

# 2002-2003



# LOUISIANA MEDICAID ANNUAL REPORT

*A LOOK BACK AT THE YEAR AND STATISTICAL ABSTRACT*

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Dear Reader:

During the state fiscal year ending June 30, 2003, the Louisiana Medicaid Program continued to focus on initiatives which reflected the Department of Health & Hospitals' stated vision to: 1) increase access to primary and preventive care, 2) provide home and community-based alternatives to institutions, and 3) deliver quality health care in an efficient manner.

The Department believes that primary and preventive care are essential and will result in both improved health outcomes and cost savings. The statewide phase-in of CommunityCARE continued with implementation in Alexandria, Monroe, and Shreveport. CommunityCARE is our Primary Care Case Management (PCCM) system, which links Medicaid and LaCHIP recipients to a "medical home." The term "medical home" refers to a medical provider who is responsible not only for preventive, primary, and acute care but also for health education, which is essential to address lifestyle issues impacting health. The primary provider makes any necessary referrals to specialists, hospitals, and other medically necessary health services. The percentage of Medicaid enrollees participating in CommunityCARE increased from 207,946 (25.3 percent of Medicaid enrollees) to 500,797 (56.8 percent of Medicaid enrollees). At year end, CommunityCARE had been implemented in 60 parishes with the remaining four parishes scheduled for implementation by the end of 2003.

Several web-based administrative tools were implemented to assist providers in reducing paperwork (e.g., on-line CommunityCARE referrals), as well as to provide important information to assist providers in treatment coordination. Prescribing providers can access a patient's prescription history and use this information in management of care, including the newly implemented limit of eight prescriptions per month. A web-based system was deployed for issuing Medicaid identification numbers for newborns, dramatically reducing the time it takes for a number to be issued.

The Department continued to make strides and improvements in long-term care:

- The availability of home and community-based services and supports as an alternative to institutional care increased by 34 percent. The number of individuals receiving services through home and community-based waivers increased from 5,688 in SFY '02 to 7,638 in SFY '03. The number of waiver slots for older adults and persons with disabilities in the Elderly and Disabled Adult (EDA) Waiver more than doubled and overall spending for waiver services increased by almost 19 percent to just over \$180 million.
- In January 2003, the case mix acuity methodology (RUGS) for determining nursing facility rates was implemented. Each facility's rate is individually determined and is based on the aggregate acuity level of its residents.

While overall our Medicaid spending growth was below the national average, we continually looked for ways to increase access and quality of services for Medicaid enrollees. Highlights include the following:

- We were able to increase our physician rates for certain procedure codes.
- The criteria for electric wheelchairs was broadened to be similar to Medicare's policy so that access will not be limited to only those persons attending work or school.
- Hospice services were expanded to cover not only Medicare-Medicaid dual eligibles, but Medicaid enrollees without Medicare coverage.
- Occupational and speech therapy were added as covered services, and physical therapy was removed from the 50 visit per year home health limit.

This report highlights these accomplishments and provides a detailed look at our Medicaid program. We are proud of our Medicaid program and are poised for a better future.

Sincerely,



Ben Bearden  
Medicaid Director

# YEAR IN REVIEW

**SFY 2002-2003**





## A LOOK BACK AT THE YEAR

2002-2003

The Louisiana Medicaid program took some important steps over the past year. This report outlines those achievements and provides an in-depth look at the financial integrity of the program.

Perhaps the focal point of the past 12 months was the introduction of LaMOMS, an expansion program to provide health care coverage to pregnant women. Other key successes included the introduction of the New Opportunities Waiver, which allows more people to receive quality, community-based services; the continued implementation of the CommunityCARE program; and greater recognition and achievement for reducing the number of uninsured children through the Louisiana Children's Health Insurance Program.

Outlined below are the highlights of these and other accomplishments during fiscal year 2003.

### **Medicaid Introduces LaMOMS -- Health Coverage for Pregnant Women**

In order to make proper prenatal care available to more pregnant women, the Louisiana Department of Health and Hospitals implemented LaMOMS in January 2003. Prenatal care is vital in preventing many health-related problems for children later in life.

LaMOMS pays for pregnancy-related services, delivery and care up to 60 days after the pregnancy ends, including doctor visits, lab work/tests, prescription medicines and hospital care. The program is an expansion of Medicaid, allowing pregnant women with an income of up to 200 percent of the Federal Poverty Level to be eligible for prenatal services. Now, a woman in a family of four (unborn child is included in family size) can have a monthly household income of up to \$3,000 per month and still qualify for this program. The guidelines match those put in place in recent years for children through the Louisiana Children's Health Insurance Program (LaCHIP). In its first year, LaMOMS provided coverage to thousands more pregnant women than the year before its introduction.

Research in Louisiana has shown that fewer low birth weight babies are born to teen mothers who have Medicaid or other health coverage than to teen moms who lack any type of health insurance.

"If those of us involved in Louisiana's health system are going to improve the historically poor health outcomes of our state's citizens, we need to take smart steps like this. Making sure that more expectant mothers get proper prenatal care through LaMOMS is just one of those steps," said DHH Secretary David Hood.

***"The lack of prenatal care results in tragic and long-lasting difficulties for children. LaMOMS will ensure access to health care, greatly benefiting the people of Louisiana."***

**– Dr. Michael Kudla, President of the Louisiana Chapter of the American College of Obstetrics**

### **CommunityCARE Expansion Continues Across the State**

By the end of the 2002-2003 fiscal year, CommunityCARE had expanded into 60 Louisiana parishes. The program included more than 1,280 participating physicians. This allows every eligible Medicaid recipient throughout Louisiana to be linked to a primary care physician, group clinic, federally qualified health center or rural health clinic that serves as the primary care provider for that recipient and also coordinates all other health care.

By linking patients to primary care providers, CommunityCARE is demonstrating that the rates of serious illnesses such as cancer and diabetes can be decreased through regular doctor visits. The program also is reducing unnecessary emergency room visits, thus saving money for the Medicaid program.

### **LaCHIP Garners National Acclaim for Reducing the Number of Uninsured Children**

In 2002, the Kaiser Commission on Medicaid and the Uninsured reported that Louisiana had made greater strides than any other state to reduce its number of uninsured children. The report, titled "Health Insurance Coverage in America: 2001," was based on federal census estimates compiled through the end of the 2001 calendar year.

Between 1999 and 2001, Louisiana's percentage of uninsured children dropped from 20.4 percent to 14.4 percent. This six percent reduction was the best among all 50 states. This improvement means that Louisiana moves from a national ranking of third for uninsured children to eighth.

DHH Secretary David W. Hood credited this achievement to the Louisiana Children's Health Insurance Program that provides health care coverage to uninsured children up to the age of 19. Since LaCHIP began in 1998, the number of uninsured children in the state has been reduced by more than 261,000 as of June 2003. Since the data in the Kaiser report was compiled, an additional 70,000 Louisiana children have been enrolled in health coverage from the state.

"We've moved ahead of Florida, California, Nevada, Oklahoma and Arizona and pulled almost even with Colorado and Montana in the percentage of our state's children who now have health insurance," Hood said. "By increasing access to primary and preventive health care for our children, we may finally be able to overcome some of the poor health outcomes that have haunted Louisiana for too long now."

***"Making improvements in national rankings is incredibly difficult. In fact, most advances are made in increments ... improving by six percentage points is extraordinary."***

– Ruth Kennedy, deputy director of the Medicaid program

### **American Academy of Pediatrics Recognizes LaCHIP**

The American Academy of Pediatrics recognized Louisiana's success in reducing the number of uninsured children through the Louisiana Children's Health Insurance Program. In doing so, the Academy named DHH Secretary David W. Hood as the 2002 recipient of its Child Health Advocate award. The award is given nationally to a health care administrator or elected official who has made significant progress toward improving the lives of children.

Darrell S. Barnett, M.D., president of the Louisiana Chapter of the Academy, said Louisiana had moved to the forefront in the nation in the effort to provide health care coverage to children.

***"LaCHIP has made a difference in the lives of the hundreds of thousands of children who rely on our public health care system."***

– Dr. Steven Edwards, President, American Academy of Pediatrics

### **Louisiana Moves Up the Kids Count Ladder**

The Annie E. Casey Foundation's Kids Count report for 2003 showed Louisiana had improved in eight of 10 categories that indicate how children are faring. The successful LaCHIP program was a key component of the Foundation's report on Louisiana.

***"Louisiana was right to focus in recent years on ... expanding health care to cover more poor children. Such efforts must continue to be a priority, and lawmakers ought to find money to expand them."***

– Editorial in the New Orleans Times-Picayune



### **New Opportunities Waiver Approved by CMS**

In 2002-2003, Louisiana became only the third state to receive approval from the federal Centers for Medicare and Medicaid Services to offer a new array of community-based services to people with developmental disabilities. Starting in July 2002, this new program, named the New Opportunities Waiver (NOW), will allow qualifying individuals to have more choices and more flexibility when it comes to the services they receive from the Louisiana Medicaid program. The NOW will replace the current Mentally Retarded/Developmentally Disabled (MR/DD) waiver without a break in service as recipients are transferred from MR/DD to NOW.

Through NOW, people with developmental disabilities can better tailor to their needs the services and supports they receive in their homes or in their communities. NOW replaces and enhances an earlier program that provided similar services. Those who received services believed the older program was more restrictive in terms of flexibility and choice. Advocates for people with developmental disabilities have been working with officials from DHH for several years to design this new service package.

***“This is an historic day for people with developmental disabilities, as well as for everyone who values the concept of community-based health services.”***

**– Governor M.J. “Mike” Foster, Jr.**

NOW provides specific, activity-focused services rather than continuous custodial care. To qualify for NOW, individuals must be at least three years old and have met the definition of mental retardation or developmental disability prior to age 22. The current monthly income limit is \$1,656. For children, income of other family members is not considered if the child receives Social Security benefits.

### **Budget Concerns**

Going into the budget process for the next state fiscal year, Louisiana Medicaid was under funded in excess of a billion dollars. This huge financing hole was filled with temporary funding from an enhanced Federal Medical Assistance Percentage (FMAP) and authorization from the state Legislature to use 175 percent disproportionate share (DSH) payments for funding. The enhanced FMAP expires during the 2003-2004 state fiscal year and the 175 percent disproportionate share hospital payment funding expires during the 2004-2005 state fiscal year. In the next two state fiscal years, Louisiana Medicaid will be challenged to find ways to cover program costs and find new funding sources.

# STATISTICAL ABSTRACT SFY 2002-2003

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## I. FINANCIAL OVERVIEW

Louisiana's Medicaid program expended \$4,512,557,565 for healthcare services to its individuals for state fiscal year 2002-2003. Of these expenditures, nearly 97% was spent on payments to healthcare providers.

**Table 1: MEDICAID MEANS OF FINANCING SFY 2002-2003**

Source	Provider Programs (\$)	Administration	Total
State	1,177,210,472	48,943,468	1,226,153,940
Federal	3,185,626,715	100,776,911	3,286,403,626
<b>Totals</b>	<b>\$4,362,837,187</b>	<b>\$149,720,379</b>	<b>\$4,512,557,566</b>

**Table 2: MEDICAID PROGRAM AND ADMINISTRATIVE EXPENDITURES**

Program	State Fiscal Year (\$)				Percentage Change		
	1999-2000	2000-2001	2001-2002	2002-2003	99/00 - 00/01	00/01 - 01/02	01/02 - 02/03
Private Providers	2,163,744,718	2,354,374,934	2,756,714,098	2,952,755,849	8.81	17.09	7.11
Public Providers	389,197,445	383,247,904	392,604,599	537,553,283	-1.53	2.44	36.92
Medicare Buy-Ins	85,827,705	83,553,637	92,245,813	104,194,158	-2.65	10.40	12.95
Uncompensated Care	821,424,802	826,902,940	834,867,713	768,333,897	0.67	0.96	-7.97
<b>Provider Program Totals</b>	<b>\$3,460,194,670</b>	<b>\$3,648,079,415</b>	<b>\$4,076,432,223</b>	<b>\$4,362,837,187</b>	<b>5.43</b>	<b>11.74</b>	<b>7.03</b>
Administration	103,327,178	102,048,355	131,023,915	149,720,378	-1.24	28.39	14.27
<b>Total Medicaid</b>	<b>\$3,563,521,848</b>	<b>\$3,750,127,770</b>	<b>\$4,207,456,138</b>	<b>\$4,512,557,565</b>	<b>5.24</b>	<b>12.20</b>	<b>7.25</b>

**Table 3: HISTORICAL CLAIMS/UNCOMPENSATED CARE EXPENDITURES (\$ in Millions)**

SFY	CLAIMS (\$)	UNCOMPENSATED CARE (UCC) \$	TOTAL MEDICAID MINUS ADMINISTRATION (\$)	UCC AS A PERCENTAGE OF TOTAL
1996-1997	2,588.4	672.8	3,261.2	20.63
1997-1998	2,406.7	757.4	3,164.1	23.94
1998-1999	2,500.3	784.3	3,284.6	23.88
1999-2000	2,638.8	821.4	3,460.2	23.74
2000-2001	2,821.2	826.9	3,648.1	22.67
2001-2002	3,241.5	834.9	4,076.4	20.48
2002-2003	3,594.5	768.3	4,362.8	17.61

**Table 4: HISTORICAL FEDERAL MEDICAL ASSISTANCE PERCENTAGE (FMAP)**

	1998-1999		1999-2000		2000-2001		2001-2002		2002-2003	
	Title XIX	Title XXI (LaCHIP)	Title XIX	Title XXI (LaCHIP)	Title XIX	Title XXI (LaCHIP)	Title XIX	Title XXI (LaCHIP)	Title XIX	Title XXI (LaCHIP)
<b>State</b>	29.71	20.92	29.67	20.75	29.52	20.67	29.64	20.75	28.96	20.27
<b>Federal</b>	70.29	79.08	70.33	79.25	70.48	79.33	70.36	79.25	71.04	79.73

**Table 5: EXPENDITURES BY BUDGET CATEGORY OF SERVICE SFY 2002-2003**

**PRIVATE PROVIDERS**

Sub-Program	Actual Expenditures (\$)
Hospital - Inpatient Services*	591,600,662
Pharmaceutical Products and Services	590,401,356
Nursing Homes	570,850,314
Physicians Services	254,497,534
Hospital - Outpatient Services	208,685,210
ICF-MR (MR/DD Community Homes)	184,050,122
Waiver - MR/DD (Community Services)	161,598,757
EPSDT (Screening and Early Diagnosis)	77,077,189
Laboratory and X-Ray Services	52,629,414
Mental Health Rehabilitation	38,835,277
Durable Medical Equipment	31,258,965
Hemodialysis Services	28,062,505
Home Health Services	26,869,252
Transportation - Emergency-Ambulance	23,203,817
Rural Health Clinics	16,124,847
Other Private Providers	15,735,138
Case Management Services	12,987,916
Waiver - Elderly & Disabled Adult	9,970,327
Family Planning	8,988,389
Transportation - Non-Emergency Non-Ambulance	8,129,323
Federally Qualified Health Centers	8,028,096
Transportation - Non-Emergency Ambulance	7,877,453
Mental Health - Inpatient Services	7,619,639
Certified RN Anesthetists (CRNAs)	5,828,346
Adult Dentures	3,904,291
Waiver - Adult Day Health Care	3,854,870
Waiver - Children's Choice	2,965,761
Rehabilitation Services	1,121,078
<b>Total Private Providers</b>	<b>\$2,952,755,848</b>

\*Included UPL

**PUBLIC PROVIDERS**

Sub-Program	Actual Expenditures (\$)
LSU - HCSD	244,598,470
Other Public Providers	184,930,419
State Education	55,192,129
LSUMC - Shreveport	13,663,419
DHH - State Nursing Homes	10,437,835
DHH - State MR/DD Services	9,622,700
DHH - Office of Public Health	9,210,388
DHH - Public Psychiatric Distinct Part Units	5,843,923
DHH - Community Mental Health	2,086,313
DHH - Public Psychiatric Free Standing Units	1,967,687
<b>Total Public Providers</b>	<b>\$537,553,283</b>

**MEDICARE BUY IN**

<b>Medicare Buy In</b>	<b>\$104,194,158</b>
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**UNCOMPENSATED CARE**

