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## State Budget Summaries

**FY 2022**

Updated October 22, 2021

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## Executive Summary

Forty-six states began their fiscal year (FY) 2022 on July 1, 2021. The remaining states begin their fiscal years at different points in the calendar year. New York began its fiscal year on April 1. Alabama and Michigan begin their fiscal year on October 1, and Texas begins its fiscal year on September 1. Virginia and Wyoming enacted a biennial budget during the 2020 legislative session. As of September 29, forty-nine states have enacted a budget for FY 2022. This summary analyzes annual and/or biennial budgets with published enacted budgets for the following forty-five states: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, Mexico, New York, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Washington, West Virginia, and Wisconsin. These states, representative of various areas across the country, are the part of iterative installments of state budget profiles. Additional states will be summarized in future Digest issues.

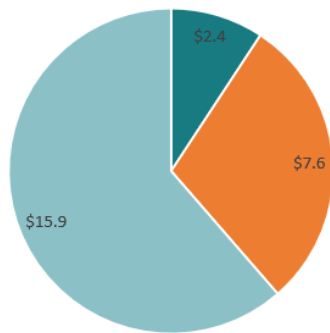
This summary focuses its analysis on the selected states' overall budgets as well as their specific Medicaid expenditures and program changes. Many states utilized their state general funds to expand substance use disorder and behavioral and mental health services, invest more into nursing homes and long-term care facilities, broaden telehealth abilities, and cover doula services. Several states have adopted budget and policy changes that will contribute to health equity through an increased focus on affordable housing, high-quality schools, raising the minimum wage, and overall economic opportunity.

## Alabama

### Key Facts of the State of Alabama Budget

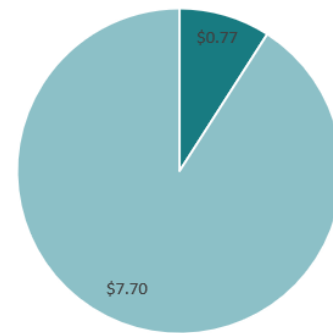
**Date of budget passage:** May 21, 2021<sup>i</sup>  
**State fiscal year:** October 1, 2021 – September 30, 2022

AL State Budget FY22 (\$26B)



■ General Fund ■ Education Trust Fund ■ Earmarked Funds

Health Care Budget FY22 (\$8.4B)



■ General Fund ■ Earmarked Funds

### Sellers Dorsey Budget Insights

#### Budget composition

Alabama's FY22 state budget appropriates \$26B in total dollars, with \$8.4B allocated to the health care budget. The FY22 budget is \$74M higher (3%) than the previous year. Lawmakers note the \$2.4B general fund allocation is the largest in the state's history and fully funds spending for FY22, including \$65M in reserves.<sup>ii,iii</sup> Despite several years of increases to meet Federal Medicaid funding requirements, the Medicaid budget is \$51M smaller than in past years.<sup>iv</sup>

#### Medicaid spending and key program changes

- Increase of \$26.3M to the Department of Corrections to improve health care and mental health services for inmates.
- Increase of \$10M to the Alabama Department of Mental Health to provide additional crisis intervention in the Birmingham/Tuscaloosa metro areas.

#### Other notable Medicaid legislation or agency regulations

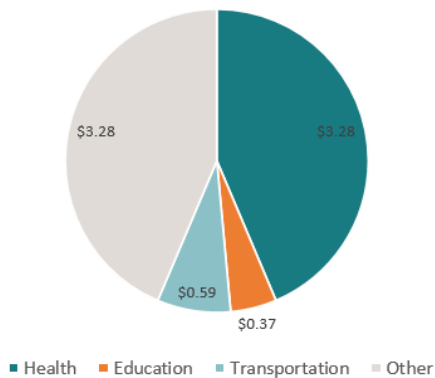
- [HB170](#) exempts all CARES Act, American Rescue Plan Act (ARP), and other COVID-19 relief payments and other stimulus payments from Alabama individual or corporate income tax.

## Alaska

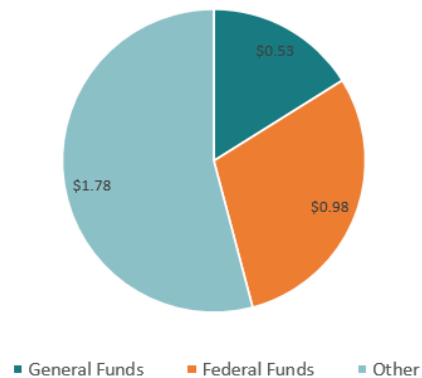
### Key Facts of the State of Alaska Budget

**Date of budget passage:** June 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

AK State Budget FY22 (\$7.52B)



Health Care Budget FY22 (\$3.28B)



### Sellers Dorsey Budget Insights

#### Budget composition

The Alaska FY22 budget appropriates \$2.48B from the Unrestricted General Fund, \$648.4M from the Designated General Fund, \$626.4M from the Other (Non-Duplicated) Fund, \$2.9B from Federal Receipts, and \$855.8M from the Other (Duplicated) Fund.<sup>v</sup>

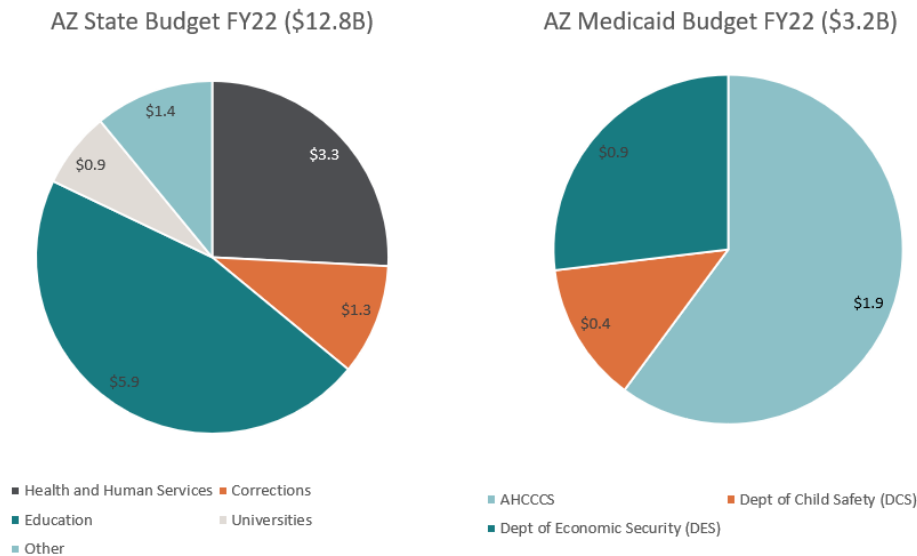
#### Medicaid spending and key program changes

- Governor Dunleavy used line-item veto power to reduce the Alaska Medicaid Program by more than \$17.M.<sup>vi</sup>
- Disproportionate share hospital (DSH) for qualifying hospitals that serve Medicaid and Uninsured individuals was reduced by \$3.5M via a line-item veto.<sup>vii</sup>
- The legislature intends to draw up 70 new individuals from the Intellectual and Developmental Disabilities waiver waitlist to receive services.<sup>viii</sup>

## Arizona

### Key Facts of the State of Arizona Budget

**Date of budget passage:** June 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>ix</sup>

Arizona's FY22 state budget appropriates \$12.8B in general funds, representing a 6% decrease in state spending from FY21. Approximately \$1.92B, or 15%, of the appropriated funds are being allocated to Arizona Health Care Cost Containment System (AHCCCS) [Medicaid] which had its budget decreased by 2% from the previous year. The state is also receiving \$6.6B in State and Local Fiscal Aid from ARP with \$4.2B going directly to the state government and \$2.4B going to local jurisdictions.

#### Medicaid spending and key program changes<sup>x</sup>

- \$267M in Higher Federal Match Rate Savings (\$180M for AHCCCS, \$77M for Department of Economic Security, \$10M for Department of Child Safety).
- \$30M for developmental disabilities (DD) providers to provide essential services for vulnerable individuals.
  - \$15.4M for DD Provider Rate Increase.
- \$13.3M for Elderly/Physically Disabled (EPD) Provider Rate Increase (\$7M to SNF).
- \$5.8M to expand the Newborn Screening Program.
- \$3M for Enacted GME Increase (Funding of \$6M for FY22, \$9M Baseline After).
- \$2.3M to fund 5% salary increases for 4,900 positions at the AZ Department of Economic Security
- \$1M for Provider Rate Increases for Adult and Aging Services.
- Continues the FY10 risk contingency rate reduction for all MCOs. Continues to impose a reduction on funding for all MCOs administrative funding levels.

- Sets the FY22 county Arizona Long Term Care System (ALTCS) contributions at \$283M, county Acute Care contribution at \$46M, and excludes Prop 204 admin costs from county expenditure limitations.
- Continues to require AHCCCS to transfer any excess funds back to the counties by December 31, 2022 if the counties' proportion of state match exceeds the proportion allowed to comply with the ACA.
- Continues to establish FY22 DSH distributions to the Maricopa Special Healthcare District (MIHS), the Arizona State Hospital, private qualifying DSH, and Yuma Regional Medical Center. Keep the MIHS distribution of \$114M in FY22.
- Requires AHCCCS to give priority to rural hospitals in Pool 5 distribution and allows MIHS to be eligible for Pool 5 allocations. Permit local jurisdictions to provide additional local match for Pool 5 distributions.
- Establishes the Comprehensive Health Plan Fund consisting of comprehensive health plan revenues and requires the Department of Child Safety to transfer excess capitation payments to the General Fund at the end of the following fiscal year. The comprehensive health plan includes both acute and behavioral health services for foster care children.
- Establishes the Sexual Violence Services Fund to provide financial assistance to service providers for victims of sexual violence.
- Requires the Office of the State Long-Term Care Ombudsman to visit long-term care facilities biannually, requires the Ombudsman to speak with residents or their representatives, investigates and resolves complaints and refer cases to Adult Protective Services or the appropriate agency, and changes complaint communication requirements for DD service providers.

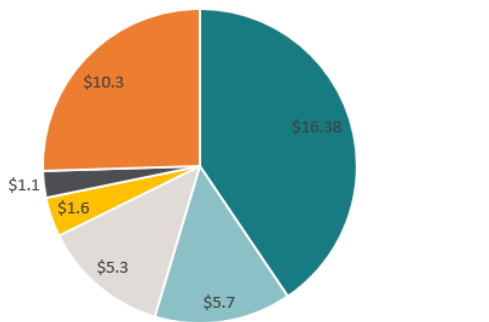


## Arkansas

### Key Facts of the State of Arkansas Budget

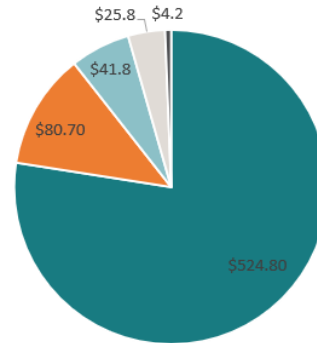
**Date of budget passage:** April 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

AR State Budget FY22 (\$40.5B)



■ Federal Revenue      ■ Budgeted General Revenue  
■ Cash Funds      ■ Special Revenue  
■ Special Revenue Fund Balance      ■ Other Funds

Health Care Budget FY22 (\$677M)



■ Federal Revenue      ■ Budgeted General Revenue  
■ Other Funds      ■ Special Revenue  
■ Other Fund Balance

### Sellers Dorsey Budget Insights

#### Budget composition

Arkansas' FY22 state budget appropriates \$40.5B in total dollars, with \$677M appropriated for the health care budget. This year's budget is \$160M higher (3%) than the previous year's general fund budget. The fully funded budget contains \$500M higher revenue than projected, which stakeholders believe will contribute to the state's Rainy Day Fund.<sup>xi</sup>

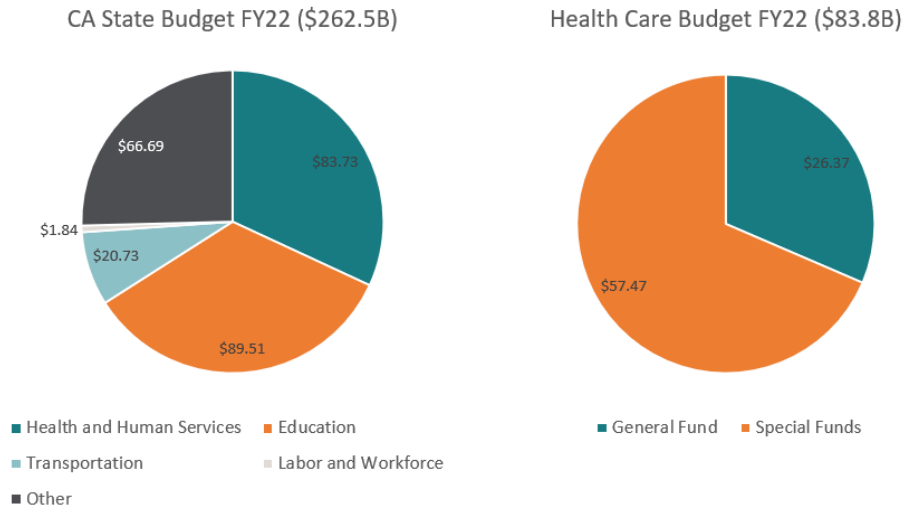
#### Medicaid spending and key program changes

- [SB55](#) includes spending authority for traditional Medicaid and Medicaid expansion. In September 2021, Arkansas Submitted an 1115 waiver to CMS to replace their current Medicaid expansion program with an expansion option that does not include work requirements.<sup>xii</sup>

## California

### Key Facts of the State of California Budget

**Date of budget enactment:** July 16, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition

This year's state budget of \$262.5B appropriates \$196.4B from the General Fund, \$61.2B from Special Funds, and \$439B from Bond Funds.<sup>xiii</sup> In FY21-22, California expects a \$75.7B surplus.<sup>xiv</sup>

#### Medicaid spending and key program changes

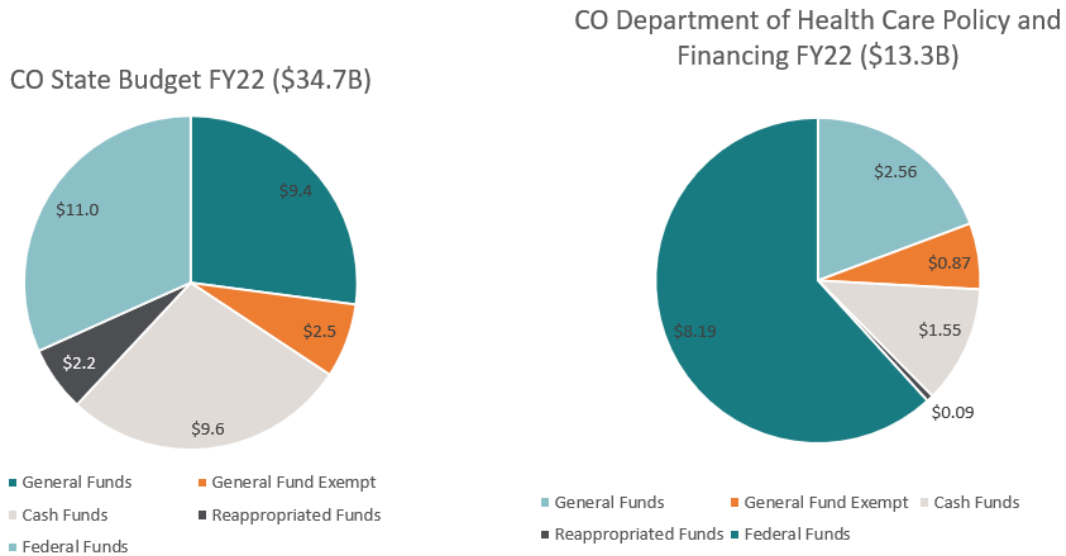
- Approves \$400M to support the Medi-Cal managed care plan incentive program and requires plans to enter a three-party partnership between the plan, the county mental health plan, and local school districts or county offices of education as a condition of receiving incentive funding.<sup>xv</sup>
- Ongoing funding growing to \$1.3B to expand Medi-Cal eligibility to all income eligible Californians aged 50 and older, regardless of immigration status.
- Invests \$4B to create a new and innovative behavioral health system for youth, including \$250M for the Mental Health Services Act to fund school and county mental health partnerships.
- Approves the Medi-Cal Estimate which proposes \$115.6B in total funds, including \$21.5B in General Fund, \$79B in federal funds, and \$15.1B in other non-federal funds. This includes \$828M from the Coronavirus Fiscal Recovery Fund of 2021.
- Invests \$115M of the Department of Public Health budget annually in community-based equity and racial justice efforts, and \$63.1M in one-time funding for the California Reducing Disparities Project.<sup>xvi</sup>
- Approves \$800M to support the addition of dyadic services, continuous glucose monitors, doula services, community health workers, pharmacist medication therapy management, and ongoing funding for medically tailored meals as a Medi-Cal benefit.<sup>xvii</sup>

- Adopts trailer bill to eliminate the Medi-Cal assets test, so that seniors, and individuals with disabilities, with assets of more than \$2,000, do not lose, or are not denied, Medi-Cal coverage, at an estimated cost of \$394M (\$197M General Fund) in 2022-23.<sup>xviii</sup>
- Full funding for the proposed California Advancing and Innovating Medi-Cal (CalAIM) initiative.
- Elimination of rate freezes for Intermediate Care Facilities and Pediatric Subacute facilities.
- Increases item 4260-101-0001 by \$45.3M, item 4260-101-0890 by \$45.3M, and approves trailer bill to extend Medi-Cal eligibility from 60 days to 12 months for most postpartum individuals.<sup>xix</sup>
- Approves \$1M General Fund one-time, \$30,000 ongoing, and provisional language to support field testing of translated Medi-Cal materials to ensure they are understood by the intended audience.<sup>xx</sup>

## Colorado

### Key Facts of the State of Colorado Budget

**Date of budget passage:** May 17, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxi xxii xxiii</sup>

Colorado's FY22 operating budget totals \$34.66B (\$9.39B in general revenue), \$3.8B (12%) more than the previous annual budget. Approximately \$13.3B (38%) of the state's budget is allocated to the state's Department of Health Care Policy and Financing, an increase of 10% from the previous annual budget. A surplus enabled lawmakers to provide 3% raises for state employees, carve out \$800M for a coronavirus stimulus package, and set aside \$1.5B for the state's reserve fund. Colorado will receive an additional \$3.8B in ARP funds.

