

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 1,931,561 | 1,274,830 | 656,731 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,647,015 | 1,087,031 | 559,984 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 1,400,967 | 924,637 | 476,330 |
| C-Physician/Surgical | 4,460,433 | 2,943,887 | 1,516,546 |
| C-Outpatient Hospital Services | 2,681,696 | 1,769,919 | 911,777 |
| C-Outpatient Mental Health | 3,630,864 | 2,396,370 | 1,234,494 |
| C-Prescribed Drugs | 2,310,827 | 1,525,146 | 785,681 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 4,105,427 | 2,709,582 | 1,395,845 |
| C-Vision Sevices | 533,859 | 352,346 | 181,513 |
| C-Other Practitioners | 247,034 | 163,043 | 83,991 |
| C-Clinic Services | 790,429 | 521,683 | 268,746 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 534,452 | 352,738 | 181,714 |
| C-Laboratory/Radiological Services | 59,523 | 39,284 | 20,239 |
| C-Medical Equipment | 239,480 | 158,057 | 81,423 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 1,243 | 820 | 423 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 24,793 | 16,363 | 8,430 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 2,458,272 | 1,622,459 | 835,813 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 189,964 | 125,376 | 64,588 |
| C-Balance | 27,247,839 | 17,983,571 | 9,264,268 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 27,247,839 | 17,983,571 | 9,264,268 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 1,760,386 | 1,144,251 | 616,135 |
| C-Balance | 1,760,386 | 1,144,251 | 616,135 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 1,760,386 | 1,144,251 | 616,135 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 8,698,078 | 7,041,095 | 1,656,983 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 4,753 | 3,848 | 905 |
| C-Physician/Surgical | 15,800,726 | 12,790,689 | 3,010,037 |
| C-Outpatient Hospital Services | 5,506,765 | 4,457,727 | 1,049,038 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 18,732,988 | 15,164,353 | 3,568,635 |
| C-Drug Rebate - National | (7,526,699) | (6,092,862) | (1,433,837) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 14,674,835 | 11,879,279 | 2,795,556 |
| C-Vision Services | 594,142 | 480,958 | 113,184 |
| C-Other Practitioners | 2,406,284 | 1,947,887 | 458,397 |
| C-Clinic Services | 18,159,384 | 14,700,021 | 3,459,363 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 1,064,581 | 861,778 | 202,803 |
| C-Laboratory/Radiological Services | 1,622,989 | 1,313,809 | 309,180 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 2,075 | 1,679 | 396 |
| C-Home Health | 322,338 | 260,933 | 61,405 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 232 | 187 | 45 |
| C-Other Services | 2,684,005 | 2,172,701 | 511,304 |
| C-Balance | 82,747,476 | 66,984,082 | 15,763,394 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 82,747,476 | 66,984,082 | 15,763,394 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 164,999,428 | 107,249,628 | 57,749,800 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 21,208,125 | 13,784,989 | 7,423,136 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,092,495 | 710,122 | 382,373 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 156,534 | 101,748 | 54,786 |
| C-Physician/Surgical | 7,238,688 | 4,705,092 | 2,533,596 |
| C-Outpatient Hospital Services | 9,774,238 | 6,353,228 | 3,421,010 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 10,427,828 | 6,778,084 | 3,649,744 |
| C-Drug Rebate - National | (4,285,189) | (2,785,373) | (1,499,816) |
| C-Drug Rebate - State | (767,097) | (498,613) | (268,484) |
| C-Dental Services | 17,094,785 | 11,111,611 | 5,983,174 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 987,923 | 641,913 | 346,010 |
| C-Clinic Services | 22,410,602 | 14,566,890 | 7,843,712 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 274,717 | 178,564 | 96,153 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 390,376 | 253,745 | 136,631 |
| C-Home Health | 987,595 | 641,936 | 345,659 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 234 | 153 | 81 |
| C-Hospice | 20,950 | 13,617 | 7,333 |
| C-Medical Transport | 294,165 | 191,209 | 102,956 |
| C-Case Management | 1,042,162 | 677,307 | 364,855 |
| C-Other Services | 18,089,711 | 11,757,310 | 6,332,401 |
| C-Balance | 271,438,270 | 176,433,160 | 95,005,110 |
| C-Collections | (369,458) | (240,148) | (129,310) |
| C-Total Net | 271,068,812 | 176,193,012 | 94,875,800 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 327,468 | 213,345 | 114,123 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 52,465 | 34,182 | 18,283 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 15,039 | 9,798 | 5,241 |
| C-Outpatient Hospital Services | 2,724 | 1,774 | 950 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 18,854 | 12,283 | 6,571 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 1,102 | 718 | 384 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 211 | 137 | 74 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 3,464 | 2,257 | 1,207 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 421,327 | 274,494 | 146,833 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 421,327 | 274,494 | 146,833 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 8,214,690 | 6,489,605 | 1,725,085 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 2,672,844 | 2,111,547 | 561,297 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 735,405 | 580,971 | 154,434 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 64,358 | 50,843 | 13,515 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 189,215 | 149,480 | 39,735 |
| C-Outpatient Hospital Services | 62,228 | 49,160 | 13,068 |
| C-Outpatient Mental Health | 177,485 | 140,213 | 37,272 |
| C-Prescribed Drugs | 83,973 | 66,339 | 17,634 |
| C-Drug Rebate - National | (22,683) | (17,920) | (4,763) |
| C-Drug Rebate - State | (1,808) | (1,428) | (380) |
| C-Dental Services | 111,938 | 88,431 | 23,507 |
| C-Vision Sevices | 4,943 | 3,905 | 1,038 |
| C-Other Practitioners | 2,808 | 2,218 | 590 |
| C-Clinic Services | 850,143 | 671,613 | 178,530 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 2,113 | 1,669 | 444 |
| C-Laboratory/Radiological Services | 20,457 | 16,161 | 4,296 |
| C-Medical Equipment | 329 | 260 | 69 |
| C-Family Planning | 103 | 81 | 22 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 5,502 | 4,347 | 1,155 |
| C-Home Health | 1,105 | 873 | 232 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 21,665 | 17,115 | 4,550 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 543,789 | 429,592 | 114,197 |
| C-Balance | 13,740,602 | 10,855,075 | 2,885,527 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 13,740,602 | 10,855,075 | 2,885,527 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 1,673,991 | 1,145,699 | 528,292 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 4,101 | 2,809 | 1,292 |
| C-Physician/Surgical | 440,392 | 301,563 | 138,829 |
| C-Outpatient Hospital Services | 192,282 | 131,659 | 60,623 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 208,199 | 142,566 | 65,633 |
| C-Drug Rebate - National | (85,961) | (58,875) | (27,086) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 4,096 | 2,804 | 1,292 |
| C-Vision Sevices | 157 | 108 | 49 |
| C-Other Practitioners | 7,280 | 4,985 | 2,295 |
| C-Clinic Services | 44,165 | 30,231 | 13,934 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 6,252 | 4,280 | 1,972 |
| C-Laboratory/Radiological Services | 3,953 | 2,706 | 1,247 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 138,191 | 94,624 | 43,567 |
| C-Home Health | 20,151 | 13,796 | 6,355 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 3,865 | 2,647 | 1,218 |
| C-Case Management | 27,046 | 18,508 | 8,538 |
| C-Other Services | 642,526 | 439,486 | 203,040 |
| C-Balance | 3,330,686 | 2,279,596 | 1,051,090 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 3,330,686 | 2,279,596 | 1,051,090 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|------------------|---------------|-------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 6,096,158 | 3,962,503 | 2,133,655 |
| C-Balance | 6,096,158 | 3,962,503 | 2,133,655 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 6,096,158 | 3,962,503 | 2,133,655 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 25,613,989 | 17,428,784 | 8,185,205 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 8,875,943 | 6,033,619 | 2,842,324 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 333,444 | 226,641 | 106,803 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 132 | 90 | 42 |
| C-Physician/Surgical | 65,320 | 44,396 | 20,924 |
| C-Outpatient Hospital Services | 134,894 | 91,677 | 43,217 |
| C-Outpatient Mental Health | 137 | 93 | 44 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 5,873,932 | 3,992,511 | 1,881,421 |
| C-Vision Sevices | 142 | 97 | 45 |
| C-Other Practitioners | 7,638 | 5,192 | 2,446 |
| C-Clinic Services | 2,047,836 | 1,392,932 | 654,904 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 7,185 | 4,883 | 2,302 |
| C-Medical Equipment | 272 | 185 | 87 |
| C-Family Planning | 187 | 127 | 60 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 218 | 148 | 70 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 17,818 | 12,111 | 5,707 |
| C-Case Management | 772 | 525 | 247 |
| C-Other Services | 258,839 | 175,933 | 82,906 |
| C-Balance | 43,238,698 | 29,409,944 | 13,828,754 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 43,238,698 | 29,409,944 | 13,828,754 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | (110,254) | (86,638) | (23,616) |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 2,975,139 | 2,337,864 | 637,275 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 416,890 | 327,592 | 89,298 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 3,684,416 | 2,895,214 | 789,202 |
| C-Outpatient Hospital Services | 1,245,864 | 979,000 | 266,864 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 2,538,004 | 1,994,364 | 543,640 |
| C-Drug Rebate - National | (330,886) | (260,010) | (70,876) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 154,926 | 121,742 | 33,184 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 1,777,954 | 1,397,115 | 380,839 |
| C-Clinic Services | 2,711,310 | 2,130,547 | 580,763 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 332,515 | 261,291 | 71,224 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 600,404 | 471,798 | 128,606 |
| C-Home Health | 24,222 | 19,034 | 5,188 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 516,008 | 405,478 | 110,530 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 563,139 | 442,515 | 120,624 |
| C-Case Management | 103,785 | 81,554 | 22,231 |
| C-Other Services | 1,127,182 | 885,740 | 241,442 |
| C-Balance | 18,330,618 | 14,404,200 | 3,926,418 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 18,330,618 | 14,404,200 | 3,926,418 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 4,633,761 | 3,017,471 | 1,616,290 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 11,511,637 | 7,426,345 | 4,085,292 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 5,594,899 | 3,637,168 | 1,957,731 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 9,600 | 6,242 | 3,358 |
| C-Physician/Surgical | 14,568,249 | 9,468,830 | 5,099,419 |
| C-Outpatient Hospital Services | 10,314,127 | 6,703,816 | 3,610,311 |
| C-Outpatient Mental Health | 320,139 | 208,442 | 111,697 |
| C-Prescribed Drugs | 23,751,179 | 15,446,332 | 8,304,847 |
| C-Drug Rebate - National | (9,350,424) | (6,088,995) | (3,261,429) |
| C-Drug Rebate - State | (1,340,776) | (873,113) | (467,663) |
| C-Dental Services | 13,466,669 | 8,762,405 | 4,704,264 |
| C-Vision Services | 603,312 | 392,737 | 210,575 |
| C-Other Practitioners | 12,550,279 | 8,170,142 | 4,380,137 |
| C-Clinic Services | 2,896,368 | 1,883,089 | 1,013,279 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 6,080,147 | 3,956,708 | 2,123,439 |
| C-Laboratory/Radiological Services | 861,593 | 560,123 | 301,470 |
| C-Medical Equipment | 1,935,432 | 1,259,682 | 675,750 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 323 | 210 | 113 |
| C-Screening Services | 4,015,524 | 2,610,301 | 1,405,223 |
| C-Home Health | 297,595 | 193,690 | 103,905 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 1,338,298 | 871,635 | 466,663 |
| C-Hospice | 61,329 | 39,937 | 21,392 |
| C-Medical Transport | 1,324,092 | 861,575 | 462,517 |
| C-Case Management | 2,512,642 | 1,635,446 | 877,196 |
| C-Other Services | 5,371,749 | 3,491,235 | 1,880,514 |
| C-Balance | 113,327,743 | 73,641,453 | 39,686,290 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 113,327,743 | 73,641,453 | 39,686,290 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 41,850,246 | 31,946,119 | 9,904,127 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 688,157 | 525,784 | 162,373 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 3,100,783 | 2,364,584 | 736,199 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 219,596 | 167,223 | 52,373 |
| C-Physician/Surgical | 296,836 | 228,006 | 68,830 |
| C-Outpatient Hospital Services | 331,429 | 254,879 | 76,550 |
| C-Outpatient Mental Health | 162,183 | 124,105 | 38,078 |
| C-Prescribed Drugs | 15,647,748 | 11,918,425 | 3,729,323 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 13,514,183 | 10,302,273 | 3,211,910 |
| C-Vision Services | 53,148 | 40,737 | 12,411 |
| C-Other Practitioners | 13,037 | 10,001 | 3,036 |
| C-Clinic Services | 4,862,456 | 3,710,744 | 1,151,712 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 5,037 | 3,853 | 1,184 |
| C-Laboratory/Radiological Services | 75,531 | 57,975 | 17,556 |
| C-Medical Equipment | 242,900 | 185,430 | 57,470 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 83,690 | 63,984 | 19,706 |
| C-Home Health | (7,970) | (5,871) | (2,099) |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 70,409 | 53,640 | 16,769 |
| C-Hospice | 285 | 217 | 68 |
| C-Medical Transport | (13,585) | (9,622) | (3,963) |
| C-Case Management | 144,510 | 110,157 | 34,353 |
| C-Other Services | 410,380 | 312,698 | 97,682 |
| C-Balance | 81,750,989 | 62,365,341 | 19,385,648 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 81,750,989 | 62,365,341 | 19,385,648 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 2,330,607 | 1,735,377 | 595,230 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 1,441,200 | 1,073,049 | 368,151 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 827,729 | 616,114 | 211,615 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 299,424 | 222,959 | 76,465 |
| C-Physician/Surgical | 3,673,503 | 2,735,379 | 938,124 |
| C-Outpatient Hospital Services | 4,515,741 | 3,361,920 | 1,153,821 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 6,264,251 | 4,664,682 | 1,599,569 |
| C-Drug Rebate - National | (3,118,645) | (2,322,143) | (796,502) |
| C-Drug Rebate - State | (410,322) | (305,525) | (104,797) |
| C-Dental Services | 3,458,535 | 2,575,186 | 883,349 |
| C-Vision Services | 492,070 | 366,400 | 125,670 |
| C-Other Practitioners | 3,325,897 | 2,476,541 | 849,356 |
| C-Clinic Services | 907,741 | 675,909 | 231,832 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 212,963 | 158,595 | 54,368 |
| C-Laboratory/Radiological Services | 126,625 | 94,285 | 32,340 |
| C-Medical Equipment | 233,460 | 173,831 | 59,629 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 108,032 | 80,472 | 27,560 |
| C-Home Health | 20,137 | 14,993 | 5,144 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 38,192 | 28,440 | 9,752 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 11,751 | 8,736 | 3,015 |
| C-Other Services | 1,029,211 | 766,367 | 262,844 |
| C-Balance | 25,788,102 | 19,201,567 | 6,586,535 |
| C-Collections | (447,101) | (332,144) | (114,957) |
| C-Total Net | 25,341,001 | 18,869,423 | 6,471,578 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 1,246,995 | 868,907 | 378,088 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 272,479 | 189,962 | 82,517 |
| C-Outpatient Hospital Services | 91,432 | 63,710 | 27,722 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 51,233 | 35,699 | 15,534 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 36,683 | 25,560 | 11,123 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 6,391 | 4,454 | 1,937 |
| C-Clinic Services | 30,054 | 20,942 | 9,112 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 3,444 | 2,400 | 1,044 |
| C-Medical Equipment | 1,597 | 1,112 | 485 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 948 | 660 | 288 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 25,846 | 18,009 | 7,837 |
| C-Case Management | 42 | 29 | 13 |
| C-Other Services | 44,339 | 30,896 | 13,443 |
| C-Balance | 1,811,483 | 1,262,340 | 549,143 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 1,811,483 | 1,262,340 | 549,143 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 26,908,528 | 21,438,023 | 5,470,505 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 6,936,130 | 5,526,015 | 1,410,115 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 2,840,349 | 2,262,907 | 577,442 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 9,108,178 | 7,256,486 | 1,851,692 |
| C-Outpatient Hospital Services | 9,906,353 | 7,892,392 | 2,013,961 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 14,481,312 | 11,537,261 | 2,944,051 |
| C-Drug Rebate - National | (6,207,529) | (4,945,539) | (1,261,990) |
| C-Drug Rebate - State | (824,734) | (657,065) | (167,669) |
| C-Dental Services | 8,347,575 | 6,650,513 | 1,697,062 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 2,964,431 | 2,361,762 | 602,669 |
| C-Clinic Services | 7,418,354 | 5,910,203 | 1,508,151 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 474,374 | 377,933 | 96,441 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 1,446,831 | 1,152,690 | 294,141 |
| C-Home Health | 810,184 | 645,474 | 164,710 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 63,072 | 50,249 | 12,823 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 1,141,807 | 909,678 | 232,129 |
| C-Other Services | 16,333,685 | 13,007,036 | 3,326,649 |
| C-Balance | 102,148,900 | 81,376,018 | 20,772,882 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 102,148,900 | 81,376,018 | 20,772,882 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 17,620,839 | 13,626,195 | 3,994,644 |
| C-Inpatient Hospital Services - DSH | (656,588) | (530,063) | (126,525) |
| C-Inpatient Mental Health - Reg. Payment | 2,307,194 | 1,806,477 | 500,717 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 40,429,241 | 31,380,374 | 9,048,867 |
| C-Outpatient Hospital Services | 20,588,381 | 15,920,996 | 4,667,385 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 71,652,856 | 55,409,153 | 16,243,703 |
| C-Drug Rebate - National | (21,321,525) | (16,487,935) | (4,833,590) |
| C-Drug Rebate - State | (3,120,892) | (2,413,386) | (707,506) |
| C-Dental Services | 27,577,186 | 21,325,438 | 6,251,748 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 6,794,450 | 5,254,881 | 1,539,569 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 5,602,759 | 4,350,150 | 1,252,609 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 7,320,466 | 5,526,146 | 1,794,320 |
| C-Home Health | 702,239 | 543,042 | 159,197 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | (211) | (169) | (42) |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 1,199,099 | 927,263 | 271,836 |
| C-Case Management | 450,095 | 348,059 | 102,036 |
| C-Other Services | 12,831,212 | 9,922,419 | 2,908,793 |
| C-Balance | 189,976,801 | 146,909,040 | 43,067,761 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 189,976,801 | 146,909,040 | 43,067,761 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 3,132,705 | 2,365,078 | 767,627 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 169,432 | 127,904 | 41,528 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 295,004 | 222,818 | 72,186 |
| C-Physician/Surgical | 1,335,002 | 1,008,862 | 326,140 |
| C-Outpatient Hospital Services | 4,669,623 | 3,525,114 | 1,144,509 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 2,843,532 | 2,146,582 | 696,950 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 2,104,453 | 1,588,728 | 515,725 |
| C-Vision Sevices | 189,658 | 143,281 | 46,377 |
| C-Other Practitioners | 146,171 | 110,353 | 35,818 |
| C-Clinic Services | 1,585,373 | 1,197,311 | 388,062 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 253,223 | 191,164 | 62,059 |
| C-Laboratory/Radiological Services | 107,174 | 80,908 | 26,266 |
| C-Medical Equipment | 196,164 | 148,090 | 48,074 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 47,474 | 35,837 | 11,637 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 3,038,080 | 2,293,865 | 744,215 |
| C-Hospice | (2,029) | (1,524) | (505) |
| C-Medical Transport | 280,253 | 211,557 | 68,696 |
| C-Case Management | 1,578,323 | 1,191,513 | 386,810 |
| C-Other Services | 6,089,549 | 4,599,310 | 1,490,239 |
| C-Balance | 28,059,164 | 21,186,751 | 6,872,413 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 28,059,164 | 21,186,751 | 6,872,413 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 122,690,905 | 79,749,089 | 42,941,816 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 22,386,877 | 14,551,470 | 7,835,407 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 13,358,065 | 8,682,743 | 4,675,322 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 2,939,277 | 1,910,531 | 1,028,746 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 750,483 | 487,814 | 262,669 |
| C-Physician/Surgical | 1,810,166 | 1,176,608 | 633,558 |
| C-Outpatient Hospital Services | 10,494,764 | 6,821,597 | 3,673,167 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 14,843,688 | 9,648,397 | 5,195,291 |
| C-Drug Rebate - National | (4,808,008) | (3,125,205) | (1,682,803) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 33,096,807 | 21,512,924 | 11,583,883 |
| C-Vision Services | 19,397 | 12,608 | 6,789 |
| C-Other Practitioners | 930,655 | 604,926 | 325,729 |
| C-Clinic Services | 140,205 | 91,134 | 49,071 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 314,353 | 204,330 | 110,023 |
| C-Laboratory/Radiological Services | 140,749 | 91,488 | 49,261 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 98,068 | 63,744 | 34,324 |
| C-Home Health | 11,248 | 7,312 | 3,936 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 96,689 | 62,848 | 33,841 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 470,349 | 305,727 | 164,622 |
| C-Other Services | 31,570,133 | 20,520,586 | 11,049,547 |
| C-Balance | 251,354,870 | 163,380,671 | 87,974,199 |
| C-Collections | (13,517,860) | (8,786,608) | (4,731,252) |
| C-Total Net | 237,837,010 | 154,594,063 | 83,242,947 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 164,531,522 | 106,944,889 | 57,586,633 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 5,421,444 | 3,519,296 | 1,902,148 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,860,576 | 1,209,106 | 651,470 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 116,326 | 75,598 | 40,728 |
| C-Physician/Surgical | 4,987,037 | 3,238,784 | 1,748,253 |
| C-Outpatient Hospital Services | 11,324,536 | 7,352,364 | 3,972,172 |
| C-Outpatient Mental Health | 22,251 | 14,463 | 7,788 |
| C-Prescribed Drugs | 6,095,267 | 3,960,159 | 2,135,108 |
| C-Drug Rebate - National | (2,056,957) | (1,337,022) | (719,935) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 22,723,503 | 14,766,251 | 7,957,252 |
| C-Vision Services | 402,962 | 261,796 | 141,166 |
| C-Other Practitioners | 125,284 | 81,329 | 43,955 |
| C-Clinic Services | 1,878,416 | 1,219,628 | 658,788 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | (3,933) | (2,557) | (1,376) |
| C-Laboratory/Radiological Services | 304,743 | 197,991 | 106,752 |
| C-Medical Equipment | 794,474 | 516,087 | 278,387 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 3,332,303 | 2,164,522 | 1,167,781 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 1,607,541 | 1,044,798 | 562,743 |
| C-Hospice | (429) | (279) | (150) |
| C-Medical Transport | 364,656 | 236,743 | 127,913 |
| C-Case Management | 4,672,529 | 3,036,062 | 1,636,467 |
| C-Other Services | 4,625,866 | 3,005,591 | 1,620,275 |
| C-Balance | 233,129,917 | 151,505,599 | 81,624,318 |
| C-Collections | (2,658,571) | (1,728,071) | (930,500) |
| C-Total Net | 230,471,346 | 149,777,528 | 80,693,818 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 9,633,404 | 7,150,884 | 2,482,520 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 722,766 | 536,508 | 186,258 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 5,992 | 4,447 | 1,545 |
| C-Physician/Surgical | 239,879 | 178,062 | 61,817 |
| C-Outpatient Hospital Services | 315,638 | 234,297 | 81,341 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 1,145,730 | 850,078 | 295,652 |
| C-Drug Rebate - National | (580,165) | (430,657) | (149,508) |
| C-Drug Rebate - State | (76,147) | (56,524) | (19,623) |
| C-Dental Services | 827,950 | 614,586 | 213,364 |
| C-Vision Services | 7,278 | 5,403 | 1,875 |
| C-Other Practitioners | 7,096 | 5,267 | 1,829 |
| C-Clinic Services | 37,603 | 27,912 | 9,691 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 11,422 | 8,478 | 2,944 |
| C-Medical Equipment | 84,039 | 62,383 | 21,656 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 24,640 | 18,289 | 6,351 |
| C-Home Health | 47,741 | 35,439 | 12,302 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 25,753 | 19,118 | 6,635 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 57,555 | 42,656 | 14,899 |
| C-Balance | 12,538,174 | 9,306,626 | 3,231,548 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 12,538,174 | 9,306,626 | 3,231,548 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 25,555 | 16,611 | 8,944 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 41,561 | 27,015 | 14,546 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 2,188 | 1,422 | 766 |
| C-Outpatient Hospital Services | 2,929 | 1,905 | 1,024 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 536 | 348 | 188 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 74 | 48 | 26 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 172 | 112 | 60 |
| C-Clinic Services | 29 | 19 | 10 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 100 | 65 | 35 |
| C-Laboratory/Radiological Services | 6 | 4 | 2 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 1,497 | 973 | 524 |
| C-Home Health | 179 | 117 | 62 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 924 | 600 | 324 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 75,750 | 49,239 | 26,511 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 75,750 | 49,239 | 26,511 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 46,277,689 | 34,782,311 | 11,495,378 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 3,637,628 | 2,734,042 | 903,586 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,495,600 | 1,124,093 | 371,507 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 40,089 | 30,131 | 9,958 |
| C-Physician/Surgical | 501,474 | 376,907 | 124,567 |
| C-Outpatient Hospital Services | 7,763,654 | 5,835,162 | 1,928,492 |
| C-Outpatient Mental Health | 0 | 17,125 | (17,125) |
| C-Prescribed Drugs | 23,147,890 | 17,380,831 | 5,767,059 |
| C-Drug Rebate - National | (10,585,303) | (7,955,914) | (2,629,389) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 1,381,907 | 1,038,642 | 343,265 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 408,338 | 306,907 | 101,431 |
| C-Clinic Services | 4,379,661 | 3,291,754 | 1,087,907 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 256,958 | 193,129 | 63,829 |
| C-Laboratory/Radiological Services | 249,443 | 187,482 | 61,961 |
| C-Medical Equipment | 314,216 | 236,164 | 78,052 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 3,986,074 | 2,995,934 | 990,140 |
| C-Home Health | 5,013 | 3,768 | 1,245 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 111,476 | 83,785 | 27,691 |
| C-Hospice | 25,661 | 19,287 | 6,374 |
| C-Medical Transport | 310,284 | 233,210 | 77,074 |
| C-Case Management | 966,208 | 726,201 | 240,007 |
| C-Other Services | 4,635,867 | 3,484,355 | 1,151,512 |
| C-Balance | 89,309,827 | 67,125,306 | 22,184,521 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 89,309,827 | 67,125,306 | 22,184,521 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 522,948 | 403,664 | 119,284 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 484,967 | 374,347 | 110,620 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 474,005 | 365,885 | 108,120 |
| C-Outpatient Hospital Services | 617,998 | 477,031 | 140,967 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 827,401 | 638,673 | 188,728 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 658,181 | 508,050 | 150,131 |
| C-Vision Services | 16,577 | 12,797 | 3,780 |
| C-Other Practitioners | 466,840 | 360,355 | 106,485 |
| C-Clinic Services | 168,109 | 129,764 | 38,345 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 42,836 | 33,066 | 9,770 |
| C-Laboratory/Radiological Services | 8,303 | 6,409 | 1,894 |
| C-Medical Equipment | 37,579 | 29,008 | 8,571 |
| C-Family Planning | 160,266 | 123,710 | 36,556 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 41,534 | 32,061 | 9,473 |
| C-Home Health | 216 | 167 | 49 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 2,718 | 2,098 | 620 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 18,602 | 14,360 | 4,242 |
| C-Case Management | 250,009 | 192,981 | 57,028 |
| C-Other Services | 1,675,188 | 1,293,077 | 382,111 |
