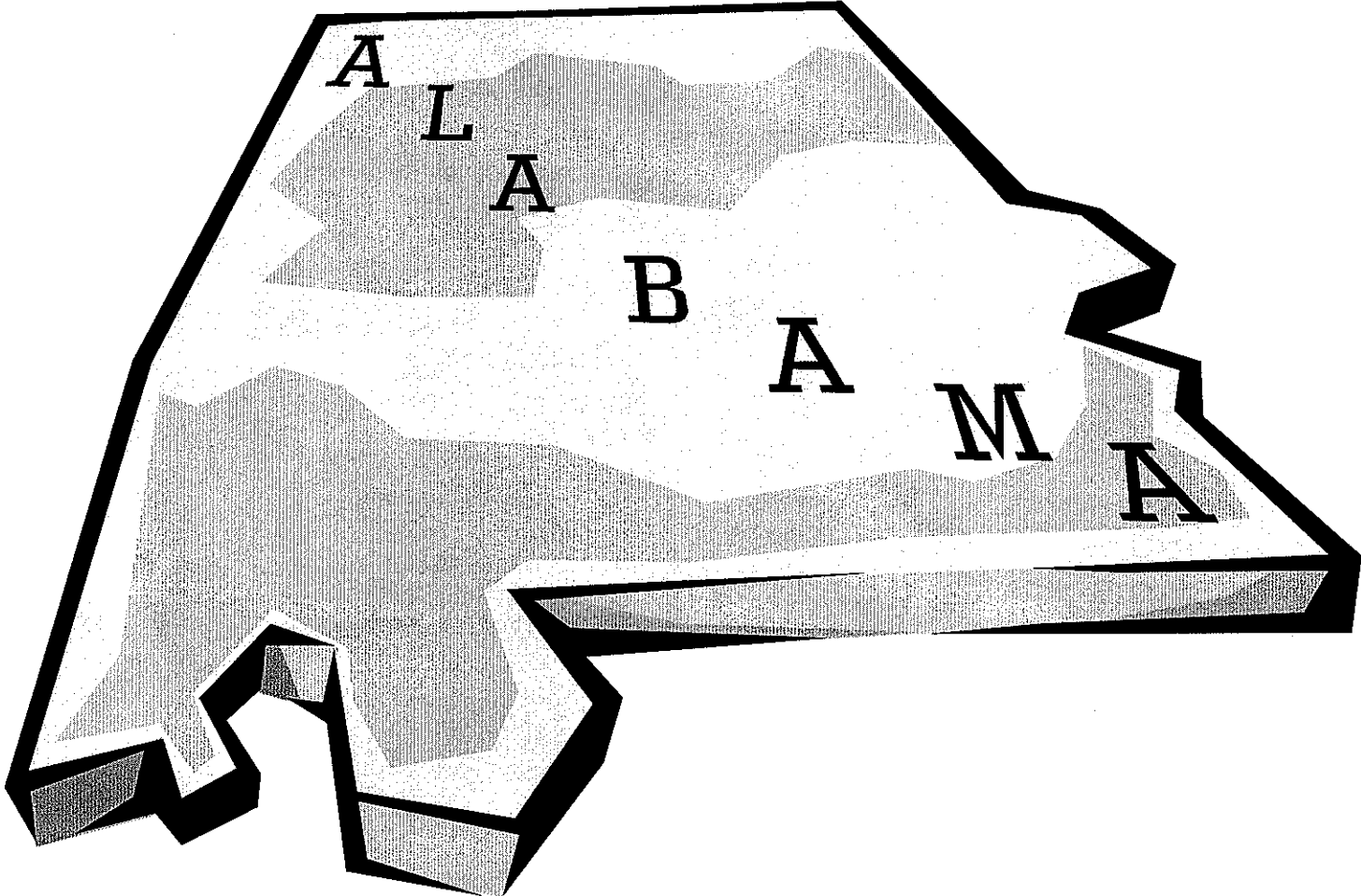
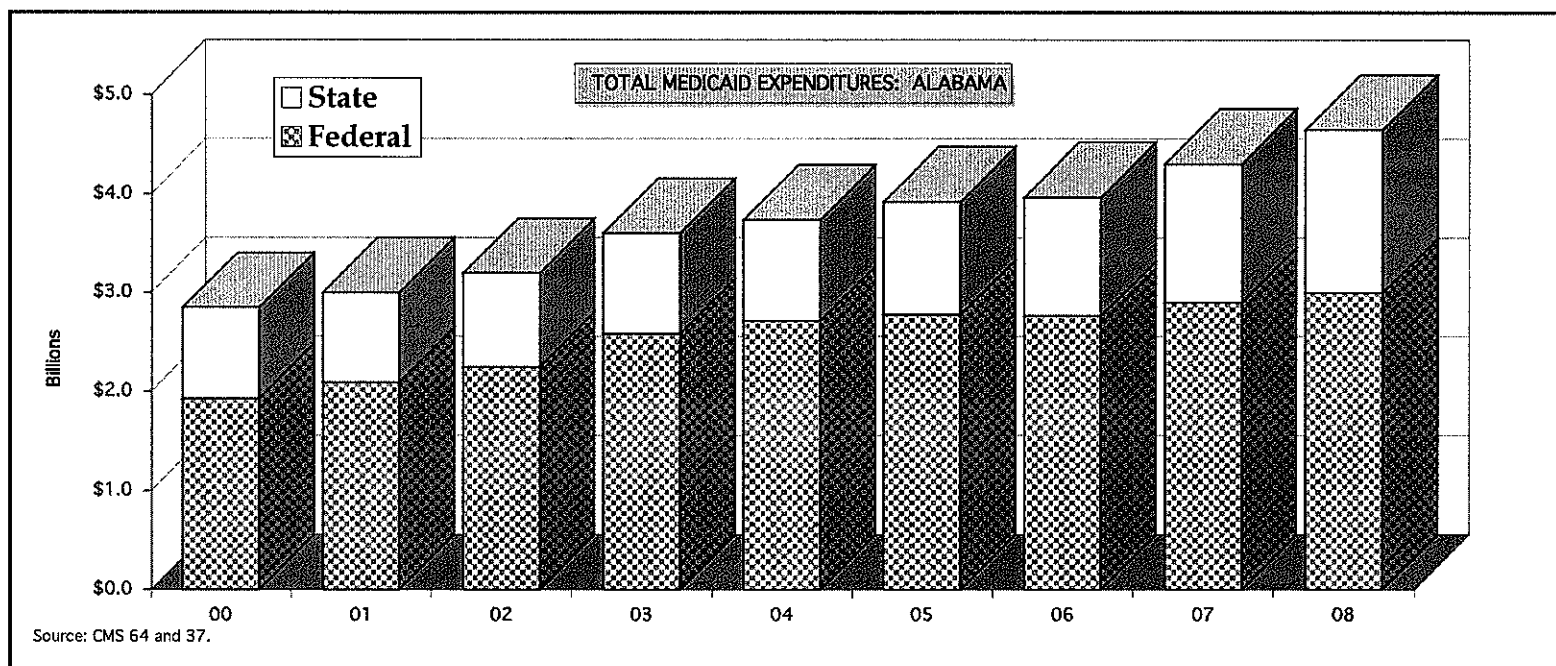


