

**Table 1
North Carolina Medicaid
State Fiscal Year 2003
Federal Matching Rates**

**Benefit Costs
(7/1/02 - 9/30/02)**

	<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%

**Benefit Costs
(10/1/02 - 3/31/03)**

	<u>Family Planning</u>		<u>All Other</u>
Federal	90.00%	Federal	62.56%
State	8.50%	State	31.82%
County	1.50%	County	<u>5.62%</u>

**Benefit Costs
(04/1/03 - 6/30/03)**

	<u>Family Planning</u>		<u>All Other</u>
Federal	90.00%	Federal	65.51%
State	8.50%	State	29.32%
County	1.50%	County	5.17%

**Administrative Costs
(7/1/02 - 6/30/03)**

	<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 2003
Medicaid Financial Eligibility Standards

GROUP	FAMILY SIZE:	1	2	3	4	5
Pregnant Women and Children under age 1		\$1,385/mo	\$1,869/mo.	\$2,353/mo.	\$2,837/mo.	\$3,321/mo.
	Resource Limit:	None				
Children age 1 through 5	Income Limit:	\$996/mo.	\$1,344/mo.	\$1,692/mo.	\$2,040/mo	\$2,388/mo.
	Resource Limit:	None				
Children age 6 through 18	Income Limit:	\$749/mo.	\$1,010/mo.	\$1,272/mo.	\$1,534/mo.	\$1,795/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:	\$749/mo.	\$1,010/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. * Medicaid pays Medicare Part B premiums only (Federal share of payment is 100%).	Income Limit:	\$749/mo.	\$1,010/mo.			
	Resource Limit:	\$ 4,000	\$ 6,000			
	Income Limit:	\$898/mo.	\$1,212/mo.			
	Resource Limit:	\$ 4,000	\$ 6,000			
	Income Limit:	\$1,011/mo.	\$1,364/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			

Note: The Federal Poverty Level amounts change each year effective April. The above figures were in effect at the end of SFY 2003

Table2b
Financial Eligibility for Medicaid
based on
Percentage of Poverty (Annual)
SFY 2003

Family Siz	100%	120%	133%	135%	185%	200%	SSI	MNIL	SA
1	\$ 8,988	\$10,776	\$11,952	\$12,012	\$16,620	\$17,964	\$6,624	\$2,904	\$13,524
2	\$12,120	\$14,544	\$16,128	\$16,368	\$22,428	\$24,240	\$9,948	\$3,804	
3	\$15,264		\$20,304		\$28,326	\$30,528			
4	\$18,408		\$24,480		\$34,044	\$36,804			
5	\$21,540		\$28,656		\$39,852	\$43,080			

Note: The Federal Poverty Level amounts change each year effective April. The above figures were in effect at the end of SFY 2003

Table 3
North Carolina Medicaid
State Fiscal Year 2003
Enrolled Medicaid Providers

Providers	Number
Adult Care Home Providers	2,634
Ambulance Service Providers	407
Chiropractors	1,712
Community Alternatives Program Providers (CAP/C, CAP/AIDS, CAP/DD-MR, CAP/DA)	1,230
Dental Service Providers (Dentists, Oral Surgeons, Pedodontists, Orthodontists)	4,075
Durable Medical Equipment Suppliers	3,266
Health Maintenance Organizations (HMOs)	1
Hearing Aid Suppliers	196
Home Health Agency Providers (Home Infusion Therapy, Private Duty Nursing)	966
Hospice Agency Providers	79
Hospital Providers	888
Independent Laboratory Providers	201
Independent Practitioners (Physical Therapy, Occupational Therapy, Respiratory Therapy, Speech Therapy, Audiologists)	3,818
Local Education Agencies (LEAs)	105
Mental Health Program Providers	168
Mental Health Providers	3,026
Nursing Facility Providers	1,352
Optical Service Providers and Suppliers (Opticians, Optometrists)	1,880
Other Types of Clinics (Ambulatory Surgery Centers, Birthing Centers, Dialysis Centers)	237
Personal Care Service Providers	793
Pharmacists	2,393
Physician Extenders (Nurse Midwives, Nurse Practitioners, Certified Registered Nurse Anesthetists)	2,326
Physicians	36,869
Podiatrists	513
Portable X-ray Service Providers	27
Psychiatric Facility Providers	551
Public Health Program Providers	616
Rural Health Clinic/Federally Qualified Health Center Providers	353
Total	70,682

Note: This is an unduplicated count of any provider enrolled during the year. Physicians may be counted individually and/or as a group. Includes 22,446 providers terminated by 6/30/2003

Table 4
North Carolina Medicaid
State Fiscal Year 2003
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 Physical, Occupational and Speech Therapy
- 28 Physicians
- 29 Podiatrists
- 30 Prepaid Health Plan Services
- 31 Prescription Drugs
- 32 Private Duty Nursing Services
- 33 Prosthetics and Orthotics (children)
- 34 Rehabilitative Services:
 (under the auspices of area mental health programs)
- 35 Respiratory Therapy for Children
- 36 Rural Health Clinics
- 37 Specialty Hospitals
- 38 Transportation

Table 5
North Carolina Medicaid
State Fiscal Year 2002 & 2003
Sources of Medicaid Funds

