

Children's Special Health Care Services

CSHCS Enrollment and Expenditure Trends FY2012-FY2020



Children's Special
Health Care Services

www.michigan.gov/cshcs



Table of Contents

Part I. Overall Enrollment and Expenditure Patterns	2
Annual CSHCS Enrollment, FY2012 to FY2020	3
Average Monthly Enrollment, FY2012 to FY2020.....	3
Average Monthly Enrollment, With and Without Other Insurance, FY2012 to FY2020	4
CSHCS Enrollee Expenditures by Coverage Type	5
CSHCS Enrollee Expenditures by Type of Service.....	6
CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type.....	9
Part II. Enrollment and Expenditure Patterns by Diagnosis Group.....	12
CSHCS Diagnostic Categories.....	12
CSHCS Enrollment by Primary Qualifying Diagnosis, FY2015 to FY2020.....	13
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis).....	16
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group.....	19
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group, Stratified by Coverage Type.....	22



Part I. Overall Enrollment and Expenditure Patterns

Enrollment categories are based on benefit designations in the state's data warehouse:

- Children's Special Health Care Services (CSHCS) is part of Title V of the Federal Social Security Act; CSHCS enrollment is designated with a 5
- Traditional Medicaid is part of Title XIX of the Federal Social Security Act; traditional Medicaid coverage is designated with a 19
- Expanded Medicaid related to the State Children's Health Insurance Program is part of Title XXI of the Federal Social Security Act; coverage through MiChild or Healthy Kids Expansion is designated with a 21

CSHCS Enrollee: Individual with ≥ 1 month of CSHCS or CSHCS-MC benefit in the fiscal year

Monthly Enrollment: assigned based on individual's benefit plan

- 5/19 = both CSHCS/CSHCS-MC *and* traditional Medicaid (MA or MA-HMP)
- 5/21 = both CSHCS/CSHCS-MC *and* CHIP (MiChild, Healthy Kids Expansion)
- 5 Only = CSHCS *and* none of the above benefit plans

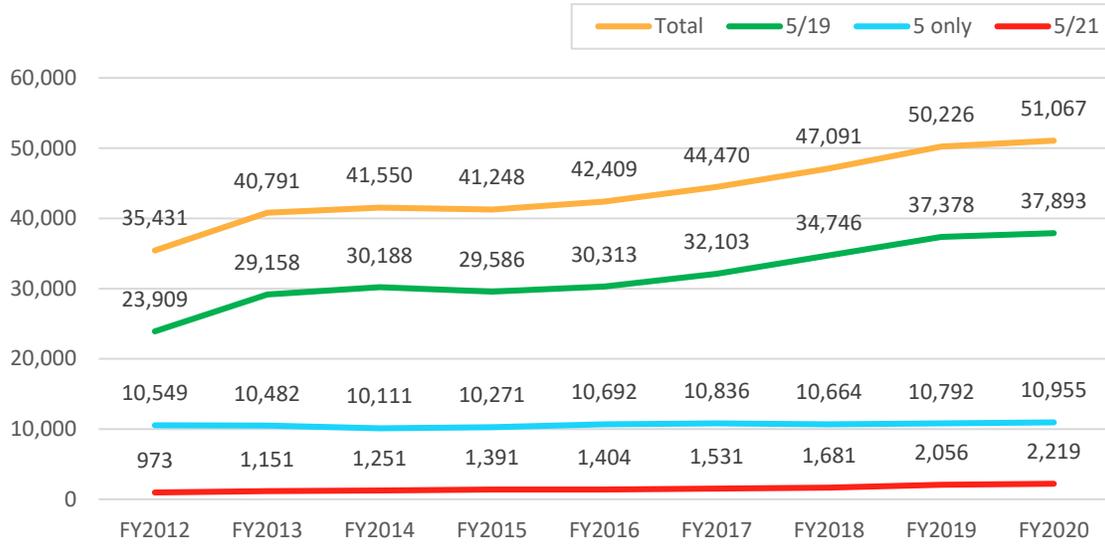
The 5 Only group may include individuals with limited-benefit Medicaid (e.g., Spenddown, emergency services only, or Medicare premium support plans)

Annual Enrollment: assigned based on individual's predominant benefit plan throughout the year (does not need to be concurrent with CSHCS)

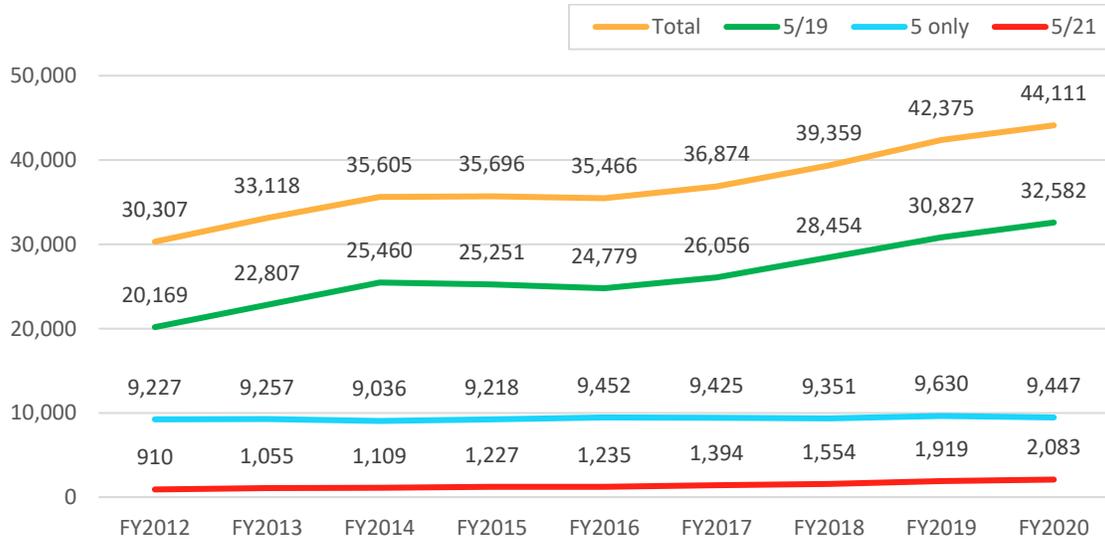
- 5/19 = ≥ 1 month of CSHCS/CSHCS-MC *and* ≥ 1 month of traditional Medicaid
- 5/21 = ≥ 1 month of CSHCS/CSHCS-MC *and* ≥ 1 month of expanded Medicaid
- 5 Only = ≥ 1 month of CSHCS *and* neither traditional nor expanded Medicaid

Other Insurance: Individual has a record in the third-party liability field that indicates presence of other "medical benefit" coverage

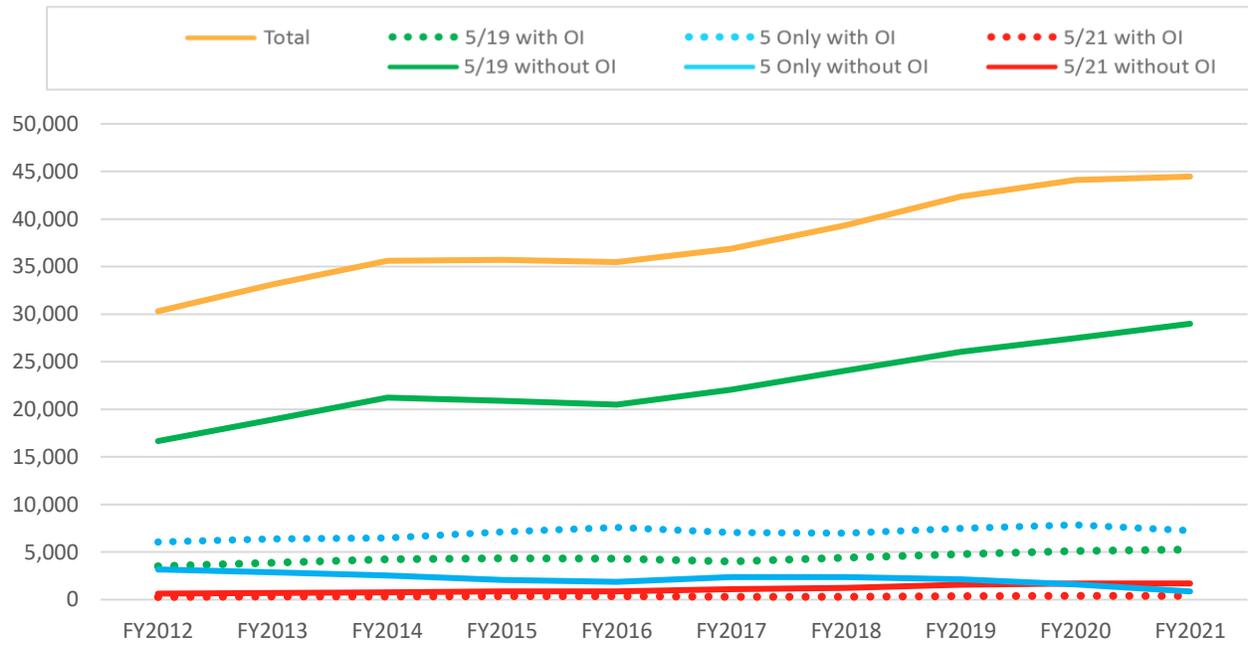
Annual CSHCS Enrollment – FY2012 to FY2020



Average Monthly Enrollment – FY2012 to FY2020



Average Monthly Enrollment, With and Without Other Insurance – FY2012 to FY2020

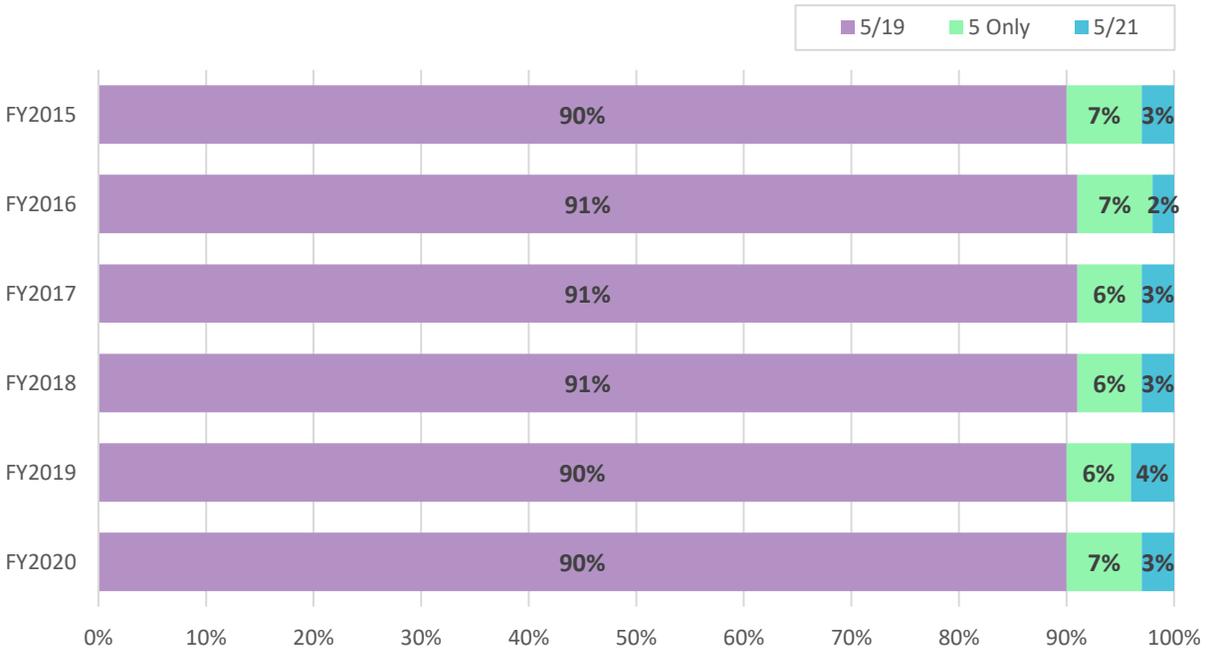


Expenditures reflect final adjusted records for months of CSHCS or CSHCS-MC enrollment. Expenditure totals include fee-for-service approved amount, managed care encounter paid amount, and pharmacy net amount due. Expenditures do not include pharmacy rebates, specialty mental health services, and most school-based services.