STATE MEDICAID PROFILE



SOUTHERN REGION MEDICAID PROFILE



State profile revised to reflect MSIS statistical data as reported by CMS for federal fiscal years 00 through 05.

	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	FFY 07*	FFY 08**	Annual Rate of Change	Total Change 00-08
Medicaid Payments	\$2,773,701,447	\$2,886,401,740	\$3,097,899,240	\$3,477,983,432	\$3,636,777,895	\$3,837,473,614	\$3,860,046,716	\$4,203,437,000	\$4,528,599,000	6.3%	63.3%
Federal Share	\$1,884,058,352	\$2,024,861,694	\$2,188,351,619	\$2,508,354,966	\$2,650,074,779	\$2,725,400,547	\$2,700,082,264	\$2,842,837,000	\$2,996,649,000	6.0%	59.1%
State Share	\$889,643,095	\$861,540,046	\$909,547,621	\$969,628,466	\$986,703,116	\$1,112,073,067	\$1,159,964,452	\$1,360,600,000	\$1,531,950,000	7.0%	72.2%
Administrative Costs	\$74,090,808	\$112,293,202	\$101,262,707	\$127,998,912	\$105,702,103	\$87,376,814	\$107,798,418	\$104,864,000	\$118,774,000	6.1%	60.3%
Federal Share	\$42,231,761	\$64,813,395	\$58,063,419	\$78,210,631	\$61,917,937	\$50,434,909	\$63,561,920	\$58,175,000	\$65,130	-55.5%	-99.8%
State Share	\$31,859,047	\$47,479,807	\$43,199,288	\$49,788,281	\$43,784,166	\$36,941,905	\$44,236,498	\$46,689,000	\$118,708,870	17.9%	272.6%
Admin. Costs as % of Payments	2.67%	3.89%	3.27%	3.68%	2.91%	2.28%	2.79%	2.49%	2.62%		
Federal Match Rate*	69.57%	69.99%	70.45%	70.60%	70.80%	70.83%	69.51%	68.85%	67.62%		

*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 07 and 08 reflect latest estimates reported by each state (CMS 37).

SOUTHERN REGION MEDICAID PROFILE

STATE FINANCING	Payments ***		Administration	
	FFY00	FFY 06	FFY 00	FFY 06
State General Fund	\$519,054,760	\$1,159,964,452	\$31,859,047	\$44,236,498
Local Funds	\$0	\$0	\$0	\$0
Provider Taxes	\$29,000,000	\$0	\$0	\$0
Donations	\$0	\$0	\$0	\$0
Other	\$341,588,335	\$0	\$0	\$0
Total State Share	\$889,643,095	\$1,159,964,452	\$31,859,047	\$44,236,498

***Note: State financing in FY 06 reflects state general fund support only, as other revenue source amounts that support Medicaid spending are unknown at the time this report is generated.

Provider Taxes Currently in Place (FFY 06)		
Provider(s)	Tax Rate	Amount
Nursing homes	\$1,900 per bed/year, capped at 6% of gross revenue	
Pharmacies	\$.10 per prescription over \$3.00	
Total		\$0

*Total amount generated from provider taxes for FY 06 is unknown.

DISPROPORTIONATE SHARE HOSPITAL (DSH) PAYMENTS

	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	FFY 07*	FFY 08**	Annual Change
General Hospitals	\$353,173,872	\$363,436,268	\$370,514,816	\$350,366,735	\$405,765,866	\$405,621,719	\$413,662,335	\$420,683,000	\$441,717,000	3.0%
Mental Hospitals	\$3,301,620	\$3,301,620	\$3,301,620	\$3,301,620	\$3,301,620	\$3,301,620	\$3,301,620	\$0	\$0	-100.0%
Total	\$356,475,492	\$366,737,888	\$373,816,436	\$353,668,355	\$409,067,486	\$408,923,339	\$416,963,955	\$420,683,000	\$441,717,000	2.8%