#### Medicaid spending and key program changes<sup>xxiv xxv</sup>

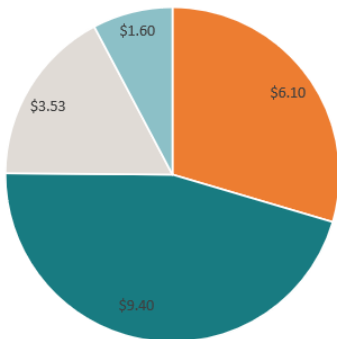
- \$10B (\$6.3B in federal funds) allocated to medical and long-term care services for Medicaid beneficiaries.
- \$20M for new 24/7 care slots for adults with developmental disabilities.
- \$180M for a 2.5% increase in reimbursement for all Medicaid providers, excluding FQHCs and nursing homes.
- \$6M for data sharing and analytics to address health disparities among Medicaid patients.
- \$910,000 for behavioral health services for children in crisis.
- \$5M for a health equity grant program through the Colorado Department of Public Health and Environment.

## Connecticut

### Key Facts of the State of Connecticut Budget

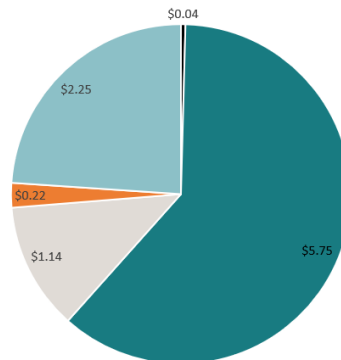
Date of budget passage: June 23, 2021  
State fiscal year: July 1, 2021 – June 30, 2023 (biennial budget cycle)

CT State Budget FY22-23 (\$46.4B)



■ Education ■ Health & Social Services ■ Transportation ■ Children & Families

CT Health Care Budget FY22-23 (\$9.4B)



■ HUSKY B ■ Medicaid ■ Hospital Supplemental Payments ■ DMHAS DSH ■ Other

### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxvi</sup>

Connecticut's state budget appropriates \$46.4B for two years starting July 1, 2021, including a \$2.3B surplus. The package includes spending \$22.7B for FY22, an increase of 2.6% over the current year. The budget relies on \$2.28B in federal relief funds from ARP over the next two years: \$1.27B in FY22 and \$1.01B in FY23. About \$400M of ARP funding has not been allocated. The budget does not use funds from the state's Rainy Day Fund. Priorities include health care, unemployment, and education.

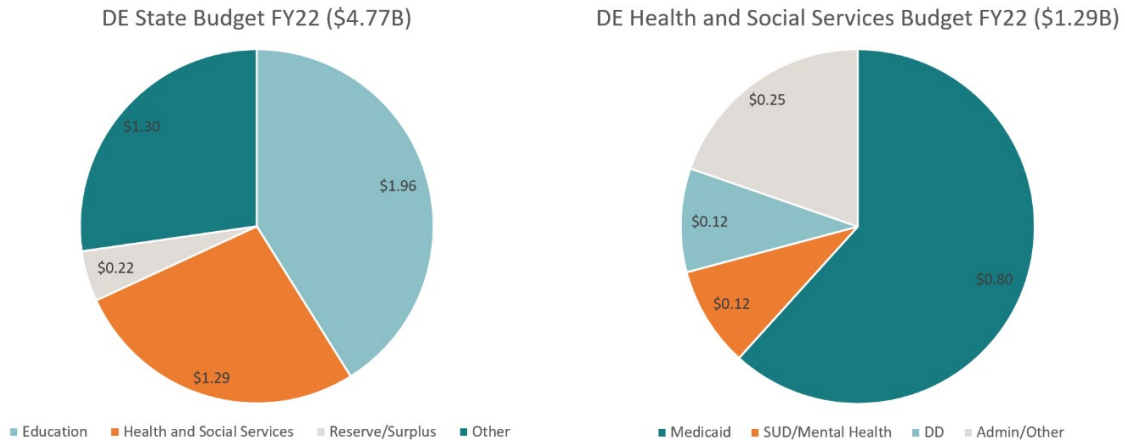
#### Medicaid spending and key program changes<sup>xxvii</sup>

- Connecticut allocated a total \$5.75B to its two-year Medicaid budget (\$2.75B in FY22 and \$2.99B in FY23)<sup>xxviii</sup>. This represents a 4.3% increase over the \$5.51B funding in the FY20-21 biennium (\$2.69B in FY20 and \$2.82B in FY21)<sup>xxix</sup>.
- Increases per capita funding for full-time municipal health departments from \$1.18 to \$1.93 and from \$1.85 to \$2.60 for district health departments.
- Provides for Medicaid coverage (HUSKY) for children eight and younger, starting January 1, 2023, regardless of citizenship.
- Requires the Department of Social Services to amend the state's Medicaid state plan by October 1, 2021, to include coverage for services provided by licensed acupuncturists and chiropractors.
- Increases eligibility for low-income residents to receive public subsidies to help buy health insurance on the state's exchange.
- Allocates \$5.3M to cover three months of parent fees in the Care4Kids program and \$3.5M to cover parent fees in state-funded childcare centers over the summer of 2021.
- Removes the Public option bill from further consideration.

## Delaware

### Key Facts of the State of Delaware Budget

**Date of budget passage:** June 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxx xxxi xxxii</sup>

Delaware's FY22 operating budget totals \$4.77B in general funds, \$246M (5.5%) more than the previous operating budget, and \$65M more than Governor Carney's recommended FY22 budget. Approximately \$797M (17%) of the total budget is allocated to the state's Medicaid program, an increase of 2.7% from the previous annual budget. A sizable budget surplus enabled the passage of two independent spending bills: a \$221M one-time expenditures measure granting cash bonuses to state employees and retirees and a \$1.3B capital improvements bill to fund broadband internet expansion, resource conservation, and other infrastructure projects. Lawmakers also allocated \$223M to a budget planning reserve fund, which is separate from the state's untapped \$252M rainy day fund.

#### Medicaid spending and key program changes<sup>xxxiii xxxiv</sup>

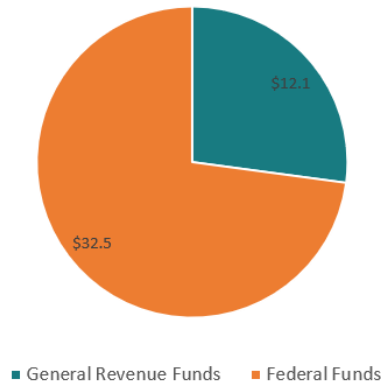
- \$17.2M to increase reimbursement rates from 68.2% to 85.2% of the benchmark of the 2019 rate rebase study for intellectual and developmental disabilities (I/DD) direct support professionals.
- \$261,000 to support increase in hourly rates of Private Duty Nursing services.
- \$16M for student mental health services, including the placement of a mental health professional in every public elementary school.

## Florida

### Key Facts of the State of Florida Budget

Date of budget passage: June 2, 2021  
State fiscal year: July 1, 2021 – June 30, 2022

FL Health Care Budget FY22 (\$44.6B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxxv</sup>

Florida's state budget totals \$101.5B, a 9.16% increase over the 2020-2021 budget of \$92.2B. It includes \$169M in tax relief, with \$1.5B in total spending vetoed including \$1.35B from federal funds received through ARP. \$44.6B is allocated to health care, a 13.6% increase from the previous year's \$39.4B budget, while funding the Agency for Health Care Administration, the state Medicaid agency, increased by 15% from \$30.8B to \$35.4B.

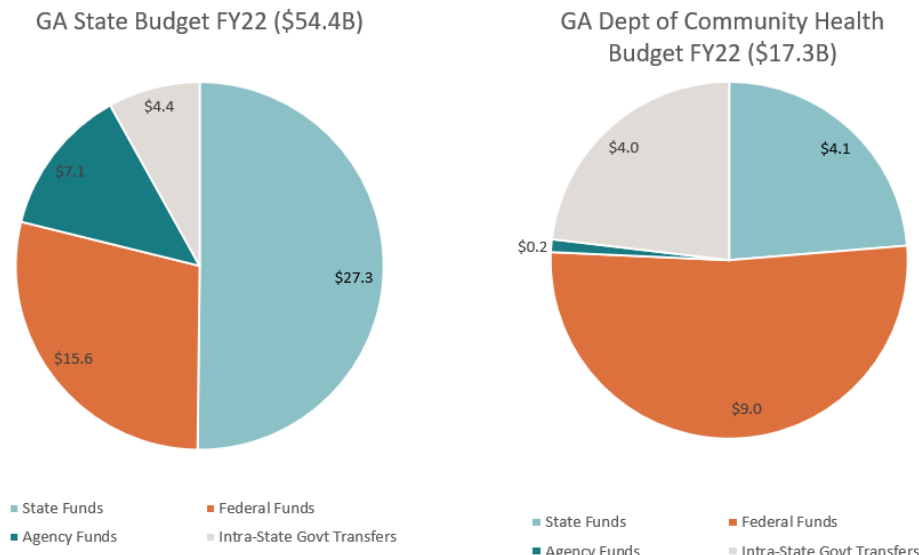
#### Medicaid spending and key program changes<sup>xxxvi</sup>

- Allocates \$239.7M to extend Medicaid coverage for pregnant women for 12 months, up from 60 days.
- Allocates \$137.6M in funding to provide community-based services for adults and children with behavioral health needs.
- Allocates \$134.7M to provide funding for services to children and families who receive services through Florida's child welfare system.
- Allocates \$18.3M to increase rate level for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID).
- Allocates approximately \$9M for a minority health equity planning initiative.
- Provides for Medicaid coverage for children in foster care.

## Georgia

### Key Facts of the State of Georgia Budget

**Date of budget passage:** May 10, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxxvii</sup>

Georgia's FY22 state budget appropriates \$27.3B in state funds and \$15.6B in federal funds. The \$54.4B in total public funds represents a 1.3% increase in total spending from the amended FY21 budget. Approximately \$17.3B, or 32%, of the appropriated funds are being allocated to Georgia Department of Community Health (DCH) which manages the state's Medicaid program. DCH had its budget increased by 4% from the previous year. The state is also receiving \$7.6B in State and Local Fiscal Aid from ARP, with \$4.9B going directly to the state government and \$2.7B going to local jurisdictions.

#### Medicaid spending and key program changes<sup>xxxviii</sup>

- \$6.7B for Medicaid – Aged, Blind, and Disabled
  - \$77M – Increase funds for a 10% rate increase for home and community-based services (HCBS) providers (to reflect the 10% increase in Federal Medical Assistance Percentage (FMAP) for HCBS providers from ARP).
  - \$36M – Increase funds to provide supplemental quality incentive payments to eligible skilled nursing facilities limited to appropriated amount.
  - \$1M – Increase funds for a 5.9% increase in nursing home ventilator reimbursement rate
  - \$92,000 – Increase funds for a 3% increase in dental reimbursement rates for 15 select dental codes.
- \$5.2B for Low-Income Medicaid
  - \$197M – Increase funds to begin implementation of the Patients First Act (2019 Session).



- \$21M – Increase funds to increase 18 select primary care and OB/GYN codes to 2020 Medicare levels.
  - \$256,000 – Increase funds for a 3% increase in dental reimbursement rates for 15 select dental codes.
- \$3.7B for State Health Benefit Plan.
- \$1.4B for Department of Behavioral Health and Developmental Disabilities.
  - \$13M – Increase funds to reflect the loss of the enhanced FMAP during the COVID-19 public health emergency.
  - \$12M – Increase funds for a 5% rate increase for intellectual and developmental disability providers with approval by the Centers for Medicare and Medicaid Services.
- \$505M for Indigent Care Trust Fund.
- \$456M for PeachCare (CHIP).

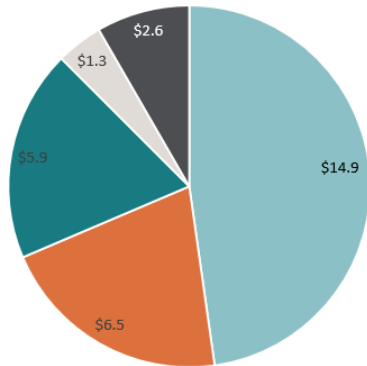
## Hawaii

### Key Facts of the State of Hawaii Budget

**Date of budget passage:** June 25, 2021

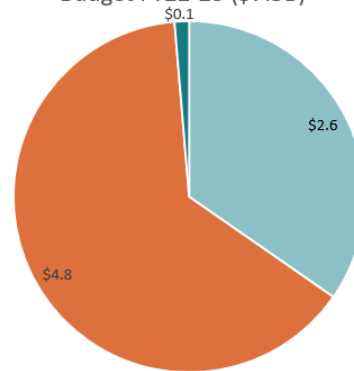
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)

HI State Budget FY22-23 (\$31.2B)



■ General Funds ■ Special Funds ■ Federal Funds  
■ ARP Funds ■ Other

HI Dept of Human Services  
Budget FY22-23 (\$7.5B)



■ General Funds ■ Federal Funds ■ Other

### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxxix</sup>

Hawaii's FY22-23 state budget appropriates \$14.9B in General Funds, \$6.5B in Special Funds, and \$5.9B in Federal Funds. The \$31.2B in total budget represents a 1% decrease in total spending from the FY20-21 budget. Approximately \$7.5B, or 24%, of the appropriated funds are being allocated to the Department of Human Services (DHS) which manages the state's Medicaid (Med-QUEST), SNAP, TANF, general assistance, and public housing. DHS had its budget increased by 3% from the previous biennium. The state is also receiving \$2.1B in State and Local Fiscal Aid from ARP, with \$1.6B going directly to the state government and \$472M going to local jurisdictions.

#### Medicaid spending and key program changes<sup>xl</sup>

- \$5.6B in Health Care Payments for Medicaid (\$3.6B in Federal Funds).
- \$131M from ARPA to support the statewide EMS program.
- \$97M in General Support for Health Care Payments.
- \$42M for Case Management for Self Sufficiency Services.
- \$8M for Aged, Blind, and Disabled Payments.

