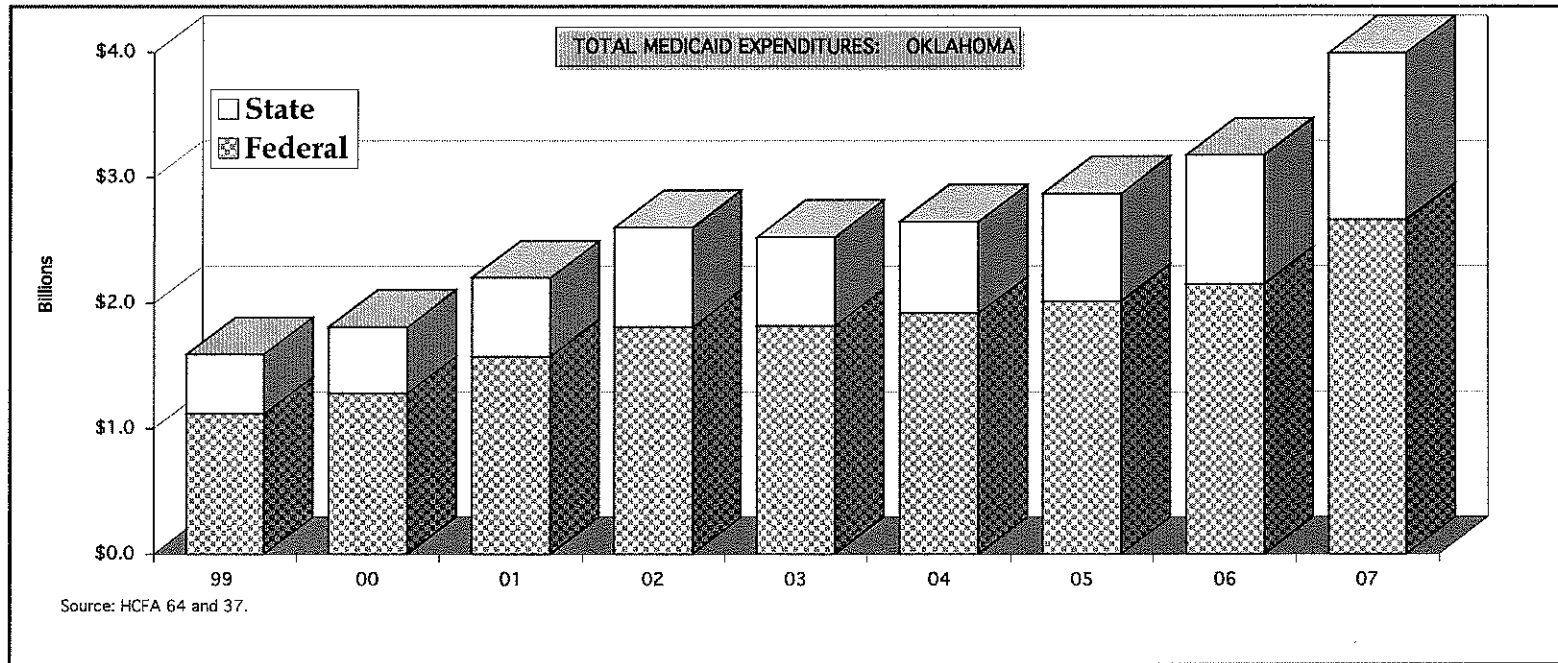


STATE MEDICAID PROFILE



SOUTHERN REGION MEDICAID PROFILE



State profile revised to reflect MSIS statistical data as reported by CMS for federal fiscal years 99 through 04 (includes correction for error in Outpatient Hospital expenditures as reported by CMS for FFY 04)

	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06**	FFY 07**	Annual Rate of Change	Total Change 99-07
Medicaid Payments	\$1,478,639,476	\$1,676,208,109	\$2,051,767,584	\$2,390,398,000	\$2,359,551,899	\$2,500,517,344	\$2,712,779,961	\$2,979,443,000	\$3,745,571,000	12.3%	153.3%
Federal Share	\$1,054,504,815	\$1,205,653,562	\$1,490,757,710	\$1,686,751,000	\$1,719,023,427	\$1,836,665,573	\$1,923,981,739	\$2,036,570,000	\$2,520,603,000	11.5%	139.0%
State Share	\$424,134,661	\$470,554,547	\$561,009,874	\$703,647,000	\$640,528,472	\$663,851,771	\$788,798,222	\$942,873,000	\$1,224,968,000	14.2%	188.8%
Administrative Costs	\$115,058,891	\$135,202,870	\$149,559,238	\$213,485,000	\$168,986,258	\$149,002,294	\$161,029,370	\$200,387,000	\$252,000,000	10.3%	119.0%
Federal Share	\$65,627,255	\$76,552,626	\$83,920,691	\$124,884,000	\$101,860,914	\$84,757,491	\$92,116,731	\$116,575,000	\$142,281,000	10.2%	116.8%
State Share	\$49,431,636	\$58,650,244	\$65,638,547	\$88,601,000	\$67,125,344	\$64,244,803	\$68,912,639	\$83,812,000	\$109,719,000	10.5%	122.0%
Admin. Costs as % of Payments	7.78%	8.07%	7.29%	8.93%	7.16%	5.96%	5.94%	6.73%	6.73%		
Federal Match Rate*	70.84%	71.09%	71.24%	70.43%	70.56%	70.24%	70.18%	67.91%	68.14%		

*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 06 and 07 reflect latest estimates reported by each state (CMS 37).

