



MISSISSIPPI DIVISION OF  
**MEDICAID**

**2025 Annual Report**

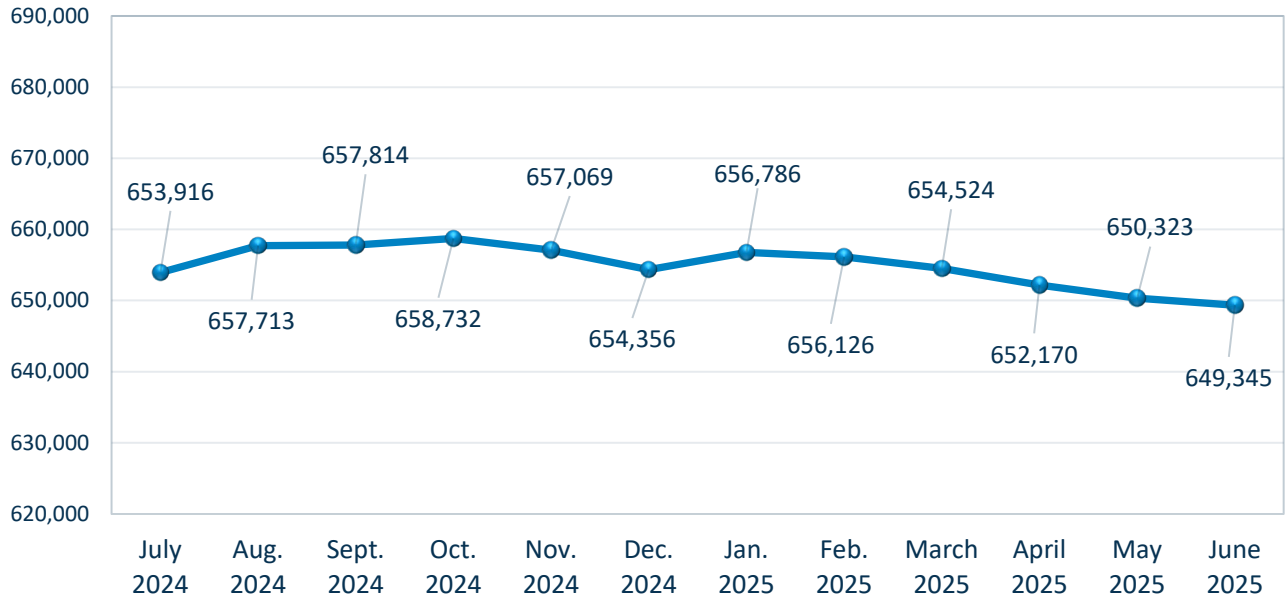
State Fiscal Year 2025



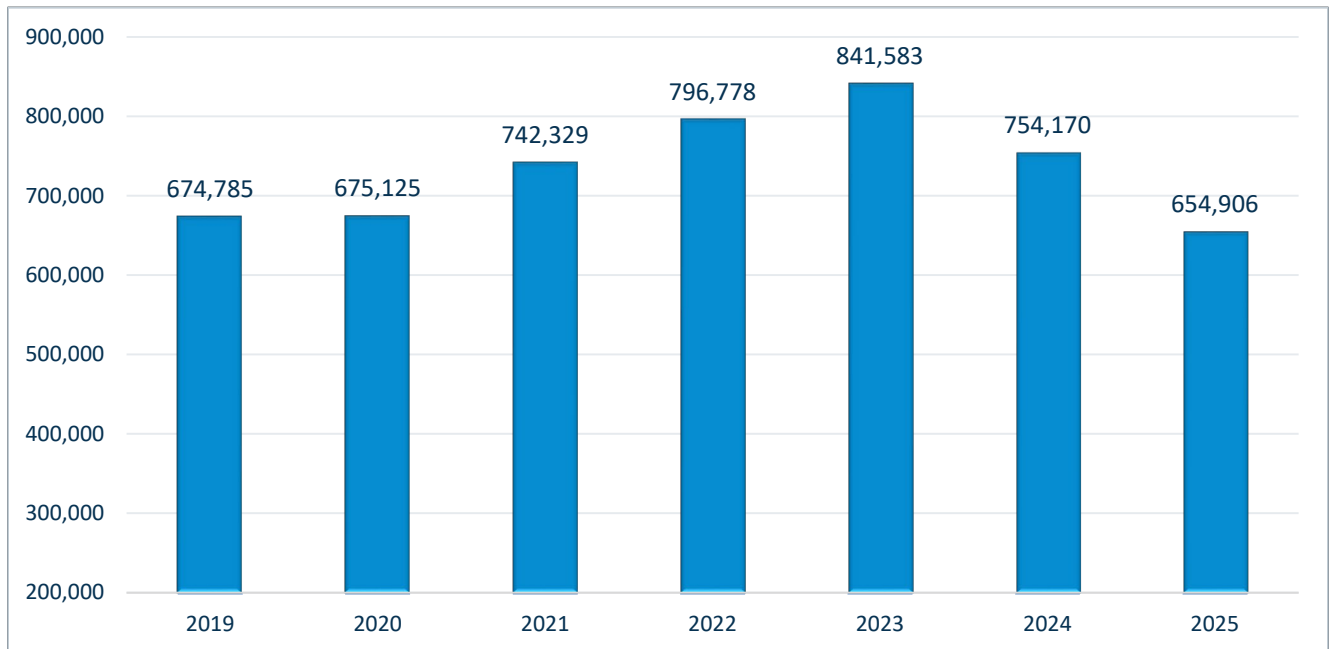
July 1, 2024 – June 30, 2025

## FY2025 MEDICAID ENROLLMENT

### Medicaid