

# Health and Human Services Commission



Don A. Gilbert, Commissioner

## **Biennial Medicaid Report**

**FY 2000, FY 2001, FY 2002**

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## Medicaid Program Descriptions

### Health and Human Services Commission

**PREMIUMS:** Monthly premiums are paid to NHIC so that NHIC processes and pays on submitted claims. Premiums are paid on both fee-for-service and capitated rates. Premiums cover most acute care services including inpatient hospital, physician, lab, X-ray, and outpatient hospital services. The majority of services paid for in the premium arrangement are federally mandated services. Premiums are paid according to the estimated actuarial cost by each of the nine risk groups described below.

**Aged and Medicare:** Individuals over age 65 and any individual with Medicare coverage.

**Blind and Disabled:** Individuals who are Blind or Disabled. The majority of these people receive Supplemental Security Income (SSI).

**TANF Adults:** Individuals age 21 and over that are eligible for the TANF program (income limit is 17% of the Federal Poverty Level (FPL)). This group may include some women who are pregnant.

**TANF Children:** Individuals under age 21 that are eligible for the TANF program (income limit is 17% FPL). This group may include some women who are pregnant and children less than one year of age.

**Pregnant Women:** Pregnant women having family income below 185% of the FPL.

**Newborns:** Children under age one born to Medicaid-eligible mothers. The premiums for this risk group are broken into two sub-groups:

- Regular Newborn: Newborn children less than 4 months of age.
- Extended Newborn: Newborn children 4 through 12 months of age

**Federal Mandate Children:** This group includes children between the ages of 6 and 19 with family income below 100% FPL.

**Expansion Children:** This group includes:

- Children under age 18, ineligible for TANF because of the applied income of their stepparents or grandparents.
- Children under age 1 with family income below 185% FPL.
- Children ages 1-5 with family income below 133% FPL.

**Medically Needy:** There are two categories of Medically Needy individuals:

- Spend Down: Individuals whose family income is below the Medically Needy Standard limit (about 25% of poverty) after qualified medical bills are subtracted from their income.
- Non-Spend Down: Children under age 18 in families with income between the TANF level (about 17% of poverty) and the Medically Needy Standard limit. This group also includes many adults who are parents or guardians of these children as well as parents or guardians of children in some of the other risk groups.

**Spillover:** Spillover is a term describing the impact of children initially applying for CHIP but eventually enrolling in Medicaid. Spillover clients cross all Medicaid risk groups except Aged, TANF Adults, and Medically Needy. Because of a single application for both Medicaid and CHIP and simplified eligibility for Medicaid, Spillover became an obsolete concept during the 2002-03 biennium. Spillover was reported separately from the rest of the Medicaid expenditures during 2000-03.

**MEDICARE PAYMENTS:** Federal law mandates that states pay for the out of pocket expenses for individuals who are eligible for both Medicare and Medicaid, “dual eligibles”, and some Medicare recipients who are not eligible for the full scope of Medicaid benefits. Services are provided through the payment of premiums to the Social Security Administration (the federal government sets the payment amounts annually), and Medicare coinsurance and deductibles by an independent contractor for some Medicare clients who are not eligible for the full scope of Medicaid benefits. Eligibility for the array of Medicare payments depends on income and resource limits and working enough quarters to qualify for Social Security.

**SMIB Part A Premiums:** Federal law mandates that states pay for the Medicare Part A Premium (hospitalization services) for low income beneficiaries that are eligible for both Medicaid and Medicare.

**SMIB Part B Premiums:** Federal law mandates that states pay for the Medicare Part B Premium (coverage for physician, laboratory, and outpatient services) for low-income beneficiaries that are eligible for both Medicaid and Medicare.

**QMBs - Qualified Medicaid Beneficiaries:** Federal law mandates that for QMBs, states pay for the Medicare Part A and Part B Premiums and other out-of pocket costs. There are several categories of clients paid as QMBs depending on their income and resource limits and SSI eligibility. These groups include the following:

- QMBs must be below 100% FPL and have resources not exceeding twice the SSI limit.
- QI-1s are between 120%-135% FPL and have Medicare Part B coverage fully funded by federal funds.

**VENDOR DRUGS:** Drugs are another service excluded from the premium arrangement. HHSC purchases and provides prescription medications, as prescribed by the treating physician, through contracted pharmacies for Medicaid clients. The program also collects rebate revenues from drug manufacturers as negotiated by the federal government.

**COST REIMBURSED SERVICES:** Some medical services are not included in the premium arrangement. NHIC still processes and pays the claims submitted. HHSC then reimburses NHIC for the payment of claims on these services. Major program services paid under the Cost Reimbursed Program that do not have specific appropriation strategies are:

**Undocumented Aliens:** Federal law mandates Medicaid coverage for the following individuals:

- Aliens residing illegally in the U.S. who have an emergency condition and meet all other Medicaid eligibility criteria for legal aliens.
- Legalized pregnant women, children under the age of 18, and persons with an emergency condition who meet all Medicaid eligibility requirements, except citizenship.

**FQHCs - Federally Qualified Health Centers:** Medicaid reimbursement is made for services provided by physicians, physician assistants, nurse practitioners, clinical psychologists, clinical social workers, and other Medicaid ambulatory services.

**TB Clinics:** Physician, laboratory, and directly observed therapy services are provided. Public providers certify state match. Private providers receive full payment.

**Substance Abuse Counseling:** Texas Commission on Alcohol and Drug Abuse licensed chemical dependency treatment facilities are eligible to enroll in the Medicaid Program to treat persons under the age of 21 on an outpatient basis.

**School Health and Related Services (SHARS) Administration:** HHSC reimburses administrative services incurred for processing claims by the Medicaid insuring agency; school districts and school cooperatives the federal share of medically

necessary services to Medicaid-eligible children under 21. The school districts certify the state match.

**GME - Graduate Medical Education:** Reimbursements to teaching hospitals to cover part of the physician graduate training.

### **EPSDT COMPREHENSIVE CARE PROGRAM (CCP)**

CCP services include hospital, physician, and other medical services provided to eligible Medicaid children under the age of 21 that are federally allowable but not covered or provided under the State Medicaid Plan. CCP services include freestanding psychiatric hospitals, freestanding inpatient rehabilitation, orthotics/prosthetics, extended hospital stays, private duty nursing, and developmental speech, occupational, and physical therapies. These medical services are outside of the premium arrangement. HHSC reimburses NHIC for the CCP claims paid.

## **Department of Health**

**HEALTH STEPS – MEDICAL (EPSDT):** Federal law mandates the provision of periodic medical screens to Medicaid children under 21 years of age. Case management services are also provided to children over age one with severe or complex health problems. These medical services are outside of the premium arrangement.

**HEALTH STEPS – DENTAL (EPSDT):** Federal law mandates the provision of periodic dental services to Medicaid children under 21 years of age. Both dental and orthodontic services are provided. These medical services are outside of the premium arrangement.

**MEDICAL TRANSPORTATION:** Federal law mandates the provision non-ambulance transportation to eligible Medicaid recipients to and from the nearest appropriate Medicaid allowable service. TDH has medical transportation contracts with local taxi companies, community action agencies, county Commissioners' Courts, Councils of Government, metropolitan transit authorities and regions, public schools, Area Agencies on Aging, private corporations, individual contractors who are volunteers, and other for profit and non-profit service organizations.

**FAMILY PLANNING:** Medicaid Family Planning services provided to eligible, low income clients include: health screening; health education; contraception counseling and provision; treatment of minor genitourinary infections; and other health related counseling and referral. Services are delivered to clients through performance-based contracts by local health departments, medical schools, hospitals, rural health clinics, community health centers, private-nonprofit agencies, regional clinics and by private practitioners enrolled in the Medicaid program. These medical services are outside of the premium arrangement. In addition to Medicaid there are other Family Planning Services provided by TDH.

## **Department of Human Services**

**NURSING FACILITIES:** Medicaid may pay all or part of nursing facility costs for eligible clients. Clients must meet the medical necessity or level of care criteria for either nursing facility or ICF-MR/RC care. Clients must be both resource and income eligible to qualify for coverage. Clients may be required to contribute toward their care, based on income and other considerations.

- Clients of any age may be covered in Title XIX-approved nursing facilities, or Title XIX-approved sections of state schools

and intermediate care facilities for people with mental retardation and related conditions (ICF-MR/RC).

- Clients age 65 and older may be covered in Title XIX-approved sections of state hospitals (institutions for mental disease or IMDs).

**COMMUNITY CARE:** Community Care provides a wide array of purchased services for low-income individuals who are elderly or have disabilities, including attendant care, day health, supported living, emergency response, and many others. These services allow an individual to remain in his own home or other community setting. While not all DHS community care services are financed through Medicaid, increasing use is being made of Section 1915(c) of the Social Security Act (home and community-based services waivers).

**CLASS Waiver: (Community Living Assistance and Support Services):** The CLASS program provides home and community-based services to individuals with developmental disabilities who qualify for ICF-MR care. The disabling condition must have occurred before age 22.

**CBA Waiver: (Community Based Alternatives):** The CBA program provides home and community-based services to adults age 21 and over who qualify for nursing facility care. Services include adaptive aids and medical supplies, adult foster care, Assisted living services, Emergency response services, Minor home modifications, Occupational and physical therapy, personal assistance services, respite care, and case management.

**CWP: Consolidated Waiver Project:** CWP is a pilot project in Bexar County that will provide and home and community based services to adults and children by consolidating the state's eight 1915 Medicaid waivers. The CWP consolidates Community Based Alternatives (CBA), Medically Dependent Children Program (MDCP), Community Living Assistance and Support Services (CLASS), Home and Community-based Services (HCS) and Deaf Blind Multiple Disabilities (DBMD) waivers.

**MDCP Waiver: Medically Dependent Children's Program:** MDCP is an alternative to institutionalization for children under 21 who qualify for nursing facility care.

**DBMH Waiver: Deaf Blind/Multiple Handicapped:** The DBMH program serves adults age 18 and over with multi-sensory disabling conditions incurred before age 22 who qualify for ICF-MR cares. Services provide supported residence either individually, with parents or guardian, or a group home.

**All Other Community Care:** This includes Primary Home Care Services (PHC), Services for the Frail Elderly, and Day Activity and Health XIX. PHC is a Medicaid-reimbursed, non-technical, but medically related personal care service prescribed by a physician as a part of a client's plan of care. The client must be a TANF or SSI Medicaid recipient, or be determined eligible for Medical Assistance Only under 1929(b) provisions of the Social Security Act. Services for the Frail Elderly is a PHC subgroup whose eligible must have financial eligibility determined by the department under certain rules. Day Activity and Health XIX provide daytime services weekdays to Medicaid-eligible clients residing in the community in order to provide an alternative to placement in nursing facilities or other institutions.

