

Table 1
North Carolina Medicaid
State Fiscal Year 2000
Federal Matching Rates

Benefit Costs
(7/1/99 - 9/30/99)

	<u>Family Planning</u>	<u>All Other</u>
Federal	90.00%	63.07%
State	8.50%	31.39%
County	<u>1.50%</u>	<u>5.54%</u>
Total	100.00%	100.00%

Benefit Costs
(10/1/99 - 6/30/00)

	<u>Family Planning</u>	<u>All Other</u>
Federal	90.00%	62.49%
State	8.50%	31.88%
County	<u>1.50%</u>	<u>5.63%</u>
Total	100.00%	100.00%

Administrative Costs
(7/1/99 - 6/30/00)

	<u>Skilled Medical Personnel & MMIS*</u>	<u>All Other</u>
Federal	75.00%	50.00%
Non-Federal	<u>25.00%</u>	<u>50.00%</u>
Total	100.00%	100.00%

*MMIS - Medicaid Management Information System

Table 2
North Carolina Medicaid
State Fiscal Year 2000

Medicaid Financial Eligibility Standards

GROUP	FAMILY SIZE:	1	2	3	4	5
Pregnant Women and Children under age 1	Income Limit:	\$1,288/mo.	\$1,755/mo.	\$2,182/mo.	\$2,629/mo.	\$3,076/mo.
	Resource Limit:	None				
Children age 1 through 5	Income Limit:	\$926/mo.	\$1,247/mo.	\$1,569/mo.	\$1,890/mo.	\$2,212/mo.
	Resource Limit:	None				
Children age 6 through 18	Income Limit:	\$696/mo.	\$938/mo.	\$1,180/mo.	\$1,421/mo.	\$1,663/mo.
	Resource Limit:	None				
Children age 19 and 20	Income Limit:	\$362/mo.	\$472/mo.	\$544/mo.	\$594/mo.	\$648/mo.
	Resource Limit:	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000
Caretaker Relatives - Individuals (usually parents) who live with children under age 19 to whom they are related when one or both of the child's parents are out of the home, dead, incapacitated or working less than 100 hours a month.	Income Limit:	\$362/mo.	\$472/mo.	\$544/mo.	\$594/mo.	\$648/mo.
	Resource Limit:	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000
Aged (over age 65), Blind or Disabled by Social Security standards.	Income Limit:	\$696/mo.	\$938/mo.			
	Resource Limit:	\$ 2,000	\$ 3,000			
Medicare Beneficiaries - Persons who have Medicare Part A - * Medicaid pays for Medicare premiums, deductibles and co-payments. * Medicaid pays Medicare Part B premiums only.	Income Limit:	\$696/mo.	\$938/mo.			
	Resource Limit:	\$ 4,000	\$ 6,000			
	Income Limit:	\$835/mo.	\$1,125/mo.			
	Resource Limit:	\$ 4,000	\$ 6,000			
Deductible/Spenddown - Individuals who do not meet the income limits specified above and who have high medical bills may be eligible for Medicaid after meeting a deductible.	The deductible is based on how much the monthly income exceeds this	\$242/mo.	\$317/mo.	\$367/mo.	\$400/mo.	\$433/mo.
	Resource Limit:					
	Families & Children	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000	\$ 3,000
	Aged,Blind,Disabled	\$ 2,000	\$ 3,000			

Table 3
Financial Eligibility for Medicaid
based on
Percentage of Poverty (Annual)
SFY 2000

Family Size	100%	120%	133%	135%	185%	200%	SSI	MNIL	SA
1	\$ 8,352	\$ 10,020	\$ 11,112	\$ 11,280	\$ 15,456	\$ 16,704	\$ 6,144	\$ 2,904	\$ 11,784
2	\$ 11,256	\$ 13,500	\$ 14,964	\$ 15,192	\$ 20,820	\$ 22,500	\$ 9,228	\$ 3,804	
3	\$ 14,160		\$ 18,828		\$ 26,184	\$ 28,308			
4	\$ 17,052		\$ 22,680		\$ 31,548	\$ 34,104			
5	\$ 19,956		\$ 26,544		\$ 36,912	\$ 39,900			

**Table 4
North Carolina Medicaid
State Fiscal Year 2000
Enrolled Medicaid Providers**

<u>Providers</u>	<u>Number</u>
Physicians*	33,787
Dentists	3,715
Pharmacists	2,203
Optometrists	1,398
Chiropractors	1,364
Podiatrists	470
Ambulance Companies	368
Home Health Agencies**	180
Durable Medical Equipment Suppliers	4,134
Intermediate Care Facilities-MR	330
HMOs	5
Hospitals	626
Mental Health Clinics	198
Nursing Facilities	965
Domicile Care	2,394
Personal Care Agencies	607
Rural Health Clinics	146
CRNA	70
Nurse Midwives	64
Hospices	73
CAP Providers	910
Other Clinics	11
Other	<u>5,271</u>
Total	59,289

* The count of physicians reflects each provider number assigned to an individual physician or a group practice of physicians. Most physicians practicing in a group have an individual provider number in addition to the group number. Also, physicians who practice in multiple settings are included once for each practice setting.

**Includes Physical, Speech, Occupational and Home Infusion Therapy services.

Table 5
North Carolina Medicaid
State Fiscal Year 2000
Medicaid Covered Services

- 1 Ambulance Transportation
- 2 Case Management for:
 - * Pregnant women
 - * High risk children (0-5)
 - * Chronically mentally ill adults
 - * Emotionally disturbed children
 - * Chronic substance abusers
 - * Adults & Children at risk of abuse, neglect, or exploitation
 - * Persons with HIV Disease
- 3 Chiropractors
- 4 Clinic Services
- 5 Community Alternatives Programs (CAP)
- 6 Dental Care Services
- 7 Domicile Care
- 8 Durable Medical Equipment
- 9 Health Check Services (EPSDT)
- 10 Family Planning Services
- 11 Hearing Aids (for children)
- 12 HMO Membership
- 13 Home Health Services
- 14 Home Infusion Therapy Services
- 15 Hospice
- 16 Inpatient & Outpatient Hospital Services
- 17 Intermediate Care Facilities for the Mentally Retarded (ICF-MR)
- 18 Laboratory & X-Ray Services
- 19 Mental Hospitals (age 65 & over)
- 20 Migrant Health Clinics
- 21 Nurse Midwives
- 22 Nurse Practitioners
- 23 Nursing Facilities (NF)
- 24 Optical Supplies
- 25 Optometrists
- 26 Personal Care Services
- 27 Physicians
- 28 Podiatrists
- 29 Prepaid Health Plan Services
- 30 Prescription Drugs
- 31 Private Duty Nursing Services
- 32 Prosthetics and Orthotics (children)
- 33 Rehabilitative Services
(under the auspices of area mental health programs)
- 34 Rural Health Clinics
- 35 Specialty Hospitals
- 36 Transportation

