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September 18, 2012

Mr. Michael Gargano
Secretary
State of Indiana
Indiana Family and Social Services Administration
402 W. Washington Street
Indianapolis, IN 46204

**RE: AFFORDABLE CARE ACT (ACA) – MEDICAID FINANCIAL IMPACT ANALYSIS
UPDATE**

Dear Secretary Gargano:

Milliman, Inc. (Milliman) has been retained by the Indiana Family and Social Services Administration (FSSA) to provide consulting services related to the financial review of the Affordable Care Act (ACA) as it relates to the provisions impacting the State's Medicaid program and budget. This document replaces prior correspondence dated October 27, 2011. Since the previous report, part of the Affordable Care Act, the Medicaid Expansion, has become optional. Accordingly, this analysis illustrates costs with and without the expansion. It also illustrates the fiscal impact of a partial expansion to 100% of FPL. Finally, this analysis incorporates the impact of the Health Insurance Tax (HIT) and reflects updates that have occurred to the baseline program such as hospital reimbursement changes and the pending decision to transition to 1634 status.

LIMITATIONS

The information contained in this letter has been prepared for the Family and Social Services Administration (FSSA). This letter is expected to be publicly available. To the extent that the information contained in this correspondence is provided to any approved third parties, the correspondence should be distributed in its entirety. Any user of the data must possess a certain level of expertise in actuarial science and healthcare modeling so as not to misinterpret the information presented.

Milliman makes no representations or warranties regarding the contents of this correspondence to third parties. Likewise, third parties are instructed that they are to place no reliance upon this correspondence prepared for FSSA by Milliman that would result in the creation of any duty or liability under any theory of law by Milliman or its employees to third parties.

In the development of the information presented in this letter, Milliman has relied upon certain data from the State of Indiana and their vendors. To the extent that the data was incomplete or inaccurate, the values presented in the letter will need to be reviewed for consistency and revised as appropriate.

It should be emphasized that actual results will differ from those presented here if experience does not emerge consistent with the assumptions contained in this correspondence.

The services provided for this project were performed under the signed Consulting Services Agreement between Milliman and FSSA approved May 14, 2010.

EXECUTIVE SUMMARY

Milliman has developed an estimate of the enrollment and fiscal impact associated with the Affordable Care Act (ACA). In its June 28, 2012 decision, the Supreme Court of the United States upheld most of the Act, but gave States the flexibility to decide whether to expand their Medicaid program eligibility to 133% of Federal Poverty Guidelines.

Table 1 illustrates the projected expenditure impact to the State of Indiana Medicaid Assistance program and budget under the following scenarios:

- **Scenario 1: No Medicaid Expansion beyond Current Medicaid Eligibility.** Additional enrollment is projected from those who are already eligible for Medicaid due to pressure from the individual mandate, referrals from the exchange, and potential loss of access to employer sponsored insurance. From SFY 2014 to SFY 2020, even if the State does not expand Medicaid, it will still incur an estimated ***\$611.7 million*** in additional expenditures. (See Table 1 for detail by year and Table 2 for detail by cost type).
- **Scenario 2: Medicaid Expansion to 100% FPL (Partial Expansion).** Residents with incomes from 100% to 400% of FPL are eligible for exchange subsidies. The incremental Non-Federal cost of expanding Medicaid to 100% FPL is estimated at \$1,099.1 million from SFY 2014 to SFY 2020. Added to the \$611.7 cost of ACA without a Medicaid expansion, the total cost under Scenario 2 is estimated at ***\$1,710.9 million*** in additional expenditures. Since the expansion is only a partial expansion, the State may or may not receive the 100% enhanced federal funding for the partial expansion population. However, Scenario 2 assumes the State receives the enhanced Federal funding.
- **Scenario 3: Medicaid Expansion to 133% FPL** (the 133% level specified in ACA is effectively 138%, due to the 5% income disregard). Additional costs for this population are estimated to be \$326.5 million from SFY 2014 to SFY 2020. Added to the \$1,710.9 million cost for adults under 100% of FPL and for ACA costs in the absence of an expansion, the total cost under Scenario 3 is estimated to be ***\$2,037.3 million*** in additional expenditures from SFY 2014 to SFY 2020.
- **Scenario 4: Full Participation.** This scenario illustrates the cost of the 133% expansion (Scenario 3), assuming all eligible individuals below 138% FPL enroll in Medicaid. This includes all individuals who are currently eligible, all adults up to 100% of FPL, and all adults between 100% and 138% FPL, including those who currently have other insurance but would become eligible for Medicaid under an expansion. Scenarios 1 through 3 did not assume 100% participation (Participation rates are illustrated on page 5 and estimated enrollment in Enclosure 5). Scenario 4 represents an estimate of the State's maximum cost exposure. It should not be expected that full participation will occur. Rather, this scenario provides an estimated

upper limit of the exposure. The cost of ACA with the Medicaid expansion to 138% and full participation is estimated to cost \$513.1 million more than with estimated participation in Scenario 3, for a total cost of **\$2,550.5 million** from SFY 2014 to SFY 2020.

Table 1 illustrates costs by year, with total SFY 2014 to SFY 2020 costs illustrated in the last column. The individual scenario costs in Table 1 are illustrated on an incremental basis, each showing the difference in cost from the prior scenario. The scenario costs are illustrated on a cumulative basis in Table 2.

Table 1

State Of Indiana
Family and Social Services Administration
Affordable Care Act Expenditure Scenarios
Non-Federal Dollars, in Millions

	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	2014-2020
Baseline State Expenditures	\$2,929.9	\$3,036.9	\$3,103.9	\$3,266.5	\$3,438.5	\$3,620.4	\$3,812.7	\$23,208.7
Additional ACA Spending								
Scenario 1: No Expansion	\$67.1	\$105.1	\$81.2	\$74.6	\$78.4	\$82.2	\$123.1	\$611.7
Scenario 2: 100% Expansion	53.2	94.5	91.3	139.0	201.9	231.6	287.5	1,099.1
Scenario 3: 133% Expansion	13.4	12.1	12.5	36.2	67.1	80.1	105.2	326.5
Scenario 4: Full Participation at 133% FPL	27.9	45.0	41.6	64.7	94.1	107.8	132.1	513.1
Total ACA Spending Growth	\$161.7	\$256.7	\$226.5	\$314.6	\$441.4	\$501.7	\$647.9	\$2,550.5
Total Medicaid Spending	\$3,091.6	\$3,293.6	\$3,330.4	\$3,581.1	\$3,879.9	\$4,122.1	\$4,460.6	\$25,759.3

Notes: Illustrated costs for each scenario are incremental to previous scenarios.

Values may not sum due to rounding.