**INTEGRATED SERVICES:** Integrated services include primary, acute, and long-term care Medicaid services for SSI/MAO clients. This program integrates this services into one consumer driven managed care system to ensure that clients receive the appropriate level of care in the least restrictive setting consistent with their personal health and safety and to improve access to health care and



improve the quality of that care.

**STAR + PLUS:** STAR+PLUS is a Medicaid pilot project that integrates acute health services with long term care services using a managed care delivery system, serving SSI and SSI-related aged and disabled Medicaid recipients in Harris County. The waiver began in FY1998.

**PACE: Program for All-inclusive Care for the Elderly:** PACE is a Medicaid demonstration waiver for persons age 55 and over, living in El Paso, with chronic medical problems/functional impairments. PACE eligibility is based on the Medicaid nursing facility income and resource requirements and medical necessity requirements. PACE provides community-based services community-based services to frail elderly people who qualify for nursing facility placement. Services are provided at a capitated rate below the cost of comparable nursing facility care.

**All Other Integrated Services:** This includes payments for non-waivered services prior to enrollment in managed care.

**LTC FACILITY REGULATION:** This includes staff who regulate long-term care facilities through inspection and surveys, follow-up visits, complaint investigations, investigations of abuse or neglect, or other contact visits from time to time as they deem appropriate or as required for carrying out the responsibilities of licensing.

**LTC CREDENTIALING:** This includes staff that are responsible for the development and maintenance of the nurse aide registry, certification of nurse aides, and the evaluation and approval of training programs for nurse aides.

**LTC ELIGIBILITY DETERMINATION:** This includes staff who directly support the management of Community Care and Nursing Facility services. Medicaid Eligibility (ME) staff determines financial eligibility for the medical assistance only (MAO) programs for the aged, blind and disabled, for Medicaid acute care programs, and for Medicare cost-sharing programs. LTC case managers develop individualized services plans and authorize community care services for eligible individuals.

**CSS ELIGIBILITY DETERMINATION:** This program encompasses all aspects of program administration including determining initial and continuing eligibility for medial services for children, pregnant women and medically needy individuals, performance monitoring, overpayment recovery, and program integrity.

**LTC QUALITY ASSURANCE:** Staff responsible for the early warning system in long-term care facilities that will identify conditions that pose a threat to patient health and safety and predict with the agency needs to take action.

## **Department of Mental Health and Mental Retardation**

**ICFs-MR CONTRACTED:** These facilities provide residential and habilitative services, skills training and adjunctive therapies with 24-hour supervision and coordination of the individual program plan. These residential environments range from 6 beds to several hundred beds for persons who have mental retardation or a condition related to mental retardation. Services include habilitation, medical, residential, adjunctive therapies, and skills training.

**ICFs-MR STATE OPERATED:** These include small group homes that are owned and operated by the state as community ICFs-MR.

### **HCS WAIVER: HOME AND COMMUNITY-BASED SERVICES**

HCS is an alternative to institutionalization for children and young adults with mental retardation who qualify for care at an intermediate care facility for mental retardation (ICF-MR). Services include adaptive aids, therapies, minor home modifications, nursing, case management, respite, and supported employment.

**HCS-O WAIVER: HOME AND COMMUNITY-BASED SERVICES – OBRA:** HCS-O is a community alternative for a specific group of nursing facility residents who have mental illness, mental retardation, or a related condition. Relocation may be required to access services as services are limited to certain catchment areas. Services include adaptive aids, therapies, minor home modifications, nursing, case management and respite.

**MRLA WAIVER: MENTAL RETARDATION LOCAL AUTHORITY:** People with mental retardation are served in pilot projects in 7 counties in which the local mental retardation authority develops service plans and provides case management. Services include adaptive aids, counseling and therapies, minor home modifications, nursing, residential assistance and respite.

**NORTHSTAR:** NorthSTAR is an integrated Medicaid initiative that provides behavioral healthcare for residents of Collin, Dallas, Ellis, Hunt, Kaufman, Navarro and Rockwall counties.

#### **CERTIFIED STATE MATCH PROGRAMS:**

**State Schools (ICFs-MR):** The State School ICF-MR program is a residential program that serves people with mental retardation and/or a related condition. The primary purpose of the program is to provide habilitation and residential services for those individuals who require the supports of an institutional setting.

**State Hospitals:** This includes two Medicaid programs. The Institutes for Mental Disease (IMD) program serves a Medicaid population that is 65 years and older. The Comprehensive Care Program (CCP) serves a Medicaid population that is 21 years and younger. Both programs provide services through the state hospitals to persons with one or more mental diseases.

**Rehabilitation Services:** Rehabilitative Services are provided to those individuals with mental illness who are not residents of an institution for mental diseases. These services are intended to help ameliorate the effects of the individual's mental illness so the people receiving these services will have an enhanced quality of life.

**Coordination Services:** These are case management type services to assist individuals with mental retardation and/or a related condition in gaining access to medical, social, educational, and other services that will help them achieve a quality of life and community participation acceptable to each individual.

## **Department of Protective and Regulatory Services**

**TARGETED CASE MANAGEMENT:** Through this program, case management services such as client assessment, case planning, service coordination and monitoring, and case plan reassessment, which are provided to PRS Medicaid-eligible clients receiving services from CPS or APS, are claimed for Medicaid reimbursed costs.

## **Council on Early Childhood Intervention**

**TARGETED CASE MANAGEMENT (TCM):** This program provides payment for case management services to ECI Medicaid eligible children and their families under the ECI TCM waiver. Case management services help families gain access to needed medical, educational, social, developmental or other services.

**DEVELOPMENTAL REHABILITATION SERVICES:** This program provides payment for diagnostic, evaluative, and consultative services for the purposes of identifying or determining the nature and extent of, and rehabilitating medical or other health-related conditions of ECI Medicaid eligible children.

## **Commission for the Blind**

**TARGETED CASE MANAGEMENT:** TCB's targeted case management services help the consumer or their family with medical, social, vocational, and other appropriate services. The goal of these services is to assist the child in achieving maximum independence and self-sufficiency.

## **Programs Excluded from the General Appropriations Act**

**DISPROPORTIONATE SHARE HOSPITALS (DSH):** A program which provides additional reimbursement to hospitals that serve a disproportionate share of low-income patients to compensate for revenues lost by serving needy Texans.

**SCHOOL HEALTH AND RELATED SERVICES (SHARS):** Medicaid optional benefit that provides services related to a child's Individual Education Plan (IEP). Services include audiology, medical services, occupational therapy, physical therapy, speech therapy, psychological services, school health services, assessment and counseling.

**UPPER PAYMENT LIMIT (UPL):** Federal regulations allow certain providers to receive additional reimbursements for the difference between what Medicare and Medicaid pays (referred to as the Upper Payment Limit). In FY2002, Texas began reimbursing certain urban and rural hospitals that provided local funds as the certified match for federal Medicaid funds.

**Health and Human Services Enterprise Biennial Medicaid Report, FY 2000**

AGENCY TOTALS Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State*	Other**	Federal	Total	State	Other	Federal	Total
	<b>Health &amp; Human Services Commission</b>	<b>2,190,624,146</b>	<b>-</b>	<b>3,474,384,026</b>	<b>5,665,008,172</b>	<b>2,190,124,146</b>	<b>-</b>	<b>3,656,961,595</b>
<b>Service Related Expenditures</b>	2,121,339,273	-	3,378,957,436	5,500,296,709	2,120,839,273	-	3,549,932,120	5,670,771,393
<b>Admin. Related Expenditures</b>	69,284,873	-	95,426,590	164,711,463	69,284,873	-	107,029,475	176,314,348
<b>Department of Health</b>	<b>104,495,549</b>	<b>16,773</b>	<b>177,728,288</b>	<b>282,240,610</b>	<b>104,495,549</b>	<b>-</b>	<b>176,209,863</b>	<b>280,705,412</b>
<b>Service Related Expenditures</b>	89,944,136	16,773	158,414,388	248,375,297	89,944,136	-	156,895,963	246,840,099
<b>Admin. Related Expenditures</b>	14,551,413	-	19,313,900	33,865,313	14,551,413	-	19,313,900	33,865,313
<b>Department of Human Services</b>	<b>1,159,851,028</b>	<b>1,447,701</b>	<b>1,864,527,652</b>	<b>3,025,826,381</b>	<b>1,134,307,042</b>	<b>1,447,701</b>	<b>1,796,530,238</b>	<b>2,932,284,981</b>
<b>Service Related Expenditures</b>	1,037,972,309	-	1,677,405,988	2,715,378,297	1,012,428,323	-	1,609,408,574	2,621,836,897
<b>Admin. Related Expenditures</b>	121,878,719	1,447,701	187,121,664	310,448,084	121,878,719	1,447,701	187,121,664	310,448,084
<b>Department of MHMR</b>	<b>456,135,419</b>	<b>-</b>	<b>720,323,984</b>	<b>1,176,459,403</b>	<b>469,823,683</b>	<b>-</b>	<b>734,173,298</b>	<b>1,203,996,981</b>
<b>Service Related Expenditures</b>	429,781,203	-	693,969,768	1,123,750,971	448,025,387	-	712,375,002	1,160,400,389
<b>Admin. Related Expenditures</b>	26,354,216	-	26,354,216	52,708,432	21,798,296	-	21,798,296	43,596,592
<b>Protective and Regulatory Services</b>	<b>35,178,700</b>	<b>823,288</b>	<b>57,156,074</b>	<b>93,158,062</b>	<b>34,529,635</b>	<b>815,471</b>	<b>56,275,261</b>	<b>91,620,367</b>
<b>Service Related Expenditures</b>	34,719,242	815,471	56,688,799	92,223,512	34,070,177	807,654	55,807,986	90,685,817
<b>Admin. Related Expenditures</b>	459,458	7,817	467,275	934,550	459,458	7,817	467,275	934,550
<b>Council on Early Childhood Intervention</b>	<b>2,967,023</b>	<b>-</b>	<b>3,769,772</b>	<b>6,736,795</b>	<b>2,967,023</b>	<b>-</b>	<b>3,769,772</b>	<b>6,736,795</b>
<b>Service Related Expenditures</b>	1,357,171	-	2,159,920	3,517,091	1,357,171	-	2,159,920	3,517,091
<b>Admin. Related Expenditures</b>	1,609,852	-	1,609,852	3,219,704	1,609,852	-	1,609,852	3,219,704
<b>Commission for the Blind</b>	<b>94,819</b>	<b>-</b>	<b>409,413</b>	<b>504,232</b>	<b>94,819</b>	<b>-</b>	<b>344,350</b>	<b>439,169</b>
<b>Service Related Expenditures</b>	94,819	-	409,413	504,232	94,819	-	344,350	439,169
<b>TOTAL MEDICAID, State Agencies</b>	<b>3,949,346,684</b>	<b>2,287,762</b>	<b>6,298,299,209</b>	<b>10,249,933,655</b>	<b>3,936,341,897</b>	<b>2,263,172</b>	<b>6,424,264,377</b>	<b>10,362,869,446</b>
<b>Service Related Expenditures</b>	3,715,208,153	832,244	5,968,005,712	9,684,046,109	3,706,759,286	807,654	6,086,923,915	9,794,490,855
<b>Admin. Related Expenditures</b>	234,138,531	1,455,518	330,293,497	565,887,546	229,582,611	1,455,518	337,340,462	568,378,591
<b>DSH, UPL &amp; SHARS <sup>1</sup></b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,378,995,340</b>
<b>TOTAL MEDICAID, incl. DSH, UPL, &amp; SHARS</b>	<b>3,949,346,684</b>	<b>2,287,762</b>	<b>6,298,299,209</b>	<b>10,249,933,655</b>	<b>3,936,341,897</b>	<b>2,263,172</b>	<b>6,424,264,377</b>	<b>11,741,864,786</b>

