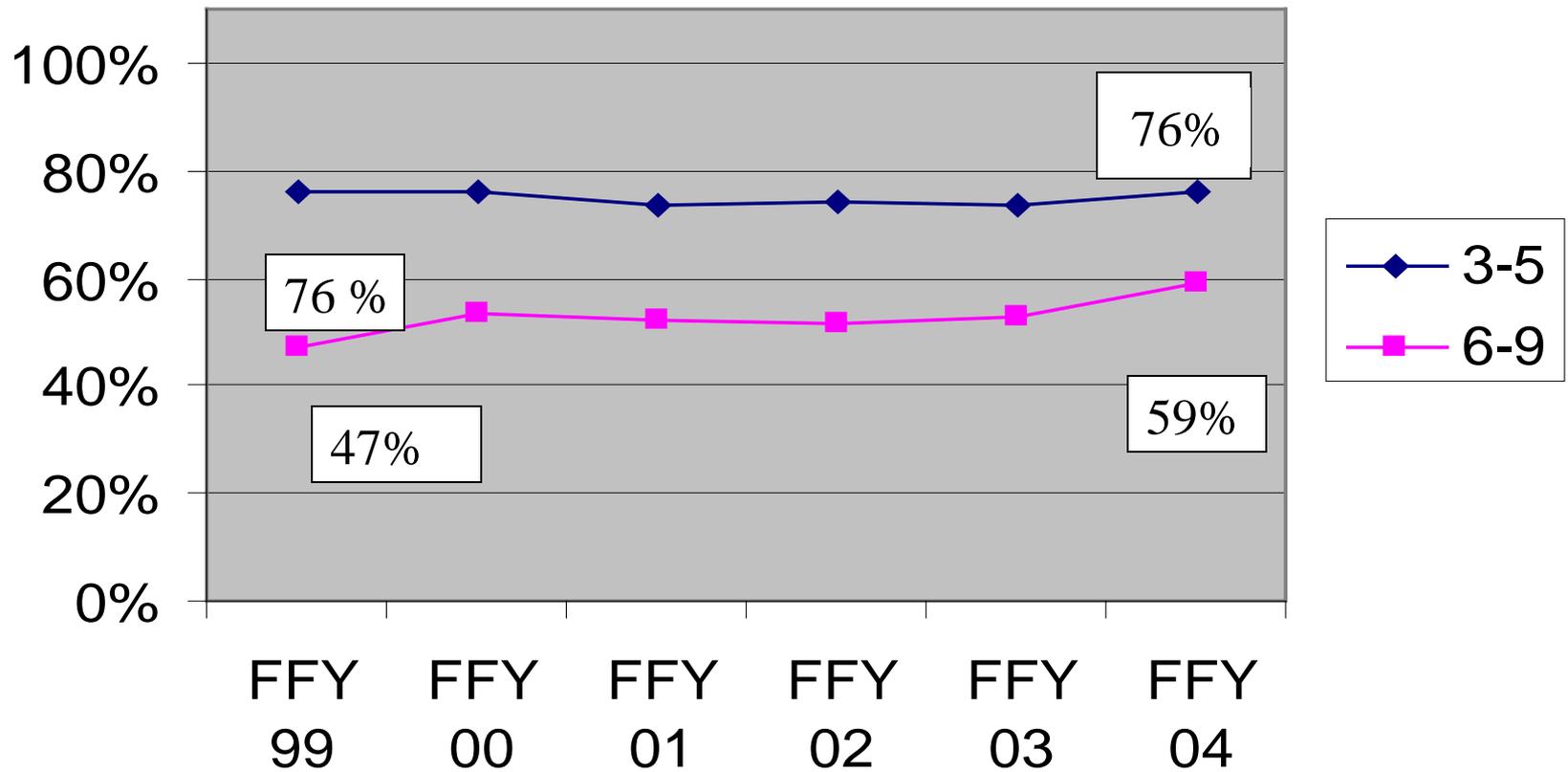
Screening Ratio 1999-2004, All Plans



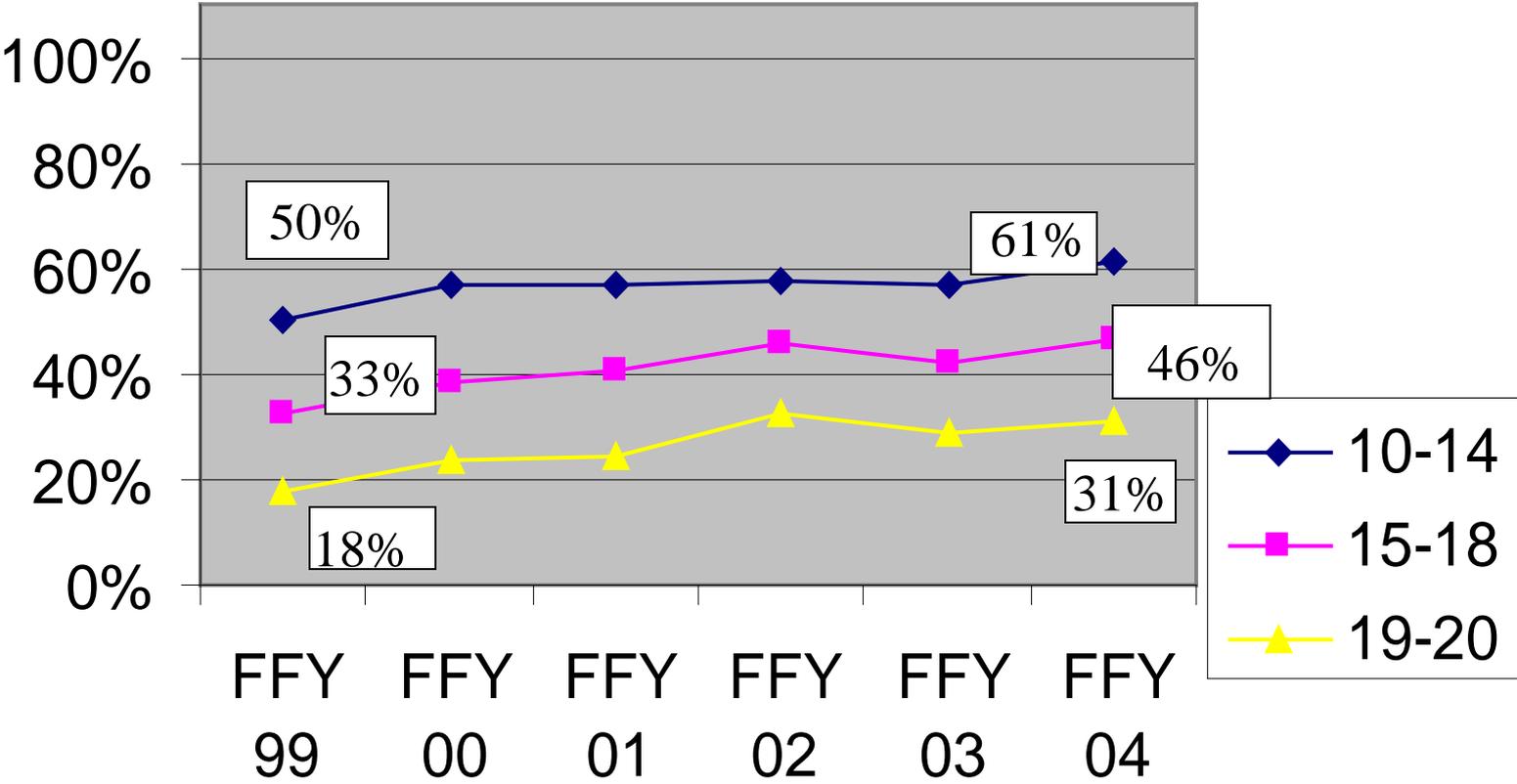
Screening Ratio FFY 1999-2004, Age <1 and 1-2



