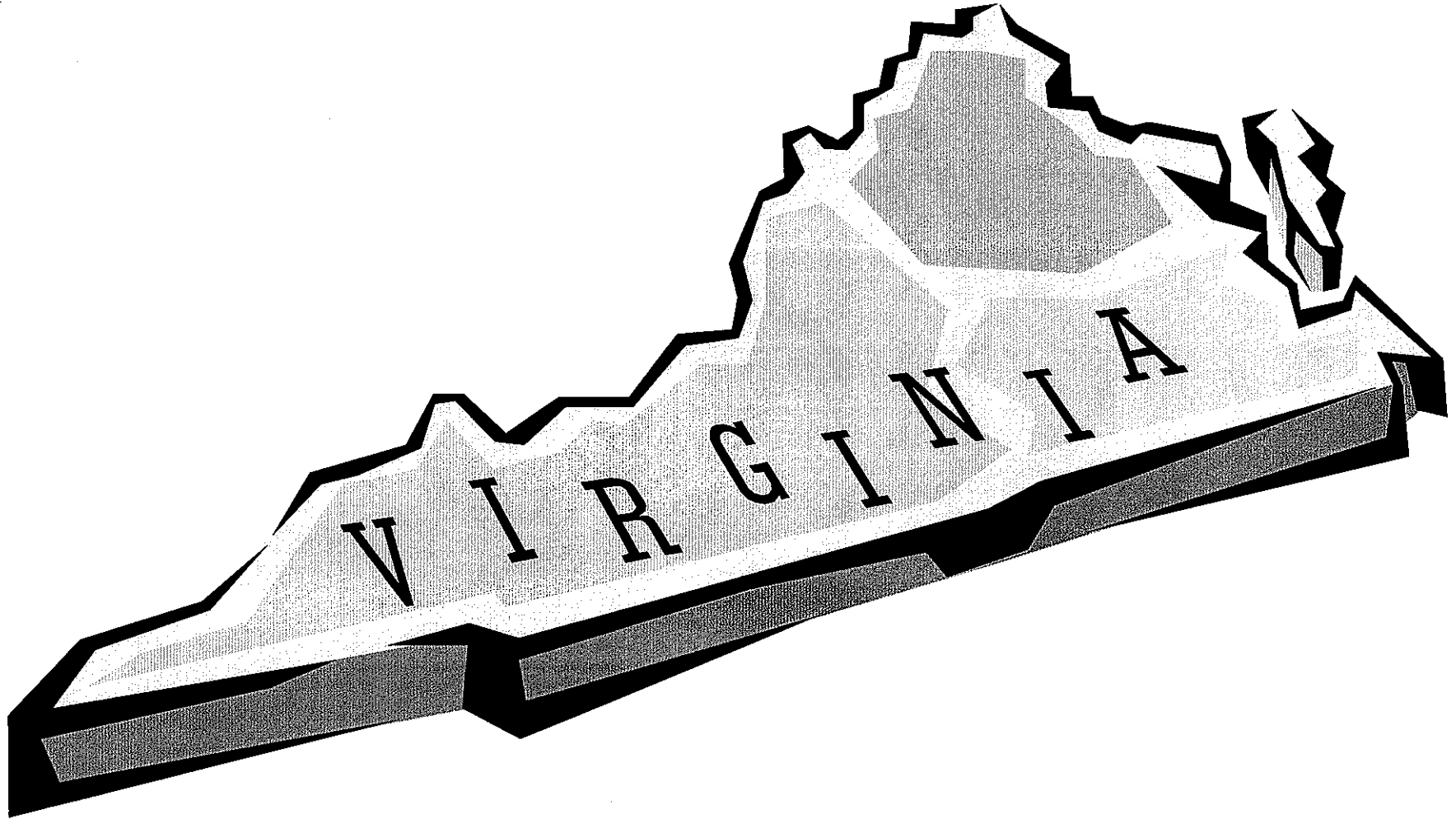
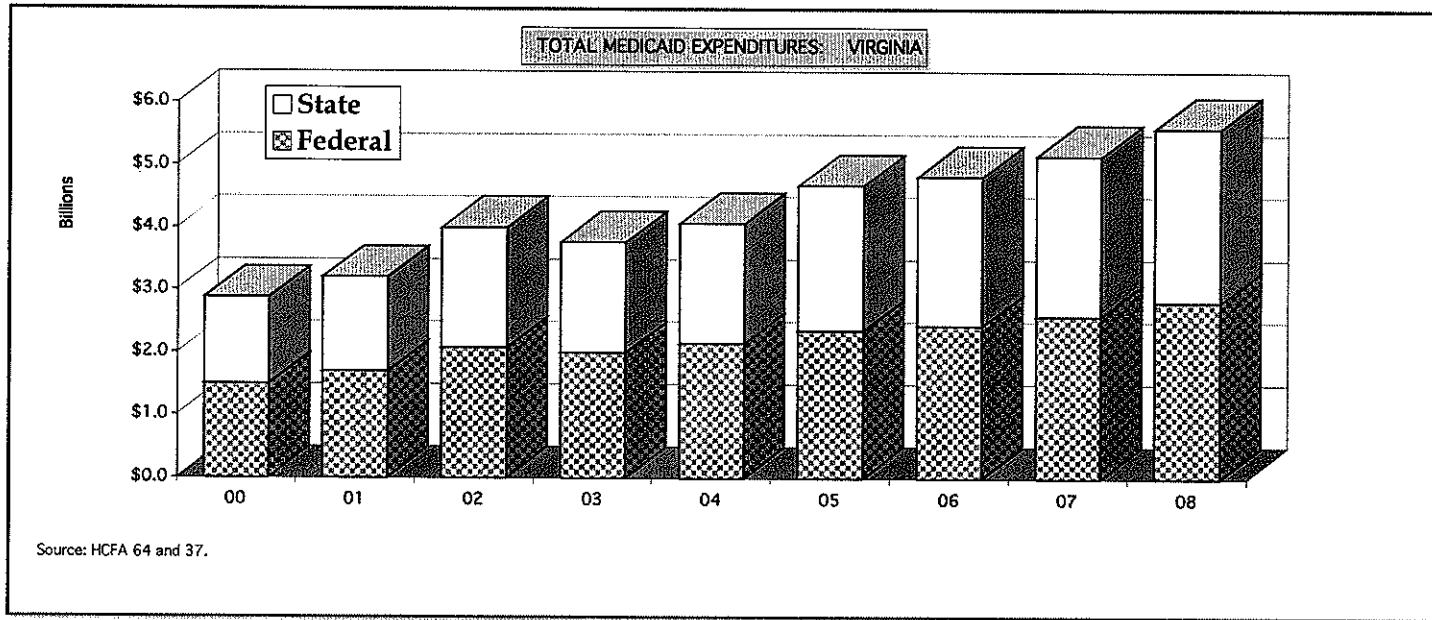