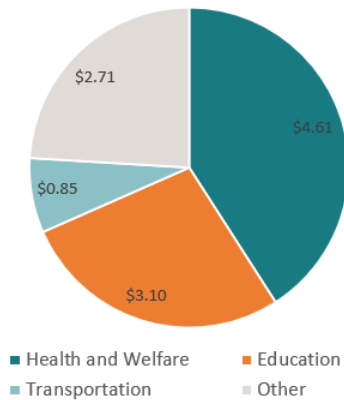
## Idaho

### Key Facts of the State of Idaho Budget

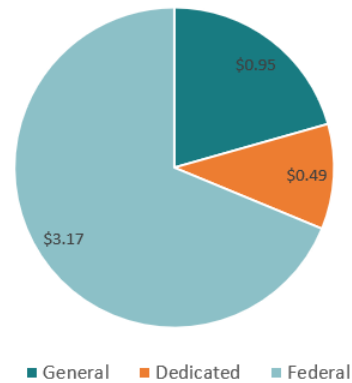
**Date of budget passage:** Idaho's FY22 budget is made up of numerous appropriation bills that were signed throughout Spring 2021.

**State fiscal year:** July 1, 2021 – June 30, 2022

ID State Budget FY22 (\$11.27B)



Health and Welfare Budget FY22 (\$4.61B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xli</sup>

Idaho's FY22 state budget appropriates \$11.27B in total dollars, with \$4.61B appropriated to the Health and Welfare department.

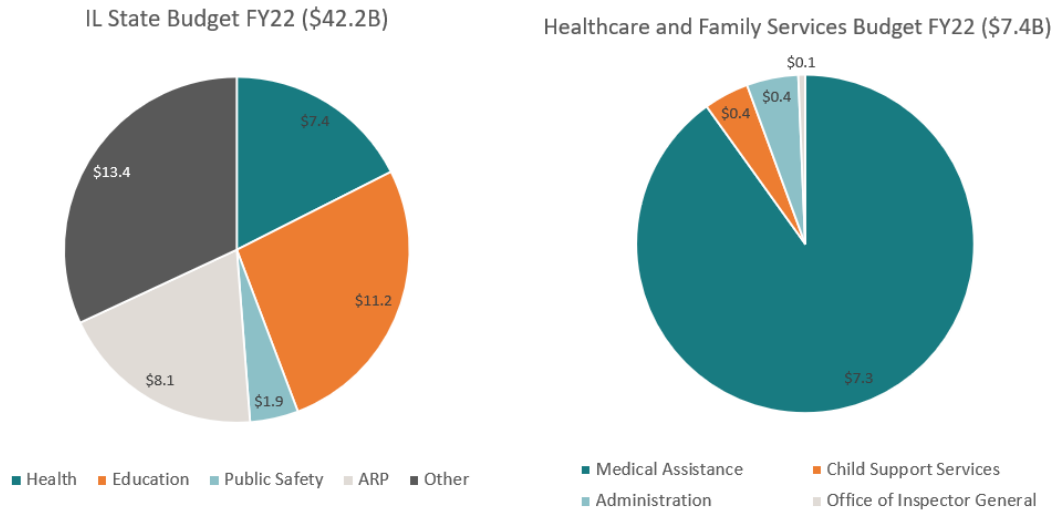
#### Medicaid spending and key program changes<sup>xlii xliii xliiv xlv</sup>

- [HB216](#) provided an additional net increase of more than \$369M, an 11.9% increase over FY21.
- [SB1185](#) provided additional federal funding to account for the 6.2% enhanced FMAP and reduced the General Fund by a related amount. These funds are added to account for the federal public health emergency and added as one-time. Enhancements for FY22 included:
  - Funding for provider auditing, program accountability, patient access to health data, and verification of provider services; appropriation adjustments to pay for Medicaid services in the state veteran's homes; and a reduction for funding that was added in 2019 for various Medicaid expansion waivers. However, these waivers have not been approved and appear unlikely to be approved soon.
- Continues to implement Medicaid expansion under Proposition 2. Given both the growing enrollment and Per Member Per Month (PMPM) costs, it is not possible to implement with a net-zero impact on the General Fund. There is a \$12.5M cost-share with the counties to capture the savings counties have realized from Medicaid Expansion.

# Illinois

## Key Facts of the State of Illinois Budget

Date of budget passage: June 17, 2021  
State fiscal year: July 1, 2021 – June 30, 2022



## Sellers Dorsey Budget Insights

### Budget composition<sup>xlvi</sup>

Illinois' state budget appropriates \$42.3B in General Revenue Fund spending for FY22. This spending amount is essentially flat based on last year's \$42B state spending plan (which was amended mid-year due to COVID). The budget funds significant investments in education, human services, certified pension contributions, increases revenues by closing corporate loopholes, and continues progress on debt repayments. Additionally, the budget allocates \$2.5B of the \$8.1B in ARP funds that the state received.

### Medicaid spending and key program changes

- Maintains all eligibility and benefit levels in the Medicaid program to ensure individuals retain their health coverage.
- Expands Medicaid-like coverage for noncitizens from 65+ to 55+ with income at or below 133% FPL (plus 5% for family size).
- Provides a 10% increase in reimbursement rates for supportive living facilities through March 31, 2022 (paid for by ARP funds).
- Automatically extends Medicaid eligibility to any resident determined to be eligible during COVID-19 for up to 12 months following the end of the public health emergency.
- Healthcare Provider Stability Payments can be used to provide services to communities disproportionately impacted by COVID, provide capital improvements such as HVAC and ventilation systems, reduce crowding, and go towards COVID treatment costs.
- Requires Department of Healthcare and Family Services (HFS) to establish:
  - A program to support long-term care industry workers with a minimum amount to frontline workers.

- A program for implementation of certified community behavioral health clinics by January 1, 2022.
- A comprehensive state behavioral health strategy by July 1, 2022.
- Increases dental rates for adults and children.
- Managed Care Payments may include additional funding for:
  - Infection prevention and facility improvement payments
  - Communication quality improvement payments
  - Staff longevity payments
  - Recruitment and Retention of direct care personnel
  - Bed retention payments

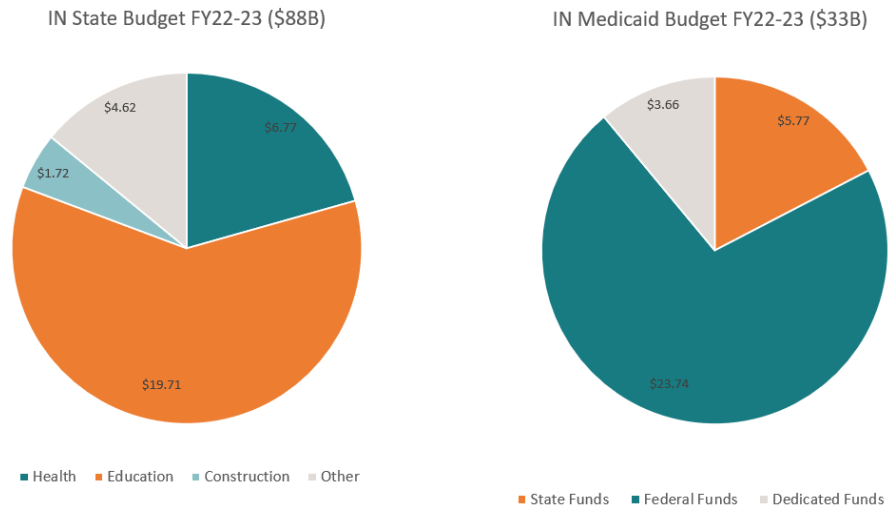
**Other notable Medicaid legislation or agency regulations**

- Recognizes veteran support specialists as mental health professionals under the state Medicaid plan.
- Coverage of individual and group tobacco cessation programs.
- Requires inpatient treatment for opioid overdose or withdrawal when determined medically necessary.
- Coverage of kidney transplant medications regardless of citizenship status.
- Subject to federal approval, expands Medicaid coverage to children 19 and younger with income at or below 313% of the FPL (from 133%). HFS given emergency rulemaking authority until January 1, 2027, to implement the expansion. If federal approval is received and kids are transitioned, this act also sunsets CHIP and IL ALL KIDS programs.
- HFS must prepare and submit a State Plan Amendment to CMS by December 31, 2022, to establish the Program of All-Inclusive Care for the Elderly (PACE).

## Indiana

### Key Facts of the State of Indiana Budget

Date of budget passage: April 22, 2021  
State fiscal year: July 1, 2021 – June 30, 2023 (biennial budget cycle)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xlvi</sup>

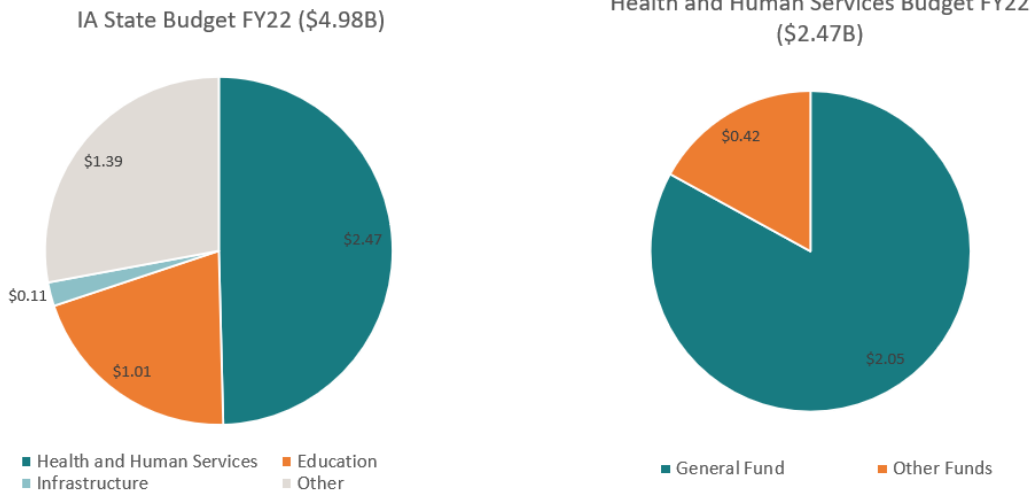
Indiana's FY22-23 state budget appropriates \$37.4B in state funds and \$37.6B in federal funds. The \$87.6B total budget represents a 12% increase in state spending from the previous biennium. Approximately \$33.2B, or 38%, of the total budget is being allocated to Medicaid which had its budget increased by 11% from the previous biennial budget. The state received nearly \$3B in ARP funds and spent nearly \$1B in this budget. The budget included stronger than anticipated local revenues and lawmakers took advantage of the opportunity to eliminate some long-term pension debts totaling \$600M. A notable revenue source change is an increase in taxes on vaping products.

#### Medicaid spending and key program changes<sup>xlvi</sup>

- Appropriates \$100M to restore and expand a previously eliminated mental health grant.
- \$20M increase (\$10M per year) to support home and community-based long term care services.
- Requires the Office of the Secretary of Family and Social Services to report on the progress in the development of a risk based managed care program for Medicaid recipients who are eligible to participate in the Medicare program and receive nursing facility services.

Key Facts of the State of Iowa Budget

**Date of budget passage:** May 18 – June 8, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



Sellers Dorsey Budget Insights

**Budget composition** <sup>xlix</sup> |

Iowa’s state FY22 budget appropriates \$4.98B in total dollars, with \$2.47B allocated to the Department of Human Services (DHS). Iowa finished FY21 with a budget surplus of \$1.24B, \$933M more than FY20’s surplus.

**Medicaid spending and key program changes**<sup>li</sup>

- An increase of \$44.2M to the Medicaid appropriation.
- Specifies that the provision transferring de-categorization funds to Medicaid that would have previously reverted to the General Fund is effective upon enactment and retroactive to July 1, 2020.
- Appropriates \$201.2M from the Health Care Trust Fund for the Medicaid Program, a decrease of \$7.3M from the FY21 estimate.
- Appropriates \$150,000 from the Medicaid Fraud fund to the Medicaid Program, an increase of \$75,000 from the FY21 estimate.
- Appropriates \$56.3M from the Quality Assurance Trust Fund to the Medicaid program, a decrease of \$2.3M from the FY21 estimate.
- Appropriates \$33.9M from the Hospital Health Care Access Trust Fund to the Medicaid Program keeping the funding level with FY21 estimates.
- An increase of \$359,000 for the State Children's Health Insurance Program appropriation.
- Specifies that DHS is to rebase nursing facility rates for FY24 and FY25 using the cost reports from December 31, 2022, and applying a minimum occupancy factor of 70.0%.

**Other notable Medicaid legislation or agency regulations<sup>lii</sup>**

- Allocates \$425,000 for the creation of a Center of Excellence Program. The Center of Excellence would fund a grant proposal to demonstrate regional collaboration in assessing targeted medical needs of residents.
- Requires DHS to convene a workgroup to review the case-mix reimbursement methodology and process for nursing facilities and submit recommendations to the Governor and the General Assembly by December 1, 2021.
- Extends the repeal of the Hospital Health Care Access Assessment Program to July 1, 2023.
- Requires DHS to review current law to determine necessary policy changes to provide various pediatric health care services via telehealth and submit a report of the findings and recommendations to the Governor and the General Assembly by October 1, 2021.
- Provisions expanding requirements for payment of court-ordered services by managed care organizations are effective upon enactment.

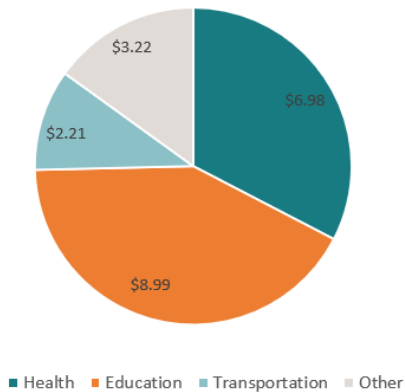


## Kansas

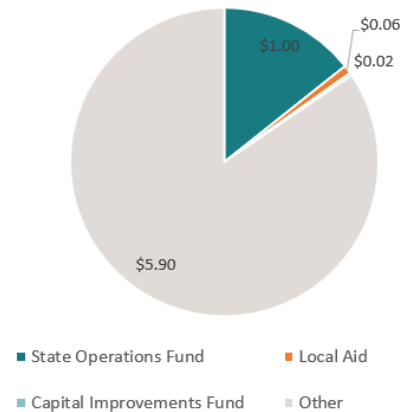
### Key Facts of the State of Kansas Budget

**Date of budget passage:** April 26, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

KS State Budget FY22 (\$21.4B)



Health and Human Services Budget FY22 (\$6.98B)



### Sellers Dorsey Budget Insights

#### Budget composition <sup>liii</sup> <sup>liv</sup>

This year's state budget appropriates \$21.4B in total dollars, with \$6.98B being allocated to the Health and Human Services department. Kansas was able to overcome the predicted \$653M budget shortfall and outperformed general revenue expectations by more than \$758M. Kansas begins FY22 with \$1.9B in reserves.

#### Medicaid spending and key program changes <sup>lv</sup> <sup>lvi</sup> <sup>lvii</sup>

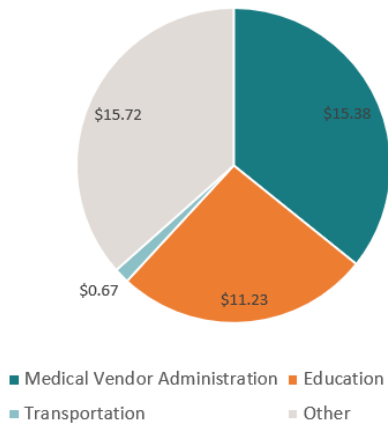
- Adds \$31M to continue the 5% increase in the provider reimbursement rates for the HCBS I/DD waiver for FY21 and provides an additional 2% increase for FY22.
- Adds \$20.5M to provide a 3% increase in the Medicaid reimbursement rate for nursing facilities.
- Adds \$10.5M for the HCBS Technology Assisted waiver and directs the funding to be used to increase the provider reimbursement rates for the Specialized Medical Care (T1000) services code from the current rate of \$31.55 per hour to \$39.00 per hour for in-home Medicaid Care Registered Nurse/Licensed Practical Nurse nursing services for this waiver.
- Adds \$3M for Senior Care Act services.
- Adds \$2M for additional funding for Community Mental Health Center grants.
- Adds \$1M, all from the state general fund, for a psychiatric residential treatment facilities pilot program at Ember Hope in Newton, Kansas.