Table 6
North Carolina Medicaid
State Fiscal Year 1999 & 2000
Sources of Medicaid Funds

	<u>SFY 1999</u>	<u>Percent</u>	<u>SFY 2000</u>	<u>Percent</u>
Federal	\$ 2,988,767,566	60.6%	\$ 3,405,578,752	58.8%
State*	\$ 1,301,768,010	26.4%	\$ 1,429,745,564	24.7%
Other State	\$ 417,445,559	8.5%	\$ 661,374,876	11.4%
County	\$ 226,155,462	4.6%	\$ 213,520,774	3.7%
Admin -Other	not available		\$ 78,913,119	1.4%
Total	\$ 4,934,136,597	100.0%	\$ 5,789,133,085	100.0%

* State appropriation of funds

Source: BD701, The Authorized Monthly Budget Report for the period ending June 29, 2000

**Table 7
North Carolina Medicaid
State Fiscal Year 2000
Uses of Medicaid Funds**

<u>Type of Service</u>	<u>Total Expenditures</u>	<u>Percent of Total Dollars</u>	<u>Percent of Svc. Dollars</u>	<u>Users of Services*</u>	<u>Cost Per Service User</u>
Inpatient Hospital	736,135,229	12.7%	15.3%	188,441	\$ 3,906
Outpatient Hospital	272,258,247	4.7%	5.7%	511,679	532
Mental Hospital >65 & <21	23,063,625	0.4%	0.5%	2,547	9,055
Physician	432,332,656	7.5%	9.0%	1,022,362	423
Clinics	303,962,885	5.3%	6.3%	298,971	1,017
Nursing Facility (Skilled)	423,583,541	7.3%	8.8%	29,462	14,377
Nursing Facility (Intermediate)	386,455,052	6.7%	8.1%	23,627	16,357
ICF-MR	382,313,189	6.6%	8.0%	4,757	80,369
Dental	57,586,942	1.0%	1.2%	219,902	262
Prescription Drugs	754,505,194	13.0%	15.7%	817,779	923
Home Health	120,042,028	2.1%	2.5%	81,624	1,471
All Other Services	687,236,522	11.9%	14.3%	758,628	906
Subtotal Services	\$ 4,579,475,109	79.1%	95.5%		
Medicare Premiums:					
(Part A, Part B, QMB, Dually Eligible)	165,457,105	2.9%	3.4%		
HMO Premiums	51,750,006	0.9%	1.1%		
Subtotal Services & Premiums	\$ 4,796,682,219				
Adjustments, Cost Settlements & Transfers	283,682,693	4.9%			
Disproportionate Share Payments	374,257,526	6.5% **			
Transfer to State Treasurer	106,170,396	1.8%			
Subtotal Services, Premiums & Other	\$ 5,560,792,834	96.1%			
DMA Administration	69,251,716	1.2%			
DMA Total Expenditures	\$ 5,630,044,550	97.3%			
Admin Costs of other DHHS agencies for which Medicaid Federal match was received, including county administration.	\$ 159,088,535	2.7%			
Grand Total Medicaid Related Expenditures	\$ 5,789,133,085	100.0%			
Total Recipients (unduplicated)***				1,200,906	
Total Expenditures Per Recipient (unduplicated)					\$ 4,821

* "Users of Services" is a Duplicated Count. Recipients using one or more services are counted in each service category.

** Additional payments for hospitals providing services to a higher than average number of medicaid patients.

*** "Total Recipients" is unduplicated, counting recipients only once during the year regardless of the number or type of services they use.

Note: Numbers may not add due to rounding.

SOURCES: State 2082 Report -SFY 2000, PER Report YTD June 2000, BD701 Report June 2000 and HCFA-64 quarterly reports covering SFY 2000.

Note: Users of Services in All Other Services is obtained from the State History table by taking a nonduplicated count of the number of users.

Table 8
North Carolina Medicaid
A History of Medicaid Expenditures
SFYs 1979-2000

<u>Fiscal Year</u>	<u>Expenditures</u>	<u>Percentage Change</u>
1979	\$ 379,769,848	N/A
1980	\$ 410,053,625	8%
1981	\$ 507,602,694	24%
1982	\$ 521,462,961	3%
1983	\$ 570,309,294	9%
1984	\$ 657,763,927	15%
1985	\$ 665,526,678	1%
1986	\$ 758,115,890	14%
1987	\$ 861,175,819	14%
1988	\$ 983,464,113	14%
1989	\$ 1,196,905,351	22%
1990	\$ 1,427,672,567	19%
1991	\$ 1,942,016,092	36%
1992	\$ 2,478,709,587	28%
1993	\$ 2,836,335,468	14%
1994	\$ 3,550,099,377	25%
1995	\$ 3,550,468,230	0%
1996	\$ 4,113,344,777	16%
1997	\$ 4,640,421,917	13%
1998	\$ 4,715,733,033	2%
1999	\$ 4,934,136,597	5%
2000	\$ 5,789,133,085	17%

Table 9
North Carolina Medicaid
State Fiscal Years 1979-2000
A History of Medicaid Eligibles

