Governor’s FY 2021 Budget: Articles

Staff Presentation to the House Finance Committee
March 10, 2020
**Introduction**

- Medicaid Related Articles: 14, 17, 18, 20
  - HFC to cover over 2 hearings
  - Article 14 – Medicaid
    - Including Medicaid Resolution
    - EOHHS programs – both hearings
    - BHDDH/DD wage increase – Scheduled March 17th
  - Article 17 – Hospital Uncompensated Care
    - Scheduled for March 17th
  - Article 18 – Hospital License Fee
    - Scheduled for March 17th
  - Article 20 – Sec.13 – Rite Share – March 10
Medicaid Overview

- Major part of state budget & economy
  - 30% of state residents receive Medicaid
  - Majority of costs on small % of population
- Federal requirements and limitations
  - Can expand programs through waivers
    - To cover populations & provide services through different pathways
    - RI Global Consumer Choice Compact Waiver
- ACA - state expanded Medicaid to approximately 74,000 individuals
EOHHS

- Principal agency to manage the 4 health and human service agencies
  - Behavioral Healthcare, Developmental Disabilities and Hospitals
  - Children, Youth and Families
  - Human Services
  - Health
- Medicaid funded programs in each of the agencies
Governor appoints the directors of the 4 agencies under the EOHHS umbrella

- EOHHS is responsible for managing and providing strategic leadership and direction to the 4 departments
  - Ideally, issues and impacts are coordinated across agencies

- Directors retain statutory authority
# Governor’s FY 2021 Budget by Department

<table>
<thead>
<tr>
<th>Department</th>
<th>General Revenues</th>
<th>All Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>EOHHS</td>
<td>$1,010.7</td>
<td>$2,682.2</td>
</tr>
<tr>
<td>BHDDH</td>
<td>207.8</td>
<td>487.1</td>
</tr>
<tr>
<td>Children, Youth &amp; Families</td>
<td>186.8</td>
<td>263.6</td>
</tr>
<tr>
<td>Human Services</td>
<td>117.9</td>
<td>635.2</td>
</tr>
<tr>
<td>Health</td>
<td>33.0</td>
<td>186.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,556.1</strong></td>
<td><strong>$4,254.8</strong></td>
</tr>
<tr>
<td>Total State Budget</td>
<td><strong>$4,247.8</strong></td>
<td><strong>$10,195.0</strong></td>
</tr>
</tbody>
</table>

**EOHHS Agencies % of Total**

- **36.6%**
- **41.7%**

$ in millions
## Governor’s FY 2021 Budget

### Medicaid by Department

<table>
<thead>
<tr>
<th>Department</th>
<th>General Revenues</th>
<th>All Funds</th>
<th>% of Medicaid</th>
</tr>
</thead>
<tbody>
<tr>
<td>EOHHS</td>
<td>$1,003.8</td>
<td>$2,640.4</td>
<td>83.3%</td>
</tr>
<tr>
<td>BHDDH</td>
<td>199.3</td>
<td>435.4</td>
<td>13.7%</td>
</tr>
<tr>
<td>DCYF</td>
<td>30.0</td>
<td>62.9</td>
<td>2.0%</td>
</tr>
<tr>
<td>Human Services</td>
<td>12.3</td>
<td>29.7</td>
<td>0.9%</td>
</tr>
<tr>
<td>Health</td>
<td>1.0</td>
<td>3.2</td>
<td>0.1%</td>
</tr>
<tr>
<td><strong>Medicaid Total</strong></td>
<td><strong>$1,246.4</strong></td>
<td><strong>$3,171.6</strong></td>
<td><strong>100%</strong></td>
</tr>
<tr>
<td><strong>Total State Budget</strong></td>
<td><strong>$4,247.8</strong></td>
<td><strong>$10,195.0</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Medicaid % of Total</strong></td>
<td><strong>29.3%</strong></td>
<td><strong>31.1%</strong></td>
<td></td>
</tr>
</tbody>
</table>