| C-Balance | 6,474,277 | 4,997,503 | 1,476,774 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 6,474,277 | 4,997,503 | 1,476,774 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 924,404 | 600,863 | 323,541 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 333,693 | 216,900 | 116,793 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 1,258,097 | 817,763 | 440,334 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 1,258,097 | 817,763 | 440,334 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | (46,381) | (33,246) | (13,135) |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 4,695,266 | 3,398,903 | 1,296,363 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,077,072 | 779,692 | 297,380 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 100,916 | 73,054 | 27,862 |
| C-Physician/Surgical | 5,827,354 | 4,218,424 | 1,608,930 |
| C-Outpatient Hospital Services | 6,300,353 | 4,560,826 | 1,739,527 |
| C-Outpatient Mental Health | 5,263 | 3,810 | 1,453 |
| C-Prescribed Drugs | 10,008,321 | 7,245,024 | 2,763,297 |
| C-Drug Rebate - National | (3,963,964) | (2,869,513) | (1,094,451) |
| C-Drug Rebate - State | (73,347) | (53,097) | (20,250) |
| C-Dental Services | 6,037,104 | 4,370,259 | 1,666,845 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 921,830 | 667,313 | 254,517 |
| C-Clinic Services | 5,000,526 | 3,619,880 | 1,380,646 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 450,195 | 325,897 | 124,298 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 172,428 | 124,821 | 47,607 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 1,176,311 | 851,532 | 324,779 |
| C-Home Health | 79,421 | 57,493 | 21,928 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 14,565 | 10,543 | 4,022 |
| C-Case Management | 2,299,599 | 1,664,680 | 634,919 |
| C-Other Services | 7,100,942 | 5,140,371 | 1,960,571 |
| C-Balance | 47,183,774 | 34,156,666 | 13,027,108 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 47,183,774 | 34,156,666 | 13,027,108 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 117,158 | 76,153 | 41,005 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 147 | 96 | 51 |
| C-Physician/Surgical | 117,989 | 76,693 | 41,296 |
| C-Outpatient Hospital Services | 67,506 | 43,880 | 23,626 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 30,853 | 20,055 | 10,798 |
| C-Drug Rebate - National | (1,251) | (813) | (438) |
| C-Drug Rebate - State | (16,444) | (10,688) | (5,756) |
| C-Dental Services | 322 | 209 | 113 |
| C-Vision Sevices | 211 | 137 | 74 |
| C-Other Practitioners | 43,703 | 28,407 | 15,296 |
| C-Clinic Services | 38,149 | 24,797 | 13,352 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 2,387 | 1,552 | 835 |
| C-Laboratory/Radiological Services | 336 | 218 | 118 |
| C-Medical Equipment | 31,402 | 20,411 | 10,991 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 56,669 | 36,834 | 19,835 |
| C-Home Health | 4,582 | 2,978 | 1,604 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 4,670 | 3,035 | 1,635 |
| C-Case Management | 192 | 125 | 67 |
| C-Other Services | 25,621 | 16,653 | 8,968 |
| C-Balance | 524,202 | 340,732 | 183,470 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 524,202 | 340,732 | 183,470 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 97,799,964 | 63,569,977 | 34,229,987 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 3,516,817 | 2,285,930 | 1,230,887 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 2,934,098 | 1,907,163 | 1,026,935 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 620 | 403 | 217 |
| C-Physician/Surgical | 548,782 | 356,709 | 192,073 |
| C-Outpatient Hospital Services | 4,751,548 | 3,088,506 | 1,663,042 |
| C-Outpatient Mental Health | 347,605 | 225,944 | 121,661 |
| C-Prescribed Drugs | 1,600,075 | 1,040,047 | 560,028 |
| C-Drug Rebate - National | (557,592) | (362,435) | (195,157) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 451,755 | 293,640 | 158,115 |
| C-Vision Services | 761 | 495 | 266 |
| C-Other Practitioners | 291,963 | 189,776 | 102,187 |
| C-Clinic Services | 1,392,567 | 905,170 | 487,397 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 120,290 | 78,188 | 42,102 |
| C-Medical Equipment | 67,845 | 44,099 | 23,746 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 31,253 | 20,314 | 10,939 |
| C-Home Health | 141,999 | 92,299 | 49,700 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 146,380 | 95,148 | 51,232 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 1,168,691 | 759,650 | 409,041 |
| C-Case Management | 269,042 | 174,877 | 94,165 |
| C-Other Services | 20,749,675 | 13,487,288 | 7,262,387 |
| C-Balance | 135,774,138 | 88,253,188 | 47,520,950 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 135,774,138 | 88,253,188 | 47,520,950 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 1,314,979 | 1,050,586 | 264,393 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 238,492 | 190,436 | 48,056 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 988,250 | 789,348 | 198,902 |
| C-Outpatient Hospital Services | 2,087,962 | 1,667,549 | 420,413 |
| C-Outpatient Mental Health | 4,703 | 3,747 | 956 |
| C-Prescribed Drugs | 165,047 | 131,856 | 33,191 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 1,060,537 | 847,097 | 213,440 |
| C-Vision Services | 171,282 | 136,783 | 34,499 |
| C-Other Practitioners | 60,786 | 48,582 | 12,204 |
| C-Clinic Services | 1,244,649 | 994,756 | 249,893 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 12,016 | 9,598 | 2,418 |
| C-Laboratory/Radiological Services | 150,413 | 120,147 | 30,266 |
| C-Medical Equipment | 18,163 | 14,336 | 3,827 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 87,113,718 | 69,583,692 | 17,530,026 |
| C-Home Health | 4,018 | 3,206 | 812 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 189,401 | 151,285 | 38,116 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 1,461,569 | 1,167,333 | 294,236 |
| C-Balance | 96,285,985 | 76,910,337 | 19,375,648 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 96,285,985 | 76,910,337 | 19,375,648 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 60,176 | 39,114 | 21,062 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 13,472 | 8,757 | 4,715 |
| C-Outpatient Mental Health | 98,971 | 64,331 | 34,640 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 6,086 | 3,956 | 2,130 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 178,705 | 116,158 | 62,547 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 178,705 | 116,158 | 62,547 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 235,051 | 177,675 | 57,376 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 9,851,199 | 7,421,442 | 2,429,757 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 47,887,961 | 36,076,556 | 11,811,405 |
| C-Outpatient Hospital Services | 17,029,932 | 12,835,109 | 4,194,823 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 29,793,033 | 22,444,081 | 7,348,952 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 16,025,219 | 12,079,188 | 3,946,031 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 570,019 | 429,505 | 140,514 |
| C-Clinic Services | 6,812,362 | 5,131,464 | 1,680,898 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 961,281 | 724,391 | 236,890 |
| C-Medical Equipment | 1,938,094 | 1,460,536 | 477,558 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 8,161,630 | 6,150,346 | 2,011,284 |
| C-Home Health | 1,971,456 | 1,488,104 | 483,352 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 98,288 | 73,984 | 24,304 |
| C-Hospice | 6,824 | 5,135 | 1,689 |
| C-Medical Transport | 278,180 | 209,655 | 68,525 |
| C-Case Management | 18,451 | 13,897 | 4,554 |
| C-Other Services | 23,153,603 | 17,445,764 | 5,707,839 |
| C-Balance | 164,792,583 | 124,166,832 | 40,625,751 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 164,792,583 | 124,166,832 | 40,625,751 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 949,138 | 703,360 | 245,778 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,685,839 | 1,247,114 | 438,725 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 1,140 | 845 | 295 |
| C-Physician/Surgical | 785,469 | 582,108 | 203,361 |
| C-Outpatient Hospital Services | 580,630 | 430,297 | 150,333 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 109,340 | 81,032 | 28,308 |
| C-Drug Rebate - National | (38,856) | (28,796) | (10,060) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 259,986 | 192,672 | 67,314 |
| C-Vision Sevices | 8,693 | 6,442 | 2,251 |
| C-Other Practitioners | 55,942 | 41,457 | 14,485 |
| C-Clinic Services | 107,924 | 79,973 | 27,951 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 454,539 | 336,858 | 117,681 |
| C-Laboratory/Radiological Services | 8,884 | 6,583 | 2,301 |
| C-Medical Equipment | 32,281 | 23,923 | 8,358 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 38,936 | 28,855 | 10,081 |
| C-Home Health | 1,360,038 | 1,007,925 | 352,113 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 2,236,300 | 1,656,769 | 579,531 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 11,716 | 8,683 | 3,033 |
| C-Case Management | 32,621 | 24,175 | 8,446 |
| C-Other Services | 289,440 | 214,502 | 74,938 |
| C-Balance | 8,970,000 | 6,644,777 | 2,325,223 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 8,970,000 | 6,644,777 | 2,325,223 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 134,942,879 | 100,384,007 | 34,558,872 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 77,394,942 | 57,574,097 | 19,820,845 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 23,038,021 | 17,137,984 | 5,900,037 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,054,084 | 784,132 | 269,952 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 264,097 | 196,463 | 67,634 |
| C-Physician/Surgical | 5,084,530 | 3,782,396 | 1,302,134 |
| C-Outpatient Hospital Services | 8,450,875 | 6,286,606 | 2,164,269 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 46,278,984 | 34,426,941 | 11,852,043 |
| C-Drug Rebate - National | (9,766,927) | (7,265,617) | (2,501,310) |
| C-Drug Rebate - State | (834,324) | (620,654) | (213,670) |
| C-Dental Services | 1,530,504 | 1,138,547 | 391,957 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 1,311,629 | 975,724 | 335,905 |
| C-Clinic Services | 45,372,186 | 33,729,772 | 11,642,414 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 371,169 | 276,113 | 95,056 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 1,483,940 | 1,103,902 | 380,038 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 145,525 | 108,249 | 37,276 |
| C-Hospice | 8,019 | 5,965 | 2,054 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 4,531,786 | 3,317,526 | 1,214,260 |
| C-Other Services | 9,419,047 | 7,028,007 | 2,391,040 |
| C-Balance | 350,080,966 | 260,370,160 | 89,710,806 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 350,080,966 | 260,370,160 | 89,710,806 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 1,911,764 | 1,435,735 | 476,029 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 883,261 | 663,331 | 219,930 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 13,521,676 | 10,154,778 | 3,366,898 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 10,145,593 | 7,619,339 | 2,526,254 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 20,798,615 | 15,619,728 | 5,178,887 |
| C-Outpatient Hospital Services | 11,536,124 | 8,663,629 | 2,872,495 |
| C-Outpatient Mental Health | 17 | 13 | 4 |
| C-Prescribed Drugs | 33,191,085 | 24,926,505 | 8,264,580 |
| C-Drug Rebate - National | (7,591,250) | (5,701,029) | (1,890,221) |
| C-Drug Rebate - State | (4,786,903) | (3,594,964) | (1,191,939) |
| C-Dental Services | 24,414,494 | 18,335,285 | 6,079,209 |
| C-Vision Services | 4,279,127 | 3,213,625 | 1,065,502 |
| C-Other Practitioners | 2,005,575 | 1,506,188 | 499,387 |
| C-Clinic Services | 18,054,480 | 13,558,915 | 4,495,565 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 172,292 | 129,393 | 42,899 |
| C-Laboratory/Radiological Services | 3,106,288 | 2,332,821 | 773,467 |
| C-Medical Equipment | 1,441,712 | 1,082,725 | 358,987 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 2,403,612 | 1,805,111 | 598,501 |
| C-Home Health | 164,074 | 123,221 | 40,853 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | (414) | (311) | (103) |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 766,216 | 575,427 | 190,789 |
| C-Case Management | 678,116 | 509,200 | 168,916 |
| C-Other Services | 2,197,916 | 1,650,636 | 547,280 |
| C-Balance | 139,293,470 | 104,609,301 | 34,684,169 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 139,293,470 | 104,609,301 | 34,684,169 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 145,468,422 | 94,554,476 | 50,913,946 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. | | | |
| Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 145,468,422 | 94,554,476 | 50,913,946 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 145,468,422 | 94,554,476 | 50,913,946 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 27,558,367 | 18,418,864 | 9,139,503 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 27,558,367 | 18,418,864 | 9,139,503 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 27,558,367 | 18,418,864 | 9,139,503 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 17,159,413 | 13,630,618 | 3,528,795 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 4,777,175 | 3,784,478 | 992,697 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 1,569,305 | 1,243,204 | 326,101 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 10,605 | 8,401 | 2,204 |
| C-Physician/Surgical | 5,187,658 | 4,109,663 | 1,077,995 |
| C-Outpatient Hospital Services | 5,290,591 | 4,191,206 | 1,099,385 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 8,833,196 | 6,997,657 | 1,835,539 |
| C-Drug Rebate - National | (4,478,490) | (3,547,860) | (930,630) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 7,749,871 | 6,146,166 | 1,603,705 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 1,504,876 | 1,192,163 | 312,713 |
| C-Clinic Services | 8,289,000 | 6,566,545 | 1,722,455 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 485,783 | 384,837 | 100,946 |
| C-Laboratory/Radiological Services | 677,453 | 536,678 | 140,775 |
| C-Medical Equipment | 617,240 | 488,977 | 128,263 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 369,056 | 292,366 | 76,690 |
| C-Home Health | 17,299 | 13,704 | 3,595 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 12,827 | 10,161 | 2,666 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 3,283,877 | 2,601,487 | 682,390 |
| C-Case Management | 357,443 | 283,167 | 74,276 |
| C-Other Services | 184,384 | 146,070 | 38,314 |
| C-Balance | 61,898,562 | 49,079,688 | 12,818,874 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 61,898,562 | 49,079,688 | 12,818,874 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 3,259,911 | 2,410,199 | 849,712 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 3,637,482 | 2,688,099 | 949,383 |
| C-Outpatient Hospital Services | 2,420,135 | 1,788,480 | 631,655 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 3,769,819 | 2,785,896 | 983,923 |
| C-Drug Rebate - National | (994,975) | (735,286) | (259,689) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 2,545,998 | 1,881,492 | 664,506 |
| C-Vision Services | 89,971 | 66,489 | 23,482 |
| C-Other Practitioners | 874,416 | 646,193 | 228,223 |
| C-Clinic Services | 1,999,399 | 1,477,556 | 521,843 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 314,803 | 232,640 | 82,163 |
| C-Medical Equipment | 13,006 | 9,612 | 3,394 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 29,375 | 21,707 | 7,668 |
| C-Home Health | 106,178 | 78,466 | 27,712 |
| C-Medicare Payments | 32,553 | 24,057 | 8,496 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 80,606 | 59,567 | 21,039 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 469,186 | 346,729 | 122,457 |
| C-Balance | 18,647,863 | 13,781,896 | 4,865,967 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 18,647,863 | 13,781,896 | 4,865,967 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 37,144,631 | 28,676,336 | 8,468,295 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 11,736,299 | 9,015,475 | 2,720,824 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 6,638,795 | 5,167,123 | 1,471,672 |
| C-Vision Services | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 55,519,725 | 42,858,934 | 12,660,791 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 55,519,725 | 42,858,934 | 12,660,791 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 53,364,008 | 34,686,604 | 18,677,404 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 2,136,034 | 1,388,421 | 747,613 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 4,018,340 | 2,611,921 | 1,406,419 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 2,545,329 | 1,654,464 | 890,865 |
| C-Outpatient Hospital Services | 1,881,783 | 1,223,159 | 658,624 |
| C-Outpatient Mental Health | 22,478,418 | 14,610,971 | 7,867,447 |
| C-Prescribed Drugs | 4,079,565 | 2,651,716 | 1,427,849 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 16,941,604 | 11,012,043 | 5,929,561 |
| C-Vision Services | 271,564 | 176,517 | 95,047 |
| C-Other Practitioners | 404,777 | 263,107 | 141,670 |
| C-Clinic Services | 2,579,408 | 1,676,616 | 902,792 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 44,642 | 29,017 | 15,625 |
| C-Laboratory/Radiological Services | 346,132 | 224,989 | 121,143 |
| C-Medical Equipment | 237,896 | 154,630 | 83,266 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 232,638 | 151,215 | 81,423 |
| C-Home Health | 23,789 | 15,463 | 8,326 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 905,915 | 588,845 | 317,070 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 39,131 | 25,435 | 13,696 |
| C-Case Management | 55,364 | 35,988 | 19,376 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 112,586,337 | 73,181,121 | 39,405,216 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 112,586,337 | 73,181,121 | 39,405,216 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 44,852 | 29,190 | 15,662 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 132,340 | 86,127 | 46,213 |
| C-Outpatient Hospital Services | 82,417 | 53,637 | 28,780 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 35,374 | 23,021 | 12,353 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 1,200,262 | 781,130 | 419,132 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 45,316 | 29,491 | 15,825 |
| C-Clinic Services | 2,315 | 1,507 | 808 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 6,125 | 3,986 | 2,139 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 38,882 | 25,304 | 13,578 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 1,512 | 984 | 528 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 441,674 | 287,440 | 154,234 |
| C-Balance | 2,031,069 | 1,321,817 | 709,252 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 2,031,069 | 1,321,817 | 709,252 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|------------------|---------------|-------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 28,236,310 | 20,372,866 | 7,863,444 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 143,604 | 103,609 | 39,995 |
| C-Premiums: Over 150% - Gross Premiums Paid | 20 | 14 | 6 |
| C-Premiums: Over 150% - Cost Sharing Offset | (74) | (52) | (22) |
| C-Inpatient Hospital Services - Reg. Payments | 2,185,707 | 1,577,066 | 608,641 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 547,957 | 395,519 | 152,438 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 161,288 | 116,369 | 44,919 |
| C-Physician/Surgical | 400,849 | 289,158 | 111,691 |
| C-Outpatient Hospital Services | 1,893,432 | 1,366,234 | 527,198 |
| C-Outpatient Mental Health | 98,430 | 71,017 | 27,413 |
| C-Prescribed Drugs | 12,776,443 | 9,218,472 | 3,557,971 |
| C-Drug Rebate - National | (6,861,533) | (4,932,738) | (1,928,795) |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 3,200,025 | 2,308,887 | 891,138 |
| C-Vision Services | 69,861 | 50,405 | 19,456 |
| C-Other Practitioners | 748,775 | 540,252 | 208,523 |
| C-Clinic Services | 1,870,309 | 1,346,471 | 523,838 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 65,427 | 47,209 | 18,218 |
| C-Laboratory/Radiological Services | 351,931 | 253,944 | 97,987 |
| C-Medical Equipment | 363,933 | 262,588 | 101,345 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 165,310 | 119,278 | 46,032 |
| C-Home Health | 29,112 | 20,992 | 8,120 |
| C-Medicare Payments | 7,399 | 5,343 | 2,056 |
| C-Home And Community | 232,801 | 167,960 | 64,841 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 306,235 | 220,915 | 85,320 |
| C-Case Management | 709,256 | 510,360 | 198,896 |
| C-Other Services | 5,672,018 | 4,082,704 | 1,589,314 |
| C-Balance | 53,374,825 | 38,514,842 | 14,859,983 |
| C-Collections | (82,478) | (58,723) | (23,755) |
| C-Total Net | 53,292,347 | 38,456,119 | 14,836,228 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Up To 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Premiums: Over 150% - Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| C-Premiums: Over 150% - Cost | | | |
| Sharing Offset | 0 | 0 | 0 |
| C-Inpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |
| C-Inpatient Hospital Services - DSH | 0 | 0 | 0 |
| C-Inpatient Mental Health - Reg. Payment | 0 | 0 | 0 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 0 | 0 | 0 |
| C-Physician/Surgical | 0 | 0 | 0 |
| C-Outpatient Hospital Services | 0 | 0 | 0 |
| C-Outpatient Mental Health | 0 | 0 | 0 |
| C-Prescribed Drugs | 0 | 0 | 0 |
| C-Drug Rebate - National | 0 | 0 | 0 |
| C-Drug Rebate - State | 0 | 0 | 0 |
| C-Dental Services | 0 | 0 | 0 |
| C-Vision Sevices | 0 | 0 | 0 |
| C-Other Practitioners | 0 | 0 | 0 |
| C-Clinic Services | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 0 | 0 | 0 |
| C-Laboratory/Radiological Services | 0 | 0 | 0 |
| C-Medical Equipment | 0 | 0 | 0 |
| C-Family Planning | 0 | 0 | 0 |
| C-Abortions | 0 | 0 | 0 |
| C-Screening Services | 0 | 0 | 0 |
| C-Home Health | 0 | 0 | 0 |
| C-Medicare Payments | 0 | 0 | 0 |
| C-Home And Community | 0 | 0 | 0 |
| C-Hospice | 0 | 0 | 0 |
| C-Medical Transport | 0 | 0 | 0 |
| C-Case Management | 0 | 0 | 0 |
| C-Other Services | 0 | 0 | 0 |
| C-Balance | 0 | 0 | 0 |
| C-Collections | 0 | 0 | 0 |
| C-Total Net | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------|-------------------------|----------------------|--------------------|
| C-Premiums: Up To 150% - Gross Premiums Paid | 1,016,016,330 | 699,268,227 | 316,748,103 |
| C-Premiums: Up To 150% - Cost Sharing Offset | 33,350 | 16,971 | 16,379 |
| C-Premiums: Over 150% - Gross Premiums Paid | 258,051,338 | 175,728,914 | 82,322,424 |
| C-Premiums: Over 150% - Cost Sharing Offset | (74) | (52) | (22) |
| C-Inpatient Hospital Services - Reg. Payments | 174,241,235 | 125,772,364 | 48,468,871 |
| C-Inpatient Hospital Services - DSH | (656,588) | (530,063) | (126,525) |
| C-Inpatient Mental Health - Reg. Payment | 48,112,344 | 34,387,339 | 13,725,005 |
| C-Inpatient Mental Health - DSH | 0 | 0 | 0 |
| C-Nursing Care Services | 3,841,814 | 2,645,995 | 1,195,819 |
| C-Physician/Surgical | 203,535,074 | 151,775,159 | 51,759,915 |
| C-Outpatient Hospital Services | 162,924,056 | 118,487,202 | 44,436,854 |
| C-Outpatient Mental Health | 27,346,466 | 17,880,644 | 9,465,822 |
| C-Prescribed Drugs | 377,814,423 | 280,544,433 | 97,269,990 |
| C-Drug Rebate - National | (104,534,812) | (77,352,537) | (27,182,275) |
| C-Drug Rebate - State | (12,252,794) | (9,085,057) | (3,167,737) |
| C-Dental Services | 257,270,121 | 184,130,302 | 73,139,819 |
| C-Vision Services | 7,809,115 | 5,724,066 | 2,085,049 |
| C-Other Practitioners | 35,221,119 | 25,212,660 | 10,008,459 |
| C-Clinic Services | 170,877,064 | 126,541,347 | 44,335,717 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR M-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------|-------------------------|----------------------|--------------------|
| C-Therapy Services | 10,006,168 | 6,897,282 | 3,108,886 |
| C-Laboratory/Radiological Services | 17,153,016 | 12,949,056 | 4,203,960 |
| C-Medical Equipment | 8,841,514 | 6,332,126 | 2,509,388 |
| C-Family Planning | 332,984 | 248,739 | 84,245 |
| C-Abortions | 323 | 210 | 113 |
| C-Screening Services | 121,418,901 | 94,625,967 | 26,792,934 |
| C-Home Health | 8,681,028 | 6,422,030 | 2,258,998 |
| C-Medicare Payments | 39,952 | 29,400 | 10,552 |
| C-Home And Community | 10,684,921 | 7,613,988 | 3,070,933 |
| C-Hospice | 122,122 | 83,339 | 38,783 |
| C-Medical Transport | 13,037,212 | 9,425,951 | 3,611,261 |
| C-Case Management | 22,325,056 | 15,777,265 | 6,547,791 |
| C-Other Services | 187,232,369 | 132,582,615 | 54,649,754 |
| C-Balance | 3,025,525,147 | 2,154,135,882 | 871,389,265 |
| C-Collections | (17,075,468) | (11,145,694) | (5,929,774) |
| C-Total Net | 3,008,449,679 | 2,142,990,188 | 865,459,491 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|------------------|---------------|-------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 158,590 | (158,590) |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 116,396 | (116,396) |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 1,587 | (1,587) |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 14,085 | (14,085) |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 86,545 | (86,545) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 863,843 | (863,843) |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 818,661 | (818,661) |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 548,270 | (548,270) |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 550,064 | (550,064) |
| T-Laboratory/Radiological | 0 | 303 | (303) |
| T-Home Health Services | 0 | 57,167 | (57,167) |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 3,190 | (3,190) |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 46 | (46) |
| T-Medicaid - MCO | 0 | 3,518,901 | (3,518,901) |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 37,934 | (37,934) |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 4,216 | (4,216) |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 9,786 | (9,786) |
| T-Total Net Expenditures | 0 | 6,789,584 | (6,789,584) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|------------------|---------------|-------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 89,338 | (89,338) |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 4,672 | (4,672) |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 53,043 | (53,043) |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 29,261 | (29,261) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 34,181 | (34,181) |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 14,104 | (14,104) |
| T-Other Practitioners Services - Reg. Payments | 0 | 25,205 | (25,205) |
| T-Other Practitioners Services - Sup. Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 2,248 | (2,248) |
| T-Laboratory/Radiological | 0 | 1,551 | (1,551) |
| T-Home Health Services | 0 | 5,570 | (5,570) |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 15,313 | (15,313) |
| T-Rural Health | 0 | (2) | 2 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | (10) | 10 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 3,116,749 | (3,116,749) |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 62,131 | (62,131) |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 22,054 | (22,054) |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 47,029 | (47,029) |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 314 | (314) |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 323 | (323) |
| T-Occupational Therapy | 0 | 953 | (953) |
| T-Services for Speech, Hearing & Language | 0 | 569 | (569) |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 2,597 | (2,597) |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 611 | (611) |
| T-Emergency Hospital Services | 0 | 7,757 | (7,757) |
| T-Critical Access Hospitals | 0 | 8,101 | (8,101) |
| T-Nurse Practitioner Services | 0 | 3,585 | (3,585) |
| T-School Based Services | 0 | 35,437 | (35,437) |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 25,780 | (25,780) |
| T-Other Care Services | 0 | 5,866 | (5,866) |
| T-Total Net Expenditures | 0 | 3,614,330 | (3,614,330) |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|------------------|---------------|-------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 69,752 | (69,752) |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 9,061 | (9,061) |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 809 | (809) |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 145,948 | (145,948) |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 130,112 | (130,112) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 155,662 | (155,662) |
| T-Drug Rebate Offset - National | 0 | (87,786) | 87,786 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | (7,151) | 7,151 |
| T-Dental Services | 0 | 144,625 | (144,625) |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 20,917 | (20,917) |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 228,578 | (228,578) |
| T-Laboratory/Radiological | 0 | 2,507 | (2,507) |
| T-Home Health Services | 0 | 5,122 | (5,122) |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 33,255 | (33,255) |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 10,757 | (10,757) |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 100,051 | (100,051) |
| T-Total Net Expenditures | 0 | 962,219 | (962,219) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Created On: Wednesday, April 3, 2013 at 9:46