<u>Fiscal Year</u>	<u>Aged</u>	<u>Qualified Medicare Beneficiaries</u>	<u>Blind</u>	<u>Disabled</u>	<u>AFDC Adults & Children</u>	<u>Medicaid Pregnant Women</u>	<u>Medicaid Indigent Children</u>	<u>Other Children</u>	<u>Aliens and Refugees</u>	<u>Total</u>	<u>Percent Change</u>
1978-79	82,930	N/A	3,219	59,187	301,218	N/A	N/A	6,620	N/A	453,174	-
1979-80	82,859	N/A	2,878	56,265	307,059	N/A	N/A	6,641	N/A	455,702	0.60%
1980-81	80,725	N/A	2,656	56,773	315,651	N/A	N/A	6,559	N/A	459,364	0.80%
1981-82	70,010	N/A	2,349	48,266	298,483	N/A	N/A	6,125	N/A	425,233	-7.40%
1982-83	67,330	N/A	2,000	46,537	293,623	N/A	N/A	6,062	N/A	415,552	-2.30%
1983-84	65,203	N/A	1,755	46,728	288,619	N/A	N/A	5,501	N/A	407,806	-1.90%
1984-85	65,849	N/A	1,634	48,349	293,188	N/A	N/A	5,333	N/A	414,353	1.60%
1985-86	69,193	N/A	1,554	51,959	313,909	N/A	N/A	5,315	N/A	441,930	6.70%
1986-87	72,295	N/A	1,462	54,924	317,983	N/A	N/A	5,361	N/A	452,025	2.30%
1987-88	76,308	N/A	1,394	58,258	323,418	9,842	6,543	5,563	N/A	481,326	6.50%
1988-89	80,044	19,064	1,304	62,419	352,321	20,277	19,615	6,009	561	561,614	16.70%
1989-90	80,266	33,929	1,220	64,875	387,882	28,563	36,429	5,176	1,011	639,351	13.80%
1990-91	81,466	42,949	1,116	70,397	451,983	37,200	61,210	4,296	1,675	753,292	17.80%
1991-92	83,337	56,871	1,064	79,282	513,023	43,330	94,922	4,139	1,955	877,923	16.50%
1992-93	85,702	71,120	1,003	87,664	562,661	45,629	132,348	4,133	2,437	992,697	13.10%
1993-94	86,111	83,460	929	90,889	581,397	46,970	162,417	4,100	2,330	1,058,603	6.60%
1994-95	127,514	48,373	2,716	155,215	533,300	48,115	216,888	3,808	2,857	1,138,786	7.60%
1995-96	131,496	53,072	2,710	171,204	496,501	52,466	261,525	3,696	3,919	1,176,589	3.32%
1996-97	132,173	58,036	2,593	176,160	462,881	55,838	295,882	3,747	4,823	1,192,133	1.30%
1997-98	131,332	61,032	2,531	180,461	414,853	58,899	337,849	3,905	6,311	1,197,173	0.42%
1998-99	152,582	32,737	2,497	199,523	344,621	60,896	371,986	3,941	8,036	1,176,819	-1.73%
1999-00	154,222	33,302	2,428	205,205	330,113	60,918	421,158	4,063	9,857	1,221,266	3.64%
SFY 1999											
Percent Total Eligibles:	13.0%	2.8%	0.2%	17.0%	29.3%	5.2%	31.6%	0.3%	0.7%	100.0%	
SFY 2000											
Percent Total Eligibles:	12.6%	2.7%	0.2%	16.8%	27.0%	5.0%	34.5%	0.3%	0.8%	100.0%	

