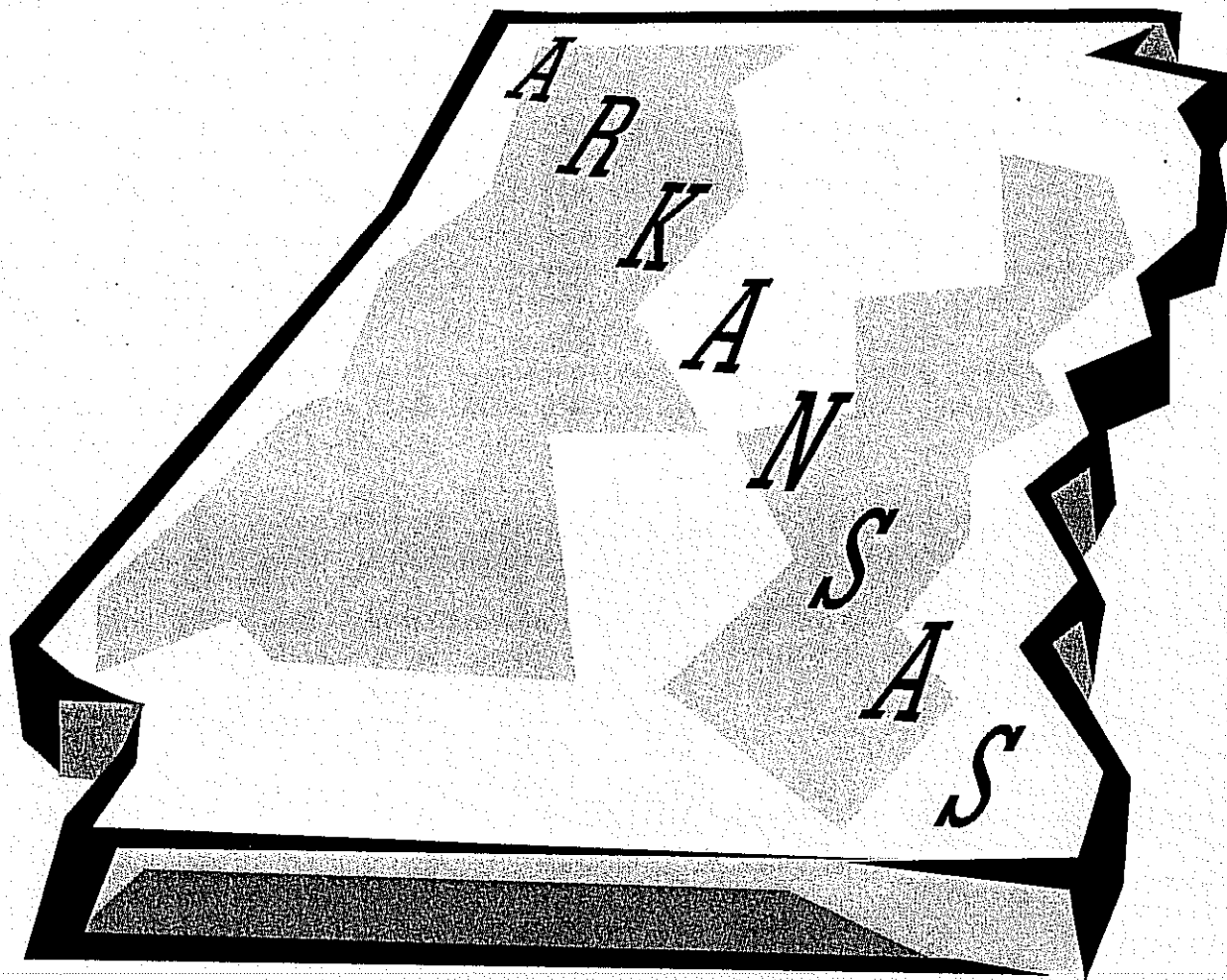
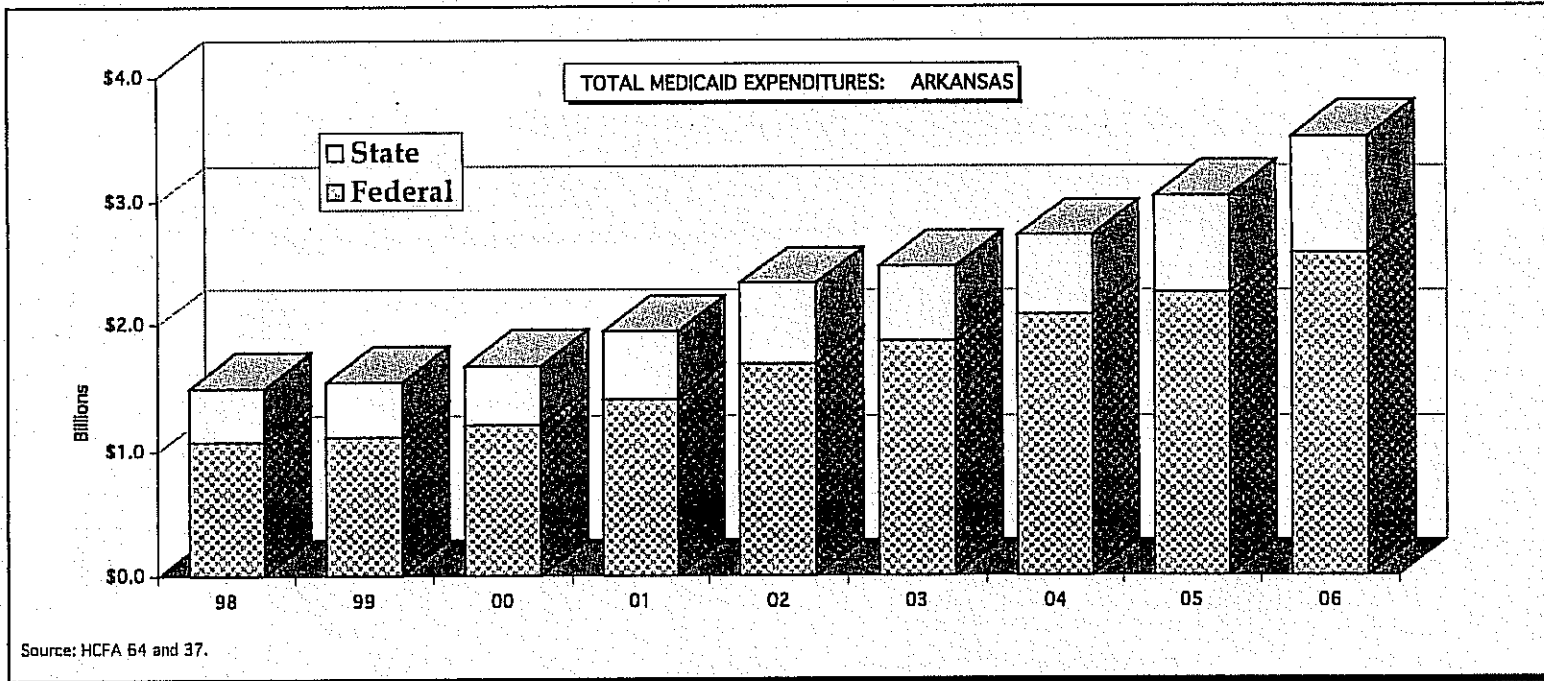


