

**Table 1
North Carolina Medicaid
State Fiscal Year 2002
Federal Matching Rates**

**Benefit Costs
(7/1/01 - 9/30/01)**

	<u>Family Planning</u>		<u>All Other</u>
Federal	90.00%	Federal	62.47%
State	8.50%	State	31.90%
County	1.50%	County	<u>5.63%</u>
			100.00%

**Benefit Costs
(10/1/01 - 6/30/02)**

	<u>Family Planning</u>		<u>All Other</u>
Federal	90.00%	Federal	61.46%
State	8.50%	State	32.76%
County	1.50%	County	<u>5.78%</u>
			100.00%

**Administrative Costs
(7/1/01 - 6/30/02)**

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

***MMIS-Medicaid Management Information System**

Table 2a
North Carolina Medicaid
State Fiscal Year 2002
Medicaid Financial Eligibility Standards

GROUP	FAMILY SIZE:	1	2	3	4	5
Pregnant Women and Children under age 1		\$1,366/mo.	\$1,841/mo.	\$2,316/mo.	\$2,791/mo.	\$3,266/mo.
	Resource Limit:	None				
Children age 1 through 5	Income Limit:	\$982/mo.	\$1,324/mo.	\$1,665/mo.	\$2,007/mo.	\$2,348/mo.
	Resource Limit:	None				
Children age 6 through 18	Income Limit:	\$739/mo.	\$995/mo.	\$1,252/mo.	\$1,509/mo.	\$1,765/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:	\$739/mo.	\$995/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:	\$739/mo.	\$995/mo.			
	Resource Limit:	\$ 4,000	\$ 6,000			
	Income Limit:	\$886/mo.	\$1,194/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 2b
Financial Eligibility for Medicaid
based on
Percentage of Poverty (Annual)
SFY 2002

Family Size	100%	120%	133%	135%	185%	200%	SSI	MNIL	SA
1	\$ 8,868	\$ 10,632	\$ 11,784	\$ 11,964	\$ 16,392	\$ 17,724	\$ 6,540	\$ 2,904	\$ 13,092
2	\$ 11,940	\$ 14,328	\$ 15,888	\$ 16,128	\$ 22,092	\$ 23,880	\$ 9,804	\$ 3,804	
3	\$ 15,024		\$ 19,980		\$ 27,792	\$ 30,048			
4	\$ 18,108		\$ 24,084		\$ 33,492	\$ 36,204			
5	\$ 21,180		\$ 28,176		\$ 39,192	\$ 42,360			

Table 3
North Carolina Medicaid
State Fiscal Year 2002
Enrolled Medicaid Providers

<u>Providers</u>	<u>Number</u>
Adult Care Home Providers	2,562
Ambulance Service Providers	390
Chiropractors	1,622
Community Alternatives Program Providers (CAP/C, CAP/AIDS, CAP/DD-MR, CAP/DA)	1,116
Dental Service Providers (Dentists, Oral Surgeons, Peditadontists,Orthodontists)	3,887
Durable Medical Equipment Suppliers	3,034
Hearing Aid Suppliers	194
Home Health Agency Providers (Home Infusion Therapy, Private Duty Nursing)	905
Hospice Agency Providers	75
Hospital Providers	411
Independent Laboratory Providers	176
Independent Practitioners (Physical Therapy, Occupational Therapy, Respiratory Therapy, Speech Therapy, Audiologists)	3,583
Managed Care Programs (HMOs)	3
Mental Health Program Providers	224
Mental Health Providers	2,585
Nursing Facility Providers	1,323
Optical Service Providers and Suppliers (Opticians, Optometrists)	1,891
Other Types of Clinics (Ambulatory Surgery Centers, Birthing Centers, Dialysis Centers)	223
Personal Care Service Providers	694
Pharmacists	2,332
Physician Extenders (Nurse Midwives, Physician Assistants, Nurse Practitioners, Certified Registered Nurse Anesthetists)	2,030
Physicians	35,796
Podiatrists	504
Portable X-ray Service Providers	27
Psychiatric Facility Providers	341
Public Health Program Providers	733
Rural Health Clinic/Federally Qualified Health Center Providers	368
Total	67,029

Note: Includes 19,070 providers terminated by 6/30/2002

Table 4
North Carolina Medicaid
State Fiscal Year 2002
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 5
North Carolina Medicaid
State Fiscal Year 2001 & 2002
Sources of Medicaid Funds

	<u>2001</u>	<u>Percent</u>	<u>2002</u>	<u>Percent</u>
Federal	\$ 4,095,353,070	57.96%	\$ 4,262,533,647	57.87%
State*	\$ 1,520,067,658	21.51%	\$ 1,967,890,766	26.72%
Other State	\$ 1,061,305,314	15.02%	\$ 684,135,803	9.29%
County	\$ 299,426,810	4.24%	\$ 338,293,885	4.59%
Admin -Other DHHS	\$ 86,258,048	1.22%	\$ 96,678,025	1.31%
Admin -non-DHHS	\$ 2,943,719	0.04%	\$ 16,597,304	0.23%
Total	\$ 7,065,354,618	100.00%	\$ 7,366,129,430	100.00%

* State Appropriation of funds

Source: BD701, The Authorized Monthly Budget Report for the period ending June 29, 2002