Enrollment



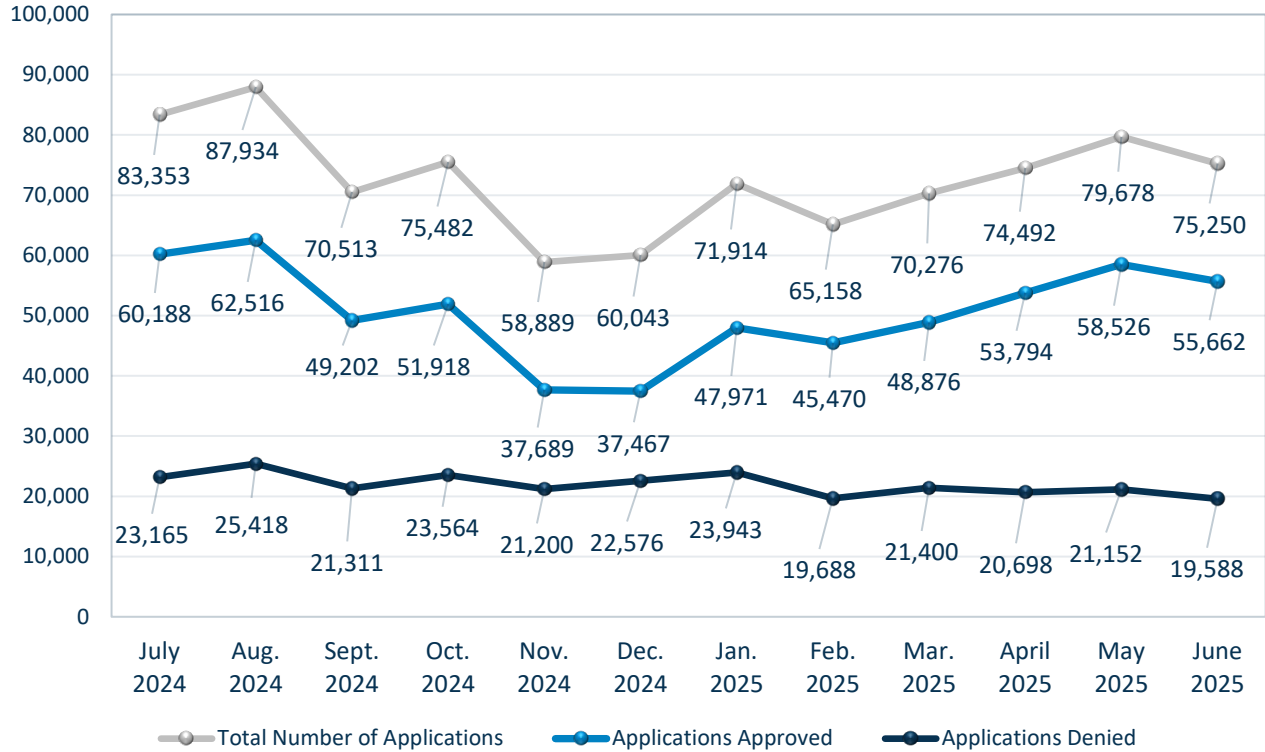
The figures above reflect the Medicaid enrollment count for each month of fiscal year 2025. They do not include members enrolled in the Children’s Health Insurance Program (CHIP).