STATE MEDICAID PROFILE



SOUTHERN REGION MEDICAID PROFILE



State profile revised to reflect MSIS statistical data as reported by CMS for federal fiscal years 99 through 04.

	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05**	FFY 06**	Annual Rate of Change	Total Change 98-06
Medicaid Payments	\$1,407,017,402	\$1,460,724,048	\$1,581,361,881	\$1,854,913,659	\$2,239,645,980	\$2,366,496,902	\$2,616,597,268	\$2,928,979,861	\$3,387,291,000	11.6%	140.7%
Federal Share	\$1,025,895,613	\$1,066,890,276	\$1,156,198,568	\$1,356,367,805	\$1,631,630,198	\$1,799,239,993	\$2,017,735,788	\$2,194,966,729	\$2,508,819,000	11.8%	144.5%
State Share	\$381,121,789	\$393,833,772	\$425,163,313	\$498,545,854	\$608,015,782	\$567,256,909	\$598,861,480	\$734,013,132	\$878,472,000	11.0%	130.5%
Administrative Costs	\$86,229,103	\$84,855,266	\$94,524,637	\$95,198,228	\$103,472,005	\$111,158,811	\$113,974,604	\$119,248,164	\$132,437,000	5.5%	53.6%
Federal Share	\$51,779,665	\$49,839,110	\$56,421,645	\$56,886,002	\$63,699,995	\$73,460,178	\$70,832,049	\$73,247,062	\$82,441,000	6.0%	59.2%
State Share	\$34,449,438	\$35,016,156	\$38,102,992	\$38,312,226	\$39,772,010	\$37,698,633	\$43,142,555	\$46,001,102	\$49,996,000	4.8%	45.1%
Admin. Costs as % of Payments	6.13%	5.81%	5.98%	5.13%	4.62%	4.70%	4.36%	4.07%	3.91%		
Federal Match Rate*	73.29%	72.84%	72.85%	73.02%	72.64%	74.28%	74.67%	74.75%	73.77%		

*Rate shown is for Medicaid payments only. The FMAP (Federal Medical Assistance Percentage) is based on the relationship between each state's per capita personal income and that of the nation as a whole for the three most recent years. Federal share of state administrative costs is usually 50 percent or 75 percent, depending on function and whether or not medical personnel are used. **Federal Fiscal Years 05 and 06 reflect latest estimates reported by each state (CMS 37).

SOUTHERN REGION MEDICAID PROFILE

STATE FINANCING

	Payments		Administration	
	FFY 98	FFY 04	FFY 98	FFY 04
State General Fund	\$381,121,789	\$454,048,687	\$34,449,438	\$43,142,555
Local Funds	\$0	\$0	\$0	\$0
Provider Taxes	\$0	\$44,843,831	\$0	\$0
Donations*	\$0	\$690,750	\$0	\$0
Other	\$0	\$99,278,212	\$0	\$0
Total State Share	\$381,121,789	\$598,861,480	\$34,449,438	\$43,142,555

*Permissible donations from the Campaign for Healthier Babies and Outstationed Eligibility Workers Programs.

Provider Taxes Currently in Place (FFY 04)		
	Tax Rate	Amount
Quality Assurance Fee on Nursing Homes		\$44,843,831
10/01/03 - 06/30/04	\$7.13 per census day	
07/01/04 - 09/30/04	\$7.78 per census day	

DISPROPORTIONATE SHARE HOSPITAL (DSH) PAYMENTS

	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06**	Annual Change
General Hospitals	\$1,189,520	\$2,992,782	\$2,256,113	\$21,865,252	\$14,529,026	\$30,948,639	\$24,135,625	\$36,904,368	\$36,791,615	59.2%
Mental Hospitals	\$466,593	\$259,500	\$489,254	\$862,932	\$0	\$638,035	\$800,733	\$775,354	\$819,000	9.0%
Total	\$1,656,113	\$3,252,282	\$2,745,367	\$22,728,184	\$14,529,026	\$31,586,674	\$24,936,358	\$37,679,722	\$37,610,615	54.7%

SELECTED ELIGIBILITY CRITERIA

	At 10/1/04	% of FPL*
TANF-Temporary Assistance for Needy Families (Family of 3)		
Income Eligibility Standard	\$223	17.1%
Payment Standard	\$204	15.6%
Maximum Payment	\$204	15.6%
Medically Needy Program (Family of 3)		
Income Eligibility Standard	\$275	
Resource Standard	\$3,100	
Pregnant Women, Children and Infants (% of FPL*)		
Pregnant women and infants		133.0%
Children 1 to 5		133.0%
Children 6 to 18		100.0%
SSI Eligibility Levels		
Income:		
Single Person	\$564	72.7%
Couple	\$846	81.3%
Resources:		
Single Person	\$2,000	
Couple	\$3,000	