Medicaid Cost Calculation Report, June 2002

NCAS

**Table 6
North Carolina Medicaid
State Fiscal Year 2002
Uses of Medicaid Funds**

<u>Type of Service</u>	<u>Total Expenditures</u>	<u>Percent of Total Dollars</u>	<u>Percent of Service Dollars</u>	<u>Users of Services*</u>	<u>Cost Per Service User</u>
Inpatient Hospital	862,769,349	11.71%	13.97%	203,894	\$ 4,231
Outpatient Hospital	431,017,843	5.85%	6.98%	635,226	679
Mental Hospital >65 & <21	30,542,240	0.41%	0.49%	2,436	12,538
Physician	583,795,009	7.93%	9.45%	1,192,979	489
Clinics	431,812,460	5.86%	6.99%	475,128	909
Nursing Facility (Skilled)	428,768,724	5.82%	6.94%	29,374	14,597
Nursing Facility (Intermediate)	450,131,946	6.11%	7.29%	25,491	17,658
ICF-MR	414,508,021	5.63%	6.71%	4,682	88,532
Dental	104,388,003	1.42%	1.69%	322,168	324
Prescription Drugs	1,056,158,750	14.34%	17.10%	941,491	1,122
Home Health	146,906,481	1.99%	2.38%	119,127	1,233
All Other Services	1,000,509,096	13.58%	16.20%	932,474	1,073
Subtotal, Services	\$ 5,941,307,922	80.66%	96.20%		
Medicare Premiums: (Part A, Part B, QMB, Dually Eligible)	192,420,319	2.61%	3.12%		
HMO Premium	42,181,980	0.57%	0.68%		
Subtotal Services	\$ 6,175,910,221	83.84%			
Adjustments, Cost Settlements & Transfers	323,699,394	4.39%			
Disproportionate Share Payments	441,940,322	6.00%			
Transfer to State Treasurer	109,233,788	1.48%			
Transportation-Program County Share	1,159,123	0.02%			
VR DSH non-federal share	4,713,631	0.06%			
Title XIX Program - All Dollars	7,056,656,478	95.80%			
Title XIX Administration - All Dollars	309,472,951	4.20%			
Grand Total Medicaid Related Expenditures	\$ 7,366,129,429	100.00%			
Total Recipients (unduplicated)***				1,401,449	
Total Expenditures Per Recipient (unduplicated)					\$ 5,256

* "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 to the dollar due to rounding.

SOURCE: State 2082 Report SFY 2002, PER Report YTD June 2002, BD701 Report June 2002, HCFA-64 quarterly reports covering SFY2002, MCC Report June 2002 an

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 7
North Carolina Medicaid
A History of Medicaid Expenditures
SFYs 1979-2002

<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%
2001	\$	7,065,354,618	22%
2002	\$	7,366,129,429	4%

Table 8
North Carolina Medicaid
State Fiscal Years 1979-2002
A History of Medicaid Eligibles

<u>Fiscal Years</u>	<u>Aged</u>	<u>Qualified Medicare Beneficiaries</u>	<u>Blind</u>	<u>Disabled</u>	<u>AFDC Adults & Children</u>	<u>Medicaid Pregnant Women Coverage</u>	<u>Medicaid Indigent Children Coverage</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	0.56%
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	-7.43%
1982-83	67,330	N/A	2,000	46,537	293,623	N/A	N/A	6,062	N/A	415,552	-2.28%
1983-84	65,203	N/A	1,755	46,728	288,619	N/A	N/A	5,501	N/A	407,806	-1.86%
1984-85	65,849	N/A	1,634	48,349	293,188	N/A	N/A	5,333	N/A	414,353	1.61%
1985-86	69,193	N/A	1,554	51,959	313,909	N/A	N/A	5,315	N/A	441,930	6.66%
1986-87	72,295	N/A	1,462	54,924	317,983	N/A	N/A	5,361	N/A	452,025	2.28%
1987-88	76,308	N/A	1,394	58,258	323,418	9,842	6,543	5,563	N/A	481,326	6.48%
1988-89	80,044	19,064	1,304	62,419	352,321	20,277	19,615	6,009	561	561,614	16.68%
1989-90	80,266	33,929	1,220	64,875	387,882	28,563	36,429	5,176	1,011	639,351	13.84%
1990-91	81,466	42,949	1,116	70,397	451,983	37,200	61,210	4,296	1,675	753,292	17.82%
1991-92	83,337	56,871	1,064	79,282	513,023	43,330	94,922	4,139	1,955	877,923	16.54%
1992-93	85,702	71,120	1,003	87,664	562,661	45,629	132,348	4,133	2,437	992,697	13.07%
1993-94	86,111	83,460	929	90,889	581,397	46,970	162,417	4,100	2,330	1,058,603	6.64%
1994-95	127,514	48,373	2,716	155,215	533,300	48,115	216,888	3,808	2,857	1,138,786	7.57%
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	1.32%
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	-1.70%
1999-00	154,222	33,302	2,428	205,205	330,113	60,918	421,158	4,063	9,857	1,221,266	3.78%
2000-01	154,284	36,053	2,357	212,798	450,472	57,318	424,436	4,195	12,680	1,354,593	10.92%
2001-02	153,282	39,799	2,334	221,813	456,232	53,009	444,299	4,737	14,523	1,390,028	2.62%
SFY 2001											
Percent Total Eligibles:	11.4%	2.7%	0.2%	15.7%	33.3%	4.2%	31.3%	0.3%	0.9%	100.0%	
SFY 2002											
Percent Total Eligibles:	11.0%	2.9%	0.2%	16.0%	32.8%	3.8%	32.0%	0.3%	1.0%	100.0%	

