

NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM



NEBRASKA MEDICAID GENERAL INFORMATION

FISCAL YEAR 2005

Nebraska Health and Human Services System
Finance and Support
October 2005

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Notes:

- Throughout this report, the term **Eligible** means that a person is enrolled in Medicaid and eligible under a specific eligibility category.
- The term **Recipient** means that an eligible person had a Medicaid payment made on his/her behalf for a particular medical service.

Unless otherwise noted, State Children’s Health Insurance (SCHIP) eligibles, recipients and expenditures are included on all tables and graphs.

MEDICAID

STATUTORY AUTHORITY: Section 68-1018 through 68-1025, R.R.S., 1943
YEAR ESTABLISHED: 1965

The Medicaid Program pays for medical services for low-income persons meeting specific eligibility requirements. Certain medical services must be covered by state Medicaid programs to obtain federal financial participation. Coverage of medical services beyond those required is a state option under Medicaid. Nebraska covers 24 optional services.

Program Description The following medical services are available to eligible individuals. Medicaid pays the provider directly for services provided. Medicaid is the payer of last resort; therefore, any third party payments are investigated first.

- Inpatient and outpatient hospital care
- Services within licensure of practitioners licensed to practice medicine, surgery, dentistry, osteopathy, chiropractic, podiatry, optometry, nursing, physical therapy, occupational therapy, psychology and speech and hearing therapy
- Laboratory and x-ray services
- Prescribed drugs, appliances and health aids
- Care in institutions for mental diseases for children under age 21 and adults over age 64
- Early and periodic screening of children (Health Check)
- Family planning
- Nursing facility services
- Intermediate care facility for the mentally retarded
- Personal assistant services and home health
- Home and community-based services for selected populations

Payments for these services are made using several reimbursement methodologies. Inpatient hospital payment is on a diagnosis related group basis per discharge or per diem depending on the type of hospital. Nursing facility and ICF-MR reimbursement is based on a daily rate by class or level of care. Outpatient hospital services are reimbursed based on a percentage designed to approximate 82.45 percent of cost. Most practitioners (including physicians) are reimbursed based on a fee for a particular procedure or service. Certain clinics are paid on an encounter basis. Prescribed drugs reimbursements are made by adding a dispensing fee to the cost of the drugs. Providers of primary care are paid by the managed care plans for certain enrollees. Medicaid pays the managed care plan on a capitated basis for those enrollees. Providers are paid directly by Medicaid for services provided to other primary care enrollees and for mental health/substance abuse enrollees in managed care plans.

DESCRIPTION OF ELIGIBILITY FOR MEDICAID IN NEBRASKA

- All individuals who are age 65 and older or who have a disability and qualify for state supplement to SSI are automatically eligible for Medicaid. Aged, blind, and disabled with higher income may qualify if net income is below 100% of federal poverty levels or under the medically needy option by spending income in excess of the Medically Needy Standard on qualifying medical expenses.
- Individuals and families receiving cash assistance through ADC are automatically eligible for Medicaid in Nebraska. Children under age 19 whose households do not meet the deprivation requirements for ADC are eligible under the Ribicoff portion of the program if income is less than the medically needy level. A resource test is also applied.
- Ribicoff and ADC-related children may also "spend down" excess income on medical bills to qualify for Medicaid.
- Children under age 6 are eligible with household income up to 133% of the federal poverty level. No resource test is applied and they are not allowed to spend down excess income. This is called Medical Assistance for Children (MAC) eligibility.
- Children under the age of 1 are eligible with household income up to 150% of the federal poverty level. No resource test is applied and they are not allowed to spend down excess income. This is called Enhanced Medical Assistance for Children (EMAC) eligibility.
- Children age 6 and older and under age 19 are eligible for Medicaid if income is less than 100% of poverty. No resource test is applied and spending down of excess income is not allowed. This is called School Age Medical (SAM) eligibility.
- Spousal impoverishment provisions allow individuals with higher income and resources to qualify for Medicaid if the individual is institutionalized or receives home and community based services and their spouse is at home. Income up to 150% of the federal poverty level for a family size of two and resources up to \$81,960 may be retained by the non-Medicaid family members (SLIMB 100-120 FPL, Q11 120-135 FPL).
- Mandatory Medicaid payment of Medicare premiums, coinsurance and deductibles is required for persons under 100% of poverty. The Department has elected to cover all Medicaid services for these persons. Individuals with income under 135% of poverty, not otherwise eligible may qualify for payment of Medicare Part B premiums only.
- Pregnant women eligible up to 185% with no resource test.
- Children without credible health insurance up to 185% of the federal poverty level with no resource limit. This is called Children's Health Insurance Program (CHIP).

Managed Care Coverage and Other Contractual Arrangements

All managed care in Nebraska began July 1995. Until December 31, 2001, coverage of mental health/substance abuse services for Medicaid persons across the state was provided through a contract with ValueOptions and paid on a capitated basis. After this date, HHSS developed a contract with ValueOptions initially to operate as an Administrative Services Organization (ASO) to provide certain managed care services. All payments began to be paid on a fee-for-service basis. After July 1, 2002, Magellan was selected as the ASO provider.

For managed care of medical/surgical services, only Medicaid persons living in Douglas, Sarpy and Lancaster counties and determined to be mandatory for managed care are required to enroll for coverage. For these persons, all primary care services except prescribed drugs, dental services and personal care aides are covered through the managed care plan.

Beginning in July 1997, HHSS contracted with the Lancaster County Health Department in conjunction with the Douglas County Health Department, the Lancaster County Medical Society, and the Omaha Metro Medical Society to oversee the Managed Care enrollment function through a program referred to as Access Medicaid. Individuals are given a choice to enroll with an HMO plan or Primary Care Case Management (PCCM). The HMO is Share Advantage, administered by United Healthcare of the Midlands. The other choice for an individual is to sign up for the primary care case management plan. The PCCM provider network is administered by Primary Care+. Primary Care+ is responsible for making sure an adequate provider network is available with the Department paying claims on a fee for service basis. The PCCM is paid an administrative fee to maintain a network, provide case management and staff a quality assurance program. The primary care physician in the PCCM network is paid a gatekeeper fee to manage the care of the client.

Managed Care is required for all active Medicaid eligible individuals except for the following groups:

- Individuals with Medicare coverage,
- Individuals in a spend-down status,
- Individuals in a long term care facility or ICF/MR,
- Individuals eligible under Katie Beckett criteria,
- Individuals participating in a Home and Community-based Waiver,
- Individuals participating in Presumptive Eligibility period,
- Individuals participating in Subsidized Adoption programs,
- Individuals with certain health insurance coverage (only applies to med/surg),
- Individuals residing out of state for reasons other than referral/receipt of medical services or residing out of the plan area,
- and transplant recipients.

Managed care plan areas for Primary Care coverage are Douglas, Sarpy and Lancaster counties. Mental Health/Substance Abuse managed care coverage is statewide.

Effective 7/1/2005 Medicare eligibles and HCBS waiver recipients are mandatory for Behavioral Health Managed Care.

MAJOR MEDICAID PROGRAM CHANGES FY 1985 TO PRESENT

Note: DSS (Nebraska Department of Social Services) merged into the Nebraska Health and Human Services System in January 1997

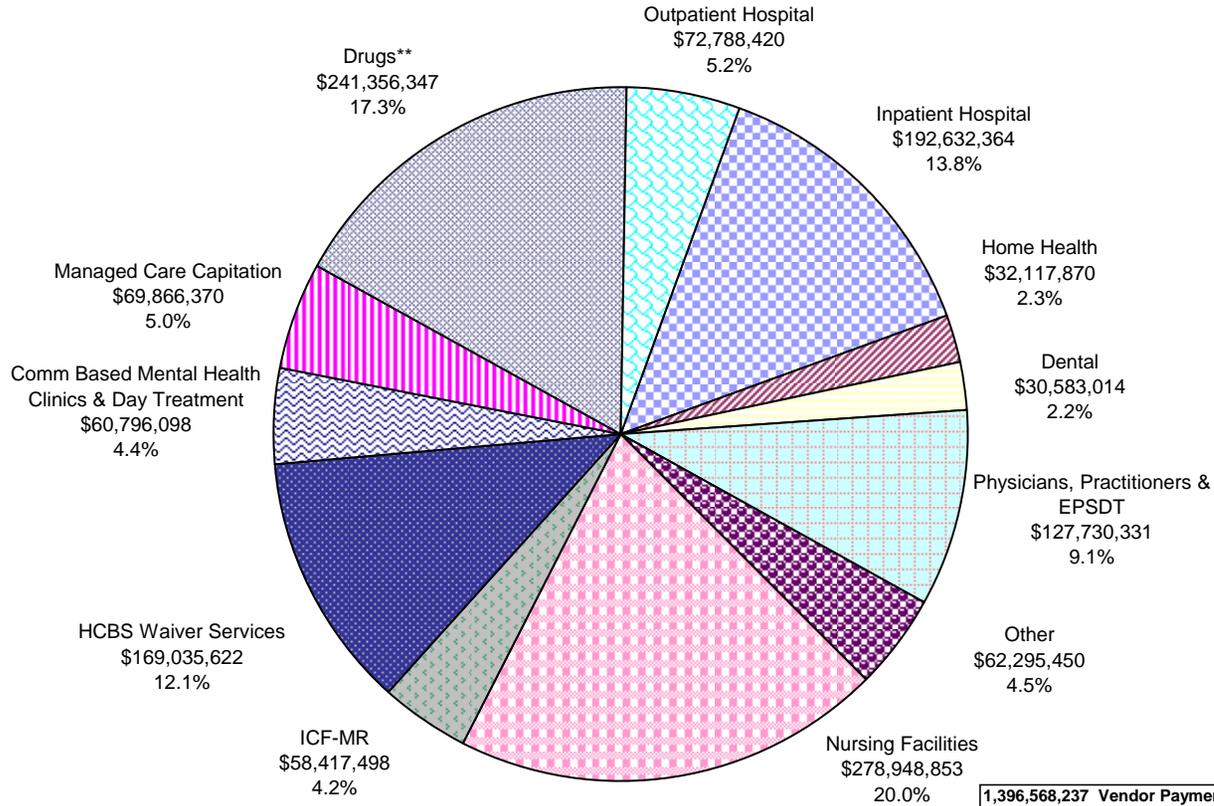
1. Expanded Medicaid coverage to Children under Age 21 meeting medically needy income and resource guidelines (Ribicoff). Required by LB 1127. Previously ADC and foster children were eligible. Effective 7/1/84.
2. Added nine months Medicaid coverage of ADC families who lose grant eligibility because of the expiration of the time limits on the work incentive disregards. Required by the Deficit Reduction Act of 1984 (P.L. 98-369). Effective 10/1/84.
3. Four months extended Medicaid coverage of ADC families who lose grant eligibility because of Child Support Collections. Required by Child Support Amendments of 1984 (P.L. 98-378).
4. Added Medicaid coverage of aliens not admitted for permanent residence but who have life threatening medical emergencies. Required by the Sixth Omnibus Budget Reconciliation Act (OBRA). (P.L. 99-509) Effective 1/1/87.
5. DSS implemented targeted case management to receive federal Medicaid funds for social service worker time spent with Medicaid clients. Effective 1/1/87.
6. DSS implemented Mental Retardation (MR) targeted case management to obtain federal participation for certain DPI-provided services. Effective 4/1/87.
7. Mental retardation Home and Community-Based Services Waiver for Adults was implemented by DSS to maximize federal funding for community services effective 9/1/87.
8. Added Medicaid coverage for Pregnant Woman and Infants with income below 100% of Office of Management and Budget poverty guidelines. Required by LB 229. Effective 7/1/88.
9. Presumptive Eligibility coverage for pregnant women meeting certain guidelines until eligibility for Medicaid is determined. Required by LB 229. Effective 7/1/88.
10. Medically needy level increased to \$392 due to increase in ADC standard per LB 518 effective 7/1/88.
11. Disproportionate share adjustments increase per diem rates for hospitals serving a large number of low-income patients per federal mandate effective 7/1/88.
12. Nebraska added a Spousal Impoverishment provision, which increased income and resource guidelines for nursing home clients who have a spouse at home. Required by LB 419. Effective 7/1/88.
13. Expanded coverage of Aged, Blind and Disabled to 85% of OMB poverty. Required by the Medicare Catastrophic Coverage Act of 1988 (P.L. 100-360). Effective 1/1/89. (An additional 5% each January 1 up to 100%).
14. Added 8 months (for total of 12 months) of Medicaid Coverage for ADC families losing grant eligibility due to entering employment. Required by LB 518. Effective 1/1/89. (100% state funded).
15. Aged and Disabled home and community-based waiver implemented per LB 42 effective 4/10/89.
16. Mental Retardation Children's home and community-based waiver implemented by DSS effective 6/1/89.
17. Infant Disproportionate Share payments to hospitals allow for payment above per diem rate for high cost infant care per federal law effective 7/1/89.
18. DSS implemented practitioner fee schedule with statewide rates for physicians and other practitioners. DSS administrative decision effective 8/1/89.