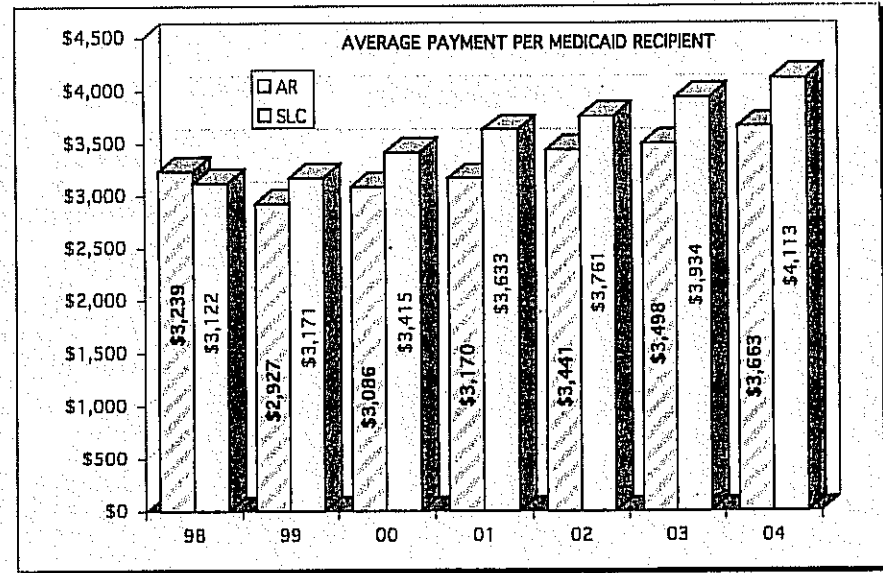
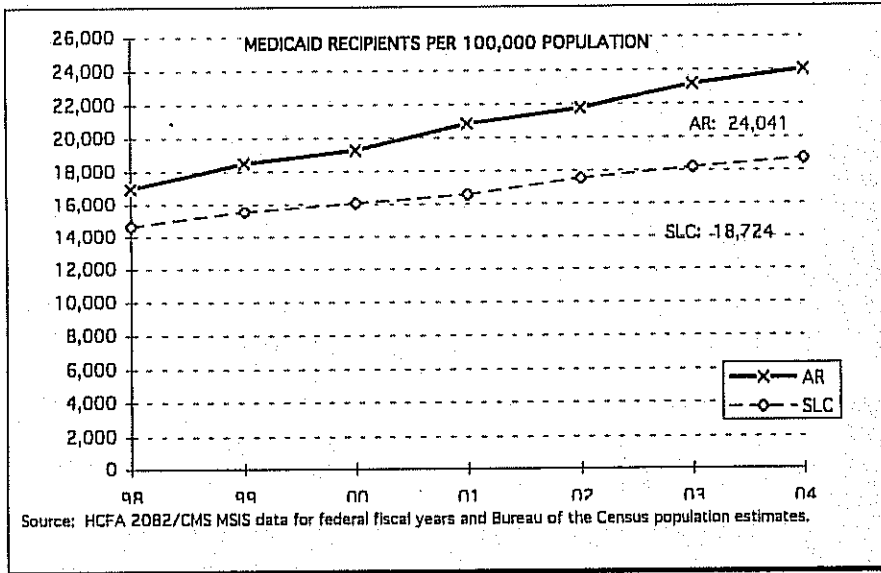
DEMOGRAPHIC DATA & POVERTY INDICATORS (2004)

		Rank in U.S.
State population—July 1, 2004*	2,752,629	32
Per capita personal income**	\$25,725	49
Median household income**	\$33,259	49
Population below Federal Poverty Level on July 1, 2003*	509,236	
Percent of total state population	18.5%	1
Population without health insurance coverage*	465,000	29
Percent of total state population	16.9%	12
Recipients of Food Stamps***	346,095	25
Households receiving Food Stamps***	140,151	26
Total value of issuance***	\$346,308,177	25
Average monthly benefit per recipient	\$83.38	26
Average monthly benefit per household	\$205.91	
Monthly recipients of Temporary Assistance to Needy Families (TANF)****	9,188	38
Total TANF payments****	\$19,339,558	38
Average monthly payment per recipient	\$175.41	38
Maximum monthly payment per family of 3	\$204.00	44

*Current federal poverty level is \$9,310 per year for a single person, \$12,490 for a family of two and \$15,670 for a family of three. Table above shows monthly income levels.

*Bureau of the Census. **Bureau of Economic Analysis. ***USDA. ****USDHHS.

SOUTHERN REGION MEDICAID PROFILE



DATA BY TYPE OF SERVICES (Includes Fee-For-Service and Waivers)

RECIPIENTS BY TYPE OF SERVICES

	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	Annual Change
01. General Hospital	72,883	73,746	72,791	80,140	84,745	107,024	92,666	-4.1%
02. Mental Hospital	3,146	3,376	2,912	4,023	5,512	5,218	5,245	8.9%
03. Skilled and Intermediate (non-MR) Care Nursing	21,486	20,699	20,350	19,880	20,658	20,449	19,777	-1.4%
04. Intermediate Care for Mentally Retarded	1,867	1,838	1,842	1,822	1,809	1,818	1,790	-0.7%
05. Physician Services	271,538	327,769	339,780	372,042	411,601	444,459	473,094	9.7%
06. Dental Services	37,433	62,755	67,765	79,539	96,539	111,534	123,080	21.9%
07. Other Practitioners	77,588	104,736	108,683	118,473	129,792	109,713	119,028	7.4%
08. Outpatient Hospital	160,321	174,952	179,151	202,000	225,992	248,633	269,123	9.0%
09. Clinic Services	80,534	138,491	147,131	179,341	186,387	224,628	231,553	19.2%
10. Lab and X-Ray	120,126	136,100	135,454	142,421	164,723	173,329	230,216	11.5%
11. Home Health	9,966	9,859	8,753	8,285	7,867	8,197	7,025	-5.7%
12. Prescribed Drugs	262,907	280,573	290,749	321,920	356,060	398,819	422,439	8.2%
13. Family Planning	50,089	3,533	2,878	3,601	23,128	25,252	25,997	-10.4%
14. Early & Periodic Screening, Diagnosis & Treatment	100,589	0	0	0	110,187	120,257	119,651	2.9%
15. Other Care	100,502	102,624	52,087	126,370	166,386	100,063	99,409	-0.2%
16. Personal Care Support Services	30,524	56,359	40,452	55,980	45,847	39,184	31,713	0.6%
17. Home/Community Based Waiver Services	9,369	0	0	0	0	30	89	-54.0%
18. Prepaid Health Care	244,768	0	0	0	425,805	470,687	508,275	13.0%
19. Primary Care Case Management (PCCM) Services	243,266	383,649	404,371	431,579	363,993	395,297	420,180	9.5%
Total*	424,727	466,417	489,325	531,533	581,606	624,722	661,759	7.7%

*Annual totals for each service and for the grand total reflect unduplicated recipient counts. The grand total, therefore, may not equal the sum of the totals for each service.