Source: Medicaid Eligibility Report, EJA752-SFY 2002

**Table 9
North Carolina Medicaid
State Fiscal Year 2002
Total Expenditures and Eligibles by County**

COUNTY NAME	2002 EST. COUNTY POPULATION	NUMBER OF MEDICAID ELIGIBLES	TOTAL EXPENDITURES	EXPENDITURE PER ELIGIBLE	PER CAPITA EXPENDITURE AMOUNT	RANKING	ELIGIBLES PER 1,000 POPULATION	% of Medicaid Eligibles by County, Based on 2002 population
ALAMANCE	133,596	20,033	84,929,900	\$ 4,239	636	80	150	15.00%
ALEXANDER	33,962	5,174	23,224,284	4,489	684	74	152	15.23%
ALLEGHANY	10,736	1,948	10,612,886	5,448	989	32	181	18.14%
ANSON	25,324	6,615	31,638,598	4,783	1,249	11	261	26.12%
ASHE	24,806	4,773	26,737,148	5,602	1,078	24	192	19.24%
AVERY	17,706	3,113	18,181,946	5,841	1,027	28	176	17.58%
BEAUFORT	45,332	10,740	50,130,770	4,668	1,106	22	237	23.69%
BERTIE	19,855	6,556	31,429,223	4,794	1,583	1	330	33.02%
BLADEN	32,417	9,980	46,452,044	4,655	1,433	5	308	30.79%
BRUNSWICK	76,904	14,727	61,449,984	4,173	799	61	191	19.15%
BUNCOMBE	208,592	34,074	166,141,908	4,876	796	63	163	16.34%
BURKE	89,025	15,212	72,318,760	4,754	812	57	171	17.09%
CABARRUS	136,312	18,381	83,925,211	4,566	616	84	135	13.48%
CALDWELL	77,622	13,664	64,020,096	4,685	825	54	176	17.60%
CAMDEN	7,024	951	4,451,374	4,681	634	81	135	13.54%
CARTERET	59,601	8,710	40,833,397	4,688	685	73	146	14.61%
CASWELL	23,713	4,452	20,266,409	4,552	855	47	188	18.77%
CATAWBA	145,113	21,442	85,066,319	3,967	586	90	148	14.78%
CHATHAM	50,954	6,330	29,883,300	4,721	586	89	124	12.42%
CHEROKEE	24,702	5,533	28,318,716	5,118	1,146	16	224	22.40%
CHOWAN	14,538	3,554	16,608,962	4,673	1,142	17	244	24.45%
CLAY	9,018	1,702	8,536,703	5,016	947	35	189	18.87%
CLEVELAND	96,808	20,161	90,204,747	4,474	932	38	208	20.83%
COLUMBUS	54,828	17,182	83,220,825	4,843	1,518	4	313	31.34%
CRAVEN	91,970	16,260	69,084,527	4,249	751	67	177	17.68%
CUMBERLAND	301,098	52,819	183,788,835	3,480	610	85	175	17.54%
CURRITUCK	18,839	2,517	9,502,168	3,775	504	94	134	13.36%
DARE	31,209	3,130	14,323,646	4,576	459	98	100	10.03%
DAVIDSON	149,104	22,731	90,970,479	4,002	610	86	152	15.25%
DAVIE	36,232	4,357	21,008,967	4,822	580	91	120	12.03%
DUPLIN	49,597	11,980	50,576,888	4,222	1,020	30	242	24.15%
DURHAM	228,086	35,151	160,672,967	4,571	704	71	154	15.41%
EDGECOMBE	54,698	17,451	67,819,408	3,886	1,240	12	319	31.90%
FORSYTH	310,331	44,540	185,747,007	4,170	599	88	144	14.35%
FRANKLIN	48,818	9,291	39,958,354	4,301	819	56	190	19.03%
GASTON	191,110	34,928	162,841,470	4,662	852	48	183	18.28%
GATES	10,560	1,816	8,658,710	4,768	820	55	172	17.20%
GRAHAM	8,033	2,237	12,243,669	5,473	1,524	2	278	27.85%
GRANVILLE	49,670	7,587	33,723,268	4,445	679	75	153	15.27%
GREENE	19,000	4,393	17,750,948	4,041	934	37	231	23.12%
GUILFORD	424,032	63,676	256,784,054	4,033	606	87	150	15.02%
HALIFAX	57,134	18,963	72,034,914	3,799	1,261	10	332	33.19%
HARNETT	93,684	18,831	74,091,209	3,935	791	65	201	20.10%
HAYWOOD	54,595	10,272	45,887,163	4,467	841	51	188	18.81%
HENDERSON	91,544	13,967	65,678,767	4,702	717	70	153	15.26%
HERTFORD	22,156	7,397	33,636,738	4,547	1,518	3	334	33.39%
HOKE	34,844	7,872	31,156,401	3,958	894	43	226	22.59%
HYDE	5,742	1,387	6,557,379	4,728	1,142	18	242	24.16%
IREDELL	127,896	17,622	71,364,273	4,050	558	92	138	13.78%
JACKSON	33,657	5,700	26,494,836	4,648	787	66	169	16.94%
JOHNSTON	127,791	22,361	84,593,209	3,783	662	77	175	17.50%
JONES	10,303	2,299	10,518,708	4,575	1,021	29	223	22.31%
LEE	49,426	9,643	41,347,286	4,288	837	52	195	19.51%
LENOIR	59,292	15,154	66,010,591	4,356	1,113	20	256	25.56%