LSU - HCSD	498,158,986
LSUMC - Shreveport	128,263,875
Public Psychiatric Free-Standing Units	95,009,023
Private Hospitals	46,153,339
Villa Feliciana	748,674
<b>Total Uncompensated Care</b>	<b>\$768,333,897</b>

<b>Total Medical Vendor Program</b>	<b>\$4,362,837,186</b>
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Source: Medicaid Year End Financial Report SFY 02-03

## II. LOUISIANA'S MEDICAID PROFILE

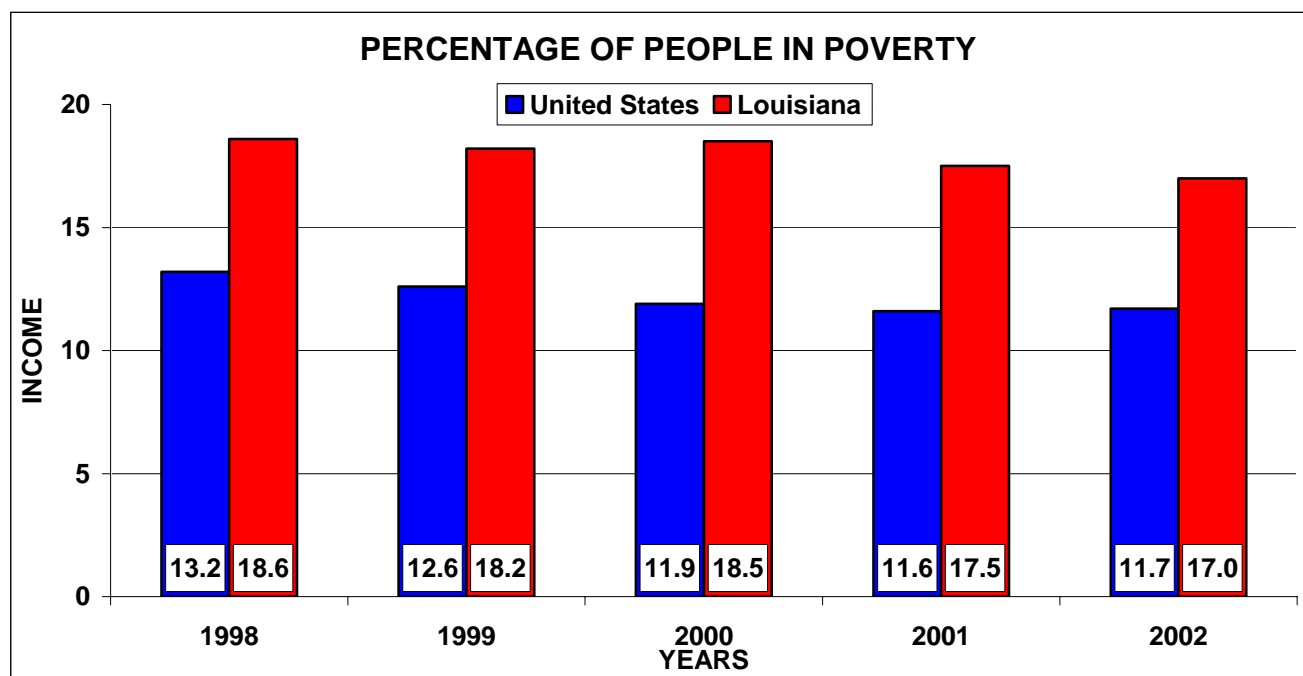
Louisiana's population for 2003 was 4,496,334. The U. S. Census Bureau estimated that 18.2 percent of the state's residents were at or below 100 percent of poverty.

**Table 6: POVERTY INCOME GUIDELINES**

Family Size	Annual 100%	Monthly					
		100%	133%	150%	200%	300%	400%
1	8,980	748	995	1,123	1,497	2,245	2,993
2	12,120	1010	1,343	1,515	2,020	3,030	4,040
3	15,260	1,272	1,691	1,908	2,543	3,815	5,087
4	18,400	1,533	2,039	2,300	3,067	4,600	6,133
5	21,540	1,795	2,387	2,693	3,590	5,385	7,180
6	24,680	2,057	2,735	3,085	4,113	6,170	8,227
7	27,820	2,318	3,083	3,478	4,637	6,955	9,273
8	30,960	2,580	3,431	3,870	5,160	7,740	10,320

Source: Federal Register, Vol. 68, No. 27, February 7, 2003

**Chart 1.**



Source: U.S. Census Bureau, Poverty Reports: 1998, 1999, 2000, 2001, 2002

Note: Numbers represent three year averages

**Table 7: TOTAL POPULATION VS. MEDICAID ELIGIBLES BY PARISH**

PARISH	POPULATION	MEDICAID ELIGIBLES	PERCENTAGE OF POPULATION
Acadia	59,246	15,398	25.99
Allen	25,268	5,732	22.68
Ascension	84,424	12,448	14.74
Assumption	23,269	5,530	23.77
Avoyelles	41,791	12,688	30.36
Beauregard	33,514	6,604	19.71
Bienville	15,320	4,165	27.19
Bossier	101,999	15,839	15.53
Caddo	250,342	57,254	22.87
Calcasieu	183,889	36,445	19.82
Caldwell	10,599	2,553	24.09
Cameron	9,708	1,325	13.65
Catahoula	10,615	3,007	28.33
Claiborne	16,534	4,189	25.34
Concordia	19,730	6,158	31.21
De Soto	25,990	5,826	22.42
East Baton Rouge	412,447	76,395	18.52
East Carroll	8,997	4,012	44.59
East Feliciana	21,095	4,386	20.79
Evangeline	35,149	11,557	32.88
Franklin	20,860	6,928	33.21
Grant	18,887	4,541	24.04
Iberia	74,146	18,921	25.52
Iberville	32,811	8,383	25.55
Jackson	15,259	3,479	22.80
Jefferson	452,459	80,030	17.69
Jefferson Davis	31,113	7,420	23.85
Lafayette	194,239	33,573	17.28
Lafourche	91,281	17,835	19.54
La Salle	14,179	3,211	22.65
Lincoln	42,413	8,316	19.61
Livingston	102,046	16,002	15.68
Madison	13,079	4,912	37.56
Morehouse	30,671	9,443	30.79
Natchitoches	39,002	9,500	24.36
Orleans	469,032	142,296	30.34
Ouachita	147,898	32,876	22.23
Plaquemines	28,025	5,547	19.79
Pointe Coupee	22,564	5,481	24.29
Rapides	127,394	32,411	25.44
Red River	9,524	2,539	26.66
Richland	20,623	6,425	31.15
Sabine	23,406	5,202	22.23
St. Bernard	66,113	11,646	17.62
St. Charles	49,353	7,585	15.37
St. Helena	10,307	2,838	27.53
St. James	21,118	4,654	22.04
St. John the Baptist	44,816	9,768	21.80
St. Landry	89,041	26,988	30.31
St. Martin	49,911	12,215	24.47
St. Mary	52,357	15,035	28.72
St. Tammany	207,743	27,048	13.02
Tangipahoa	103,591	29,066	28.06
Tensas	6,247	2,229	35.68
Terrebonne	106,107	23,007	21.68
Union	22,966	4,899	21.33
Vermilion	54,222	11,103	20.48
Vernon	50,669	8,644	17.06
Washington	43,947	13,518	30.76
Webster	41,404	9,587	23.15
West Baton Rouge	21,717	4,057	18.68
West Carroll	12,236	3,737	30.54
West Feliciana	15,235	1,853	12.16
Winn	16,397	4,285	26.13
<b>TOTALS</b>	<b>4,496,334</b>	<b>990,544</b>	<b>23.96</b>

Source: Population Division, U.S. Census Bureau

Release Date: April 2004

Note: Population Data are from June 2003, Eligible Data are from SFY 2002-03



**Table 8: LOUISIANA FAMILY HOUSEHOLD INCOME DISTRIBUTION**

Income Level	Families	Percentage
Less than \$10,000	98,556	8.60
\$10,000 to \$14,999	89,403	7.80
\$15,000 to \$24,999	155,859	13.60
\$25,000 to \$34,999	146,073	12.75
\$35,000 to \$49,999	186,447	16.27
\$50,000 to \$74,999	238,600	20.82
\$75,000 to \$99,999	115,035	10.04
\$100,000 to \$149,999	80,838	7.05
\$150,000 to \$199,999	17,288	1.51
\$200,000 or more	17,835	1.56
<b>Total Households</b>	<b>1,145,934</b>	<b>100.00</b>

Source: U.S. Census Bureau, Supplementary Survey Profile for Louisiana 2002

**Table 9: UNEMPLOYMENT RATES FOR LOUISIANA, SFY 2002-2003**

MONTH	LABOR FORCE	EMPLOYED	UNEMPLOYED	UNEMPLOYMENT RATE
Jul	2,000,839	1,878,813	122,026	6.1
Aug	1,999,540	1,876,545	122,995	6.2
Sep	1,998,034	1,875,508	122,526	6.1
Oct	1,993,639	1,871,704	121,935	6.1
Nov	1,998,453	1,874,156	124,297	6.2
Dec	2,001,841	1,876,096	125,745	6.3
Jan	2,043,252	1,935,312	107,940	5.3
Feb	2,058,780	1,941,086	117,694	5.7
Mar	2,061,134	1,931,796	129,338	6.3
Apr	2,051,842	1,924,524	127,318	6.2
May	2,064,731	1,933,944	130,787	6.3
Jun	2,044,678	1,905,657	139,021	6.8
<b>TOTAL</b>	<b>2,026,397</b>	<b>1,902,095</b>	<b>124,302</b>	<b>6.1</b>

Source: U.S. Bureau of Labor Statistics

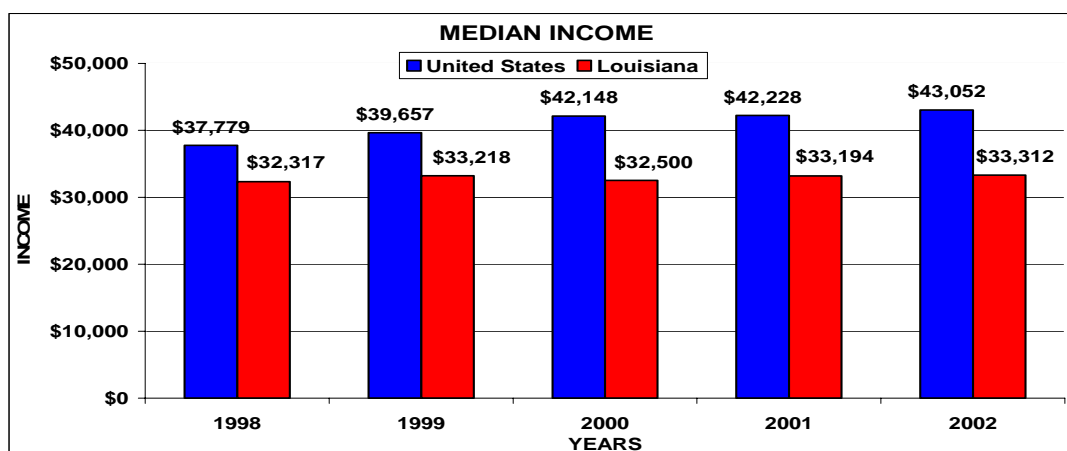
**Table 10: WEEKLY AVERAGE WAGES OF LOUISIANA WORKERS  
SFY 2002-2003**

SFY	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Weekly Average	SFY Annual Average
<b>2002-2003</b>	<b>\$563</b>	<b>\$613</b>	<b>\$580</b>	<b>\$579</b>	<b>\$585</b>	<b>\$30,437</b>

Source: U.S. Department of Labor, Bureau of Labor Statistics

Data Extraction Date January 30, 2004

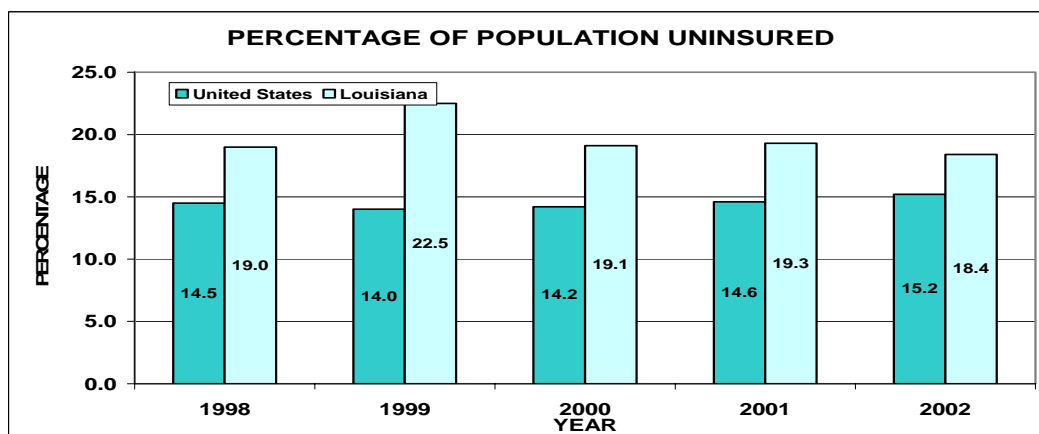
## Chart 2:



Source: U.S. Census Bureau, Income Reports: 1998, 1999, 2000, 2001, 2002

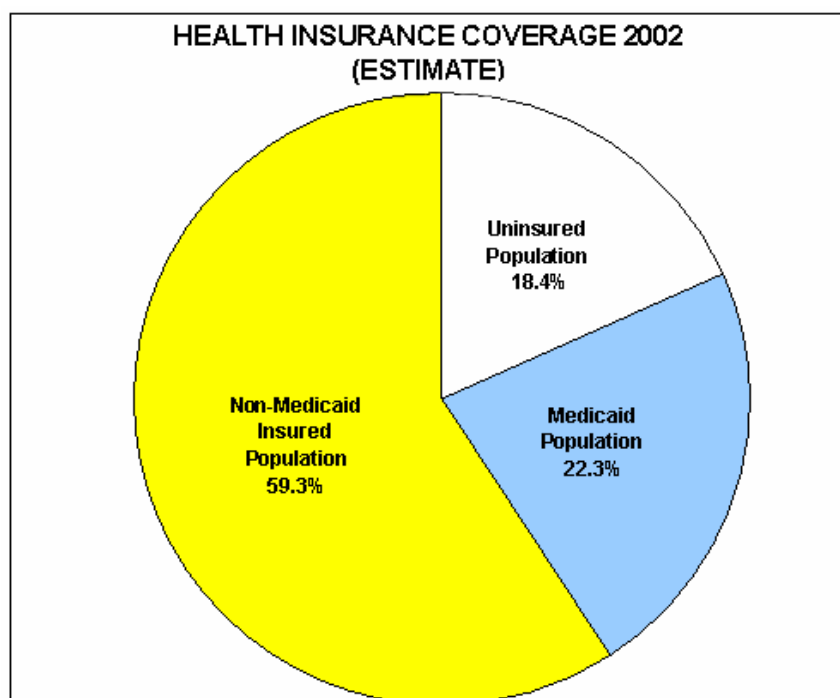
Note: Numbers represent three year average

## Chart 3



Source: Table HI-4: Health Insurance Coverage Status and Type of Coverage by State All People: 1987 to 2002  
Current Population Survey, 1988 to 2003 Annual Social and Economic Supplements

## Chart 4:



Source: U.S. Census Bureau, Current Population Survey, 1988 to 2003, Table HI-4  
DHH 2002-2003 Annual Report Data Set