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|------------------|---------------|-------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|------------------|---------------|-------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 508,090 | (508,090) |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 508,090 | (508,090) |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 839,504 | (839,504) |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 269,994 | (269,994) |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 272,061 | (272,061) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 741,228 | (741,228) |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 1,637,864 | (1,637,864) |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 124,671 | (124,671) |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 27,140 | (27,140) |
| T-Laboratory/Radiological | 0 | 8,129 | (8,129) |
| T-Home Health Services | 0 | 188,594 | (188,594) |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 30,262 | (30,262) |
| T-Rural Health | 0 | 67,198 | (67,198) |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 4,266,299 | (4,266,299) |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 616,249 | (616,249) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|------------------|---------------|-------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 20,569 | (20,569) |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 3,008 | (3,008) |
| T-Emergency | 0 | 881 | (881) |
| T-Federally-Qualified Health Center | 0 | 192,516 | (192,516) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 75,144 | (75,144) |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 373,778 | (373,778) |
| T-Total Net Expenditures | 0 | 9,755,089 | (9,755,089) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR T-CHIP

| <u>Service Category</u> | <u>Total Computable</u> | <u>Federal Share</u> | <u>State Share</u> |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 0 | 0 |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 0 | 0 |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 0 | 0 |
| T-Drug Rebate Offset - National | 0 | 0 | 0 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | 0 | 0 |
| T-Dental Services | 0 | 0 | 0 |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 0 | 0 |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 0 | 0 |
| T-Laboratory/Radiological | 0 | 0 | 0 |
| T-Home Health Services | 0 | 0 | 0 |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 0 | 0 |
| T-Rural Health | 0 | 0 | 0 |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | 0 | 0 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 0 | 0 |
| T-Medicaid - MCO | 0 | 0 | 0 |
| | | | |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 0 | 0 |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 0 | 0 |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 0 | 0 |
| T-Case Management - State Wide | 0 | 0 | 0 |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 0 | 0 |
| T-Emergency | 0 | 0 | 0 |
| T-Federally-Qualified Health Center | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 0 | 0 |
| T-Occupational Therapy | 0 | 0 | 0 |
| T-Services for Speech, Hearing & Language | 0 | 0 | 0 |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 0 | 0 |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 0 | 0 |
| T-Emergency Hospital Services | 0 | 0 | 0 |
| T-Critical Access Hospitals | 0 | 0 | 0 |
| T-Nurse Practitioner Services | 0 | 0 | 0 |
| T-School Based Services | 0 | 0 | 0 |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 0 | 0 |
| T-Other Care Services | 0 | 0 | 0 |
| T-Total Net Expenditures | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Inpatient Hospital - Reg. Payments | 0 | 1,157,184 | (1,157,184) |
| T-Inpatient Hospital - DSH | 0 | 0 | 0 |
| T-Inpatient Hospital - Sup. Payments | 0 | 0 | 0 |
| T-Inpatient Hospital - GME Payments | 0 | 0 | 0 |
| T-Mental Health Facility Services - Reg. Payments | 0 | 130,129 | (130,129) |
| T-Mental Health Facility - DSH | 0 | 0 | 0 |
| T-Nursing Facility Services - Reg. Payments | 0 | 809 | (809) |
| T-Nursing Facility Services - Sup. Payments | 0 | 0 | 0 |
| T-Intermediate Care Facility - Public | 0 | 1,587 | (1,587) |
| T-Intermediate Care - Private | 0 | 0 | 0 |
| T-Intermediate Care Facility - Mentally Retarded: Supplemental Payments | 0 | 0 | 0 |
| T-Physician & Surgical Services - Reg. Payments | 0 | 483,070 | (483,070) |
| T-Physician & Surgical Services - Sup. Payments | 0 | 0 | 0 |
| T-Outpatient Hospital Services - Reg. Payments | 0 | 517,979 | (517,979) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Outpatient Hospital Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Prescribed Drugs | 0 | 1,794,914 | (1,794,914) |
| T-Drug Rebate Offset - National | 0 | (87,786) | 87,786 |
| T-Drug Rebate Offset - State Sidebar Agreement | 0 | (7,151) | 7,151 |
| T-Dental Services | 0 | 2,615,254 | (2,615,254) |
| T-Other Practitioners Services - Reg. | | | |
| Payments | 0 | 719,063 | (719,063) |
| T-Other Practitioners Services - Sup. | | | |
| Payments | 0 | 0 | 0 |
| T-Clinic Services | 0 | 808,030 | (808,030) |
| T-Laboratory/Radiological | 0 | 12,490 | (12,490) |
| T-Home Health Services | 0 | 256,453 | (256,453) |
| T-Sterilizations | 0 | 0 | 0 |
| T-Abortions | 0 | 0 | 0 |
| T-EPSTD Screening | 0 | 48,765 | (48,765) |
| T-Rural Health | 0 | 100,451 | (100,451) |
| T-Medicare - Part A | 0 | 0 | 0 |
| T-Medicare - Part B | 0 | (10) | 10 |
| T-120% - 134% Of Poverty | 0 | 0 | 0 |
| T-Coinsurance | 0 | 46 | (46) |
| T-Medicaid - MCO | 0 | 11,410,039 | (11,410,039) |
| T-Prepaid Ambulatory Health Plan | 0 | 0 | 0 |
| T-Prepaid Inpatient Health Plan | 0 | 616,249 | (616,249) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Medicaid - Group Health | 0 | 0 | 0 |
| T-Medicaid - Coinsurance | 0 | 0 | 0 |
| T-Medicaid - Other | 0 | 62,131 | (62,131) |
| T-Home & Community-Based Services - Reg. Pay. (Waiv) | 0 | 48,691 | (48,691) |
| T-Home & Community-Based Services - St. Plan 1915(i) Only Pay. | 0 | 0 | 0 |
| T-Home & Community-Based Services - St. Plan 1915(j) Only Pay. | 0 | 0 | 0 |
| T-All-Inclusive Care Elderly | 0 | 0 | 0 |
| T-Personal Care Services - Reg. Payments | 0 | 42,623 | (42,623) |
| T-Personal Care Services - SDS 1915(j) | 0 | 0 | 0 |
| T-Targeted Case Management Services - Com. Case-Man. | 0 | 4,216 | (4,216) |
| T-Case Management - State Wide | 0 | 47,029 | (47,029) |
| T-Primary Care Case Management | 0 | 0 | 0 |
| T-Hospice Benefits | 0 | 3,322 | (3,322) |
| T-Emergency | 0 | 881 | (881) |
| T-Federally-Qualified Health Center | 0 | 192,516 | (192,516) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR T-CHIP

| Service Category | Total Computable | Federal Share | State Share |
|--------------------------------------------------|-------------------------|----------------------|--------------------|
| T-Non-Emergency Medical | | | |
| Transportation | 0 | 0 | 0 |
| T-Physical Therapy | 0 | 323 | (323) |
| T-Occupational Therapy | 0 | 953 | (953) |
| T-Services for Speech, Hearing & Language | 0 | 569 | (569) |
| T-Prosthetic Devices, Dentures, Eyeglasses | 0 | 2,597 | (2,597) |
| T-Diagnostic Screening & Preventive Services | 0 | 0 | 0 |
| T-Nurse Mid-Wife | 0 | 611 | (611) |
| T-Emergency Hospital Services | 0 | 7,757 | (7,757) |
| T-Critical Access Hospitals | 0 | 8,101 | (8,101) |
| T-Nurse Practitioner Services | 0 | 3,585 | (3,585) |
| T-School Based Services | 0 | 110,581 | (110,581) |
| T-Rehabilitative Services (non-school- based) | 0 | 0 | 0 |
| T-Private Duty Nursing | 0 | 25,780 | (25,780) |
| T-Other Care Services | 0 | 489,481 | (489,481) |
| T-Total Net Expenditures | 0 | 21,629,312 | (21,629,312) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 967,242 | 870,518 | 96,724 |
| MMIS - Inhouse Activities | 1,581,174 | 1,423,056 | 158,118 |
| MMIS - Private Sector | 2,518,072 | 2,266,265 | 251,807 |
| Skilled Professional Medical Personnel - Single State Agency | 5,238,270 | 3,928,704 | 1,309,566 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 10,577,488 | 7,933,117 | 2,644,371 |
| Approved MMIS: Private | 36,176,329 | 27,132,248 | 9,044,081 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | (19,281,092) | (9,640,545) | (9,640,547) |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 2,216,316 | 1,662,237 | 554,079 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 860,275 | 645,207 | 215,068 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 356,588 | 178,294 | 178,294 |
| Outstationed Eligibility | 11,483,624 | 5,741,813 | 5,741,811 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 35,561,676 | 17,780,838 | 17,780,838 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 64,857,013 | 32,428,509 | 32,428,504 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 153,112,975 | 92,350,261 | 60,762,714 |
| Collections | (83,869) | (43,626) | (40,243) |
| Total Net Expenditures | 153,029,106 | 92,306,635 | 60,722,471 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (1,695,694) | (1,316,028) | (379,666) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (2,344,127) | (1,819,277) | (524,850) |
| Inpatient Hospital | 21,880,345 | 16,981,335 | 4,899,010 |
| Inpatient Mental Health | 1,976,740 | 1,534,148 | 442,592 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 37,960,936 | 29,461,482 | 8,499,454 |
| Outpatient Hospital | 16,431,206 | 12,752,259 | 3,678,947 |
| Outpatient Mental Health | 5,389,271 | 4,182,613 | 1,206,658 |
| Prescribed Drugs | 29,456,233 | 22,860,983 | 6,595,250 |
| Drug Rebate | (1,496,488) | (1,161,424) | (335,064) |
| Dental Services | 19,696,490 | 15,286,446 | 4,410,044 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 929,445 | 721,343 | 208,102 |
| Clinic Services | 2,467 | 1,915 | 552 |
| Therapy Services | 2,273,173 | 1,764,210 | 508,963 |
| Laboratory/Radiological | 13,605,965 | 10,559,589 | 3,046,376 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 4,562,073 | 3,540,624 | 1,021,449 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 1,027,747 | 797,634 | 230,113 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 13,910 | 11,491 | 2,419 |
| Other Services | 7,698,377 | 5,974,710 | 1,723,667 |
| Outreach | 1,678,884 | 1,302,983 | 375,901 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 6,384,170 | 4,954,754 | 1,429,416 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 54,528 | 49,075 | 5,453 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 165,485,651 | 128,440,865 | 37,044,786 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alabama

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 165,485,651 | 128,440,865 | 37,044,786 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 1,683,974 | 841,988 | 841,986 |
| MMIS - Private Sector | 1,054,968 | 527,486 | 527,482 |
| Skilled Professional Medical Personnel - Single State Agency | 520,340 | 260,171 | 260,169 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 16,437,455 | 12,328,092 | 4,109,363 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 4,591,241 | 3,443,431 | 1,147,810 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 55,302 | 27,652 | 27,650 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 2,803,666 | 1,401,834 | 1,401,832 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 68,499,199 | 34,249,601 | 34,249,598 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 95,646,145 | 53,080,255 | 42,565,890 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 95,646,145 | 53,080,255 | 42,565,890 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 1,051,436 | 693,888 | 357,548 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 1,051,436 | 693,888 | 357,548 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Alaska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 1,051,436 | 693,888 | 357,548 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 792,783 | 396,393 | 396,390 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 792,783 | 396,393 | 396,390 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 792,783 | 396,393 | 396,390 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 0 | 0 | 0 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 0 | 0 | 0 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Amer. Samoa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 493,512 | 444,161 | 49,351 |
| MMIS - Private Sector | 313,345 | 282,010 | 31,335 |
| Skilled Professional Medical Personnel - Single State Agency | 1,143,707 | 857,781 | 285,926 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 14,043,586 | 10,532,691 | 3,510,895 |
| Approved MMIS: Private | 951,955 | 713,967 | 237,988 |
| Mechanized Systems - In-House | 431,060 | 215,531 | 215,529 |
| Mechanized Systems: Private Sector | 207,115 | 103,559 | 103,556 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 1,384,919 | 692,461 | 692,458 |
| Peer Review Organizations | 249,642 | 187,233 | 62,409 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 212,691 | 106,346 | 106,345 |
| Preadmission Screening | 3,741,976 | 2,806,482 | 935,494 |
| Resident Review | 287,699 | 215,775 | 71,924 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 163,809 | 122,857 | 40,952 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 6,419,734 | 3,209,867 | 3,209,867 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 2,410,975 | 1,205,489 | 1,205,486 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 68,493,431 | 34,246,718 | 34,246,713 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 260,352 | 234,318 | 26,034 |
| HIT: Planning: Cost of Private Contractors | 1,948 | 1,753 | 195 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 48,635,673 | 24,317,837 | 24,317,836 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 149,847,129 | 80,496,836 | 69,350,293 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 149,847,129 | 80,496,836 | 69,350,293 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 44,341,196 | 33,712,330 | 10,628,866 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 31,781,543 | 24,163,487 | 7,618,056 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (8,371,700) | (6,365,002) | (2,006,698) |
| Inpatient Hospital | 391,409 | 297,592 | 93,817 |
| Inpatient Mental Health | 166,861 | 126,864 | 39,997 |
| Nursing Care Services | 41,509 | 31,559 | 9,950 |
| Physician/Surgical | 283,105 | 215,243 | 67,862 |
| Outpatient Hospital | 380,395 | 289,212 | 91,183 |
| Outpatient Mental Health | 1,901 | 1,445 | 456 |
| Prescribed Drugs | 574,380 | 436,702 | 137,678 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 288,407 | 219,277 | 69,130 |
| Vision Services | 53,621 | 40,767 | 12,854 |
| Other Practitioners | 27,465 | 20,881 | 6,584 |
| Clinic Services | (42,551) | (32,497) | (10,054) |
| Therapy Services | 6,673 | 5,073 | 1,600 |
| Laboratory/Radiological | 33,317 | 25,331 | 7,986 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 68,592 | 52,149 | 16,443 |
| Family Planning | 557 | 423 | 134 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 29,993 | 22,805 | 7,188 |
| Home Health | 1,653 | 1,256 | 397 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 148,671 | 113,034 | 35,637 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 42,005 | 31,937 | 10,068 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 5,925,111 | 4,504,862 | 1,420,249 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 76,174,113 | 57,914,730 | 18,259,383 |
| Less: Collection | (110,719) | (84,652) | (26,067) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arizona