SELECTED ELIGIBILITY CRITERIA

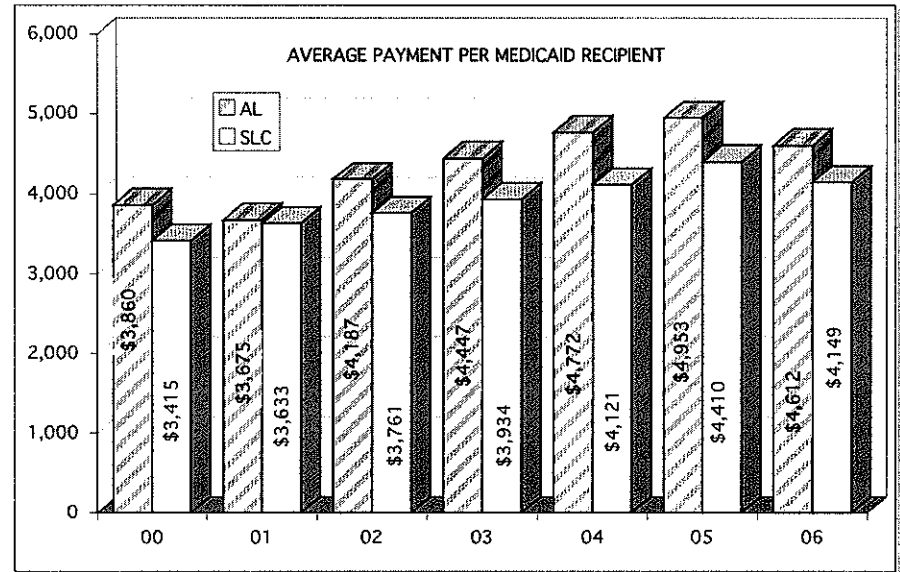
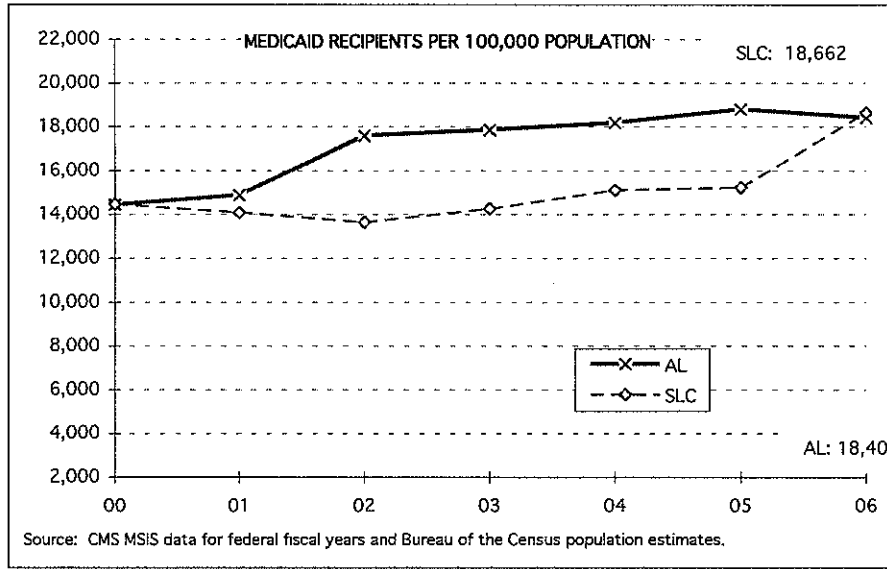
DEMOGRAPHIC DATA & POVERTY INDICATORS (2006)

		2006	% of FPL*			Rank in U.S.
TANF-Temporary Assistance for Needy Families (Family of 3)	Need Standard	N/A	N/A	State population—December 21, 2007*	4,590,240	23
	Payment Standard	\$215	15.5%	Per capita personal income**	\$30,841	42
	Maximum Payment	\$215	15.5%	Median household income**	\$38,473	45
Medically Needy Program (Family of 2)	Income Eligibility Standard	N/A		Population below Federal Poverty Level*	734,438	
	Resource Standard	N/A		Percent of total state population	16.0%	6
Pregnant Women, Children and Infants (% of FPL*)	Pregnant women and children to 6		133.0%	Population without health insurance coverage*	689,000	21
	Children 6 to 14		100.0%	Percent of total state population	15.0%	
	Children 14 to 18		100.0%	Recipients of Food Stamps***	546,684	16
SSI Eligibility Levels	Income:			Households receiving Food Stamps***	220,915	
	Single Person	\$603	73.8%	Total value of issuance***	\$593,698,537	18
	Couple	\$904	82.2%	Average monthly benefit per recipient	\$90.50	26
	Resources:			Average monthly benefit per household	\$223.95	
	Single Person	\$2,000		Monthly recipients of Temporary Assistance to Needy Families (TANF)****	44,838	20
	Couple	\$3,000		Total TANF payments****	\$34,910,920	31
				Average monthly payment per recipient	\$64.88	
				Maximum monthly payment per family of 3	\$215.00	49

*Current (2006) federal poverty level is \$9,800 per year for a single person, \$13,200 for a family of two and \$16,600 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)

<u>RECIPIENTS BY TYPE OF SERVICES</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>FFY 06</u>	<i>Annual Change</i>
01. General Hospital	54,225	55,652	68,429	68,754	67,777	68,607	65,573	3.2%
02. Mental Hospital	1,604	1,786	567	496	313	263	194	-29.7%
03. Skilled and Intermediate (non-MR) Care Nursing	25,118	28,550	26,530	26,692	26,723	26,448	26,312	0.8%
04. Intermediate Care for Mentally Retarded	674	796	558	418	341	243	248	-15.3%
05. Physician Services	404,612	444,067	511,827	526,291	536,214	558,443	567,822	5.8%
06. Dental Services	72,287	82,592	116,462	138,858	155,541	167,899	176,271	16.0%
07. Other Practitioners	70,759	89,460	98,840	97,032	99,803	107,342	110,992	7.8%
08. Outpatient Hospital	218,623	245,726	264,266	276,616	285,241	291,596	295,665	5.2%
09. Clinic Services	167,483	154,812	273,701	268,759	281,862	295,073	302,853	10.4%
10. Lab and X-Ray	303,590	357,197	345,876	345,618	347,567	376,910	375,237	3.6%
11. Home Health	51,088	60,339	62,771	68,241	65,149	76,983	76,071	6.9%
12. Prescribed Drugs	438,529	496,797	500,790	527,855	543,088	545,201	544,417	3.7%
13. Family Planning	3,703	33,576	3,398	3,449	3,265	2,913	3,079	-3.0%
14. Early & Periodic Screening, Diagnosis & Treatment	0	162,914	0	0	0	0	0	-100.0%
15. Other Care	88,808	148,251	126,078	122,197	123,656	133,631	131,029	6.7%
16. Personal Care Support Services	37,473	0	50,298	53,440	53,502	43,943	48,128	4.3%
17. Home/Community Based Waiver Services	0	0	0	0	0	0	0	n/a
18. Prepaid Health Care	0	8,461	489,447	517,964	530,504	597,730	603,000	134.7%
19. Primary Care Case Management (PCCM) Services	417,457	380,000	424,889	442,633	402,261	415,405	448,694	1.2%
Total*	619,480	643,527	765,328	780,617	808,192	838,787	844,988	5.3%

