

**DHHS DIVISION OF MEDICAL ASSISTANCE
YEAR TO DATE (JULY-DECEMBER) BUDGET - SFY 2008**

OVERALL MEDICAID

BUDGET	\$9,475,870,494	
1ST SIX MONTHS EXPENDITURES (CLAIMS PAID)	\$4,545,849,609	47.97% of budget
PRIOR YR 1ST SIX MONTHS	\$4,205,301,027	
INCREASE OVER PRIOR YEAR 1ST SIX MONTHS	\$340,548,582	
<i>MAJOR CATEGORIES (of increase)</i>		
PRACTITIONER/NON MD	\$199,230,065	
CAP/MR/DD	\$23,912,364	
HOSP INPT GENERAL	\$16,216,355	
PHYSICIAN	\$14,733,350	
PRESCRIBED DRUGS	\$11,451,218	
DENTAL	\$11,175,559	
HIGH RISK INTERVENTION	\$10,916,405	
	<u>\$287,635,316</u>	84.5% of increase

MH MEDICAID TOTAL BUDGET - NON FACILITY SERVICES

SFY 2008 BUDGET	\$1,761,468,500	
1ST SIX MONTHS EXPENDITURES	\$996,473,010	56.6% of budget
VARIANCE TO 50%	\$115,738,760	50%=\$880,734,250

MH MEDICAID TOTAL BUDGET - FACILITY SERVICES

SFY 2008 BUDGET	\$481,649,185	
1ST SIX MONTHS EXPENDITURES	\$255,870,027	53.1% of budget
VARIANCE TO 50%	\$15,045,435	50%=\$240,824,593

**DHHS DIVISION OF MEDICAL ASSISTANCE
YEAR TO DATE (JULY-DECEMBER) BUDGET - SFY 2008**

MH NON-FACILITY SERVICES

PRACTITIONER/NON MD

SFY 2008 BUDGET	\$972,574,943	
1ST SIX MONTHS EXPENDITURES	\$598,606,637	61.55% of budget
VARIANCE TO 50%	\$112,319,166	50%=\$486,287,472

CAP/MR/DD

SFY 2008 BUDGET	\$410,083,362	
1ST SIX MONTHS EXPENDITURES	\$209,583,948	51.1% of budget
VARIANCE TO 50%	\$4,542,267	50%=\$205,041,681

HIGH RISK INTERVENTION

SFY 2008 BUDGET	\$138,158,780	
1ST SIX MONTHS EXPENDITURES	\$77,149,917	55.84% of budget
VARIANCE TO 50%	\$8,070,527	50%=\$69,079,390

OTHER NON-FACILITY SERVICES

SFY 2008 BUDGET	\$240,651,415	
1ST SIX MONTHS EXPENDITURES	\$111,132,508	46.2% of budget

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
BUDGET MANAGEMENT

MONTHLY LOC COMMUNITY SUPPORT NUMBERS

COS 070 - PRACTITIONER, NOT A PHYSICIAN

STATE FISCAL YEAR	TOTAL NET PAYMENTS FOR COS 070 SERVICES	COMMUNITY SUPPORT INTERVENTION SERVICES - H0036	COMMUNITY SUPPORT EXPENDITURES AS PERCENT OF TOTAL COS 070 EXPENDITURES
2008 (thru 12/31/2007)	\$ 598,606,637	\$ 477,922,408	79.8%
2007	\$ 999,990,509	\$ 808,098,625	80.8%

NOTE: Medicaid Program Services expenditures are reported at the Category of Service (COS) level. Category of Service 070 "Practitioner, Non Physician" includes services provided by practitioners other than those who provide Community Support Services .