Annual expenditures by coverage type: assigned based on the individual’s predominant benefit plan throughout the year (see page 2) and including all expenditures for that individual

Annual expenditures by type of services: assigned based on service and location codes included in billing data

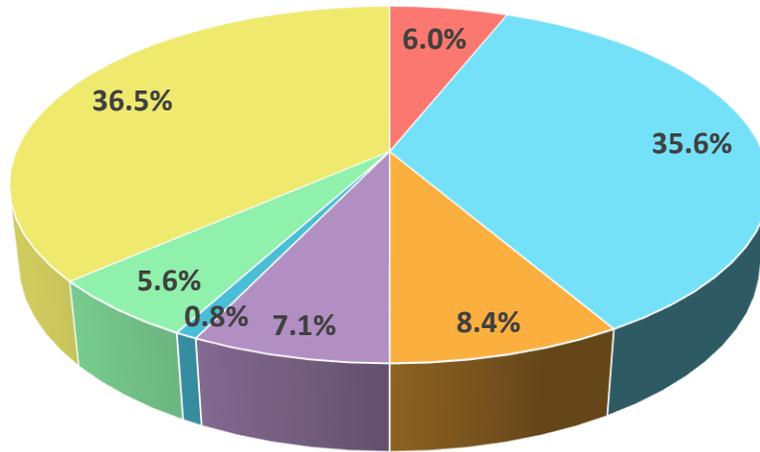
CSHCS Enrollee Expenditures by Coverage Type



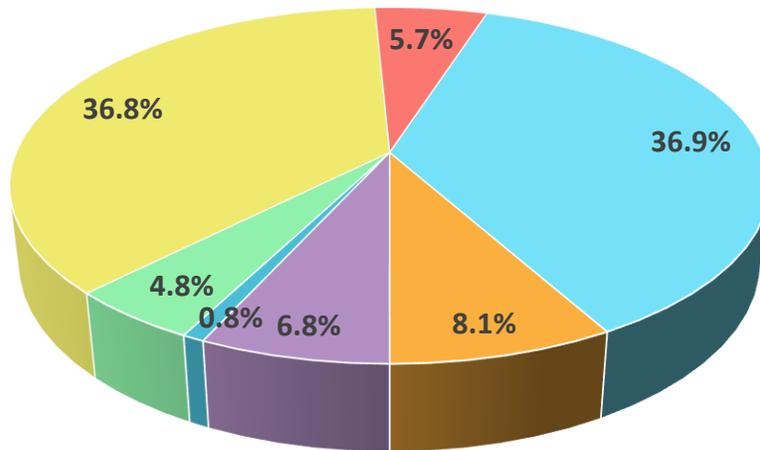
Type of Service Category



CSHCS Enrollee Expenditures by Type of Service – FY2015



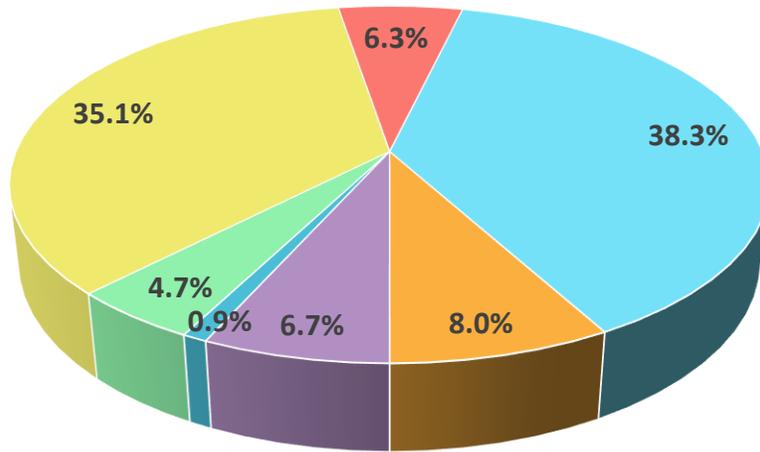
CSHCS Enrollee Expenditures by Type of Service – FY2016



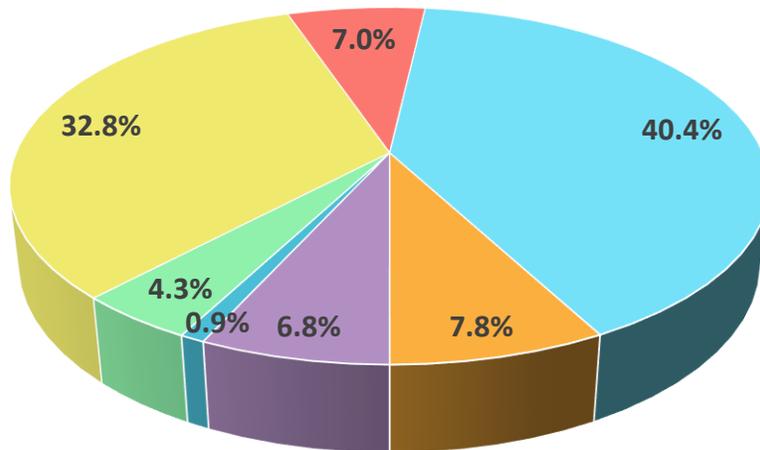
Type of Service Category

- Physician
- Pharmacy
- Outpatient Hospital
- Inpatient Hospital
- Home Health and PDN
- Hearing, Speech, Vision, and Dental
- Ancillary Services

CSHCS Enrollee Expenditures by Type of Service – FY2017



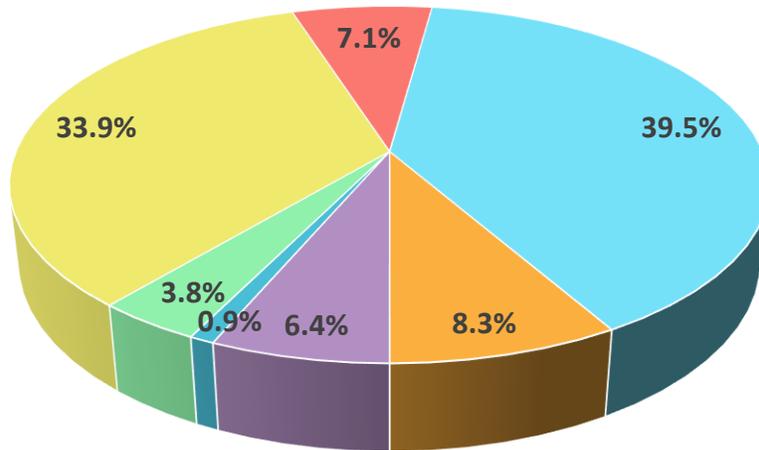
CSHCS Enrollee Expenditures by Type of Service – FY2018



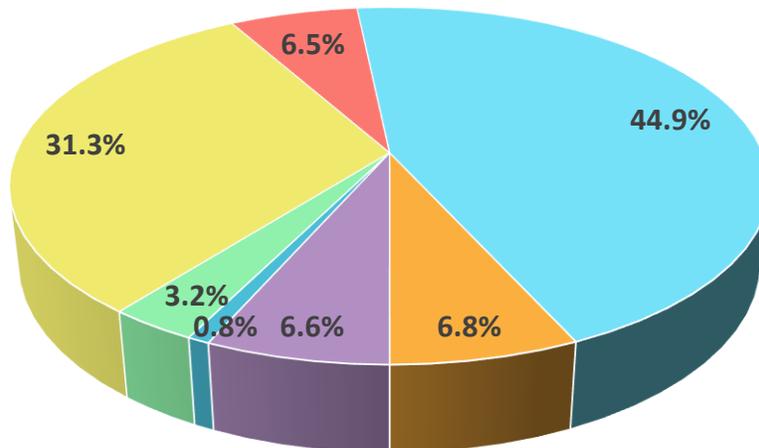
Type of Service Category



CSHCS Enrollee Expenditures by Type of Service – FY2019



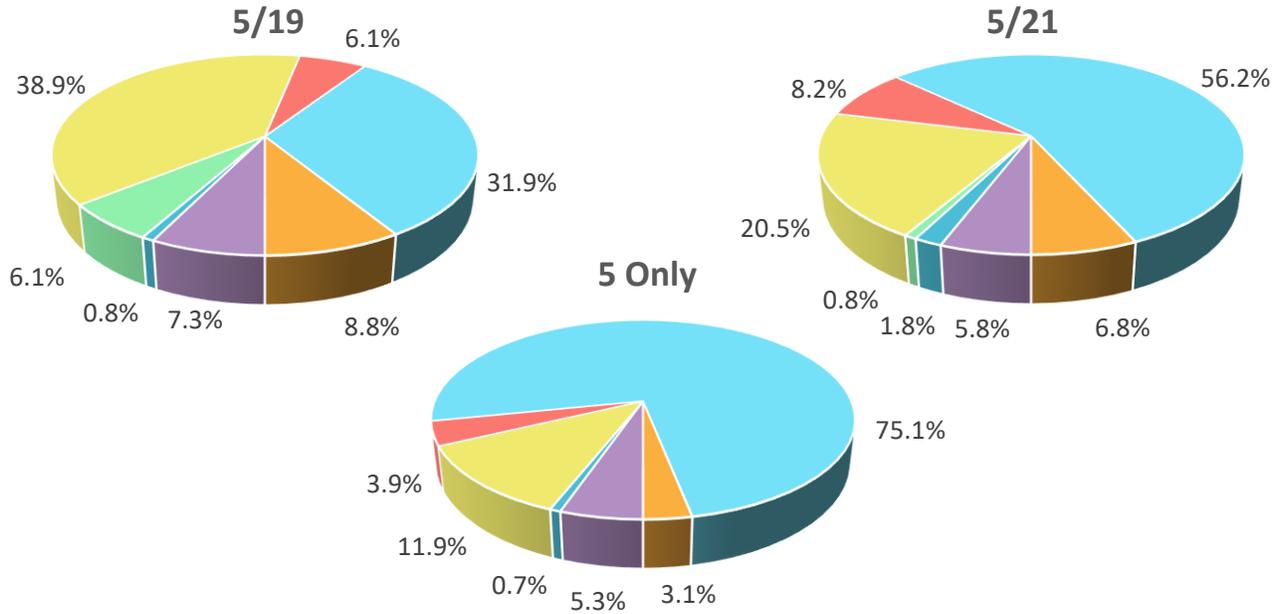
CSHCS Enrollee Expenditures by Type of Service – FY2020