*In millions*
Medicaid % of FY 2021 Budget - General Revenues

State Match: 29.3%

Other Spending: 70.7%
Medicaid Programs

- **EOHHS**
  - Low income children and parents
  - Elderly/Disabled/Non-Disabled without dependent children
  - Medical benefits for those receiving community based services
    - Through BHDDH or DCYF

- **BHDDH**
  - Services to developmentally disabled adults
  - Patients at Eleanor Slater Hospital
Medicaid Programs

- DCYF
  - Non-medical Services for Children
  - Residential and Community Based services
- DHS
  - Medical Services Administration
- DOH
  - Inspections
  - Administrative Expenses
Caseload Estimating Conference

- House Fiscal, Senate Fiscal and State Budget Office staff estimate
  - Expenditures for medical benefits and cash assistance programs in EOHHS & DHS
- Estimates based on current law only
- Convenes 2X a year November & May
  - November is starting point for the Governor’s revised and recommended budgets
  - Enacted budget reflects May estimates
# Medical Assistance: CEC

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2020 Enacted</th>
<th>FY 2021 Nov CEC</th>
<th>FY 2021 Gov. Rec.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals</td>
<td>$194.9</td>
<td>$132.7</td>
<td>$192.3</td>
</tr>
<tr>
<td>Long Term Care</td>
<td>428.1</td>
<td>457.5</td>
<td>450.1</td>
</tr>
<tr>
<td>Managed Care</td>
<td>747.7</td>
<td>740.0</td>
<td>705.0</td>
</tr>
<tr>
<td>Expansion</td>
<td>483.1</td>
<td>500.0</td>
<td>462.1</td>
</tr>
<tr>
<td>Rhody Health Partners</td>
<td>249.5</td>
<td>267.0</td>
<td>262.5</td>
</tr>
<tr>
<td>Rhody Health Options</td>
<td>152.6</td>
<td>149.3</td>
<td>146.2</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>74.1</td>
<td>74.7</td>
<td>74.7</td>
</tr>
<tr>
<td>Other Medical</td>
<td>136.3</td>
<td>147.0</td>
<td>148.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$2,466.3</strong></td>
<td><strong>$2,468.2</strong></td>
<td><strong>$2,441.6</strong></td>
</tr>
</tbody>
</table>

* $ in millions
Medical Assistance

- Governor’s budget includes proposals that change the CEC estimate
  - Require a change to current law
  - Notification to the Assembly
    - Less formal changes
FY 2021 Governor’s Budget: EOHHS All Funds

- Medicaid Expansion: 19.4%
- Rhody Health Partners: 11.0%
- Rhody Health Options (ICI): 6.2%
- Hospitals: 5.4%
- Rite Care/Rite Share: 30.8%
- Long Term Care: 18.9%
- Pharmacy: 3.1%
- Other Medical: 6.3%
FY 2021 Governor’s Budget: EOHHS General Revenues

- Long Term Care: 23.2%
- Hospitals: 10.0%
- Rhody Health Options (ICI): 7.5%
- Rhody Health Partners: 13.6%
- Medicaid Expansion: 5.1%
- Other Medical: 6.2%
- Pharmacy: 0.0%
- Rite Care/Rite Share: 34.1%
PROGRAM EXPENSES: GENERAL REVENUES

- Children & Parents: 36%
- Elderly & Disabled: 41%
- Expansion: 5.4%
- Other: 17%

ENROLLMENT

- Children & Parents: 57%
- Expansion: 24%
- Elderly & Disabled: 19%

FY 2021 Governor’s Budget: EOHHS by Population
FY 2021 Governor: Long Term Care

All Funds = $596.4 million

- Nursing Homes: $146.2 million (0.25)
- Home & Community Care: $82.7 million (0.14)
- Rhody Health Options (ICI): $367.5 million (0.62)

Gen. Rev. = $276.2 million

- Nursing Homes: $170.4 million (62%)
- Home & Community Care: $38.2 million (14%)
- Rhody Health Options (ICI): $67.6 million (24%)

Legend:
- Nursing Homes
- Home & Community Care
- Rhody Health Options (ICI)
## Articles 14 & 20

