Part I - Agency Profile

Agency Overview

In 1982, legislation was enacted to establish the Catastrophic Health Care Cost Program. (CAT) The program was designed by the counties, for the counties to cover the cost of treatment for catastrophic illness suffered by county residents who have no means to pay for the cost of that care. The program picks up the additional medical costs of these residents once the counties verify that payments have exceeded \$11,000 during a 12-month period. Legislation was enacted in 1991 to shift the program from county to state funding in FY 1994.

The CAT fund is governed by an administrative board, which is made up of a county commissioner representative from each of the six districts in Idaho, one Governor's appointee, four legislators—two from the Senate and two from the House, as appointed by the legislative leadership (two democrats and two republicans)—and a representative of the Idaho Department of Health & Welfare. Each commissioner serves a two-year term, is elected by the county commissioners of their district, and can serve as many consecutive terms as their constituents wish. The governor's appointee serves at the pleasure of the governor; the health & welfare representative serves at the pleasure of the Director of the Dept. of Health & Welfare, and legislators serve at the pleasure of their leadership. The Board meets approximately every eight to 10 weeks or as necessary for the administration of the CAT fund.

The Catastrophic Health Care Cost Program Board acts as the administrator for the fund and contracts out the day-to-day business of managing the CAT program. The contractor sees to the processing of all CAT cases, from initial case review to presenting them to the CAT board for determination, to the processing of payment of approved medical claims received from the counties. The contractor works closely with the social service directors and clerks of each county to facilitate payment of medical claims and to reconcile reimbursement payments received from patients. The CAT Board has recently renewed the contract with the Idaho Association of Counties, effective October 1, 2015 for one year. The fund has an annual independent audit done which is supplied to the state controller's office for inclusion in the state accounting report (CAFR).

Each year it is a challenge to meet the ever-growing needs of medical providers on behalf of the citizens of Idaho due to increasing health care costs. The CAT Board of Directors makes every attempt to protect both county and state taxpayer dollars. The implementation of the state health exchange appears to have reduced Idaho's dependency on the indigent program. The biggest drop is in non-emergent services requests, which depending on timing, were covered by assisting the patient with enrollment into the exchange prior to a procedure, thus taking those Idaho residents between 100% and 138% of federal poverty level out of the indigent program. While case load seems to be flattening out, spending is on a much slower decline.

Core Functions/Idaho Code

The purpose of the CAT fund is to assist in covering Idaho residents' medical expenses when they are determined by their resident county to be *medically* indigent. People must first qualify for financial assistance through an application process with their county. The counties pay the first \$11,000.00 of each indigent's medical bills. The counties then submit the cases to the CAT fund for consideration for payment. After a review by the Board of Directors, the CAT fund pays approved claims that exceed \$11,000.00 per applicant during a 12-month period. A lien is placed, and the applicant must repay the debt over time. All pursuant to Chapter 35, Title 31, Idaho Code.

Budgeting for 2017

Estimates for FY 2017 will be slightly lower using the customary assumptions based on historical data and including adjustments based on anticipated program declines outlined above. The unpredictability of this program lies in the essence of its creation. It is not practicable to attempt to predict catastrophic medical events in people's lives. Therefore, while historical data is appropriate, a cushion must also be included to account for the inconsistencies that abound in this program.

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Revenue and Expenditures:

Revenue	FY 2012	FY2013	FY2014	FY2015
CAT Health Care - General	\$35,337,700	<u>\$36,532,800</u>	\$34,830,100	\$34,966,300
Negative appropriation			(6,430,773)	
CAT Health Care - Other	\$ 3,248,097	<u>\$ 3,797,675</u>	\$ 2,931,213	\$ 2,611,245
Total	\$38,585,797	\$40,330,475	\$37,761,313	\$37,577,545
Expenditures	FY 2012	FY2013	FY2014	
Operating Expenditures	\$292,087	\$365,310	\$382,436	\$387,824
Trustee/Benefit Payments	\$38,293,696	\$30,718,074	\$28,005,999	\$18,582,666
Total	\$38,585,783	\$31,061,384	\$28,388,435	\$18,970,491

(Note: Revenue does not include noncogs and receipts to appropriation.)

Profile of Cases Managed and/or Key Services Provided

Cases Managed and/or Key Services Provided	FY 2012	FY 2013	FY2014	FY 2015
Payments for medical services (Inc. PCIP)	\$38,293,696	\$30,718,074	\$28,005,999	\$18,582,666
No. of New CAT Cases Fiscal year	1292	1150	1108	721
Cost per case	25,351	26,711	25,276	\$25,773

Performance Highlights:

Pursuant to Idaho Code 31-3504, an automatic lien is attached to all real and personal property of the applicant and on insurance benefits to which the applicant may become entitled. This statute has created additional funding to be used by the counties and the CAT fund for the increasing medical costs and needs of the indigent citizens of Idaho. This is reported as 'Reimbursements Received'.

Part II - Performance Measures

Performance Measure	FY 2012	FY 2013	FY 2014	FY 2015	Benchmark
1. To pay medical bills for qualified medically indigent persons exceeding \$11,000.	Paid	Paid	Paid	Paid	To pay
	\$38,293,696	\$30,718,074	\$28,005,999	\$18,582,666	\$22,000,000
	In claims for	In claims for	In claims for	In claims for	in claims for
	1292 indigents	1150 indigents	1108 indigents	721 indigents	750 indigents
2. Administer the fees and costs paid.	\$292,087	\$364,310	\$382,436	\$387,824	\$390,000
3. Obtain reimbursement from counties on behalf of the indigents.	Received	Received	Received	Received	To receive
	\$ 2,726,507	\$ 2,222,516	\$2,525,675	\$2,540,678	\$2,550,000

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For More Information Contact

Kathryn Mooney, Director Catastrophic Health Care Cost Program 700 W. Washington St.

Boise, ID 83702 Phone: (208) 345-1366 E-mail: kmooney@idcounties.org

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