

Impact of Medicaid Expansion 2015

Part 2: Phase 1 & Phase 2

(reflects the impact of SB 2512 First Engrossed in FY 2015-16)

Phase 1 – Simple Expansion
Phase 2 – FHIX

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Presented by:



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Phase 1 – Simple Expansion Assumptions...

July 1, 2015 to no later than April 1, 2016

- Simple expansion with the exception that the Crowd Out population has a new decision framework that causes them not to present during Phase 1.
 - Underlying Expansion Population...
 - Uninsured Presenters have a take-up rate of 85.8%.
 - 50% present July 1, 2015; the remainder are split evenly to present on August 1, 2015; September 1, 2015; October 1, 2015.
 - Crowd Out...
 - Since this group already has insurance, they will wait for the FHIX options to become known and then make a decision at the beginning of Phase 2.
 - Medically Needy...
 - Splits into three groups:
 - Group 1 – Children under the age of 19 and Pregnant Women who do not otherwise qualify for Medicaid are enrolled until October 1, 2019.
 - Group 2 – Persons aged 19-64 above 133% FPL and Seniors at all income levels are disenrolled on October 1, 2015.
 - Group 3 – Persons aged 19-64 below 133% FPL move to Phase 1 – Simple Expansion on July 1, 2015 with a take-up rate 100% (shift population).

Phase 1 – Simple Expansion Enrollees...

<i>Expansion Population in Phase 1 - Simple Expansion</i>	Assumptions	FY 2015-16
Eligible Universe		865,591
Take-Up Rate (85.8%)	85.8%	742,677
Phase 1 - Uninsured Presenters (100.0%) present July-October 2015	100.0%	742,677

<i>Crowd Out in Phase 1 - Simple Expansion</i>	Assumptions	FY 2015-16
Eligible Universe		122,704
Take-Up Rate (0.0%)	0.0%	-
Phase 1 - Crowd Out Enrollees (100.0%)	100.0%	-

<i>Medically Needy in Phase 1 - Simple Expansion</i>	Assumptions	FY 2015-16
Shift Population		25,964
Take-Up Rate (100.0%)	100.0%	25,964
Phase 1 - Medically Needy Enrollees (100.0%) present July 1, 2015	100.0%	25,964

Phase 1 - Simple Expansion Total Enrollees		768,641
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Phase 2 – FHIX Assumptions...

Beginning January 1, 2016

- Phase 2 Expansion Enrollees - Uninsured Presenters from Phase 1 are:
 - Reduced for Constraints (64.4% remain).
 - School
 - Employment by hours for parents and others
 - Job Seekers
 - Disabled
 - Increased for Caregivers (estimated to be 6,857 in the base population).
 - Further reduced for attrition between Phase 1 and Phase 2 (70.0% remain).
 - Participants present evenly during the months of January through March 2016
 - Some Phase 1 Uninsured Presenters disenroll, while others transition to FHIX.
- Crowd Out...
 - The Eligible Universe was screened to determine those most likely to stay with private insurance (approximately 67% based on school status, youth, and probability of constraint failure).
 - The remaining population was reduced again by 50% to reflect those making a case by case decision based on specific FHIX offerings.
 - This population presents evenly during the months of January through March 2016.
- Medically Needy...
 - Group 3 transitions from Phase 1 to Phase 2 during the months of January through March 2016 (33.33% each month).

Phase 2 – FHI Assumptions...

Beginning January 1, 2016

- Assumptions (continued):
 - It is unclear what the insurance coverage options will be for those enrolled in Phase 1 who do not transition to Phase 2. At least Phase 1 will be deemed a Medicaid program; the status of Phase 2 is unknown until federal approval is given. If Phase 2 is also deemed to be a Medicaid program, potential enrollees may no longer be eligible for subsidies through the Exchange.
 - All Phase 2 participants continue to pay premiums in a timely manner.
 - Premiums are deducted from total expenses before application of Federal/State split, mirroring the Healthy Kids program.
 - Phase 2 continues for the duration of this analysis.

Phase 2 – FHIX Enrollees...