19. Federal Spousal Impoverishment allowed for higher income and resource standards than state provisions effective 10/1/89.
20. Federal expansion of eligibility for pregnant women and children through age 5, up to 133% of federal poverty level effective 4/1/90.
21. Federal Transitional Medical for ADC families who lose cash eligibility due to employment. This was previously state-funded and now federal participation is available (Family Support Act of 1988, effective 4/1/90).
22. Federally mandated coverage of medical services identified as a need through physical exams of children (OBRA 1989, effective 4/1/90).
23. OBRA 1987 nursing home requirements (health, safety and staffing) to be implemented by 10/1/90. Medicaid must reimburse nursing homes for the cost of these provisions.
24. Federal legislation allowed certain recipients of Veteran Administration pensions residing in nursing facilities to retain a larger portion of that pension. Effective 10/1/90.
25. Aged, blind and disabled income level increased to 100% of poverty 1/1/91 (was scheduled to go to 95% of poverty 1/1/91 before the budget reconciliation bill of 1990 accelerated the phase-in).
26. OBRA 90 legislation mandated changes for Medicaid coverage of prescribed drugs. Manufacturers must lower the price of certain drugs or rebate a portion of the cost. Effective 1/1/91.
27. Began coverage of children up to age 19 born after September 30, 1983, using 100% of poverty. OBRA 90, effective 7/1/91.
28. Nursing facility reimbursement plan change to incorporate individual client needs information into the payment methodology. Effective 7/1/92.
29. Settlement of lawsuit required hospital inpatient stays to be reimbursed at 85% of cost. Approved effective 7/1/92.
30. Outpatient reimbursement set to 85 percent of cost. Effective 7/1/92.
31. Elimination of Medical coverage for Medically Needy Caretaker relatives. Effective 3/1/93. As a result of Nebraska district court decision in December 1994, medical coverage for this population was reinstated back to the effective date of the elimination.
32. An Intergovernmental Transfer (IGT) process was established whereby revenues were passed from urban hospitals to DSS. Funding was used to reduce the required level of state general fund support and to increase Medicaid reimbursements to urban hospitals. Effective 7/1/93.
33. A physicians' tax was put in place for a two-year period to generate revenues used to increase Medicaid fees for primary care services. Effective 7/1/93, authorizing legislation expires 7/31/95.
34. DSS was directed by the legislature to set limitation requirements on the scope, duration, and amount of certain optional Medicaid services. Effective 10/1/93. (Implementation of some portions was delayed due to needed computer system changes.)
35. DSS implemented a system of co-payments on certain services as a method of cost sharing. Effective 4/1/94.
36. Began coverage of children under age 1 and pregnant women with a family income at or below 150% of poverty, effective 7/1/95.

37. Nebraska Medicaid Managed Care Program began 7/1/95. Payment for statewide coverage of mental health and substance abuse related care effective 7/17/95. Payment for managed care in an HMO or a Primary Care Case Management (PCCM) program for primary care services in the Omaha metro area and Lancaster County was effective 8/1/95.
38. Payment for inpatient hospital services for acute care based on a DRG (Diagnosis Related Group) per discharge rather than a per diem rate, effective 7/25/95.
39. Chapter 32 of the Medicaid policy was implemented 7/25/95, expanding mental health/substance abuse service coverage under Medicaid.
40. Effective 9/1/95, home health agencies services are prior authorized by the Peer Review Organization (PRO).
41. HHS implemented the Rehabilitation Option under Medicaid to receive federal Medicaid funds for community-based rehabilitative psychiatric services for clients with severe and persistent mental illness. Regulations approved February 26, 1996 for an April 1, 1995 effective date.
42. As a result of Welfare Reform, allowable assets for ADC cash assistance increased from \$1,000 to \$4,000 for a family size of 1 and to \$6,000 for a family of 2 or more, effective 7/1/97.
43. The 20% earned income disregard replaced the \$90, and \$30 and 1/3 time limited disregard for ADC grant cases, ADC Medically Needy and Children's Poverty programs. \$50 disregard of Child Support was dropped from the income test. Both changes in disregard were effective 10/1/97 as part of Welfare Reform.
44. Federal Welfare Reform limited groups of immigrants who could be covered under the Federal Medicaid Program. As a result, Nebraska no longer covers non-citizens (PRUCOL), but covers legal permanent residents who haven't been in the United States for 5 years with state funds, effective 10/1/97.
45. LB 608 (1997) created a new Assisted Living licensure category which combined Residential Care Facility and Domiciliary licensure categories. Regulation became effective 6/8/98.
46. Aged and Disabled Waiver was revised to add 2,000 additional slots over the next three years and additional services of Assisted Living, Nutrition Services, Case Management, Environmental Access Adaptations and Specialized Medical Equipment and Supplies (effective 1/1/98).
47. School age Medical (SAM) are eligible up to 100% of FPL through age 18. This was effective 5/1/98 with the federal approval of the Phase I State Plan for the Children's Health Insurance Program of the Balance Budget Act of 1997.
48. Children's Health provisions of the Balanced Budget Act of 1997 were further expanded, effective 9/1/98, with federal approval of the Phase II State Plan (LB 1063). Under this expansion, the income limit for children 18 and younger was increased to 185% of FPL.
49. Other LB 1063 provisions outside of Title XIX were implemented, effective 9/1/98.
 - 12 months of continuous eligibility for children 18 and younger who are determined eligible for Medicaid;
 - Income limit for pregnant women was increased to 185% of FPL;
 - Nebraska implemented the presumptive eligibility provision for all children up to their 19th birthday. This allowed qualified providers to grant Medicaid eligibility that ensures children receive prompt medical treatment.
50. LB 1070 (1998) created the Nebraska Health Care Trust Fund and the Nursing Facility Conversion Cash Fund. Funds generated through an intergovernmental transfer are to be used to convert all or a portion of a nursing facility to an assisted living facility or other alternatives to nursing facility care (Budget Program 342), funding Children's Health Insurance (Budget Program 344), and Excellence in Health Care Grants (Budget Program 343).

51. Expanded Medicaid coverage for the working disabled with income up to 250% of the federal poverty level, they pay a premium when income is between 200% and 250% of the federal poverty level effective 7/1/99.
52. Eliminated Medical/Surgical capitation managed care contract with Mutual of Omaha (Wellness Option HMO). Effective July 1, 2001.
53. Expanded Medicaid coverage of qualifying women with breast and/or cervical cancer, during the course of treatment, at the CHIP enhanced match rate. Effective September 1, 2001.
54. Eliminated Mental Health/Substance Abuse capitation managed care contract with ValueOptions. Effective December 31, 2002. Replaced with an Administrative Service Organization (ASO) contract with Magellan on July 1, 2002.
55. Reduced payments to nursing facilities for persons determined at a 35 or 36 level of care to assisted living rates. Effective February 2, 2002.
56. No practitioner rate increase. Required prior authorization for certain prescription drugs, and client co-pay increased from \$1 to \$2 for prescription drugs. Effective July 1, 2002.
57. LB 8 changed the treatment of income for eligibility of most Medicaid cases with children. Cases may no longer "stack" together eligibility standards for selected persons in a family. The family must now be budgeted as a single unit against a standard. Effective October 15, 2002.
58. Earned income disregards were reduced from 20% to a flat \$100 for Medicaid budgeting. Effective October 15, 2002.
59. Continuous eligibility for children was reduced from 12 months to 6 months. Effective October 15, 2002.
60. Reduced Transitional Medical Assistance from 24 months to 12 months. Effective October 15, 2002.
61. Reduced drug payments to pharmacies from AWP-10% to AWP-11%. Effective October 5, 2002.
62. Began Medicaid payment of inpatient claims for eligible inmates of the penitentiary. Effective June 2003.
63. Began processing inpatient claims for Regional Centers. Effective July 2003.
64. Limitation on orthodontic treatment. Effective August 18, 2003.
65. Ribicoff eliminated for 19 and 20 year olds and presumptive eligibility for children discontinued (LB 411) effective September 20, 2003.
66. Added Medicare and Home and Community-Based Waivers to mandatory groups for MH/SA managed care. Effective July 2005.

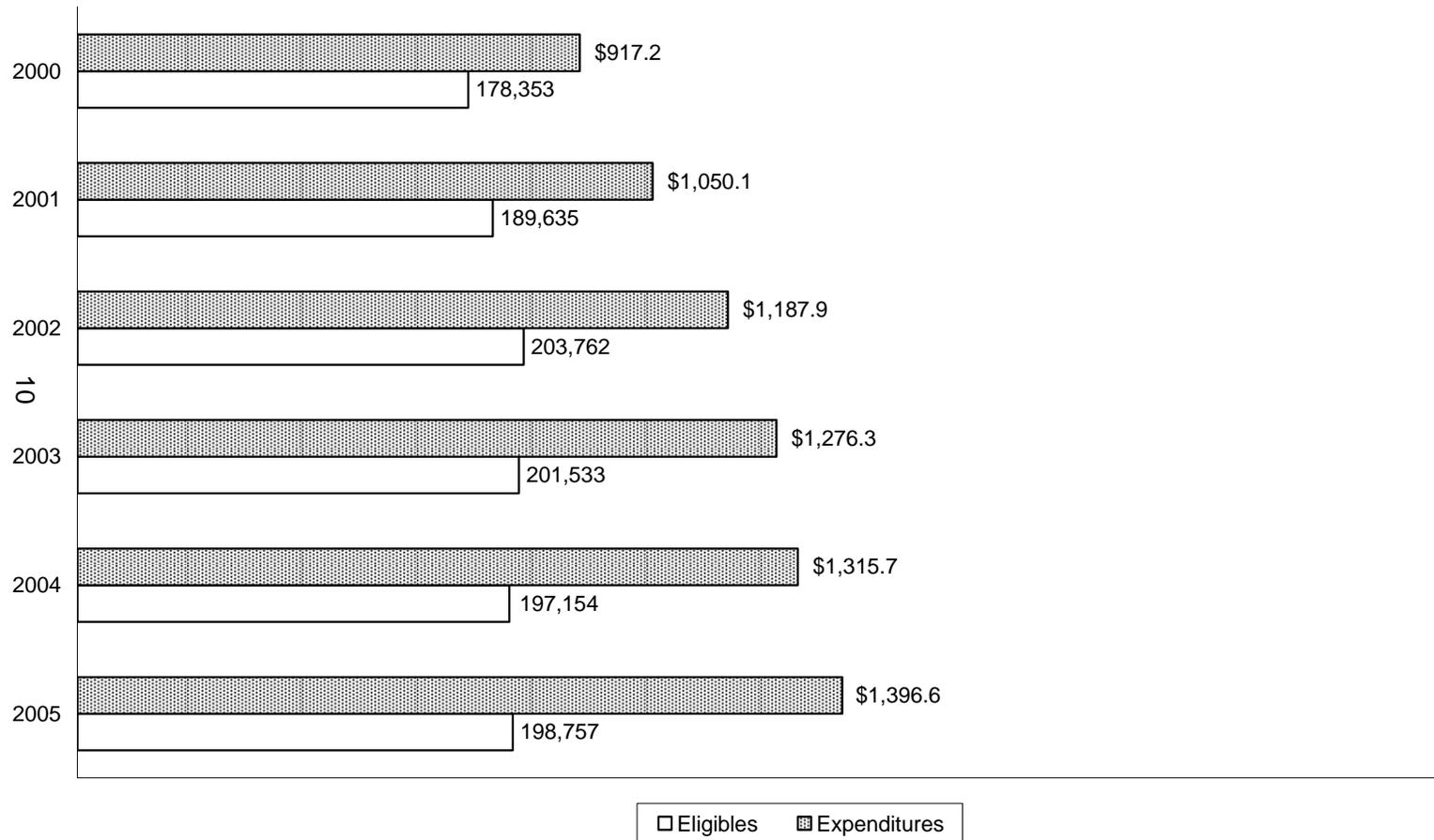
**NEBRASKA MEDICAID VENDOR EXPENDITURES BY SERVICE
FISCAL YEAR 2005***
(Includes CHIP/Title XXI and NFOCUS Payments for HCBS Waiver Services)
Total Vendor Payments \$1,396,568,237



* Includes payments to vendors only, not adjustments, refunds or certain payments for premiums nor services paid outside the Medicaid Payment System (MMIS) or NFOCUS.
(Payments for certain Waiver services are made through NFOCUS)
** \$57.1 million in offsetting drug rebates received from manufacturers is not reflected in the Drug expenditures of \$241,356,347
Expenditures may not sum due to rounding.