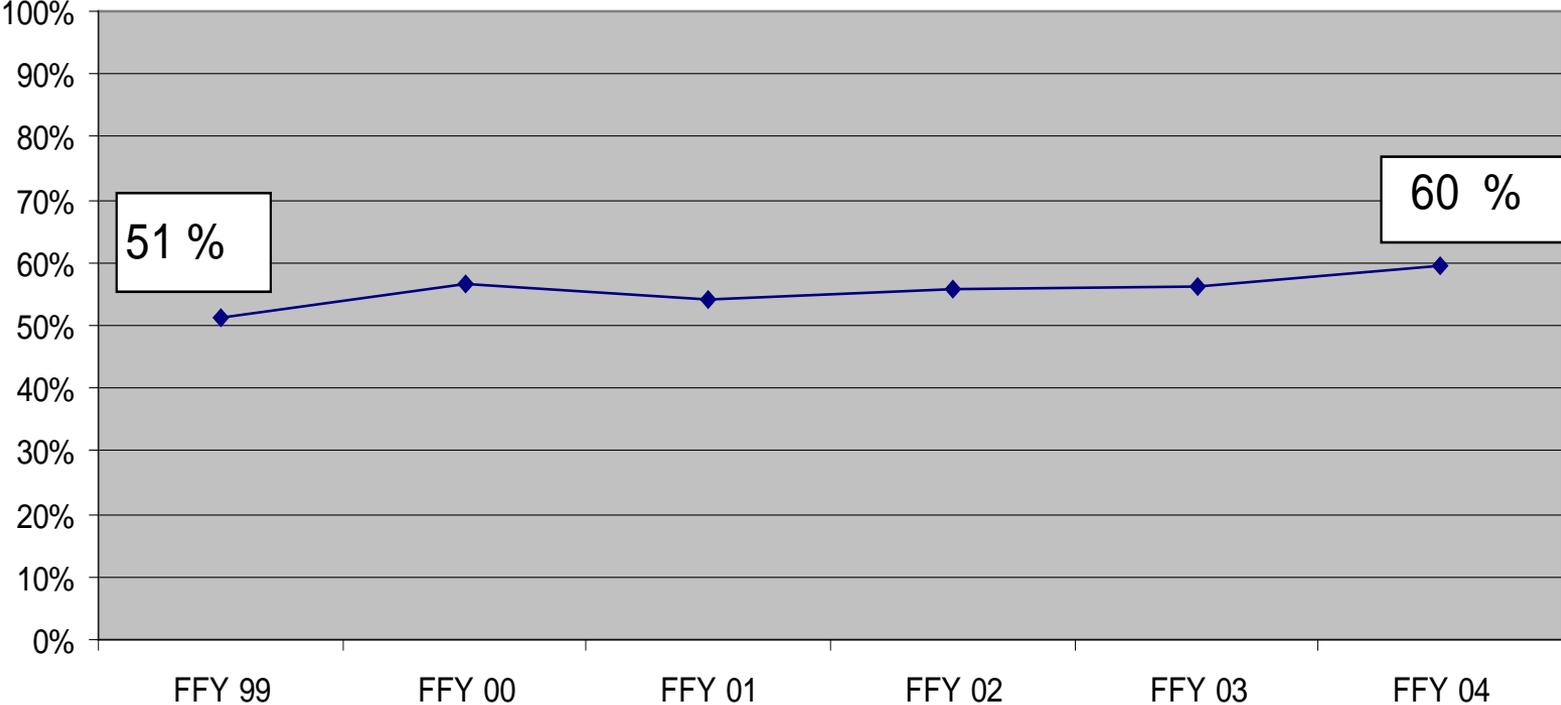
Screening Ratio 1999-2004, Ages 3-5 and 6-9



