

### **Review of March MACStats**

April Grady February 20, 2014

### **Overview**

As in previous reports, March 2014 MACStats provides:

- National and state-level statistics on Medicaid and CHIP, including enrollment and spending (figures presented today are still subject to revision)
- Additional information that places the programs in context

Tables with access to care measures are a new addition this year

# **Medicaid and CHIP Spending**

Total Medicaid spending was \$460 billion in FY 2013, a 6% increase over FY 2012

 \$267 billion federal and \$193 billion state; both grew at similar rates

Total CHIP spending was \$13 billion in FY 2013, an 8% increase over FY 2012

 Spending for Medicaid-expansion CHIP programs increased while spending for separate CHIP programs decreased

### **Medicaid and CHIP Spending in Context**

Medicaid spending as share of <u>state-funded</u> budgets was nearly 15% in SFY 2012; Medicaid share of total budgets was 24%

Education shares were 37% and 30%

Medicaid and CHIP share of national health expenditures was 15.5% in CY 2012; projected to rise to about 17% over the next decade

Medicare projected to rise from 20.5% to 22.4%

#### **Medicaid and CHIP Enrollment**

#### Medicaid enrollment

- Actual FY 2011 data available for less than 40 states on CMS website
- Number of Medicaid enrollees estimated to remain steady in FY 2013

CHIP was steady in FY 2013, with an increase in Medicaid-expansion enrollment offset by a decrease in separate program enrollment

## **Medicaid and CHIP Eligibility Levels**

Modified adjusted gross income (MAGI) rules and no asset test for most enrollees as of 2014

Maintenance of effort still in place for children

Just over half of states have opted for adult expansion; some reductions in previous eligibility levels for parents and other adults

Few changes for individuals eligible on the basis of age or disability



#### **New Tables on Access to Care**

Five new tables with access to care measures at national level

Measures relate to provider availability, connection to the health care system, contact with health care professionals, timeliness of care, and receipt of appropriate care

Tables compare Medicaid/CHIP to other types of coverage and Medicaid/CHIP subgroups to each other