## Louisiana

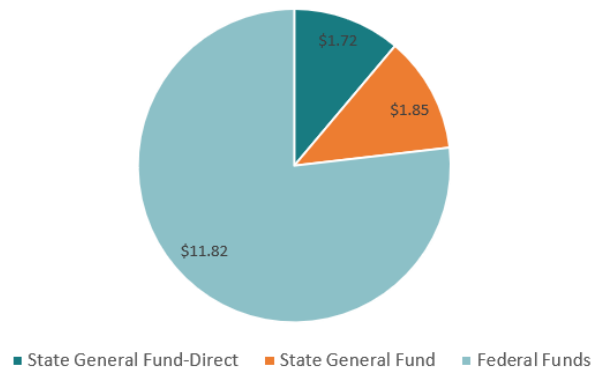
### Key Facts of the State of Louisiana Budget

**Date of budget passage:** June 7, 2021  
**State fiscal year:** July 1, 2021- June 30, 2022

LA State Budget FY22 (\$43B)



Medical Vendor Administration Budget (\$15.38B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>lviii lix</sup>

This year's state budget appropriates \$43B for FY22 including \$15.38B for the Medical Vendor Administration. Louisiana generated over \$2B in unexpected funding from tax revenue. The budget prioritizes increased funding for education, continued recovery from the pandemic, and new investments in infrastructure.

#### Medicaid spending and key program changes<sup>lx lxi</sup>

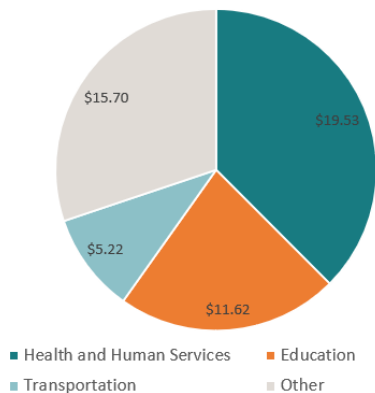
- \$52M for rate increases to providers of individuals with developmental disabilities enrolled in Medicaid.
- \$21.2M for mental health and substance abuse prevention and treatment in the Office of Behavioral Health.
- Reduces (by \$23.8M) funding for the Payments to Private Providers Program.
- The state is receiving \$924.5M from ARP.

## Maryland

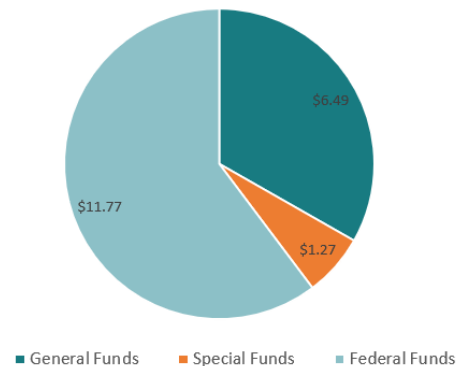
### Key Facts of the State of Maryland Budget

**Date of budget passage:** May 18, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

MD State Budget FY22 (\$52.07B)



Health and Human Services Budget FY22 (\$19.53B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>lxii lxiii lxiv lxv lxvi</sup>

Maryland's FY22 state budget appropriates \$52.07B in total dollars, with \$19.53B appropriated to the Health and Human Services departments. Maryland received \$3.7B in ARP funds, \$1.1B of which have been spent on the state's unemployment trust fund, and the remainder of which are distributed in the FY22 budget. The FY22 budget, 12% larger than last year's budget, was passed with a \$2.5B surplus largely supported by federal pandemic stimulus funding.

#### Medicaid spending and key program changes<sup>lxvii lxviii</sup>

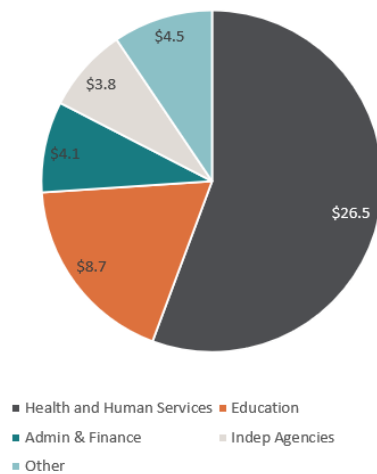
- \$13.5B in Medicaid spending, an increase of \$673M from FY21
  - Supports 4% rate increases to most providers and Medicaid enrollment growth of over 151,000 individuals since March 2020
- A permanent 4% rate increase and a temporary (FY22 only) 2% rate increase to nursing facilities
- \$3.5M increase in behavioral health spending
- \$572M in federal funding for COVID-19 testing, vaccines, and contact tracing
- \$44M in state and federal funding for the Maryland Health Benefit Exchange
- \$25M in spending for the Office of Health Care Quality
- \$274M in funding for Infectious Disease and Environmental Health Services

## Massachusetts

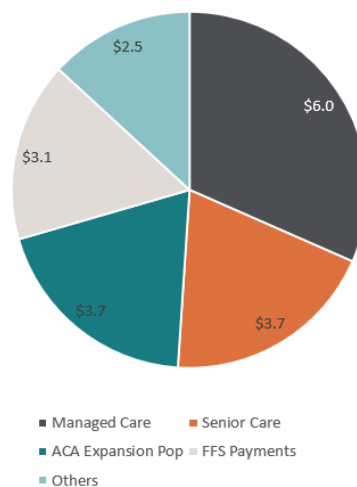
### Key Facts of the Commonwealth of Massachusetts Budget

**Date of budget passage:** July 16, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

MA State Budget FY22 (\$47.6B)



MassHealth Budget FY22 (\$19B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>lxix</sup>

Massachusetts' FY22 state budget appropriates \$47.6B in state and federal funds, representing a 3% increase in state spending from FY21. Approximately \$19B, or 40%, of the total budget is being allocated to MassHealth (Medicaid) which had its budget increased by 5% from the previous annum. The state is also receiving \$8.3B in State and Local Fiscal Aid from ARP with \$5.3B going directly to the state government and \$3B going to local jurisdictions.

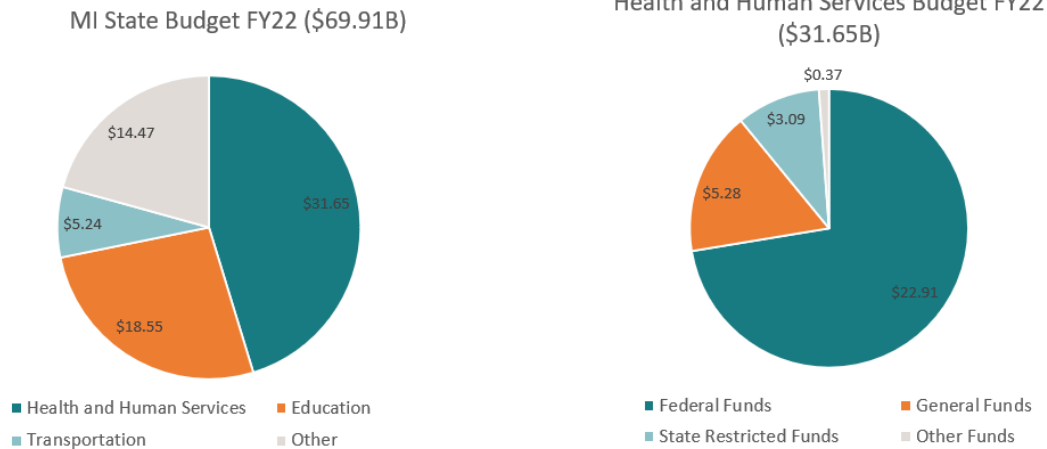
#### Medicaid spending and key program changes<sup>lxx</sup>

- \$26.5B for the Executive Office of Health and Human Services (EOHHS).
  - \$19B funding for MassHealth – Maintains existing benefits while addressing the expected changes resulting from the abatement of the COVID-19 public health emergency.
  - \$2.3B for the Department of Developmental Disabilities.
  - \$952M for the Department of Mental Health.
  - \$628M for the Executive Office of Elder Affairs – Increase of \$16M above the FY21 budget for the Community Choices Program.
  - \$395M for Nursing Home Supplemental Rates and \$314M for Acquired Brain Injury and Moving Forward Waivers.
  - \$84M to improve the access and availability of the front door and ambulatory behavioral health services to address current access challenges to treatment.
  - \$79M for Chapter 257 human service provider funding under the new rate methodology that better reflects the cost of benchmarking direct care and clinical staff wages.

## Michigan

### Key Facts of the State of Michigan Budget

**Date of budget passage:** September 29, 2021  
**State fiscal year:** October 1, 2021 – September 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>lxxi</sup>

Michigan's FY22 state budget appropriates \$69.91B in total dollars, with \$31.65B appropriated to the Health and Human Services departments. Michigan has a budget surplus of about \$1.8B, and the FY22 budget increased by about \$10B over FY21.

#### Medicaid spending and key program changes<sup>lxxii lxxiii lxxiv</sup>

- \$896M increase in Medicaid spending to accommodate for the rising caseloads due to COVID-19.
- \$994M for Healthy Michigan.
- Included increases for managed care entities that provide Medicaid services to reflect the Federal requirement that capitation rates be paid actuarially sound.
- Increase in food assistance benefits of 15% through June 30, 2021.

#### Other notable Medicaid legislation or agency regulations<sup>lxxv</sup>

- Healthy Moms Healthy Babies will receive \$12.6M to provide support to expecting mothers.
- \$2.35/hour raise for direct care workers who have been on the frontlines of the pandemic permanent.
- \$19.1M to expand the MiChoice program to provide an extra 1,000 slots for alternate methods of nursing home care.
- \$8.4M to combat health disparities by expanding community-based navigator services and data collection and sharing to improve health outcomes.
- \$7.4M to expand the Infant Home Visiting program for at-risk families with infants born with substance exposure.
- \$6.7M to cover the cost of treatment for over 400 adults with sickle cell disease, which disproportionately affects African-American people.

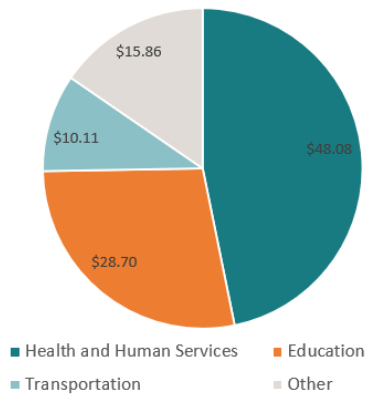
## Minnesota

### Key Facts of the State of Minnesota Budget

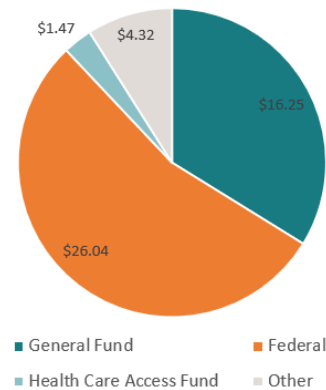
**Date of budget passage:** June 30, 2021

**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)

MN State Budget FY22-FY23 (\$102.75B)



Health and Human Services Budget FY22-FY23 (\$48.08B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>lxvii</sup>

Minnesota's appropriates \$102.75B in total dollars, with \$57.36B from the General Fund, \$39.22B from Federal Grants, \$2.37B from Departmental Earnings, \$374M from Investment Income, and \$3.43B from other funds. \$48.08B was appropriated for the Department of Health and Human Services. The state budget focuses on investments in education, COVID-19 relief, economic development, affordable childcare, and essential workers.

#### Medicaid spending and key program changes<sup>lxviii</sup>

- \$2M for the Board of Behavioral Health and Therapy
- \$1M for Executives for Long Term Services and Supports
- \$5M for Ombudsman for Mental Health and Development
- \$12M for Emergency Medical Services Regulatory Board

#### Other notable Medicaid legislation or agency regulations<sup>lxviii</sup>

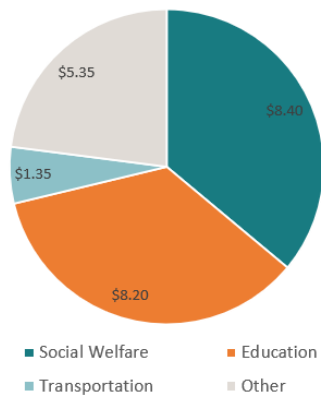
- \$250M in direct financial support to Minnesota's essential workers on the frontlines of the COVID-19 pandemic.
- \$6M for technical assistance to help providers reopen or start up, as well as business training to help providers retool after the pandemic.
- Includes a one-time Minnesota Family Investment Program (MFIP) payment of up to \$435 to support about 32,000 families, including 64,000 children. Includes a permanent MFIP cost of living adjustment, ensuring families' benefits will continue to support them even as costs rise.
- \$1.65M to support a state-wide initiative for Veteran Suicide Prevention and \$6.3M to support Veteran homelessness efforts.

## Mississippi

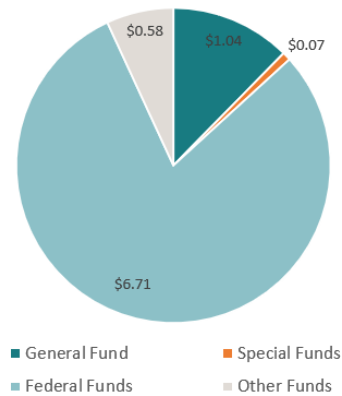
### Key Facts of the State of Mississippi Budget

**Date of budget passage:** April 28, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

MS State Budget FY22 (\$23.3B)



Social Welfare Budget FY22 (\$8.4B)



### Sellers Dorsey Budget Insights

#### Budget composition <sup>lxxxix lxxx</sup>

The Mississippi state FY22 budget appropriates \$23.3B in total dollars, with \$5.8B from General Funds, \$881M from State Support Special Funds, \$11.02B from Federal Funds, and \$5.6B from other funds. For FY22, \$8.4B was allocated to the Department of Social Welfare. The FY22 budget is 4.18% larger than FY21 and is focused on education, bonuses and pay increases for teachers, increasing workforce development, and increasing investments in rural health care.

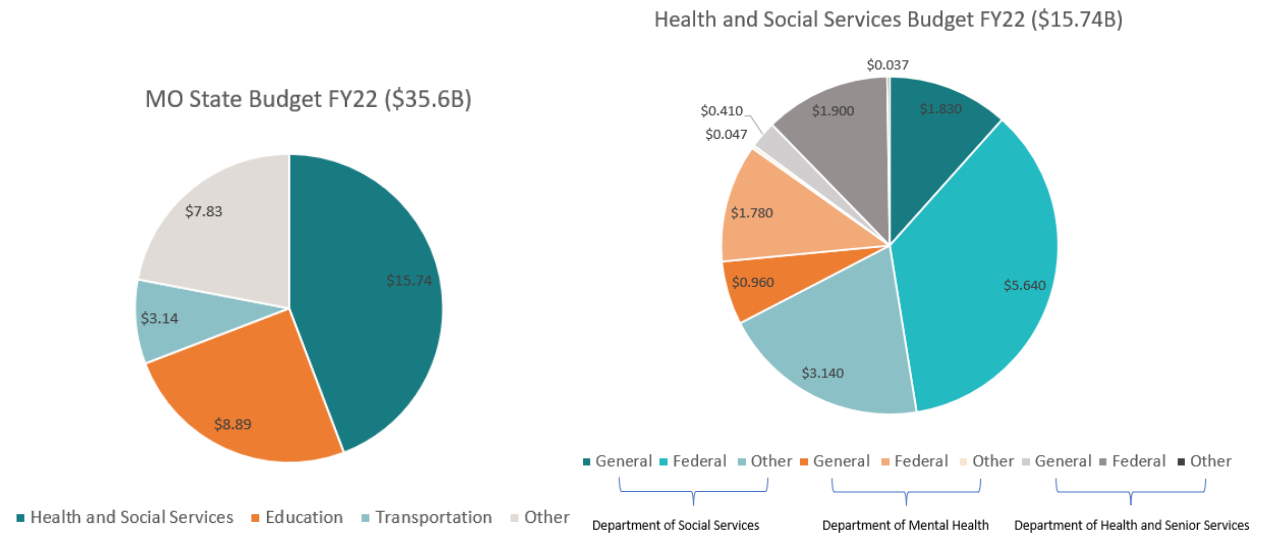
#### Medicaid spending and key program changes <sup>lxxxix lxxxii lxxxiii</sup>

- More than 9% increase in the Social Welfare budget from the General Fund over the previous year.
- Provided \$899M in State Support to match federal Medicaid funds for FY22.
- Appropriated \$233M in State Support to the Department of Mental Health to maintain HCBS mental health services.
- Additional \$1M to expand the ID/DD waiver.
- An increase of \$32.12M in Special Fund spending authority was provided for the continued increase in federal funds due to the enhanced FMAP rate. The Families First Coronavirus Response Act (P.L. 116-127), signed into law on March 18, 2020, provides states with a temporary 6.2% increase in the regular federal reimbursement rate and is anticipated this will be in effect during SFY22.
- Rejected the expansion of Medicaid.
- State Department of Health was authorized to pay employees for compensatory time earned while responding to the COVID-19 pandemic.