# Table 11: MEDICAID STATISTICS BY PARISH SFY 2002-2003

Parish	Parish Population	Eligibles	Recipients	Payments for Parish Recipients (\$)	Payments to Parish Providers (\$)	Percentage of Population Medicaid	Avg. Cost/Elig (\$)	Avg Cost/Rec (\$)	Per Capita (\$)
Acadia	59,246	15,398	15,174	64,412,281	52,059,671	25.99	4,183	4,245	1,087
Allen	25,268	5,732	5,775	21,639,236	18,146,000	22.68	3,775	3,747	856
Ascension	84,424	12,448	12,306	40,848,879	26,509,624	14.74	3,282	3,319	484
Assumption	23,269	5,530	5,498	17,446,183	7,023,417	23.77	3,155	3,173	750
Avoyelles	41,791	12,688	12,543	50,488,714	35,766,957	30.36	3,979	4,025	1,208
Beauregard	33,514	6,604	6,615	19,341,449	13,845,078	19.71	2,929	2,924	577
Bienville	15,320	4,165	4,157	15,080,706	9,776,284	27.19	3,621	3,628	984
Bossier	101,999	15,839	14,164	62,083,739	54,148,013	15.53	3,920	4,383	609
Caddo	250,342	57,254	51,275	185,321,783	241,029,726	22.87	3,237	3,614	740
Calcasieu	183,889	36,445	36,135	127,239,259	132,419,282	19.82	3,491	3,521	692
Caldwell	10,599	2,553	2,477	14,258,630	12,681,108	24.09	5,585	5,756	1,345
Cameron	9,708	1,325	1,302	3,059,994	963,153	13.65	2,309	2,350	315
Catahoula	10,615	3,007	3,014	9,370,080	6,680,695	28.33	3,116	3,109	883
Claiborne	16,534	4,189	4,178	14,036,091	12,516,506	25.34	3,351	3,360	849
Concordia	19,730	6,158	6,093	17,108,166	13,059,484	31.21	2,778	2,808	867
De Soto	25,990	5,826	5,822	17,363,231	11,244,138	22.42	2,980	2,982	668
East Baton Rouge	412,447	76,395	74,573	252,007,670	297,183,989	18.52	3,299	3,379	611
East Carroll	8,997	4,012	4,020	13,758,031	8,289,030	44.59	3,429	3,422	1,529
East Feliciana	21,095	4,386	4,379	23,401,227	17,303,539	20.79	5,335	5,344	1,109
Evangeline	35,149	11,557	11,481	48,005,923	47,743,976	32.88	4,154	4,181	1,366
Franklin	20,860	6,928	6,667	30,108,934	21,376,152	33.21	4,346	4,516	1,443
Grant	18,887	4,541	4,390	15,297,537	4,440,111	24.04	3,369	3,485	810
Iberia	74,146	18,921	18,405	56,071,414	41,862,458	25.52	2,963	3,047	756
Iberville	32,811	8,383	8,386	27,520,615	22,815,482	25.55	3,283	3,282	839
Jackson	15,259	3,479	3,445	14,033,359	10,794,041	22.80	4,034	4,074	920
Jefferson	452,459	80,030	72,060	257,483,951	279,949,023	17.69	3,217	3,573	569
Jefferson Davis	31,113	7,420	7,376	28,547,251	20,394,429	23.85	3,847	3,870	918
Lafayette	194,239	33,573	32,318	111,486,154	176,077,796	17.28	3,321	3,450	574
LaFourche	91,281	17,835	17,802	62,934,117	47,577,763	19.54	3,529	3,535	689
LaSalle	14,179	3,211	3,187	13,592,616	10,288,956	22.65	4,233	4,265	959
Lincoln	42,413	8,316	7,567	35,671,710	35,043,803	19.61	4,290	4,714	841
Livingston	102,046	16,002	15,748	45,106,772	25,496,754	15.68	2,819	2,864	442
Madison	13,079	4,912	4,961	15,763,580	11,443,261	37.56	3,209	3,178	1,205
Morehouse	30,671	9,443	9,503	34,626,007	27,629,030	30.79	3,667	3,644	1,129
Natchitoches	39,002	9,500	9,416	30,679,935	26,664,998	24.36	3,229	3,258	787
Orleans	469,032	142,296	124,709	400,144,511	494,239,931	30.34	2,812	3,209	853
Ouachita	147,898	32,876	29,384	112,647,220	129,661,600	22.23	3,426	3,834	762
Plaquemines	28,025	5,547	5,017	39,201,545	28,953,507	19.79	7,067	7,814	1,399
Pointe Coupee	22,564	5,481	5,466	18,487,855	11,646,698	24.29	3,373	3,382	819
Rapides	127,394	32,411	31,878	222,776,939	255,409,606	25.44	6,873	6,988	1,749
Red River	9,524	2,539	2,540	9,005,857	7,493,999	26.66	3,547	3,546	946
Richland	20,623	6,425	6,513	31,322,852	29,736,566	31.15	4,875	4,809	1,519
Sabine	23,406	5,202	5,174	19,705,519	13,630,160	22.23	3,788	3,809	842
St. Bernard	66,113	11,646	10,735	42,673,466	38,191,566	17.62	3,664	3,975	645
St. Charles	49,353	7,585	7,444	20,626,841	15,540,184	15.37	2,719	2,771	418
St. Helena	10,307	2,838	2,820	8,156,296	4,192,716	27.53	2,874	2,892	791
St. James	21,118	4,654	4,673	11,730,017	5,540,461	22.04	2,520	2,510	555
St. John the Baptist	44,816	9,768	9,562	22,409,177	14,795,131	21.80	2,294	2,344	500
St. Landry	89,041	26,988	26,497	94,423,568	82,008,592	30.31	3,499	3,564	1,060
St. Martin	49,911	12,215	11,868	36,486,402	20,346,062	24.47	2,987	3,074	731
St. Mary	52,357	15,035	15,134	42,822,696	30,570,324	28.72	2,848	2,830	818
St. Tammany	207,743	27,048	26,418	89,316,622	93,077,075	13.02	3,302	3,381	430
Tangipahoa	103,591	29,066	28,970	124,738,371	122,223,289	28.06	4,292	4,306	1,204
Tensas	6,247	2,229	2,187	5,945,599	2,622,922	35.68	2,667	2,719	952
Terrebonne	106,107	23,007	23,033	74,461,512	86,099,019	21.68	3,236	3,233	702
Union	22,966	4,899	4,879	18,570,262	12,655,161	21.33	3,791	3,806	809
Vermilion	54,222	11,103	10,860	39,527,950	26,540,116	20.48	3,560	3,640	729
Vernon	50,669	8,644	8,577	28,708,792	21,049,187	17.06	3,321	3,347	567
Washington	43,947	13,518	13,522	44,919,291	30,288,129	30.76	3,323	3,322	1,022
Webster	41,404	9,587	9,582	40,942,617	31,861,399	23.15	4,271	4,273	989
West Baton Rouge	21,717	4,057	4,017	12,589,738	6,486,189	18.68	3,103	3,134	580
West Carroll	12,236	3,737	3,728	15,151,632	10,702,847	30.54	4,054	4,064	1,238
West Feliciana	15,235	1,853	1,890	8,104,101	4,765,063	12.16	4,374	4,288	532
Winn	16,397	4,285	4,260	15,763,870	11,450,557	26.13	3,679	3,700	961
Other/Non Louisiana			7,817	22,518,994	47,003,552				
<b>Totals</b>	<b>4,496,334</b>	<b>990,544</b>	<b>951,366</b>	<b>\$3,469,075,335</b>	<b>\$3,469,075,335</b>		<b>\$3,502</b>	<b>\$3,646</b>	<b>\$772</b>

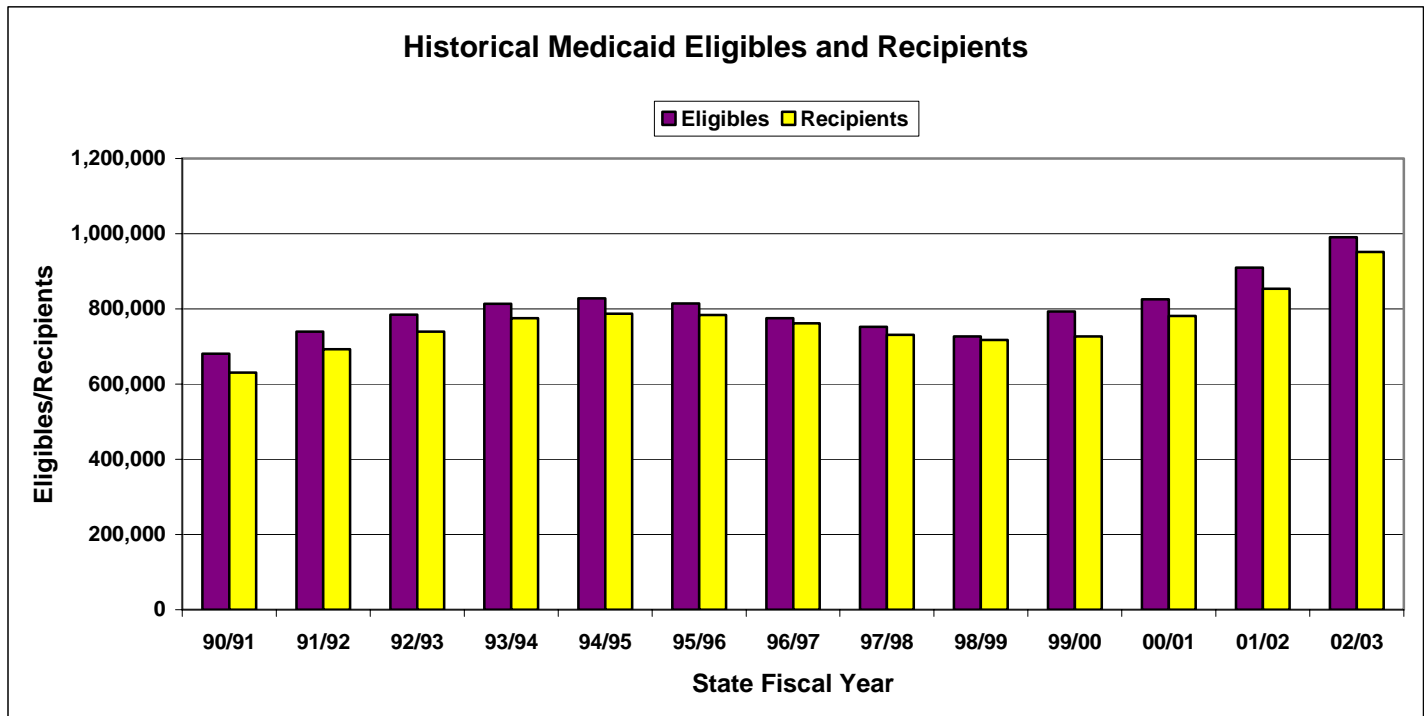
Source: Medicaid Annual Report Data Set, December 2003

- Notes:
1. Total payments include payments for original and adjusted claims.
  2. Total payments does not include financial adjustments or pharmacy rebates.

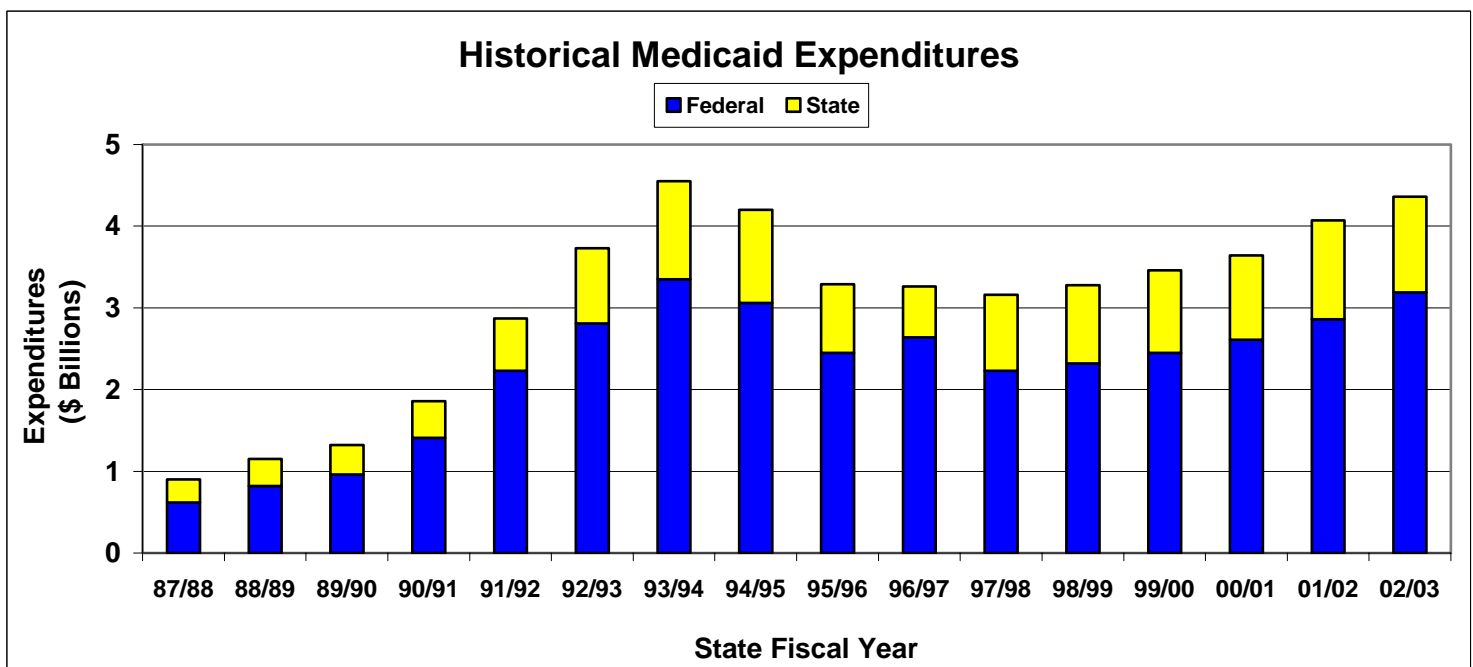
### III. ELIGIBLES, RECIPIENTS, PAYMENTS, & EXPENDITURES

During SFY 2002-2003, there were 990,544 eligibles eligible for Medicaid at least one month. Of those individuals, 951,366 had a paid service during the state fiscal year.

**Chart 5:**

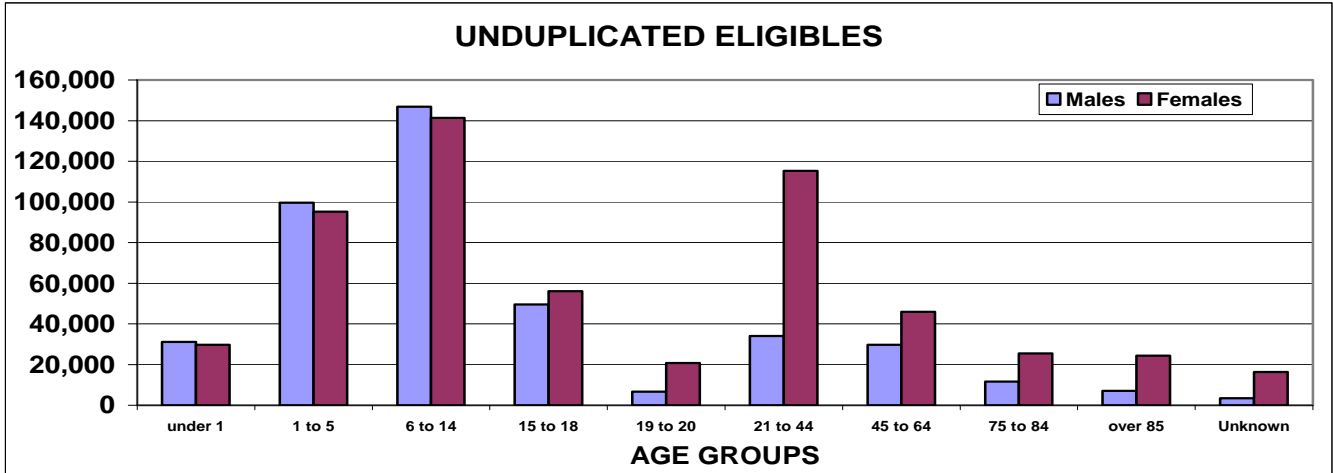


**Chart 6:**



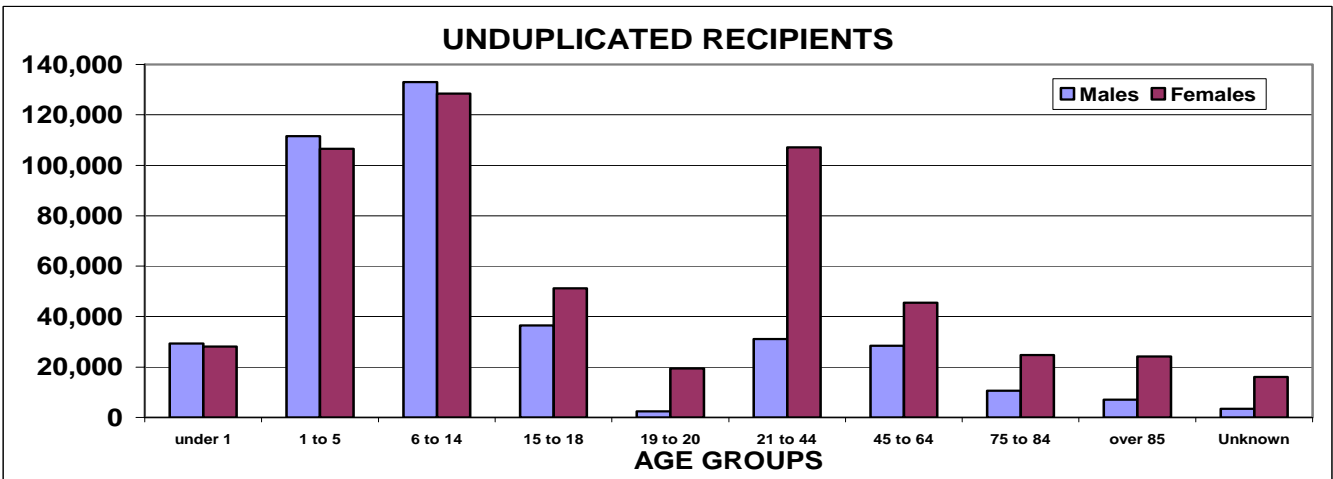
## LOUISIANA'S MEDICAID POPULATION BY AGE AND GENDER SFY 2002-2003

Chart 7:



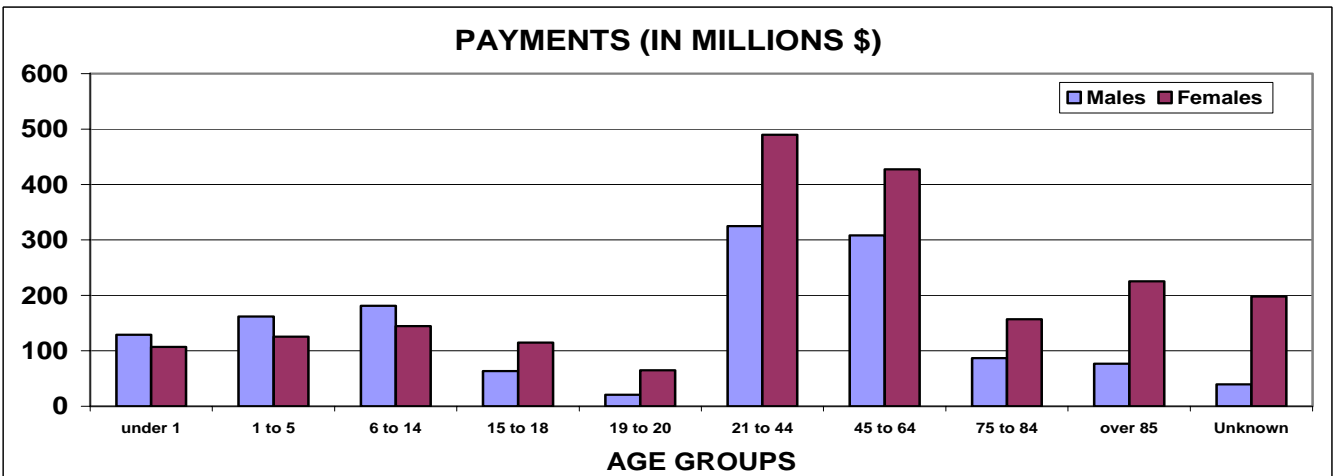
Unknown Eligibles = 84

Chart 8:



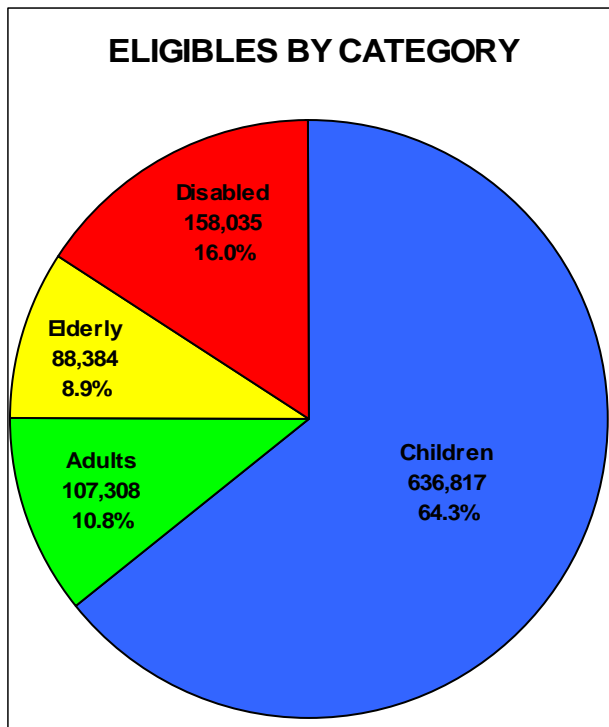
Unknown and Missing = 6,538

Chart 9:

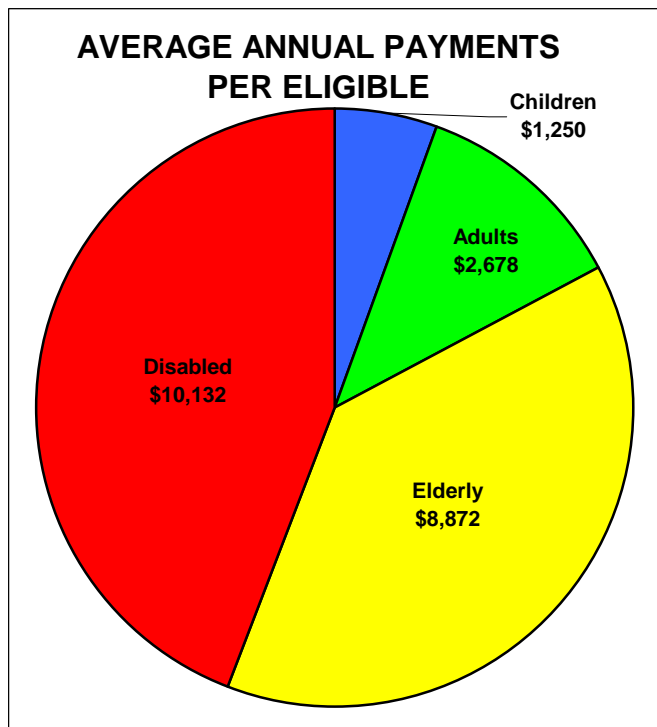


Payments to unknown and missing = \$22,475,871

**Chart 10:**



**Chart 11:**



Source: Medicaid Annual Report Data Set, December 2003

**Disabled** = All Disabled, All Ages

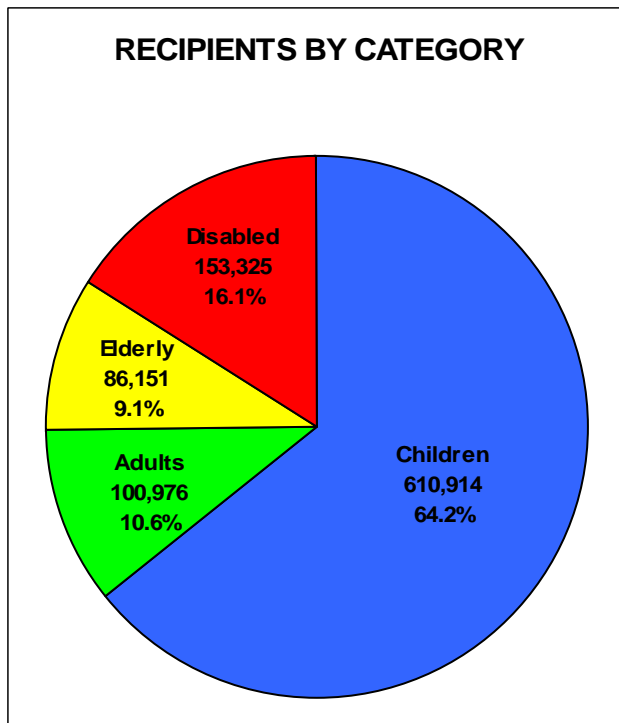
**Adults** = All adults ages 21 to 64, non-disabled

**LEGEND**

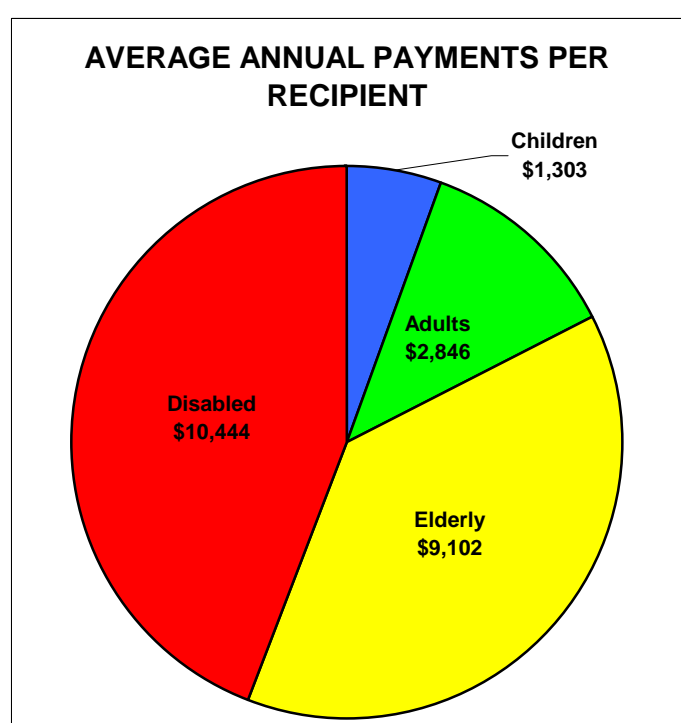
**Children** = All children under 21, non-disabled

**Elderly** = All adults ages 65 and over, non-disabled

**Chart 12:**



**Chart 13:**



Source: Medicaid Annual Report Data Set, December 2003



## MEDICAID ELIGIBILITY TABLE BY PROGRAM

PROGRAM	DESCRIPTION	INCOME LIMIT
LIFC--Section 1931	Children & families	15% of poverty; <i>no assets test</i>
LIFC--Section 1931 "PAP"	Children & families	15% of poverty with income of sibling, step-parent, and grandparent of minor child disregarded (anyone not legally responsible for child); <i>no assets test</i>
AFDC-Related Medically Needy	Children & families	20% of poverty (individuals and couples); <i>no assets test</i>
AFDC-Related Spend down Medically Needy	Children & families	All income over 20% of poverty considered available to meet medical expenses for quarter
TANF (FITAP) Recipients	Recipients of cash assistance as determined by DSS Office of Family Support	19% of poverty; assets below \$2,000
Transitional Medicaid	Former LIFC Recipients With Earnings Now Exceeding 15% of Poverty; Former TANF Recipients With Earnings Now Exceeding 19% of Poverty	185% of poverty for coverage in seventh through twelfth month of transitional eligibility period
CHAMP-Pregnant Woman	Verified Pregnancy-2 Month post-partum period	200% of poverty; <i>no assets test</i>
Deemed Eligible Child	Child under age 1 born to Medicaid eligible mother	No income limit; <i>no assets test</i>
Presumptive Eligible Pregnant Woman	Provides ambulatory pre-natal services to pregnant women as determined eligible by a qualified provider	200% of poverty; <i>no assets test</i>
CHAMP-Low-Income Children	Ages 0-5;	133% of poverty; <i>no assets test</i>
	Age 6 and up but born no earlier than 10/1/83	100% of poverty; <i>no assets test</i>
	Age 6 and up but born no earlier than 10/1/83	100% of poverty; <i>no assets test</i>
MCHIP--Title 21  Children Not Eligible for Title XIX Medicaid (LaCHIP)	Ages 0-5	>133% poverty to 150% of poverty <i>no assets test</i>
	Age 6 and up but born no earlier than 10/1/83	>100% poverty to 150% of poverty; <i>no assets test</i>
	Born before 10/1/83 to age 19	150% of poverty <i>no assets test</i>
Section 4913 Child (SSI-PSP)	Individuals under age 18 denied SSI cash because of an SSI provision that is prohibited in Medicaid.	74% of poverty (+ \$20) <i>Assets limit: \$2000 for individual</i>

## MEDICAID ELIGIBILITY TABLE BY PROGRAM

PROGRAM	DESCRIPTION	INCOME LIMIT
Early Widows/Widowers	Individuals who lost SSI because of receipt of Social Security widow/widowers benefits.	74% of poverty (+ \$20) <i>Assets limit: \$2000 individual; \$3000 couple</i>
Personal Care Attendant	Aged and disabled recipients who meet medical criteria for institutional level of care	222% of Poverty <i>Assets limit: \$2000 individual; \$3000 couple</i>
Qualified Disabled Working Individual	Provides Medicare Part A Buy-In for non-aged individuals who lost SS disability benefits and premium free Part A	Equal to or below 200% of Poverty <i>Assets limit: \$4,000 individual; \$6,000 for couple</i>
SSI Recipients	Aged and disabled recipients of federal SSI cash payments as determined by Social Security Administration	74% of Poverty (+ \$20) <i>Assets limit: \$2000 individual; \$3000 couple</i>
SSI-Related Spend-down Medically Needy	Aged and disabled recipients with income above 74% of poverty (+ \$20)	All income over 13% of Poverty (+ \$20) is considered available to meet medical expenses for quarter  <i>Assets limit: \$2000 individual; \$3000 couple</i>
Disabled Adult Child	Individuals over age 18 who become blind or disabled before age 22 and lost SSI eligibility on or before 7/1/87, as a result of entitlement to or increase in Social Security benefits.	Social Security benefits are disregarded in determining countable income with limit 74% of Poverty (+ \$20); <i>Assets limit: \$2000 individual; \$3000 couple</i>
Disabled Widows/Widowers	Restores Medicaid eligibility to disabled widows/widowers who would be eligible for SSI	74% of Poverty (+ \$20) <i>Assets limit: \$2000 individual; \$3000 couple</i>
Long-Term Care	Aged and disabled recipients who meet medical criteria for institutional level of care	222% of Poverty <i>Assets limit: \$2000 individual; \$3000 couple</i>
Home & Community-Based Waivers: Adult Day Health, Elderly & Disabled, MR/DD	Aged and disabled recipients who meet medical criteria for institutional level of care	222% of Poverty <i>Assets limit: \$2000 individual; \$3000 couple</i>
Extended Medicaid (Pickle)	Former SSI Recipients Who Lost Eligibility Due to annual SSA cost-of-living increase	All cost-of-living raises are disregarded in calculating countable income with limit 74% of Poverty (+\$20) <i>Assets limit: \$2000 individual; \$3000 couple</i>
Specified Low-Income Medicare Beneficiary	Pays Part B Medicare premium only.	100 % and less than 120% of Poverty <i>Assets limit: \$4,000 individual; \$6,000 couple</i>
Qualified Individual Category 1	Pays Part B Medicare premium only.	120% and less than 135% of poverty <i>Assets limit: \$4,000 individual; \$6,000 couple</i>
Qualified Individual Category 2	Pays a portion of Part B premium.	135% and less than 175% of Poverty <i>Assets limit: \$4,000 for individual; \$6,000 for couple</i>
Qualified Medicare Beneficiary	Pays Medicare premiums, deductibles and co-insurance for Medicare covered	Below 100% of Poverty <i>Asset limit: \$4,000 individual; \$6,000 couple</i>
Tuberculosis-Infected Individual	Persons who have been diagnosed as, or are suspected of, being infected with tuberculosis.	74% of Poverty (+ \$20) <i>Assets limit \$2000 individual</i>

## IV. MEDICAID CHILDREN AND LaCHIP

During the 2002-2003 SFY, the Louisiana Medicaid Program had 676,960 eligible children enrolled for services. Included in this number are 101,993 children enrolled in LaCHIP.

