

**ACA: MEDICAID EXPANSION DECISION MATRIX -- IDAHO**

		ONE-TIME		ON-GOING		
		Medicaid Project	Welfare Eligibility Operations	ITSD Technology Operations	Medicaid Administration	
100,000 TO 150,000 OPTIONAL ~ 75%	<b>New Eligibles</b> <i>Expansion</i>	<ul style="list-style-type: none"> <li>Total costs for the Medicaid Expansion phase of the Medicaid Readiness Project are estimated at 9 million. About 98% of this request will ensure Idaho meets mandatory requirements of ACA. Only 2% of this one-time request covers changes needed in Automated systems to cover the newly eligible population.</li> <li>Decisions on newly eligible groups, coverage codes, interface design, and reporting options would need to be assessed and built in current DHW systems. This would account for ~2% of the total \$9M budget.</li> </ul>	<ul style="list-style-type: none"> <li>Division of Welfare will need to determine costs and additional staffing required to complete applications and maintenance activities on eligibility for new eligibles.</li> <li>New staffing may be needed to support administrative work such as policy specialists and program management.</li> <li>Operating costs for additional staff will be considered, including space, equipment, and support.</li> <li>Expansion to newly eligible populations makes up ~75% of total caseload increase. Therefore, total staffing requests to accommodate newly eligible caseload growth will be about 75% of the total staffing request.</li> <li>Decisions on Idaho's approach to an Exchange will impact staffing request.</li> </ul>	Total costs for increased IT support will be needed regardless of Expansion decision.	Considerations for Division of Medicaid administration costs include a decision to either administer Medicaid programs for the Expansion group internally or outsource/contract the administration for coverage of the new eligible group.	
	<b>Crowd Out</b>					
MANDATORY ~ 25%	<b>Creep with MAGI</b>	Changes to budgeting and income calculations, notices, reports, and Medicaid rules engines must be modified to meet mandatory sections of ACA. This accounts for 98% of one time project funding request.	Should the state choose NOT to expand, there will still be caseload increases due to woodworking and creep with new budget methodologies and eligibility rules in place. We anticipate about 25% of the total staffing needs would still be needed to address this increase.	Additional support will be needed to support requirements of 24/7 processing, new technology & business support, and more modern infrastructure to support on-line services. Additional staff are needed to support the mandatory changes in Medicaid.	There would be little administrative cost increases to Division of Medicaid if there is not a newly eligible category.	
	<b>Woodwork Effect Awareness</b>					