STATE MEDICAID PROFILE



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	\$2,728,848,408	\$3,036,846,387	\$3,812,974,394	\$3,546,523,934	\$3,825,216,022	\$4,425,080,633	\$4,608,204,870	\$4,875,661,000	\$5,297,137,000	8.6%	94.1%
Federal Share	\$1,416,141,298	\$1,609,651,633	\$1,970,610,963	\$1,869,950,793	\$2,015,926,926	\$2,220,054,737	\$2,316,161,133	\$2,442,198,000	\$2,653,035,000	8.2%	87.3%
State Share	\$1,312,707,110	\$1,427,194,754	\$1,842,363,431	\$1,676,573,141	\$1,809,289,096	\$2,205,025,896	\$2,292,043,737	\$2,433,463,000	\$2,644,102,000	9.1%	101.4%
Administrative Costs	\$147,814,821	\$164,701,821	\$187,346,225	\$226,683,382	\$245,400,541	\$259,286,946	\$221,084,628	\$275,528,000	\$295,966,000	9.1%	100.2%
Federal Share	\$80,346,985	\$91,978,257	\$107,612,082	\$126,857,855	\$132,460,212	\$137,217,207	\$122,261,965	\$151,535,000	\$158,315,000	8.8%	97.0%
State Share	\$67,467,836	\$72,723,564	\$79,734,143	\$99,825,527	\$112,940,329	\$122,069,739	\$98,822,663	\$123,993,000	\$137,651,000	9.3%	104.0%
Admin. Costs as % of Payments	5.42%	5.42%	4.91%	6.39%	6.42%	5.86%	4.80%	5.65%	5.59%		
Federal Match Rate*	51.67%	51.85%	51.45%	50.53%	50.00%	50.00%	50.00%	50.00%	50.00%		

*Rate shown is for Medicaid payments only. The EMAP (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	
	FFY 00	FFY 06	FFY 00	FFY 06
State General Fund*	\$1,312,707,110	\$2,292,043,737	\$67,467,836	\$98,822,663
Local Funds	\$0	\$0	\$0	\$0
Provider Taxes	\$0	\$0	\$0	\$0
Donations	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0
Total State Share	\$1,312,707,110	\$2,292,043,737	\$67,467,836	\$98,822,663

Provider Taxes Currently in Place (FFY 06)	
Tax Rate	Amount
NO PROVIDER TAXES	

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	\$131,366,225	\$231,973,515	\$178,098,932	\$151,299,116	\$109,878,282	\$136,511,580	\$151,952,640	\$155,139,000	\$146,597,000	-3.2%
Mental Hospitals	\$9,187,746	\$1,752,745	\$2,919,603	\$3,996,406	\$4,434,210	\$4,675,525	\$4,907,855	\$6,469,000	\$7,219,000	16.3%
Total	\$140,553,971	\$233,726,260	\$181,018,535	\$155,295,522	\$114,312,492	\$141,187,105	\$156,860,495	\$161,608,000	\$153,816,000	-2.7%

SELECTED ELIGIBILITY CRITERIA

	2006	% of FPL*
TANF-Temporary Assistance for Needy Families (Family of 3)		
Need Standard		0.0%
Payment Standard		0.0%
Max. Payment	PLEASE REFER TO LAST VA.	
	PAGE FOR DETAILED EXPLANATION.	
Medically Needy Program (Family of 3)		
Income Eligibility		
Resource Standard		
Pregnant Women, Children and Infants (% of FPL*)		
Pregnant women and infants		133.0%
Children 1 to 5		133.0%
Children 6 to 18		133.0%
SSI Eligibility Levels		
Income:		
Single Person	\$603	73.8%
Couple	\$904	82.2%
Resources:		
Single Person	\$2,000	
Couple	\$3,000	

