



SFY 2022

Per Member Per Month REPORT

**WYOMING DEPARTMENT OF HEALTH
WYOMING MEDICAID**

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BACKGROUND

The Per Member Per Month (PMPM) cost is the monthly cost of an enrolled member, calculated using the expenditures based on dates of service and the total enrollment for that month. This is similar to the method private insurers use to calculate premiums.

$$\frac{\text{Expenditures by Service Date}}{\text{Total Member Months}} = \text{Per Member Per Month (PMPM)}$$

This report uses expenditures from claims data processed by the Medicaid Management Information System (MMIS) based on the dates the client received the service, regardless of when the claim was paid.

For example, for a recipient who visited their doctor twice, once on June 1, 2021, and again on July 1, 2021, even if both claims were paid on August 1, 2021, only the second claim's expenditures are included in the calculation of the SFY 2022 PMPM cost.

Member months are calculated using the eligibility information for each Medicaid enrolled member as of the last day of each month. If a member is enrolled on the last day of a particular month, that month is counted as a member month; however, if a member's enrollment ends prior to the last day of the month that is not included in the total member months.

USING THIS REPORT

This report looks at PMPM costs in a variety of ways to provide a more complete picture of Medicaid performance.

- **Medicaid Summary**

How have expenditures, member months, and PMPM changed over the past 5 years?

- **Population Comparison**

How does the overall PMPM differ for different Medicaid populations?

- **Services Overall**

How does the PMPM differ between services?

- **Services by Population**

How is the PMPM cost distributed across populations for Services of high interest?

- **Eligibility Category Summary**

How have expenditures, member months, and PMPM changed over the past 5 years for the eligibility category?

- **Category Overview**

How has enrollment changed? How do the subgroups within the category compare, and how has their PMPM changed?

- **Subgroup Details**

How is the PMPM cost for this subgroup distributed across the Services? How has this changed over the past 5 years?

Table 1. Eligibility Populations by Category and Subgroup

Eligibility Category	Eligibility Subgroup	
Aged, Blind, or Disabled Employed Individuals with Disabilities (ABD EID)	EID	
Aged, Blind, or Disabled Intellectually Disabled / Developmentally Disabled / Acquired Brain Injury (ABD ID/DD/ABI)	ABI Adult ID/DD Child ID/DD	Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID) (WY Life Resource Center)
Aged, Blind, or Disabled Long-Term Care (LTC)	Community Choices Hospice	Nursing Home Program for All-Inclusive Care of the Elderly (PACE) ¹
Aged, Blind, or Disabled Institution (ABD Institution)	Hospital	Institution for Mental Disease (IMD) (WY State Hospital)
Aged, Blind, or Disabled Supplemental Security Income (ABD SSI)	SSI and SSI-Related	
Adults	Family-Care Adults	Former Foster Care
Children	Care Management Entity (CME) ² Children Children's Mental Health (CMH)	Foster Care Newborn
Medicare Savings Program	Part B Partial Aged Medicare Beneficiary (AMB) Qualified Medicare Beneficiary (QMB)	Specified Low-Income Medicare Beneficiary (SLMB)
Non-Citizens with Medical Emergencies	Non-Citizens	
Pregnant Women	Pregnant Women	
Special Groups	Breast and Cervical Cancer Pregnant by Choice	Tuberculosis

1. The PACE program was discontinued in January 2021.

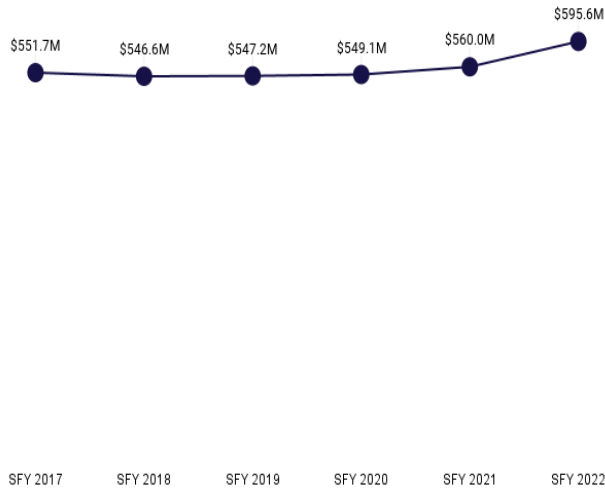
2. Data for Care Management Entity (CME) are based on the P07 wraparound eligibility program code which is assigned to a member in addition to their primary Medicaid program code. As such, the CME member months are not included in the total member months for all of Medicaid. Expenditures for SSI and SSI-Related, Children, Children's Mental Health Waiver, and Foster Care have been manually adjusted to account for the corresponding CME expenditures incurred. CME also covers some children on non-Medicaid, State-funded programs.

MEDICAID OVERVIEW

EXPENDITURES

\$595.6 MILLION

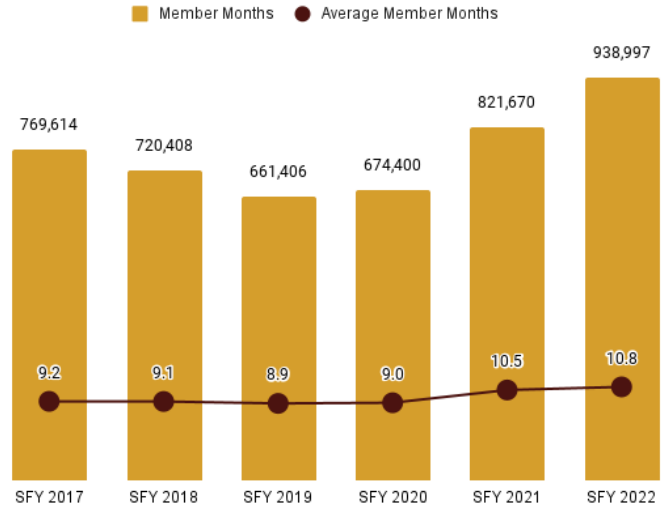
paid to providers for services rendered during the state fiscal year



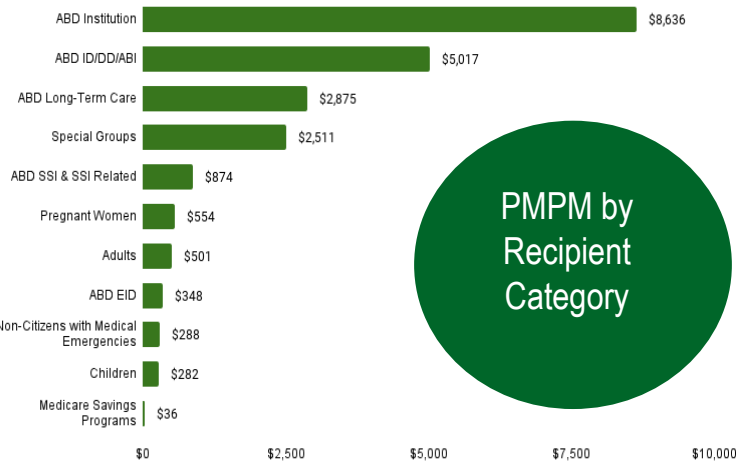
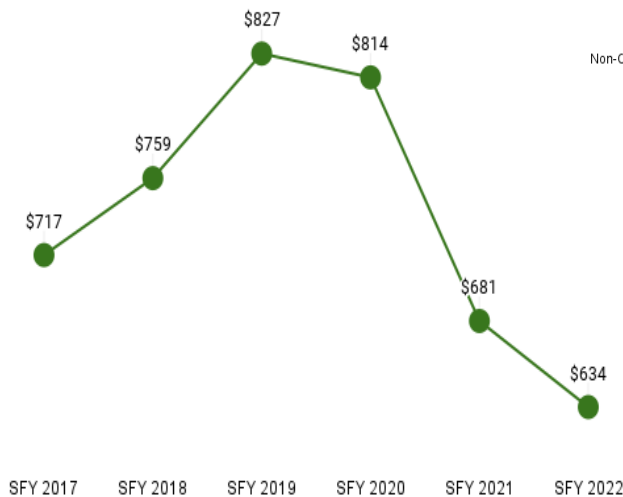
MEMBER MONTHS

938,997

months members were enrolled during the state fiscal year

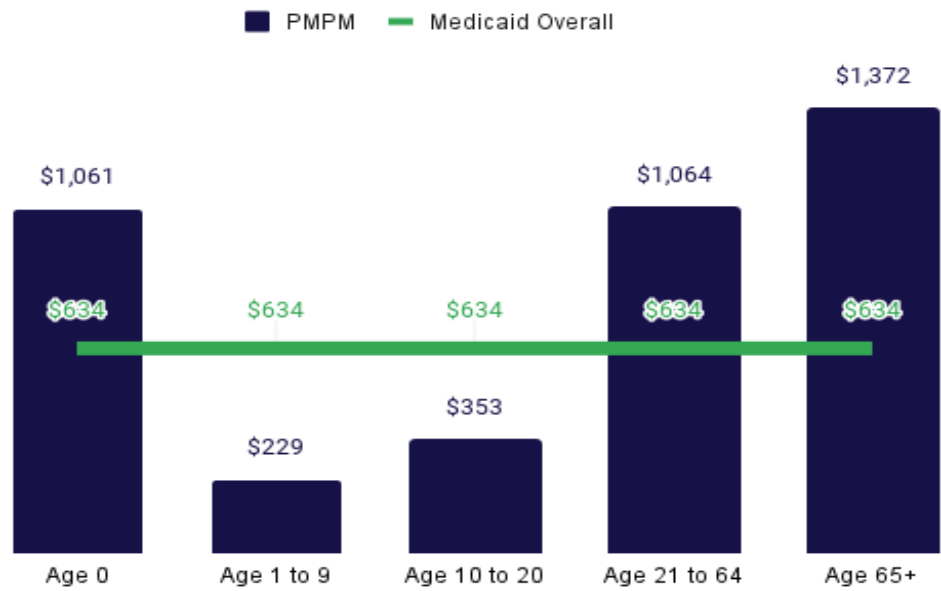


\$634
PER MEMBER PER MONTH



PMPM by
Recipient
Category

PMPM by Age Band



83%

of Wyoming counties have a PMPM below the state's overall value.