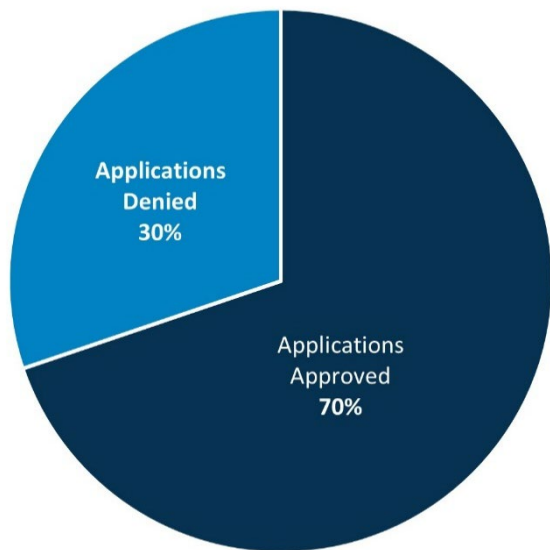
The figures above reflect the average annual Medicaid enrollment for each of the past seven fiscal years.

# FY2025 MEDICAID ENROLLMENT

## Applications Approved/Denied



The figures above reflect the total number of applications received, approved, and denied for state fiscal year 2025 by month. These figures include both initial applications and applications for annual renewal.