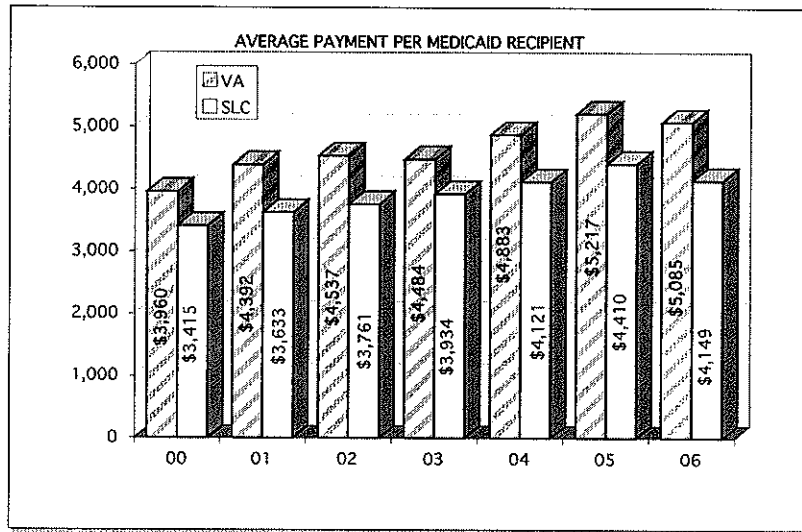
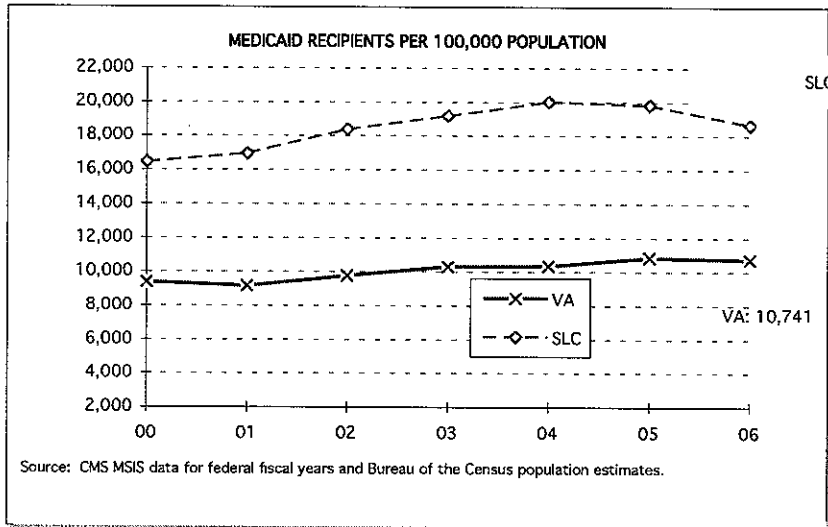
DEMOGRAPHIC DATA & POVERTY INDICATORS (2006)

		Rank in U.S.
State population—December 21, 2009*	7,640,249	12
Per capita personal income**	\$39,564	9
Median household income**	\$55,108	10
Population below Federal Poverty Level*	695,263	
Percent of total state population	9.1%	44
Population without health insurance coverage*	1,006,000	
Percent of total state population	13.2%	
Recipients of Food Stamps***	506,656	21
Households receiving Food Stamps***	226,595	
Total value of issuance***	\$525,712,148	20
Average monthly benefit per recipient	\$86.47	42
Average monthly benefit per household	\$193.34	
Monthly recipients of Temporary Assistance to Needy Families (TANF)****	24,480	33
Total TANF payments****	\$80,247,175	16
Average monthly payment per recipient	\$273.17	
Maximum monthly payment per family of 3	\$354.00	31

*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	82,264	84,209	80,664	71,321	114,805	129,721	131,039	8.1%
02. Mental Hospital	1,282	1,072	1,161	1,092	1,088	1,461	1,661	4.4%
03. Skilled and Intermediate (non-MR) Care Nursing	27,558	28,157	28,704	27,717	27,902	27,918	28,300	0.4%
04. Intermediate Care for Mentally Retarded	2,174	2,096	2,043	1,990	1,997	2,009	1,934	-1.9%
05. Physician Services	370,014	354,665	353,344	355,133	370,216	378,882	365,202	-0.2%
06. Dental Services	64,429	60,289	53,457	55,788	49,572	44,453	179,032	18.6%
07. Other Practitioners	55,577	51,402	50,645	48,323	32,473	32,021	29,327	-10.1%
08. Outpatient Hospital	220,843	210,511	208,943	193,907	131,841	136,315	127,744	-8.7%
09. Clinic Services	94,799	92,692	87,055	76,957	78,451	84,103	88,747	-1.1%
10. Lab and X-Ray	244,111	225,936	214,515	219,910	154,804	137,796	125,940	-10.4%
11. Home Health	5,928	4,767	4,245	3,849	3,433	4,047	3,628	-7.9%
12. Prescribed Drugs	347,251	333,880	319,196	325,047	314,942	323,447	297,495	-2.5%
13. Family Planning	2,737	1,821	1,548	1,015	3,111	2,395	2,172	-3.8%
14. Early & Periodic Screening, Diagnosis & Treatment	0	0	0	0	0	0	0	n/a
15. Other Care	155,986	152,456	131,519	130,545	127,303	99,482	96,400	-7.7%
16. Personal Care Support Services	40,638	41,474	40,977	40,966	34,788	38,378	38,724	-0.8%
17. Home/Community Based Waiver Services	0	0	0	0	13	0	0	-100.0%
18. Prepaid Health Care	213,085	228,312	364,939	460,732	402,401	449,964	498,146	15.2%
19. Primary Care Case Management (PCCM) Services	0	0	157,363	97,508	115,751	119,255	83,016	-14.8%
Total*	627,214	618,395	665,203	709,488	732,009	778,407	820,625	4.6%