SOUTHERN REGION MEDICAID PROFILE

STATE FINANCING

	Payments		Administration	
	FFY 99	FFY 05	FFY 99	FFY 05
State General Fund	\$424,134,661	\$732,465,200	\$49,431,636	\$68,912,639
Local Funds	\$0	\$0	\$0	\$0
Provider Taxes	\$0	\$56,333,022	\$0	\$0
Donations	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0
Total State Share	\$424,134,661	\$788,798,222	\$49,431,636	\$68,912,639

Provider Taxes Currently in Place (FFY 05)		
	Tax Rate	Amount
MR facilities	6 % of third quarter gross revenues	\$56,333,022
Total		\$56,333,022

DISPROPORTIONATE SHARE HOSPITAL (DSH) PAYMENTS

	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06**	FFY 07**	Annual Change
General Hospitals	\$19,312,860	\$19,436,724	\$21,761,671	\$20,850,790	\$19,781,599	\$23,289,046	\$27,999,197	\$29,273,000	\$40,000,000	10.7%
Mental Hospitals	\$3,271,460	\$2,928,955	\$1,320,022	\$3,273,248	\$3,234,274	\$3,273,247	\$3,138,655	\$3,338,000	\$3,531,000	17.8%
Total	\$22,584,320	\$22,365,679	\$23,081,693	\$24,124,038	\$23,015,873	\$26,562,293	\$31,137,852	\$32,611,000	\$43,531,000	11.2%

SELECTED ELIGIBILITY CRITERIA

	At 10/1/05	% of FPL*
TANF-Temporary Assistance for Needy Families (Family of 3)		
Need Standard	\$645	49.4%
Payment Standard	\$292	22.4%
Maximum Payment	\$292	22.4%
Medically Needy Program (Family of 3)		
Income Eligibility Standard	\$2,105	
Resource Standard	None	
Pregnant Women, Children and Infants (% of FPL*)		
Pregnant women and infants		185.0%
Children to 6		185.0%
Children 6 to 17		185.0%
SSI Eligibility Levels		
Income:	209.b	1902(f)
Single Person	\$564	72.7%
Couple	\$846	81.3%
Resources:		
Single Person	\$2,000	
Couple	\$3,000	

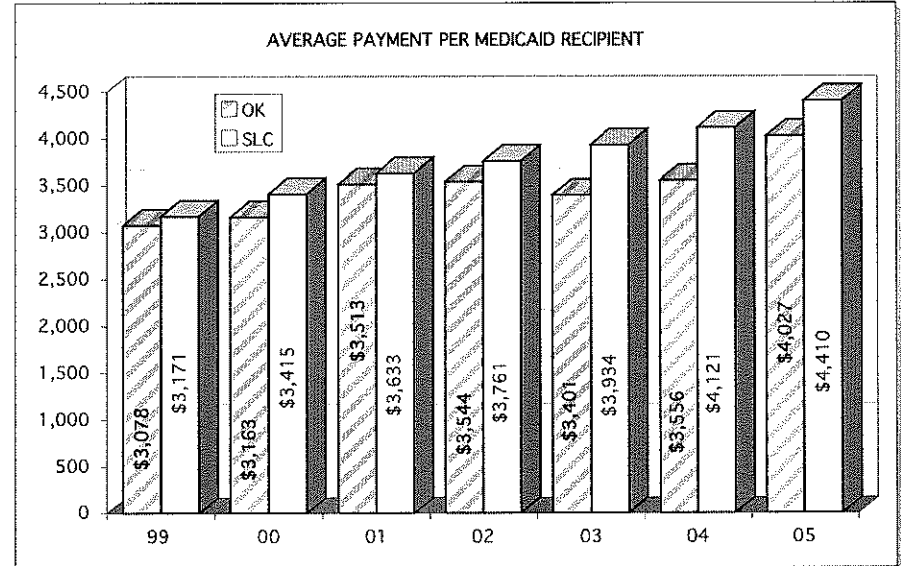
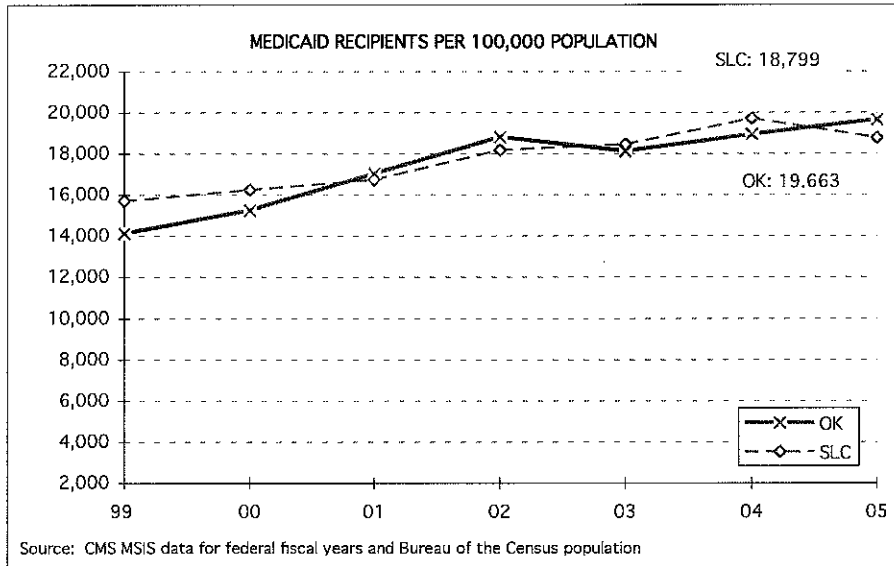
DEMOGRAPHIC DATA & POVERTY INDICATORS (2005)