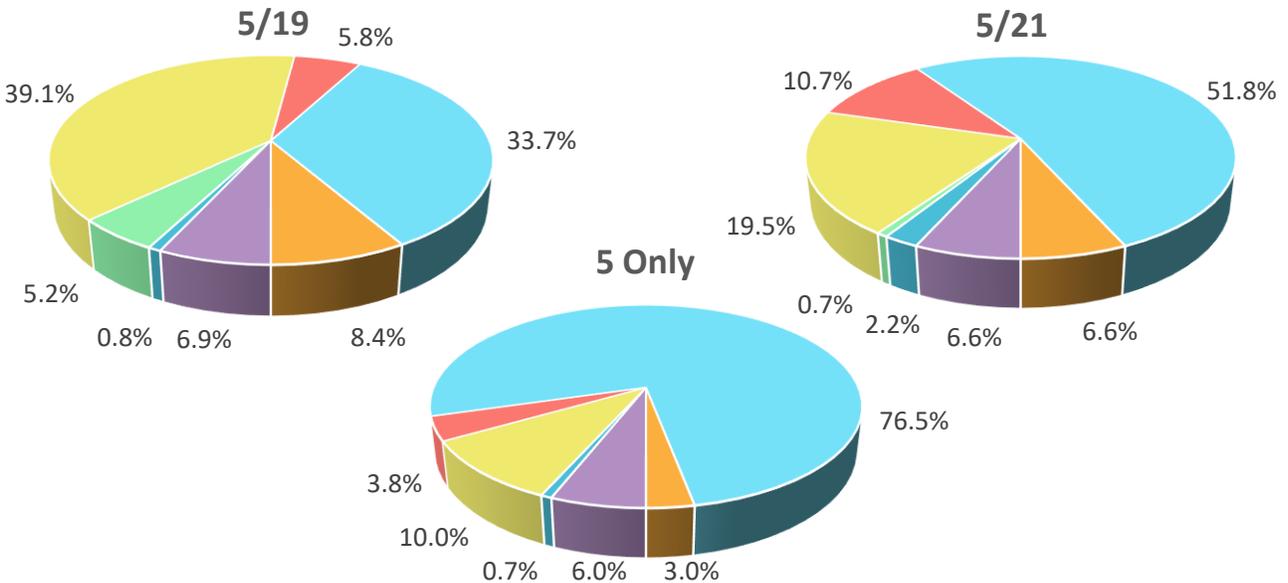
Type of Service Category



CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type – FY2015



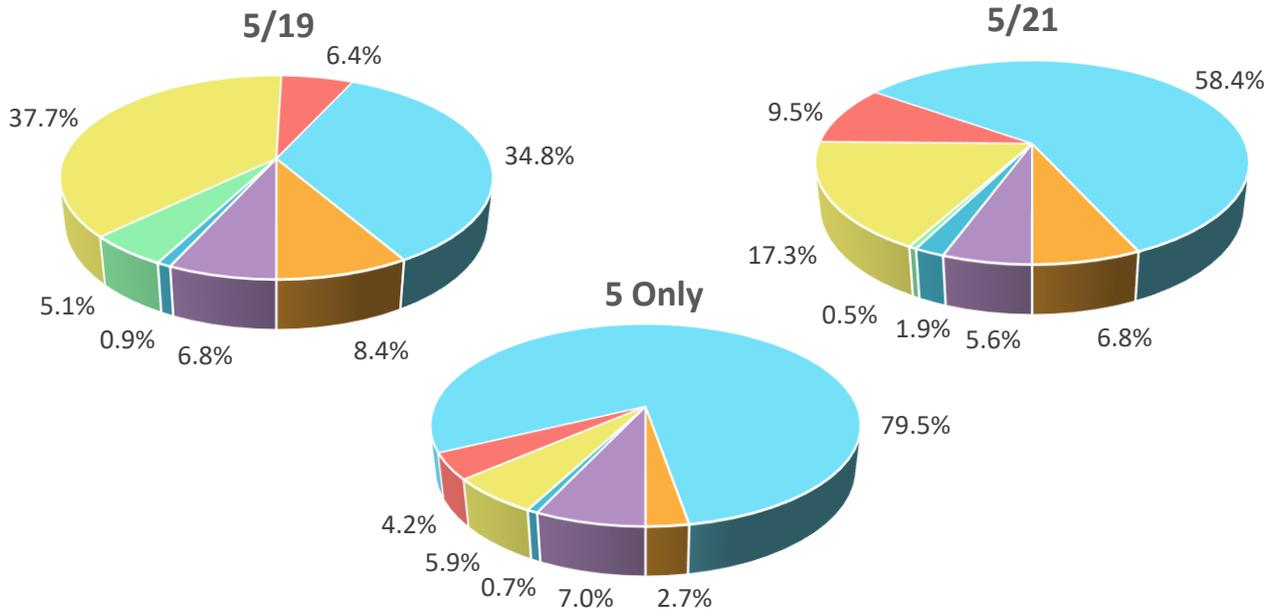
CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type – FY2016



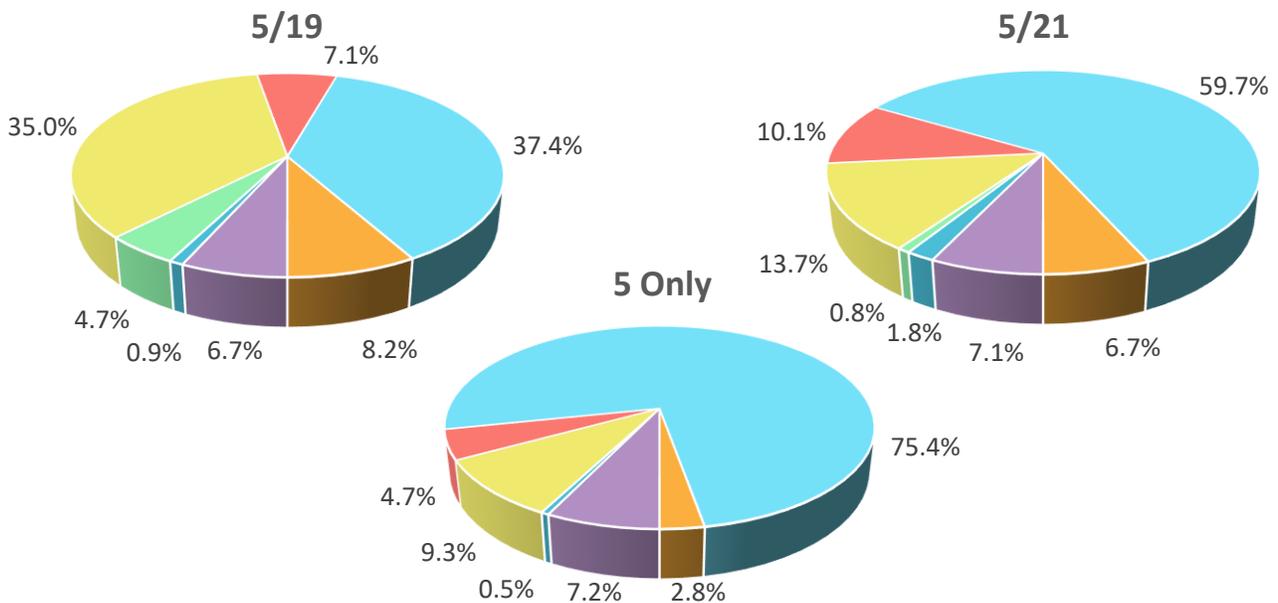
Type of Service Category



CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type – FY2017



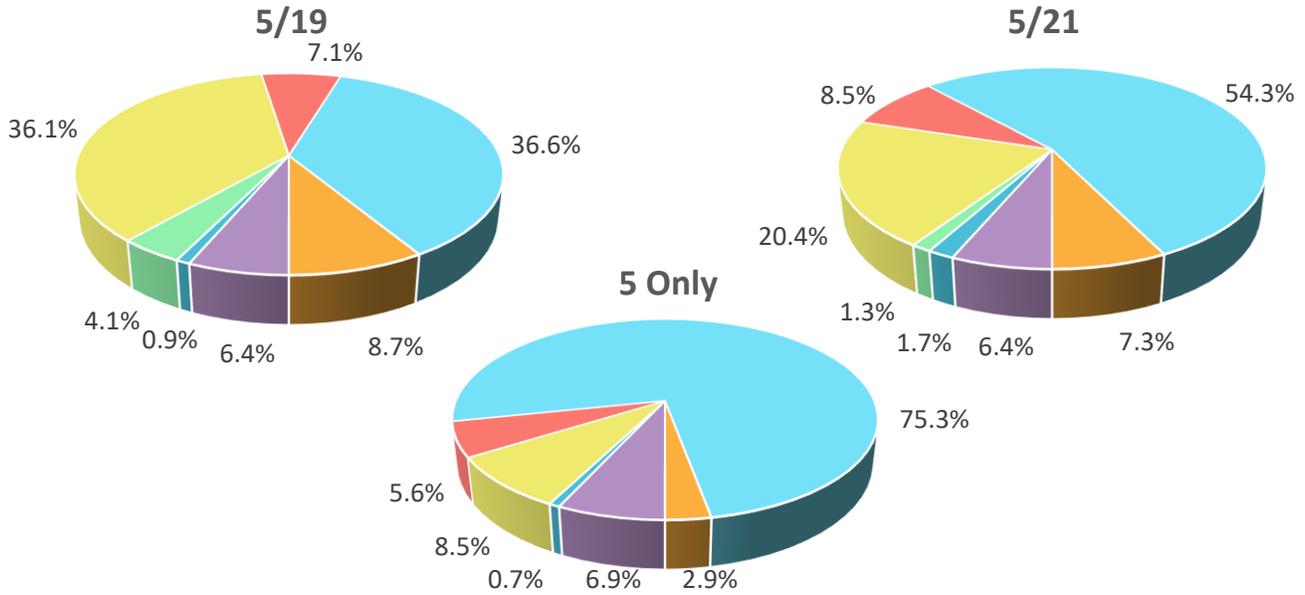
CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type – FY2018



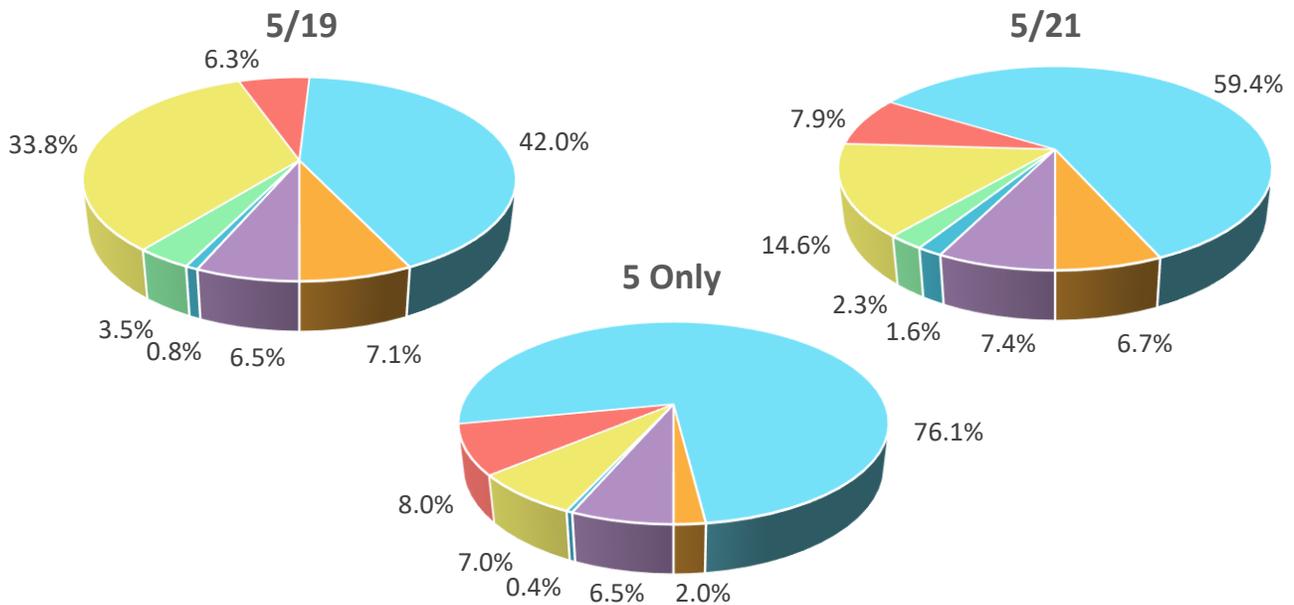
Type of Service Category



CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type – FY2019



CSHCS Enrollee Expenditures by Type of Service, Stratified by Coverage Type – FY2020



Part II. Enrollment and Expenditure Patterns by Diagnosis Group

CSHCS eligibility is based on being diagnosed with one or more of the program’s 2700 qualifying medical conditions. Qualifying conditions are identified with diagnosis codes, which are grouped by body system.