SOUTHERN REGION MEDICAID PROFILE

PAYMENTS BY TYPE OF SERVICES	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	Annual	Share of Total
								Change	FFY 04
01. General Hospital	\$178,532,888	\$166,239,639	\$181,602,682	\$199,917,194	\$233,756,777	\$261,162,545	\$291,443,021	8.5%	12.0%
02. Mental Hospital	\$54,470,602	\$51,912,145	\$41,875,551	\$68,810,890	\$87,944,979	\$108,649,942	\$115,271,682	13.3%	4.8%
03. Skilled and Intermediate (non-MR) Care Nursing	\$300,012,732	\$229,645,982	\$285,612,665	\$284,583,476	\$411,569,354	\$444,032,516	\$480,789,922	8.2%	19.8%
04. Intermediate Care for Mentally Retarded	\$108,852,817	\$69,290,340	\$87,918,928	\$104,142,616	\$120,065,393	\$120,704,986	\$132,437,933	3.3%	5.5%
05. Physician Services	\$120,802,774	\$138,220,547	\$154,582,481	\$166,095,692	\$174,852,040	\$190,780,552	\$210,607,345	9.7%	8.7%
06. Dental Services	\$7,789,946	\$14,817,664	\$16,275,309	\$19,766,101	\$24,351,586	\$28,718,488	\$32,929,573	27.2%	1.4%
07. Other Practitioners	\$7,022,549	\$11,986,729	\$12,578,431	\$14,064,856	\$15,259,350	\$9,654,297	\$10,644,720	7.2%	0.4%
08. Outpatient Hospital	\$37,099,507	\$44,535,556	\$47,716,392	\$52,493,897	\$61,635,174	\$72,738,613	\$79,314,241	13.5%	3.3%
09. Clinic Services	\$128,802,658	\$179,272,026	\$166,264,401	\$207,728,405	\$240,911,804	\$270,590,082	\$297,570,670	15.0%	12.3%
10. Lab and X-Ray	\$11,348,972	\$12,092,233	\$12,605,188	\$14,202,822	\$17,313,698	\$19,434,043	\$22,421,753	12.0%	0.9%
11. Home Health	\$13,985,570	\$14,456,325	\$11,880,729	\$10,737,036	\$10,471,199	\$9,892,116	\$12,873,430	-1.4%	0.5%
12. Prescribed Drugs	\$150,891,615	\$182,862,001	\$209,933,612	\$248,392,084	\$279,879,349	\$325,295,608	\$393,952,709	17.3%	16.3%
13. Family Planning	\$8,389,414	\$1,731,320	\$1,323,208	\$1,777,398	\$3,948,344	\$4,123,990	\$4,276,200	-10.6%	0.2%
14. Early & Periodic Screening, Diagnosis & Treatment	\$55,748,372	\$0	\$0	\$0	\$61,468,942	\$63,881,633	\$53,816,719	-0.6%	2.2%
15. Other Care	\$54,129,482	\$105,770,596	\$119,530,281	\$139,064,573	\$144,670,913	\$152,482,911	\$180,816,484	22.3%	7.5%
16. Personal Care Support Services	\$84,465,101	\$125,829,735	\$124,680,340	\$132,113,753	\$92,160,438	\$62,941,155	\$60,077,224	-5.5%	2.5%
17. Home/Community Based Waiver Services	\$43,604,265	\$0	\$0	\$0	\$0	\$139,569	\$761,350	-49.1%	0.0%
18. Prepaid Health Care	\$4,359,975	\$0	\$0	\$0	\$11,479,717	\$29,471,575	\$32,427,902	39.7%	1.3%
19. Primary Care Case Management (PCCM) Services	\$5,488,182	\$16,760,279	\$35,699,644	\$20,826,973	\$9,545,124	\$10,779,126	\$11,739,420	13.5%	0.5%
Total (excludes DSH pymts, pharmacy rebates, & other adjs.)	\$1,375,797,421	\$1,365,423,117	\$1,510,079,842	\$1,684,717,766	\$2,001,284,181	\$2,185,473,747	\$2,424,172,298	9.9%	100.0%

AVERAGE PAYMENTS PER RECIPIENT BY TYPE OF SERVICES

								(+) or (-) SIC	Avg. FLY 04
01. General Hospital	\$2,449.58	\$2,254.22	\$2,494.85	\$2,494.60	\$2,758.35	\$2,440.22	\$3,145.09	4.3%	-42.0%
02. Mental Hospital	\$17,314.24	\$15,376.82	\$14,380.34	\$17,104.37	\$15,955.18	\$20,822.14	\$21,977.44	4.1%	16.0%
03. Skilled and Intermediate (non-MR) Care Nursing	\$13,963.17	\$11,094.54	\$14,035.02	\$14,315.06	\$19,923.00	\$21,714.14	\$24,310.56	9.7%	8.5%
04. Intermediate Care for Mentally Retarded	\$58,303.60	\$37,698.77	\$47,730.15	\$57,158.41	\$66,371.14	\$66,394.38	\$73,987.67	4.1%	-8.0%
05. Physician Services	\$444.88	\$421.70	\$454.95	\$446.44	\$424.81	\$429.24	\$445.17	0.0%	-18.9%
06. Dental Services	\$208.10	\$236.12	\$240.17	\$248.51	\$252.25	\$257.49	\$267.55	4.3%	-21.1%
07. Other Practitioners	\$90.51	\$114.45	\$115.74	\$118.72	\$117.57	\$88.00	\$89.43	-0.2%	-52.9%
08. Outpatient Hospital	\$231.41	\$254.56	\$266.35	\$259.87	\$272.73	\$292.55	\$294.71	4.1%	-52.1%
09. Clinic Services	\$1,599.36	\$1,294.47	\$1,130.04	\$1,158.29	\$1,292.54	\$1,204.61	\$1,285.11	-3.6%	99.1%
10. Lab and X-Ray	\$94.48	\$88.85	\$93.06	\$99.72	\$105.11	\$112.12	\$97.39	0.5%	-50.2%
11. Home Health	\$1,403.33	\$1,466.31	\$1,357.33	\$1,295.96	\$1,331.03	\$1,206.80	\$1,832.52	4.5%	-37.7%
12. Prescribed Drugs	\$573.94	\$651.74	\$722.04	\$771.60	\$786.05	\$815.65	\$932.57	8.4%	-35.3%
13. Family Planning	\$167.49	\$490.04	\$459.77	\$493.58	\$170.72	\$163.31	\$164.49	-0.3%	-85.7%
14. Early & Periodic Screening, Diagnosis & Treatment	\$554.22	\$0.00	\$0.00	\$0.00	\$557.86	\$531.21	\$449.78	-3.4%	2.4%
15. Other Care	\$538.59	\$1,030.66	\$2,294.82	\$1,100.46	\$869.49	\$1,523.87	\$1,818.91	22.5%	-5.0%
16. Personal Care Support Services	\$2,767.17	\$2,232.65	\$3,082.18	\$2,360.02	\$2,010.17	\$1,606.30	\$1,894.40	-6.1%	40.9%
17. Home/Community Based Waiver Services	\$4,654.10	\$0.00	\$0.00	\$0.00	\$0.00	\$4,652.30	\$8,554.49	10.7%	194.4%
18. Prepaid Health Care	\$17.81	\$0.00	\$0.00	\$0.00	\$26.96	\$62.61	\$63.80	23.7%	-94.6%
19. Primary Care Case Management (PCCM) Services	\$22.56	\$43.69	\$88.28	\$48.26	\$26.22	\$27.27	\$27.94	3.6%	3.5%
Total (Average)	\$3,239.25	\$2,927.47	\$3,086.05	\$3,169.55	\$3,440.96	\$3,498.31	\$3,663.23	2.1%	-10.9%