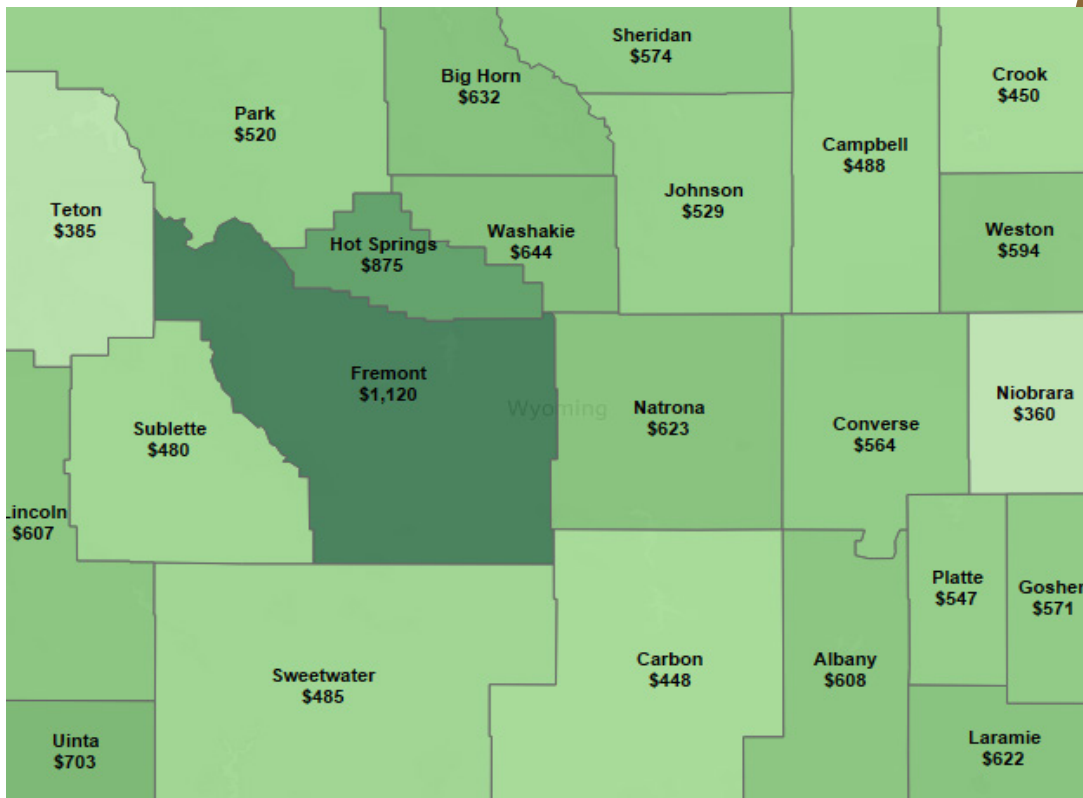


Figure 1. SFY 2022 Per Member Per Month (PMPM) County Map

PMPM BY POPULATION

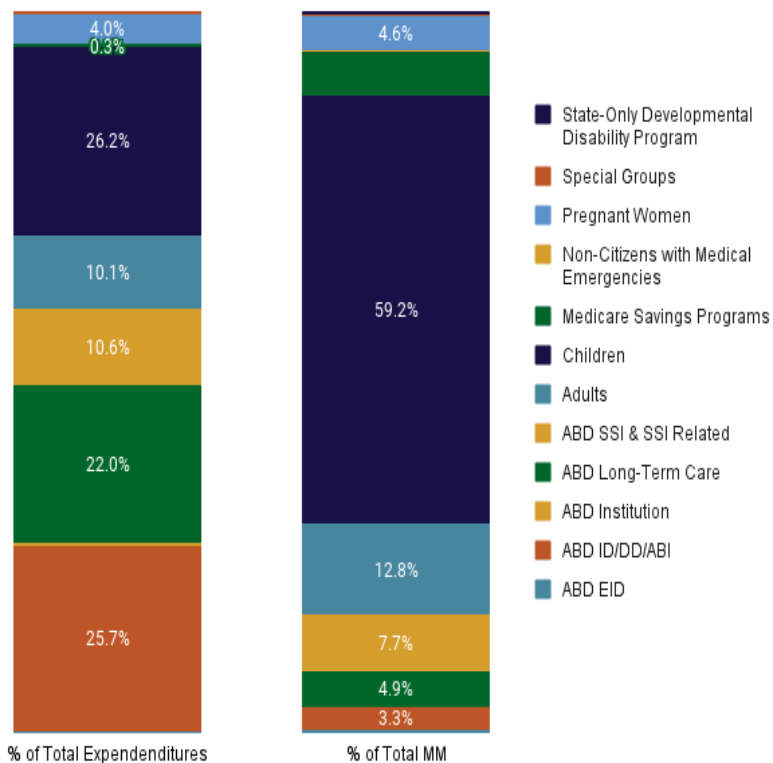


Table 2. Eligibility Category Overview ~ % of Total

Eligibility Category	% of Total Expenditures	% of Total Member Months
ABD EID	0.2%	0.4%
ABD ID/DD/ABI	25.7%	3.3%
ABD Institution	0.4%	0.0%
ABD Long-Term Care	22.0%	4.9%
ABD SSI & SSI Related	10.6%	7.7%
Adults	10.1%	12.8%
Children	26.2%	59.2%
Medicare Savings Programs	0.3%	6.0%
Non-Citizens with Medical Emergencies	0.1%	0.3%
Pregnant Women	4.0%	4.6%
Special Groups	0.4%	0.3%
Other	0.0%	0.4%
Overall	100.0%	100.0%