**Table 9 (Cont.)
North Carolina Medicaid
State Fiscal Year 2002
Total Expenditures and Eligibles by County**

COUNTY NAME	NUMBER OF MEDICAID		EXPENDITURE		PER CAPITA EXPENDITURE		ELIGIBLES PER 1,000 POPULATION	% of Medicaid Eligibles by County, Based on 2002 population
	ELIGIBLES	TOTAL EXPENDITURES	PER ELIGIBLE	AMOUNT	RANKING			
LINCOLN	65,402	9,389	42,378,706	4,514	648	78	144	14.36%
MACON	30,428	5,546	24,709,269	4,455	812	58	182	18.23%
MADISON	19,780	4,079	19,754,484	4,843	999	31	206	20.62%
MARTIN	25,339	6,814	33,317,153	4,890	1,315	8	269	26.89%
MCDOWELL	42,834	7,533	35,584,534	4,724	831	53	176	17.59%
MECKLENBURG	713,780	98,401	379,030,249	3,852	531	93	138	13.79%
MITCHELL	15,874	2,867	16,520,596	5,762	1,041	27	181	18.06%
MONTGOMERY	26,965	6,105	23,448,818	3,841	870	45	226	22.64%
MOORE	76,358	11,608	48,703,488	4,196	638	79	152	15.20%
NASH	88,346	17,428	70,385,529	4,039	797	62	197	19.73%
NEW HANOVER	163,828	24,365	120,093,486	4,929	733	69	149	14.87%
NORTHAMPTON	22,008	7,105	31,222,011	4,394	1,419	6	323	32.28%
ONSLow	148,454	19,577	69,068,590	3,528	465	97	132	13.19%
ORANGE	120,952	9,543	52,142,653	5,464	431	99	79	7.89%
PAMLICO	12,848	2,704	13,658,198	5,051	1,063	25	210	21.05%
PASQUOTANK	35,028	8,263	33,486,519	4,053	956	33	236	23.59%
PENDER	42,051	8,182	36,503,321	4,461	868	46	195	19.46%
PERQUIMANS	11,522	2,593	10,548,968	4,068	916	40	225	22.50%
PERSON	36,131	6,422	33,522,573	5,220	928	39	178	17.77%
PITT	134,936	26,843	108,142,516	4,029	801	59	199	19.89%
POLK	18,828	2,408	12,661,380	5,258	672	76	128	12.79%
RANDOLPH	132,139	20,723	83,154,629	4,013	629	82	157	15.68%
RICHMOND	46,569	12,838	55,834,194	4,349	1,199	14	276	27.57%
ROBESON	124,122	41,641	169,205,126	4,063	1,363	7	335	33.55%
ROCKINGHAM	91,806	17,194	83,754,212	4,871	912	42	187	18.73%
ROWAN	131,731	22,326	92,197,174	4,130	700	72	169	16.95%
RUTHERFORD	63,394	13,676	56,267,852	4,114	888	44	216	21.57%
SAMPSON	60,928	15,747	64,325,551	4,085	1,056	26	258	25.85%
SCOTLAND	35,731	11,172	45,347,122	4,059	1,269	9	313	31.27%
STANLY	58,792	9,759	49,633,701	5,086	844	50	166	16.60%
STOKES	45,262	6,170	28,374,675	4,599	627	83	136	13.63%
SURRY	71,394	12,814	60,813,885	4,746	852	49	179	17.95%
SWAIN	13,200	3,281	14,538,739	4,431	1,101	23	249	24.86%
TRANSYLVANIA	29,349	4,644	21,909,157	4,718	747	68	158	15.82%
TYRRELL	4,149	985	4,683,111	4,754	1,129	19	237	23.74%
UNION	132,086	16,006	64,040,869	4,001	485	96	121	12.12%
VANCE	43,706	13,723	50,921,771	3,711	1,165	15	314	31.40%
WAKE	658,490	62,569	251,904,276	4,026	383	100	95	9.50%
WARREN	19,982	5,376	22,215,099	4,132	1,112	21	269	26.90%
WASHINGTON	13,598	4,049	16,856,446	4,163	1,240	13	298	29.78%
WATAUGA	42,690	3,727	20,761,732	5,571	486	95	87	8.73%
WAYNE	113,170	23,839	89,885,496	3,771	794	64	211	21.06%
WILKES	66,104	12,444	60,332,245	4,848	913	41	188	18.82%
WILSON	74,386	17,366	69,864,664	4,023	939	36	233	23.35%
YADKIN	36,587	5,370	29,236,069	5,444	799	60	147	14.68%
YANCEY	18,012	3,475	17,139,889	4,932	952	34	193	19.29%
STATE TOTAL	8,188,008	1,390,028	5,931,491,076	4,267	724	N/A	170	16.98%

Source: Medicaid Cost Calculation Fiscal YTD June 2002.