SFY 2008 Budget for COS 070	\$ 972,574,943
# days in year	365
Daily budget per checkwrite day	\$ 2,664,589
x average days in a checkwrite	9
Average Budget per Checkwrite	\$23,156,546
Average Payments per 2008 Checkwrite - through December 31, 2007	\$28,506,430

**COS 070 (INCLUDES COMMUNITY SUPPORTS) EXPENDITURE DATA
OCTOBER 2005-JANUARY 24, 2008**

COS 070 - Non-Physician Practitioner							
	Average Expenditure of COS 070 per Checkwrite	Average % of COS 070 of Total Checkwrite	Average # of Recipients of COS 070 per Checkwrite	Average # of Units of COS 070 per Checkwrite	Average Units per Recipient for COS 070 per Checkwrite		
Oct 05-March 06	2,315,186	1.2%	14,870	58,774	4		
April 06-Sept 06	12,411,266	7.2%	25,673	781,197	30		
Oct 06-March 07	26,123,405	12.8%	36,970	1,646,814	45		
April 07-June 07	29,343,221	14.7%	43,262	2,271,128	52		
July 07-Sept 07	29,551,111	14.3%	44,450	2,184,152	49		
Oct 07-Jan 24, 2008	27,212,069	12.8%	46,893	1,985,725	42		
	Requirements	State	County	Federal			
Budget 07-08	972,574,943	306,020,706	42,452,896	624,101,341			
Annualized 07-08	1,161,020,390	364,793,017	51,066,020	745,161,352			
Difference	-188,445,447	-58,772,312	-8,613,124	-121,060,011			

Community Supports was implemented in April 2006. Expenditures have been growing rapidly since. Steps have implemented to try to ensure the service was being provided appropriately, including audits of provider billing, and a reduction of the payment rate. Additionally, the amount of Community Support Services that could be provided prior to the utilization review by Value Options was reduced from 30 days to 8 qualified professional hours to develop the person centered plan, effective June 11, 2007. HB 1473, Sec. 10.49 (ee), (6) limited adults to 4 hours and children to 8 hours of service to develop the person-centered plan, additional hours require prior approval. *SFY 08 Medicaid budget for this service is built on an average of \$23.1 M per check write.*

**Community Supports was implemented in April 2006.

Checkwrite Date	Expenditures -COS 070	% of Total Checkwrite	# Recipients - COS 070	# Units - COS 070	Average Units per Recipient - COS 070	# of Checkwrite Days	Avg. Cost Per Checkwrite Day
10/10/2006	30,281,079	9.5%	39,316	1,903,452	48		
10/17/2006	16,967,723	9.8%	33,804	1,071,586	32		
10/26/2006	20,734,377	14.8%	31,384	1,317,691	42		
11/7/2006	31,400,593	9.8%	44,362	2,014,273	45		
11/14/2006	14,978,779	9.3%	26,484	933,606	35		
11/21/2006	23,949,428	13.6%	34,006	1,528,322	45		
12/5/2006	29,649,072	10.3%	41,334	1,845,394	45		
12/12/2006	20,231,025	11.0%	34,020	1,237,199	36		
12/21/2006	27,090,160	15.2%	37,409	1,748,145	47		
1/9/2007	46,577,340	11.0%	49,707	2,909,301	59	21	2,217,969
1/17/2007	20,035,466	11.6%	32,556	1,257,260	39	7	2,862,209
1/25/2007	25,239,395	15.5%	34,088	1,592,966	47	7	3,605,628
2/6/2007	40,925,350	12.4%	47,544	2,560,610	54	14	2,923,239
2/13/2007	19,464,530	11.7%	30,263	1,229,452	41	6	3,244,088
2/20/2007	28,629,157	16.9%	38,394	1,815,414	47	7	4,089,880
2/28/2007	23,500,101	15.4%	34,676	1,481,858	43	7	3,357,157
3/6/2007	23,244,492	12.1%	36,211	1,414,928	39	8	2,905,562
3/13/2007	25,008,099	13.3%	38,306	1,614,839	42	7	3,572,586
3/20/2007	26,026,945	15.2%	37,464	1,638,942	44	7	3,718,135
3/29/2007	28,534,982	18.2%	38,078	1,821,053	48	7	4,076,426