Health and Human Services Enterprise Biennial Medicaid Report, continued

Health & Human Services Commission Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	2,121,339,273	-	3,378,957,436	5,500,296,709	2,120,839,273	-	3,549,932,120
<b>PREMIUMS</b>	1,383,571,700	-	2,202,008,314	3,585,580,014	1,383,571,700	-	2,229,269,739	3,612,841,439
Aged/Blind and Disabled	488,416,432	-	778,204,228	1,266,620,660	488,416,432	-	775,616,153	1,264,032,585
TANF Children/Adults	201,421,819	-	316,586,615	518,008,434	201,421,819	-	318,040,469	519,462,288
Pregnant Women	176,275,603	-	279,604,373	455,879,976	176,275,603	-	300,247,587	476,523,190
Medically Needy	516,711,124	-	826,528,674	1,343,239,798	516,711,124	-	834,281,106	1,350,992,230
Spillover	746,722	-	1,084,424	1,831,146	746,722	-	1,084,424	1,831,146
<b>VENDOR DRUGS</b>	429,118,370	-	683,455,947	1,112,574,317	429,118,370	-	688,705,827	1,117,824,197
<b>MEDICARE PREMIUM PAYMENTS</b>	166,251,389	-	267,313,459	433,564,848	166,251,389	-	267,978,339	434,229,728
<b>COST REIMBURSED SERVICES</b>	79,042,529	-	124,630,062	203,672,591	79,042,529	-	250,102,391	329,144,920
<b>COMPREHENSIVE CARE PGM</b>	63,355,285	-	101,549,654	164,904,939	62,855,285	-	113,875,824	176,731,109
<b>ADMIN. RELATED EXPENDITURES</b>	69,284,873	-	95,426,590	164,711,463	69,284,873	-	107,029,475	176,314,348
Administration	69,284,873	-	95,426,590	164,711,463	69,284,873	-	107,029,475	176,314,348
<b>TOTAL HHSC</b>	2,190,624,146	-	3,474,384,026	5,665,008,172	2,190,124,146	-	3,656,961,595	5,847,085,741

Department of Health Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	89,944,136	16,773	158,414,388	248,375,297	89,944,136	-	156,895,963
<b>HEALTH STEPS - MEDICAL</b>	20,463,967	2,225	31,965,347	52,431,539	20,463,967	-	29,192,671	49,656,638
<b>HEALTH STEPS - DENTAL</b>	54,964,297	-	87,829,452	142,793,749	54,964,297	-	87,838,151	142,802,448
<b>MEDICAL TRANSPORTATION</b>	11,899,460	14,548	18,005,442	29,919,450	11,899,460	-	17,833,080	29,732,540
<b>FAMILY PLANNING</b>	2,616,412	-	20,614,147	23,230,559	2,616,412	-	22,032,061	24,648,473
<b>ADMIN. RELATED EXPENDITURES</b>	14,551,413	-	19,313,900	33,865,313	14,551,413	-	19,313,900	33,865,313
<b>ADMINISTRATION</b>	14,551,413	-	14,551,413	29,102,826	14,551,413	-	14,551,413	29,102,826
<b>INDIRECT ADMINISTRATION</b>	-	-	4,762,487	4,762,487	-	-	4,762,487	4,762,487
<b>TOTAL TDH</b>	104,495,549	16,773	177,728,288	282,240,610	104,495,549	-	176,209,863	280,705,412

Health and Human Services Enterprise Biennial Medicaid Report, continued

Department of Human Services Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	<b>1,037,972,309</b>	<b>-</b>	<b>1,677,405,988</b>	<b>2,715,378,297</b>	<b>1,012,428,323</b>	<b>-</b>	<b>1,609,408,574</b>
<b>NURSING FACILITIES</b>	<b>633,551,784</b>	<b>-</b>	<b>1,035,274,058</b>	<b>1,668,825,842</b>	<b>601,615,039</b>	<b>-</b>	<b>956,713,634</b>	<b>1,558,328,673</b>
<b>COMMUNITY CARE</b>	<b>323,459,294</b>	<b>-</b>	<b>513,565,989</b>	<b>837,025,283</b>	<b>309,807,885</b>	<b>-</b>	<b>491,737,881</b>	<b>801,545,766</b>
All Other Community Care <sup>4</sup>	185,087,211	-	293,916,957	479,004,168	174,610,549	-	277,307,514	451,918,063
CLASS Waiver	13,981,836	-	22,203,041	36,184,877	12,972,307	-	20,557,163	33,529,470
CBA Waiver	115,681,172	-	183,700,744	299,381,916	116,615,327	-	184,965,043	301,580,370
Consolidated Waiver	-	-	-	-	-	-	-	-
MDCP Waiver	7,075,757	-	11,236,243	18,312,000	4,067,703	-	6,459,479	10,527,182
DBMH Waiver	1,633,318	-	2,509,004	4,142,322	1,541,999	-	2,448,682	3,990,681
<b>INTEGRATED SERVICES</b>	<b>80,961,231</b>	<b>-</b>	<b>128,565,941</b>	<b>209,527,172</b>	<b>101,005,399</b>	<b>-</b>	<b>160,957,059</b>	<b>261,962,458</b>
All Other Integrated Services <sup>5</sup>	29,538	-	47,084	76,622	29,538	-	47,084	76,622
STAR + PLUS	77,574,706	-	123,187,990	200,762,696	97,356,903	-	155,153,854	252,510,757
PACE	3,356,987	-	5,330,867	8,687,854	3,618,958	-	5,756,121	9,375,079
<b>ADMIN. RELATED EXPENDITURES</b>	<b>121,878,719</b>	<b>1,447,701</b>	<b>187,121,664</b>	<b>310,448,084</b>	<b>121,878,719</b>	<b>1,447,701</b>	<b>187,121,664</b>	<b>310,448,084</b>
<b>LTC FACILITY REGULATION<sup>1</sup></b>	<b>5,023,501</b>	<b>-</b>	<b>14,507,039</b>	<b>19,530,540</b>	<b>5,023,501</b>	<b>-</b>	<b>14,507,039</b>	<b>19,530,540</b>
<b>LTC CREDENTIALING<sup>1</sup></b>	<b>154,249</b>	<b>-</b>	<b>210,014</b>	<b>364,263</b>	<b>154,249</b>	<b>-</b>	<b>210,014</b>	<b>364,263</b>
<b>LTC ELIG. DETERMINATION<sup>1,2</sup></b>	<b>40,888,407</b>	<b>72,964</b>	<b>84,626,263</b>	<b>125,587,634</b>	<b>40,888,407</b>	<b>72,964</b>	<b>84,626,263</b>	<b>125,587,634</b>
<b>CSS ELIG. DETERMINATION</b>	<b>37,864,938</b>	<b>1,370,111</b>	<b>40,269,587</b>	<b>79,504,636</b>	<b>37,864,938</b>	<b>1,370,111</b>	<b>40,269,587</b>	<b>79,504,636</b>
<b>LTC QUALITY ASSURANCE</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>ADMINISTRATION<sup>1,3</sup></b>	<b>37,947,624</b>	<b>4,626</b>	<b>47,508,761</b>	<b>85,461,011</b>	<b>37,947,624</b>	<b>4,626</b>	<b>47,508,761</b>	<b>85,461,011</b>
<b>TOTAL DHS</b>	<b>1,159,851,028</b>	<b>1,447,701</b>	<b>1,864,527,652</b>	<b>3,025,826,381</b>	<b>1,134,307,042</b>	<b>1,447,701</b>	<b>1,796,530,238</b>	<b>2,932,284,981</b>