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

**Table 10
North Carolina Medicaid
State Fiscal Year 2002
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 2002 Expenditures Per Recipient</u>	<u>SFY 2001 Expenditures Per Recipient</u>	<u>01/02 Percent Change</u>
Total Elderly	\$ 1,804,543,711	29.2%	208,109	14.8%	\$ 8,671	\$ 8,687	-0.2%
Aged	1,783,081,503	28.9%	160,845	11.5%	11,086	10,799	2.7%
Medicare-Aid (MQBQ & MQBB & MQBE)	21,462,207	0.3%	47,264	3.4%	454	473	-4.1%
Total Disabled	\$ 2,590,740,655	41.9%	223,225	15.9%	\$ 11,606	\$ 10,645	9.0%
Disabled	2,562,033,729	41.5%	220,890	15.8%	11,599	10,634	9.1%
Blind	28,706,927	0.5%	2,335	0.2%	12,294	11,685	5.2%
Total Families & Children	\$ 1,753,986,603	28.4%	954,340	68.1%	\$ 1,838	\$ 1,639	12.1%
AFDC Adults (> 21)	482,050,042	7.8%	193,549	13.8%	2,491	2,225	12.0%
Medicaid Pregnant Women Coverage(MPW)	199,398,598	3.2%	56,184	4.0%	3,549	2,691	31.9%
AFDC Children & Other Children	444,999,772	7.2%	261,886	18.7%	1,699	1,655	2.6%
Medicaid Indigent Children(MIC)	627,538,191	10.2%	442,721	31.6%	1,417	1,228	15.4%
Aliens and Refugees	\$ 44,354,622	0.7%	15,775	1.1%	\$ 2,812	\$ 3,611	-22.1%
Adjustments Not Attributable To A Specific Category	\$ (17,715,369)	-0.3%					
Total Service Expenditures All Groups	\$ 6,175,910,221	100.0%	1,401,449	100.0%	\$ 4,407	\$ 4,175	5.5%

Source: SFY 2002 Program Expenditure Report

Table 11
North Carolina Medicaid
State Fiscal Year 2002
Service Expenditures For Selected Major Medical Services By Program Category

<u>Type of Service</u>	<u>Total</u>	<u>Percent of Service Dollars</u>	<u>Aged</u>	<u>MQBQ* Medicare Qualified Beneficiary</u>	<u>MQBB + MQBE Part B Premium Only</u>	<u>Blind</u>	<u>Disabled</u>	<u>Other Adult**</u>	<u>Children***</u>	<u>Aliens & Refugees</u>	<u>Adjustments Unattributable to a Specific Category</u>
Inpatient Hospital	\$ 862,769,349	14.0%	\$ 18,396,816	\$ 47,836	\$ -	\$ 1,960,701	\$ 379,581,367	\$ 197,029,507	\$ 240,156,436	\$ 31,019,786	\$ (5,423,100)
Outpatient Hospital	431,017,843	7.0%	29,690,696	111,501	-	1,192,858	165,736,319	119,496,375	115,978,863	1,327,692	(2,516,460)
Mental Hospital (> 65)	8,004,224	0.1%	7,996,700	-	-	7,937	-	-	-	-	(413)
Psychiatric Hospital (< 21)	22,538,016	0.4%	-	-	-	-	6,228,232	3,414	16,337,778	-	(31,407)
Physician	583,795,009	9.5%	55,608,315	194,602	927	1,416,988	179,865,425	149,451,841	191,170,586	9,677,810	(3,591,484)
Clinics	431,812,460	7.0%	12,566,037	60,951	(229)	893,438	196,670,592	44,621,849	178,962,734	1,353,562	(3,316,473)
Nursing Facility:											
Skilled Level	428,768,724	6.9%	361,751,228	1,037	-	1,245,704	65,734,525	196,722	56,588	15,242	(232,325)
Intermediate Level	450,131,946	7.3%	405,783,660	-	-	1,390,018	42,938,978	5,187	98,317	147	(84,361)
Intermediate Care Facility (Mentally Retarded)	414,508,021	6.7%	22,648,400	-	-	7,237,850	382,048,755	-	2,894,222	-	(321,206)
Dental	104,388,003	1.7%	7,529,959	35	-	164,565	21,147,214	20,420,462	55,131,450	147,593	(153,275)
Prescription Drugs	1,056,158,750	17.1%	350,007,150	-	-	3,881,378	497,238,355	89,311,298	115,807,554	94,529	(181,513)
Home Health	146,906,481	2.4%	29,390,531	7,077	-	1,108,936	98,734,398	6,223,915	11,884,635	31,472	(474,483)
CAP/Disabled Adult	211,395,841	3.4%	157,524,651	-	-	1,828,824	52,087,719	-	-	-	(45,353)
CAP/Mentally Retarded	251,905,349	4.1%	4,787,386	-	-	2,685,624	242,203,262	-	2,957,113	-	(728,036)
CAP/Children	20,484,920	0.3%	-	-	-	83,237	19,540,371	-	869,229	-	(7,917)
Personal Care	152,655,698	2.5%	102,591,348	-	-	1,586,511	47,012,632	1,198,087	440,405	2,866	(176,151)
Hospice	18,964,897	0.3%	10,680,237	-	-	71,209	7,886,970	330,328	32,331	-	(36,178)
EPSDT (Health Check)	44,075,153	0.7%	6,808	-	-	6,995	1,295,628	125,038	42,687,067	6,088	(52,472)
Lab & X-ray	20,415,063	0.3%	118,344	431	-	40,904	4,389,409	8,272,965	7,584,935	45,046	(36,972)
Adult Home Care	117,492,781	1.9%	71,251,484	-	-	315,242	45,942,921	6,341	19,756	165	(43,128)
High Risk Intervention Residential	48,507,274	0.8%	-	-	-	-	11,297,936	-	37,282,902	-	(73,564)
Other Services	114,612,120	1.9%	13,087,736	15,802	-	286,811	36,757,338	30,771,280	33,311,957	626,940	(245,744)
Total Services	5,941,307,922	96.2%	1,661,417,484	439,272	698	27,405,730	2,504,338,347	667,464,607	1,053,664,858	44,348,938	(17,772,013)
Medicare:											
Part A Premiums	40,897,468	0.7%	40,405,218	10,580	-	566,293	6,961	-	-	-	(91,584)
Part B Premiums	151,522,851	2.5%	81,258,287	470,051	20,541,606	646,554	48,172,190	280,206	4,502	1,228	148,227
HMO Premiums	42,181,980	0.7%	514	-	-	88,350	9,516,231	13,703,828	18,868,602	4,456	-
Total Premiums	234,602,299	3.8%	121,664,019	480,631	20,541,606	1,301,197	57,695,382	13,984,033	18,873,104	5,683	56,643
Grand Total Services and premiums	\$ 6,175,910,221		\$ 1,783,081,503	\$ 919,904	\$ 20,542,304	\$ 28,706,927	\$ 2,562,033,729	\$ 681,448,640	\$ 1,072,537,963	\$ 44,354,622	\$ (17,715,369)