**COS 070 (INCLUDES COMMUNITY SUPPORTS) EXPENDITURE DATA
OCTOBER 2005-JANUARY 24, 2008**

Checkwrite Date	Expenditures -COS 070	% of Total Checkwrite	# Recipients - COS 070	# Units - COS 070	Average Units per Recipient - COS 070	# of Checkwrite Days	Avg. Cost Per Checkwrite Day
4/10/2007	44,531,366	13.0%	54,187	3,322,465	61	14	3,180,812
4/17/2007	22,413,803	13.9%	36,283	1,638,939	45	7	3,201,972
4/26/2007	28,973,251	16.7%	39,885	2,465,433	62	7	4,139,036
5/8/2007	46,077,206	13.6%	55,216	3,732,899	68	14	3,291,229
5/15/2007	25,026,409	14.1%	42,445	1,992,580	47	7	3,575,201
5/22/2007	28,471,729	16.5%	42,791	2,214,125	52	7	4,067,390
5/31/2007	25,049,781	17.6%	40,798	1,936,018	47	7	3,578,540
6/5/2007	20,846,525	15.0%	37,307	1,515,738	41	7	2,978,075
6/12/2007	24,526,438	11.6%	42,691	1,871,436	44	7	3,503,777
6/21/2007	27,515,702	14.7%	41,018	2,021,650	49	7	3,930,815
7/3/2007	45,375,417	15.5%	53,744	3,370,197	63	12	3,781,285
7/10/2007	19,823,681	12.4%	33,660	1,459,712	43	7	2,831,954
7/17/2007	23,958,513	13.7%	41,091	1,764,754	43	7	3,422,645
7/26/2007	26,798,380	16.4%	42,478	1,996,498	47	9	2,977,598
8/8/2007	42,261,348	13.1%	52,438	3,143,855	60	13	3,250,873
8/14/2007	24,120,447	14.0%	40,869	1,831,157	45	6	4,020,074
8/21/2007	27,890,256	16.1%	44,604	2,078,330	47	7	3,984,322
9/5/2007	40,602,475	14.2%	53,847	2,979,918	55	15	2,706,832
9/11/2007	20,894,525	12.1%	38,097	1,540,173	40	6	3,482,421
9/18/2007	26,388,800	13.7%	43,822	1,862,371	42	7	3,769,829
9/27/2007	26,948,385	16.1%	44,300	1,998,705	45	9	2,994,265
10/9/2007	44,426,008	12.8%	57,420	3,255,099	57	12	3,702,167
10/16/2007	23,792,053	12.9%	43,418	1,686,174	39	7	3,398,865
10/23/2007	24,945,870	15.2%	44,535	1,845,094	41	7	3,563,696
10/31/2007	22,604,836	15.7%	42,490	1,638,816	39	8	2,825,604
11/6/2007	22,423,534	12.3%	42,736	1,646,976	39	6	3,737,256
11/14/2007	23,224,279	11.8%	44,412	1,641,352	37	8	2,903,035
11/21/2007	27,443,975	15.6%	48,121	1,989,330	41	7	3,920,568
12/4/2007	37,115,152	13.2%	54,438	2,693,034	49	13	2,855,012
12/11/2007	19,981,728	10.5%	42,166	1,687,217	40	7	2,854,533
12/20/2007	27,615,361	12.7%	49,194	1,971,469	40	9	3,068,373
1/8/2008	37,606,234	9.1%	55,371	2,773,267	50	19	1,979,275
1/15/2008	20,956,853	10.9%	40,915	1,429,190	35	7	2,993,836
1/24/2008	21,621,018	14.1%	44,392	1,557,408	35	9	2,402,335