Department of MHMR Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	<b>429,781,203</b>	<b>-</b>	<b>693,969,768</b>	<b>1,123,750,971</b>	<b>448,025,387</b>	<b>-</b>	<b>712,375,002</b>
<b>ICFs-MR (CONTRACTED)</b>	<b>139,353,675</b>	<b>-</b>	<b>222,134,458</b>	<b>361,488,133</b>	<b>137,869,099</b>	<b>-</b>	<b>218,934,987</b>	<b>356,804,086</b>
<b>ICFs-MR (STATE OPERATED)</b>	<b>308,348</b>	<b>-</b>	<b>491,517</b>	<b>799,865</b>	<b>305,063</b>	<b>-</b>	<b>484,438</b>	<b>789,501</b>
<b>HCS WAIVER</b>	<b>81,539,467</b>	<b>-</b>	<b>129,976,659</b>	<b>211,516,126</b>	<b>72,599,110</b>	<b>-</b>	<b>115,286,785</b>	<b>187,885,895</b>
<b>HCS-O WAIVER</b>	<b>2,236,177</b>	<b>-</b>	<b>3,564,541</b>	<b>5,800,718</b>	<b>1,950,329</b>	<b>-</b>	<b>3,097,107</b>	<b>5,047,436</b>
<b>MRLA WAIVER SERVICES</b>	<b>15,015,481</b>	<b>-</b>	<b>23,935,183</b>	<b>38,950,664</b>	<b>13,463,183</b>	<b>-</b>	<b>21,379,422</b>	<b>34,842,605</b>
<b>NORTHSTAR</b>	<b>9,456,532</b>	<b>-</b>	<b>15,993,421</b>	<b>25,449,953</b>	<b>8,854,900</b>	<b>-</b>	<b>14,975,906</b>	<b>23,830,806</b>
<b>CERT. ST. MATCH PGMS:<sup>1</sup></b>	<b>181,871,524</b>	<b>-</b>	<b>297,873,988</b>	<b>479,745,512</b>	<b>212,983,703</b>	<b>-</b>	<b>338,216,357</b>	<b>551,200,060</b>
State Schools (ICFs-MR) <sup>2</sup>	137,556,631	-	225,293,886	362,850,516	154,296,195	-	245,021,079	399,317,274
State Hospitals <sup>2</sup>	6,664,876	-	10,915,911	17,580,787	12,736,640	-	20,225,679	32,962,319
Rehabilitation Services	24,430,592	-	40,013,069	64,443,661	32,724,825	-	51,966,751	84,691,576
Coordination Services	13,219,425	-	21,651,123	34,870,548	13,226,043	-	21,002,847	34,228,891
<b>ADMIN. RELATED EXPENDITURES</b>	<b>26,354,216</b>	<b>-</b>	<b>26,354,216</b>	<b>52,708,432</b>	<b>21,798,296</b>	<b>-</b>	<b>21,798,296</b>	<b>43,596,592</b>
<b>ADMINISTRATION</b>	<b>2,907,002</b>	<b>-</b>	<b>2,907,002</b>	<b>5,814,004</b>	<b>3,073,863</b>	<b>-</b>	<b>3,073,863</b>	<b>6,147,726</b>
<b>MEDICAID ADMIN. CLAIMING (MAC)<sup>1</sup></b>	<b>23,447,214</b>	<b>-</b>	<b>23,447,214</b>	<b>46,894,428</b>	<b>18,724,433</b>	<b>-</b>	<b>18,724,433</b>	<b>37,448,866</b>
<b>TOTAL MHMR</b>	<b>456,135,419</b>	<b>-</b>	<b>720,323,984</b>	<b>1,176,459,403</b>	<b>469,823,683</b>	<b>-</b>	<b>734,173,298</b>	<b>1,203,996,981</b>

Health and Human Services Enterprise Biennial Medicaid Report, continued

Protective & Regulatory Services Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
<b>SERVICE RELATED EXPENDITURES</b>								
TARGETED CASE MGMT	34,719,242	815,471	56,688,799	92,223,512	34,070,177	807,654	55,807,986	90,685,817
<b>ADMIN. RELATED EXPENDITURES</b>								
ADMINISTRATION	459,458	7,817	467,275	934,550	459,458	7,817	467,275	934,550
TOTAL PRS	35,178,700	823,288	57,156,074	93,158,062	34,529,635	815,471	56,275,261	91,620,367

Council on Early Childhood Intervention Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
<b>SERVICE RELATED EXPENDITURES</b>								
TARGETED CASE MANAGEMENT <sup>1</sup> DEVELOPMENTAL REHAB. SVCS. <sup>2</sup>	1,357,171	-	2,159,920	3,517,091	1,357,171	-	2,159,920	3,517,091
ADMIN. RELATED EXPENDITURES	1,609,852	-	1,609,852	3,219,704	1,609,852	-	1,609,852	3,219,704
ADMINISTRATION <sup>3</sup> MEDICAID ADM. CLAIMING (MAC)	-	-	-	-	-	-	-	-
TOTAL ECI	2,967,023	-	3,769,772	6,736,795	2,967,023	-	3,769,772	6,736,795

Commission for the Blind Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
<b>SERVICE RELATED EXPENDITURES</b>								
TARGETED CASE MGMT.	94,819	-	409,413	504,232	94,819	-	344,350	439,169
TOTAL TCB	94,819	-	409,413	504,232	94,819	-	344,350	439,169

Medicaid Programs Excluded from the General Appropriations Act Biennial Medicaid Report	FY 2000 Appropriated				FY 2000 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
Dispro. Share Hospitals (DSH) <sup>1</sup> Upper Payment Limit (UPL) <sup>1</sup> School Hlth & Rel. Svcs. (SHARS) <sup>1</sup>								1,311,925,000
TOTAL DSH, UPL, & SHARS	-	-	-	-	-	-	-	67,070,340
								1,378,995,340

**Health and Human Services Enterprise Biennial Medicaid Report, FY 2001**

AGENCY TOTALS Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>Health &amp; Human Services Commission</b>	<b>2,514,923,408</b>	<b>-</b>	<b>4,037,213,083</b>	<b>6,552,136,491</b>	<b>2,506,834,587</b>	<b>-</b>	<b>4,024,993,541</b>
<b>Service Related Expenditures</b>	2,442,813,657	-	3,930,318,915	6,373,132,572	2,434,724,836	-	3,918,099,373	6,352,824,209
<b>Admin. Related Expenditures</b>	72,109,751	-	106,894,168	179,003,919	72,109,751	-	106,894,168	179,003,919
<b>Department of Health</b>	<b>111,991,746</b>	<b>-</b>	<b>190,060,923</b>	<b>302,052,669</b>	<b>111,991,746</b>	<b>-</b>	<b>190,060,923</b>	<b>302,052,669</b>
<b>Service Related Expenditures</b>	96,646,307	-	169,215,356	265,861,663	96,646,307	-	169,215,356	265,861,663
<b>Admin. Related Expenditures</b>	15,345,439	-	20,845,567	36,191,006	15,345,439	-	20,845,567	36,191,006
<b>Department of Human Services</b>	<b>1,164,485,502</b>	<b>2,881,963</b>	<b>1,842,225,673</b>	<b>3,009,593,138</b>	<b>1,182,418,349</b>	<b>2,881,963</b>	<b>1,828,366,080</b>	<b>3,013,666,392</b>
<b>Service Related Expenditures</b>	1,032,919,529	-	1,643,378,466	2,676,297,995	1,050,852,376	-	1,629,518,873	2,680,371,249
<b>Admin. Related Expenditures</b>	131,565,973	2,881,963	198,847,207	333,295,143	131,565,973	2,881,963	198,847,207	333,295,143
<b>Department of MHMR</b>	<b>456,015,548</b>	<b>-</b>	<b>706,962,417</b>	<b>1,162,977,965</b>	<b>490,855,164</b>	<b>-</b>	<b>741,351,040</b>	<b>1,232,206,204</b>
<b>Service Related Expenditures</b>	431,584,415	-	682,531,284	1,114,115,699	465,635,744	-	716,131,620	1,181,767,364
<b>Admin. Related Expenditures</b>	24,431,133	-	24,431,133	48,862,266	25,219,420	-	25,219,420	50,438,840
<b>Protective and Regulatory Services</b>	<b>35,993,239</b>	<b>941,514</b>	<b>57,396,858</b>	<b>94,331,611</b>	<b>36,282,935</b>	<b>813,670</b>	<b>57,811,142</b>	<b>94,907,747</b>
<b>Service Related Expenditures</b>	35,544,250	934,827	56,941,182	93,420,259	35,745,482	808,788	57,268,807	93,823,077
<b>Admin. Related Expenditures</b>	448,989	6,687	455,676	911,352	537,453	4,882	542,335	1,084,670
<b>Council on Early Childhood Intervention</b>	<b>4,113,764</b>	<b>-</b>	<b>5,173,198</b>	<b>9,286,962</b>	<b>4,777,054</b>	<b>-</b>	<b>6,192,104</b>	<b>10,969,158</b>
<b>Service Related Expenditures</b>	1,974,055	-	3,033,489	5,007,544	2,637,345	-	4,052,395	6,689,740
<b>Admin. Related Expenditures</b>	2,139,709	-	2,139,709	4,279,418	2,139,709	-	2,139,709	4,279,418
<b>Commission for the Blind</b>	<b>95,180</b>	<b>-</b>	<b>153,978</b>	<b>249,158</b>	<b>95,180</b>	<b>-</b>	<b>14,447</b>	<b>109,627</b>
<b>Service Related Expenditures</b>	95,180	-	153,978	249,158	95,180	-	14,447	109,627
<b>TOTAL MEDICAID, State Agencies</b>	<b>4,287,618,387</b>	<b>3,823,477</b>	<b>6,839,186,130</b>	<b>11,130,627,994</b>	<b>4,333,255,015</b>	<b>3,695,633</b>	<b>6,848,789,277</b>	<b>11,185,739,925</b>
<b>Service Related Expenditures</b>	4,041,577,393	934,827	6,485,572,670	10,528,084,890	4,086,337,270	808,788	6,494,300,871	10,581,446,928
<b>Admin. Related Expenditures</b>	246,040,994	2,888,650	353,613,460	602,543,104	246,917,745	2,886,845	354,488,406	604,292,996
<b>DSH, UPL &amp; SHARS <sup>1</sup></b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,442,345,118</b>
<b>TOTAL MEDICAID, incl. DSH, UPL, &amp; SHARS</b>	<b>4,287,618,387</b>	<b>3,823,477</b>	<b>6,839,186,130</b>	<b>11,130,627,994</b>	<b>4,333,255,015</b>	<b>3,695,633</b>	<b>6,848,789,277</b>	<b>12,628,085,043</b>



Health and Human Services Enterprise Biennial Medicaid Report, continued

Health & Human Services Commission Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	2,442,813,657	-	3,930,318,915	6,373,132,572	2,434,724,836	-	3,918,099,373
<b>PREMIUMS</b>	1,582,698,490	-	2,443,216,687	4,025,915,177	1,574,609,669	-	2,430,997,145	4,005,606,814
Aged/Blind and Disabled	564,114,783	-	860,225,234	1,424,340,017	556,025,962	-	848,005,692	1,404,031,654
TANF Children/Adults	218,891,595	-	332,964,916	551,856,511	218,891,595	-	332,964,916	551,856,511
Pregnant Women	207,545,710	-	323,094,116	530,639,826	207,545,710	-	323,094,116	530,639,826
Medically Needy	584,827,744	-	915,753,653	1,500,581,397	584,827,744	-	915,753,653	1,500,581,397
Spillover	7,318,658	-	11,178,768	18,497,426	7,318,658	-	11,178,768	18,497,426
<b>VENDOR DRUGS</b>	516,899,991	-	803,938,245	1,320,838,236	516,899,991	-	803,938,245	1,320,838,236
<b>MEDICARE PREMIUM PAYMENTS</b>	176,225,081	-	276,538,961	452,764,042	176,225,081	-	276,538,961	452,764,042
<b>COST REIMBURSED SERVICES</b>	101,234,121	-	289,850,044	391,084,165	101,234,121	-	289,850,044	391,084,165
<b>COMPREHENSIVE CARE PGM</b>	65,755,974	-	116,774,978	182,530,952	65,755,974	-	116,774,978	182,530,952
<b>ADMIN. RELATED EXPENDITURES</b>	72,109,751	-	106,894,168	179,003,919	72,109,751	-	106,894,168	179,003,919
Administration	72,109,751	-	106,894,168	179,003,919	72,109,751	-	106,894,168	179,003,919
<b>TOTAL HHSC</b>	2,514,923,408	-	4,037,213,083	6,552,136,491	2,506,834,587	-	4,024,993,541	6,531,828,128