*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	\$290,073,429	\$306,800,486	\$301,672,203	\$270,602,504	\$335,741,809	\$388,448,193	\$435,558,164	7.0%	10.4%
02. Mental Hospital	\$17,423,643	\$20,369,771	\$21,474,944	\$19,076,833	\$23,841,347	\$25,375,704	\$23,507,070	5.1%	0.6%
03. Skilled and Intermediate (non-MR) Care Nursing	\$482,194,747	\$528,748,396	\$558,401,245	\$569,073,108	\$636,710,235	\$676,239,132	\$708,021,227	6.6%	17.0%
04. Intermediate Care for Mentally Retarded	\$176,202,282	\$185,046,982	\$201,609,510	\$188,051,360	\$221,877,862	\$228,011,377	\$224,257,037	4.1%	5.4%
05. Physician Services	\$132,056,707	\$124,707,825	\$117,218,044	\$130,824,089	\$157,115,548	\$179,963,122	\$167,232,636	4.0%	4.0%
06. Dental Services	\$14,148,248	\$14,306,994	\$12,594,214	\$13,351,434	\$13,075,726	\$11,966,202	\$70,888,422	30.8%	1.7%
07. Other Practitioners	\$6,633,878	\$7,016,406	\$7,163,009	\$6,842,826	\$4,957,832	\$4,705,350	\$4,501,761	-6.3%	0.1%
08. Outpatient Hospital	\$110,176,809	\$107,939,847	\$112,247,860	\$103,053,593	\$89,019,327	\$99,271,432	\$87,239,859	-3.8%	2.1%
09. Clinic Services	\$34,567,196	\$33,111,173	\$32,639,726	\$29,270,386	\$32,421,159	\$83,006,490	\$127,220,040	24.3%	3.0%
10. Lab and X-Ray	\$28,482,687	\$27,252,883	\$25,843,168	\$26,214,303	\$18,484,915	\$17,546,442	\$16,323,049	-8.9%	0.4%
11. Home Health	\$6,664,484	\$5,207,547	\$4,750,009	\$4,235,869	\$3,173,499	\$4,759,567	\$4,656,598	-5.8%	0.1%
12. Prescribed Drugs	\$382,471,744	\$419,133,293	\$453,663,058	\$506,529,241	\$578,855,766	\$631,070,476	\$349,595,911	-1.5%	8.4%
13. Family Planning	\$2,976,456	\$2,527,392	\$2,137,997	\$1,531,497	\$5,673,872	\$5,722,341	\$5,629,003	11.2%	0.1%
14. Early & Periodic Screening, Diagnosis & Treatment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
15. Other Care	\$340,586,197	\$415,415,016	\$435,632,317	\$465,716,321	\$514,563,272	\$568,108,754	\$635,364,419	11.0%	15.2%
16. Personal Care Support Services	\$137,275,767	\$139,909,931	\$141,998,594	\$140,330,684	\$148,956,028	\$173,046,318	\$180,761,323	4.7%	4.3%
17. Home/Community Based Waiver Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a	0.0%
18. Prepaid Health Care	\$321,994,437	\$378,468,376	\$586,504,919	\$704,444,392	\$786,679,373	\$960,249,739	\$1,129,789,669	23.3%	27.1%
19. Primary Case Management (PCCM) Services	\$0	\$0	\$2,318,832	\$1,841,649	\$3,024,216	\$3,256,305	\$2,342,392	0.3%	0.1%
Total (excludes DSH pymts, pharmacy rebates, & other adjs.)	\$2,483,930,711	\$2,715,962,318	\$3,017,869,649	\$3,180,990,089	\$3,574,171,786	\$4,060,746,944	\$4,172,888,580	9.0%	100.0%

AVERAGE PAYMENTS PER RECIPIENT BY TYPE OF SERVICES

								<u>(+) or (-) SLC</u>	<u>Avg. FFY 06</u>
01. General Hospital	\$3,526.13	\$3,643.32	\$3,739.86	\$3,794.15	\$2,924.45	\$2,994.49	\$3,323.88	-1.0%	-38.1%
02. Mental Hospital	\$13,592.55	\$19,001.65	\$18,496.94	\$17,469.63	\$21,913.00	\$17,368.72	\$14,152.36	0.7%	-21.0%
03. Skilled and Intermediate (non-MR) Care Nursing	\$17,497.45	\$18,778.58	\$19,453.78	\$20,531.55	\$22,819.52	\$24,222.33	\$25,018.42	6.1%	3.8%
04. Intermediate Care for Mentally Retarded	\$81,049.81	\$88,285.77	\$98,683.07	\$94,498.17	\$111,105.59	\$113,494.96	\$115,955.03	6.2%	32.3%
05. Physician Services	\$356.90	\$351.62	\$331.74	\$368.38	\$424.39	\$474.98	\$457.92	4.2%	-17.1%
06. Dental Services	\$219.59	\$237.31	\$235.60	\$239.32	\$263.77	\$269.19	\$395.95	10.3%	8.9%
07. Other Practitioners	\$119.36	\$136.50	\$141.44	\$141.61	\$152.68	\$146.95	\$153.50	4.3%	-34.0%
08. Outpatient Hospital	\$498.89	\$512.75	\$537.22	\$531.46	\$675.20	\$728.25	\$682.93	5.4%	9.5%
09. Clinic Services	\$364.64	\$357.22	\$374.93	\$380.35	\$413.27	\$986.96	\$1,433.51	25.6%	104.3%
10. Lab and X-Ray	\$116.68	\$120.62	\$120.47	\$119.20	\$119.41	\$127.34	\$129.61	1.8%	-39.9%
11. Home Health	\$1,124.24	\$1,092.42	\$1,118.97	\$1,100.51	\$924.41	\$1,176.07	\$1,283.52	2.2%	-68.3%
12. Prescribed Drugs	\$1,101.43	\$1,255.34	\$1,421.27	\$1,558.33	\$1,837.98	\$1,951.08	\$1,175.13	1.1%	21.4%
13. Family Planning	\$1,087.49	\$1,387.91	\$1,381.14	\$1,508.86	\$1,823.81	\$2,389.29	\$2,591.62	15.6%	117.2%
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	\$2,183.44	\$2,724.82	\$3,312.31	\$3,567.48	\$4,042.04	\$5,710.67	\$6,590.92	20.2%	254.9%
16. Personal Care Support Services	\$3,378.01	\$3,373.44	\$3,465.32	\$3,425.54	\$4,281.82	\$4,509.00	\$4,667.94	5.5%	148.0%
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	\$1,511.11	\$1,657.68	\$1,607.13	\$1,528.97	\$1,954.96	\$2,134.06	\$2,267.99	7.0%	99.9%
19. Primary Case Management (PCCM) Services	\$0.00	\$0.00	\$14.74	\$18.89	\$26.13	\$27.31	\$28.22	17.6%	1.5%
Total (Average)	\$3,960.26	\$4,391.95	\$4,536.76	\$4,483.50	\$4,882.69	\$5,216.74	\$5,085.01	4.3%	22.6%

