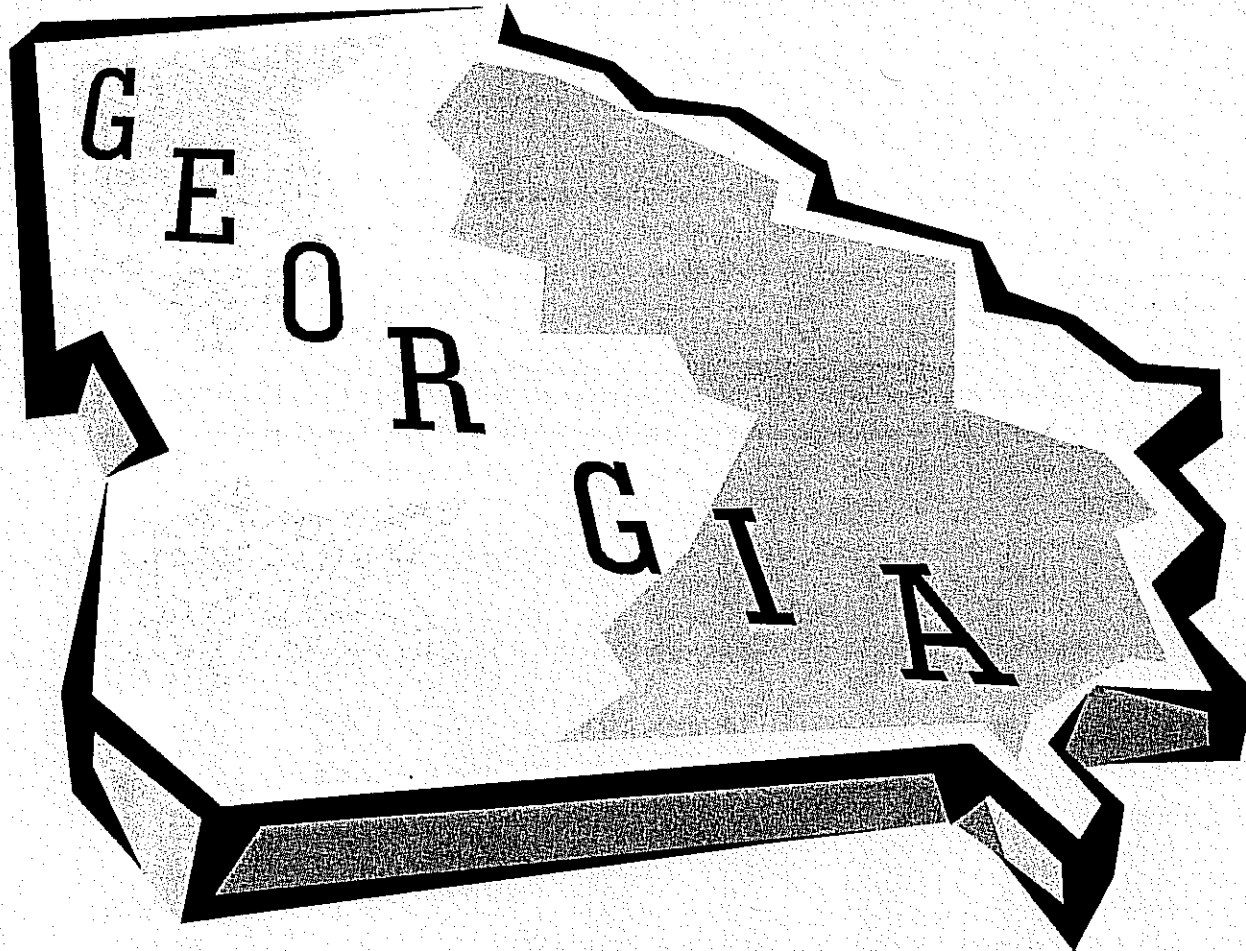
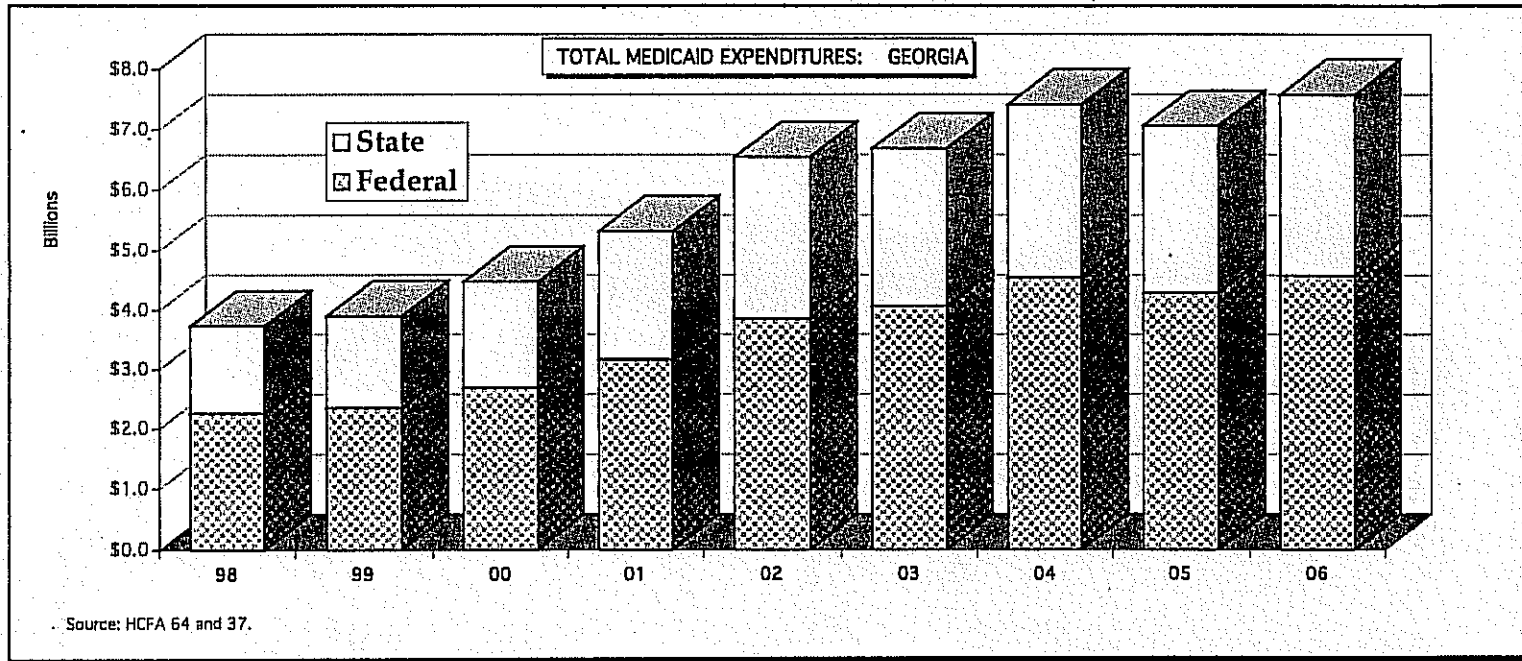