Department of Health Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	96,646,307	-	169,215,356	265,861,663	96,646,307	-	169,215,356
<b>HEALTH STEPS - MEDICAL</b>	21,429,285	-	32,337,605	53,766,890	21,429,285	-	32,337,605	53,766,890
<b>HEALTH STEPS - DENTAL</b>	57,687,205	-	89,890,369	147,577,574	57,687,205	-	89,890,369	147,577,574
<b>MEDICAL TRANSPORTATION</b>	14,409,925	-	21,101,299	35,511,224	14,409,925	-	21,101,299	35,511,224
<b>FAMILY PLANNING</b>	3,119,892	-	25,886,083	29,005,975	3,119,892	-	25,886,083	29,005,975
<b>ADMIN. RELATED EXPENDITURES</b>	15,345,439	-	20,845,567	36,191,006	15,345,439	-	20,845,567	36,191,006
<b>ADMINISTRATION</b>	15,345,439	-	15,345,439	30,690,878	15,345,439	-	15,345,439	30,690,878
<b>INDIRECT ADMINISTRATION</b>	-	-	5,500,128	5,500,128	-	-	5,500,128	5,500,128
<b>TOTAL TDH</b>	111,991,746	-	190,060,923	302,052,669	111,991,746	-	190,060,923	302,052,669

Health and Human Services Enterprise Biennial Medicaid Report, continued

Department of Human Services Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	<b>1,032,919,529</b>	<b>-</b>	<b>1,643,378,466</b>	<b>2,676,297,995</b>	<b>1,050,852,376</b>	<b>-</b>	<b>1,629,518,873</b>
<b>NURSING FACILITIES</b>	<b>586,124,616</b>	<b>-</b>	<b>956,634,630</b>	<b>1,542,759,246</b>	<b>607,995,912</b>	<b>-</b>	<b>933,966,837</b>	<b>1,541,962,749</b>
<b>COMMUNITY CARE</b>	<b>353,533,351</b>	<b>-</b>	<b>543,076,717</b>	<b>896,610,068</b>	<b>361,912,240</b>	<b>-</b>	<b>555,947,869</b>	<b>917,860,109</b>
All Other Community Care <sup>4</sup>	195,416,011	-	300,186,350	495,602,361	197,685,882	-	303,673,191	501,359,073
CLASS Waiver	15,029,309	-	23,087,122	38,116,431	15,974,240	-	24,538,670	40,512,910
CBA Waiver	133,896,124	-	205,683,190	339,579,314	140,071,423	-	215,169,314	355,240,737
Consolidated Waiver	-	-	-	-	-	-	-	-
MDCP Waiver	7,336,346	-	11,269,654	18,606,000	6,538,859	-	10,044,604	16,583,463
DBMH Waiver	1,855,561	-	2,850,401	4,705,962	1,641,836	-	2,522,090	4,163,926
<b>INTEGRATED SERVICES</b>	<b>93,261,562</b>	<b>-</b>	<b>143,667,119</b>	<b>236,928,681</b>	<b>80,944,224</b>	<b>-</b>	<b>139,604,167</b>	<b>220,548,391</b>
All Other Integrated Services <sup>5</sup>	26,954	-	41,405	68,359	26,954	-	41,405	68,359
STAR + PLUS	89,637,926	-	138,100,706	227,738,632	75,635,725	-	131,449,570	207,085,295
PACE	3,596,682	-	5,525,008	9,121,690	5,281,545	-	8,113,192	13,394,737
<b>ADMIN. RELATED EXPENDITURES</b>	<b>131,565,973</b>	<b>2,881,963</b>	<b>198,847,207</b>	<b>333,295,143</b>	<b>131,565,973</b>	<b>2,881,963</b>	<b>198,847,207</b>	<b>333,295,143</b>
LTC FACILITY REGULATION <sup>1</sup>	6,992,103	-	18,371,107	25,363,210	6,992,103	-	18,371,107	25,363,210
LTC CREDENTIALING <sup>1</sup>	148,150	-	207,137	355,287	148,150	-	207,137	355,287
LTC ELIG. DETERMINATION <sup>1,2</sup>	45,822,250	170,818	89,672,359	135,665,427	45,822,250	170,818	89,672,359	135,665,427
CSS ELIG. DETERMINATION	39,574,176	2,017,759	41,588,658	83,180,593	39,574,176	2,017,759	41,588,658	83,180,593
LTC QUALITY ASSURANCE	-	-	-	-	-	-	-	-
ADMINISTRATION <sup>1,3</sup>	39,029,294	693,386	49,007,946	88,730,626	39,029,294	693,386	49,007,946	88,730,626
<b>TOTAL DHS</b>	<b>1,164,485,502</b>	<b>2,881,963</b>	<b>1,842,225,673</b>	<b>3,009,593,138</b>	<b>1,182,418,349</b>	<b>2,881,963</b>	<b>1,828,366,080</b>	<b>3,013,666,392</b>

Department of MHMR Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	<b>431,584,415</b>	<b>-</b>	<b>682,531,284</b>	<b>1,114,115,699</b>	<b>465,635,744</b>	<b>-</b>	<b>716,131,620</b>
<b>ICFs-MR (CONTRACTED)</b>	<b>140,977,902</b>	<b>-</b>	<b>217,197,661</b>	<b>358,175,563</b>	<b>137,177,287</b>	<b>-</b>	<b>210,723,517</b>	<b>347,900,805</b>
<b>ICFs-MR (STATE OPERATED)</b>	<b>324,150</b>	<b>-</b>	<b>499,401</b>	<b>823,551</b>	<b>315,411</b>	<b>-</b>	<b>484,515</b>	<b>799,926</b>
<b>HCS WAIVER</b>	<b>69,152,806</b>	<b>-</b>	<b>106,540,298</b>	<b>175,693,104</b>	<b>63,516,083</b>	<b>-</b>	<b>98,132,119</b>	<b>161,648,202</b>
<b>HCS-O WAIVER</b>	<b>1,793,819</b>	<b>-</b>	<b>2,763,647</b>	<b>4,557,466</b>	<b>1,638,720</b>	<b>-</b>	<b>2,531,817</b>	<b>4,170,537</b>
<b>MRLA WAIVER SERVICES</b>	<b>26,932,116</b>	<b>-</b>	<b>41,492,975</b>	<b>68,425,091</b>	<b>24,392,755</b>	<b>-</b>	<b>37,686,719</b>	<b>62,079,474</b>
<b>NORTHSTAR</b>	<b>10,684,185</b>	<b>-</b>	<b>16,412,402</b>	<b>27,096,587</b>	<b>11,926,903</b>	<b>-</b>	<b>18,378,254</b>	<b>30,305,157</b>
<b>CERT. ST. MATCH PGMS:<sup>1</sup></b>	<b>181,719,438</b>	<b>-</b>	<b>297,624,899</b>	<b>479,344,337</b>	<b>226,668,584</b>	<b>-</b>	<b>348,194,678</b>	<b>574,863,263</b>
State Schools (ICFs-MR) <sup>2</sup>	139,451,757	-	228,397,773	367,849,530	160,758,833	-	246,948,072	407,706,905
State Hospitals <sup>2</sup>	6,655,115	-	10,899,923	17,555,038	13,530,476	-	20,784,706	34,315,182
Rehabilitation Services	24,376,073	-	39,923,776	64,299,849	37,824,490	-	58,103,712	95,928,202
Coordination Services	11,236,494	-	18,403,427	29,639,921	14,554,785	-	22,358,188	36,912,973
<b>ADMIN. RELATED EXPENDITURES</b>	<b>24,431,133</b>	<b>-</b>	<b>24,431,133</b>	<b>48,862,266</b>	<b>25,219,420</b>	<b>-</b>	<b>25,219,420</b>	<b>50,438,840</b>
<b>ADMINISTRATION</b>	<b>2,907,002</b>	<b>-</b>	<b>2,907,002</b>	<b>5,814,004</b>	<b>3,333,078</b>	<b>-</b>	<b>3,333,078</b>	<b>6,666,156</b>
<b>MEDICAID ADMIN. CLAIMING (MAC)<sup>1</sup></b>	<b>21,524,131</b>	<b>-</b>	<b>21,524,131</b>	<b>43,048,262</b>	<b>21,886,342</b>	<b>-</b>	<b>21,886,342</b>	<b>43,772,684</b>
<b>TOTAL MHMR</b>	<b>456,015,548</b>	<b>-</b>	<b>706,962,417</b>	<b>1,162,977,965</b>	<b>490,855,164</b>	<b>-</b>	<b>741,351,040</b>	<b>1,232,206,204</b>

Health and Human Services Enterprise Biennial Medicaid Report, continued

Protective & Regulatory Services Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
<b>SERVICE RELATED EXPENDITURES</b>								
TARGETED CASE MGMT	35,544,250	934,827	56,941,182	93,420,259	35,745,482	808,788	57,268,807	93,823,077
<b>ADMIN. RELATED EXPENDITURES</b>								
ADMINISTRATION	448,989	6,687	455,676	911,352	537,453	4,882	542,335	1,084,670
<b>TOTAL PRS</b>	<b>35,993,239</b>	<b>941,514</b>	<b>57,396,858</b>	<b>94,331,611</b>	<b>36,282,935</b>	<b>813,670</b>	<b>57,811,142</b>	<b>94,907,747</b>

Council on Early Childhood Intervention Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
<b>SERVICE RELATED EXPENDITURES</b>								
TARGETED CASE MANAGEMENT <sup>1</sup> DEVELOPMENTAL REHAB. SVCS. <sup>2</sup>	1,974,055	-	3,033,489	5,007,544	1,974,055	-	3,033,489	5,007,544
	-	-	-	-	663,290	-	1,018,906	1,682,196
<b>ADMIN. RELATED EXPENDITURES</b>								
ADMINISTRATION <sup>3</sup> MEDICAID ADM. CLAIMING (MAC)	2,139,709	-	2,139,709	4,279,418	2,139,709	-	2,139,709	4,279,418
	-	-	-	-	-	-	-	-
<b>TOTAL ECI</b>	<b>4,113,764</b>	<b>-</b>	<b>5,173,198</b>	<b>9,286,962</b>	<b>4,777,054</b>	<b>-</b>	<b>6,192,104</b>	<b>10,969,158</b>