Figure 2. Eligibility Category Overview ~ SFY 2022

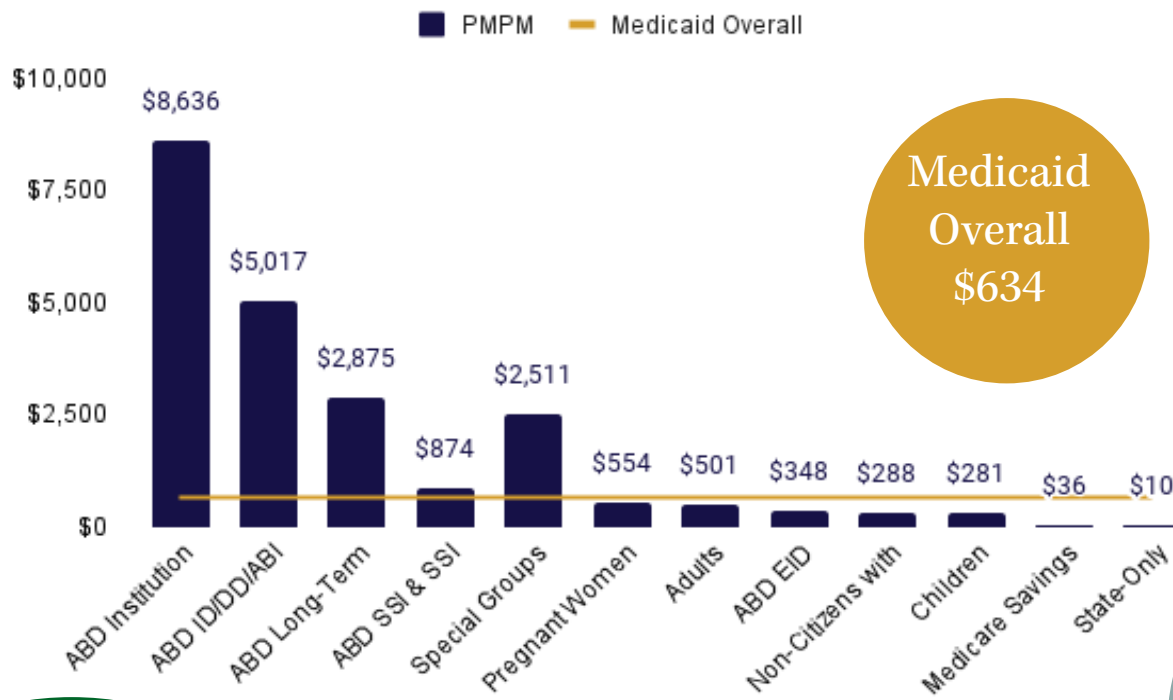


Figure 3. Eligibility Category vs. Medicaid Overall

Table 3. Eligibility Category Summary ~ SFY 2022

Eligibility Category	Average Enrollment Length (months)	Expenditures ³	Member Months	PMPM
ABD EID	10.7	\$1,275,629	3,663	\$348
ABD ID/DD/ABI	11.6	\$153,663,751	30,622	\$5,017
ABD Institution	4.8	\$2,176,379	252	\$8,636
ABD Long-Term Care	9.7	\$131,954,462	45,890	\$2,875
ABD SSI & SSI Related	10.6	\$63,386,657	72,542	\$874
Adults	10.4	\$60,236,003	120,148	\$501
Children	10.9	\$153,531,690	556,264	\$282
Medicare Savings Programs	10.3	\$2,026,550	56,701	\$36
Non-Citizens with Medical Emergencies	8.8	\$814,834	2,825	\$288
Pregnant Women	9.2	\$23,872,605	43,118	\$554
Special Groups	9.2	\$2,662,147	3,226	\$2,511
Other	8.2	\$37,651	3,746	\$10
Overall	9.5	\$595,638,358	938,997	\$634

Table 4. One-Year Change in Expenditures, Member Months, and Per Member Per Month by Eligibility Category

Program Group	Expenditures	% Change from SFY 2021	Member Months	% Change from SFY 2021	PMPM	% Change from 2021
ABD EID	\$1,275,629	-26%	3,663	3%	\$348	-28%
ABD ID/DD/ABI	\$153,663,751	1%	30,622	0%	\$5,017	1%
ABD Institution	\$2,176,379	-33%	252	19%	\$8,636	-44%
ABD Long-Term Care	\$131,954,462	2%	45,890	-3%	\$2,875	5%
ABD SSI & SSI Related	\$63,386,657	9%	72,542	4%	\$874	5%
Adults	\$60,236,003	15%	120,148	21%	\$501	-5%
Children	\$153,531,690	14%	556,264	15%	\$282	1%
Medicare Savings Programs	\$2,026,550	8%	56,701	7%	\$36	3%
Non-Citizens with Medical Emergencies	\$814,834	14%	2,825	127%	\$288	-50%
Pregnant Women	\$23,872,605	6%	43,118	42%	\$554	-25%
Special Groups	\$2,662,147	15%	3,226	292%	\$2,511	-10%
Other	\$37,651	-5%	3,746	19%	\$10	-23%
Overall	\$595,638,358	6%	938,997	14%	\$634	-7%

3. Expenditures have been manually adjusted to account for appropriate CME expenditures for the following categories: ABD SSI and SSI Related, Children, and Pregnant Women

Table 5. Eligibility Subgroup Summary ~ SFY 2022

Eligibility Category	Eligibility Subgroup	Average Enrollment Length (months)	Expenditures	Members	Member Months
ABD EID	Employed Individuals with Disabilities	10.7	\$1,275,629	341	3,663
ABD ID/DD/ABI	Comprehensive Waiver	11.7	\$122,133,290	1,876	21,964
	ICF ID (WY Life Resource Center)	11.0	\$18,572,895	52	573
	Supports Waiver	10.9	\$12,957,566	740	8,085
ABD Institution	Hospital	4.8	\$2,176,379	53	252
ABD Long-Term Care	Community Choices Waiver	9.7	\$52,803,529	2,949	28,690
	Hospice	1.8	\$307,318	76	139
	Nursing Home	8.6	\$78,843,614	1,987	17,061
ABD SSI & SSI Related	SSI & SSI Related	10.5	\$63,386,657	6,889	72,542
Adults	Family-Care Adults	10.4	\$59,630,740	11,373	118,511
	Former Foster Care	9.8	\$605,263	167	1,637
Children	Behavioral Health Care Management Entity ⁴	0.0	--	--	--
	Children	10.8	\$102,086,587	43,701	472,645
	Children's Mental Health Waiver	12.1	\$1,466,024	134	1,620
	Foster Care	9.9	\$17,752,339	3,687	36,390
	Newborn	8.5	\$32,226,740	5,397	45,969
Medicare Savings Programs	Qualified Medicare Beneficiary	10.0	\$2,023,177	3,219	32,336
	Specified Low Income Medicare Beneficiary	10.1	\$3,374	2,402	24,365
Non-Citizens with Medical Emergencies	Non-Citizens	8.8	\$814,834	320	2,825
Pregnant Women	Pregnant Women	9.2	\$23,872,605	4,709	43,118
Special Groups	Breast and Cervical	9.9	\$2,653,523	101	996
	Family Planning Waiver	8.0	\$2,447	< 10	64
	Incarcerated Medicaid Member	8.9	\$6,177	243	2,166
Other	Targeted Case Management- ID/DD	8.2	\$37,651	458	3,746
Overall		8.9	\$595,638,358	90,882	939,357

4. Member months for Care Management Entity (CME) are based on the P07 wraparound eligibility program code which is assigned to a member in addition to their primary Medicaid program code. As such, the CME member months are not included in the total member months for all of Medicaid. Expenditures and PMPM have been adjusted for those Medicaid subgroups that have members also enrolled in CME.

Table 6. Expenditure History by Eligibility Subgroup

Eligibility Category / Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID						
EID	\$4,380,238	\$2,811,061	\$2,038,397	\$1,695,829	\$1,719,179	\$1,275,629
ABD ID/DD/ABI⁵						
ABI Waiver	\$8,011,606	\$4,961,167	--	--	--	--
Adult ID/DD Waiver	\$120	--	--	--	--	--
Comprehensive Waiver	\$108,170,281	\$109,350,754	\$126,948,820	\$127,076,539	\$123,812,070	\$122,133,290
ICF ID (WY Life Resource Center)	\$19,173,268	\$13,613,841	\$12,985,188	\$17,038,857	\$17,030,531	\$18,572,895
Supports Waiver	\$8,233,031	\$9,452,672	\$9,605,968	\$10,276,510	\$12,028,006	\$12,957,566
ABD Institution						
Hospital	\$2,349,813	\$2,850,073	\$879,871	\$2,189,584	\$3,272,079	\$2,176,379
IMD (WY State Hospital - Age 65 & Over)	--	--	--	\$112	\$21	--
ABD Long-Term Care						
Community Choices Waiver ⁶	\$38,546,435	\$40,442,652	\$44,616,668	\$47,509,128	\$49,023,710	\$52,803,529
Hospice	\$619,372	\$681,318	\$360,118	\$253,390	\$435,281	\$307,318
Nursing Home	\$89,249,239	\$88,245,505	\$87,176,366	\$94,146,235	\$78,651,507	\$78,843,614
PACE	\$3,426,553	\$3,515,171	\$3,885,399	\$3,689,689	\$1,784,714	-
ABD SSI & SSI Related						
SSI & SSI Related	\$57,524,044	\$52,302,374	\$56,618,611	\$54,519,517	\$57,802,224	\$63,131,622
Adults						
Family-Care Adults	\$42,349,927	\$43,069,503	\$40,831,506	\$39,070,030	\$51,817,690	\$59,630,740
Former Foster Care	\$246,275	\$341,083	\$427,712	\$388,819	\$442,921	\$605,263
Children						
Care Management Entity (CME) ⁶	\$4,440,269	\$4,274,691	\$2,323,464	\$3,000,810	\$3,425,771	\$3,180,802
Children	\$86,993,561	\$88,178,017	\$84,883,419	\$80,090,650	\$86,892,989	\$100,565,901
Children's Mental Health Waiver ⁷	\$754,123	\$684,245	\$499,798	\$423,027	\$707,302	\$605,624
Foster Care	\$21,251,297	\$22,118,661	\$20,985,975	\$19,385,893	\$17,322,127	\$17,207,869
Newborn	\$24,997,341	\$31,977,754	\$25,033,453	\$22,703,763	\$26,308,852	\$32,226,740
Medicare Savings Programs						
Part B - Partial AMB	\$120	--	--	--	--	--
Qualified Medicare Beneficiary	\$2,774,127	\$1,586,071	\$1,752,441	\$1,720,000	\$1,870,045	\$2,017,886
Qualified Medicare Beneficiary Dual	--	--	--	\$163	\$2	\$5,291
Specified Low Income Medicare Beneficiary	\$21,453	\$17,549	\$18,409	\$19,795	\$13,055	\$3,374
Specified Low Income Medicare Beneficiary Dual	-	--	--	\$120	--	--
Non-Citizens with Medical Emergencies						
Non-Citizens with Medical Emergencies	\$963,898	\$830,693	\$827,777	\$548,077	\$712,723	\$814,834
Pregnant Women						
Pregnant Women	\$25,762,842	\$23,775,130	\$22,858,998	\$21,387,703	\$22,533,637	\$23,872,605