1,396,568,237	Vendor Payments
23,574,096	DSH/Rate Adjustments
21,844,109	Medicare Premiums
45,112,763	Intergovernmental Transfer (IGT)
54,017,105	Other Payments (MC, Transport, FICA)
(66,162,309)	Rebates/Refunds
(79,185,212)	GF Paid in Other Budget Programs
1,395,768,789	Net Program 344/348 Expenditures

**Nebraska Medicaid Total Vendor Expenditures (millions) and Average
Monthly Number of Eligible Persons
Fiscal Years 2000 - 2005**



*MEDICAID PERSONS AND EXPENDITURES BY BASIS OF ELIGIBILITY AND TYPE OF SERVICE
Fiscal Year Ending June 2005

MEDICAL SERVICE	TOTAL	AGED	BLIND	DISABLED	ADC CHILD	ADC ADULT	OTHER CHILDREN
TOTAL							
Average Monthly Unduplicated Persons*	151,433	17,674	214	25,701	20,302	18,910	68,633
Expenditures	\$1,396,568,237	\$364,993,808	\$2,850,048	\$563,731,351	\$62,725,030	\$104,133,138	\$298,134,862
INPATIENT HOSPITAL							
Persons	3,738	785	5	989	235	420	1,305
Expenditures	148,896,489	7,879,503	288,732	52,544,056	10,161,545	21,984,788	56,057,867
INPATIENT MENTAL-AGED							
Persons	1	1	0	0	0	0	0
Expenditures	219,588	219,588	0	0	0	0	0
INPATIENT MENTAL-SNF/ICF AGED							
Persons	0	0	0	0	0	0	0
Expenditures	0	0	0	0	0	0	0
INPATIENT MENTAL-UNDER 21							
Persons	551	0	**	30	27	3	493
Expenditures	43,516,307	0	310	2,087,112	2,223,332	80,163	39,125,370
ICF FOR THE MENTALLY RETARDED							
Persons	603	52	2	546	**	0	2
Expenditures	58,417,498	4,948,207	147,674	53,065,392	5,920	0	250,305
NURSING FACILITY							
Persons	7,624	6,421	8	1,184	**	6	6
Expenditures	278,948,853	218,848,749	634,036	58,460,045	8,941	297,060	700,022
PHYSICIANS SERVICES							
Persons	77,675	7,776	117	13,739	9,896	9,781	36,386
Expenditures	95,228,841	6,256,990	171,896	23,722,126	8,466,870	15,255,530	41,355,429
DENTAL SERVICES							
Persons	15,959	960	18	2,493	2,211	1,972	8,306
Expenditures	30,583,014	1,859,783	34,915	5,094,738	4,036,338	4,963,634	14,593,426
OTHER PRACTITIONER							
Persons	18,134	3,899	31	5,066	1,041	1,676	4,421
Expenditures	18,551,781	2,969,327	37,055	6,608,456	1,293,146	2,091,786	5,552,011
OUTPATIENT HOSPITAL							
Persons	25,871	5,219	47	6,550	2,071	3,372	8,613
Expenditures	72,788,420	6,307,434	186,997	25,501,620	5,265,288	13,406,018	22,121,063
CLINIC SERVICES							
Persons	15,847	492	36	5,349	1,769	1,615	6,586
Expenditures	60,796,098	828,792	162,346	24,473,579	5,987,992	4,231,383	25,112,006
HOME HEALTH							
Persons	2,229	784	7	1,036	69	45	289
Expenditures	32,117,876	8,265,117	65,031	21,013,391	278,021	205,330	2,290,986
FAMILY PLANNING							
Persons	5,880	0	15	933	497	2,569	1,866
Expenditures	6,249,881	0	8,641	579,554	451,012	2,455,010	2,755,664
LAB AND RADIOLOGY							
Persons	11,663	481	24	2,419	1,048	2,588	5,103
Expenditures	14,522,039	347,102	34,600	4,227,065	988,510	4,016,046	4,908,716
PRESCRIBED DRUGS							
Persons	83,916	15,643	162	20,808	8,293	9,550	29,459
Expenditures	241,356,347	61,441,663	727,617	113,961,353	9,964,792	16,418,647	38,842,275
MANAGED CARE							
Persons	20,921	160	18	1,698	5,153	3,505	10,387
Expenditures	69,868,370	1,916,784	188,972	18,278,487	9,113,797	15,942,982	24,425,368
WAIVER SERVICES							
Persons	1,470	1,260	1	209	0	0	**
Expenditures	169,035,622	36,193,830	18,617	132,822,961	0	0	214
OTHER CARE							
Persons	18,643	3,604	50	6,573	1,476	1,271	5,669
Expenditures	47,773,411	6,711,000	161,374	21,185,246	3,111,614	2,533,152	14,071,025
SCREENING SERVICES							
Persons	8,118	0	2	122	1,399	265	6,330
Expenditures	7,699,828	0	1,236	106,171	1,367,913	251,392	5,973,116

*Expenditures are total dollars paid for the year. Persons are average monthly unduplicated recipients. Within a month, a person is counted only once regardless of the number of times the service is utilized and counted only once in the total regardless of the number of different services received.

Source of Funding

The Medicaid Program is supported by federal and state general funds. Until July 1, 1986, counties also shared in part of the costs. The federal match rate is evaluated every year and is never less than 50 percent under Title XIX. Under the Title XXI provisions of the Balance Budget Act of 1997, an enhanced federal match rate became available for services provided under the Children's Health Insurance Program. The enhanced rate is 70% of the federal match rate plus thirty percentage points.

FEDERAL AND COUNTY MATCH RATES

Title XIX

Time Periods	Federal Match Rate	Percent Change from Prior Years	Time Periods	County Match Rates
7-1-63 to 6-30-65	55.10%		Before 1980	20.00%
7-1-65 to 6-30-66	54.39%	-1.3%	1980	18.00%
7-1-66 to 6-30-67	60.39%	11.0%	1981	16.00%
7-1-67 to 6-30-69	60.48%	0.1%	1982	14.00%
7-1-69 to 6-30-71	57.25%	-5.3%	1983	14.00%
7-1-71 to 6-30-73	58.48%	2.1%	1984	14.00%
7-1-73 to 6-30-75	57.86%	-1.1%	1985	9.33%
7-1-75 to 9-30-77	55.59%	-3.9%	1986	4.67%
7-1-77 to 9-30-77	55.59%	0.0%	1987	0.00%
10-1-77 to 9-30-79	53.46%	-3.8%		
10-1-79 to 9-30-81	57.62%	7.8%		
10-1-81 to 9-30-83	58.12%	0.9%		
10-1-83 to 9-30-85	57.13%	-1.7%		
10-1-85 to 9-30-86	57.11%	0.0%		
10-1-86 to 9-30-87	58.06%	1.7%		
10-1-87 to 9-30-88	59.73%	2.9%		
10-1-88 to 9-30-89	60.37%	1.1%		
10-1-89 to 9-30-90	61.12%	1.2%		
10-1-90 to 9-30-91	62.71%	2.6%		
10-1-91 to 9-30-92	64.50%	2.9%		
10-1-92 to 9-30-93	61.32%	-4.9%		
10-1-93 to 9-30-94	61.98%	1.1%		
10-1-94 to 9-30-95	60.40%	-2.5%		
10-1-95 to 9-30-96	59.49%	-1.5%		
10-1-96 to 9-30-97	59.13%	-0.6%		
10-1-97 to 9-30-98	61.17%	3.5%		
10-1-98 to 9-30-99	61.46%	0.5%	73.02%	
10-1-99 to 9-30-00	60.88%	-0.9%	72.62%	-0.5%
10-1-00 to 9-30-01	60.38%	-0.8%	72.27%	-0.5%
10-1-01 to 9-30-02	59.55%	-1.4%	71.69%	0.8%
10-1-02 to 9-30-03	59.52%	-0.1%	71.66%	0.0%
10-1-03 to 9-30-04	59.89%	0.6%	71.92%	0.4%
10-1-04 to 9-30-05	59.64%	-0.4%	71.75%	-0.2%
10-1-05 to 9-30-06	59.68%	0.1%	71.78%	0.0%

TITLE XXI

*Enhanced Federal Share April 2003-Sept 2003 62.5% and October 2003-June 2004 62.84%

NEBRASKA MEDICAID EXPENDITURES BY FUND TYPE*
(Includes Budget Programs 344 and 348)

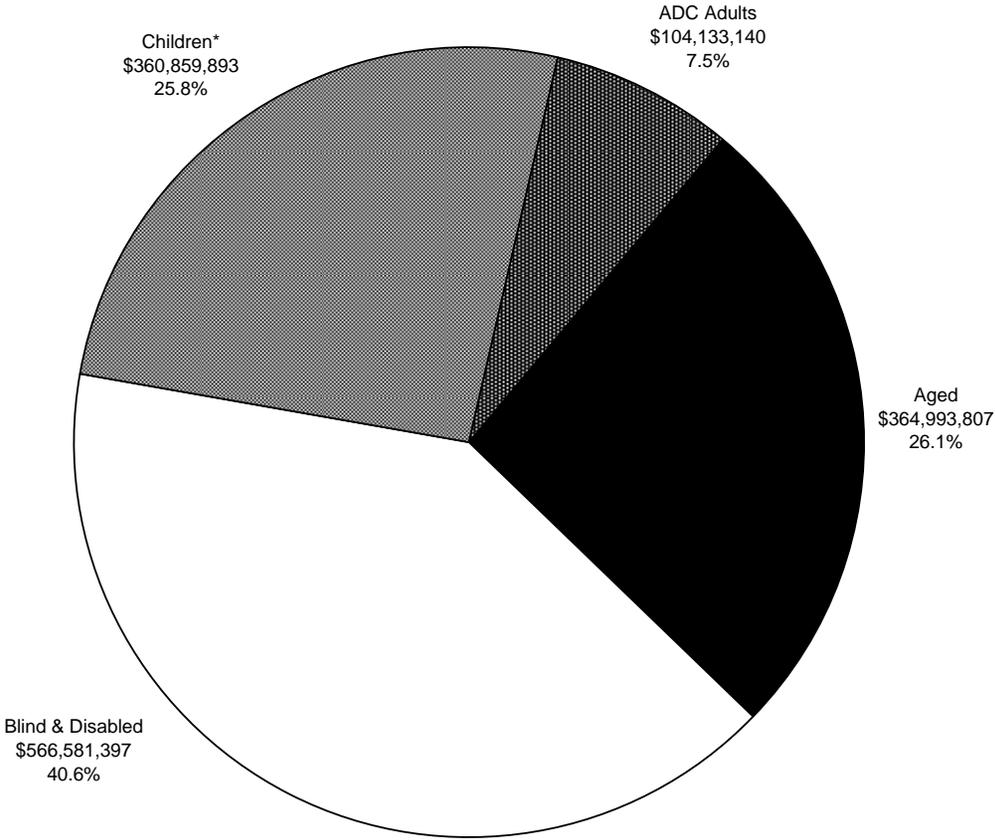
	GENERAL	CASH**	FEDERAL	TOTAL	GF AS % OF TOTAL STATE SPENDING***	GF from all other programs
FY2005	468,605,808	22,683,924	904,479,057	1,395,768,789	17.2%	79,851,217
FY2004	390,628,600	27,837,886	925,752,755	1,344,219,241	15.2%	
FY2003	388,750,503	20,666,111	842,847,038	1,252,263,652	14.8%	
FY2002	381,848,545	30,808,524	776,874,581	1,189,531,650	14.7%	
FY2001	364,141,212	10,992,272	693,605,699	1,068,739,183	14.7%	
FY2000	316,511,454	4,086,842	663,136,996	983,735,292	13.5%	
FY1999	303,488,094	622,745	602,363,598	906,474,437	13.6%	
FY1998	273,146,679	-	508,684,894	781,831,573	14.1%	
FY1997	270,671,054	-	451,372,079	722,043,133	14.5%	
FY1996	250,156,474	-	418,711,525	668,867,999	14.2%	
FY1995	213,336,512	10,600,000	391,051,459	614,987,971	12.7%	
FY1994	203,021,418	9,200,000	374,411,781	586,633,199	12.6%	
FY1993	196,537,535	-	333,289,683	529,827,218	12.2%	
FY1992	139,695,741	-	305,159,804	444,855,545	9.0%	
FY1991	125,569,152	-	233,522,155	359,091,307	9.1%	
FY1990	96,343,598	-	189,239,880	285,583,478	8.1%	
FY1989	99,451,067	-	159,585,687	259,036,754	10.1%	
FY1988	87,007,086	-	142,686,892	229,693,978	9.8%	
FY1987	74,307,156	5,700,000	120,884,982	200,892,138	8.8%	
FY1986	57,207,316	7,468,116	109,425,207	174,100,639	6.9%	
FY1985	51,203,416	14,124,402	90,138,036	155,465,854	6.3%	
FY1984	46,286,082	15,551,866	87,148,510	148,986,458	6.2%	
FY1983	41,754,978	17,201,955	93,433,412	152,390,345	5.7%	
FY1982	38,426,377	18,093,036	79,672,068	136,191,481	5.3%	
FY1981	30,536,572	15,030,496	71,763,856	117,330,924	4.5%	
FY1980	26,847,715	16,576,124	62,263,255	105,687,094	4.6%	
FY1979	24,024,548	14,732,315	54,153,104	92,909,967	2.9%	
FY1978	19,406,136	13,333,402	46,654,863	79,394,401	NA	