Note: Grand Total Expenditures do not include adjustments processed by DMA, settlements, Disproportionate Share Costs and State and County Administration costs, and certified public funds in other agencies.

* 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.

**Table 12
North Carolina Medicaid
State Fiscal Year 2002
Expenditures For The Elderly**

<u>Type of Service</u>	<u>Aged</u>	<u>Percent of Service Dollars</u>	<u>MQBQ Medicare Qualified Beneficiary</u>	<u>MQBB + MQBE Part B Premium Only</u>	<u>Total Qualified Beneficiaries</u>	<u>Percent of Service Dollars</u>	<u>Total Elderly Dollars</u>	<u>SFY 2002 % of Total Dollars</u>	<u>SFY 2001 % of Total Dollars</u>	<u>SFY 2000 % of Total Dollars</u>
Inpatient Hospital	\$ 18,396,816	1.0%	\$ 47,836	\$ -	\$ 47,836	0.2%	\$ 18,444,652	1.0%	1.3%	1.3%
Outpatient Hospital	29,690,696	1.7%	111,501	-	111,501	0.5%	29,802,196	1.7%	1.8%	2.0%
Mental Hospital (> 65)	7,996,700	0.4%	-	-	-	0.0%	7,996,700	0.4%	0.7%	0.6%
Physician	55,608,315	3.1%	194,602	927	195,529	0.9%	55,803,843	3.1%	3.5%	3.3%
Clinics	12,566,037	0.7%	60,951	(229)	60,722	0.3%	12,626,759	0.7%	0.7%	0.7%
Nursing Facility:										
Skilled Level	361,751,228	20.3%	1,037	-	1,037	0.0%	361,752,266	20.0%	20.3%	23.5%
Intermediate Level	405,783,660	22.8%	-	-	-	0.0%	405,783,660	22.5%	23.4%	22.7%
Intermediate Care Facility (Mentally Retarded)	22,648,400	1.3%	-	-	-	0.0%	22,648,400	1.3%	1.2%	1.2%
Dental	7,529,959	0.4%	35	-	35	0.0%	7,529,994	0.4%	0.4%	0.5%
Prescription Drugs	350,007,150	19.6%	-	-	-	0.0%	350,007,150	19.4%	18.7%	17.3%
Home Health	29,390,531	1.6%	7,077	-	7,077	0.0%	29,397,608	1.6%	1.5%	1.5%
CAP/Disabled Adult	157,524,651	8.8%	-	-	-	0.0%	157,524,651	8.7%	8.7%	8.4%
CAP/Mentally Retarded	4,787,386	0.3%	-	-	-	0.0%	4,787,386	0.3%	0.3%	0.2%
Personal Care	102,591,348	5.8%	-	-	-	0.0%	102,591,348	5.7%	4.8%	4.3%
Hospice	10,680,237	0.6%	-	-	-	0.0%	10,680,237	0.6%	0.4%	0.3%
EPSDT (Health Check)	6,808	0.0%	-	-	-	0.0%	6,808	0.0%	0.0%	0.0%
Lab & X-ray	118,344	0.0%	431	-	431	0.0%	118,775	0.0%	0.0%	0.0%
Adult Home Care	71,251,484	4.0%	-	-	-	0.0%	71,251,484	3.9%	3.9%	3.4%
High Risk Intervention Residential	-	0.0%	-	-	-	0.0%	-	0.0%	0.0%	-
Other Services	13,087,736	0.7%	15,802	-	15,802	0.1%	13,103,539	0.7%	0.7%	0.6%
Total Services	\$1,661,417,484	93.2%	439,272	698	439,970	2.0%	1,661,857,454	92.1%	92.2%	91.8%
Medicare:										
Part A Premiums	40,405,218	2.3%	10,580	-	10,580	0.0%	40,415,798	2.2%	2.3%	2.6%
Part B Premiums	81,258,287	4.6%	470,051	20,541,606	21,011,657	97.9%	102,269,945	5.7%	5.5%	5.6%
HMO Premiums	514	0.0%	-	-	-	0.0%	514	0.0%	0.0%	0.0%
Total Premiums	\$ 121,664,019	6.8%	480,631	20,541,606	21,022,237	98.0%	142,686,256	7.9%	7.8%	8.2%
Grand Total Services and premiums	\$1,783,081,503	100.0%	919,904	20,542,304	21,462,207	100.0%	1,804,543,711	100.0%	100.0%	100.0%
Medicare Crossovers**	\$ 118,000,902									
Total Elderly Recipients	160,845		6,863	40,401	47,264		208,109			
Expenditures Per Recipient*	\$ 11,086		\$ 134	\$ 508	\$ 454		\$ 8,671			