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 76,063,394 | 57,830,078 | 18,233,316 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 14,914 | 13,422 | 1,492 |
| MMIS - Private Sector | 997,602 | 897,841 | 99,761 |
| Skilled Professional Medical Personnel - Single State Agency | 19,098,238 | 14,323,679 | 4,774,559 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 645,492 | 484,120 | 161,372 |
| Approved MMIS: Private | 21,625,064 | 16,218,800 | 5,406,264 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 24,260,794 | 18,195,596 | 6,065,198 |
| TPL - Recovery | 90,475 | 45,238 | 45,237 |
| TPL - Assignment Of Rights | 30,490 | 15,245 | 15,245 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 1,158,677 | 579,339 | 579,338 |
| Preadmission Screening | 645,214 | 483,912 | 161,302 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 233,228 | 116,615 | 116,613 |
| Outstationed Eligibility | 1,451,095 | 725,549 | 725,546 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 20,579,020 | 10,289,511 | 10,289,509 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 37,538 | 33,784 | 3,754 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 99,455,988 | 49,728,001 | 49,727,987 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 190,323,829 | 112,150,652 | 78,173,177 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 190,323,829 | 112,150,652 | 78,173,177 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 7,057,973 | 5,713,428 | 1,344,545 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 20,868 | 16,892 | 3,976 |
| Physician/Surgical | 5,205,650 | 4,213,973 | 991,677 |
| Outpatient Hospital | 2,097,634 | 1,698,036 | 399,598 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 1,425,449 | 1,153,901 | 271,548 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 22,131 | 17,915 | 4,216 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 73,768 | 59,716 | 14,052 |
| Clinic Services | 449,071 | 363,524 | 85,547 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 2,079,844 | 1,683,632 | 396,212 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 11,875 | 9,613 | 2,262 |
| Home Health | 77,415 | 62,668 | 14,747 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,083,871 | 877,394 | 206,477 |
| Outreach | 245,776 | 198,955 | 46,821 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 4,795,039 | 3,881,585 | 913,454 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 24,646,364 | 19,951,232 | 4,695,132 |
| Less: Collection | (1,395,818) | (1,129,915) | (265,903) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Arkansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 23,250,546 | 18,821,317 | 4,429,229 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 2,722,717 | 2,450,448 | 272,269 |
| MMIS - Private Sector | 25,423,837 | 22,881,455 | 2,542,382 |
| Skilled Professional Medical Personnel - Single State Agency | 74,411,638 | 55,808,732 | 18,602,906 |
| Skilled Professional Medical Personnel - Other Agency | 162,892,158 | 122,169,122 | 40,723,036 |
| Approved MMIS: Inhouse | 49,159,601 | 36,869,704 | 12,289,897 |
| Approved MMIS: Private | 134,415,532 | 100,811,650 | 33,603,882 |
| Mechanized Systems - In-House | 1,349,283 | 674,641 | 674,642 |
| Mechanized Systems: Private Sector | 62,536,419 | 31,268,213 | 31,268,206 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 6,855,767 | 6,855,767 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 330,000 | 165,000 | 165,000 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 3,852,612 | 2,889,462 | 963,150 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 323,545,399 | 161,772,700 | 161,772,699 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 1,085,741,031 | 542,870,516 | 542,870,515 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 241,518 | 217,367 | 24,151 |
| HIT: Planning: Cost of Private Contractors | 1,568,661 | 1,411,795 | 156,866 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 1,956,439,143 | 978,219,606 | 978,219,537 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 3,891,485,316 | 2,067,336,178 | 1,824,149,138 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 3,891,485,316 | 2,067,336,178 | 1,824,149,138 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 471,099,218 | 306,214,490 | 164,884,728 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (39,276,413) | (25,529,669) | (13,746,744) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 770,394,009 | 500,756,107 | 269,637,902 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (66,133,384) | (42,986,700) | (23,146,684) |
| Inpatient Hospital | 48,344,929 | 31,424,203 | 16,920,726 |
| Inpatient Mental Health | 51,107 | 33,219 | 17,888 |
| Nursing Care Services | 1,579 | 1,026 | 553 |
| Physician/Surgical | 60,683,142 | 39,444,043 | 21,239,099 |
| Outpatient Hospital | 25,829,306 | 16,789,050 | 9,040,256 |
| Outpatient Mental Health | 35,314,368 | 22,954,338 | 12,360,030 |
| Prescribed Drugs | 26,463,747 | 17,201,436 | 9,262,311 |
| Drug Rebate | (617,814) | (401,579) | (216,235) |
| Dental Services | 5,294,970 | 3,441,731 | 1,853,239 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 1,745,535 | 1,134,600 | 610,935 |
| Clinic Services | 85,477,073 | 55,560,098 | 29,916,975 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 10,391,248 | 6,754,311 | 3,636,937 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 1,480,256 | 962,167 | 518,089 |
| Home Health | 223,394 | 145,205 | 78,189 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 343,137 | 223,039 | 120,098 |
| Case Management | 2,486,184 | 1,616,019 | 870,165 |
| Translation and Interpretation | 394,832 | 296,124 | 98,708 |
| Other Services | 12,666,646 | 8,233,321 | 4,433,325 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 101,821,184 | 66,183,768 | 35,637,416 |
| PERM Administration | 148,347 | 133,512 | 14,835 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 1,554,626,600 | 1,010,583,859 | 544,042,741 |
| Less: Collection | (11,107) | (7,220) | (3,887) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

California

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 1,554,615,493 | 1,010,576,639 | 544,038,854 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 32,470 | 29,224 | 3,246 |
| Skilled Professional Medical Personnel - Single State Agency | 466,808 | 350,106 | 116,702 |
| Skilled Professional Medical Personnel - Other Agency | 134,823 | 101,118 | 33,705 |
| Approved MMIS: Inhouse | 1,633,191 | 1,224,894 | 408,297 |
| Approved MMIS: Private | 25,226,877 | 17,809,371 | 7,417,506 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 2,247,924 | 1,685,944 | 561,980 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 51,302 | 51,302 | 0 |
| Nurse Aide Training Costs | 325,343 | 162,672 | 162,671 |
| Preadmission Screening | 1,862,884 | 1,397,164 | 465,720 |
| Resident Review | 6,396 | 4,797 | 1,599 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 1,160,118 | 870,091 | 290,027 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 29,214 | 24,355 | 4,859 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 132,347,864 | 66,173,919 | 66,173,945 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 165,525,214 | 89,884,957 | 75,640,257 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 165,525,214 | 89,884,957 | 75,640,257 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 112,486,115 | 73,115,976 | 39,370,139 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 61,362,866 | 39,885,862 | 21,477,004 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 4,185 | 3,139 | 1,046 |
| Other Services | 82,015 | 53,310 | 28,705 |
| Outreach | 811,233 | 527,301 | 283,932 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 3,458,731 | 2,248,176 | 1,210,555 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 178,205,145 | 115,833,764 | 62,371,381 |
| Less: Collection | (356,826) | (231,952) | (124,874) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Colorado

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 177,848,319 | 115,601,812 | 62,246,507 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 72,634 | 65,371 | 7,263 |
| MMIS - Private Sector | 2,396,186 | 2,156,569 | 239,617 |
| Skilled Professional Medical Personnel - Single State Agency | 4,008,805 | 3,006,605 | 1,002,200 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 1,129,443 | 847,083 | 282,360 |
| Approved MMIS: Private | 36,408,205 | 27,306,154 | 9,102,051 |
| Mechanized Systems - In-House | 1,843,968 | 921,985 | 921,983 |
| Mechanized Systems: Private Sector | (17,471,581) | (8,735,790) | (8,735,791) |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 975,767 | 731,826 | 243,941 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 39,995 | 19,998 | 19,997 |
| Preadmission Screening | 1,237,011 | 927,759 | 309,252 |
| Resident Review | 666,004 | 499,504 | 166,500 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 2,932,701 | 1,466,351 | 1,466,350 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 8,304,672 | 4,152,338 | 4,152,334 |
| School Based Administration | 48,600 | 24,301 | 24,299 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 103,669,977 | 51,834,991 | 51,834,986 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 146,262,387 | 85,225,045 | 61,037,342 |
| Collections | (324,845) | (163,922) | (160,923) |
| Total Net Expenditures | 145,937,542 | 85,061,123 | 60,876,419 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 21,624,710 | 14,056,062 | 7,568,648 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 852,573 | 554,171 | 298,402 |
| Inpatient Mental Health | 506,797 | 329,418 | 177,379 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 70,808 | 46,025 | 24,783 |
| Outpatient Hospital | 462,576 | 300,675 | 161,901 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 6,184,772 | 4,020,101 | 2,164,671 |
| Drug Rebate | (128,546) | (83,555) | (44,991) |
| Dental Services | 4,791,340 | 3,114,371 | 1,676,969 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 520,113 | 338,073 | 182,040 |
| Clinic Services | 2,932,045 | 1,905,830 | 1,026,215 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 9,167 | 5,959 | 3,208 |
| Home Health | 42,720 | 27,768 | 14,952 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 634,338 | 412,320 | 222,018 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 1,799,401 | 1,169,611 | 629,790 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 40,302,814 | 26,196,829 | 14,105,985 |
| Less: Collection | (4,989,639) | (3,243,265) | (1,746,374) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Connecticut

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 35,313,175 | 22,953,564 | 12,359,611 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 172,132 | 154,919 | 17,213 |
| Skilled Professional Medical Personnel - Single State Agency | 3,144,306 | 2,358,230 | 786,076 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 13,117,269 | 9,837,952 | 3,279,317 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 996 | 498 | 498 |
| Preadmission Screening | 2,069,977 | 1,552,483 | 517,494 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 38,902,928 | 19,451,465 | 19,451,463 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 57,407,608 | 33,355,547 | 24,052,061 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 57,407,608 | 33,355,547 | 24,052,061 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 5,461,577 | 3,558,218 | 1,903,359 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (370,308) | (241,255) | (129,053) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 3,057,153 | 1,991,734 | 1,065,419 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (206,961) | (134,835) | (72,126) |
| Inpatient Hospital | 141,852 | 92,417 | 49,435 |
| Inpatient Mental Health | 56 | 36 | 20 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 223,026 | 145,302 | 77,724 |
| Outpatient Hospital | 299,258 | 194,967 | 104,291 |
| Outpatient Mental Health | 2,058,852 | 1,341,341 | 717,511 |
| Prescribed Drugs | 2,681,156 | 1,746,774 | 934,382 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 2,960,879 | 1,929,012 | 1,031,867 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 32,947 | 21,464 | 11,483 |
| Clinic Services | 2,383 | 1,552 | 831 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 16,882 | 10,998 | 5,884 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 1,277,813 | 832,496 | 445,317 |
| Home Health | 10,012 | 6,523 | 3,489 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 5,468 | 3,562 | 1,906 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 627,795 | 409,009 | 218,786 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 1,365,099 | 889,361 | 475,738 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 19,644,939 | 12,798,676 | 6,846,263 |
| Less: Collection | (337,473) | (219,864) | (117,609) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Delaware

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 19,307,466 | 12,578,812 | 6,728,654 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 7,527,040 | 6,688,942 | 838,098 |
| MMIS - Private Sector | 20,350,764 | 18,300,139 | 2,050,625 |
| Skilled Professional Medical Personnel - Single State Agency | 1,523,599 | 1,142,700 | 380,899 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 77,650 | 58,238 | 19,412 |
| Approved MMIS: Private | 7,188,907 | 5,391,681 | 1,797,226 |
| Mechanized Systems - In-House | 288,444 | 144,223 | 144,221 |
| Mechanized Systems: Private Sector | 7,978,834 | 3,989,418 | 3,989,416 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 4,824,753 | 3,618,566 | 1,206,187 |
| TPL - Recovery | 24,563 | 12,283 | 12,280 |
| TPL - Assignment Of Rights | 11,035 | 5,518 | 5,517 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 8,261 | 7,435 | 826 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 78,382,611 | 39,191,308 | 39,191,303 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 128,186,461 | 78,550,451 | 49,636,010 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 128,186,461 | 78,550,451 | 49,636,010 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 414,790 | 327,685 | 87,105 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 135,068 | 106,703 | 28,365 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 549,858 | 434,388 | 115,470 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Dist. Of Col.

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 549,858 | 434,388 | 115,470 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | (84,247) | (75,822) | (8,425) |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 6,119,076 | 4,589,310 | 1,529,766 |
| Skilled Professional Medical Personnel - Other Agency | 634,341 | 475,756 | 158,585 |
| Approved MMIS: Inhouse | 866,955 | 650,216 | 216,739 |
| Approved MMIS: Private | 93,873,452 | 70,405,090 | 23,468,362 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | (36,981,629) | (18,490,815) | (18,490,814) |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 24,097,779 | 18,073,335 | 6,024,444 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 11,811 | 5,906 | 5,905 |
| Preadmission Screening | 16,279,111 | 12,209,334 | 4,069,777 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 260,541,990 | 130,270,996 | 130,270,994 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 173,864 | 156,478 | 17,386 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 249,602,008 | 124,801,008 | 124,801,000 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 615,134,511 | 343,070,792 | 272,063,719 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 615,134,511 | 343,070,792 | 272,063,719 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 191,998,291 | 131,492,438 | 60,505,853 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (15,407,685) | (10,552,724) | (4,854,961) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 84,562,696 | 57,916,990 | 26,645,706 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (9,383,040) | (6,426,444) | (2,956,596) |
| Inpatient Hospital | 1,042,259 | 713,742 | 328,517 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 18,920 | 12,957 | 5,963 |
| Physician/Surgical | 114,856,748 | 78,696,238 | 36,160,510 |
| Outpatient Hospital | 2,404,906 | 1,646,852 | 758,054 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 1,818,684 | 1,245,373 | 573,311 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 1,092,176 | 747,723 | 344,453 |
| Vision Services | 15,370 | 10,524 | 4,846 |
| Other Practitioners | 233,114 | 159,623 | 73,491 |
| Clinic Services | 931,628 | 637,878 | 293,750 |
| Therapy Services | 632,066 | 432,820 | 199,246 |
| Laboratory/Radiological | 80,764 | 55,315 | 25,449 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 47 | 32 | 15 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 768,469 | 526,229 | 242,240 |
| Home Health | 94,239 | 64,536 | 29,703 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 1,244 | 852 | 392 |
| Medical Transportation | 61,906 | 42,384 | 19,522 |
| Case Management | 460,861 | 315,381 | 145,480 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 25,882,286 | 17,707,267 | 8,175,019 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 45,042,448 | 30,870,504 | 14,171,944 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 447,208,397 | 306,316,490 | 140,891,907 |
| Less: Collection | (114,603) | (78,492) | (36,111) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Florida

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 447,093,794 | 306,237,998 | 140,855,796 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 667,180 | 600,462 | 66,718 |
| MMIS - Private Sector | 31,648,673 | 28,483,806 | 3,164,867 |
| Skilled Professional Medical Personnel - Single State Agency | 3,873,878 | 2,905,409 | 968,469 |
| Skilled Professional Medical Personnel - Other Agency | 132,395 | 99,296 | 33,099 |
| Approved MMIS: Inhouse | 9,394,939 | 7,046,205 | 2,348,734 |
| Approved MMIS: Private | 56,080,348 | 42,060,261 | 14,020,087 |
| Mechanized Systems - In-House | 4,538,934 | 2,269,468 | 2,269,466 |
| Mechanized Systems: Private Sector | 40,384,964 | 20,192,484 | 20,192,480 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | (249,634) | (124,818) | (124,816) |
| Preadmission Screening | 670,376 | 502,781 | 167,595 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 414,756 | 373,281 | 41,475 |
| HIT: Planning: Cost of Private Contractors | 40,552 | 36,497 | 4,055 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 213,669,336 | 106,834,672 | 106,834,664 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 361,266,697 | 211,279,804 | 149,986,893 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 361,266,697 | 211,279,804 | 149,986,893 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 286,803,488 | 216,732,056 | 70,071,432 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (25,786,972) | (19,487,157) | (6,299,815) |
| Inpatient Hospital | 2,016,394 | 1,521,935 | 494,459 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 133,026 | 100,541 | 32,485 |
| Physician/Surgical | 2,414,322 | 1,825,268 | 589,054 |
| Outpatient Hospital | (748,993) | (476,846) | (272,147) |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 2,597,372 | 1,962,935 | 634,437 |
| Drug Rebate | (1,297,975) | (980,879) | (317,096) |
| Dental Services | 3,182,289 | 2,405,489 | 776,800 |
| Vision Services | 213,219 | 161,177 | 52,042 |
| Other Practitioners | 266,288 | 201,359 | 64,929 |
| Clinic Services | 521,746 | 394,512 | 127,234 |
| Therapy Services | 7,420 | 5,613 | 1,807 |
| Laboratory/Radiological | 104,366 | 78,885 | 25,481 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 152,871 | 115,629 | 37,242 |
| Family Planning | 4,856 | 3,669 | 1,187 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 665,554 | 503,023 | 162,531 |
| Home Health | 7,953 | 6,014 | 1,939 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 61,262 | 46,325 | 14,937 |
| Case Management | 1,988,050 | 1,502,512 | 485,538 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 68,166 | 51,538 | 16,628 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 24,913,590 | 18,827,200 | 6,086,390 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 298,288,292 | 225,500,798 | 72,787,494 |
| Less: Collection | (155,488) | (117,502) | (37,986) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Georgia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 298,132,804 | 225,383,296 | 72,749,508 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 118,900 | 89,175 | 29,725 |
| Skilled Professional Medical Personnel - Other Agency | 180,925 | 135,694 | 45,231 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 1,318,865 | 659,433 | 659,432 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 1,618,690 | 884,302 | 734,388 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 1,618,690 | 884,302 | 734,388 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 0 | 0 | 0 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 0 | 0 | 0 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Guam

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 61,843 | 55,659 | 6,184 |
| MMIS - Private Sector | 793,565 | 714,209 | 79,356 |
| Skilled Professional Medical Personnel - Single State Agency | 578,480 | 433,860 | 144,620 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 51,265 | 38,449 | 12,816 |
| Approved MMIS: Private | 16,308,888 | 12,231,667 | 4,077,221 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 1,730,100 | 865,051 | 865,049 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 908,587 | 681,441 | 227,146 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 49,734 | 24,868 | 24,866 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 704,443 | 352,222 | 352,221 |
| TANF Base | 771,876 | 694,689 | 77,187 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 120,400 | 90,300 | 30,100 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 44,526,426 | 22,263,214 | 22,263,212 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 66,605,607 | 38,445,629 | 28,159,978 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 66,605,607 | 38,445,629 | 28,159,978 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 2,930,955 | 1,992,170 | 938,785 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 2,930,955 | 1,992,170 | 938,785 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Hawaii

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 2,930,955 | 1,992,170 | 938,785 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 975,733 | 878,159 | 97,574 |
| MMIS - Private Sector | 14,481,906 | 13,033,716 | 1,448,190 |
| Skilled Professional Medical Personnel - Single State Agency | 3,784,431 | 2,838,324 | 946,107 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 1,044,961 | 783,722 | 261,239 |
| Approved MMIS: Private | 8,778,160 | 6,583,621 | 2,194,539 |
| Mechanized Systems - In-House | 3,658,161 | 1,829,082 | 1,829,079 |
| Mechanized Systems: Private Sector | 4,400,546 | 2,200,274 | 2,200,272 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 3,341,655 | 2,506,242 | 835,413 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 27,081 | 13,542 | 13,539 |
| Preadmission Screening | 47,811 | 35,858 | 11,953 |
| Resident Review | 21,322 | 15,992 | 5,330 |
| Drug Use Review | 379,511 | 189,756 | 189,755 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 65,164 | 58,648 | 6,516 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 43,676,641 | 21,838,323 | 21,838,318 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 84,683,083 | 52,805,259 | 31,877,824 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 84,683,083 | 52,805,259 | 31,877,824 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 65,170 | 51,211 | 13,959 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (68,572) | (53,884) | (14,688) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 353,627 | 277,881 | 75,746 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (388,848) | (305,557) | (83,291) |
| Inpatient Hospital | 3,403,691 | 2,674,620 | 729,071 |
| Inpatient Mental Health | 362,331 | 284,720 | 77,611 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 4,998,191 | 3,927,578 | 1,070,613 |
| Outpatient Hospital | 1,483,493 | 1,165,730 | 317,763 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 3,503,540 | 2,753,081 | 750,459 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 176,627 | 138,794 | 37,833 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 1,880,520 | 1,477,713 | 402,807 |
| Clinic Services | 2,583,011 | 2,029,730 | 553,281 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 440,133 | 345,856 | 94,277 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 837,570 | 658,162 | 179,408 |
| Home Health | 31,428 | 24,696 | 6,732 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 721,181 | 566,704 | 154,477 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 476,503 | 374,436 | 102,067 |
| Case Management | 131,182 | 103,083 | 28,099 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,983,458 | 1,558,601 | 424,857 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 57 | 45 | 12 |
| Administration | 2,122,879 | 1,665,419 | 457,460 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 142,703 | 128,433 | 14,270 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 25,239,875 | 19,847,052 | 5,392,823 |
| Less: Collection | (193,184) | (151,804) | (41,380) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Idaho

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 25,046,691 | 19,695,248 | 5,351,443 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 1,372,039 | 1,234,835 | 137,204 |
| MMIS - Private Sector | 497,724 | 447,951 | 49,773 |
| Skilled Professional Medical Personnel - Single State Agency | 8,320,106 | 6,240,081 | 2,080,025 |
| Skilled Professional Medical Personnel - Other Agency | (168,975) | (126,732) | (42,243) |
| Approved MMIS: Inhouse | 31,094,835 | 23,321,129 | 7,773,706 |
| Approved MMIS: Private | 11,502,875 | 8,627,156 | 2,875,719 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 7,757,863 | 5,818,397 | 1,939,466 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 2,147,242 | 1,073,622 | 1,073,620 |
| Preadmission Screening | 32,961,469 | 24,721,103 | 8,240,366 |
| Resident Review | 4,115,989 | 3,086,992 | 1,028,997 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 133,826,178 | 66,913,090 | 66,913,088 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 22,632,903 | 11,316,453 | 11,316,450 |
| Interagency Costs (State Level) | 249,972,349 | 124,986,193 | 124,986,156 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 45,571 | 41,014 | 4,557 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 189,095,433 | 94,547,720 | 94,547,713 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 695,173,601 | 372,249,004 | 322,924,597 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 695,173,601 | 372,249,004 | 322,924,597 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 6,172,569 | 4,019,576 | 2,152,993 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 730,004 | 475,379 | 254,625 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (4,554,074) | (2,965,613) | (1,588,461) |
| Inpatient Hospital | 109,926,199 | 71,612,142 | 38,314,057 |
| Inpatient Mental Health | 3,124,163 | 2,034,530 | 1,089,633 |
| Nursing Care Services | 519,290 | 338,159 | 181,131 |
| Physician/Surgical | 52,814,820 | 34,391,347 | 18,423,473 |
| Outpatient Hospital | 22,361,744 | 14,561,984 | 7,799,760 |
| Outpatient Mental Health | 192,201 | 125,162 | 67,039 |
| Prescribed Drugs | 21,252,931 | 13,839,979 | 7,412,952 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 9,147,508 | 5,956,784 | 3,190,724 |
| Vision Services | 361,142 | 235,176 | 125,966 |
| Other Practitioners | 7,260,190 | 4,728,982 | 2,531,208 |
| Clinic Services | 4,265,422 | 2,777,738 | 1,487,684 |
| Therapy Services | 4,894,901 | 3,187,520 | 1,707,381 |
| Laboratory/Radiological | 3,544,544 | 2,308,206 | 1,236,338 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 2,425,095 | 1,579,217 | 845,878 |
| Family Planning | (169) | (110) | (59) |
| Abortions | 0 | 0 | 0 |
| Screening Services | 7,329,586 | 4,773,038 | 2,556,548 |
| Home Health | 426,674 | 277,848 | 148,826 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 75,563 | 49,206 | 26,357 |
| Medical Transportation | 1,028,624 | 669,958 | 358,666 |
| Case Management | 2,627,091 | 1,711,083 | 916,008 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 19,488,600 | 12,689,369 | 6,799,231 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 14,112,521 | 9,190,158 | 4,922,363 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 289,527,139 | 188,566,818 | 100,960,321 |
| Less: Collection | (811,246) | (528,292) | (282,954) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Illinois

