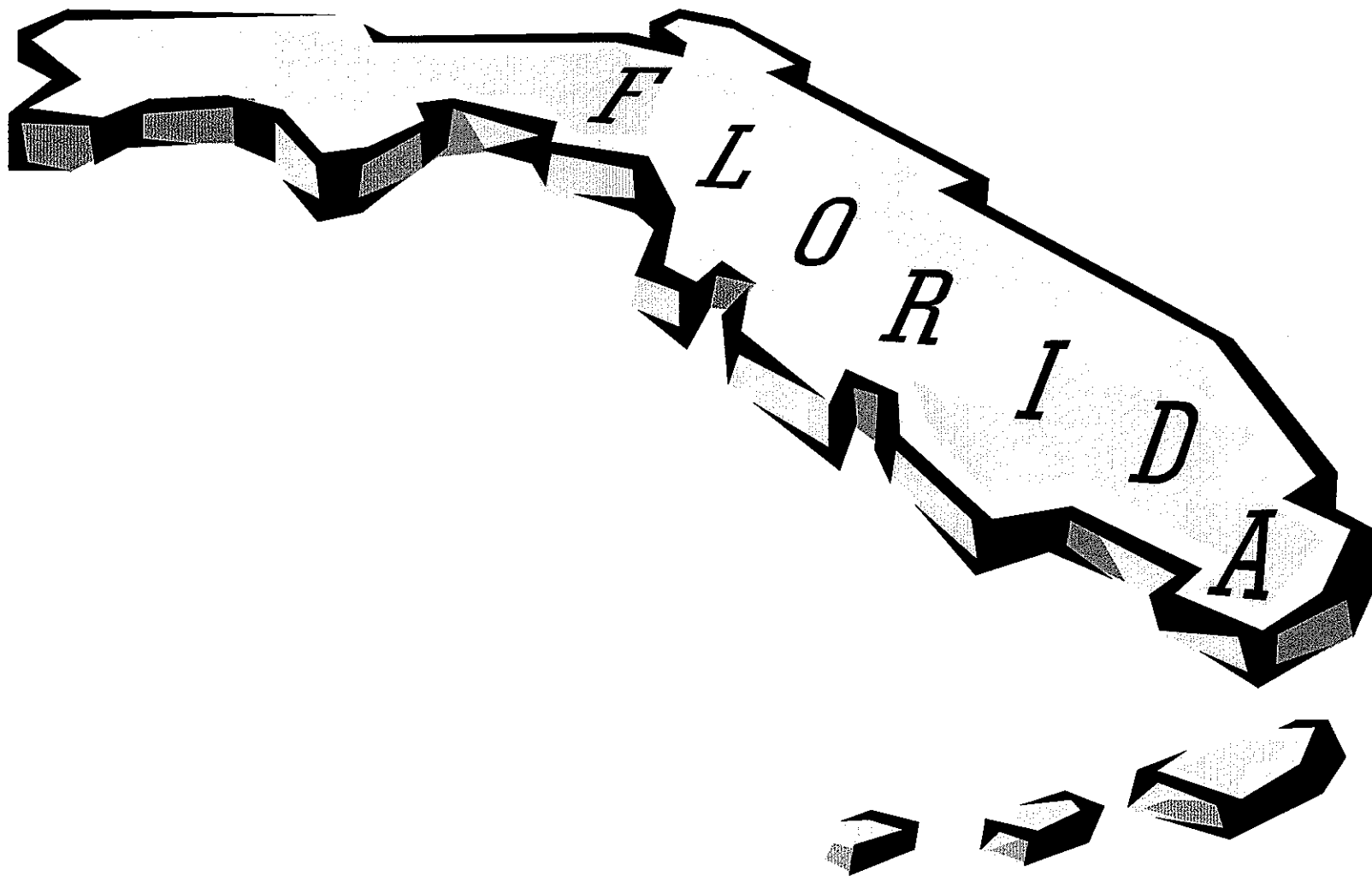
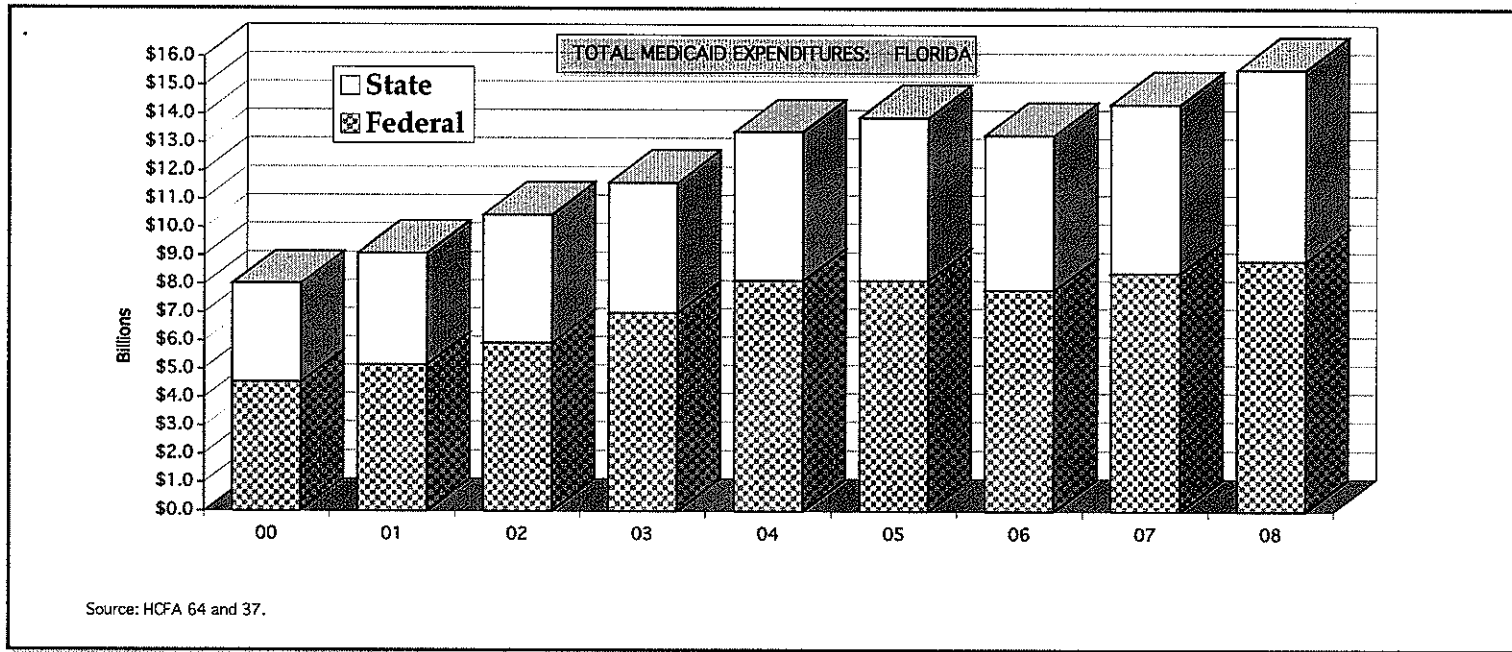