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
BUDGET MANAGEMENT

COMPARE MEDICAID PROGRAM SERVICES PAYMENTS BY QUARTER

FUND 1310	PAID BY QUARTER	QUARTERLY PERCENT OF SFY TOTAL	SEMI-ANNUAL PERCENT OF SFY TOTAL
SFY 2003			
Q1	\$ 1,494,257,329	22.62%	
Q2	\$ 1,721,822,720	26.07%	48.69%
Q3	\$ 1,624,080,787	24.59%	
Q4	\$ 1,765,551,585	26.73%	51.31%
TOTAL	\$ 6,605,712,421		
SFY 2004			
Q1	\$ 1,627,037,391	21.97%	
Q2	\$ 1,916,576,966	25.88%	47.86%
Q3	\$ 1,806,793,736	24.40%	
Q4	\$ 2,054,134,228	27.74%	52.14%
TOTAL	\$ 7,404,542,321		
SFY 2005			
Q1	\$ 1,800,605,453	22.15%	
Q2	\$ 2,040,998,589	25.10%	47.25%
Q3	\$ 2,209,394,218	27.17%	
Q4	\$ 2,079,734,979	25.58%	52.75%
TOTAL	\$ 8,130,733,238		
SFY 2006			
Q1	\$ 2,285,793,462	26.67%	
Q2	\$ 2,050,195,330	23.92%	50.58%
Q3	\$ 2,179,440,303	25.43%	
Q4	\$ 2,056,536,591	23.99%	49.42%
TOTAL	\$ 8,571,965,686		
SFY 2007			
Q1	\$ 2,248,874,070	24.97%	
Q2	\$ 2,099,230,759	23.31%	48.28%
Q3	\$ 2,450,866,700	27.22%	
Q4	\$ 2,206,142,153	24.50%	51.72%
TOTAL	\$ 9,005,113,680		
SFY 2008			
Q1	\$ 2,370,235,334	25.01%	
Q2	\$ 2,175,614,275	22.96%	47.97%
Q3			
Q4			
TOTAL			

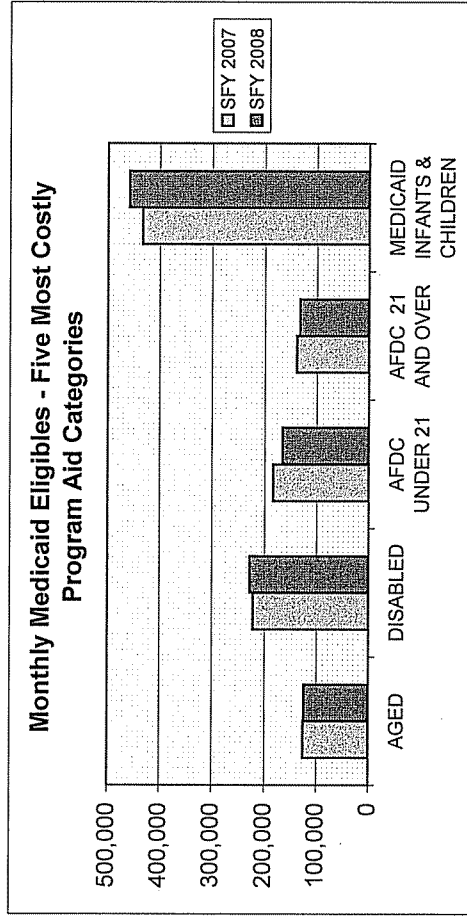
DEPARTMENT OF HEALTH AND HUMAN SERVICES
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BUDGET MANAGEMENT

