



Medicaid Financial Reports June 2024

**State of Indiana
Monthly Financial Report
Notes for Users**

Report Sections Overview

Expenditures: Details the amount spent on specific Medicaid programs on a Current Month and Year to Date basis, as well as comparisons to the forecast and budget.
Enrollment: Details the number of individuals enrolled in specific Medicaid programs, compared to forecasted enrollment numbers and average monthly enrollment Year to Date.
Funding: Details both the federal and state (including intergovernmental transfers and assessment fees) sources of funding for the Indiana Medicaid program, including the amount spent from each funding source Year to Date.

Key Definitions

State Fiscal Year (SFY) - The Indiana State Fiscal Year is July 1 - June 30.
Year to Date(YTD) - Refers to the first day of the fiscal year up to the current month
Forecast - Projected expenditures, enrollment, and funding as projected in the baseline December 2023 Medicaid forecast.
Budget - Projected expenditures, enrollment, and funding that aligns with the April 2023 Medicaid forecast, with adjustment for strategic investments and other changes incorporated in the Medicaid appropriation.

Expenditures Notes

Current Month Actual	This represents the actual amount spent (cash basis) the given month.
Actual Spent	Actual amount spent (cash basis) year to date – from July 1 of this fiscal year through the current month.
Percentage of Total Expenditures	Percentage of Actual Total Expenditures value made up by a given line item.
Forecast	The amount that was projected in the forecast to be spent Year to Date.
Budget	The amount allocated in the budget for the current State Fiscal Year, Year to Date (from the start of the current SFY in July through the current month).
Variance	Variance - Actuals YTD to Forecast represents the difference between the SFY YTD forecasted amount for a given line item and the SFY YTD Actual Spent. Variance - Actuals YTD to Budget represents the Difference between the SFY YTD budgeted amount for a given line item and the SFY YTD Actual Spent.
Prior Year, Actual Spent Year to Date	The actual amount spent for the prior SFY, YTD. For example, for a February 2024 report, the PY YTD would represent spending for a given Medicaid program from July 2022 - February 2023.
Variance Prior Year to Current Year, Year to Date	This represents the difference between SFY YTD Actual Spent and the Prior Year YTD Actual Spent, allowing for a comparison of spending up to the current month across the current and prior SFY.
Annual Forecast and Budget	The Annual SFY Forecast represents the amount forecasted to be spent for the full current SFY (July - June). Similarly, the Annual SFY Budget represents the budget allocated for the full current SFY (July - June).

Enrollment Notes

Current Month Enrollment - Actual	This is the number of individuals enrolled in the current month by population, based on coverage effective at the point-in-time the report is run.
Current Month Enrollment - Forecast	This is the number of individuals projected in the forecast to be enrolled, including estimated retroactive enrollment.
Variance Current Month Enrollment	This represents the difference between the Current Enrollment and Forecasted Enrollment.
Current Year Average Monthly Enrollment, Year to Date - Actual	This is the average monthly enrollment by population, from the start of the current SFY in July through the current month. Average monthly enrollment is the sum of monthly enrollment YTD, divided by the number of months being reported. It reflects the inclusion of retroactive enrollment for earlier months (e.g. July 2023, August 2023 . . .) as reported through the beginning of the month following the month of data reported on (e.g., through the beginning of March 2024 for a report with February 2024 data).
Current Year Average Monthly Enrollment Year to Date - Forecast	This is the average monthly enrollment projected in the forecast YTD. It reflects full inclusion of retroactive enrollment.
Variance Average Monthly Enrollment, Year to Date	This represents the difference between Actual Average Monthly Enrollment YTD and Forecasted Average Monthly Enrollment YTD.

Percent of Actual Total Enrollment, Year to Date	This represents the percentage of SFY 2024 Average Enrollment YTD - Actual made up by a given line item.
Prior Year Average Monthly Enrollment, Year to Date	This represents Average Monthly Enrollment YTD for the prior SFY. For example, for a February 2024 report, this would represent the Average Monthly Enrollment for a given program from July 2022 - February 2023.
Variance Current Year to Date to Prior Year, Year to Date	This represents the difference between Average Monthly Enrollment YTD for the current SFY and Average Monthly Enrollment for the prior SFY, allowing for a comparison of average monthly enrollment between the current and prior SFY.