STATE MEDICAID PROFILE



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	\$7,564,164,398	\$8,609,434,647	\$9,936,647,680	\$11,038,180,825	\$12,789,934,905	\$13,218,246,322	\$12,620,833,494	\$13,618,051,000	\$14,817,617,000	8.8%	95.9%
Federal Share	\$4,286,107,243	\$4,891,002,952	\$5,631,499,166	\$6,674,640,012	\$7,819,116,022	\$7,799,055,617	\$7,448,025,614	\$8,015,122,000	\$8,435,631,000	8.8%	96.8%
State Share	\$3,278,057,155	\$3,718,431,695	\$4,305,148,514	\$4,363,540,813	\$4,970,818,883	\$5,419,190,705	\$5,172,807,880	\$5,602,929,000	\$6,381,986,000	8.7%	94.7%
Administrative Costs	\$457,606,645	\$488,243,434	\$528,381,789	\$548,942,130	\$578,830,618	\$658,687,998	\$643,867,358	\$739,431,000	\$761,809,000	6.6%	66.5%
Federal Share	\$247,122,600	\$265,513,881	\$287,929,940	\$304,067,260	\$316,439,854	\$353,871,317	\$346,377,429	\$394,913,000	\$406,862,000	6.4%	64.6%
State Share	\$210,484,045	\$222,729,553	\$240,451,849	\$244,874,870	\$262,390,764	\$304,816,681	\$297,489,929	\$344,518,000	\$354,947,000	6.8%	68.6%
Admin. Costs as % of Payments	6.05%	5.67%	5.32%	4.97%	4.53%	5.45%	4.90%	5.43%	5.14%		
Federal Match Rate*	56.52%	56.62%	56.43%	58.83%	58.93%	58.90%	58.89%	58.76%	56.83%		

*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).

FLORIDA

SOUTHERN REGION MEDICAID PROFILE

<u>STATE FINANCING</u>	Payments		Administration	
	FFY 00	FFY 06	FFY 00	FFY 06
State General Fund	\$3,133,957,155	\$4,402,138,289	\$210,484,045	\$297,489,929
Local Funds	\$0	\$400,751,128	\$0	\$0
Provider Taxes	\$144,100,000	\$296,155,447	\$0	\$0
Donations	\$0	\$0	\$0	\$0
Other**	\$0	\$73,763,016	\$0	\$0
Total State Share	\$3,278,057,155	\$5,172,807,880	\$210,484,045	\$297,489,929

Provider Taxes Currently in Place (FFY 06)		
	Tax Rate	Amount
General Hospitals		\$296,155,447
Inpatient Services	1.5% of net operating revenue	0
Outpatient Services	1.0% of net operating revenue	
Total		\$296,155,447

**Other: Cigarette Tax, Tobacco Settlement, Interest

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	\$200,639,067	\$189,094,373	\$222,430,909	\$182,536,044	\$203,645,375	\$228,786,040	\$214,327,186	\$216,921,000	\$224,320,000	0.1%
Mental Hospitals	\$147,845,588	\$149,714,986	\$148,287,275	\$88,239,048	\$103,505,949	\$104,685,103	\$105,439,143	\$103,810,000	\$107,335,000	-5.2%
Total	\$348,484,655	\$338,809,359	\$370,718,184	\$270,775,092	\$307,151,324	\$333,471,143	\$319,766,329	\$320,731,000	\$331,655,000	-1.8%

SELECTED ELIGIBILITY CRITERIA

	2006	% of FPL*
TANF-Temporary Assistance for Needy Families (Family of 3)		
Need Standard	\$2,560	185.1%
Payment Standard	\$198	14.3%
Maximum Payment	\$303	21.9%
Medically Needy Program (Family of 3)		
Income Eligibility Standard	\$303	
Resource Standard	\$6,000	
Pregnant Women, Children and Infants (% of FPL*)		
Pregnant women and infants		185.0%
Children age 1 to 5		133.0%
Children age 6 to 18		100.0%
SSI Eligibility Levels		
Income:		
Single Person	\$603	73.8%
Couple	\$904	82.2%
Resources:		
Single Person	\$2,000	
Couple	\$3,000	