	<u>2002</u>	<u>Percent</u>	<u>2003</u>	<u>Percent</u>
Federal	\$ 4,262,533,647	57.87%	\$ 4,477,523,570	60.18%
State*	\$ 1,967,890,766	26.72%	\$ 2,039,415,957	27.41%
Other State	\$ 684,135,803	9.29%	\$ 458,210,905	6.16%
County	\$ 338,293,885	4.59%	\$ 350,301,574	4.71%
Admin - Other DHHS Divisions	\$ 96,678,025	1.31%	\$ 95,494,421	1.28%
Admin - Non-DHHS State Agencies	\$ 16,597,304	0.23%	\$ 18,811,502	0.25%
Total	\$ 7,366,129,430	100.00%	\$ 7,439,757,929	100.00%

* State Appropriation of funds

Source: BD701, the Authorized Monthly Budget Report for the period ending June 29, 2003
Medicaid Cost Calculation Report, June 2003
NCAS

**Table 6
North Carolina Medicaid
State Fiscal Year 2003
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	\$ 874,533,504	11.75%	13.27%	210,463	\$ 4,155
Outpatient Hospital	538,024,825	7.23%	8.17%	670,519	802
Mental Hospital >65 & <21	32,761,633	0.44%	0.50%	2,561	12,793
Physician	572,206,549	7.69%	8.68%	1,278,204	448
Clinics	499,919,525	6.72%	7.59%	484,052	1,033
Nursing Facility (Skilled)	448,975,984	6.03%	6.81%	31,666	14,178
Nursing Facility (Intermediate)	419,208,704	5.63%	6.36%	25,027	16,750
ICF-MR	410,557,951	5.52%	6.23%	4,601	89,232
Dental	129,107,695	1.74%	1.96%	353,626	365
Prescription Drugs	1,203,809,178	16.18%	18.27%	998,701	1,205
Home Health	157,985,231	2.12%	2.40%	143,066	1,104
All Other Services	1,067,105,690	14.34%	16.20%	974,975	1,094
Subtotal, Services	\$ 6,354,196,467	85.41%	96.44%		
Medicare Premiums: (Part A, Part B, QMB, Dually Eligible)	210,394,375	2.83%	3.19%	274,640	
HMO Premium	24,476,991	0.33%	0.37%	34,816	
Subtotal Services	\$ 6,589,067,833	88.57%	100.00%	1,454,661	\$ 4,530
Adjustments, Cost Settlements & Transfers	86,455,622	1.16%			
Disproportionate Share Payments**	340,835,304	4.58%			
Transfer to State Treasurer	108,510,735	1.46%			
Transportation-Program County Share	1,199,942	0.02%			
VR DSH Non-federal Share	3,420,366	0.05%			
Title XIX Program - All Dollars	\$ 7,129,489,802	95.83%			
Title XIX Administration - All Dollars	310,268,127	4.17%			
Grand Total Medicaid Related Expenditures	\$ 7,439,757,929	100.00%			
Total Recipients (unduplicated)***				1,454,661	
Total Expenditures Per Recipient (unduplicated)					\$ 5,114

* "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. There were 230 unrecognized Medicaid recipients excluded from the total recipients for which the eligibility status could not be established when the claim was paid.

Note: Numbers may not add to the dollar due to rounding.

SOURCE: State 2082 Report -SFY 2003, PER Report YTD June 2003, BD701 Report June 2003, HCFA-64 quarterly reports covering SFY 2003, MCC Report June 2003 and NCSA.

Table 7
North Carolina Medicaid
A History of Medicaid Expenditures
SFYs 1979-2003

<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%
2003	\$	7,439,757,929	1%

**Table 8
North Carolina Medicaid
State Fiscal Years 1979-2003
A History of Total Unduplicated 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%
2002-03	151,672	41,030	2,226	228,159	478,842	51,111	474,557	4,881	14,805	1,447,283	4.12%
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%	
SFY 2003											
Percent Total Eligibles:	10.5%	2.8%	0.2%	15.8%	33.1%	3.5%	32.8%	0.3%	1.0%	100.0%	

Source: Medicaid Eligibility Report, EJA752-SFY 2003

Table 9
North Carolina Medicaid
State Fiscal Year 2003
Eligibles and Program Payments for Which the County is Responsible for Its Computable Share*