The incremental cost of ACA to the State increases through the projection period as federal funding declines. Federal funding for the expansion population declines from 100% during calendar years 2014 through 2016 to 90% beginning in calendar year 2020.

Table 2 illustrates the primary ACA cost components under each scenario. Costs are illustrated on a cumulative basis. For example, costs for the 100% Expansion under Scenario 2 include the costs that would be incurred even if the State decided not to expand Medicaid (Scenario 1). Costs illustrated under Scenario 3: 133% Expansion also include costs for expanding Medicaid enrollment to adults under 100% FPL (Scenario 2) and for costs that would be incurred in the absence of a Medicaid Expansion (Scenario 1).

Table 2
State Of Indiana
Family and Social Services Administration
Affordable Care Act – Primary Cost Components
SFY 2014 – SFY 2020
Non-Federal Dollars, in Millions

ACA Cost Components	Scenario 1: No Expansion	Scenario 2: 100% Expansion	Scenario 3: 133% Expansion	Scenario 4: Full Exposure
Baseline State Expenditures	\$23,208.7	\$23,208.7	\$23,208.7	\$23,208.7
Medicaid Expansion Population	\$0	\$405.0	\$617.6	\$784.2
Woodwork Effect Population	600.1	600.1	600.1	810.4
Physician Fee Schedule Increase	0.0	564.5	581.4	610.6
Foster Children Expansion to Age 26	22.0	22.0	22.0	22.0
Health Insurance Tax	122.8	133.0	138.3	147.7
Administrative Expenses	84.2	246.2	337.9	435.5
CHIP Program – Enhanced FMAP	(176.2)	(176.2)	(176.2)	(176.2)
Breast and Cervical Cancer Program	(1.1)	(43.7)	(43.7)	(43.7)
Pregnant Women > 150% FPL	(40.1)	(40.1)	(40.1)	(40.1)
Total ACA Cost Increase	\$611.7	\$1,710.9	\$2,037.3	\$2,550.5
Total State Spending	\$23,820.5	\$24,919.6	\$25,246.1	\$25,759.3

Note: Values may not sum due to rounding.

Baseline State Expenditures include all State-funded expenditures: Medicaid Assistance, CHIP Assistance, Intergovernmental Transfers, and other sources.

Illustrated costs assume the State will receive the enhanced FMAP on all newly eligible enrollees, including those who may have recently transitioned from the HIP program. If CMS limits Indiana to the regular FMAP on the first 36,500 HIP enrollees, the State is projected to incur an additional **\$575 million** cost over the period SFY 2014 through SFY 2020.

Baseline State Expenditures include recent program changes and those that are projected to occur regardless of whether the State chooses to implement the Medicaid expansion. These include the pending transition to 1634 status and maintenance of current hospital reimbursement, through the hospital assessment fee program. It is assumed that reimbursement for new expansion enrollees is at the same rates as for current Medicaid enrollees, and where reimbursement is supported through inter-governmental transfer payments, these transfer payments are included as part of the State cost. Baseline expenditures include current CHIP and administrative costs.

For each of the four scenarios, Enclosures 1 through 4 illustrate the ACA cost components by year. In addition to State expenditures, Total (State and Federal) expenditures and Federal expenditures are also illustrated.

The primary cost components are further discussed in the next section.

DISCUSSION OF COST COMPONENTS

Medicaid Expansion

The fiscal impact associated with the ACA includes both currently insured and uninsured individuals, with different assumed participation rates. The impact also includes additional individuals who are currently eligible for Medicaid but not enrolled.

The projected number of individuals who will be eligible for Medicaid under the various scenarios was developed using the 2010 American Community Survey (ACS) data from the U.S. Census Bureau, 2010 Supplemental Health Exhibit data, and the SHADAC Indiana health insurance analysis. The information included detailed information on current income and health insurance coverage for Indiana residents. We have excluded college and graduate students from the analysis. Based on our review of the data, it appears they may not have been appropriately grouped with their parents, causing an inappropriate match between income level and insurance coverage. In addition, many of the uninsured individuals in this population may now be covered under their parents' policies, if the parents have employer sponsored insurance. We have also adjusted the census data to address under-reporting of Medicaid coverage for children.

Enclosure 5 illustrates both the number of individuals expected to be eligible (Full Enrollment) and those projected to actually enroll under each scenario (Projected Enrollment). This is illustrated for SFY 2015, the first full year after the potential Medicaid expansion. The expected participation rate varies by population type and current medical coverage as illustrated below:

- 75% for Currently Insured Parents and Children
- 50% for Currently Insured Adults
- 85% for Uninsured Parents
- 70% for Uninsured Children
- 80% for Uninsured Adults

We have further assumed that 100% of the individuals currently enrolled in HIP will enroll in Medicaid if they are eligible. The composite participation rate across the related populations for each scenario is approximately 75% to 76%, excluding the full participation scenario.

The four scenarios modeled include no expansion, expansion to 100%, and expansion to 138% of federal poverty guidelines. Although Section 2001(a) of the ACA references 133% of FPL for the full expansion, an additional 5% income disregard is provided for during eligibility determination in Section 1004(e)(2) of HCERA. Income for each household was developed based on Modified Adjusted Gross Income (MAGI), as specified in the ACA. The definition of MAGI excludes most public assistance payments. It was modified in November 2011 to include all Social Security benefits.

The analysis reflects the following enhanced Federal Medical Assistance Percentages (FMAP) for the expansion populations:

- 100% FMAP in CY 2014, 2015, and 2016
- 95% FMAP in CY 2017
- 94% FMAP in CY 2018

- 93% FMAP in CY 2019
- 90% FMAP in CY 2020+

The woodwork population was assumed to have the same FMAP as the current eligible population.

Physician Fee Schedule Increase to 80% of Medicare

The current Indiana Medicaid fee schedule reimburses physicians at approximately 60% of the Medicare fee schedule. It is anticipated that a significant increase in Medicaid enrollees would require the Agency to increase fees paid to physicians in order to ensure access to care. We have estimated that the minimum fee schedule increase needed for physicians would be to 80% of the current Medicare fee schedule. We have estimated that the increase to the fee schedule would be needed for both the expansion to 100% of FPL and the expansion to 138% FPL.

The Affordable Care Act includes 100% Federal funding to increase primary care physician reimbursement to 100% of Medicare for a limited set of evaluation and management and vaccination services. However, the enhanced Federal funding is only available during calendar years 2013 and 2014.

Foster Children Expansion to Age 26

Indiana currently provides Medicaid eligibility coverage to Foster Children to age 21. The Affordable Care Act includes mandatory coverage for Foster Children to age 26 beginning on January 1, 2014. The current annual cost has been estimated at \$7.6 million per year (State and Federal). Assuming these individuals are not considered newly eligible, the State cost through 2020 is estimated as \$22.0 million.