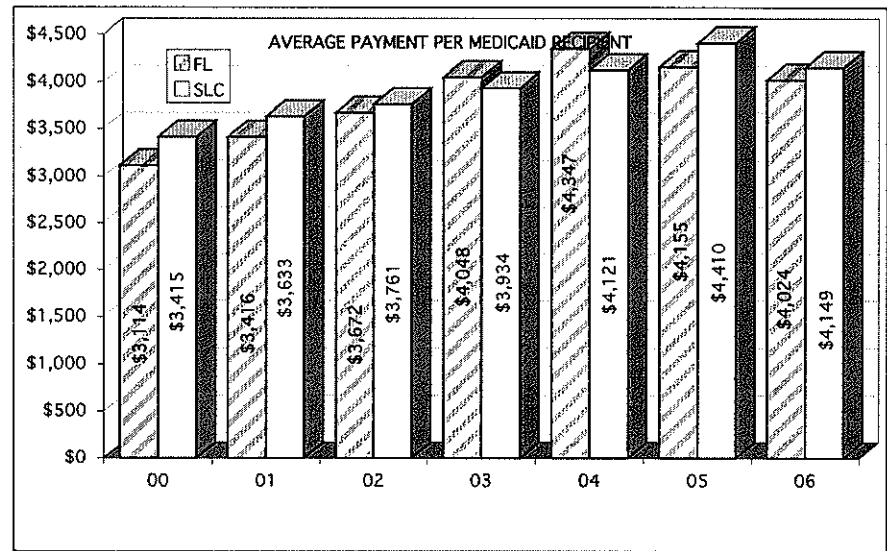
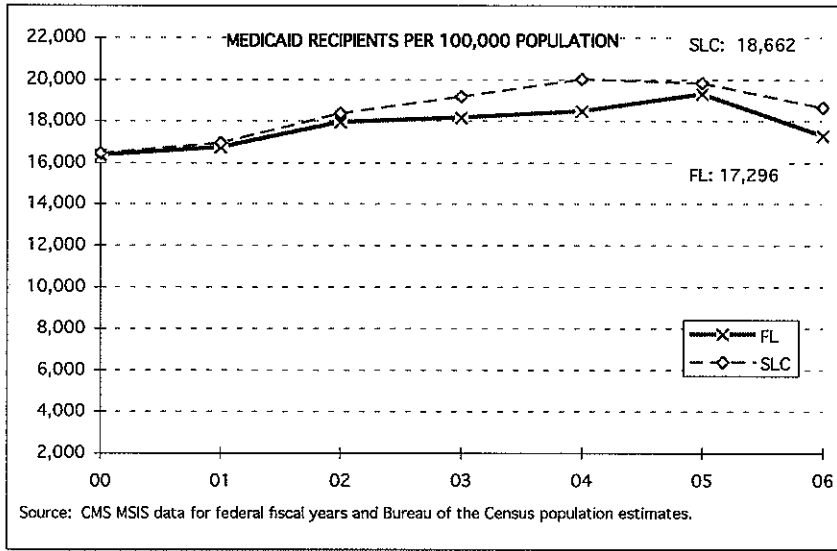
DEMOGRAPHIC DATA & POVERTY INDICATORS (2006)

		Rank in U.S.
State population—December 21, 2007*	18,057,508	4
Per capita personal income**	\$36,665	20
Median household income**	\$44,448	35
Population below Federal Poverty Level*	2,058,556	
Percent of total state population	11.4%	27
Population without health insurance coverage*	3,828,000	3
Percent of total state population	21.2%	
Recipients of Food Stamps***	1,417,749	4
Households receiving Food Stamps***	682,180	
Total value of issuance***	\$1,684,348,395	4
Average monthly benefit per recipient	\$99.00	8
Average monthly benefit per household	\$205.76	
Monthly recipients of Temporary Assistance to Needy Families (TANF)****	80,008	15
Total TANF payments****	\$35,676,817	30
Average monthly payment per recipient	\$37.16	
Maximum monthly payment per family of 3	\$303.00	35

*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)

RECIPIENTS BY TYPE OF SERVICES	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	Annual Change
01. General Hospital	448,982	410,596	432,107	408,060	433,417	533,915	488,764	1.4%
02. Mental Hospital	234	144	346	125	160	223	180	-4.3%
03. Skilled and Intermediate (non-MR) Care Nursing	89,954	111,174	107,237	98,808	114,134	94,067	115,409	4.2%
04. Intermediate Care for Mentally Retarded	3,589	3,551	3,468	3,448	3,376	3,260	3,164	-2.1%
05. Physician Services	1,037,041	1,162,536	1,228,615	1,278,637	1,330,443	1,319,809	1,313,936	4.0%
06. Dental Services	358,949	374,477	415,419	396,846	410,093	351,691	340,935	-0.9%
07. Other Practitioners	182,617	226,893	252,701	259,220	224,025	224,065	218,557	3.0%
08. Outpatient Hospital	1,111,223	1,036,386	1,011,120	939,204	1,042,007	1,249,359	1,069,918	-0.6%
09. Clinic Services	243,761	280,990	310,422	306,911	338,137	376,648	336,478	5.5%
10. Lab and X-Ray	696,834	780,039	816,760	862,123	916,450	923,591	919,345	4.7%
11. Home Health	63,906	76,529	87,207	96,057	105,263	106,246	114,909	10.3%
12. Prescribed Drugs	1,072,082	1,159,155	1,245,461	1,309,456	1,350,741	1,322,096	1,257,984	2.7%
13. Family Planning	12,005	9,952	9,363	9,248	9,531	10,578	8,767	-5.1%
14. Early & Periodic Screening, Diagnosis & Treatment	0	0	0	0	0	0	0	n/a
15. Other Care	606,677	701,699	915,937	838,570	821,437	780,140	732,244	3.2%
16. Personal Care Support Services	229,299	268,265	296,865	300,111	295,758	314,128	321,759	0.0%
17. Home/Community Based Waiver Services	0	0	0	0	0	0	0	0.0%
18. Prepaid Health Care	768,754	879,352	1,097,790	1,133,720	1,428,958	1,585,126	1,702,513	0.0%
19. Primary Care Case Management (PCCM) Services	879,072	947,040	948,864	1,128,371	1,182,219	1,196,046	1,199,911	0.0%
Total*	2,360,417	2,458,609	2,676,235	2,743,368	2,952,363	3,166,071	3,123,301	4.8%