STATE MEDICAID PROFILE



SOUTHERN REGION MEDICAID PROFILE



State profile revised to reflect MSIS statistical data as reported by CMS for federal fiscal years 99 through 03.
(FFY 04 is projected using state annual report and historical trend data)

	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	\$3,487,596,382	\$3,673,705,109	\$4,321,247,201	\$5,037,084,881	\$6,241,211,454	\$6,300,856,479	\$7,044,051,167	\$6,644,841,000	\$7,157,780,000	9.4%	105.2%
Federal Share	\$2,126,785,792	\$2,226,304,953	\$2,592,499,901	\$3,012,109,157	\$3,684,679,643	\$3,864,544,309	\$4,368,498,042	\$4,061,590,000	\$4,342,266,000	9.3%	104.2%
State Share	\$1,360,810,590	\$1,447,400,156	\$1,728,747,300	\$2,024,975,724	\$2,556,531,811	\$2,436,312,170	\$2,675,553,125	\$2,583,251,000	\$2,815,514,000	9.5%	106.9%
Administrative Costs	\$247,246,597	\$230,872,445	\$158,819,383	\$277,430,878	\$302,658,380	\$380,246,357	\$368,841,269	\$417,811,000	\$418,917,000	6.8%	69.4%
Federal Share	\$133,995,592	\$126,008,191	\$96,825,459	\$155,839,950	\$180,016,435	\$205,358,125	\$184,173,084	\$235,695,000	\$236,355,000	7.4%	76.4%
State Share	\$113,251,005	\$104,864,254	\$61,993,924	\$121,590,928	\$122,641,945	\$174,888,232	\$184,668,185	\$182,116,000	\$182,562,000	6.2%	61.2%
Admin. Costs as % of Payments	7.09%	6.28%	3.68%	5.51%	4.85%	6.03%	5.24%	6.29%	5.85%		
Federal Match Rate*	60.84%	60.47%	59.88%	59.67%	59.00%	59.60%	59.58%	60.44%	60.60%		

*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	\$1,360,810,590	\$2,673,421,575	\$113,251,005	\$184,668,185
Local Funds	\$0	\$0	\$0	\$0
Provider Taxes	\$0	\$2,131,550	\$0	\$0
Donations	\$0	\$0	\$0	\$0
Other (License Fees)	\$0	\$0	\$0	\$0
Total State Share	\$1,360,810,590	\$2,675,553,125	\$113,251,005	\$184,668,185

Provider Taxes Currently in Place (FFY 04)		
	Tax Rate	Amount
Ambulance		\$2,131,550
Medical		\$0
Nursing (Registered)		\$0
Nursing Home Administrators		\$0
Pharmacy		\$0
Other professionals		\$0
Total		\$2,131,550

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	\$342,433,313	\$391,688,680	\$402,093,625	\$418,024,133	\$433,162,860	\$366,149,330	\$424,567,736	\$418,830,000	\$431,756,000	1.2%
Mental Hospitals	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a
Total	\$342,433,313	\$391,688,680	\$402,093,625	\$418,024,133	\$433,162,860	\$366,149,330	\$424,567,736	\$418,830,000	\$431,756,000	1.2%

SELECTED ELIGIBILITY CRITERIA

	At 10/1/04	% of FPL*
TANF-Temporary Assistance for Needy Families (Family of 3)		
Need Standard	\$424	32.5%
Payment Standard (Income Ceiling)	\$784	60.0%
Maximum Payment	\$280	21.4%
Medically Needy Program (Family of 3)		
Income Eligibility Standard	\$375	
Resource Standard	\$4,100	
Pregnant Women, Children and Infants (% of FPL*)		
Pregnant women and infants		185% to 200%
Children 2 to 5		133.0%
Children 6 to 19		100.0%
SSI Eligibility Levels		
Income:		
Single Person	\$564	72.7%
Couple	\$946	90.9%
Resources:		
Single Person	\$2,000	
Couple	\$3,000	

