#### PROGRAM DESCRIPTION

Department: Social Services HB Section(s): 11.825

**Program Name: Adult Expansion Group** 

Program is found in the following core budget(s): Adult Expansion Group

#### 1a. What strategic priority does this program address?

Ensuring health, safe, and productive lives for MO HealthNet participants.

#### 1b. What does this program do?

On August 4, 2020, a state constitutional amendment (Article IV, Section 36c) was approved by voters to allow for the expansion of Medicaid eligibility to include adults, age 19 to 64 with income up to 138% of the Federal Poverty Level (FPL), effective July 1, 2021. This population is known as the Adult Expansion Group (AEG).

Eligibility Requirements are:

- Adults age 19-64
- Family income at or below 138% of the FPL
- Not pregnant
- · Not entitled to or enrolled in Medicare Part A or B
- Not receiving Supplemental Security Income (SSI)
- Does not qualify for any other MO HealthNet coverage

The program provides eligible adults a benefit package of essential, medically necessary health services including primary care, preventive care, and emergency services to improve comprehensive health coverage for adults.

AEG participants are mandatorily enrolled in MO HealthNet Managed Care (starting October 1st, 2021) but may opt out and receive their services through fee-for-service when certain criteria is met. AEG expenditures are matched at 90% through Title XIX federal funds. Manage Care organizations receive a monthly capitation payment to cover medical cost of the AEG participants. Carved out services (i.e. pharmacy, mental health services) for the AEG population are paid on a fee-for-service basis and also earn the 90% federal match.

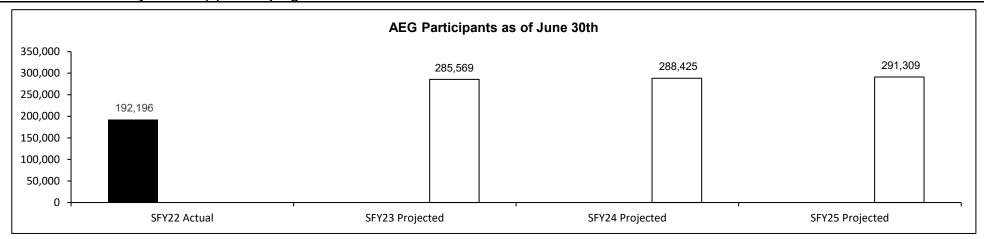
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### 2a. Provide an activity measure(s) for the program.



**NOTE**: Managed Care enrollment for this program began in October 2021; however, due to the eligibility criteria modifications during the Public Health Emergency (PHE), there are participants covered under alternative MHD programs that may be eligible for AEG once the PHE restrictions are lifted. MHD has projected enrollment to adjust by the beginning of SFY24, with a 1% increase in the following years.

#### 2b. Provide a measure(s) of the program's quality.

This is a new program and MHD will have updated measures once a full year of data is available. Outcome measures will include AEG participant quality of care.

## 2c. Provide a measure(s) of the program's impact.

This is a new program and MHD will have updated measures once a full year of data is available. Outcome measures will include AEG participant program impact for a specific service.

# 2d. Provide a measure(s) of the program's efficiency.

This is a new program and MHD will have updated measures once a full year of data is available. Outcome measures will inlude AEG participant program efficiency for a specific benefit.

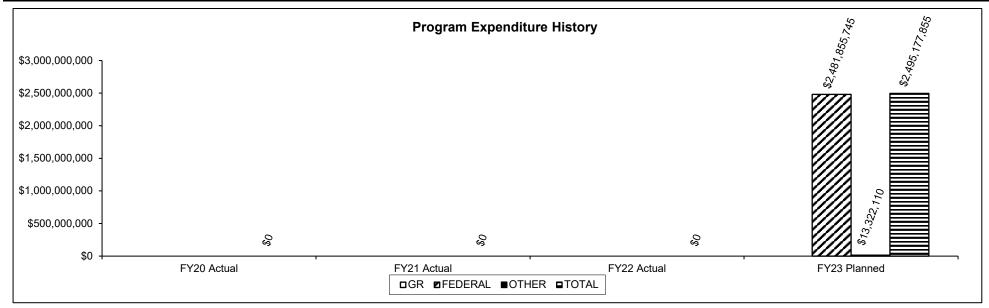
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# 3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



HB 11.825 was established in FY2023. In FY2022 AEG expenditures were paid from their corresponding HB sections.

## 4. What are the sources of the "Other " funds?

Federal Reimbursement Allowance Fund (0142), Pharmacy Reimbursement Allowance Fund (0144), Nursing Facility Reimbursement Allowance Fund (0196), and Ambulance Service Reimbursement Fund (0958)

# 5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

Section 36c of Article IV of the Missouri Constitution

## 6. Are there federal matching requirements? If yes, please explain.

Expenditures earn a 90% federal match and require a 10% state share.

# 7. Is this a federally mandated program? If yes, please explain.

No.