FIFTEEN MOST EXPENSIVE CATEGORIES OF SERVICE

YEAR TO DATE DECEMBER 2007 COS DESCRIPTION	ACCOUNT	PAID		VARIANCE OVER (UNDER)	PERCENT CHANGE	SFY 2008 BUDGET	PERCENT USED
		SFY 2008	SFY 2007				
PRACTITIONER-NON PHYSICIAN	536169	598,606,637	399,376,572	199,230,065	49.89%	972,574,943	61.55%
LTC-NURSING FACILITIES	536111	534,372,394	538,020,785	(3,648,391)	-0.68%	1,134,033,665	47.12%
HOSP INPT-GENERAL	536101	507,164,167	490,947,812	16,216,355	3.30%	1,073,560,387	47.24%
PRESCRIBED DRUGS	536130	457,031,801	445,580,583	11,451,218	2.57%	994,353,985	45.96%
PHYSICIAN	536115	426,003,180	411,269,830	14,733,350	3.58%	863,366,109	49.34%
CAP-MENTALLY RETARDED	536160	209,583,948	185,671,584	23,912,364	12.88%	410,083,362	51.11%
HOSP OUTPT-GENERAL	536121	195,111,359	196,660,288	(1,548,929)	-0.79%	436,873,221	44.66%
PERSONAL CARE	536144	155,918,298	148,942,845	6,975,453	4.68%	312,032,557	49.97%
CAP-DISABLED	536159	134,348,575	129,189,356	5,159,219	3.99%	266,296,476	50.45%
DENTAL	536116	131,131,935	119,956,377	11,175,559	9.32%	258,046,094	50.82%
LTC-ICF MRC, NSO	536113	115,359,768	107,098,182	8,261,585	7.71%	218,319,514	52.84%
LTC-ICF MRC, SO	536114	108,895,227	106,345,616	2,549,611	2.40%	206,986,379	52.61%
HOSP OUTPT-EMERGENCY ROOM	536154	108,550,298	102,466,974	6,083,324	5.94%	223,294,430	48.61%
PART B BUY-IN DUAL Q	536175	106,959,333	100,723,164	6,236,169	6.19%	261,713,832	40.87%
HIGH RISK INTERVENTION	536153	77,149,917	66,233,512	10,916,405	16.48%	138,158,780	55.84%
TOTAL OF ABOVE CATEGORIES OF SERVICE		\$3,866,186,837	\$3,548,483,480	\$317,703,357	8.95%	\$7,769,693,734	49.76%
TOTAL SERVICES AND PREMIUMS		\$4,545,849,609	\$4,205,301,027	\$340,548,582	8.10%		

COS DESCRIPTION	ACCOUNT	RECIPIENTS		VARIANCE OVER (UNDER)	PERCENT CHANGE	AVG PAID PER RECIPIENT		VARIANCE OVER (UNDER)	PERCENT CHANGE
		SFY 2008	SFY 2007			SFY 2008	SFY 2007		
PRACTITIONER-NON PHYSICIAN	536169	79,216	59,169	20,047	33.88%	\$1,259.44	\$1,124.96	\$134.48	11.95%
LTC-NURSING FACILITIES	536111	27,155	27,937	(782)	-2.80%	\$3,279.77	\$3,209.73	\$70.04	2.18%
HOSP INPT-GENERAL	536101	20,192	35,419	(15,227)	-42.99%	\$4,186.18	\$2,310.19	\$1,875.99	81.21%
PRESCRIBED DRUGS	536130	370,384	366,299	4,085	1.12%	\$205.66	\$202.74	\$2.92	1.44%
PHYSICIAN	536115	1,063,645	996,913	66,732	6.69%	\$66.75	\$68.76	(\$2.01)	-2.92%
CAP-MENTALLY RETARDED	536160	8,842	7,876	966	12.27%	\$3,950.54	\$3,929.06	\$21.48	0.55%
HOSP OUTPT-GENERAL	536121	87,473	93,022	(5,549)	-5.97%	\$371.76	\$352.35	\$19.40	5.51%
PERSONAL CARE	536144	34,208	33,072	1,136	3.43%	\$759.66	\$750.60	\$9.06	1.21%
CAP-DISABLED	536159	10,998	10,991	7	0.06%	\$2,035.95	\$1,959.02	\$76.94	3.93%
DENTAL	536116	90,301	92,378	(2,077)	-2.25%	\$242.03	\$216.42	\$25.60	11.83%
LTC-ICF MRC, NSO	536113	2,441	2,457	(16)	-0.65%	\$7,876.54	\$7,264.83	\$611.70	8.42%
LTC-ICF MRC, SO	536114	1,501	1,511	(10)	-0.66%	\$12,091.41	\$11,730.16	\$361.25	3.08%
HOSP OUTPT-EMERGENCY ROOM	536154	60,017	59,356	661	1.11%	\$301.44	\$287.72	\$13.72	4.77%
PART B BUY-IN DUAL Q	536175	186,509	185,103	1,406	0.76%	\$95.58	\$90.69	\$4.89	5.39%
HIGH RISK INTERVENTION	536153	1,887	1,560	327	20.96%	\$6,814.16	\$7,076.23	(\$262.07)	-3.70%