Special Groups						
Breast and Cervical	\$1,440,578	\$1,466,631	\$1,582,515	\$1,895,022	\$2,309,485	\$2,653,523
Family Planning Waiver	\$4,364	\$3,258	\$2,425	\$1,990	\$106	\$2,447
Tuberculosis	\$14	--	--	--	--	--
Incarcerated Medicaid Member	--	--	--	--	--	\$6,177
Targeted Case Management	\$38,037	\$45,395	\$50,823	\$52,125	\$39,646	\$37,440
Overall	\$551,722,226	\$546,069,642	\$547,193,784	\$549,083,377	\$559,955,672	\$595,638,358

Table 7. Member Months History by Eligibility Subgroup

Program Sub Group	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID						
Employed Individuals with Disabilities	3,999	3,271	2,875	3,135	3,551	3,663
ABD ID/DD/ABI						
ABI Waiver	1,772	1,126	--	--	--	--
Adult ID/DD Waiver	--	--	--	--	--	--
Comprehensive Waiver	21,091	20,951	21,941	22,295	22,385	21,964
ICF ID (WY Life Resource Center)	754	663	611	597	593	573
Supports Waiver	5,120	5,643	5,706	6,451	7,741	8,085
ABD Institution						
Hospital	182	136	72	115	212	252
IMD (WY State Hospital - Age 65 & Over)	--	--	--	--	--	--
ABD Long-Term Care						
Community Choices Waiver	22,164	23,898	25,428	27,106	29,006	28,690
Hospice	241	221	108	63	87	139
Nursing Home	19,893	19,818	19,025	18,539	17,578	17,061
PACE	1,447	1,572	1,605	1,618	755	--
ABD SSI						
SSI & SSI Related	68,481	65,550	66,957	67,542	69,599	72,402
Adults						
Family-Care Adults	91,219	84,865	73,290	71,953	97,943	118,511
Former Foster Care	760	877	1,002	959	1,235	1,637
Children						
Care Management Entity (CME) ⁹	2,943	3,007	2,025	2,231	2,677	2,152
Children	386,864	357,909	328,984	332,983	410,292	471,610
Children's Mental Health Waiver	737	815	533	539	1,012	1,260
Foster Care	33,368	30,927	28,121	29,940	33,346	36,023
Newborn	36,678	29,417	17,223	20,830	35,522	45,969
Medicare Savings Programs						
Part B - Partial AMB	--	--	--	--	--	--
Qualified Medicare Beneficiary	26,964	27,142	26,133	26,980	30,804	32,336
Qualified Medicare Beneficiary Dual	--	--	--	--	--	--
Specified Low Income Medicare Beneficiary	17,599	17,199	18,100	19,291	22,333	24,365
Specified Low Income Medicare Beneficiary Dual	--	--	--	--	--	--
Non-Citizens with Medical Emergencies						
Non-Citizens	663	376	362	379	1,243	2,825
Pregnant Women						
Pregnant Women	24,290	22,685	19,071	17,365	30,428	43,118
Special Groups						
Breast and Cervical	867	717	594	647	749	996

Family Planning Waiver	410	259	180	119	75	64
Tuberculosis	1	--	--	--	--	--
Incarcerated Medicaid Member	--	--	--	--	--	2,166
Targeted Case Management- ID/DD	1,777	2,009	2,829	3,136	3,144	3,745
Overall	769,614	720,408	661,406	674,400	821,670	938,997

Table 8. Per Member Per Month History by Eligibility Subgroup

Eligibility Category / Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD ID						
Employed Individuals with Disabilities	\$1,095	\$859	\$709	\$541	\$484	\$348
ABD ID/DD/ABI						
ABI Waiver	\$4,521	\$4,406	--	--	--	--
Adult ID/DD Waiver	--	--	--	--	--	--
Comprehensive Waiver	\$5,129	\$5,219	\$5,786	\$5,700	\$5,531	\$5,561
ICF ID (WY Life Resource Center)	\$25,429	\$20,534	\$21,252	\$28,541	\$28,719	\$32,413
Supports Waiver	\$1,608	\$1,675	\$1,683	\$1,593	\$1,554	\$1,603
ABD Institution						
Hospital	\$12,911	\$20,956	\$12,220	\$19,040	\$15,434	\$8,636
IMD (WY State Hospital - Age 65 & Over)	--	--	--	--	--	--
ABD Long-Term Care						
Community Choices Waiver	\$1,739	\$1,692	\$1,755	\$1,753	\$1,690	\$1,840
Hospice	\$2,570	\$3,083	\$3,334	\$4,022	\$5,003	\$2,211
Nursing Home	\$4,486	\$4,453	\$4,582	\$5,078	\$4,474	\$4,621
PACE	\$2,368	\$2,236	\$2,421	\$2,280	\$2,364	--
ABD SSI						
SSI & SSI Related	\$840	\$798	\$858	\$807	\$831	\$872
Adults						
Family-Care Adults	\$464	\$508	\$557	\$543	\$529	\$503
Former Foster Care	\$324	\$389	\$427	\$405	\$359	\$370
Children						
Behavioral Health Care Management Entity ¹⁰	\$1,509	\$1,422	\$1,147	\$1,345	\$1,280	\$1,478
Children	\$225	\$246	\$258	\$241	\$212	\$213
Children's Mental Health Waiver	\$2,523	\$2,001	\$1,727	\$1,722	\$1,478	\$1,164
Foster Care	\$637	\$715	\$746	\$647	\$519	\$478
Newborn	\$682	\$1,087	\$1,453	\$1,090	\$741	\$701
Medicare Savings Program						
Part B - Partial AMB	--	--	--	--	--	--
Qualified Medicare Beneficiary	\$103	\$58	\$67	\$64	\$61	\$62
Qualified Medicare Beneficiary Dual	--	--	--	--	--	--
Specified Low Income Medicare Beneficiary	\$1	\$1	\$1	\$1	\$1	\$0
Specified Low Income Medicare Beneficiary Dual	--	--	--	--	--	--
Non-Citizens with Medical Emergencies						
Non-Citizens	\$1,454	\$2,209	\$2,287	\$1,446	\$573	\$288
Pregnant Women	\$1,061	\$1,048	\$1,199	\$1,232	\$741	\$554
Special Groups						
Breast and Cervical	\$1,662	\$2,046	\$2,664	\$2,929	\$3,083	\$2,664
Family Planning Waiver	\$11	\$13	\$13	\$17	\$1	\$38
Tuberculosis	\$14	--	--	--	--	--
Incarcerated Medicaid Member	--	--	--	--	--	\$3
Targeted Case Management- ID/DD	\$21	\$23	\$18	\$17	\$13	\$10
Overall	\$717	\$759	\$827	\$814	\$681	\$634

PMPM BY SERVICE

This section provides PMPM data by various service breakdowns:

- high-level service categories
- detailed service areas

Service level PMPM costs are calculated by dividing the total expenditures for the service by the total member months for the entire Medicaid program.

To better compare Medicaid costs to those of private insurance plans, this section reports the PMPM cost grouped by Medical, Dental, Vision, Long-Term Care, and Other service categories. While Medical coverage is generally equivalent to a private insurance plan, Medicaid also provides Dental, Vision, Long-Term Care, and “Other” Services.

These additional benefits would generally only be available in private plans as supplemental plans or as a stand-alone insurance policy. Long-term care benefits are rarely covered by private or employer-sponsored insurance plans.

MEDICAL				
• Ambulance	• End-Stage Renal Disease	• Prescription Drug		
• Ambulatory Surgery Center	• Federally Qualified Health Centers	• Psychiatric Residential Treatment Facility (PRTF)		
• Behavioral Health	• Hospice	• Public Health and Welfare		
• Care Management Entity	• Hospital	• Public Health, Federal		
• Clinic/Center	• Laboratory	• Rural Health Clinic		
• DME and Prosthetics,	• Physician & Other Practitioners			

LONG-TERM	DENTAL	VISION	OTHER
<ul style="list-style-type: none"> • Home Health • Nursing Facility • PACE 			
<ul style="list-style-type: none"> • Waiver Services 			

Table 9. Per Member Per Month History by Service Category

Service Category	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Medical	\$384	\$411	\$430	\$405	\$361	\$355
Long-Term Care	\$310	\$328	\$377	\$392	\$290	\$265
Dental	\$18	\$16	\$17	\$15	\$14	\$13
Vision	\$5	\$5	\$5	\$4	\$4	\$4
Other	\$1	\$1	\$2	\$1	\$1	\$1
Total	\$718	\$761	\$831	\$817	\$680	\$637