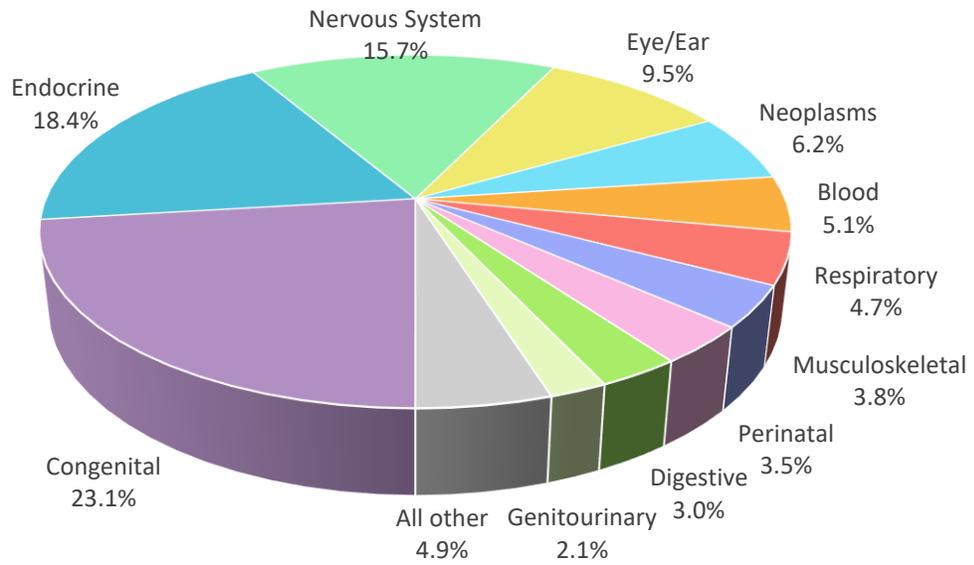
Primary qualifying condition: each CSHCS enrollee is assigned to body system group based on the diagnosis code listed first in the individual’s CSHCS enrollment record.

Any qualifying condition: counts all conditions listed in the individual’s CSHCS enrollment record.

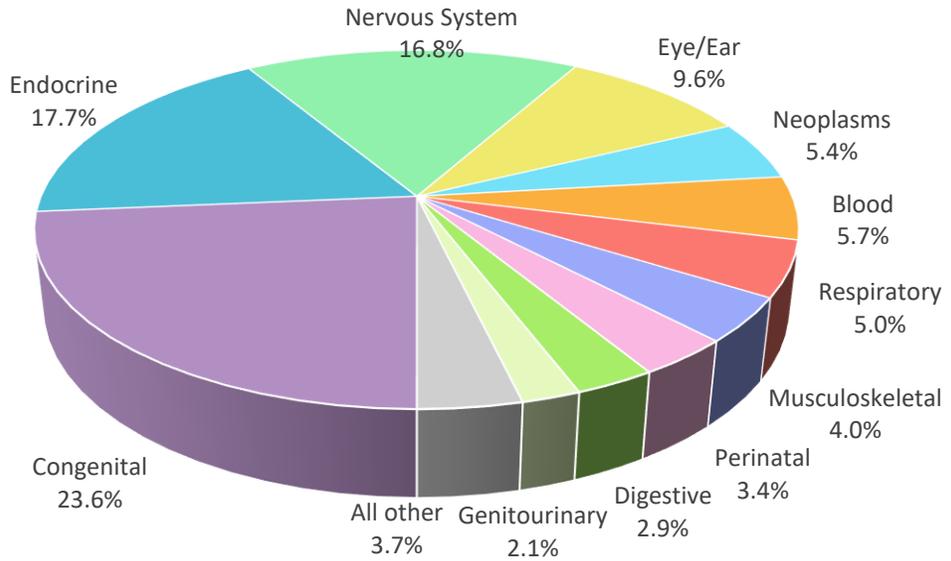
CSHCS Diagnostic Categories

Congenital malformations, deformations, and chromosomal abnormalities	Congenital
Endocrine, nutritional, and metabolic diseases	Endocrine
Diseases of the nervous system	Nervous
Diseases of the eye and ear	Eye and ear
Diseases of the blood and blood forming organs	Blood
Neoplasms	Neoplasms
Diseases of the respiratory system	Respiratory
Diseases of the musculoskeletal system and connective tissue	Musculoskeletal
Conditions originating in the perinatal period	Perinatal
Diseases of the digestive system	Digestive
Diseases of the genitourinary system	Genitourinary
Diseases of the circulatory system	Circulatory
Injury, poisoning, and other consequences of external causes	Injury
Infectious and parasitic diseases	Infectious
Diseases of skin and subcutaneous tissue	Skin
Symptoms, signs, and abnormal findings, not elsewhere classified	Not elsewhere

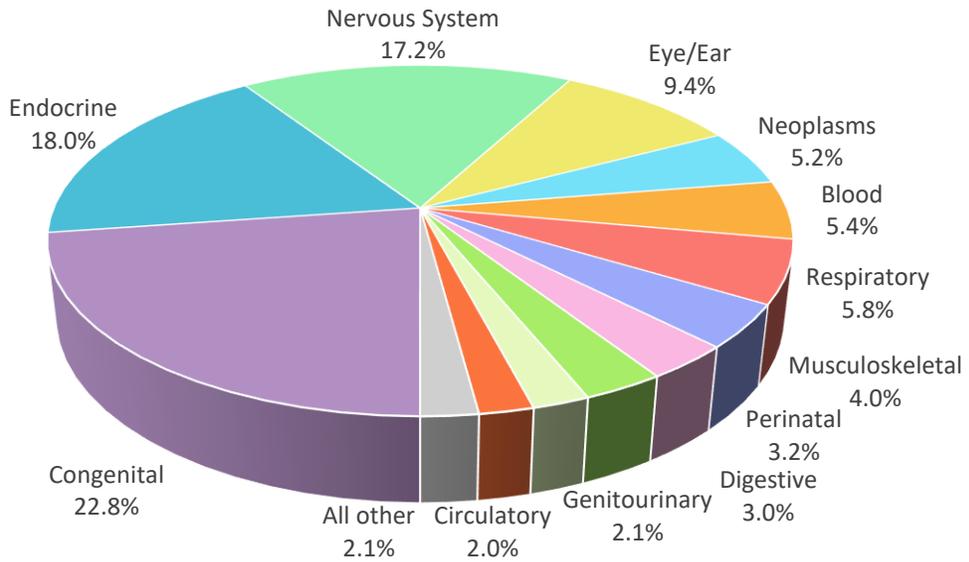
CSHCS Enrollment by Primary Qualifying Diagnosis – FY2015



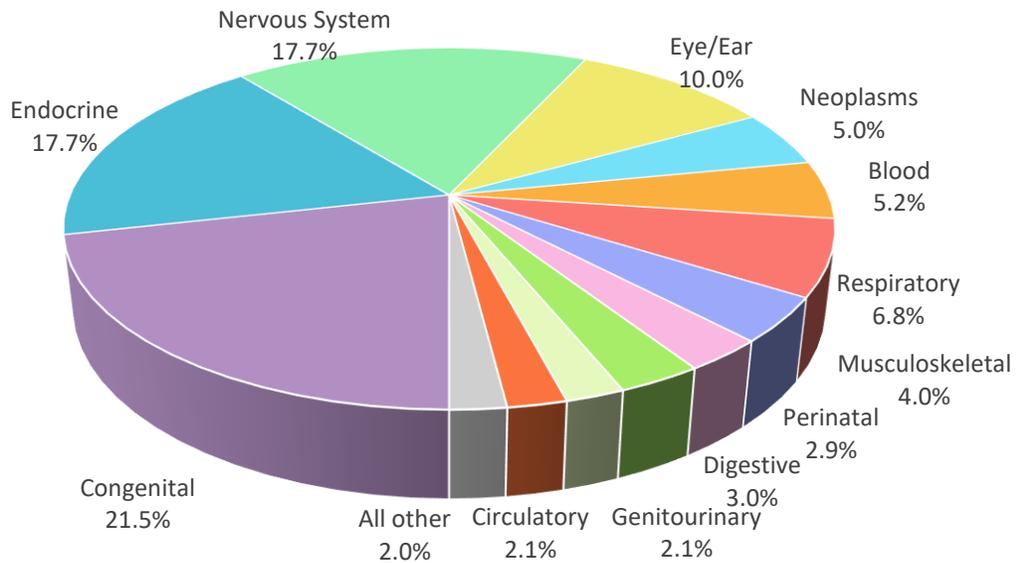
CSHCS Enrollment by Primary Qualifying Diagnosis – FY2016



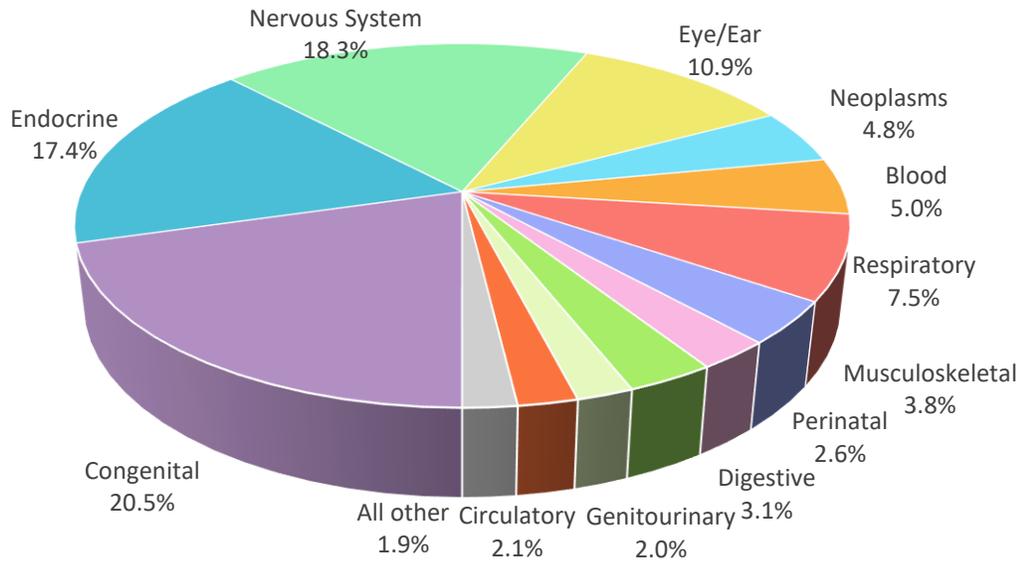
CSHCS Enrollment by Primary Qualifying Diagnosis – FY2017