TOTAL PER CAPITA EXPENDITURES	\$431.53	\$475.43	\$589.03	\$549.00	\$575.07	\$651.72	\$632.09	6.6%	-28.4%
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Source: MSIS data for FFY 00-06.

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	195,118	139,233	134,495	136,553	140,262	142,739	145,715	-4.7%	17.8%
Poverty Related Eligibles	264,873	310,379	359,514	400,493	424,606	450,010	478,037	10.3%	58.3%
Medically Needy	8,966	7,756	6,773	6,226	7,260	7,904	7,794	-2.3%	0.9%
Other Eligibles	130,344	137,511	139,729	126,459	136,384	155,959	169,178	4.4%	20.6%
Maintenance Assistance Status Unknown	27,913	23,516	24,692	39,757	23,497	21,795	19,901	-5.5%	2.4%
Total	627,214	618,395	665,203	709,488	732,009	778,407	820,625	4.6%	100.0%
By Basis of Eligibility									
Aged, Blind, or Disabled	197,120	198,590	203,452	204,705	210,060	216,226	220,107	1.9%	26.8%
Children	307,718	304,900	338,626	363,561	386,701	412,610	442,937	6.3%	54.0%
Foster Care Children	11,520	11,895	12,593	11,925	12,784	13,177	13,849	3.1%	1.7%
Adults	82,943	79,473	85,840	89,330	98,967	114,239	123,421	6.8%	15.0%
Basis of Eligibility Unknown	27,913	23,537	24,692	39,967	23,497	22,155	20,311	-5.2%	2.5%
Total	627,214	618,395	665,203	709,488	732,009	778,407	820,625	4.6%	100.0%
By Age									
Under Age 1	25,531	25,522	26,381	27,078	29,046	32,340	33,494	4.6%	4.1%
Age 1 to 5	114,543	114,477	124,523	131,652	145,041	154,374	163,017	19.9%	19.9%
Age 6 to 14	148,654	145,627	161,520	171,791	175,609	184,049	197,700	4.9%	24.1%
Age 15 to 20	63,557	63,521	71,544	76,625	81,778	89,018	98,203	7.5%	12.0%
Age 21 to 44	110,614	107,808	114,589	118,942	128,150	142,613	150,984	5.3%	18.4%
Age 45 to 64	53,524	55,184	58,446	60,620	64,943	69,861	73,816	5.5%	9.0%
Age 65 to 74	33,334	33,143	33,421	33,092	33,555	33,702	33,550	0.1%	4.1%
Age 75 to 84	30,068	30,225	30,746	30,711	31,195	31,093	30,524	0.3%	3.7%
Age 85 and Over	19,477	19,372	19,340	19,220	19,195	19,560	19,436	0.0%	2.4%
Age Unknown	27,912	23,516	24,693	39,757	23,497	21,797	19,901	-5.5%	2.4%
Total	627,214	618,395	665,203	709,488	732,009	778,407	820,625	4.6%	100.0%
By Race									
White	271,176	267,089	289,560	302,705	314,996	331,477	346,647	4.2%	42.2%
Black	287,478	283,452	300,204	308,911	323,055	340,176	354,825	3.6%	43.2%
Hispanic, American Indian or Asian	39,478	38,922	49,260	56,628	69,314	83,084	90,928	14.9%	11.1%
Other/ Unknown	29,082	28,932	26,179	41,244	24,644	23,670	28,225	-0.5%	3.4%
Total*	627,214	618,395	665,203	709,488	732,009	778,407	820,625	4.6%	100.0%
By Sex									
Female	362,442	357,158	382,953	398,627	421,685	451,441	476,415	4.7%	58.1%
Male	236,860	233,475	257,559	271,097	286,785	305,144	324,281	5.4%	39.5%
Unknown	27,912	27,762	24,691	39,764	23,539	21,822	19,929	-5.5%	2.4%
Total*	627,214	618,395	665,203	709,488	732,009	778,407	820,625	4.6%	100.0%

Source: MSIS data for FFY 00-06.