# Missouri

## Key Facts of the State of Missouri Budget

**Date of budget passage:** June 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



## Sellers Dorsey Budget Insights

### Budget composition <sup>lxxxiv lxxxv</sup>

This year’s state budget appropriates \$35.6B for FY22, including \$15.74B for health and social services. Missouri’s Medicaid program sits under the Department of Social Services, which has allocated at least \$582.6M towards Medicaid initiatives this fiscal year; the Department of Mental Health and Department of Health and Senior Services also help fund the Medicaid program. This balanced budget includes a general revenue surplus of \$972M, in addition to the \$1.1B surplus Governor Parson projected at the beginning of the year. Governor Parson vetoed more than \$115M from the FY22 budget. While the state budget passed without including Medicaid expansion, a recent court decision requires the state to expand Medicaid. <sup>lxxxvi</sup>

### Medicaid spending and key program changes <sup>lxxxvii lxxxviii</sup>

- \$337M for the additional costs of existing MO HealthNet programs.
- \$88.3M for a one-time nursing home rate increase.
- \$38.9M for increases in the pharmacy program due to new drugs, therapies, utilization, and inflation.
- \$31.3M for technology enhancements to the Medicaid Enterprise.
  - \$11M to modernize the MO HealthNet pharmacy claims and rebates system.
  - \$7M for a quality data reporting tool to assess MCOs.
  - \$5.72M to facilitate the electronic exchange of MO HealthNet information to participants and between Missouri’s health information network.
  - \$3.13M to operate the newly developed Medicaid Enterprise Data Warehouse, one component of the Medicaid Management Information System (MMIS) core replacement.
  - \$1.68M for contracts associated with security risk assessments of MMIS.

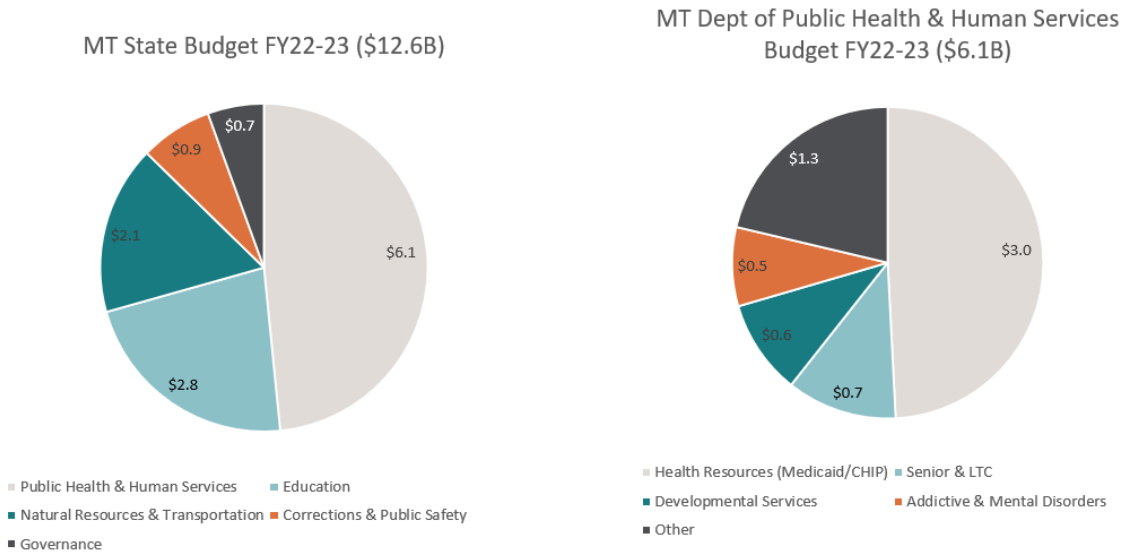


- \$1.47M for annual contract increases associated with the operation of MMIS.
  - \$1.3M to modernize MO HealthNet premium collections.
- \$6.71M for existing MO HealthNet programs due to increased caseloads because of the increased asset limit pursuant to HB 1565 (2016).
- \$2M for community health workers at FQHCs.
- \$166M to increase development disability (DD) provider rates for residential waiver services.
- \$42.83M for increased MO HealthNet HCBS program costs.
- \$23.7M for a rate increase for HCBS provider rate adjustments.

## Montana

### Key Facts of the State of Montana Budget

**Date of budget passage:** May 20, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>lxxxix</sup>

Montana's FY22-23 state budget appropriates \$4.5B in General Funds and \$6.2B in Federal Funds. The \$12.6B in total budget represents a 22% increase in total spending from the FY20-21 budget. Approximately \$6.1B, or 48%, of the appropriated funds are being allocated to the Department of Public Health and Human Services (DPHHS) which manages the state's Medicaid (Montana Medicaid) and CHIP (Health Montana Kids (HMK) Plus) programs. DPHHS had its overall budget increased by 42% from the previous biennium. The state is also receiving \$1.2B in State and Local Fiscal Aid from ARP, with \$906M going directly to the state government and \$258M going to local jurisdictions.

#### Medicaid spending and key program changes<sup>xc</sup>

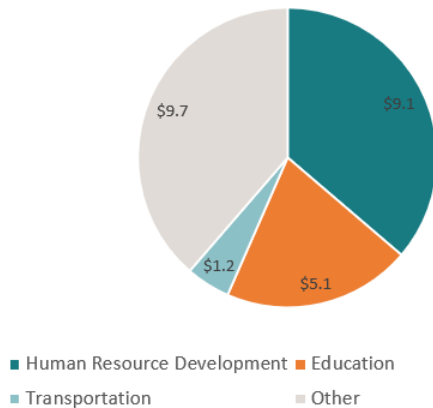
- DPHHS will decrease general funding and state special funding for any Medicaid and/or CHIP-related spending and will compensate that reduction with the increased FMAP authorized by the Families First Coronavirus Response Act. The combined decrease of general fund and state special authority must equal the amount of the increased federal funding provided for by the 6.2% increase in FMAP. DPHHS will create a one-time contingency fund from the general and special fund appropriations equal to the amount of the reduction. The fund can be used by DPHHS for any use consistent with the goals and objectives of the agency in the biennium.
- DPHHS will seek federal permission to eliminate the 12-month continuous eligibility provision for the Medicaid expansion population at the direction of the Legislature.
  - *Note:* The continuous eligibility provision is a requirement to receive the enhanced FMAP if the public health emergency is in place.

## Nebraska

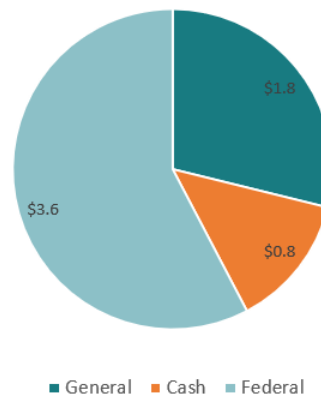
### Key Facts of the State of Nebraska Budget<sup>xc1</sup>

**Date of budget passage:** April 26, 2021  
**State fiscal year:** July 1, 2021- June 30, 2022 (biennial budget cycle)

NE State Budget FY22-23 (\$25.1B)



NE Medicaid Budget FY22-FY23 (\$4.5B)



### Sellers Dorsey Budget Insights

#### Budget composition

This biennial state budget appropriates \$9.7B in state dollars over the next two fiscal years (\$24.9B in total dollars) in capital and operational expenditures. The FY22 budget is \$710M higher (6%) than the previous year. Nebraska allocated a total state and federal \$1.85B toward Medicaid spending this biennium. The FY22 budget includes a \$899M all funds appropriation, which is a 2.18% increase over the previous budget. Early into the fiscal year, the state faces a \$101.6M shortfall due to a newly passed property tax credit triggered by a surplus of state revenues (19.2% higher than previously projected).<sup>xcii</sup>

#### Medicaid spending and key program changes

- Includes a 2% across the board rate increase for inpatient and outpatient services over the next two years.<sup>xciii</sup>

#### Other notable Medicaid legislation or agency regulations<sup>xciv</sup>

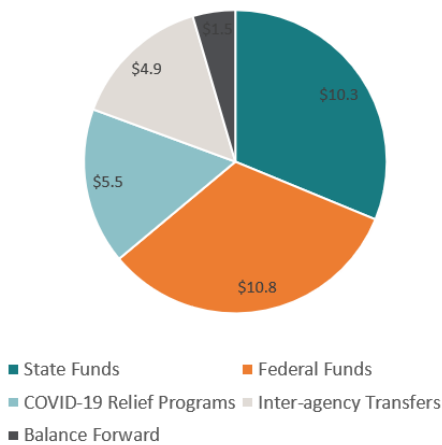
- Nebraska submitted notice to terminate its 1115 waiver due to a lack of approval for its Demonstration Year 2 Community Engagement Activities. The state did not transfer any members to the waiver and therefore does not require any transition and phase-out activities.
- Nebraska will combine its two Alternative Benefit Plan (ABP) groups into the current Nebraska Prime ABP as of October 1, 2021.

## Nevada

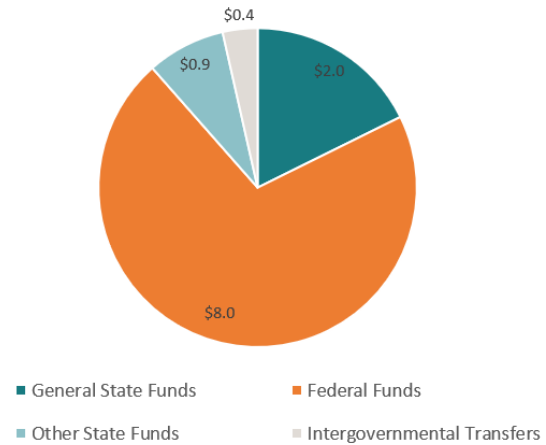
### Key Facts of the State of Nevada Budget

Date of budget passage: June 4, 2021  
State fiscal year: July 1, 2021 – June 30, 2023 (biennial budget cycle)

NV State Revenue FY22-23 (\$33B)



NV Medicaid Budget FY22-23 (\$11.3B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xcv</sup>

Nevada's FY22-23 state budget appropriates \$10.3B in state funds and \$10.8B in federal funds. The \$33B total budget represents a 28% increase in state spending from the previous biennium, although that increase is primarily driven by the \$5.5B in COVID-19 Federal Stimulus Funds. Approximately \$11.3B, or 34%, of the total budget is being allocated to Medicaid which had its budget increased by 36% from the previous biennial budget.

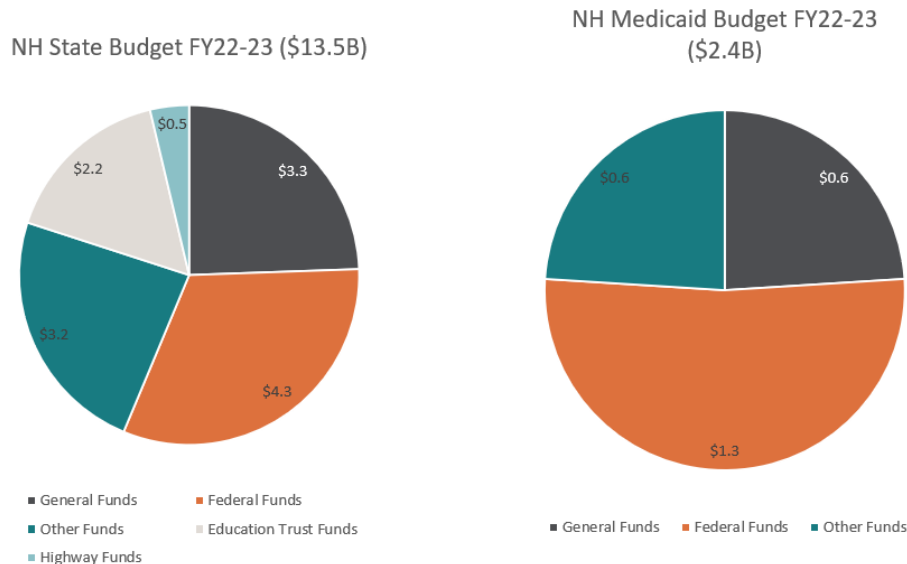
#### Medicaid spending and key program changes<sup>xcvi</sup>

- \$5.47B for Medicaid program
- \$2.83B for COVID-19 Relief Programs
- \$337M for Prescription Drug Rebate
- \$57M for home and community-based services
- \$56M for NV Check-Up Program

## New Hampshire

### Key Facts of the State of New Hampshire Budget

**Date of budget passage:** June 25, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xcvii</sup>

New Hampshire's FY22-23 state budget appropriates \$3.3B in state funds and \$4.3B in federal funds. The \$13.5B total budget represents a 2% increase in state spending from the previous biennium. Approximately \$2.4B, or 18%, of the total budget is being allocated to Medicaid which had its budget increased by 7% from the previous biennium. The state is also receiving \$1.3B in State and Local Fiscal Aid from ARP with \$995M going directly to the state government and \$350M going to local jurisdictions.

#### Medicaid spending and key program changes<sup>xcviii</sup>

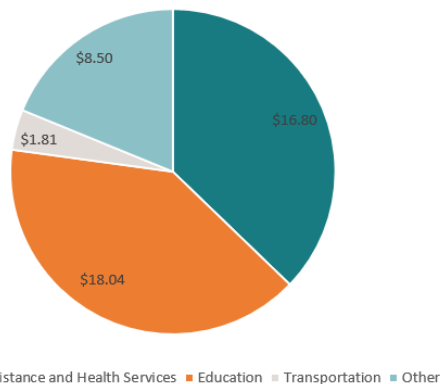
- \$5.9B for Department of Health and Human Services – \$2.4B for Division of Medicaid Services, \$1B for Elderly and Adult Service, \$785M for Developmental Services.
  - \$1.6B for Medicaid Care Management, \$935M for HCBS and Nursing Facilities services, \$476M for the Uncompensated Care Fund, \$199M for CHIP.
  - Adult medical daycare facilities daily rate increase from \$54 to \$74. 15% increase in Medicaid reimbursement for personal care services and a 5% rate increase to SNFs and ICFs/IDD.
- \$30M to build 24-bed forensic psychiatric hospital, \$8.2M for community mental health care and stabilization, and \$6M for new transitional housing beds.

## New Jersey

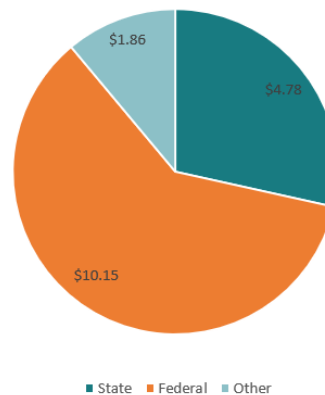
### Key Facts of the State of New Jersey Budget

Date of budget passage: June 30, 2021  
State fiscal year: July 1, 2021 – June 30, 2022

NJ State Budget FY22 (\$46.4B)



Medical Assistance and Health Services FY22 (\$16.8B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xcix</sup>

New Jersey's state budget appropriates \$46.4B for FY22. The budget includes nearly \$35B in federal grants and pass-through funds. Total state revenues and state GRF spending for FY22 is \$27.5B, a 5% increase over the current year. New Jersey allocates \$4.7B for NJ FamilyCare, the state Medicaid program. Additional COVID-19 relief funding totals more than \$6B. Unexpected windfall projects a \$10B surplus.