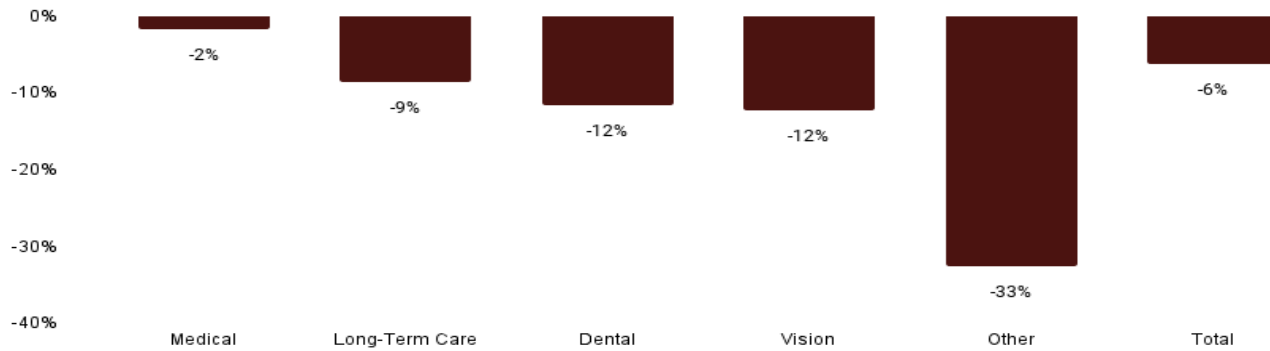


Figure 4. One-Year Change in Per Member Per Month by Service Category

Table 6 (p 10)

5. During SFY 2015, the ABD ID/DD/ABI subgroup of programs was changed. The Acquired Brain Injury and Adult and Child ID/DD waivers were discontinued and the program codes associated with these waivers were moved into the Comprehensive and Supports waivers. There is no one-to-one crosswalk as three waivers transitioned into two.
6. SFY 2016 includes the expenditures for both the Assisted Living Facility Waiver and Long-Term Care Waiver, now covered under the Community Choices waiver.
7. SFY 2016 through SFY 2021 Expenditures have been manually adjusted to account for appropriate CME expenditures for the following populations: SSI and SSI Related, Children, Children's Mental Health Waiver, Foster Care, and Pregnant Women. Expenditures shown for CME include all services incurred for children while enrolled in the totaling across all populations will not equal the total Medicaid expenditures.
8. Individuals enrolled in the Children's Mental Health Waiver started receiving case management services through the Care Management Entity (CME) taxonomy starting in SFY 2016.

Table 7 (p 11)

9. Member months for Care Management Entity (CME) are based on the P07 wraparound eligibility program code which is assigned to a member in addition to their primary Medicaid program code. As such, the CME member months are not included in the total member months for all of Medicaid.

Table 8 (p 12)

10. PMPM shown for CME is calculated for all services incurred for children while enrolled in the program.

DETAILED SERVICE AREAS

Table 10. Per Member Per Month by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$4.29	\$4.20	\$4.83	\$4.55	\$4.18	\$3.71
Ambulatory Surgery Center	\$4.48	\$4.31	\$5.22	\$4.69	\$4.70	\$6.08
Behavioral Health	\$38.73	\$36.63	\$36.01	\$32.08	\$24.52	\$18.84
Care Management Entity	\$5.90	\$6.59	\$4.71	\$5.11	\$4.21	\$3.42
Clinic/Center	\$1.71	\$1.29	\$1.21	\$0.60	\$0.92	\$0.92
Dental	\$18.20	\$16.46	\$16.94	\$14.88	\$14.40	\$12.73
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	\$10.86	\$11.62	\$13.60	\$14.07	\$12.06	\$10.83
End-Stage Renal Disease	\$1.44	\$1.35	\$1.64	\$2.33	\$2.69	\$2.37
Federally Qualified Health Center	\$7.81	\$8.51	\$8.66	\$9.81	\$8.45	\$9.19
Home Health	\$13.27	\$3.26	\$0.92	\$1.51	\$1.19	\$1.01
Hospice	\$1.67	\$1.89	\$1.80	\$1.65	\$1.72	\$1.19
Hospital	\$126.04	\$138.36	\$142.25	\$133.46	\$120.14	\$115.77
Intermediate Care Facility for Individuals with Intellectual Disabilities	\$24.79	\$18.91	\$19.51	\$24.85	\$20.53	\$19.74
Laboratory	\$1.18	\$1.24	\$1.05	\$0.92	\$0.98	\$1.26
Nursing Facility	\$110.41	\$118.23	\$125.82	\$133.89	\$90.95	\$80.19
Other	\$1.18	\$1.40	\$1.52	\$1.21	\$0.86	\$0.58
Physicians and Other Practitioners	\$76.05	\$75.47	\$76.40	\$69.51	\$61.73	\$61.13
Prescription Drug	\$65.86	\$81.15	\$93.26	\$90.14	\$81.61	\$86.64
PACE	\$4.46	\$4.87	\$5.87	\$5.44	\$2.16	--
Psychiatric Residential Treatment Facility	\$16.42	\$17.03	\$14.89	\$11.10	\$8.97	\$6.31
Public Health or Welfare	\$1.18	\$1.21	\$1.40	\$1.32	\$0.85	\$0.37
Public Health, Federal	\$18.36	\$16.93	\$19.95	\$20.04	\$20.32	\$23.36
Rural Health Clinic	\$1.92	\$2.77	\$3.30	\$3.65	\$3.41	\$3.67
Vision	\$4.97	\$5.11	\$5.22	\$4.42	\$4.23	\$3.71
Waiver Total	\$156.59	\$182.59	\$225.33	\$225.86	\$184.77	\$163.76
Acquired Brain Injury	\$8.99	\$6.27	--	--	--	--
Community Choices Waiver	\$27.67	\$35.73	\$42.81	\$45.13	\$39.02	\$37.64
Comprehensive	\$114.05	\$132.43	\$172.67	\$170.38	\$136.04	\$117.16
Supports	\$5.88	\$8.16	\$9.85	\$10.35	\$9.71	\$8.96
Total	\$716	\$758	\$827	\$814	\$681	\$634

SERVICE PMPM BY POPULATION

The data below provides a more in-depth comparison of Per Member Per Month costs across all Medicaid populations for six non-waiver services of high interest: Behavioral Health, Hospital, Nursing Facility, Physician & Other Practitioner, and Prescription Drugs.

Table 11. Select Services Summary by Eligibility Subgroup ~ SFY 2022

Eligibility Category	Eligibility Subgroup	Behavioral Health	Hospital	Nursing Facility	Physician	Prescription Drugs
ABD EID	Employed Individuals with Disabilities	\$12.71	\$113.00	--	\$112.43	\$65.28
ABD ID/DD/ABI	Comprehensive Waiver	\$28.52	\$107.59	\$0.32	\$83.67	\$202.09
	ICF ID (WY Life Resource Center)	\$1.57	\$31.50	--	\$27.05	--
	Supports Waiver	\$58.74	\$100.30	\$0.80	\$129.75	\$157.65
ABD Institution	Hospital	\$7.36	\$7,372.67	--	\$799.50	\$166.46
ABD Long-Term Care	Community Choices Waiver	\$15.87	\$172.55	--	\$95.84	\$168.57
	Hospice	\$1.58	\$166.82	--	\$50.87	\$14.45
	Nursing Home	\$5.76	\$88.23	\$4,375.98	\$34.24	\$35.42
	PACE	--	--	--	--	--
ABD SSI & SSI Related	SSI & SSI Related	\$30.99	\$312.63	--	\$106.26	\$291.25
Adults	Family-Care Adults	\$16.92	\$148.12	--	\$92.99	\$157.19
	Former Foster Care	\$31.59	\$109.63	--	\$67.67	\$91.63
Children	Children	\$15.72	\$38.39	--	\$32.57	\$48.28
	Children's Mental Health Waiver	\$105.47	\$30.39	--	\$38.07	\$67.40
	Foster Care	\$86.21	\$102.17	--	\$53.65	\$70.91
	Newborn	\$0.08	\$468.66	--	\$112.71	\$33.39
Medicare Savings Programs	Qualified Medicare Beneficiary	\$1.07	\$19.54	\$0.03	\$27.24	\$0.20
	Specified Low Income Medicare Beneficiary	\$0.02	--	--	--	--
Non-Citizens with Medical Emergencies	Non-Citizens	--	\$238.78	--	\$46.10	--
Pregnant Women	Pregnant Women	\$10.43	\$251.96	--	\$137.39	\$57.83
Special Groups	Breast and Cervical	\$14.38	\$701.47	--	\$1,353.28	\$475.36
	Family Planning Waiver	--	--	--	\$19.57	--
	Incarcerated Medicaid Member	--	\$2.85	--	--	--
Overall		\$18.84	\$115.77	\$80.19	\$61.13	\$86.64

BEHAVIORAL HEALTH

Policy changes instituting medical review and pre-authorization after thirty visits for adults have helped address the past increase in Behavioral Health PMPM.