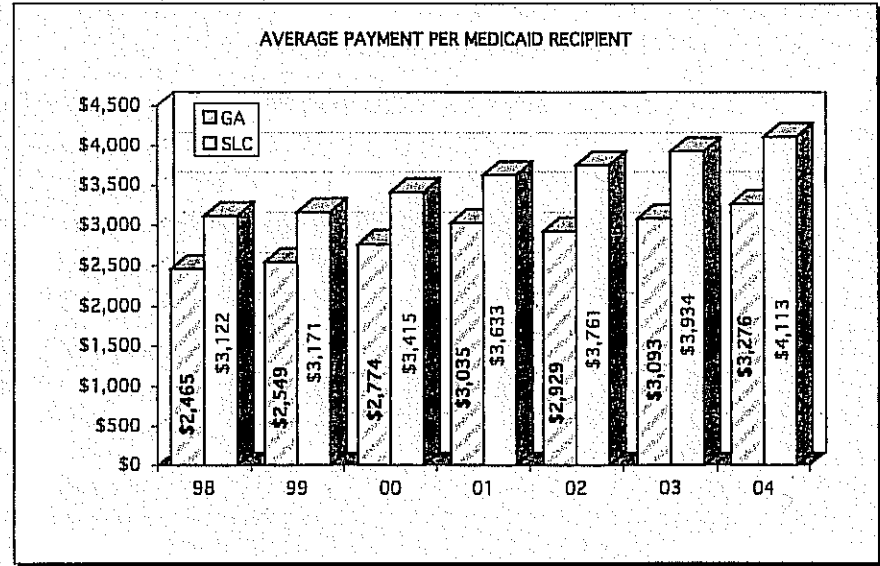
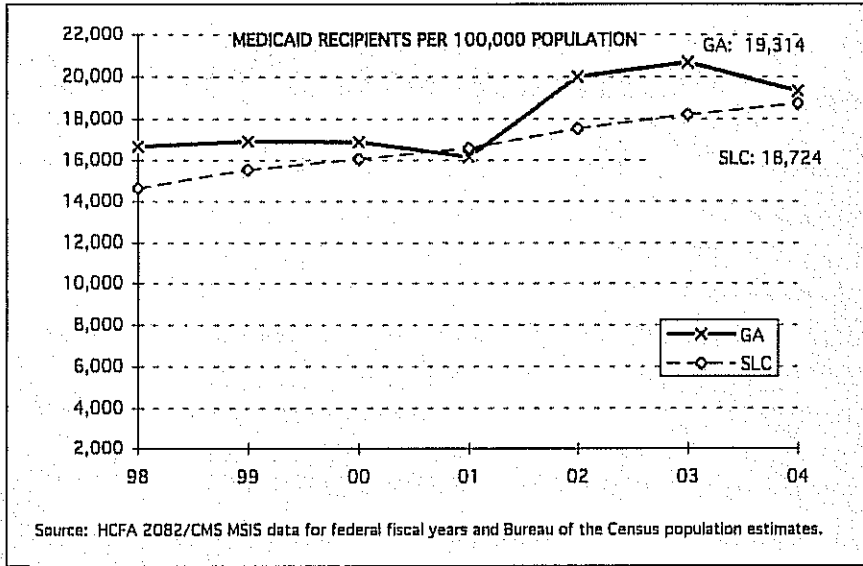
DEMOGRAPHIC DATA & POVERTY INDICATORS (2004)

		Rank in U.S.
State population—July 1, 2004*	8,829,383	9
Per capita personal income**	\$30,051	34
Median household income**	\$43,535	23
Population below Federal Poverty Level on July 1, 2003*	1,059,526	
Percent of total state population	12.0%	18
Population without health insurance coverage*	1,409,000	7
Percent of total state population	16.0%	14
Recipients of Food Stamps***	847,886	9
Households receiving Food Stamps***	344,704	9
Total value of issuance***	\$874,043,065	9
Average monthly benefit per recipient	\$85.90	9
Average monthly benefit per household	\$211.30	
Monthly recipients of Temporary Assistance to Needy Families (TANF)****	135,515	8
Total TANF payments****	\$153,918,887	41
Average monthly payment per recipient	\$94.65	41
Maximum monthly payment per family of 3	\$208.00	39

*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	161,694	204,883	211,400	202,621	227,976	225,915	237,984	6.7%
02. Mental Hospital	0	0	0	0	0	0	0	n/a
03. Skilled and Intermediate (non-MR) Care Nursing	40,390	39,720	40,326	39,591	41,616	41,601	43,365	1.2%
04. Intermediate Care for Mentally Retarded	1,728	1,444	1,414	1,369	1,317	1,258	1,399	-3.5%
05. Physician Services	872,557	894,636	909,574	901,368	1,184,321	1,295,908	1,233,618	5.9%
06. Dental Services	229,794	230,903	227,960	230,533	393,445	488,144	409,225	10.1%
07. Other Practitioners	132,412	135,649	132,286	138,583	190,431	242,939	198,799	7.0%
08. Outpatient Hospital	540,218	543,482	578,918	580,333	731,565	774,612	763,870	5.9%
09. Clinic Services	60,632	356,625	371,269	364,029	480,661	530,530	499,570	42.1%
10. Lab and X-Ray	167,860	164,840	176,254	177,257	221,980	249,884	231,597	5.5%
11. Home Health	84,820	20,108	18,049	19,719	20,909	20,663	22,527	-19.8%
12. Prescribed Drugs	805,923	841,024	847,730	856,797	1,076,904	122,323	1,073,974	4.9%
13. Family Planning	107,414	0	0	0	0	26,015	1,026	-53.9%
14. Early & Periodic Screening, Diagnosis & Treatment	287,928	0	0	0	0	0	2,751	-53.9%
15. Other Care	137,889	175,543	179,440	190,418	247,982	217,243	257,835	11.0%
16. Personal Care Support Services	194,528	203,339	216,809	236,696	316,160	411,034	328,384	9.1%
17. Home/Community Based Waiver Services	15,251	0	0	0	0	0	146	-53.9%
18. Prepaid Health Care	78,463	33,660	22,459	0	0	0	1,286	-49.6%
19. Primary Care Case Management (PCCM) Services	879,554	947,607	59,742	958,577	1,278,572	1,206,439	1,329,589	7.1%
Total*	1,221,978	1,267,798	1,289,795	1,256,990	1,637,329	1,732,120	1,705,321	5.7%