Funding Notes

Funding Source	Total SFY 2023 federal and state expenditures for Indiana Medicaid were approximately \$17.9B, of which \$2.7B was state-funded. The Federal Medical Assistance Percentage (FMAP) determines the federal share of the cost of Medicaid. This column details all Medicaid funding sources, including state and federal sources. Intergovernmental transfers and assessment fees are also included.
Actual Funding, Year to Date	The amount of funding from a given funding source from the start of the current SFY in July through the current month.
Forecast	The amount of funding projected in the forecast YTD.
Budget	Amount of funding included in the budget YTD.
Variance	Variance - Actuals YTD to Forecast represents the difference between Forecasted Funding and Actual Funding YTD. Variance - Actuals YTD to Budget represents the difference between funding in the Budget and Actual Funding YTD. This figure measures alignment with the established budget.
Prior Year Actual Funding, Year to Date	This represents the amount of funding during the prior SFY, YTD.
Variance Prior Year to Current Year, Year to Date	This represents the difference between Prior Year, YTD funding and the Current Year, YTD funding.
Forecast and Budget	These columns represent the amount projected in the forecast for funding expected to be received or generated during the current SFY, as well as the established budget for the current SFY.

Medicaid Spending Summary Compared to Forecast June 2024

	SFY 2024 Year to Date				Variance	Variance	SFY 2023 Actual Spent YTD	Variance	Total SFY 2024		
	Current Month Actual	% of Total Actual Expenditures		Budget	Actuals YTD to Forecast	Actuals YTD to Budget		SFY 2023 to SFY 2024 YTD	Forecast	Budget	
<u>Expenditures</u>											
Managed Care	437,335,934	10,353,867,761	52.1%	10,188,461,997	10,781,485,657	(165,405,765)	427,617,896	10,020,074,301	(333,793,461)	10,188,461,997	10,781,485,657
Healthy Indiana Plan	207,950,122	5,878,806,202	29.6%	5,684,324,627	6,108,419,636	(194,481,575)	229,613,434	6,308,810,477	430,004,275	5,684,324,627	6,108,419,636
Hoosier Care Connect	88,171,083	1,725,551,782	8.7%	1,765,743,767	1,903,237,395	40,191,985	177,685,613	1,505,086,558	(220,465,224)	1,765,743,767	1,903,237,395
Hoosier Healthwise	141,214,730	2,749,509,777	13.8%	2,738,393,603	2,769,828,625	(11,116,174)	20,318,848	2,206,177,265	(543,332,512)	2,738,393,603	2,769,828,625
PathWays for Aging											
Fee-for-service Total	717,716,874	8,705,165,770	43.8%	8,659,744,559	7,876,472,812	(45,421,211)	(828,692,958)	6,761,550,076	(1,943,615,695)	8,659,744,559	7,876,472,812
Long-Term Institutional Care	207,802,449	2,626,219,098	13.2%	2,553,339,421	2,450,278,320	(72,879,677)	(175,940,779)	2,413,679,107	(212,539,991)	2,553,339,421	2,450,278,320
Long-Term Community Care	305,841,768	3,572,795,279	18.0%	3,559,521,575	2,932,252,860	(13,273,704)	(640,542,419)	2,146,571,310	(1,426,223,969)	3,559,521,575	2,932,252,860
NEMT Program	2,145,452	26,008,458	0.1%	25,986,960	34,319,800	(21,498)	8,311,342	29,443,385	3,434,927	25,986,960	34,319,800
State Plan Services FFS	201,927,205	2,480,142,935	12.5%	2,520,896,603	2,459,621,832	40,753,669	(20,521,102)	2,171,856,274	(308,286,661)	2,520,896,603	2,459,621,832
Other Expenditures and Collections	(72,731,668)	(635,278,470)	(3.2%)	(637,439,159)	(775,008,755)	(2,160,689)	(139,730,286)	(621,813,690)	13,464,779	(637,439,159)	(775,008,755)
Manual Expenditures	193,138,167	1,439,237,242	7.2%	1,530,926,151	1,617,560,897	91,688,909	178,323,655	2,221,500,073	782,262,831	1,530,926,151	1,617,560,897
Total - Expenditures	1,275,459,308	19,862,992,304	100.0%	19,741,693,548	19,500,510,610	(121,298,756)	(362,481,693)	18,381,310,759	(1,481,681,545)	19,741,693,548	19,500,510,610
Other Financial Expenditures and Adjustments	(42,005,315)	(469,652,049)		(362,627,981)	(422,544,935)	107,024,068	47,107,114	(481,484,565)	(11,832,516)	(362,627,981)	(422,544,935)
Medicaid Expenditures Sub-total	1,233,453,992	19,393,340,255		19,379,065,567	19,077,965,675	(14,274,688)	(315,374,579)	17,899,826,194	(1,493,514,061)	19,379,065,567	19,077,965,675
Total CHIP Expenditures											
Assistance	13,126,090	388,757,196		316,958,371	339,174,843	(71,798,825)	(49,582,353)	305,227,862	(83,529,334)	316,958,371	339,174,843