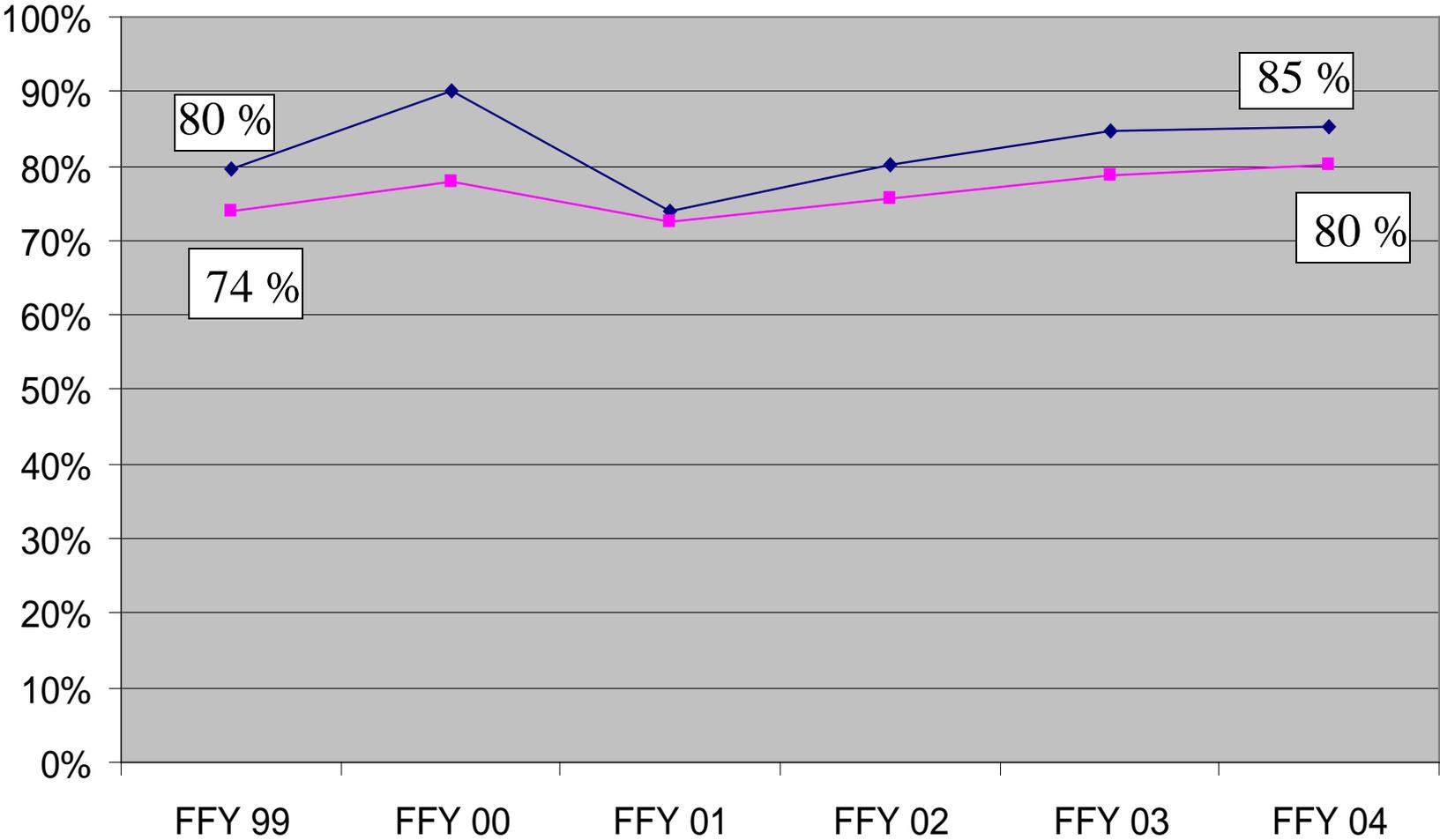
Screening Ratio 1999-2004, Ages 10-14, 15-18 and 19-20



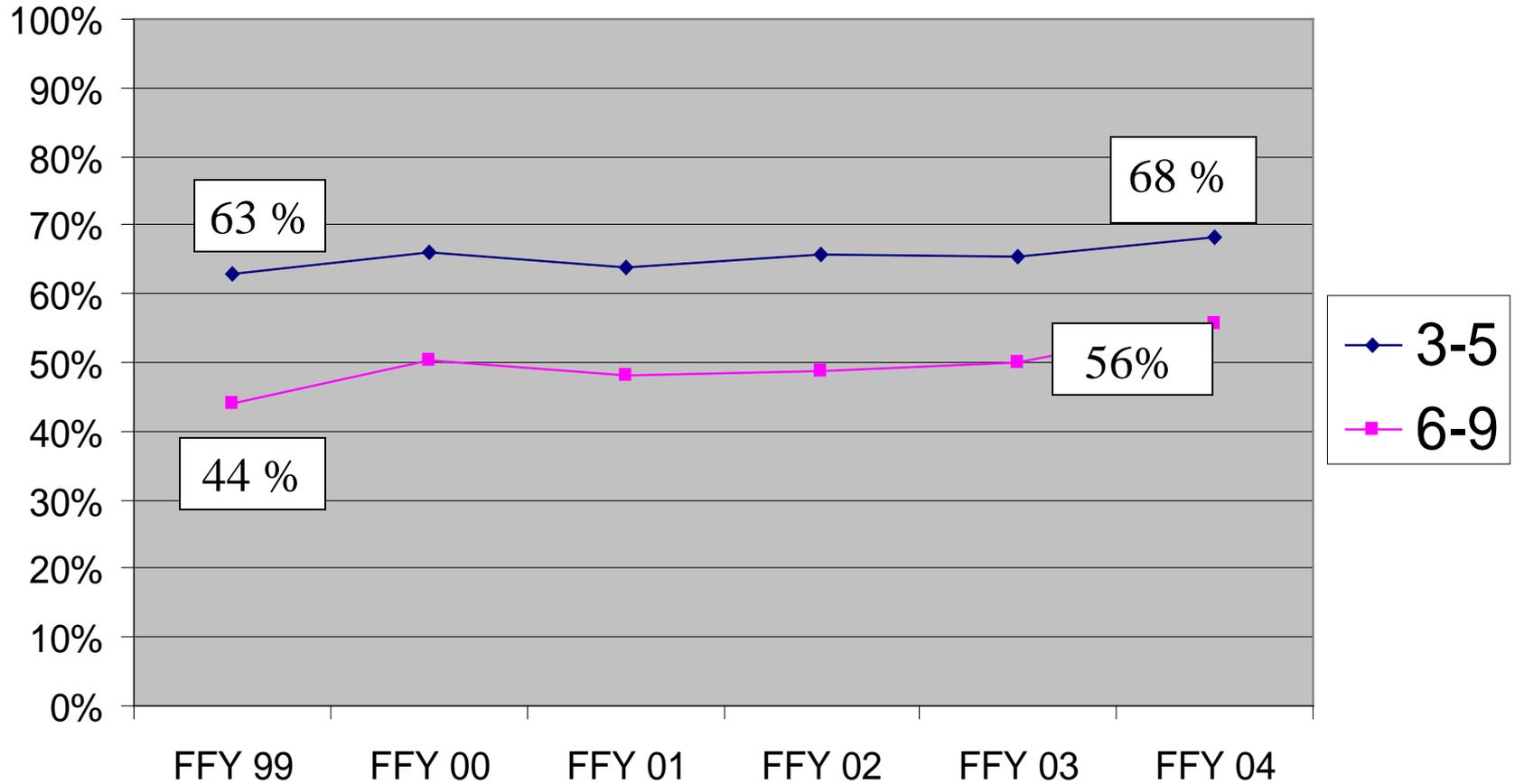
Participation Ratio, FFY 1999-2004, All Plans