<table>
<thead>
<tr>
<th>Providers</th>
<th>Gen Rev</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals</td>
<td>$(14.9)</td>
<td>$(19.7)</td>
</tr>
<tr>
<td>Long Term Care Services &amp; Supports</td>
<td>(3.1)</td>
<td>(7.5)</td>
</tr>
<tr>
<td>Managed Care Plans</td>
<td>(4.5)</td>
<td>(21.1)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$(22.4)</strong></td>
<td><strong>$(48.3)</strong></td>
</tr>
</tbody>
</table>

$ in millions
## Article 14 – Resolution

<table>
<thead>
<tr>
<th>Proposal</th>
<th>General Revenues</th>
<th>All Funds</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Provider Rates</td>
<td>$(3.6)</td>
<td>$(4.6)</td>
<td>-</td>
</tr>
<tr>
<td>(b) Perinatal Doula Services</td>
<td>0.1</td>
<td>0.2</td>
<td>-</td>
</tr>
<tr>
<td>(c) Co-Payments</td>
<td>(4.3)</td>
<td>(17.8)</td>
<td>2.0</td>
</tr>
<tr>
<td>(d) RIte Share Program (also Sec 13/Art 20)</td>
<td>(5.2)</td>
<td>(19.0)</td>
<td>-</td>
</tr>
<tr>
<td>(e) BHDDH Wage Increase</td>
<td>1.0</td>
<td>2.2</td>
<td>-</td>
</tr>
<tr>
<td>(f) Federal Financing Opportunities</td>
<td>N/A</td>
<td>N/A</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$(12.0)</strong></td>
<td><strong>$(39.0)</strong></td>
<td>2.0</td>
</tr>
</tbody>
</table>

$ in millions
Articles 14 & 20

Specific items for tonight’s agenda relate to services in several programs

- **Managed Care Plans**
  - Adult Co-payments
  - Full Risk Arrangement
  - RIte Share Enrollment

- **Fee for Service**
  - Perinatal Doula Services
  - Non-Emergency Transportation
Article 14 – Co-Payments

- Section 1 imposes co-payments for pharmacy and inpatient hospital stays
  - Does not include
    - Most disabled individuals
    - Those in long-term care facilities
    - Women who are pregnant
  - Proposed co-payments
    - $1.00 for selected drugs
      - High blood pressure/cholesterol/diabetes
    - $3.65 for all other drugs
    - $3.00/day for inpatient hospital stay
Co-payments also proposed as part of Governor’s FY 2019 budget

- Prescription drugs
- Non-emergency visits to an ER
- Non-preventative visits to a physician

Requested an amendment to clarify intent of the proposal

- Co-pays did not apply to individuals with a federal or state disability determination
Article 14 – Co-Pays

- FY 2021 budget - $17.8 million savings
  - $4.3 million from general revenues
  - About half of savings is decrease in utilization
  - Effective July 1, 2020
- Proposed legislation requires services be delivered even if payment is not made
  - Savings to be implemented by reducing payments to the managed care plans
    - Impact to providers?
36 states have some form of a pharmacy co-payment

- 2018 data from Kaiser Family Foundation
  - Massachusetts – $1.00 selected generic/$3.65 other generic and brand name/up to $250/a year
  - Connecticut does not

Regional comparison for hospital co-pay

- Massachusetts & Maine - $3
As drafted proposed legislation would make co-pay applicable to certain individuals with severe and persistent mental illness

- Not on SSI but have high enough medical bills to qualify them for Medicaid

Savings detail by component shows this accounts for $1.3 million of total

- $0.6 million from general revenues
## Article 14 – Managed Care Plans

<table>
<thead>
<tr>
<th>Population (February)</th>
<th>NHP</th>
<th>UnitedHealth</th>
<th>Tufts</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children &amp; Families</td>
<td>101,958</td>
<td>49,856</td>
<td>4,636</td>
<td>156,450</td>
</tr>
<tr>
<td>Expansion</td>
<td>37,085</td>
<td>26,676</td>
<td>3,845</td>
<td>67,606</td>
</tr>
<tr>
<td>Elderly &amp; Disabled</td>
<td>20,632</td>
<td>6,537</td>
<td>579</td>
<td>27,748</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>159,675</strong></td>
<td><strong>83,069</strong></td>
<td><strong>9,060</strong></td>
<td><strong>251,804</strong></td>
</tr>
</tbody>
</table>

