State: Maryland Agency: CMS

Medical Assistance Expenditures by Type of Service For the Medical Assistance Program Expenditures in this Quarter

Quarter/Year: Qtr 4th 2021 Quarter Ended: 9/30/2021

Medical Assistance Payments		Federal Share						
	Total Computable	FMAP 56.20%	I.H.S Facility Services 100%	Family Planning Services 90%		Other % (*)		Federal Shar
		ARP Section 9817 66.20% **			Optional Breast or Cervical Cancer*	NON COVID FMAP (#)	Federal Share	
	(A)	(B)	(C)	(D)	(E)	(F)		(G)
1A) Inpatient Hospital - Reg. Payments								
1B) Inpatient Hospital - DSH								
1C) Inpatient Hospital - Sup. Payments								
1D) Inpatient Hospital - GME Payments								
2A) Mental Health Facility Services - Reg. Payments								
2B) Mental Health Facility - DSH								
2C) Certified Community Behavior Health Clinic Payments								
3A) Nursing Facility Services - Reg. Payments								
3B) Nursing Facility Services - Sup. Payments								
4A) Intermediate Care Facility Services - Ind. with Intellectual Disabilities: Public Providers								
4B) Intermediate Care Facility Services - Ind. with Intellectual Disabilities: Private Providers								
4C) Intermediate Care Facility Services - Ind. with Intellectual Disabilities: Supplemental Payments								
5A) Physician & Surgical Services - Reg. Payments								
5B) Physician & Surgical Services - Sup. Payments								
5C) Physician & Surgical Services - Evaluation and Management								
5D) Physician & Surgical Services - Vaccine codes								
6A) Outpatient Hospital Services - Reg. Payments								
6B) Outpatient Hospital Services - Sup. Payments								
7) Prescribed Drugs								
7A1) Drug Rebate Offset - National								

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7A2) Drug Rebate Offset - State Sidebar Agreement					
7A3) MCO - National Agreement					
7A4) MCO - State Sidebar Agreement					
7A4) MCO - State Sidebar Agreement					
7A5) Increased ACA OFFSET - Fee for Service - 100%					
7A6) Increased ACA OFFSET - MCO - 100%					
8) Dental Services					
of Derital Services					
9A) Other Practitioners Services - Reg. Payments					
9B) Other Practitioners Services - Sup. Payments					
10) Clinic Services					
11) Laboratory/Radiological					
12) Home Health Services					
12) Home Health Services					
13) Sterilizations					
14) Abortions No. 0					
15) EPSDT Screening					
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16) Rural Health					
17A) Medicare - Part A					
17A) Medicale - Part A					
17B) Medicare - Part B					
17C1) 120% - 134% Of Poverty					
17D) Coinsurance					
275) comparance					
18A) Medicaid - MCO					
18A1) Medicaid MCO - Evaluation and					
Management					
18A2) Medicaid MCO - Vaccine codes					
·					
18A3) Medicaid MCO - Community First Choice					
18A4) Medicaid MCO - Preventive Services Grade A					
OR B, ACIP Vaccines and their Admin 18A5) Medicaid MCO - Certified Community					
Behavior Health Clinic Payments					
18A6) Medicaid MCO - Services Subject to	+				
Electronic Visit Verification Requirements					
18B1) Prepaid Ambulatory Health Plan					

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18B1a) MCO PAHP - Evaluation and Management						
18B1b) MCO PAHP - Vaccine codes						
18B1c) MCO PAHP - Community First Choice						
18B1d) MCO PAHP - Preventive Services Grade A						
OR B, ACIP Vaccines and their Admin						
18B1e) Medicaid PAHP - Certified Community						
Behavior Health Clinic Payments						
18B1f) MCO PAHP - Services Subject to Electronic						
Visit Verification Requirements						
18B2) Prepaid Inpatient Health Plan						
2002) Trepaid Impatient Treatment						
18B2a) MCO PIHP - Evaluation and Management						
2002a, WCO 1 III Evaluation and Management	+					
18B2b) MCO PIHP - Vaccine codes						
10020) WICO PIRP - Vaccille codes						
1993a) MCO BILID. Community First Chairs						
18B2c) MCO PIHP - Community First Choice	 					
18B2d) MCO PIHP - Preventive Services Grade A OR						
B, ACIP Vaccines and their Admin						
18B2e) Medicaid PIHP - Certified Community						
Behavior Health Clinic Payments						
18B2f) MCO PIHP - Services Subject to Electronic						
Visit Verification Requirements						
18C) Medicaid - Group Health						
18D) Medicaid - Coinsurance						
18E) Medicaid - Other						
19A) Home & Community-Based Services - Regular						
Payment (1915(c) Waiver)						
19B) Home & Community-Based Services - St. Plan						
1915(i) Only Pay.						
19C) Home & Community-Based Services - St. Plan						
1915(j) Only Pay.						
19D) Home & Community Based Services State Plan						
1915(k) Community First Choice						
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22) All-Inclusive Care Elderly						
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23A) Personal Care Services - Reg. Payments						
25. 9 . Gradial care services Tieg. Layments	+					
23B) Personal Care Services - SDS 1915(j)						
24A) Targeted Case Management Services - Com.						
Case-Man.						
Case-Iviali.						
240) 6 14						
24B) Case Management - State Wide						
25) Primary Care Case Management						
26) Hospice Benefits						

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27) Emergency Services for Undocumented Aliens					
28) Federally-Qualified Health Center					
29) Non-Emergency Medical Transportation					
30) Physical Therapy					
30) Physical Therapy					
31) Occupational Therapy					
, , ,					
32) Services for Speech, Hearing & Language					
33) Prosthetic Devices, Dentures, Eyeglasses					
34) Diagnostic Screening & Preventive Services					
34A) Preventive Services Grade A OR B, ACIP					
Vaccines and their Admin					
35) Nurse Mid-Wife					
36) Emergency Hospital Services					
37) Critical Access Hospitals					
37) critical Access Hospitals					
38) Nurse Practitioner Services					
39) School Based Services					
40) 0 1 1 1111 11 6 1 1 1 1 1 1					
40) Rehabilitative Services (non-school-based)					
41) Private Duty Nursing					
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42) Freestanding Birth Center					
43) Health Home for Enrollees w Chronic					
Conditions					
44) 7 1					
44) Tobacco Cessation for Preg Women 45) Health Home for Enrollees w Substance-Use-					
Disorder					
46) OUD Medicaid Assisted Treatment – Drugs					
46A1) OUD MAT DRUG REBATE/National					
Agreement					
ACAD OUR MAT DRUG DERATE/Chata Cill					
46A2) OUD MAT DRUG REBATE/State Sidebar 46A3) OUD MAT DRUG REBATE MCO /National					
Agreement					
46A4) OUD MAT DRUG REBATE MCO /State	,				
Sidebar					
46A5) OUD MAT DRUG REBATE/Increased ACA					
Offset Fee for Service - 100%					
46A6) OUD MAT DRUG REBATE/Increased ACA					
Offset MCO – 100%					

46B) OUD Medicaid Assisted Treatment Services				
49) Other Care Services				
50) Total				

^{*} Optional Breast & Cervical Cancer Services calculated at an Enhanced FMAP rate of 85% and/or the IHS Services rate of 100%

^{**} Lines are calculated at the COVID FMAP rate of 78.78%

^{* =} Other , # = NON COVID FMAP