*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 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	Annual	Share of Total
								Change	FFY 06
01. General Hospital	\$1,289,042,041	\$1,606,925,885	\$1,911,377,694	\$2,179,604,877	\$2,737,077,824	\$2,683,700,591	\$2,967,891,896	14.9%	23.6%
02. Mental Hospital	\$88,838,028	\$98,367,444	\$93,246,258	\$58,321,968	\$71,191,165	\$67,497,365	\$68,673,413	-4.2%	0.5%
03. Skilled and Intermediate (non-MR) Care Nursing	\$1,513,576,612	\$1,531,822,453	\$1,886,566,368	\$2,141,536,789	\$2,265,302,558	\$2,244,057,678	\$2,318,024,582	7.4%	18.4%
04. Intermediate Care for Mentally Retarded	\$279,634,012	\$288,706,246	\$310,394,497	\$315,468,812	\$309,107,576	\$300,046,230	\$314,493,046	2.0%	2.5%
05. Physician Services	\$377,329,125	\$416,450,728	\$464,444,671	\$522,810,315	\$632,338,890	\$645,527,943	\$650,444,666	9.5%	5.2%
06. Dental Services	\$93,258,140	\$84,342,950	\$94,114,479	\$86,063,822	\$91,784,546	\$88,464,442	\$91,293,496	-0.4%	0.7%
07. Other Practitioners	\$14,345,085	\$19,371,157	\$22,428,448	\$24,648,641	\$20,424,203	\$21,132,402	\$21,833,402	7.3%	0.2%
08. Outpatient Hospital	\$357,121,891	\$352,754,166	\$357,058,855	\$400,590,600	\$461,875,721	\$474,620,067	\$537,560,979	7.1%	4.3%
09. Clinic Services	\$215,937,614	\$250,223,795	\$264,417,717	\$294,099,648	\$319,334,458	\$351,308,090	\$308,277,662	6.1%	2.5%
10. Lab and X-Ray	\$65,678,261	\$76,519,161	\$84,502,326	\$97,110,704	\$113,286,155	\$120,926,406	\$127,603,743	11.7%	1.0%
11. Home Health	\$169,113,580	\$202,103,358	\$228,095,839	\$246,385,426	\$260,027,573	\$262,990,058	\$269,669,543	8.1%	2.1%
12. Prescribed Drugs	\$1,366,193,807	\$1,487,935,645	\$1,736,991,594	\$2,062,349,922	\$2,458,521,754	\$2,509,260,698	\$1,430,480,636	0.8%	11.4%
13. Family Planning	\$3,438,081	\$3,232,247	\$3,930,124	\$3,641,193	\$3,897,802	\$3,704,768	\$3,033,291	-2.1%	0.0%
14. Early & Periodic Screening, Diagnosis & Treatment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
15. Other Care	\$527,926,702	\$721,805,085	\$899,031,616	\$1,018,739,075	\$1,065,333,345	\$1,031,235,577	\$1,142,537,151	13.7%	9.1%
16. Personal Care Support Services	\$225,888,869	\$285,758,188	\$328,213,643	\$379,373,858	\$446,261,503	\$468,933,487	\$503,943,681	14.3%	0.0%
17. Home/Community Based Waiver Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
18. Prepaid Health Care	\$742,735,652	\$948,734,189	\$1,118,823,609	\$1,246,828,073	\$1,550,576,155	\$1,852,036,235	\$1,784,521,908	15.7%	14.2%
19. Primary Case Management (PCCM) Services	\$20,305,524	\$23,106,828	\$23,365,950	\$26,802,327	\$28,093,464	\$29,011,398	\$28,577,627	5.9%	0.2%
Total (excludes DSH pymts, pharmacy rebates, & other adjs.)	\$7,350,363,024	\$8,398,159,525	\$9,827,003,688	\$11,104,376,050	\$12,834,434,692	\$13,154,453,435	\$12,568,860,722	9.4%	100.0%

AVERAGE PAYMENTS PER RECIPIENT BY TYPE OF SERVICES

									(+) or (-) SLC
									Avg. FFY 06
01. General Hospital	\$2,871.03	\$3,913.64	\$4,423.39	\$5,341.38	\$6,315.11	\$5,026.46	\$6,072.24	13.3%	13.1%
02. Mental Hospital	\$379,649.69	\$683,107.25	\$269,497.86	\$466,575.74	\$444,944.78	\$302,678.77	\$381,518.96	0.1%	2030.4%
03. Skilled and Intermediate (non-MR) Care Nursing	\$16,826.12	\$13,778.60	\$17,592.49	\$21,673.72	\$19,847.75	\$23,855.95	\$20,085.30	3.0%	-16.6%
04. Intermediate Care for Mentally Retarded	\$77,914.19	\$81,302.80	\$89,502.45	\$91,493.27	\$91,560.30	\$92,038.72	\$99,397.30	4.1%	13.4%
05. Physician Services	\$363.85	\$358.23	\$378.02	\$408.88	\$475.28	\$489.11	\$495.04	5.3%	-10.4%
06. Dental Services	\$259.81	\$225.23	\$226.55	\$216.87	\$223.81	\$251.54	\$267.77	0.5%	-26.3%
07. Other Practitioners	\$78.55	\$85.38	\$88.75	\$95.09	\$91.17	\$94.31	\$99.90	4.1%	-57.1%
08. Outpatient Hospital	\$321.38	\$340.37	\$353.13	\$426.52	\$443.26	\$379.89	\$502.43	7.7%	-19.4%
09. Clinic Services	\$885.86	\$890.51	\$851.80	\$958.26	\$944.39	\$932.72	\$916.19	0.6%	30.6%
10. Lab and X-Ray	\$94.25	\$98.10	\$103.46	\$112.64	\$123.61	\$130.93	\$138.80	6.7%	-35.6%
11. Home Health	\$2,646.29	\$2,640.87	\$2,615.57	\$2,564.99	\$2,470.27	\$2,475.29	\$2,346.81	-2.0%	-42.0%
12. Prescribed Drugs	\$1,274.34	\$1,283.64	\$1,394.66	\$1,574.97	\$1,820.13	\$1,897.94	\$1,137.12	-1.9%	17.5%
13. Family Planning	\$286.39	\$324.78	\$419.75	\$393.73	\$408.96	\$350.23	\$345.99	3.2%	-71.0%
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	\$870.19	\$1,028.65	\$981.54	\$1,214.85	\$1,296.91	\$1,321.86	\$1,560.32	10.2%	-16.0%
16. Personal Care Support Services	\$985.13	\$1,065.21	\$1,105.60	\$1,264.11	\$1,508.87	\$1,492.81	\$1,566.21	8.0%	0.0%
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	\$966.16	\$1,078.90	\$1,019.16	\$1,099.77	\$1,085.11	\$1,168.38	\$1,048.17	1.4%	0.0%
19. Primary Care Case Management (PCCM) Services	\$23.10	\$24.40	\$24.63	\$23.75	\$23.76	\$24.26	\$23.82	0.5%	0.0%
Total (Average)	\$3,114.01	\$3,415.82	\$3,671.95	\$4,047.72	\$4,347.17	\$4,154.82	\$4,024.22	4.4%	-3.0%