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 288,715,893 | 188,038,526 | 100,677,367 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 2,049 | 1,844 | 205 |
| MMIS - Inhouse Activities | 158,800 | 142,920 | 15,880 |
| MMIS - Private Sector | 1,879,397 | 1,691,458 | 187,939 |
| Skilled Professional Medical Personnel - Single State Agency | 3,596,686 | 2,697,515 | 899,171 |
| Skilled Professional Medical Personnel - Other Agency | 7,500,582 | 5,625,438 | 1,875,144 |
| Approved MMIS: Inhouse | 522,093 | 391,571 | 130,522 |
| Approved MMIS: Private | 22,360,659 | 16,770,495 | 5,590,164 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,362,527 | 1,021,897 | 340,630 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 1,130 | 565 | 565 |
| Preadmission Screening | 1,718,784 | 1,289,089 | 429,695 |
| Resident Review | 3,072,879 | 2,304,660 | 768,219 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | (1,688) | (1,266) | (422) |
| Enrollment Brokers | 5,247,298 | 2,623,654 | 2,623,644 |
| School Based Administration | 31,395,670 | 15,697,835 | 15,697,835 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 231,513 | 115,758 | 115,755 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 196,014,638 | 98,007,329 | 98,007,309 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 79,274,270 | 39,637,146 | 39,637,124 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 354,337,287 | 188,017,908 | 166,319,379 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 354,337,287 | 188,017,908 | 166,319,379 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 19,550,239 | 14,887,608 | 4,662,631 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (6,314,147) | (4,808,223) | (1,505,924) |
| Inpatient Hospital | 840,409 | 639,971 | 200,438 |
| Inpatient Mental Health | 470,685 | 358,427 | 112,258 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 555,134 | 422,747 | 132,387 |
| Outpatient Hospital | 596,884 | 454,555 | 142,329 |
| Outpatient Mental Health | 130,624 | 99,474 | 31,150 |
| Prescribed Drugs | 6,873,757 | 5,234,394 | 1,639,363 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 6,519,142 | 4,964,368 | 1,554,774 |
| Vision Services | 73,687 | 56,113 | 17,574 |
| Other Practitioners | 12,853 | 9,787 | 3,066 |
| Clinic Services | 1,185,050 | 902,423 | 282,627 |
| Therapy Services | 2,944 | 2,241 | 703 |
| Laboratory/Radiological | 100,636 | 76,637 | 23,999 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 196,973 | 149,996 | 46,977 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 154,824 | 117,904 | 36,920 |
| Home Health | 13,437 | 10,233 | 3,204 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 44,766 | 34,095 | 10,671 |
| Case Management | 161,292 | 122,824 | 38,468 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 153,843 | 117,167 | 36,676 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 4,679,011 | 3,562,399 | 1,116,612 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 36,002,043 | 27,415,140 | 8,586,903 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Indiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 36,002,043 | 27,415,140 | 8,586,903 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 2,654,049 | 2,388,645 | 265,404 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 229,352 | 172,015 | 57,337 |
| Skilled Professional Medical Personnel - Other Agency | 151,696 | 113,773 | 37,923 |
| Approved MMIS: Inhouse | 3,402,674 | 2,552,007 | 850,667 |
| Approved MMIS: Private | 26,662,662 | 19,996,997 | 6,665,665 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 5,678,846 | 2,839,427 | 2,839,419 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 166,391 | 124,793 | 41,598 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 16,412 | 16,412 | 0 |
| Nurse Aide Training Costs | (337,907) | (168,953) | (168,954) |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 655,900 | 327,952 | 327,948 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 1,191,607 | 595,805 | 595,802 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 193,760 | 145,323 | 48,437 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 214,666 | 193,200 | 21,466 |
| HIT: Planning: Cost of Private Contractors | 90,054 | 81,050 | 9,004 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 65,574,465 | 32,787,238 | 32,787,227 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

**Iowa
National**

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 106,544,627 | 62,165,684 | 44,378,943 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 106,544,627 | 62,165,684 | 44,378,943 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 64,092,106 | 47,722,983 | 16,369,123 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (1,709,909) | (1,273,198) | (436,711) |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 1,262,532 | 940,082 | 322,450 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 7,152,668 | 5,322,873 | 1,829,795 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 70,797,397 | 52,712,740 | 18,084,657 |
| Less: Collection | (39,107) | (29,119) | (9,988) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Iowa

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 70,758,290 | 52,683,621 | 18,074,669 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 159,071 | 143,164 | 15,907 |
| MMIS - Private Sector | 1,848,866 | 1,663,980 | 184,886 |
| Skilled Professional Medical Personnel - Single State Agency | 581,097 | 435,824 | 145,273 |
| Skilled Professional Medical Personnel - Other Agency | 632,551 | 474,413 | 158,138 |
| Approved MMIS: Inhouse | 889,325 | 666,994 | 222,331 |
| Approved MMIS: Private | 19,595,750 | 14,696,813 | 4,898,937 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,078,030 | 808,523 | 269,507 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 5,937,553 | 4,453,166 | 1,484,387 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 856,613 | 642,461 | 214,152 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 10,965,630 | 5,482,816 | 5,482,814 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 3,133 | 2,350 | 783 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 99,284 | 89,355 | 9,929 |
| HIT: Planning: Cost of Private Contractors | 82,973 | 74,676 | 8,297 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 89,366,365 | 44,683,185 | 44,683,180 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 132,096,241 | 74,317,720 | 57,778,521 |
| Collections | (1,686,210) | (843,105) | (843,105) |
| Total Net Expenditures | 130,410,031 | 73,474,615 | 56,935,416 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 35,568,004 | 25,704,471 | 9,863,533 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 19,895,025 | 14,377,795 | 5,517,230 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (1,760,225) | (1,272,114) | (488,111) |
| Inpatient Hospital | 121,254 | 87,631 | 33,623 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 37,156 | 26,853 | 10,303 |
| Outpatient Hospital | 26,013 | 18,800 | 7,213 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 2,059,305 | 1,488,260 | 571,045 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 8,184,172 | 5,914,777 | 2,269,395 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 1,131 | 817 | 314 |
| Clinic Services | 5,158 | 3,728 | 1,430 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 468 | 338 | 130 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 396 | 286 | 110 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 1,673 | 1,209 | 464 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,647,973 | 1,190,990 | 456,983 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 7,178,086 | 5,186,377 | 1,991,709 |
| PERM Administration | 17,541 | 15,788 | 1,753 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 72,983,130 | 52,746,006 | 20,237,124 |
| Less: Collection | (5,673) | (4,100) | (1,573) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kansas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 72,977,457 | 52,741,906 | 20,235,551 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 387,080 | 348,371 | 38,709 |
| MMIS - Private Sector | 705,967 | 635,370 | 70,597 |
| Skilled Professional Medical Personnel - Single State Agency | 1,746,917 | 1,310,188 | 436,729 |
| Skilled Professional Medical Personnel - Other Agency | 696,636 | 522,478 | 174,158 |
| Approved MMIS: Inhouse | 361,953 | 271,465 | 90,488 |
| Approved MMIS: Private | 22,407,730 | 16,805,798 | 5,601,932 |
| Mechanized Systems - In-House | 124,405 | 62,203 | 62,202 |
| Mechanized Systems: Private Sector | 2,810,220 | 1,405,111 | 1,405,109 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 29,780,373 | 22,335,280 | 7,445,093 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 304,219 | 152,111 | 152,108 |
| Preadmission Screening | 800,266 | 581,178 | 219,088 |
| Resident Review | 269,608 | 195,798 | 73,810 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 433,649 | 216,826 | 216,823 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 9,644,104 | 4,822,052 | 4,822,052 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 54,104 | 48,693 | 5,411 |
| HIT: Planning: Cost of Private Contractors | 16,219 | 14,597 | 1,622 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 76,950,246 | 38,475,124 | 38,475,122 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 147,493,696 | 88,202,643 | 59,291,053 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 147,493,696 | 88,202,643 | 59,291,053 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | (166,011) | (131,298) | (34,713) |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 12,025,689 | 9,580,867 | 2,444,822 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (2,082,645) | (1,659,245) | (423,400) |
| Inpatient Hospital | 4,088,366 | 3,257,269 | 831,097 |
| Inpatient Mental Health | 917,331 | 730,838 | 186,493 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 4,585,453 | 3,653,540 | 931,913 |
| Outpatient Hospital | 4,842,641 | 3,858,444 | 984,197 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 7,797,696 | 6,212,977 | 1,584,719 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 3,966,100 | 3,160,252 | 805,848 |
| Vision Services | 1,030,766 | 821,331 | 209,435 |
| Other Practitioners | 345,814 | 275,536 | 70,278 |
| Clinic Services | 3,344,910 | 2,665,160 | 679,750 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 203,222 | 161,919 | 41,303 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 1,003,784 | 799,794 | 203,990 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 468,580 | 373,357 | 95,223 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 95,539 | 76,116 | 19,423 |
| Hospice | 34,117 | 27,181 | 6,936 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 534,060 | 425,504 | 108,556 |
| Translation and Interpretation | (63,503) | (53,768) | (9,735) |
| Other Services | 5,821,486 | 4,634,876 | 1,186,610 |
| Outreach | 152,209 | 121,265 | 30,944 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 3,382,089 | 2,694,511 | 687,578 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 52,327,693 | 41,686,426 | 10,641,267 |
| Less: Collection | (146,655) | (116,840) | (29,815) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Kentucky

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 52,181,038 | 41,569,586 | 10,611,452 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 225,935 | 203,219 | 22,716 |
| MMIS - Private Sector | 2,129,236 | 1,916,312 | 212,924 |
| Skilled Professional Medical Personnel - Single State Agency | 10,836,633 | 8,127,478 | 2,709,155 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 66,701 | 50,027 | 16,674 |
| Approved MMIS: Private | 34,615,632 | 25,961,725 | 8,653,907 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 191,235 | 95,618 | 95,617 |
| Preadmission Screening | 43,062 | 32,297 | 10,765 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 1,707,850 | 853,926 | 853,924 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 174,785 | 131,089 | 43,696 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 148,111,513 | 74,055,762 | 74,055,751 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 198,102,582 | 111,427,453 | 86,675,129 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 198,102,582 | 111,427,453 | 86,675,129 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (1,317,777) | (1,023,094) | (294,683) |
| Inpatient Hospital | 10,493,888 | 8,114,924 | 2,378,964 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 10,481 | 8,105 | 2,376 |
| Physician/Surgical | 5,198,371 | 4,021,211 | 1,177,160 |
| Outpatient Hospital | 2,402,286 | 1,857,688 | 544,598 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 1,709,535 | 1,321,983 | 387,552 |
| Drug Rebate | (375,581) | (290,437) | (85,144) |
| Dental Services | 514,594 | 397,935 | 116,659 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 8,943 | 6,915 | 2,028 |
| Clinic Services | 71,797 | 55,520 | 16,277 |
| Therapy Services | 29,083 | 22,489 | 6,594 |
| Laboratory/Radiological | 1,355,580 | 1,048,751 | 306,829 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 4,844 | 3,745 | 1,099 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 94,879 | 73,374 | 21,505 |
| Home Health | 3,102 | 2,399 | 703 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 13,719 | 10,609 | 3,110 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 25,340 | 19,595 | 5,745 |
| Case Management | 7,768 | 6,007 | 1,761 |
| Translation and Interpretation | 176,275 | 145,127 | 31,148 |
| Other Services | 933,923 | 720,407 | 213,516 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 15,881,909 | 12,281,238 | 3,600,671 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 37,242,959 | 28,804,491 | 8,438,468 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Louisiana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 37,242,959 | 28,804,491 | 8,438,468 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 5,747,451 | 5,172,706 | 574,745 |
| MMIS - Private Sector | 14,396,122 | 12,956,511 | 1,439,611 |
| Skilled Professional Medical Personnel - Single State Agency | 840,003 | 630,003 | 210,000 |
| Skilled Professional Medical Personnel - Other Agency | 598,508 | 448,881 | 149,627 |
| Approved MMIS: Inhouse | 3,387,391 | 2,540,544 | 846,847 |
| Approved MMIS: Private | 7,991,021 | 5,993,265 | 1,997,756 |
| Mechanized Systems - In-House | 4,225,934 | 2,112,967 | 2,112,967 |
| Mechanized Systems: Private Sector | 7,737,298 | 3,868,649 | 3,868,649 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 11,340,578 | 8,505,434 | 2,835,144 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 119,420 | 59,711 | 59,709 |
| Preadmission Screening | 106,403 | 79,802 | 26,601 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 610,464 | 305,233 | 305,231 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 4,605,510 | 2,302,756 | 2,302,754 |
| Translation and Interpretation | 1,729 | 1,297 | 432 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 201,794 | 181,615 | 20,179 |
| HIT: Planning: Cost of Private Contractors | 794,337 | 714,903 | 79,434 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 76,157,673 | 38,078,838 | 38,078,835 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 138,861,636 | 83,953,115 | 54,908,521 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 138,861,636 | 83,953,115 | 54,908,521 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (880,174) | (664,444) | (215,730) |
| Inpatient Hospital | 1,365,935 | 1,031,159 | 334,776 |
| Inpatient Mental Health | 82,961 | 62,627 | 20,334 |
| Nursing Care Services | 65,847 | 49,715 | 16,132 |
| Physician/Surgical | 865,524 | 653,831 | 211,693 |
| Outpatient Hospital | 2,601,875 | 1,964,162 | 637,713 |
| Outpatient Mental Health | 95,002 | 71,717 | 23,285 |
| Prescribed Drugs | 1,342,682 | 1,013,591 | 329,091 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 1,091,433 | 823,961 | 267,472 |
| Vision Services | 102,291 | 77,270 | 25,021 |
| Other Practitioners | 81,840 | 61,793 | 20,047 |
| Clinic Services | 569,518 | 430,211 | 139,307 |
| Therapy Services | 148,211 | 111,885 | 36,326 |
| Laboratory/Radiological | 62,997 | 47,564 | 15,433 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 147,328 | 111,224 | 36,104 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 35,135 | 26,523 | 8,612 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 1,267,813 | 957,438 | 310,375 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 126,823 | 95,742 | 31,081 |
| Case Management | 536,663 | 405,144 | 131,519 |
| Translation and Interpretation | 200 | 161 | 39 |
| Other Services | 2,410,966 | 1,820,922 | 590,044 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 4,464,448 | 3,364,277 | 1,100,171 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 16,585,318 | 12,516,473 | 4,068,845 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maine

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 16,585,318 | 12,516,473 | 4,068,845 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | (4,851) | (4,366) | (485) |
| MMIS - Private Sector | 1,214,445 | 1,093,001 | 121,444 |
| Skilled Professional Medical Personnel - Single State Agency | 17,195,258 | 12,896,445 | 4,298,813 |
| Skilled Professional Medical Personnel - Other Agency | 350,743 | 263,057 | 87,686 |
| Approved MMIS: Inhouse | 17,463,013 | 13,097,261 | 4,365,752 |
| Approved MMIS: Private | 161,150 | 120,865 | 40,285 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 3,369,165 | 2,526,874 | 842,291 |
| TPL - Recovery | 25,740 | 12,870 | 12,870 |
| TPL - Assignment Of Rights | 22,158 | 11,079 | 11,079 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 1,790,405 | 895,204 | 895,201 |
| Preadmission Screening | 310,638 | 232,979 | 77,659 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 11,887,597 | 5,943,800 | 5,943,797 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 200,065,344 | 100,032,673 | 100,032,671 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 253,850,805 | 137,121,742 | 116,729,063 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 253,850,805 | 137,121,742 | 116,729,063 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 3,869,046 | 2,514,880 | 1,354,166 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 1,458,124 | 947,780 | 510,344 |
| Administration | 3,423,389 | 2,225,202 | 1,198,187 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 8,750,559 | 5,687,862 | 3,062,697 |
| Less: Collection | (6,136) | (3,988) | (2,148) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Maryland

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 8,744,423 | 5,683,874 | 3,060,549 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 74,798 | 67,319 | 7,479 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 17,161,779 | 15,445,603 | 1,716,176 |
| Skilled Professional Medical Personnel - Single State Agency | 2,657,973 | 1,993,480 | 664,493 |
| Skilled Professional Medical Personnel - Other Agency | 17,093,156 | 12,819,868 | 4,273,288 |
| Approved MMIS: Inhouse | 14,531,817 | 10,898,863 | 3,632,954 |
| Approved MMIS: Private | 20,921,882 | 15,691,412 | 5,230,470 |
| Mechanized Systems - In-House | 3,765,563 | 1,882,782 | 1,882,781 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 210,709 | 105,355 | 105,354 |
| Peer Review Organizations | 10,064,923 | 7,548,693 | 2,516,230 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 256,467 | 128,235 | 128,232 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 680,616 | 340,310 | 340,306 |
| Preadmission Screening | 649,665 | 487,249 | 162,416 |
| Resident Review | 825,085 | 618,814 | 206,271 |
| Drug Use Review | 2,364,389 | 1,182,196 | 1,182,193 |
| Outstationed Eligibility | 2,895,525 | 1,447,763 | 1,447,762 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 36,525,471 | 18,262,738 | 18,262,733 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 1,363,174 | 681,588 | 681,586 |
| County/Local ADM Costs | 5,828,623 | 2,914,313 | 2,914,310 |
| Interagency Costs (State Level) | 155,027,451 | 77,513,722 | 77,513,729 |
| Translation and Interpretation | 348,346 | 261,260 | 87,086 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 335,209,654 | 167,604,826 | 167,604,828 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 628,457,066 | 337,896,389 | 290,560,677 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 628,457,066 | 337,896,389 | 290,560,677 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 115,591,819 | 75,134,683 | 40,457,136 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 41,653,425 | 27,074,726 | 14,578,699 |
| Inpatient Mental Health | 1,013,211 | 658,586 | 354,625 |
| Nursing Care Services | 389,656 | 253,275 | 136,381 |
| Physician/Surgical | 14,018,568 | 9,112,069 | 4,906,499 |
| Outpatient Hospital | 18,101,399 | 11,765,911 | 6,335,488 |
| Outpatient Mental Health | 344,939 | 224,210 | 120,729 |
| Prescribed Drugs | 6,490,169 | 4,218,607 | 2,271,562 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 16,201,672 | 10,531,087 | 5,670,585 |
| Vision Services | 286,637 | 186,315 | 100,322 |
| Other Practitioners | 126,065 | 81,944 | 44,121 |
| Clinic Services | 4,252,007 | 2,763,804 | 1,488,203 |
| Therapy Services | 129,944 | 84,464 | 45,480 |
| Laboratory/Radiological | 825,300 | 536,447 | 288,853 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 744,510 | 483,930 | 260,580 |
| Family Planning | 713,957 | 464,073 | 249,884 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 2,168,277 | 1,409,379 | 758,898 |
| Home Health | 39,326 | 25,562 | 13,764 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 1,712,460 | 1,113,101 | 599,359 |
| Hospice | (429) | (279) | (150) |
| Medical Transportation | 343,806 | 223,473 | 120,333 |
| Case Management | 265,512 | 172,583 | 92,929 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 3,736,174 | 2,428,513 | 1,307,661 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 870,714 | 565,964 | 304,750 |
| Administration | 8,435,148 | 5,482,845 | 2,952,303 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 238,454,266 | 154,995,272 | 83,458,994 |
| Less: Collection | (4,984,572) | (3,239,972) | (1,744,600) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Massachusetts

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 233,469,694 | 151,755,300 | 81,714,394 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 5,278,913 | 4,751,021 | 527,892 |
| MMIS - Private Sector | 8,914,422 | 8,022,980 | 891,442 |
| Skilled Professional Medical Personnel - Single State Agency | 3,099,628 | 2,324,722 | 774,906 |
| Skilled Professional Medical Personnel - Other Agency | 350,018 | 262,514 | 87,504 |
| Approved MMIS: Inhouse | 49,926,111 | 37,444,584 | 12,481,527 |
| Approved MMIS: Private | 29,278,614 | 21,958,962 | 7,319,652 |
| Mechanized Systems - In-House | 494,659 | 247,330 | 247,329 |
| Mechanized Systems: Private Sector | 310,036 | 155,020 | 155,016 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,424,380 | 1,068,285 | 356,095 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 839,575 | 419,788 | 419,787 |
| Preadmission Screening | 8,365,444 | 6,274,083 | 2,091,361 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 405,516 | 202,762 | 202,754 |
| Outstationed Eligibility | 16,431,971 | 8,215,986 | 8,215,985 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 1,716,709 | 1,287,532 | 429,177 |
| Enrollment Brokers | 4,625,333 | 2,312,668 | 2,312,665 |
| School Based Administration | 18,299,249 | 9,149,626 | 9,149,623 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 2,251,891 | 1,688,919 | 562,972 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 60,790 | 54,711 | 6,079 |
| HIT: Planning: Cost of Private Contractors | 478,387 | 430,548 | 47,839 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 325,683,947 | 162,841,979 | 162,841,968 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 478,235,593 | 269,114,020 | 209,121,573 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 478,235,593 | 269,114,020 | 209,121,573 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 43,776,281 | 32,472,383 | 11,303,898 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 34,629,729 | 25,361,859 | 9,267,870 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 14,423,089 | 10,706,260 | 3,716,829 |
| Inpatient Hospital | 8,879,024 | 6,589,935 | 2,289,089 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 90,508 | 67,186 | 23,322 |
| Physician/Surgical | 5,638,092 | 4,183,968 | 1,454,124 |
| Outpatient Hospital | 4,863,284 | 3,608,173 | 1,255,111 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 12,134,045 | 8,967,569 | 3,166,476 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 18,275 | 13,254 | 5,021 |
| Vision Services | 645 | 479 | 166 |
| Other Practitioners | 230,223 | 170,895 | 59,328 |
| Clinic Services | 594,468 | 441,270 | 153,198 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 374,925 | 278,298 | 96,627 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 375,524 | 274,646 | 100,878 |
| Family Planning | 19,708 | 14,629 | 5,079 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 2,914 | 2,108 | 806 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 355,688 | 264,029 | 91,659 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 9,709,736 | 7,205,463 | 2,504,273 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 6,867,105 | 5,020,712 | 1,846,393 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 142,983,263 | 105,643,116 | 37,340,147 |
| Less: Collection | (93,550) | (69,431) | (24,119) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Michigan

