

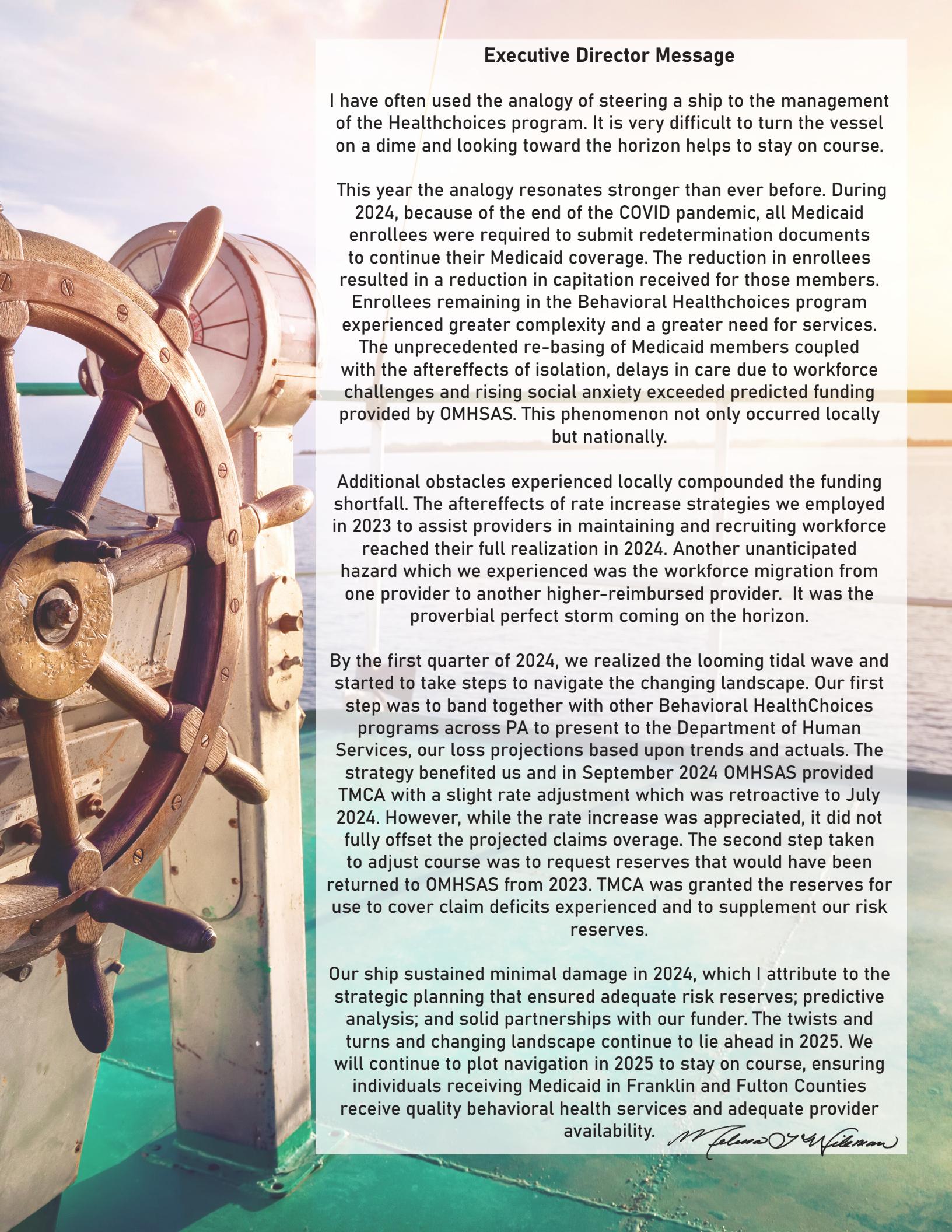


Staying the Course

2024 TMCA Annual Report to the
Board of Directors



Executive Director Message



I have often used the analogy of steering a ship to the management of the HealthChoices program. It is very difficult to turn the vessel on a dime and looking toward the horizon helps to stay on course.

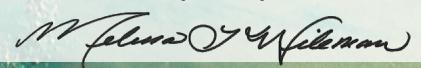
This year the analogy resonates stronger than ever before. During 2024, because of the end of the COVID pandemic, all Medicaid enrollees were required to submit redetermination documents to continue their Medicaid coverage. The reduction in enrollees resulted in a reduction in capitation received for those members. Enrollees remaining in the Behavioral HealthChoices program experienced greater complexity and a greater need for services.

The unprecedented re-basing of Medicaid members coupled with the aftereffects of isolation, delays in care due to workforce challenges and rising social anxiety exceeded predicted funding provided by OMHSAS. This phenomenon not only occurred locally but nationally.

Additional obstacles experienced locally compounded the funding shortfall. The aftereffects of rate increase strategies we employed in 2023 to assist providers in maintaining and recruiting workforce reached their full realization in 2024. Another unanticipated hazard which we experienced was the workforce migration from one provider to another higher-reimbursed provider. It was the proverbial perfect storm coming on the horizon.