SOUTHERN REGION MEDICAID PROFILE

PAYMENTS BY OTHER CHARACTERISTICS

	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	<i>Annual Change</i>	<i>Share of Total FFY 06</i>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$1,087,712,653	\$1,110,404,548	\$1,194,902,103	\$1,254,777,240	\$1,403,195,799	\$1,525,271,811	\$1,517,199,920	5.7%	36.4%
Poverty Related Eligibles	\$314,524,110	\$386,174,941	\$538,512,263	\$659,704,101	\$658,848,235	\$776,147,980	\$855,992,320	18.2%	20.5%
Medically Needy	\$98,539,846	\$83,483,138	\$75,208,245	\$69,933,437	\$93,662,322	\$116,428,679	\$117,242,202	2.9%	2.8%
Other Eligibles	\$962,110,325	\$1,111,702,252	\$1,183,053,561	\$1,141,383,137	\$1,385,502,660	\$1,609,520,271	\$1,647,552,170	9.4%	39.5%
Maintenance Assistance Status Unknown	\$21,043,777	\$24,197,439	\$26,193,477	\$55,192,174	\$32,962,770	\$33,378,203	\$34,901,968	8.8%	0.8%
Total	\$2,483,930,711	\$2,715,962,318	\$3,017,869,649	\$3,180,990,089	\$3,574,171,786	\$4,060,746,944	\$4,172,888,580	9.0%	100.0%
By Basis of Eligibility									
Aged, Blind or Disabled	\$1,881,789,124	\$2,062,331,683	\$2,245,634,923	\$2,331,455,149	\$2,617,797,463	\$2,864,409,763	\$2,801,158,552	6.9%	67.1%
Children	\$356,524,289	\$372,517,263	\$448,607,412	\$489,713,489	\$556,884,352	\$664,658,608	\$787,384,382	14.1%	18.9%
Foster Care Children	\$39,406,198	\$71,981,745	\$82,154,781	\$74,890,109	\$100,828,450	\$116,962,657	\$133,771,327	22.6%	3.2%
Adults	\$185,167,323	\$184,861,574	\$213,941,075	\$227,137,553	\$265,698,751	\$375,701,225	\$410,300,748	14.2%	9.8%
Basis of Eligibility Unknown	\$21,043,777	\$24,270,053	\$27,531,458	\$57,793,789	\$32,962,770	\$39,014,691	\$40,273,571	11.4%	1.0%
Total	\$2,483,930,711	\$2,715,962,318	\$3,017,869,649	\$3,180,990,089	\$3,574,171,786	\$4,060,746,944	\$4,172,888,580	9.0%	100.0%
By Age									
Under Age 1	\$74,142,678	\$78,724,164	\$88,568,250	\$86,845,468	\$98,959,235	\$120,197,280	\$133,396,410	10.3%	3.2%
Age 1 to 5	\$174,953,639	\$182,084,505	\$215,506,887	\$217,796,177	\$253,201,206	\$286,175,741	\$347,386,773	12.1%	8.3%
Age 6 to 14	\$183,901,586	\$204,966,655	\$238,065,733	\$259,542,654	\$289,492,194	\$340,787,137	\$393,947,031	13.5%	9.4%
Age 15 to 20	\$134,382,892	\$163,655,354	\$190,580,444	\$209,274,245	\$247,275,103	\$291,424,671	\$340,120,554	16.7%	8.2%
Age 21 to 44	\$622,611,314	\$660,803,841	\$716,756,954	\$744,213,985	\$828,317,002	\$975,276,955	\$1,006,901,661	8.3%	24.1%
Age 45 to 64	\$509,435,844	\$579,694,991	\$657,522,290	\$699,035,518	\$815,030,543	\$941,132,688	\$962,018,086	11.2%	23.1%
Age 65 to 74	\$226,162,232	\$241,634,542	\$264,906,730	\$277,327,512	\$308,937,354	\$326,607,416	\$274,601,101	3.3%	6.6%
Age 75 to 84	\$274,192,117	\$296,822,232	\$320,962,297	\$327,397,076	\$365,996,529	\$387,666,767	\$337,455,032	3.5%	8.1%
Age 85 and Over	\$263,104,723	\$283,378,595	\$298,804,739	\$304,365,280	\$333,999,850	\$358,094,380	\$342,159,964	4.5%	8.2%
Age Unknown	\$21,043,686	\$24,197,439	\$26,193,325	\$55,192,174	\$32,962,770	\$33,383,909	\$34,901,968	8.8%	0.8%
Total	\$2,483,930,711	\$2,715,962,318	\$3,017,869,649	\$3,180,990,089	\$3,574,171,786	\$4,060,746,944	\$4,172,888,580	9.0%	100.0%
By Race									
White	\$1,390,383,251	\$1,522,509,121	\$1,681,790,686	\$1,740,435,085	\$1,961,183,112	\$2,185,324,452	\$2,185,610,509	7.8%	52.4%
Black	\$962,905,449	\$1,052,438,102	\$1,158,956,731	\$1,216,848,210	\$1,376,878,915	\$1,588,003,529	\$1,663,752,662	9.5%	39.9%
Hispanic, American Indian or Asian	\$105,441,247	\$114,695,173	\$146,011,056	\$163,075,425	\$197,521,902	\$246,443,082	\$265,188,207	16.6%	6.4%
Other/Unknown	\$25,200,764	\$26,319,922	\$31,111,176	\$60,631,369	\$38,587,857	\$40,975,881	\$58,337,202	15.0%	1.4%
Total*	\$2,483,930,711	\$2,715,962,318	\$3,017,869,649	\$3,180,990,089	\$3,574,171,786	\$4,060,746,944	\$4,172,888,580	9.0%	100.0%
By Sex									
Female	\$1,508,799,560	\$1,651,670,755	\$1,810,956,030	\$1,888,500,408	\$2,127,336,625	\$2,434,887,704	\$2,464,618,341	8.5%	59.1%
Male	\$953,525,708	\$1,041,911,834	\$1,180,721,261	\$1,237,271,558	\$1,413,393,155	\$1,591,960,499	\$1,672,681,927	9.8%	40.1%
Unknown	\$21,605,443	\$22,379,729	\$26,192,358	\$55,218,123	\$33,442,006	\$33,898,741	\$35,588,312	8.7%	0.9%
Total*	\$2,483,930,711	\$2,715,962,318	\$3,017,869,649	\$3,180,990,089	\$3,574,171,786	\$4,060,746,944	\$4,172,888,580	9.0%	100.0%

Source: MSIS data for FFY 00-06.