### Total Number of Applications

**872,982**

### Applications Approved

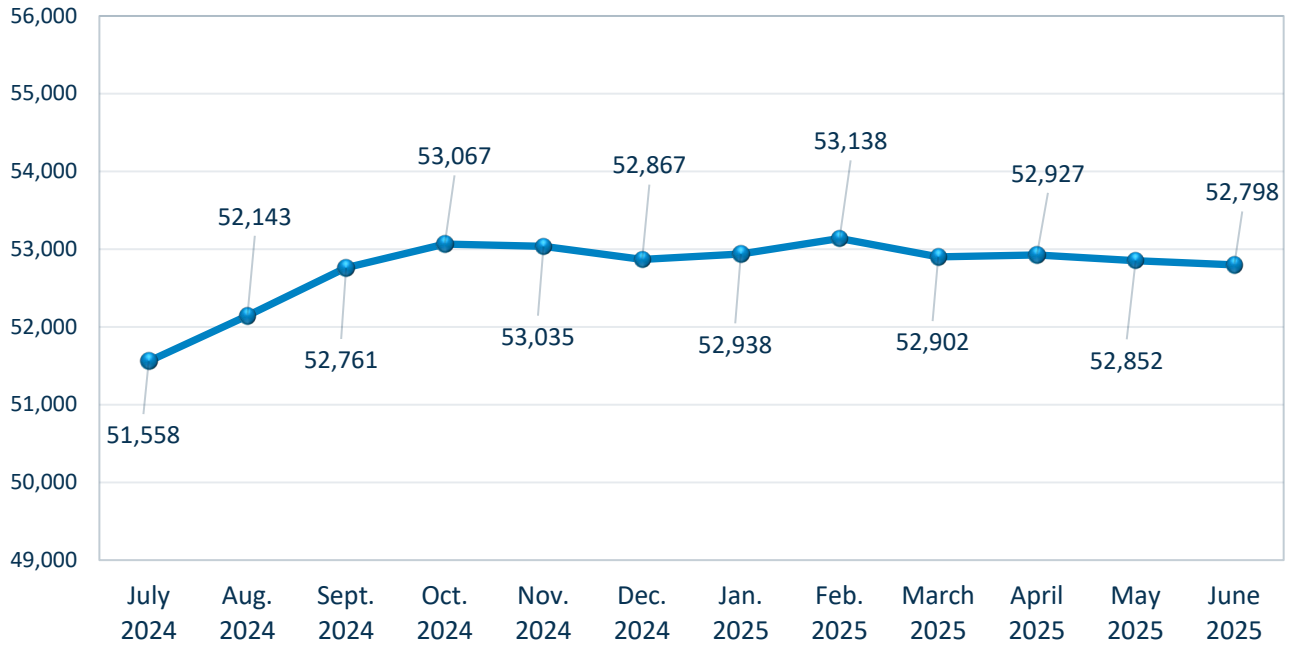
**609,279**

### Applications Denied

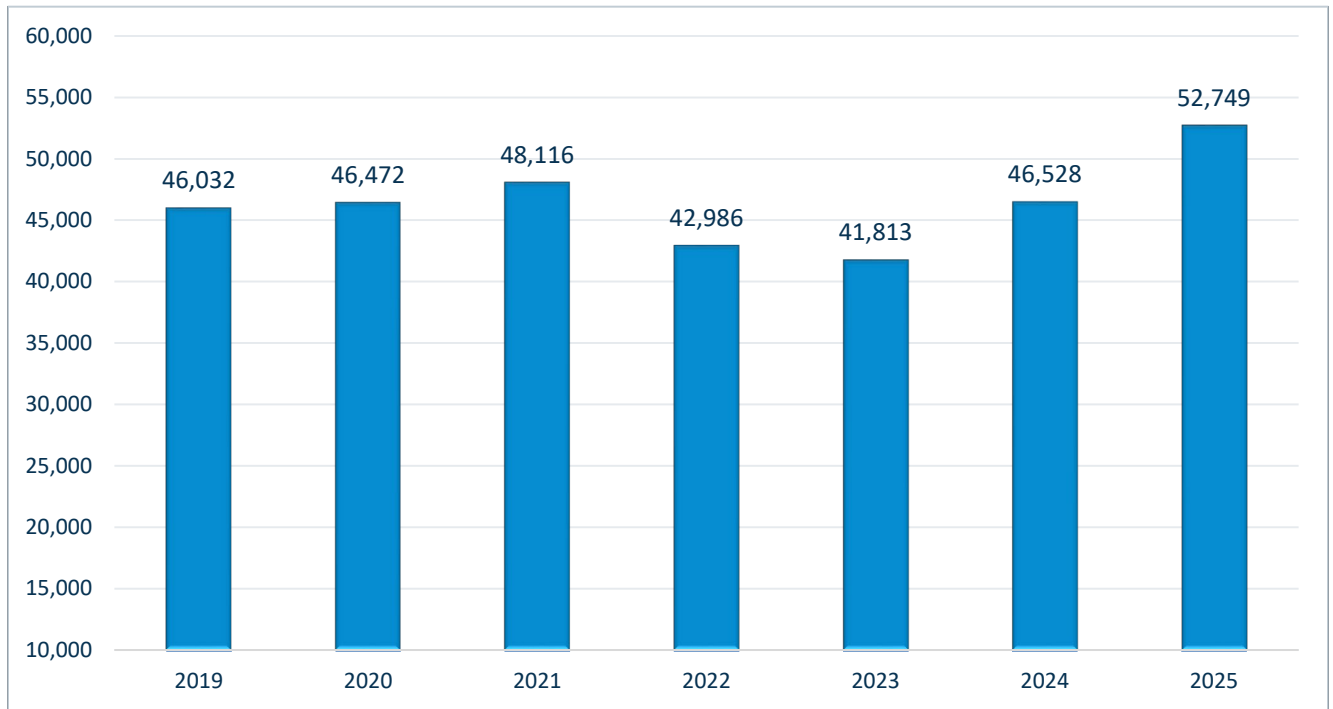
