

JOINT LEGISLATIVE OVERSIGHT COMMITTEE ON MEDICAID

NC Department of Health and Human Services Medicaid Enrollment & Financial Update

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## **Overview**

- Enrollment
  - Projection for 2023-25 Biennium (State Fiscal Years 2024 and 2025)
  - Actuals for SFY 2024
  - Continuous Coverage Unwinding (CCU)

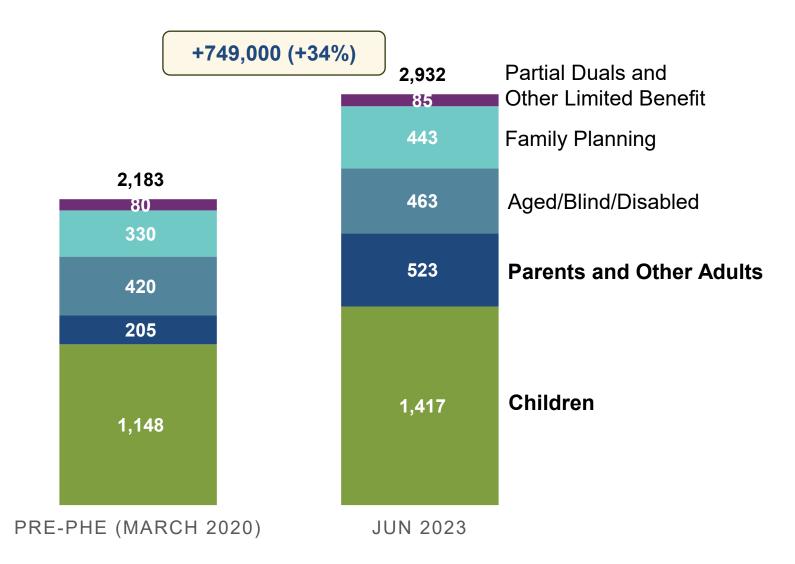
### Financial Position

- Year-to-Date (YTD) Actual Expenditures v Budget and Prior Year
- Updated Forecast for Remainder of SFY 2024
- Budget Pressures

Medicaid Enrollment & Expenditures: Adding Medicaid Expansion

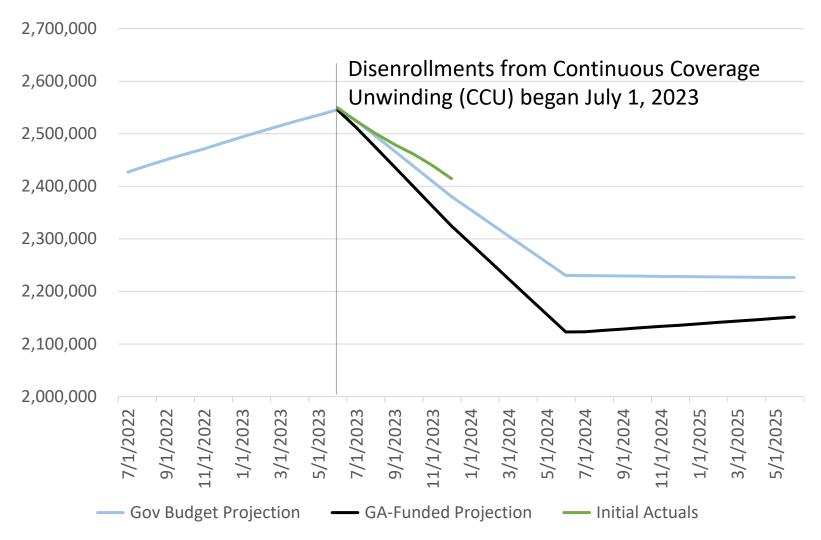
- There was <u>no Expansion enrollment</u> until December 1, 2023.
- Expansion enrollment will be <u>tracked</u> <u>separately</u> – not counted in Rebase enrollment
- Expansion expenditures will be <u>tracked</u> <u>separately</u> and will not affect State General Fund expenditures/Rebase funds
- For clarity, we will refer to "Non-Expansion (Non-Exp)" and "Expansion (Exp)" Enrollment & Expenditures

### Medicaid Point in Time Enrollment by Category: Change Since Start of COVID-19 PHE (Non-Exp)



Source: Monthly Medicaid Enrollment Report, June 2023 JOINT LEGISLATIVE OVERSIGHT COMMITTEE ON MEDICAID | FEBRUARY 6, 2024

## Non-Exp Medicaid Enrollment by Month (Excluding Family Planning)

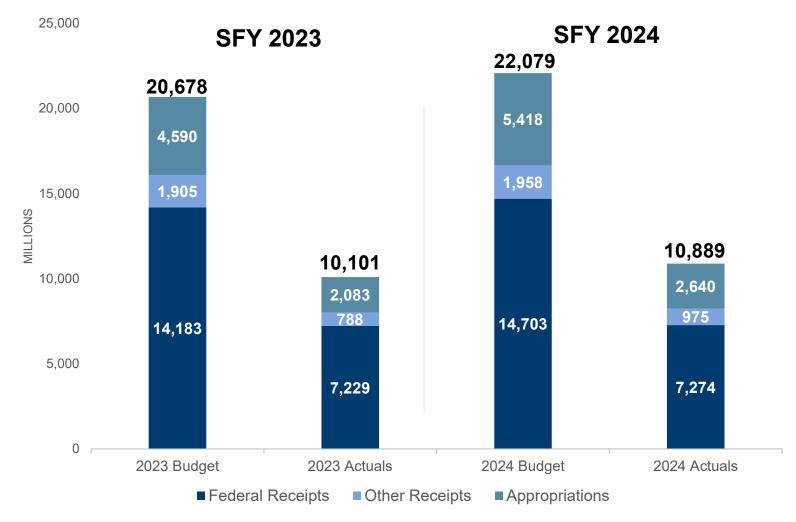


Sources: Actuals from Monthly Member Enrollment Report; Projections from 2023 Governor's Recommended Budget (as updated May 2023) and NCGA Funding for Medicaid Rebase in S.L. 2023-134

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#### **Non-Exp Actual Service Expenditures v. Budget**

Through December, NC Medicaid has spent approximately 49% of the appropriations budget for Medicaid services.



Source: BD701 budget and actuals as of December 2023 and December 2024 (expenditures adjusted to include amt transferred out in Jan for ARPA Temporary Savings Fund)

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# **Budget Pressures/Outlook**

- SFY 2024: Uncertainty
  - Pace of adult enrollment decline
  - Transformation contract costs, project timelines

## SFY 2025: Additional Needs

- Regular FMAP decrease in SFY 2025 (.6591 initial →.6506 final)
- More recurring funding needed to modernize rates for many Medicaid providers whose rates are from 2012-15