	FY 2022	FY 2023	FY 2024	FY 2024
	Actual	Estimated	Requested	Recommended
Expenditure By Object				
Salaries & Fringe Benefits	50,556,831	61,633,456	62,222,833	56,775,653
Travel	251,541	623,750	646,750	623,750
Contractual Services	162,907,194	200,339,513	145,109,780	145,109,780
Commodities	451,606	1,038,175	1,029,025	1,029,025
Capital Outlay - Equipment	224,726	1,755,000	0	0
Vehicles	0	50,000	50,000	50,000
Subsidies, Loans & Grants	5,906,598,994	6,938,126,032	6,746,956,744	6,499,160,146
Totals	6,120,990,892	7,203,565,926	6,956,015,132	6,702,748,354
To Be Funded As Follows:				
Cash Balance - Unencumbered	345,549,184	613,789,130	495,498,284	495,498,284
State Appropriations	836,685,748	838,822,547	838,822,547	838,953,656
State Support Special Funds	63,230,003	63,230,003	63,230,003	63,230,003
Federal Funds	5,140,386,827	5,797,984,336	5,324,990,907	5,297,035,655
Medical Care Fund	348,928,260	286,615,559	315,635,553	315,635,553
Other Special Funds	0	77,544,810	80,312,167	80,312,167
Home & Comm Based-Services	0	21,077,825	21,288,604	21,288,604
Less: Est Cash Available	-613,789,130	-495,498,284	-183,762,933	-409,205,568
Totals	6,120,990,892	7,203,565,926	6,956,015,132	6,702,748,354
Summary Of Headcounts				
Permanent Full-Time	979	984	992	921
Part-Time	9			
Time-Limited Full-Time	23	23	23	23
Part-Time	0			
Totals	1,011	1,007	1,015	944
Summary Of Funding				
General Funds	836,685,748	838,822,547	838,822,547	838,953,656
State Support Funds	63,230,003	63,230,003	63,230,003	63,230,003
Special Funds	5,221,075,141	6,301,513,376	6,053,962,582	5,800,564,695
Totals	6,120,990,892	7,203,565,926	6,956,015,132	6,702,748,354

Agency Description and Programs

The Division of Medicaid (DOM) was established under Section 43-13-107, Mississippi Code of 1972, to provide access to quality health coverage for vulnerable Mississippians. The Division in the Office of the Governor is designated by state statute as the single state agency responsible for administering the Medicaid Program in Mississippi. DOM is a jointly funded state and federal program that ensures access to health services for the Medicaid-eligible population in the most cost-efficient and comprehensive manner possible and continually pursues strategies for optimizing the accessibility and quality of health care. DOM has 30 regional offices and over 80 outstations providing health coverage for eligible participants in Mississippi. These participants include children, low-income families, pregnant women, the aged, and the disabled. Medicaid is comprised of 4 program areas: Administrative Services, Medical Services, Children's Health Insurance Program (CHIP), and Home and Community-Based Services.

1. Administrative Services

This program provides services to Medicaid beneficiaries in the State most expediently and efficiently possible and identifies ways to improve services and/or contain costs. This program offers a bureau dedicated to collections from any third-party coverage available to recipients; a bureau devoted to surveillance, utilization, and investigation of program abuse or misuse by both providers and recipients; bureaus charged with implementing programs such as maternal and child health, disease management, prior approval for certain drugs, and alternatives to institutionalization such as home and community-based services; a finance and administrative office to record, analyze, control, and report agency revenue and expenditures, and provide budgeting and statistical information; an information systems bureau to help analyze and utilize the Mississippi Medicaid Information System (MMIS) and ensure that a fiscal agent operates the MMIS in compliance with key performance indicators and guidelines; a bureau to set reimbursement rates for cost-based institutional providers; and a bureau for determination of eligibility.

2. Medical Services

This program provides all medically necessary services to children living below specified levels of poverty; offers medical assistance to aged or disabled adults living below specified levels of poverty; develop programs demonstrating innovative services or service delivery to increase the benefits of services and/or reduce their cost; purchase insurance instead of assisting when cost-effective; develop the capacity to gather, and analyze information necessary for the development of state health policy. The State administers this program using state-appropriated funds and federal-matching funds within the provisions of Title XIX of the Social Security Act, as amended.

3. Children's Health Insurance Program (CHIP)

This program provides primary medical coverage, dental benefits, hearing, and vision care, prescription drug coverage, and immunizations to children from birth to age 19 whose family income does not exceed 200 percent of the federal poverty level and who are not otherwise eligible for Medicaid and have no other health insurance.

4. Home and Community Based-Waiver Program

This program provides an array of Home and Community-Based Services (HCBS) that assist Medicaid beneficiaries in living in the community and avoiding institutionalization. Waiver services complement and/or supplement the services available to participants through the Medicaid State Plan, other federal, state, and local public programs, and the support that families and communities provide. HCBS has 5 waiver programs: Elderly and Disabled waiver, Assisted Living waiver, Independent Living waiver, Traumatic Brain Injury/Spinal Cord Injury waiver, and Intellectual Disability/Developmental Disability waiver.

	FY 2022	FY 2023	FY 2024	FY 2024
	Actual	Estimated	Requested	Recommended
Summary By Program				
1. Administrative Services				
Total Funds	214,391,898	265,439,894	209,058,388	203,588,208
2. Medical Services				
Total Funds	5,262,402,146	6,170,460,085	6,032,925,534	5,791,511,269
3. Children's Health Insur Prg (CHIP)				
Total Funds	126,647,848	122,775,445	129,157,778	122,775,445
4. Home & Comm-Based Waiver Prg				
Total Funds	517,549,000	644,890,502	584,873,432	584,873,432