2024 OUTLOOK ON RHODE ISLAND MEDICAID

FINANCING, INNOVATION AND TRANSFORMATION

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RHODE ISLAND MEDICAID COMPREHENSIVE DEMONSTRATION WAIVER

- Background
- Eligibility and Redetermination
- Innovation and Transformation
- Financing

RHODE ISLAND MEDICAID COMPREHENSIVE DEMONSTRATION WAIVER

BACKGROUND

- Comprehensive Demonstration was established in response to the economic downturn in 2009
- Combined all waiver authorities in the state into one waiver
- Evolved from a state budget management tool to a vehicle for innovation
- Requires legislative authorization for all state plan amendments
- In 2024 the 1115 waiver provides health and well being to more than one third of the RI population
- \$3.5 Billion
- Current waiver has been extended to January 1, 2025

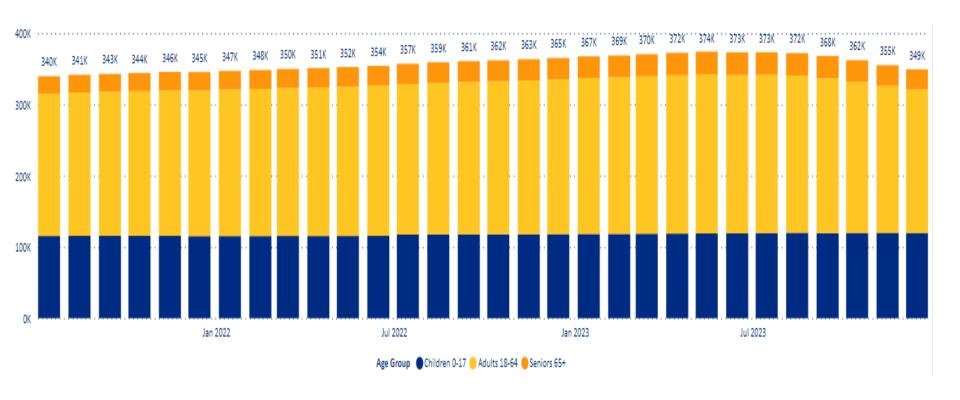
RHODE ISLAND MEDICAID

ELIGIBILITY

- low-income adults, children, seniors, persons with disabilities, pregnant women,
 children in foster care and former foster youth up to age 26
- 2023 RI extended Medical Coverage to Children Previously Ineligible: provides medical benefits to all children whose family income is at or below 250 percent of poverty, regardless of immigration status.
- 2023Post-Partum Coverage: extend full Medicaid coverage to two groups of women who are 12 months post-partum and who currently receive a limited benefit.
 - women who would lose Medicaid coverage after 60 days post-partum
 - women who do not qualify for Medicaid because of immigration status, but whose childbirth was paid for by Medicaid because the child is covered.

- The FY 2023 state budget included State Fiscal Recovery funds for HealthSource RI to automatically enroll qualified individuals who were transitioning off Medicaid into a qualified public health plan to support two month of premiums.
- April 1, 2023 redetermination began

ENROLLMENT BY AGE GROUP AND MONTH (INCLUDES CHIP)



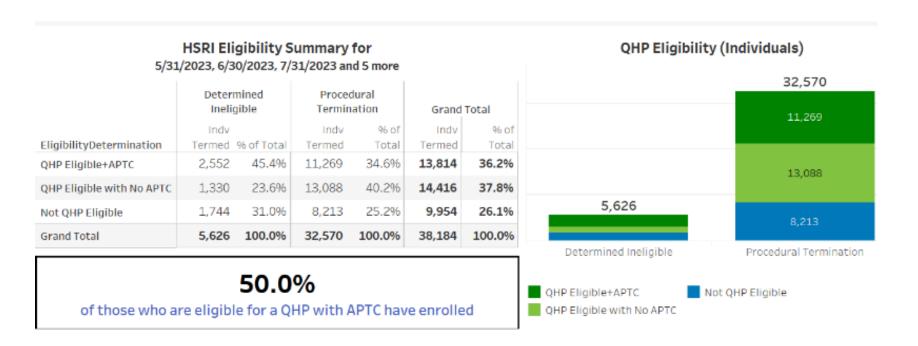
RENEWALS INITIATED BY TYPE AND DATE



RENEWAL STATUS BY DATE



ELIGIBILITY SUMMARY

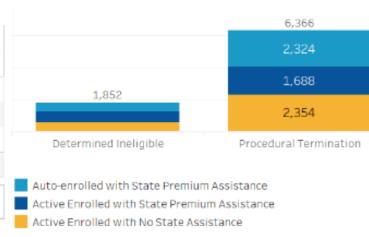


ENROLLMENT SUMMARY

HSRI Enrollment Summary for 5/31/2023, 6/30/2023, 7/31/2023 and 5 more

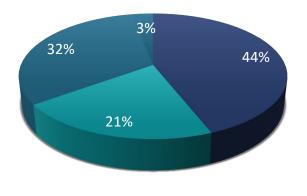
Enrollment Category	Determined Ineligible	Procedural Termination	Grand Total
Auto-enrolled with State Premium Assistance	619	2,324	2,940
Active Enrolled with State Premium Assistance	637	1,688	2,324
Active Enrolled with No State Assistance	596	2,354	2,949
Grand Total	1,852	6,366	8,213
% of Termed Individuals Enrolled	33.1%	19.6%	21.6%