Expansion Population in Phase 2 - FHIX	FY 2015-16	FY 2016-17	FY 2017-18	FY 2017-18	FY 2018-19
Eligible Universe	865,591	878,142	890,637	903,071	915,411
Take-Up Rate (85.8%)	742,677	753,446	764,167	774,835	785,423
Meet School and Working Constraints (64.4%)	478,284	485,219	492,124	498,994	505,812
Add-in Adjustment for Caregivers	7,153	7,257	7,360	7,463	7,565
Subtotal	485,437	492,476	499,484	506,457	513,377
Phase 2 - Expansion Enrollees (70.0%)	339,806	344,733	349,639	354,520	359,364

Crowd Out Population in Phase 2 - FHIX	FY 2015-16	FY 2016-17	FY 2017-18	FY 2017-18	FY 2018-19
Eligible Universe	122,704	122,704	122,704	122,704	122,704
Take-Up Rate (100.0%)	122,704	122,704	122,704	122,704	122,704
Adjustment to Account for Initial Screening (approximately 32.6%)	40,062	40,062	40,062	40,062	40,062
Phase 2 - Crowd Out Enrollees (50.0%)	20,031	20,031	20,031	20,031	20,031

Medically Needy in Phase 2 - FHIX	FY 2015-16	FY 2016-17	FY 2017-18	FY 2017-18	FY 2018-19
Shift Population (Group 3)	25,964	25,886	25,808	25,731	25,653
Take-Up Rate (100.0%)	25,964	25,886	25,808	25,731	25,653
Phase 2 - Medically Needy Enrollees (100.0%)	25,964	25,886	25,808	25,731	25,653

Phase 2 - FHIX Total Enrollees	385,801	390,650	395,478	400,282	405,048
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Note: FY 2015-16 figures represent enrollment on June 30, 2016.

Phase 1 & Phase 2 – FY 2015-16 Worksheet...

FY 2015-16 Expenditures													
	Total	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Phase 1 Expansion Enrollees ¹	742,677	371,339	495,366	619,393	742,677	742,677	742,677	495,143	247,609	0	0	0	0
Phase-in pattern		50%	16.7%	16.7%	16.6%	0%	0%						
Phase-out pattern								-33.3%	-33.3%	-33.3%	0%	0%	0%
Phase 1 Crowd out Enrollees ²	0	0	0	0	0	0	0	0	0	0	0	0	0
Phase 1 Medically Needy Enrollees ³	25,964	25,964	25,964	25,964	25,964	25,964	25,964	17,310	8,656	0	0	0	0
Phase-in pattern		100.0%	0.0%	0.0%	0.0%	0%	0%						
Phase-out pattern								-33.3%	-33.3%	-33.3%	0%	0%	0%
Monthly per capita Expansion and Crowd out		\$320.86	\$320.86	\$320.86	\$320.86	\$320.86	\$320.86	\$320.86	\$320.86				
Monthly per capita Medically Needy		\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76				
Total Expenditures Phase 1 Expansion	\$1,430,038,245	\$119,148,115	\$158,943,513	\$198,738,912	\$238,295,910	\$238,295,910	\$238,295,910	\$158,871,962	\$79,448,013	\$0	\$0	\$0	\$0
Total Expenditures Phase 1 Crowd out	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Expenditures Phase 1 Medically Needy	\$350,730,824	\$50,103,688	\$50,103,688	\$50,103,688	\$50,103,688	\$50,103,688	\$50,103,688	\$33,404,129	\$16,704,569	\$0	\$0	\$0	\$0
Total Expenditures Phase 1	\$1,780,769,069	\$169,251,803	\$209,047,201	\$248,842,599	\$288,399,598	\$288,399,598	\$288,399,598	\$192,276,090	\$96,152,582	\$0	\$0	\$0	\$0
Phase 2 Expansion Enrollees ¹	339,806							113,257	226,514	339,806	339,806	339,806	339,806
Phase-in pattern								33.3%	33.3%	33.3%	0%	0%	0%
Phase 2 Crowd out Enrollees ²	20,031							6,676	13,352	20,031	20,031	20,031	20,031
Phase-in pattern								33.3%	33.3%	33.3%	0%	0%	0%
Phase 2 Medically Needy Enrollees ³	25,964							8,654	17,307	25,964	25,964	25,964	25,964
Phase-in pattern								33.3%	33.3%	33.3%	0%	0%	0%
Monthly per capita Expansion and Crowd out								\$320.86	\$320.86	\$320.86	\$320.86	\$320.86	\$320.86
Monthly per capita Medically Needy								\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76	\$1,929.76
Total Expenditures Phase 2 Expansion	\$545,140,835	\$0	\$0	\$0	\$0	\$0	\$0	\$36,339,728	\$72,679,455	\$109,030,413	\$109,030,413	\$109,030,413	\$109,030,413
Total Expenditures Phase 2 Crowd out	\$32,134,847	\$0	\$0	\$0	\$0	\$0	\$0	\$2,142,066	\$4,284,133	\$6,427,162	\$6,427,162	\$6,427,162	\$6,427,162
Total Expenditures Phase 2 Medically Needy	\$250,513,428	\$0	\$0	\$0	\$0	\$0	\$0	\$16,699,559	\$33,399,118	\$50,103,688	\$50,103,688	\$50,103,688	\$50,103,688
Total Expenditures Phase 2	\$827,789,110	\$0	\$0	\$0	\$0	\$0	\$0	\$55,181,353	\$110,362,706	\$165,561,263	\$165,561,263	\$165,561,263	\$165,561,263
Expansion Enrollee Premium Revenue	\$28,422,827	\$0	\$0	\$0	\$0	\$0	\$0	\$1,894,699	\$3,789,398	\$5,684,683	\$5,684,683	\$5,684,683	\$5,684,683
Crowd out Enrollee Premium Revenue	\$1,494,588	\$0	\$0	\$0	\$0	\$0	\$0	\$99,627	\$199,255	\$298,927	\$298,927	\$298,927	\$298,927
Medically Needy Enrollee Premium Revenue	\$2,171,711	\$0	\$0	\$0	\$0	\$0	\$0	\$144,769	\$289,538	\$434,351	\$434,351	\$434,351	\$434,351
Total Enrollee Premium Revenue Phase 2	\$32,089,126	\$0	\$0	\$0	\$0	\$0	\$0	\$2,139,095	\$4,278,191	\$6,417,960	\$6,417,960	\$6,417,960	\$6,417,960