#### Medicaid spending and key program changes<sup>c</sup>

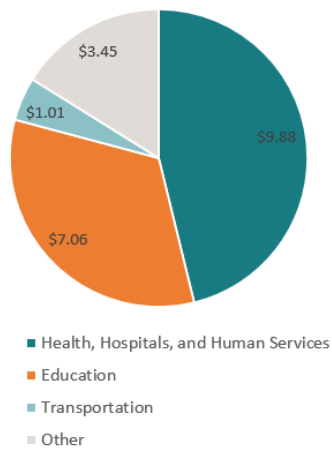
- Includes \$67.2M in state funds to fuel a 10% Medicaid rate increase for nursing facilities with the caveat that ownership groups spend at least 60% of the increase on direct care wages.
- Increase in the minimum Medicaid rate for adult medical day care by \$4.10 and increase in Medicaid rate for personal care services by \$2 (from \$20 to \$22).
- Increase in LTSS funding of \$10 per day for every Medicaid beneficiary.
- Increase Medicaid per diem rates for assisted living services to \$87 for facilities, \$77 for comprehensive personal care homes and \$67 for programs that deliver similar services to those living at home.
- \$20M to create "Cover All Kids," a two-year Medicaid initiative that expands eligibility to over 900,000 uninsured children, including those that are undocumented, in the state.
- \$8.5M to expand Medicaid coverage for 365 days postpartum.

## New Mexico

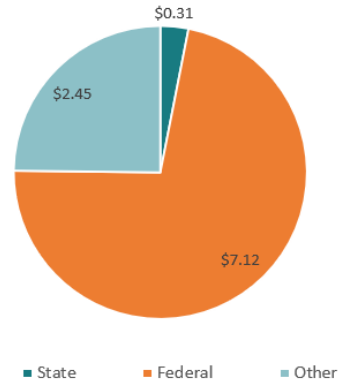
### Key Facts of the State of New Mexico Budget

**Date of budget passage:** April 9, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

NM State Budget FY22 (\$21.4B)



Medicaid Budget FY22 (\$6.1B)



### Sellers Dorsey Budget Insights

#### Budget composition <sup>ci</sup> <sup>cii</sup>

This year's state budget appropriates \$7.4B in state dollars and \$21.4B in total dollars, with \$6.1B allocated for the Medicaid budget. Spending for FY22 will increase 5% over the amended FY21 budget.

#### Medicaid spending and key program changes <sup>ciii</sup>

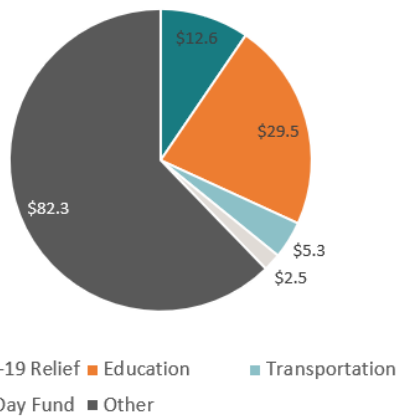
- \$30.7M increase to the Human Services Department to expand mental health and substance use disorder services.
- Provides \$678.5M for the necessary resources and information for low-income individuals to obtain free or low-cost behavioral health care.
- \$5M to continue the implementation of a comprehensive care system for the developmental disabilities supports division with the Medicaid information management system.
- Vetoed \$50M to the medical assistance fund for Medicaid in FY22.

## New York

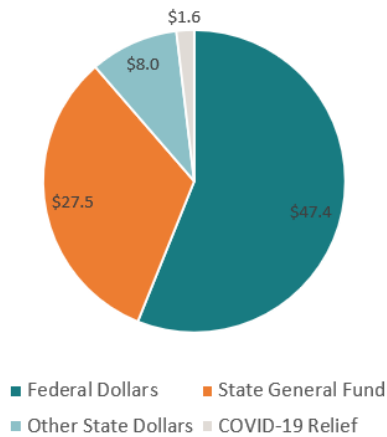
### Key Facts of the State of New York Budget

Date of budget passage: April 7, 2021  
State fiscal year: April 1, 2021 – March 31, 2022

NY State Budget FY22 (\$212B)



Medicaid Budget FY22 (\$86.8B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>civ</sup>

This year's state budget appropriates \$111B in state dollars (\$212B in total dollars), \$21.6.6M higher (6%) than the previous year. The budget includes a balanced cash flow for FY22 and FY23 with a proposed minor structural deficit in FY24 and FY25 (\$1.4B and \$2B, respectively).

#### Medicaid spending and key program changes<sup>civ</sup>

- Restores \$415M in proposed provider cuts. Note the \$415M in cuts were never actually implemented.
- Delays pharmacy fee-for-service reversion for two years.
- Expands coverage for post-partum individuals from 60 days to one year.
- Implements spending requirements for nursing facilities, beginning January 1, 2022.
- State deferred \$1.7B in spending to remain within its Global Cap.

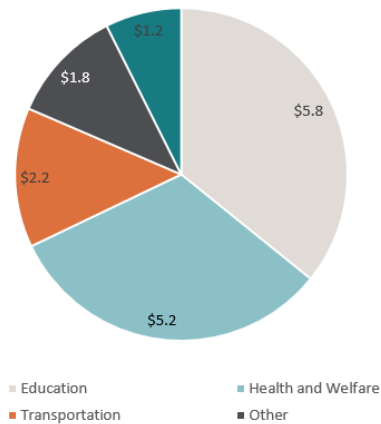


## North Dakota

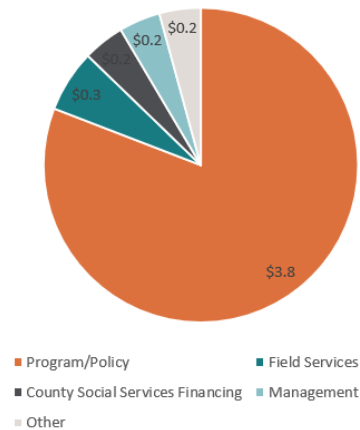
### Key Facts of the State of North Dakota Budget

**Date of budget passage:** May 21, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)

ND State Budget FY22-23 (\$16.9B)



Department of Human Services Budget FY22-23 (\$4.7B)



### Sellers Dorsey Budget Insights

#### Budget Composition<sup>cv</sup>

North Dakota's FY22-23 state budget appropriates over \$16.9B in total funds: \$5B in General Funds, \$5.9B in Federal Funds, and \$6.1B in Special Funds. Approximately \$4.7B of the appropriated funds are being allocated to the Department of Human Services (DHS). The \$16.9B budget represents a 15% increase in total spending from the FY21 budget. DHS had its overall budget increased by 16% from the previous biennium. The state is also receiving \$1.2B in State and Local Fiscal Aid from ARP, with \$1B going directly to the state government and \$189M going to local jurisdictions.

#### Medicaid spending and key program changes<sup>cvii</sup>

- \$716M for developmental disabilities representing an increase of \$57M from FY20-21.
- \$624M for nursing facilities, an increase of \$61M from FY20-21.
- \$303M for hospitals, an increase of \$8M from FY20-21.
- \$109M for physicians, an increase of \$8M from FY20-21.
- \$50M for prescription drugs, an increase of \$6M from FY20-21.
- Requires DHS' Medicaid and Medicaid Expansion programs to cover costs related to a continuous glucose monitoring device for individuals with diabetes.
- Decreases the percentage of federal funding received more than the state's regular share of federal medical assistance funding that results from tribal health care coordination agreements deposited in the general fund and increases the percentage deposited in the tribal health care coordination fund and adjusts the funding for care coordination from the tribal health care coordination fund.
- Allows providers of four-year-old early childhood education programs to apply for funding from a newly created best in class four-year-old experiences grant program and provides legislative

intent that the Department of Commerce's early childhood education grant program grant duties, functions, and appropriation be transferred to DHS.

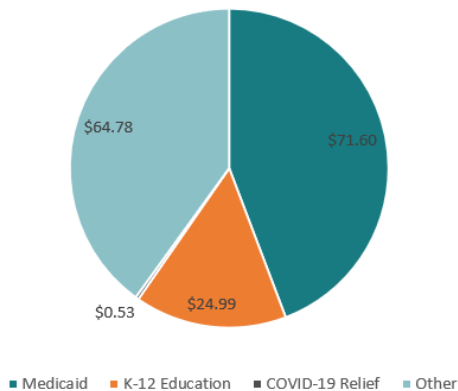
- Provides resources relating to mental health awareness and suicide prevention.
- Requires DHS to implement a new payment methodology for nursing facility payments and establish a rate setting system for nursing homes that includes a fair rental value payment mechanism for the use of real and personal property.
- Provides \$2M in one-time funding from lawsuit settlement proceeds received by the Attorney General and transferred to DHS to defray the expenses of an opioid addiction prevention and treatment program during the FY21-23 biennium.
- Removes more than \$1.9M from the General Fund to discontinue the contract with DHS to provide behavioral health services for women sentenced to the Department of Corrections and Rehabilitation.

## Ohio

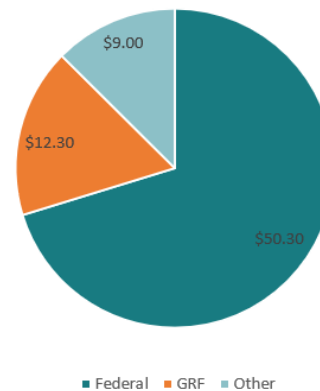
### Key Facts of the State of Ohio Budget

**Date of budget passage:** June 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)

OH State Budget FY22-23 (\$161.9B)



OH Medicaid Budget FY22-23 (\$71.6B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cviii cix</sup>

Ohio's FY22-FY23 budget appropriates \$161.9B in total dollars (\$74B in general revenue), \$17.2B (12%) more than the previous biennium. Approximately \$63.6B (39%) of the total budget is allocated to the state's Medicaid program, an increase of 19% from the previous biennial budget. A \$3B budget surplus enabled the passage of a 3% income tax cut, \$1B in post-pandemic economic investment, and a new K-12 school funding formula. Governor DeWine vetoed 16 items prior to signing the budget, including a provision mandating the re-procurement of Medicaid managed care contracts.

#### Medicaid spending and key program changes<sup>cx cxii</sup>

- \$63.6B for Medicaid services (\$31.2B for FY22, \$32.4B for FY23).
- \$490M for new quality incentives for nursing facilities and rebased nursing facility rates.
- Continuous funding for managed care redesign, single pharmacy benefit manager implementation, and Behavioral Health Care Coordination and Emergency Telehealth programs.
- HCBS waiver provider and adult day services rate increases (although vetoed from statute, the increases will still occur).
- Establishes the Ohio Invests in Improvements for Priority Populations (OIPP) Program as a directed payment program for inpatient and outpatient hospital services provided to Medicaid recipients enrolled in a Medicaid MCO plan, benefitting one state funded hospital.
- Extends funding for the Care Innovation and Community Improvement Program (CICIP) supplemental payment program.
- Continues the current tiered dispensing fee for pharmacists.
- Establishes the Medicaid Cost Assurance Pilot Program for expansion eligibility group ("Group VIII") enrollees in the care management system to be paid at 95% of current MCO rates.
- Extends postpartum Medicaid coverage from 60 days to 1 year after birth.

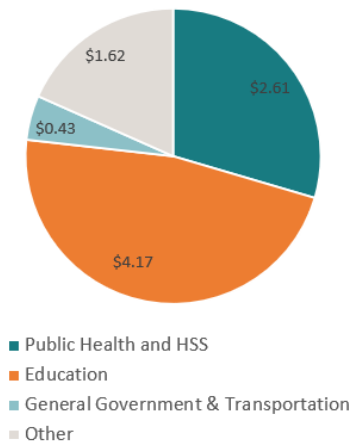
- Establishes licensure requirements for hospitals.
- Enacts a “conscience clause,” allowing providers and payers to decline health services that violate their moral, ethical, or religious beliefs.

## Oklahoma

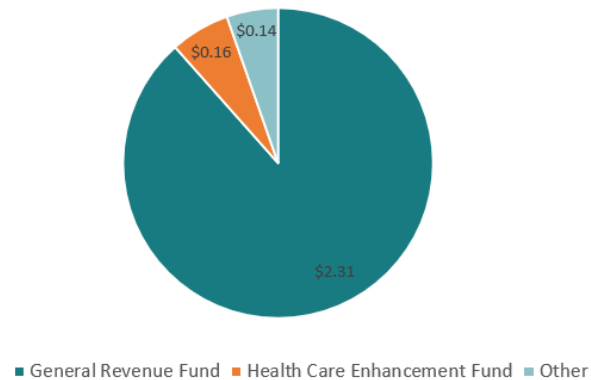
### Key Facts of the State of Oklahoma Budget

**Date of budget passage:** May 24, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

OK State Budget FY22 (\$8.83B)



Public Health and Health and Human Services Budget FY22 (\$2.61B)



### Sellers Dorsey Budget Insights

#### Budget composition <sup>cxiii cxiv cxv</sup>

The FY22 state budget appropriates \$8.83B, with \$2.61B being allocated for the public health and health and human services (HHS) budget. The budget also replenishes more than \$800M in state reserve funds that were significantly reduced to offset pandemic-related reductions last year. The restoration of these funds also results in a record \$1.3B in savings for Oklahoma. The FY22 budget is the largest budget in state history and represents a 14% increase over the original pandemic-affected budget for FY21.

#### Medicaid spending and key program changes <sup>cxvi cxvii cxviii</sup>

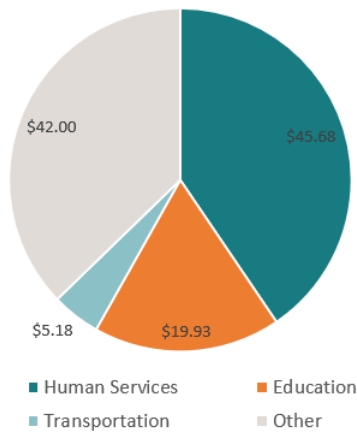
- The Oklahoma Health Care Authority (OHCA), which manages SoonerCare, Oklahoma’s Medicaid program, received a \$194M (19%) budget increase.
- Lawmakers funded Medicaid expansion, with federal ARP funds and an increase in fees charged to hospitals that will rise gradually as federal funds are spent.
- Increases OHCA funding for program growth (\$29M), expanded dental coverage for adults (\$17M), and alternative treatments for pain management (\$8M).
- OHCA received \$164M to deposit in the Rate Preservation Fund, which protects SoonerCare from service cuts should the federal share of Medicaid go down.
- The budget for the Department of Mental Health and Substance Abuse Services was reduced by \$13M. Additional federal funds from Medicaid expansion will fund program growth, crisis intervention training and mobile crisis teams, connectivity between law enforcement and mental health providers, and contracts to transport persons experiencing mental health crises for assessment or detention, a function currently carried out by law enforcement officers.
- University Hospitals Authority’s budget has been increased by \$20M, half of which lawmakers have said will establish a new children’s mental health program.

## Oregon

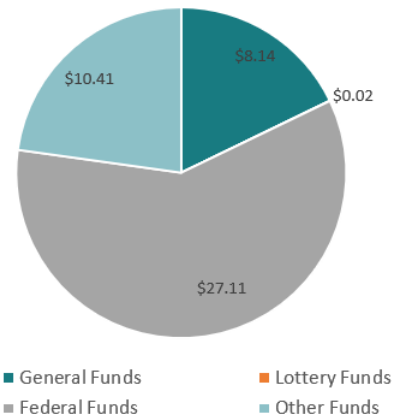
### Key Facts of the State of Oregon Budget

**Date of budget passage:** June 26, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)

OR State Budget FY21-FY23 (\$112.79B)



Human Services Budget FY21-FY23 (\$45.68B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cxix cxx</sup>

Oregon's budget for FY21-FY23 appropriates \$112.79B in total funds, with \$25.4B from the General Fund, \$1.4B from Lottery Funds, \$37.4B from Federal Funds, and \$48.6B from other funds. \$45.68B was allocated to the Department of Human Services (DHS). The total funds budget remained essentially flat between biennia primarily due to the influx of federal funding in both 2019-21 and 2021-23 that was provided to help offset economic and other impacts of the COVID-19 pandemic with no Medicaid program cuts included.