COUNTY NAME	2002 EST. COUNTY POPULATION	NUMBER OF MEDICAID ELIGIBLES**	EXPENDITURE		PER CAPITA EXPENDITURE		ELIGIBLES PER 1,000 POPULATION	% OF MEDICAID ELIGIBLES BY COUNTY, BASED ON 2002 POPULATION
			TOTAL EXPENDITURES	PER ELIGIBLE	AMOUNT	RANKING		
ALAMANCE	136,144	20,426	\$ 93,701,732	\$ 4,587	\$ 688	79	150	15.00%
ALEXANDER	34,224	5,542	23,923,049	4,317	699	75	162	16.19%
ALLEGHANY	10,860	2,030	11,539,974	5,685	1,063	26	187	18.69%
ANSON	25,358	6,778	35,094,593	5,178	1,384	9	267	26.73%
ASHE	24,734	4,850	28,008,196	5,775	1,132	21	196	19.61%
AVERY	17,946	3,120	18,373,807	5,889	1,024	30	174	17.39%
BEAUFORT	45,672	10,781	56,691,681	5,258	1,241	16	236	23.61%
BERTIE	19,807	6,541	32,864,910	5,024	1,659	1	330	33.02%
BLADEN	32,656	10,005	48,890,356	4,887	1,497	5	306	30.64%
BRUNSWICK	79,054	15,533	65,762,821	4,234	832	59	196	19.65%
BUNCOMBE	210,550	34,942	172,167,405	4,927	818	61	166	16.60%
BURKE	89,354	16,095	79,556,589	4,943	890	48	180	18.01%
CABARRUS	140,176	19,996	86,000,764	4,301	614	91	143	14.26%
CALDWELL	78,234	14,079	66,285,844	4,708	847	52	180	18.00%
CAMDEN	7,328	999	5,098,429	5,104	696	77	136	13.63%
CARTERET	60,064	9,091	45,207,717	4,973	753	70	151	15.14%
CASWELL	23,718	4,640	21,948,254	4,730	925	44	196	19.56%
CATAWBA	146,548	23,178	92,498,626	3,991	631	87	158	15.82%
CHATHAM	52,582	6,774	32,659,157	4,821	621	90	129	12.88%
CHEROKEE	25,080	5,630	30,617,295	5,438	1,221	17	224	22.45%
CHOWAN	14,304	3,614	17,142,809	4,743	1,198	18	253	25.27%
CLAY	9,216	1,763	8,873,565	5,033	963	40	191	19.13%
CLEVELAND	97,271	21,106	98,088,834	4,647	1,008	33	217	21.70%
COLUMBUS	54,890	17,388	85,703,863	4,929	1,561	2	317	31.68%
CRAVEN	91,902	16,197	71,620,697	4,422	779	66	176	17.62%
CUMBERLAND	305,851	54,397	191,962,272	3,529	628	88	178	17.79%
CURRITUCK	19,632	2,615	10,032,625	3,837	511	94	133	13.32%
DARE	32,177	3,245	16,384,302	5,049	509	95	101	10.08%
DAVIDSON	150,799	23,878	98,191,706	4,112	651	82	158	15.83%
DAVIE	36,770	4,679	20,788,072	4,443	565	92	127	12.73%
DUPLIN	50,612	12,233	51,422,467	4,204	1,016	32	242	24.17%
DURHAM	233,548	35,153	173,049,084	4,923	741	72	151	15.05%
EDGECOMBE	54,945	17,484	68,753,627	3,932	1,251	15	318	31.82%
FORSYTH	314,853	47,194	202,125,578	4,283	642	84	150	14.99%
FRANKLIN	50,326	9,821	42,007,939	4,277	835	57	195	19.51%
GASTON	191,874	36,661	184,729,733	5,039	963	41	191	19.11%
GATES	10,708	1,947	8,734,574	4,486	816	62	182	18.18%
GRAHAM	8,030	2,247	12,484,152	5,556	1,555	3	280	27.98%
GRANVILLE	51,540	8,289	35,100,324	4,235	681	81	161	16.08%
GREENE	19,471	4,598	19,404,516	4,220	997	35	236	23.61%
GUILFORD	428,794	66,352	267,884,116	4,037	625	89	155	15.47%
HALIFAX	57,105	18,892	77,464,157	4,100	1,357	10	331	33.08%
HARNETT	96,152	19,400	76,077,815	3,922	791	65	202	20.18%
HAYWOOD	55,114	10,373	48,720,488	4,697	884	49	188	18.82%
HENDERSON	92,988	14,119	69,693,888	4,936	749	71	152	15.18%
HERTFORD	23,863	7,384	33,837,194	4,583	1,418	7	309	30.94%
HOKE	36,000	8,394	30,389,413	3,620	844	53	233	23.32%
HYDE	5,846	1,419	7,567,353	5,333	1,294	12	243	24.27%
IREDELL	130,362	19,025	82,634,016	4,343	634	86	146	14.59%
JACKSON	34,132	5,752	25,796,088	4,485	756	69	169	16.85%
JOHNSTON	132,660	23,796	97,306,659	4,089	734	73	179	17.94%
JONES	10,243	2,268	10,858,494	4,788	1,060	27	221	22.14%
LEE	49,810	10,068	39,910,944	3,964	801	64	202	20.21%
LENOIR	59,294	15,484	66,982,445	4,326	1,130	22	261	26.11%

**Table 9 (Cont.)
North Carolina Medicaid
State Fiscal Year 2003
Eligibles and Program Payments for Which the County is Responsible for Its Computable Share***