¹Half of the Expansion enrollees enroll July 1, 2015; one-sixth enroll on the 1st of each of the subsequent 3 months. One-third of Expansion enrollees disenroll from Phase 1 in each of the first three months: January 1, February 1, and March 1, 2016. Of each one-third group that disenrolls, those who meet the FHIX criteria (46%) enroll in Phase 2 at that time. Those who do not meet the criteria (54%) cannot enter Phase 2 and may no longer be able to obtain insurance coverage through the Exchange.

²None of the Crowd out enrollees enroll in Phase 1. One-third of Crowd out enrollees enroll in Phase 2 in each of the first three months: January 1, February 1, and March 1, 2016.

³All of the current Medicaid Medically Needy who meet the simple Medicaid Expansion criteria are assumed to move from traditional Medicaid to FHIX Phase 1 on July 1, 2016. One-third of Medically Needy enrollees disenroll from Phase 1 in each of the first three months: January 1, February 1, and March 1, 2016. Of each one-third group that disenrolls, those who meet the FHIX criteria (100%) enroll in Phase 2 at that time.

Expenditures have to be calculated month-by-month to reflect movements into and out of Phase 1 and into Phase 2.

Phase 1 & Phase 2 – Annual Expenditures...

Phase 1 and 2 - Annual Expenditures	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Expansion Enrollees					
Total	See FY 2015-16	344,733	349,639	354,520	359,364
Per capita expenditures	Worksheet	\$3,969.71	\$4,081.43	\$4,196.29	\$4,314.39
Expenditures	\$1,975,179,080	\$1,368,491,130	\$1,427,027,454	\$1,487,669,744	\$1,550,435,449
Per capita weighted annual premium	\$200.75	\$200.75	\$200.75	\$200.75	\$200.75
Premium Revenue	\$28,422,827	\$69,205,288	\$70,190,169	\$71,170,032	\$72,142,467
Net Expenditures (Premium Revenue subtracted)	\$1,946,756,252	\$1,299,285,842	\$1,356,837,285	\$1,416,499,712	\$1,478,292,982
Crowd out Enrollees					
Caseload	See FY 2015-16	20,031	20,031	20,031	20,031
Per capita expenditures	Worksheet	\$3,969.71	\$4,081.43	\$4,196.29	\$4,314.39
Expenditures	\$32,134,847	\$79,517,324	\$81,755,144	\$84,055,942	\$86,421,490
Per capita weighted annual premium	\$179.08	\$179.08	\$179.08	\$179.08	\$179.08
Premium Revenue	\$1,494,588	\$3,587,119	\$3,587,119	\$3,587,119	\$3,587,119
Net Expenditures (Premium Revenue subtracted)	\$30,640,259	\$75,930,205	\$78,168,025	\$80,468,823	\$82,834,371
Medically Needy Enrollees					
Total	See FY 2015-16	25,886	25,808	25,731	25,653
Per capita expenditures	Worksheet	\$23,272.96	\$23,389.32	\$23,506.27	\$23,623.80
Expenditures	\$601,244,252	\$602,437,722	\$603,633,560	\$604,831,773	\$606,032,364
Per capita weighted annual premium	\$200.75	\$200.75	\$200.75	\$200.75	\$200.75
Premium Revenue	\$2,171,711	\$5,196,573	\$5,180,983	\$5,165,440	\$5,149,944
Net Expenditures (Premium Revenue subtracted)	\$599,072,541	\$597,241,149	\$598,452,577	\$599,666,333	\$600,882,420
Total Enrollees	See FY 2015-16	390,650	395,478	400,282	405,048
Total Expenditures	Worksheet	\$2,608,558,179	\$2,050,446,176	\$2,112,416,159	\$2,242,889,303
Total Enrollee Premium Revenue	\$32,089,126	\$77,988,980	\$78,958,272	\$79,922,591	\$80,879,530
Total Net Expenditures (Premium Revenue subtracted)	\$2,576,469,053	\$1,972,457,196	\$2,033,457,887	\$2,096,634,868	\$2,162,009,773
Expansion FMAP	100.00%	97.50%	94.50%	93.50%	91.50%
Federal Expenditures	\$2,576,469,053	\$1,923,145,766	\$1,921,617,703	\$1,960,353,601	\$1,978,238,943
State Expenditures	\$0	\$49,311,430	\$111,840,184	\$136,281,266	\$183,770,831