*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>	<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>FFY 06</u>	<u>Annual</u>	<u>Share of Total</u>
								<u>Change</u>	<u>FFY 06</u>
01. General Hospital	\$148,854,036	\$334,616,062	\$182,897,571	\$201,752,940	\$203,383,116	\$176,338,839	\$166,695,824	1.9%	4.3%
02. Mental Hospital	\$34,894,808	\$35,450,442	\$25,804,158	\$19,628,270	\$13,730,915	\$9,878,954	\$10,633,211	-18.0%	0.3%
03. Skilled and Intermediate (non-MR) Care Nursing	\$622,181,339	\$666,221,211	\$667,433,222	\$710,889,268	\$730,490,157	\$774,335,142	\$792,659,930	4.1%	20.3%
04. Intermediate Care for Mentally Retarded	\$62,973,298	\$61,589,438	\$60,382,174	\$54,858,987	\$36,883,285	\$27,431,503	\$26,936,270	-13.2%	0.7%
05. Physician Services	\$119,160,192	\$135,989,905	\$190,744,343	\$208,562,768	\$219,939,027	\$235,340,335	\$276,522,480	15.1%	7.1%
06. Dental Services	\$11,465,011	\$23,157,211	\$34,650,020	\$40,696,990	\$44,449,030	\$48,614,051	\$52,972,028	29.1%	1.4%
07. Other Practitioners	\$4,428,368	\$6,340,319	\$8,666,728	\$9,475,258	\$9,795,147	\$10,830,962	\$12,314,725	18.6%	0.3%
08. Outpatient Hospital	\$44,267,996	\$44,166,407	\$50,712,351	\$52,856,683	\$59,948,594	\$62,788,641	\$68,105,647	7.4%	1.7%
09. Clinic Services	\$128,114,224	\$78,498,228	\$215,009,548	\$247,622,034	\$255,995,624	\$267,748,316	\$268,237,679	13.1%	6.9%
10. Lab and X-Ray	\$34,819,967	\$37,294,304	\$39,484,863	\$43,762,928	\$45,412,289	\$57,300,821	\$68,554,152	12.0%	1.8%
11. Home Health	\$29,002,412	\$66,011,518	\$34,733,551	\$35,950,629	\$34,472,022	\$47,034,889	\$47,135,428	8.4%	1.2%
12. Prescribed Drugs	\$331,574,388	\$390,122,853	\$454,370,478	\$537,070,779	\$597,327,339	\$609,128,245	\$463,670,108	5.7%	11.9%
13. Family Planning	\$2,022,347	\$17,993,448	\$1,330,732	\$1,337,296	\$1,244,784	\$1,088,889	\$1,117,815	-9.4%	0.0%
14. Early & Periodic Screening, Diagnosis & Treatment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
15. Other Care	\$748,496,244	\$189,923,782	\$550,403,857	\$548,467,488	\$810,360,251	\$924,375,329	\$618,719,439	-3.1%	15.9%
16. Personal Care Support Services	\$58,741,458	\$165,456,106	\$86,371,460	\$107,303,975	\$107,727,252	\$107,426,471	\$119,326,832	12.5%	3.1%
17. Home/Community Based Waiver Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
18. Prepaid Health Care	\$0	\$101,047,469	\$579,709,608	\$628,510,702	\$675,667,038	\$779,890,500	\$883,623,507	54.3%	22.7%
19. Primary Care Case Management (PCCM) Services	\$10,198,809	\$11,227,248	\$21,358,938	\$22,572,729	\$9,798,559	\$14,651,858	\$19,534,224	11.4%	0.5%
Total (excludes DSH pymts, pharmacy rebates, & other adjs.)	\$2,391,194,897	\$2,365,105,951	\$3,204,063,602	\$3,471,319,724	\$3,856,624,429	\$4,154,203,745	\$3,896,759,299	8.5%	100.0%