Health Insurance Tax (HIT)

The Affordable Care Act mandates an annual fee on the health insurance industry. It starts at \$8 billion in 2014, grows to \$14.3 billion in 2018, and is indexed to premium growth thereafter. The fee is considered an excise tax and is nondeductible for income tax purposes. The fee will be allocated based on market share of premium revenue.

Taxes are generally considered an unavoidable cost of doing business. Since Medicaid managed care capitation rates are required to be actuarially sound, capitation rates would have to be increased to cover the cost of the tax, and also a gross-up to cover the additional federal taxes the increase in capitation revenue would generate.

This analysis estimates capitation rates would have to be increased by 2.5% or \$122.8 million to \$147.7 million for SFY 2014 through SFY 2020 to account for this additional cost to Medicaid managed care plans while remaining actuarially sound.

Administrative Expenses

Administrative expense estimates have been provided by the State of Indiana. Projected administrative expenditures include costs for initial modifications to current systems and integration of Medicaid eligibility with the Exchange and the cost of processing applications for potential new Medicaid enrollees.

On-going costs vary by scenario, as some components of the administrative cost increase with the projected number of new enrollees.

CHIP Program – Enhanced FMAP

Under the Act, the CHIP program provides additional Federal Financial Participation (FFP) of up to 23%, with the total Federal share not allowed to exceed 100%. This program begins October 1, 2015 and ends September 30, 2019 (FFY 2016 through FFY 2019). The FFY 2013 FMAP for the CHIP program is 77.01%, so the additional 23% of Federal funding is projected to provide for full federal funding of Indiana's CHIP program during the period October 1, 2015 through September 30, 2019.

Breast and Cervical Cancer Program

The State of Indiana currently provides eligibility under the Breast and Cervical Cancer program. This program provides screenings and treatment for uninsured women who qualify for services. It is anticipated that this program may be duplicative of Exchange based coverage as of January 1, 2014. At that time, women in this program will be able to receive the cancer screening and treatment services either on the Exchange or through an expansion of Medicaid. For the scenario with no Medicaid expansion, it has been assumed that the program is continued for participants with incomes under 100% FPL, which includes 97% of program participants.

Pregnant Women

The State of Indiana currently provides eligibility to pregnant women up to 200% FPL. The State is required to maintain eligibility for pregnant women at the level established in the State plan as of December 19, 1989, which was 150% of FPL. As women with incomes above 150% of FPL will have access to subsidized coverage through the exchange, Indiana anticipates Medicaid coverage will no longer be needed for these women.

HIP – Potential Reduced FMAP

CMS' preliminary indication to the State was that the enhanced (newly eligible) FMAP would not be available for the first 36,500 HIP enrollees. In November 17, 2010 correspondence, the State demonstrated that HIP did not provide a full benchmark benefit package, which would make all HIP enrollees newly eligible. CMS has not yet provided an official response to this correspondence. If CMS does not allow all HIP enrollees to receive the enhanced FMAP, there would be an additional cost to the State, estimated at \$575 million. This cost is not included in any of the tables or enclosures included with this document.

KEY ASSUMPTIONS

- Implementation of expansion on January 1, 2014.
- Prior HIP participants will be considered newly eligible and subject to the enhanced FMAP.

- Assumed that pregnant women above 150% FPL and breast and cervical cancer patients above 138% of FPL would be transferred to the Exchange. Due to guaranteed issue and the availability of subsidies, these individuals should be eligible for premium tax credits in the Exchange.
- No changes were assumed for Medicare eligible populations. Under current programs, Medicaid recipients under 138% of FPL are eligible for Medicaid or partial Medicaid (premium and wrap-around coverage), assuming they also meet asset requirements.

DATA RELIANCE

Milliman relied upon Medicaid enrollment data and claims data paid through June 30, 2012, as provided by the fiscal agent, HP. The data was reviewed for reasonableness and consistency, but accepted without audit.

Additional Medicaid enrollment estimates from the uninsured population and crowd-out from the employer sponsored insurance and individual health insurance markets were developed based on Calendar Year 2010 American Community Survey data for Indiana, 2010 Supplemental Health Exhibit data, and the SHADAC Indiana health insurance analysis. Estimates reflect Indiana residents under age 65, excluding Medicare eligibles and college students.

Projected administrative costs were provided by the State, with assistance provided by Ikaso Consulting.



Guidelines issued by the American Academy of Actuaries require actuaries to include their professional qualifications in all actuarial communications. I am a member of the American Academy of Actuaries, and I meet the qualification standards for performing the analyses in this report.

If you have any questions or comments regarding the enclosed information, please contact me at (317) 524-3512.

Sincerely,


ELECTRONIC
SIGNATURE

Robert M. Damler, FSA, MAAA
Principal and Consulting Actuary

RMD/sds
Enclosures



ENCLOSURE 1

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 No Medicaid Expansion (Woodwork Only)
 (Values in Millions)

Confidential Draft - For Internal Discussion Only

9/18/2012
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EXPENDITURES	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2014 - SFY2020
Medicaid								
Total (State and Federal)	\$8,230.2	\$8,612.1	\$9,063.5	\$9,540.9	\$10,045.8	\$10,580.1	\$11,145.4	\$67,218.0
Federal Funds	\$5,420.1	\$5,699.6	\$6,089.7	\$6,410.5	\$6,749.8	\$7,108.8	\$7,488.6	\$44,967.1
State Funds	\$2,810.2	\$2,912.5	\$2,973.7	\$3,130.4	\$3,296.0	\$3,471.3	\$3,656.8	\$22,250.9
CHIP								
Total (State and Federal)	\$156.5	\$167.3	\$175.7	\$184.5	\$193.7	\$203.4	\$213.6	\$1,294.6
Federal Funds	\$120.5	\$128.9	\$135.3	\$142.1	\$149.2	\$156.6	\$164.5	\$997.1
State Funds	\$36.0	\$38.5	\$40.4	\$42.4	\$44.5	\$46.7	\$49.1	\$297.5
Healthy Indiana Plan	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Administration								
Total (State and Federal)	\$167.5	\$171.9	\$179.6	\$187.5	\$195.9	\$204.6	\$213.7	\$1,320.6
Federal Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
State Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
All Programs								
Total (State and Federal)	\$8,554.2	\$8,951.3	\$9,418.7	\$9,912.9	\$10,435.4	\$10,988.1	\$11,572.6	\$69,833.3
Federal Funds	\$5,624.3	\$5,914.4	\$6,314.8	\$6,646.4	\$6,996.9	\$7,367.7	\$7,759.9	\$46,624.5
State Funds	\$2,929.9	\$3,036.9	\$3,103.9	\$3,266.5	\$3,438.5	\$3,620.4	\$3,812.7	\$23,208.7
Parents / Children: No Medicaid Expansion - Estimated Participation								
Uninsured (State and Federal)								
Children	\$33.7	\$67.0	\$72.2	\$75.8	\$79.6	\$83.6	\$87.7	\$499.6
Parents	\$22.6	\$44.8	\$48.3	\$50.7	\$53.2	\$55.9	\$58.7	\$334.2
Insured (State and Federal)								
Children	\$58.7	\$116.7	\$125.7	\$132.0	\$138.6	\$145.6	\$152.8	\$870.2
Parents	\$8.4	\$16.8	\$18.1	\$19.0	\$19.9	\$20.9	\$22.0	\$125.2
Uninsured (Federal)								
Children	\$22.6	\$45.0	\$48.5	\$50.9	\$53.5	\$56.1	\$58.9	\$335.6
Parents	\$15.2	\$30.1	\$32.4	\$34.1	\$35.8	\$37.6	\$39.4	\$224.5
Insured (Federal)								
Children	\$39.5	\$78.4	\$84.5	\$88.7	\$93.1	\$97.8	\$102.7	\$584.7
Parents	\$5.7	\$11.3	\$12.2	\$12.8	\$13.4	\$14.1	\$14.8	\$84.1
Uninsured (State)								
Children	\$11.1	\$22.0	\$23.7	\$24.9	\$26.1	\$27.4	\$28.8	\$163.9
Parents	\$7.4	\$14.7	\$15.8	\$16.6	\$17.5	\$18.3	\$19.3	\$109.6
Insured (State)								
Children	\$19.3	\$38.3	\$41.3	\$43.3	\$45.5	\$47.8	\$50.1	\$285.5
Parents	\$2.8	\$5.5	\$5.9	\$6.2	\$6.5	\$6.9	\$7.2	\$41.1