		Rank in U.S.
State population—July 1, 2005*	3,543,442	28
Per capita personal income**	\$29,908	39
Median household income**	\$38,895	43
Population below Federal Poverty Level on July 1, 2003*	464,191	
Percent of total state population	13.1%	16
Population without health insurance coverage*	647,000	23
Percent of total state population	18.3%	4
Recipients of Food Stamps***	435,519	22
Households receiving Food Stamps***	172,837	23
Total value of issuance***	\$467,306,464	22
Average monthly benefit per recipient	\$89.42	39
Average monthly benefit per household	\$225.31	
Monthly recipients of Temporary Assistance to Needy Families (TANF)****	20,738	37
Total TANF payments****	\$83,380,656	44
Average monthly payment per recipient	\$335.06	7
Maximum monthly payment per family of 3	\$292.00	36

*Current federal poverty level is \$9,570 per year for a single person, \$12,830 for a family of two and \$16,090 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 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	Annual Change
01. General Hospital	60,905	64,044	62,926	70,793	70,078	103,560	108,672	10.1%
02. Mental Hospital	2,428	2,196	2,490	2,923	2,922	3,775	3,973	8.6%
03. Skilled and Intermediate (non-MR) Care Nursing	25,758	25,513	24,225	25,051	22,261	22,917	24,640	-0.7%
04. Intermediate Care for Mentally Retarded	2,058	2,012	2,060	2,001	1,955	1,968	2,111	0.4%
05. Physician Services	210,411	208,843	219,411	246,394	262,243	390,182	408,362	11.7%
06. Dental Services	34,939	35,787	48,793	60,995	62,419	113,594	117,810	22.5%
07. Other Practitioners	45,086	47,332	55,435	61,247	40,010	64,140	67,844	7.0%
08. Outpatient Hospital	146,370	156,495	168,272	182,325	173,208	272,009	285,000	11.7%
09. Clinic Services	64,337	62,875	57,301	64,931	65,769	101,090	106,013	8.7%
10. Lab and X-Ray	77,215	89,726	96,150	113,076	131,167	232,559	241,308	20.9%
11. Home Health	3,203	3,644	3,505	3,622	3,153	4,352	4,606	6.2%
12. Prescribed Drugs	224,742	221,984	249,678	276,111	302,424	421,476	421,476	11.0%
13. Family Planning	1,904	1,765	1,611	2,006	3,118	4,915	5,096	17.8%
14. Early & Periodic Screening, Diagnosis & Treatment	0	0	0	0	0	0	0	n/a
15. Other Care	69,212	92,813	95,412	90,606	85,772	108,217	114,626	8.8%
16. Personal Care Support Services	37,931	40,139	46,431	49,395	48,339	52,613	55,863	6.7%
17. Home/Community Based Waiver Services	0	0	0	0	0	0	0	n/a
18. Prepaid Health Care	313,785	382,307	459,869	496,991	498,188	513,290	544,795	9.6%
19. Primary Care Case Management (PCCM) Services	0	0	782	4,169	6,070	10,034	10,283	90.4%
Total*	465,844	507,059	570,671	631,498	625,875	655,868	696,743	6.9%

*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

<u>PAYMENTS BY TYPE OF SERVICES</u>	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	Annual	Share of Total
								Change	FFY 05
01. General Hospital	\$174,786,789	\$208,673,999	\$272,307,383	\$292,904,161	\$207,768,168	\$309,295,121	\$367,299,079	13.2%	13.1%
02. Mental Hospital	\$41,736,983	\$37,161,249	\$43,464,247	\$51,280,588	\$51,866,923	\$60,977,736	\$73,049,840	9.8%	2.6%
03. Skilled and Intermediate (non-MR) Care Nursing	\$323,793,016	\$316,262,282	\$433,811,452	\$458,915,799	\$435,978,619	\$456,010,147	\$554,141,527	9.4%	19.8%
04. Intermediate Care for Mentally Retarded	\$95,054,376	\$101,349,288	\$104,009,480	\$108,733,187	\$106,834,378	\$108,222,759	\$134,305,531	5.9%	4.8%
05. Physician Services	\$58,978,604	\$60,091,554	\$69,161,019	\$71,229,424	\$81,993,187	\$148,130,265	\$168,453,966	19.1%	6.0%
06. Dental Services	\$6,897,050	\$7,658,904	\$16,866,030	\$23,796,070	\$25,735,942	\$47,392,608	\$52,411,096	40.2%	1.9%
07. Other Practitioners	\$7,199,427	\$7,305,175	\$8,923,906	\$9,919,808	\$6,250,338	\$9,643,619	\$11,658,083	8.4%	0.4%
08. Outpatient Hospital	\$57,087,453	\$44,411,364	\$43,850,083	\$52,006,954	\$45,898,864	\$74,915,498	\$88,965,155	7.7%	3.2%
09. Clinic Services	\$77,551,274	\$68,254,685	\$71,825,065	\$71,203,972	\$69,639,639	\$88,228,395	\$107,408,631	5.6%	3.8%
10. Lab and X-Ray	\$4,540,933	\$5,996,892	\$6,602,277	\$8,044,406	\$9,084,231	\$18,651,076	\$20,807,164	28.9%	0.7%
11. Home Health	\$1,111,619	\$945,979	\$995,598	\$1,274,660	\$4,457,923	\$7,773,650	\$8,480,587	40.3%	0.3%
12. Prescribed Drugs	\$167,704,485	\$178,254,361	\$215,717,760	\$267,549,002	\$290,182,401	\$396,855,999	\$459,100,860	18.3%	16.4%
13. Family Planning	\$511,202	\$453,829	\$449,536	\$604,638	\$2,055,398	\$3,179,767	\$3,489,922	37.7%	0.1%
14. Early & Periodic Screening, Diagnosis & Treatment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
15. Other Care	\$222,051,875	\$280,761,045	\$297,766,356	\$354,764,301	\$325,585,852	\$352,120,400	\$426,620,682	11.5%	15.2%
16. Personal Care Support Services	\$69,002,202	\$65,582,518	\$111,519,473	\$84,011,095	\$80,989,391	\$86,493,816	\$105,786,480	7.4%	3.8%
17. Home/Community Based Waiver Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
18. Prepaid Health Care	\$0	\$220,625,874	\$297,527,058	\$381,927,861	\$384,131,235	\$164,050,755	\$212,834,919	-0.7%	7.6%
19. Primary Case Management (PCCM) Services	\$125,719,800	\$0	\$2,488	\$47,161	\$71,966	\$116,487	\$10,785,979	-33.6%	0.4%
Total (excludes DSH pymts, pharmacy rebates, & other adjs.)	\$1,433,727,088	\$1,603,788,998	\$2,004,799,211	\$2,238,213,087	\$2,128,524,455	\$2,332,058,098	\$2,805,599,501	11.8%	100.0%