*Medicaid Expenditures include all refunds, cancellations and other accounting adjustments

** Cash Expenditures prior to FY 1988 were primarily County Funds

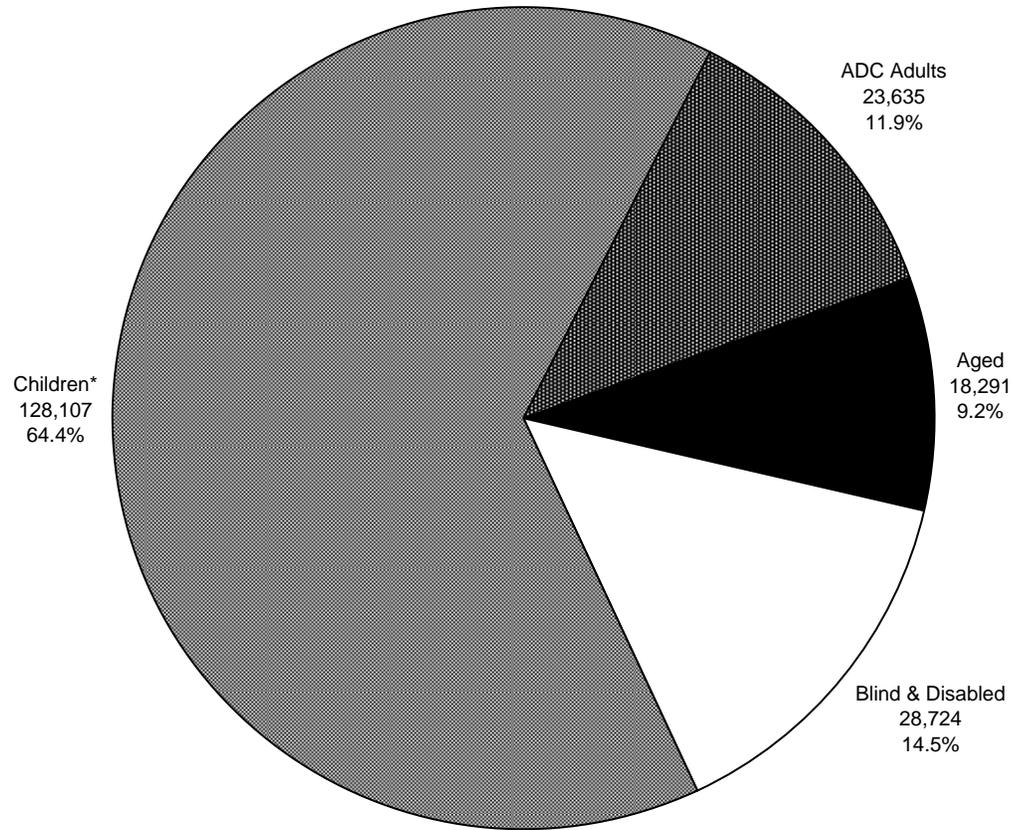
*** Includes Funds 10000 and 33000

NEBRASKA MEDICAID VENDOR EXPENDITURES BY ELIGIBILITY
Fiscal Year 2005
Total: \$1,396,568,237



*Includes pregnant women not otherwise eligible

**NEBRASKA MEDICAID AVERAGE MONTHLY
ELIGIBLE PERSONS BY CATEGORY
Fiscal Year 2005
Total: 198,757**



*Includes pregnant women not otherwise eligible

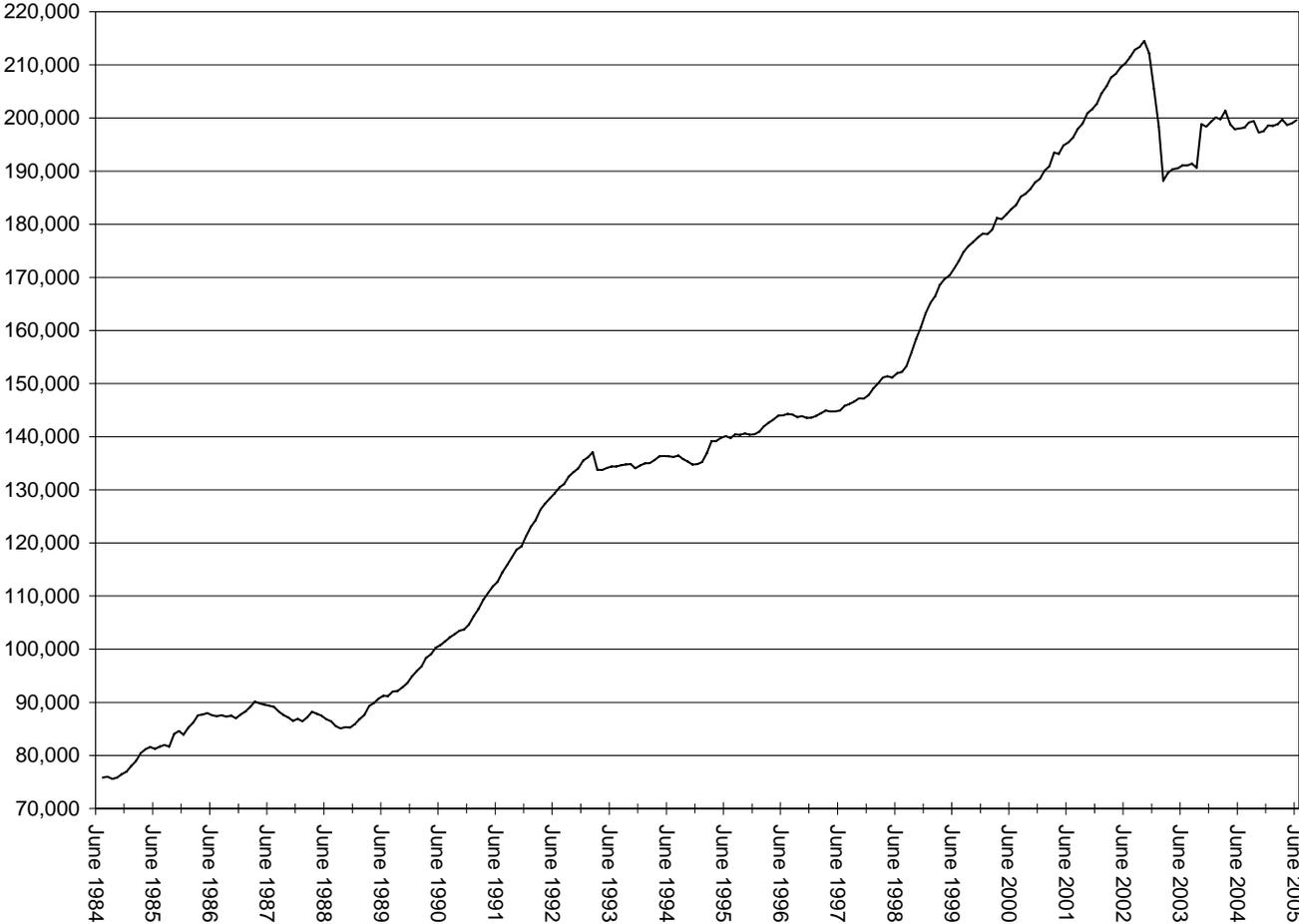
**NEBRASKA
UNDUPLICATED ANNUAL MEDICAID ELIGIBLES**

FISCAL YEAR	TOTAL
FY2005	260,043
FY2004	255,791
FY2003	266,690
FY2002	256,205
FY2001	240,590
FY2000	228,419
FY1999	211,407
FY1998	209,668
FY1997	193,159
FY1996	183,379
FY1995	177,732
FY1994	172,231
FY1993	173,479
FY1992	160,354
FY1991	141,544
FY1990	129,499
FY1989	120,681
FY1988	120,477
FY1987	122,770
FY1986	116,388

**NEBRASKA
AVERAGE MONTHLY MEDICAID ELIGIBLES**

FISCAL YEAR	TOTAL	
FY2005	198,757	0.81%
FY2004	197,154	-2.17%
FY2003	201,533	-1.09%
FY2002	203,762	7.45%
FY2001	189,635	6.33%
FY2000	178,353	9.44%
FY1999	162,964	9.52%
FY1998	148,798	3.16%
FY1997	144,239	1.90%
FY1996	141,555	3.34%
FY1995	136,976	1.34%
FY1994	135,160	0.98%
FY1993	133,849	9.61%
FY1992	122,118	14.80%
FY1991	106,378	11.23%
FY1990	95,641	9.41%
FY1989	87,412	-0.05%
FY1988	87,454	-1.06%
FY1987	88,390	3.99%
FY1986	85,000	8.76%
FY1985	78,155	4.20%
FY1984	75,008	7.12%
FY1983	70,021	5.95%
FY1982	66,089	2.59%
FY1981	64,418	4.44%
FY1980	61,681	7.60%
FY1979	57,327	-0.31%
FY1978	57,506	5.92%
FY1977	54,292	

NEBRASKA MEDICAID ELIGIBLE PERSONS
June 2005 Persons 199,632



**NEBRASKA HEALTH & HUMAN SERVICES
Percent Change Between Fiscal Years By Eligibility Category***

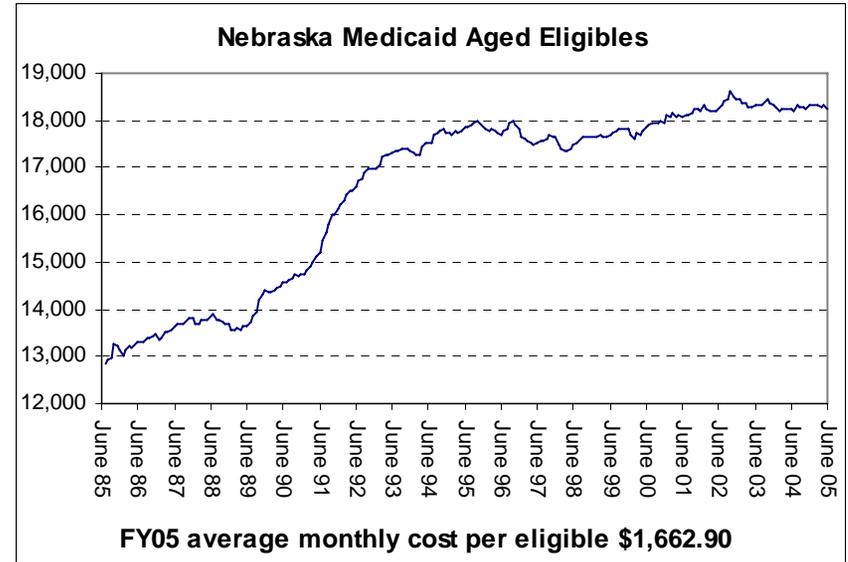
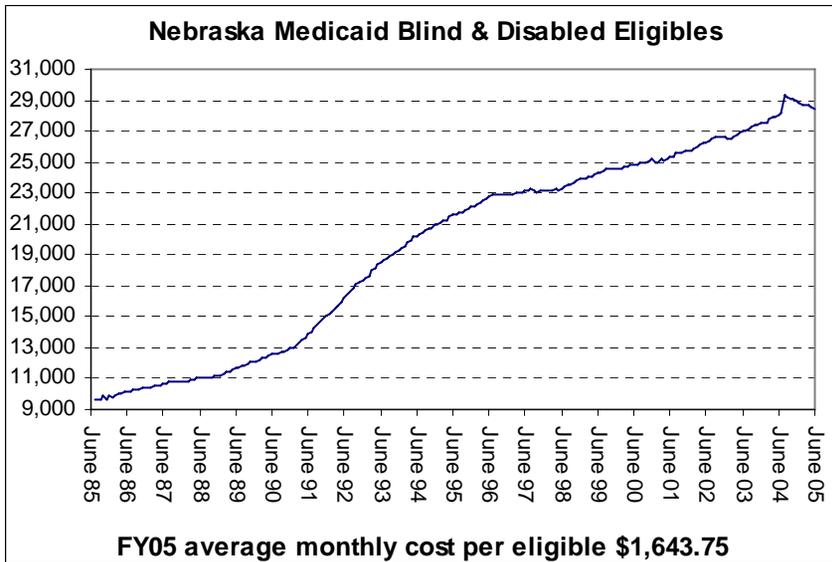
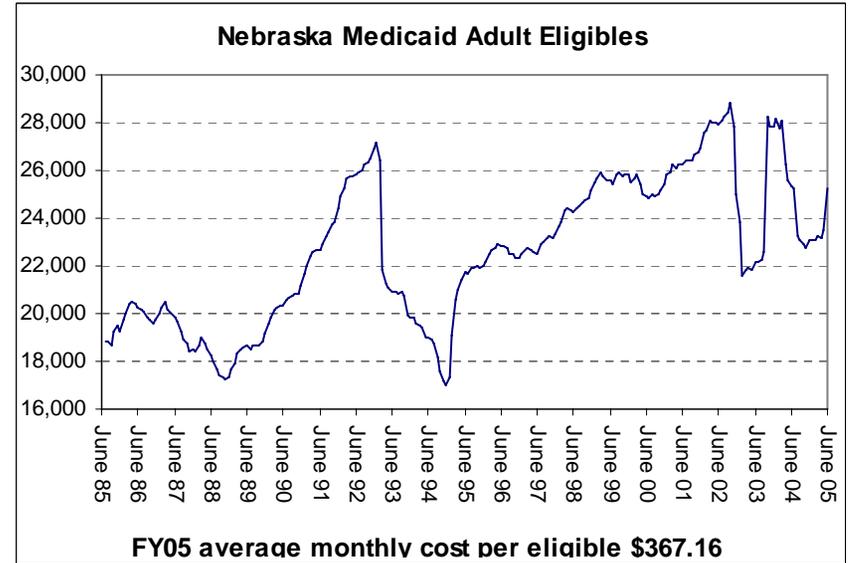
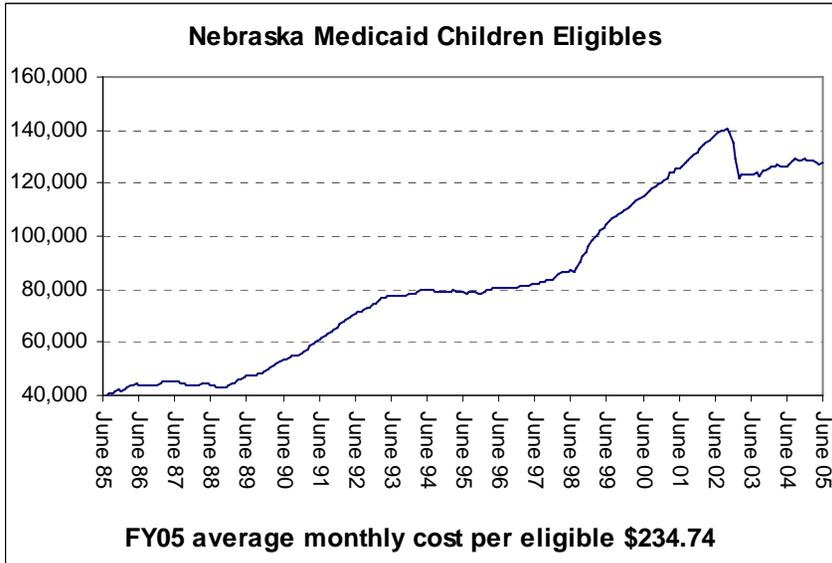
Average Monthly Medicaid Eligibles:

