

Office of the Governor | Mississippi Division of Medicaid

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# **Mississippi disAbility MegaConference**

June 13, 2014



# Medicaid Overview

- **1965** - Created as part of the Social Security Amendments of 1965 (PL 89-97)
- **1969** - Enacted by the Mississippi State Legislature
- Safety net program similar to Temporary Assistance for Needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP)

**All 50 states, the District of Columbia, and five territories participate in the voluntary matching program.**



# Medicaid Overview

- Federal Medical Assistance Percentage (FMAP)  
Lowest match 50%, MS has highest match at **73.05%**
- Eligibility determined by income and SSI status
- Based on the Federal Poverty Level (FPL)

## 2014 Federal Poverty Level Guidelines

Family Size	100%	133%	138%	143%	194%	209%
1	11,670	15,521	16,105	16,688	22,640	24,390
2	15,790	21,001	21,790	22,580	30,633	33,001
3	19,790	26,321	27,310	28,300	38,393	41,361
4	23,850	31,721	32,913	34,106	46,269	49,847

# Who is Enrolled?

54.7% = Children

6.6% = Low Income  
Parents/Caretakers

17.6% = Disabled (Supplemental  
Security Income)

11.1% = Dually eligible

3.0% = Family Planning

1.9% = Pregnant Women

**682,837**

**Medicaid beneficiaries**

**70,551**

**CHIP beneficiaries**

**753,388**

**Total enrollment**

*As of May 31, 2014*

# FY2013 Budget Overview

State Funds	\$1.56 billion
Federal Funds	\$3.79 billion
<b>Total</b>	<b>\$5.35 billion</b>



Approximately

**15%**

of state budget

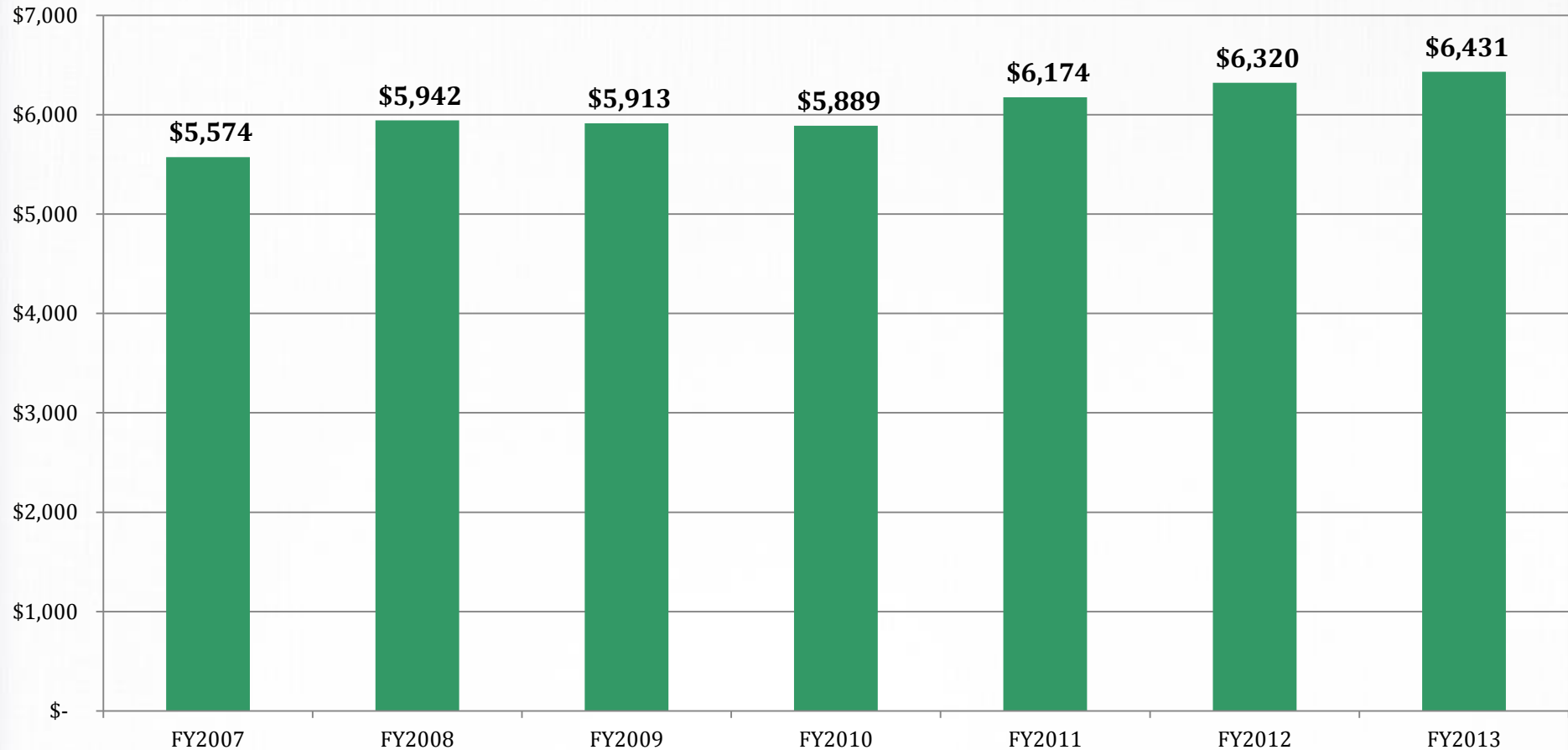


**2<sup>ND</sup>**

largest spending item  
behind education



# Average Annual Cost per Medicaid Beneficiary







# Cost Implications of the Affordable Care Act



# Affordable Care Act Provisions

- The Affordable Care Act (ACA) has both mandatory and optional provisions
- Mandatory provisions require states to change the way Medicaid programs operate
- Involves expansion of certain eligibility categories
- Enhances payments to certain provider groups

# Mandatory ACA Provisions

- Foster Children Expansion to Age 26
- Expanded Eligibility for Children – Includes Enhanced FMAP
- Eligibility Modernization/Administrative Expenditures
- Primary Care Physician Fee Increase
- Health Insurer Fee
- Welcome Mat Population

# Total Estimated Financial Impact of the Mandatory ACA Provisions

(in millions)

	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Total
Foster Children	\$1	\$2	\$2	\$2	\$2	\$2	\$2	\$13
Administrative	\$1	\$3	\$3	\$3	\$3	\$3	\$4	\$20
Physician Fee Increase*	0	\$6	\$12	\$13	\$14	\$15	\$16	\$76
Health Insurer Fee	\$3	\$10	\$14	\$15	\$16	\$16	\$17	\$91
Welcome Mat	\$26	\$56	\$59	\$62	\$66	\$70	\$74	\$413
CHIP - Enhanced FMAP	\$0	\$0	(\$40)	(\$57)	(\$61)	(\$64)	(\$17)	(\$239)
<b>State Funds</b>	\$31	\$77	\$50	\$38	\$40	\$42	\$96	\$374
<b>Federal Funds</b>	\$123	\$222	\$278	\$309	\$328	\$347	\$317	\$1,925
<b>Total</b>	<b>\$154</b>	<b>\$299</b>	<b>\$328</b>	<b>\$347</b>	<b>\$368</b>	<b>\$389</b>	<b>\$413</b>	<b>\$2,299</b>

\*Note: The ACA does not require the Primary Care Physician fee increase to be continued past 2015 DOM has projected it to continue through 2020.

# Mandatory ACA Spending Growth Summary

Estimated cost of mandatory changes  
without expansion for 2014-2020

**\$272-\$436 million**

# Total Medicaid Program Costs & Beneficiary Enrollment