AVERAGE PAYMENTS PER RECIPIENT BY TYPE OF SERVICES

	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	(+) or (-)	SLC
								Aug. FFY 05	
01. General Hospital	\$2,869.83	\$3,258.29	\$4,327.42	\$4,137.47	\$2,964.81	\$2,986.63	\$3,379.89	2.8%	-35.5%
02. Mental Hospital	\$17,189.86	\$16,922.24	\$17,455.52	\$17,543.82	\$17,750.49	\$16,153.04	\$18,386.57	1.1%	-0.7%
03. Skilled and Intermediate (non-MR) Care Nursing	\$12,570.58	\$12,396.12	\$17,907.59	\$18,319.26	\$19,584.86	\$19,898.34	\$22,489.51	10.2%	-10.2%
04. Intermediate Care for Mentally Retarded	\$46,187.74	\$50,372.41	\$55,344.41	\$54,339.42	\$54,646.74	\$54,991.24	\$63,621.76	5.5%	-25.7%
05. Physician Services	\$280.30	\$287.74	\$315.21	\$289.09	\$312.66	\$379.64	\$412.51	6.7%	-31.2%
06. Dental Services	\$197.40	\$214.01	\$345.66	\$390.13	\$412.31	\$417.21	\$444.88	14.5%	22.0%
07. Other Practitioners	\$159.68	\$154.34	\$160.98	\$161.96	\$156.22	\$150.35	\$171.84	1.2%	-37.8%
08. Outpatient Hospital	\$390.02	\$283.79	\$260.59	\$285.24	\$264.99	\$275.42	\$312.16	-3.6%	-47.8%
09. Clinic Services	\$1,205.39	\$1,085.56	\$1,253.47	\$1,096.61	\$1,058.85	\$872.77	\$1,013.16	-2.9%	46.1%
10. Lab and X-Ray	\$58.81	\$66.84	\$68.67	\$71.14	\$69.26	\$80.20	\$86.23	6.6%	-60.1%
11. Home Health	\$347.06	\$259.60	\$284.05	\$351.92	\$1,413.87	\$1,786.22	\$1,841.20	32.1%	-48.3%
12. Prescribed Drugs	\$746.21	\$803.01	\$863.98	\$968.99	\$959.52	\$941.59	\$1,089.27	6.5%	-27.0%
13. Family Planning	\$268.49	\$257.13	\$279.04	\$301.41	\$659.20	\$646.95	\$684.84	16.9%	-51.2%
14. Early & Periodic Screening, Diagnosis & Treatment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	n/a	n/a
15. Other Care	\$3,208.29	\$3,025.02	\$3,120.85	\$3,915.46	\$3,795.95	\$3,253.84	\$3,721.85	2.5%	98.3%
16. Personal Care Support Services	\$1,819.15	\$1,633.89	\$2,401.83	\$1,700.80	\$1,675.45	\$1,643.96	\$1,893.68	0.7%	28.7%
17. Home/Community Based Waiver Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	n/a	n/a
18. Prepaid Health Care	\$0.00	\$577.09	\$646.98	\$768.48	\$771.06	\$319.61	\$390.67	-7.5%	-64.4%
19. Primary Care Case Management (PCCM) Services	\$0.00	\$0.00	\$3.18	\$11.31	\$11.86	\$11.61	\$1,048.91	326.1%	3740.1%
Total (Average)	\$3,077.70	\$3,162.92	\$3,513.06	\$3,544.29	\$3,400.88	\$3,555.68	\$4,026.74	4.6%	-8.7%

TOTAL PER CAPITA EXPENDITURES

	\$483.63	\$545.34	\$657.76	\$775.42	\$732.77	\$765.74	\$811.02	9.0%	-12.1%
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Source: MSIS data for FFY 99-04; FFY 05 is projected using state annual report for SFY 05.