Source: Medicaid Eligibility Report, EJA752-SFY 2000

**Table 10
North Carolina Medicaid
State Fiscal Year 2000
Total Expenditures and Eligibles by County**

COUNTY NAME	2000 EST.	NUMBER OF	EXPEND.	PER CAPITA	ELIGIBLES	% of Medicaid Eligibles by County Based on 2000 Population
	COUNTY POPULATION	MEDICAID ELIGIBLES	TOTAL EXPENDITURES	PER ELIGIBLE	EXPENDITURE AMOUNT RANKING	
ALAMANCE	124,042	16,439	\$ 67,418,365	\$ 4,101	\$ 544 78	133 13.25%
ALEXANDER	32,530	4,423	\$ 17,446,612	3,945	536 80	136 13.60%
ALLEGHANY	9,966	1,641	\$ 8,463,094	5,157	849 34	165 16.47%
ANSON	23,844	6,585	\$ 26,374,764	4,005	1,106 10	276 27.62%
ASHE	23,966	4,482	\$ 22,297,228	4,975	930 25	187 18.70%
AVERY	15,964	2,811	\$ 16,008,614	5,695	1,003 20	176 17.61%
BEAUFORT	44,158	10,028	\$ 40,580,635	4,047	919 27	227 22.71%
BERTIE	19,830	6,384	\$ 25,286,195	3,961	1,275 4	322 32.19%
BLADEN	30,924	9,327	\$ 38,571,591	4,135	1,247 6	302 30.16%
BRUNSWICK	69,577	12,651	\$ 45,749,344	3,616	658 59	182 18.18%
BUNCOMBE	194,353	30,841	\$ 130,378,658	4,227	671 56	159 15.87%
BURKE	84,583	12,919	\$ 60,851,819	4,710	719 50	153 15.27%
CABARRUS	125,051	14,594	\$ 64,485,486	4,419	516 84	117 11.67%
CALDWELL	75,882	11,697	\$ 49,256,223	4,211	649 61	154 15.41%
CAMDEN	6,748	918	\$ 3,662,938	3,990	543 79	136 13.60%
CARTERET	59,120	7,913	\$ 33,047,772	4,176	559 76	134 13.38%
CASWELL	22,440	3,898	\$ 16,416,361	4,211	732 47	174 17.37%
CATAWBA	134,128	17,813	\$ 64,475,434	3,620	481 91	133 13.28%
CHATHAM	47,264	5,454	\$ 23,418,599	4,294	495 86	115 11.54%
CHEROKEE	23,072	5,131	\$ 23,935,880	4,665	1,037 15	222 22.24%
CHOWAN	14,036	3,439	\$ 14,838,220	4,315	1,057 13	245 24.50%
CLAY	8,412	1,436	\$ 6,428,632	4,477	764 37	171 17.07%
CLEVELAND	92,590	17,118	\$ 69,642,465	4,068	752 42	185 18.49%
COLUMBUS	52,476	16,018	\$ 67,322,792	4,203	1,283 3	305 30.52%
CRAVEN	89,730	14,572	\$ 55,589,936	3,815	620 67	162 16.24%
CUMBERLAND	291,897	48,210	\$ 142,461,587	2,955	488 90	165 16.52%
CURRITUCK	17,496	2,315	\$ 7,608,372	3,287	435 94	132 13.23%
DARE	28,918	2,813	\$ 12,367,657	4,397	428 96	97 9.73%
DAVIDSON	142,722	19,670	\$ 74,630,887	3,794	523 83	138 13.78%
DAVIE	32,968	3,641	\$ 16,090,796	4,419	488 89	110 11.04%
DUPLIN	44,502	10,787	\$ 39,746,244	3,685	893 29	242 24.24%
DURHAM	203,357	29,817	\$ 121,905,044	4,088	599 71	147 14.66%
EDGECOMBE	54,034	16,783	\$ 54,467,810	3,245	1,008 19	311 31.06%
FORSYTH	291,846	37,481	\$ 142,696,244	3,807	489 88	128 12.84%
FRANKLIN	45,332	8,051	\$ 32,458,100	4,032	716 51	178 17.76%
GASTON	181,362	30,463	\$ 124,360,336	4,082	686 53	168 16.80%
GATES	10,114	1,736	\$ 7,676,680	4,422	759 39	172 17.16%
GRAHAM	7,522	1,981	\$ 9,805,931	4,950	1,304 2	263 26.34%
GRANVILLE	45,450	6,714	\$ 29,994,336	4,467	660 58	148 14.77%
GREENE	18,298	3,890	\$ 15,052,148	3,869	823 35	213 21.26%
GUILFORD	393,423	56,278	\$ 210,668,733	3,743	535 81	143 14.30%
HALIFAX	54,752	17,884	\$ 58,516,298	3,272	1,069 11	327 32.66%
HARNETT	85,305	16,516	\$ 54,323,900	3,289	637 63	194 19.36%
HAYWOOD	52,096	8,797	\$ 36,077,714	4,101	693 52	169 16.89%
HENDERSON	82,365	12,272	\$ 50,994,670	4,155	619 68	149 14.90%
HERTFORD	21,260	6,962	\$ 26,568,655	3,816	1,250 5	327 32.75%
HOKE	31,102	7,154	\$ 23,187,001	3,241	746 44	230 23.00%
HYDE	5,611	1,253	\$ 5,940,432	4,741	1,059 12	223 22.33%
IREDELL	117,804	14,997	\$ 55,537,580	3,703	471 92	127 12.73%
JACKSON	29,806	5,161	\$ 22,155,688	4,293	743 45	173 17.32%
JOHNSTON	112,154	18,939	\$ 67,613,142	3,570	603 70	169 16.89%
JONES	9,305	2,107	\$ 8,750,207	4,153	940 23	226 22.64%
LEE	49,247	8,720	\$ 30,742,175	3,525	624 65	177 17.71%
LENOIR	58,208	14,293	\$ 57,514,236	4,024	988 21	246 24.56%

**Table 10 (Cont.)
North Carolina Medicaid
State Fiscal Year 2000
Total Expenditures and Eligibles by County**

COUNTY NAME	2000 EST. COUNTY POPULATION	NUMBER OF MEDICAID ELIGIBLES	TOTAL EXPENDITURES	EXPEND. PER ELIGIBLE	PER CAPITA EXPENDITURE AMOUNT	RANKING	ELIGIBLES PER 1,000 POPULATION	% of Medicaid Eligibles by County Based on 2000 Population
LINCOLN	60,080	7,826	\$ 31,876,484	\$ 4,073	\$ 531	82	130	13.03%
MACON	40,644	4,882	\$ 18,573,836	3,805	457	93	120	12.01%
MADISON	28,630	3,760	\$ 15,656,807	4,164	547	77	131	13.13%
MARTIN	18,978	6,639	\$ 26,945,373	4,059	1,420	1	350	34.98%
MCDOWELL	25,708	6,599	\$ 26,390,634	3,999	1,027	16	257	25.67%
MECKLENBURG	642,245	80,442	\$ 270,898,502	3,368	422	98	125	12.53%
MITCHELL	14,690	2,593	\$ 12,736,144	4,912	867	31	177	17.65%
MONTGOMERY	24,988	5,198	\$ 18,853,623	3,627	755	41	208	20.80%
MOORE	72,308	9,993	\$ 40,503,740	4,053	560	75	138	13.82%
NASH	89,064	15,764	\$ 56,481,147	3,583	634	64	177	17.70%
NEW HANOVER	148,822	22,002	\$ 92,208,401	4,191	620	66	148	14.78%
NORTHAMPTON	20,949	6,720	\$ 24,997,088	3,720	1,193	8	321	32.08%
ONSLow	148,286	17,895	\$ 55,999,521	3,129	378	99	121	12.07%
ORANGE	109,746	8,284	\$ 39,064,403	4,716	356	100	75	7.55%
PAMLICO	12,602	2,506	\$ 11,139,101	4,445	884	30	199	19.89%
PASQUOTANK	34,650	7,510	\$ 26,185,135	3,487	756	40	217	21.67%
PENDER	38,971	7,095	\$ 29,760,033	4,195	764	38	182	18.21%
PERQUIMANS	10,872	2,378	\$ 7,864,865	3,307	723	49	219	21.87%
PERSON	33,664	5,630	\$ 25,247,346	4,484	750	43	167	16.72%
PITT	127,879	23,745	\$ 82,578,489	3,478	646	62	186	18.57%
POLK	16,925	2,237	\$ 9,746,675	4,357	576	74	132	13.22%
RANDOLPH	126,316	17,277	\$ 62,249,779	3,603	493	87	137	13.68%
RICHMOND	45,158	11,916	\$ 46,044,781	3,864	1,020	17	264	26.39%
ROBESON	115,333	38,413	\$ 141,335,272	3,679	1,225	7	333	33.31%
ROCKINGHAM	89,745	15,457	\$ 65,403,690	4,231	729	48	172	17.22%
ROWAN	125,800	18,673	\$ 72,457,939	3,880	576	73	148	14.84%
RUTHERFORD	60,508	11,399	\$ 44,643,189	3,916	738	46	188	18.84%
SAMPSON	54,155	13,648	\$ 50,349,692	3,689	930	26	252	25.20%
SCOTLAND	34,824	10,533	\$ 39,137,559	3,716	1,124	9	302	30.25%
STANLY	56,082	8,442	\$ 37,028,154	4,386	660	57	151	15.05%
STOKES	43,700	5,271	\$ 21,711,856	4,119	497	85	121	12.06%
SURRY	68,843	11,205	\$ 46,281,005	4,130	672	55	163	16.28%
SWAIN	12,311	3,015	\$ 11,647,118	3,863	946	22	245	24.49%
TRANSYLVANIA	28,353	4,211	\$ 18,597,648	4,416	656	60	149	14.85%
TYRRELL	4,025	1,028	\$ 4,087,498	3,976	1,016	18	255	25.54%
UNION	115,344	13,665	\$ 49,180,952	3,599	426	97	118	11.85%
VANCE	42,271	12,254	\$ 38,475,761	3,140	910	28	290	28.99%
WAKE	592,218	51,532	\$ 177,793,900	3,450	300	101	87	8.70%
WARREN	18,978	5,090	\$ 17,764,402	3,490	936	24	268	26.82%
WASHINGTON	12,850	3,754	\$ 13,336,413	3,553	1,038	14	292	29.21%
WATAUGA	40,791	3,547	\$ 17,506,188	4,935	429	95	87	8.70%
WAYNE	112,954	22,142	\$ 77,046,045	3,480	682	54	196	19.60%
WILKES	63,760	10,718	\$ 49,613,677	4,629	778	36	168	16.81%
WILSON	69,772	16,302	\$ 59,377,302	3,642	851	33	234	23.36%
YADKIN	36,124	4,678	\$ 20,993,600	4,488	581	72	129	12.95%
YANCEY	16,841	3,181	\$ 14,385,158	4,522	854	32	189	18.89%
STATE TOTAL	7,650,699	1,221,266	\$ 4,652,016,181	\$ 3,809	\$ 608	N/A	160	15.96%