*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	\$668,075,530	\$706,922,816	\$770,287,080	\$815,115,674	\$1,029,166,797	\$1,122,690,289	\$1,172,233,560	9.8%	21.0%
02. Mental Hospital	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
03. Skilled and Intermediate (non-MR) Care Nursing	\$603,835,584	\$639,253,258	\$746,513,288	\$733,447,215	\$806,319,046	\$827,035,470	\$868,704,099	6.2%	15.5%
04. Intermediate Care for Mentally Retarded	\$107,450,025	\$108,475,359	\$109,493,463	\$110,190,694	\$110,193,235	\$102,917,036	\$109,311,879	0.3%	2.0%
05. Physician Services	\$367,096,683	\$392,476,463	\$423,743,500	\$449,717,740	\$592,889,173	\$649,384,798	\$677,257,934	10.7%	12.1%
06. Dental Services	\$32,076,080	\$40,855,499	\$47,014,714	\$71,867,392	\$141,126,963	\$186,245,205	\$191,231,597	34.7%	3.4%
07. Other Practitioners	\$18,735,368	\$18,432,417	\$19,195,790	\$20,329,582	\$30,601,958	\$39,709,926	\$41,159,074	14.0%	0.7%
08. Outpatient Hospital	\$266,142,731	\$311,143,950	\$341,117,230	\$370,631,403	\$496,845,562	\$606,810,676	\$629,730,080	15.4%	11.3%
09. Clinic Services	\$114,306,637	\$136,870,005	\$111,650,111	\$109,400,936	\$155,863,139	\$159,706,661	\$167,523,290	6.6%	3.0%
10. Lab and X-Ray	\$12,445,037	\$14,090,357	\$16,875,460	\$16,571,798	\$21,024,404	\$24,181,841	\$25,178,220	12.5%	0.5%
11. Home Health	\$42,656,324	\$71,871,270	\$76,206,271	\$87,693,524	\$101,040,695	\$66,138,776	\$70,213,518	8.7%	1.3%
12. Prescribed Drugs	\$370,562,935	\$462,992,436	\$580,612,920	\$655,515,772	\$749,552,199	\$1,003,853,892	\$1,039,582,467	18.8%	18.6%
13. Family Planning	\$27,091,933	\$0	\$0	\$0	\$0	\$15,901,097	\$16,594,152	-7.8%	0.3%
14. Early & Periodic Screening, Diagnosis & Treatment	\$25,513,441	\$0	\$0	\$0	\$0	\$0	\$0	-100.0%	0.0%
15. Other Care	\$27,214,508	\$159,735,131	\$177,025,081	\$209,266,762	\$310,564,683	\$307,085,482	\$320,777,462	50.9%	5.7%
16. Personal Care Support Services	\$101,836,605	\$115,779,941	\$125,074,607	\$142,839,088	\$217,765,580	\$216,803,781	\$225,672,652	14.2%	4.0%
17. Home/Community Based Waiver Services	\$146,244,447	\$0	\$0	\$0	\$0	\$0	\$0	-100.0%	0.0%
18. Prepaid Health Care	\$57,871,451	\$29,808,317	\$7,266,806	\$0	\$0	\$0	\$1,439,325	-46.0%	0.0%
19. Primary Care Case Management (PCCM) Services	\$23,190,993	\$23,278,773	\$25,826,967	\$22,679,694	\$33,051,927	\$29,085,728	\$30,613,329	4.7%	0.5%
Total (excludes DSH pymts, pharmacy rebates, & other adjs.)	\$3,012,346,312	\$3,231,985,992	\$3,577,903,288	\$3,815,267,274	\$4,796,005,361	\$5,357,550,658	\$5,587,222,638	10.8%	100.0%

AVERAGE PAYMENTS PER RECIPIENT BY TYPE OF SERVICES

								(+) or (-) %LC	Avg. FFY 04
	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04		
01. General Hospital	\$4,131.73	\$3,450.37	\$3,643.74	\$4,022.86	\$4,514.36	\$4,969.53	\$4,925.68	3.0%	-9.2%
02. Mental Hospital	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	n/a	-100.0%
03. Skilled and Intermediate (non-MR) Care Nursing	\$14,950.13	\$16,093.99	\$18,511.96	\$18,525.60	\$19,375.22	\$19,880.18	\$20,032.38	5.0%	-10.6%
04. Intermediate Care for Mentally Retarded	\$62,181.73	\$75,121.44	\$77,435.26	\$80,489.92	\$83,669.88	\$81,810.04	\$78,135.72	3.9%	-2.8%
05. Physician Services	\$420.71	\$438.70	\$465.87	\$498.93	\$500.62	\$501.10	\$549.00	4.5%	0.1%
06. Dental Services	\$139.59	\$176.94	\$206.24	\$311.74	\$358.70	\$381.54	\$467.30	22.3%	34.0%
07. Other Practitioners	\$141.49	\$135.88	\$145.11	\$146.70	\$160.70	\$163.46	\$207.04	6.5%	9.0%
08. Outpatient Hospital	\$492.66	\$572.50	\$589.23	\$638.65	\$679.15	\$783.37	\$824.39	9.0%	33.9%
09. Clinic Services	\$1,885.25	\$383.79	\$300.73	\$300.53	\$324.27	\$301.03	\$335.33	-25.0%	-48.1%
10. Lab and X-Ray	\$74.14	\$85.48	\$95.75	\$93.49	\$94.71	\$96.77	\$108.72	6.6%	-44.4%
11. Home Health	\$502.90	\$3,574.26	\$4,222.19	\$4,447.16	\$4,832.40	\$3,200.83	\$3,116.86	35.5%	5.9%
12. Prescribed Drugs	\$459.80	\$550.51	\$684.90	\$765.08	\$696.03	\$8,206.58	\$967.98	13.2%	-32.8%
13. Family Planning	\$252.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$16,173.64	100.1%	1308.3%
14. Early & Periodic Screening, Diagnosis & Treatment	\$88.61	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-100.0%	-100.0%
15. Other Care	\$197.37	\$909.95	\$986.54	\$1,098.99	\$1,252.37	\$1,413.56	\$1,244.12	35.9%	-35.0%
16. Personal Care Support Services	\$523.51	\$569.39	\$576.89	\$603.47	\$688.78	\$527.46	\$687.22	4.6%	-48.9%
17. Home/Community Based Waiver Services	\$9,589.17	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-100.0%	-100.0%
18. Prepaid Health Care	\$737.56	\$885.57	\$323.56	\$0.00	\$0.00	\$0.00	\$1,119.23	7.2%	-5.7%
19. Primary Care Case Management (PCCM) Services	\$26.37	\$24.57	\$432.31	\$23.66	\$25.85	\$24.11	\$23.02	-2.2%	-14.7%
Total (Average)	\$2,465.14	\$2,549.29	\$2,774.01	\$3,035.24	\$2,929.16	\$3,093.06	\$3,276.35	4.9%	-20.3%

TOTAL PER CAPITA EXPENDITURES	\$509.23	\$521.31	\$586.23	\$682.38	\$799.35	\$796.90	\$839.57	8.7%	-4.2%
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Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-03. FFY 04 is projected using state annual reports and historical trends from FFY 98-03.

