

**MEDICAL ASSISTANCE
FOR CHILDREN WITH DISABILITIES
2014 REPORT**



pennsylvania
DEPARTMENT OF HUMAN SERVICES

**Commonwealth of Pennsylvania
Department of Human Services**

Issued in 2018

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EXECUTIVE SUMMARY

The annual PH-95 Report is mandated by the Pennsylvania (PA) legislature. This is the twelfth annual report and is for the year 2014. This report presents information on demographics, types of services, service expenditures and common diagnoses for children who are eligible for Medical Assistance (MA) programs as a result of their special needs (known as PH-95 children).

The following are some of the key points found in this report:

- In 2014, the number of PH-95 children enrolled in the MA program category reached 66,036 children, which was a less than 1% reduction over the enrollment in 2013 (66,100).
- Allegheny County continued to have the most MA enrolled PH-95 children (6,276). Montgomery, Bucks, Lancaster, Chester and Delaware counties continued to have more than 3,000 PH-95 children enrolled per county.
- The average and median household annual incomes for PH-95 children with Third Party Liability (TPL) resources were \$113,559 and \$86,899, respectively, compared to \$62,542 and \$50,757 for households without TPL resources in 2014.
- Most (79%) households with a PH-95 child had TPL resources in 2014. On average there were four members in each household with a PH-95 child.
- The MA Program paid \$42,032,944 to providers who delivered services through the Fee-for-Service (FFS) system to PH-95 children in 2014.
- MA Managed Care Organizations (MCOs) paid \$379,758,700 to providers who delivered services through the managed care (MC) delivery system to PH-95 children in 2014.
- In terms of the service categories, school-based services had the highest FFS expenditure (\$24,656,023). Private duty nursing services came in at a distant second with \$5,205,759 in expenditures.
- Outpatient behavioral health facility services had the topmost expenditures paid (\$88,578,271) by the MA MCOs. Pharmacy services had the next highest MA MCO paid expenditures, costing \$71,637,049.
- Pervasive Developmental Disorder, Hyperkinetic Syndrome of Childhood, and Specific Delays in Development were the top three categories of diagnoses reported as the reason for treatment in 2014 for PH-95 children.

INTRODUCTION

Background

The 2014 Report is the twelfth yearly report on children who are eligible for MA because they have special needs (known as PH-95 children).

The Appropriations Act 1A of 2005 provides: “The Department shall submit to the Public Health and Welfare Committee of the Senate and the Health and Human Services Committee of the House of Representatives an annual report including, but not limited to, the following data: family size, household income, county of residence, length of residence in Pennsylvania, third-party insurance information, diagnosis and the type and cost of services paid for by the Medical Assistance Program on behalf of each eligible and enrolled child that has an SSI (Supplemental Security Income) level of disability and where parental income is not currently considered in the eligibility determination process.”

Methodology

Data collection for this report was provided by the Department of Human Services’ Office of Medical Assistance Programs (OMAP). OMAP obtained information from the Enterprise Data Warehouse (EDW) on eligibility dates, demographics, service types, costs and diagnoses. From the Fraud and Abuse Detection System (FADS), information on the availability of Third Party Liability (TPL) insurance was garnered. All services provided to PH-95 children were delivered through either FFS or MC. Information for FFS claims and MC encounters was generated from EDW based on services rendered in each system. Claims and TPL data were obtained from PA’s PROMISe™ claims processing system, while the Client Information System (CIS) provided eligibility dates, demographic information and TPL information.

PH-95 Eligibility

Eligibility for MA through the PH-95 category is based on a child’s disability and the child’s countable income. The child’s countable income must be less than or equal to 100% of the Federal Poverty Income Guideline (FPIG) to be eligible for the PH-95 category. Countable income includes, but is not limited to, a child’s earned income, countable unearned income and voluntary child support. It does not include court-ordered child support and parental income.

DEMOGRAPHICS

In 2014, every eligible PH-95 child was included in the below analysis, regardless of whether the child's eligibility was discontinued at any time during the year.