Source: Medicaid Cost Calculation Fiscal YTD June 2000.

Note: Data reflect only net vendor payments for which the county is billed for its computable share.

**Table 11
North Carolina Medicaid
State Fiscal Year 2000
Medicaid Service Expenditures by Recipient Group**

<u>Eligibility Group</u>	<u>Total Service Dollars</u>	<u>Percent of Service Dollars</u>	<u>Total Recipients</u>	<u>Percent of Recipients</u>	<u>SFY 2000 Expenditures Per Recipient</u>	<u>SFY 1999 Expenditures Per Recipient</u>	<u>99/00 Percent Change</u>
Total Elderly	\$ 1,559,417,908	32.5%	162,533	13.5%	\$ 9,594	\$ 8,318	15.3%
Aged	1,541,163,711	32.1%	149,027	12.4%	10,342	10,316	0.2%
Medicare-Aid (MQBQ & MQBB)	18,254,197	0.4%	13,506	1.1%	1,352	1,226	10.2%
Total Disabled	\$ 2,016,505,902	42.0%	204,232	17.0%	9,874	9,276	6.4%
Disabled	1,991,190,933	41.5%	201,878	16.8%	9,863	9,270	6.4%
Blind	25,314,969	0.5%	2,354	0.2%	10,754	9,744	10.4%
Total Families & Children	\$ 1,212,330,805	25.3%	825,296	68.7%	1,469	1,402	4.8%
AFDC Adults (> 21)	276,192,007	5.8%	137,190	11.4%	2,013	1,634	23.2%
Medicaid Pregnant Women Coverage(MPW)	199,041,760	4.1%	72,766	6.1%	2,735	2,680	2.1%
AFDC Children & Other Children	267,542,973	5.6%	200,188	16.7%	1,336	1,264	5.7%
Medicaid Indigent Children(MIC)	469,554,064	9.8%	415,152	34.6%	1,131	1,146	-1.3%
Aliens and Refugees	\$ 26,993,251	0.6%	8,845	0.7%	3,052	2,844	7.3%
Adjustments Not Attributable To A Specific Category	\$ (18,565,646)	-0.4%					
Total Service Expenditures All Groups	\$ 4,796,682,219	100.0%	1,200,906	100.0%	3,994	\$ 3,669	8.9%

Note: Total Service Expenditures does not include:

Disproportionate Share Payments	\$ 374,257,526
State & County administrative costs	69,251,716
Transfer to State Treasurer	106,170,396
Adjustments and cost settlements	283,682,693
TOTAL	\$ 833,362,331

See Table 6 for more details regarding all sources of Medicaid funds.
Source: SFY 2000 Program Expenditure Report and 2082 Report.

Table 12
North Carolina Medicaid
State Fiscal Year 2000
Service Expenditures For Selected Major Medical Services By Program Category