*does not include those in RIte Share or fee-for service*
### Article 14 – Co-Pays

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Children &amp; Families</th>
<th>Expansion</th>
<th>Disabled</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-payments</td>
<td>$(3.2)</td>
<td>$(5.0)</td>
<td>$(0.6)</td>
<td>$(8.8)</td>
</tr>
<tr>
<td>Drugs – Utilization</td>
<td>(3.2)</td>
<td>(5.0)</td>
<td>(0.6)</td>
<td>(8.8)</td>
</tr>
<tr>
<td>Inpatient Hospital Visits</td>
<td>(.03)</td>
<td>(0.1)</td>
<td>(0.1)</td>
<td>(0.2)</td>
</tr>
<tr>
<td>Total Savings</td>
<td>$(6.5)</td>
<td>$(10.0)</td>
<td>$(1.3)</td>
<td>$(17.8)</td>
</tr>
<tr>
<td>Gen. Rev.</td>
<td>$(3.1)</td>
<td>$(1.0)</td>
<td>$(0.6)</td>
<td>$(4.7)</td>
</tr>
</tbody>
</table>

$ in millions
Article 14 – Co-Pays

- Collection at the point of service
  - Hospitals & pharmacies
    - Savings taken through reductions to MCOs
- Patient co-pays capped at 5% of income
  - Estimate doesn’t appear to account for cap
- Implementation - $1.0 million
  - 2 new FTE - $0.3 million
  - $0.7 million for system changes
    - Budget includes $0.1 million from general revenues
      - Excludes matching $0.7 million federal funds
## Resolution - Medicaid Waiver

### January 1, 2019 to December 31, 2023

<table>
<thead>
<tr>
<th>Prior Category</th>
<th>Change</th>
<th>Approval</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Administrative</td>
<td>Notify CMS</td>
<td>General operating procedures, prior authorization change</td>
</tr>
<tr>
<td>II</td>
<td>Payments and optional benefits</td>
<td>Assembly/State Plan Amendment</td>
<td>Rate or payment change &amp; adding benefits</td>
</tr>
<tr>
<td>III</td>
<td>Eligibility/New Benefit</td>
<td>Assembly &amp; CMS</td>
<td>Lowering Rlte Care threshold for parents</td>
</tr>
</tbody>
</table>
The Article allows the state to change its current financial arrangement with managed care organizations
- Require them to assume all risk
- State currently shares both gains and losses with the providers
  - Up front payments based on actuarial analysis
  - Reconciliation of costs & payments determines gains and losses
    - Amounts beyond 1.5% are shared
<table>
<thead>
<tr>
<th>Risk/(Gain) Share Payments</th>
<th>FY 2017</th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managed Care</td>
<td>$2.9</td>
<td>$4.9</td>
<td>$0.8</td>
</tr>
<tr>
<td>Rhody Health Partners</td>
<td>1.9</td>
<td>1.2</td>
<td>15.9</td>
</tr>
<tr>
<td>Rhody Health Options</td>
<td>7.4</td>
<td>6.6</td>
<td>5.6</td>
</tr>
<tr>
<td>Expansion</td>
<td>(7.7)</td>
<td>(0.9)</td>
<td>24.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$4.5</strong></td>
<td><strong>$11.8</strong></td>
<td><strong>$46.9</strong></td>
</tr>
</tbody>
</table>

$ in millions
Recent changes to risk calculations

- FY 2019 enacted budget assumed savings $16.9 million from reducing MCO rates
  - EOHHS achieved the savings by changing the risk share arrangements
  - Plans would bear all risk on a higher percent of the medical costs

- FY 2020 rates allow for 1.5% risk
  - Costs over 101.5% are shared with state
  - Different methodology than “risk corridors”
November CEC assumes $21.0 million as value of risk margin to the plans
- Equal to 1.5% of the monthly capitated payments
- Governor’s budget assumes 2.5% and MCO will be responsible for any losses
  - Adds $15.6 million for a total of $36.6 million
  - No savings for underspending accrue to state
Auditor General’s FY 2019 audit findings noted issues with reconciliation process:
- Complexity of financial activities
- Use of contractors for oversight
- Certain payments based on manual calculations
Risk Share payment often reflect unachieved savings initiatives