	FY94 TO FY95	FY 95 TO FY96	FY96 TO FY97	FY97 TO FY98	FY98 TO FY99	FY99 TO FY00	FY00 TO FY01	FY01 TO FY 02	FY02 TO FY 03	FY03 TO FY 04	FY04 TO FY 05	Average Monthly Cost/Eligible	FY05 Total Expenditures
AGED	2.00%	0.65%	-0.75%	-1.09%	0.74%	0.63%	1.48%	0.99%	1.08%	-0.58%	-0.02%	\$ 1,662.90	\$364,993,807
BLIND	-2.40%	-5.35%	3.61%	6.73%	-8.82%	-0.61%	1.55%	3.65%	2.20%	6.03%	-2.03%	\$ 985.50	\$2,850,054
DISABLED	7.98%	5.95%	3.67%	0.85%	3.11%	3.05%	2.01%	2.86%	3.29%	3.36%	4.33%	\$ 1,649.32	\$563,731,343
ADC ADULT	-4.47%	16.82%	1.28%	4.74%	6.58%	1.54%	0.06%	6.46%	-8.37%	4.22%	-9.15%	\$ 367.16	\$104,133,140
CHILDREN	1.07%	0.05%	2.17%	4.29%	13.95%	14.72%	9.52%	9.57%	-0.75%	-4.73%	2.24%	\$ 234.74	\$360,859,893
TOTAL	1.34%	3.34%	1.90%	3.16%	9.52%	9.44%	6.33%	7.45%	-1.09%	-2.17%	0.81%	\$ 585.54	\$1,396,568,237

Average Monthly Medicaid Eligibles:

	FY94	FY95	FY96	FY97	FY98	FY99	FY00	FY01	FY02	FY03	FY04	FY05
AGED	17,382	17,730	17,846	17,713	17,520	17,650	17,761	18,025	18,204	18,401	18,294	18,291
BLIND	233	227	215	223	238	217	216	219	227	232	246	241
DISABLED	19,173	20,703	21,935	22,740	22,934	23,648	24,370	24,860	25,571	26,412	27,300	28,483
ADC ADULT	19,961	19,069	22,276	22,562	23,632	25,187	25,574	25,590	27,242	24,963	26,016	23,635
CHILDREN	78,410	79,247	79,283	81,001	84,474	96,262	110,432	120,941	132,518	131,525	125,298	128,107
TOTAL	135,159	136,976	141,555	144,239	148,798	162,964	178,353	189,635	203,762	201,533	197,154	198,757

*Source for all data: Medicaid Monthly Summary Report Plus NFOCUS Medicaid Expenditures



NEBRASKA MEDICAID ELIGIBLE PERSONS BY HHSS SERVICE AREA

Fiscal Year 2005

- The Eastern Service Area (Douglas and Sarpy Counties) accounts for over one-third of all Nebraska of the Medicaid eligible persons.
- The Central Service Area (includes 21 Counties), the Western Service Area (includes 29 Counties), and the Northern Service Area (includes 24 Counties) each account for roughly one-seventh of the state Medicaid population.
- The Southeastern Service Area (includes Lancaster and 16 other Counties) accounts for the remaining one-fifth of Nebraska Medicaid eligible persons.

Number of Persons Eligible for Medicaid

By Health & Human Services System Service Areas

	Percentage of State Total
Western	11.1%
Northern	13.3%
Central	14.7%
Eastern	31.5%
Southeastern	28.9%
Out-of-State	0.5%

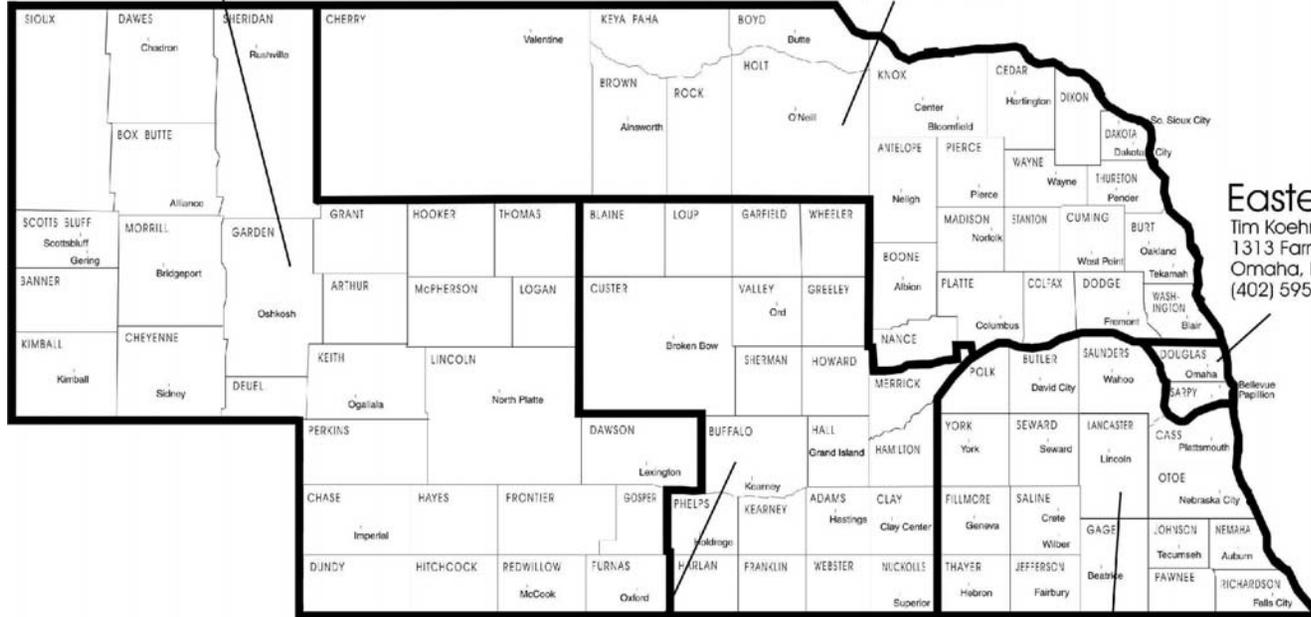
Note: In May 2004, Nebraska HHSS expanded the three service areas into five service areas shown above. See the HHSS Service Area map for regional boundaries.

Nebraska Health and Human Services System Service Areas

Western
 Lonnie Starke
 P.O. Box 540
 1600 10th St.
 Gering, NE 69341
 (308) 436-6559

Northern
 Richard Gamel
 P.O. Box 339
 209 N. 5th St.
 Norfolk, NE 68702
 (402) 370-3124

Eastern
 Tim Koehn
 1313 Farnam
 Omaha, NE 68102
 (402) 595-2880



Map 88 1/05

Central
 Yolanda Nuncio
 P.O. Box 2440
 208 N. Pine St.
 Grand Island, NE 68802
 (308) 385-6126

Southeast
 Jeremy Hohlen
 P.O. Box 98933
 1050 "N" St.
 Lincoln, NE 68509-8933
 (402) 471-5328

**Nebraska Medicaid Eligible Persons by Age and Race
June 2005**

	Total	White (Non-Hispanic)	Black/African American	American Indian/Alaskan Native	Asian	Hawaiian/Pacific Islander	Hispanic/Latino AND one or more races	More than one race (Non-Hispanic/Latino)	Unknown
Total*	212,865	140,717	28,393	6,993	2,436	112	27,923	1,024	5,267
Percent of Total	100.0%	66.1%	13.3%	3.3%	1.1%	0.1%	13.1%	0.5%	2.5%
Persons by Age									
Under 1	18,969	10,757	1,814	524	266	16	4,680	180	732
1 - 5	42,252	24,662	5,213	1,487	465	33	8,797	375	1,221
6 - 14	53,899	33,050	8,522	2,179	530	26	8,328	126	1,138
15 - 18	18,777	12,186	3,207	812	152	7	1,902	70	442
19 - 20	2,603	1,676	500	105	18	1	198	36	67
21 - 64	44,942	31,969	7,166	1,455	377	13	2,614	222	1,127
65 - 84	12,964	10,638	898	204	303	7	660	6	247
85 - 125	18,459	15,779	1,073	227	326	7	745	10	293

*Due to rounding, columns and rows may not total.

Note: Because a different source of information was used the totals in this table may not match other tables and graphs in this report.