SOUTHERN REGION MEDICAID PROFILE
DATA BY OTHER CHARACTERISTICS

RECIPIENTS BY OTHER CHARACTERISTICS

	FFY 99	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	<i>Annual Change</i>	<i>Share of Total FFY 05</i>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	118,062	97,934	99,000	99,355	173,503	174,326	183,338	7.6%	26.3%
Poverty Related Eligibles	246,246	301,904	380,628	416,140	383,334	408,367	433,631	9.9%	62.2%
Medically Needy	4,401	4,040	3,759	3,650	1,416	1	205	-40.0%	0.0%
Other Eligibles	79,356	86,712	87,284	91,791	52,869	52,635	57,964	-5.1%	8.3%
Maintenance Assistance Status Unknown (Managed Care)	17,779	16,469	0	20,562	14,753	20,539	21,605	3.3%	3.1%
Total*	465,844	507,059	570,671	631,498	625,875	655,868	696,743	6.9%	100.0%
By Basis of Eligibility									
Aged, Blind, or Disabled	114,564	119,494	122,772	128,518	128,050	132,688	141,510	3.6%	20.3%
Children	253,257	289,189	364,435	394,462	385,763	404,447	429,179	9.2%	61.6%
Foster Care Children	6,968	6,806	6,178	5,653	14,757	14,522	15,171	13.8%	2.2%
Adults	73,276	75,101	77,286	82,303	82,552	83,672	89,279	3.3%	12.8%
Basis of Eligibility Unknown	17,779	16,469	0	20,562	14,753	20,539	21,604	3.3%	3.1%
Total*	465,844	507,059	570,671	631,498	625,875	655,868	696,743	6.9%	100.0%
By Age									
Under Age 1	21,867	22,773	24,717	25,398	26,686	29,837	31,626	6.3%	4.5%
Age 1 to 5	96,221	110,891	132,078	140,892	138,316	142,969	151,972	7.9%	21.8%
Age 6 to 14	115,068	127,136	164,653	178,028	175,917	183,541	194,707	9.2%	27.9%
Age 15 to 20	47,201	55,998	69,343	76,266	79,108	83,724	88,591	11.1%	12.7%
Age 21 to 44	82,393	85,660	88,918	95,647	97,055	99,584	106,079	4.3%	15.2%
Age 45 to 64	31,425	33,912	36,341	39,589	40,725	42,653	45,309	6.3%	6.5%
Age 65 to 74	18,853	19,305	19,834	20,581	20,137	20,547	21,957	2.6%	3.2%
Age 75 to 84	18,418	18,688	19,253	19,565	18,939	18,837	20,181	1.5%	2.9%
Age 85 and Over	16,619	16,227	15,534	14,970	14,239	13,637	14,716	-2.0%	2.1%
Age Unknown	17,779	16,469	0	20,562	14,753	20,539	21,605	3.3%	3.1%
Total*	465,844	507,059	570,671	631,498	625,875	655,868	696,743	6.9%	100.0%
By Race									
White	305,058	343,373	386,903	380,290	377,880	390,444	416,268	5.3%	59.7%
Black	84,471	64,799	73,975	101,928	99,135	101,338	107,553	4.1%	15.4%
Hispanic, American Indian or Asian	76,315	98,887	109,793	128,718	134,107	143,547	151,722	12.1%	21.8%
Other/Unknown	0	0	0	20,562	14,753	20,539	21,200	1.0%	3.0%
Total*	465,844	507,059	570,671	631,498	625,875	655,868	696,743	6.9%	100.0%
By Sex									
Female	285,753	307,591	346,813	357,320	356,474	369,462	393,388	5.5%	56.5%
Male	180,091	199,468	223,858	253,616	254,648	265,867	282,156	7.8%	40.5%
Unknown	0	0	0	20,562	14,753	20,539	21,199	1.0%	3.0%
Total*	465,844	507,059	570,671	631,498	625,875	655,868	696,743	6.9%	100.0%

Source: MSIS data for FFY 99-04; FFY 05 is projected using state annual report for SFY 05.

