

**Quarterly State Children's Health Insurance Program  
Statement of Expenditures for Title XXI  
Summary Sheet**

**State:**

**Quarter Ended:**

Expenditures Reported for Period	Title XXI Expenditures	
	Total Computable	Federal Share
	(A)	(B)
Expenditures In This Quarter (Form CMS 21 Base)		
Adjustments Increasing Claims For Prior Quarters (Form CMS 21P)		
Adjustments Decreasing Claims For Prior Quarters (Form CMS 21P)		
Net Expenditures Reported In This Period		

I certify that:

1. I am the executive officer of the state agency or his/her designate authorized by the state to submit this form.
2. This report only includes expenditures under the State Children's Health Insurance Program (SCHIP) under Title XXI of the Act that are allowable in accordance with applicable implementing federal, state, and local statutes, regulations, policies, and the state Child Health Plan approved by the Secretary and in effect in the Quarter Ended indicated above under Title XXI of the Act.
3. The expenditures included in this report are based on the state's accounting of actual recorded expenditures, and are not based on estimates.
4. The required amount of state and/or local funds were available and used to match the state's allowable expenditures included in this report, and such state and/or local funds were in accordance with all applicable federal requirements for the non-federal share match of expenditures.
5. Federal matching funds are not being claimed on this report to match any expenditure under any state Child Health Plan amendment that was submitted after January 2, 2001, and that has not been approved by the Secretary effective for the Quarter Ended indicated above.
6. The information shown above and on the Form CMS-21 Summary Sheet and the Supporting Schedules is correct to the best of my knowledge and belief.

Date:	Signature:	Title:
-------	------------	--------

User Performing Certification:

Footnotes:

The CMS-21 Forms are to be submitted thru the CBES to the Centers for Medicare & Medicaid Services

**State Children's Health Expenditures by Type of Service  
For the Title XXI Program  
Expenditures in this Quarter**

State:

Quarter Ended:

		Total Computable (A)	Federal Share (B)	Subject To 10% Limit		Total Federal Share (E)
				Total Computable (C)	Federal Share (D)	
				1A	Premiums Up To 150% Of Poverty Level - Gross Premiums Paid	
1B	Premiums Up To 150% Of Poverty Level - Cost Sharing Offsets					
1C	Premiums Over 150% Of Poverty Level - Gross Premiums Paid					
1D	Premiums Over 150% Of Poverty Level - Cost Sharing Offsets					
2	Inpatient Hospital Services					
3	Inpatient Mental Health Facility Services					
4	Nursing Care Services					
5	Physician And Surgical Services					
6	Outpatient Hospital Services					
7	Outpatient Mental Health Facility Services					
8	Prescribed Drugs					
9	Dental Services					
10	Vision Services					
11	Other Practitioners' Services					
12	Clinic Services					
13	Therapy Services					
14	Laboratory And Radiological Services					
15	Durable And Disposable Medical Equipment					
16	Family Planning					
17	Abortions No. 0					
18	Screening Services					
19	Home Health					
20	Reserved					
21	Home And Community-Based Services					
22	Hospice					
23	Medical Transportation					
24	Case Management					
25	Other Services					
26	Outreach					
27	Administration					
28	Balance					
29	Less: Collections					
30	Total					

**State Children's Health Expenditures by Type of Service  
For the Title XXI Program  
Expenditures in this Quarter**

State:

Quarter Ended:

Program Code:		Total Computable	Federal Share	Subject To 10% Limit		Total Federal Share
				Total Computable	Federal Share	
				(A)	(B)	
1A	Premiums Up To 150% Of Poverty Level - Gross Premiums Paid					
1B	Premiums Up To 150% Of Poverty Level - Cost Sharing Offsets					
1C	Premiums Over 150% Of Poverty Level - Gross Premiums Paid					
1D	Premiums Over 150% Of Poverty Level - Cost Sharing Offsets					
2	Inpatient Hospital Services					
3	Inpatient Mental Health Facility Services					
4	Nursing Care Services					
5	Physician And Surgical Services					
6	Outpatient Hospital Services					
7	Outpatient Mental Health Facility Services					
8	Prescribed Drugs					
9	Dental Services					
10	Vision Services					
11	Other Practitioners' Services					
12	Clinic Services					
13	Therapy Services					
14	Laboratory And Radiological Services					
15	Durable And Disposable Medical Equipment					
16	Family Planning					
17	Abortions No. 0					
18	Screening Services					
19	Home Health					
20	Reserved					
21	Home And Community-Based Services					
22	Hospice					
23	Medical Transportation					
24	Case Management					
25	Other Services					
26	Outreach					
27	Administration					
28	Balance					
29	Less: Collections					
30	Total					

**State Children's Health Insurance Program Expenditures  
For the Title XXI Program  
Calculation of 10% Limit**

State:

Quarter Ended:

		Total Computable	Federal Share
		(A)	(B)
1A	Previously Claimed Section 2105(a)(1)(C) SCHIP Expenditures in Fiscal Year		
1B	Previously Claimed Sections 1905(u)(2) and 1905(u)(3) M-SHIP Expenditures in Fiscal Year		
2A	Current Quarter Section 2105(a)(1)(C) SCHIP Expenditure Claims		
2B	Current Quarter Sections 1905(u)(2) and 1905(u)(3) M-SHIP Expenditures in Fiscal Year		
3	Total Of Column (a) Lines 1A & B And 2A & B		
4	10% Fiscal Year Limit (Divide Line 3 Column (a) By 9)		
5	Total Computable Allotment(s) (Allotment(s) Divided By The Enhanced FMAP(s))		
6	10% Of The Allotment - Total Computable (10% Times Line 5)		
7	10% Fiscal Year Limit (Lesser Of Lines 4 Column (a) Or 6 Column (a))		
8	Total Computable Share of Outreach Expenditures to be Applied Against 10% Fiscal Year Limit		
9A	Previously Claimed Section 2105(a)(1)(D) Expenditures in Fiscal Year - Net of Outreach		
9B	Current Quarter Section 2105(a)(1)(D) Expenditures - Net of Outreach		
10	Total Of Lines 8, 9A, and 9B		
11A	Total Computable Amount Under/(Over) Limit (Line 7 minus Line 10)		
11B	Federal Share Amount of Line 11A (Line 11A Times the Current FY Enhanced FMAP)		

**State Children's Health Insurance Program Expenditures  
For the Title XXI Program**

State:

Quarter Ended:

Application of 10% Outreach Allowance For FY For FY 1998 Retained Allotment States Used in the Calculation of 10% Fiscal Year Limit		Retained Allotment And Expenditure Amounts	Remaining Outreach Allowance Or Expenditure Amounts	Federal Share Of Outreach Expenditures Subject To 10% FY Limit	Total Computable Share Of Outreach Subject To 10% FY Limit
		(A)	(B)	(C)	(D)
1	Beginning Balance	18,512,188	1,851,219		
2	Previously Claimed Sections 1905(u)(2) and 1905(u)(3) M-SCHIP Expenditures in Fiscal Year	2,453,896			
3	Previously Claimed Section 1920A Expenditures in Fiscal Year	0			
4	Previously Claimed Section 2105(a)(1)(C) SCHIP Expenditures in Fiscal Year	22,838,194			
5	Previously Claimed Section 2105(a)(1)(D) SCHIP Expenditures in Fiscal Year - Net of Outreach & Admin	0			
6	Previously Claimed Section 2105(a)(1)(D) SCHIP Expenditures in Fiscal Year - Outreach	516,625	106,006		
7	Previously Claimed Section 2105(a)(1)(D) SCHIP Expenditures in Fiscal Year - Administration	1,648,379			
8	Balance From Previous Quarter	(50,913,626)	0		
9	Currently Claimed Sections 1905(u)(2) and 1905(u)(3) M-SCHIP Expenditures in Fiscal Year	0			
10	Currently Claimed Section 1920A Expenditures in Fiscal Year	0			
11	Currently Claimed Section 2105(a)(1)(C) SCHIP Expenditures in Fiscal Year	979			
12	Currently Claimed Section 2105(a)(1)(D) SCHIP Expenditures in Fiscal Year - Net of Outreach & Admin	0			
13	Balance	(50,914,605)	0		
14	Currently Claimed Section 2105(a)(1)(D) SCHIP Expenditures in Fiscal Year - Outreach	0	0		
15	Currently Claimed Section 2105(a)(1)(D) SCHIP Expenditures in Fiscal Year - Administration	0			
16	Net	(50,914,605)	0		