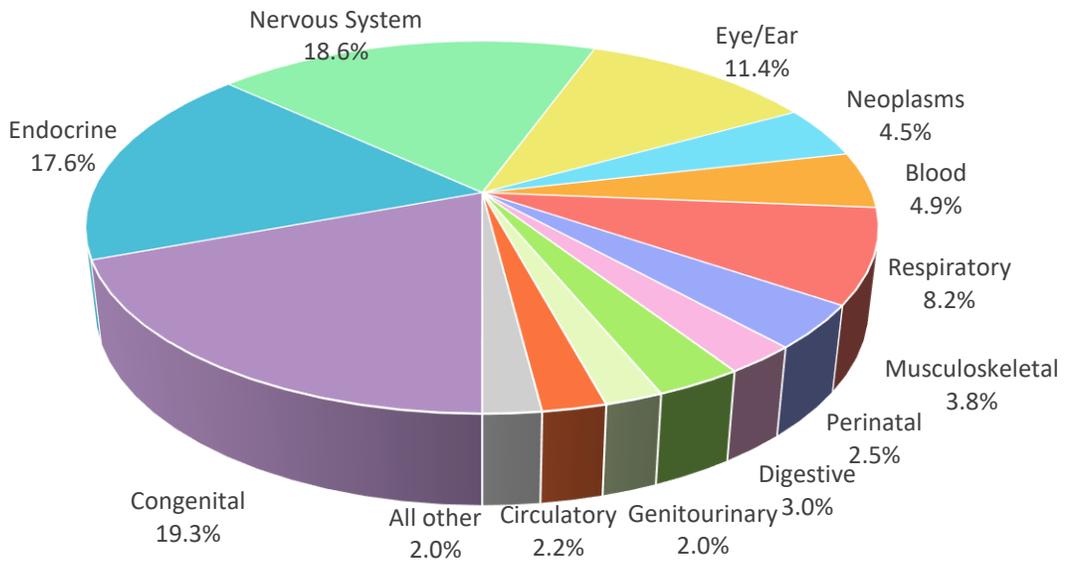
CSHCS Enrollment by Primary Qualifying Diagnosis – FY2018



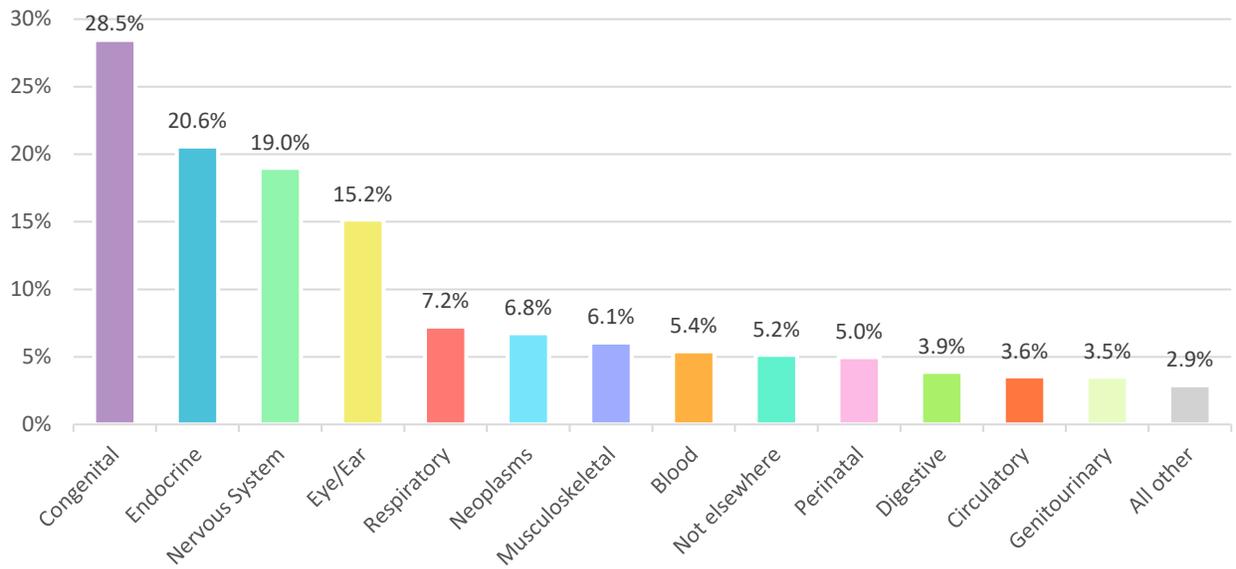
CSHCS Enrollment by Primary Qualifying Diagnosis – FY2019



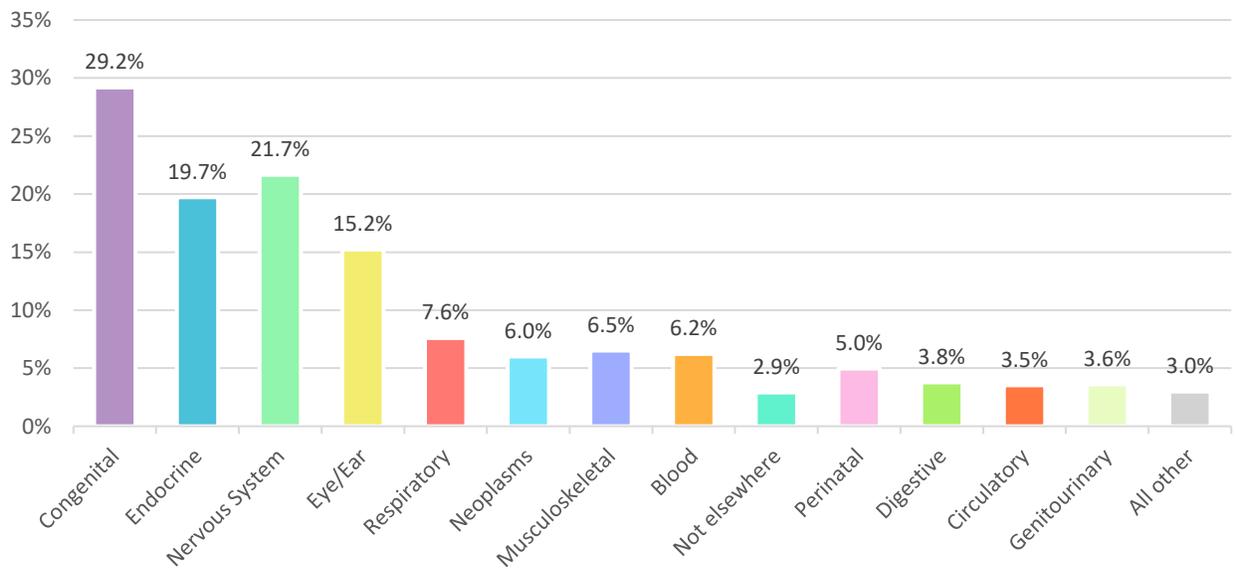
CSHCS Enrollment by Primary Qualifying Diagnosis – FY2020



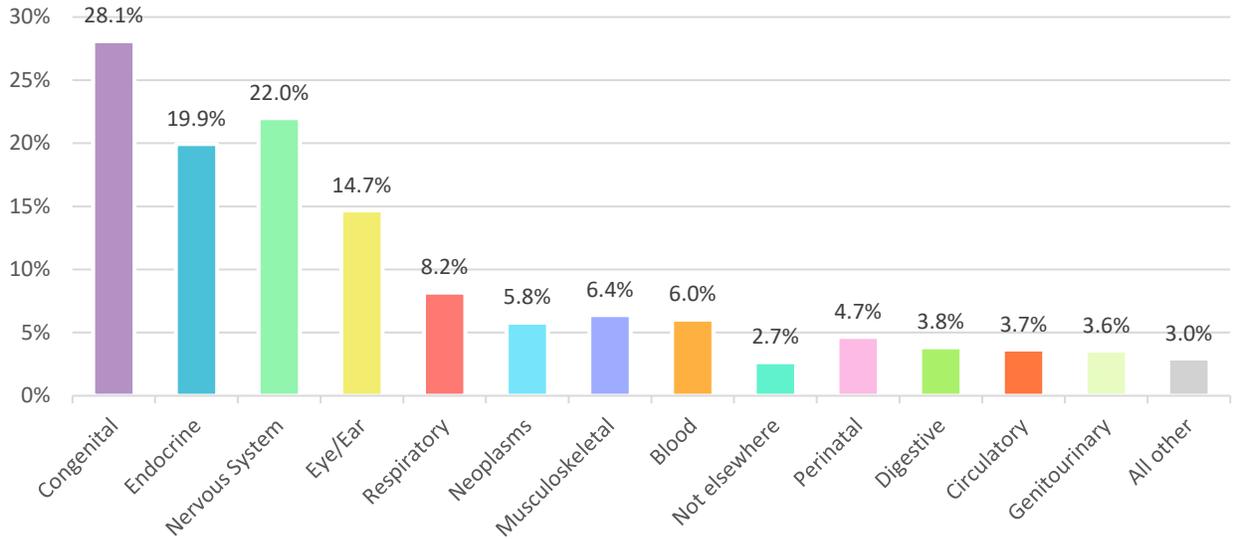
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis) – FY2015



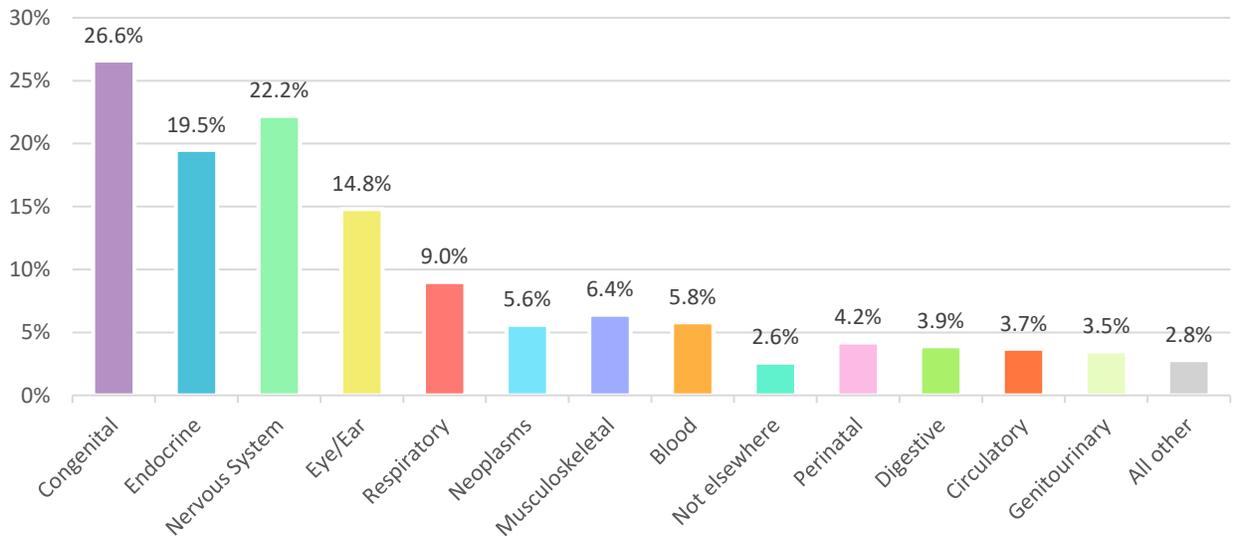
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis) – FY2016