SOUTHERN REGION MEDICAID PROFILE

PAYMENTS BY OTHER CHARACTERISTICS

	<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>FFY 05</u>	<u>Annual Change</u>	<u>Share of Total FFY 05</u>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$274,311,813	\$273,475,909	\$316,881,105	\$359,938,334	\$518,729,637	\$497,180,306	\$587,544,635	13.5%	20.9%
Poverty Related Eligibles	\$262,978,316	\$333,221,659	\$449,544,506	\$522,307,393	\$578,464,201	\$746,419,526	\$863,097,138	21.9%	30.8%
Medically Needy	\$11,038,078	\$11,314,192	\$13,357,842	\$13,403,897	\$4,551,559	\$1,288	\$2,165,775	-23.8%	0.1%
Other Eligibles	\$814,638,364	\$866,655,581	\$1,096,472,478	\$1,186,500,816	\$1,012,176,075	\$1,074,749,592	\$1,318,805,746	8.4%	47.0%
Maintenance Assistance Status Unknown (Managed Care)	\$70,760,517	\$119,121,657	\$128,543,280	\$156,062,647	\$14,602,983	\$13,707,386	\$33,986,207	-11.5%	1.2%
Total*	\$1,433,727,088	\$1,603,788,998	\$2,004,799,211	\$2,238,213,087	\$2,128,524,455	\$2,332,058,098	\$2,805,599,501	11.8%	100.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$972,546,284	\$1,035,973,908	\$1,298,507,176	\$1,432,112,932	\$1,405,180,579	\$1,410,318,130	\$1,715,011,133	9.9%	61.1%
Children	\$262,083,583	\$314,732,384	\$428,996,281	\$490,452,162	\$457,248,295	\$622,520,477	\$726,416,810	18.5%	25.9%
Foster Care Children	\$40,003,285	\$39,044,084	\$41,567,584	\$39,680,364	\$104,259,040	\$110,558,815	\$125,687,845	21.0%	4.5%
Adults	\$88,333,419	\$94,916,965	\$107,184,890	\$119,904,982	\$147,233,558	\$174,953,290	\$204,497,506	15.0%	7.3%
Basis of Eligibility Unknown (Includes Managed Care)	\$70,760,517	\$119,121,657	\$128,543,280	\$156,062,647	\$14,602,983	\$13,707,386	\$33,986,207	-11.5%	1.2%
Total*	\$1,433,727,088	\$1,603,788,998	\$2,004,799,211	\$2,238,213,087	\$2,128,524,455	\$2,332,058,098	\$2,805,599,501	11.8%	100.0%
By Age									
Under Age 1	\$52,088,292	\$56,765,263	\$70,529,990	\$74,831,975	\$77,984,374	\$107,035,025	\$124,750,207	15.7%	4.4%
Age 1 to 5	\$93,038,885	\$111,628,898	\$145,884,103	\$165,773,271	\$170,357,660	\$180,655,427	\$215,636,833	15.0%	7.7%
Age 6 to 14	\$143,079,901	\$163,335,113	\$214,752,884	\$247,969,473	\$254,546,983	\$276,820,576	\$329,272,421	14.9%	11.7%
Age 15 to 20	\$107,771,079	\$118,093,917	\$148,198,797	\$167,566,698	\$184,094,715	\$204,635,279	\$242,158,492	14.4%	8.6%
Age 21 to 44	\$325,530,331	\$347,427,330	\$409,062,694	\$446,740,003	\$463,745,828	\$502,852,323	\$603,494,892	10.8%	21.5%
Age 45 to 64	\$208,384,143	\$240,330,648	\$315,718,000	\$374,394,443	\$380,950,532	\$435,996,100	\$514,876,191	16.3%	18.4%
Age 65 to 74	\$103,103,781	\$111,938,369	\$141,244,830	\$151,906,257	\$151,801,777	\$167,924,786	\$201,316,371	11.8%	7.2%
Age 75 to 84	\$144,461,036	\$152,047,129	\$199,539,879	\$214,619,166	\$206,915,894	\$218,546,045	\$264,368,301	10.6%	9.4%
Age 85 and Over	\$185,509,123	\$183,100,674	\$231,324,754	\$238,349,154	\$223,523,709	\$223,885,151	\$275,739,585	6.8%	9.8%
Age Unknown	\$70,760,517	\$119,121,657	\$128,543,280	\$156,062,647	\$14,602,983	\$13,707,386	\$33,986,208	-11.5%	1.2%
Total*	\$1,433,727,088	\$1,603,788,998	\$2,004,799,211	\$2,238,213,087	\$2,128,524,455	\$2,332,058,098	\$2,805,599,501	11.8%	100.0%
By Race									
White	\$1,013,011,937	\$1,205,736,481	\$1,503,629,549	\$1,542,862,580	\$1,543,953,811	\$1,693,709,362	\$2,036,647,690	12.3%	72.6%
Black	\$143,322,159	\$164,565,963	\$207,075,917	\$269,458,059	\$277,957,110	\$289,373,879	\$343,892,660	15.7%	12.3%
Hispanic, American Indian or Asian	\$130,727,783	\$175,765,896	\$216,398,764	\$269,829,801	\$292,010,551	\$335,267,471	\$392,538,791	20.1%	14.0%
Other/Unknown	\$146,665,209	\$57,720,658	\$77,694,981	\$156,062,647	\$14,602,983	\$13,707,386	\$32,520,360	-22.2%	1.2%
Total*	\$1,433,727,088	\$1,603,788,998	\$2,004,799,211	\$2,238,213,087	\$2,128,524,455	\$2,332,058,098	\$2,805,599,501	11.8%	100.0%
By Sex									
Female	\$766,415,829	\$914,878,802	\$1,184,857,799	\$1,223,367,618	\$1,251,380,217	\$1,250,356,520	\$1,516,194,481	12.0%	54.0%
Male	\$520,622,034	\$631,751,859	\$787,124,143	\$858,782,822	\$862,541,255	\$1,067,994,192	\$1,258,716,375	15.9%	44.9%
Unknown	\$146,689,225	\$57,158,337	\$32,817,269	\$156,062,647	\$14,602,983	\$13,707,386	\$30,688,645	-23.0%	1.1%
Total*	\$1,433,727,088	\$1,603,788,998	\$2,004,799,211	\$2,238,213,087	\$2,128,524,455	\$2,332,058,098	\$2,805,599,501	11.8%	100.0%

Source: MSIS data for FFY 99-04; FFY 05 is projected using state annual report for SFY 05.

