Overview

- Congressional request
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Congressional Request

• January 2017 letter from our committees of jurisdiction requested the following:
  – the intersection of coverage of optional eligibility groups and the receipt of optional benefits for those groups;
  – number of people covered by each state who qualify through an optional eligibility category; and
  – the federal and state expenditures for each category of optional populations and optional benefits
Methodology

- MSIS and CMS-64 data for FY 2013
- Classify enrollees based on their Medicaid Assistance Status/Basis of Eligibility (MAS/BOE) designation
- Classify services as mandatory or optional using the MSIS type of service (TOS) code
- Spending that is not directly related to services will be classified separately using CMS-64 data
Preliminary Results: Enrollment

April 21, 2017
Medicaid Enrollment, by Mandatory and Optional Status, FY 2013

71.1% Mandatory
28.9% Optional

Source: MACPAC analysis of FY 2013 MSIS.

April 21, 2017
Mandatory Medicaid Enrollment, by Eligibility Group, FY 2013

- Non-disabled children, 39.6%
- Adults, 13.1%
- People with disabilities, 11.8%
- People age 65 and older, 6.6%

71.1%

Source: MACPAC analysis of FY 2013 MSIS.
Optional Medicaid Enrollment, by Eligibility Group, FY 2013

- Non-disabled children, 6.5%
- Adults, 16.1%
- People with disabilities, 3.1%
- People age 65 and older, 3.2%
- Total, 28.9%

Source: MACPAC analysis of FY 2013 MSIS.
April 21, 2017
Medicaid Enrollment, by Eligibility Group in Millions, FY 2013

- **Non-disabled children**: 27.7
  - Optional: 4.5
  - Mandatory: 23.2
- **Non-disabled adults**: 11.3
  - Optional: 9.1
  - Mandatory: 2.2
- **People with disabilities**: 8.3
  - Optional: 2.2
  - Mandatory: 6.1
- **People over age 65**: 4.6
  - Optional: 2.2
  - Mandatory: 2.4

Source: MACPAC analysis of FY 2013 MSIS.
Preliminary Results: Spending
## Spending on Mandatory and Optional Populations and Services, FY 2013

<table>
<thead>
<tr>
<th>Population and service</th>
<th>Dollars (billions)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandatory enrollment and mandatory services</td>
<td>$190.1</td>
<td>47.4%</td>
</tr>
<tr>
<td>Mandatory enrollment and optional services</td>
<td>$84.6</td>
<td>21.1%</td>
</tr>
<tr>
<td>Optional enrollment and mandatory services</td>
<td>$64.6</td>
<td>16.1%</td>
</tr>
<tr>
<td>Optional enrollment and optional services</td>
<td>$61.9</td>
<td>15.4%</td>
</tr>
</tbody>
</table>

Source: MACPAC analysis of FY 2013 MSIS and CMS-64.

April 21, 2017
Medicaid Spending (in billions) by Enrollment Group and Service, FY 2013

![Bar chart showing Medicaid spending by enrollment group and service for FY 2013.](chart-image)

- **Non-disabled children**: 11.3 billion
  - Optional enrollment & optional services: 9.2 billion
  - Optional enrollment & mandatory services: 19 million
  - Mandatory enrollment & optional services: 1.9 billion
  - Mandatory enrollment & mandatory services: 0.4 billion

- **Non-disabled adults**: 64.6 billion
  - Optional enrollment & optional services: 25.3 billion
  - Optional enrollment & mandatory services: 8.6 billion
  - Mandatory enrollment & optional services: 9.2 billion
  - Mandatory enrollment & mandatory services: 17.3 billion

- **People with disabilities**: 70.4 billion
  - Optional enrollment & optional services: 16.3 billion
  - Optional enrollment & mandatory services: 26.2 billion
  - Mandatory enrollment & optional services: 17.7 billion
  - Mandatory enrollment & mandatory services: 18.1 billion

- **People over age 65**: 27 billion
  - Optional enrollment & optional services: 29.8 billion
  - Mandatory enrollment & optional services: 18.1 billion
  - Mandatory enrollment & mandatory services: 17.7 billion

Source: MACPAC analysis of FY 2013 MSIS and CMS-64.

April 21, 2017
### Mandatory Medicaid Spending (in billions) by Enrollment Group and Service, FY 2013

<table>
<thead>
<tr>
<th>Enrollment Group</th>
<th>Mandatory LTSS</th>
<th>Mandatory Acute Services</th>
<th>Mandatory Managed Care</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-disabled children</td>
<td>1.5</td>
<td>33.8</td>
<td>40.5</td>
<td>40.5</td>
</tr>
<tr>
<td>Non-disabled adults</td>
<td>0.2</td>
<td>22.6</td>
<td>21.3</td>
<td>21.5</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>12.6</td>
<td>41.7</td>
<td>27.1</td>
<td>71.4</td>
</tr>
<tr>
<td>People over age 65</td>
<td></td>
<td>28.6</td>
<td>5.6</td>
<td>34.2</td>
</tr>
</tbody>
</table>

Source: MACPAC analysis of FY 2013 MSIS and CMS-64.

April 21, 2017
Optional Medicaid Spending (in billions) by Enrollment Group and Service, FY 2013

Source: MACPAC analysis of FY 2013 MSIS and CMS-64.

April 21, 2017
Discussion
Discussion

• Results are consistent with prior studies, but are unable to account for new adult group
• Mandatory coverage of people and services reflect decisions by Congress regarding the core features of the program
• States vary considerably in the optional populations they cover, the optional benefits they provide, and the costs attributable to each
• Analysis gives a sense of scope and scale of federal mandates and state choices
Analysis of Mandatory and Optional Populations and Benefits

Medicaid and CHIP Payment and Access Commission

Martha Heberlein