OHP Enrolled Individuals



2022 AGGREGATE PAYOR MIX COMPARISON

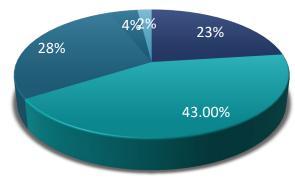
State Payor Mix



■ Commercial ■ Medicare

■ Medicaid
■ Uninsured

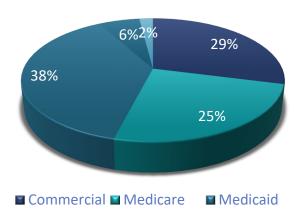
Inpatient Payor Mix



■ Medicaid

- Commercial Medicare
- Self/Charity
 Other

Outpatient Payor Mix



■ Self/Charity ■ Other

Source:

- ¹2022 CMS Enrollment Data
- ²2022 Rhode Island Health Insurance Survey Health Source RI
- ³2022 Rhode Island Hospital Discharge Data

RHODE ISLAND MEDICAID Innovation and Transformation Initiatives

Current

2018 Accountable Entities (AE):

- Rhode Island Medicaid's version of an Accountable Care Organization in which a provider organization is accountable for quality health care, outcomes and the total cost of care of its population.
- Shared Savings

2023 Certified Behavioral Health Clinics (CCBHC):

- Federally defined service delivery model that provides a comprehensive range of coordinated mental health and substance use services
- Monthly prospective payment
- Go –live date July 2024

RHODE ISLAND MEDICAID Innovation and Transformation Initiatives

Future

Hospital at Home:

 enables some patients who need acute-level care to receive care in their homes, rather than in a hospital. This care delivery model has been shown to reduce costs, improve outcomes and enhance the patient experience.

IMD Waiver for Mental Health:

enhance care coordination services for special populations such as I/DD

RHODE ISLAND MEDICAID Innovation and Transformation

Benefit Expansion

Doula Services

• support pregnant individuals, improve birth outcomes, and support new mothers and families with cultural specific antepartum, intrapartum, and postpartum services.

Community Health Workers:

 provide health promotion and coaching; health education and training; health system navigation and resource coordination services; and care planning with a member's interdisciplinary care team

Pending:

Personal Care Attendants:

 allow the provision of Home and Community-Based Personal Care services in acute care hospital settings

RHODE ISLAND MEDICAID Financing Hospitals

In 2021 HARI and its members engaged consultants to

- Restructure the hospital provider tax
- Develop new state directed payment methodology for Medicaid managed care
- Maximize Medicaid federal dollars to hospitals in Rhode Island
- Promote access to high-quality healthcare services to Rhode Island State
 Medicaid recipients

RHODE ISLAND MEDICAID Financing Hospitals

FY 2024 Summary of Key Components

- Three Tier Provider Tax \$214M
- State hold back \$90M
- Payments to Hospitals
 - DSH
 - I/P and O/P Upper Payment Limit
 - FFS and Managed Care market basket adjustment
 - Managed Care Directed Payments
- \$108M over FY 2023 to hospitals in Rhode Island

RHODE ISLAND MEDICAID Proposed Financing FY 2025

The FY 2022 state budget tasked the Rhode Island Office of the Health Insurance Commissioner (OHIC) with conducting a comprehensive review of all social and human service programs having a contract with or licensed by the state, inclusive of the State of Rhode Island Executive Office of Health and Human Services (EOHHS) and the state agencies under its purview.

- OHIC's recommendations were submitted to the Governor and General Assembly in September of 2023
- Full implementation of the recommended updates to social and human services rates would cost \$220.0M (\$88.1M in general revenue and \$131.9M in federal funds).
- FY 2025 budget proposal phases in the rate increases over three years
- Early Intervention proposed to be funded at 100%

RHODE ISLAND MEDICAID Proposed Financing FY 2025

	General Revenue	Federal Funds	All Funds
Health and Human Service Rate Increases (3yr timeline)	\$20M	\$31M	\$51M
Early Intervention (100%)	\$2M	\$2M	\$4M
CCHBCs	\$30M	\$50M	\$80M
Subtotal	\$52M	\$83M	\$135M
Hospitals			\$110M
Total			\$235M

QUESTIONS

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