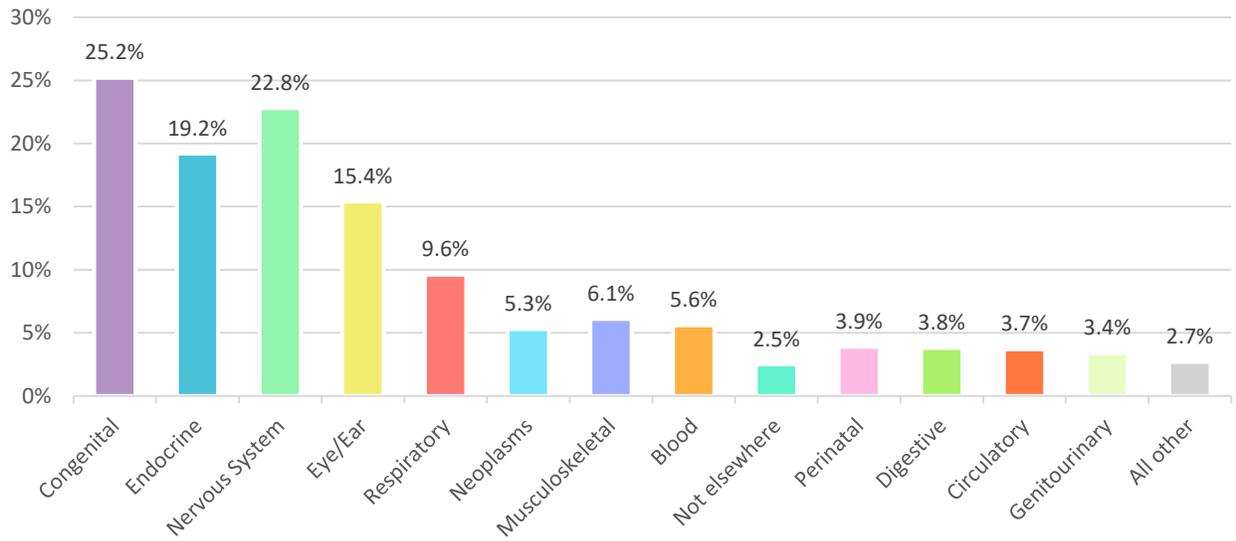
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis) – FY2017



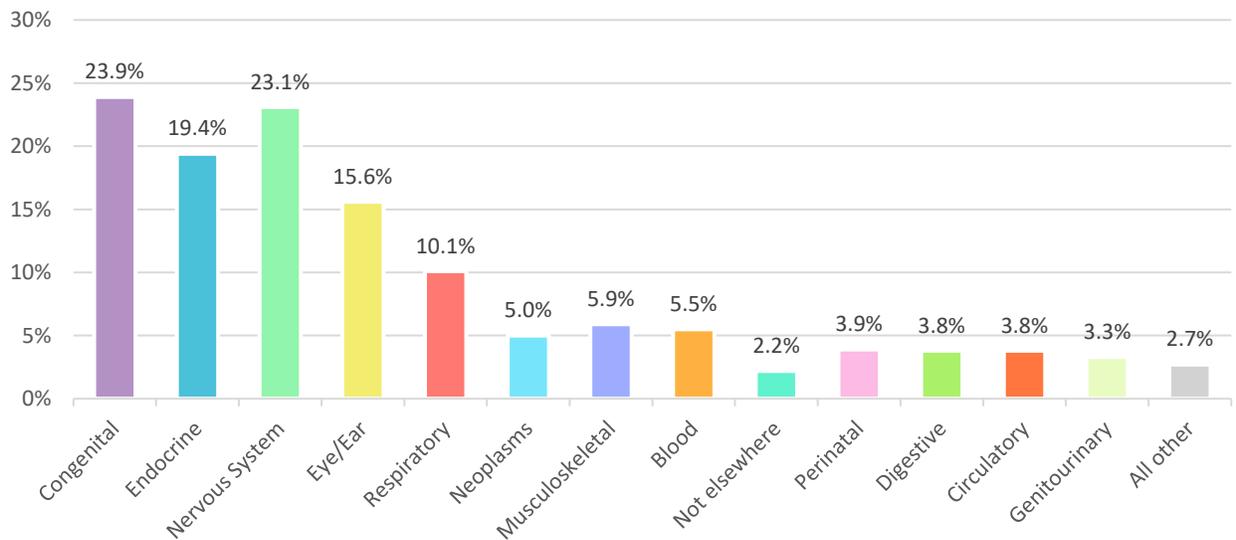
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis) – FY2018



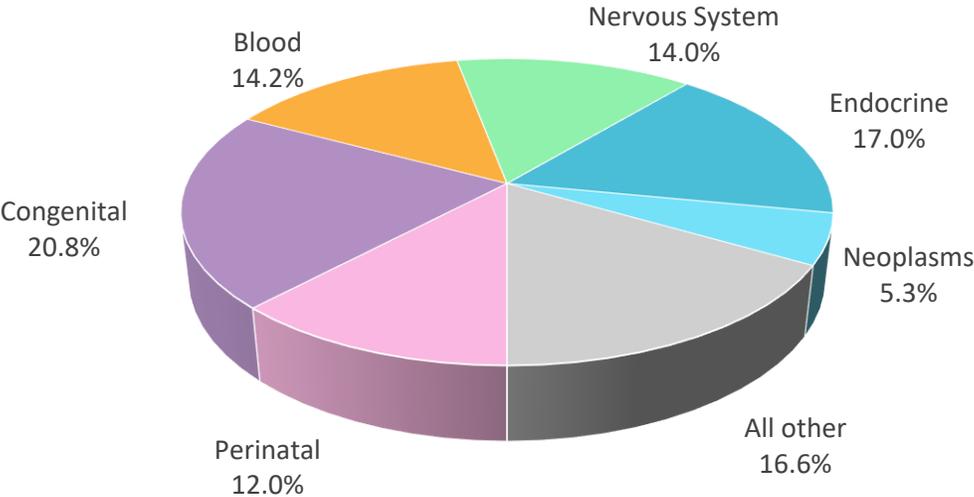
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis) – FY2019



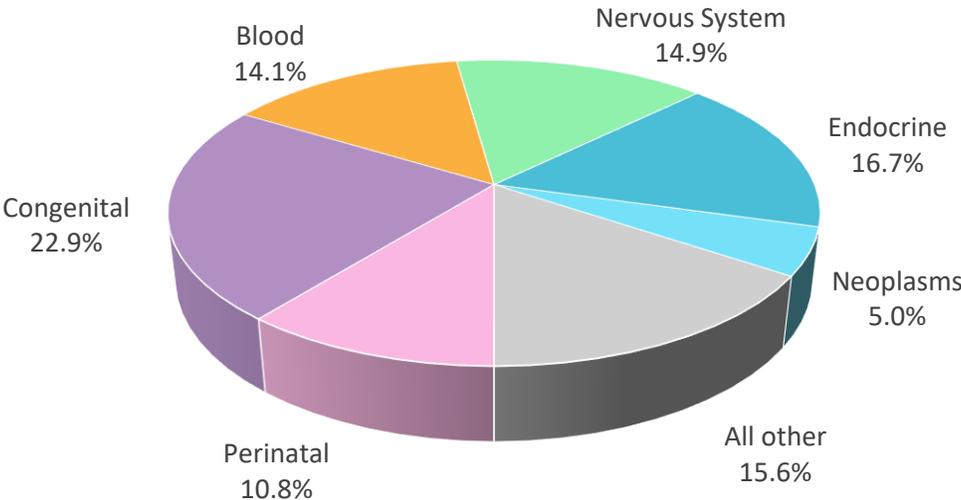
CSHCS Enrollment by Diagnosis Group (any qualifying diagnosis) – FY2020



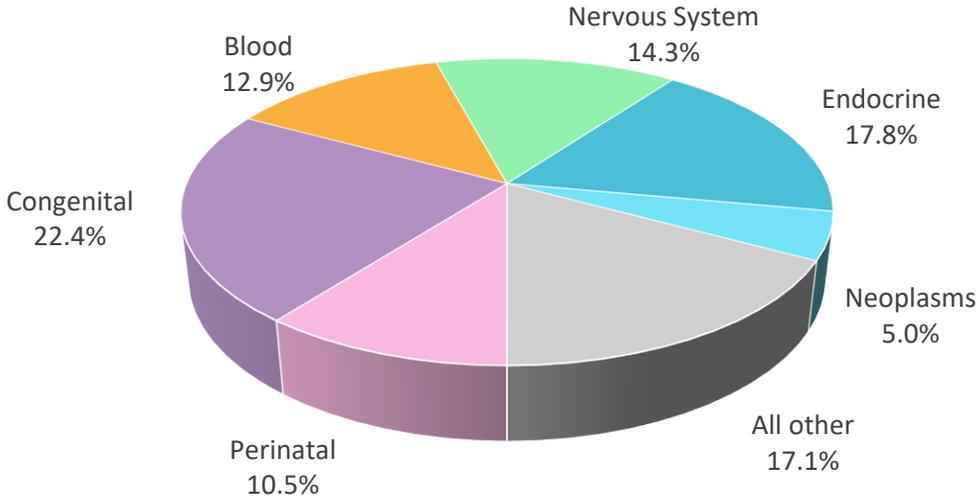
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group – FY2015



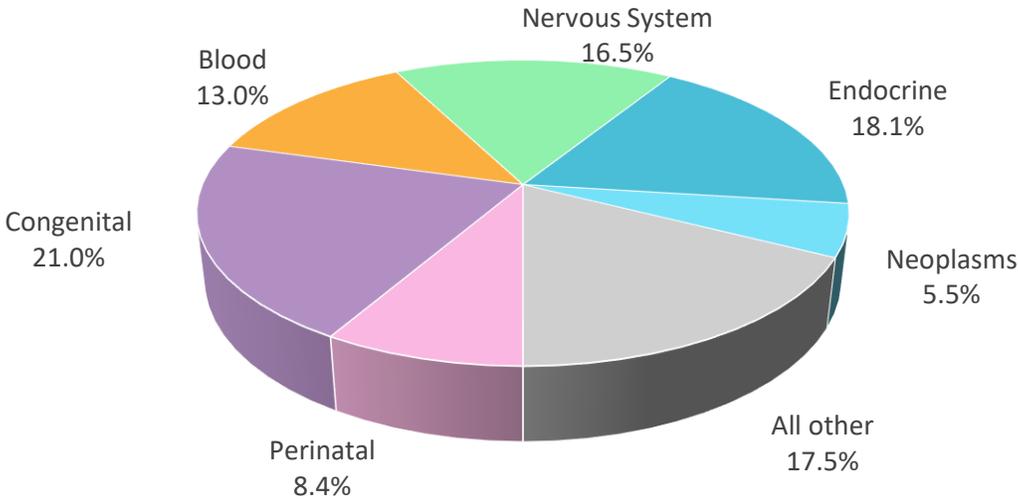
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group – FY2016