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 142,889,713 | 105,573,685 | 37,316,028 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 163,529 | 147,176 | 16,353 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 343,006 | 257,255 | 85,751 |
| Skilled Professional Medical Personnel - Other Agency | 1,719,926 | 1,289,944 | 429,982 |
| Approved MMIS: Inhouse | 33,323,797 | 24,992,847 | 8,330,950 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 266,185 | 133,093 | 133,092 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 12,116,602 | 6,058,302 | 6,058,300 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 642,151 | 642,151 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 10,942 | 8,206 | 2,736 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 226,572 | 226,572 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 12,508,344 | 6,254,173 | 6,254,171 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 1,874,786 | 937,393 | 937,393 |
| County/Local ADM Costs | 154,171,285 | 77,085,644 | 77,085,641 |
| Interagency Costs (State Level) | 4,832,880 | 2,416,442 | 2,416,438 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 136,677,774 | 68,338,893 | 68,338,881 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 358,877,779 | 188,788,091 | 170,089,688 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 358,877,779 | 188,788,091 | 170,089,688 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 16,321,503 | 10,608,977 | 5,712,526 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 1,715,342 | 1,114,972 | 600,370 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 1,392,741 | 905,282 | 487,459 |
| Outpatient Hospital | 1,613,049 | 1,048,482 | 564,567 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 99,024 | 64,365 | 34,659 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 76,877 | 49,971 | 26,906 |
| Vision Services | 2,112 | 1,373 | 739 |
| Other Practitioners | 591,485 | 384,465 | 207,020 |
| Clinic Services | 4,059 | 2,639 | 1,420 |
| Therapy Services | 1,476 | 959 | 517 |
| Laboratory/Radiological | 164,250 | 106,763 | 57,487 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 194 | 126 | 68 |
| Screening Services | 1,008 | 655 | 353 |
| Home Health | 44,987 | 29,241 | 15,746 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 972 | 632 | 340 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,543,109 | 1,003,021 | 540,088 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 241,198 | 156,780 | 84,418 |
| PERM Administration | 347,263 | 312,536 | 34,727 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 24,160,649 | 15,791,239 | 8,369,410 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Minnesota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 24,160,649 | 15,791,239 | 8,369,410 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 151,833 | 136,650 | 15,183 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 760,523 | 684,470 | 76,053 |
| Skilled Professional Medical Personnel - Single State Agency | 3,501,146 | 2,625,860 | 875,286 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 896,359 | 672,270 | 224,089 |
| Approved MMIS: Private | 19,747,370 | 14,810,528 | 4,936,842 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 9,759,099 | 4,879,551 | 4,879,548 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 6,545,583 | 4,909,187 | 1,636,396 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 304,346 | 152,174 | 152,172 |
| Preadmission Screening | 314,604 | 235,954 | 78,650 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 6,983,816 | 3,491,908 | 3,491,908 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 61,583,189 | 30,791,597 | 30,791,592 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 110,547,868 | 63,390,149 | 47,157,719 |
| Collections | (56,098) | (28,049) | (28,049) |
| Total Net Expenditures | 110,491,770 | 63,362,100 | 47,129,670 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 110,571,155 | 91,740,887 | 18,830,268 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 71,423,457 | 59,260,042 | 12,163,415 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 6,733 | 5,586 | 1,147 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 457 | 379 | 78 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 131 | 109 | 22 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 1,252 | 1,039 | 213 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 1,090 | 904 | 186 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,336,535 | 1,108,924 | 227,611 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 388,027 | 321,946 | 66,081 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 183,728,837 | 152,439,816 | 31,289,021 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Mississippi

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 183,728,837 | 152,439,816 | 31,289,021 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 10,278,826 | 9,250,943 | 1,027,883 |
| Skilled Professional Medical Personnel - Single State Agency | 1,408,701 | 1,078,585 | 330,116 |
| Skilled Professional Medical Personnel - Other Agency | 1,694,323 | 1,270,743 | 423,580 |
| Approved MMIS: Inhouse | 7,718,221 | 5,730,622 | 1,987,599 |
| Approved MMIS: Private | 47,149,958 | 34,672,211 | 12,477,747 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 234,365 | 117,184 | 117,181 |
| Preadmission Screening | 692,038 | 484,045 | 207,993 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 783,730 | 587,798 | 195,932 |
| Enrollment Brokers | 3,730,164 | 1,865,084 | 1,865,080 |
| School Based Administration | 40,299,970 | 20,149,986 | 20,149,984 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 125,876 | 113,288 | 12,588 |
| HIT: Planning: Cost of Private Contractors | 210,000 | 189,000 | 21,000 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 203,768,836 | 101,884,421 | 101,884,415 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 318,095,008 | 177,393,910 | 140,701,098 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 318,095,008 | 177,393,910 | 140,701,098 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 57,262 | 43,038 | 14,224 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 23,015,030 | 17,298,096 | 5,716,934 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (8,747,841) | (6,574,877) | (2,172,964) |
| Inpatient Hospital | 3,129,772 | 2,352,335 | 777,437 |
| Inpatient Mental Health | 635,988 | 478,009 | 157,979 |
| Nursing Care Services | 68,776 | 51,692 | 17,084 |
| Physician/Surgical | 771,009 | 579,491 | 191,518 |
| Outpatient Hospital | 4,908,732 | 3,689,402 | 1,219,330 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 16,041,589 | 12,056,859 | 3,984,730 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 729,336 | 548,170 | 181,166 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 215,378 | 161,878 | 53,500 |
| Clinic Services | 2,457,279 | 1,846,890 | 610,389 |
| Therapy Services | 11,534 | 8,669 | 2,865 |
| Laboratory/Radiological | 148,705 | 111,767 | 36,938 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 270,052 | 202,970 | 67,082 |
| Family Planning | 395,601 | 297,333 | 98,268 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 3,617,590 | 2,718,980 | 898,610 |
| Home Health | 6,258 | 4,703 | 1,555 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 98,130 | 73,754 | 24,376 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 97,993 | 73,652 | 24,341 |
| Case Management | 532,590 | 400,295 | 132,295 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 2,052,573 | 1,542,713 | 509,860 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 2,587,606 | 1,944,844 | 642,762 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 53,100,942 | 39,910,663 | 13,190,279 |
| Less: Collection | (132) | (96) | (36) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Missouri

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 53,100,810 | 39,910,567 | 13,190,243 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 483,014 | 434,713 | 48,301 |
| MMIS - Private Sector | 968,742 | 871,868 | 96,874 |
| Skilled Professional Medical Personnel - Single State Agency | 278,471 | 208,854 | 69,617 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 2,144,262 | 1,608,053 | 536,209 |
| Approved MMIS: Private | 8,210,257 | 6,129,976 | 2,080,281 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,997,050 | 1,497,788 | 499,262 |
| TPL - Recovery | 20,715 | 10,358 | 10,357 |
| TPL - Assignment Of Rights | 8,817 | 4,409 | 4,408 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 58,504 | 29,253 | 29,251 |
| Preadmission Screening | 1,182,246 | 886,685 | 295,561 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 434 | 326 | 108 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 409,957 | 204,979 | 204,978 |
| School Based Administration | 3,615,274 | 1,807,638 | 1,807,636 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 152,945 | 137,650 | 15,295 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 37,104,175 | 18,552,093 | 18,552,082 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 56,634,863 | 32,384,643 | 24,250,220 |
| Collections | (158,593) | (118,833) | (39,760) |
| Total Net Expenditures | 56,476,270 | 32,265,810 | 24,210,460 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 5,693,772 | 4,395,023 | 1,298,749 |
| Inpatient Mental Health | 1,467,591 | 1,132,833 | 334,758 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 4,915,089 | 3,793,957 | 1,121,132 |
| Outpatient Hospital | 6,854,010 | 5,290,611 | 1,563,399 |
| Outpatient Mental Health | 247,543 | 191,078 | 56,465 |
| Prescribed Drugs | 4,269,100 | 3,295,318 | 973,782 |
| Drug Rebate | (319,466) | (246,595) | (72,871) |
| Dental Services | 3,798,005 | 2,931,680 | 866,325 |
| Vision Services | 644,390 | 497,405 | 146,985 |
| Other Practitioners | 4,654,262 | 3,592,625 | 1,061,637 |
| Clinic Services | 909,877 | 702,333 | 207,544 |
| Therapy Services | 433,580 | 334,681 | 98,899 |
| Laboratory/Radiological | 1,483,797 | 1,145,343 | 338,454 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 184 | 142 | 42 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 762,551 | 588,612 | 173,939 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 659,685 | 509,211 | 150,474 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,867 | 1,441 | 426 |
| Outreach | 460,921 | 355,785 | 105,136 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 3,872,113 | 2,989,937 | 882,176 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 34,121 | 30,709 | 3,412 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 40,842,992 | 31,532,129 | 9,310,863 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Montana

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 40,842,992 | 31,532,129 | 9,310,863 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 313,999 | 157,001 | 156,998 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 313,999 | 157,001 | 156,998 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 313,999 | 157,001 | 156,998 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 0 | 0 | 0 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 0 | 0 | 0 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

N. Mariana Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 1,872,320 | 1,685,089 | 187,231 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 2,323,571 | 1,742,679 | 580,892 |
| Skilled Professional Medical Personnel - Other Agency | 2,488,021 | 1,866,017 | 622,004 |
| Approved MMIS: Inhouse | 8,849,327 | 6,636,996 | 2,212,331 |
| Approved MMIS: Private | 27,217 | 20,414 | 6,803 |
| Mechanized Systems - In-House | 8,604,099 | 4,302,051 | 4,302,048 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 443,261 | 332,447 | 110,814 |
| TPL - Recovery | 49,105 | 24,553 | 24,552 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 782,247 | 391,125 | 391,122 |
| Preadmission Screening | 604,859 | 453,646 | 151,213 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 193,548 | 96,774 | 96,774 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | (355) | (178) | (177) |
| School Based Administration | 53,926,806 | 26,963,404 | 26,963,402 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 397,970 | 198,985 | 198,985 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 50,431 | 45,388 | 5,043 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 33,688,922 | 16,844,462 | 16,844,460 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 114,301,349 | 61,603,852 | 52,697,497 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 114,301,349 | 61,603,852 | 52,697,497 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 3,540,579 | 2,563,026 | 977,553 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 3,540,579 | 2,563,026 | 977,553 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nebraska

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 3,540,579 | 2,563,026 | 977,553 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 466,751 | 350,064 | 116,687 |
| Skilled Professional Medical Personnel - Single State Agency | 1,413,385 | 1,060,038 | 353,347 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 1,150,971 | 863,228 | 287,743 |
| Approved MMIS: Private | 17,275,654 | 12,956,741 | 4,318,913 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 8,185,766 | 6,139,325 | 2,046,441 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 137,815 | 68,909 | 68,906 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 245,836 | 184,376 | 61,460 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 153,639 | 137,544 | 16,095 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 53,615,223 | 26,807,613 | 26,807,610 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 82,645,040 | 48,567,838 | 34,077,202 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 82,645,040 | 48,567,838 | 34,077,202 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 15,924,776 | 10,368,622 | 5,556,154 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (778,628) | (506,964) | (271,664) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 8,323,939 | 5,419,717 | 2,904,222 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (932,840) | (607,372) | (325,468) |
| Inpatient Hospital | 881,529 | 573,964 | 307,565 |
| Inpatient Mental Health | 243,946 | 158,834 | 85,112 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 904,535 | 588,943 | 315,592 |
| Outpatient Hospital | 466,932 | 304,019 | 162,913 |
| Outpatient Mental Health | 458,786 | 298,716 | 160,070 |
| Prescribed Drugs | 609,070 | 396,565 | 212,505 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 1,971,988 | 1,283,961 | 688,027 |
| Vision Services | 188,357 | 122,639 | 65,718 |
| Other Practitioners | 94,169 | 61,314 | 32,855 |
| Clinic Services | 365,044 | 237,681 | 127,363 |
| Therapy Services | 19,211 | 12,508 | 6,703 |
| Laboratory/Radiological | 66,574 | 43,347 | 23,227 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 30,573 | 19,906 | 10,667 |
| Family Planning | 22,162 | 14,430 | 7,732 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 2,088,614 | 1,359,896 | 728,718 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 940 | 612 | 328 |
| Medical Transportation | 58,196 | 37,892 | 20,304 |
| Case Management | 234,684 | 152,803 | 81,881 |
| Translation and Interpretation | 387,938 | 290,954 | 96,984 |
| Other Services | 1,156,351 | 752,901 | 403,450 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 2,057,469 | 1,339,617 | 717,852 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 34,844,315 | 22,725,505 | 12,118,810 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Nevada

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 34,844,315 | 22,725,505 | 12,118,810 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 2,317,692 | 2,085,923 | 231,769 |
| MMIS - Private Sector | 363,500 | 327,150 | 36,350 |
| Skilled Professional Medical Personnel - Single State Agency | 2,926,651 | 2,194,989 | 731,662 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 972,049 | 729,037 | 243,012 |
| Approved MMIS: Private | 10,552,549 | 7,914,412 | 2,638,137 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,067,802 | 800,852 | 266,950 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 533 | 533 | 0 |
| Nurse Aide Training Costs | 823,139 | 411,570 | 411,569 |
| Preadmission Screening | 85,874 | 64,407 | 21,467 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 708,543 | 354,273 | 354,270 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 568,550 | 284,276 | 284,274 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 152,820 | 76,410 | 76,410 |
| Translation and Interpretation | 62,876 | 47,158 | 15,718 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 8,000 | 7,200 | 800 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 51,776,759 | 25,888,381 | 25,888,378 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 72,387,337 | 41,186,571 | 31,200,766 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 72,387,337 | 41,186,571 | 31,200,766 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | (3,422,851) | (2,224,853) | (1,197,998) |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 19,488,831 | 12,667,740 | 6,821,091 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 497 | 373 | 124 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 660,148 | 429,095 | 231,053 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 16,726,625 | 10,872,355 | 5,854,270 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Hampshire

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 16,726,625 | 10,872,355 | 5,854,270 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 8,956,059 | 8,060,454 | 895,605 |
| MMIS - Inhouse Activities | 1,280,680 | 1,152,613 | 128,067 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 10,935,490 | 8,201,619 | 2,733,871 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 10,302,184 | 7,726,639 | 2,575,545 |
| Approved MMIS: Private | 23,293,169 | 17,469,877 | 5,823,292 |
| Mechanized Systems - In-House | 263,193 | 131,599 | 131,594 |
| Mechanized Systems: Private Sector | 650,843 | 325,423 | 325,420 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 696,095 | 522,072 | 174,023 |
| TPL - Recovery | 190,063 | 95,032 | 95,031 |
| TPL - Assignment Of Rights | 60,389 | 30,195 | 30,194 |
| Immigration Status | 5,774 | 5,774 | 0 |
| Nurse Aide Training Costs | 920,135 | 460,069 | 460,066 |
| Preadmission Screening | 1,209,681 | 907,263 | 302,418 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 13,477,018 | 6,738,510 | 6,738,508 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 568,797 | 426,598 | 142,199 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 440,832,901 | 220,416,454 | 220,416,447 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 513,642,471 | 272,670,191 | 240,972,280 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 513,642,471 | 272,670,191 | 240,972,280 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 442,778,762 | 287,806,197 | 154,972,565 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 177,462,555 | 115,350,659 | 62,111,896 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (20,351,000) | (13,228,150) | (7,122,850) |
| Inpatient Hospital | 16,281,739 | 10,583,132 | 5,698,607 |
| Inpatient Mental Health | 3,786,477 | 2,461,210 | 1,325,267 |
| Nursing Care Services | 404 | 262 | 142 |
| Physician/Surgical | 1,331,273 | 865,329 | 465,944 |
| Outpatient Hospital | 18,128,604 | 11,783,593 | 6,345,011 |
| Outpatient Mental Health | 732,210 | 475,936 | 256,274 |
| Prescribed Drugs | 11,449,674 | 7,442,289 | 4,007,385 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 130,743 | 84,983 | 45,760 |
| Vision Services | 3,906 | 2,538 | 1,368 |
| Other Practitioners | 147,170 | 95,661 | 51,509 |
| Clinic Services | 3,287,676 | 2,136,990 | 1,150,686 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 711,140 | 462,240 | 248,900 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 46,262 | 30,070 | 16,192 |
| Family Planning | 360,622 | 234,407 | 126,215 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 39,277 | 25,530 | 13,747 |
| Home Health | 447,833 | 291,091 | 156,742 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 37,995 | 24,697 | 13,298 |
| Hospice | 584 | 380 | 204 |
| Medical Transportation | 145,685 | 94,695 | 50,990 |
| Case Management | 539,098 | 350,412 | 188,686 |
| Translation and Interpretation | 2,997,483 | 2,248,113 | 749,370 |
| Other Services | 9,413,660 | 6,118,877 | 3,294,783 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 66,878,161 | 43,470,806 | 23,407,355 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 736,787,993 | 479,211,947 | 257,576,046 |
| Less: Collection | (7,826,678) | (5,087,340) | (2,739,338) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Jersey

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 728,961,315 | 474,124,607 | 254,836,708 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 27,293 | 24,563 | 2,730 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 432,009 | 388,808 | 43,201 |
| Skilled Professional Medical Personnel - Single State Agency | 1,058,820 | 794,117 | 264,703 |
| Skilled Professional Medical Personnel - Other Agency | 8,544,379 | 6,408,285 | 2,136,094 |
| Approved MMIS: Inhouse | 2,316,771 | 1,737,584 | 579,187 |
| Approved MMIS: Private | 12,769,641 | 9,577,234 | 3,192,407 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 7,983,127 | 5,987,345 | 1,995,782 |
| TPL - Recovery | 65,936 | 32,968 | 32,968 |
| TPL - Assignment Of Rights | 24,568 | 12,285 | 12,283 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 92,001 | 46,002 | 45,999 |
| Preadmission Screening | 746,668 | 560,004 | 186,664 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 1,300,887 | 975,669 | 325,218 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 9,024,071 | 4,512,039 | 4,512,032 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 24,397,173 | 12,198,590 | 12,198,583 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 449,299 | 404,370 | 44,929 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 55,136,824 | 27,568,427 | 27,568,397 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 124,369,467 | 71,228,290 | 53,141,177 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 124,369,467 | 71,228,290 | 53,141,177 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 190,246,864 | 152,101,588 | 38,145,276 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 2,021,325 | 1,614,210 | 407,115 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 192,268,189 | 153,715,798 | 38,552,391 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New Mexico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 192,268,189 | 153,715,798 | 38,552,391 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 22,129,243 | 19,916,318 | 2,212,925 |
| MMIS - Inhouse Activities | (798,852) | (718,967) | (79,885) |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 11,029,686 | 8,272,264 | 2,757,422 |
| Skilled Professional Medical Personnel - Other Agency | 31,936,067 | 23,952,050 | 7,984,017 |
| Approved MMIS: Inhouse | 14,285,831 | 10,714,373 | 3,571,458 |
| Approved MMIS: Private | 75,129,476 | 56,347,107 | 18,782,369 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 13,806,480 | 10,354,860 | 3,451,620 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 528,220 | 264,110 | 264,110 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 1,208,132 | 604,066 | 604,066 |
| Preadmission Screening | 353,130 | 264,847 | 88,283 |
| Resident Review | 172,278 | 129,209 | 43,069 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 28,665,744 | 14,332,872 | 14,332,872 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 823,463,062 | 411,731,531 | 411,731,531 |
| Interagency Costs (State Level) | 148,143,333 | 74,071,668 | 74,071,665 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 167,581,952 | 83,790,976 | 83,790,976 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 1,337,633,782 | 714,027,284 | 623,606,498 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 1,337,633,782 | 714,027,284 | 623,606,498 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 339,861,123 | 220,909,732 | 118,951,391 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 421,718,834 | 274,117,242 | 147,601,592 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (30,508,942) | (19,830,812) | (10,678,130) |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 2,131,472 | 1,385,457 | 746,015 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 25,076,031 | 16,299,420 | 8,776,611 |
| Outreach | 5,373,768 | 3,492,949 | 1,880,819 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 4,424,365 | 2,875,837 | 1,548,528 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 768,076,651 | 499,249,825 | 268,826,826 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

New York

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 768,076,651 | 499,249,825 | 268,826,826 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 6,749,666 | 6,074,699 | 674,967 |
| MMIS - Private Sector | 20,864,783 | 18,778,305 | 2,086,478 |
| Skilled Professional Medical Personnel - Single State Agency | 32,427,358 | 24,320,518 | 8,106,840 |
| Skilled Professional Medical Personnel - Other Agency | 48,115 | 36,086 | 12,029 |
| Approved MMIS: Inhouse | 10,282,170 | 7,711,629 | 2,570,541 |
| Approved MMIS: Private | 32,743,996 | 24,557,997 | 8,185,999 |
| Mechanized Systems - In-House | 5,428,104 | 2,714,053 | 2,714,051 |
| Mechanized Systems: Private Sector | 8,275,727 | 4,137,864 | 4,137,863 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 57,401,613 | 43,051,211 | 14,350,402 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 728,799 | 364,400 | 364,399 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 2,360,684 | 1,770,513 | 590,171 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 4,946,353 | 3,709,766 | 1,236,587 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 16,943,184 | 8,471,591 | 8,471,593 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 9,939,223 | 4,969,612 | 4,969,611 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 61,879 | 55,691 | 6,188 |
| HIT: Planning: Cost of Private Contractors | 276,567 | 248,910 | 27,657 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 363,119,841 | 181,559,925 | 181,559,916 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 572,598,062 | 332,532,770 | 240,065,292 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 572,598,062 | 332,532,770 | 240,065,292 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 186,666,676 | 141,101,340 | 45,565,336 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 96,824,712 | 73,189,800 | 23,634,912 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 10,893,299 | 8,234,245 | 2,659,054 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 294,384,687 | 222,525,385 | 71,859,302 |
| Less: Collection | (134,700) | (101,821) | (32,879) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 294,249,987 | 222,423,564 | 71,826,423 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 4,143,460 | 3,525,452 | 618,008 |
| MMIS - Private Sector | 2,244,955 | 2,020,460 | 224,495 |
| Skilled Professional Medical Personnel - Single State Agency | 590,586 | 442,939 | 147,647 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 2,812,713 | 2,109,536 | 703,177 |
| Approved MMIS: Private | 974,936 | 731,202 | 243,734 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 390,904 | 293,179 | 97,725 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 66,784 | 33,392 | 33,392 |
| Preadmission Screening | 358,679 | 269,010 | 89,669 |
| Resident Review | 10,767 | 8,076 | 2,691 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 74,302 | 37,152 | 37,150 |
| County/Local ADM Costs | 11,435,396 | 5,717,699 | 5,717,697 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 35,219 | 31,698 | 3,521 |
| HIT: Planning: Cost of Private Contractors | 2,517 | 2,265 | 252 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 14,039,933 | 7,019,972 | 7,019,961 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 37,181,151 | 22,242,032 | 14,939,119 |
| Collections | (41) | (21) | (20) |
| Total Net Expenditures | 37,181,110 | 22,242,011 | 14,939,099 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 9,310,531 | 6,899,972 | 2,410,559 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 115,729 | 85,766 | 29,963 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 232,851 | 172,573 | 60,278 |
| Increased Outreach and Enrollment of Indians | 866 | 635 | 231 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 611,041 | 452,843 | 158,198 |
| PERM Administration | 158,496 | 142,647 | 15,849 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 10,429,514 | 7,754,436 | 2,675,078 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

North Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 10,429,514 | 7,754,436 | 2,675,078 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 932 | 838 | 94 |
| MMIS - Inhouse Activities | 5,440,101 | 4,896,090 | 544,011 |
| MMIS - Private Sector | 17,779,616 | 16,001,654 | 1,777,962 |
| Skilled Professional Medical Personnel - Single State Agency | 3,529,952 | 2,647,465 | 882,487 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 14,044,560 | 10,533,422 | 3,511,138 |
| Approved MMIS: Private | 11,194,593 | 8,395,946 | 2,798,647 |
| Mechanized Systems - In-House | 10,658,478 | 5,329,242 | 5,329,236 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 3,015,800 | 2,261,851 | 753,949 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 268,681 | 134,340 | 134,341 |
| Preadmission Screening | 18,717,439 | 14,038,080 | 4,679,359 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 572,527 | 286,265 | 286,262 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 3,109,394 | 1,554,698 | 1,554,696 |
| County/Local ADM Costs | 157,015,177 | 78,507,589 | 78,507,588 |
| Interagency Costs (State Level) | 99,049,667 | 49,524,835 | 49,524,832 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 49,617 | 44,655 | 4,962 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 119,008,736 | 59,504,370 | 59,504,366 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 463,455,270 | 253,661,340 | 209,793,930 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 463,455,270 | 253,661,340 | 209,793,930 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 4,842,427 | 3,602,078 | 1,240,349 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 4,842,427 | 3,602,078 | 1,240,349 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Ohio

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 4,842,427 | 3,602,078 | 1,240,349 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 1,308,949 | 1,178,054 | 130,895 |
| MMIS - Inhouse Activities | 512,572 | 461,314 | 51,258 |
| MMIS - Private Sector | 3,201,314 | 2,881,183 | 320,131 |
| Skilled Professional Medical Personnel - Single State Agency | 15,593,274 | 11,694,956 | 3,898,318 |
| Skilled Professional Medical Personnel - Other Agency | 5,079,093 | 3,809,320 | 1,269,773 |
| Approved MMIS: Inhouse | 6,463,851 | 4,847,888 | 1,615,963 |
| Approved MMIS: Private | 32,075,472 | 23,379,722 | 8,695,750 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 31,582 | 15,791 | 15,791 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 7,053,288 | 5,289,967 | 1,763,321 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 180,233 | 90,118 | 90,115 |
| Preadmission Screening | 1,265,092 | 948,822 | 316,270 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 3,095,028 | 2,068,931 | 1,026,097 |
| Outstationed Eligibility | 2,404,913 | 1,202,458 | 1,202,455 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 2,924,682 | 1,462,342 | 1,462,340 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 321,458 | 289,312 | 32,146 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 145,551,267 | 72,775,636 | 72,775,631 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 227,062,068 | 132,395,814 | 94,666,254 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 227,062,068 | 132,395,814 | 94,666,254 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 756,645 | 568,240 | 188,405 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 2,483,705 | 1,865,263 | 618,442 |
| Outpatient Hospital | 415,111 | 311,749 | 103,362 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 419,301 | 314,895 | 104,406 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 15,134 | 11,366 | 3,768 |
| Clinic Services | 75,920 | 57,015 | 18,905 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 1,814,303 | 1,362,541 | 451,762 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 16,419 | 12,330 | 4,089 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 26,151 | 19,639 | 6,512 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 1,562,238 | 1,173,242 | 388,996 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 3,599,779 | 2,703,434 | 896,345 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 11,184,706 | 8,399,714 | 2,784,992 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oklahoma

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 11,184,706 | 8,399,714 | 2,784,992 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 10,522 | 9,470 | 1,052 |
| MMIS - Inhouse Activities | 4,326,294 | 3,893,664 | 432,630 |
| MMIS - Private Sector | 84,060 | 75,654 | 8,406 |
| Skilled Professional Medical Personnel - Single State Agency | 2,764,944 | 2,073,710 | 691,234 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 2,590,114 | 1,942,587 | 647,527 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 932,193 | 699,145 | 233,048 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 200,765 | 100,383 | 100,382 |
| Preadmission Screening | 1,725,726 | 1,294,295 | 431,431 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 410,900 | 308,177 | 102,723 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 23,861 | 17,896 | 5,965 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 216,195 | 194,577 | 21,618 |
| HIT: Planning: Cost of Private Contractors | 287,479 | 258,730 | 28,749 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 282,501,341 | 141,250,673 | 141,250,668 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 296,074,394 | 152,118,961 | 143,955,433 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 296,074,394 | 152,118,961 | 143,955,433 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 75,631,931 | 56,003,053 | 19,628,878 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 659,636 | 488,375 | 171,261 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 9,455,866 | 6,990,119 | 2,465,747 |
| Inpatient Mental Health | 391,184 | 289,180 | 102,004 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 2,137,253 | 1,579,913 | 557,340 |
| Outpatient Hospital | 9,247,420 | 6,835,996 | 2,411,424 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 2,247,612 | 1,661,453 | 586,159 |
| Drug Rebate | (8,419) | (6,223) | (2,196) |
| Dental Services | 768,375 | 567,982 | 200,393 |
| Vision Services | 121,250 | 89,628 | 31,622 |
| Other Practitioners | 612,921 | 453,073 | 159,848 |
| Clinic Services | 669,562 | 494,948 | 174,614 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 661,435 | 488,938 | 172,497 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 959,417 | 709,201 | 250,216 |
| Family Planning | (311) | (227) | (84) |
| Abortions | (3,063) | (2,258) | (805) |
| Screening Services | 1,772,540 | 1,310,291 | 462,249 |
| Home Health | 1,385 | 1,024 | 361 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 326,301 | 241,208 | 85,093 |
| Case Management | 155,220 | 114,739 | 40,481 |
| Translation and Interpretation | 2,030 | 1,602 | 428 |
| Other Services | 2,988,888 | 2,209,405 | 779,483 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 7,627,430 | 5,638,240 | 1,989,190 |
| PERM Administration | 145 | 131 | 14 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 116,426,008 | 86,159,791 | 30,266,217 |
| Less: Collection | (58,967) | (43,588) | (15,379) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Oregon

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 116,367,041 | 86,116,203 | 30,250,838 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 826,410 | 743,769 | 82,641 |
| MMIS - Private Sector | 15,320,102 | 13,788,092 | 1,532,010 |
| Skilled Professional Medical Personnel - Single State Agency | 14,281,230 | 10,710,923 | 3,570,307 |
| Skilled Professional Medical Personnel - Other Agency | 1,420,526 | 1,065,394 | 355,132 |
| Approved MMIS: Inhouse | 75,320,844 | 56,490,634 | 18,830,210 |
| Approved MMIS: Private | 32,392,294 | 24,294,224 | 8,098,070 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 7,015,118 | 5,261,339 | 1,753,779 |
| TPL - Recovery | 283,375 | 141,688 | 141,687 |
| TPL - Assignment Of Rights | 105,043 | 52,522 | 52,521 |
| Immigration Status | 21,114 | 21,114 | 0 |
| Nurse Aide Training Costs | 468,586 | 234,294 | 234,292 |
| Preadmission Screening | 4,063,923 | 3,047,943 | 1,015,980 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 1,292,807 | 646,404 | 646,403 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 1,598,322 | 1,198,745 | 399,577 |
| Enrollment Brokers | 13,069,929 | 6,534,969 | 6,534,960 |
| School Based Administration | 69,141,370 | 34,570,686 | 34,570,684 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 2,672,667 | 1,336,335 | 1,336,332 |
| County/Local ADM Costs | 1,218,023 | 609,013 | 609,010 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 89,286 | 80,357 | 8,929 |
| HIT: Planning: Cost of Private Contractors | 649,287 | 584,359 | 64,928 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 2,025,093 | 1,822,584 | 202,509 |
| CVT Operation CHIPRA | 289 | 217 | 72 |
| Other Financial Participation | 622,186,825 | 311,093,431 | 311,093,394 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 865,462,463 | 474,329,036 | 391,133,427 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 865,462,463 | 474,329,036 | 391,133,427 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 435,781,751 | 297,943,983 | 137,837,768 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 952,546 | 651,256 | 301,290 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 6,031,896 | 4,124,008 | 1,907,888 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 3,251,545 | 2,926,391 | 325,154 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 446,017,738 | 305,645,638 | 140,372,100 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Pennsylvania

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 446,017,738 | 305,645,638 | 140,372,100 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 61,584,974 | 30,792,488 | 30,792,486 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 61,584,974 | 30,792,488 | 30,792,486 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 61,584,974 | 30,792,488 | 30,792,486 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 0 | 0 | 0 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 0 | 0 | 0 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Puerto Rico

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 2,818,433 | 2,536,589 | 281,844 |
| Skilled Professional Medical Personnel - Single State Agency | 2,599,854 | 1,949,891 | 649,963 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 17,949,625 | 13,462,220 | 4,487,405 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,995,946 | 1,496,960 | 498,986 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 128,103 | 64,052 | 64,051 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 164,404 | 147,964 | 16,440 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 57,354,235 | 28,677,116 | 28,677,119 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|------------------|---------------|-------------|
| Balance | 83,010,600 | 48,334,792 | 34,675,808 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 83,010,600 | 48,334,792 | 34,675,808 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 14,212,152 | 9,498,878 | 4,713,274 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 319,956 | 213,858 | 106,098 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 1,025,677 | 685,447 | 340,230 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 15,557,785 | 10,398,183 | 5,159,602 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Rhode Island

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 15,557,785 | 10,398,183 | 5,159,602 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 2,000,078 | 1,800,071 | 200,007 |
| MMIS - Private Sector | 2,231,131 | 2,008,018 | 223,113 |
| Skilled Professional Medical Personnel - Single State Agency | 5,887,423 | 4,415,568 | 1,471,855 |
| Skilled Professional Medical Personnel - Other Agency | 1,337,529 | 1,003,147 | 334,382 |
| Approved MMIS: Inhouse | 10,215,316 | 7,661,487 | 2,553,829 |
| Approved MMIS: Private | 16,505,271 | 12,378,954 | 4,126,317 |
| Mechanized Systems - In-House | 5,512,496 | 2,756,248 | 2,756,248 |
| Mechanized Systems: Private Sector | 3,546,685 | 1,773,344 | 1,773,341 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,545,523 | 1,159,142 | 386,381 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 1,677,759 | 838,881 | 838,878 |
| Preadmission Screening | 823,766 | 617,824 | 205,942 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 5,824 | 2,913 | 2,911 |
| Outstationed Eligibility | 6,817,503 | 3,408,752 | 3,408,751 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 6,452,535 | 3,226,268 | 3,226,267 |
| School Based Administration | 8,055,713 | 4,027,857 | 4,027,856 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 714,964 | 357,482 | 357,482 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 194,284 | 145,713 | 48,571 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 823,642 | 741,278 | 82,364 |
| HIT: Planning: Cost of Private Contractors | 34,543 | 31,089 | 3,454 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 76,807,548 | 38,403,775 | 38,403,773 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 151,189,533 | 86,757,811 | 64,431,722 |
| Collections | (10,935) | (5,468) | (5,467) |
| Total Net Expenditures | 151,178,598 | 86,752,343 | 64,426,255 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 40,040,840 | 31,683,423 | 8,357,417 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 7,566,976 | 5,987,842 | 1,579,134 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 7,297,739 | 5,781,270 | 1,516,469 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 54,905,555 | 43,452,535 | 11,453,020 |
| Less: Collection | (3,086) | (2,445) | (641) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Carolina

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 54,902,469 | 43,450,090 | 11,452,379 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 9,744,714 | 8,770,242 | 974,472 |
| MMIS - Private Sector | 12,272,312 | 11,045,081 | 1,227,231 |
| Skilled Professional Medical Personnel - Single State Agency | 241,925 | 181,444 | 60,481 |
| Skilled Professional Medical Personnel - Other Agency | 656,005 | 492,004 | 164,001 |
| Approved MMIS: Inhouse | 5,888,869 | 4,416,652 | 1,472,217 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 708,217 | 531,163 | 177,054 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 24,694 | 12,347 | 12,347 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 434,645 | 325,985 | 108,660 |
| Drug Use Review | 145,622 | 72,811 | 72,811 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 3,038,176 | 1,519,088 | 1,519,088 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 32,095,702 | 16,047,852 | 16,047,850 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 65,250,881 | 43,414,669 | 21,836,212 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 65,250,881 | 43,414,669 | 21,836,212 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 1,572,789 | 1,162,291 | 410,498 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 982,644 | 726,175 | 256,469 |
| Outpatient Hospital | 790,550 | 584,216 | 206,334 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 1,010,813 | 746,990 | 263,823 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 23,020 | 17,012 | 6,008 |
| Other Practitioners | 702,977 | 519,499 | 183,478 |
| Clinic Services | 657,319 | 485,759 | 171,560 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 84,839 | 62,695 | 22,144 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 2,864 | 2,117 | 747 |
| Family Planning | 36,790 | 27,189 | 9,601 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 8,783 | 6,490 | 2,293 |
| Home Health | 61,261 | 45,271 | 15,990 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 27,665 | 20,445 | 7,220 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 123,961 | 91,607 | 32,354 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 1,021,979 | 755,243 | 266,736 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 7,108,254 | 5,252,999 | 1,855,255 |
| Less: Collection | (130,654) | (95,180) | (35,474) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

South Dakota

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 6,977,600 | 5,157,819 | 1,819,781 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | (263,327) | (236,994) | (26,333) |
| MMIS - Inhouse Activities | 6,560,681 | 5,904,613 | 656,068 |
| MMIS - Private Sector | 1,353,136 | 1,217,823 | 135,313 |
| Skilled Professional Medical Personnel - Single State Agency | 2,781,555 | 2,086,167 | 695,388 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 26,604,932 | 19,953,700 | 6,651,232 |
| Approved MMIS: Private | 5,156,456 | 3,867,343 | 1,289,113 |
| Mechanized Systems - In-House | 5,226,978 | 2,613,490 | 2,613,488 |
| Mechanized Systems: Private Sector | 859,788 | 429,895 | 429,893 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 4,763,330 | 3,572,498 | 1,190,832 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 125,186 | 93,890 | 31,296 |
| Resident Review | 36,213 | 27,160 | 9,053 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 37,519,965 | 18,759,982 | 18,759,983 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 111,145,509 | 55,572,757 | 55,572,752 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 223,704 | 201,334 | 22,370 |
| HIT: Planning: Cost of Private Contractors | 489,250 | 440,325 | 48,925 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 151,489,038 | 75,744,526 | 75,744,512 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 354,072,394 | 190,248,509 | 163,823,885 |
| Collections | (256,057) | (128,029) | (128,028) |
| Total Net Expenditures | 353,816,337 | 190,120,480 | 163,695,857 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 52,158,541 | 39,762,513 | 12,396,028 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 42,193,442 | 32,075,782 | 10,117,660 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | (87,399) | (66,336) | (21,063) |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 8,777,152 | 6,661,858 | 2,115,294 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 114,951 | 87,248 | 27,703 |
| Outreach | 244,207 | 185,353 | 58,854 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 7,503,513 | 5,668,652 | 1,834,861 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 110,904,407 | 84,375,070 | 26,529,337 |
| Less: Collection | (297,172) | (225,553) | (71,619) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Tennessee

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 110,607,235 | 84,149,517 | 26,457,718 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 511,474 | 460,326 | 51,148 |
| MMIS - Inhouse Activities | 2,665,139 | 2,398,625 | 266,514 |
| MMIS - Private Sector | 13,742,483 | 12,356,310 | 1,386,173 |
| Skilled Professional Medical Personnel - Single State Agency | 16,217,426 | 12,163,070 | 4,054,356 |
| Skilled Professional Medical Personnel - Other Agency | 332,851 | 249,639 | 83,212 |
| Approved MMIS: Inhouse | 36,128,487 | 26,957,101 | 9,171,386 |
| Approved MMIS: Private | 135,082,165 | 85,267,287 | 49,814,878 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 1,914,101 | 1,435,580 | 478,521 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 79,003 | 79,003 | 0 |
| Nurse Aide Training Costs | 528,288 | 264,147 | 264,141 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 13,750,411 | 6,875,210 | 6,875,201 |
| School Based Administration | 95,386,847 | 47,693,426 | 47,693,421 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 14,320 | 12,888 | 1,432 |
| HIT: Planning: Cost of Private Contractors | 789,276 | 710,348 | 78,928 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 795,007,294 | 397,503,659 | 397,503,635 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 1,112,149,565 | 594,426,619 | 517,722,946 |
| Collections | (11,782,216) | (7,605,180) | (4,177,036) |
| Total Net Expenditures | 1,100,367,349 | 586,821,439 | 513,545,910 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 653,573,155 | 464,755,871 | 188,817,284 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (25,144) | (17,887) | (7,257) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 228,469,052 | 162,464,343 | 66,004,709 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (4,199,836) | (2,988,395) | (1,211,441) |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 150,363,303 | 106,923,344 | 43,439,959 |
| Drug Rebate | (20,556,447) | (14,617,690) | (5,938,757) |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 2,588,499 | 1,868,626 | 719,873 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 36,566,896 | 26,002,720 | 10,564,176 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 66,046,244 | 46,965,484 | 19,080,760 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 1,112,825,722 | 791,356,416 | 321,469,306 |
| Less: Collection | (21,117,992) | (15,038,404) | (6,079,588) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Texas

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 1,091,707,730 | 776,318,012 | 315,389,718 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 123,152 | 110,836 | 12,316 |
| MMIS - Private Sector | 251,201 | 226,082 | 25,119 |
| Skilled Professional Medical Personnel - Single State Agency | 988,159 | 741,121 | 247,038 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 16,224,652 | 12,168,491 | 4,056,161 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 8,234,305 | 4,117,156 | 4,117,149 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 85,164 | 42,584 | 42,580 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 539,081 | 404,311 | 134,770 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 3,529,419 | 1,764,715 | 1,764,704 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 17 | 17 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 245,860 | 184,395 | 61,465 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 87,950,367 | 43,975,189 | 43,975,178 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|------------------|---------------|-------------|
| Balance | 118,171,377 | 63,734,897 | 54,436,480 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 118,171,377 | 63,734,897 | 54,436,480 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 54,692,469 | 43,819,930 | 10,872,539 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 16,190,517 | 12,967,588 | 3,222,929 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | (2,575,132) | (2,030,975) | (544,157) |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 7,423,964 | 5,950,045 | 1,473,919 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 75,731,818 | 60,706,588 | 15,025,230 |
| Less: Collection | (1,492,181) | (1,196,321) | (295,860) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Utah

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 74,239,637 | 59,510,267 | 14,729,370 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 283,567 | 255,211 | 28,356 |
| MMIS - Private Sector | 103,488 | 93,140 | 10,348 |
| Skilled Professional Medical Personnel - Single State Agency | 506,040 | 379,529 | 126,511 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 20,808 | 10,405 | 10,403 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 184,042 | 138,032 | 46,010 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 54,576 | 49,119 | 5,457 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 5,276,352 | 2,638,175 | 2,638,177 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 6,428,873 | 3,563,611 | 2,865,262 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 6,428,873 | 3,563,611 | 2,865,262 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 409,280 | 291,039 | 118,241 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 6,178 | 4,393 | 1,785 |
| Physician/Surgical | 657,582 | 467,606 | 189,976 |
| Outpatient Hospital | 783,888 | 557,423 | 226,465 |
| Outpatient Mental Health | 349,762 | 248,716 | 101,046 |
| Prescribed Drugs | 1,439,694 | 1,023,766 | 415,928 |
| Drug Rebate | (668,535) | (475,413) | (193,122) |
| Dental Services | 931,365 | 662,294 | 269,071 |
| Vision Services | 19,276 | 13,707 | 5,569 |
| Other Practitioners | 350,138 | 248,984 | 101,154 |
| Clinic Services | 204,969 | 145,754 | 59,215 |
| Therapy Services | 53,849 | 38,292 | 15,557 |
| Laboratory/Radiological | 80,934 | 57,552 | 23,382 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 76,765 | 54,588 | 22,177 |
| Family Planning | 51,913 | 36,916 | 14,997 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 553,711 | 393,744 | 159,967 |
| Home Health | 24,614 | 17,503 | 7,111 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 160,192 | 113,912 | 46,280 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 14,222 | 10,113 | 4,109 |
| Case Management | 264,160 | 187,844 | 76,316 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 2,368,982 | 1,684,883 | 684,099 |
| Outreach | 94,641 | 67,299 | 27,342 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 24,680 | 17,550 | 7,130 |
| Administration | 416,957 | 296,569 | 120,388 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 8,669,217 | 6,165,034 | 2,504,183 |
| Less: Collection | (1,646,760) | (1,171,012) | (475,748) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Vermont

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 7,022,457 | 4,994,022 | 2,028,435 |

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Medicaid Financial Management Report - Net CHIP Expenditures

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Virgin Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 10,868 | 9,781 | 1,087 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Single State Agency | 0 | 0 | 0 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | 0 | 0 | 0 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 4,440,128 | 2,220,066 | 2,220,062 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 4,450,996 | 2,229,847 | 2,221,149 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 4,450,996 | 2,229,847 | 2,221,149 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 0 | 0 | 0 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 0 | 0 | 0 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virgin Islands