Medically Needy Savings from Shift...

Non Pregnant adults 19-64 Below 133%	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Caseload Growth Rate for MN from SSEC ¹		-0.67%	-0.30%	-0.30%	-0.30%	-0.30%
Non Pregnant adults 19-64 Caseload Below 133%	26,139	25,964	25,886	25,808	25,731	25,653
Expenditures Growth Rate ²		0.5%	0.5%	0.5%	0.5%	0.5%
Non Pregnant adults 19-64 Per Capita Expenditures Below 133%	\$23,042	\$23,157	\$23,273	\$23,389	\$23,506	\$23,624
Non Pregnant adults 19-64 Below 133%						
Total Expenditures³		\$601,244,252	\$602,437,722	\$603,633,560	\$604,831,773	\$606,032,364
Medically Needy FMAP		60.51%	61.17%	61.33%	61.50%	61.74%
Federal Expenditures w/o SB 2512		\$363,812,897	\$368,511,154	\$370,208,463	\$371,971,540	\$374,164,382
State Expenditures w/o SB 2512 ⁴		\$237,431,355	\$233,926,568	\$233,425,097	\$232,860,233	\$231,867,982
Expansion FMAP		100.00%	97.50%	94.50%	93.50%	91.50%
Medically Needy Enrollees FHIX Net Expenditures (lower due to FHIX premium revenue)		\$599,072,541	\$597,241,149	\$598,452,577	\$599,666,333	\$600,882,420
Federal Expenditures under SB 2512		\$599,072,541	\$582,310,120	\$565,537,686	\$560,688,021	\$549,807,415
State Expenditures under SB 2512 ⁴		\$0	\$14,931,029	\$32,914,892	\$38,978,312	\$51,075,006
State Impact - Medically Needy Non Pregnant adults 19-64 Under 133%		(\$237,431,355)	(\$218,995,539)	(\$200,510,206)	(\$193,881,921)	(\$180,792,976)

Note: The 25,964 below 133% move to Phase 1 on July 1, 2015 (Phase 1 and 2 net expenditures computed on Annual Expenditures table).

Footnotes:

¹Last two years Caseload Growth Rate held at FY 2017-18 rate

²SSEC growth rate of Hospital Inpatient Services unit cost, which is the largest expenditure category for Medically Needy, of 0.5% annually

³Total Expenditure lines computed as under current law

⁴State Expenditures include GR, GDTF, and PMATF

Positive Total = Additional Cost; Negative Total = Savings

Medically Needy Savings from Population Reduction...

Non Pregnant adults Above 133% and Seniors at all income levels

Non Pregnant adults 19-64 Above 133%	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Caseload Growth Rate for MN from SSEC ¹		-0.67%	-0.30%	-0.30%	-0.30%	-0.30%
Non Pregnant adults 19-64 Caseload						
133-400%	3,134	3,113	3,104	3,094	3,085	3,076
Over 400%	100	99	99	99	98	98
Expenditures Growth Rate ²		0.5%	0.5%	0.5%	0.5%	0.5%
Non Pregnant adults 19-64 Per Capita Expenditures						
133-400%	\$23,042	\$23,158	\$23,273	\$23,390	\$23,507	\$23,624
Over 400%	\$23,051	\$23,166	\$23,282	\$23,398	\$23,515	\$23,633
Non Pregnant adults 19-64 Above 133%						
Total Expenditures³		\$74,390,916.13	\$74,538,582.10	\$74,686,541.19	\$74,834,793.97	\$74,983,341.04
Medically Needy FMAP		60.51%	61.17%	61.33%	61.50%	61.74%
Federal Expenditures w/o SB 2512		\$45,013,943	\$45,595,251	\$45,805,256	\$46,023,398	\$46,294,715
State Expenditures w/o SB 2512 ⁴		\$29,376,973	\$28,943,331	\$28,881,285	\$28,811,396	\$28,688,626
Federal Expenditures under SB 2512		\$11,253,486	\$0	\$0	\$0	\$0
State Expenditures under SB 2512 ⁴		\$7,344,243	\$0	\$0	\$0	\$0
SB 2512 State Impact - Medically Needy						
Non Pregnant adults 19-64 Above 133%		(\$22,032,730)	(\$28,943,331)	(\$28,881,285)	(\$28,811,396)	(\$28,688,626)