Type of Service	Total	Percent of Service Dollars	Aged	MQBQ*		Blind	Disabled	Other Adult**	Children***	Aliens & Refugees	Adjustments Unattributable To A Specific Category
				Qualified Medicare Beneficiary	MQBB+MQBE Part B Premium Only						
Inpatient Hospital	\$ 736,135,229	15.3%	\$ 19,851,551	\$ 224,869	\$ -	\$ 2,445,500	\$ 326,859,313	\$ 165,494,842	\$206,386,653	\$ 19,718,213	\$ (4,845,713)
Outpatient Hospital	272,258,247	5.7%	31,162,668	783,464	-	951,355	113,552,563	65,473,256	64,236,173	584,389	(4,485,620)
Mental Hospital (> 65)	8,597,352	0.2%	8,602,439	3,686	-	(8,581)	-	-	-	-	(192)
Psychiatric Hospital (< 21)	14,466,273	0.3%	-	-	-	2,638	4,057,773	17,795	10,416,560	-	(28,492)
Physician	432,332,656	9.0%	50,133,695	881,015	361	1,185,587	134,109,172	103,578,481	139,700,839	5,596,917	(2,853,412)
Clinics	303,962,885	6.3%	11,091,768	176,817	519	709,487	140,018,774	38,197,015	116,424,202	709,852	(3,365,549)
Nursing Facility:											
Skilled Level	423,583,541	8.8%	366,198,705	3,743	-	1,265,457	56,400,310	47,059	22,268	114	(354,116)
Intermediate Level	386,455,052	8.1%	353,256,340	310	-	1,362,946	31,876,238	795	79,337	5,300	(126,214)
Intermediate Care Facility (Mentally Retarded)	382,313,189	8.0%	18,698,319	-	-	6,765,399	353,444,238	31,592	3,408,490	-	(34,849)
Dental	57,586,942	1.2%	7,136,065	559	-	113,251	15,660,781	9,093,549	25,534,095	173,957	(125,316)
Prescription Drugs	754,505,194	15.7%	270,072,626	-	-	3,228,032	359,524,944	51,187,512	70,723,821	79,912	(311,653)
Home Health	120,042,028	2.5%	24,048,066	6,017	-	1,065,056	81,399,927	4,656,961	9,348,285	24,354	(506,639)
CAP/Disabled Adult	172,223,094	3.6%	131,628,916	-	-	1,368,543	39,541,357	-	-	-	(315,723)
CAP/Mentally Retarded	181,279,890	3.8%	3,364,453	-	-	1,841,117	174,476,063	-	2,041,703	-	(443,446)
CAP/Children	12,324,578	0.3%	-	-	-	-	11,980,624	-	349,689	-	(5,735)
Personal Care	92,949,966	1.9%	67,432,998	1,311	-	1,124,325	24,271,355	350,898	145,214	852	(376,988)
Hospice	9,697,636	0.2%	4,295,852	-	-	18,669	5,164,068	183,393	81,970	-	(46,316)
EPSDT (Health Check)	34,517,253	0.7%	463	-	-	6,688	1,096,275	31,323	33,437,265	8,727	(63,487)
Lab & X-ray	12,901,530	0.3%	71,684	602	-	33,783	3,050,463	5,461,794	4,283,310	23,582	(23,688)
Adult Home Care	86,941,136	1.8%	52,975,641	3,773	29,604	274,069	33,685,057	3,005	8,967	-	(38,979)
Other Services	84,401,440	1.8%	9,895,168	67,941	-	232,862	28,544,439	18,961,288	26,898,198	63,968	(262,425)
Total Services	4,579,475,109	95.5%	1,429,917,417	2,154,106	30,484	23,986,184	1,938,713,734	462,770,558	713,527,038	26,990,137	(18,614,550)
Medicare:											
Part A Premiums	40,608,106	0.8%	40,101,992	19,187	-	609,176	6,076	-	-	-	(128,325)
Part B Premiums	124,848,999	2.6%	71,144,225	1,058,808	14,991,611	546,607	36,666,148	255,181	9,282	(91)	177,228
HMO Premiums	51,750,006	1.1%	78	-	-	173,001	15,804,976	12,208,030	23,560,717	3,204	-
Total Premiums	217,207,110	4.5%	111,246,294	1,077,995	14,991,611	1,328,785	52,477,200	12,463,210	23,569,999	3,113	48,903
Grand Total Services and Premiums	\$ 4,796,682,219		\$ 1,541,163,711	\$ 3,232,101	\$ 15,022,095	\$ 25,314,969	\$ 1,991,190,933	\$ 475,233,768	\$ 737,097,037	26,993,251	(18,565,646)

Note: Grand Total Expenditures do not include adjustments processed by DMA, settlements, Disproportionate Share Costs and State and County Administration costs.

* Reflects expenditures for those who were eligible as QMBs at the end of the year. As a result, expenditures include more services than are available through QMB coverage. (Medicare-covered services only.)

** Includes individuals covered under SOBRA Pregnant Women policies or individuals age 21 & Over under TANF or AFDC Related coverage.

*** Includes SOBRA Children, individuals under age 21 in TANF or AFDC Related coverages, or Other Children in Foster Care.

Table13
North Carolina Medicaid
State Fiscal Year 2000
Expenditures For The Elderly

<u>Type of Service</u>	<u>Aged</u>	<u>Percent of Service Dollars</u>	<u>MQBQ* Qualified Medicare Beneficiary</u>	<u>MQBB+MQBE Part B Premium Only</u>	<u>Total Qualified Medicare Beneficiaries</u>	<u>Percent of Service Dollars</u>	<u>Total Elderly Dollars</u>	<u>SFY 2000</u>	<u>SFY 1999</u>	<u>SFY 1998</u>
								<u>% of Total Dollars</u>	<u>% of Total Dollars</u>	<u>% of Total Dollars</u>
Inpatient Hospital	\$ 19,851,551	1.3%	\$ 224,869	-	\$ 224,869	1.2%	\$ 20,076,420	1.3%	1.2%	1.1%
Outpatient Hospital	31,162,668	2.0%	783,464	-	783,464	4.3%	31,946,132	2.0%	2.2%	2.2%
Mental Hospital (> 65)	8,602,439	0.6%	3,686	-	3,686	0.0%	8,606,125	0.6%	0.6%	0.7%
Physician	50,133,695	3.3%	881,015	361	881,376	4.8%	51,015,071	3.3%	3.6%	4.1%
Clinics	11,091,768	0.7%	176,817	519	177,336	1.0%	11,269,105	0.7%	0.9%	1.2%
Nursing Facility:										
Skilled Level	366,198,705	23.8%	3,743	-	3,743	0.0%	366,202,448	23.5%	26.5%	27.8%
Intermediate Level	353,256,340	22.9%	310	-	310	0.0%	353,256,651	22.7%	23.0%	23.2%
Intermediate Care Facility: (Mentally Retarded)	18,698,319	1.2%	-	-	-	0.0%	18,698,319	1.2%	1.2%	1.1%
Dental	7,136,065	0.5%	559	-	559	0.0%	7,136,624	0.5%	0.4%	0.4%
Prescription Drugs	270,072,626	17.5%	-	-	-	0.0%	270,072,626	17.3%	13.9%	12.0%
Home Health	24,048,066	1.6%	6,017	-	6,017	0.0%	24,054,084	1.5%	1.5%	1.1%
CAP/Disabled Adult	131,628,916	8.5%	-	-	-	0.0%	131,628,916	8.4%	8.1%	7.6%
CAP/Mentally Retarded	3,364,453	0.2%	-	-	-	0.0%	3,364,453	0.2%	0.2%	0.2%
Personal Care	67,432,998	4.4%	1,311	-	1,311	0.0%	67,434,308	4.3%	3.7%	3.8%
Hospice	4,295,852	0.3%	-	-	-	0.0%	4,295,852	0.3%	0.3%	0.3%
EPSDT (Health Check)	463	0.0%	-	-	-	0.0%	463	0.0%	0.0%	0.0%
Lab & X-ray	71,684	0.0%	602	-	602	0.0%	72,286	0.0%	0.0%	0.0%
Adult Home Care	52,975,641	3.4%	3,773	29,604	33,377	0.2%	53,009,018	3.4%	3.1%	3.0%
Other Services	9,895,168	0.6%	67,941	-	67,941	0.4%	9,963,109	0.6%	0.7%	0.6%
Total Services	\$ 1,429,917,417	92.8%	2,154,106	30,484	2,184,591	12.0%	1,432,102,008	91.8%	91.0%	90.5%
Medicare, Part A Premiums	40,101,992	2.6%	19,187	-	19,187	0.1%	40,121,179	2.6%	2.9%	3.1%
Medicare, Part B Premiums	71,144,225	4.6%	1,058,808	14,991,611	16,050,419	87.9%	87,194,644	5.6%	6.1%	6.4%
HMO Premiums	78	0.0%	-	-	-	0.0%	78	0.0%	0.0%	0.0%
Total Premiums	\$ 111,246,294		1,077,995	14,991,611	16,069,606		127,315,900			
Grand Total Services & Premiums	\$ 1,541,163,711	100.0%	3,232,101	15,022,095	18,254,197	100.0%	1,559,417,908			
Medicare Crossovers**	\$ 113,212,218									
Total Elderly Recipients	149,027		13,506	34,034	47,540		196,567			
Expenditures Per Recipient*	\$ 10,342		\$ 239	\$ 441	\$ 384		\$ 7,933			