TOTAL PER CAPITA EXPENDITURES

\$556.34	\$619.85	\$701.60	\$766.79	\$836.47	\$846.33	\$734.58	4.7%	-16.8%
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Source: MSIS data for FFY 00-06.

FLORIDA

SOUTHERN REGION MEDICAID PROFILE

DATA BY OTHER CHARACTERISTICS

RECIPIENTS 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	971,716	1,004,077	1,033,046	1,063,659	1,152,371	1,148,451	1,118,588	2.4%	35.8%
Poverty Related Eligibles	688,275	799,583	832,529	932,107	995,386	1,026,084	1,062,818	7.5%	34.0%
Medically Needy	45,079	43,713	47,717	57,567	61,534	86,034	77,476	9.4%	2.5%
Other Eligibles	271,694	327,317	462,626	463,590	492,274	469,926	484,473	10.1%	15.5%
Maintenance Assistance Status Unknown	383,653	283,919	300,317	226,445	250,798	435,576	379,946	-0.2%	12.2%
Total	2,360,417	2,458,609	2,676,235	2,743,368	2,952,363	3,166,071	3,123,301	4.8%	100.0%
By Basis of Eligibility									
Aged, Blind, or Disabled	598,659	630,460	762,698	688,111	743,331	743,890	740,536	3.6%	23.7%
Children	973,911	1,092,438	1,331,626	1,248,947	1,342,820	1,428,140	1,445,875	6.8%	46.3%
Foster Care Children	35,912	37,322	43,369	41,929	44,989	46,041	46,118	4.3%	1.5%
Adults	368,282	414,470	538,542	537,774	574,590	512,217	510,550	5.6%	16.3%
Basis of Eligibility Unknown	383,653	283,919	0	226,607	246,633	435,783	380,222	-0.1%	12.2%
Total	2,360,417	2,458,609	2,676,235	2,743,368	2,952,363	3,166,071	3,123,301	4.8%	100.0%
By Age									
Under Age 1	80,350	86,292	93,939	99,727	107,041	112,388	116,066	6.3%	3.7%
Age 1 to 5	374,752	424,557	472,468	506,219	542,079	545,732	544,650	6.4%	17.4%
Age 6 to 14	476,199	525,077	580,830	611,335	656,148	646,995	650,297	5.3%	20.8%
Age 15 to 20	206,132	229,984	257,194	279,195	298,533	318,522	332,121	8.3%	10.6%
Age 21 to 44	429,386	470,685	503,685	523,217	562,949	554,828	551,108	4.2%	17.6%
Age 45 to 64	163,126	177,479	191,990	203,717	218,721	234,702	239,023	6.6%	7.7%
Age 65 to 74	100,804	107,882	116,004	124,218	133,540	135,835	131,279	4.5%	4.2%
Age 75 to 84	85,355	91,228	96,855	103,856	111,722	112,727	109,895	4.3%	3.5%
Age 85 and Over	60,671	61,516	62,967	65,407	70,842	68,748	68,899	2.1%	2.2%
Age Unknown	383,642	283,909	300,303	226,477	250,788	435,594	379,963	-0.2%	12.2%
Total	2,360,417	2,458,609	2,676,235	2,743,368	2,952,363	3,166,071	3,123,301	4.8%	100.0%
By Race									
White	965,595	1,006,913	888,501	923,075	1,002,693	972,686	949,351	-0.3%	30.4%
Black	734,168	765,614	738,367	759,961	823,536	807,920	806,213	1.6%	25.8%
Hispanic, American Indian or Asian	431,608	448,219	500,550	540,348	578,480	727,171	757,022	9.8%	24.2%
Other/ Unknown	229,046	237,863	548,817	519,984	547,654	658,294	610,715	17.8%	19.6%
Total*	2,360,417	2,458,609	2,676,235	2,743,368	2,952,363	3,166,071	3,123,301	4.8%	100.0%
By Sex									
Female	1,427,997	1,487,960	1,409,826	1,485,966	1,606,899	1,596,129	1,603,614	2.0%	51.3%
Male	928,698	966,396	964,823	1,029,220	1,109,288	1,132,954	1,137,831	3.4%	36.4%
Unknown	3,722	4,253	301,586	228,182	236,176	436,988	381,856	116.4%	12.2%
Total*	2,360,417	2,458,609	2,676,235	2,743,368	2,952,363	3,166,071	3,123,301	4.8%	100.0%

Source: MSIS data for FFY 00-06.