Commission for the Blind Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
<b>SERVICE RELATED EXPENDITURES</b>								
TARGETED CASE MGMT.	95,180	-	153,978	249,158	95,180	-	14,447	109,627
<b>TOTAL TCB</b>	<b>95,180</b>	<b>-</b>	<b>153,978</b>	<b>249,158</b>	<b>95,180</b>	<b>-</b>	<b>14,447</b>	<b>109,627</b>

Medicaid Programs Excluded from the General Appropriations Act Biennial Medicaid Report	FY 2001 Appropriated				FY 2001 Expended			
	State	Other	Federal	Total	State	Other	Federal	Total
Dispro. Share Hospitals (DSH) <sup>1</sup> Upper Payment Limit (UPL) <sup>1</sup> School Hlth & Rel. Svcs. (SHARS) <sup>1</sup>								1,377,266,000
								65,079,118
<b>TOTAL DSH, UPL, &amp; SHARS</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,442,345,118</b>

**Health and Human Services Enterprise Biennial Medicaid Report, FY 2002**

<b>AGENCY TOTALS</b>								
<b>Biennial Medicaid Report</b>								
	<b>FY 2002 Appropriated</b>				<b>FY 2002 Expended and Encumbrances</b>			
	<b>State</b>	<b>Other</b>	<b>Federal</b>	<b>Total</b>	<b>State</b>	<b>Other</b>	<b>Federal</b>	<b>Total</b>
<b>Health &amp; Human Services Commission</b>	<b>3,028,521,287</b>	<b>-</b>	<b>4,620,517,170</b>	<b>7,649,038,457</b>	<b>3,049,750,695</b>	<b>-</b>	<b>4,613,722,767</b>	<b>7,663,473,462</b>
<b>Service Related Expenditures</b>	2,956,818,407	-	4,519,185,429	7,476,003,836	2,982,633,911	-	4,518,887,435	7,501,521,346
<b>Admin. Related Expenditures</b>	71,702,880	-	101,331,741	173,034,621	67,116,784	-	94,835,332	161,952,116
<b>Department of Health</b>	<b>148,212,754</b>	<b>-</b>	<b>243,837,477</b>	<b>392,050,231</b>	<b>144,299,333</b>	<b>-</b>	<b>222,618,897</b>	<b>366,918,230</b>
<b>Service Related Expenditures</b>	129,913,937	-	219,460,026	349,373,963	128,822,693	-	199,189,426	328,012,119
<b>Admin. Related Expenditures</b>	18,298,817	-	24,377,451	42,676,268	15,476,640	-	23,429,471	38,906,111
<b>Department of Human Services</b>	<b>1,523,398,890</b>	<b>6,878,784</b>	<b>2,268,895,615</b>	<b>3,799,173,289</b>	<b>1,453,783,201</b>	<b>3,922,344</b>	<b>2,197,608,131</b>	<b>3,655,313,676</b>
<b>Service Related Expenditures</b>	1,372,261,366	-	2,040,727,163	3,412,988,529	1,316,287,798	-	1,988,665,886	3,304,953,684
<b>Admin. Related Expenditures</b>	151,137,524	6,878,784	228,168,452	386,184,760	137,495,403	3,922,344	208,942,245	350,359,992
<b>Department of MHMR</b>	<b>541,915,573</b>	<b>-</b>	<b>819,901,396</b>	<b>1,361,816,969</b>	<b>529,832,528</b>	<b>-</b>	<b>787,828,560</b>	<b>1,317,661,088</b>
<b>Service Related Expenditures</b>	517,643,600	-	796,388,965	1,314,032,565	504,235,932	-	761,734,271	1,265,970,203
<b>Admin. Related Expenditures</b>	24,271,973	-	23,512,431	47,784,404	25,596,596	-	26,094,289	51,690,885
<b>Protective and Regulatory Services</b>	<b>42,349,324</b>	<b>610,474</b>	<b>65,981,348</b>	<b>108,941,146</b>	<b>42,356,980</b>	<b>561,418</b>	<b>65,993,065</b>	<b>108,911,463</b>
<b>Service Related Expenditures</b>	41,826,153	603,758	65,451,461	107,881,372	41,831,520	554,846	65,461,033	107,847,399
<b>Admin. Related Expenditures</b>	523,171	6,716	529,887	1,059,774	525,460	6,572	532,032	1,064,064
<b>Council on Early Childhood Intervention</b>	<b>6,580,604</b>	<b>-</b>	<b>8,777,797</b>	<b>15,358,401</b>	<b>6,580,604</b>	<b>-</b>	<b>8,777,797</b>	<b>15,358,401</b>
<b>Service Related Expenditures</b>	4,265,851	-	6,463,044	10,728,895	4,265,851	-	6,463,044	10,728,895
<b>Admin. Related Expenditures</b>	2,314,753	-	2,314,753	4,629,506	2,314,753	-	2,314,753	4,629,506
<b>Commission for the Blind</b>	<b>95,180</b>	<b>-</b>	<b>355,712</b>	<b>450,892</b>	<b>95,180</b>	<b>-</b>	<b>275,077</b>	<b>370,257</b>
<b>Service Related Expenditures</b>	95,180	-	355,712	450,892	95,180	-	275,077	370,257
<b>TOTAL MEDICAID, State Agencies</b>	<b>5,291,073,612</b>	<b>7,489,258</b>	<b>8,028,266,515</b>	<b>13,326,829,385</b>	<b>5,226,698,521</b>	<b>4,483,762</b>	<b>7,896,824,294</b>	<b>13,128,006,577</b>
<b>Service Related Expenditures</b>	5,022,824,494	603,758	7,648,031,800	12,671,460,052	4,978,172,885	554,846	7,540,676,172	12,519,403,903
<b>Admin. Related Expenditures</b>	268,249,118	6,885,500	380,234,715	655,369,333	248,525,636	3,928,916	356,148,122	608,602,674
<b>DSH, UPL &amp; SHARS <sup>1</sup></b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,612,362,972</b>
<b>TOTAL MEDICAID, incl. DSH, UPL, &amp; SHARS</b>	<b>5,291,073,612</b>	<b>7,489,258</b>	<b>8,028,266,515</b>	<b>13,326,829,385</b>	<b>5,226,698,521</b>	<b>4,483,762</b>	<b>7,896,824,294</b>	<b>14,740,369,549</b>

Health and Human Services Enterprise Biennial Medicaid Report, continued

Health & Human Services Commission Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	2,956,818,407	-	4,519,185,429	7,476,003,836	2,982,633,911	-	4,518,887,435
<b>PREMIUMS</b>	1,922,467,569	-	2,969,230,859	4,891,698,428	1,934,616,381	-	2,916,418,755	4,851,035,136
Aged/Blind and Disabled	612,475,863	-	935,257,436	1,547,733,299	646,612,454	-	972,421,413	1,619,033,867
TANF Children/Adults	281,250,655	-	428,100,563	709,351,218	276,553,736	-	415,456,641	692,010,377
Pregnant Women	247,161,521	-	372,597,041	619,758,562	238,160,541	-	360,417,915	598,578,456
Medically Needy	761,239,593	-	1,202,832,528	1,964,072,121	743,202,722	-	1,123,217,786	1,866,420,508
Spillover	20,339,937	-	30,443,291	50,783,228	30,086,928	-	44,905,000	74,991,928
<b>VENDOR DRUGS</b>	618,722,779	-	913,077,159	1,531,799,938	618,731,456	-	934,287,707	1,553,019,163
<b>MEDICARE PREMIUM PAYMENTS</b>	199,085,960	-	304,350,108	503,436,068	201,225,645	-	309,941,244	511,166,889
<b>COST REIMBURSED SERVICES</b>	133,365,107	-	205,831,705	339,196,812	144,990,753	-	232,478,151	377,468,904
<b>COMPREHENSIVE CARE PGM</b>	83,176,992	-	126,695,598	209,872,590	83,069,676	-	125,761,578	208,831,254
<b>ADMIN. RELATED EXPENDITURES</b>	71,702,880	-	101,331,741	173,034,621	67,116,784	-	94,835,332	161,952,116
Administration	71,702,880	-	101,331,741	173,034,621	67,116,784	-	94,835,332	161,952,116
<b>TOTAL HHSC</b>	3,028,521,287	-	4,620,517,170	7,649,038,457	3,049,750,695	-	4,613,722,767	7,663,473,462

Department of Health Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	129,913,937	-	219,460,026	349,373,963	128,822,693	-	199,189,426
<b>HEALTH STEPS - MEDICAL</b>	29,969,171	-	45,485,301	75,454,472	33,168,588	-	38,975,043	72,143,631
<b>HEALTH STEPS - DENTAL</b>	79,294,442	-	121,704,525	200,998,967	74,678,877	-	108,707,693	183,386,570
<b>MEDICAL TRANSPORTATION</b>	18,374,366	-	28,302,856	46,677,222	18,440,076	-	27,163,964	45,604,040
<b>FAMILY PLANNING</b>	2,275,958	-	23,967,344	26,243,302	2,535,152	-	24,342,726	26,877,878
<b>ADMIN. RELATED EXPENDITURES</b>	18,298,817	-	24,377,451	42,676,268	15,476,640	-	23,429,471	38,906,111
<b>ADMINISTRATION</b>	18,298,817	-	18,298,816	36,597,633	15,476,640	-	17,563,478	33,040,118
<b>INDIRECT ADMINISTRATION</b>	-	-	6,078,635	6,078,635	-	-	5,865,993	5,865,993
<b>TOTAL TDH</b>	148,212,754	-	243,837,477	392,050,231	144,299,333	-	222,618,897	366,918,230