AVERAGE MONTHLY ELIGIBLE PERSONS BY COUNTY AND AGE
State Fiscal Year 2005

Total*	0	1-5	6-14	15-18	19-20	21-64	65-84	85-125	
Total*	200,536	19,111	42,374	54,015	18,823	2,818	45,100	12,989	5,505
ADAMS	3,908	384	794	956	365	64	903	308	134
ANTELOPE	877	50	161	254	111	10	151	90	51
ARTHUR	35	2	8	12	4	1	7	0	1
BANNER	57	3	7	23	18	1	2	3	0
BLAINE	60	6	10	32	8	1	3	1	0
BOONE	493	28	63	150	53	1	82	67	49
BOX BUTTE	1,642	141	338	446	158	18	350	123	68
BOYD	262	22	45	66	36	1	41	31	21
BROWN	430	38	76	121	67	2	58	37	31
BUFFALO	4,632	464	981	1,203	537	58	960	289	141
BURT	810	60	124	216	84	7	190	87	43
BUTLER	762	49	130	205	60	5	175	93	46
CASS	2,096	178	450	634	204	27	392	133	76
CEDAR	675	59	136	188	58	8	99	61	66
CHASE	380	35	73	92	39	4	65	45	27
CHEERY	962	73	203	323	98	9	132	99	27
CHEYENNE	1,005	93	203	268	83	9	232	85	32
CLAY	692	63	122	193	62	9	138	79	27
COLFAX	1,032	193	302	248	59	7	90	87	45
CUMING	741	92	159	189	55	6	112	76	54
CUSTER	1,480	103	272	445	176	9	275	146	54
DAKOTA	3,002	433	773	811	228	27	471	186	73
DAVES	1,236	102	237	341	162	14	281	63	37
DAWSON	3,510	500	849	1,039	288	26	505	215	89
DEUEL	150	12	24	41	15	0	31	15	12
DIXON	502	49	109	138	44	2	89	50	22
DODGE	4,299	441	865	1,112	378	51	1,000	296	156
DOUGLAS	64,765	6,154	13,840	17,682	6,159	954	16,027	3,072	878
DUNDY	267	20	45	75	22	0	41	44	20
FILLMORE	717	41	115	206	145	6	99	67	39
FRANKLIN	396	23	61	114	43	4	82	43	25
FRONTIER	241	30	47	63	31	4	33	19	13
FURNAS	678	38	108	186	82	1	136	90	37
GAGE	2,881	178	441	634	228	27	997	248	128
GARDEN	261	10	40	68	37	2	46	42	16
GARFIELD	252	17	51	69	30	3	33	34	15
GOSPER	151	14	28	45	14	1	27	12	11
GRANT	61	4	12	18	13	1	8	5	0
GREELEY	278	19	50	83	30	1	47	35	13
HALL	8,613	957	2,225	2,385	659	107	1,713	397	171
HAMILTON	783	62	162	232	92	8	130	62	35
HARLAN	364	24	67	95	33	4	77	48	16
HAYES	58	4	7	21	12	0	10	3	2
HITCHCOCK	407	30	86	120	44	4	66	43	15
HOLT	1,401	110	258	403	161	16	249	132	72
HOOKER	63	1	14	19	11	0	2	10	7
HOWARD	718	55	134	228	74	6	128	63	30
JEFFERSON	953	54	146	226	79	10	239	128	71
JOHNSON	446	52	96	100	35	4	75	56	29
KEARNEY	635	62	118	163	51	6	163	39	34
KEITH	874	73	160	241	79	11	199	84	27
KEYA PAHA	76	8	10	35	6	0	8	7	1
KIMBALL	488	45	102	161	53	3	78	33	13
KNOX	1,317	87	215	371	146	11	217	173	97
LANCASTER	26,046	2,662	5,818	6,479	2,119	417	6,596	1,455	501
LINCOLN	4,406	397	879	1,027	395	65	1,190	327	126
LOGAN	71	6	20	20	11	0	12	2	0
LOUP	51	2	6	20	8	0	7	6	2
MADISON	4,739	524	1,053	1,229	436	75	960	320	143
MCPHERSON	30	0	6	12	5	0	6	1	0
MERRICK	865	51	144	252	78	8	225	80	28
MORRILL	824	52	143	270	99	11	161	53	36
NANCE	531	38	80	119	41	2	137	81	32
NEMAHA	824	58	118	198	77	14	234	83	43
NUCKOLLS	533	39	91	123	53	4	121	54	49
OTOE	1,421	117	256	361	130	19	324	147	68
PAWNEE	1,403	122	241	477	243	27	254	20	19
PERKINS	320	17	41	86	32	4	64	50	25
PHELPS	247	19	37	70	30	2	49	18	22
PIERCE	1,019	87	204	254	76	10	234	107	47
PLATTE	694	58	139	192	75	8	114	70	39
POLK	2,999	367	695	809	229	41	570	195	93
RED WILLOW	421	43	91	110	34	2	67	45	31
RICHARDSON	1,282	116	241	361	115	12	280	110	47
ROCK	1,212	74	204	310	113	12	274	146	79
SALINE	188	18	39	56	24	1	22	13	14
SARPY	1,228	167	261	307	85	14	233	102	60
SAUNDERS	7,208	711	1,750	2,060	709	96	1,479	274	128
SCOTTS BLUFF	1,612	123	314	451	164	16	327	151	67
SEWARD	6,568	597	1,372	1,780	616	84	1,495	467	157
SHERIDAN	1,005	91	201	247	100	9	210	94	54
SHERMAN	888	76	188	275	105	7	134	68	37
SIOUX	383	35	68	103	44	4	54	45	31
STANTON	83	4	26	27	11	0	8	8	0
THAYER	474	36	103	159	53	3	66	29	27
THOMAS	598	30	75	162	54	3	114	111	49
THURSTON	55	4	7	14	11	1	11	5	2
VALLEY	2,176	160	512	679	247	35	433	85	24
WASHINGTON	564	42	95	157	50	4	112	71	34
WAYNE	1,144	107	233	277	87	13	240	116	71
WEBSTER	679	72	140	174	51	14	156	42	30
WHEELER	451	20	76	107	31	7	113	63	35
YORK	79	6	21	32	7	0	7	3	4
OUT OF STATE	1,343	118	240	382	162	13	247	123	58

*County totals may not match other tables due to rounding.

Note: Because a different source of information was used the totals in this table may not match other tables and graphs in this report.

AVERAGE MONTHLY MEDICAID ELIGIBLE PERSONS BY COUNTY AND ELIGIBILITY CATEGORY
State Fiscal Year 2005

County	Total*	Aged	Blind/Disabled	ADC Adults	All Children
State Totals	200,636	18,290	28,624	54,079	99,643
Adams	3,908	439	642	921	1906
Antelope	877	140	117	105	515
Arthur	35	1	5	5	23
Banner	57	3	1	4	49
Blaine	60	1	2	4	54
Boone	493	116	55	68	254
Box Butte	1,642	189	182	485	785
Boyd	282	51	41	20	151
Brown	430	68	46	29	287
Buffalo	4,632	427	535	1200	2471
Burt	810	129	151	144	386
Butler	762	139	127	136	360
Cass	2,096	208	242	429	1217
Cedar	675	126	77	75	398
Chase	380	71	52	51	206
Cherry	962	121	96	129	616
Cheyenne	1,005	116	168	215	506
Clay	692	105	99	119	369
Colfax	1,032	130	61	160	681
Cuming	741	127	91	88	435
Custer	1,480	198	204	181	897
Dakota	3,002	257	270	654	1821
Dawes	1,236	100	153	352	633
Dawson	3,510	299	344	616	2252
Deuel	150	27	20	20	84
Dixon	502	72	65	64	302
Dodge	4,299	449	664	941	2245
Douglas	64,765	3896	9166	23434	28268
Dundy	267	64	31	18	154
Fillmore	717	105	72	79	462
Franklin	396	67	57	70	202
Frontier	241	32	27	30	152
Furnas	678	127	106	73	372
Gage	2,881	370	844	435	1233
Garden	261	57	35	26	143
Garfield	252	48	29	15	159
Gosper	151	22	21	25	82
Grant	61	4	6	8	42
Greeley	278	48	34	42	155
Hall	8,613	561	1016	2358	4678
Hamilton	783	96	78	138	470
Harlan	364	65	55	65	179
Hayes	58	5	8	3	42
Hitchcock	407	57	54	37	259
Holt	1,401	201	215	148	837
Hooker	63	16	3	2	42
Howard	718	93	68	150	407
Jefferson	953	198	195	166	394
Johnson	446	83	54	84	225
Kearney	635	72	134	94	335
Kelth	874	111	141	159	463
Keya Paha	76	8	5	6	56
Kimball	488	46	65	54	323
Knox	1,317	269	152	249	647
Lancaster	26,046	1924	4148	7519	12456
Lincoln	4,406	446	802	1175	1983
Logan	71	2	9	24	37
Loup	51	8	8	2	33
Madison	4,739	462	616	1160	2502
McPherson	30	1	3	8	18
Merrick	865	106	172	136	451
Morrill	824	88	113	170	454
Nance	531	111	120	54	246
Nemaha	824	122	156	203	343
Nuckolls	533	102	99	64	268
Otoe	1,421	214	228	300	680
Pawnee	320	74	57	27	163
Perkins	247	40	36	39	132
Phelps	1,019	152	173	207	487
Pierce	694	108	84	98	404
Platte	2,999	286	386	594	1733
Polk	421	74	45	60	241
Red Willow	1,282	156	222	146	757
Richardson	1,212	222	196	193	601
Rock	188	27	21	13	126
Saline	1,228	162	191	136	738
Sarpy	7,208	400	784	2151	3873
Saunders	1,612	214	233	277	888
Scotts Bluff	6,568	614	1006	1716	3232
Seward	1,005	147	172	107	580
Sheridan	888	105	79	190	515
Sherman	383	76	42	42	224
Sioux	83	7	7	4	65
Stanton	474	54	51	68	301
Thayer	598	159	104	49	287
Thomas	55	7	10	7	31
Thurston	2,176	106	176	987	907
Valley	564	104	84	76	299
Washington	1,144	184	152	226	582
Wayne	679	72	106	144	358
Webster	451	98	98	67	188
Wheeler	79	7	8	0	64
York	1,343	180	203	146	814
Out-of-State	1,403	39	144	316	904

*County totals may not match other tables due to rounding.

Note: Because a different source of information was used the totals in this table may not match other tables and graphs in this report.