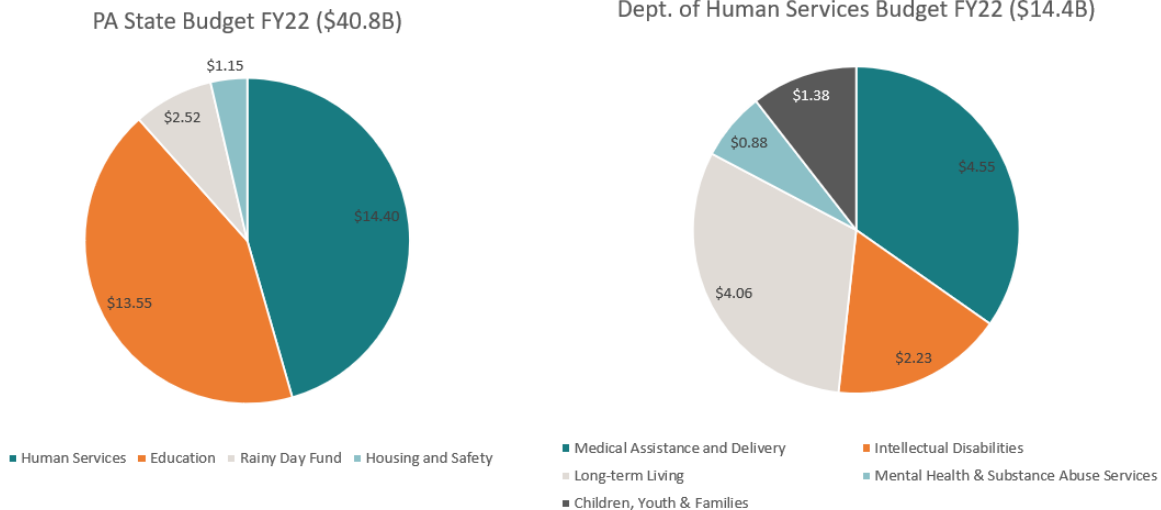
#### Medicaid spending and key program changes<sup>cxix cxxii cxxiii</sup>

- 12% budget increase for the Oregon Health Authority because of the increase in Medicaid enrollment, behavioral health needs, and spending on racial equity.
- 3.4% inflation-based increase for Coordinated care organizations, the insurers of Medicaid members.
- More than \$450M for mental health services and programs, with \$130M for housing and residential treatment.
- \$121M for certified community behavioral health clinics.
- \$45M to boost healthcare outcomes for people of color with help from county public health agencies, community organization, and tribes.
- \$302M for addiction and recovery services.

## Pennsylvania

### Key Facts of the Commonwealth of Pennsylvania Budget

**Date of budget passage:** June 30, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cxxiv</sup>

This year's state budget appropriates \$40.8B for FY22 including \$4.55B for medical assistance and health care delivery. This budget represents an increase of about \$6B, or 17% over FY21. The budget includes the largest education funding increase in state history.

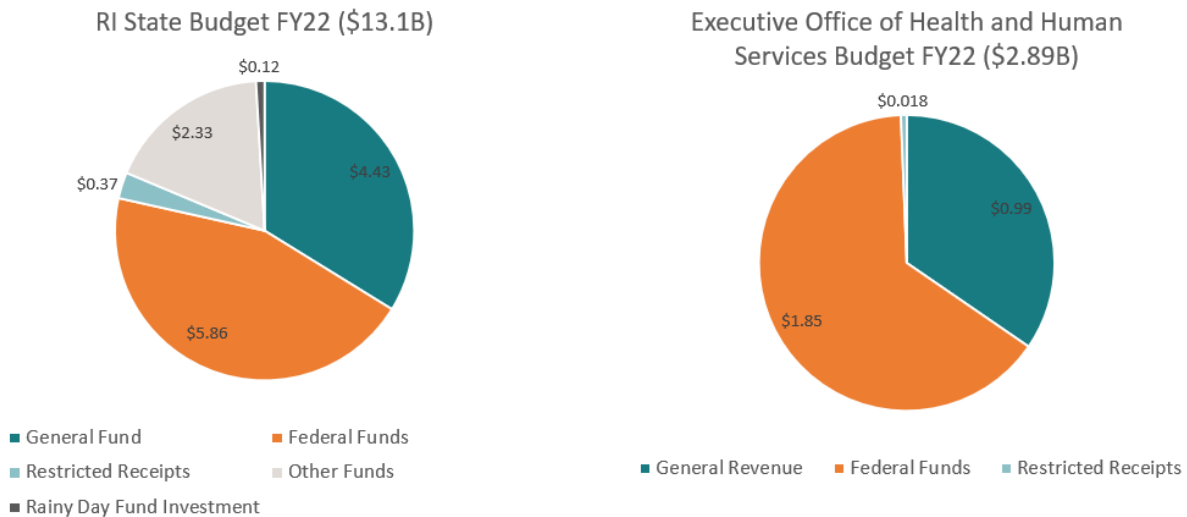
#### Medicaid spending and key program changes<sup>cxxv</sup>

- Allocates \$1.25M for 20 Community Hospital Integration Projects Program (CHIPP) discharges to reduce the state hospital populations, waiting lists, and support home and community-based services.
- Provides a \$5-per-hour pay increase in the fee-for-service schedule rate for pediatric shift nursing services provided by RNs and LPNs in a home care setting. This change is effective January 1, 2022.<sup>cxxvi</sup>
- Allocates \$282M in ARP funding to help nursing homes and long-term care facilities to recover from the pandemic and improve patient safety.
- Funds an additional 732 Community Living Waiver slots and 100 Consolidated Waiver slots to provide individuals on the emergency waiting list with home and community-based services.
- Funds a new outcome-based incentive to the Consolidated Waiver to encourage expansion of new models of independent living, limit growth of 24-hour residential services, and reduce overall costs of residential services.
- General medical inflation, pharmaceutical prices, a change in the federal match for Medicaid Expansion costs, and an increase in caseload contributes to an overall increase in projected Medicaid spend for FY22. This increase is mitigated through cost containment, operational efficiencies, and proposed revenue strategies.

## Rhode Island

### Key Facts of the State of Rhode Island Budget

**Date of budget passage:** July 6, 2021  
**State fiscal year:** July 1, 2021- June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cxxvii</sup>

This year's state budget appropriates \$7.25B in state dollars (\$13.1B in total dollars), \$300M higher (2%) than the previous year. The budget includes a \$120M investment in the state's Rainy Day Fund to replace the reserves removed last year as well as significant investments in significant, recurring investments in affordable housing.

#### Medicaid spending and key program changes<sup>cxxviii</sup>

- \$1B additional dollars to support a projected Medicaid caseload increase
- \$10.6M general fund dollars to restore supplemental payments to community hospitals, including Graduate Medical Education and Upper Payment Limit payment programs
- \$1.2M general fund dollars to maintain the 1.5% risk margin in managed care rates. This restores a proposed cut to the risk margin.
- \$668,763 general fund dollars for a 0.5% rate increase for nursing home staff, effective October 1, 2021.

#### Other notable Medicaid legislation or agency regulations<sup>cxxix</sup>

- Telemedicine law requires payers to cover telemedicine care wherever deemed "clinically appropriate."

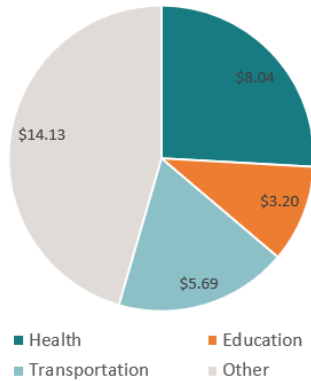


## South Carolina

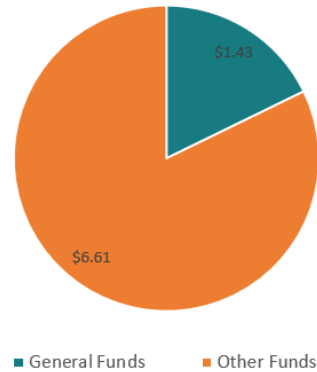
### Key Facts of the State of South Carolina Budget

**Date of budget passage:** June 21, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

SC State Budget FY22 (\$31.06B)



Health Care Budget FY22 (\$8.04B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cxxx cxxxi cxxxii cxxxiii cxxxiv</sup>

South Carolina's FY22 budget appropriates \$31.06B in total dollars (\$9.2B in general funds), a decrease of \$50M (<1%) from the previous annual budget. The budget allocates \$500M to the state's rainy-day fund, provides \$1,000 pay raises for public school teachers, and expands full-day kindergarten to all at-risk four-year-old children. Effective July 1, 2021, a budget provision allows the state to withhold funding for school districts that require masks be worn by students and staff, effectively banning mask mandates in South Carolina K-12 public schools. On September 3, the South Carolina Supreme Court upheld the budget provision after Attorney General Alan Wilson sued the City of Columbia for implementing a mask mandate in defiance of the rule.

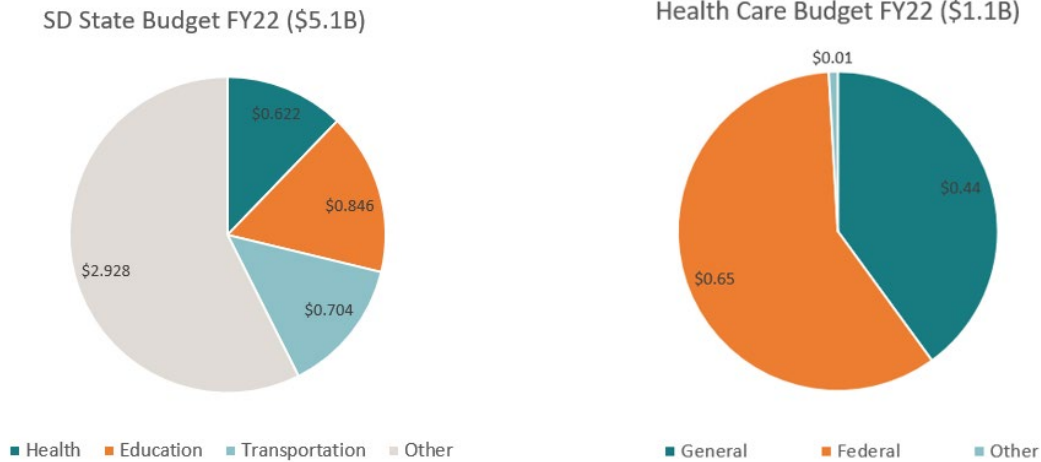
#### Medicaid spending and key program changes<sup>cxxxv cxxxvi cxxxvii</sup>

- \$51.9M in Medicaid Eligibility funding (\$12M in general revenue).
- New program funding to hire a nurse and resource officer at every public school.
- Increased spending for school mental health programs.
- Passed amended proviso 33.22, extending postpartum Medicaid coverage to 12 months.

## South Dakota

### Key Facts of the State of South Dakota Budget

**Date of budget passage:** March 29, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>xxxviii xxxix</sup>

This year's state budget appropriates \$5.1B for FY22 including \$1.1B for the health care budget. South Dakota has an \$86M surplus from the previous fiscal year, which was transferred into the state's budget reserves (totals \$302M). The budget focuses on increases in funding for education, a livestock complex, and health care.

#### Medicaid spending and key program changes<sup>cxl cxli</sup>

- A 2.4% pay increase for Medicaid services providers and state government employees.
- Moves institutions that deliver Medicaid to 100% reimbursement.
- Increased spending on nursing homes and mental health.
- Community service providers who care for the disabled received a 14.8% (\$2.94 an hour) increase in salary.

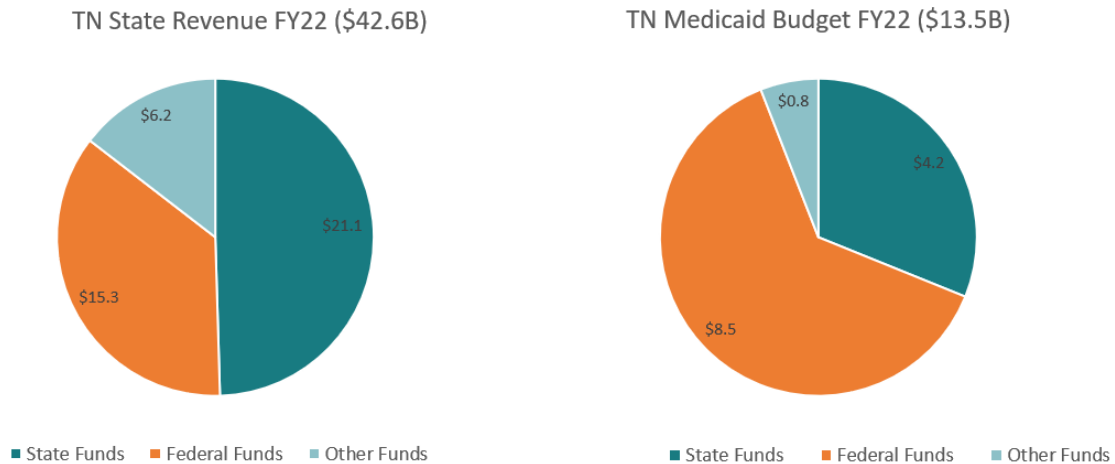
#### Other notable Medicaid legislation or agency regulations

- \$100M to expand high-speed broadband to underserved areas of the state.

## Tennessee

### Key Facts of the State of Tennessee Budget

Date of budget passage: May 17, 2021  
State fiscal year: July 1, 2021 – June 30, 2022



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cxliii</sup>

Tennessee's FY22 state budget appropriates \$21.1B in state funds and \$15.3B in federal funds. The \$42.6B total budget represents a 1.7% increase from the previous annum. Approximately \$13.5B, or 32%, of the total budget is being allocated to Medicaid (TennCare) which had its budget increased by 4.7% from the previous fiscal year. The budget invests \$100M in the state's Rainy-Day Fund bringing it to the highest reserve in the state's history at \$1.55B. The state is also receiving \$6.3B in State and Local Fiscal Aid from ARP with \$4B going directly to the state government and the remainder distributed among county and city governments.

#### Medicaid spending and key program changes<sup>cxliiii</sup>

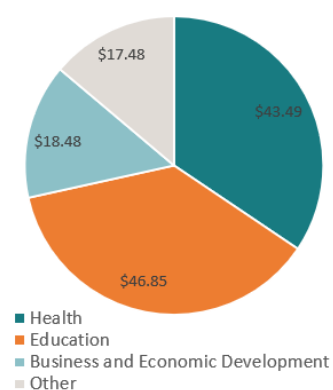
- \$4.1B state funding to TennCare
  - \$338M for I/DD Services
  - \$37.9M to fully fund TennCare growth
  - \$7M to extend postpartum care for the TennCare population to 12 months
- \$250M investment in Mental Health Trust Fund
- \$150M for COVID-19 Response
- \$5M for Health Care Safety Net

## Texas

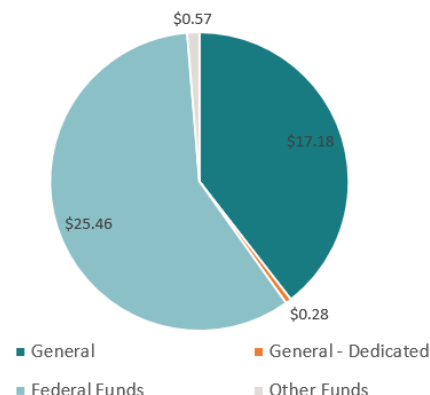
### Key Facts of the State of Texas Budget

**Date of budget passage:** June 18, 2021  
**State fiscal year:** September 1, 2021 – August 31, 2022 (biennial budget cycle)

TX State Budget FY22 (\$126.3B)



Health Care Budget FY22 (\$43.49B)



### Sellers Dorsey Budget Insights

#### Budget composition

The 2022-2023 biennial state budget appropriates \$58.1B in state general revenue (\$126.3B in total dollars) for FY22, and \$58.1B in state general revenue (\$122.2B in total dollars) for FY23, about \$13.5B less (5.2%) than the previous biennium.<sup>cxliv</sup> However, the legislature appropriated more funds for Health and Human Services, increasing the Health and Human Services budget by \$661.8M (2%).