**Allocation of Title XIX and Title XXI Expenditures  
To SCHIP Fiscal Year Allotment**

State:

Quarter Ended:

		Federal Share Expenditures Only					Balance Unused	
		Title XIX		Title XXI		Total		
		1905(u)(2)/(3)	PE	2105 (a)(1)(C)	2105(a)(1)(D)			
		(A)	(B)	(C)	(D)			
<b>FFY 1998 (10/01/1997 - 09/30/1998)</b>								
1	FFY 1998 Allotment							
2	First Quarter 1998							
3	Second Quarter 1998							
4	Third Quarter 1998							
5	Fourth Quarter 1998							
6	Excess 10% Limit							
7	Unused Allotment							
8	Excess Expenditures							
<b>FFY 1999 (10/01/1998 - 09/30/1999)</b>								
1	Unused FFY 1998 Allotment							
2	FFY 1999 Allotment							
3	Excess Previously Claimed in Prior Years							
4	First Quarter 1999							
5	Second Quarter 1999							
6	Third Quarter 1999							
7	Fourth Quarter 1999							
8	Excess 10% Limit							
9	Unused Allotment							
10	Excess Expenditures							
<b>FFY 2000 (10/01/1999 - 09/30/2000)</b>								
1	Unused FFY 1998 Allotment							
2	Unused FFY 1999 Allotment							
3	FFY 2000 Allotment							
4	Excess Previously Claimed in Prior Years							
5	First Quarter 2000							
6	Second Quarter 2000							
7	Third Quarter 2000							
8	Fourth Quarter 2000							
9	Excess 10% Limit							
10	Unused Allotment							
11	Excess Expenditures							
12	FFY 1998 Allotment Added to Redistribution Pool							

**Allocation of Title XIX and Title XXI Expenditures  
To SCHIP Fiscal Year Allotment**

State:

Quarter Ended:

		Federal Share Expenditures Only					Balance Unused	
		Title XIX		Title XXI		Total		
		1905(u)(2)/(3)	PE	2105 (a)(1)(C)	2105(a)(1)(D)			
		(A)	(B)	(C)	(D)			
<b>FFY 2001 (10/01/2000 - 09/30/2001)</b>								
1	FFY 1998 Redistributed Allotment							
2	FFY 1998 Retained Amount							
3	Unused FFY 1999 Allotment							
4	Unused FFY 2000 Allotment							
5	FFY 2001 Allotment							
6	Excess Previously Claimed in Prior Years							
7	First Quarter 2001							
8	Second Quarter 2001							
9	Third Quarter 2001							
10	Fourth Quarter 2001							
11	Excess 10% Limit							
12	Unused Allotment							
13	Excess Expenditures							
14	FFY 1999 Allotment added to Redistribution Pool							
<b>FFY 2002 (10/01/2001 - 09/30/2002)</b>								
1	Unused FFY 1998 Redistributed Allotment							
2	Unused FFY 1998 Retained Amount							
3	FFY 1999 Redistributed Allotment							
4	FFY 1999 Retained Amount							
5	Unused FFY 2000 Allotment							
6	Unused FFY 2001 Allotment							
7	FFY 2002 Allotment							
8	Excess Previously Claimed in Prior Years							
9	First Quarter 2002							
10	Second Quarter 2002							
11	Third Quarter 2002							
12	Fourth Quarter 2002							
13	Excess 10% Limit							
14	Unused Allotment							
15	Excess Expenditures							
16	FFY 2000 Allotment added to Redistribution Pool							