Medicaid Enrollment Summary Compared to Forecast

June 2024

Enrollment	Current Month Enrollment - Actual	Current Month Enrollment - Forecast	Variance Current Month Enrollment	SFY 2024 Average Monthly Enrollment YTD - Actual	SFY 2024 Average Monthly Enrollment YTD - Forecast	Variance Average Monthly Enrollment YTD	% of Actual Total Enrollment YTD	SFY 2023 Average Monthly Enrollment YTD - Actual	Variance SFY 2024 YTD to SFY 2023 YTD
Healthy Indiana Plan									
HIP State Plan Benefit Package	124,830	118,892	5,938	145,253	142,155	3,098	7.0%	177,548	(32,295)
HIP Expansion	338,623	298,156	40,467	331,376	311,920	19,456	15.9%	313,962	17,414
HIP Medically Frail	184,228	149,808	34,420	204,663	189,012	15,651	9.8%	238,159	(33,496)
HIP Pregnant Women	44,972	33,151	11,821	51,025	45,456	5,569	2.5%	59,667	(8,641)
HIP Bridge	0	0	0	0	0	0	0.0%	0	0
HIP Hospital Presumptive Eligibility	5,048	7,185	(2,137)	4,451	5,310	(858)	0.2%	2,529	1,923
Total Healthy Indiana Plan	697,701	607,192	90,509	736,768	693,853	42,915	35.4%	791,864	(55,096)
Hoosier Care Connect									
Adult	55,307	57,558	(2,251)	57,495	58,428	(932)	2.8%	62,125	(4,629)
Child	21,912	21,514	398	22,142	22,039	103	1.1%	23,577	(1,435)
Foster	17,434	16,663	771	16,631	16,474	157	0.8%	15,738	892
Total Hoosier Care Connect	94,653	95,735	(1,082)	96,268	96,940	(673)	4.6%	101,440	(5,172)
Hoosier Healthwise									
Adults	286	989	(703)	855	1,226	(370)	0.0%	845	10
Children	607,497	579,718	27,779	642,679	634,172	8,507	30.9%	727,408	(84,729)
Pregnant Females	15,937	9,069	6,868	19,196	15,802	3,394	0.9%	21,037	(1,841)
CHIP	138,061	118,445	19,616	134,475	125,518	8,958	6.5%	128,450	6,026
Total Hoosier Healthwise	761,781	708,221	53,560	797,206	776,718	20,488	38.3%	877,740	(80,534)
PathWays for Aging									
Nursing Home									
HCBS									
Acute									
Total PathWays for Aging									
Total Managed Care	1,554,135	1,411,148	142,987	1,630,242	1,567,511	62,731	78.3%	1,771,044	(140,802)
Fee For Service									
Institutionalized	29,395	33,018	(3,623)	31,099	32,390	(1,291)	1.5%	31,562	(463)
Waiver	74,753	79,872	(5,119)	75,364	76,466	(1,102)	3.6%	68,431	6,934
1915(i) State Plan HCBS	3,249	1,898	1,351	3,342	2,110	1,232	0.2%	2,847	495
No Level of Care*									
Hoosier Healthwise FFS	10,088	45,752	(35,664)	36,920	41,403	(4,483)	1.8%	29,259	7,661
Dual	82,427	92,078	(9,651)	93,234	96,872	(3,638)	4.5%	105,292	(12,058)
Non-Dual	29,969	34,642	(4,673)	32,179	34,146	(1,967)	1.5%	33,531	(1,352)
Medicare Savings Program	69,809	70,808	(999)	67,444	67,806	(363)	3.2%	64,315	3,128
HIP Emergency Only	66,517	56,451	10,066	62,047	57,621	4,427	3.0%	53,342	8,705
Limited Benefit Populations	46,433	34,288	12,145	49,509	35,610	13,900	2.4%	40,705	8,805
Total Fee for Service	412,640	448,806	(36,166)	451,138	444,423	6,715	21.7%	429,284	21,855
Overall Total Enrollment	1,966,775	1,859,955	106,820	2,081,380	2,011,934	69,446	100.0%	2,200,327	(118,948)