SOUTHERN REGION MEDICAID PROFILE

AVERAGE PAYMENT PER RECIPIENT BY OTHER CHARACTERISTICS

	FFY 00	FFY 01	FFY 02	FFY 03	FFY 04	FFY 05	FFY 06	<i>Annual Change</i>	<i>Above (+) or Below (-) SLIC Avg. FFY 06</i>
By Maintenance Assistance Status									
Receiving Cash Assistance or Eligible Under Section 1931	\$5,574.64	\$7,975.15	\$8,884.36	\$9,188.94	\$10,004.11	\$10,685.74	\$10,412.11	11.0%	81.6%
Poverty Related Eligibles	\$1,187.45	\$1,244.20	\$1,497.89	\$1,647.23	\$1,551.67	\$1,724.73	\$1,790.64	7.1%	-9.8%
Medically Needy	\$10,990.39	\$10,763.68	\$11,104.13	\$11,232.48	\$12,901.15	\$14,730.35	\$15,042.62	5.4%	90.2%
Other Eligibles	\$7,381.32	\$8,084.46	\$8,466.77	\$9,025.72	\$10,158.84	\$10,320.15	\$9,738.57	4.7%	37.5%
Maintenance Assistance Status Unknown	\$753.91	\$1,028.98	\$1,060.81	\$1,388.24	\$1,402.85	\$1,531.46	\$1,753.78	15.1%	-41.3%
Total	\$3,960.26	\$4,391.95	\$4,536.76	\$4,483.50	\$4,882.69	\$5,216.74	\$5,085.01	4.3%	22.6%
By Basis of Eligibility									
Aged, Blind or Disabled	\$9,546.41	\$10,384.87	\$11,037.66	\$11,389.34	\$12,462.14	\$13,247.30	\$12,726.35	4.9%	16.5%
Children	\$1,158.61	\$1,221.77	\$1,324.79	\$1,346.99	\$1,440.09	\$1,610.86	\$1,777.64	7.4%	13.0%
Foster Care Children	\$3,420.68	\$6,051.43	\$6,523.85	\$6,280.09	\$7,887.08	\$8,876.27	\$9,659.28	18.9%	37.1%
Adults	\$2,232.46	\$2,326.09	\$2,492.32	\$2,542.68	\$2,684.72	\$3,288.73	\$3,324.40	6.9%	17.7%
Basis of Eligibility Unknown	\$753.91	\$1,031.14	\$1,115.00	\$1,446.04	\$1,402.85	\$1,760.99	\$1,982.85	17.5%	-35.5%
Total	\$3,960.26	\$4,391.95	\$4,536.76	\$4,483.50	\$4,882.69	\$5,216.74	\$5,085.01	4.3%	22.6%
By Age									
Under Age 1	\$2,904.03	\$3,084.56	\$3,357.27	\$3,207.23	\$3,406.98	\$3,716.68	\$3,982.70	5.4%	0.8%
Age 1 to 5	\$1,527.41	\$1,590.58	\$1,730.66	\$1,654.33	\$1,745.72	\$1,853.78	\$2,130.98	5.7%	12.3%
Age 6 to 14	\$1,237.11	\$1,407.48	\$1,473.91	\$1,510.80	\$1,648.50	\$1,851.61	\$1,992.65	8.3%	8.6%
Age 15 to 20	\$2,114.37	\$2,576.40	\$2,663.82	\$2,731.15	\$3,023.74	\$3,273.77	\$3,463.44	8.6%	20.3%
Age 21 to 44	\$5,628.68	\$6,129.45	\$6,255.02	\$6,256.95	\$6,463.65	\$6,838.63	\$6,668.93	2.9%	30.3%
Age 45 to 64	\$9,517.90	\$10,504.77	\$11,250.08	\$11,531.43	\$12,549.94	\$13,471.50	\$13,032.65	5.4%	25.7%
Age 65 to 74	\$6,784.73	\$7,290.67	\$7,926.36	\$8,380.50	\$9,206.89	\$9,691.04	\$8,184.83	3.2%	21.6%
Age 75 to 84	\$9,119.07	\$9,820.42	\$10,439.16	\$10,660.58	\$11,732.54	\$12,467.98	\$11,055.40	3.3%	7.0%
Age 85 and Over	\$13,508.48	\$14,628.26	\$15,450.09	\$15,835.86	\$17,400.36	\$18,307.48	\$17,604.44	4.5%	3.3%
Age Unknown	\$753.93	\$1,028.98	\$1,060.84	\$1,388.24	\$1,402.85	\$1,531.58	\$1,753.78	15.1%	-41.3%
Total	\$3,960.26	\$4,391.95	\$4,536.76	\$4,483.50	\$4,882.69	\$5,216.74	\$5,085.01	4.3%	22.6%
By Race									
White	\$5,127.24	\$5,700.38	\$5,808.09	\$5,749.61	\$6,226.06	\$6,592.69	\$6,305.00	3.5%	23.7%
Black	\$3,349.50	\$3,712.93	\$3,860.56	\$3,939.15	\$4,262.06	\$4,668.18	\$4,688.94	5.8%	26.9%
Hispanic, American Indian or Asian	\$2,670.86	\$2,946.80	\$2,964.09	\$2,879.77	\$2,849.67	\$2,966.19	\$2,916.46	1.5%	4.6%
Other/Unknown	\$866.54	\$909.72	\$1,188.40	\$1,470.07	\$1,565.81	\$1,731.13	\$2,066.86	15.6%	-49.1%
Total	\$3,960.26	\$4,391.95	\$4,536.76	\$4,483.50	\$4,882.69	\$5,216.74	\$5,085.01	4.3%	22.6%
By Sex									
Female	\$4,162.88	\$4,624.48	\$4,728.93	\$4,737.51	\$5,044.85	\$5,393.59	\$5,173.26	3.7%	20.6%
Male	\$4,025.69	\$4,462.63	\$4,584.27	\$4,563.94	\$4,928.41	\$5,217.08	\$5,158.12	4.2%	24.0%
Unknown	\$774.05	\$806.13	\$1,060.81	\$1,388.65	\$1,420.71	\$1,553.42	\$1,785.76	14.9%	-40.0%
Total	\$3,960.26	\$4,391.95	\$4,536.76	\$4,483.50	\$4,882.69	\$5,216.74	\$5,085.01	4.3%	22.6%