**Table 12: ALL MEDICAID CHILDREN (Title XIX and Title XXI)**

Age	Eligibles	Recipients	Payments (\$)
Under 1	60,957	57,698	237,063,334
1 to 5	194,841	219,406	289,051,543
6 to 14	288,194	262,961	328,085,690
15 to 18	105,542	88,385	180,135,469
<b>Total (18 and Under)</b>	<b>649,534</b>	<b>628,450</b>	<b>\$1,034,336,036</b>
19 to 20	27,426	22,258	87,012,724
<b>Grand Total</b>	<b>676,960</b>	<b>650,708</b>	<b>\$1,121,348,760</b>

Source: Medicaid Annual Report Data Set, December 2003

**Table 13: LaCHIP CHILDREN (Title XXI)**

Age	Eligibles	Recipients	Payments (\$)
Under 1	1,868	1,370	3,464,656
1 to 5	17,672	20,547	22,766,594
6 to 14	57,069	52,657	47,534,583
15 to 18	25,384	18,571	20,612,525
<b>Total</b>	<b>101,993</b>	<b>93,145</b>	<b>\$94,378,357</b>

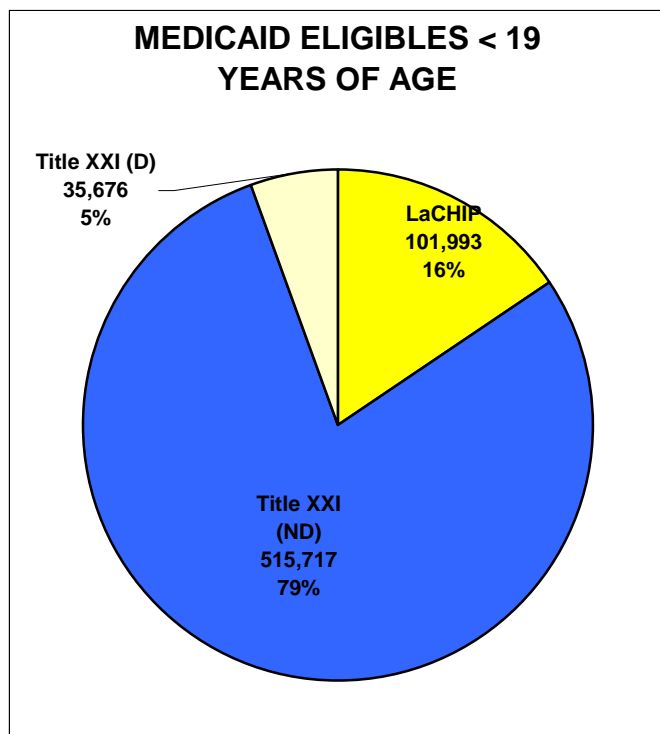
Source: Medicaid Annual Report Data Set, December 2003

**Table 14: LaCHIP CHILDREN (Title XXI) BY SFY**

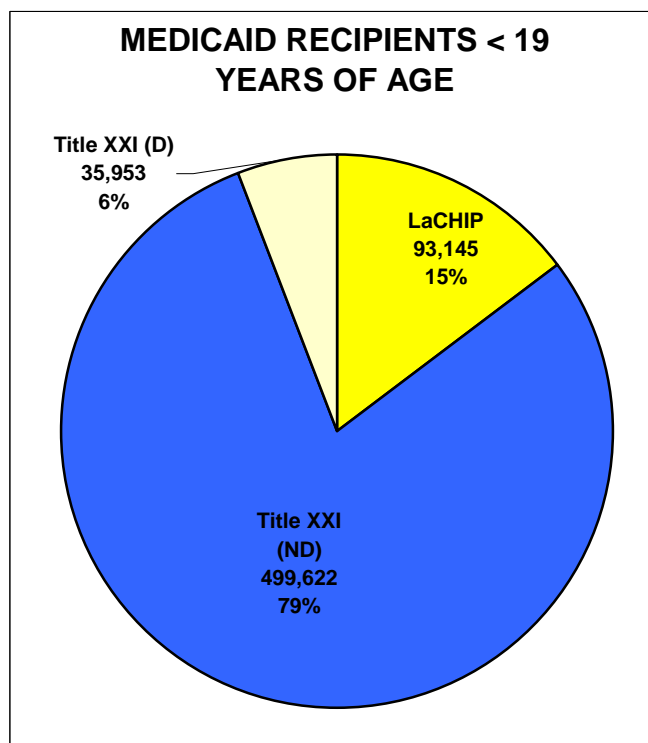
Age	Eligibles			Recipients			Payments (\$)		
	2000-2001	2001-2002	2002-2003	2000-2001	2001-2002	2002-2003	2000-2001	2001-2002	2002-2003
Under 1	1,116	1,636	1,868	733	1,208	1,370	1,443,729	2,800,340	3,464,656
1 to 5	8,062	13,625	17,672	8,007	15,590	20,547	7,436,350	16,246,368	22,766,594
6 to 14	31,628	46,135	57,069	24,969	40,876	52,657	19,241,468	34,304,328	47,534,583
15 to 18	21,495	26,203	25,384	17,119	19,047	18,571	18,735,522	21,171,453	20,612,525
<b>Total</b>	<b>62,301</b>	<b>87,599</b>	<b>101,993</b>	<b>50,828</b>	<b>76,721</b>	<b>93,145</b>	<b>46,857,069</b>	<b>74,522,489</b>	<b>94,378,357</b>

Source: Medicaid Annual Report Data Set, December 2003

**Chart 15:**



**Chart 16:**



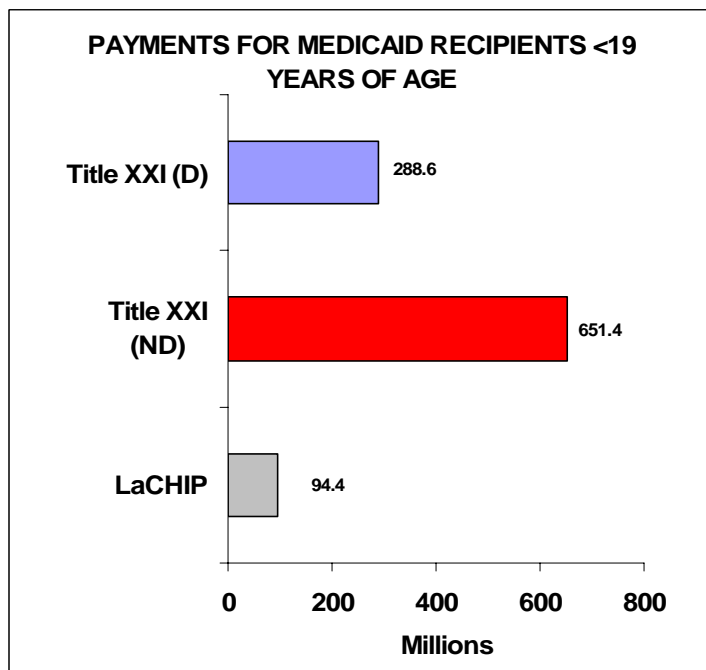
Source: Medicaid Annual Report Data Set, December 2003

**LEGEND**

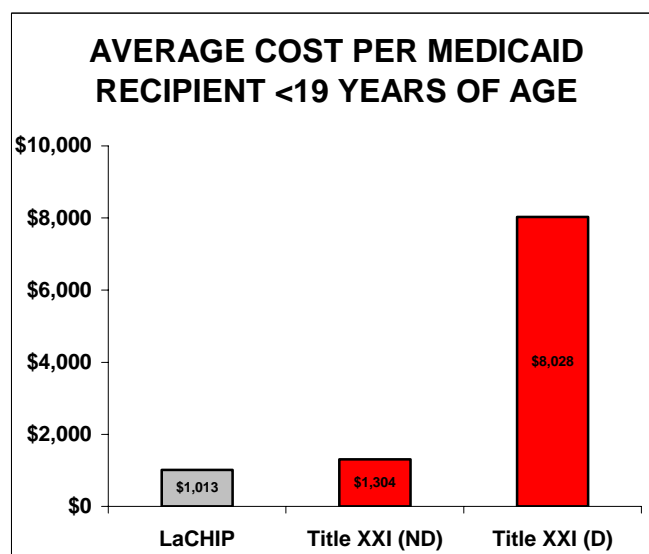
Title XIX (D) = Regular Medicaid Children with Disabilities

Title XIX (ND) = Regular Medicaid Children without Disabilities

**Chart 17:**



**Chart 18:**



Source: Medicaid Annual Report Data Set, December 2003

**Table 15: LaCHIP ELIGIBLES/RECIPIENTS/PAYMENTS BY PARISH**

PARISH	ELIGIBLES	RECIPIENTS	PAYMENTS (\$)	AVG. COST/ELIG (\$)	AVG. COST/REC (\$)
Acadia	1,761	1,660	2,007,376	1,140	1,209
Allen	649	623	679,668	1,047	1,091
Ascension	1,644	1,566	1,788,565	1,088	1,142
Assumption	615	584	671,265	1,091	1,149
Avoyelles	1,315	1,256	1,574,412	1,197	1,254
Beauregard	926	909	817,777	883	900
Bienville	367	333	285,909	779	859
Bossier	1,661	1,388	1,364,740	822	983
Caddo	5,035	4,152	4,479,944	890	1,079
Calcasieu	4,313	4,196	4,383,463	1,016	1,045
Caldwell	325	292	348,375	1,072	1,193
Cameron	274	252	368,799	1,346	1,463
Catahoula	324	307	278,224	859	906
Claiborne	441	428	383,140	869	895
Concordia	636	596	528,427	831	887
De Soto	541	504	572,710	1,059	1,136
East Baton Rouge	7,323	6,976	5,234,054	715	750
East Carroll	293	280	311,897	1,064	1,114
East Feliciana	588	548	542,030	922	989
Evangeline	1,084	1,031	1,258,294	1,161	1,220
Franklin	713	641	692,555	971	1,080
Grant	651	590	719,039	1,105	1,219
Iberia	1,741	1,601	1,435,883	825	897
Iberville	869	843	897,241	1,032	1,064
Jackson	339	334	337,468	995	1,010
Jefferson	9,056	7,700	7,816,353	863	1,015
Jefferson Davis	1,045	980	1,035,647	991	1,057
Lafayette	3,651	3,407	2,905,197	796	853
Lafourche	2,162	2,090	2,091,055	967	1,001
LaSalle	396	388	383,525	968	988
Lincoln	829	649	585,354	706	902
Livingston	2,414	2,317	2,350,489	974	1,014
Madison	372	355	323,502	870	911
Morehouse	828	820	809,193	977	987
Natchitoches	933	879	901,889	967	1,026
Orleans	11,201	9,151	8,796,800	785	961
Ouachita	2,914	2,450	2,741,462	941	1,119
Plaquemines	680	575	481,480	708	837
Pointe Coupee	669	635	599,068	895	943
Rapides	3,113	2,900	3,152,627	1,013	1,087
Red River	275	252	244,203	888	969
Richland	610	600	697,056	1,143	1,162
Sabine	545	532	645,986	1,185	1,214
St. Bernard	1,367	1,198	1,247,770	913	1,042
St. Charles	932	894	718,871	771	804
St. Helena	294	300	374,695	1,274	1,249
St. James	495	479	328,861	664	687
St. John the Baptist	1,092	1,048	668,507	612	638
St. Landry	2,522	2,344	2,845,230	1,128	1,214
St. Martin	1,442	1,337	1,193,073	827	892
St. Mary	1,530	1,492	1,595,162	1,043	1,069
St. Tammany	3,795	3,533	3,692,271	973	1,045
Tangipahoa	2,862	2,703	2,735,347	956	1,012
Tensas	209	198	223,370	1,069	1,128
Terrebonne	2,492	2,410	2,890,412	1,160	1,199
Union	572	565	572,851	1,001	1,014
Vermilion	1,088	1,022	1,007,693	926	986
Vernon	1,117	1,071	1,147,602	1,027	1,072
Washington	1,346	1,349	1,325,644	985	983
Webster	897	850	762,738	850	897
West Baton Rouge	467	451	924,518	1,980	2,050
West Carroll	488	495	715,024	1,465	1,444
West Feliciana	336	328	287,526	856	877
Winn	529	498	593,836	1,123	1,192
<b>STATE TOTALS/AVG</b>	<b>101,993</b>	<b>93,135</b>	<b>\$94,373,140</b>	<b>\$925</b>	<b>\$1,013</b>

Source: Medicaid Annual Report Data Set, December 2003

## V. PROVIDERS

State fiscal year 2002-2003 saw no change in the top ten providers by provider type from the previous fiscal period. However, Mental Health Rehabilitation did surpass Durable Medical Equipment (DME) in program payments. Overall, the top ten budget categories of service saw an overall increase in expenditures of 7.1 percent over the previous state fiscal year.

**Table 16: TOP TEN MEDICAID PRIVATE PROVIDERS  
BY BUDGET CATEGORY OF SERVICE**

<b>BUDGET CATEGORY</b>	<b>EXPENDITURES (\$)</b>
Hospital - Inpatient Services	591,600,662
Pharmacy (net of rebates)	590,401,356
Nursing Homes	570,850,314
Physicians Services	254,497,534
Hospital - Outpatient Services	208,685,210
ICF-MR (MR/DD Community Homes)	184,050,122
Waiver - MR/DD (Community Services)	161,598,757
EPSDT (Screening and Early Diagnosis)	77,077,189
Laboratory and X-Ray Services	52,629,414
Mental Health Rehabilitation	38,835,277
<b>Top Ten Provider Total</b>	<b>\$2,730,225,835</b>
<i>All Other Private Provider Categories</i>	<i>222,530,013</i>
<b>Private Provider Totals</b>	<b>\$2,952,755,848</b>

Source: Medicaid Year-End Financial Report SFY 2002-03

**Table 17: TOP TEN MEDICAID PROVIDERS BY PROVIDER TYPE  
(PUBLIC AND PRIVATE)**

<b>PROVIDER TYPE</b>	<b>PAYMENTS (\$)</b>
Hospital (Inpatient & Outpatient)	880,503,039
Pharmacy (Gross Payments)	766,356,311
Nursing Homes (LTC)	584,624,709
ICF(MR)	365,662,891
Physicians (MD)	342,323,628
Personal Care Attendant (PCA)	74,057,669
Supervised Independent Living (SIL)	55,766,880
Dentists	40,580,516
Mental Health Rehabilitation	38,890,462
DME Providers	34,365,906
<b>Top Ten Total - In State</b>	<b>\$3,183,132,011</b>
<i>All Other Provider Payments</i>	<i>285,943,324</i>
<b>Total All Payments</b>	<b>\$3,469,075,335</b>