FLORIDA

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	\$3,582,721,921	\$4,001,851,080	\$4,342,667,334	\$4,908,672,895	\$5,724,229,952	\$5,564,502,635	\$5,352,572,344	6.9%	42.6%
Poverty Related Eligibles	\$1,719,640,919	\$1,922,771,392	\$2,106,706,190	\$2,473,495,408	\$2,868,640,152	\$3,001,914,991	\$2,733,893,203	8.0%	21.8%
Medically Needy	\$169,564,543	\$171,946,765	\$202,582,853	\$278,927,981	\$317,420,170	\$481,742,684	\$346,373,844	12.6%	2.8%
Other Eligibles	\$1,534,339,321	\$1,746,670,103	\$2,328,918,754	\$2,630,065,022	\$3,011,885,029	\$2,884,003,784	\$2,947,214,675	11.5%	23.4%
Maintenance Assistance Status Unknown	\$344,096,320	\$554,920,185	\$846,128,557	\$813,214,744	\$912,259,389	\$1,222,289,341	\$1,188,806,656	23.0%	9.5%
Total	\$7,350,363,024	\$8,398,159,525	\$9,827,003,688	\$11,104,376,050	\$12,834,434,692	\$13,154,453,435	\$12,568,860,722	9.4%	100.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$5,304,896,347	\$5,810,939,356	\$6,672,203,209	\$7,611,255,400	\$8,827,115,797	\$8,658,118,748	\$8,013,706,912	7.1%	63.8%
Children	\$961,815,244	\$1,144,625,407	\$1,303,537,814	\$1,436,019,441	\$1,668,633,281	\$1,844,758,284	\$1,869,304,361	11.7%	14.9%
Foster Care Children	\$120,979,089	\$135,777,344	\$154,779,453	\$182,593,611	\$209,409,218	\$202,292,908	\$203,633,413	9.1%	1.6%
Adults	\$618,576,024	\$751,897,233	\$850,492,790	\$1,059,556,240	\$1,215,223,731	\$1,224,368,217	\$1,289,690,287	13.0%	10.3%
Basis of Eligibility Unknown	\$344,096,320	\$554,920,185	\$845,990,422	\$814,951,358	\$914,052,665	\$1,224,915,278	\$1,192,525,749	23.0%	9.5%
Total	\$7,350,363,024	\$8,398,159,525	\$9,827,003,688	\$11,104,376,050	\$12,834,434,692	\$13,154,453,435	\$12,568,860,722	9.4%	100.0%
By Age									
Under Age 1	\$243,285,913	\$281,784,505	\$284,968,780	\$348,364,745	\$404,374,703	\$419,210,682	\$473,742,242	11.7%	3.8%
Age 1 to 5	\$570,377,512	\$682,240,625	\$769,927,897	\$881,051,296	\$1,017,252,022	\$1,011,750,852	\$1,003,569,542	9.9%	8.0%
Age 6 to 14	\$587,540,095	\$704,285,780	\$798,380,718	\$888,881,967	\$1,028,400,000	\$1,000,623,570	\$1,019,657,847	9.6%	8.1%
Age 15 to 20	\$403,783,164	\$483,348,256	\$543,683,069	\$623,960,160	\$720,171,843	\$753,254,074	\$822,554,550	12.6%	6.5%
Age 21 to 44	\$1,635,143,608	\$1,847,143,319	\$2,046,695,874	\$2,289,183,622	\$2,667,563,479	\$2,618,103,811	\$2,655,854,260	8.4%	21.1%
Age 45 to 64	\$1,290,961,928	\$1,486,934,092	\$1,747,683,325	\$2,054,164,321	\$2,359,507,352	\$2,519,762,054	\$2,356,497,119	10.6%	18.7%
Age 65 to 74	\$588,764,856	\$624,266,453	\$726,621,030	\$849,959,230	\$984,770,759	\$1,001,714,446	\$744,383,870	4.0%	5.9%
Age 75 to 84	\$783,612,856	\$824,070,714	\$982,720,274	\$1,134,133,908	\$1,314,631,286	\$1,271,239,490	\$1,056,997,937	5.1%	8.4%
Age 85 and Over	\$902,815,626	\$909,280,238	\$1,080,283,779	\$1,221,377,550	\$1,425,595,472	\$1,336,460,960	\$1,246,812,081	5.5%	9.9%
Age Unknown	\$344,077,466	\$554,805,543	\$846,038,942	\$813,299,251	\$912,167,776	\$1,222,333,496	\$1,188,791,274	23.0%	9.5%
Total	\$7,350,363,024	\$8,398,159,525	\$9,827,003,688	\$11,104,376,050	\$12,834,434,692	\$13,154,453,435	\$12,568,860,722	9.4%	100.0%
By Race									
White	\$3,760,149,721	\$4,309,561,680	\$4,354,833,378	\$4,895,171,895	\$5,730,394,593	\$5,504,243,049	\$5,131,296,957	5.3%	40.8%
Black	\$1,750,088,067	\$2,001,191,843	\$2,199,521,262	\$2,424,610,929	\$2,828,623,169	\$2,857,351,265	\$2,772,197,877	8.0%	22.1%
Hispanic, American Indian or Asian	\$675,289,579	\$767,776,170	\$992,737,256	\$1,171,440,057	\$1,337,044,370	\$2,233,458,149	\$2,175,050,170	21.5%	17.3%
Other/Unknown	\$1,164,835,657	\$1,319,629,832	\$2,279,911,792	\$2,613,153,169	\$2,938,372,560	\$2,559,400,972	\$2,490,315,718	13.5%	19.8%
Total*	\$7,350,363,024	\$8,398,159,525	\$9,827,003,688	\$11,104,376,050	\$12,834,434,692	\$13,154,453,435	\$12,568,860,722	9.4%	100.0%
By Sex									
Female	\$4,374,828,179	\$4,972,393,755	\$5,373,848,783	\$6,154,803,718	\$7,108,283,923	\$7,141,102,095	\$6,779,241,779	7.6%	53.9%
Male	\$2,972,203,906	\$3,419,543,912	\$3,605,408,049	\$4,132,882,060	\$4,849,276,183	\$4,787,040,703	\$4,597,566,793	7.5%	36.6%
Unknown	\$3,330,939	\$6,221,858	\$847,746,856	\$816,690,272	\$876,874,586	\$1,226,310,637	\$1,192,052,150	166.5%	9.5%
Total*	\$7,350,363,024	\$8,398,159,525	\$9,827,003,688	\$11,104,376,050	\$12,834,434,692	\$13,154,453,435	\$12,568,860,722	9.4%	100.0%

Source: MSIS data for FFY 00-06.