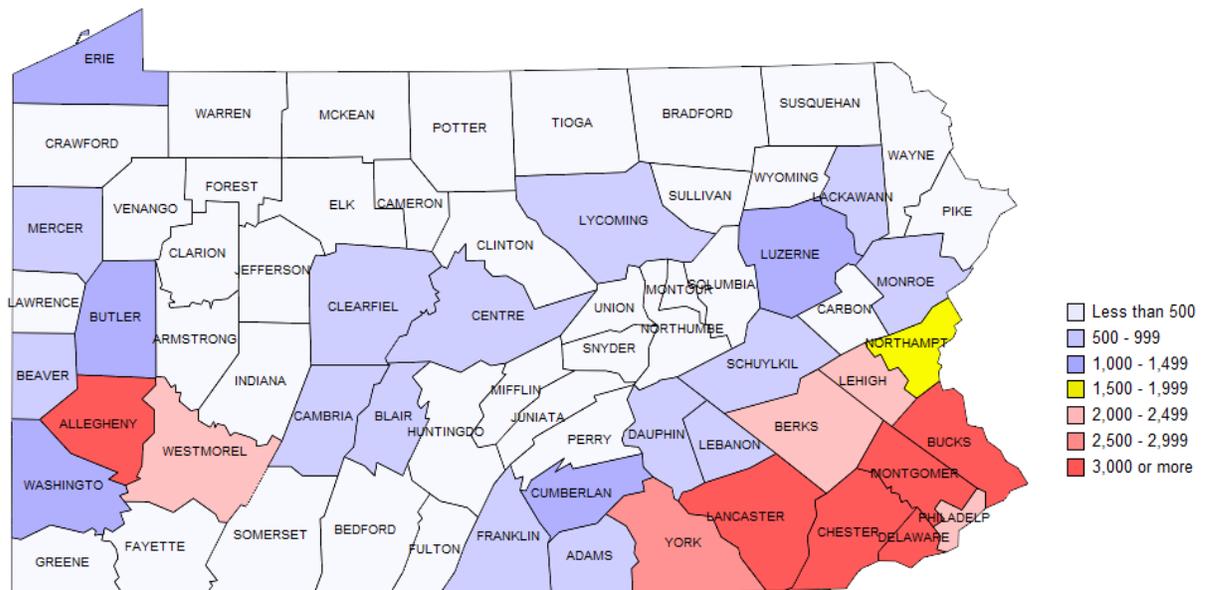
Number of PH-95 Enrollees

- In 2014, the number of PH-95 children enrolled in the MA program in Pennsylvania was 66,036. This was a less than 1% reduction as compared to 66,100 children in 2013.
- The majority (95%) of PH-95 children were enrolled in the MC delivery system.

County of Residence

- Allegheny County, as in previous years, had the largest number of PH-95 children, with 6,276 children enrolled in the MA program (Figure 1).
- A high number of PH-95 children were from the following counties: Montgomery, Bucks, Chester, Delaware and Lancaster (Figure 1).
- Approximately 42% of PH-95 children lived in counties with 3,000 or more PH-95 children in 2014. Six counties had 3,000 or more PH-95 children in 2014.

Figure 1. PH-95 Children in Pennsylvania by County of Residence in 2014



Source: DHS Enterprise Data Warehouse.

Household Income and Third Party Liability (TPL) Resources

According to MA regulations at 55 Pa. Code § 1101.64, “Other private or governmental health insurance benefits shall be utilized before billing the MA Program.” Therefore, when a beneficiary is covered by a TPL resource, the resource must be used to pay for services it covers prior to any MA payment.

- Approximately 79% (51,411) of PH-95 children had TPL resources compared to 21% (13,683) of children without TPL resources (Table 1).
- Over 30% of PH-95 children covered by TPL resources were in households with household income greater than \$100,000.
- One fifth of PH-95 children were in families with annual income less than \$50,000.
- Less than 1% of PH-95 children were in families with household income over \$200,000 but not covered by TPL resources (Table 1).
- The average household annual income for PH-95 children with TPL resources in 2014 was \$113,559 as compared to \$62,542 for children without TPL resources (Table 1).
- The median income for PH-95 households with TPL resources was \$86,899 as compared to \$50,757 for those without TPL resources in 2014.