Note: Under SB 2512, the 133-400% and Over 400% groups are in Medicaid until the Medically Needy program ends for all except children and pregnant women on October 1, 2015.

Adults 65+ - All Income Levels	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Caseload Growth Rate for MN from SSEC ¹		-0.67%	-0.30%	-0.30%	-0.30%	-0.30%
Adults 65+ Caseload						
Below 133%	1,576	1,565	1,561	1,556	1,551	1,547
133-400%	334	332	331	330	329	328
Over 400%	5	5	5	5	5	5
Expenditures Growth Rate ²		0.5%	0.5%	0.5%	0.5%	0.5%
Adults 65+ Per Capita Expenditures						
Below 133%	\$20,487	\$20,589	\$20,692	\$20,796	\$20,900	\$21,004
133-400%	\$20,504	\$20,606	\$20,709	\$20,813	\$20,917	\$21,022
Over 400%	\$20,818	\$20,922	\$21,026	\$21,131	\$21,237	\$21,343
Adults 65+ Total Expenditures³						
Medically Needy FMAP		60.51%	61.17%	61.33%	61.50%	61.74%
Federal Expenditures w/o SB 2512		\$23,702,938	\$24,009,036	\$24,119,618	\$24,234,485	\$24,377,352
State Expenditures w/o SB 2512 ⁴		\$15,468,997	\$15,240,655	\$15,207,984	\$15,171,182	\$15,106,535
Federal Expenditures under SB 2512		\$5,925,734	\$0	\$0	\$0	\$0
State Expenditures under SB 2512 ⁴		\$3,867,249	\$0	\$0	\$0	\$0
SB 2512 State Impact - Medically Needy						
Adults 65+		(\$11,601,748)	(\$15,240,655)	(\$15,207,984)	(\$15,171,182)	(\$15,106,535)

Note: Under SB 2512, individuals 65+ are in Medicaid until the Medically Needy program ends for all except children and pregnant women on October 1, 2015.

Medically Needy Savings from Final Program Sunset...

Children and Pregnant Women

Children and Pregnant Women	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Caseload Growth Rate for MN from SSEC ¹		-0.67%	-0.30%	-0.30%	-0.30%	-0.30%
Children Caseload						
Below 133%	0	0	0	0	0	0
133-400%	839	833	831	828	826	823
Over 400%	4	4	4	4	4	4
Pregnant Women Caseload						
Below 133%	0	0	0	0	0	0
133-400%	100	99	99	99	98	98
Over 400%	0	0	0	0	0	0
Expenditures Growth Rate ²		0.5%	0.5%	0.5%	0.5%	0.5%
Children Per Capita Expenditures						
Below 133%	\$11,514	\$11,571	\$11,629	\$11,687	\$11,746	\$11,804
133-400%	\$11,518	\$11,575	\$11,633	\$11,691	\$11,750	\$11,809
Over 400%	\$11,664	\$11,723	\$11,781	\$11,840	\$11,899	\$11,959
Pregnant Women Per Capita Expenditures						
Below 133%	\$15,668	\$15,746	\$15,825	\$15,904	\$15,983	\$16,063
133-400%	\$15,926	\$16,006	\$16,086	\$16,166	\$16,247	\$16,328
Over 400%	\$0	\$0	\$0	\$0	\$0	\$0
Children and Pregnant Women Total Expenditures³		\$11,283,106	\$11,305,503	\$11,327,944	\$11,350,430	\$11,372,961
Medically Needy FMAP		60.51%	61.17%	61.33%	61.50%	61.74%
Federal Expenditures w/o SB 2512		\$6,827,407	\$6,915,576	\$6,947,428	\$6,980,514	\$7,021,666
State Expenditures w/o SB 2512 ⁴		\$4,455,699	\$4,389,927	\$4,380,516	\$4,369,916	\$4,351,295
Federal Expenditures under SB 2512		\$6,827,407	\$6,915,576	\$6,947,428	\$6,980,514	\$1,755,417
State Expenditures under SB 2512 ⁴		\$4,455,699	\$4,389,927	\$4,380,516	\$4,369,916	\$1,087,824
SB 2512 State Impact - Medically Needy Children and Pregnant Women		\$0	\$0	\$0	\$0	(\$3,263,471)

Note: Under SB 2512, children and pregnant women remain covered by Medicaid until the Medically Needy program ends on October 1, 2019.