- Potential impacts to MCOs from other savings proposals if not achieved
  - Example – another proposal for pharmacy savings based on utilization review by the plans
  - $1.5 million in savings
  - Or if there are unforeseen expenses
    - NICU costs moving into plan
      - No longer paid on fee for service basis
Section increases rates for non-emergency transportation services

- Impacts ambulance rates
- Rates were increased for FY 2020 for one year using emergency rules under threat to immediate health and safety
- EOHHS made the change in mid-July after passage of the FY 2020 budget
- Assembly approval requested for same change to be made for FY 2021
Article 14 (a)(ii) – Transportation Rates

- FY 2021 budget adds $2.2 million for the increase
  - $0.8 million from general revenues

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Prior Rates</th>
<th>FY 2020 Revised</th>
<th>FY 2021 Gov. Rec.</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Life Support</td>
<td>$71.50</td>
<td>$147.67</td>
<td>$147.67</td>
<td>$76.17</td>
</tr>
<tr>
<td>Advanced Life Support</td>
<td></td>
<td>$177.20</td>
<td>$177.20</td>
<td>$105.70</td>
</tr>
</tbody>
</table>
Article 14 (b) – Perinatal Doula Services

- Section allows the state to establish Medicaid coverage and reimbursement rates for perinatal doula services
  - Services support women during pregnancy, childbirth & first few postpartum weeks
- Budget includes $0.2 million
  - $0.1 million from general revenues
  - $0.4 million for doula services offset by $0.2 million in hospital savings
Budget assumes an $850 payment for 10% of Medicaid births
- 500 births
- For all 5,000 births – cost could be $4.2 million

Other states also pay for the services
- Minnesota - $411 for 6 visits
- Oregon - $350 for 4 visits along with other costs related to the services
Article 14 (f): Federal Opportunities

- Allows EOHHS to take advantage of any federal opportunities that do not have an adverse impact on the FY 2021 budget
- Has been included in previous budgets
  - No actions have been taken under this provision
Rlite Share Program

- State provides for cost sharing with employers who have employees who are eligible for Medicaid
  - Either through Rlite Care or Expansion
  - Have access to qualified private insurance
  - The state pays employee’s premium & cost sharing requirements
    - Either send a check to the employee or an employer if participating in the program
State law requires employees to enroll in their employer’s insurance in order to access Medicaid benefits
- Question is asked when someone applies or is recertified for Medicaid eligibility
- Via RI Bridges system (UHIP)
## Article 20/Section 13 – Rite Share

<table>
<thead>
<tr>
<th>Recent Experience</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-UHIP</td>
<td>8,400 individuals in the program</td>
</tr>
<tr>
<td>May 2019 CEC</td>
<td>3,400 individuals in the program</td>
</tr>
<tr>
<td>FY 2020 Governor’s Budget</td>
<td>New assessment for employers w/ employees receiving Rite Care</td>
</tr>
<tr>
<td>2019 Assembly</td>
<td>No assessment but new outreach and reporting requirements to enhance Rite Share enrollment</td>
</tr>
<tr>
<td>Nov 2019 CEC</td>
<td>Backlogs &amp; other issues; savings same</td>
</tr>
<tr>
<td>FY 2021 Gov.</td>
<td>Governor proposes Art 20 changes</td>
</tr>
</tbody>
</table>
**Article 20/Section 13 – RIte Share**

- Governor had proposed assessing large employers $1,500 for every Medicaid recipient employee
- Assembly instead required EOHHS to revisit existing RIte Share program to maximize enrollment
  - Initial plan due by 10/1/2019
  - Subsequent enhanced reporting
    - Submitted 10/16/2019
Article 20/Section 13 – RItte Share