COUNTY NAME	2003 EST. COUNTY POPULATION	NUMBER OF MEDICAID ELIGIBLES**	TOTAL EXPENDITURES	EXPENDITURE PER ELIGIBLE	PER CAPITA EXPENDITURE		ELIGIBLES PER 1,000 POPULATION	% OF MEDICAID ELIGIBLES BY COUNTY, BASED ON 2002 POPULATION
					AMOUNT	RANKING		
LINCOLN	66,598	10,028	46,393,121	4,626	697	76	151	15.06%
MACON	30,936	5,813	25,881,784	4,452	837	55	188	18.79%
MADISON	19,856	4,206	20,920,288	4,974	1,054	28	212	21.18%
MARTIN	25,082	6,823	34,823,824	5,104	1,388	8	272	27.20%
MCDOWELL	42,960	7,865	36,455,119	4,635	849	51	183	18.31%
MECKLENBURG	734,365	106,699	402,444,677	3,772	548	93	145	14.53%
MITCHELL	15,934	3,119	16,576,326	5,315	1,040	29	196	19.57%
MONTGOMERY	27,282	6,390	25,269,172	3,954	926	43	234	23.42%
MOORE	77,424	11,917	49,824,439	4,181	644	83	154	15.39%
NASH	89,185	18,227	78,067,679	4,283	875	50	204	20.44%
NEW HANOVER	166,072	25,520	128,263,277	5,026	772	68	154	15.37%
NORTHAMPTON	21,773	7,045	33,392,663	4,740	1,534	4	324	32.36%
ONslow	152,424	19,879	71,117,478	3,578	467	98	130	13.04%
ORANGE	119,746	10,098	57,054,740	5,650	476	97	84	8.43%
PAMLICO	13,024	2,642	13,281,721	5,027	1,020	31	203	20.29%
PASQUOTANK	35,816	8,440	35,700,807	4,230	997	34	236	23.56%
PENDER	43,135	8,345	36,346,309	4,355	843	54	193	19.35%
PERQUIMANS	11,607	2,633	10,540,651	4,003	908	46	227	22.68%
PERSON	36,764	6,944	35,875,128	5,166	976	38	189	18.89%
PITT	137,901	26,338	114,729,404	4,356	832	58	191	19.10%
POLK	18,866	2,439	13,115,225	5,377	695	78	129	12.93%
RANDOLPH	133,836	22,643	85,633,422	3,782	640	85	169	16.92%
RICHMOND	46,721	13,209	58,481,715	4,427	1,252	14	283	28.27%
ROBESON	125,206	42,622	180,558,193	4,236	1,442	6	340	34.04%
ROCKINGHAM	92,589	18,040	86,963,901	4,821	939	42	195	19.48%
ROWAN	132,921	22,798	94,210,540	4,132	709	74	172	17.15%
RUTHERFORD	63,345	13,679	58,162,831	4,252	918	45	216	21.59%
SAMPSON	61,768	15,983	69,215,419	4,331	1,121	23	259	25.88%
SCOTLAND	35,766	11,476	47,290,154	4,121	1,322	11	321	32.09%
STANLY	58,974	10,142	49,259,734	4,857	835	56	172	17.20%
STOKES	45,355	6,562	30,992,014	4,723	683	80	145	14.47%
SURRY	72,028	13,657	65,115,023	4,768	904	47	190	18.96%
SWAIN	13,287	3,395	14,567,400	4,291	1,096	25	256	25.55%
TRANSYLVANIA	29,400	4,870	22,889,308	4,700	779	67	166	16.56%
TYRRELL	4,170	956	4,655,963	4,870	1,117	24	229	22.93%
UNION	138,928	17,050	69,084,906	4,052	497	96	123	12.27%
VANCE	44,378	14,346	51,172,741	3,567	1,153	19	323	32.33%
WAKE	679,510	68,469	288,150,653	4,208	424	100	101	10.08%
WARREN	20,000	5,584	22,680,808	4,062	1,134	20	279	27.92%
WASHINGTON	13,600	4,133	17,458,676	4,224	1,284	13	304	30.39%
WATAUGA	42,892	3,745	20,009,369	5,343	467	99	87	8.73%
WAYNE	113,844	24,544	94,369,663	3,845	829	60	216	21.56%
WILKES	66,660	13,052	65,118,252	4,989	977	37	196	19.58%
WILSON	75,374	17,548	73,796,901	4,205	979	36	233	23.28%
YADKIN	36,958	5,567	29,634,023	5,323	802	63	151	15.06%
YANCEY	17,944	3,538	17,466,114	4,937	973	39	197	19.72%
STATE TOTAL	8,323,375	1,447,283	\$ 6,301,626,561	\$ 4,354	\$ 757	N/A	174	17.39%

Source: Medicaid Cost Calculation Fiscal YTD June 2003.

Notes:

* Program payments do not include a total of approximately \$502 million in Disproportionate Share Hospital for which there is no county share and all administration expenditures.

** Eligibles is a statewide unduplicated count indicating only eligibility in the last county of residence during the fiscal year