FLORIDA

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>	<u>Annual Change</u>	<u>Above (+) or Below (-) SLC Avg. FFY 06</u>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$3,687.01	\$3,985.60	\$4,203.75	\$4,614.89	\$4,967.35	\$4,845.22	\$4,785.12	4.4%	-16.6%
Poverty Related Eligibles	\$2,498.48	\$2,404.72	\$2,530.49	\$2,653.66	\$2,881.94	\$2,925.60	\$2,572.31	0.5%	29.6%
Medically Needy	\$3,761.50	\$3,933.54	\$4,245.51	\$4,845.28	\$5,158.45	\$5,599.45	\$4,470.72	2.9%	-43.5%
Other Eligibles	\$5,647.31	\$5,336.33	\$5,034.13	\$5,673.26	\$6,118.31	\$6,137.14	\$6,083.34	1.2%	-14.1%
Maintenance Assistance Status Unknown	\$896.89	\$1,954.50	\$2,817.45	\$3,591.22	\$3,637.43	\$2,806.14	\$3,128.88	23.2%	0.0%
Total	\$3,114.01	\$3,415.82	\$3,671.95	\$4,047.72	\$4,347.17	\$4,154.82	\$4,024.22	4.4%	-3.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$8,861.30	\$9,216.98	\$8,748.16	\$11,061.09	\$11,875.08	\$11,638.98	\$10,821.50	3.4%	-1.0%
Children	\$987.58	\$1,047.77	\$978.91	\$1,149.78	\$1,242.63	\$1,291.72	\$1,292.85	4.6%	-17.8%
Foster Care Children	\$3,368.77	\$3,638.00	\$3,568.90	\$4,354.83	\$4,654.68	\$4,393.76	\$4,415.49	4.6%	-37.3%
Adults	\$1,679.63	\$1,814.12	\$1,579.25	\$1,970.26	\$2,114.94	\$2,390.33	\$2,526.08	7.0%	-10.6%
Basis of Eligibility Unknown	\$896.89	\$1,954.50	\$0.00	\$3,596.32	\$3,706.12	\$2,810.84	\$3,136.39	23.2%	0.0%
Total	\$3,114.01	\$3,415.82	\$3,671.95	\$4,047.72	\$4,347.17	\$4,154.82	\$4,024.22	4.4%	-3.0%
By Age									
Under Age 1	\$3,027.83	\$3,265.48	\$3,033.55	\$3,493.18	\$3,777.76	\$3,730.03	\$4,081.66	5.1%	3.3%
Age 1 to 5	\$1,522.01	\$1,606.95	\$1,629.59	\$1,740.45	\$1,876.58	\$1,853.93	\$1,842.60	3.2%	-2.9%
Age 6 to 14	\$1,233.81	\$1,341.30	\$1,374.55	\$1,454.00	\$1,567.33	\$1,546.57	\$1,567.99	4.1%	-14.6%
Age 15 to 20	\$1,958.86	\$2,101.66	\$2,113.90	\$2,234.85	\$2,412.37	\$2,364.84	\$2,476.67	4.0%	-14.0%
Age 21 to 44	\$3,808.10	\$3,924.37	\$4,063.44	\$4,375.21	\$4,738.55	\$4,718.77	\$4,819.12	4.0%	-5.8%
Age 45 to 64	\$7,913.89	\$8,378.08	\$9,102.99	\$10,083.42	\$10,787.75	\$10,736.01	\$9,858.87	3.7%	-4.9%
Age 65 to 74	\$5,840.69	\$5,786.57	\$6,263.76	\$6,842.48	\$7,374.35	\$7,374.49	\$5,670.24	-0.5%	-15.8%
Age 75 to 84	\$9,180.63	\$9,033.09	\$10,146.30	\$10,920.25	\$11,766.99	\$11,277.15	\$9,618.25	0.8%	-6.9%
Age 85 and Over	\$14,880.51	\$14,781.20	\$17,156.35	\$18,673.50	\$20,123.59	\$19,440.00	\$18,096.23	3.3%	6.2%
Age Unknown	\$896.87	\$1,954.17	\$2,817.28	\$3,591.09	\$3,637.21	\$2,806.13	\$3,128.70	23.2%	0.0%
Total	\$3,114.01	\$3,415.82	\$3,671.95	\$4,047.72	\$4,347.17	\$4,154.82	\$4,024.22	4.4%	-3.0%
By Race									
White	\$3,894.13	\$4,279.97	\$4,901.33	\$5,303.11	\$5,715.00	\$5,658.81	\$5,405.06	5.6%	6.0%
Black	\$2,383.77	\$2,613.84	\$2,978.90	\$3,190.44	\$3,434.73	\$3,536.68	\$3,438.54	6.3%	-6.9%
Hispanic, American Indian or Asian	\$1,564.59	\$1,712.95	\$1,983.29	\$2,167.94	\$2,311.31	\$3,071.43	\$2,873.17	10.7%	3.0%
Other/Unknown	\$5,085.60	\$5,547.86	\$4,154.23	\$5,025.45	\$5,365.38	\$3,887.93	\$4,077.71	-3.6%	0.4%
Total	\$3,114.01	\$3,415.82	\$3,671.95	\$4,047.72	\$4,347.17	\$4,154.82	\$4,024.22	4.4%	-3.0%
By Sex									
Female	\$3,063.61	\$3,341.75	\$3,811.71	\$4,141.95	\$4,423.60	\$4,474.01	\$4,227.48	5.5%	-1.5%
Male	\$3,200.40	\$3,538.45	\$3,736.86	\$4,015.55	\$4,371.52	\$4,225.27	\$4,040.64	4.0%	-2.9%
Unknown	\$894.93	\$1,462.93	\$2,810.96	\$3,579.12	\$3,712.80	\$2,806.28	\$3,121.73	23.1%	4.9%
Total	\$3,114.01	\$3,415.82	\$3,671.95	\$4,047.72	\$4,347.17	\$4,154.82	\$4,024.22	4.4%	-3.0%

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

The state operates three Freedom of Choice Waivers, under Title XIX, Section 1115, to establish a coordinated network of Medicaid providers. These include:

- Consumer Directed Care was implemented in 1999 and approximately 1,092 participants are currently receiving a monthly budget.
- Family Planning Waiver, under Section 1115, Title IV-A, of the Social Security Act, extends family planning services to women with incomes up to 185% of the FPL for two years post partum, operating since October 1, 1998. The program serves approximately 28,650 individuals in need of family planning.