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 No Medicaid Expansion (Woodwork Only)
 (Values in Millions)

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EXPENDITURES	<u>SFY 2014</u>	<u>SFY 2015</u>	<u>SFY 2016</u>	<u>SFY 2017</u>	<u>SFY 2018</u>	<u>SFY 2019</u>	<u>SFY 2020</u>	SFY 2014 - <u>SFY2020</u>
Foster Children Increase	\$4.4	\$9.2	\$9.7	\$10.2	\$10.7	\$11.2	\$11.8	\$67.1
Federal Funds	\$2.9	\$6.2	\$6.5	\$6.8	\$7.2	\$7.5	\$7.9	\$45.1
State Funds	\$1.4	\$3.0	\$3.2	\$3.3	\$3.5	\$3.7	\$3.9	\$22.0
Breast & Cervical Cancer	(\$0.3)	(\$0.5)	(\$0.6)	(\$0.6)	(\$0.6)	(\$0.6)	(\$0.6)	(\$3.8)
Federal Funds	(\$0.2)	(\$0.4)	(\$0.4)	(\$0.4)	(\$0.4)	(\$0.4)	(\$0.5)	(\$2.7)
State Funds	(\$0.1)	(\$0.2)	(\$0.2)	(\$0.2)	(\$0.2)	(\$0.2)	(\$0.2)	(\$1.1)
Pregnant Women (>150%)	(\$8.0)	(\$16.8)	(\$17.6)	(\$18.5)	(\$19.4)	(\$20.4)	(\$21.4)	(\$122.2)
Federal Funds	(\$5.4)	(\$11.3)	(\$11.8)	(\$12.4)	(\$13.1)	(\$13.7)	(\$14.4)	(\$82.1)
State Funds	(\$2.6)	(\$5.5)	(\$5.8)	(\$6.1)	(\$6.4)	(\$6.7)	(\$7.0)	(\$40.1)
CHIP Program (Enhanced FMAP)	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Federal Funds	\$0.0	\$0.0	\$30.3	\$42.4	\$44.5	\$46.7	\$12.3	\$176.2
State Funds	\$0.0	\$0.0	(\$30.3)	(\$42.4)	(\$44.5)	(\$46.7)	(\$12.3)	(\$176.2)
Health Insurance Tax	\$24.8	\$49.5	\$53.4	\$56.5	\$59.8	\$63.3	\$67.1	\$374.4
Federal Funds	\$16.7	\$33.3	\$35.9	\$38.0	\$40.2	\$42.6	\$45.1	\$251.6
State Funds	\$8.1	\$16.2	\$17.5	\$18.5	\$19.6	\$20.8	\$22.0	\$122.8
Administrative Expenses	\$42.3	\$23.9	\$21.8	\$22.5	\$23.2	\$23.9	\$24.6	\$182.2
Federal Funds	\$22.6	\$12.9	\$11.8	\$12.1	\$12.5	\$12.9	\$13.2	\$98.1
State Funds	\$19.7	\$11.0	\$10.1	\$10.4	\$10.7	\$11.0	\$11.3	\$84.2
All Programs - After Expansion								
Total (State and Federal)	\$8,741.0	\$9,262.0	\$9,749.7	\$10,260.5	\$10,800.4	\$11,371.4	\$11,975.2	\$72,160.1
Federal Funds	\$5,744.0	\$6,120.0	\$6,564.6	\$6,919.3	\$7,283.6	\$7,668.8	\$8,039.4	\$48,339.7
State Funds	\$2,997.0	\$3,142.0	\$3,185.1	\$3,341.2	\$3,516.8	\$3,702.6	\$3,935.8	\$23,820.5
All Programs - Fiscal Impact								
Total (State and Federal)	\$186.8	\$310.7	\$331.0	\$347.6	\$365.0	\$383.3	\$402.6	\$2,326.9
Federal Funds	\$119.7	\$205.6	\$249.8	\$272.9	\$286.7	\$301.1	\$279.5	\$1,715.2
State Funds	\$67.1	\$105.1	\$81.2	\$74.6	\$78.4	\$82.2	\$123.1	\$611.7



ENCLOSURE 2

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 Medicaid Expansion to 100% FPL with Estimated Participation
 (Values in Millions)