SOUTHERN REGION MEDICAID PROFILE
DATA BY OTHER CHARACTERISTICS

RECIPIENTS 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	473,537	382,721	381,281	515,762	504,757	527,867	511,502	1.3%	30.0%
Poverty Related Eligibles	536,420	550,472	549,926	501,780	593,853	651,553	495,581	-1.3%	29.1%
Medically Needy	841	6,238	8,994	9,425	10,313	11,464	9,777	50.5%	0.6%
Other Eligibles	179,778	242,242	243,330	230,023	265,977	267,747	256,842	6.1%	15.1%
Maintenance Assistance Status Unknown	31,402	86,125	106,264	0	262,429	273,489	431,619	54.8%	25.3%
Total*	1,221,978	1,267,798	1,289,795	1,256,990	1,637,329	1,732,120	1,705,321	5.7%	100.0%
By Basis of Eligibility									
Aged, Blind, or Disabled	315,460	311,954	319,038	322,510	341,408	333,745	335,704	1.0%	19.7%
Children	666,385	667,192	660,917	685,118	844,963	853,845	694,245	0.7%	40.7%
Foster Care Children	6,508	8,833	11,519	15,932	19,550	18,781	17,132	17.5%	1.0%
Adults	202,223	193,694	192,057	233,430	252,563	252,259	227,420	2.0%	13.3%
Basis of Eligibility Unknown	31,402	86,125	106,264	0	178,845	273,490	430,820	54.7%	25.3%
Total*	1,221,978	1,267,798	1,289,795	1,256,990	1,637,329	1,732,120	1,705,321	5.7%	100.0%
By Age									
Under Age 1	64,474	73,941	77,969	77,756	81,499	83,244	55,260	-2.5%	3.2%
Age 1 to 5	255,052	259,200	262,334	269,241	320,543	339,550	290,398	2.2%	17.0%
Age 6 to 14	280,857	289,203	283,009	293,690	341,811	367,446	305,871	1.4%	17.9%
Age 15 to 20	129,665	129,614	127,714	136,503	147,669	162,924	136,289	0.8%	8.0%
Age 21 to 44	225,920	215,444	214,751	255,716	255,797	272,584	252,297	1.9%	14.8%
Age 45 to 64	87,177	85,757	89,302	96,438	100,513	107,450	101,773	2.6%	6.0%
Age 65 to 74	53,477	50,415	50,357	50,254	50,242	50,091	52,048	-0.5%	3.1%
Age 75 to 84	49,912	45,807	46,076	45,856	45,940	45,220	47,681	-0.8%	2.8%
Age 85 and Over	68,219	32,292	32,019	31,536	30,886	30,122	32,317	-11.7%	1.9%
Age Unknown	7,225	86,125	106,264	0	262,429	273,489	431,387	97.7%	25.3%
Total*	1,221,978	1,267,798	1,289,795	1,256,990	1,637,329	1,732,120	1,705,321	5.7%	100.0%
By Race									
White	443,904	460,359	468,202	456,330	560,642	604,949	620,269	5.7%	36.4%
Black	647,000	670,248	681,641	664,452	697,261	720,904	900,444	5.7%	52.8%
Hispanic, American Indian or Asian	51,996	53,591	54,364	53,112	23,361	38,753	71,242	5.4%	4.2%
Other/Unknown	79,078	83,600	85,588	83,096	356,065	367,514	113,366	6.2%	6.6%
Total*	1,221,978	1,267,798	1,289,795	1,256,990	1,637,329	1,732,120	1,705,321	5.7%	100.0%
By Sex									
Female	748,398	776,857	790,381	770,183	826,934	874,969	1,044,558	5.7%	61.3%
Male	466,356	483,598	491,992	479,533	547,966	583,650	648,589	5.7%	38.0%
Unknown	7,224	7,343	7,422	7,274	262,429	273,501	12,174	9.1%	0.7%
Total*	1,221,978	1,267,798	1,289,795	1,256,990	1,637,329	1,732,120	1,705,321	5.7%	100.0%

Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-03. FFY 04 is projected using state annual reports and historical trends from FFY 98-03.