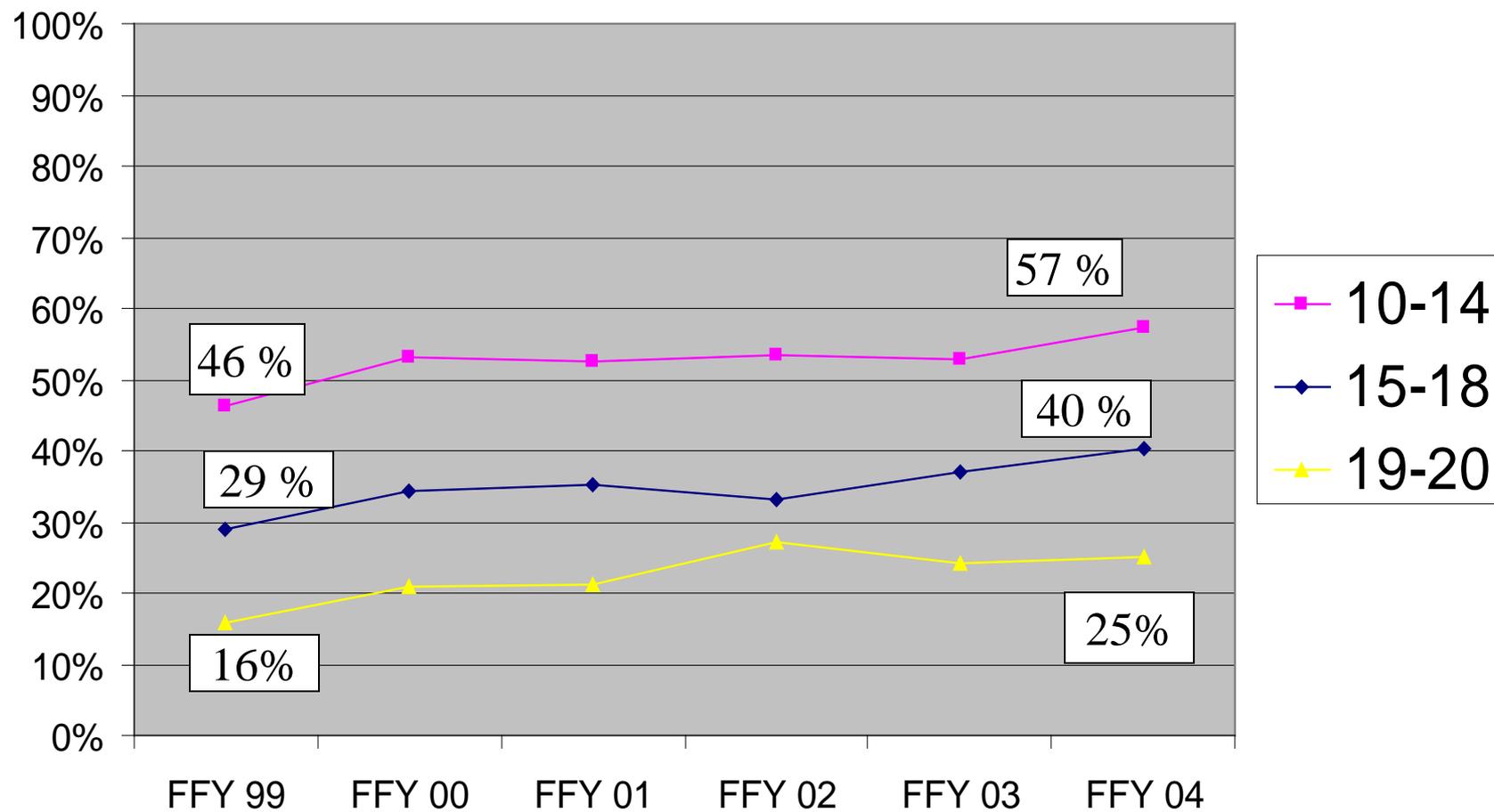
Participation Ratio, FFY 1999-2004, Age <1 and 1-2