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EXPENDITURES	<u>SFY 2014</u>	<u>SFY 2015</u>	<u>SFY 2016</u>	<u>SFY 2017</u>	<u>SFY 2018</u>	<u>SFY 2019</u>	<u>SFY 2020</u>	SFY 2014 - <u>SFY2020</u>
Medicaid								
Total (State and Federal)	\$8,230.2	\$8,612.1	\$9,063.5	\$9,540.9	\$10,045.8	\$10,580.1	\$11,145.4	\$67,218.0
Federal Funds	\$5,420.1	\$5,699.6	\$6,089.7	\$6,410.5	\$6,749.8	\$7,108.8	\$7,488.6	\$44,967.1
State Funds	\$2,810.2	\$2,912.5	\$2,973.7	\$3,130.4	\$3,296.0	\$3,471.3	\$3,656.8	\$22,250.9
CHIP								
Total (State and Federal)	\$156.5	\$167.3	\$175.7	\$184.5	\$193.7	\$203.4	\$213.6	\$1,294.6
Federal Funds	\$120.5	\$128.9	\$135.3	\$142.1	\$149.2	\$156.6	\$164.5	\$997.1
State Funds	\$36.0	\$38.5	\$40.4	\$42.4	\$44.5	\$46.7	\$49.1	\$297.5
Healthy Indiana Plan	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Administration								
Total (State and Federal)	\$167.5	\$171.9	\$179.6	\$187.5	\$195.9	\$204.6	\$213.7	\$1,320.6
Federal Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
State Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
All Programs								
Total (State and Federal)	\$8,554.2	\$8,951.3	\$9,418.7	\$9,912.9	\$10,435.4	\$10,988.1	\$11,572.6	\$69,833.3
Federal Funds	\$5,624.3	\$5,914.4	\$6,314.8	\$6,646.4	\$6,996.9	\$7,367.7	\$7,759.9	\$46,624.5
State Funds	\$2,929.9	\$3,036.9	\$3,103.9	\$3,266.5	\$3,438.5	\$3,620.4	\$3,812.7	\$23,208.7
Parents / Adults / Children (< 100% FPL) - Estimated Participation								
Uninsured (State and Federal)								
Children	\$33.7	\$67.0	\$72.2	\$75.8	\$79.6	\$83.6	\$87.7	\$499.6
Parents / Adults	\$556.4	\$1,166.0	\$1,225.5	\$1,286.8	\$1,351.1	\$1,418.7	\$1,489.6	\$8,494.0
Insured (State and Federal)								
Children	\$58.7	\$116.7	\$125.7	\$132.0	\$138.6	\$145.6	\$152.8	\$870.2
Parents / Adults	\$166.4	\$348.5	\$366.4	\$384.8	\$404.0	\$424.2	\$445.4	\$2,539.7
Uninsured (Federal)								
Children	\$22.6	\$45.0	\$48.5	\$50.9	\$53.5	\$56.1	\$58.9	\$335.6
Parents / Adults	\$549.0	\$1,151.3	\$1,209.7	\$1,239.2	\$1,262.3	\$1,311.7	\$1,348.7	\$8,071.9
Insured (Federal)								
Children	\$39.5	\$78.4	\$84.5	\$88.7	\$93.1	\$97.8	\$102.7	\$584.7
Parents / Adults	\$163.7	\$343.0	\$360.5	\$369.4	\$376.3	\$391.1	\$402.2	\$2,406.2
Uninsured (State)								
Children	\$11.1	\$22.0	\$23.7	\$24.9	\$26.1	\$27.4	\$28.8	\$163.9
Parents / Adults	\$7.4	\$14.7	\$15.8	\$47.5	\$88.8	\$106.9	\$140.9	\$422.1
Insured (State)								
Children	\$19.3	\$38.3	\$41.3	\$43.3	\$45.5	\$47.8	\$50.1	\$285.5
Parents / Adults	\$2.8	\$5.5	\$5.9	\$15.4	\$27.7	\$33.1	\$43.2	\$133.5

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 Medicaid Expansion to 100% FPL with Estimated Participation
 (Values in Millions)

Confidential Draft - For Internal Discussion Only

9/18/2012
 8:00 AM

EXPENDITURES	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2014 - SFY2020
Foster Children Increase	\$4.4	\$9.2	\$9.7	\$10.2	\$10.7	\$11.2	\$11.8	\$67.1
Federal Funds	\$2.9	\$6.2	\$6.5	\$6.8	\$7.2	\$7.5	\$7.9	\$45.1
State Funds	\$1.4	\$3.0	\$3.2	\$3.3	\$3.5	\$3.7	\$3.9	\$22.0
Breast & Cervical Cancer	(\$0.3)	(\$0.5)	(\$0.6)	(\$0.6)	(\$0.6)	(\$0.7)	(\$0.7)	(\$4.0)
Federal Funds	\$3.2	\$6.6	\$6.9	\$6.5	\$5.7	\$5.7	\$5.2	\$39.7
State Funds	(\$3.4)	(\$7.1)	(\$7.5)	(\$7.1)	(\$6.4)	(\$6.3)	(\$5.9)	(\$43.7)
Pregnant Women (>150%)	(\$8.0)	(\$16.8)	(\$17.6)	(\$18.5)	(\$19.4)	(\$20.4)	(\$21.4)	(\$122.2)
Federal Funds	(\$5.4)	(\$11.3)	(\$11.8)	(\$12.4)	(\$13.1)	(\$13.7)	(\$14.4)	(\$82.1)
State Funds	(\$2.6)	(\$5.5)	(\$5.8)	(\$6.1)	(\$6.4)	(\$6.7)	(\$7.0)	(\$40.1)
CHIP Program (Enhanced FMAP)	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Federal Funds	\$0.0	\$0.0	\$30.3	\$42.4	\$44.5	\$46.7	\$12.3	\$176.2
State Funds	\$0.0	\$0.0	(\$30.3)	(\$42.4)	(\$44.5)	(\$46.7)	(\$12.3)	(\$176.2)
Health Insurance Tax	\$41.7	\$86.4	\$91.3	\$96.4	\$101.7	\$107.3	\$113.2	\$637.9
Federal Funds	\$33.6	\$69.9	\$73.8	\$76.8	\$79.8	\$83.7	\$87.3	\$504.9
State Funds	\$8.1	\$16.5	\$17.5	\$19.5	\$21.9	\$23.6	\$25.9	\$133.0
Phys Fee Schedule Inc (80% Medicare)	\$163.9	\$353.9	\$365.0	\$380.5	\$398.0	\$418.7	\$440.4	\$2,520.5
Federal Funds	\$128.5	\$277.3	\$288.3	\$298.2	\$307.9	\$322.4	\$333.4	\$1,956.0
State Funds	\$35.5	\$76.6	\$76.7	\$82.4	\$90.1	\$96.2	\$107.0	\$564.5
Administrative Expenses	\$88.2	\$76.4	\$68.8	\$70.9	\$73.0	\$75.2	\$77.5	\$530.0
Federal Funds	\$47.3	\$40.7	\$36.9	\$38.0	\$39.1	\$40.3	\$41.5	\$283.7
State Funds	\$40.9	\$35.7	\$32.0	\$32.9	\$33.9	\$34.9	\$36.0	\$246.2
All Programs - After Expansion								
Total (State and Federal)	\$9,659.4	\$11,158.2	\$11,725.2	\$12,331.1	\$12,972.0	\$13,651.3	\$14,368.9	\$85,866.1
Federal Funds	\$6,609.2	\$7,921.7	\$8,448.8	\$8,850.8	\$9,253.2	\$9,717.1	\$10,145.6	\$60,946.5
State Funds	\$3,050.2	\$3,236.5	\$3,276.4	\$3,480.2	\$3,718.8	\$3,934.2	\$4,223.3	\$24,919.6
All Programs - Fiscal Impact								
Total (State and Federal)	\$1,105.2	\$2,206.9	\$2,306.5	\$2,418.2	\$2,536.6	\$2,663.2	\$2,796.3	\$16,032.8
Federal Funds	\$984.9	\$2,007.3	\$2,134.0	\$2,204.5	\$2,256.3	\$2,349.4	\$2,385.7	\$14,322.0
State Funds	\$120.3	\$199.6	\$172.5	\$213.7	\$280.3	\$313.9	\$410.6	\$1,710.9