Source: MSIS data for FFY 00-06.

SOUTHERN REGION MEDICAID PROFILE

ADDITIONAL STATE HEALTH CARE INFORMATION

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

Waivers

Virginia operates two health care reform demonstrations with Freedom of Choice Waivers under Title XIX, Section 1915 (b), of the Social Security Act. They include:

- Medallion Program, implemented in 1992, provides case management for TANF and TANF-related beneficiaries statewide. In July of 1995, this program was expanded to include the aged, blind, and disabled resident population.
- Medallion II Program requires beneficiaries to enroll in prepaid HMO health plans. It has been in operation since January 1, 1996.

services to people who otherwise would require institutionalization. They include:

- Elderly and Disabled with Consumer Direction Waiver: Operating since July 1, 1982.
- Mental Retardation Waiver
- AIDS Waiver: Operating since July 1, 1991.
- Technology Assisted Waiver: Operating since December 1, 1988.
- Assisted Living Waiver, operating since 2005.
- Individual and Family Developmental Disabilities Support Waiver: Operating since July 2000.

Managed Care

- Commercial Managed Care Organization (MCO)
- Medicaid-only Managed Care Organization (MCO)
- Primary Care Case Management (PCCM)
- Prepaid Ambulatory Health Plan (PAHP)

As of December 2007, approximately 64% of Medicaid beneficiaries were enrolled in managed care, and the remaining 36% were receiving benefits in the fee for service program.

Coverage for Targeted Population

- The Uninsured: The Indigent Care Trust Fund, which includes state general funds and funds provided by private acute care hospitals, subsidizes the cost of uncompensated care at the hospitals.
- Disease Management: As of 2006, the Disease State Management program provides services to address targeted conditions for certain populations that decide to participate.

SOUTHERN REGION MEDICAID PROFILE

Cost Containment Measures

- Certificate of Need (CON) Program since 1973. Regulates introduction or expansion of new institutional health facilities and services. Nursing home moratorium which had been extended until June 30, 1996 was allowed to expire. The state implemented a new program whereby the department requests proposals for new nursing home beds based on need in each health planning district.
- Legislation passed in 1998 added certain medical equipment to the CON review process and exempted the replacement or upgrade of existing MRI systems from CON requirements.

Medicaid

- 21 optional services are offered.

Children's Health Insurance Program: State Designed

- CHIP in Virginia received HCFA approval on October 22, 1998 and is administered by the Department of Medical Assistance Services through a state-designed program. The state plan is titled "The Virginia Children's Medical Security Insurance Plan (VCMSIP)". Children/adolescents birth through 18 in families with income up to 185% of the FPL are eligible for CHIP benefits.

Children's Health Insurance Program: State Designed (Continued)

- For 2000, expanded the SCHIP program to provide health care coverage to individuals up to age 19 in families with incomes to 200% of the FPL and renamed the program the Family Access to Medical Insurance Security Plan (FAMIS). The program serves approximately 68,000 individuals. FAMIS does not require qualified families to pay yearly or monthly premiums. However, families with children that are enrolled in an MCO have co-payments for some covered services. Co-payments for some basic FAMIS services provided to eligible children are as follows:

	Status 1*	Status 2*
Outpatient Hospital or Doctor	\$2 per visit	\$5 per visit
Prescription Drugs	\$2 per prescription	\$5 per prescription
Inpatient Hospital	\$15 per admission	\$25 per admission
Non-emergency use of ER	\$10 per visit	\$25 per visit
Yearly Co-payment Limit per Family	\$180	\$350

*Status is determined by DMAS and is based on family income. Native Americans and Alaskan natives are not required to make co-payments.

SOUTHERN REGION MEDICAID PROFILE

- During FY 03, children age 6 -19 under 133% of the FPL were converted to the Medicaid program but still federal funding for this population continues to be at the SCHIP rate (and out of the SCHIP allotment). The state reported that approximately 31,000 children were added to Medicaid as a result of this change, while 53,000 additional children were enrolled in SCHIP.
- During FY 04, the SCHIP program was amended to remove the requirement that enrollees report all changes that impact eligibility before redetermination, reduce the waiting period of uninsurance from 6 months to 4 months, expand the scope of benefits to add certain mental health services, and change prior authorization requirements for some benefits.