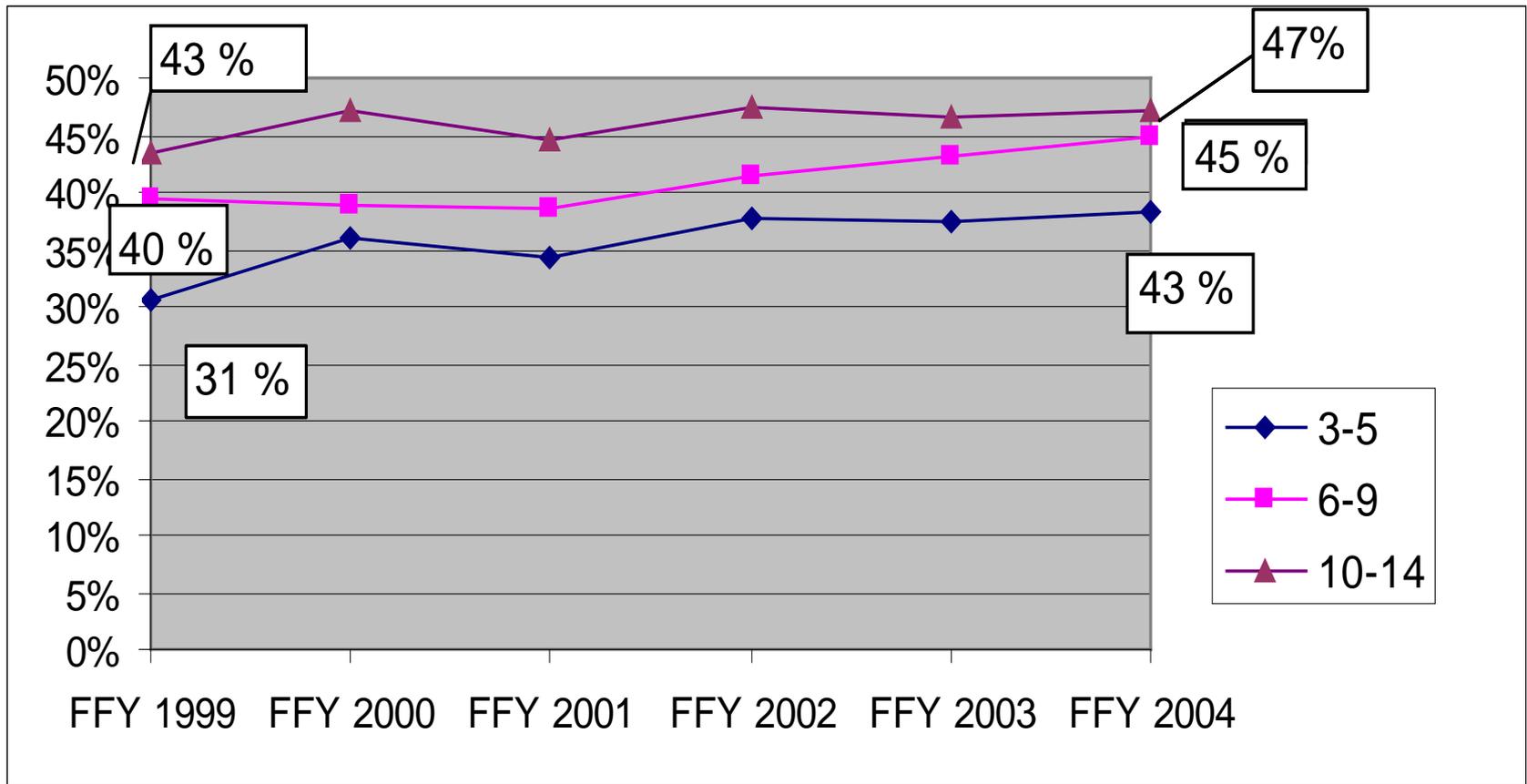
Participation Ratio, FFY 1999-2004, Age 3-5 and 6-9



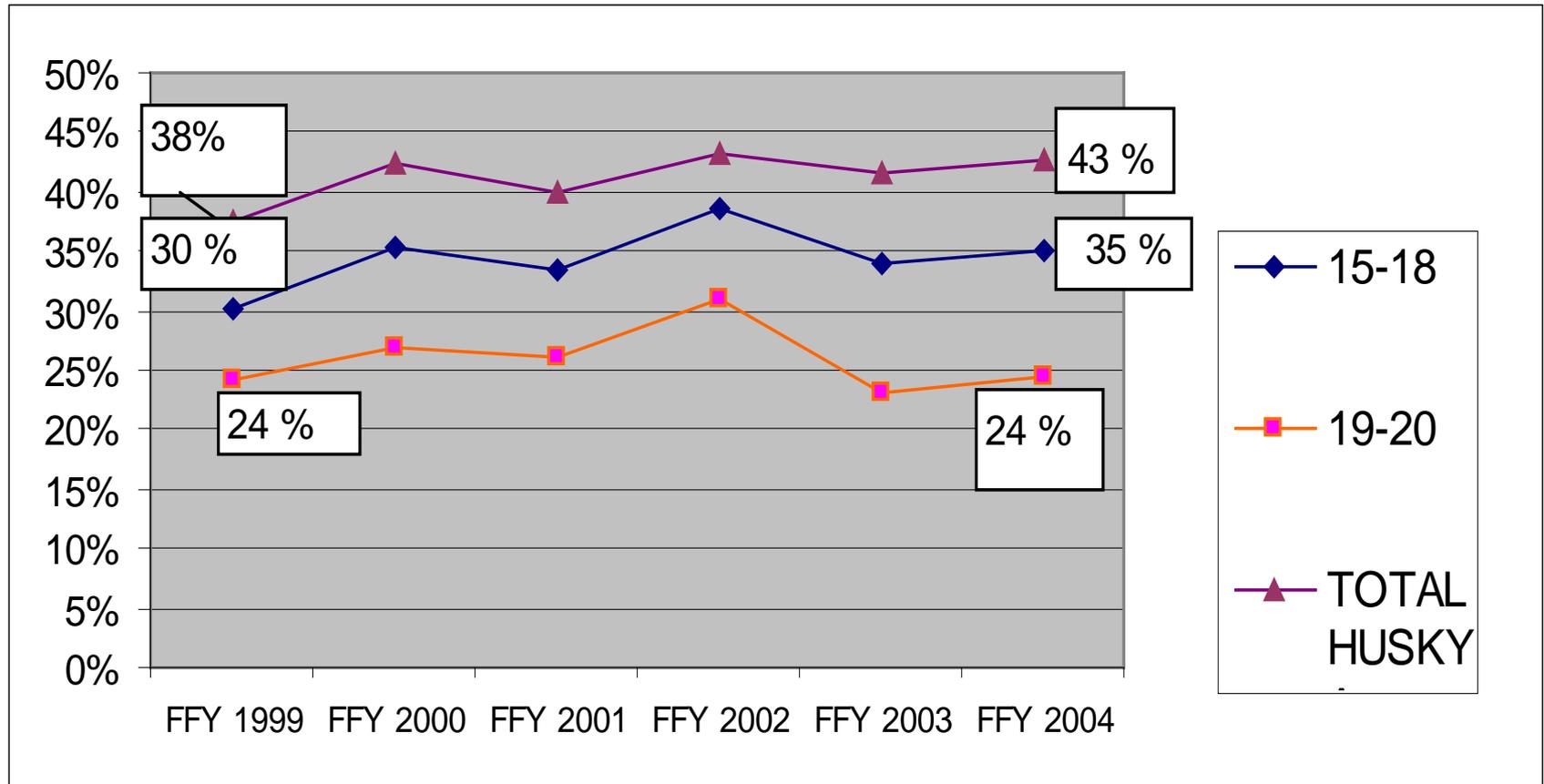
Participation Ratio, FFY 1999-2004, Age 10-14,15-18 and 19-20