The state operates two general managed care and selective contracting waivers, under Title XIX, Section 1915 (b), to establish a coordinated network of Medicaid providers. These include:

- Primary Care Case Management Program (MediPass), which provides case management services for TANF and SSI-Non Medicare recipients statewide and has been operating since 1991.
- Non-emergency Medical Transportation: Provides services to approximately 2 million Medicaid recipients. Implemented June 2001 and renewed December 2004.

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

- Prepaid Mental Health Plan through Florida Health Partnership provides mental health services for beneficiaries in a five-county area and has been operating since March, 1996. Through this program, approximately 55,000 individuals receive a broad array of mental health services.
- Aged & Disabled Adult: The waiver serves 9,557 people, operating since April 1, 1982.
- Developmental Services (MR/DD): Two waivers serve approximately 25,000 people, operating since June 14, 1980.
- Assisted Living for the Elderly Waiver: Implemented statewide February 1, 1995. Serves recipients who reside in qualified ALFs.
- AIDS: Project Aids Care (PAC), operating since November 1, 1989.
- Model Waiver: Serves children with Degenerative Spinocerebellar Diseases, serves 5 people, operating since June 14, 1991.
- Nursing Home Diversion Waiver authorizes a long-term care demonstration project to allow the state to contract with various pre-paid, capitated risk-based health plans designed to provide primary and long-term health care services to individuals who are eligible for both Medicare and Medicaid. Implementation of the program began in December of 1998.
- Traumatic Brain Injury and Spinal Cord Waiver, authorized in Regular Session 1998. The state implemented the program in September of 1999.
- The Channeling Project for the frail elderly: Provides home and community based services through an organized health care delivery system to approximately 1,500 individuals operating since 1985.
- The Family and Supported Living Waiver is a home and community-based services program, effective October 1, 1998. It replaced the Supp. Liv. Arrang. Program.
- Adult Day Health Care Waiver: Implemented in two areas of the state in 2004.
- Alzheimer's Disease Waiver: Began operation in 2005.
- Program of All Inclusive Care for the Elderly (PACE)
- Familial Dysautonomia
- Adult Cystic Fibrosis Waiver: Approved 2002. Provides HCBS to reduce risk of hospitalization.

SOUTHERN REGION MEDICAID PROFILE

Managed Care

- Primary Care Case Management: The Medicaid Provider Access System, or MEDIPASS. Providers receive a \$3 case management fee per month per enrollee.
 - Commercial and Medicaid-only Managed Care Organization
 - Prepaid Inpatient Health Plan (PIHP)
 - Prepaid Ambulatory Health Plan (PAHP)
- Some plans include Provider Services Networks.

Coverage for Targeted Population

- The Uninsured: Florida does not have a statewide indigent care program, however, there are local programs subsidized through special tax districts
- Low-income pool to cover uninsured as a component of Medicaid reform
- Health Flex Plans for eligibles under 200% of the FPL to assist in providing preventive care through basic health care coverage
- Medicaid Needy program for the aged, blind, and disabled
- Presumptive Eligibility for pregnant women

Cost Containment Measures

- Certificate of Need Program since 1973, amended in 2000. Regulates introduction or expansion of new institutional health facilities and services; exempts CON requirements for Medicare-certified home health agencies, respite care services, retirement communities and residential facilities that only serve retired military personnel and their dependents.

Medicaid

- 24 optional services are offered.
- Florida Medicaid Reform: 5 year 1115 demonstration waiver (2005 to 2010) approved October 2005. Implementation began in 2 counties (Broward and Duval) in 2006, and expanded to 3 other counties in 2007 (Baker, Clay, and Nassau). The demonstration offers choice counseling, customized benefits, risk adjusted premiums, and a low income pool. In addition, beneficiaries may decide to opt out and participate in private employer sponsored health insurance, in which Medicaid premiums can be used to cover employer sponsored care premiums. New and existing HMO's and PSN's participate.
- Disease Management program offered under MEDIPASS through Disease Management Organization (consisting of a nurse that coordinates disease/options).
- Drugs not on Florida's Preferred Drug List (PDL) require prior authorization and does not reimburse pharmacies for certain drugs.

Children's Health Insurance Program: A Combination expansion of Medicaid and Florida Healthy Kids (Title XXI)

- Expanded Medicaid coverage for children age 15 to 19 in families with incomes up to 100% of the FPL; provides coverage for an additional 24,369 children/adolescents. The plan received HCFA approval on March 5, 1998.
- Expanded Florida Healthy Kids Program for children/adolescents age 5 to 19 in families with incomes up to 200% of the FPL (includes premium subsidies); provides coverage for an additional 279,146 individuals. The Florida Healthy Kids Program also offers full pay buy-in above 200% of the FPL; premiums of \$110 per month per member.
- Added Medikids Program to provide coverage for children from birth to age 5 in families with incomes up to 200% of the FPL; provides coverage for an additional 33,343 children. The plan received HCFA (CMS) approval on September 8, 1998.
- Added Children's Medical Services (CMS) Network program to provide coverage for individuals under the age of 18 with special health care needs in

FLORIDA

SOUTHERN REGION MEDICAID PROFILE

families with incomes up to 200% of the FPL; provides coverage for an additional 9,751 eligibles. CMS allows individuals with special needs to have a specialist as their primary care physician without any special authorization.

- Shifted coverage from MediKids and CMS Network to Medicaid for children birth to age one effective July 1, 2000.
- Received HCFA approval in March 2000 to implement a dental pilot program in Palm Beach and Dade counties.
- Expanded Medicaid coverage to enroll children under age 1 with family incomes between 185% and 200% of the FPL and eliminated coverage for this group under MediKids and Title XXI CMS Network.

FLORIDA

- 34 -