Table 1. Number of PH-95 Children and Household Members by Household Annual Income, With or Without TPL Resource - 2014						
Annual Income (\$)		Number of Children*	Percent of Total PH-95 Children	Average Household Members	Average Annual Income	Median Annual Income
With TPL Resource	<50,000	6,834	10.5%	3.4	\$113,559	\$86,899
	50,000 - 74,999	13,012	20.0%	4.0		
	75,000 - 99,999	11,500	17.7%	4.1		
	100,000 - 199,999	16,526	25.4%	4.2		
	≥ 200,000	3,539	5.4%	4.3		
	Subtotal	51,411	79.0%	4.0		
Without TPL Resource	<50,000	6,650	10.2%	3.3	\$62,542	\$50,757
	50,000 - 74,999	4,168	6.4%	4.0		
	75,000 - 99,999	1,601	2.5%	4.2		
	100,000 - 199,999	1,033	1.6%	4.2		
	≥ 200,000	231	0.4%	4.3		
	Subtotal	13,683	21.0%	4.0		
Total		65,094	100.0%	--		

Source: DHS Enterprise Data Warehouse and FADS.

*65,094 out of 66,036 recipients with household income information were included in the analysis.

Household Size

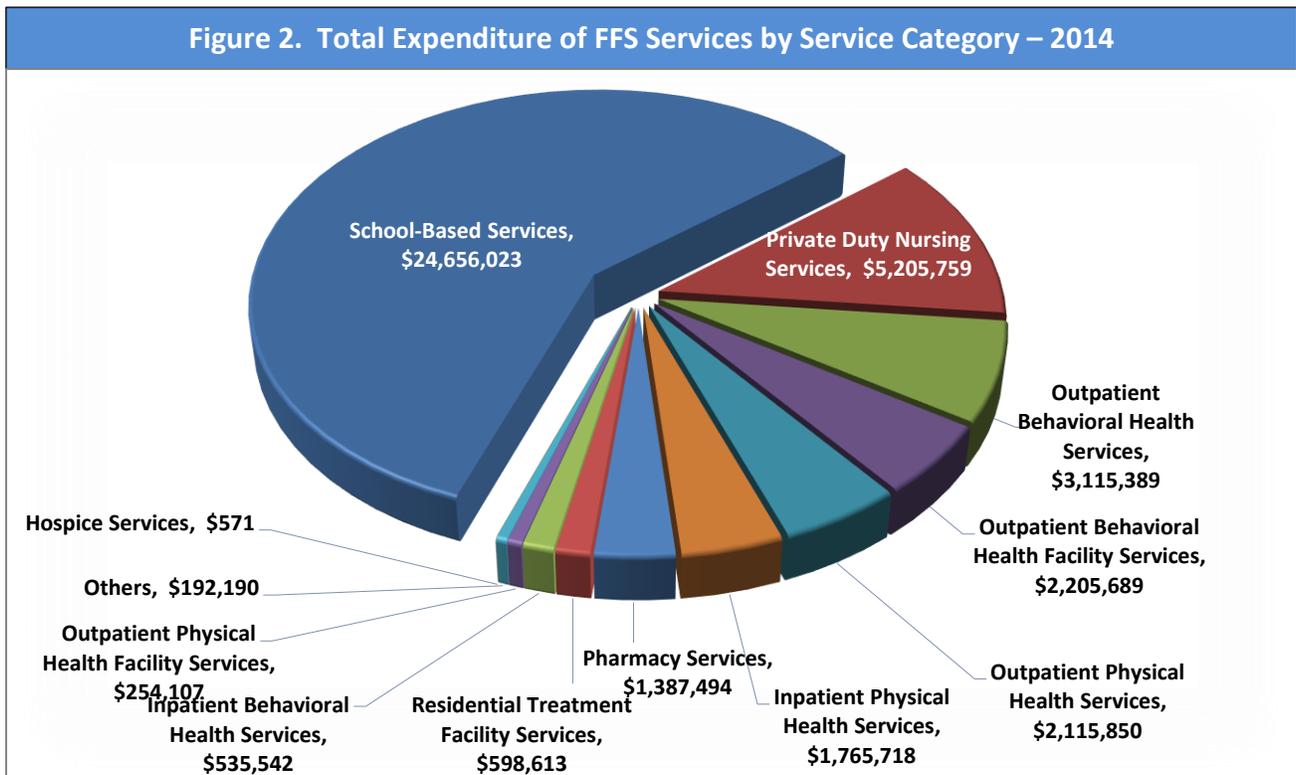
- On average, there were four household members in each PH-95 child’s family in 2014. Families with higher household income tend to have more household members (Table 1).
- The group with the highest household income (more than \$200,000) had one more family member than those with the lowest household income (less than \$50,000).

MA PROGRAM SERVICES AND EXPENDITURES

MA Program services are delivered to PH-95 children by enrolled providers such as, but not limited to, physicians, dentists, pharmacists, home health, labs and hospitals. FFS payment is remitted directly by the MA Program to these providers. The MA MCOs pay providers enrolled in their network for services delivered to PH-95 children.

