## Division of Medicaid Division Profile

Medicaid Plans: Caseloads and Trustee and Benefit Payments (All Funds)

	FY 2024 Expenditures		FY 2025 Orig Approp		FY 2026 Request	
	Amount	% of Total	Amount	% of Total	Amount	% of Total
Basic Plan						
Caseload	176,035	50.8%	171,272	51.4%	177,154	50.8%
Budget	\$771,396,300	18.4%	\$1,041,828,500	23.3%	\$937,453,000	18.6%
PMPM (calc)	\$405.63		\$508.35		\$484.05	
Enhanced Plan						
Caseload	42,690	12.3%	43,449	13.0%	44,527	12.8%
Budget	\$1,425,553,100	34.1%	\$1,514,776,900	33.8%	\$1,439,582,100	28.6%
PMPM (calc)	\$2,373.54		\$2,562.16		\$2,497.50	
Coordinated Plan						
Caseload	27,640	8.0%	27,806	8.3%	28,366	8.1%
Budget	\$979,315,500	23.4%	\$795,900,900	17.8%	\$1,292,203,100	25.7%
PMPM (calc)	\$3,260.88		\$3,792.90		\$3,865.50	
<b>Expansion Plan</b>						
Caseload	100,094	28.9%	90,673	27.2%	98,629	28.3%
Budget	\$1,010,045,600	24.1%	\$1,123,526,800	25.1%	\$1,361,100,400	27.1%
PMPM (calc)	\$839.75		\$1,100.60		\$1,080.74	
Total						
Caseload	346,459	100%	333,200	100%	348,676	100%
Budget	\$4,186,310,500	100%	\$4,476,033,100	100%	\$5,030,338,600	100%
PMPM (calc)	\$1,001.32		\$1,211.43		\$1,185.05	

The table above contains the payments for Disproportionate Share Hospital (DSH), and Upper Payment Limits (UPL), and other non-claims specific contracts. PMPM (calc) means "Per Member Per Month" a metric that calculates the average healthcare cost per member over a specific period of time. It's calculated by dividing the total healthcare costs by the total number of members covered during that time. PMPM is a standardized way to compare costs across different populations.

## Medicaid Populations vs Expenditures FY 2024