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 0 | 0 | 0 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 19,065 | 17,159 | 1,906 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 1,386,723 | 1,248,051 | 138,672 |
| Skilled Professional Medical Personnel - Single State Agency | 2,509,673 | 1,882,256 | 627,417 |
| Skilled Professional Medical Personnel - Other Agency | 2,421,202 | 1,815,902 | 605,300 |
| Approved MMIS: Inhouse | 2,439,987 | 1,829,991 | 609,996 |
| Approved MMIS: Private | 25,871,032 | 19,403,274 | 6,467,758 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 6,927,885 | 5,195,915 | 1,731,970 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 1,061,613 | 530,808 | 530,805 |
| Preadmission Screening | 284,113 | 213,085 | 71,028 |
| Resident Review | 174,720 | 131,040 | 43,680 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 360,079 | 180,042 | 180,037 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 1,721,692 | 860,849 | 860,843 |
| School Based Administration | 20,435,257 | 10,217,632 | 10,217,625 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 7,703,208 | 3,851,607 | 3,851,601 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 118,665,914 | 59,332,959 | 59,332,955 |
| Translation and Interpretation | 22,109 | 16,583 | 5,526 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 11,228 | 10,105 | 1,123 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 538,210 | 484,389 | 53,821 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 60,931,617 | 30,465,811 | 30,465,806 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 253,485,327 | 137,687,458 | 115,797,869 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 253,485,327 | 137,687,458 | 115,797,869 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 18,345,105 | 11,924,319 | 6,420,786 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 56,917,173 | 36,996,162 | 19,921,011 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 8,103,129 | 5,267,034 | 2,836,095 |
| Inpatient Mental Health | (1,053,733) | (684,926) | (368,807) |
| Nursing Care Services | (2,861) | (1,860) | (1,001) |
| Physician/Surgical | 4,225,778 | 2,746,756 | 1,479,022 |
| Outpatient Hospital | 2,444,579 | 1,588,978 | 855,601 |
| Outpatient Mental Health | 14,923,827 | 9,700,489 | 5,223,338 |
| Prescribed Drugs | 3,801,171 | 2,470,761 | 1,330,410 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 17,357,688 | 11,282,498 | 6,075,190 |
| Vision Services | 188,041 | 122,226 | 65,815 |
| Other Practitioners | 807,017 | 524,562 | 282,455 |
| Clinic Services | 2,938,022 | 1,909,715 | 1,028,307 |
| Therapy Services | 53,748 | 34,937 | 18,811 |
| Laboratory/Radiological | 612,428 | 398,080 | 214,348 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 296,215 | 192,540 | 103,675 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 944,041 | 613,626 | 330,415 |
| Home Health | 12,282 | 7,984 | 4,298 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 60,733 | 39,476 | 21,257 |
| Case Management | 86,162 | 56,003 | 30,159 |
| Translation and Interpretation | 11,479 | 8,611 | 2,868 |
| Other Services | 0 | 0 | 0 |
| Outreach | 706,668 | 459,335 | 247,333 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 10,350,448 | 6,727,791 | 3,622,657 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 79,742 | 71,768 | 7,974 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 142,208,882 | 92,456,865 | 49,752,017 |
| Less: Collection | (304,091) | (197,659) | (106,432) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 141,904,791 | 92,259,206 | 49,645,585 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 4,108,800 | 3,697,920 | 410,880 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 35,075,125 | 31,567,613 | 3,507,512 |
| Skilled Professional Medical Personnel - Single State Agency | 7,566,910 | 5,675,183 | 1,891,727 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 21,896,931 | 16,422,699 | 5,474,232 |
| Approved MMIS: Private | 127,492 | 95,619 | 31,873 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 716,877 | 358,440 | 358,437 |
| Preadmission Screening | 541,436 | 406,077 | 135,359 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 4,576,330 | 2,288,165 | 2,288,165 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 1,773,438 | 1,330,079 | 443,359 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 19,665,291 | 9,832,646 | 9,832,645 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 1,160,207 | 870,155 | 290,052 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 401,573,636 | 200,786,832 | 200,786,804 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

**Washington
National**

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 498,782,473 | 273,331,428 | 225,451,045 |
| Collections | (13,721) | (6,902) | (6,819) |
| Total Net Expenditures | 498,768,752 | 273,324,526 | 225,444,226 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 20,752,210 | 13,508,253 | 7,243,957 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (4,248,581) | (2,765,510) | (1,483,071) |
| Inpatient Hospital | 2,499,039 | 1,631,362 | 867,677 |
| Inpatient Mental Health | 142,355 | 92,770 | 49,585 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 3,094,348 | 2,027,010 | 1,067,338 |
| Outpatient Hospital | 2,944,414 | 1,930,255 | 1,014,159 |
| Outpatient Mental Health | 3,118,058 | 2,030,632 | 1,087,426 |
| Prescribed Drugs | 1,420,438 | 927,309 | 493,129 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 5,048,912 | 3,290,599 | 1,758,313 |
| Vision Services | 200,111 | 130,797 | 69,314 |
| Other Practitioners | 465,138 | 303,005 | 162,133 |
| Clinic Services | 3,808,255 | 2,478,956 | 1,329,299 |
| Therapy Services | (2,144) | (1,395) | (749) |
| Laboratory/Radiological | 1,181,907 | 775,633 | 406,274 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 346,653 | 226,964 | 119,689 |
| Family Planning | 20,366 | 13,274 | 7,092 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 158,634 | 103,327 | 55,307 |
| Home Health | 118,213 | 76,933 | 41,280 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 110,445 | 72,003 | 38,442 |
| Case Management | 1,825,949 | 1,199,125 | 626,824 |
| Translation and Interpretation | 330,082 | 247,561 | 82,521 |
| Other Services | 22 | 15 | 7 |
| Outreach | 2,959,264 | 1,925,890 | 1,033,374 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 2,090,278 | 1,360,306 | 729,972 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 48,384,366 | 31,585,074 | 16,799,292 |
| Less: Collection | 79,996 | 51,999 | 27,997 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Washington

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 48,464,362 | 31,637,073 | 16,827,289 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 876,833 | 789,149 | 87,684 |
| Skilled Professional Medical Personnel - Single State Agency | 1,121,336 | 841,002 | 280,334 |
| Skilled Professional Medical Personnel - Other Agency | 1,303,313 | 977,486 | 325,827 |
| Approved MMIS: Inhouse | 730,715 | 548,036 | 182,679 |
| Approved MMIS: Private | 26,874,169 | 20,155,627 | 6,718,542 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | 0 | 0 | 0 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 14,402,526 | 10,801,896 | 3,600,630 |
| TPL - Recovery | 61,308 | 30,655 | 30,653 |
| TPL - Assignment Of Rights | 16,193 | 8,098 | 8,095 |
| Immigration Status | 410 | 410 | 0 |
| Nurse Aide Training Costs | 599,450 | 299,726 | 299,724 |
| Preadmission Screening | 241,950 | 181,464 | 60,486 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 947,044 | 473,523 | 473,521 |
| Outstationed Eligibility | 1,499,099 | 749,550 | 749,549 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 487,358 | 365,519 | 121,839 |
| Enrollment Brokers | 1,818,243 | 909,122 | 909,121 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 461,311 | 230,656 | 230,655 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 6,368,473 | 3,184,239 | 3,184,234 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 53,508,251 | 26,754,126 | 26,754,125 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 111,317,982 | 67,300,284 | 44,017,698 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 111,317,982 | 67,300,284 | 44,017,698 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 0 | 0 | 0 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 3,625,758 | 2,966,958 | 658,800 |
| Inpatient Mental Health | 815,185 | 667,067 | 148,118 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 9,995,483 | 8,179,304 | 1,816,179 |
| Outpatient Hospital | 12,288,303 | 10,055,517 | 2,232,786 |
| Outpatient Mental Health | 1,338,935 | 1,095,651 | 243,284 |
| Prescribed Drugs | 8,907,321 | 7,288,860 | 1,618,461 |
| Drug Rebate | (508,210) | (415,868) | (92,342) |
| Dental Services | 5,140,387 | 4,206,379 | 934,008 |
| Vision Services | 739,081 | 604,791 | 134,290 |
| Other Practitioners | 81,643 | 66,808 | 14,835 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 502,375 | 411,094 | 91,281 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 1,179,464 | 965,156 | 214,308 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 61,153 | 50,041 | 11,112 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 349,752 | 286,202 | 63,550 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Other Services | 0 | 0 | 0 |
| Outreach | 64,804 | 53,029 | 11,775 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 3,826,077 | 3,130,879 | 695,198 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 48,407,511 | 39,611,868 | 8,795,643 |
| Less: Collection | (514,360) | (420,900) | (93,460) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

West Virginia

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 47,893,151 | 39,190,968 | 8,702,183 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-----------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 238,377 | 214,543 | 23,834 |
| MMIS - Private Sector | 1,801,838 | 1,621,656 | 180,182 |
| Skilled Professional Medical Personnel - Single State Agency | 3,728,371 | 2,796,284 | 932,087 |
| Skilled Professional Medical Personnel - Other Agency | 37,201 | 27,902 | 9,299 |
| Approved MMIS: Inhouse | 0 | 0 | 0 |
| Approved MMIS: Private | (81,422) | (61,067) | (20,355) |
| Mechanized Systems - In-House | 25,077,933 | 12,538,975 | 12,538,958 |
| Mechanized Systems: Private Sector | 3,085,488 | 1,542,755 | 1,542,733 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | (79,474) | (39,735) | (39,739) |
| Peer Review Organizations | 0 | 0 | 0 |
| TPL - Recovery | 0 | 0 | 0 |
| TPL - Assignment Of Rights | 0 | 0 | 0 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 119,366 | 59,689 | 59,677 |
| Preadmission Screening | 1,622,545 | 1,216,913 | 405,632 |
| Resident Review | 188,275 | 141,206 | 47,069 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 0 | 0 | 0 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 4,221,716 | 2,973,403 | 1,248,313 |
| Enrollment Brokers | 173,791 | 86,903 | 86,888 |
| School Based Administration | 16,904,856 | 8,452,428 | 8,452,428 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 164,698 | 82,355 | 82,343 |
| County/Local ADM Costs | 70,426,186 | 35,213,100 | 35,213,086 |
| Interagency Costs (State Level) | 15,700,862 | 7,850,436 | 7,850,426 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Planning: Cost of Private Contractors | 1,046,280 | 941,653 | 104,627 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 146,118,160 | 73,059,098 | 73,059,062 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 290,495,047 | 148,718,497 | 141,776,550 |
| Collections | (2,408,832) | 0 | (2,408,832) |
| Total Net Expenditures | 288,086,215 | 148,718,497 | 139,367,718 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 182,965 | 132,562 | 50,403 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 114,281 | 82,454 | 31,827 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 17,833,083 | 12,866,849 | 4,966,234 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (1,127,425) | (813,439) | (313,986) |
| Inpatient Hospital | 16,004,789 | 11,549,097 | 4,455,692 |
| Inpatient Mental Health | 304,993 | 220,035 | 84,958 |
| Nursing Care Services | 77,507 | 55,923 | 21,584 |
| Physician/Surgical | 1,708,428 | 1,232,229 | 476,199 |
| Outpatient Hospital | 5,766,603 | 4,160,973 | 1,605,630 |
| Outpatient Mental Health | 67,845 | 48,958 | 18,887 |
| Prescribed Drugs | 8,769,339 | 6,327,207 | 2,442,132 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 2,258,042 | 1,629,232 | 628,810 |
| Vision Services | 40,763 | 29,410 | 11,353 |
| Other Practitioners | 499,927 | 360,710 | 139,217 |
| Clinic Services | 4,044,813 | 2,917,063 | 1,127,750 |
| Therapy Services | 199,875 | 144,246 | 55,629 |
| Laboratory/Radiological | 2,012,640 | 1,452,154 | 560,486 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 481,467 | 347,406 | 134,061 |
| Family Planning | 1,461,248 | 1,054,334 | 406,914 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 179,921 | 129,818 | 50,103 |
| Home Health | 22,003 | 15,873 | 6,130 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 24,467 | 17,646 | 6,821 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 215,169 | 155,231 | 59,938 |
| Case Management | 355,956 | 255,940 | 100,016 |
| Translation and Interpretation | (312) | (239) | (73) |
| Other Services | 14,535,705 | 10,431,572 | 4,104,133 |
| Outreach | 0 | 0 | 0 |
| Increased Outreach and Enrollment of Indians | 0 | 0 | 0 |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 10,027,065 | 7,215,025 | 2,812,040 |
| PERM Administration | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 86,061,157 | 62,018,269 | 24,042,888 |
| Less: Collection | (4,049,980) | (2,912,841) | (1,137,139) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wisconsin

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 82,011,177 | 59,105,428 | 22,905,749 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 0 | 0 | 0 |
| MMIS - Inhouse Activities | 0 | 0 | 0 |
| MMIS - Private Sector | 3,826,594 | 3,443,935 | 382,659 |
| Skilled Professional Medical Personnel - Single State Agency | 2,558,595 | 1,844,211 | 714,384 |
| Skilled Professional Medical Personnel - Other Agency | 0 | 0 | 0 |
| Approved MMIS: Inhouse | 248,458 | 186,345 | 62,113 |
| Approved MMIS: Private | 10,940,467 | 7,212,397 | 3,728,070 |
| Mechanized Systems - In-House | 0 | 0 | 0 |
| Mechanized Systems: Private Sector | (36,230) | (18,115) | (18,115) |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 0 | 0 | 0 |
| Peer Review Organizations | 660,161 | 457,441 | 202,720 |
| TPL - Recovery | 7,236 | 3,619 | 3,617 |
| TPL - Assignment Of Rights | 3,330 | 1,666 | 1,664 |
| Immigration Status | 0 | 0 | 0 |
| Nurse Aide Training Costs | 0 | 0 | 0 |
| Preadmission Screening | 0 | 0 | 0 |
| Resident Review | 0 | 0 | 0 |
| Drug Use Review | 0 | 0 | 0 |
| Outstationed Eligibility | 3,939,480 | 1,969,741 | 1,969,739 |
| TANF Base | 0 | 0 | 0 |
| TANF Secondary 90% | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 0 | 0 | 0 |
| External Review | 0 | 0 | 0 |
| Enrollment Brokers | 0 | 0 | 0 |
| School Based Administration | 0 | 0 | 0 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 0 | 0 | 0 |
| County/Local ADM Costs | 0 | 0 | 0 |
| Interagency Costs (State Level) | 0 | 0 | 0 |
| Translation and Interpretation | 0 | 0 | 0 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 146,689 | 132,020 | 14,669 |
| HIT: Planning: Cost of Private Contractors | 57,850 | 52,065 | 5,785 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 0 | 0 | 0 |
| CVT Operation CHIPRA | 0 | 0 | 0 |
| Other Financial Participation | 17,582,318 | 8,791,160 | 8,791,158 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 39,934,948 | 24,076,485 | 15,858,463 |
| Collections | 0 | 0 | 0 |
| Total Net Expenditures | 39,934,948 | 24,076,485 | 15,858,463 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 4,900,900 | 3,185,585 | 1,715,315 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 8,487,570 | 5,516,921 | 2,970,649 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | 0 | 0 | 0 |
| Inpatient Hospital | 0 | 0 | 0 |
| Inpatient Mental Health | 0 | 0 | 0 |
| Nursing Care Services | 0 | 0 | 0 |
| Physician/Surgical | 0 | 0 | 0 |
| Outpatient Hospital | 0 | 0 | 0 |
| Outpatient Mental Health | 0 | 0 | 0 |
| Prescribed Drugs | 0 | 0 | 0 |
| Drug Rebate | 0 | 0 | 0 |
| Dental Services | 0 | 0 | 0 |
| Vision Services | 0 | 0 | 0 |
| Other Practitioners | 0 | 0 | 0 |
| Clinic Services | 0 | 0 | 0 |
| Therapy Services | 0 | 0 | 0 |
| Laboratory/Radiological | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 0 | 0 | 0 |
| Family Planning | 0 | 0 | 0 |
| Abortions | 0 | 0 | 0 |
| Screening Services | 0 | 0 | 0 |
| Home Health | 0 | 0 | 0 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 0 | 0 | 0 |
| Hospice | 0 | 0 | 0 |
| Medical Transportation | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Translation and Interpretation | 3,052 | 2,289 | 763 |
| Other Services | 0 | 0 | 0 |
| Outreach | 14,245 | 9,260 | 4,985 |
| Increased Outreach and Enrollment of Indians | 217 | 141 | 76 |
| | | | |
| Increase Outreach and Enrollment of children through premium subsidies | 0 | 0 | 0 |
| Administration | 831,132 | 540,236 | 290,896 |
| PERM Administration | 14,953 | 13,458 | 1,495 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 0 | 0 | 0 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 14,252,069 | 9,267,890 | 4,984,179 |
| Less: Collection | 0 | 0 | 0 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

Wyoming

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 14,252,069 | 9,267,890 | 4,984,179 |

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Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Family Planning | 38,015,800 | 34,214,220 | 3,801,580 |
| MMIS - Inhouse Activities | 80,627,555 | 71,602,037 | 9,025,518 |
| MMIS - Private Sector | 297,435,956 | 267,172,903 | 30,263,053 |
| Skilled Professional Medical Personnel - Single State Agency | 324,247,667 | 243,003,034 | 81,244,633 |
| Skilled Professional Medical Personnel - Other Agency | 250,198,108 | 187,648,595 | 62,549,513 |
| Approved MMIS: Inhouse | 524,122,855 | 392,894,731 | 131,228,124 |
| Approved MMIS: Private | 1,224,048,253 | 898,493,287 | 325,554,966 |
| Mechanized Systems - In-House | 81,778,685 | 40,889,368 | 40,889,317 |
| Mechanized Systems: Private Sector | 94,447,363 | 47,223,720 | 47,223,643 |
| Mechanized Systems - Not Approved under MMIS Procedures: Interagency | 13,632,756 | 6,816,383 | 6,816,373 |
| Peer Review Organizations | 283,510,457 | 212,595,190 | 70,915,267 |
| TPL - Recovery | 818,516 | 409,264 | 409,252 |
| TPL - Assignment Of Rights | 1,066,710 | 533,362 | 533,348 |
| Immigration Status | 7,672,466 | 7,672,466 | 0 |
| Nurse Aide Training Costs | 18,783,777 | 9,391,932 | 9,391,845 |
| Preadmission Screening | 113,277,816 | 84,904,386 | 28,373,430 |
| Resident Review | 13,181,645 | 9,879,832 | 3,301,813 |
| Drug Use Review | 9,749,105 | 5,395,979 | 4,353,126 |
| Outstationed Eligibility | 75,100,391 | 37,663,505 | 37,436,886 |
| TANF Base | 771,876 | 694,689 | 77,187 |
| TANF Secondary 90% | 164,421 | 147,981 | 16,440 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|----------------------------------------------------------------|-------------------------|----------------------|--------------------|
| TANF Secondary 75% | 434 | 326 | 108 |
| External Review | 24,067,015 | 17,857,396 | 6,209,619 |
| Enrollment Brokers | 102,781,693 | 51,390,880 | 51,390,813 |
| School Based Administration | 1,044,771,187 | 522,385,618 | 522,385,569 |
| Program Integrity/Fraud, Waste, and Abuse Activities | 23,549,583 | 11,774,812 | 11,774,771 |
| County/Local ADM Costs | 2,341,870,909 | 1,170,935,470 | 1,170,935,439 |
| Interagency Costs (State Level) | 1,463,112,000 | 731,556,050 | 731,555,950 |
| Translation and Interpretation | 5,005,778 | 3,754,341 | 1,251,437 |
| Health Insurance Technology Administration | 0 | 0 | 0 |
| HIT: Planning: Cost of In-house Activities | 4,894,879 | 4,402,728 | 492,151 |
| HIT: Planning: Cost of Private Contractors | 6,916,180 | 6,224,563 | 691,617 |
| HIT: Implementation and Operation: Cost of In-house Activities | 0 | 0 | 0 |
| HIT: Implementation and Operation: Cost of Private Contractors | 0 | 0 | 0 |
| Citizenship Verification Technology CHIPRA | 0 | 0 | 0 |
| CVT Development CHIPRA | 2,563,303 | 2,306,973 | 256,330 |
| CVT Operation CHIPRA | 289 | 217 | 72 |
| Other Financial Participation | 9,470,473,482 | 4,735,236,969 | 4,735,236,513 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------------------|-------------------------|----------------------|--------------------|
| Balance | 17,942,658,910 | 9,817,073,207 | 8,125,585,703 |
| Collections | (16,781,417) | (8,943,135) | (7,838,282) |
| Total Net Expenditures | 17,925,877,493 | 9,808,130,072 | 8,117,747,421 |
| CHIP | 0 | 0 | 0 |
| Premiums - Up To 150%: Gross | | | |
| Premiums Paid | 2,886,247,062 | 1,995,937,441 | 890,309,621 |
| Premiums - Up To 150%: Cost Sharing | | | |
| Offset | (57,508,163) | (38,135,957) | (19,372,206) |
| Premiums - Over 150%: Gross | | | |
| Premiums Paid | 3,228,474,567 | 2,217,831,071 | 1,010,643,496 |
| Premiums - Over 150%: Cost Sharing | | | |
| Offset | (186,927,359) | (127,293,198) | (59,634,161) |
| Inpatient Hospital | 332,636,107 | 227,832,352 | 104,803,755 |
| Inpatient Mental Health | 15,406,229 | 10,968,425 | 4,437,804 |
| Nursing Care Services | 1,441,688 | 989,825 | 451,863 |
| Physician/Surgical | 345,009,371 | 239,998,355 | 105,011,016 |
| Outpatient Hospital | 171,088,102 | 120,590,866 | 50,497,236 |
| Outpatient Mental Health | 64,764,124 | 43,090,476 | 21,673,648 |
| Prescribed Drugs | 345,125,634 | 246,552,400 | 98,573,234 |
| Drug Rebate | (25,977,481) | (18,679,663) | (7,297,818) |
| Dental Services | 137,705,303 | 98,251,664 | 39,453,639 |
| Vision Services | 4,307,685 | 3,220,678 | 1,087,007 |
| Other Practitioners | 23,013,613 | 16,255,391 | 6,758,222 |
| Clinic Services | 128,699,470 | 85,703,596 | 42,995,874 |
| Therapy Services | 9,397,919 | 6,600,306 | 2,797,613 |
| Laboratory/Radiological | 42,244,233 | 30,440,034 | 11,804,199 |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|---------------------------------------------------------------------------|-------------------------|----------------------|--------------------|
| Medical Equipment | 13,383,297 | 9,870,743 | 3,512,554 |
| Family Planning | 3,092,375 | 2,164,259 | 928,116 |
| Abortions | (2,869) | (2,132) | (737) |
| Screening Services | 27,543,432 | 19,013,744 | 8,529,688 |
| Home Health | 2,277,971 | 1,596,360 | 681,611 |
| Reserved | 0 | 0 | 0 |
| Home and Community | 4,136,964 | 2,957,539 | 1,179,425 |
| Hospice | 112,019 | 77,952 | 34,067 |
| Medical Transportation | 5,478,258 | 3,955,509 | 1,522,749 |
| Case Management | 13,853,139 | 9,607,144 | 4,245,995 |
| Translation and Interpretation | 4,258,148 | 3,201,538 | 1,056,610 |
| Other Services | 381,505,115 | 284,909,574 | 96,595,541 |
| Outreach | 19,538,385 | 13,305,880 | 6,232,505 |
| Increased Outreach and Enrollment of Indians | 1,083 | 776 | 307 |
| Increase Outreach and Enrollment of children through premium subsidies | 2,353,575 | 1,531,339 | 822,236 |
| Administration | 515,459,421 | 359,856,486 | 155,602,935 |
| PERM Administration | 686,745 | 618,072 | 68,673 |
| Citizenship Verification Technology | | | |
| CHIPRA | 0 | 0 | 0 |
| CVT Development | 3,562,639 | 3,206,376 | 356,263 |
| CVT Operation | 0 | 0 | 0 |
| Balance | 8,462,387,801 | 5,876,025,221 | 2,586,362,580 |
| Less: Collection | (51,248,553) | (35,697,569) | (15,550,984) |

Medicaid Financial Management Report - Net CHIP Expenditures

FY 2010

National Totals

National

FMR CHIP

| Service Category | Total Computable | Federal Share | State Share |
|-------------------------|-------------------------|----------------------|--------------------|
| Total | 8,411,139,248 | 5,840,327,652 | 2,570,811,596 |

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