CHANGES IN NUMBERS OF MEDICAID ELIGIBLES SFY 2007 TO SFY 2008



MONTHLY MEDICAID ELIGIBLES			
	FIVE MOST COSTLY PROGRAM AID CATEGORIES	YTD DECEMBER ACTUAL AVG	
		SFY 2007	SFY 2008
	AGED	124,849	123,600
	DISABLED	221,912	228,124
	AFDC UNDER 21	183,495	165,327
	AFDC 21 AND OVER	138,443	132,150
	MEDICAID INFANTS & CHILDREN	433,781	458,672

MONTHLY MEDICAID ELIGIBLES Without Illegal Aliens As Documented in Monthly Medicaid Eligibles Table			
	SFY 2007 ACTUAL	SFY 2008 ACTUAL	
JUL	1,217,496	1,217,262	
AUG	1,214,853	1,216,492	
SEP	1,219,547	1,223,294	
OCT	1,216,384	1,225,586	
NOV	1,218,798	1,240,986	
DEC	1,217,558	1,247,126	
JAN	1,207,118		
FEB	1,205,423		
MAR	1,202,353		
APR	1,208,912		
MAY	1,210,527		
JUN	1,217,028		

NOTE: * Illegal Aliens are presumed eligible when they present at Provider location in need of Emergency Services (only). The claims are adjudicated individually and most require six months or more for completion. Consequently, accurate counts of Illegal Aliens who were legitimately served cannot be determined for a given period of time until a year has passed.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
BUDGET MANAGEMENT

CHANGE IN PAID BY PROGRAM AID CATEGORY

ALL SERVICES YTD DECEMBER 2007 PROGRAM AID CATEGORY	PAID		INCREASE (DECREASE)	INCREASE (DECREASE) AS PERCENT	PERCENT OF TOTAL CHANGE BY PAC
	SFY 2008	SFY 2007			
AGED	900,939,089	886,018,553	14,920,536	1.68%	4.35%
BLIND	15,024,753	14,755,669	269,084	1.82%	0.08%
DISABLED	1,981,775,112	1,836,707,854	145,067,258	7.90%	42.33%
AFDC UNDER 21	335,776,941	289,136,875	46,640,066	16.13%	13.61%
AFDC OVER 21	366,510,804	362,673,490	3,837,314	1.06%	1.12%
OTHER CHILDREN	47,462,214	42,955,442	4,506,772	10.49%	1.32%
MPW	130,077,827	130,123,249	(45,421)	-0.03%	-0.01%
MIC	679,418,526	561,895,600	117,522,926	20.92%	34.29%
MQBQ	675,127	516,884	158,243	30.61%	0.05%
MQBB	19,787,038	18,470,028	1,317,010	7.13%	0.38%
LEGAL ALIENS	3,192,157	1,785,810	1,406,347	78.75%	0.41%
MCCHIP	33,328,626	28,351,775	4,976,852	17.55%	1.45%
ILLEGAL ALIENS	32,387,038	30,673,154	1,713,884	5.59%	0.50%
FAMILY PLANNING WAIVER	2,293,236	1,885,318	407,918	21.64%	0.12%
ALL ELIGIBLES	4,548,648,489	4,205,949,700	342,698,789	8.15%	100.00%

TRACK FACILITY AND NON-FACILITY MENTAL HEALTH SERVICES

	FACILITY SERVICES						TOTAL MENTAL HEALTH FACILITY SERVICES
	536103 HOSPITAL INPATIENT MENTAL STATE OWNED UNDER AGE 21	536105001 HOSPITAL INPATIENT MENTAL NOT STATE OWNED UNDER AGE 21	536106 HOSPITAL INPATIENT MENTAL STATE OWNED AGE 65 AND OVER	536113 LTC INTERMEDIATE CARE FACILITY FOR MENTAL RETARDATION NOT STATE OWNED	536114 LTC INTERMEDIATE CARE FACILITY FOR MENTAL RETARDATION STATE OWNED		
FIRST QUARTER SFY 2007	\$ 6,018,238	\$ 4,893,582	\$ 1,931,756	\$ 56,926,765	\$ 52,160,020	\$ 121,930,361	
SECOND QUARTER SFY 2007	\$ 5,368,082	\$ 5,935,216	\$ 2,361,180	\$ 50,171,418	\$ 54,185,596	\$ 118,021,491	
THIRD QUARTER SFY 2007	\$ 6,786,453	\$ 6,446,136	\$ 2,031,275	\$ 56,019,140	\$ 54,226,828	\$ 125,509,842	
FOURTH QUARTER SFY 2007	\$ 7,595,535	\$ 8,045,664	\$ 1,423,203	\$ 53,398,156	\$ 65,248,545	\$ 135,711,104	
TOTAL PAID SFY 2007	\$ 25,768,317	\$ 25,320,598	\$ 7,747,415	\$ 216,515,479	\$ 225,820,989	\$ 501,172,798	