AVERAGE PAYMENTS PER RECIPIENT BY TYPE OF SERVICES

								<u>(+) or (-) SLC</u>	<u>Aug. FFY 06</u>
01. General Hospital	\$2,745.12	\$6,012.65	\$2,672.81	\$2,934.42	\$3,000.77	\$2,570.27	\$2,542.14	-1.3%	-52.7%
02. Mental Hospital	\$21,754.87	\$19,847.34	\$45,509.98	\$39,573.13	\$43,868.74	\$37,562.56	\$54,810.37	16.6%	206.1%
03. Skilled and Intermediate (non-MR) Care Nursing	\$24,770.34	\$23,335.24	\$25,157.68	\$26,633.05	\$27,335.63	\$29,277.64	\$30,125.42	3.3%	25.0%
04. Intermediate Care for Mentally Retarded	\$93,432.19	\$77,356.27	\$108,211.78	\$131,241.60	\$108,162.13	\$112,886.84	\$108,613.99	2.5%	23.9%
05. Physician Services	\$294.50	\$306.24	\$372.67	\$396.29	\$410.17	\$421.42	\$486.99	8.7%	-11.9%
06. Dental Services	\$158.60	\$280.38	\$297.52	\$293.08	\$285.77	\$289.54	\$300.51	11.2%	-17.3%
07. Other Practitioners	\$62.58	\$70.87	\$87.68	\$97.65	\$98.14	\$100.90	\$110.95	10.0%	-52.3%
08. Outpatient Hospital	\$202.49	\$179.74	\$191.90	\$191.08	\$210.17	\$215.33	\$230.35	2.2%	-63.1%
09. Clinic Services	\$764.94	\$507.06	\$785.56	\$921.35	\$908.23	\$907.40	\$885.70	2.5%	26.2%
10. Lab and X-Ray	\$114.69	\$104.41	\$114.16	\$126.62	\$130.66	\$152.03	\$182.70	8.1%	-15.2%
11. Home Health	\$567.70	\$1,094.01	\$553.34	\$526.82	\$529.13	\$610.98	\$619.62	1.5%	-84.7%
12. Prescribed Drugs	\$756.11	\$785.28	\$907.31	\$1,017.46	\$1,099.87	\$1,117.25	\$851.68	2.0%	-12.0%
13. Family Planning	\$546.14	\$535.90	\$391.62	\$387.73	\$381.25	\$373.80	\$363.04	-6.6%	-69.6%
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	\$8,428.25	\$1,281.10	\$4,365.58	\$4,488.39	\$6,553.34	\$6,917.37	\$4,722.00	-9.2%	154.3%
16. Personal Care Support Services	\$1,567.57	\$0.00	\$1,717.19	\$2,007.93	\$2,013.52	\$2,444.68	\$2,479.36	7.9%	31.7%
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	\$11,942.95	\$1,184.42	\$1,213.43	\$1,273.63	\$1,304.75	\$1,465.38	-34.3%	29.1%
19. Primary Care Case Management (PCCM) Services	\$24.43	\$29.55	\$50.27	\$51.00	\$24.36	\$35.27	\$43.54	10.1%	56.6%
Total (Average)	\$3,860.00	\$3,675.22	\$4,186.52	\$4,446.89	\$4,771.92	\$4,952.63	\$4,611.61	3.0%	11.2%

TOTAL PER CAPITA EXPENDITURES

\$664.26	\$693.80	\$735.10	\$825.19	\$841.56	\$879.15	\$864.41	4.5%	-2.0%
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Source: MSIS data for FFY 00-06.

SOUTHERN REGION MEDICAID PROFILE
DATA BY OTHER CHARACTERISTICS

RECIPIENTS BY OTHER CHARACTERISTICS

	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	Annual Change	Share of Total FFY 06
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	264,650	207,260	274,859	271,399	264,324	259,393	256,803	-0.5%	30.4%
Poverty Related Eligibles	293,953	305,995	350,113	379,603	406,198	430,979	447,208	7.2%	52.9%
Medically Needy	0	0	0	0	0	0	0	n/a	0.0%
Other Eligibles	42,669	130,096	107,442	107,339	112,313	120,200	121,095	19.0%	14.3%
Maintenance Assistance Status Unknown	18,208	175	32,914	22,276	25,357	28,215	19,882	1.5%	2.4%
Total*	619,480	643,527	765,328	780,617	808,192	838,787	844,988	5.3%	100.0%
By Basis of Eligibility									
Aged, Blind, or Disabled	223,391	249,131	233,211	236,981	244,143	249,807	253,794	2.1%	30.0%
Children	327,328	311,334	395,071	414,916	423,922	436,829	429,924	4.6%	50.9%
Foster Care Children	4,907	5,539	6,033	6,630	7,149	7,649	8,256	9.1%	1.0%
Adults	45,646	74,194	98,099	99,551	107,621	115,918	132,755	19.5%	15.7%
Basis of Eligibility Unknown	18,208	3,330	32,914	22,539	25,357	28,584	20,259	1.8%	2.4%
Total*	619,480	643,527	765,328	780,617	808,192	838,787	844,988	5.3%	100.0%
By Age									
Under Age 1	29,543	33,127	30,004	29,739	30,160	30,774	33,024	1.9%	3.9%
Age 1 to 5	125,191	133,269	146,445	151,364	152,119	154,664	156,261	3.8%	18.5%
Age 6 to 14	148,493	141,225	177,466	187,773	191,389	196,199	199,367	5.0%	23.6%
Age 15 to 20	63,554	64,755	84,025	90,309	95,741	100,592	103,676	8.5%	12.3%
Age 21 to 44	94,033	107,748	147,684	149,496	157,167	166,785	167,669	10.1%	19.8%
Age 45 to 64	57,128	64,131	64,979	67,585	72,144	76,586	80,078	5.8%	9.5%
Age 65 to 74	31,389	36,547	31,148	31,372	32,722	33,724	34,343	1.5%	4.1%
Age 75 to 84	28,897	34,301	28,788	29,293	30,269	30,253	30,084	0.7%	3.6%
Age 85 and Over	23,044	28,333	21,876	21,410	21,124	20,995	20,604	-1.8%	2.4%
Age Unknown	18,208	91	32,913	22,276	25,357	28,215	19,882	1.5%	2.4%
Total*	619,480	643,527	765,328	780,617	808,192	838,787	844,988	5.3%	100.0%
By Race									
White	276,241	295,379	323,018	338,022	352,748	364,289	369,020	4.9%	43.7%
Black	310,453	315,513	368,350	376,403	382,455	391,739	395,785	4.1%	46.8%
Hispanic, American Indian or Asian	23,554	24,056	17,650	23,449	27,419	31,021	36,447	7.5%	4.3%
Other/Unknown	9,232	8,579	56,310	42,743	45,570	51,738	43,736	29.6%	5.2%
Total*	619,480	643,527	765,328	780,617	808,192	838,787	844,988	5.3%	100.0%
By Sex									
Female	376,105	396,843	448,541	461,312	477,981	495,578	501,675	4.9%	59.4%
Male	235,900	238,105	278,237	290,639	299,057	309,636	316,636	5.0%	37.5%
Unknown	7,475	8,579	38,550	28,666	31,154	33,573	26,677	23.6%	3.2%
Total*	619,480	643,527	765,328	780,617	808,192	838,787	844,988	5.3%	100.0%

Source: MSIS data for FFY 00-06.