**263,703**

## FY2025 MEDICAID ENROLLMENT

### Mississippi CHIP Enrollment



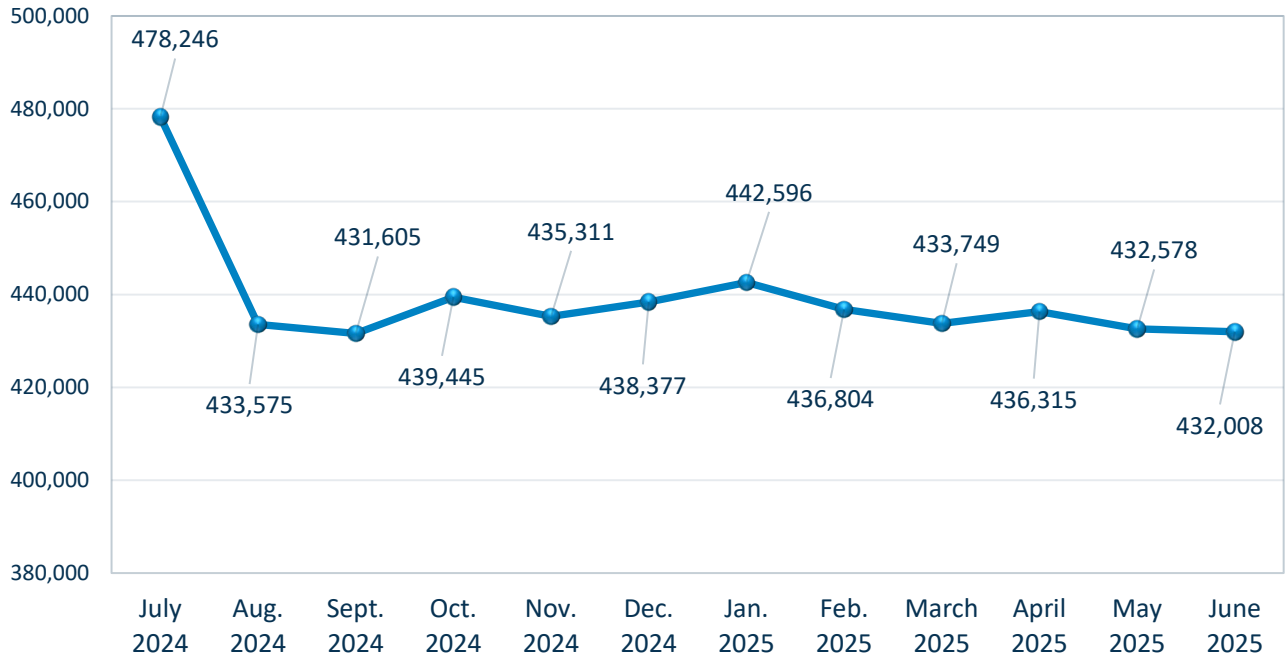
The figures above reflect the Children's Health Insurance Program (CHIP) enrollment for each month of fiscal year 2025.