* No Level of Care population description

Hoosier Healthwise FFS	Mainly represents retroactive eligibility individuals. After applicants are approved, they are enrolled in Hoosier Healthwise managed care.
Dual	Individuals in this category receive primary coverage from Medicare, while Medicaid pays wrap-around cost sharing (premiums, coinsurance, and deductibles) and provides additional services such as non-emergency transportation.
Non-Dual	Enrollment in this category includes foster and adoption assistance children as well as retroactive eligibility for the HCC eligible population.
Medicare Savings Program	This program covers Medicare enrollees who also have partial Medicaid eligibility (QMB, SLMB, and QI-1). Medicaid pays Medicare premiums for these individuals, and may also pay Medicare cost sharing, depending on income.
Limited Benefit Populations	This population includes all those with limited Medicaid benefits who are not served under managed care: presumptive eligibility, family planning, breast and cervical cancer, emergency services only, refugee assistance, and children under age 21 in psychiatric facilities.

Medicaid Assistance Funding Summary
June 2024

Funding	SFY 2024 Year to Date				Variance	Variance	SFY 2023 Actual Funding YTD	Variance	Total SFY 2024	
	Actual Funding YTD	% of Total Actual Funding	Forecast	Budget	Actuals YTD to Forecast	Actuals YTD to Budget		SFY 2023 to SFY 2024 YTD	Forecast	Budget
	Federal Funds	13,497,921,832	69.6%	13,480,011,692	13,402,997,287	(17,910,140)		(94,924,544)	13,416,531,508	(81,390,323)
Intergovernmental Transfers	402,464,757	2.1%	440,724,117	447,186,681	38,259,360	44,721,924	364,345,838	(38,118,919)	440,724,117	447,186,681
Provider Tax Receipts	158,693,308	0.8%	168,986,431	169,510,733	10,293,122	10,817,425	160,677,244	1,983,936	168,986,431	169,510,733
HAF Funding	1,025,019,864	5.3%	1,171,751,827	1,156,690,471	146,731,963	131,670,607	1,020,348,891	(4,670,973)	1,171,751,827	1,156,690,471
HIP Funding	490,892,357	2.5%	501,315,991	541,302,811	10,423,635	50,410,455	566,079,306	75,186,949	501,315,991	541,302,811
Other	2,393,790	0.0%	174,195	174,195	(2,219,595)	(2,219,595)	174,195	(2,219,595)	174,195	174,195
QAF Transfer - IC 16-28-15-8(a)(2)	(40,935,732)	(0.2%)	(44,242,428)	(44,396,573)	(3,306,696)	(3,460,841)	(41,781,537)	(845,805)	(44,242,428)	(44,396,573)
HAF Transfer - IC 16-21-10-14(1)	(295,200,878)	(1.5%)	(321,292,418)	(316,999,931)	(26,091,539)	(21,799,053)	(343,761,377)	(48,560,499)	(321,292,418)	(316,999,931)
Medicaid Assistance Expenditures	19,393,340,255		19,379,065,567	19,077,965,675	(14,274,688)	(315,374,579)	17,899,826,194	(1,493,514,061)	19,379,065,567	19,077,965,675
Federal Funds and IGTs	15,241,249,298		15,397,429,407	15,356,465,675	156,180,109	115,216,377	15,142,614,069	(98,635,229)	15,397,429,407	15,356,465,675
Medicaid GF Assistance	3,721,500,000	21.2%	3,721,500,000	3,721,500,000			2,931,900,000		3,721,500,000	3,721,500,000
Dedicated ARPA HCBS Funding	36,000,571		4,907,490	0	(31,093,081)	(36,000,571)	79,120,046	43,119,475	4,907,490	0
Total (Shortfall)/Surplus	(394,590,385)		(255,228,670)	0	139,361,715	394,590,385	253,807,921	648,398,307	(255,228,670)	0
CHIP Funding										
Federal	297,639,259		242,873,014	257,071,843	(54,766,245)	(40,567,416)	244,895,006	(52,744,253)	242,873,014	257,071,843
CHIP GF	86,430,400		59,385,357	67,603,000	(27,045,044)	(18,827,400)	57,227,156	(29,203,244)	59,385,357	67,603,000
CHIP HAF	4,687,537		14,700,000	14,500,000	10,012,463	9,812,463	3,105,700	(1,581,836)	14,700,000	14,500,000