* 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 2002 Program Expenditure Report

**Table 13
North Carolina Medicaid
State Fiscal Year 2002
Expenditures for the Disabled & Blind**

<u>Type of Service</u>	<u>Disabled</u>	<u>Percent of Service Dollars</u>	<u>Blind</u>	<u>Percent of Service Dollars</u>	<u>Total Blind & Disabled Dollars</u>	<u>2002 % of Total Dollars</u>	<u>2001 % of Total Dollars</u>
Inpatient Hospital	\$ 379,581,367	14.8%	\$ 1,960,701	6.8%	\$ 381,542,068	14.7%	15.5%
Outpatient Hospital	165,736,319	6.5%	1,192,858	4.2%	166,929,177	6.4%	6.0%
Mental Hospital (> 65)	-	0.0%	7,937	0.0%	7,937	0.0%	0.0%
Psychiatric Hospital (< 21)	6,228,232	0.2%	-	0.0%	6,228,232	0.2%	0.2%
Physician	179,865,425	7.0%	1,416,988	4.9%	181,282,414	7.0%	7.3%
Clinics	196,670,592	7.7%	893,438	3.1%	197,564,029	7.6%	6.9%
Nursing Facility:							
Skilled Level	65,734,525	2.6%	1,245,704	4.3%	66,980,229	2.6%	2.6%
Intermediate Level	42,938,978	1.7%	1,390,018	4.8%	44,328,996	1.7%	1.7%
Intermediate Care Facility: (Mentally Retarded)	382,048,755	14.9%	7,237,850	25.2%	389,286,605	15.0%	16.2%
Dental	21,147,214	0.8%	164,565	0.6%	21,311,780	0.8%	0.8%
Prescription Drugs	497,238,355	19.4%	3,881,378	13.5%	501,119,732	19.3%	19.3%
Home Health	98,734,398	3.9%	1,108,936	3.9%	99,843,334	3.9%	3.7%
CAP/Disabled Adult	52,087,719	2.0%	1,828,824	6.4%	53,916,543	2.1%	2.1%
CAP/Mentally Retarded	242,203,262	9.5%	2,685,624	9.4%	244,888,887	9.5%	9.4%
CAP/Children	19,540,371	0.8%	83,237	0.3%	19,623,607	0.8%	0.7%
Personal Care	47,012,632	1.8%	1,586,511	5.5%	48,599,143	1.9%	1.4%
Hospice	7,886,970	0.3%	71,209	0.2%	7,958,180	0.3%	0.3%
EPSDT (Health Check)	1,295,628	0.1%	6,995	0.0%	1,302,623	0.1%	0.0%
Lab & X-ray	4,389,409	0.2%	40,904	0.1%	4,430,313	0.2%	0.2%
Adult Home Care	45,942,921	1.8%	315,242	1.1%	46,258,163	1.8%	1.8%
High Risk Intervention Residential	11,297,936	0.4%	-	0.0%	11,297,936	0.4%	0.1%
Other Services	36,757,338	1.4%	286,811	1.0%	37,044,148	1.4%	1.4%
Total Services	\$ 2,504,338,347	97.7%	\$ 27,405,730	95.5%	2,531,744,077		
Medicare, Part A Premiums	6,961	0.0%	566,293	2.0%	573,254	0.0%	0.0%
Medicare, Part B Premiums	48,172,190	1.9%	646,554	2.3%	48,818,743	1.9%	1.8%
HMO Premiums	9,516,231	0.4%	88,350	0.3%	9,604,581	0.4%	0.8%
Total Premiums	57,695,382	2.3%	1,301,197	4.5%	58,996,578		
Grand Total Services & Premiums	\$ 2,562,033,729	100.0%	\$ 28,706,927	100.0%	2,590,740,655		
Medicare Crossovers*	\$ 80,082,319		\$ 971,528		\$ 81,053,847		
Number of Disabled/Blind Recipients	220,890		2,335		223,225		
Service Expenditures Per Recipients**	\$ 11,599		\$ 12,294		11,606		