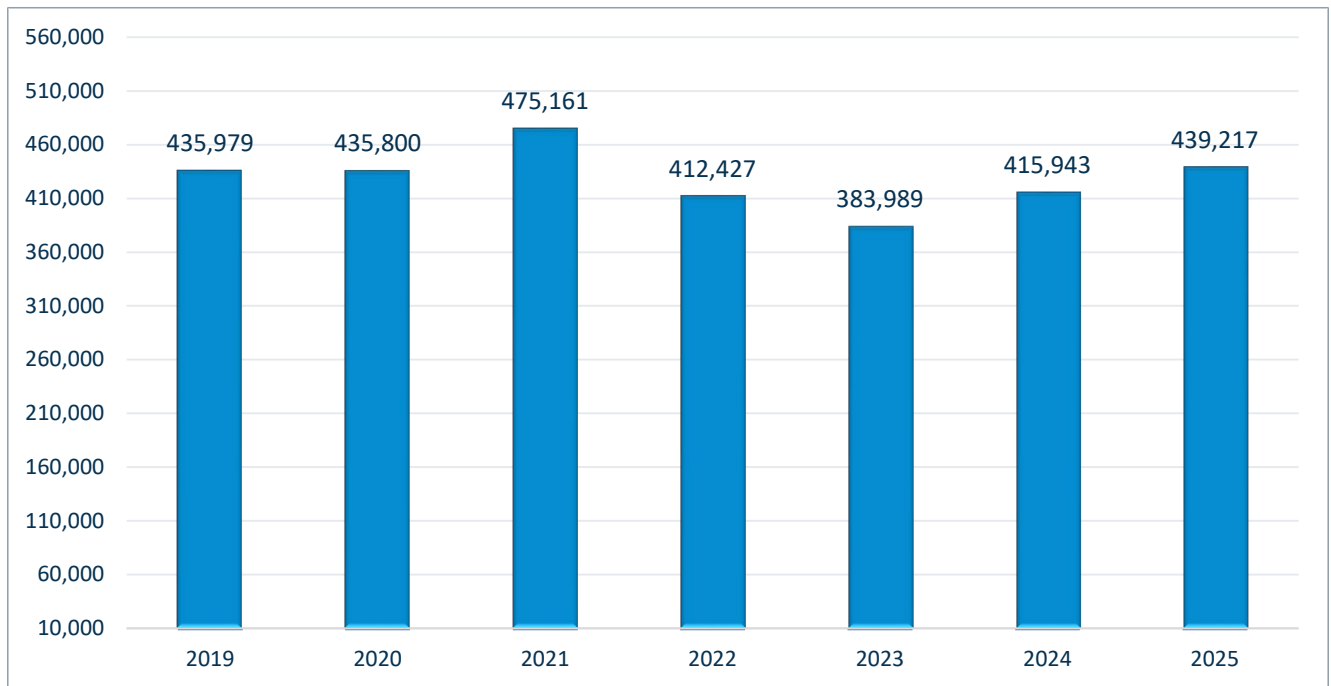
The figures above reflect the average annual CHIP enrollment for each of the past seven fiscal years.

## FY2025 MEDICAID ENROLLMENT

### MississippiCAN Enrollment



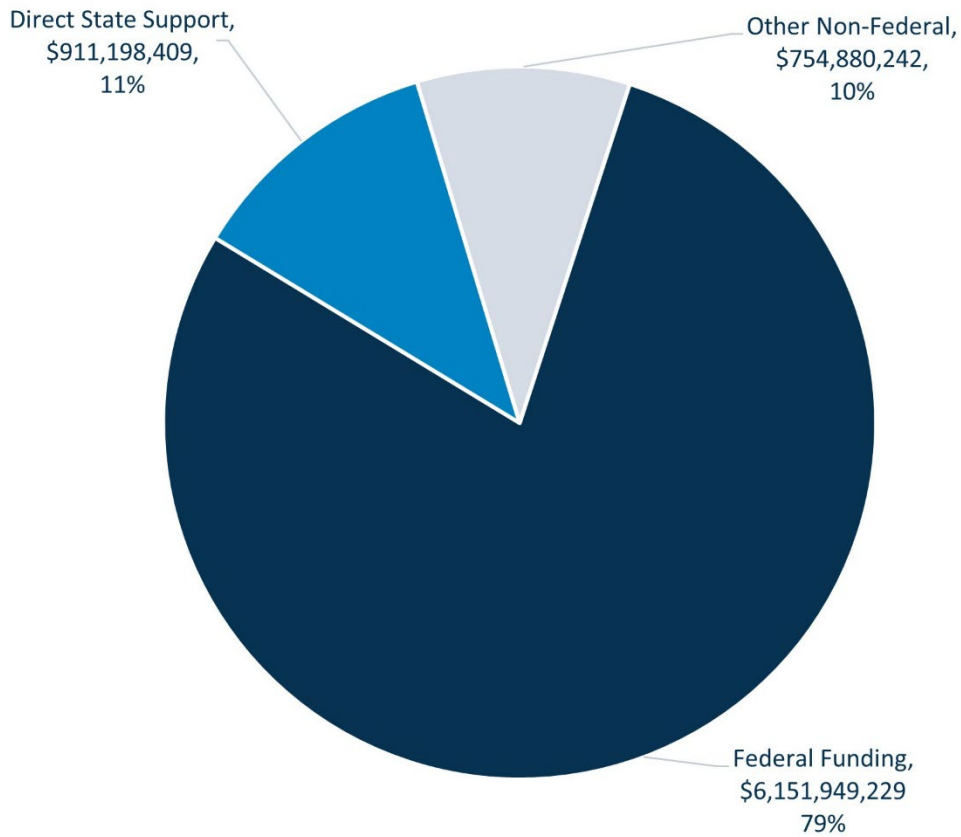
The figures above reflect MississippiCAN enrollment for each month of fiscal year 2025.