Source: Medicaid Annual Report Data Set, December 2003



**Table 18: PARISH AND OUT OF STATE PAYMENTS TO TOP TEN PROVIDERS BY PROVIDER TYPE**

PARISH	Physicians (MD) Services	Pharmacies	Dentist	DME Providers	Hospitals	Mental Health Rehab	Long Term Care Facilities	Personal Care Attendant	ICF/MR	Supervised Independent Living	Grand Total
Acadia	3,648,514	16,500,011	582,025	44,077	5,954,920	826,845	11,889,251	27,779	8,868,868	45,809	48,388,099
Allen	1,907,813	5,190,242	117,184	27,971	2,970,309		6,299,973	484			16,513,976
Ascension	2,751,511	10,269,291	149,410	543,280	3,423,709	881,735	4,826,898	632,835	279,815	886,686	24,645,169
Assumption	344,979	2,483,570	6,000		355,044		2,268,000	226,006	670,677	320,460	6,674,736
Avoyelles	2,407,817	11,411,311	715,458	40,152	2,860,532	1,113,505	15,399,053		266,673		34,214,501
Beauregard	1,917,549	3,206,474	237,398	25,744	2,787,457		4,274,724	18,346	680,800		13,148,492
Bienville	597,011	2,873,164	2,940		11,409		4,919,672				8,404,195
Bossier	1,942,044	7,316,039	245,971	156,844	4,561,063	1,115,116	10,832,892	759,142	23,708,412	879,096	51,516,619
Caddo	25,695,027	47,172,811	3,457,827	7,113,386	75,027,818	4,027,375	40,692,037	4,630,096	9,956,661	3,660,199	221,433,238
Calcasieu	13,970,628	28,167,118	1,919,827	1,229,705	36,715,223	2,288,395	20,825,545	2,696,301	12,377,423	1,488,664	121,678,830
Caldwell	1,028,161	4,052,129		2,773	1,748,024		2,192,231		3,181,108		12,204,427
Cameron	120,923	343,679			277,333		40,303				782,238
Catahoula	372,369	3,441,779	65,293				2,338,186	227,538		26,246	6,471,411
Claiborne	844,582	3,039,749	57,672	8,195	1,852,857		3,569,374	1,048,229		1,236,635	11,657,293
Concordia	1,306,661	3,882,040	396,669		2,587,118	325,845	3,929,504	61,955			12,489,792
De Soto	553,571	3,326,580	307,936		1,466,141	716,740	3,761,519	54,010	558,967		10,745,464
East Baton Rouge	33,730,772	57,408,367	3,745,046	2,127,890	101,074,138	4,700,375	39,654,566	7,083,134	13,058,730	4,573,780	267,156,798
East Carroll	693,743	2,428,020	298,774		973,506		3,518,663				7,912,706
East Feliciana	337,493	3,449,649	85,392	34,618	191,078	335,470	11,481,381		835,779		16,750,862
Evangeline	3,981,690	16,049,486	539,312	218,624	9,985,131	71,605	9,355,220	348,191	3,069,870		43,619,129
Franklin	527,770	5,811,230	343,058	435	1,700,845		9,477,672	2,712	1,904,431		19,768,153
Grant	350,041	774,496	16,543				2,883,829		297,356		4,322,265
Iberia	6,881,145	13,110,299	425,627	40,082	3,093,088		10,678,416	895,903	2,371,330	1,055,672	38,551,562
Iberville	3,004,708	6,456,055	258,536	454,667	4,002,166	1,311,170	4,858,007	293,063		582,868	21,221,240
Jackson	691,297	3,025,348	11,225	534	597,168	1,122,920	4,961,888	10,749		9,681	10,430,810
Jefferson	37,704,759	77,535,777	2,532,541	4,276,251	55,289,504	1,992,820	28,795,647	12,593,154	26,069,584	7,896,177	254,686,213
Jefferson Davis	2,178,152	6,762,724	114,210	10,253	2,673,947	335,850	6,753,824	173,581	291,924	433,663	19,728,128
Lafayette	18,433,443	25,518,546	1,810,928	3,857,109	48,941,362	942,217	19,922,140	7,962,710	5,259,366	6,272,367	138,920,189
LaFourche	4,354,153	10,190,552	839,798	133,664	5,881,303		8,897,631	2,693,845	7,735,562	1,854,052	42,580,560
LaSalle	530,317	3,051,901	5,911	8,709	2,493,087	189,940	3,871,492				10,151,358
Lincoln	2,290,465	5,495,947	768,421	109,692	7,104,476		5,866,031	363,561	11,197,104	476,979	33,672,675
Livingston	967,092	8,725,896	771,498	176,658	126,547	232,350	10,641,993	994,344	1,277,750	548,301	24,462,429
Madison	667,148	3,174,509	59,949	2,621	977,611		3,396,894	29,214	1,914,291		10,222,237
Morehouse	3,573,835	7,920,287	258,836	12,085	3,017,472		9,812,229	368,289	647,276	583,946	26,194,254
Natchitoches	3,020,939	10,036,877	157,059		4,668,656		5,860,811	378,491		722,023	24,844,856
Orleans	52,554,793	71,092,756	5,563,082	1,972,157	245,567,777	7,555,249	47,528,811	4,311,056	12,418,534	3,137,497	451,701,712
Ouachita	11,344,104	22,675,165	3,194,743	891,780	40,047,299	2,438,425	16,217,312	6,278,301	7,846,029	4,922,038	115,855,194
Plaquemines	420,842	1,394,888	51,135	135		752,860	2,033,835		24,014,744		28,668,439
Pointe Coupee	1,029,564	3,652,253	62,085	40,765	1,496,356		554,640	4,116,322			10,951,985
Rapides	13,687,107	45,064,790	1,430,398	968,488	35,145,368	2,074,045	24,720,885	2,301,759	109,812,820	6,529,179	241,734,840
Red River	441,624	2,524,856	6,811	457	1,287,775		2,826,290	38,739			7,126,552
Richland	2,331,095	7,169,091	265,538	51,750	2,209,286	67,200	7,081,485	965,458	7,402,236	418,803	27,961,942
Sabine	772,800	4,183,814	105,395	2,006	1,258,906		5,356,274	25,516	1,723,166		13,427,876
St. Bernard	3,000,134	11,095,581	479,445	59,618	7,345,483	328,505	6,650,460	3,263,061	1,595,346	1,824,279	35,641,912
St. Charles	1,613,699	4,046,262	155,513		1,610,180	161,000	3,682,156	673,412	170,744	290,471	12,403,437
St. Helena	301,477	1,293,788	149,112		454,373		1,497,643		350,975		4,047,369
St. James	862,609	1,763,300	1,810		600,439		1,783,912				5,012,070
St. John the Baptist	2,607,296	3,775,730	643,448		2,505,733		1,954,739	704,163	891,899	360,834	13,443,842
St. Landry	10,935,458	28,259,684	541,024	758,590	18,064,397	617,755	16,352,412	539,465	2,200,438		78,269,224
St. Martin	678,612	7,288,470	20,897	10,909	869,086		5,763,914	1,867,761	1,046,328	679,207	18,225,186
St. Mary	3,909,100	9,465,788	345,510	309,753	5,777,936	236,400	6,646,094	242,298	582,389	184,846	27,700,115
St. Tammany	14,224,791	22,987,651	2,410,617	1,379,158	23,406,488	698,110	19,090,886	830,046	2,771,238	83,380	87,882,365
Tangipahoa	10,321,196	20,805,141	1,689,867	560,892	24,433,466	477,550	10,490,191	5,091,235	38,623,747	2,607,004	115,100,288
Tensas	46,066	1,055,742					1,302,334				2,404,142
Terrebonne	13,212,326	18,947,312	756,703	4,031,345	30,099,498	102,165	10,783,596	1,404,547	1,762,902	419,368	81,519,761
Union	608,339	4,415,805	42,996	27,422	1,089,808		5,165,150	14,604	304,287		11,668,410
Vermilion	1,780,457	7,580,499	529,711	19,023	3,174,774		11,370,856	155,757	686,254		25,297,332
Vernon	2,352,970	5,262,752	14,712	25,426	4,517,003		4,137,747		4,377,349		20,687,958
Washington	2,364,186	12,119,230	436,567	26,820	4,834,027	123,970	6,844,002	543,157		559,761	27,851,720
Webster	2,867,596	4,467,853	108,022	92,397	6,296,481	11,500	10,120,593	177,490	4,845,644	181,560	29,169,135
West Baton Rouge	220,870	2,785,707	187,903				2,303,218	29,911	680,653	15,351	6,223,612
West Carroll	597,036	3,483,659		10,780	1,504,252		4,100,725		294,840		9,991,290
West Feliciana	313,438	899,738	57,901	7,275	668,845		2,490,378		262,226		4,699,801
Winn	805,179	3,211,812	19,913	34,069	2,216,312	160,815	3,464,990	26,274	1,227,767		11,167,131
<b>Total in State</b>	<b>\$339,532,886</b>	<b>\$752,371,072</b>	<b>\$40,575,131</b>	<b>\$31,937,033</b>	<b>\$861,871,388</b>	<b>\$38,890,462</b>	<b>\$584,624,709</b>	<b>\$74,057,669</b>	<b>\$362,372,313</b>	<b>\$55,766,880</b>	<b>\$3,141,999,544</b>
Texas	270,715	4,051,730	509	270,897	5,898,739						10,492,590
Arkansas	2,110,477	2,062,478	4,876	144,668	5,032,259						9,354,758
Mississippi	175,200	246,255		11,220	2,656,217						3,088,892
<b>Total in Out of State</b>	<b>\$2,556,392</b>	<b>\$6,360,463</b>	<b>\$5,385</b>	<b>\$426,785</b>	<b>\$13,587,215</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$22,936,239</b>
Other	234,351	7,624,776		2,002,088	5,044,436				3,290,577		18,196,229
<b>Totals</b>	<b>\$342,323,628</b>	<b>\$766,356,311</b>	<b>\$40,580,516</b>	<b>\$34,365,906</b>	<b>\$880,503,039</b>	<b>\$38,890,462</b>	<b>\$584,624,709</b>	<b>\$74,057,669</b>	<b>\$365,662,891</b>	<b>\$55,766,880</b>	<b>\$3,183,132,011</b>

Source: Medicaid Annual Report Data Set, December 2003

**Table 19: PROVIDER PARTICIPATION RATIOS**

Parish	Payments to In- Parish Providers (\$)	Payments for Resident Medicaid Recipients (\$)	Ratio
Acadia	52,059,671	56,705,679	91.81
Allen	18,146,000	18,782,591	96.61
Ascension	26,509,624	35,819,870	74.01
Assumption	7,023,417	15,380,201	45.67
Avoyelles	35,766,957	44,172,815	80.97
Beauregard	13,845,078	16,984,654	81.52
Bienville	9,776,284	13,128,509	74.47
Bossier	54,148,013	54,522,401	99.31
Caddo	241,029,726	160,280,603	150.38
Calcasieu	132,419,282	105,015,172	126.10
Caldwell	12,681,108	13,527,345	93.74
Cameron	963,153	2,775,154	34.71
Catahoula	6,680,695	8,326,642	80.23
Claiborne	12,516,506	12,663,646	98.84
Concordia	13,059,484	15,436,690	84.60
De Soto	11,244,138	15,727,403	71.49
East Baton Rouge	297,183,989	207,082,290	143.51
East Carroll	8,289,030	11,990,669	69.13
East Feliciana	17,303,539	22,385,618	77.30
Evangeline	47,743,976	38,294,085	124.68
Franklin	21,376,152	24,583,802	86.95
Grant	4,440,111	13,583,673	32.69
Iberia	41,862,458	49,213,366	85.06
Iberville	22,815,482	22,397,518	101.87
Jackson	10,794,041	12,536,419	86.10
Jefferson	279,949,023	211,533,353	132.34
Jefferson Davis	20,394,429	24,568,432	83.01
Lafayette	176,077,796	96,464,167	182.53
Lafourche	47,577,763	54,882,410	86.69
LaSalle	10,288,956	11,932,899	86.22
Lincoln	35,043,803	32,302,611	108.49
Livingston	25,496,754	39,601,014	64.38
Madison	11,443,261	14,117,951	81.05
Morehouse	27,629,030	29,272,062	94.39
Natchitoches	26,664,998	26,497,755	100.63
Orleans	494,239,931	321,068,802	153.94
Ouachita	129,661,600	97,809,189	132.57
Plaquemines	28,953,507	37,092,710	78.06
Pointe Coupee	11,646,698	16,149,821	72.12
Rapides	255,409,606	205,678,181	124.18
Red River	7,493,999	7,939,696	94.39
Richland	29,736,566	28,382,069	104.77
Sabine	13,630,160	16,461,985	82.80
St. Bernard	38,191,566	34,551,707	110.53
St. Charles	15,540,184	17,558,454	88.51
St. Helena	4,192,716	7,697,992	54.47
St. James	5,540,461	9,888,915	56.03
St. John the Baptist	14,795,131	19,693,755	75.13
St. Landry	82,058,592	84,208,084	97.45
St. Martin	20,346,062	32,841,384	61.95
St. Mary	30,570,324	36,673,561	83.36
St. Tammany	93,077,075	71,634,637	129.93
Tangipahoa	122,223,289	112,146,116	108.99
Tensas	2,622,922	5,434,279	48.27
Terrebonne	86,099,019	62,256,262	138.30
Union	12,655,161	15,794,316	80.12
Vermilion	26,540,116	33,508,483	79.20
Vernon	21,049,187	25,795,697	81.60
Washington	30,288,129	39,181,741	77.30
Webster	31,861,399	34,098,724	93.44
West Baton Rouge	6,486,189	10,264,214	63.19
West Carroll	10,702,847	13,357,204	80.13
West Feliciana	4,765,063	7,249,494	65.73
Winn	11,450,557	14,583,512	78.52

**HOW TO READ THIS TABLE**

This table reports Medicaid payments made to participating providers in each parish. It also reports payments made on behalf of Medicaid recipients residing in each parish, regardless of where they received services. The "Provider Payments/Recipient Payments Ratio" interval shows the ratio of provider payments to resident recipient payments times 100. A ratio of 100 indicates that provider payments and recipient payments in a parish are the same. A ratio of less than 100 means that recipient payments are greater than provider payments in the parish and indicates a net loss of recipient payments to other parishes. A ratio greater than 100 implies that providers realize a net gain of Medicaid payments from services provided to recipients from other parishes. The ratios are not provided to imply a shortage or over supply of providers in a parish. However, ratios may be used to help identify parishes that may need to consider if there are measures that could be taken to meet the health care needs of the patients (recipients) in their respective communities.

Source: Medicaid Annual Report Data Set, December 2003

## VI. HOME AND COMMUNITY-BASED SERVICES

During the 2002-2003 state fiscal year, there were 7,150 individuals eligible for the state's five waiver programs.

Chart 19:

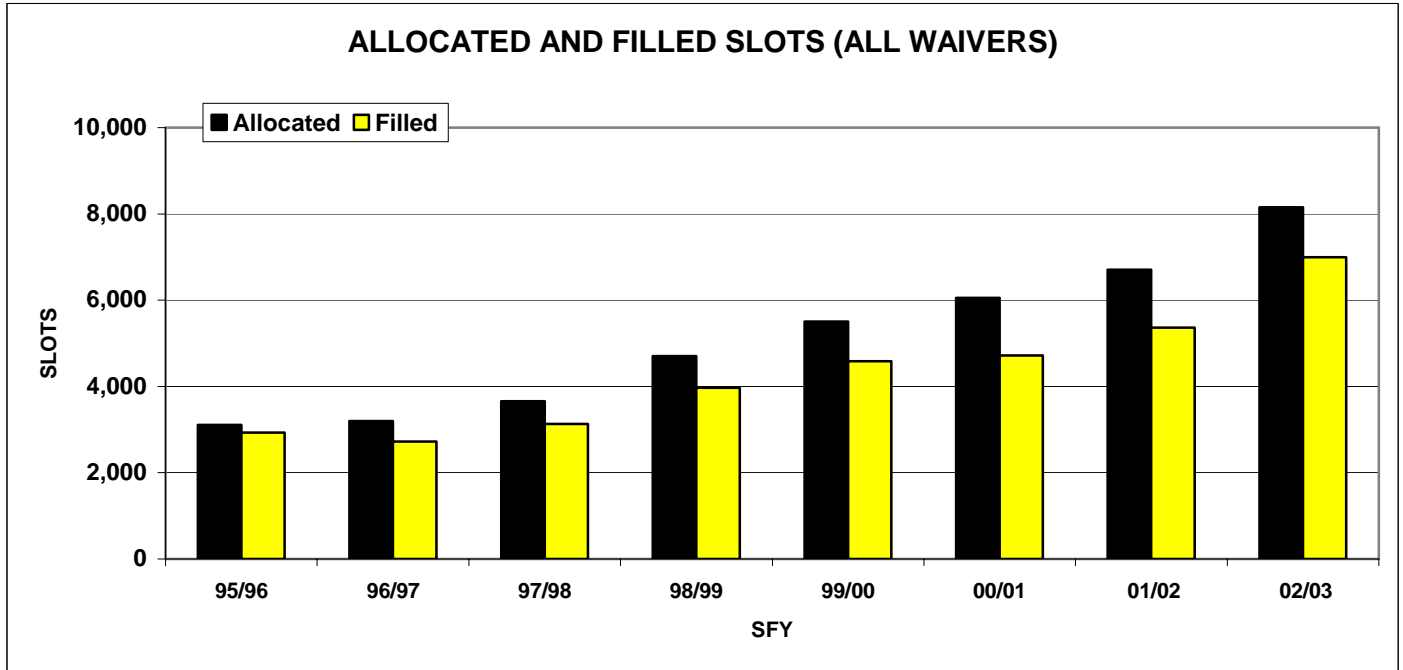
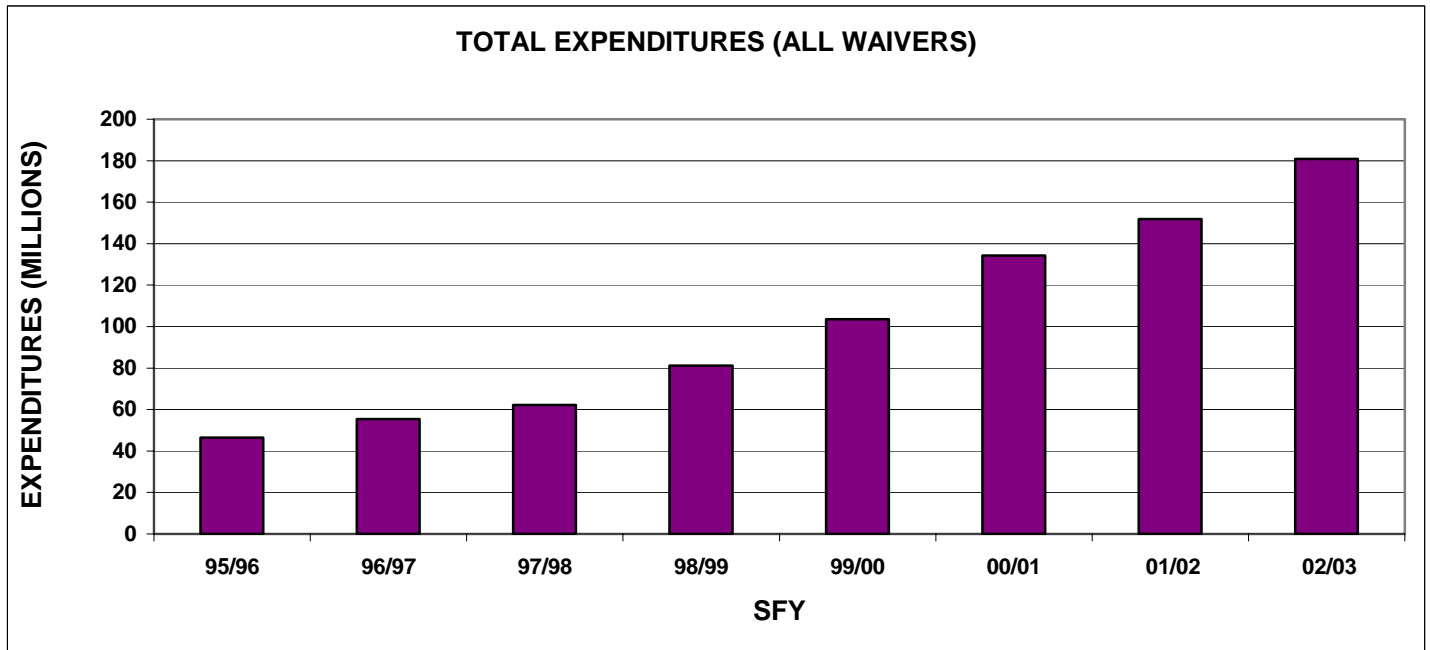


Chart 20:



## HISTORICAL HOME AND COMMUNITY-BASED SERVICE WAIVER SLOTS FILLED

Chart 21:

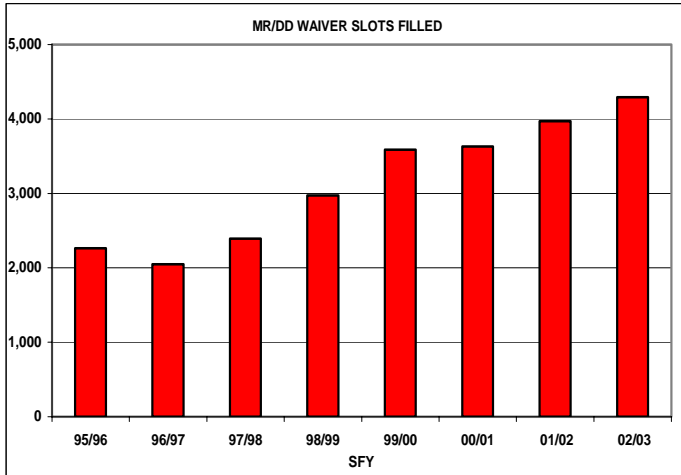


Chart 22:

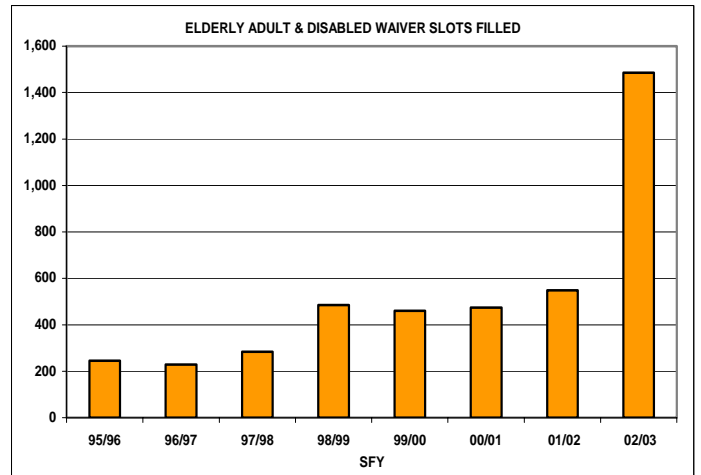


Chart 23:

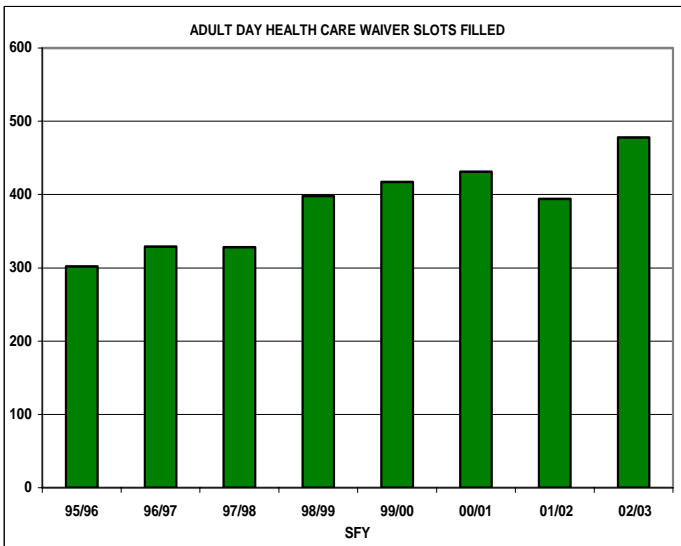


Chart 24:

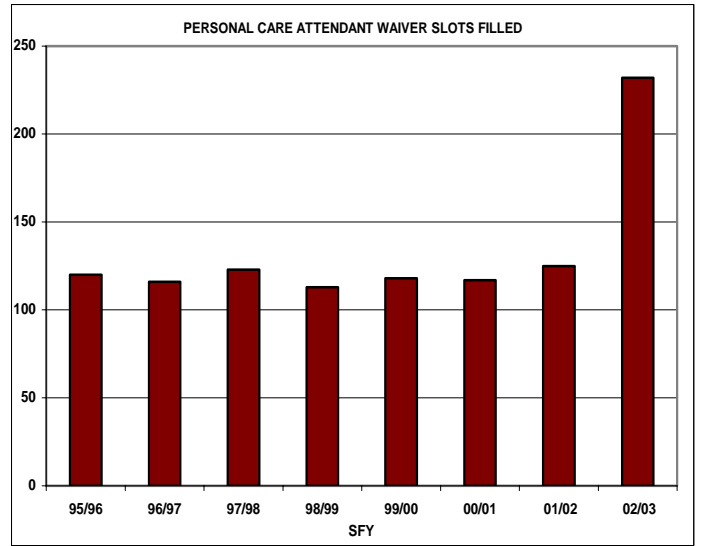


Chart 25

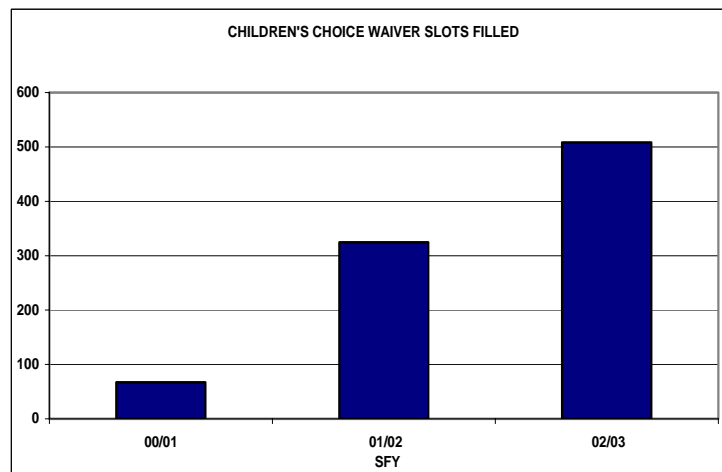


Chart 26:

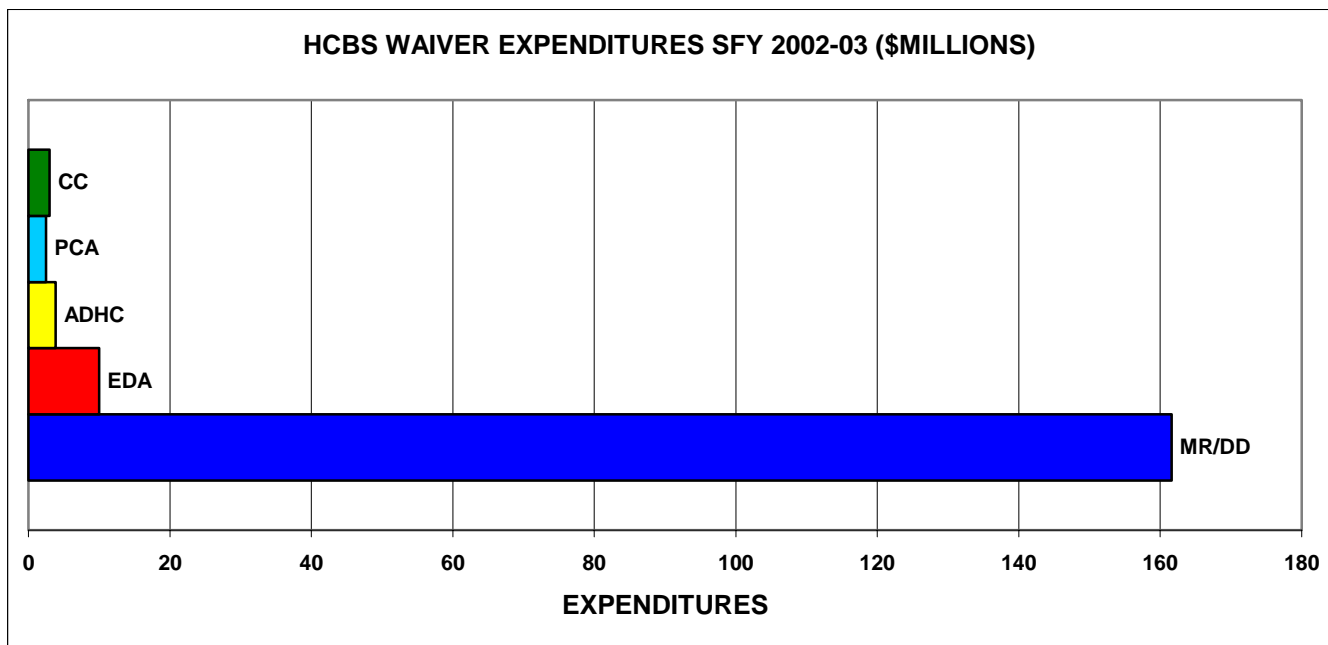
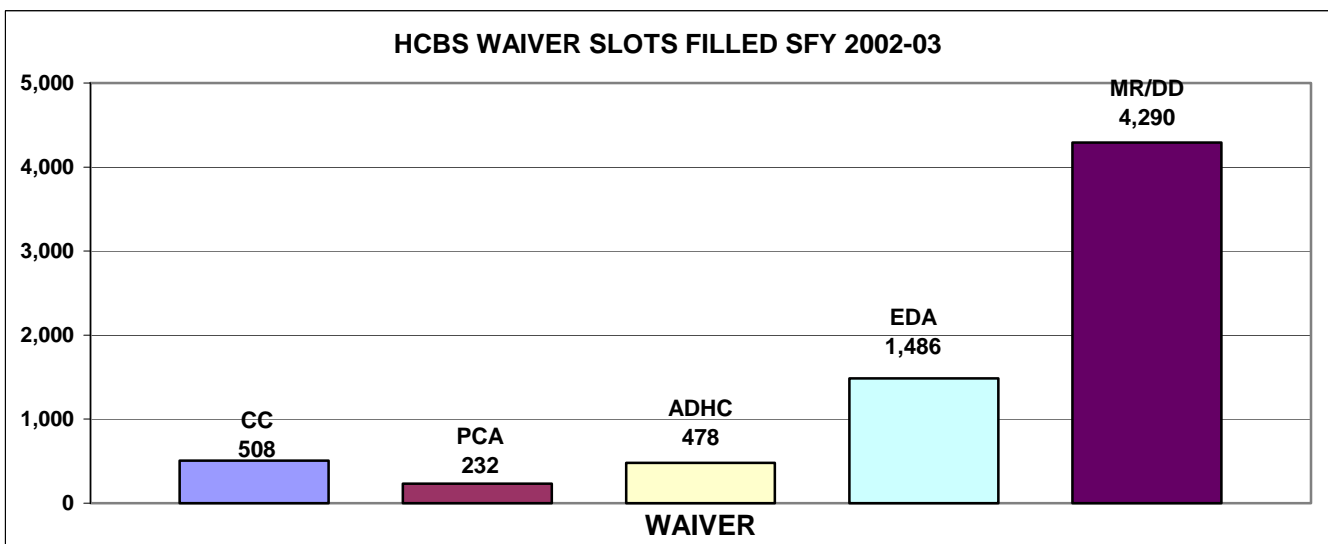


Chart 27:



**Key**

CC – Children’s Choice Waiver

PCA – Personal Care Attendant Waiver

ADHC – Adult Day Health Care Waiver

EDA – Elderly and Disabled Adult Waiver

MR/DD – Mentally Retarded/Developmentally Disabled Waiver

## **GLOSSARY**

### **CHAMP Child**

Child Health and Maternity Program (CHAMP) is for poverty-level children under the age of 19 who are eligible for Medicaid if they meet all the requirements for the program.

### **CHAMP Pregnant Woman**

Medicaid eligibility for a CHAMP Pregnant Woman may begin at any time during a medically verified pregnancy and as early as three months prior to the month of the application if all requirements of the program are met.

### **Children's Choice**

A 1915 (c) support waiver initiated in February 2001 to provide home and community-based services to children less than 19 years of age with developmental disabilities.

### **Centers for Medicare and Medicaid Services (CMS)**

The federal agency charged with overseeing and approving states' implementation and administration of the Medicaid and Medicare programs. Formerly known as HCFA.

### **CommunityCARE Program**

This is a primary care case management program for Medicaid recipients. It operates under a waiver of Freedom of Choice under the authority of Section 1915(b) (1) of the Social Security Act and under a waiver of statewideness {Section 1902(a) (1) of the Social Security Act}. This program, which links Medicaid recipients to primary care physicians, operates in 20 rural parishes across the state.

### **Cost Reports**

For any institutional provider where payment is made on a retrospective basis, there is an initial payment for the services provided, and then a process to determine the actual (audited) cost reports. If the interim payment has not covered all the approved costs, Medicaid owes the provider for the difference, and vice versa.

### **Department of Health and Human Services (DHHS)**

DHHS administers many of the "social" programs at the federal level dealing with the health and welfare of citizens of the United States. It is the federal department responsible for the Centers for Medicare and Medicaid Services (CMS) formerly known as the Health Care Financing Administration (HCFA).