By the first quarter of 2024, we realized the looming tidal wave and started to take steps to navigate the changing landscape. Our first step was to band together with other Behavioral HealthChoices programs across PA to present to the Department of Human Services, our loss projections based upon trends and actuals. The strategy benefited us and in September 2024 OMHSAS provided TMCA with a slight rate adjustment which was retroactive to July 2024. However, while the rate increase was appreciated, it did not fully offset the projected claims overage. The second step taken to adjust course was to request reserves that would have been returned to OMHSAS from 2023. TMCA was granted the reserves for use to cover claim deficits experienced and to supplement our risk reserves.

Our ship sustained minimal damage in 2024, which I attribute to the strategic planning that ensured adequate risk reserves; predictive analysis; and solid partnerships with our funder. The twists and turns and changing landscape continue to lie ahead in 2025. We will continue to plot navigation in 2025 to stay on course, ensuring individuals receiving Medicaid in Franklin and Fulton Counties receive quality behavioral health services and adequate provider availability.



Board of Directors

Randy Bunch, Chair
John Flannery, Vice Chair
Robert Ziobrowski, Treasurer
Dean A. Horst, Board Member
Hervey Hann, Board Member

Steering Committee

Julia Dovey, Chair
Fulton County Human Services Director
Stacie Horvath, Vice-Chair
Franklin County Human Services Administration

TMCA Staff

Melissa Wileman
Executive Director

Christy Briggs
Finance Director

Catya Bookhamer
Planning & Development Director

Eric Pirrone
Data Analyst

Gen Harper
Quality & Compliance Director

Brad Coccagna
Quality Specialist

Jessica Shoemaker
Office Manager

Steven Wible
Fulton County Commissioner

Dean A. Horst
Franklin County Commissioner

Teresa Beckner
Franklin County Fiscal Department

John Thierwechter
Franklin County Assistant Administrator

Christine McQuade
Fulton County Services for Children

Stacey Brookens
Franklin/Fulton MH/IDD/EI Department

Lorna Blanchard
Franklin, Consumer/Family Representative

James Eagler
Franklin/Fulton Drug and Alcohol



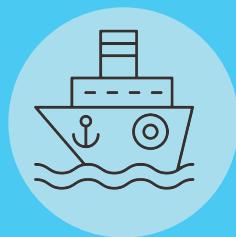
Mental Health Outpatient
25,000+ hours
Therapy and Psychiatry
to individuals with mental health needs



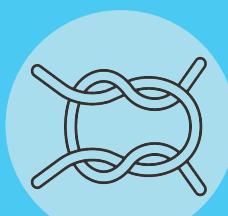
Drug & Alcohol Outpatient
Nearly 11,000 hours
Outpatient Drug & Alcohol therapy for
individuals with substance use needs



4,898
Adults received a service
paid for by TMCA
(FR 4,689 / FU 377)



24,178
Treatment visits conducted via
Telehealth



2,553
Children received a service paid
by TMCA
(FR 2,212 / FU 187)



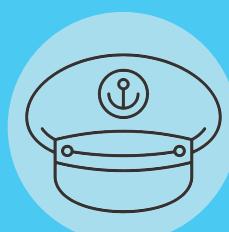
8,804
Mental Health Visits
conducted in Schools



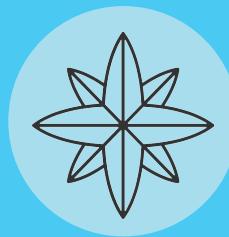
11,803
Federally Qualified Health
Center Visits



256
Older Adults (65+) received a
service paid for by TMCA



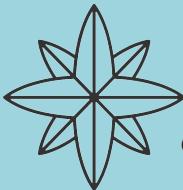
462 hours of clinical training
provided to **24** clinicians through
Evidence Based Practices



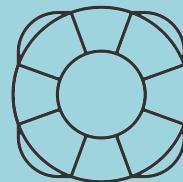
802
Children with Autism Spectrum
Disorders received a service paid
for by TMCA



