



Medicaid Financial Reports September 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 2025 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 2024 federal and state expenditures for Indiana Medicaid were approximately \$19.4B, of which \$4.1B 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.
Percent of Total Actual Funding, Year to	Percentage of Actual Total Funding, Year to Date made up by a given line item.
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 September 2024

	Current Month Actual	SFY 2025 Year to Date				Variance Actuals YTD to Forecast	Variance Actuals YTD to Budget	SFY 2024 Actual Spent YTD	Variance SFY 2024 to SFY 2025 YTD	Total SFY 2025	
		Actual Spent	% of Total Actual Expenditures	Forecast	Budget					Forecast	Budget
Expenditures											
Managed Care	1,088,290,273	3,230,250,901	64.9%	3,345,513,244	3,160,987,334	115,262,343	(69,263,567)	2,438,875,388	(791,375,513)	14,523,425,250	14,375,574,354
Healthy Indiana Plan	441,492,260	1,305,298,225	26.2%	1,251,800,016	1,184,312,663	(53,498,209)	(120,985,562)	1,495,157,672	189,859,447	5,465,376,443	6,063,079,135
Hoosier Care Connect	101,096,170	320,414,570	6.4%	313,834,953	300,417,606	(6,579,617)	(19,996,964)	378,772,707	58,358,136	1,434,552,780	1,302,544,704
Hoosier Healthwise	211,703,789	606,640,912	12.2%	548,279,449	559,418,589	(58,361,463)	(47,222,323)	564,945,010	(41,695,902)	2,477,920,524	2,385,848,321
PathWays for Aging	333,998,054	997,897,194	20.0%	1,231,598,825	1,116,838,476	233,701,631	118,941,282	0	(997,897,194)	5,145,575,503	4,624,102,193
Fee-for-service Total	414,471,762	1,535,205,913	30.8%	1,289,291,067	1,184,797,056	(245,914,846)	(350,408,857)	1,831,196,617	295,990,704	5,377,568,588	4,876,265,339
Long-Term Institutional Care	73,023,012	334,472,467	6.7%	168,354,613	171,521,444	(166,117,854)	(162,951,023)	625,831,018	291,358,551	682,324,925	686,719,260
Long-Term Community Care	176,931,427	642,365,717	12.9%	566,294,792	475,411,702	(76,070,925)	(166,954,015)	621,755,637	(20,610,081)	2,402,444,488	1,963,582,632
NEMT Program	1,761,292	4,235,006	0.1%	3,448,328	4,282,405	(786,678)	47,399	7,553,887	3,318,881	14,630,605	18,122,047
State Plan Services FFS	162,756,030	554,132,722	11.1%	551,193,334	533,581,504	(2,939,388)	(20,551,218)	576,056,076	21,923,353	2,278,168,571	2,207,841,399
Other Expenditures and Collections	(97,109,875)	(287,701,059)	(5.8%)	(141,012,964)	(170,001,915)	146,688,095	117,699,145	(145,871,904)	141,829,156	(491,627,856)	(594,129,469)
Manual Expenditures	449,489,746	500,200,764	10.0%	383,422,517	406,631,554	(116,778,247)	(93,569,210)	277,357,803	(222,842,961)	1,559,633,924	1,648,671,594
Total - Expenditures	1,855,141,907	4,977,956,519	100.0%	4,877,213,864	4,582,414,030	(100,742,655)	(395,542,489)	4,401,557,905	(576,398,613)	20,968,999,907	20,306,381,818
Other Financial Expenditures and Adjustments	(36,183,813)	(133,149,916)		(107,602,765)	(146,887,488)	25,547,151	(13,737,572)	(95,897,770)	37,252,146	(364,111,061)	(368,783,893)
Medicaid Expenditures Sub-total	1,818,958,093	4,844,806,602		4,769,611,098	4,435,526,542	(75,195,504)	(409,280,061)	4,305,660,135	(539,146,467)	20,604,888,845	19,937,597,925
Total CHIP Expenditures											
Assistance	33,160,536	98,374,362		78,713,848	71,185,200	(19,660,514)	(27,189,162)	83,601,651	(14,772,711)	314,855,390	284,740,799