* 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 14
North Carolina Medicaid
State Fiscal Year 2002
Expenditures for Families and Children

<u>Type of Service</u>	<u>AFDC Adults</u>	<u>% of Service Dollars</u>	<u>Special Pregnant Women</u>	<u>% of Service Dollars</u>	<u>AFDC Children & Other Children</u>	<u>% of Service Dollars</u>	<u>Indigent Children</u>	<u>% of Service Dollars</u>	<u>Total Families & Children Dollars</u>	<u>SFY 2002 % of Total Dollars</u>	<u>SFY 2001 % of Total Dollars</u>
Inpatient Hospital	\$ 121,164,078	25.1%	\$ 75,865,429	38.0%	\$ 66,570,973	15.0%	\$ 173,585,463	27.7%	\$ 437,185,943	24.9%	27.8%
Outpatient Hospital	97,037,723	20.1%	22,458,653	11.3%	48,126,610	10.8%	67,852,252	10.8%	235,475,238	13.4%	12.1%
Psychiatric Hospital (< 21)	-	0.0%	3,414	0.0%	9,766,868	2.2%	6,570,909	1.0%	16,341,191	0.9%	0.7%
Physician	95,696,341	19.9%	53,755,500	27.0%	66,563,378	15.0%	124,607,207	19.9%	340,622,427	19.4%	20.9%
Clinics	23,741,887	4.9%	20,879,961	10.5%	108,339,168	24.3%	70,623,566	11.3%	223,584,583	12.7%	11.6%
Nursing Facility:											
Skilled Level	196,722	0.0%	-	0.0%	8,752	0.0%	47,836	0.0%	253,311	0.0%	0.0%
Intermediate Level	5,187	0.0%	-	0.0%	81,673	0.0%	16,644	0.0%	103,504	0.0%	0.0%
Intermediate Care Facility: (Mentally Retarded)	-	0.0%	-	0.0%	2,049,371	0.5%	844,851	0.1%	2,894,222	0.2%	0.2%
Dental	19,439,142	4.0%	981,320	0.5%	22,882,370	5.1%	32,249,080	5.1%	75,551,912	4.3%	3.6%
Prescription Drugs	82,465,450	17.1%	6,845,848	3.4%	48,052,293	10.8%	67,755,260	10.8%	205,118,852	11.7%	11.5%
Home Health	5,423,124	1.1%	800,791	0.4%	4,211,809	0.9%	7,672,826	1.2%	18,108,550	1.0%	1.0%
CAP/Disabled Adult	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	0.0%
CAP/Mentally Retarded	-	0.0%	-	0.0%	2,956,979	0.7%	134	0.0%	2,957,113	0.2%	0.2%
CAP/Children	-	0.0%	-	0.0%	869,229	0.2%	-	0.0%	869,229	0.0%	0.0%
Personal Care	1,171,608	0.2%	26,478	0.0%	231,172	0.1%	209,232	0.0%	1,638,491	0.1%	0.1%
Hospice	330,328	0.1%	-	0.0%	1,085	0.0%	31,247	0.0%	362,659	0.0%	0.0%
EPSDT (Health Check)	49,662	0.0%	75,376	0.0%	12,017,619	2.7%	30,669,448	4.9%	42,812,105	2.4%	2.5%
Lab & X-ray	5,001,811	1.0%	3,271,155	1.6%	2,241,960	0.5%	5,342,975	0.9%	15,857,900	0.9%	1.0%
Adult Home Care	6,341	0.0%	-	0.0%	14,563	0.0%	5,193	0.0%	26,097	0.0%	0.0%
High Risk Intervention Residential	-	0.0%	-	0.0%	25,007,007	5.6%	12,275,895	2.0%	37,282,902	2.1%	0.3%
Other Services	19,336,493	4.0%	11,434,787	5.7%	16,772,985	3.8%	16,538,973	2.6%	64,083,237	3.7%	3.5%
Total Services	471,065,895	97.7%	196,398,712	98.5%	436,765,866	98.1%	616,898,992	98.3%	1,721,129,465	98.1%	96.9%
Medicare, Part A Premiums	-	0.0%	-	-	-	0.0%	-	0.0%	-	0.0%	0.0%
Medicare, Part B Premiums	267,444	0.1%	12,762	0.0%	3,266	0.0%	1,236	0.0%	284,708	0.0%	0.0%
HMO Premiums	10,716,703	2.2%	2,987,124	1.5%	8,230,640	1.8%	10,637,962	1.7%	32,572,430	1.9%	3.1%
Total Premiums	10,984,147		2,999,886		8,233,906		10,639,199		32,857,137		
Total Services & Premiums	482,050,042		199,398,598		444,999,772		627,538,191		1,753,986,603		
Medicare Crossovers*	\$ 1,020,234		\$ 66,080		\$ 9,174		\$ (58,199)		\$ 1,037,288		
Number of Family & Child Recipients	193,549		56,184		261,886		442,721		954,340		
Service Expenditures Per Recipient**	\$ 2,491		\$ 3,549		\$ 1,699		\$ 1,417		\$ 1,838		

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

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

Table 15
North Carolina Medicaid
State Fiscal Year 2002
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 drugs (including refills):	
Generic & Insulin	\$1.00
Brand Name	\$3.00