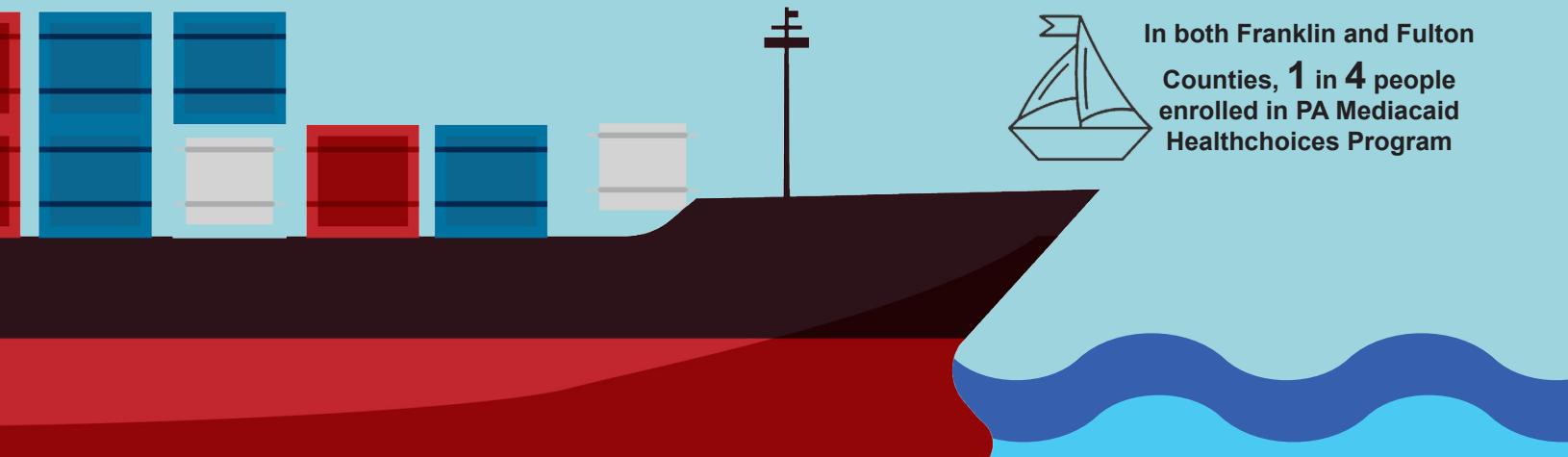
2024 Recovery Housing
\$63,420.00
Total Days Paid: **2,114**



Fulton county: **55%** of children residing in Fulton County had health insurance coverage through PA Medicaid HealthChoices Program



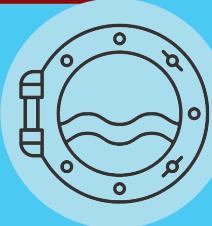
Franklin County: **45%** of children residing in Franklin County had health insurance coverage through the PA Medicaid HealthChoices Program



In both Franklin and Fulton Counties, **1 in 4** people enrolled in PA Medicaid HealthChoices Program



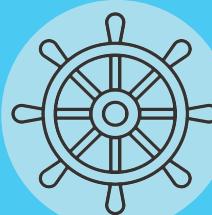
42,392 Enrollees from Franklin and Fulton in Behavioral Health Medicaid HealthChoices
(FR / FU)
(39,056 / 4,084)



Both Counties: **20%** of Adults in either county received their health insurance coverage through PA Medicaid Health Choices Program



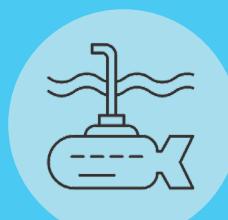
4,773 First time eligible PA Medicaid HealthChoices enrollees in 2024



12,941 Individuals receiving health insurance coverage through the PA Medicaid HealthChoices Program as a result of the Accountable Care Act:
31% of these individuals sought and received behavioral health treatment



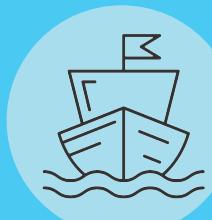
156 Providers who serve adults with **198** unique locations within 60 mile radius of every Medicaid recipients home in Franklin and Fulton County



5,299 Re-eligible individuals



36 Unique Provider locations within the boundaries of Franklin and Fulton Counties that serve Adults and Children



142 Providers who serve Children with **183** unique locations within 60 mile radius of every Medicaid recipients home in Franklin and Fulton County

2024 Financials

Revenue

Gross Capitation Assessment/Tax	\$47,082,327
	(\$9,616,447)
Net Capitation	\$37,465,880
Earned Interest	\$422,960
	\$37,888,840



Loss

\$288,298.00



Top 3 Service Categories by Cost

Federally Qualified Health Center	\$5,738,180
Outpatient Psychiatric	\$5,126,543
Inpatient Psychiatric:	\$5,038,177



\$4,188,727.00

8 Reinvestment plans developed from previous years claims savings



Expenses

Medical Claims Administration:	\$33,216,804
Performcare	\$3,075,953
TMCA	\$1,884,381
Net Expenses	\$38,177,138



Capitation revenue

Appropriated for Medical Claims	\$30,871,719
Claims Expense	\$33,216,804
Deficit	\$2,345,085



Reserves required by PA DOI to mitigate excessive claim expenses

9.2 Million

Change from 2023

Capitation	18% reduction
Enrollees	7.23% reduction
Consumers	7.3 % reduction
Claim Expense	3% reduction



Top 3 Medicaid Categories by Cost

HC Expansion - Accountable Care Act Expansion	
SSI w/ Medicare & Healthy Horizons	
SSI w/o Medicare Child	

	Net Capitation Paid	Claim Expense	Deficit
HC Expansion - Accountable Care Act Expansion	\$7,170,570	\$8,631,590	-\$1,461,020
SSI w/ Medicare & Healthy Horizons	\$1,761,665	\$2,278,266	-\$516,601
SSI w/o Medicare Child	\$5,106,183	\$5,531,859	-\$425,676