* Service Expenditure/Recipient amounts do not contain adjustments, settlements or administrative costs.

** Medicare Crossovers are amounts that Medicaid bills Medicare for those Medicaid-eligible people who are also eligible for Medicare.

Source: SFY 2000 Program Expenditure Report and 2082 Report

Table 14
North Carolina Medicaid
State Fiscal Year 2000
Expenditures for the Disabled & Blind

<u>Type of Service</u>		<u>Percent of Service</u>		<u>Percent of Service</u>		<u>Total Blind & Disabled</u>		<u>SFY 2000</u>	<u>SFY 1999</u>
		<u>Disabled</u>	<u>Dollars</u>	<u>Blind</u>	<u>Dollars</u>	<u>Dollars</u>	<u>% of Total</u>	<u>% of Total</u>	
Inpatient Hospital	\$	326,859,313	16.4%	\$ 2,445,500	9.7%	\$ 329,304,814	16.3%	17.5%	
Outpatient Hospital		113,552,563	5.7%	951,355	3.8%	114,503,918	5.7%	5.6%	
Mental Hospital (> 65)		-	0.0%	(8,581)	0.0%	(8,581)	0.0%	0.0%	
Psychiatric Hospital (< 21)		4,057,773	0.2%	2,638	0.0%	4,060,411	0.2%	0.2%	
Physician		134,109,172	6.7%	1,185,587	4.7%	135,294,759	6.7%	6.8%	
Clinics		140,018,774	7.0%	709,487	2.8%	140,728,261	7.0%	7.8%	
Nursing Facility:									
Skilled Level		56,400,310	2.8%	1,265,457	5.0%	57,665,767	2.9%	3.2%	
Intermediate Level		31,876,238	1.6%	1,362,946	5.4%	33,239,184	1.6%	1.7%	
Intermediate Care Facility: (Mentally Retarded)		353,444,238	17.8%	6,765,399	26.7%	360,209,637	17.9%	20.2%	
Dental		15,660,781	0.8%	113,251	0.4%	15,774,032	0.8%	0.8%	
Prescription Drugs		359,524,944	18.1%	3,228,032	12.8%	362,752,975	18.0%	14.9%	
Home Health		81,399,927	4.1%	1,065,056	4.2%	82,464,983	4.1%	3.9%	
CAP/Disabled Adult		39,541,357	2.0%	1,368,543	5.4%	40,909,900	2.0%	2.0%	
CAP/Mentally Retarded		174,476,063	8.8%	1,841,117	7.3%	176,317,180	8.7%	7.5%	
CAP/Children		11,980,624	0.6%	-	0.0%	11,980,624	0.6%	0.6%	
Personal Care		24,271,355	1.2%	1,124,325	4.4%	25,395,680	1.3%	1.2%	
Hospice		5,164,068	0.3%	18,669	0.1%	5,182,737	0.3%	0.3%	
EPSDT (Health Check)		1,096,275	0.1%	6,688	0.0%	1,102,963	0.1%	0.1%	
Lab & X-ray		3,050,463	0.2%	33,783	0.1%	3,084,246	0.2%	0.2%	
Adult Home Care		33,685,057	1.7%	274,069	1.1%	33,959,126	1.7%	1.6%	
Other Services		28,544,439	1.4%	232,862	0.9%	28,777,301	1.4%	1.5%	
Total Services	\$	1,938,713,734	97.4%	\$ 23,986,184	94.8%	\$ 1,962,699,918			
Medicare, Part A Premiums		6,076	0.0%	609,176	2.4%	615,252	0.0%	0.0%	
Medicare, Part B Premiums		36,666,148	1.8%	546,607	2.2%	37,212,755	1.8%	1.80%	
HMO Premiums		15,804,976	0.8%	173,001	0.7%	15,977,977	0.8%	0.7%	
Total Premiums	\$	52,477,200	2.6%	\$ 1,328,785	5.2%	\$ 53,805,984			
Grand Total Services & Premiums	\$	1,991,190,933		\$ 25,314,969		\$ 2,016,505,902			
Medicare Crossovers*	\$	70,152,844		\$ 935,897		\$ 71,088,741			
Number of Disabled/Blind Recipients		201,878		2,354		204,232			
Service Expenditures Per Recipients**	\$	9,863		\$ 10,754		\$ 9,874			

* Medicare Crossovers are amounts that are billed to Medicare for those Medicaid clients who are also eligible for Medicare.