TOTAL PER CAPITA EXPENDITURES

\$595.80	\$612.55	\$660.24	\$764.34	\$876.46	\$920.35	\$991.99	8.9%	13.2%
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Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-04.

SOUTHERN REGION MEDICAID PROFILE
DATA BY OTHER CHARACTERISTICS

RECIPIENTS BY OTHER CHARACTERISTICS

	<u>FFY 98</u>	<u>FFY 99</u>	<u>FFY 00</u>	<u>FFY 01</u>	<u>FFY 02</u>	<u>FFY 03</u>	<u>FFY 04</u>	<u>Annual</u> <u>Change</u>	<u>Share of Total</u> <u>FFY 04</u>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	157,450	147,556	148,933	142,944	160,829	160,471	159,868	0.3%	24.2%
Poverty Related Eligibles	162,638	126,943	238,416	172,911	235,568	273,833	300,359	10.8%	45.4%
Medically Needy	33,542	29,024	25,630	20,411	14,797	15,220	17,141	-10.6%	2.6%
Other Eligibles	63,045	136,497	51,106	164,117	59,041	59,384	57,113	-1.6%	8.6%
Maintenance Assistance Status Unknown	8,052	26,397	25,240	31,150	111,371	115,814	127,278	58.4%	19.2%
Total	424,727	466,417	489,325	531,533	581,606	624,722	661,759	7.7%	100.0%
By Basis of Eligibility									
Aged, Blind, or Disabled	147,253	146,855	146,401	146,337	157,912	163,416	168,122	2.2%	25.4%
Children	179,405	202,434	223,522	256,837	258,698	364,287	389,372	13.8%	58.8%
Foster Care Children	4,994	4,850	5,427	5,735	6,936	6,871	6,638	4.9%	1.0%
Adults	85,023	85,881	88,735	91,474	46,686	90,147	97,101	2.2%	14.7%
Basis of Eligibility Unknown	8,052	26,397	25,240	31,150	111,374	1	526	-36.5%	0.1%
Total	424,727	466,417	489,325	531,533	581,606	624,722	661,759	7.7%	100.0%
By Age									
Under Age 1	16,248	16,275	16,635	18,151	19,999	20,207	21,916	5.1%	3.3%
Age 1 to 5	77,228	78,069	83,088	93,749	111,186	120,663	125,502	8.4%	19.0%
Age 6 to 14	93,906	102,944	112,727	128,330	153,335	166,284	178,470	11.3%	27.0%
Age 15 to 20	48,658	56,483	61,727	67,906	81,206	88,270	95,280	11.9%	14.4%
Age 21 to 44	88,600	91,536	94,261	96,354	110,957	119,929	127,888	6.3%	19.3%
Age 45 to 64	34,820	35,054	36,216	37,688	43,325	46,860	50,978	6.6%	7.7%
Age 65 to 74	21,708	20,660	20,740	20,247	20,789	21,586	21,867	0.1%	3.3%
Age 75 to 84	22,996	21,506	21,383	21,140	22,178	22,213	21,927	-0.8%	3.3%
Age 85 and Over	19,644	17,505	17,320	16,830	18,631	18,710	17,931	-1.5%	2.7%
Age Unknown	919	26,385	25,228	31,138	0	0	0	-100.0%	0.0%
Total	424,727	466,417	489,325	531,533	581,606	624,722	661,759	7.7%	100.0%
By Race									
White	257,363	282,561	296,433	321,928	353,884	380,040	403,788	7.8%	61.0%
Black	141,972	155,852	162,127	176,206	184,594	193,487	198,257	5.7%	30.0%
Hispanic, American Indian or Asian	7,145	7,959	10,663	11,471	20,720	26,817	33,666	29.5%	5.1%
Other/Unknown	18,247	20,045	20,102	21,928	22,408	24,378	26,048	6.1%	3.9%
Total*	424,727	466,417	489,325	531,533	581,606	624,722	661,759	7.7%	100.0%
By Sex									
Female	266,608	292,521	304,454	330,687	352,282	377,510	397,442	6.9%	60.1%
Male	157,095	172,793	184,750	200,629	229,090	246,341	262,434	8.9%	39.7%
Unknown	1,024	1,103	122	217	234	871	1,883	10.7%	0.3%
Total	424,727	466,417	489,325	531,533	581,606	624,722	661,759	7.7%	100.0%

Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-04.