**State Children's Health Expenditures by Type of Service  
For the Title XXI Program  
Prior Period Adjustments**

State:

Quarter Ended:

Fiscal Year:

		Line: (Decreasing)					
Program Code:		Total Computable (A)	Federal Share (B)	Subject To 10% Limit		Total Federal Share (E)	Deferral Disallowanc C.I.N. No. (F)
				Total	Federal		
				Computable	Share		
		(A)	(B)	(C)	(D)	(E)	(F)
1A	Premiums Up To 150% Of Poverty Level - Gross Premiums Paid						
1B	Premiums Up To 150% Of Poverty Level - Cost Sharing Offsets						
1C	Premiums Over 150% Of Poverty Level - Gross Premiums Paid						
1D	Premiums Over 150% Of Poverty Level - Cost Sharing Offsets						
2	Inpatient Hospital Services						
3	Inpatient Mental Health Facility Services						
4	Nursing Care Services						
5	Physician And Surgical Services						
6	Outpatient Hospital Services						
7	Outpatient Mental Health Facility Services						
8	Prescribed Drugs						
9	Dental Services						
10	Vision Services						
11	Other Practitioners' Services						
12	Clinic Services						
13	Therapy Services						
14	Laboratory And Radiological Services						
15	Durable And Disposable Medical Equipment						
16	Family Planning						
17	Abortions No.						
18	Screening Services						
19	Home Health						
20	Reserved						
21	Home And Community-Based Services						
22	Hospice						
23	Medical Transportation						
24	Case Management						
25	Other Services						
26	Outreach						
27	Administration						
28	Balance						
29	Less: Collections						
30	Total						



**State Children's Health Expenditures by Type of Service**

**For the Title XXI Program**

**Expenditures in this Quarter**

State:

Quarter Ended:

Program Code: Type of Waiver: Waiver Name: Waiver Number:		Total Computable	Federal Share	Subject To 10% Limit		Total Federal Share
				Total	Federal	
				Computable	Share	
		(A)	(B)	(C)	(D)	(E)
1A	Premiums For Private Health Care Insurance Coverage: Up To 150% Of Poverty Level - Gross Premiums Paid					
1B	Premiums For Private Health Care Insurance Coverage: Up To 150% Of Poverty Level - Cost Sharing Offsets					
1C	Premiums For Private Health Care Insurance Coverage: Over 150% Of Poverty Level - Gross Premiums Paid					
1D	Premiums For Private Health Care Insurance Coverage: Over 150% Of Poverty Level - Cost Sharing Offsets					
2	Inpatient Hospital Services					
3	Inpatient Mental Health Facility Services					
4	Nursing Care Services					
5	Physician And Surgical Services					
6	Outpatient Hospital Services					
7	Outpatient Mental Health Facility Services					
8	Prescribed Drugs					
9	Dental Services					
10	Vision Services					
11	Other Practitioners' Services					
12	Clinic Services					
13	Therapy Services					
14	Laboratory And Radiological Services					
15	Durable And Disposable Medical Equipment					
16	Family Planning					
17	Abortions No. 0					
18	Screening Services					
19	Home Health					
20	Reserved					
21	Home And Community-Based Services					
22	Hospice					
23	Medical Transportation					
24	Case Management					
25	Other Services					
26	Outreach					
27	Administration					
28	Balance					
29	Less: Collections					
30	Total					