**Table 10
North Carolina Medicaid
State Fiscal Year 2003
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 2003 Expenditures Per Recipient</u>	<u>SFY 2002 Expenditures Per Recipient</u>	<u>02/03 Percent Change</u>
Total Elderly	\$ 1,807,717,487	27.4%	202,377	13.9%	\$ 8,932	\$ 8,671	3.0%
Aged	1,780,878,696	27.0%	162,015	11.1%	10,992	11,086	-0.8%
Medicare-Aid (MQBQ & MQBB & MQBE)	26,838,791	0.4%	40,362	2.8%	665	454	46.4%
Total Disabled	\$ 2,779,255,514	42.2%	232,166	16.0%	\$ 11,971	\$ 11,606	3.1%
Disabled	2,750,631,537	41.7%	229,900	15.8%	11,964	11,599	3.2%
Blind	28,623,976	0.4%	2,266	0.2%	12,632	12,294	2.7%
Total Families & Children	\$ 1,973,688,839	30.0%	1,003,271	69.0%	\$ 1,967	\$ 1,838	7.0%
AFDC Adults (> 21)	559,308,156	8.5%	204,789	14.1%	2,731	2,491	9.7%
Medicaid Pregnant Women Coverage (MPW)	199,448,052	3.0%	51,889	3.6%	3,844	3,549	8.3%
AFDC Children & Other Children	511,206,017	7.8%	273,233	18.8%	1,871	1,699	10.1%
Medicaid Indigent Children (MIC)	701,446,363	10.6%	473,178	32.5%	1,482	1,417	4.6%
Breast and Cervical	2,280,250	0.0%	182	0.0%	12,529		
Aliens and Refugees	\$ 46,080,274	0.7%	16,847	1.2%	\$ 2,735	\$ 2,812	-2.7%
Adjustments Not Attributable to a Specific Category	\$ (17,674,281)	-0.3%					
Total Service Expenditures All Groups	\$ 6,589,067,833	100.0%	1,454,661	100.0%	\$ 4,530	\$ 4,407	2.8%

Source: SFY 2003 Program Expenditure Report

**Table 11
North Carolina Medicaid
State Fiscal Year 2003
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>Breast Cervical</u>	<u>Children***</u>	<u>Alien & Refugees</u>	<u>Adjustments Unattributable to a Specific Category</u>
Inpatient Hospital	\$ 874,533,504	13.3%	\$ 19,159,016	\$ 38,199	\$ -	\$ 1,831,369	\$ 385,724,943	\$ 203,821,966	\$ 225,326	\$ 237,269,155	\$ 31,243,980	\$ (4,780,450)
Outpatient Hospital	538,024,825	8.2%	34,939,624	114,406	519,939	1,276,835	200,167,849	153,130,520	1,109,155	147,227,607	2,006,212	(2,467,323)
Mental Hospital (> 65)	7,274,997	0.1%	7,262,458	840	-	-	16,740	-	-	-	-	(5,042)
Psychiatric Hospital (< 21)	25,486,637	0.4%	-	-	-	-	7,080,671	18,945	-	18,405,165	4,318	(22,462)
Physician	572,206,549	8.7%	29,457,183	80,439	232,100	1,156,850	169,798,726	159,205,471	667,813	204,833,285	10,156,101	(3,381,418)
Clinics	499,919,525	7.6%	10,008,226	24,518	41,055	1,038,268	234,799,554	45,860,419	12,751	211,010,466	1,389,770	(4,265,503)
Nursing Facility:												
Skilled Level	448,975,984	6.8%	377,718,999	-	-	1,401,695	69,866,151	239,616	-	58,586	66	(309,129)
Intermediate Level	419,208,704	6.4%	374,603,967	-	-	1,150,280	43,484,669	4,482	-	81,725	2,329	(118,747)
Intermediate Care Facility (Mentally Retarded)	410,557,951	6.2%	22,967,285	-	-	7,092,169	377,809,607	-	-	2,699,346	-	(10,457)
Dental	129,107,695	2.0%	7,479,483	13	-	185,378	23,627,717	25,465,417	18,311	72,272,466	376,565	(317,654)
Prescription Drugs	1,203,809,178	18.3%	380,507,356	-	-	4,135,509	569,595,501	107,395,229	178,264	142,073,303	196,580	(272,565)
Home Health	157,985,231	2.4%	32,474,363	8,978	75,616	953,386	105,013,270	7,965,231	35,297	11,945,040	36,217	(522,168)
CAP/Disabled Adult	184,618,681	2.8%	134,827,369	-	-	1,593,539	48,305,629	-	-	-	-	(107,856)
CAP/Mentally Retarded	259,746,740	3.9%	5,070,250	-	-	2,796,935	249,844,956	-	-	2,498,645	-	(464,046)
CAP/Children	24,027,668	0.4%	-	-	-	277,001	23,071,606	-	-	687,502	-	(8,440)
Personal Care	189,319,390	2.9%	120,690,426	-	-	1,710,230	64,713,508	1,769,829	8,460	538,410	2,043	(113,517)
Hospice	23,799,114	0.4%	13,437,202	-	-	170,949	9,925,921	222,985	4,753	58,114	-	(20,811)
EPSDT (Health Check)	44,488,613	0.7%	444	-	-	5,573	1,201,005	39,116	16	43,309,713	4,271	(71,524)
Lab & X-ray	25,730,285	0.4%	128,568	222	312	47,247	4,902,943	10,978,752	11,866	9,645,234	62,022	(46,880)
Adult Home Care	121,226,198	1.8%	71,922,335	-	-	344,676	48,972,888	13,642	-	15,457	-	(42,800)
High Risk Intervention												
Residential	78,164,707	1.2%	-	-	-	-	18,397,068	-	-	59,865,503	-	(97,864)
Other Services	115,984,294	1.8%	9,634,373	4,661	1,938	213,624	36,250,283	31,652,382	8,236	37,985,432	592,492	(359,128)
Total Services	\$ 6,354,196,467	96.4%	\$ 1,652,288,930	\$ 272,275	\$ 870,961	\$ 27,381,513	\$ 2,692,571,206	\$ 747,784,001	\$ 2,280,250	\$ 1,202,480,153	\$ 46,072,965	\$ (17,805,786)
Medicare:												
Part A Premiums	41,487,836	0.6%	40,986,004	12,065	(319)	533,061	6,034	-	-	-	-	(49,009)
Part B Premiums	168,906,539	2.6%	87,603,562	449,560	25,234,249	677,494	54,464,353	287,775	-	6,671	2,198	180,677
HMO Premiums	24,476,991	0.4%	201	-	-	31,908	3,589,944	10,684,433	-	10,165,557	5,112	(164)
Total Premiums	\$ 234,871,366	3.6%	\$ 128,589,767	\$ 461,625	\$ 25,233,930	\$ 1,242,464	\$ 58,060,331	\$ 10,972,207	-	\$ 10,172,227	\$ 7,310	\$ 131,505
Grand Total Services and Premiums	\$ 6,589,067,833		\$ 1,780,878,696	\$ 733,900	\$ 26,104,891	\$ 28,623,976	\$ 2,750,631,537	\$ 758,756,209		\$ 1,212,652,380	\$ 46,080,274	\$ (17,674,281)