SOUTHERN REGION MEDICAID PROFILE

AVERAGE PAYMENT PER RECIPIENT BY OTHER CHARACTERISTICS

	<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>FFY 05</u>	<i>Annual Change</i>	<i>Above (+) or Below (-) SLC Avg. FFY 05</i>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$2,323.46	\$2,792.45	\$3,200.82	\$3,622.75	\$2,989.74	\$2,852.01	\$3,204.71	5.5%	-45.1%
Poverty Related Eligibles	\$1,067.95	\$1,103.73	\$1,181.06	\$1,255.12	\$1,509.03	\$1,827.82	\$1,990.40	10.9%	-5.3%
Medically Needy	\$2,508.08	\$2,800.54	\$3,553.56	\$3,672.30	\$3,214.38	\$1,288.00	\$10,564.76	27.1%	34.1%
Other Eligibles	\$10,265.62	\$9,994.64	\$12,562.12	\$12,926.11	\$19,144.98	\$20,418.92	\$22,752.15	14.2%	194.6%
Maintenance Assistance Status Unknown	\$3,980.01	\$7,233.08	\$0.00	\$7,589.86	\$989.83	\$667.38	\$1,573.07	-14.3%	-53.8%
Total	\$3,077.70	\$3,162.92	\$3,513.06	\$3,544.29	\$3,400.88	\$3,555.68	\$4,026.74	4.6%	-8.7%
By Basis of Eligibility									
Aged, Blind or Disabled	\$8,489.11	\$8,669.67	\$10,576.57	\$11,143.29	\$10,973.69	\$10,628.83	\$12,119.36	6.1%	1.3%
Children	\$1,034.85	\$1,088.33	\$1,177.15	\$1,243.34	\$1,185.31	\$1,539.19	\$1,692.57	8.5%	9.7%
Foster Care Children	\$5,741.00	\$5,736.72	\$6,728.32	\$7,019.35	\$7,065.06	\$7,613.19	\$8,284.74	6.3%	18.9%
Adults	\$1,205.49	\$1,263.86	\$1,386.86	\$1,456.87	\$1,783.53	\$2,090.94	\$2,290.54	11.3%	-20.5%
Basis of Eligibility Unknown (Includes Managed Care)	\$3,980.01	\$7,233.08	\$0.00	\$7,589.86	\$989.83	\$667.38	\$1,573.14	-14.3%	-54.5%
Total	\$3,077.70	\$3,162.92	\$3,513.06	\$3,544.29	\$3,400.88	\$3,555.68	\$4,026.74	4.6%	-8.7%
By Age									
Under Age 1	\$2,382.05	\$2,492.66	\$2,853.50	\$2,946.37	\$2,922.30	\$3,587.33	\$3,944.55	8.8%	7.0%
Age 1 to 5	\$966.93	\$1,006.65	\$1,104.53	\$1,176.60	\$1,231.66	\$1,263.60	\$1,418.92	6.6%	-23.7%
Age 6 to 14	\$1,243.44	\$1,284.73	\$1,304.28	\$1,392.87	\$1,446.97	\$1,508.22	\$1,691.12	5.3%	-4.5%
Age 15 to 20	\$2,283.24	\$2,108.90	\$2,137.18	\$2,197.14	\$2,327.13	\$2,444.17	\$2,733.44	3.0%	-1.9%
Age 21 to 44	\$3,950.95	\$4,055.89	\$4,600.45	\$4,670.72	\$4,778.18	\$5,049.53	\$5,689.11	6.3%	9.1%
Age 45 to 64	\$6,631.16	\$7,086.89	\$8,687.65	\$9,457.03	\$9,354.22	\$10,221.93	\$11,363.66	9.4%	1.8%
Age 65 to 74	\$5,468.83	\$5,798.41	\$7,121.35	\$7,380.90	\$7,538.45	\$8,172.72	\$9,168.66	9.0%	8.9%
Age 75 to 84	\$7,843.47	\$8,136.08	\$10,364.09	\$10,969.55	\$10,925.39	\$11,601.96	\$13,099.86	8.9%	7.6%
Age 85 and Over	\$11,162.47	\$11,283.70	\$14,891.51	\$15,921.79	\$15,697.99	\$16,417.48	\$18,737.40	9.0%	-0.1%
Age Unknown	\$3,980.01	\$7,233.08	\$0.00	\$7,589.86	\$989.83	\$667.38	\$1,573.07	-14.3%	-53.9%
Total	\$3,077.70	\$3,162.92	\$3,513.06	\$3,544.29	\$3,400.88	\$3,555.68	\$4,026.74	4.6%	-8.7%
By Race									
White	\$3,320.72	\$3,511.45	\$3,886.32	\$4,057.07	\$4,085.83	\$4,337.91	\$4,892.64	6.7%	-10.6%
Black	\$1,696.70	\$2,539.64	\$2,799.27	\$2,643.61	\$2,803.82	\$2,855.53	\$3,197.43	11.1%	-15.9%
Hispanic, American Indian or Asian	\$1,713.00	\$1,777.44	\$1,970.97	\$2,096.29	\$2,177.44	\$2,335.59	\$2,587.22	7.1%	-10.8%
Other/Unknown	\$0.00	\$0.00	\$0.00	\$7,589.86	\$989.83	\$667.38	\$1,533.98	-41.3%	-65.1%
Total	\$3,077.70	\$3,162.92	\$3,513.06	\$3,544.29	\$3,400.88	\$3,555.68	\$4,026.74	4.6%	-8.7%
By Sex									
Female	\$2,682.09	\$2,974.34	\$3,416.42	\$3,423.73	\$3,510.44	\$3,384.26	\$3,854.20	6.2%	-15.9%
Male	\$2,890.88	\$3,167.18	\$3,516.18	\$3,386.15	\$3,387.19	\$4,017.02	\$4,461.07	7.5%	2.5%
Unknown	\$0.00	\$0.00	\$0.00	\$7,589.86	\$989.83	\$667.38	\$1,447.65	-42.4%	-57.2%
Total	\$3,077.70	\$3,162.92	\$3,513.06	\$3,544.29	\$3,400.88	\$3,555.68	\$4,026.74	4.6%	-8.7%

Source: MSIS data for FFY 99-04; FFY 05 is projected using state annual report for SFY 05.