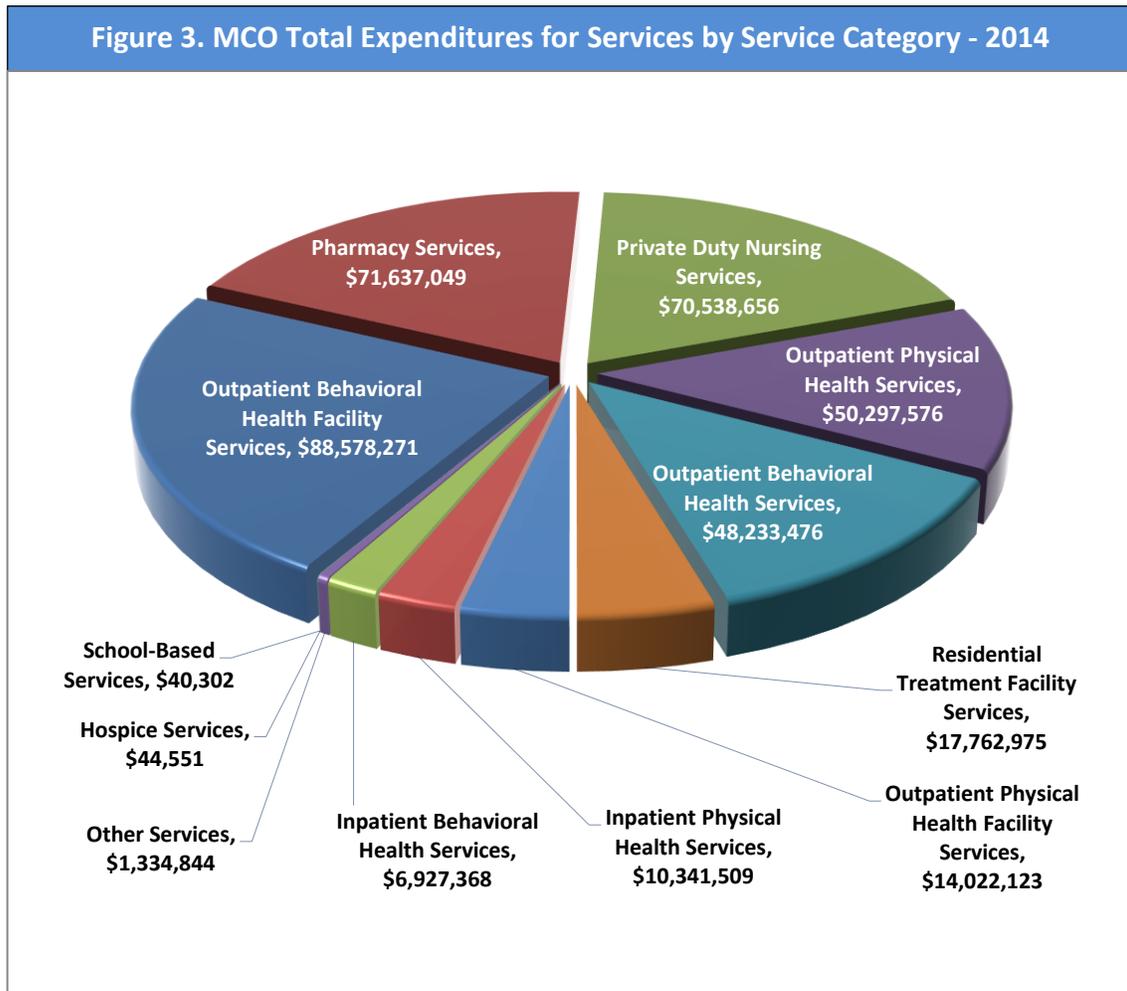
PH-95 Expenditures by Service Category

- In 2014, the MA Program paid \$42,032,944 for services delivered through the FFS system to PH-95 children.
- School-based services encompassed the greatest portion of the FFS expenditures. This was \$24,656,023 as represented Figure 2. Private duty nursing followed at a distant second with \$5,205,759.



Source: DHS Enterprise Data Warehouse.