Table 12. Behavioral Health Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$45.03	\$52.71	\$27.35	\$23.66	\$18.93	\$12.71
ABD ID/DD/ABI	ABI Waiver	\$105.74	\$46.68	--	--	--	--
	Comprehensive Waiver	\$134.42	\$48.52	\$35.83	\$32.58	\$29.55	\$28.52
	ICF ID (WY Life Resource Center)	--	--	\$0.28	--	--	\$1.57
	Supports Waiver	\$97.99	\$46.60	\$49.58	\$42.11	\$71.83	\$58.74
ABD Institution	Hospital	\$11.35	\$14.93	\$18.61	\$0.03	\$1.62	\$7.36
ABD Long-Term Care	Community Choices Waiver	\$43.21	\$28.53	\$18.98	\$17.72	\$16.75	\$15.87
	Hospice		\$10.29	\$0.74			\$1.58
	Nursing Home	\$12.72	\$8.15	\$6.06	\$5.77	\$4.20	\$5.76
	PACE		\$0.76	\$0.53	\$0.73	\$1.12	--
ABD SSI & SSI Related	SSI & SSI Related	\$60.19	\$49.37	\$42.37	\$37.86	\$34.30	\$30.99
Adults	Family-Care Adults	\$33.20	\$25.11	\$22.14	\$19.77	\$17.69	\$16.92
	Former Foster Care	\$33.35	\$47.18	\$37.28	\$40.49	\$31.89	\$31.59
Children	Children	\$28.68	\$31.35	\$31.48	\$29.08	\$21.75	\$15.72
	Children's Mental Health Waiver	\$185.17	\$220.34	\$243.43	\$211.37	\$191.90	\$105.47
	Foster Care	\$178.89	\$207.86	\$216.92	\$187.82	\$130.17	\$86.21
	Newborn	\$0.81	\$0.76	\$1.26	\$1.13	\$0.15	\$0.08
Medicare Savings Programs	Qualified Medicare Beneficiary	\$2.58	\$1.80	\$1.93	\$1.63	\$1.36	\$1.07
	Specified Low Income Medicare Beneficiary	\$0.04	\$0.02	\$0.01	\$0.04	\$0.02	\$0.02
Non-Citizens with Medical Emergencies	Non-Citizens	--	--	--	--	--	--
Pregnant Women	Pregnant Women	\$11.76	\$11.70	\$10.60	\$13.77	\$9.82	\$10.43
Special Groups	Breast and Cervical	\$18.54	\$14.12	\$26.66	\$13.51	\$19.45	\$14.38
Overall		\$38.73	\$36.63	\$36.01	\$32.08	\$24.52	\$18.84

HOSPITAL

Table 13. Hospital Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$414.59	\$243.45	\$252.34	\$180.58	\$153.35	\$113.00
ABD ID/DD/ABI	ABI Waiver	\$108.11	\$70.96	--	--	--	--
	Comprehensive Waiver	\$109.02	\$93.70	\$106.74	\$82.80	\$86.88	\$107.59
	ICF ID (WY Life Resource Center)	\$102.45	\$17.13	\$33.80	\$79.55	\$128.37	\$31.50
	Supports Waiver	\$112.43	\$124.31	\$87.27	\$95.83	\$64.81	\$100.30
ABD Institution	Hospital	\$10,681.59	\$18,184.66	\$9,540.25	\$16,831.87	\$13,690.47	\$7,372.67
ABD Long-Term Care	Community Choices Waiver	\$192.79	\$180.91	\$217.19	\$194.28	\$168.30	\$172.55
	Hospice	\$231.12	\$114.10	\$99.14	\$690.74	\$1,517.98	\$166.82
	Nursing Home	\$86.80	\$36.06	\$72.96	\$70.06	\$75.77	\$88.23
	PACE	--	--	--	--	--	--
ABD SSI & SSI Related	SSI & SSI Related	\$259.21	\$233.66	\$268.44	\$258.68	\$272.51	\$312.63
Adults	Family-Care Adults	--	\$156.96	\$187.04	\$175.26	\$164.49	\$148.12
	Former Foster Care	--	\$114.74	\$153.71	\$118.52	\$116.13	\$109.63
Children	Children	--	\$51.35	\$52.38	\$48.25	\$42.58	\$38.39
	Children's Mental Health Waiver	--	\$95.82	\$74.05	\$107.18	\$142.51	\$30.39
	Foster Care	--	\$89.81	\$104.30	\$98.98	\$77.93	\$102.17
	Newborn	--	\$827.62	\$999.51	\$746.62	\$524.53	\$468.66
Medicare Savings Programs	Qualified Medicare Beneficiary	--	\$14.73	\$17.89	\$17.49	\$18.88	\$19.54
	Specified Low Income Medicare Beneficiary	--	--	--	--	--	--
Non-Citizens with Medical Emergencies	Non-Citizens	--	\$1,876.67	\$1,908.63	\$1,129.19	\$477.91	\$238.78
Pregnant Women	Pregnant Women	--	\$544.55	\$625.78	\$636.55	\$366.53	\$251.96
Special Groups	Breast and Cervical	--	\$808.25	\$971.96	\$1,230.04	\$1,020.87	\$701.47
	Family Planning Waiver	--	--	--	--	--	--
	Incarcerated Medicaid Member	--	--	--	--	--	\$2.85
Overall		\$126.05	\$138.36	\$142.25	\$133.46	\$120.13	\$115.77

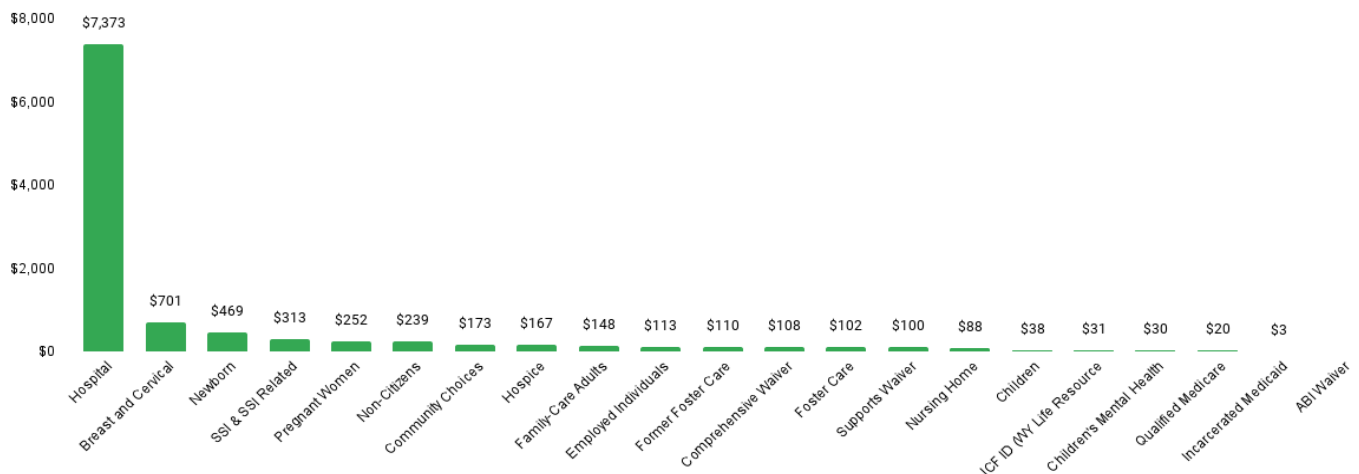


Figure 5. Hospital Per Member Per Month by Eligibility Subgroup ~ SFY 2022

Table 14. Emergency Room Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$29.95	\$20.45	\$20.39	\$21.35	\$11.38	\$13.26
ABD ID/DD/ABI	ABI Waiver	\$15.38	\$9.13	--	--	--	--
	Comprehensive Waiver	\$11.04	\$9.66	\$10.55	\$8.85	\$7.82	\$8.07
	ICF ID (WY Life Resource Center)	\$18.12	\$8.68	\$17.07	\$17.08	\$15.69	\$9.92
	Supports Waiver	\$9.31	\$9.74	\$12.94	\$11.64	\$8.31	\$11.77
ABD Institution	Hospital	\$33.96	\$36.18	\$52.98	\$69.23	\$42.34	\$31.95
ABD Long-Term Care	Community Choices Waiver	\$27.51	\$21.49	\$21.26	\$18.95	\$15.95	\$17.78
	Hospice	\$6.84	\$0.32	\$0.32	\$27.15	\$29.83	\$31.00
	Nursing Home	\$8.76	\$4.57	\$4.41	\$5.06	\$4.07	\$4.54
	PACE	\$0.00	\$0.02	\$0.00	\$0.00	\$0.00	--
ABD SSI & SSI Related	SSI	\$35.21	\$33.11	\$35.27	\$32.53	\$29.07	\$28.90
	SSI Related	\$16.92	\$1.76	\$22.98	\$65.19	\$7.14	\$23.98
Adults	Family-Care Adults	\$38.27	\$38.88	\$43.08	\$37.92	\$31.75	\$30.66
	Former Foster Care	\$46.46	\$61.66	\$48.06	\$37.01	\$36.99	\$43.13
Children	Children	\$11.62	\$12.65	\$12.90	\$11.22	\$8.75	\$10.38
	Children's Mental Health Waiver	\$12.02	\$9.13	\$18.23	\$14.79	\$8.54	\$7.50
	Foster Care	\$11.44	\$12.70	\$15.34	\$13.77	\$11.80	\$13.27
	Newborn	\$19.80	\$24.24	\$34.83	\$24.45	\$12.89	\$18.26
Medicare Savings Programs	Qualified Medicare Beneficiary	\$11.42	\$4.71	\$5.04	\$4.78	\$4.23	\$4.05
	Specified Low Income Medicare Beneficiary	--	--	--	--	--	--
Non-Citizens with Medical Emergencies	Non-Citizens	\$48.76	\$53.71	\$65.69	\$16.18	\$13.24	\$13.06
Pregnant Women	Pregnant Women	\$33.93	\$35.55	\$41.64	\$40.19	\$24.91	\$25.49
Special Groups	Beneficiary Monitoring Program	--	--	--	--	--	--
	Breast and Cervical	\$34.93	\$34.90	\$32.21	\$96.33	\$29.37	\$26.91
	Family Planning Waiver	--	--	--	--	--	--
	Incarcerated Medicaid Member	--	--	--	--	--	--
	Tuberculosis	--	--	--	--	--	--
Overall		\$18.15	\$18.16	\$19.29	\$17.00	\$13.82	\$15.15