SOUTHERN REGION MEDICAID PROFILE

PAYMENTS BY OTHER CHARACTERISTICS

	<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>FFY 06</u>	<u>Annual Change</u>	<u>Share of Total FFY 06</u>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$800,200,089	\$913,449,432	\$1,109,754,742	\$1,196,751,593	\$1,252,610,376	\$1,302,120,865	\$1,278,840,251	8.1%	32.8%
Poverty Related Eligibles	\$234,579,059	\$402,859,805	\$473,180,870	\$552,493,261	\$593,091,180	\$657,964,464	\$732,243,488	20.9%	18.8%
Medically Needy	\$0	\$0	\$0	\$0	\$0	\$0	\$0	<i>n/a</i>	0.0%
Other Eligibles	\$752,471,213	\$1,007,304,680	\$937,985,730	\$1,034,707,799	\$1,067,146,626	\$1,125,540,828	\$1,083,902,363	6.3%	27.8%
Maintenance Assistance Status Unknown	\$603,944,536	\$41,492,034	\$683,142,260	\$687,367,071	\$943,776,247	\$1,068,577,588	\$801,773,197	4.8%	20.6%
Total*	\$2,391,194,897	\$2,365,105,951	\$3,204,063,602	\$3,471,319,724	\$3,856,624,429	\$4,154,203,745	\$3,896,759,299	8.5%	100.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$1,435,119,810	\$1,823,104,915	\$1,762,787,071	\$1,934,996,456	\$2,019,764,188	\$2,124,907,595	\$2,058,360,791	6.2%	52.8%
Children	\$223,369,745	\$260,456,830	\$539,771,384	\$609,105,175	\$630,347,038	\$680,154,703	\$718,557,951	21.5%	18.4%
Foster Care Children	\$38,472,637	\$45,816,824	\$78,065,858	\$89,351,325	\$90,198,685	\$88,935,786	\$79,214,130	12.8%	2.0%
Adults	\$90,288,169	\$189,873,245	\$140,297,029	\$148,033,794	\$172,538,271	\$187,369,386	\$234,120,091	17.2%	6.0%
Basis of Eligibility Unknown	\$603,944,536	\$45,854,137	\$683,142,260	\$689,832,974	\$943,776,247	\$1,072,836,275	\$806,506,336	4.9%	20.7%
Total*	\$2,391,194,897	\$2,365,105,951	\$3,204,063,602	\$3,471,319,724	\$3,856,624,429	\$4,154,203,745	\$3,896,759,299	8.5%	100.0%
By Age									
Under Age 1	\$35,202,698	\$46,950,436	\$55,911,691	\$57,256,270	\$57,899,470	\$55,663,140	\$70,573,979	12.3%	1.8%
Age 1 to 5	\$91,556,637	\$119,608,058	\$225,403,923	\$248,343,089	\$251,530,982	\$264,315,065	\$287,476,005	21.0%	7.4%
Age 6 to 14	\$128,556,471	\$179,079,820	\$307,256,233	\$349,204,394	\$359,604,854	\$382,720,006	\$403,304,095	21.0%	10.3%
Age 15 to 20	\$105,362,045	\$141,251,156	\$196,167,054	\$230,057,353	\$246,053,200	\$265,260,708	\$284,359,491	18.0%	7.3%
Age 21 to 44	\$310,309,789	\$419,311,505	\$424,945,169	\$462,331,834	\$490,756,497	\$526,837,753	\$535,635,179	9.5%	13.7%
Age 45 to 64	\$300,175,187	\$373,617,468	\$422,966,242	\$487,529,915	\$533,438,482	\$573,486,884	\$585,727,448	11.8%	15.0%
Age 65 to 74	\$171,973,879	\$213,088,744	\$201,910,709	\$222,770,364	\$234,440,575	\$250,756,945	\$222,277,889	4.4%	5.7%
Age 75 to 84	\$279,197,320	\$357,021,249	\$308,300,001	\$335,938,153	\$347,726,821	\$357,985,806	\$321,465,300	2.4%	8.2%
Age 85 and Over	\$364,916,335	\$473,826,452	\$378,062,137	\$390,521,281	\$391,397,301	\$408,599,850	\$384,166,716	0.9%	9.9%
Age Unknown	\$603,944,536	\$41,351,063	\$683,140,443	\$687,367,071	\$943,776,247	\$1,068,577,588	\$801,773,197	4.8%	20.6%
Total*	\$2,391,194,897	\$2,365,105,951	\$3,204,063,602	\$3,471,319,724	\$3,856,624,429	\$4,154,203,745	\$3,896,759,299	8.5%	100.0%
By Race									
White	\$1,255,734,290	\$1,372,062,575	\$1,823,366,519	\$1,548,347,097	\$1,624,537,913	\$1,714,530,536	\$1,699,567,621	5.2%	43.6%
Black	\$684,762,003	\$818,115,856	\$1,072,412,710	\$1,089,129,166	\$1,135,092,056	\$1,198,176,224	\$1,212,677,449	10.0%	31.1%
Hispanic, American Indian or Asian	\$23,738,219	\$104,669,801	\$116,545,062	\$41,540,134	\$47,579,754	\$59,189,918	\$72,075,470	20.3%	1.8%
Other/Unknown	\$426,960,385	\$70,257,719	\$191,739,311	\$792,303,327	\$1,049,414,706	\$1,182,307,067	\$912,438,759	13.5%	23.4%
Total*	\$2,391,194,897	\$2,365,105,951	\$3,204,063,602	\$3,471,319,724	\$3,856,624,429	\$4,154,203,745	\$3,896,759,299	8.5%	100.0%
By Sex									
Female	\$1,387,231,537	\$1,575,701,343	\$1,630,176,531	\$1,783,721,953	\$1,867,933,152	\$1,970,268,935	\$1,942,884,948	5.8%	49.9%
Male	\$649,581,968	\$718,582,751	\$882,544,828	\$989,511,107	\$1,034,701,138	\$1,107,551,291	\$1,141,018,091	9.8%	29.3%
Unknown	\$354,381,391	\$70,821,857	\$691,342,243	\$698,086,664	\$953,990,139	\$1,076,383,519	\$812,856,260	14.8%	20.9%
Total*	\$2,391,194,897	\$2,365,105,951	\$3,204,063,602	\$3,471,319,724	\$3,856,624,429	\$4,154,203,745	\$3,896,759,299	8.5%	100.0%