Medicaid Enrollment Summary Compared to Forecast September 2024

Enrollment

	Current Month Enrollment - Actual	Current Month Enrollment - Forecast	Variance Current Month Enrollment	SFY 2025 Average Monthly Enrollment YTD - Actual	SFY 2025 Average Monthly Enrollment YTD - Forecast	Variance Average Monthly Enrollment YTD	% of Actual Total Enrollment YTD	SFY 2024 Average Monthly Enrollment YTD - Actual	Variance SFY 2025 YTD to SFY 2024 YTD
Healthy Indiana Plan									
HIP State Plan Benefit Package	122,275	119,041	3,234	123,668	118,991	4,677	6.2%	163,666	(39,998)
HIP Expansion	338,461	292,177	46,284	343,047	294,170	48,876	17.3%	321,037	22,010
HIP Medically Frail	182,527	149,995	32,532	182,602	149,933	32,670	9.2%	223,595	(40,993)
HIP Pregnant Women	43,704	33,109	10,595	44,092	33,123	10,968	2.2%	56,100	(12,008)
HIP Bridge	0	0	0	0	0	0	0.0%	0	0
HIP Hospital Presumptive Eligibility	5,061	7,194	(2,133)	4,962	7,191	(2,229)	0.2%	3,814	1,148
Total Healthy Indiana Plan	692,028	601,516	90,512	698,371	603,408	94,963	35.2%	768,212	(69,841)
Hoosier Care Connect									
Adult	39,362	40,811	(1,449)	39,177	40,794	(1,617)	2.0%	59,562	(20,386)
Child	22,185	21,621	564	22,028	21,585	443	1.1%	22,598	(570)
Foster	17,877	16,746	1,131	17,584	16,718	866	0.9%	16,107	1,477
Total Hoosier Care Connect	79,424	79,178	246	78,789	79,097	(309)	4.0%	98,267	(19,478)
Hoosier Healthwise									
Adults	244	990	(746)	251	990	(738)	0.0%	1,332	(1,081)
Children	610,709	581,748	28,961	609,394	581,071	28,324	30.7%	684,756	(75,362)
Pregnant Females	15,142	9,058	6,084	15,355	9,061	6,294	0.8%	21,507	(6,152)
CHIP	139,101	118,740	20,361	138,724	118,642	20,083	7.0%	131,137	7,587
Total Hoosier Healthwise	765,196	710,535	54,661	763,725	709,764	53,961	38.5%	838,732	(75,007)
PathWays for Aging									
Nursing Home	21,823	25,852	(4,029)	21,759	25,784	(4,025)	1.1%	0	21,759
HCBS	27,184	33,830	(6,646)	27,569	33,371	(5,802)	1.4%	0	27,569
Acute	67,672	71,963	(4,291)	67,414	71,822	(4,408)	3.4%	0	67,414
Total PathWays for Aging	116,679	131,644	(14,965)	116,742	130,978	(14,236)	5.9%	0	116,742
Total Managed Care	1,653,327	1,522,873	130,454	1,657,627	1,523,247	134,380	83.5%	1,705,211	(47,584)
Fee For Service									
Institutionalized	7,567	7,464	103	8,310	7,456	854	0.4%	31,657	(23,347)
Waiver	46,456	48,171	(1,715)	46,503	47,928	(1,425)	2.3%	73,510	(27,007)
1915(i) State Plan HCBS No Level of Care*	3,377	1,899	1,478	3,324	1,899	1,425	0.2%	2,381	943
Hoosier Healthwise FFS	9,586	45,837	(36,251)	18,018	45,809	(27,790)	0.9%	43,176	(25,158)
Dual	33,424	37,617	(4,193)	34,709	37,522	(2,813)	1.7%	102,884	(68,174)
Non-Dual	26,589	34,793	(8,204)	27,614	34,742	(7,128)	1.4%	33,696	(6,082)
Medicare Savings Program	72,777	71,333	1,444	72,456	71,158	1,298	3.6%	65,999	6,457
HIP Emergency Only	68,743	56,870	11,873	68,687	56,730	11,957	3.5%	58,171	10,516
Limited Benefit Populations	54,413	34,542	19,871	48,902	34,458	14,444	2.5%	50,104	(1,202)
Total Fee for Service	322,932	338,527	(15,595)	328,524	337,701	(9,177)	16.5%	461,578	(133,054)
Overall Total Enrollment	1,976,259	1,861,400	114,859	1,986,151	1,860,948	125,202	100.0%	2,166,788	(180,638)

*** 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 September 2024

Funding	SFY 2025 Year to Date		Total SFY 2025	
	Actual Funding YTD	% of Total Actual Funding	Forecast	Budget
Federal Funds	3,108,862,966	64.2%	14,000,604,798	13,707,107,748
Intergovernmental Transfers	369,588	0.0%	486,039,432	478,471,307
Provider Tax Receipts	26,871	0.0%	173,027,503	176,226,091
HAF Funding	0	0.0%	1,117,745,095	1,213,568,660
HIP Funding	(15,422,515)	(0.3%)	522,703,492	544,569,727
Other	0	0.0%	174,195	174,195
QAF Transfer - IC 16-28-15-8(a)(2)	0	0.0%	(45,348,909)	(46,289,294)
HAF Transfer - IC 16-21-10-14(1)	0	0.0%	(305,520,793)	(332,830,509)
Medicaid Assistance Expenditures	4,844,806,602		20,604,888,845	19,937,597,925
Dedicated ARPA HCBS Funding	0		947,700	0
Federal Funds and IGTs	3,093,836,910		15,949,424,814	15,740,997,925
Medicaid GF Assistance	1,750,969,693	36.1%	4,654,516,332	4,196,600,000
Medicaid GF Appropriation	1,049,150,000		4,196,600,000	4,196,600,000
Total (Shortfall)/Surplus	(701,819,693)		(457,916,332)	0
CHIP Funding				
Federal	74,695,653		237,892,139	215,527,429
CHIP GF	23,678,709		64,780,439	56,899,665
CHIP HAF	0		12,182,812	12,313,705