- MA MCOs paid \$379,758,700 to providers for services delivered to PH-95 children through the MC system in 2014.
- As shown in Figure 3, outpatient behavioral health facility services were by far the highest expenditures for PH-95 children by MA MCOs (\$88,578,271). The second highest expenditure was for pharmacy services, with \$71,637,049.



Source: DHS Enterprise Data Warehouse.

DIAGNOSES

Diagnoses of PH-95 children were analyzed using service records from both delivery systems. Due to the fact that a PH-95 child may receive treatments for the same condition multiple times in a year and the same diagnosis may be reported more than once, we counted each diagnosis only once per PH-95 child to avoid duplication.

- As in 2013, based on the first three digits of the ICD-9 diagnosis codes, Pervasive Developmental Disorder was the most frequently reported diagnosis in 2014 with 13,902 PH-95 children (Table 2).
- The second most reported diagnosis category was Hyperkinetic Syndrome of Childhood with a total of 11,664 PH-95 children.

Table 2. Top Ten Diagnoses of PH-95 Children - 2014			
Rank	ICD-9	Diagnosis	Distinct Children
1	299	Pervasive Developmental Disorder	13,902
2	314	Hyperkinetic Syndrome of Childhood	11,664
3	315	Specific Delays in Development	7,568
4	462	Acute Pharyngitis	6,919
5	465	Acute Upper Respiratory Infections of Multiple Unspecified Sites	6,605
6	784	Symptoms Involving Head and Neck	6,188
7	780	General Symptoms	5,655
8	367	Disorders of Refraction and Accommodation	5,336
9	783	Symptoms Concerning Nutrition, Metabolism and Development	5,160
10	786	Abnormalities Involving Chest and Respiratory Symptoms	4,966

Source: DHS: Enterprise Data Warehouse.

APPENDICES

MA Enrolled PH-95 Children by County of Residence in 2014					
County	Number of PH-95 Children	Percent of PH-95 Children	County	Number of PH-95 Children	Percent of PH-95 Children
ADAMS	572	0.9%	LACKAWANNA	984	1.5%
ALLEGHENY	6,276	9.5%	LANCASTER	3,952	6.0%
ARMSTRONG	429	0.6%	LAWRENCE	369	0.6%
BEAVER	940	1.4%	LEBANON	900	1.4%
BEDFORD	200	0.3%	LEHIGH	2,072	3.1%
BERKS	2,172	3.3%	LUZERNE	1,344	2.0%
BLAIR	775	1.2%	LYCOMING	567	0.9%
BRADFORD	237	0.4%	MCKEAN	271	0.4%
BUCKS	4,701	7.1%	MERCER	656	1.0%
BUTLER	1,340	2.0%	MIFFLIN	211	0.3%
CAMBRIA	579	0.9%	MONROE	786	1.2%
CAMERON	49	0.1%	MONTGOMERY	5,658	8.6%
CARBON	335	0.5%	MONTOUR	124	0.2%
CENTRE	646	1.0%	NORTHAMPTON	1,546	2.3%
CHESTER	3,842	5.8%	NORTHUMBERLAND	363	0.5%
CLARION	228	0.3%	PERRY	286	0.4%
CLEARFIELD	568	0.9%	PHILADELPHIA	2,132	3.2%
CLINTON	236	0.4%	PIKE	307	0.5%
COLUMBIA	267	0.4%	POTTER	87	0.1%
CRAWFORD	444	0.7%	SCHUYLKILL	645	1.0%
CUMBERLAND	1,254	1.9%	SNYDER	220	0.3%
DAUPHIN	981	1.5%	SOMERSET	256	0.4%
DELAWARE	3,331	5.0%	SULLIVAN	27	0.0%
ELK	385	0.6%	SUSQUEHANNA	161	0.2%
ERIE	1,464	2.2%	TIOGA	135	0.2%
FAYETTE	369	0.6%	UNION	207	0.3%
FOREST	23	0.0%	VENANGO	232	0.4%
FRANKLIN	587	0.9%	WARREN	262	0.4%
FULTON	65	0.1%	WASHINGTON	1,429	2.2%
GREENE	108	0.2%	WAYNE	239	0.4%
HUNTINGDON	261	0.4%	WESTMORELAND	2,039	3.1%
INDIANA	367	0.6%	WYOMING	140	0.21%
JEFFERSON	375	0.6%	YORK	2,926	4.43%
JUNIATA	97	0.1%	TOTAL	66,036	100.0%

Source: DHS: Enterprise Data Warehouse.

ACKNOWLEDGEMENTS

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