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	\$1,377,872,299	\$1,382,020,426	\$1,498,547,853	\$1,730,796,612	\$2,030,818,708	\$2,122,692,203	\$2,220,607,350	8.3%	39.7%
Poverty Related Eligibles	\$689,569,489	\$655,518,207	\$682,763,454	\$693,186,999	\$822,349,971	\$1,008,562,523	\$1,052,505,734	7.3%	18.8%
Medically Needy	\$3,794,773	\$36,247,519	\$59,470,116	\$67,165,688	\$83,707,979	\$112,396,672	\$115,898,871	76.8%	2.1%
Other Eligibles	\$889,614,162	\$1,103,033,147	\$1,246,534,428	\$1,324,117,975	\$1,564,443,172	\$1,794,780,099	\$1,871,261,837	13.2%	33.5%
Maintenance Assistance Status Unknown	\$51,495,589	\$55,166,693	\$90,587,437	\$0	\$294,685,531	\$319,119,161	\$326,948,846	36.1%	5.9%
Total*	\$3,012,346,312	\$3,231,985,992	\$3,577,903,288	\$3,815,267,274	\$4,796,005,361	\$5,357,550,658	\$5,587,222,638	10.8%	100.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$1,896,108,233	\$2,075,785,671	\$2,329,126,304	\$2,465,506,511	\$2,812,930,628	\$3,048,713,892	\$3,189,930,013	9.1%	57.1%
Children	\$582,740,389	\$653,946,821	\$672,141,195	\$784,754,155	\$986,664,537	\$1,141,356,199	\$1,187,902,558	12.6%	21.3%
Foster Care Children	\$23,957,528	\$28,720,088	\$36,080,606	\$47,381,816	\$68,432,271	\$68,080,671	\$70,712,784	19.8%	1.3%
Adults	\$458,044,573	\$418,366,719	\$449,967,746	\$517,624,792	\$622,361,459	\$740,880,454	\$771,842,274	9.1%	13.8%
Basis of Eligibility Unknown	\$51,495,589	\$55,166,693	\$90,587,437	\$0	\$305,616,466	\$358,519,442	\$366,835,009	38.7%	6.6%
Total*	\$3,012,346,312	\$3,231,985,992	\$3,577,903,288	\$3,815,267,274	\$4,796,005,361	\$5,357,550,658	\$5,587,222,638	10.8%	100.0%
By Age									
Under Age 1	\$130,274,039	\$198,686,682	\$232,347,201	\$259,039,763	\$283,687,721	\$272,471,479	\$285,759,877	14.0%	5.1%
Age 1 to 5	\$256,674,945	\$297,971,883	\$307,812,480	\$374,497,712	\$458,485,978	\$553,135,849	\$574,842,977	14.4%	10.3%
Age 6 to 14	\$228,998,832	\$250,164,339	\$247,391,746	\$290,344,739	\$389,821,361	\$479,046,570	\$497,251,223	13.8%	8.9%
Age 15 to 20	\$229,873,552	\$216,324,625	\$227,688,839	\$246,963,669	\$313,540,556	\$367,418,487	\$382,881,893	8.9%	6.9%
Age 21 to 44	\$737,273,945	\$731,522,593	\$784,657,252	\$876,280,104	\$1,055,769,741	\$1,194,403,569	\$1,246,339,632	9.1%	22.3%
Age 45 to 64	\$507,321,902	\$558,395,268	\$637,519,329	\$715,187,442	\$853,355,081	\$965,824,351	\$1,006,732,945	12.1%	18.0%
Age 65 to 74	\$225,627,074	\$246,120,546	\$277,327,308	\$282,896,200	\$311,368,483	\$336,776,996	\$352,996,354	7.7%	6.3%
Age 75 to 84	\$302,572,083	\$324,124,167	\$376,233,367	\$381,141,345	\$415,373,977	\$436,487,337	\$458,072,378	7.2%	8.2%
Age 85 and Over	\$372,731,195	\$353,509,196	\$396,338,329	\$388,916,300	\$419,916,932	\$432,866,859	\$455,690,921	3.4%	8.2%
Age Unknown	\$20,998,745	\$55,166,693	\$90,587,437	\$0	\$294,685,531	\$319,119,161	\$326,654,438	58.0%	5.8%
Total*	\$3,012,346,312	\$3,231,985,992	\$3,577,903,288	\$3,815,267,274	\$4,796,005,361	\$5,357,550,658	\$5,587,222,638	10.8%	100.0%
By Race									
White	\$1,449,477,236	\$1,551,407,326	\$1,717,330,905	\$1,809,275,320	\$2,221,842,335	\$2,477,092,197	\$2,756,013,843	11.3%	49.3%
Black	\$1,239,615,206	\$1,329,788,662	\$1,471,170,128	\$1,510,584,335	\$1,838,958,060	\$2,039,484,545	\$2,222,634,351	10.2%	39.8%
Hispanic, American Indian or Asian	\$63,396,255	\$68,451,192	\$75,297,476	\$66,573,712	\$32,251,832	\$86,511,726	\$89,689,211	6.0%	1.6%
Other/ Unknown	\$259,857,615	\$282,338,812	\$314,104,779	\$428,833,907	\$702,953,134	\$754,462,190	\$518,885,233	12.2%	9.3%
Total*	\$3,012,346,312	\$3,231,985,992	\$3,577,903,288	\$3,815,267,274	\$4,796,005,361	\$5,357,550,658	\$5,587,222,638	10.8%	100.0%
By Sex									
Female	\$1,966,718,337	\$2,110,137,286	\$2,337,735,771	\$2,481,626,198	\$2,853,058,293	\$3,217,244,674	\$3,361,727,121	9.3%	60.2%
Male	\$1,024,630,832	\$1,100,266,426	\$1,217,278,898	\$1,329,487,630	\$1,648,261,537	\$1,821,172,207	\$1,899,764,001	10.8%	34.0%
Unknown	\$20,997,143	\$21,582,280	\$22,888,619	\$4,153,446	\$294,685,531	\$319,133,777	\$325,731,516	57.9%	5.8%
Total*	\$3,012,346,312	\$3,231,985,992	\$3,577,903,288	\$3,815,267,274	\$4,796,005,361	\$5,357,550,658	\$5,587,222,638	10.8%	100.0%

Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-03. FFY 04 is projected using state annual reports and historical trends from FFY 98-03.