Figure 6. Emergency Room Per Member Per Month by Eligibility Subgroup ~ SFY 2022

Table 15. Inpatient Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$274.27	\$169.48	\$109.58	\$99.45	\$102.10	\$69.79
ABD ID/DD/ABI	ABI Waiver	\$76.71	\$57.34	--	--	--	--
	Comprehensive Waiver	\$66.07	\$63.00	\$76.44	\$52.96	\$61.88	\$85.26
	ICF ID (WY Life Resource Center)	\$72.32	\$9.84	\$16.07	\$55.07	\$114.88	\$15.92
	Supports Waiver	\$76.50	\$100.97	\$45.70	\$60.36	\$30.41	\$67.13
ABD Institution	Hospital	\$10,593.27	\$18,070.89	\$10,350.95	\$16,085.13	\$13,540.96	\$7,201.11
ABD Long-Term Care	Community Choices Waiver	\$127.13	\$119.13	\$149.59	\$145.02	\$110.27	\$128.51
	Hospice	\$214.63	\$113.21	\$89.68	\$657.71	\$1,442.69	\$135.62
	Nursing Home	\$66.41	\$25.33	\$60.51	\$52.59	\$57.52	\$72.88
	PACE	--	--	--	--	--	--
ABD SSI & SSI Related	SSI	\$186.75	\$164.84	\$200.31	\$190.80	\$194.36	\$316.44
	SSI Related	\$90.81	\$8.17	\$55.63	\$225.66	\$51.99	\$180.86
Adults	Family-Care Adults	\$74.61	\$79.09	\$95.21	\$97.87	\$89.51	\$86.57
	Former Foster Care	\$41.81	\$59.73	\$95.78	\$64.40	\$65.67	\$53.51
Children	Children	\$25.67	\$31.81	\$32.17	\$29.34	\$25.08	\$20.96
	Children's Mental Health Waiver	\$169.24	\$86.24	\$52.29	\$87.89	\$104.47	\$14.11
	Foster Care	\$64.74	\$65.78	\$77.22	\$74.52	\$51.94	\$81.54
	Newborn	\$436.89	\$796.31	\$953.79	\$727.29	\$494.87	\$443.90
Medicare Savings Programs	Qualified Medicare Beneficiary	\$15.29	\$5.98	\$6.19	\$4.79	\$3.73	\$5.97
	Specified Low Income Medicare Beneficiary	--	--	--	--	--	--
Non-Citizens with Medical Emergencies	Non-Citizens	\$1,123.50	\$1,825.26	\$1,836.73	\$1,116.41	\$465.74	\$225.05
Pregnant Women	Pregnant Women	\$511.37	\$462.80	\$536.62	\$546.13	\$312.00	\$203.28
Special Groups	Beneficiary Monitoring Program	--	--	--	--	--	--
	Breast and Cervical	\$163.97	\$256.75	\$115.64	\$330.91	\$357.91	\$101.41
	Family Planning Waiver	--	--	--	--	--	--
	Incarcerated Medicaid Member	--	--	--	--	--	\$3.48
	Tuberculosis	--	--	--	--	--	--
Overall		\$91.90	\$103.13	\$103.49	\$97.85	\$87.15	\$91.15

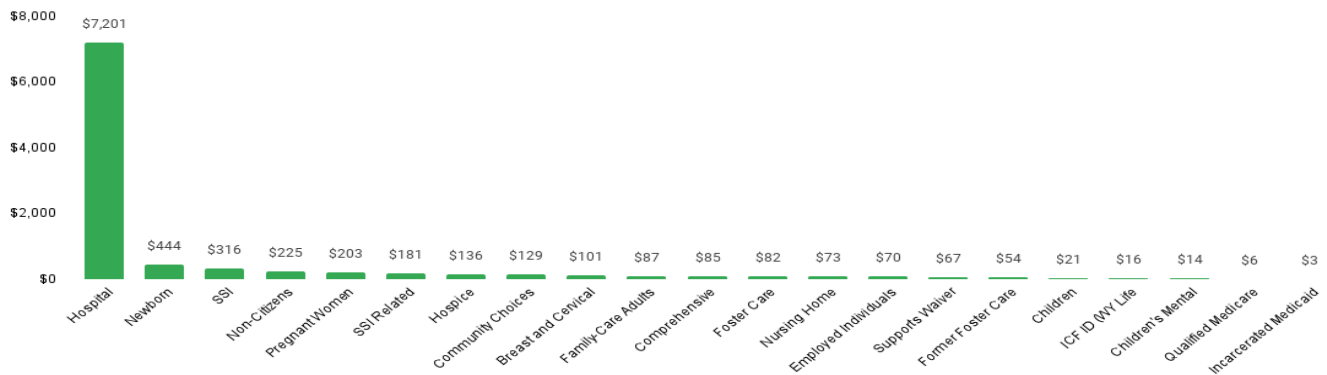


Figure 7. Inpatient Per Member Per Month by Eligibility Subgroup ~ SFY 2022

NURSING FACILITY

Table 16. Nursing Facility Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$0.20	--	--	--	\$0.00	--
ABD ID/DD/ABI	ABI Waiver	\$4.62	\$0.35	--	--	--	--
	Comprehensive Waiver	\$1.13	\$0.02	\$0.17	\$0.12	\$0.01	\$0.32
	ICF ID (WY Life Resource Center)	--	--	--	--	--	--
	Supports Waiver	\$1.16	--	--	\$0.04	--	\$0.80
ABD Institution	Hospital	\$417.69	\$19.70	\$271.16	\$8.40	--	--
ABD Long-Term Care	Community Choices Waiver	\$7.85	\$1.97	\$4.16	\$5.03	\$4.58	--
	Hospice	-\$1.44	\$2.33	--	--	--	--
	Nursing Home	\$4,247.38	\$4,284.07	\$4,360.39	\$4,857.10	\$4,246.22	\$4,375.98
	PACE	--	--	--	--	--	--
ABD SSI & SSI Related	SSI & SSI Related	\$2.94	\$0.02	\$1.35	\$0.11	\$0.10	--
Adults	Family-Care Adults	--	--	--	\$0.02	\$0.06	--
	Former Foster Care	--	--	--	--	--	--
Medicare Savings Programs	Qualified Medicare Beneficiary	\$1.29	\$0.04	\$0.13	\$0.21	\$0.03	\$0.03
	Specified Low Income Medicare Beneficiary	--	--	--	--	--	--
Overall		\$110.41	\$118.23	\$125.82	\$133.89	\$90.95	\$80.19

PHYSICIAN

Table 17. Physician & Other Practitioner Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$211.29	\$247.29	\$142.50	\$137.45	\$153.37	\$112.43
ABD ID/DD/ABI	ABI Waiver	\$64.32	\$68.71	--	--	--	--
	Comprehensive Waiver	\$160.17	\$122.48	\$104.49	\$95.72	\$90.18	\$83.67
	ICF ID (WY Life Resource Center)	\$53.09	\$32.02	\$37.32	\$42.29	\$51.07	\$27.05
	Supports Waiver	\$263.02	\$204.61	\$162.21	\$136.72	\$132.98	\$129.75
ABD Institution	Hospital	\$1,281.59	\$2,221.78	\$1,796.09	\$1,844.26	\$1,279.36	\$799.50
ABD Long-Term Care	Community Choices Waiver	\$106.07	\$108.22	\$99.27	\$98.67	\$90.63	\$95.84
	Hospice	\$41.31	\$39.76	\$19.90	\$121.90	\$121.59	\$50.87
	Nursing Home	\$40.28	\$30.00	\$34.97	\$31.93	\$27.19	\$34.24
	PACE	\$0.89	\$0.29	\$0.04	\$0.00	\$0.21	--
ABD SSI & SSI Related	SSI & SSI Related	\$120.79	\$115.35	\$110.89	\$101.38	\$103.03	\$106.26
Adults	Family-Care Adults	\$94.48	\$99.23	\$102.15	\$96.94	\$92.77	\$92.99
	Former Foster Care	\$87.00	\$85.84	\$118.67	\$76.50	\$82.66	\$67.67
Children	Children	\$41.70	\$41.92	\$42.69	\$36.97	\$32.10	\$32.57
	Children's Mental Health Waiver	\$66.66	\$33.16	\$41.61	\$52.86	\$50.21	\$38.07
	Foster Care	\$55.70	\$57.49	\$63.47	\$52.53	\$48.09	\$53.65
	Newborn	\$138.83	\$157.86	\$265.35	\$193.73	\$123.04	\$112.71
Medicare Savings Programs	Qualified Medicare Beneficiary	\$33.29	\$29.26	\$31.13	\$29.95	\$25.58	\$27.24
	Specified Low Income Medicare Beneficiary	--	--	--	--	--	--
Non-Citizens with Medical Emergencies	Non-Citizens	\$283.45	\$282.09	\$337.83	\$287.36	\$86.80	\$46.10
Pregnant Women	Pregnant Women	\$312.72	\$318.47	\$348.58	\$365.59	\$200.34	\$137.39
Special Groups	Breast and Cervical	\$576.99	\$660.45	\$1,025.31	\$1,165.94	\$1,571.84	\$1,353.28
	Family Planning Waiver	\$6.11	\$4.76	\$5.69	\$2.56	\$0.03	\$19.57
	Tuberculosis	--	--	--	--	--	--
Overall		\$76.05	\$75.47	\$76.40	\$69.51	\$61.73	\$61.13