### **Disproportionate Share (DSH) - Uncompensated Care**

Compensation for the care of individuals in hospitals who do not qualify for Medicaid, but are not financially capable of paying for medical services received. Hospitals must qualify in order to receive DSH payments for administering indigent medical care.

### **Deemed Newborn**

A child born to a woman who is determined eligible for Medicaid benefits is deemed Medicaid eligible from the date of birth through the child's first birthday, regardless of income.

### **Disabled Adult Child**

Covers individuals over the age of 18 who became blind or disabled before the age of 22 and have lost SSI eligibility on or after July 1, 1987 as the result of entitlement to or increase in RSDI.



### **Disabled Widows/Widowers**

Covers disabled widows/widowers (between the ages of 50 and 59) who would be eligible for SSI had there been no elimination of the reduction factor in the federal formula and no subsequent cost-of-living adjustments.

### **Eligible**

For this report, an eligible is a person who has qualified for and enrolled in Medicaid, who may or may not have received any type of measurable Medicaid service.

### **Expenditure**

In this report, refers to fiscal information derived from the financial system of the Integrated State Information System (ISIS). ISIS reports the program expenditures after all claims and financial adjustments have been taken into account.

### **Extended Medicaid**

Medicaid coverage is protected for certain applicants/recipients who lose Supplemental Security Income eligibility and who continue to meet all eligibility requirements.

### **Federal Fiscal Year (FFY)**

The FFY starts October 1 and ends September 30 of the next calendar year.

### **FITAP**

In Louisiana, Temporary Assistance for Needy Families (TANF) is provided under a program known as the Family Independence Temporary Assistance Program (FITAP). This program provides temporary assistance for needy pregnant women and families with minor children under Title IV-A of the Social Security Act. The program provides eligible individuals with cash assistance and supportive services if those families meet eligibility requirements and are otherwise complying with FITAP requirements.

### **HCFA (Health Care Financing Administration) – see CMS**

### **Inflation**

Inflation has been defined as a process of continuously rising prices, or equivalently, of a continuously falling value of money.

### **LaMOMS**

LaMOMS is a Medicaid expansion program that provides pregnancy-related services, delivery, and care up to 60 days after delivery for pregnant women with income up to 200 percent of the Federal Poverty Level (FPL).

### **Long-Term Care (LTC)**

An applicant/recipient may be eligible for Medicaid services in the LTC program if he/she requires medical assistance for a defined activity of daily living (ADL) such as dressing, eating, bathing, ambulation, etc. These services may be provided in an institution or home and community-based setting.

### **Louisiana Children's Health Insurance Program (LaCHIP)**

A federal and state initiative to address the growing number of uninsured children in this country. As a result of the Federal Balanced Budget Act of 1997 and the Social Security Act, the federal government has provided states with funding for a state children's health insurance program with enhanced FMAP. In Louisiana, the program is called LaCHIP. LaCHIP is a Medicaid expansion that covers children less than 19 years of age up to 200 percent of the federal poverty level (FPL).

### **Low-Income Families with Children (LIFC) - formerly known as AFDC-M**

Provides Medicaid-only coverage to individuals and families who would have been eligible for cash assistance under rules of the state's AFDC Program on August 12, 1996 (Section 1931 Eligibility Group).

### **Medically Needy Program (MNP)**

Provides Medicaid coverage when income and resources of the individual or family are sufficient to meet basic needs in a categorical assistance program but are not sufficient to meet medical needs according to MNP standards.

### **Medicare Buy-Ins and Supplemental (Buy-In Program)**

Allows states to enroll people with disabilities and seniors in Medicare and pay their premiums. It has the effect of transferring some medical costs for this population from the Title XIX Medicaid program, which is partially state financed, to the Title XVIII program, which is financed by the federal government. Federal matching money is available through the Medicaid program to assist the states with the premium payments for certain buy-in enrollees. Premiums may be either Part A or Part B. (See definitions below.)

### **Outcome**

The result of the performance (or non-performance) of a policy, process, or function.

### **Part A**

Part A is the hospital insurance portion of Medicare. Part A covers inpatient hospital care, skilled nursing facility care, some home health agency services, and hospice care.

### **Part B**

Part B is the supplementary or "physicians" insurance portion of Medicare. Part B covers services of physicians/other suppliers, outpatient care, medical equipment and supplies, and other medical services not covered by the hospital insurance part of Medicare.

### **Payment**

In this report, payment refers to information derived from the claims-based data sets produced by the Medicaid program's fiscal intermediary, Unisys. The Unisys data set was drawn from the claims reporting system, which reports paid claims to providers before the application of certain financial adjustments.

### **Presumptive Eligibility**

Provides limited and temporary coverage for pregnant women whose eligibility is determined by a qualified provider prior to an agency determination of Medicaid eligibility.

### **Prior Authorization**

A management tool to verify that the treatment being proposed is appropriate for the patient. It may also be used to determine if the care that is proposed has a more economical alternative with the same (or better) expected clinical outcomes.

### **Prohibited AFDC Provisions**

Provides Medicaid to children and/or their parents denied LIFC because of an AFDC-related provision that is prohibited in Medicaid.

### **Provider**

A person, group or agency that provides a covered Medicaid service to a Medicaid recipient.

### **Qualified Medicare Beneficiary (QMB-Dual)**

Individuals who are entitled to Medicare Part A have income of 100 percent of the FPL or less and resources that do not exceed twice the limit for SSI eligibility, and are eligible for full Medicaid benefits. Medicaid pays their Medicare Part A premiums, if any, Medicare Part B premiums, and, to the extent consistent with the Medicaid State Plan, Medicare deductibles and coinsurance, and provides full Medicaid benefits. Federal financial participation (FFP) equals the federal medical assistance percentage (FMAP).

### **Qualified Medicare Beneficiary (QMB-Pure)**

Individuals who are entitled to Medicare Part A have income of 100 percent of the FPL or less and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for full Medicaid. Medicaid pays their Medicare Part A premiums, if any, Medicare Part B premiums, and to the extent consistent with the Medicaid State plan, Medicare deductibles and coinsurance for Medicare services provided by Medicare providers. FFP equals FMAP.

### **Qualifying Individuals (1)**

Qualifying individuals (QI-1) went into effect January 1, 1998 and will be effective until December 31, 2002. There is an annual cap on the amount of money available, which may limit the number of individuals in the group. These individuals are entitled to Medicare Part A, have income of 120 percent to 135 percent of federal poverty level, resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid.

### **Qualifying Individuals (2)**

Qualifying individuals (QI-2) went into effect January 1, 1998 and will be effective until December 31, 2002. There is an annual cap on the amount of money available, which may limit the number of individuals in the group. These individuals are entitled to Medicare Part A, have income of 135 percent to 175 percent of federal poverty level, resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid.

### **Quality**

Quality, as defined by the Institute of Medicine, is the degree to which health services for individuals and populations increase the likelihood of desired outcomes and are consistent with current professional knowledge.

### **Recipient**

The data for this report is based on a claim's date of payment (DOP) and not on its date of service. Therefore, a person is counted as a 'recipient' if any financial/claims related transaction(s) occurred on that person's behalf during 2001-02. This means that a Medicaid eligible person who received a service during the fiscal year, but for whom no financial/claims related transaction occurred, is not counted. Similarly, every recipient included in this count did not necessarily receive a service during the fiscal year.

### **Resource Utilization Groupings (RUGS)**

A system used to classify residents of intermediate care facilities into groups that utilize similar quantities of resources defined as nursing time, therapy time, and nursing assistant time.

### **Supplemental Security Income (SSI)**

A federal cash assistance program for low-income aged, blind and disabled individuals established by Title XVI of the Social Security Act. States may use SSI income limits to establish Medicaid eligibility.

### **Specified Low-Income Medicare Beneficiary (SLMB)**

Provides for Medicare Part B Premium only. The eligibility requirements are the same as for the Qualified Medicare Beneficiary (QMB) except that income exceeds the QMB income limit of 100 percent of the FPL.

### **State Fiscal Year (SFY)**

The SFY is a 12-month calendar period that begins July 1 and ends June 30 of the following year.

### **State Plan**

The State Plan is the formal agreement between Louisiana and Centers for Medicare and Medicaid Services (CMS) regarding the policies governing the administration of the state's Medicaid program. Amendments to the State Plan must be submitted to HCFA for review and approval no later than the end of the quarter in which the amendment becomes effective. Federal financial participation (FFP) is not available to the state until the amendment is approved.

### **Temporary Assistance for Needy Families (TANF)**

Temporary Assistance for Needy Families (TANF), commonly known as welfare, is the monthly cash assistance program for poor families with children under age 18. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) (Pub. L. 104-193), as amended, is the welfare reform law that established the Temporary Assistance for Needy Families (TANF) program.

### **Unduplicated (Eligible/Recipient)**

An unduplicated eligible/recipient is a Medicaid-qualified individual who has only been counted once per reporting period.

### **Upper Payment Limit (UPL)**

The upper payment limit is a Medicaid rate setting rule that allows states to pay nursing homes, hospitals and other facilities, in aggregate, as much as Medicare would pay for the same services.

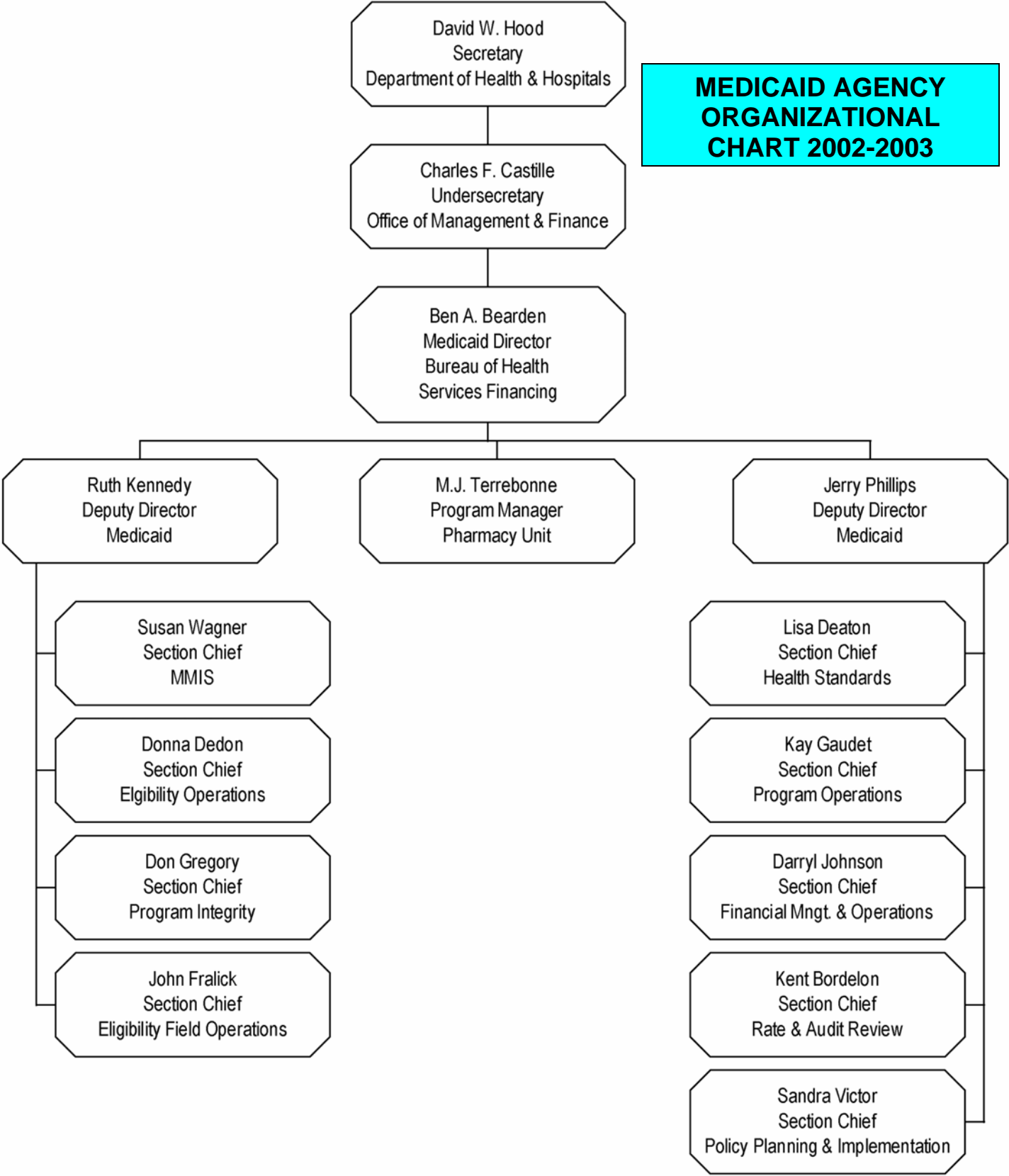
### **Utilization**

The extent to which members of a covered group use a program or obtain a particular service, or category of procedures, over a given period of time. Usually expressed as the number of services used per year or per number of persons eligible for the services.

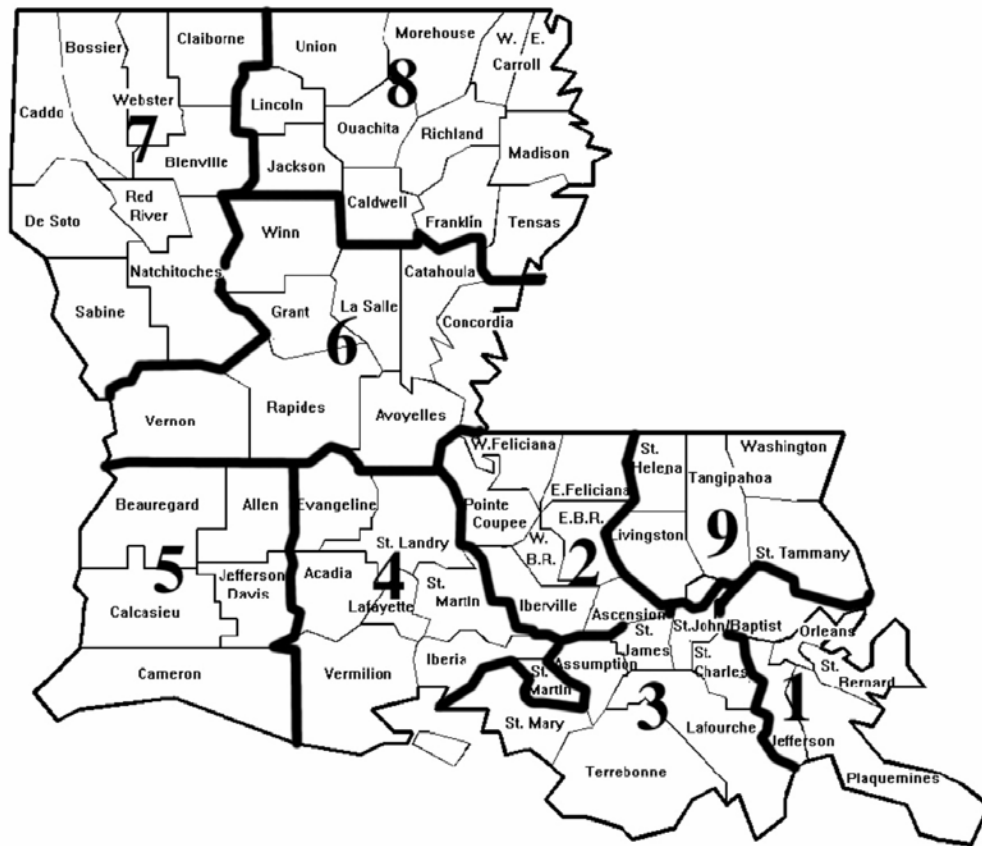
### **Waiver**

A Medicaid waiver is when the federal government allows or grants states permission to waive certain federal requirements in order to operate a specific kind of program. Federal law allows states to enact two types of Medicaid waivers: 1) Program Waivers [1915 (b), 1915(c)] and 2) Research and Demonstration Waivers [1115].

**MEDICAID AGENCY  
ORGANIZATIONAL  
CHART 2002-2003**



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## **Special Thanks**

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