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

** 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.

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.

**Table 12
North Carolina Medicaid
State Fiscal Year 2003
Expenditures for the Elderly**

<u>Type of Service</u>	<u>Aged</u>	<u>Percent</u>	<u>MQBQ</u>	<u>MQBB+MQBE</u>	<u>Total Qualified</u>	<u>Percent of</u>	<u>Total Elderly</u>	<u>SFY</u>	<u>SFY</u>	<u>SFY</u>
		<u>of</u>	<u>Medicare</u>	<u>Part B</u>		<u>Service</u>		<u>2003</u>	<u>2002</u>	<u>2001</u>
		<u>Dollars</u>	<u>Beneficiary</u>	<u>Premium Only</u>	<u>Beneficiaries</u>	<u>Dollars</u>	<u>Dollars</u>	<u>% of</u>	<u>% of</u>	<u>% of</u>
								<u>Total</u>	<u>Total</u>	<u>Total</u>
Inpatient Hospital	\$ 19,159,016	1.1%	\$ 38,199	\$ -	\$ 38,199	0.1%	\$ 19,197,215	1.1%	1.1%	1.3%
Outpatient Hospital	34,939,624	2.0%	114,406	519,939	634,345	2.4%	35,573,969	2.0%	2.0%	1.8%
Mental Hospital (> 65)	7,262,458	0.4%	840	-	840	0.0%	7,263,298	0.4%	0.4%	0.7%
Physician	29,457,183	1.6%	80,439	232,100	312,539	1.2%	29,769,722	1.6%	1.6%	3.5%
Clinics	10,008,226	0.6%	24,518	41,055	65,573	0.2%	10,073,799	0.6%	0.6%	0.7%
Nursing Facility:										
Skilled Level	377,718,999	20.9%	-	-	-	0.0%	377,718,999	20.9%	20.9%	20.3%
Intermediate Level	374,603,967	20.7%	-	-	-	0.0%	374,603,967	20.7%	20.7%	23.4%
Intermediate Care Facility (Mentally Retarded)	22,967,285	1.3%	-	-	-	0.0%	22,967,285	1.3%	1.3%	1.2%
Dental	7,479,483	0.4%	13	-	13	0.0%	7,479,496	0.4%	0.4%	0.4%
Prescription Drugs	380,507,356	21.0%	-	-	-	0.0%	380,507,356	21.0%	21.0%	18.7%
Home Health	32,474,363	1.8%	8,978	75,616	84,594	0.3%	32,558,958	1.8%	1.8%	1.5%
CAP/Disabled Adult	134,827,369	7.5%	-	-	-	0.0%	134,827,369	7.5%	7.5%	8.7%
CAP/Mentally Retarded	5,070,250	0.3%	-	-	-	0.0%	5,070,250	0.3%	0.3%	0.3%
Personal Care	120,690,426	6.7%	-	-	-	0.0%	120,690,426	6.7%	6.7%	4.8%
Hospice	13,437,202	0.7%	-	-	-	0.0%	13,437,202	0.7%	0.7%	0.4%
EPSDT (Health Check)	444	0.0%	-	-	-	0.0%	444	0.0%	0.0%	0.0%
Lab & X-ray	128,568	0.0%	222	312	534	0.0%	129,101	0.0%	0.0%	0.0%
Adult Home Care	71,922,335	4.0%	-	-	-	0.0%	71,922,335	4.0%	4.0%	3.9%
High Risk Intervention Residential	-	0.0%	-	-	-	0.0%	-	0.0%	0.0%	0.0%
Other Services	9,634,373	0.5%	4,661	1,938	6,600	0.0%	9,640,972	0.5%	0.5%	0.7%
Total Services	\$ 1,652,288,930	91.5%	\$ 272,275	\$ 870,961	\$ 1,143,236	4.3%	\$ 1,653,432,166	91.5%	91.5%	92.2%
Medicare:										
Part A Premiums	40,986,004	2.3%	12,065	(319)	11,746	0.0%	40,997,750	2.3%	2.3%	2.3%
Part B Premiums	87,603,562	6.3%	449,560	25,234,249	25,683,809	95.7%	113,287,371	6.3%	6.3%	5.5%
HMO Premiums	201	0.0%	-	-	-	0.0%	201	0.0%	0.0%	0.0%
Total Premiums	\$ 128,589,767	8.5%	\$ 461,625	\$ 25,233,930	\$ 25,695,555	95.7%	\$ 154,285,322	8.5%	8.5%	7.8%
Grand Total Services and premiums	\$ 1,780,878,696	100.0%	\$ 733,900	\$ 26,104,891	\$ 26,838,791	100.0%	\$ 1,807,717,487	100.0%	100.0%	100.0%
Medicare Crossovers**	\$ 94,684,977									
Total Elderly Recipients	162,015		713	39,649	40,362		202,377			
Expenditures Per Recipient*	\$ 10,992		\$ 1,029	\$ 658	\$ 665		\$ 8,932			