The figures above reflect the average annual MississippiCAN enrollment for each of the past seven fiscal years.

## FY2025 MEDICAID FUNDING BY SOURCE

<b>TOTAL</b>	<b>FEDERAL</b>	<b>DIRECT STATE</b>
<b>\$8.06 billion</b>	<b>\$6.1 billion</b>	<b>\$911 million</b>

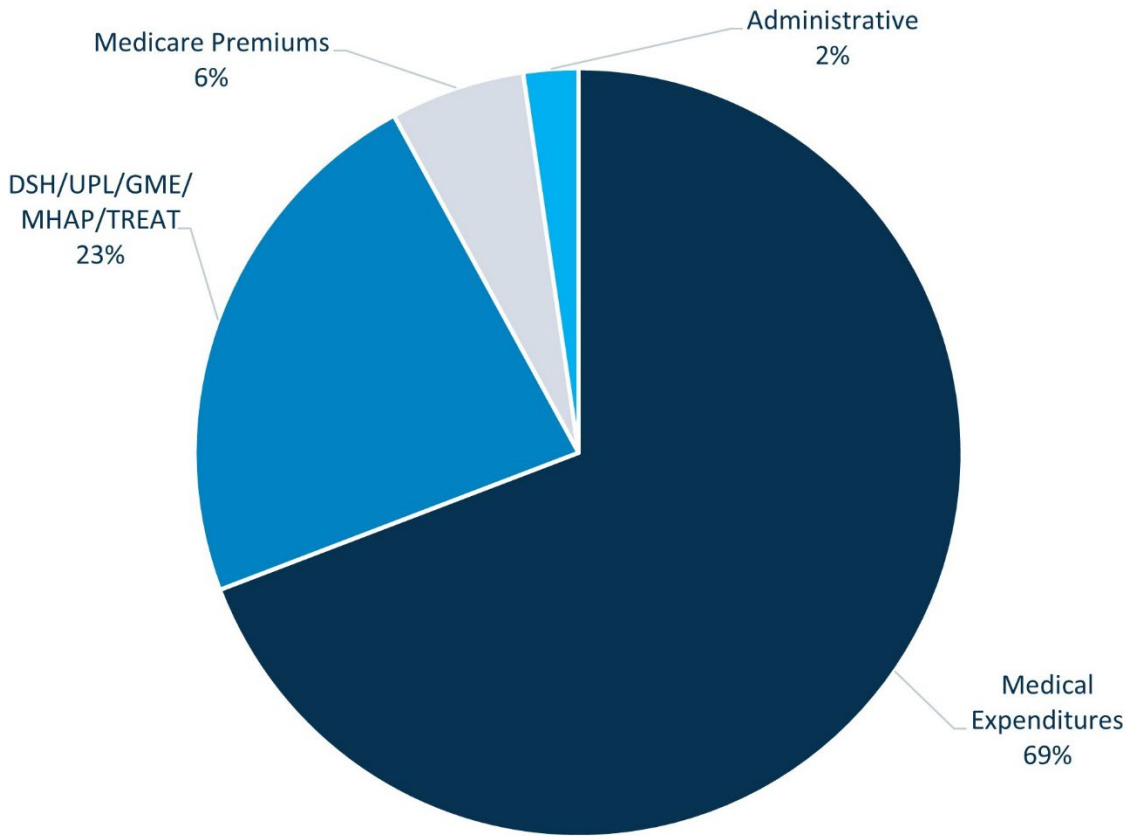


**76.99%** > Fiscal year 2025 blended FMAP for Mississippi

A significant portion of DOM's annual budget comes from federal matching funds, which is calculated by the Federal Medical Assistance Percentage (FMAP). The blended FMAP for state fiscal year (FY) 2025 equates to 76.99%.

Of the entire Medicaid budget, 96% goes toward reimbursement for health services provided to Medicaid beneficiaries. The cost for administering the program is relatively low when compared to other state Medicaid programs. For FY 2025, administrative expenditures totaled \$186,343,075.

## FY2025 MEDICAID EXPENDITURES



### MEDICAL EXPENDITURES

**\$5,576,195,592**

### MEDICARE PREMIUMS

**\$457,086,823**

### DSH/UPL/GME/MHAP/TREAT/MAPS

**\$1,838,686,911**

### ADMINISTRATIVE

**\$186,343,075**

### FY2025 TOTAL

**\$8,058,312,400**

## MEDICAL ASSISTANCE AND CARE

### Supplemental Payments and Other Types of Care and Services

The total amount paid for medical assistance and care in fiscal year 2025 includes supplemental payments and other types of care and services, such as:

#### MISSISSIPPI HOSPITAL ACCESS PROGRAM

**\$1,521,921,425**

#### DISPROPORTIONATE SHARE HOSPITAL

**\$13,566,152**

#### EMERGENCY AMBULANCE ACCESS (TREAT)

**\$37,946,808**

#### GRADUATE MEDICAL EDUCATION

**\$58,240,650**

#### NURSING FACILITY UPL

**\$2,002,949**

#### HOSPITAL UPL

**\$158,956,494**

#### UMMC - PHYSICIAN UPL

**\$7,473,711**

### Medicaid Funding in Billions



# **PROGRAM INTEGRITY & THIRD PARTY RECOVERY**

## **Program Integrity**

- To identify and stop fraud and abuse in the Mississippi Medicaid program.
- To identify weak areas in policy and control within and external to the agency that might allow fraud, waste, or abuse to occur.