**MEDICAID (TITLE XIX): EXPENDITURES BY SERVICE
BY COUNTY - SFY 2005**

COUNTY	TOTAL*	HOSPITAL		ICF MENTALLY RETARDED	NURSING FACILITY	PHYSICIAN	DENTAL	PRESCRIBED DRUGS	OTHER
		INPATIENT	OUTPATIENT						
STATE TOTALS*	\$1,395,169,416	\$148,960,620	\$72,917,961	\$58,417,498	\$278,977,866	\$88,300,011	\$30,316,863	\$241,364,663	\$475,914,944
Adams	30,301,031	\$2,894,615	\$1,378,557	\$365,547	\$6,265,100	\$2,047,177	\$627,817	\$5,525,049	\$11,197,169
Antelope	5,762,096	\$494,926	\$574,391	\$70,903	\$1,572,161	\$390,108	\$116,080	\$1,141,960	\$1,401,567
Arthur	107,700	\$26,952	\$11,635	\$0	\$0	\$11,239	\$8,871	\$15,527	\$33,476
Banner	141,150	\$14,908	\$34,577	\$0	\$129	\$19,251	\$7,536	\$16,189	\$48,561
Blaine	84,849	\$11,253	\$12,437	\$0	\$0	\$13,279	\$9,399	\$15,236	\$23,246
Boone	3,600,760	\$304,860	\$266,232	\$0	\$1,503,800	\$176,166	\$80,520	\$773,431	\$495,752
Box Butte	9,645,047	\$1,377,521	\$1,217,565	\$79,549	\$2,218,405	\$758,527	\$244,884	\$1,536,423	\$2,212,172
Boyd	1,719,015	\$248,080	\$201,375	\$0	\$435,231	\$130,248	\$36,280	\$282,163	\$386,658
Brown	2,937,707	\$401,549	\$236,492	\$0	\$1,011,115	\$165,370	\$69,399	\$516,135	\$438,546
Buffalo	31,584,022	\$3,081,035	\$1,265,275	\$261,587	\$6,446,199	\$2,592,429	\$698,126	\$6,054,638	\$11,194,733
Burt	6,943,229	\$590,505	\$445,421	\$0	\$1,671,665	\$372,964	\$133,328	\$1,225,353	\$2,403,995
Butler	6,428,810	\$333,643	\$287,335	\$0	\$2,054,541	\$288,523	\$85,488	\$954,732	\$2,424,548
Cass	12,856,404	\$1,394,408	\$681,782	\$99,683	\$3,584,132	\$964,593	\$275,587	\$2,505,430	\$3,370,790
Cedar	4,960,123	\$267,750	\$185,788	\$0	\$2,527,485	\$259,731	\$80,796	\$796,393	\$842,181
Chase	3,083,387	\$341,303	\$267,424	\$0	\$1,254,534	\$185,469	\$36,250	\$473,387	\$525,020
Cherry	5,313,605	\$881,377	\$671,462	\$0	\$993,551	\$342,144	\$119,282	\$896,934	\$1,508,855
Cheyenne	6,956,165	\$673,124	\$451,905	\$36,934	\$1,241,071	\$398,956	\$109,531	\$1,324,644	\$2,720,001
Clay	5,047,401	\$456,768	\$274,820	\$217,845	\$1,931,668	\$301,235	\$99,818	\$972,113	\$794,035
Colfax	5,362,983	\$1,208,667	\$340,265	\$101,375	\$1,415,837	\$497,796	\$117,082	\$693,938	\$988,004
Cuming	4,911,972	\$568,061	\$371,835	\$0	\$1,625,080	\$290,465	\$121,507	\$819,675	\$1,115,348
Custer	10,665,581	\$971,865	\$730,783	\$31,943	\$2,726,927	\$656,394	\$294,981	\$2,437,712	\$2,815,176
Dakota	18,142,623	\$2,816,740	\$1,176,882	\$0	\$3,043,395	\$1,427,343	\$407,654	\$2,713,221	\$6,555,387
Dawes	6,117,019	\$863,552	\$537,363	\$72,491	\$847,750	\$458,136	\$127,413	\$937,134	\$2,273,179
Dawson	17,743,550	\$2,642,971	\$1,236,027	\$17,308	\$2,988,061	\$1,799,756	\$545,956	\$3,122,642	\$5,392,830
Deuel	1,335,608	\$94,706	\$106,254	\$0	\$445,629	\$77,190	\$21,617	\$326,582	\$369,629
Dixon	3,549,914	\$426,856	\$167,144	\$171,625	\$1,297,043	\$183,429	\$75,467	\$693,938	\$634,412
Dodge	32,365,493	\$3,243,630	\$2,005,999	\$69,196	\$8,597,785	\$2,754,781	\$740,547	\$6,682,853	\$8,271,494
Douglas	403,875,629	\$49,229,380	\$16,713,352	\$965,379	\$66,934,425	\$22,399,393	\$10,292,464	\$69,400,202	\$168,341,028
Dundy	2,357,397	\$364,580	\$167,476	\$0	\$1,038,410	\$91,499	\$28,483	\$376,774	\$290,175
Fillmore	4,470,882	\$348,441	\$300,552	\$0	\$1,680,677	\$195,188	\$87,626	\$171,551	\$1,066,847
Franklin	3,252,978	\$328,334	\$213,483	\$25,450	\$1,281,899	\$193,585	\$69,099	\$630,876	\$510,252
Frontier	1,453,553	\$107,142	\$68,027	\$0	\$564,531	\$94,786	\$31,834	\$255,005	\$332,228
Furnas	5,444,829	\$393,444	\$385,381	\$143,568	\$1,662,275	\$261,941	\$104,240	\$1,044,803	\$1,449,186
Gage	66,404,340	\$1,962,119	\$1,274,849	\$46,937,761	\$5,090,419	\$1,166,123	\$311,536	\$4,103,754	\$5,557,979
Garden	2,200,913	\$277,033	\$233,362	\$75,047	\$692,460	\$100,203	\$31,215	\$450,467	\$441,126
Garfield	1,997,950	\$162,947	\$62,492	\$0	\$632,466	\$75,607	\$41,864	\$384,870	\$417,685
Gosper	427,152	\$60,152	\$42,378	\$0	\$42,378	\$46,537	\$21,064	\$167,806	\$113,022
Grant	149,902	\$10,135	\$22,349	\$0	\$16,577	\$17,288	\$8,461	\$50,510	\$24,181
Grealey	1,728,512	\$69,908	\$104,483	\$0	\$656,929	\$89,740	\$57,588	\$382,189	\$368,676
Hall	48,071,984	\$5,575,991	\$2,776,221	\$969,337	\$7,704,884	\$4,597,844	\$1,268,749	\$9,019,074	\$16,159,885
Hamilton	4,977,404	\$417,054	\$309,097	\$0	\$1,669,999	\$353,566	\$129,338	\$966,419	\$1,101,933
Harlan	2,445,561	\$229,461	\$144,645	\$0	\$617,040	\$176,307	\$50,327	\$657,303	\$570,479
Hayes	255,609	\$27,851	\$14,124	\$79,358	\$48,120	\$19,289	\$7,518	\$25,682	\$33,668
Hitchcock	2,402,783	\$464,893	\$255,732	\$0	\$608,218	\$152,715	\$50,293	\$425,195	\$445,737
Holt	10,107,656	\$1,130,836	\$851,727	\$98,813	\$2,475,389	\$685,093	\$181,850	\$1,507,677	\$3,206,270
Hooker	534,486	\$6,524	\$13,052	\$0	\$319,301	\$12,478	\$7,544	\$90,465	\$66,121
Howard	4,160,087	\$652,177	\$284,197	\$0	\$907,355	\$361,551	\$113,916	\$810,775	\$1,030,127
Jefferson	7,370,990	\$444,882	\$413,259	\$0	\$2,431,078	\$276,881	\$139,380	\$1,254,401	\$2,411,109
Johnson	3,352,405	\$364,616	\$236,437	\$0	\$1,208,725	\$221,447	\$39,501	\$588,452	\$693,228
Kearney	10,533,003	\$368,666	\$216,724	\$5,303,579	\$1,230,479	\$296,724	\$107,595	\$1,410,103	\$1,599,134
Keith	6,084,368	\$680,840	\$608,018	\$0	\$1,381,195	\$440,935	\$112,851	\$1,263,025	\$1,617,505
Keya Paha	180,380	\$27,186	\$31,749	\$0	\$24,804	\$25,781	\$10,645	\$32,274	\$27,823
Kimball	2,665,355	\$372,513	\$269,484	\$0	\$465,225	\$278,634	\$62,899	\$495,092	\$721,418
Knox	9,757,204	\$871,473	\$439,780	\$0	\$3,405,877	\$551,642	\$149,580	\$1,624,500	\$2,714,372
Lancaster	198,319,790	\$19,572,140	\$6,584,628	\$403,288	\$35,242,163	\$13,625,884	\$4,157,260	\$35,731,029	\$81,003,399
Lincoln	28,147,929	\$3,760,762	\$2,237,158	\$18,619	\$4,746,911	\$2,536,873	\$691,272	\$6,414,821	\$7,747,713
Logan	427,942	\$50,217	\$48,275	\$0	\$41,535	\$55	\$9,630	\$53,891	\$148,460
Loup	246,207	\$13,964	\$17,097	\$0	\$29,016	\$35,825	\$6,134	\$61,294	\$82,878
Madison	30,318,398	\$3,229,250	\$1,273,836	\$19,482	\$5,886,865	\$2,547,772	\$823,473	\$5,857,453	\$10,680,268
McPherson	44,234	\$0	\$3,382	\$0	\$0	\$6,970	\$5,262	\$10,129	\$18,493
Merrick	5,814,109	\$711,567	\$378,818	\$0	\$1,200,498	\$387,542	\$146,574	\$1,742,519	\$1,266,592
Morrill	4,580,754	\$380,990	\$511,952	\$0	\$1,364,739	\$331,462	\$113,992	\$1,054,514	\$823,105
Nance	5,935,714	\$453,144	\$241,052	\$1,668	\$2,713,955	\$189,276	\$84,502	\$1,537,627	\$714,489
Nemaha	6,818,862	\$900,638	\$462,431	\$0	\$1,681,385	\$469,938	\$119,857	\$1,130,971	\$2,133,881
Nuckolls	4,669,114	\$413,503	\$348,490	\$0	\$1,440,888	\$272,366	\$64,775	\$771,799	\$1,357,294
Otoe	11,606,877	\$1,119,411	\$738,949	\$11,949	\$4,009,252	\$698,119	\$195,452	\$2,033,374	\$2,812,360
Pawnee	2,475,089	\$277,403	\$234,992	\$0	\$601,727	\$126,366	\$53,304	\$540,411	\$640,795
Perkins	2,326,053	\$294,062	\$133,052	\$0	\$903,561	\$97,396	\$35,741	\$390,137	\$472,104
Phelps	9,020,959	\$636,813	\$350,363	\$382,070	\$2,701,972	\$651,500	\$130,747	\$1,851,781	\$2,615,714
Pierce	4,682,614	\$310,302	\$225,645	\$0	\$1,432,316	\$316,565	\$96,542	\$815,229	\$1,468,015
Platte	17,215,188	\$1,787,498	\$1,417,769	\$0	\$3,159,657	\$1,527,995	\$360,962	\$3,097,421	\$5,883,885
Polk	2,877,300	\$333,561	\$177,407	\$0	\$1,216,283	\$174,569	\$63,521	\$459,974	\$451,985
Red Willow	9,202,915	\$1,013,995	\$557,118	\$0	\$2,167,351	\$618,231	\$225,821	\$1,783,566	\$2,836,834
Richardson	8,352,676	\$1,167,579	\$695,981	\$0	\$2,957,162	\$491,943	\$167,948	\$1,879,633	\$1,262,530
Rock	1,025,391	\$122,810	\$103,799	\$0	\$410,894	\$64,563	\$19,953	\$167,564	\$136,689
Saline	10,588,657	\$1,260,388	\$776,880	\$141,825	\$2,955,059	\$574,838	\$172,403	\$1,618,012	\$3,089,251
Sarpy	43,997,876	\$5,193,657	\$1,898,189	\$76,690	\$5,167,326	\$2,911,951	\$1,169,801	\$6,976,496	\$20,603,765
Saunders	13,117,947	\$1,122,169	\$704,581	\$57,141	\$3,568,858	\$796,153	\$247,351	\$2,240,906	\$4,380,788
Scotts Bluff	38,681,125	\$4,572,136	\$3,277,064	\$85,016	\$5,629,811	\$3,502,864	\$950,364	\$8,144,178	\$12,519,692
Seward	10,707,722	\$941,107	\$422,214	\$104,759	\$4,198,258	\$482,552	\$161,814	\$1,883,675	\$2,513,343
Sheridan	4,100,025	\$541,106	\$442,345	\$0	\$1,016,923	\$287,685	\$72,256	\$631,848	\$1,107,862
Sherman	2,867,777	\$217,896	\$173,095	\$0	\$1,294,054	\$185,704	\$39,545	\$511,145	\$446,377
Sioux	269,244	\$26,312	\$51,525	\$0	\$25,904	\$0	\$20,866	\$52,786	\$60,852
Stanton	3,148,023	\$332,133	\$149,548	\$0	\$1,022,232	\$289,399	\$66,078	\$555,915	\$732,721
Thayer	7,308,129	\$418,887	\$346,694	\$88,539	\$3,705,989	\$178,366	\$79,643	\$1,252,174	\$1,238,108
Thomas	275,479	\$26,328	\$47,189	\$0	\$13,487	\$17,284	\$5,732	\$39,199	\$128,250
Thurston	9,596,514	\$1,684,746	\$1,914,339	\$96,335	\$2,298,494	\$509,887	\$158,592	\$1,010,066	\$1,926,065
Valley	4,516,048	\$251,033	\$199,290	\$0	\$1,154,862	\$467,930	\$92,795	\$829,161	\$1,520,977
Washington	10,296,327	\$626,393	\$526,854	\$0	\$3,647,906	\$470,337	\$147,887	\$1,563,650	\$3,311,501
Wayne	6,729,412	\$505,016	\$254,185	\$0	\$901,484	\$278,148			