* 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 2003 Program Expenditure Report

Table 13
North Carolina Medicaid
State Fiscal Year 2003
Expenditures for the Disabled & Blind

<u>Type of Service</u>	<u>Percent of Service</u>		<u>Percent of Service</u>		<u>Total Blind & Disabled Dollars</u>	<u>2003</u>	<u>2002</u>
	<u>Disabled Dollars</u>	<u>Dollars</u>	<u>Blind Dollars</u>	<u>Dollars</u>		<u>% of Total Dollars</u>	<u>% of Total Dollars</u>
Inpatient Hospital	\$ 385,724,943	14.0%	\$ 1,831,369	6.4%	\$ 387,556,312	13.9%	14.7%
Outpatient Hospital	200,167,849	7.3%	1,276,835	4.5%	201,444,684	7.2%	6.4%
Mental Hospital (> 65)	16,740	0.0%	-	0.0%	16,740	0.0%	0.0%
Psychiatric Hospital (< 21)	7,080,671	0.3%	-	0.0%	7,080,671	0.3%	0.2%
Physician	169,798,726	6.2%	1,156,850	4.0%	170,955,576	6.2%	7.0%
Clinics	234,799,554	8.5%	1,038,268	3.6%	235,837,823	8.5%	7.6%
Nursing Facility:							
Skilled Level	69,866,151	2.5%	1,401,695	4.9%	71,267,846	2.6%	2.6%
Intermediate Level	43,484,669	1.6%	1,150,280	4.0%	44,634,949	1.6%	1.7%
Intermediate Care Facility (Mentally Retarded)	377,809,607	13.7%	7,092,169	24.8%	384,901,776	13.8%	15.0%
Dental	23,627,717	0.9%	185,378	0.6%	23,813,095	0.9%	0.8%
Prescription Drugs	569,595,501	20.7%	4,135,509	14.4%	573,731,010	20.6%	19.3%
Home Health	105,013,270	3.8%	953,386	3.3%	105,966,656	3.8%	3.9%
CAP/Disabled Adult	48,305,629	1.8%	1,593,539	5.6%	49,899,168	1.8%	2.1%
CAP/Mentally Retarded	249,844,956	9.1%	2,796,935	9.8%	252,641,891	9.1%	9.5%
CAP/Children	23,071,606	0.8%	277,001	1.0%	23,348,607	0.8%	0.8%
Personal Care	64,713,508	2.4%	1,710,230	6.0%	66,423,739	2.4%	1.9%
Hospice	9,925,921	0.4%	170,949	0.6%	10,096,871	0.4%	0.3%
EPSDT (Health Check)	1,201,005	0.0%	5,573	0.0%	1,206,577	0.0%	0.1%
Lab & X-ray	4,902,943	0.2%	47,247	0.2%	4,950,190	0.2%	0.2%
Adult Home Care	48,972,888	1.8%	344,676	1.2%	49,317,563	1.8%	1.8%
High Risk Intervention Residential	18,397,068	0.7%	-	0.0%	18,397,068	0.7%	0.4%
Other Services	36,250,283	1.3%	213,624	0.7%	36,463,907	1.3%	1.4%
Total Services	\$ 2,692,571,206	97.9%	\$ 27,381,513	95.7%	\$ 2,719,952,719	97.9%	97.7%
Medicare, Part A Premiums	6,034	0.0%	533,061	1.9%	539,095	0.0%	0.0%
Medicare, Part B Premiums	54,464,353	2.0%	677,494	2.4%	55,141,847	2.0%	1.9%
HMO Premiums	3,589,944	0.1%	31,908	0.1%	3,621,853	0.1%	0.4%
Total Premiums	\$ 58,060,331	2.1%	\$ 1,242,464	4.3%	\$ 59,302,795	2.1%	2.3%
Grand Total Services & Premiums	\$ 2,750,631,537	100.0%	\$ 28,623,976	100.0%	\$ 2,779,255,514	100.0%	100.0%
Medicare Crossovers*	\$ 70,107,822		\$ 774,747		\$ 70,882,569		
Number of Disabled/Blind Recipients	229,900		2,266		232,166		
Service Expenditures Per Recipient**	\$ 11,964		\$ 12,632		\$ 11,971		