**State Children's Health Expenditures by Type of Service  
For the Title XXI Program  
Prior Period Adjustments**

State:

Quarter Ended:

Fiscal Year:

Line: (Decreasing)							
Program Code: Type of Waiver: Waiver Name: Waiver Number:		Total Computable	Federal Share	Subject To 10% Limit		Total Federal Share	Deferral Disallowanc C.I.N. No.
				Total Computable	Federal Share		
		(A)	(B)	(C)	(D)	(E)	(F)
1A	Premiums For Private Health Care Insurance Coverage: Up To 150% Of Poverty Level - Gross Premiums Paid						
1B	Premiums For Private Health Care Insurance Coverage: Up To 150% Of Poverty Level - Cost Sharing Offsets						
1C	Premiums For Private Health Care Insurance Coverage: Over 150% Of Poverty Level - Gross Premiums Paid						
1D	Premiums For Private Health Care Insurance Coverage: Over 150% Of Poverty Level - Cost Sharing Offsets						
2	Inpatient Hospital Services						
3	Inpatient Mental Health Facility Services						
4	Nursing Care Services						
5	Physician And Surgical Services						
6	Outpatient Hospital Services						
7	Outpatient Mental Health Facility Services						
8	Prescribed Drugs						
9	Dental Services						
10	Vision Services						
11	Other Practitioners' Services						
12	Clinic Services						
13	Therapy Services						
14	Laboratory And Radiological Services						
15	Durable And Disposable Medical Equipment						
16	Family Planning						
17	Abortions No. 0						
18	Screening Services						
19	Home Health						
20	Reserved						
21	Home And Community-Based Services						
22	Hospice						
23	Medical Transportation						
24	Case Management						
25	Other Services						
26	Outreach						
27	Administration						
28	Balance						
29	Less: Collections						
30	Total						

Provider-Related Donations And  
Health Care Related Taxes, Fees, And Assessments  
Received Under Public Law 102-234

**Summary Total Of Receipts From Form CMS 21.11A**

State:

Quarter Ended:

Category		Total Receipts
(A)		(B)
<b>Donations</b>		
1.	Donations-Permissible (Bona Fide)	
2.	Donations-Impermissible	
3.	Donations-Outstationed Eligibility Workers	
<b>Taxes</b>		
4.	Taxes-Permissible	
5.	Taxes-Impermissible	
<b>Fees</b>		
6.	Fees - Permissible	
7.	Fees - Impermissible	
<b>Assessments</b>		
8.	Assessments - Permissible	
9.	Assessments - Impermissible	
<b>Totals</b>		
10.	Total Permissible Taxes, Fees, and Assessments (Lines 4+6+8)	
11.	Total Impermissible Taxes, Fees, and Assessments (Lines 5+7+9)	



Provider-Related Donations And  
Health Care Related Taxes, Fees, And Assessments  
Received Under Public Law 102-234

### Actual Receipts By Plan Name

State:

Quarter Ended:

**CODES:**

1. Donations - Permissible (Bona Fide)	4. Taxes - Permissible	7. Fees - Impermissible
1.A. Donations - Permissible (Bona Fide) - SCHIP Related	4.A. Taxes - Permissible - SCHIP Related	7.A. Fees - Impermissible - SCHIP Related
2. Donations - Impermissible	5. Taxes - Impermissible	8. Assessments - Permissible
2.A. Donations - Impermissible - SCHIP Related	5.A. Taxes - Impermissible - SCHIP Related	8.A. Assessments - Permissible - SCHIP Related
3. Donations - Outstationed Eligibility Workers	6. Fees - Permissible	9. Assessments - Impermissible
3.A. Donations - Outstationed Eligibility Workers - SCHIP Related	6.A. Fees - Permissible - SCHIP Related	9.A. Assessments - Impermissible - SCHIP Related

Code	Plan Name	Receipts
(A)	(B)	(C)