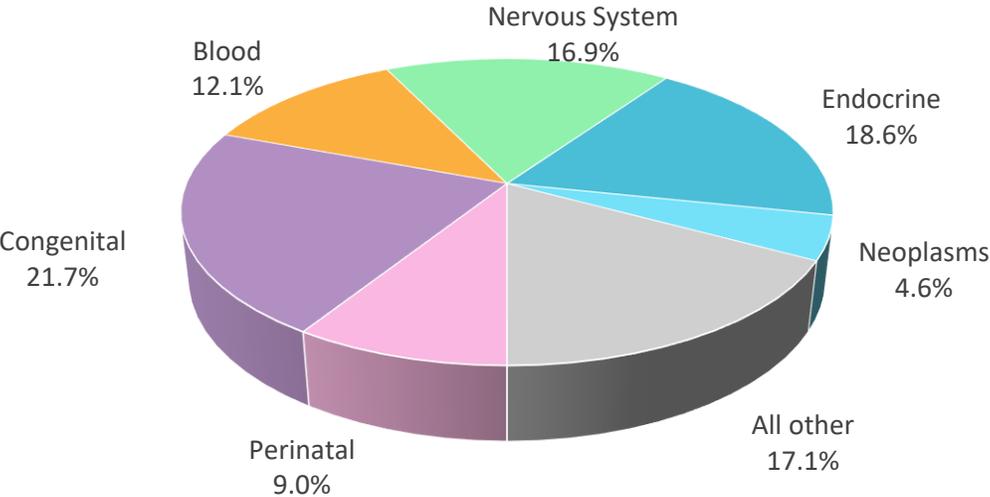
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group – FY2017



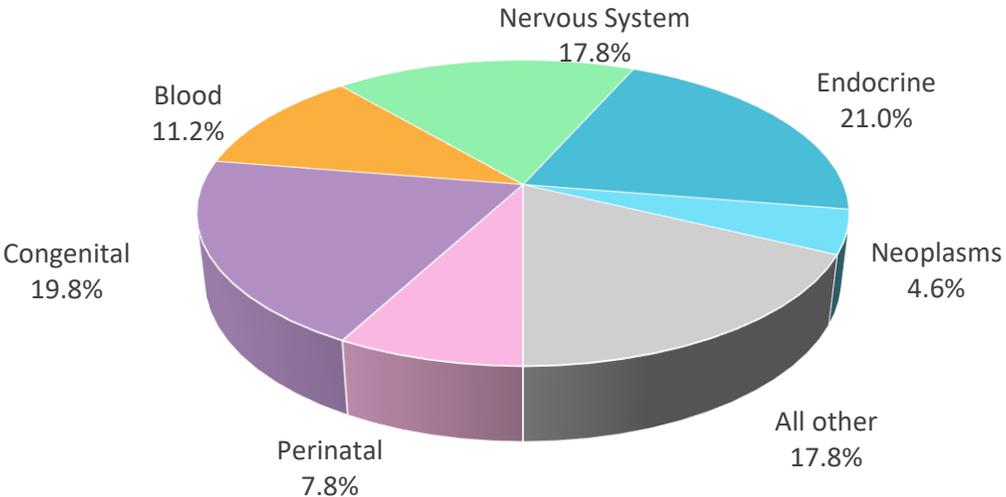
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group – FY2018



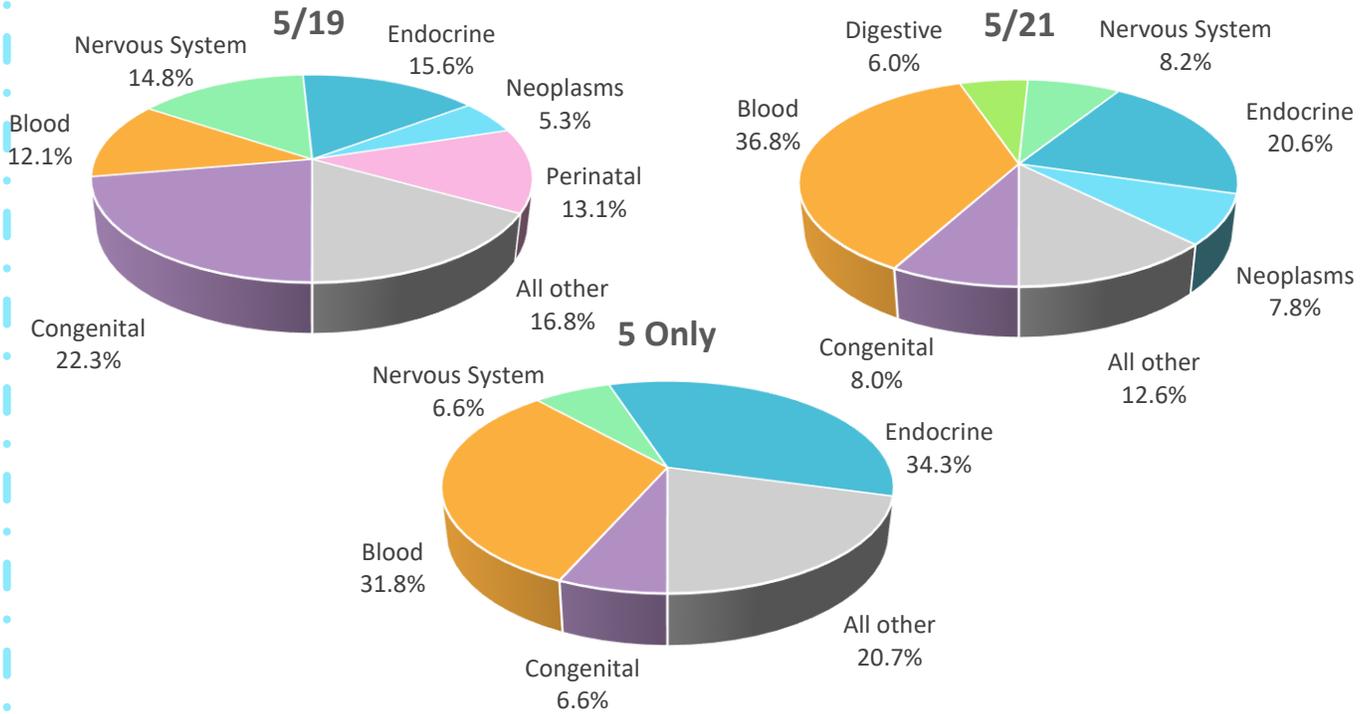
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group – FY2019



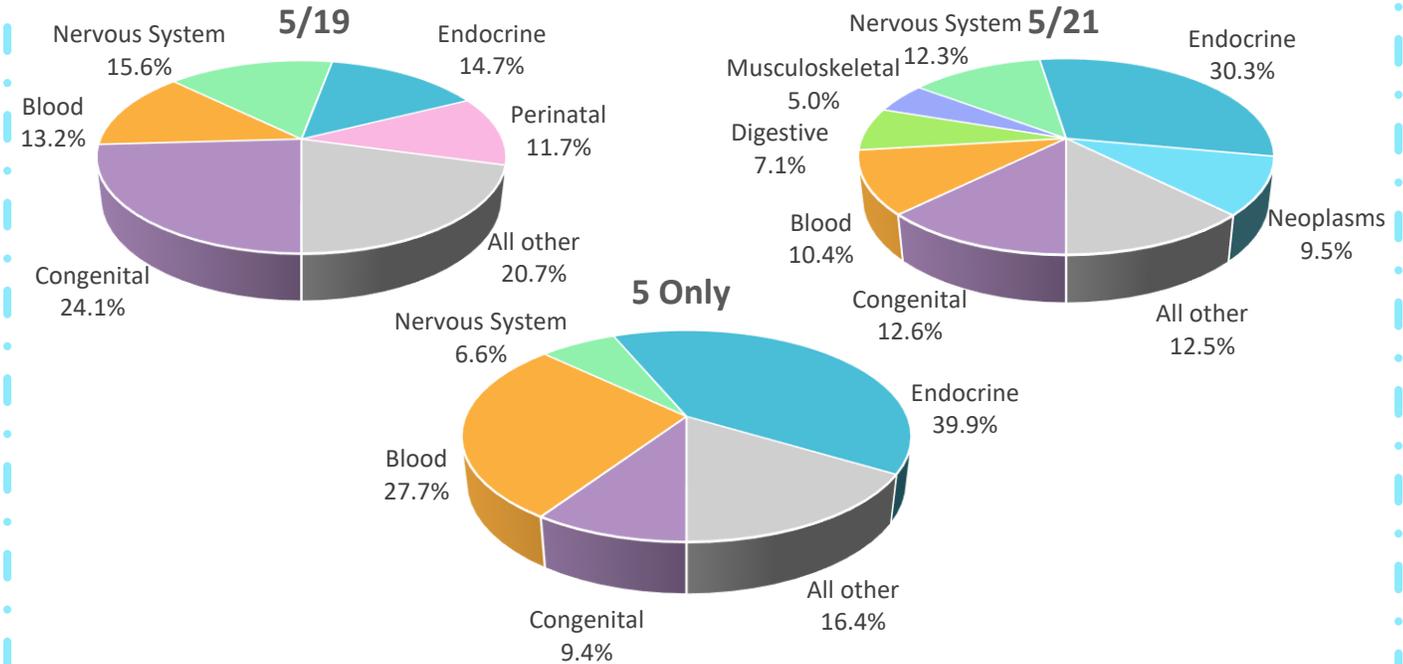
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis Group – FY2020



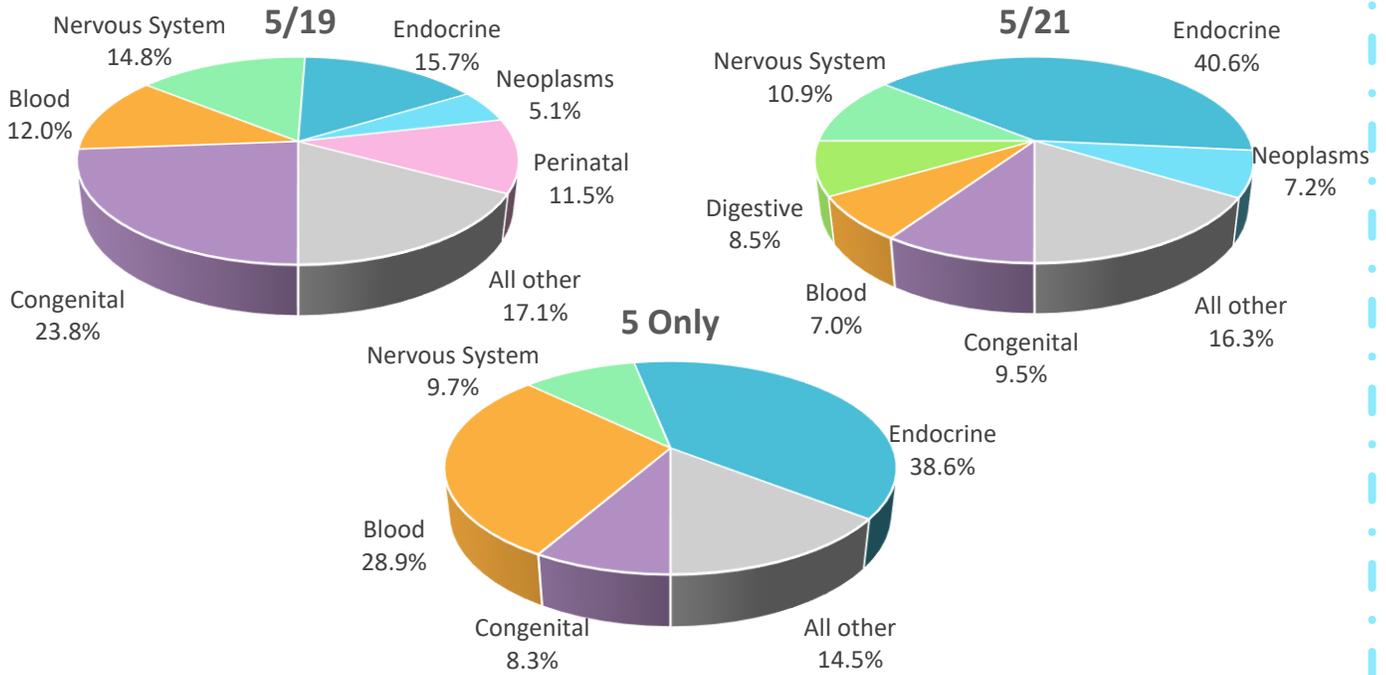
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis, Stratified by Coverage Type – FY2015