Health and Human Services Enterprise Biennial Medicaid Report, continued

Department of Human Services Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	<b>1,372,261,366</b>	<b>-</b>	<b>2,040,727,163</b>	<b>3,412,988,529</b>	<b>1,316,287,798</b>	<b>-</b>	<b>1,988,665,886</b>
<b>NURSING FACILITIES</b>	<b>829,836,028</b>	<b>-</b>	<b>1,257,690,186</b>	<b>2,087,526,214</b>	<b>799,846,861</b>	<b>-</b>	<b>1,208,304,937</b>	<b>2,008,151,798</b>
<b>COMMUNITY CARE</b>	<b>445,154,797</b>	<b>-</b>	<b>636,544,874</b>	<b>1,081,699,671</b>	<b>419,986,773</b>	<b>-</b>	<b>634,461,563</b>	<b>1,054,448,336</b>
All Other Community Care <sup>4</sup>	251,978,946	-	344,719,846	596,698,792	235,275,313	-	355,423,438	590,698,751
CLASS Waiver	20,022,572	-	30,247,505	50,270,077	18,210,863	-	27,510,611	45,721,474
CBA Waiver	162,132,385	-	244,928,587	407,060,972	158,031,151	-	238,732,973	396,764,124
Consolidated Waiver	1,531,182	-	2,313,110	3,844,292	398,326	-	601,739	1,000,065
MDCP Waiver	7,132,184	-	10,774,379	17,906,563	6,162,596	-	9,309,651	15,472,247
DBMH Waiver	2,357,528	-	3,561,447	5,918,975	1,908,524	-	2,883,151	4,791,675
<b>INTEGRATED SERVICES</b>	<b>97,270,541</b>	<b>-</b>	<b>146,492,103</b>	<b>243,762,644</b>	<b>96,454,164</b>	<b>-</b>	<b>145,899,386</b>	<b>242,353,550</b>
All Other Integrated Services <sup>5</sup>	23,898	-	36,102	60,000	23,898	-	36,102	60,000
STAR + PLUS	90,721,035	-	136,192,228	226,913,263	89,847,057	-	135,918,225	225,765,282
PACE	6,525,608	-	10,263,773	16,789,381	6,583,209	-	9,945,059	16,528,268
<b>ADMIN. RELATED EXPENDITURES</b>	<b>151,137,524</b>	<b>6,878,784</b>	<b>228,168,452</b>	<b>386,184,760</b>	<b>137,495,403</b>	<b>3,922,344</b>	<b>208,942,245</b>	<b>350,359,992</b>
<b>LTC FACILITY REGULATION<sup>1</sup></b>	<b>3,600,415</b>	<b>-</b>	<b>16,327,752</b>	<b>19,928,167</b>	<b>5,558,187</b>	<b>-</b>	<b>15,312,132</b>	<b>20,870,319</b>
<b>LTC CREDENTIALING<sup>1</sup></b>	<b>100,101</b>	<b>-</b>	<b>186,641</b>	<b>286,742</b>	<b>146,331</b>	<b>-</b>	<b>186,641</b>	<b>332,972</b>
<b>LTC ELIG. DETERMINATION<sup>1,2</sup></b>	<b>46,940,043</b>	<b>114,499</b>	<b>94,304,779</b>	<b>141,359,321</b>	<b>43,580,810</b>	<b>114,499</b>	<b>92,244,978</b>	<b>135,940,287</b>
<b>CSS ELIG. DETERMINATION</b>	<b>63,110,824</b>	<b>5,664,285</b>	<b>68,838,320</b>	<b>137,613,429</b>	<b>51,444,517</b>	<b>2,815,097</b>	<b>54,527,317</b>	<b>108,786,931</b>
<b>LTC QUALITY ASSURANCE</b>	<b>874,149</b>	<b>826,620</b>	<b>2,783,376</b>	<b>4,484,145</b>	<b>-</b>	<b>709,960</b>	<b>1,495,751</b>	<b>2,205,711</b>
<b>ADMINISTRATION<sup>1,3</sup></b>	<b>36,511,992</b>	<b>273,380</b>	<b>45,727,584</b>	<b>82,512,956</b>	<b>36,765,558</b>	<b>282,788</b>	<b>45,175,426</b>	<b>82,223,772</b>
<b>TOTAL DHS</b>	<b>1,523,398,890</b>	<b>6,878,784</b>	<b>2,268,895,615</b>	<b>3,799,173,289</b>	<b>1,453,783,201</b>	<b>3,922,344</b>	<b>2,197,608,131</b>	<b>3,655,313,676</b>

Department of MHMR Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>	<b>517,643,600</b>	<b>-</b>	<b>796,388,965</b>	<b>1,314,032,565</b>	<b>504,235,932</b>	<b>-</b>	<b>761,734,271</b>
<b>ICFs-MR (CONTRACTED)</b>	<b>161,307,328</b>	<b>-</b>	<b>242,106,102</b>	<b>403,413,430</b>	<b>153,358,289</b>	<b>-</b>	<b>231,673,820</b>	<b>385,032,109</b>
<b>ICFs-MR (STATE OPERATED)</b>	<b>316,377</b>	<b>-</b>	<b>477,941</b>	<b>794,318</b>	<b>316,377</b>	<b>-</b>	<b>477,941</b>	<b>794,318</b>
<b>HCS WAIVER</b>	<b>73,179,816</b>	<b>-</b>	<b>108,708,603</b>	<b>181,888,419</b>	<b>65,999,420</b>	<b>-</b>	<b>99,703,367</b>	<b>165,702,787</b>
<b>HCS-O WAIVER</b>	<b>1,493,204</b>	<b>-</b>	<b>2,218,155</b>	<b>3,711,359</b>	<b>1,381,178</b>	<b>-</b>	<b>2,086,505</b>	<b>3,467,683</b>
<b>MRLA WAIVER SERVICES</b>	<b>44,623,858</b>	<b>-</b>	<b>66,315,590</b>	<b>110,939,448</b>	<b>40,466,436</b>	<b>-</b>	<b>61,131,445</b>	<b>101,597,881</b>
<b>NORTHSTAR</b>	<b>12,413,163</b>	<b>-</b>	<b>18,724,979</b>	<b>31,138,142</b>	<b>13,434,747</b>	<b>-</b>	<b>20,295,474</b>	<b>33,730,221</b>
<b>CERT. ST. MATCH PGMS:<sup>1</sup></b>	<b>224,309,854</b>	<b>-</b>	<b>357,837,595</b>	<b>582,147,449</b>	<b>229,279,485</b>	<b>-</b>	<b>346,365,719</b>	<b>575,645,204</b>
State Schools (ICFs-MR) <sup>2</sup>	171,086,733	-	276,758,641	447,845,374	175,136,549	-	264,573,592	439,710,141
State Hospitals <sup>2</sup>	15,550,482	-	24,168,015	39,718,497	16,087,343	-	24,302,672	40,390,015
Rehabilitation Services	22,688,011	-	34,274,105	56,962,116	22,688,011	-	34,274,105	56,962,116
Coordination Services	14,984,628	-	22,636,834	37,621,462	15,367,582	-	23,215,350	38,582,932
<b>ADMIN. RELATED EXPENDITURES</b>	<b>24,271,973</b>	<b>-</b>	<b>23,512,431</b>	<b>47,784,404</b>	<b>25,596,596</b>	<b>-</b>	<b>26,094,289</b>	<b>51,690,885</b>
<b>ADMINISTRATION</b>	<b>3,694,269</b>	<b>-</b>	<b>2,934,727</b>	<b>6,628,996</b>	<b>3,935,855</b>	<b>-</b>	<b>4,433,548</b>	<b>8,369,403</b>
<b>MEDICAID ADMIN. CLAIMING (MAC)<sup>1</sup></b>	<b>20,577,704</b>	<b>-</b>	<b>20,577,704</b>	<b>41,155,408</b>	<b>21,660,741</b>	<b>-</b>	<b>21,660,741</b>	<b>43,321,482</b>
<b>TOTAL MHMR</b>	<b>541,915,573</b>	<b>-</b>	<b>819,901,396</b>	<b>1,361,816,969</b>	<b>529,832,528</b>	<b>-</b>	<b>787,828,560</b>	<b>1,317,661,088</b>

Health and Human Services Enterprise Biennial Medicaid Report, continued

Protective & Regulatory Services Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	GR	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>							
TARGETED CASE MGMT	41,826,153	603,758	65,451,461	107,881,372	41,831,520	554,846	65,461,033	107,847,399
<b>ADMIN. RELATED EXPENDITURES</b>								
ADMINISTRATION	523,171	6,716	529,887	1,059,774	525,460	6,572	532,032	1,064,064
TOTAL PRS	42,349,324	610,474	65,981,348	108,941,146	42,356,980	561,418	65,993,065	108,911,463

Council on Early Childhood Intervention Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>							
TARGETED CASE MANAGEMENT <sup>1</sup>	2,116,499	-	3,212,616	5,329,115	2,116,499	-	3,212,616	5,329,115
DEVELOPMENTAL REHAB. SVCS. <sup>2</sup>	2,149,352	-	3,250,428	5,399,780	2,149,352	-	3,250,428	5,399,780
<b>ADMIN. RELATED EXPENDITURES</b>								
ADMINISTRATION <sup>3</sup>	115,738	-	115,738	231,476	115,738	-	115,738	231,476
MEDICAID ADM. CLAIMING (MAC)	2,199,015	-	2,199,015	4,398,030	2,199,015	-	2,199,015	4,398,030
TOTAL ECI	6,580,604	-	8,777,797	15,358,401	6,580,604	-	8,777,797	15,358,401

Commission for the Blind Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>							
TARGETED CASE MGMT.	95,180	-	355,712	450,892	95,180	-	275,077	370,257
TOTAL TCB	95,180	-	355,712	450,892	95,180	-	275,077	370,257

Medicaid Programs Excluded from the General Appropriations Act Biennial Medicaid Report	FY 2002 Appropriated				FY 2002 Expended and Encumbrances			
	State	Other	Federal	Total	State	Other	Federal	Total
	<b>SERVICE RELATED EXPENDITURES</b>							
Dispro. Share Hospitals (DSH) <sup>1</sup>								1,422,468,772
Upper Payment Limit (UPL) <sup>1</sup>								115,856,456
School Hlth & Rel. Svcs. (SHARS) <sup>1</sup>								74,037,744
TOTAL DSH, UPL, & SHARS	-	-	-	-	-	-	-	1,612,362,972

**HEALTH AND HUMAN SERVICES ENTERPRISE BIENNIAL MEDICAID REPORT**

**Program Operation Expenditures\*  
Biennial Medicaid Report**

PROGRAM OPERATIONS TOTAL	FY 2000 Expended				FY 2001 Expended		
	State	Other	Federal	Total	State	Other	Federal
	Claims Processing	6,917,434	-	17,890,636	24,808,070	6,549,383	-
Eligibility Determination	68,315,401	1,429,354	71,267,318	141,012,073	67,379,052	1,553,221	70,430,652
Case Management	48,748,210	807,654	79,315,103	128,870,968	52,369,502	808,788	82,674,931
<b>TOTAL</b>	<b>123,981,045</b>	<b>2,237,008</b>	<b>168,473,057</b>	<b>294,691,111</b>	<b>126,297,937</b>	<b>2,362,009</b>	<b>169,781,468</b>