Medically Needy Total Savings...

Total State Impact	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Medically Needy Total Expenditures³		\$651,699,292	\$652,992,915	\$654,289,106	\$655,587,870	\$656,889,212
Medically Needy FMAP		60.51%	61.17%	61.33%	61.50%	61.74%
Federal Expenditures w/o SB 2512		\$439,357,185	\$445,031,017	\$447,080,765	\$449,209,937	\$451,858,115
State Expenditures w/o SB 2512 ⁴		\$286,733,023	\$282,500,480	\$281,894,882	\$281,212,727	\$280,014,438
Federal Expenditures under SB 2512		\$623,079,168	\$589,225,696	\$572,485,114	\$567,668,535	\$551,562,831
State Expenditures under SB 2512 ⁴		\$15,667,191	\$19,320,955	\$37,295,408	\$43,348,228	\$52,162,829
SB 2512 State Impact - Medically Needy		(\$271,065,833)	(\$263,179,525)	(\$244,599,475)	(\$237,864,499)	(\$227,851,609)

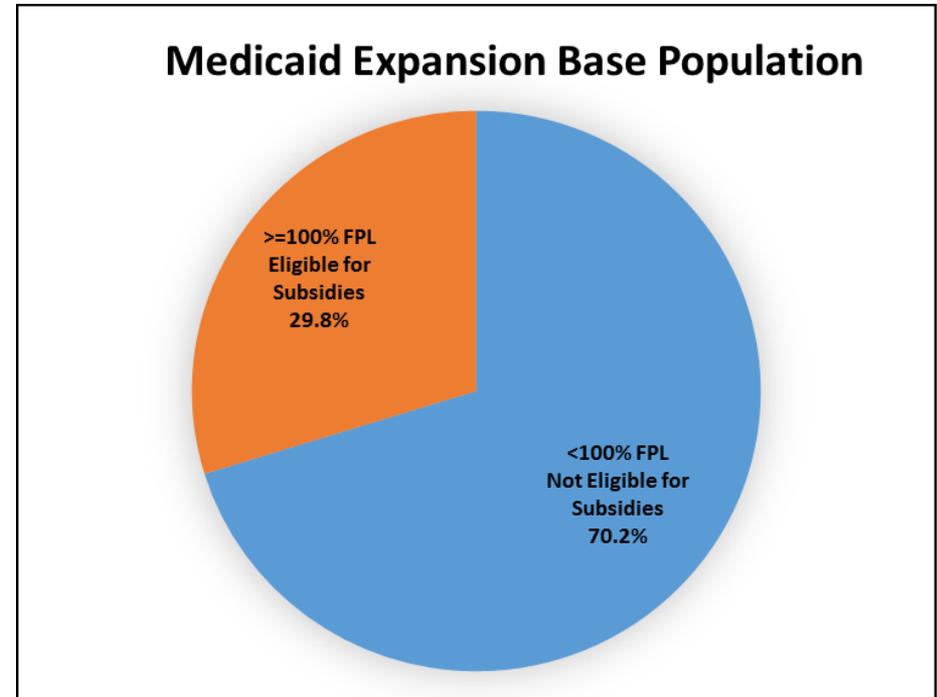
Phase 1 & Phase 2 – Medicaid Coverage...