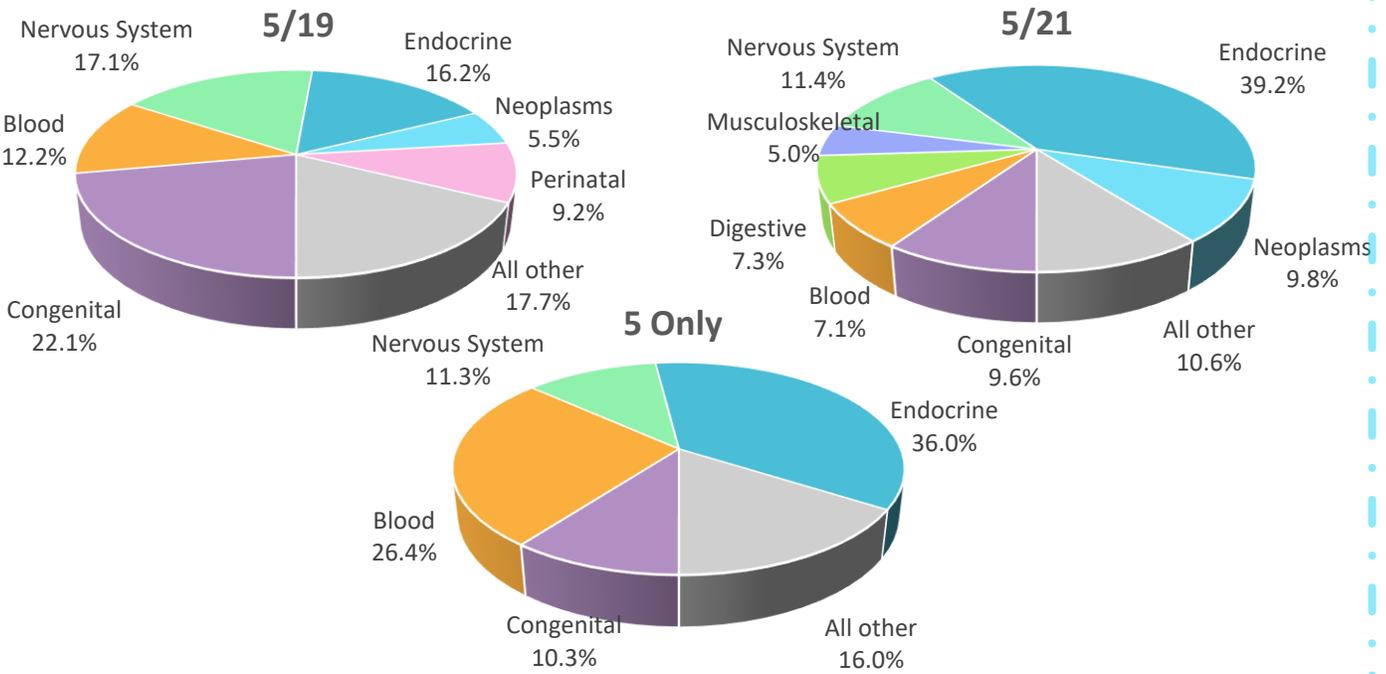
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis, Stratified by Coverage Type – FY2016



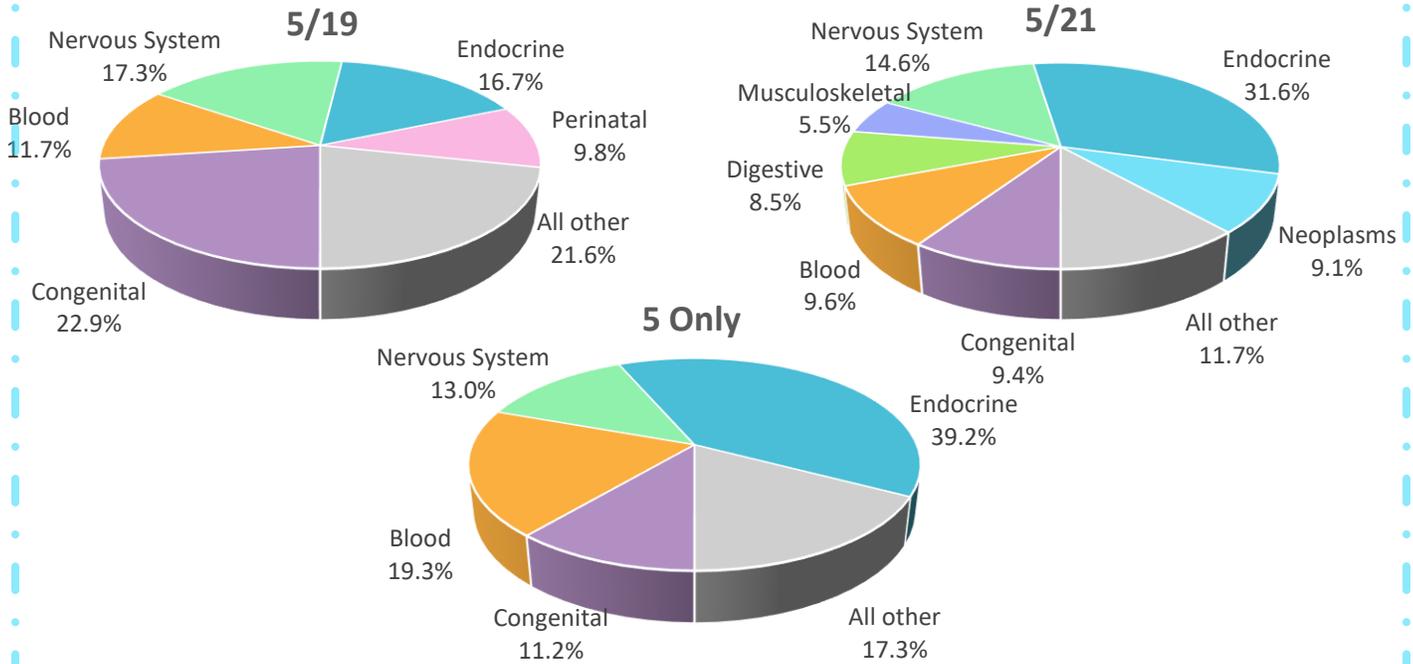
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis, Stratified by Coverage Type – FY2017



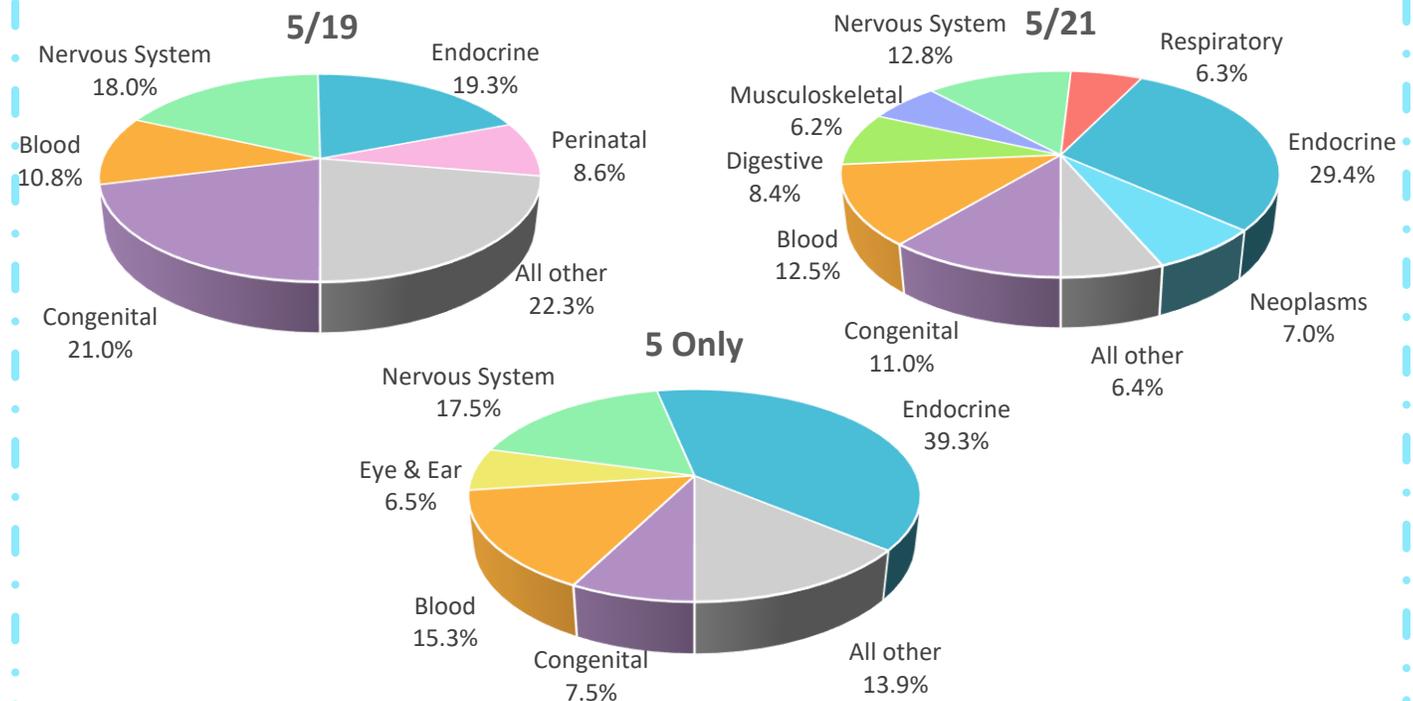
CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis, Stratified by Coverage Type – FY2018



CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis, Stratified by Coverage Type – FY2019



CSHCS Enrollee Expenditures by Primary Qualifying Diagnosis, Stratified by Coverage Type – FY2020





Data analysis was performed by the University of Michigan's
Child Health Evaluation and Research (CHEAR) Center.



SUSAN B. MEISTER

CHILD HEALTH EVALUATION AND RESEARCH CENTER
MICHIGAN MEDICINE