Source: MSIS data for FFY 00-06.

SOUTHERN REGION MEDICAID PROFILE

AVERAGE PAYMENT PER RECIPIENT BY OTHER CHARACTERISTICS

	<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>FFY 06</u>	<i>Annual Change</i>	<i>Above (+) or Below (-) SLC Avg. FFY 06</i>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$3,023.62	\$4,407.26	\$4,037.54	\$4,409.57	\$4,738.92	\$5,019.88	\$4,979.85	8.7%	-13.2%
Poverty Related Eligibles	\$798.02	\$1,316.56	\$1,351.51	\$1,455.45	\$1,460.10	\$1,526.67	\$1,637.37	12.7%	-17.5%
Medically Needy	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<i>n/a</i>	-100.0%
Other Eligibles	\$17,635.08	\$7,742.75	\$8,730.16	\$9,639.63	\$9,501.54	\$9,363.90	\$8,950.84	-10.7%	26.4%
Maintenance Assistance Status Unknown	\$33,169.19	\$236,601.83	\$20,755.37	\$30,856.84	\$37,219.55	\$37,872.68	\$40,326.59	3.3%	1249.8%
Total*	\$3,860.00	\$3,675.22	\$4,186.52	\$4,446.89	\$4,771.92	\$4,952.63	\$4,611.61	3.0%	11.2%
By Basis of Eligibility									
Aged, Blind or Disabled	\$6,424.25	\$7,317.85	\$7,558.76	\$8,165.20	\$8,272.87	\$8,506.20	\$8,110.36	4.0%	-25.8%
Children	\$682.40	\$836.58	\$1,366.26	\$1,468.02	\$1,486.94	\$1,557.03	\$1,671.36	16.1%	6.3%
Foster Care Children	\$7,840.36	\$8,271.93	\$12,939.81	\$13,476.82	\$12,616.97	\$11,627.11	\$9,594.73	3.4%	36.2%
Adults	\$1,978.01	\$2,559.15	\$1,430.16	\$1,487.01	\$1,603.20	\$1,616.40	\$1,763.55	-1.9%	-37.6%
Basis of Eligibility Unknown	\$33,169.19	\$13,770.83	\$20,755.37	\$30,606.19	\$37,219.55	\$37,532.76	\$39,809.78	3.1%	1195.3%
Total*	\$3,860.00	\$3,675.22	\$4,186.52	\$4,446.89	\$4,771.92	\$4,952.63	\$4,611.61	3.0%	11.2%
By Age									
Under Age 1	\$1,191.57	\$1,417.28	\$1,863.47	\$1,925.29	\$1,919.74	\$1,808.77	\$2,137.05	10.2%	-45.9%
Age 1 to 5	\$731.34	\$897.49	\$1,539.17	\$1,640.70	\$1,653.51	\$1,708.96	\$1,839.72	16.6%	-3.0%
Age 6 to 14	\$865.74	\$1,268.05	\$1,731.35	\$1,859.72	\$1,878.92	\$1,950.67	\$2,022.92	15.2%	10.2%
Age 15 to 20	\$1,657.83	\$2,181.32	\$2,334.63	\$2,547.45	\$2,569.99	\$2,637.00	\$2,742.77	8.8%	-4.8%
Age 21 to 44	\$3,300.01	\$3,891.58	\$2,877.39	\$3,092.60	\$3,122.52	\$3,158.78	\$3,194.60	-0.5%	-37.6%
Age 45 to 64	\$5,254.43	\$5,825.86	\$6,509.28	\$7,213.58	\$7,394.08	\$7,488.14	\$7,314.46	5.7%	-29.5%
Age 65 to 74	\$5,478.79	\$5,830.48	\$6,482.30	\$7,100.93	\$7,164.62	\$7,435.56	\$6,472.29	2.8%	-3.9%
Age 75 to 84	\$9,661.81	\$10,408.44	\$10,709.32	\$11,468.21	\$11,487.89	\$11,833.07	\$10,685.59	1.7%	3.4%
Age 85 and Over	\$15,835.63	\$16,723.41	\$17,282.05	\$18,240.13	\$18,528.56	\$19,461.77	\$18,645.25	2.8%	9.4%
Age Unknown	\$33,169.19	\$456,159.80	\$20,755.95	\$30,856.84	\$37,219.55	\$37,872.68	\$40,326.59	3.3%	1249.8%
Total*	\$3,860.00	\$3,675.22	\$4,186.52	\$4,446.89	\$4,771.92	\$4,952.63	\$4,611.61	3.0%	11.2%
By Race									
White	\$4,545.79	\$4,645.09	\$5,644.78	\$4,580.61	\$4,605.38	\$4,706.51	\$4,605.62	0.2%	-9.7%
Black	\$2,205.69	\$2,592.97	\$2,911.40	\$2,893.52	\$2,967.91	\$3,058.61	\$3,063.98	5.6%	-17.1%
Hispanic, American Indian or Asian	\$1,007.82	\$4,351.07	\$6,603.12	\$1,771.51	\$1,735.28	\$1,908.06	\$1,977.54	11.9%	-29.1%
Other/Unknown	\$46,247.88	\$8,189.50	\$3,405.07	\$18,536.45	\$23,028.63	\$22,851.81	\$20,862.42	-12.4%	413.7%
Total*	\$3,860.00	\$3,675.22	\$4,186.52	\$4,446.89	\$4,771.92	\$4,952.63	\$4,611.61	3.0%	11.2%
By Sex									
Female	\$3,688.42	\$3,970.59	\$3,634.40	\$3,866.63	\$3,907.97	\$3,975.70	\$3,872.80	0.8%	-9.7%
Male	\$2,753.63	\$3,017.92	\$3,171.92	\$3,404.61	\$3,459.88	\$3,576.95	\$3,603.56	4.6%	-13.4%
Unknown	\$47,408.88	\$8,255.26	\$17,933.65	\$24,352.43	\$30,621.75	\$32,060.99	\$30,470.30	-7.1%	923.9%
Total*	\$3,860.00	\$3,675.22	\$4,186.52	\$4,446.89	\$4,771.92	\$4,952.63	\$4,611.61	3.0%	11.2%