SOUTHERN REGION MEDICAID PROFILE

PAYMENTS BY OTHER CHARACTERISTICS

	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	Annual Change	Share of Total FFY 04
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$713,252,376	\$632,206,794	\$666,324,196	\$730,986,625	\$821,092,916	\$869,100,814	\$950,735,066	4.9%	39.2%
Poverty Related Eligibles	\$223,104,306	\$174,523,368	\$253,301,116	\$242,847,484	\$346,533,100	\$417,780,177	\$486,453,755	13.9%	20.1%
Medically Needy	\$79,146,711	\$58,773,338	\$57,701,019	\$55,578,469	\$46,371,147	\$51,864,561	\$56,892,191	-5.4%	2.3%
Other Eligibles	\$596,207,736	\$482,629,237	\$518,240,326	\$635,740,058	\$715,255,691	\$762,112,544	\$829,015,894	5.6%	34.2%
Maintenance Assistance Status Unknown	(\$235,913,708)	\$17,290,380	\$14,513,185	\$19,565,130	\$72,031,327	\$84,615,651	\$101,075,392	n/a	4.2%
Total	\$1,375,797,421	\$1,365,423,117	\$1,510,079,842	\$1,684,717,766	\$2,001,284,181	\$2,185,473,747	\$2,424,172,298	9.9%	100.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$1,221,201,053	\$987,423,406	\$1,107,973,513	\$1,206,890,177	\$1,425,140,063	\$1,531,657,304	\$1,692,959,446	5.6%	69.8%
Children	\$262,322,716	\$241,812,906	\$262,785,694	\$314,570,015	\$376,832,033	\$497,294,044	\$560,023,927	13.5%	23.1%
Foster Care Children	\$28,862,820	\$30,104,004	\$29,752,919	\$38,663,242	\$45,564,122	\$43,756,351	\$44,717,700	7.6%	1.8%
Adults	\$99,324,540	\$88,792,421	\$95,054,531	\$105,029,202	\$81,710,777	\$112,763,334	\$126,419,946	4.1%	5.2%
Basis of Eligibility Unknown	(\$235,913,708)	\$17,290,380	\$14,513,185	\$19,565,130	\$72,037,186	\$2,714	\$51,279	n/a	0.0%
Total	\$1,375,797,421	\$1,365,423,117	\$1,510,079,842	\$1,684,717,766	\$2,001,284,181	\$2,185,473,747	\$2,424,172,298	9.9%	100.0%
By Age									
Under Age 1	\$69,985,612	\$51,741,196	\$60,788,955	\$64,729,966	\$80,286,522	\$83,909,961	\$103,940,616	6.8%	4.3%
Age 1 to 5	\$170,587,004	\$160,525,673	\$170,247,526	\$194,577,536	\$224,120,406	\$247,794,901	\$274,603,204	8.3%	11.3%
Age 6 to 14	\$157,649,124	\$155,005,374	\$160,226,061	\$203,690,069	\$249,556,847	\$273,263,014	\$302,579,465	11.5%	12.5%
Age 15 to 20	\$121,005,431	\$108,347,735	\$116,714,456	\$140,132,414	\$181,624,235	\$211,356,444	\$229,038,655	11.2%	9.4%
Age 21 to 44	\$350,725,626	\$257,741,554	\$281,573,213	\$318,574,809	\$362,992,945	\$391,157,902	\$434,658,783	3.6%	17.9%
Age 45 to 64	\$239,447,900	\$199,268,169	\$225,192,388	\$255,947,487	\$308,256,998	\$346,303,919	\$394,595,604	8.7%	16.3%
Age 65 to 74	\$117,089,152	\$99,769,182	\$113,345,064	\$114,563,471	\$131,227,070	\$141,139,694	\$158,247,022	5.1%	6.5%
Age 75 to 84	\$181,078,028	\$148,227,792	\$172,546,148	\$176,720,727	\$213,874,550	\$226,516,838	\$245,383,283	5.2%	10.1%
Age 85 and Over	\$213,433,778	\$167,489,321	\$194,928,037	\$196,212,819	\$249,344,608	\$264,031,071	\$281,125,663	4.7%	11.6%
Age Unknown	(\$245,204,234)	\$17,307,121	\$14,517,994	\$19,568,468	\$0	\$3	\$3	n/a	0.0%
Total	\$1,375,797,421	\$1,365,423,117	\$1,510,079,842	\$1,684,717,766	\$2,001,284,181	\$2,185,473,747	\$2,424,172,298	9.9%	100.0%
By Race									
White	\$1,073,552,240	\$1,066,797,321	\$981,314,155	\$1,099,758,919	\$1,305,570,207	\$1,428,210,114	\$1,578,397,789	6.6%	65.1%
Black	\$425,077,863	\$422,434,411	\$390,814,103	\$437,023,703	\$499,477,618	\$539,651,359	\$589,879,517	5.6%	24.3%
Hispanic, American Indian or Asian	\$14,367,033	\$14,235,308	\$17,019,449	\$19,256,593	\$31,389,363	\$38,766,655	\$51,922,952	23.9%	2.1%
Other/Unknown	(\$137,199,715)	(\$138,043,923)	\$120,932,135	\$128,678,551	\$164,846,993	\$178,845,619	\$203,972,040	n/a	8.4%
Total*	\$1,375,797,421	\$1,365,423,117	\$1,510,079,842	\$1,684,717,766	\$2,001,284,181	\$2,185,473,747	\$2,424,172,298	9.9%	100.0%
By Sex									
Female	\$950,004,425	\$943,850,995	\$902,802,265	\$1,009,701,810	\$1,176,603,655	\$1,279,453,295	\$1,407,663,612	6.8%	58.1%
Male	\$670,651,186	\$666,433,302	\$606,807,796	\$680,965,619	\$824,133,799	\$903,981,296	\$1,012,908,899	7.1%	41.8%
Unknown	(\$244,858,190)	(\$244,861,180)	\$469,781	(\$5,949,663)	\$546,727	\$2,039,156	\$3,599,787	n/a	0.1%
Total	\$1,375,797,421	\$1,365,423,117	\$1,510,079,842	\$1,684,717,766	\$2,001,284,181	\$2,185,473,747	\$2,424,172,298	9.9%	100.0%

Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-04.