SOUTHERN REGION MEDICAID PROFILE

AVERAGE PAYMENT PER RECIPIENT BY OTHER CHARACTERISTICS

	FFY 98	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	Annual Change	Above (+) or Below (-) SLC Avg. FFY 04
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$2,909.75	\$3,611.04	\$3,930.30	\$3,355.80	\$4,023.36	\$4,021.26	\$4,341.35	6.9%	-17.4%
Poverty Related Eligibles	\$1,285.50	\$1,190.83	\$1,241.56	\$1,381.46	\$1,384.77	\$1,547.94	\$2,123.78	8.7%	3.8%
Medically Needy	\$4,512.22	\$5,810.76	\$6,612.20	\$7,126.33	\$8,116.74	\$9,804.32	\$11,854.24	17.5%	90.9%
Other Eligibles	\$4,948.40	\$4,553.43	\$5,122.81	\$5,756.46	\$5,881.87	\$6,703.27	\$7,285.65	6.7%	0.4%
Maintenance Assistance Status Unknown	\$1,639.88	\$640.54	\$852.48	\$0.00	\$1,122.92	\$1,166.84	\$757.49	-12.1%	-71.6%
Total	\$2,465.14	\$2,549.29	\$2,774.01	\$3,035.24	\$2,929.16	\$3,093.06	\$3,276.35	4.9%	-20.3%
By Basis of Eligibility									
Aged, Blind or Disabled	\$6,010.61	\$6,654.14	\$7,300.47	\$7,644.74	\$8,239.21	\$9,134.86	\$9,502.21	7.9%	-11.9%
Children	\$874.48	\$980.15	\$1,016.98	\$1,145.43	\$1,167.70	\$1,336.73	\$1,711.07	11.8%	16.0%
Foster Care Children	\$3,681.24	\$3,251.45	\$3,132.27	\$2,974.00	\$3,500.37	\$3,624.98	\$4,127.53	1.9%	-40.0%
Adults	\$2,265.05	\$2,159.94	\$2,342.89	\$2,217.47	\$2,464.18	\$2,936.98	\$3,393.91	7.0%	29.2%
Basis of Eligibility Unknown	\$1,639.88	\$640.54	\$852.48	\$0.00	\$1,708.83	\$1,310.91	\$851.48	-10.3%	-70.5%
Total	\$2,465.14	\$2,549.29	\$2,774.01	\$3,035.24	\$2,929.16	\$3,093.06	\$3,276.35	4.9%	-20.3%
By Age									
Under Age 1	\$2,020.57	\$2,687.10	\$2,979.99	\$3,331.44	\$3,480.87	\$3,273.17	\$5,171.19	17.0%	39.2%
Age 1 to 5	\$1,006.36	\$1,149.58	\$1,173.36	\$1,390.94	\$1,430.34	\$1,629.03	\$1,979.50	11.9%	10.1%
Age 6 to 14	\$815.36	\$865.01	\$874.15	\$988.61	\$1,140.46	\$1,303.72	\$1,625.69	12.2%	-3.1%
Age 15 to 20	\$1,772.83	\$1,668.99	\$1,782.80	\$1,809.22	\$2,123.27	\$2,255.15	\$2,809.34	8.0%	5.6%
Age 21 to 44	\$3,263.43	\$3,395.42	\$3,653.80	\$3,426.77	\$4,127.37	\$4,381.78	\$4,939.97	7.2%	2.3%
Age 45 to 64	\$5,819.45	\$6,511.37	\$7,138.91	\$7,416.03	\$8,490.00	\$8,988.59	\$9,891.95	9.2%	2.8%
Age 65 to 74	\$4,219.14	\$4,881.89	\$5,507.22	\$5,629.33	\$6,197.37	\$6,723.30	\$6,782.13	8.2%	-8.2%
Age 75 to 84	\$6,062.11	\$7,075.87	\$8,165.50	\$8,311.70	\$9,041.66	\$9,652.53	\$9,607.02	8.0%	-13.9%
Age 85 and Over	\$5,463.74	\$10,947.27	\$12,378.22	\$12,332.45	\$13,595.70	\$14,370.46	\$14,100.66	17.1%	-18.0%
Age Unknown	\$2,906.40	\$640.54	\$852.48	\$0.00	\$1,122.92	\$1,166.84	\$757.22	-20.1%	-73.4%
Total	\$2,465.14	\$2,549.29	\$2,774.01	\$3,035.24	\$2,929.16	\$3,093.06	\$3,276.35	4.9%	-20.3%
By Race									
White	\$3,265.29	\$3,369.99	\$3,667.93	\$3,964.84	\$3,963.03	\$4,094.71	\$4,443.26	5.3%	-11.2%
Black	\$1,915.94	\$1,984.02	\$2,158.28	\$2,273.43	\$2,637.40	\$2,829.07	\$2,468.38	4.3%	-27.9%
Hispanic, American Indian or Asian	\$1,219.25	\$1,277.29	\$1,385.06	\$1,253.46	\$1,380.58	\$2,232.39	\$1,258.94	0.5%	-51.2%
Other/Unknown	\$3,286.09	\$3,377.26	\$3,669.96	\$5,160.70	\$1,974.23	\$2,052.88	\$4,577.08	5.7%	-7.6%
Total	\$2,465.14	\$2,549.29	\$2,774.01	\$3,035.24	\$2,929.16	\$3,093.06	\$3,276.35	4.9%	-20.3%
By Sex									
Female	\$2,627.90	\$2,716.25	\$2,957.73	\$3,222.13	\$3,450.16	\$3,676.98	\$3,218.32	3.4%	-23.2%
Male	\$2,197.10	\$2,275.17	\$2,474.18	\$2,772.46	\$3,007.96	\$3,120.32	\$2,929.07	4.9%	-26.8%
Unknown	\$2,906.58	\$2,939.16	\$3,083.89	\$571.00	\$1,122.92	\$1,166.85	\$26,756.33	44.8%	553.1%
Total	\$2,465.14	\$2,549.29	\$2,774.01	\$3,035.24	\$2,929.16	\$3,093.06	\$3,276.35	4.9%	-20.3%

Source: Health Care Financing Administration-Form HCFA 2082 for federal fiscal year 98; MSIS data for FFY 99-03. FFY 04 is projected using state annual reports and historical trends from FFY 98-03.

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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

Two Freedom of Choice Waivers, under Title XIX, Section 1915 (b), of the Social Security Act, established a coordinated network of Medicaid providers:

- Georgia Better Health Care Program (GBHC) provides a statewide case managed health care system for TANF, TANF-related, and SSI beneficiaries. It has been operating since October 1, 1993. The state was granted an extension on this program through July 2003. Approximately 1,053,733 Medicaid recipients (around 77% of all recipients) were enrolled as of June 2002. The waiver expired in December 2002.
- Non-emergency Transportation: Serves approximately 850,000 recipients, implemented in September 1999 and renewed through January 2004.