Source: MSIS data for FFY 00-06.

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

Several **Home and Community Based Services Waivers**, under Section 1915 (c).

These waivers include:

- Mental Retardation/Developmental Disabilities: Serves 5,600 people as of 2005, operating since 1981.
- Elderly and Disabled: Serves 7,816 people as of FY 2005, operating since 1982.
- Independent Living Program (SAIL): Serves 554 people as of FY 2005, operating since 1992.
- Living at Home (LAH): Serves 96 people, operating since 2002.
- HIV/AIDS: Services to individuals with diagnosis of HIV who meet the nursing facility level of care criteria, operating since 2003.
- Assisted Technology: Services to individuals that received private duty nursing (under EPSDT), and are no longer eligible due to age limit (turned 21), operating since 2003.

Managed Care

- Patient 1st: Primary Care Case Management: implemented in January of 1997 in all of the 67 counties. The program will pay physicians \$3 per member per month up to a maximum of 1,000 eligibles per physician. This 1915 (b) waiver was renewed in 2004, and serves approximately 420,000 recipients statewide.
- Partnership Hospital Program: The state contracts with 8 regional Prepaid Insurance Health Plans (PIHP) to provide inpatient hospital services to all eligibles except Medicare Part A only recipients. The PIHPs receive a per member per month capitated rate for each eligible in their region.
- Maternity Care Program authorized under 1915(b) waiver.

Coverage for Targeted Population

- The Uninsured: The state pays disproportionate share payments to the Partnership Hospital Program (Prepaid Health Plan) for payments to member hospitals that provide indigent care.

Cost Containment Measures

- Certificate of Need Program since 1978. Regulates introduction or expansion of new institutional health facilities and services. 1993 exemption from certificate of need review for health care services of rural hospitals.
- Significant increase in the thresholds for state review of expenditures for capital and operating costs for existing HMO's and facilities in 1994.
- Revised CON laws in 1998 to extend the review period of projects and made changes to appeal procedures related to CON decisions.
- Rate setting. Prospective payment/per diem methodology used for Medicaid.
- Pharmacy Benefit Manager program implemented in 1998 to control increasing costs in the pharmacy program.
- Implemented prescription limits on name brand drugs to 4 per month per recipient, except anti-psychotic and retroviral medications, effective July 1, 2004.

Medicaid

- 15 optional services are offered.

SOUTHERN REGION MEDICAID PROFILE

Children's Health Insurance Program: A Combination of Private Insurance and a Medicaid Expansion

- CHIP in Alabama is administered by the Alabama Department of Public Health. Phase I, approved by HCFA on January 30, 1998, is an expansion of Medicaid to cover children/adolescents through age 18 in families with incomes up to 100% of the FPL. The state enrolled 20,000 new eligibles by September of 2000.
 - Phase II (AL-Kids), approved by HCFA on August 18, 1998, is a separate state children's health insurance plan to cover children/adolescents up to age 19 in families with incomes up to 200% of the FPL. The program had a total enrollment a of 60,655 children as of September of 2004.
 - AL-Kids Plus, approved on September 28, 1999, provides a supplementary set of services for children with special health care needs.
 - AL-Kids Plus received CMS approval of a fifth plan amendment on October 30, 2003 that modified some eligibility and cost sharing criteria.
 - Families with incomes up to 150% of the FPL are required to pay an annual premium of \$50 per child, with a \$150 maximum per family.
 - Families with incomes above 150% of the FPL are required to pay an annual premium of \$100 per child, with a maximum of \$300.
 - Families are given the option of paying premiums on an annual or monthly basis.
 - There are no cost sharing requirements for American Indians or Alaskan Natives.
- Other cost sharing provisions for individuals in families with income less than 150% of the FPL include:
- \$1 co-payment for generic prescriptive drugs;
 - \$3 co-payment for brand name prescriptive drugs, dental visits, doctor visits, and allergy treatments;
 - \$5 co-payment for non-preferred prescription drugs, inpatient hospital care, allergy testing, emergency services, ambulance service, inpatient mental and chemical dependency care, and outpatient surgical services; and
 - \$10 for emergency visits that are non-emergency.
- The copays for individuals in families with income above 150% of the FPL are double the amounts paid by the below 150% group except for dental visits, doctor visits, and prescription drugs, which increase from \$3 to \$5.