Southern Legislative Conference
Louisiana Legislative Fiscal Office

SOUTHERN REGION MEDICAID PROFILE

AVERAGE PAYMENT PER RECIPIENT BY OTHER CHARACTERISTICS

	FFY 97	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	Annual Change	Above (+) or Below (-) SLIC Avg. FFY 04
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$4,530.02	\$4,284.52	\$4,473.99	\$5,113.80	\$5,105.38	\$5,415.94	\$5,947.00	4.6%	13.2%
Poverty Related Eligibles	\$1,371.78	\$1,374.82	\$1,062.43	\$1,404.47	\$1,471.05	\$1,525.68	\$1,619.57	2.8%	-20.8%
Medically Needy	\$2,359.63	\$2,024.99	\$2,251.31	\$2,722.97	\$3,133.82	\$3,407.66	\$3,319.07	5.9%	-46.5%
Other Eligibles	\$9,456.86	\$3,535.82	\$10,140.50	\$3,873.70	\$12,114.56	\$12,833.63	\$14,515.36	7.4%	100.0%
Maintenance Assistance Status Unknown	(\$29,299)	\$655	\$575	\$628	\$646.77	\$730.62	\$794.13	n/a	-70.3%
Total	\$3,239	\$2,927	\$3,086	\$3,170	\$3,440.96	\$3,498.31	\$3,663.23	2.1%	-10.9%
By Basis of Eligibility									
Aged, Blind or Disabled	\$8,293	\$6,724	\$7,568	\$8,247	\$9,024.90	\$9,372.75	\$10,069.83	3.3%	-6.6%
Children	\$1,462	\$1,195	\$1,176	\$1,225	\$1,456.65	\$1,365.12	\$1,438.27	-0.3%	-2.5%
Foster Care Children	\$5,779	\$6,207	\$5,482	\$6,742	\$6,569.22	\$6,868.27	\$6,736.62	2.6%	-2.1%
Adults	\$1,168	\$1,034	\$1,071	\$1,148	\$1,750.22	\$1,250.88	\$1,301.94	1.8%	-50.4%
Basis of Eligibility Unknown	(\$29,299)	\$655	\$575	\$628	\$646.80	\$2,714.00	\$97.49	n/a	-96.6%
Total	\$3,239	\$2,927	\$3,086	\$3,170	\$3,440.96	\$3,498.31	\$3,663.23	2.1%	-10.9%
By Age									
Under Age 1	\$4,307	\$3,179	\$3,654	\$3,566	\$4,014.53	\$4,152.52	\$4,742.68	1.6%	27.6%
Age 1 to 5	\$2,209	\$2,056	\$2,049	\$2,076	\$2,015.73	\$2,053.61	\$2,188.04	-0.2%	21.7%
Age 6 to 14	\$1,679	\$1,506	\$1,421	\$1,587	\$1,627.53	\$1,643.35	\$1,695.41	0.2%	1.1%
Age 15 to 20	\$2,487	\$1,918	\$1,891	\$2,064	\$2,236.59	\$2,394.43	\$2,403.85	-0.6%	-9.6%
Age 21 to 44	\$3,959	\$2,816	\$2,987	\$3,306	\$3,271.47	\$3,261.58	\$3,398.75	-2.5%	-29.6%
Age 45 to 64	\$6,877	\$5,685	\$6,218	\$6,791	\$7,114.99	\$7,390.18	\$7,740.51	2.0%	-19.6%
Age 65 to 74	\$5,394	\$4,829	\$5,465	\$5,658	\$6,312.33	\$6,538.48	\$7,236.80	5.0%	-2.0%
Age 75 to 84	\$7,874	\$6,892	\$8,069	\$8,360	\$9,643.55	\$10,197.49	\$11,190.92	6.0%	0.3%
Age 85 and Over	\$10,865	\$9,568	\$11,255	\$11,659	\$13,383.32	\$14,111.76	\$15,678.19	6.3%	-8.8%
Age Unknown	(\$266,816)	\$656	\$575	\$628	\$0.00	\$0.00	\$0.00	n/a	-100.0%
Total	\$3,239	\$2,927	\$3,086	\$3,170	\$3,440.96	\$3,498.31	\$3,663.23	2.1%	-10.9%
By Race									
White	\$4,171	\$3,775	\$3,310	\$3,416	\$3,689.26	\$3,758.05	\$3,908.98	-1.1%	-21.8%
Black	\$2,994	\$2,710	\$2,411	\$2,480	\$2,705.82	\$2,789.08	\$2,975.33	-0.1%	-13.1%
Hispanic, American Indian or Asian	\$2,011	\$1,789	\$1,596	\$1,679	\$1,514.93	\$1,445.60	\$1,542.30	-4.3%	-40.2%
Other/Unknown	(\$7,519)	(\$6,887)	\$6,016	\$5,868	\$7,356.61	\$7,336.35	\$7,830.62	n/a	58.1%
Total	\$3,239	\$2,927	\$3,086	\$3,170	\$3,440.96	\$3,498.31	\$3,663.23	2.1%	-10.9%
By Sex									
Female	\$3,563	\$3,227	\$2,965	\$3,053	\$3,339.95	\$3,389.19	\$3,541.81	-0.1%	-15.5%
Male	\$4,269	\$3,857	\$3,284	\$3,394	\$3,597.42	\$3,669.63	\$3,859.67	-1.7%	-3.6%
Unknown	(\$239,119)	(\$221,996)	\$3,865	(\$27,418)	\$2,336.44	\$2,341.17	\$1,911.73	n/a	-53.3%
Total	\$3,239	\$2,927	\$3,086	\$3,170	\$3,440.96	\$3,498.31	\$3,663.23	2.1%	-10.9%

Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-04.

SOUTHERN REGION MEDICAID PROFILE

ADDITIONAL STATE HEALTH CARE INFORMATION

Sources: "Issue Briefs", Health Policy Tracking Service, January 2005; "Medicaid Services State by State", CMS, October 2004; "State Health Facts", The Henry Kaiser Foundation, January 2005; and the state Medicaid Website.

Waivers

Several Demonstrations and Waivers have established a coordinated system of Medicaid services and providers. These include the following:

- The Primary Care Case Management Program, under Title XIX, Section 1915 (b), of the Social Security Act, which also provides case-management services for most beneficiaries, except for dual Medicare/Medicaid eligibles, has been operating since February, 1994. Under this program, Medicaid recipients must select a primary care physician (PCP). Currently, approximately 320,000 Medicaid recipients are enrolled in the PCP managed care program.
- The Non-Emergency Transportation Waiver, under Title XIX, Section 1915(b), of the Social Security Act, which requires beneficiaries to use the contracted transportation broker in their area for non-emergency transportation services, was implemented March 1, 1998.
- The Women's Health Demonstration (family planning Services), under Section 1115 of the Social Security Act, which provides services for women of childbearing age who have a family income at or below 200%* of the federal poverty guidelines, was implemented September 1, 1997. *Increased from 133% to 200% FPL, effective 8-1-03.
- ARKids First-B Demonstration, under Section 1115 of the Social Security Act, which provides services for children 18 and under whose family incomes are at or below 200% of the federal poverty guidelines, was implemented September 1, 1997. Includes provisions for copayments/coinsurance for most services. "Well health" services are excluded from cost-sharing requirements.
- Independent Choices, a cash and counseling demonstration operating under Section 1115 of the Social Security Act, was implemented November 1, 1998. This demonstration offers cash allowance and counseling services in lieu of traditionally provided personal care services.
- TEFRA, a demonstration operating under Section 1115 of the Social Security Act, provides the full range of Medicaid services to children age 18 and under who have a substantial disability. The demonstration, implemented January 1, 2003, requires a family sliding-scale premium for families whose income is greater than \$25,000 per year.