	NON FACILITY SERVICES						TOTAL MENTAL HEALTH NON FACILITY SERVICES
	536123 CLINICS MENTAL HEALTH	536151 CASE MANAGEMENT NORMAL FINANCIAL PARTICIPATION	536153 HIGH RISK INTERVENTION	536160 COMMUNITY ALTERNATIVE PROGRAM FOR MENTALLY RETADED	536169 PRACTITIONER NOT PHYSICIAN	536170 HMO PREMIUMS	
	\$ 41,605,769	\$ 289,005	\$ 34,819,695	\$ 98,293,854	\$ 184,095,670	\$ 27,026,629	\$ 386,130,822
	\$ 28,808,583	\$ 376,753	\$ 31,413,816	\$ 87,377,730	\$ 215,280,903	\$ 26,668,834	\$ 389,926,620
	\$ 36,959,774	\$ 356,668	\$ 40,991,991	\$ 99,861,045	\$ 307,185,862	\$ 25,282,478	\$ 510,637,817
	\$ 31,472,622	\$ 326,834	\$ 36,532,885	\$ 90,581,329	\$ 293,427,830	\$ 25,586,864	\$ 477,928,364
	\$ 138,846,748	\$ 1,349,260	\$ 143,758,387	\$ 376,113,959	\$ 999,990,264	\$ 104,564,804	\$ 1,764,823,423

JUL 2007	\$ 2,001,302	\$ 3,725,139	\$ 453,746	\$ - 20,284,307	\$ 11,481,127	\$ 37,945,621
AUG 2007	\$ 1,689,368	\$ 2,879,833	\$ 59,728	\$ 18,917,951	\$ 19,626,600	\$ 43,173,481
SEP 2007	\$ 2,109,590	\$ 3,139,762	\$ 430,243	\$ 22,069,754	\$ 19,776,658	\$ 47,525,996
FIRST QUARTER SFY 2008	\$ 5,800,260	\$ 9,744,724	\$ 943,717	\$ 61,272,012	\$ 50,884,385	\$ 128,645,087
OCT 2007	\$ 2,458,205	\$ 3,233,313	\$ 361,910	\$ 22,161,281	\$ 19,525,577	\$ 47,740,266
NOV 2007	\$ 1,894,314	\$ 1,878,930	\$ 182,038	\$ 13,634,817	\$ 19,366,683	\$ 37,156,762
DEC 2007	\$ 1,759,807	\$ 3,155,266	\$ 202,549	\$ 18,091,657	\$ 19,118,563	\$ 42,327,862
SECOND QUARTER SFY 2008	\$ 6,112,326	\$ 8,267,509	\$ 746,497	\$ 54,087,755	\$ 56,010,843	\$ 127,224,930
YTD DEC 2007	\$ 11,912,596	\$ 18,012,233	\$ 1,690,214	\$ 115,359,767	\$ 108,895,228	\$ 255,870,027

SFY 2008 BUDGET	\$ 24,424,051	\$ 22,860,721	\$ 8,958,520	\$ 218,319,514	\$ 206,986,379	\$ 481,649,185
PERCENT OF BUDGET USED YTD	48.77%	78.45%	18.87%	52.84%	52.61%	53.12%