Claims Processing	FY 2000 Expended				FY 2001 Expended		
	State	Other	Federal	Total	State	Other	Federal
	Health & Human Services Commission	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
Department of Health	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
Department of Human Services <sup>2</sup>	6,540,773	-	17,513,976	24,054,749	6,105,712	-	16,232,214
Dept. of Mental Health & Mental Retardation	376,661	-	376,660	753,321	443,671	-	443,671
Protective and Regulatory Services	-	-	-	-	-	-	-
Council on Early Childhood Intervention	-	-	-	-	-	-	-
Commission for the Blind	-	-	-	-	-	-	-
<b>TOTAL</b>	<b>6,917,434</b>	<b>-</b>	<b>17,890,636</b>	<b>24,808,070</b>	<b>6,549,383</b>	<b>-</b>	<b>16,675,885</b>

Eligibility Determination	FY 2000 Expended				FY 2001 Expended		
	State	Other	Federal	Total	State	Other	Federal
	Department of Human Services <sup>1</sup>	68,315,401	1,429,354	71,267,318	141,012,073	67,379,052	1,553,221
<b>TOTAL</b>	<b>68,315,401</b>	<b>1,429,354</b>	<b>71,267,318</b>	<b>141,012,073</b>	<b>67,379,052</b>	<b>1,553,221</b>	<b>70,430,652</b>

Case Management/Service Coordination	FY 2000 Expended				FY 2001 Expended		
	State	Other	Federal	Total	State	Other	Federal
	Health & Human Services Commission	-	-	-	-	-	-
Department of Health	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
Department of Human Services	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
Dept. of Mental Health & Mental Retardation	13,226,043	-	21,002,847	34,228,891	14,554,785	-	22,358,188
Protective and Regulatory Services	34,070,177	807,654	55,807,986	90,685,817	35,745,482	808,788	57,268,807
Council on Early Childhood Intervention <sup>3</sup>	1,357,171	-	2,159,920	3,517,091	1,974,055	-	3,033,489
Commission for the Blind	94,819	-	344,350	439,169	95,180	-	14,447
<b>TOTAL</b>	<b>48,748,210</b>	<b>807,654</b>	<b>79,315,103</b>	<b>128,870,968</b>	<b>52,369,502</b>	<b>808,788</b>	<b>82,674,931</b>



**Program Operation Expenditures\***  
**Biennial Medicaid Report**

PROGRAM OPERATIONS TOTAL	FY 2002			
	Expended and Encumbrances			
	State	Other	Federal	Total
Claims Processing	40,365,530	-	80,013,223	120,378,753
Eligibility Determination	65,440,869	2,929,596	69,527,361	137,897,826
Case Management	63,947,401	554,846	98,608,160	163,110,407
<b>TOTAL</b>	<b>169,753,800</b>	<b>3,484,442</b>	<b>248,148,744</b>	<b>421,386,986</b>

Claims Processing	FY 2002			
	Expended and Encumbrances			
	State	Other	Federal	Total
Health & Human Services Commission	34,930,142	-	67,615,273	102,545,415
Department of Health	1,001,868	-	1,963,527	2,965,395
Department of Human Services <sup>2</sup>	4,046,310	-	10,047,214	14,093,524
Dept. of Mental Health & Mental Retardation	387,210	-	387,209	774,419
Protective and Regulatory Services	-	-	-	-
Council on Early Childhood Intervention	-	-	-	-
Commission for the Blind	-	-	-	-
<b>TOTAL</b>	<b>40,365,530</b>	<b>-</b>	<b>80,013,223</b>	<b>120,378,753</b>

Eligibility Determination	FY 2002			
	Expended and Encumbrances			
	State	Other	Federal	Total
Department of Human Services <sup>1</sup>	65,440,869	2,929,596	69,527,361	137,897,826
<b>TOTAL</b>	<b>65,440,869</b>	<b>2,929,596</b>	<b>69,527,361</b>	<b>137,897,826</b>

Case Management/Service Coordination	FY 2002			
	Expended and Encumbrances			
	State	Other	Federal	Total
Health & Human Services Commission	-	-	-	-
Department of Health	3,826,920	-	5,734,384	9,561,304
Department of Human Services	709,700	-	709,700	1,419,400
Dept. of Mental Health & Mental Retardation	15,367,582	-	23,215,350	38,582,932
Protective and Regulatory Services	41,831,520	554,846	65,461,033	107,847,399
Council on Early Childhood Intervention <sup>3</sup>	2,116,499	-	3,212,616	5,329,115
Commission for the Blind	95,180	-	275,077	370,257
<b>TOTAL</b>	<b>63,947,401</b>	<b>554,846</b>	<b>98,608,160</b>	<b>163,110,407</b>

**HEALTH AND HUMAN SERVICES ENTERPRISE BIENNIAL MEDICAID REPORT**

**Other Administration Expenditures\*  
Biennial Medicaid Report**

<b>OTHER ADMINISTRATION</b>	<b>FY 2000 Expended</b>				<b>FY 2001 Expended</b>			
	<b>State</b>	<b>Other</b>	<b>Federal</b>	<b>Total</b>	<b>State</b>	<b>Other</b>	<b>Federal</b>	<b>Total</b>
<b>Health &amp; Human Services Commission</b>	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
<b>Department of Health</b>	-	-	4,762,487	4,762,487	-	-	5,500,128	5,500,128
<b>Department of Human Services</b>	34,769,406	3,828	37,866,089	72,639,323	34,072,573	693,896	34,008,494	68,774,963
<b>Dept. of Mental Health &amp; Mental Retardation</b>	2,697,202	-	2,697,203	5,394,405	2,889,407	-	2,889,407	5,778,814
<b>Protective and Regulatory Services <sup>1</sup></b>	459,458	7,817	467,275	934,550	537,453	4,882	542,335	1,084,670
<b>Council on Early Childhood Intervention</b>	-	-	-	-	-	-	-	-
<b>Commission for the Blind</b>	-	-	-	-	-	-	-	-
<b>TOTAL</b>	<b>37,926,066</b>	<b>11,645</b>	<b>45,793,054</b>	<b>83,730,765</b>	<b>37,499,433</b>	<b>698,778</b>	<b>42,940,364</b>	<b>81,138,575</b>

**Other Administration Expenditures\*  
Biennial Medicaid Report**

<b>OTHER ADMINISTRATION</b>	<b>FY 2002 Expended and Encumbrances</b>			
	<b>State</b>	<b>Other</b>	<b>Federal</b>	<b>Total</b>
<b>Health &amp; Human Services Commission</b>	8,836,792	-	10,276,395	19,113,187
<b>Department of Health</b>	-	-	5,865,993	5,865,993
<b>Department of Human Services</b>	39,960,689	282,788	48,072,696	88,316,173
<b>Dept. of Mental Health &amp; Mental Retardation</b>	3,315,169	-	3,315,170	6,630,339
<b>Protective and Regulatory Services <sup>1</sup></b>	525,460	6,572	532,032	1,064,064
<b>Council on Early Childhood Intervention</b>	64,452	-	64,452	128,904
<b>Commission for the Blind</b>	-	-	-	-
<b>TOTAL</b>	<b>52,702,562</b>	<b>289,360</b>	<b>68,126,738</b>	<b>121,118,660</b>

## Notes to HHS Enterprise Biennial Medicaid Report

### Agency Totals

<sup>1</sup>Disproportionate Share Hospitals (DSH), School Health and Related Services (SHARS), and Upper Payment Limit (UPL) funding is not appropriated.

\*State Funds include General Revenue, GR Certified Match, GR Match for Medicaid, Premium Credits, Subrogation Receipts, Drug Rebates, and Tobacco Receipts Matched for Medicaid.

\*Other Funds include non-state match such as local intergovernmental transfers or other local funds.

### Department of Human Services

<sup>1</sup> Includes Survey & Certification Title XIX

<sup>2</sup> LTC Eligibility includes administration for these strategies: Community Care, Long Term Care Eligibility, Nursing Facilities, Integrated Services, and Medicaid Administrative Claiming.

<sup>3</sup> Administration includes these strategies: Central Administration, Information Resources, Other Support Services, Regional Administration, and all cost pools.

<sup>4</sup> All Other Community Care includes Primary Home Care, Frail Elderly, and Day Activity and Health

<sup>5</sup> All Other Integrated Services Includes Non-Waivered Services provided by Star+Plus HMOs.

### Department of Mental Health and Mental Retardation

<sup>1</sup> General Revenue Certified as State Match for Medicaid is defined as general revenue funds requested and reported as expended for the purpose of drawing federal funds and to document that state funds have been spent for Medicaid services and administrative expenditures. These funds are received by the provider at a different time than the federal fund they are certified to match.

<sup>2</sup> Expended and encumbered amounts for Medicaid programs at state schools and state hospitals include amounts expended by other state agencies on MHMR's behalf. These include benefits for OASI, worker's compensation, unemployment compensation and insurance. The appropriated columns have been adjusted to also include amounts for these types of expenditures.

### Council on Early Childhood Intervention

<sup>1</sup> The source for Targeted Case Management amounts is the quarterly financial report submitted by each provider. NHIC does not charge ECI a fee for processing the Targeted Case Management Claims.

<sup>2</sup> Developmental Rehabilitation Services amounts come from the monthly DRS report submitted by each provider. They do not necessarily reflect actual cash outlays by ECI in the same time period.

<sup>3</sup> Five percent of the federal portion of Medicaid Administrative Claiming is retained by ECI as a fee for processing the claims. There is not an administrative charge estimated for Developmental Rehabilitation Services at this time.

### **Medicaid Programs Excluded from the General Appropriations Act**

<sup>1</sup> DSH, UPL, and SHARS funding is not appropriated.

### **Program Operations**

<sup>1</sup> Includes Other Funds

<sup>2</sup> Claims Processing includes: MMIS, CMS, and Fiscal Division

<sup>3</sup> ECI is not charged a processing fee for Targeted Case Management. This figure reflects expenditures for Targeted Case Management.

\*As defined by SB 832, expenditures for Program Operations include Claims Processing, Eligibility Determination, and Case Management/Service Coordination.

### **Other Administration**

<sup>1</sup> All PRS Medicaid Costs are reported either as Targeted Case Management or Administration. Based on the PRS Targeted Case Management (TCM) rate methodology, all expenditures at the FMAP are factored into the unit rate cost per TCM contact.

\*Definition of Other Administration: Administrative costs such as central administration and indirect cost that are not program related administrative costs. This would be any administrative costs related to Medicaid other than those listed under Program Operations.