Phase 1 and 2 Medicaid Coverage Summary	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Medicaid Expansion Population	742,677	753,446	764,167	774,835	785,423
FHIX Phase 1 Enrolled	742,677				
FHIX Phase 2 Enrolled	339,806	344,733	349,639	354,520	359,364
FHIX Phase 2 Disenrolled/Not Enrolled	402,871	408,713	414,528	420,315	426,059
Percent of Population Not Enrolled	54.2%	54.2%	54.2%	54.2%	54.2%
Crowd out Population	20,031	20,031	20,031	20,031	20,031
FHIX Phase 1 Enrolled	0				
FHIX Phase 2 Enrolled	20,031	20,031	20,031	20,031	20,031
FHIX Phase 2 Disenrolled/Not Enrolled	0	0	0	0	0
Percent of Population Not Enrolled	0.0%	0.0%	0.0%	0.0%	0.0%
Medically Needy Shift	25,964	25,886	25,808	25,731	25,653
FHIX Phase 1 Enrolled	25,964				
FHIX Phase 2 Enrolled	25,964	25,886	25,808	25,731	25,653
FHIX Phase 2 Disenrolled/Not Enrolled	0	0	0	0	0
Percent of Population Not Enrolled	0.0%	0.0%	0.0%	0.0%	0.0%
Medically Needy Children and Pregnant Women Population	937	934	931	928	925
Medically Needy Medicaid Enrolled	937	934	931	928	0
Medically Needy Medicaid Disenrolled/Not Enrolled ¹	0	0	0	0	925
Percent of Population Not Enrolled	0.0%	0.0%	0.0%	0.0%	100.0%
Medically Needy Non Pregnant Adults 19-64 above 133%	3,212	3,203	3,193	3,184	3,174
Medically Needy Medicaid Enrolled	0	0	0	0	0
Medically Needy Medicaid Disenrolled/Not Enrolled	3,212	3,203	3,193	3,184	3,174
Percent of Population Not Enrolled	100.0%	100.0%	100.0%	100.0%	100.0%
Medically Needy Adults 65+ All Income Levels	1,902	1,896	1,891	1,885	1,879
Medically Needy Medicaid Enrolled	0	0	0	0	0
Medically Needy Medicaid Disenrolled/Not Enrolled	1,902	1,896	1,891	1,885	1,879
Percent of Population Not Enrolled	100.0%	100.0%	100.0%	100.0%	100.0%
Total all groups	794,723	805,396	816,021	826,594	837,086
Total Enrolled	386,737	391,584	396,409	401,210	405,048
Total Disenrolled/Not Enrolled	407,986	413,812	419,612	425,384	432,038
Percent of Population Not Enrolled	51.3%	51.4%	51.4%	51.5%	51.6%

¹Children and pregnant women are disenrolled from the Medically Needy program when it ends on October 1, 2019.

Disenrollees and the Exchange...

- Subsidies (health insurance premium tax credits) are only available to persons between 100% to 400% FPL selecting insurance coverage through the Exchange.
- Florida's Medicaid Expansion base population has 70.2% who are not eligible for subsidies today, and the remaining 29.8% are eligible for subsidies.
- EDR assumes that the disenrolled population would mirror Florida's Medicaid Expansion base population and therefore at least 70.2% would continue to be ineligible for subsidies on the Exchange.
- It is currently unknown whether the remaining 29.8% that are between 100% and 133% FPL would be allowed to receive subsidies for private insurance coverage purchased on the Exchange.



Insurance Premium Tax: Crowd Out Adjustment...

- 40,062 persons currently have private individual insurance and would qualify for FHIX.
- This analysis assumes that 20,031 would forgo private insurance for FHIX, removing them from the current pool of privately insured.
- In Phase 2, the premiums and tax collections from the underlying Insurance Premium Tax forecast associated with the 20,031 would be removed.

Insurance Premium Tax: ACA Induced...

- The current revenue forecast assumes 1.44 million individuals are induced by the Affordable Care Act to obtain private insurance that is subject to the Insurance Premium Tax in the 2015 calendar year.
- This analysis assumes that 234,284 of the 1.44 million individuals would qualify for and move to Medicaid under Phase 1 - Simple Expansion in lieu of seeking private insurance. This number grows and is included within the uninsured presenters.
- The premiums and tax collections from the underlying Insurance Premium Tax forecast associated with these individuals are removed during the entire forecast.
- Some of the Phase 1 participants would be disenrolled during the transition to Phase 2; however, their remaining insurance options are unclear and the disenrollee feedback to the Insurance Premium Tax forecast is indeterminate.

Insurance Premium Tax: FHIX Plan Selections...

- The ultimate mix of insurance offerings on FHIX are currently unknown.
- Among other options, FHIX can offer “...a managed care plan contracted with the Agency for Health Care Administration under the managed medical assistance program under part IV of Chapter 409.” Today, these plans (Medicaid MMA) are not subject to the Insurance Premium Tax. The Insurance Premium Tax status of **Medicaid MMA through FHIX** is unclear.
- For these reasons, the impact of FHIX selections on Insurance Premium Tax collections is indeterminate.

Phase 1 & Phase 2 – Insurance Premium Tax...