SOUTHERN REGION MEDICAID PROFILE

ADDITIONAL STATE HEALTH CARE INFORMATION

Sources: "Issue Briefs", Health Policy Tracking Service, January 2006; "Medicaid Services State by State", CMS, October 2005; "State Health Facts", The Henry Kaiser Foundation, January 2006; state annual report for FY 05; and state Medicaid Website.

Waivers

Oklahoma had two waivers from the Centers for Medicare and Medicaid Services (CMS) to operate a health reform demonstration under Section 1115. SoonerCare Plus, a pre-paid capitated plan, served 183,503 adults and children in FY 02; and SoonerCare Choice, a primary care case management system, served 155,316 adults and children in FY 02. Starting January 2004, SoonerCare Choice became the sole model for the state. As of December 31, 2004 there were 360,076 (297,386 children and 62,690 adults) beneficiaries enrolled in the program.

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. They include:

- Advantage Waiver: Serves 14,100 "frail elderly" that are 65 or older with physical disabilities, operating since July 1, 1993.
- Community Waiver: Serves 3,180 people with mental retardation and certain related conditions, operating since July 1, 1988.
- The In-home Supports Waiver for Children: Implemented in July of 1999 to provide waiver services for additional MR clients, serves approximately 370 children.
- The In-home Supports Waiver for Adults: Implemented in July of 1999 to provide waiver services for additional MR clients, serves approximately 750 adults.

Managed Care

- Any Willing Provider Clause: No

Coverage for Targeted Population

- The state has a Medically Needy Program to provide assistance to approximately 14,000 low-income individuals who do not meet the eligibility requirements for Medicaid.

Cost Containment Measures

- Certificate of Need Program since 1968. Regulates introduction or expansion of new institutional health care facilities and services.

Medicaid

- 18 optional services are offered.

Significant Changes in Medicaid

- Enacted legislation in 2001 to extend Medicaid coverage to individuals that could be eligible as a result of the federal Ticket to Work and Medicaid Buy-in legislation. The programs will provide services to individuals with disabilities that are required to enable them to gain or keep employment.
- Enacted other legislation in 2001 as follows:
 1. Offer elective income deferral programs to physicians that maintain Medicaid contracts and provide Medicaid services;
 2. Establish a reimbursement methodology that will enhance payments for services provided to Medicaid recipients in emergency hospitals in the rural areas;
 3. Implement a case mix reimbursement system for all state regulated long-care providers, effective November 2003 and;
 4. Immediately provide coverage under prior authorization for any new FDA approved drug if the drug falls within a drug class that has already been placed under prior authorization authority.

SOUTHERN REGION MEDICAID PROFILE

Significant Changes in Medicaid (Continued)

• In 2002, enacted legislation and/or policy changes in Medicaid as follows:

1. Expanded drug classes subject to the product based prior authorization program (PDL).
2. Changed the reimbursement rate for prescription drugs to the average wholesale price minus 12% (was 10.5%).
3. Reduced the maximum number of visits authorized for outpatient mental health care.
4. Reduced the per diem rate for nursing facility care days by 25%.
5. Limited Part B Medicare crossover payments to no more than the Medicaid allowable (15% reduction).
6. Reduced rates for outpatient behavioral health services provided to nursing facility clients by 10%.

• Implemented the Oklahoma Breast and Cervical Cancer Program, effective January 1, 2005, with eligible women receiving full Medicaid benefits for the duration of their cancer treatment. As of May 13, 2005, 1,554 applications had been received by the department.

• In 2004, enacted legislation and/or policy changes in Medicaid as follows:

1. Increased the prescription limit for all adult Medicaid recipients to 6 per month, with a maximum of 3 brand name prescriptions, effective January 1, 2004.
2. Increased reimbursement rates to nursing homes (7%), hospitals (5%), doctors, and ambulance providers (from 72% to 90% of the Medicare rate).

Children's Health Insurance Program: Medicaid Expansion

• CHIP in Oklahoma is called "SoonerCare". The program received HCFA approval on May 26, 1998. The program is administered by the Oklahoma Health Care Authority through an expansion of Medicaid. SoonerCare provides health care coverage to approximately 115,000 children/adolescents and eligible pregnant women.

• Phase I provides coverage for eligible pregnant women and children/adolescents birth through age 17 in families with incomes up to 185% of the FPL.

• Phase II provides coverage for eligible children/adolescents birth through age 17 in families with income between 100% and 185% of the FPL. The program received HCFA approval on March 25, 1999 and expects to cover an additional 4,915 new enrollees.

• Amended the State Medicaid plan to cover children in families with incomes between 150% and 185% of the FPL, effective June 2000 and covers approximately 45,567 individuals as of September 30, 2004.