- To make recommendations for change and improvement to operations and processes to reduce the possibility of fraud, waste, and abuse.
- To determine possible provider and recipient fraud and/or abuse by investigating and auditing providers and analyzing claims data, medical records, eligibility records and payment histories as well as conducting interviews with provider staff and Medicaid recipients.

Looking back over FY 2025, the Medicaid Office of Program Integrity had the following activity:

**Total amount of recoveries and repayment agreements entered into: \$2,471,261**

- **Number of Opened Investigations: 291**
- **5 Cases Resulting in Corrective Action**
- **9 Cases Referred to MFCU**

## **Actions to Combat Fraud, Waste & Abuse**

DOM’s actions and activities in detecting and investigating suspected or alleged fraudulent practices, violations and abuse are listed below:

### **Reporting Fraud**

- Fraud reporting hotline
- Website Fraud and Abuse Complaint Form

### **Reporting Review and Analysis**

- Utilization reports
- Data mining
- Intake from other Medicaid program units

## **Third Party Recovery**

### **Reviews and Oversight**

- The Office of Third Party Recovery and the Legal department assigned by the Office of the Attorney General collect funds through estate recovery and from third parties by reason of assignment or subrogation.

### **Reviews and Oversight**

- Provider audits
- Recipient identification card abuse investigations
- Review National Correct Coding Initiatives edits
- Nurse reviews for medical necessity
- Analytic consultant on contract staff

### **Database Reviews**

- Provider Enrollment Chain of Ownership

### **Reviews and Oversight**

- **In collaboration with the Legal staff and HMS Casualty, the total amount of funds recovered in FY 2025 were: \$11,836,028**

## **CONTACT US**

### **More Information**

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