Percent of Clients Receiving any Dental Services, by Age Range, FFY '99-'04



Percent of Clients Receiving any Dental Services, by Age Range, FFY '99-'04

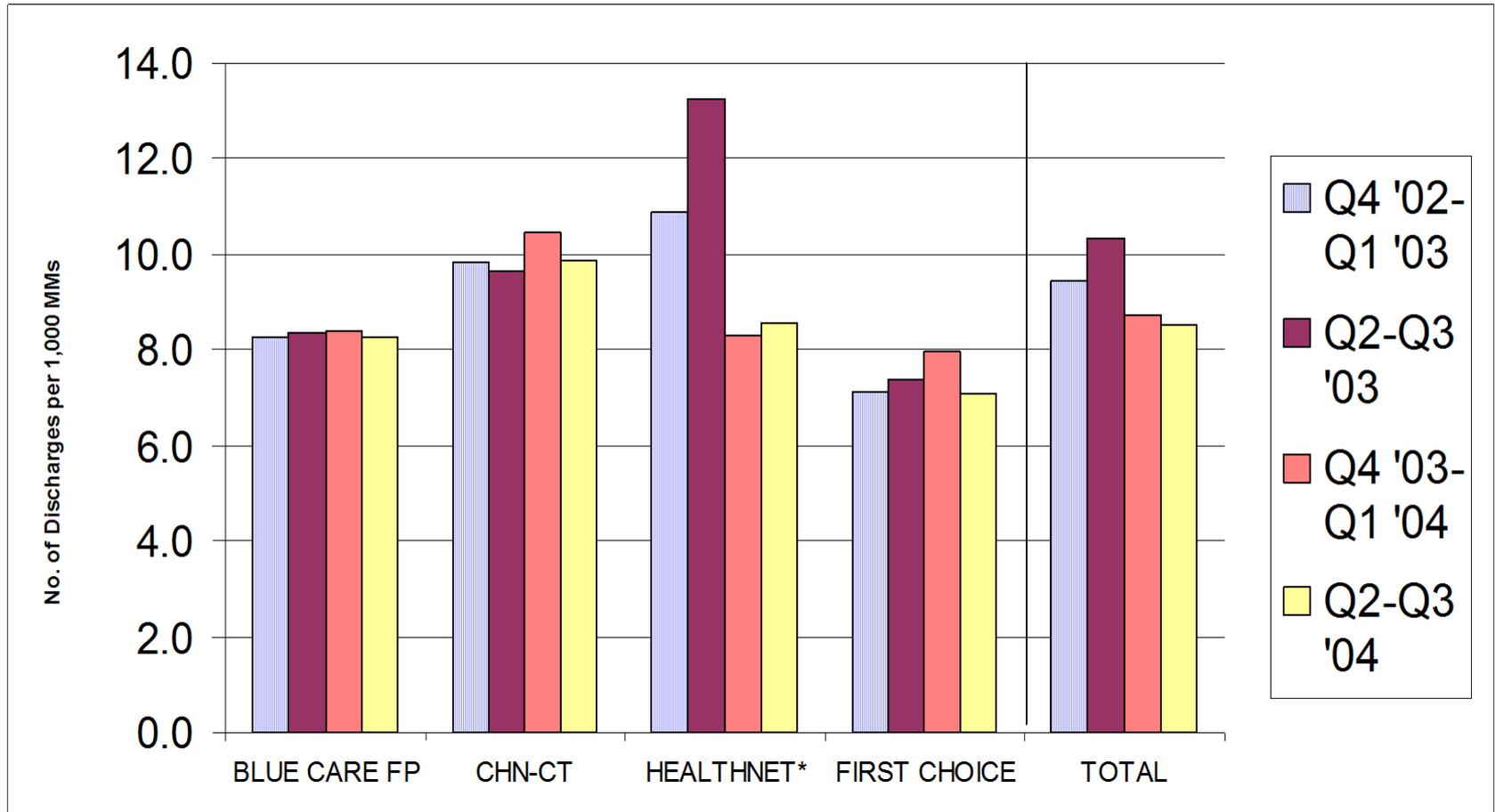


Lead Data from the CMS 416

- CT must include information on the number of lead tests received by age in the CMS 416.
- However, most lead screens are performed by the Department of Public Health and DSS does not have information about them in either the fee-for-service claims or managed care encounter databases.
- DPH provides us with information about lead screening received on an annual basis, except when there are delays due to systems issues, for example. However DPH cannot provide information in time for the CMS 416 submission. We hope to have information on lead screens received, and also information on Medicaid clients that never received lead screening or have elevated blood lead levels for FFY 2004, by July.