Insurance Premium Tax

	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Phase 1 - Impact of Simple Expansion	(\$7,226,394)	(\$6,187,003)	(\$6,570,490)	(\$6,807,356)	(\$7,108,618)
Phase 2 - Impact of Crowd Out leaving private insurance	\$0	(\$403,304)	(\$311,722)	(\$307,841)	(\$317,198)
Phase 2 - Impact of FHIX plan selection	\$0	Indeterminate	Indeterminate	Indeterminate	Indeterminate
Impact of Disenrolled	\$0	Indeterminate	Indeterminate	Indeterminate	Indeterminate
Total Cash Impact on Insurance Premium Tax	(\$7,226,394)	(\$6,590,307)	(\$6,882,212)	(\$7,115,197)	(\$7,425,816)

Overall Fiscal Impacts...

Expansion Program	FY 2015-16		FY 2016-17		FY 2017-18		FY 2018-19		FY 2019-20	
	Caseload	State \$\$\$	Caseload	State \$\$\$						
<i>Uninsured Presenters (new)*</i>	742,677	-	753,446	(75.1)	764,167	(172.3)	774,835	(212.3)	785,423	(289.3)
<i>Crowd-Out (new)</i>	122,704	-	122,704	(12.2)	122,704	(27.6)	122,704	(33.5)	122,704	(45.0)
<i>Medically Needy Shift (net)**</i>	-	237.4	-	218.9	-	200.2	-	193.5	-	180.4
<i>Medicaid Subtotal</i>	865,381	237.4	876,150	131.6	886,871	0.3	897,539	-52.3	908,127	-153.9
<i>Insurance Premium Revenue Adj.</i>	-	(8.9)	-	(8.0)	-	(8.4)	-	(8.7)	-	(9.1)
Total	865,381	228.5	876,150	123.6	886,871	(8.1)	897,539	(61.0)	908,127	(163.0)

Note: Dollars in Millions; Positive Total = Surplus; Negative Total = Shortfall

*Includes qualifying persons on the waitlist for the APD Developmental Services Waiver and service recipients in the DCF Substance Abuse and Mental Health Program.

**Assumes approximately 26,000 non-pregnant adults aged 19-64 shift from the Medically Needy Program to the Expansion Program, with no other changes.

SB 2512 Phases 1 and 2	FY 2015-16		FY 2016-17		FY 2017-18		FY 2018-19		FY 2019-20	
	Caseload*	State \$\$\$	Caseload	State \$\$\$						
<i>Uninsured Presenters (new)**</i>	339,806	-	344,733	(32.5)	349,639	(75.0)	354,520	(92.1)	359,364	(125.7)
<i>Crowd-Out (new)</i>	20,301	-	20,031	(1.9)	20,031	(4.3)	20,031	(5.2)	20,031	(7.0)
<i>Medically Needy Shift (net)***</i>	-	237.4	-	219.0	-	200.5	-	193.9	-	180.8
<i>Medically Needy Sunset****</i>	N/A	33.6	N/A	44.2	N/A	44.1	N/A	44.0	N/A	47.1
<i>Phase 1 and 2 Subtotal</i>	360,107	271.0	364,764	228.8	369,670	165.3	374,551	140.6	379,395	95.2
<i>Insurance Premium Revenue Adj.</i>	-	(7.2)	-	(6.6)	-	(6.9)	-	(7.1)	-	(7.4)
Total	360,107	263.8	364,764	222.2	369,670	158.4	374,551	133.5	379,395	87.8

Note: Dollars in Millions; Positive Total = Surplus; Negative Total = Shortfall

* The caseload figures for FY 2015-16 represent the number enrolled at the end of the fiscal year.

** Includes qualifying persons on the waitlist for the APD Developmental Services Waiver and service recipients in the DCF Substance Abuse and Mental Health Program.

*** Assumes approximately 26,000 non-pregnant adults aged 19-64 under 133% FPL shift from the Medically Needy Program to Phase 1 and 2. State savings result from the higher federal match rate for Phase 1 and 2 expenditures and from enrollee premium payments, which are exclusive to Phase 2.

**** Caseload in this row is not shown because individuals are included in current Medicaid program enrollment numbers. Non-pregnant adults ages 19-64 above 133% FPL and adults ages 65+ at all income levels (about 5,100 individuals in total) will be disenrolled from the program October 1, 2015. Children and pregnant women (about 930 individuals in total) will be disenrolled when the program is terminated on October 1, 2019. State savings in this row result from the disenrollment of these individuals at these points in time.

Expansion Program vs. SB 2512 Phases 1 and 2	FY 2015-16		FY 2016-17		FY 2017-18		FY 2018-19		FY 2019-20	
	Caseload	State \$\$\$								
	-505,274	+35.3	-511,386	+98.6	-517,201	+166.5	-522,988	+194.5	-528,732	+250.8