ENCLOSURE 3

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 Medicaid Expansion to 138% FPL with Estimated Participation
 (Values in Millions)

Confidential Draft - For Internal Discussion Only

9/18/2012
 8:01 AM

EXPENDITURES	<u>SFY 2014</u>	<u>SFY 2015</u>	<u>SFY 2016</u>	<u>SFY 2017</u>	<u>SFY 2018</u>	<u>SFY 2019</u>	<u>SFY 2020</u>	SFY 2014 - <u>SFY2020</u>
Medicaid								
Total (State and Federal)	\$8,230.2	\$8,612.1	\$9,063.5	\$9,540.9	\$10,045.8	\$10,580.1	\$11,145.4	\$67,218.0
Federal Funds	\$5,420.1	\$5,699.6	\$6,089.7	\$6,410.5	\$6,749.8	\$7,108.8	\$7,488.6	\$44,967.1
State Funds	\$2,810.2	\$2,912.5	\$2,973.7	\$3,130.4	\$3,296.0	\$3,471.3	\$3,656.8	\$22,250.9
CHIP								
Total (State and Federal)	\$156.5	\$167.3	\$175.7	\$184.5	\$193.7	\$203.4	\$213.6	\$1,294.6
Federal Funds	\$120.5	\$128.9	\$135.3	\$142.1	\$149.2	\$156.6	\$164.5	\$997.1
State Funds	\$36.0	\$38.5	\$40.4	\$42.4	\$44.5	\$46.7	\$49.1	\$297.5
Healthy Indiana Plan	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Administration								
Total (State and Federal)	\$167.5	\$171.9	\$179.6	\$187.5	\$195.9	\$204.6	\$213.7	\$1,320.6
Federal Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
State Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
All Programs								
Total (State and Federal)	\$8,554.2	\$8,951.3	\$9,418.7	\$9,912.9	\$10,435.4	\$10,988.1	\$11,572.6	\$69,833.3
Federal Funds	\$5,624.3	\$5,914.4	\$6,314.8	\$6,646.4	\$6,996.9	\$7,367.7	\$7,759.9	\$46,624.5
State Funds	\$2,929.9	\$3,036.9	\$3,103.9	\$3,266.5	\$3,438.5	\$3,620.4	\$3,812.7	\$23,208.7
Parents / Adults / Children (< 138% FPL) - Estimated Participation								
Uninsured (State and Federal)								
Children	\$33.7	\$67.0	\$72.2	\$75.8	\$79.6	\$83.6	\$87.7	\$499.6
Parents / Adults	\$804.9	\$1,687.7	\$1,773.3	\$1,858.9	\$1,951.0	\$2,044.9	\$2,146.5	\$12,267.2
Insured (State and Federal)								
Children	\$58.7	\$116.7	\$125.7	\$132.0	\$138.6	\$145.6	\$152.8	\$870.2
Parents / Adults	\$285.2	\$597.9	\$628.3	\$658.2	\$690.7	\$723.5	\$759.4	\$4,343.1
Uninsured (Federal)								
Children	\$22.6	\$45.0	\$48.5	\$50.9	\$53.5	\$56.1	\$58.9	\$335.6
Parents / Adults	\$797.5	\$1,673.0	\$1,757.5	\$1,797.1	\$1,829.1	\$1,897.3	\$1,949.8	\$11,701.2
Insured (Federal)								
Children	\$39.5	\$78.4	\$84.5	\$88.7	\$93.1	\$97.8	\$102.7	\$584.7
Parents / Adults	\$282.4	\$592.4	\$622.3	\$636.0	\$647.3	\$671.0	\$689.5	\$4,140.8
Uninsured (State)								
Children	\$11.1	\$22.0	\$23.7	\$24.9	\$26.1	\$27.4	\$28.8	\$163.9
Parents / Adults	\$7.4	\$14.7	\$15.8	\$61.8	\$121.8	\$147.6	\$196.7	\$566.0
Insured (State)								
Children	\$19.3	\$38.3	\$41.3	\$43.3	\$45.5	\$47.8	\$50.1	\$285.5
Parents / Adults	\$2.8	\$5.5	\$5.9	\$22.2	\$43.4	\$52.5	\$69.9	\$202.3

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 Medicaid Expansion to 138% FPL with Estimated Participation
 (Values in Millions)