** Service Expenditures Per Recipient does not include adjustments, settlements or administrative costs.

Table 15
North Carolina Medicaid
State Fiscal Year 2000
Expenditures for Families and Children

<u>Type of Service</u>	<u>AFDC Adults</u>	<u>% of</u>	<u>Special</u>	<u>% of</u>	<u>AFDC Children</u>	<u>% of</u>	<u>Indigent</u>	<u>% of</u>	<u>Total Families</u>	<u>% of</u>	<u>% of</u>
		<u>Service</u>	<u>Pregnant</u>	<u>Service</u>	<u>& Other Children</u>	<u>Service</u>	<u>Children</u>	<u>Service</u>	<u>& Children</u>	<u>Total</u>	<u>Total</u>
		<u>Dollars</u>	<u>Women</u>	<u>Dollars</u>	<u>Dollars</u>	<u>Dollars</u>	<u>Dollars</u>	<u>Dollars</u>	<u>Dollars</u>	<u>Dollars</u>	<u>Dollars</u>
Inpatient Hospital	\$ 86,936,029	31.5%	\$ 78,558,813	39.5%	\$ 56,890,918	21.3%	\$ 149,495,735	31.8%	\$ 371,881,495	30.7%	31.1%
Outpatient Hospital	44,491,002	16.1%	20,982,254	10.5%	23,271,583	8.7%	40,964,590	8.7%	129,709,429	10.7%	10.1%
Psychiatric Hospital (< 21)	309	0.0%	17,486	0.0%	6,212,219	2.3%	4,204,340	0.9%	10,434,355	0.9%	0.7%
Physician	51,889,218	18.8%	51,689,263	26.0%	42,276,433	15.8%	97,424,406	20.7%	243,279,320	20.1%	19.2%
Clinics	14,467,896	5.2%	23,729,119	11.9%	63,457,557	23.7%	52,966,645	11.3%	154,621,217	12.8%	12.4%
Nursing Facility:											
Skilled Level	47,059	0.0%	-	0.0%	22,268	0.0%	-	0.0%	69,327	0.0%	0.0%
Intermediate Level	795	0.0%	-	0.0%	79,337	0.0%	-	0.0%	80,132	0.0%	0.0%
Intermediate Care Facility:											
(Mentally Retarded)	31,592	0.0%	-	0.0%	2,662,769	1.0%	745,721	0.2%	3,440,082	0.3%	0.3%
Dental	8,385,023	3.0%	708,527	0.4%	8,979,778	3.4%	16,554,317	3.5%	34,627,645	2.9%	2.9%
Prescription Drugs	45,113,218	16.3%	6,074,294	3.1%	25,993,174	9.7%	44,730,647	9.5%	121,911,333	10.1%	8.8%
Home Health	3,651,202	1.3%	1,005,759	0.5%	3,342,330	1.2%	6,005,955	1.3%	14,005,246	1.2%	1.1%
CAP/Disabled Adult	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	0.0%
CAP/Mentally Retarded	-	0.0%	-	0.0%	2,041,703	0.8%	-	0.0%	2,041,703	0.2%	0.0%
CAP/Children	-	0.0%	-	0.0%	349,689	0.1%	-	0.0%	349,689	0.0%	0.0%
Personal Care	339,337	0.1%	11,562	0.0%	68,197	0.0%	77,017	0.0%	496,113	0.0%	0.0%
Hospice	183,393	0.1%	-	0.0%	33,722	0.0%	48,248	0.0%	265,363	0.0%	0.0%
EPSDT (Health Check)	106	0.0%	31,217	0.0%	8,464,735	3.2%	24,972,530	5.3%	33,468,588	2.8%	2.7%
Lab & X-ray	2,419,243	0.9%	3,042,551	1.5%	-	0.0%	2,890,961	0.6%	8,352,755	0.7%	0.7%
Adult Home Care	3,005	0.0%	-	0.0%	5,277	0.0%	3,689	0.0%	11,971	0.0%	0.0%
Other Services	10,048,396	3.6%	8,912,892	4.5%	12,909,165	4.8%	13,989,034	3.0%	45,859,486	3.8%	7.2%
Total Services	\$ 268,006,822	97.0%	194,763,735	97.9%	258,453,203	96.6%	455,073,835	96.9%	1,176,297,596	97.0%	97.0%
Medicare, Part A Premiums	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	0.0%
Medicare, Part B Premiums	243,049	0.1%	12,132	0.0%	2,867	0.0%	6,416	0.0%	264,463	0.0%	0.0%
HMO Premiums	7,942,136	2.9%	4,265,894	2.1%	9,086,903	3.4%	14,473,814	3.1%	35,768,747	3.0%	2.8%
Total Premiums	\$ 8,185,185		4,278,025		9,089,770		14,480,229		36,033,209		
Total Services & Premiums	\$ 276,192,007		199,041,760		267,542,973		469,554,064		1,212,330,805		
Medicare Crossovers*	\$ 791,103		36,102		(8,198)		7,411		826,417		
Number of Family & Child Recipients	137,190		72,766		200,188		415,152		825,296		
Service Expenditures Per Recipient**	\$ 2,013		\$ 2,735		\$ 1,336		\$ 1,131		\$ 1,469		

* Medicare Crossovers are Medicare charges that are billed to Medicaid.

** Service Expenditures per Recipient does not include adjustments, settlements, or administrative costs.

Table 16
North Carolina Medicaid
State Fiscal Year 2000
Medicaid Copayment Amounts

<u>Service</u>	<u>Copayment Amount</u>
Chiropractor visit	\$1.00
Dental visit	\$3.00
Optical service	\$2.00
Optometrist visit	\$2.00
Outpatient visit	\$3.00
Physician visit	\$3.00
Podiatrist visit	\$1.00
Prescription drug (including refills)	\$1.00