* 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 2003
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>Breast Cervical</u>	<u>% of Service Dollars</u>	<u>Total Families & Children Dollars</u>	<u>SFY 2003</u>	<u>SFY 2002</u>
												<u>% of Total Dollars</u>	<u>% of Total Dollars</u>
Inpatient Hospital	\$ 129,013,007	23.1%	\$ 74,808,958	37.5%	\$ 63,595,699	12.4%	\$ 173,673,456	24.8%	\$ 225,326	9.9%	\$ 441,316,447	22.4%	24.9%
Outpatient Hospital	127,684,081	22.8%	25,446,439	12.8%	61,874,202	12.1%	85,353,406	12.2%	1,109,155	48.6%	\$ 301,467,283	15.3%	13.4%
Psychiatric Hospital (< 21)	-	0.0%	18,945	0.0%	11,299,580	2.2%	7,105,585	1.0%	-	0.0%	\$ 18,424,110	0.9%	0.9%
Physician	106,492,959	19.0%	52,712,512	26.4%	72,190,839	14.1%	132,642,446	18.9%	667,813	29.3%	\$ 364,706,569	18.5%	19.4%
Clinics	26,373,714	4.7%	19,486,705	9.8%	125,375,586	24.5%	85,634,880	12.2%	12,751	0.6%	\$ 256,883,636	13.0%	12.7%
Nursing Facility:													
Skilled Level	239,616	0.0%	-	0.0%	58,586	0.0%	-	0.0%	-	0.0%	298,202	0.0%	0.0%
Intermediate Level	4,482	0.0%	-	0.0%	80,462	0.0%	1,263	0.0%	-	0.0%	86,207	0.0%	0.0%
Intermediate Care Facility (Mentally Retarded)	-	0.0%	-	0.0%	1,957,357	0.4%	741,988	0.1%	-	0.0%	2,699,346	0.1%	0.2%
Dental	24,393,081	4.4%	1,072,336	0.5%	30,113,092	5.9%	42,159,374	6.0%	18,311	0.8%	97,756,193	5.0%	4.3%
Prescription Drugs	99,922,282	17.9%	7,472,947	3.7%	59,452,114	11.6%	82,621,189	11.8%	178,264	7.8%	249,646,796	12.6%	11.7%
Home Health	6,951,321	1.2%	1,013,910	0.5%	4,520,834	0.9%	7,424,206	1.1%	35,297	1.5%	19,945,569	1.0%	1.0%
CAP/Disabled Adult	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	0.0%
CAP/Mentally Retarded	-	0.0%	-	0.0%	2,498,638	0.5%	7	0.0%	-	0.0%	2,498,645	0.1%	0.2%
CAP/Children	-	0.0%	-	0.0%	687,502	0.1%	-	0.0%	-	0.0%	687,502	0.0%	0.0%
Personal Care	1,743,778	0.3%	26,051	0.0%	287,211	0.1%	251,200	0.0%	8,460	0.4%	2,316,699	0.1%	0.1%
Hospice	222,985	0.0%	-	0.0%	23,859	0.0%	34,255	0.0%	4,753	0.2%	285,853	0.0%	0.0%
EPSDT (Health Check)	4,971	0.0%	34,146	0.0%	12,071,880	2.4%	31,237,832	4.5%	16	0.0%	43,348,845	2.2%	2.4%
Lab & X-ray	7,106,352	1.3%	3,872,401	1.9%	3,058,393	0.6%	6,586,841	0.9%	11,866	0.5%	20,635,852	1.0%	0.9%
Adult Home Care	13,642	0.0%	-	0.0%	11,225	0.0%	4,231	0.0%	-	0.0%	29,099	0.0%	0.0%
High Risk Intervention Residential	-	0.0%	-	0.0%	36,990,599	7.2%	22,874,905	3.3%	-	0.0%	59,865,503	3.0%	2.1%
Other Services	21,087,417	3.8%	10,564,965	5.3%	19,933,121	3.9%	18,052,311	2.6%	8,236	0.4%	69,646,050	3.5%	3.7%
Total Services	\$ 551,253,686	98.6%	\$ 196,530,316	98.5%	\$ 506,080,780	99.0%	\$ 696,399,373	99.3%	\$ 2,280,250	100.0%	\$ 1,952,544,405	98.9%	98.1%
Medicare, Part A Premiums	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	0.0%
Medicare, Part B Premiums	278,534	0.0%	9,241	0.0%	2,395	0.0%	4,276	0.0%	-	0.0%	294,446	0.0%	0.0%
HMO Premiums	7,775,936	1.4%	2,908,496	1.5%	5,122,843	1.0%	5,042,714	0.7%	-	0.0%	20,849,989	1.1%	1.9%
Total Premiums	\$ 8,054,471		\$ 2,917,737		\$ 5,125,238		\$ 5,046,990		-		\$ 21,144,435	0.5%	1.9%
Total Services & Premiums	\$ 559,308,157		\$ 199,448,052		\$ 511,206,017		\$ 701,446,363		\$ 2,280,250		\$ 1,973,688,840	100.0%	100.0%
Medicare Crossovers*	\$ 814,437		\$ 60,937		\$ (18,237)		\$ (13,946)				\$ 843,191		
Number of Family & Child Recipients	204,789		51,889		273,233		473,178		182		1,003,271		
Service Expenditures Per Recipient**	\$ 2,731		\$ 3,844		\$ 1,871		\$ 1,482		\$ 12,529		\$ 1,967		

* 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 2003
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