Confidential Draft - For Internal Discussion Only

9/18/2012
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EXPENDITURES	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2014 - SFY2020
Foster Children Increase	\$4.4	\$9.2	\$9.7	\$10.2	\$10.7	\$11.2	\$11.8	\$67.1
Federal Funds	\$2.9	\$6.2	\$6.5	\$6.8	\$7.2	\$7.5	\$7.9	\$45.1
State Funds	\$1.4	\$3.0	\$3.2	\$3.3	\$3.5	\$3.7	\$3.9	\$22.0
Breast & Cervical Cancer	(\$0.3)	(\$0.5)	(\$0.6)	(\$0.6)	(\$0.6)	(\$0.7)	(\$0.7)	(\$4.0)
Federal Funds	\$3.2	\$6.6	\$6.9	\$6.5	\$5.7	\$5.7	\$5.2	\$39.7
State Funds	(\$3.4)	(\$7.1)	(\$7.5)	(\$7.1)	(\$6.4)	(\$6.3)	(\$5.9)	(\$43.7)
Pregnant Women (>150%)	(\$8.0)	(\$16.8)	(\$17.6)	(\$18.5)	(\$19.4)	(\$20.4)	(\$21.4)	(\$122.2)
Federal Funds	(\$5.4)	(\$11.3)	(\$11.8)	(\$12.4)	(\$13.1)	(\$13.7)	(\$14.4)	(\$82.1)
State Funds	(\$2.6)	(\$5.5)	(\$5.8)	(\$6.1)	(\$6.4)	(\$6.7)	(\$7.0)	(\$40.1)
CHIP Program (Enhanced FMAP)	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Federal Funds	\$0.0	\$0.0	\$30.3	\$42.4	\$44.5	\$46.7	\$12.3	\$176.2
State Funds	\$0.0	\$0.0	(\$30.3)	(\$42.4)	(\$44.5)	(\$46.7)	(\$12.3)	(\$176.2)
Health Insurance Tax	\$50.8	\$105.6	\$111.5	\$117.4	\$123.7	\$130.3	\$137.4	\$776.7
Federal Funds	\$42.7	\$89.1	\$94.0	\$97.4	\$100.6	\$105.2	\$109.4	\$638.4
State Funds	\$8.1	\$16.5	\$17.5	\$20.1	\$23.1	\$25.1	\$28.0	\$138.3
Phys Fee Schedule Inc (80% Medicare)	\$192.8	\$414.5	\$428.6	\$447.3	\$468.2	\$492.3	\$517.8	\$2,961.5
Federal Funds	\$157.3	\$337.9	\$351.9	\$363.3	\$374.2	\$391.3	\$404.2	\$2,380.1
State Funds	\$35.5	\$76.6	\$76.7	\$84.0	\$94.0	\$101.0	\$113.6	\$581.4
Administrative Expenses	\$117.5	\$102.7	\$95.8	\$98.7	\$101.7	\$104.7	\$107.8	\$729.0
Federal Funds	\$63.2	\$54.9	\$51.4	\$52.9	\$54.5	\$56.2	\$57.9	\$391.1
State Funds	\$54.3	\$47.8	\$44.4	\$45.7	\$47.1	\$48.5	\$50.0	\$337.9
All Programs - After Expansion								
Total (State and Federal)	\$10,094.0	\$12,035.4	\$12,645.6	\$13,292.3	\$13,979.5	\$14,703.0	\$15,471.7	\$92,221.5
Federal Funds	\$7,030.3	\$8,786.8	\$9,356.8	\$9,775.9	\$10,193.6	\$10,688.7	\$11,143.2	\$66,975.4
State Funds	\$3,063.7	\$3,248.6	\$3,288.8	\$3,516.4	\$3,785.8	\$4,014.3	\$4,328.5	\$25,246.1
All Programs - Fiscal Impact								
Total (State and Federal)	\$1,539.8	\$3,084.1	\$3,226.9	\$3,379.4	\$3,544.1	\$3,715.0	\$3,899.0	\$22,388.2
Federal Funds	\$1,406.0	\$2,872.3	\$3,042.0	\$3,129.6	\$3,196.7	\$3,321.0	\$3,383.3	\$20,350.9
State Funds	\$133.8	\$211.7	\$184.9	\$249.9	\$347.4	\$393.9	\$515.8	\$2,037.3



ENCLOSURE 4

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 Medicaid Expansion to 138% FPL with Full Participation
 (Values in Millions)

9/18/2012
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EXPENDITURES	<u>SFY 2014</u>	<u>SFY 2015</u>	<u>SFY 2016</u>	<u>SFY 2017</u>	<u>SFY 2018</u>	<u>SFY 2019</u>	<u>SFY 2020</u>	SFY 2014 - <u>SFY2020</u>
Medicaid								
Total (State and Federal)	\$8,230.2	\$8,612.1	\$9,063.5	\$9,540.9	\$10,045.8	\$10,580.1	\$11,145.4	\$67,218.0
Federal Funds	\$5,420.1	\$5,699.6	\$6,089.7	\$6,410.5	\$6,749.8	\$7,108.8	\$7,488.6	\$44,967.1
State Funds	\$2,810.2	\$2,912.5	\$2,973.7	\$3,130.4	\$3,296.0	\$3,471.3	\$3,656.8	\$22,250.9
CHIP								
Total (State and Federal)	\$156.5	\$167.3	\$175.7	\$184.5	\$193.7	\$203.4	\$213.6	\$1,294.6
Federal Funds	\$120.5	\$128.9	\$135.3	\$142.1	\$149.2	\$156.6	\$164.5	\$997.1
State Funds	\$36.0	\$38.5	\$40.4	\$42.4	\$44.5	\$46.7	\$49.1	\$297.5
Healthy Indiana Plan	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Administration								
Total (State and Federal)	\$167.5	\$171.9	\$179.6	\$187.5	\$195.9	\$204.6	\$213.7	\$1,320.6
Federal Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
State Funds	\$83.7	\$86.0	\$89.8	\$93.8	\$97.9	\$102.3	\$106.8	\$660.3
All Programs								
Total (State and Federal)	\$8,554.2	\$8,951.3	\$9,418.7	\$9,912.9	\$10,435.4	\$10,988.1	\$11,572.6	\$69,833.3
Federal Funds	\$5,624.3	\$5,914.4	\$6,314.8	\$6,646.4	\$6,996.9	\$7,367.7	\$7,759.9	\$46,624.5
State Funds	\$2,929.9	\$3,036.9	\$3,103.9	\$3,266.5	\$3,438.5	\$3,620.4	\$3,812.7	\$23,208.7
Parents / Adults / Children (< 138% FPL) - Full Participation								
Uninsured (State and Federal)								
Children	\$50.0	\$105.0	\$105.4	\$110.8	\$116.2	\$122.0	\$128.0	\$728.5
Parents / Adults	\$965.5	\$2,063.3	\$2,101.2	\$2,204.8	\$2,313.0	\$2,425.0	\$2,544.2	\$14,529.8
Insured (State and Federal)								
Children	\$80.7	\$168.2	\$170.7	\$179.4	\$188.2	\$197.7	\$207.4	\$1,180.4
Parents / Adults	\$480.9	\$1,055.7	\$1,027.9	\$1,079.9	\$1,132.0	\$1,186.8	\$1,244.2	\$7,101.2
Uninsured (Federal)								
Children	\$33.6	\$70.6	\$70.8	\$74.4	\$78.1	\$82.0	\$86.0	\$489.5
Parents / Adults	\$958.1	\$2,048.6	\$2,085.3	\$2,134.4	\$2,171.2	\$2,252.7	\$2,313.7	\$13,877.2
Insured (Federal)								
Children	\$54.2	\$113.0	\$114.7	\$120.6	\$126.5	\$132.8	\$139.3	\$584.7
Parents / Adults	\$478.1	\$1,050.2	\$1,022.0	\$1,047.1	\$1,064.2	\$1,104.2	\$1,133.1	\$6,793.2
Uninsured (State)								
Children	\$16.4	\$34.5	\$34.6	\$36.3	\$38.1	\$40.0	\$42.0	\$241.9
Parents / Adults	\$7.4	\$14.7	\$15.8	\$70.5	\$141.8	\$172.3	\$230.5	\$653.0
Insured (State)								
Children	\$26.5	\$55.2	\$56.0	\$58.9	\$61.8	\$64.9	\$68.0	\$391.2
Parents / Adults	\$2.8	\$5.5	\$5.9	\$32.8	\$67.7	\$82.7	\$111.1	\$308.4

