

	FY 2025 Actual	FY 2026 Estimated	FY 2027 Requested	FY 2027 Recommended
<u>Expenditure By Object</u>				
Salaries & Fringe Benefits	58,697,642	61,874,099	69,898,794	60,458,890
Travel	679,217	572,700	566,250	566,250
Contractual Services	126,133,614	149,227,212	152,210,211	149,227,212
Commodities	442,276	1,312,940	1,307,650	1,305,650
Capital Outlay - Equipment	302,199	260,000	250,000	250,000
Vehicles	88,126	104,320	104,320	104,320
Subsidies, Loans & Grants	7,871,969,325	8,149,703,554	8,627,859,365	8,149,703,554
Totals	8,058,312,399	8,363,054,825	8,852,196,590	8,361,615,876
<u>To Be Funded As Follows:</u>				
Cash Balance - Unencumbered	468,934,517	228,649,997	0	0
State Appropriations	847,968,406	906,639,774	1,251,643,147	906,093,997
State Support Special Funds	63,230,003	63,230,003	63,230,003	63,230,003
Federal Funds	6,151,949,228	6,391,210,276	6,753,256,646	6,618,967,101
State Agencies	124,586,323	124,299,611	124,212,604	124,299,611
Provider Taxes	612,366,842	649,025,164	659,854,190	649,025,164
Home & Community Based Services	17,927,077	0	0	0
Less: Est Cash Available	-228,649,997	0	0	0
Totals	8,058,312,399	8,363,054,825	8,852,196,590	8,361,615,876
<u>Summary Of Headcounts</u>				
Permanent	927	890	896	840
Time-Limited	82	82	82	82
Totals	1,009	972	978	922
<u>Summary Of Funding</u>				
General Funds	847,968,406	906,639,774	1,251,643,147	906,093,997
State Support Funds	63,230,003	63,230,003	63,230,003	63,230,003
Special Funds	7,147,113,990	7,393,185,048	7,537,323,440	7,392,291,876
Totals	8,058,312,399	8,363,054,825	8,852,196,590	8,361,615,876

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 thirty (30) regional offices and over eighty (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 four (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 in the most expediently and efficiently manner 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; develops programs demonstrating innovative services or service delivery to increase the benefits of services and/or reduce their cost; purchases insurance instead of assisting when cost-effective; and develops the capacity to gather and analyzes information necessary for the development of the 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 (200%) 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 five (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 2025 Actual	FY 2026 Estimated	FY 2027 Requested	FY 2027 Recommended
<u>Summary By Program</u>				
1. Administrative Services				
Total Funds	186,343,074	213,351,271	224,337,225	211,912,322
2. Medical Services				
Total Funds	6,813,328,120	7,101,535,108	7,514,484,903	7,101,535,108
3. Children's Health Insur Prg (CHIP)				
Total Funds	189,248,741	196,732,516	209,468,154	196,732,516
4. Home & Comm-Based Waiver Prg				
Total Funds	869,392,464	851,435,930	903,906,308	851,435,930