	\$ 11,066,315	\$ 93,695	\$ 14,951,797	\$ 40,107,642	\$ 115,953,272	\$ 8,398,439	\$ 190,571,160
	\$ 8,133,756	\$ 1,553	\$ 12,957,199	\$ 32,558,652	\$ 94,268,456	\$ 8,416,637	\$ 156,336,254
	\$ 11,635,898	\$ 10,170	\$ 14,934,575	\$ 40,469,747	\$ 114,828,180	\$ 8,473,155	\$ 190,351,724
	\$ 30,835,971	\$ 105,418	\$ 42,843,571	\$ 113,136,041	\$ 325,049,907	\$ 25,286,230	\$ 537,259,138
	\$ 12,191,135	\$ 35,510	\$ 14,594,461	\$ 38,493,567	\$ 115,763,820	\$ 8,472,061	\$ 189,550,554
	\$ 6,975,693	\$ 16,866	\$ 7,981,298	\$ 24,743,537	\$ 73,086,279	\$ 8,515,783	\$ 121,319,456
	\$ 10,132,802	\$ 22,328	\$ 11,730,587	\$ 33,210,804	\$ 84,706,631	\$ 8,640,710	\$ 148,343,862
	\$ 29,299,630	\$ 74,704	\$ 34,306,346	\$ 96,447,908	\$ 273,556,730	\$ 25,528,554	\$ 459,213,872
	\$ 60,135,601	\$ 180,122	\$ 77,149,917	\$ 209,583,949	\$ 598,606,637	\$ 50,816,784	\$ 996,473,010

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
BUDGET MANAGEMENT

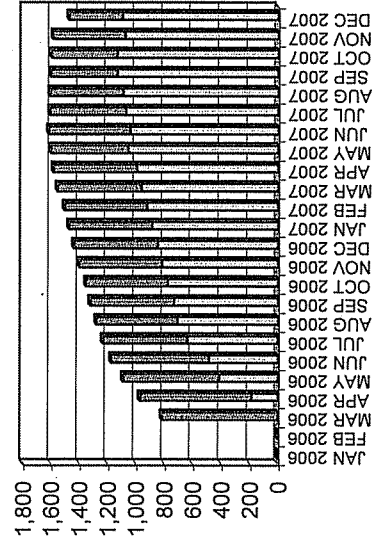
COMMUNITY INTERVENTION SERVICE AGENCIES

TYPE 112/SPEC 118	JAN 2006	FEB 2006	MAR 2006	APR 2006	MAY 2006	JUN 2006	JUL 2006	AUG 2006	SEP 2006	OCT 2006	NOV 2006	DEC 2006
ENROLLED	1	1	1	817	971	1,090	1,174	1,233	1,279	1,321	1,352	1,399
Billing	0	0	0	0	187	413	485	635	706	730	777	816
Non-Billing	1	1	1	817	784	677	689	598	573	591	575	583
% ENROLLED BILLING	0%	0%	0%	0%	19%	38%	41%	52%	55%	57%	58%	59%
UNDUPLICATED RECIPIENTS	0	0	0	0	5,771	14,707	16,798	21,981	24,531	24,902	26,470	28,586

TYPE 112/SPEC 118	JAN 2007	FEB 2007	MAR 2007	APR 2007	MAY 2007	JUN 2007	JUL 2007	AUG 2007	SEP 2007	OCT 2007	NOV 2007	DEC 2007
ENROLLED	1,472	1,505	1,554	1,583	1,601	1,618	1,608	1,608	1,603	1,598	1,588	1,476
Billing	886	923	961	994	1,058	1,042	1,073	1,092	1,132	1,135	1,079	1,097
Non-Billing	586	582	593	589	543	576	535	516	471	463	509	379
% ENROLLED BILLING	60%	61%	62%	63%	66%	64%	67%	68%	71%	71%	68%	74%
UNDUPLICATED RECIPIENTS	30,359	34,358	34,709	37,359	41,341	35,987	40,891	39,854	42,699	43,714	38,592	41,085

* Derived from DRIVE using DOP, as of December data load

Community Intervention Service Agencies (Community Support)
Billing vs. Non-Billing (DOP)



Unduplicated Recipients Served by Community Intervention Service
Agencies (Community Support Providers) Date of Payment