STATE OF INDIANA
 Family and Social Services Administration
 Health Care Reform Projection - Affordable Care Act
 Medicaid Expansion to 138% FPL with Full Participation
 (Values in Millions)

9/18/2012
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EXPENDITURES	<u>SFY 2014</u>	<u>SFY 2015</u>	<u>SFY 2016</u>	<u>SFY 2017</u>	<u>SFY 2018</u>	<u>SFY 2019</u>	<u>SFY 2020</u>	SFY 2014 - <u>SFY2020</u>
Foster Children Increase	\$4.4	\$9.2	\$9.7	\$10.2	\$10.7	\$11.2	\$11.8	\$67.1
Federal Funds	\$2.9	\$6.2	\$6.5	\$6.8	\$7.2	\$7.5	\$7.9	\$45.1
State Funds	\$1.4	\$3.0	\$3.2	\$3.3	\$3.5	\$3.7	\$3.9	\$22.0
Breast & Cervical Cancer	(\$0.3)	(\$0.5)	(\$0.6)	(\$0.6)	(\$0.6)	(\$0.7)	(\$0.7)	(\$4.0)
Federal Funds	\$3.2	\$6.6	\$6.9	\$6.5	\$5.7	\$5.7	\$5.2	\$39.7
State Funds	(\$3.4)	(\$7.1)	(\$7.5)	(\$7.1)	(\$6.4)	(\$6.3)	(\$5.9)	(\$43.7)
Pregnant Women (>150%)	(\$8.0)	(\$16.8)	(\$17.6)	(\$18.5)	(\$19.4)	(\$20.4)	(\$21.4)	(\$122.2)
Federal Funds	(\$5.4)	(\$11.3)	(\$11.8)	(\$12.4)	(\$13.1)	(\$13.7)	(\$14.4)	(\$82.1)
State Funds	(\$2.6)	(\$5.5)	(\$5.8)	(\$6.1)	(\$6.4)	(\$6.7)	(\$7.0)	(\$40.1)
CHIP Program (Enhanced FMAP)	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0	\$0.0
Federal Funds	\$0.0	\$0.0	\$30.3	\$42.4	\$44.5	\$46.7	\$12.3	\$176.2
State Funds	\$0.0	\$0.0	(\$30.3)	(\$42.4)	(\$44.5)	(\$46.7)	(\$12.3)	(\$176.2)
Health Insurance Tax	\$60.4	\$128.9	\$131.9	\$138.9	\$146.3	\$154.0	\$162.1	\$922.5
Federal Funds	\$52.2	\$111.7	\$113.7	\$117.7	\$121.3	\$126.7	\$131.5	\$774.8
State Funds	\$8.2	\$17.2	\$18.1	\$21.2	\$25.0	\$27.3	\$30.7	\$147.7
Phys Fee Schedule Inc (80% Medica	\$221.5	\$475.2	\$492.0	\$513.9	\$538.0	\$565.7	\$594.8	\$3,401.0
Federal Funds	\$185.2	\$396.5	\$413.3	\$426.2	\$438.4	\$458.0	\$472.8	\$2,790.4
State Funds	\$36.4	\$78.6	\$78.7	\$87.6	\$99.7	\$107.7	\$121.9	\$610.6
Administrative Expenses	\$148.7	\$130.7	\$124.5	\$128.3	\$132.1	\$136.1	\$140.2	\$940.6
Federal Funds	\$80.1	\$70.0	\$66.8	\$68.9	\$70.9	\$73.0	\$75.2	\$505.0
State Funds	\$68.6	\$60.7	\$57.7	\$59.4	\$61.2	\$63.0	\$64.9	\$435.5
All Programs - After Expansion								
Total (State and Federal)	\$10,558.1	\$13,070.2	\$13,563.7	\$14,260.0	\$14,991.8	\$15,765.4	\$16,583.1	\$98,792.4
Federal Funds	\$7,466.6	\$9,776.6	\$10,233.3	\$10,678.9	\$11,111.9	\$11,643.3	\$12,122.5	\$73,033.1
State Funds	\$3,091.6	\$3,293.6	\$3,330.4	\$3,581.1	\$3,879.9	\$4,122.1	\$4,460.6	\$25,759.3
All Programs - Fiscal Impact								
Total (State and Federal)	\$2,003.9	\$4,118.9	\$4,145.0	\$4,347.1	\$4,556.4	\$4,777.3	\$5,010.5	\$28,959.1
Federal Funds	\$1,842.2	\$3,862.1	\$3,918.5	\$4,032.6	\$4,115.0	\$4,275.6	\$4,362.6	\$26,408.6
State Funds	\$161.7	\$256.7	\$226.5	\$314.6	\$441.4	\$501.7	\$647.9	\$2,550.5



ENCLOSURE 5

**State of Indiana
Family and Social Services Administration**

SFY 2015 Enrollment Projections Under ACA Expansion Scenarios

	<u>SFY 2015 Projected Enrollment</u>	<u>SFY 2015 Full Enrollment</u>
<i>Pre-ACA Projection</i>		
Current Programs		
Medicaid	1,025,000	1,025,000
CHIP	88,000	88,000
Total Projected Medicaid Enrollment	1,113,000	1,113,000
 <i>No Medicaid Expansion</i>		
Additional Enrollment from those already Eligible (Woodwork)		
Children	77,000	106,000
Parents	14,000	16,000
Other Enrollment Changes		
Foster Child Expansion	5,000	5,000
Pregnant Women Over 150% FPL	(4,000)	(4,000)
Total Additional Enrollment with No Expansion	92,000	123,000
Total Projected Medicaid Population with No Expansion	1,205,000	1,236,000
 <i>Medicaid Expansion to 100% FPL</i>		
Currently Uninsured		
Parents	66,000	75,000
Childless Adults	151,000	185,000
Currently Insured Population (Crowd-out)		
Parents	24,000	32,000
Childless Adults	36,000	71,000
Total Additional Enrollment from Expansion to 100% FPL	277,000	363,000
Total Projected Medicaid Population After Expansion to 100% FPL	1,482,000	1,599,000
 <i>Medicaid Expansion to 138% FPL</i>		
Currently Uninsured		
Parents	43,000	49,000
Childless Adults	60,000	74,000
Currently Insured Population (Crowd-out)		
Parents	32,000	43,000
Childless Adults	15,000	30,000
Total Additional Enrollment from Expansion to 138% FPL	150,000	196,000
Total Projected Medicaid Population After Expansion to 138% FPL	1,632,000	1,795,000