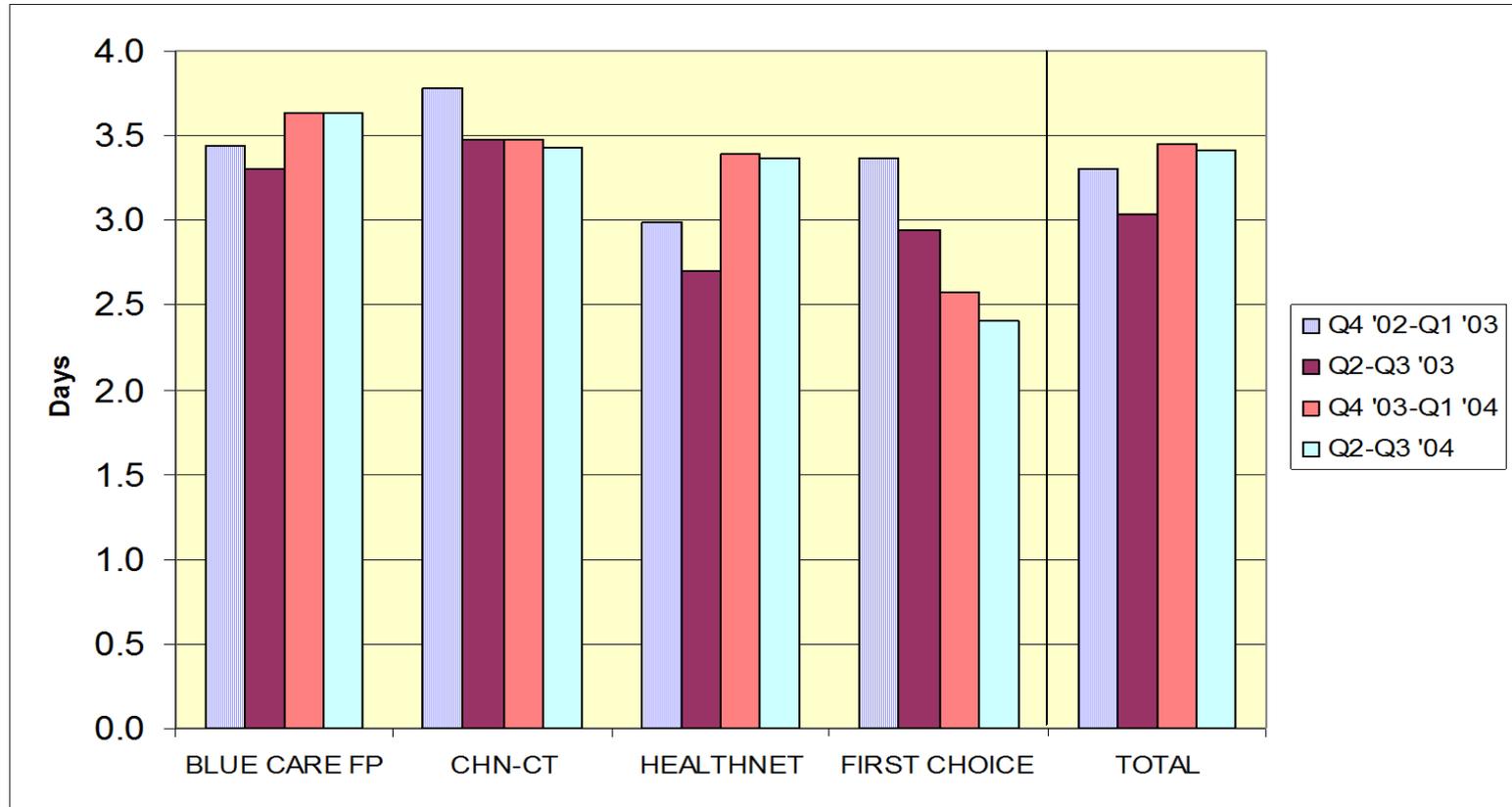
HUSKY A Hospital and Behavioral Health Data

Discharges per 1,000 Member Months, Q4 '02-Q3 '04



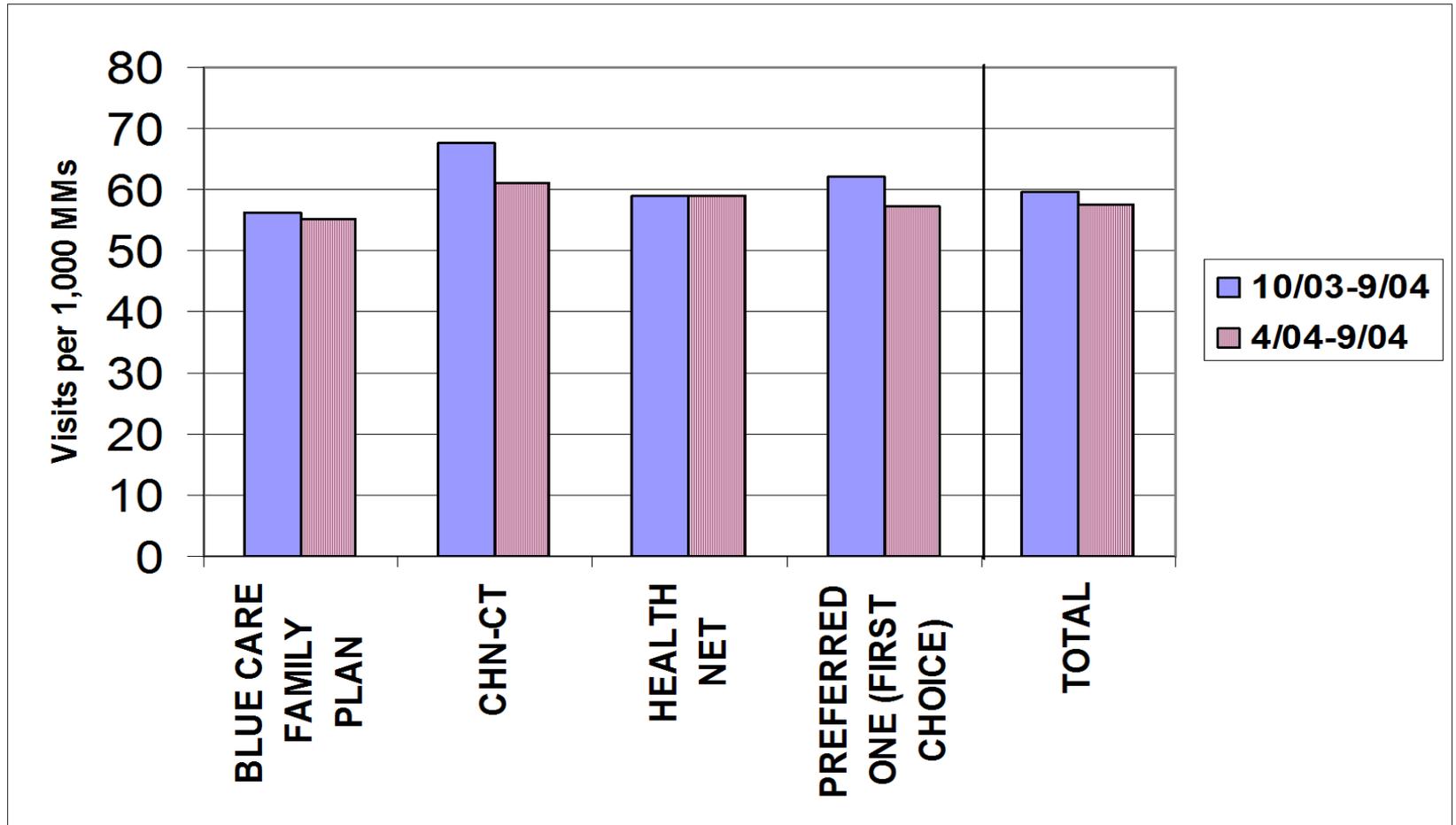
Excludes discharges with a BH diagnosis *-under review