Georgia has 4 home and community-based waivers and 2 demonstration projects that have been approved by the Centers for Medicare and Medicaid Services (CMS). Some of the services provided to individuals in waiver programs include: personal support, skilled nursing, environmental modification services, specialized medical equipment and supplies, counseling, emergency response system, home health services, transportation, day care, day habilitation, personal care home, home delivered meals, respite care services, and case management services. They include:

- The Community Care Services Program: offers services to help elderly and/or functionally impaired or disabled individuals remain in the community or return to the community from a nursing home, served approximately 15,750 in FY 04.
- The Mental Retardation Waiver Program and the Community Habilitation and Support Services Waiver Program: helps individuals that have mental retardation or a developmental disability, current enrollment is approximately 2,553 in FY 04.
- The Model Waiver: covers private duty nursing and medical day care for individuals under age 21 that are respirator or oxygen dependent, served 190 in FY 04.
- The Independent Care Waiver Program (ICWP): helps adult Medicaid recipients with disabilities live in their own home or in the community instead of living in a hospital setting. The ICWP also includes services for adult Medicaid recipients with traumatic brain injuries, served 750 in FY 04.
- SOURCE (Service Options Using Resources in a Community Environment) Project: links primary care with an array of long-term health services in an individual's home or community to avoid preventable hospital and nursing home care for frail elderly and disabled individuals, served approximately 4,870 in FY 04.
- SheperdCare: provides primary care through an outreach program that is managed by advanced practice nurses that coordinate medical care for severely disabled individuals at the Sheperd Clinic in Atlanta, served 95 in FY 04.

Managed Care

- Any Willing Provider Clause: Yes. Broad, applies only to Blue Cross/Blue Shield.

Coverage for Targeted Population

- The Uninsured: The State provides disproportionate share payments (DSH) for indigent care through the Indigent Care Trust Fund (ICTF), established in 1990.
- The Indigent Care Trust Fund (ICTF) II, implemented in May of 1997, was specifically designed to assist hospitals in small communities and rural areas. In FY 04, trust fund payments to 96 participating hospitals totaled \$424.7 million (does not include any state matching funds).

Cost Containment Measures

- Certificate of Need Program since 1979. Regulates introduction or expansion of new institutional health care facilities and services. 1994 legislation revised composition and duties of the Health Planning Review Board and sets procedures for appeals of certificate of need decisions.
- Privatization of administrative functions, including claims payment and the Medicaid Management Information System (MMIS) which maintains the Department's claims data.

SOUTHERN REGION MEDICAID PROFILE

Cost Containment Measures (Continued)

• In October 2002, the Department contracted with Express Scripts, Inc. (ESI) to provide pharmacy benefit management services for all prescription drug programs administered through the Georgia Division of Medical Assistance, and include Medicaid, PeachCare, the State Health Plan, and the Board of Regents Health Plan.

Medicaid

- 37 optional services are offered.
- Non-Emergency Transportation (NET) Broker Program was implemented in 1998, and replaced direct providers of NET services with a broker to administer services to recipients. Payments to brokers will be made on a capitated rate based on the number of Medicaid eligibles in one of the five regions.
- Enacted legislation in 2001 that requires Medicaid to provide coverage to women that have been screened and diagnosed with breast or cervical cancer (Federally mandated by the Breast and Cervical Cancer Prevention and Treatment Act of 2000).
- Amended the Medicaid program in 2002 to provide services as follows :
 - Implementation of prior authorization for certain drugs.
 - Establishment of a new preferred drug list.
 - Increased reimbursement rates for inpatient hospital providers.
 - Adjusted case-mix reimbursement rates for nursing-home providers.
 - Increased reimbursement rates for physicians and dentists.
 - Extended Medicaid coverage for traumatic burn care medical services.
 - Eliminated the optional second year of Medicaid for people who are making the transition from TANF eligibility to work.
- For FY 05, proposed changes in the Medicaid Program due to budget cuts as follows:
 - Reduced inpatient hospital reimbursement rates by 0.7% for outlier payments.
 - Reduced the cap applied to outpatient hospital reimbursement rates.
 - Modified the payment methodology for nursing home services by reducing the growth rate allowance used to compute payments from 6.16% to 5.06%.
 - Eliminated the supplemental dispensing fee paid for generic drugs.

Children's Health Insurance Program: State Designed Plan

- The state initiated and expanded health insurance coverage for the Children's Health Insurance Program with funds made available in the Balanced Budget Act of 1997. State officials estimate that Georgia has 299,000 uninsured children/adolescents at the current time.
- CHIP in Georgia is called "PeachCare for Kids." The program is administered by the state Medicaid agency, but as a separate program and not an expansion of Medicaid. The program was approved by HCFA on September 3, 1998. As of September 2004, approximately 180,000 children/adolescents had received services under the PeachCare Program. CMS approved an amendment in February 2002 that allows an additional exception to Georgia's 3 month waiting period. The new exception applies to families who have dropped high-cost, private insurance that cost more than 5 percent of the family's income.
- Uninsured children/adolescents will be eligible for PeachCare benefits if their families' incomes are less than or equal to 235% of the FPL.
- Families with children from birth to 18 years of age will be charged a monthly premium from \$10 to \$70 depending on the number of children enrolled and family income.
- Children/adolescents enrolled in PeachCare for Kids have the option to use the primary care case management program or enroll in a managed care organization.

SOUTHERN REGION MEDICAID PROFILE

Tobacco Settlement

- The state expects to receive approximately \$4.81 billion over 25 years.
- From FY 00 through FY 04, the cumulative tobacco settlement payment was approximately \$642.9 million.
- The state has allocated these funds and compares with the U.S. as follows:

	GA	%	U.S.	%
Tobacco use prevention	\$64,558,000	10.0%	\$1,813,423,000	4.6%
Health services	\$308,024,000	47.9%	\$11,824,057,000	29.9%
Long-term care	\$20,652,000	3.2%	\$2,200,066,000	5.6%
Health research	\$16,220,000	2.5%	\$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	\$233,479,000	36.3%	\$1,217,021,000	3.1%
Endowments and Reserves	\$0	0.0%	\$7,636,209,000	19.3%
Other	\$0	0.0%	\$10,048,868,000	25.4%
Total	\$642,933,000	100.0%	\$39,493,408,000	100.0%