#### Medicaid spending and key program changes

- Additional funding for IDD claims and data system updates.
- Provides additional \$76.9M in All Funds to decrease the community waiver interest list for individuals with intellectual, developmental, and physical disabilities.
- Provides an additional \$123.5M (\$47,576,677 GR) for rural hospital rate increases and a \$500 Medicaid add-on payment for labor and delivery services provided at rural hospitals.
- Includes \$350M target for Medicaid cost containment. The Medicaid agency may not achieve this target in a manner that negatively impacts the amount, duration, or scope of services, or access to care.
- Authorizes the state Medicaid agency to seek an IMD exclusion waiver from CMS.<sup>cxlv</sup>

#### Other notable Medicaid legislation or agency regulations

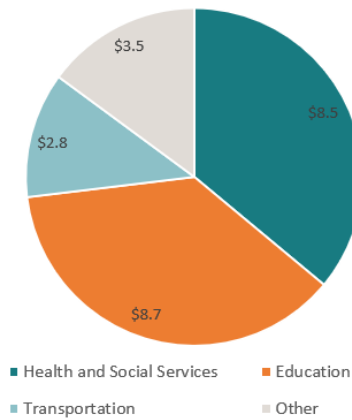
- Extended Medicaid coverage for women by four months to allow for a total six months of postpartum coverage (HB 133).
- Made permanent several COVID-19 flexibilities related to telehealth, particularly around assessment processes for HCBS and other Medicaid services (HB 4).
- Prevents MCOs from applying prior authorization requirements for commonly approved requests. (HB 3459).
- Authorizes the Texas Department of Insurance to implement an all-payer claims database (HB 2090)<sup>cxlvi</sup>.

## Utah

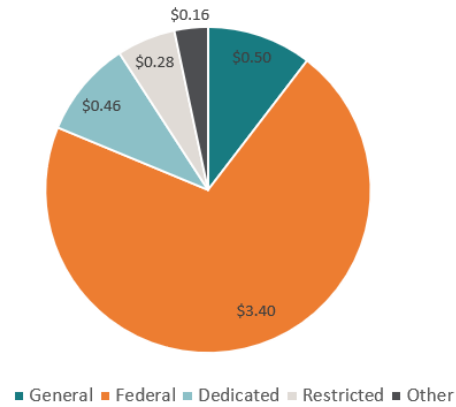
### Key Facts of the State of Utah Budget

**Date of budget passage:** March 25, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022

UT State Budget FY22 (\$23.5B)



Medicaid Budget FY22 (\$4.8B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cxlvii</sup>

This year's state budget appropriates \$23.5B in total dollars, with \$4.72B being appropriated for Medicaid. Utah has a \$1.5B surplus for FY22, and the spending plan is up 10%. Utah is one of two states leading the nation in revenue gains, outperforming its last pre-pandemic fiscal year.

#### Medicaid spending and key program changes<sup>cxlviii cxlix</sup>

- Increase in overall Medicaid budget by \$73.9M
- \$55M to fill the Medicaid expansion gap (costs are currently outpacing revenues)
- \$85M for dental coverage
- \$378M for home and community-based services
- \$224M for mental health and substance abuse treatments

#### Other notable Medicaid information<sup>d</sup>

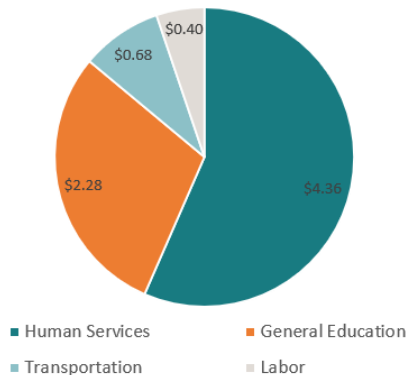
- Medicaid Recipients (FY22) = 446,800, up by 33,200 individuals
- Medicaid Budget Stabilization Account = \$74.8M

## Vermont

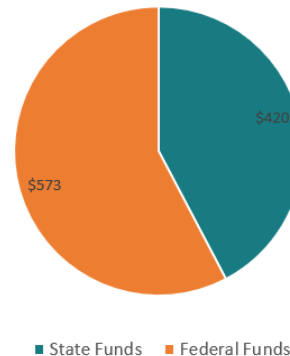
### Key Facts of the State of Vermont Budget

**Date of budget passage:** June 8, 2021  
**State fiscal year:** July 1, 2021- June 30, 2022

VT State Budget FY22 (\$7.3B)



VT Medicaid Budget FY22 (\$993M)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>cli clii cliii</sup>

This year's state budget appropriates \$7.32B for FY22 including \$993M in total for the Medicaid program. The budget focuses on helping the state recover from the pandemic and addresses workforce shortages and economic inequity. Additionally, the budget will invest \$599M in ARP funding towards climate change mitigation, clean water initiatives, housing efforts, and broadband connectivity.

#### Medicaid spending and key program changes<sup>cliv</sup>

- \$3.9M in Delivery System Reform investments to the All-Payer Accountable Care Organization Model, including health information technology projects and the Longitudinal Care Home Health Program.
- \$2.27M in funding to continue nursing and primary care scholarships.
- Health care coverage for pregnant individuals and children who do not qualify for Medicaid due to immigration status.
- Prohibition on pharmacy benefit managers from requiring certain reporting on 340B prescription drugs or restricting access to a pharmacy network or change reimbursement rates based on a pharmacy's participation in the 340B program.

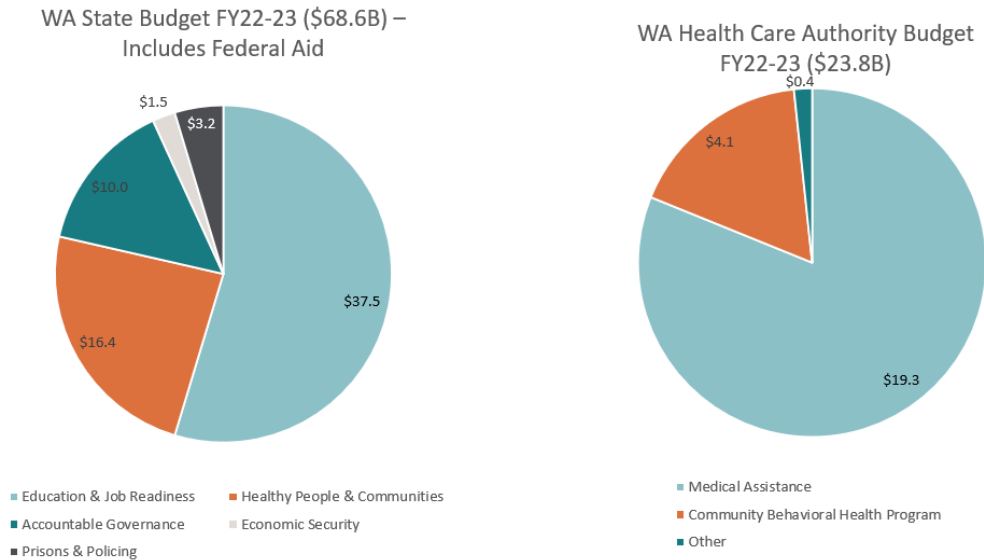
#### Other notable Medicaid legislation or agency regulations<sup>clv</sup>

- Extension of the Health Care Workforce Strategic Plan to December 1, 2021.
- Task Force on Affordable, Accessible Health Care to present recommendations by December 1, 2021, on expanding access to affordable health care in Vermont.
- \$600,000 for a mental health mobile crisis unit pilot in Rutland.

## Washington

### Key Facts of the State of Washington Budget

**Date of budget passage:** May 18, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>clvi</sup>

Washington's FY22-23 state budget appropriates \$59.2B in Operating Funds and \$9.4B in Federal COVID-19 Relief Funds. The \$59.2B in state budget represents a 12% increase in total spending from the FY20-21 budget. Approximately \$23.8B, or 40%, of the appropriated funds are being allocated to the State Health Care Authority (HCA) which manages the state's Medicaid (Apple Health). The HCA had its budget increased by 5% from the previous amended biennial budget. The state is also receiving \$6.7B in State and Local Fiscal Aid from ARP, with \$4.4B going directly to the state government and \$2.3B going to local jurisdictions.

#### Medicaid spending and key program changes<sup>clvii</sup>

- \$123.8M to maintain and increase access for primary care services for Medicaid-enrolled patients through increased provider rates (FFS & MCO) beginning October 1, 2021.
  - At least 15% increase (in medical assistance rates effective January 1, 2019) for adult primary care services.
  - At least 21% increase (in medical assistance rates effective January 1, 2019) for pediatric primary care, pediatric critical care, neonatal critical care, and neonatal intensive care services.
- \$65M to continue providing rate add-ons for contracted service providers to address the increased costs associated with serving clients during the COVID-19 pandemic through the end of CY 2021.
- \$55M for 2% increase to Medicaid reimbursement for community behavioral health providers contracted through MCOs that was provided in April 2021.

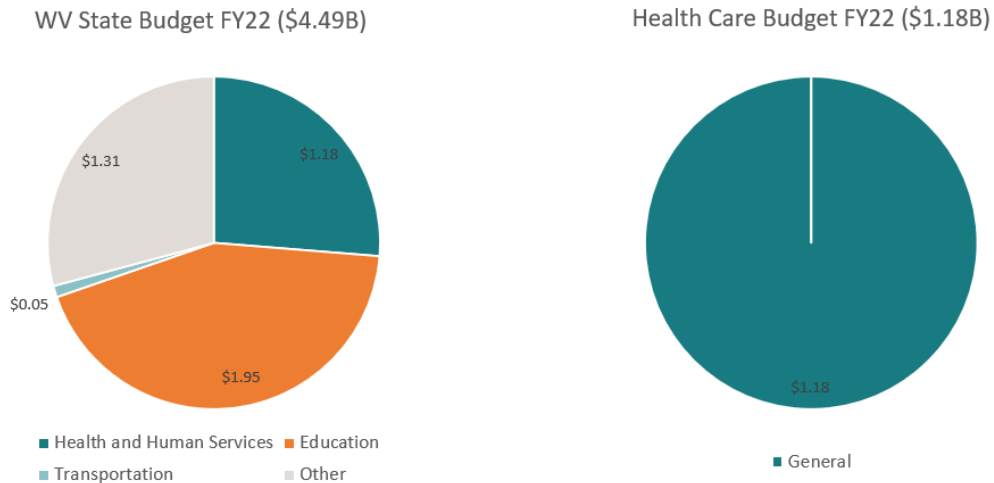
- \$45.6M to contract with Medicaid MCOs for wraparound services to enrolled individuals that are not covered under the Medicaid program and for the state share of costs for exceptional behavioral health personal care services. MCOs must provide a 2% rate increase to providers receiving state funding for non-Medicaid services effective July 1, 2021.
- \$30.2M to increase rates (2% each year from CY 22-23) for community residential service providers offering supported living, group home, group training home, and licensed staff residential services to individuals with developmental disabilities.
- \$23.2M to increase the fixed rate paid for skilled nursing facility Medicaid direct care to 150% of statewide case mix neutral median costs.
- \$17.5M to maintain and increase access for behavioral health services through increased provider rates (15% increase). The rate increases are effective October 1, 2021.
- \$16.1M to increase provider rates (by at least 162% above the rates effective January 1, 2021) to maintain and increase access for family planning services for patients seeking services through department of health sexual and reproductive health program family planning providers. The rate increases are effective October 1, 2021.
- \$10M to increase the rates paid to rural hospitals by 150% of the hospitals' FFS rates.
- \$4.9M for the development and implementation of 13 enhanced respite beds across the state for children.
- \$4M for the development and implementation of 13 community respite beds across the state for adults.



## West Virginia

### Key Facts of the State of West Virginia Budget

**Date of budget passage:** April 10, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2022



*\*As of the date of this publication, West Virginia has exclusively published general revenue budget information for FY22.*

### Sellers Dorsey Budget Insights

#### Budget composition<sup>clviii clx clxi</sup>

West Virginia's FY22 state budget appropriates \$4.49B in state dollars, a decrease of \$79.5M (1%) from the previous annual budget. The state entered the FY22 budget cycle with a surplus of nearly \$400M, half of which will go to the state's rainy-day fund and the other half to surplus funding line items in the FY22 budget restoring previous cuts to two-and four-year colleges. Substantial cuts to the governor's \$4.57B proposed budget leave \$72.7M unappropriated in FY22. The destination of the unappropriated funds is not yet clear, but analysts speculate the state's accumulation of surplus funding may one day be used to support lawmakers' long sought-after elimination of the state income tax. West Virginia will receive an additional \$4B in ARP funds, of which more than half will go to cities and counties.

#### Medicaid spending and key program changes<sup>clxii</sup>

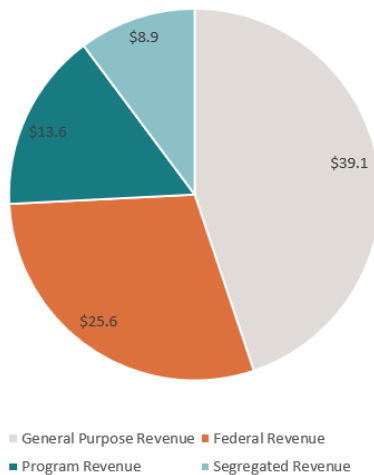
- \$24M (2%) increase in total health care spending over the previous annual budget.
  - \$20M increase in medical services funding within the Division of Human Services.
  - \$3M increase in unclassified behavioral health program funding.
- \$2.5M cut from general revenue funding for Medicaid, replaced by a one-time transfer from the Attorney General's Consumer Protection Fund.
- \$3M decrease in primary care support spending within the Division of Health.
- \$500,000 increase in spending on Health Right Free Clinics.
- Threefold (\$550,000) increase in sexual assault intervention and prevention program spending.

## Wisconsin

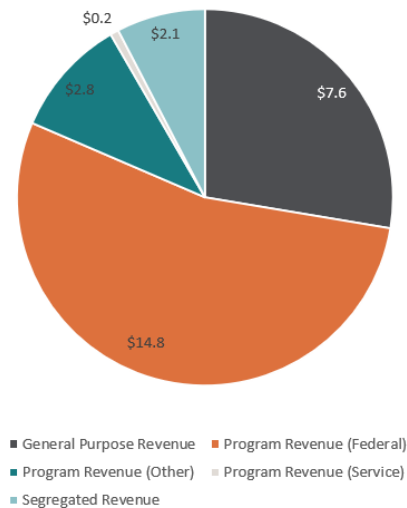
### Key Facts of the State of Wisconsin Budget

**Date of budget passage:** July 8, 2021  
**State fiscal year:** July 1, 2021 – June 30, 2023 (biennial budget cycle)

WI State Budget FY22-23 (\$87B)



WI Medicaid Budget FY22-23 (\$28B)



### Sellers Dorsey Budget Insights

#### Budget composition<sup>clxiii</sup>

Wisconsin's FY22-23 state budget appropriates \$39.1B in state funds and \$25.6B in federal funds. The \$87.2B total budget represents a 7% increase in state spending from the previous biennium. Approximately \$27.5B, or 32%, of the total budget is being allocated to Medicaid which had its budget increased by 17% from the previous biennial budget. Medicaid expansion is not included in the budget as the state legislature voted against it, rejecting over \$1.6B in federal funding. The state is also receiving \$4.8B in State and Local Fiscal Aid from ARP with \$2.5B going directly to the state government and \$1.9B going to counties, cities, and local jurisdictions.

#### Medicaid spending and key program changes<sup>clxiv</sup>

- \$30.1B for Department of Health Services.
  - \$27.5B for Medicaid Services (approximately \$13.7B for each fiscal year).
  - \$1B for Mental Health and Developmental Disabilities Services.
- \$7B for Medicaid Medical Assistance program benefits.
- \$2.4B for Medicaid medical assistance; provider refunds and collections.
- \$503M for Medicaid Hospital assessment fund; hospitals payments.
- \$100M in federal pandemic aid for schools.

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- clxiii [2021 Assembly Bill 68; 2019 Assembly Bill 56; WI Dept of Health Services; Treasury.gov.](#)
- clxiv [2021 Assembly Bill 68; WPR, 7/8/21.](#)