Average Length of Stay by MCO, 10/02-9/04



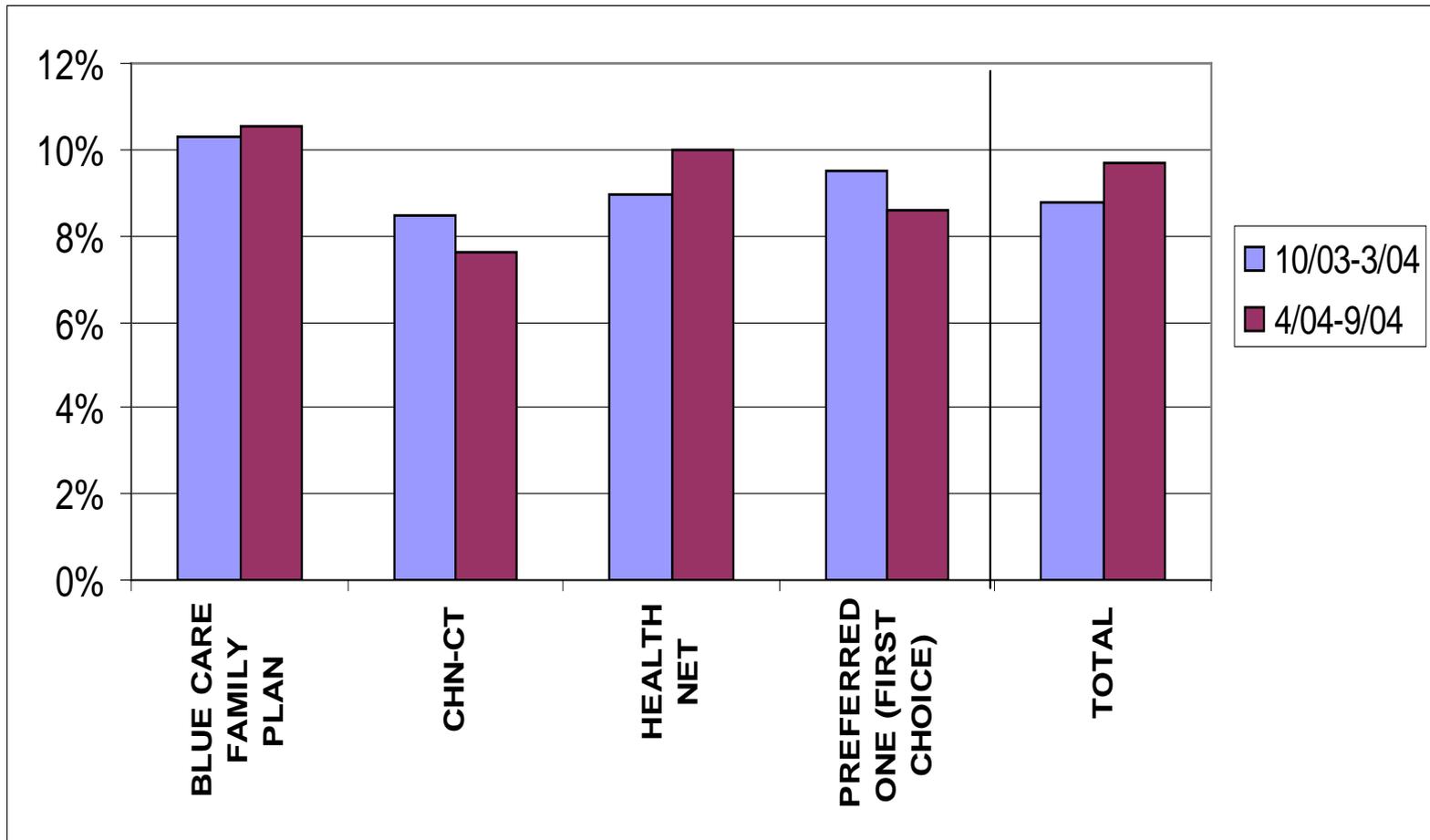
Excludes discharges with a BH diagnosis.

Emergency Room Visits, 10/03-9/04

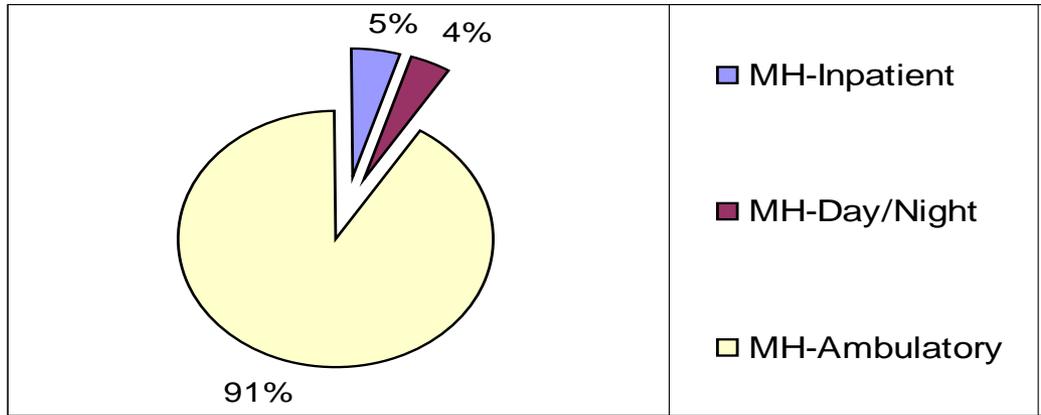


Note: Fee-for-Service rate was 72.4 per 1,000 member months in 1994.

Percent of HUSKY A Clients Receiving Any Behavioral Health Service, 10/03-9/04



Clients Receiving MH Services by Type of Service



Clients Receiving Substance Abuse Treatment Services by Type of Service