Several Home and Community Based Service Waivers, under Section 1915 (c), enable the state to provide long-term care services to people who otherwise would require institutionalization. These waivers include:

- Developmental Disabilities - Alternative Community Services waiver: Serves beneficiaries who meet the ICF/MR nursing home level of care and who experience various health and social problems. It has been operating since July 1, 1991.
- Aged and Disabled, ElderChoices: Serves 5,478 people, operating since July 1, 1991.
- Home and Community Based Waiver, Alternatives for Adults with Physical Disabilities, which provides services to the physically disabled on SSI and other individuals in need of nursing home level of care, ages 21 through 64, serves 1,110 people. Implemented July 1, 1997.
- Alternatives for Adults with Physical Disabilities HCBS waiver, which provides services to the physically disabled on SSI and other individuals in need of nursing home level care, ages 21 through 64, implemented in July 1, 1997.
- Living Choices Assisted Living HCBS waiver, implemented January 1, 2003, offers an alternative to private dwelling or nursing home care. Bundled Medicaid services are provided to beneficiaries in an Assisted Living Facility.

Managed Care

- Any Willing Provider Clause: No

SOUTHERN REGION MEDICAID PROFILE

Coverage for Targeted Population

- The Uninsured: Arkansas does not have an indigent care program.

Cost Containment Measures

- Certificate of Need Program and moratorium on expansion of nursing home and residential care beds are no longer in effect.

Medicaid

- 40 optional services are offered.
- Enacted legislation in 2001 that requires Medicaid to provide coverage to women that have been screened and diagnosed with breast or cervical cancer Implemented December 1, 2001. (Federal option made available by the Breast and Cervical Cancer Prevention and Treatment Act of 2000).
- Enacted legislation in 2001 that authorizes the Arkansas Department of Health and Human Services to apply for a Medicaid waiver to provide for a limited pharmacy benefit for Medicare-eligible individuals who do not have prescription drug coverage. CMS did not approve the waiver; they suggested a Medicaid State Plan Amendment (SPA). The SPA to provide the full range of benefits to individuals age 65 and older at 75% of the FPL was implemented November 1, 2002; increased to 80% FPL effective January 1, 2003.
- Enacted additional legislation in 2001 relative to Medicaid eligibility as follows:
 1. Prohibits eligibility regulations for ARKids from including an assets or resource test for children or families of children age 18 or younger. Implemented 8-13-01.
 2. Continues Medicaid and food stamp benefits without the need for reapplication for families sanctioned for non-compliance with the requirements of the Transitional Employment Assistance Program (TANF) program, for as long as the family remains eligible under the Medicaid and Food Stamp programs.

Children's Health Insurance Program: Medicaid Expansion

- The State had a SCHIP medicaid expansion in place from 10/1/98 through 9/30/02. The Medicaid expansion covered children born after 9/30/82 and prior to 10/1/83 in families with incomes at or below 100% of the Federal Poverty Level. The last child aged out of the program on 9/30/02.
- The State submitted a State Plan Amendment (SPA) for a separate state program on 12/4/98 to convert the funding for approximately one-third of the ArKids First beneficiaries and to modify the benefit package to be SCHIP compliant. The modified benefit package provided an enhanced state employee plan with the following changes in the ArKids First benefit plan: 1) providing coverage for occupational and physical therapies, hospice care and skilled nursing care; and 2) eliminating co payments for dental well health care. This SPA was approved 2/16/01 but has not been implemented.
- The State submitted a subsequent SPA on July 10, 2002 to revise the benefit package; the benefits that were added in the SPA submitted 12/4/98 were deleted since they were no longer required for SCHIP compliance. This SPA, withdrawn 4-15-04, was replaced by the SPA submitted on 4-1-04.
- The State submitted a SPA on 4-1-04 to add the unborn child option as a separate state program; and to reflect that CMS authorized the State to use SCHIP funds for ARKids-B beneficiaries (Medicaid 1115 demonstration) that meet the definition of an SCHIP targeted-low-income child: it was approved June 30, 2004; the funding authorization was implemented retroactively; and the unborn child portion was implemented on July 1, 2004.

Cost sharing requirements for the ARKKids B are as follows:

- \$5 co-payment for prescription drugs;
- \$10 co-payment for doctor's office visits other than well-child visits;
- 20% of the Medicaid allowed amount for durable medical equipment; and
- 20% of the Medicaid per diem cost for the first inpatient day.

SOUTHERN REGION MEDICAID PROFILE

Tobacco Settlement

- The state expects to receive approximately \$1.69 billion over 25 years.
- From FY 00 through FY 04, the cumulative tobacco settlement payment was approximately \$181.8 million.
- The state has allocated these funds and compares with the U.S. as follows:

	AR	%	U.S.	%
Tobacco use prevention	\$58,986,000	32.4%	\$1,813,423,000	4.6%
Health services	\$88,257,000	48.5%	\$11,824,057,000	29.9%
Long-term care	\$3,792,000	2.1%	\$2,200,066,000	5.6%
Health research	\$30,535,000	16.8%	\$1,472,863,000	3.7%
Education	\$0	0.0%	\$2,051,182,000	5.2%
Children and Youth (Nonhealth)	\$0	0.0%	\$1,229,719,000	3.1%
Tobacco Farmers	\$0	0.0%	\$1,217,021,000	3.1%
Endowments and Reserves	\$0	0.0%	\$7,636,209,000	19.3%
Other	\$218,000	0.1%	\$10,048,868,000	25.4%
Total	\$181,788,000	100.0%	\$39,493,408,000	100.0%