- **RItte Share Reporting**
  - Added info in monthly Medicaid report
    - # of individuals with access to ESI
    - # of plans that meet the cost effectiveness criteria
    - RItte Share enrollment
  - FY 2020 savings from increasing enrollment
    - $2.3 million
      - $1.1 million from general revenues
      - Enrollment of 4,776
  - Caseload estimate assumes these savings
    - Testimony suggested significant issues with program
Article 20/Section 13 – Rlte Share

- EOHHS plan to increase enrollment
  - UHIP update from March will allow the Rlte Share unit to perform the necessary functions to begin working the employer renewal backlog - 354 to be done by 2/20
  - Continue to review new applications & answer calls from employers & employees
  - Does not include outreach plans
- CEC testimony suggested lack of specific plans and some confusion on process
## Article 20/Section 13 – Rlte Share

<table>
<thead>
<tr>
<th>Enrollment</th>
<th>Rlte Share</th>
<th>Rlte Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2017</td>
<td>8,040</td>
<td>150,515</td>
</tr>
<tr>
<td>FY 2018</td>
<td>6,422</td>
<td>158,187</td>
</tr>
<tr>
<td>FY 2019</td>
<td>4,525</td>
<td>156,756</td>
</tr>
<tr>
<td>July 2019</td>
<td>4,249</td>
<td>161,616</td>
</tr>
<tr>
<td>August 2019</td>
<td>4,191</td>
<td>161,596</td>
</tr>
<tr>
<td>September 2019</td>
<td>4,005</td>
<td>159,440</td>
</tr>
<tr>
<td>October 2019</td>
<td>3,540</td>
<td>159,319</td>
</tr>
<tr>
<td>November 2019</td>
<td>3,392</td>
<td>156,233</td>
</tr>
<tr>
<td>December 2019</td>
<td>3,281</td>
<td>155,727</td>
</tr>
<tr>
<td>January 2020</td>
<td>3,279</td>
<td>156,215</td>
</tr>
</tbody>
</table>
Article 20 – Rlte Share

If Individual has Access to Employer Sponsored Insurance (ESI)

Current Law

- Coverage reported through RI Bridges when applying for Medicaid
- EOHHS’ Rlte Share Unit receives the information to decide if coverage is acceptable
- If acceptable, state pays employee costs

Section 13/Article 20

- Employer with at least 50 employees, excluding non-profits, has new requirements
- Penalties if do not comply
  - Timely manner - $2,500
  - Non-compliance or provide false info. - $5,000
  - New revenue of $0.2 million
Article 20 – Rlte Share

Employers: For-profit 50+ workers

Report Quarterly: Employees enrolled or not enrolled in employer sponsored insurance (ESI) and who is no longer employed

Let EOHHS know when a new employee is offered insurance during open enrollment

Participate in EOHHS’ employer education outreach campaign & cannot offer incentives to turn down ESI
### Rlте Share Program

- Savings from lower cost than full Medicaid

<table>
<thead>
<tr>
<th>Program</th>
<th>Jan. 2020 Enrollment</th>
<th>FY 2021 Gov. Rec. Enrollment</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>RIte Care*</td>
<td>146,524</td>
<td>130,786</td>
<td>$3,347</td>
</tr>
<tr>
<td>RIte Share</td>
<td>3,279</td>
<td>19,362</td>
<td>$630</td>
</tr>
<tr>
<td>Expansion</td>
<td>71,027</td>
<td>61,271</td>
<td>$6,291</td>
</tr>
<tr>
<td>Expansion – RIte Share</td>
<td>322</td>
<td>5,749</td>
<td>$630</td>
</tr>
</tbody>
</table>

*Children & Parents excluding children in foster care & w/special health care needs
Article 20/Section 13 – Rlte Share

- FY 2021 savings of $19.0 million from enrollment increases
  - $5.2 million from general revenues
  - Assumes enrollment grows by 19,000 to 25,000
    - About 13,600 in the Rlte Care program
    - About 5,400 in the expansion program
  - Approximately
Article 20/Section 13 – RItc Share

- Effective July 1
  - Savings assume six months of full enrollment target
- Implementation
  - System changes -$600k
  - Current staffing assumed
Governor’s FY 2021 Budget: Articles

Staff Presentation to the House Finance Committee
March 10, 2020