NEBRASKA MEDICAID (TITLE XIX)
TOTAL EXPENDITURES* BY ELIGIBILITY BY COUNTY
STATE FISCAL YEAR 2005

COUNTY*	Total**	Aged	Blind and Disabled	All Children	ADC-Adults
	DOLLARS	DOLLARS	DOLLARS	DOLLARS	DOLLARS
STATE TOTALS	\$1,395,169,416	\$364,873,187	\$661,849,006	\$170,635,314	\$298,011,909
ADAMS	\$30,301,031	\$8,664,043.82	\$11,535,147.02	\$3,522,334.11	\$6,579,505.64
ANTELOPE	\$5,762,096	\$2,464,019.46	\$1,762,667.15	\$435,881.92	\$1,099,527.17
ARTHUR	\$107,700	\$1,350.63	\$39,527.83	\$41,073.52	\$25,748.29
BANNER	\$141,150	\$9,972.60	\$4,632.87	\$13,694.06	\$112,850.43
BLAINE	\$84,849	\$736.19	\$12,390.85	\$3,779.59	\$67,942.53
BOONE	\$3,600,760	\$2,107,046.05	\$784,854.27	\$288,520.86	\$420,338.78
BOX BUTTE	\$9,645,047	\$3,396,829.67	\$2,822,437.34	\$1,609,143.30	\$1,816,636.29
BOYD	\$1,719,015	\$722,443.89	\$559,887.37	\$66,165.55	\$370,518.34
BROWN	\$2,837,707	\$1,349,407.78	\$665,297.99	\$132,717.85	\$690,282.99
BUFFALO	\$31,594,022	\$8,919,096.83	\$10,511,852.75	\$3,862,181.48	\$8,300,891.01
BURT	\$6,843,229	\$2,270,002.63	\$3,133,518.97	\$610,459.41	\$929,248.24
BUTLER	\$6,428,810	\$2,778,664.33	\$2,557,138.74	\$406,505.62	\$686,501.31
CASS	\$12,856,404	\$4,640,286.47	\$4,049,273.32	\$1,254,466.04	\$2,912,378.56
CEDAR	\$4,960,123	\$2,968,787.53	\$1,116,120.23	\$239,845.20	\$635,370.40
CHASE	\$3,083,387	\$1,483,250.92	\$651,368.35	\$278,348.53	\$670,419.36
CHERRY	\$5,313,605	\$1,733,153.91	\$1,820,826.95	\$550,310.34	\$1,209,314.28
CHEYENNE	\$6,956,166	\$1,853,473.82	\$3,292,361.91	\$666,766.46	\$1,143,563.30
CLAY	\$5,047,401	\$2,181,515.14	\$1,759,448.67	\$361,998.85	\$744,438.27
COLFAX	\$5,362,963	\$1,944,179.27	\$928,112.50	\$784,351.51	\$1,706,319.53
CUMING	\$4,911,972	\$2,225,685.73	\$1,497,087.73	\$312,575.36	\$876,623.29
CUSTER	\$10,665,581	\$3,809,425.90	\$4,193,893.58	\$749,235.25	\$1,913,026.53
DAKOTA	\$18,142,623	\$3,849,103.85	\$4,757,683.52	\$1,976,683.99	\$7,559,151.38
DAWES	\$6,117,019	\$1,615,881.59	\$2,344,927.27	\$825,646.10	\$1,330,563.54
DAWSON	\$17,743,550	\$5,062,920.95	\$5,381,555.04	\$1,829,582.40	\$5,469,492.10
DEUEL	\$1,336,808	\$615,725.25	\$414,954.35	\$101,714.32	\$203,213.68
DIXON	\$3,549,914	\$1,443,595.86	\$1,176,295.21	\$218,162.96	\$711,860.19
DODGE	\$32,365,483	\$10,661,608.46	\$11,791,032.49	\$4,065,541.23	\$5,847,301.25
DOUGLAS	\$403,875,623	\$76,471,150.55	\$167,452,449.30	\$66,088,433.90	\$93,863,589.28
DUNDY	\$2,357,397	\$1,528,499.67	\$269,080.38	\$222,099.34	\$337,717.56
FILLMORE	\$4,470,882	\$2,117,231.92	\$751,216.52	\$385,130.52	\$1,217,303.01
FRANKLIN	\$3,252,978	\$1,520,881.59	\$979,438.48	\$253,439.98	\$499,218.19
FRONTIER	\$1,453,553	\$770,852.12	\$228,068.40	\$112,748.66	\$341,884.03
FURNAS	\$5,444,829	\$2,608,781.74	\$1,757,603.01	\$378,065.93	\$700,378.04
GAGE	\$66,404,340	\$11,135,758.46	\$49,042,879.59	\$1,527,804.81	\$4,697,897.34
GARDEN	\$2,200,813	\$1,002,326.56	\$590,575.40	\$165,309.29	\$442,701.32
GARFIELD	\$1,997,950	\$1,056,299.36	\$552,009.59	\$83,294.45	\$306,346.37
GOSPER	\$927,152	\$509,995.54	\$217,518.60	\$69,141.34	\$130,496.98
GRANT	\$149,902	\$50,081.31	\$26,749.58	\$10,059.16	\$63,012.28
GREELEY	\$1,729,812	\$963,773.37	\$378,503.99	\$111,282.09	\$275,952.73
HALL	\$48,071,984	\$9,966,262.01	\$19,458,580.95	\$7,427,783.43	\$11,219,377.76
HAMILTON	\$4,977,404	\$2,094,651.96	\$1,100,429.99	\$563,592.63	\$1,218,729.86
HARLAN	\$2,445,561	\$1,070,931.29	\$748,660.56	\$235,631.09	\$390,338.23
HAYES	\$265,609	\$56,754.56	\$140,023.86	\$2,938.13	\$55,892.78
HITCHCOCK	\$2,402,783	\$816,960.28	\$617,492.38	\$176,683.25	\$791,647.10
HOLT	\$10,107,656	\$3,559,221.32	\$3,515,385.94	\$961,189.01	\$2,071,859.36
HOOKER	\$534,486	\$413,881.75	\$73,713.98	\$1,087.18	\$45,802.95
HOWARD	\$4,160,087	\$1,482,813.33	\$800,857.25	\$782,595.19	\$1,093,821.48
JEFFERSON	\$7,370,990	\$3,444,194.92	\$2,412,486.59	\$520,611.84	\$993,696.56
JOHNSON	\$3,352,405	\$1,682,447.70	\$849,588.30	\$324,297.59	\$496,071.88
KEARNEY	\$10,533,003	\$1,860,123.78	\$7,358,073.40	\$375,870.56	\$938,935.34
KEITH	\$6,084,368	\$2,083,016.72	\$2,334,147.54	\$599,727.65	\$1,067,476.48
KEYA PAHA	\$180,360	\$51,358.85	\$19,514.59	\$14,347.90	\$95,138.93
KIMBALL	\$2,665,356	\$774,863.35	\$1,006,537.04	\$136,834.64	\$747,119.59
KNOX	\$9,757,204	\$4,562,791.69	\$3,092,524.94	\$883,868.44	\$1,218,018.75
LANCASTER	\$198,319,790	\$45,188,890.06	\$84,341,735.62	\$24,687,972.52	\$44,101,191.39
LINCOLN	\$28,147,929	\$7,228,938.78	\$11,570,826.88	\$4,310,825.34	\$5,037,338.46
LOGAN	\$427,942	\$16,694.95	\$174,637.99	\$119,954.24	\$116,854.60
LOUP	\$246,207	\$78,256.66	\$105,115.95	\$10,314.23	\$52,520.61
MADISON	\$30,318,398	\$8,200,522.49	\$11,570,451.92	\$3,813,769.97	\$6,733,653.40
MCPHERSON	\$44,234	\$7,213.59	\$9,946.55	\$14,590.65	\$12,483.10
MERRICK	\$5,814,109	\$1,654,145.28	\$2,466,907.90	\$572,406.32	\$1,120,649.55
MORRILL	\$4,580,764	\$1,705,428.92	\$1,319,319.04	\$700,875.94	\$855,129.77
NANCE	\$5,935,714	\$2,768,999.33	\$2,499,276.79	\$148,380.43	\$519,057.41
NEMAHA	\$6,818,882	\$2,176,546.78	\$2,914,020.80	\$744,169.19	\$984,144.91
NUCKOLLS	\$4,689,114	\$2,007,986.57	\$1,730,930.11	\$311,089.00	\$619,108.20
OTOE	\$11,606,877	\$4,820,869.36	\$4,188,366.67	\$1,101,371.61	\$1,496,249.09
PAWNEE	\$2,475,089	\$1,130,469.35	\$716,829.14	\$164,979.77	\$462,810.95
PERKINS	\$2,326,063	\$1,015,377.83	\$802,886.65	\$161,259.04	\$346,529.69
PHELPS	\$9,020,959	\$3,705,263.02	\$3,620,213.39	\$584,687.27	\$1,110,795.11
PIERCE	\$4,682,614	\$2,081,043.46	\$1,372,864.30	\$380,658.16	\$668,048.05
PLATTE	\$17,215,188	\$4,501,243.79	\$6,854,717.02	\$1,898,685.11	\$3,960,541.94
POLK	\$2,877,300	\$1,576,888.32	\$692,950.95	\$138,922.95	\$469,537.29
RED WILLOW	\$9,202,915	\$2,928,044.48	\$3,659,757.91	\$816,221.86	\$1,798,890.65
RICHARDSON	\$8,352,676	\$3,715,604.82	\$2,831,638.00	\$753,552.22	\$1,051,880.75
ROCK	\$1,026,391	\$486,913.71	\$163,669.61	\$48,237.42	\$327,570.07
SALINE	\$10,588,667	\$3,758,002.93	\$3,671,932.04	\$716,475.41	\$2,442,247.10
SARPY	\$43,997,876	\$7,651,411.06	\$17,463,514.83	\$6,160,815.09	\$12,722,135.48
SAUNDERS	\$13,117,947	\$5,146,238.76	\$4,488,671.03	\$1,208,584.93	\$2,274,452.44
SCOTT BLUFF	\$38,681,125	\$9,662,384.68	\$15,304,271.44	\$5,556,992.30	\$8,157,476.28
SEWARD	\$10,707,722	\$4,004,664.72	\$3,980,352.48	\$567,406.66	\$2,155,298.29
SHERIDAN	\$4,100,025	\$1,592,570.38	\$1,092,672.55	\$473,934.86	\$940,847.66
SHERMAN	\$2,867,777	\$1,532,124.48	\$732,044.28	\$155,570.91	\$448,037.10
SIoux	\$268,244	\$27,768.91	\$134,257.14	\$5,988.35	\$100,229.34
STANTON	\$3,148,023	\$1,382,040.17	\$729,674.97	\$264,590.80	\$771,717.25
THAYER	\$7,308,129	\$4,196,275.35	\$2,173,222.13	\$314,878.06	\$623,753.73
THOMAS	\$275,479	\$32,364.69	\$143,098.36	\$34,673.55	\$65,342.41
THURSTON	\$9,598,514	\$1,661,254.32	\$3,453,620.31	\$2,399,586.46	\$2,084,052.98
VALLEY	\$4,516,048	\$1,886,905.28	\$1,741,687.74	\$270,958.20	\$616,496.57
WASHINGTON	\$10,296,327	\$4,801,167.53	\$3,154,145.44	\$1,055,613.92	\$1,285,399.76
WAYNE	\$6,729,412	\$1,457,524.53	\$3,717,997.96	\$389,601.92	\$1,164,287.55
WEBSTER	\$3,842,299	\$1,718,815.10	\$1,553,546.08	\$163,982.52	\$405,955.44
WHEELER	\$400,695	\$122,294.11	\$112,156.80	\$0.00	\$166,244.48
YORK	\$14,984,693	\$3,920,840.31	\$5,461,296.35	\$694,785.37	\$4,917,770.98
OUT OF STATE	\$10,062,453	\$819,892.18	\$3,157,194.95	\$859,590.43	\$5,225,775.85
Missing	\$917,333	\$96,192.18	\$438,181.30	\$336,807.37	\$46,152.20

*County totals may not match other tables due to rounding.

Nebraska Health and Human Services Medicaid and Program Administrative Costs with Selected Medicaid Statistics

	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005
Net Program Expenditures (1)	\$ 614,987,971	\$ 668,867,999	\$ 722,043,133	\$ 783,285,996	\$ 906,474,438	\$ 983,735,293	\$ 1,068,739,183	\$ 1,189,531,650	\$ 1,252,263,652	\$ 1,344,219,241	\$ 1,395,768,788
Total Administrative Costs (2) **	\$32,129,576	\$36,156,859	\$34,422,324	\$45,648,406	\$57,918,207	\$63,708,803	\$63,544,046	\$78,224,383	\$74,654,763	\$77,613,293	\$118,064,311
Number of Claims Paid*	5,123,203	6,473,721	8,428,908	7,443,069	8,111,785	8,899,645	9,624,514	9,793,703	9,407,356	9,495,333	9,991,728
Average Monthly Number of Eligibles	136,976	141,555	144,177	148,798	162,964	178,353	189,635	203,762	201,533	197,154	198,757
Total Admin. Cost as % of Program Expenditure	5.2%	5.4%	4.8%	5.8%	6.4%	6.5%	5.9%	6.6%	6.0%	5.8%	8.5%
Total Admin. Cost per Claim Paid	\$6.27	\$5.59	\$4.08	\$6.13	\$7.14	\$7.16	\$6.60	\$7.99	\$7.94	\$8.17	\$11.82
Total Admin. Cost per Average Monthly Eligible	\$234.56	\$255.43	\$238.75	\$306.78	\$355.40	\$357.21	\$335.09	\$383.90	\$370.43	\$393.67	\$594.01
Percent Change in Net Program Expenditures	4.8%	8.8%	8.0%	8.5%	15.7%	8.5%	8.6%	11.3%	5.3%	7.3%	3.8%
Percent Change in Total Admin. Costs	27.6%	12.5%	-4.8%	32.6%	26.9%	10.0%	-0.3%	23.1%	-4.6%	4.0%	52.1%
Percent Change in Number of Claims Paid	3.3%	26.4%	30.2%	-11.7%	9.0%	9.7%	8.1%	1.8%	-3.9%	0.9%	5.2%
Percent Change in Average Monthly Number of Eligibles	1.3%	3.3%	1.9%	3.2%	9.5%	9.4%	6.3%	7.4%	-1.1%	-2.2%	0.8%

(1) Does not include administrative costs. Program expenditures are budget program 344, 348 and 349 total expenditures less refunds and include retroactive settlements to nursing homes and hospitals.

(2) Includes cost of eligibility determination and reviews.

Note: FY 2002 was the first year to claim school-based administration expenditures passed through to local school districts

* Documents paid from Cost Avoidance Report

** FY 2005 includes retro-settlement for school-based administration from FY 1999 to FY 2004 of \$31,595,309.

**Managed Care Expenditures
SFY 2005**

Program Expenditures	Ave. Monthly Member Month	Ave. Monthly Dollars	Fiscal Year Dollars
Share Advantage-United	34,437	\$ 5,828,480	\$ 69,941,760
PCCM	36,737	\$ 74,625	\$ 895,502
Incentive and other manual Payments			\$ 3,854,377
Total Managed Care Program Expenditures			\$ 74,691,639

**Nebraska Health Connection
Nebraska Medicaid Managed Care Eligibles Enrolled
June-2005**

Health Plan	June 2005 Enrollment	Average Monthly State Fiscal Year Eligibility Group					Total Enrollment
		AABD	CHIP	Family	Maternity*	Wards	
United HealthCare (HMO)							
-Omaha	27,168	2,330	2,515	20,695	159	965	26,664
-Lincoln	3,959	476	515	2,973	22	162	4,149
-Total	31,127	2,806	3,031	23,668	181	1,127	30,813
Blue Cross/Blue Shield PC+ (PCCM)							
-Omaha	24,449	1,803	3,594	17,897	N/A	903	24,196
-Lincoln	13,457	1,195	1,701	9,637	N/A	564	13,096
-Total	37,906	2,997	5,294	27,534	0	1,467	37,292
Primary Health Care total	69,033	5,803	8,325	51,202	181	2,594	68,105

* Maternity care payments made for the birth of a child.

Note:

Mental Health/Substance Abuse services are contracted through an Administrative Service Organization (ASO) managed care arrangement with Magellan that began 7/1/2002 and are not reported here.

Medicaid Staff Directory

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