PRESCRIPTION DRUG

Table 18. Prescription Drug Per Member Per Month History by Eligibility Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
ABD EID	Employed Individuals with Disabilities	\$276.48	\$233.28	\$217.13	\$127.90	\$79.13	\$65.28
ABD ID/DD/ABI	ABI Waiver	\$117.21	\$122.30	--	--	--	--
	Comprehensive Waiver	\$238.16	\$224.47	\$211.87	\$202.11	\$197.35	\$202.09
	ICF ID (WY Life Resource Center)	\$0.50	\$0.02	--	--	--	--
	Supports Waiver	\$140.01	\$151.61	\$143.02	\$148.67	\$145.90	\$157.65
ABD Institution	Hospital	\$93.41	\$69.62	\$361.54	\$25.69	\$44.22	\$166.46
ABD Long-Term Care	Community Choices Waiver	\$119.05	\$149.68	\$153.53	\$161.30	\$152.78	\$168.57
	Hospice	\$5.17	--	\$1.93		\$7.57	\$14.45
	Nursing Home	\$29.41	\$35.62	\$42.73	\$36.47	\$31.05	\$35.42
	PACE	--	--	--	--	--	--
ABD SSI & SSI Related	SSI & SSI Related	\$222.08	\$260.66	\$304.57	\$281.26	\$285.89	\$291.25
Adults	Family-Care Adults	\$93.28	--	\$158.14	\$158.30	\$156.49	\$157.19
	Former Foster Care	\$44.69	--	\$58.79	\$87.22	\$50.90	\$91.63
Children	Children	\$31.90	--	\$42.96	\$44.93	\$39.36	\$48.28
	Children's Mental Health Waiver	\$128.73	--	\$111.67	\$149.42	\$95.70	\$67.40
	Foster Care	\$64.23	--	\$82.35	\$77.35	\$66.07	\$70.91
	Newborn	\$21.78	--	\$52.59	\$31.52	\$18.91	\$33.39
Medicare Savings Programs	Qualified Medicare Beneficiary	--	--	--	--	\$0.01	\$0.20
	Specified Low Income Medicare Beneficiary	--	--	--	--	--	--
Non-Citizens with Medical Emergencies	Non-Citizens	--	--	--	--	--	--
Pregnant Women	Pregnant Women	\$35.01	--	\$66.71	\$59.96	\$51.18	\$57.83
Special Groups	Breast and Cervical	\$347.17	--	\$527.64	\$446.00	\$367.50	\$475.36
	Family Planning Waiver	\$4.07	--	\$2.30	\$14.16	\$1.38	--
	Tuberculosis	\$13.65	--	--	--	--	--
Overall		\$65.86	\$81.15	\$93.26	\$90.14	\$81.61	\$86.64

POPULATION DETAIL

This section provides PMPM data by various service breakdowns:

- high-level service categories
- detailed service areas

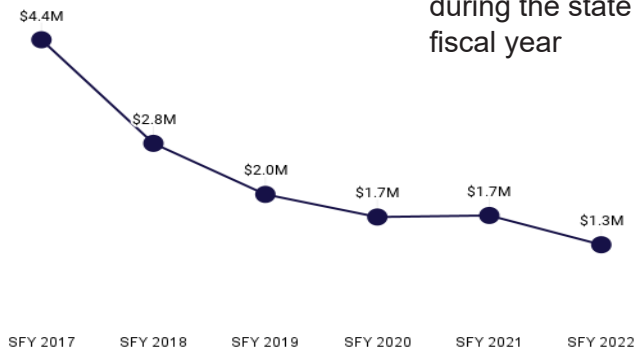
Service level PMPM costs are calculated by taking the total expenditures for the service and dividing by the total member months for the entire Medicaid program.

EMPLOYED INDIVIDUALS WITH DISABILITIES

EXPENDITURES

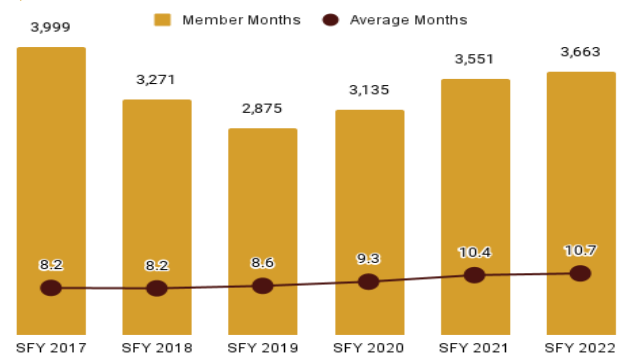
\$1.3 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

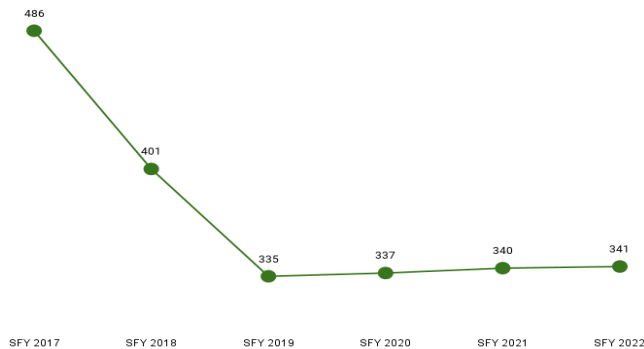
3,663



MEMBERS

341

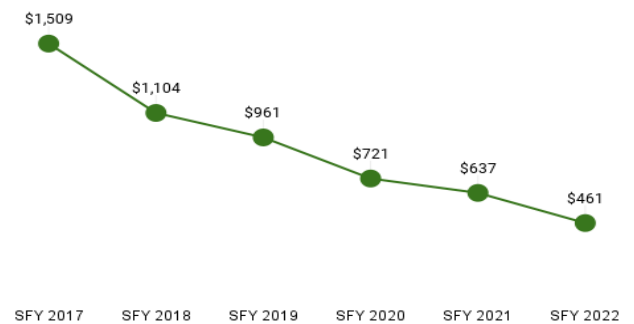
unique individuals enrolled during the state fiscal year



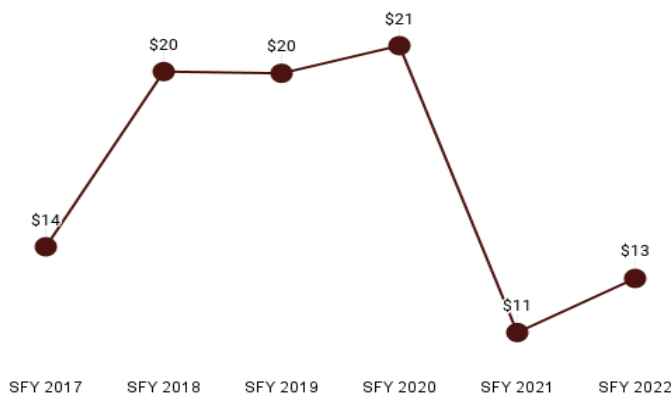
PER MEMBER PER MONTH

\$461

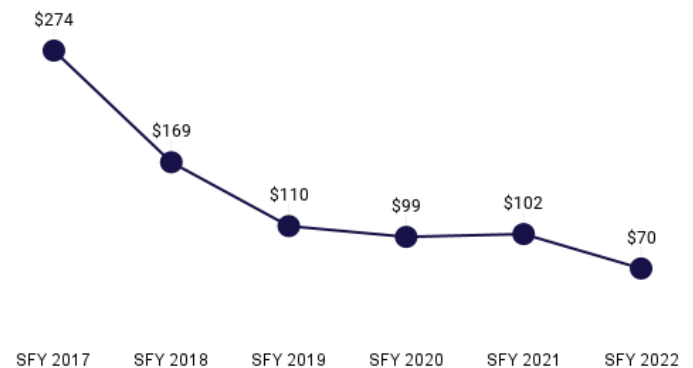
PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



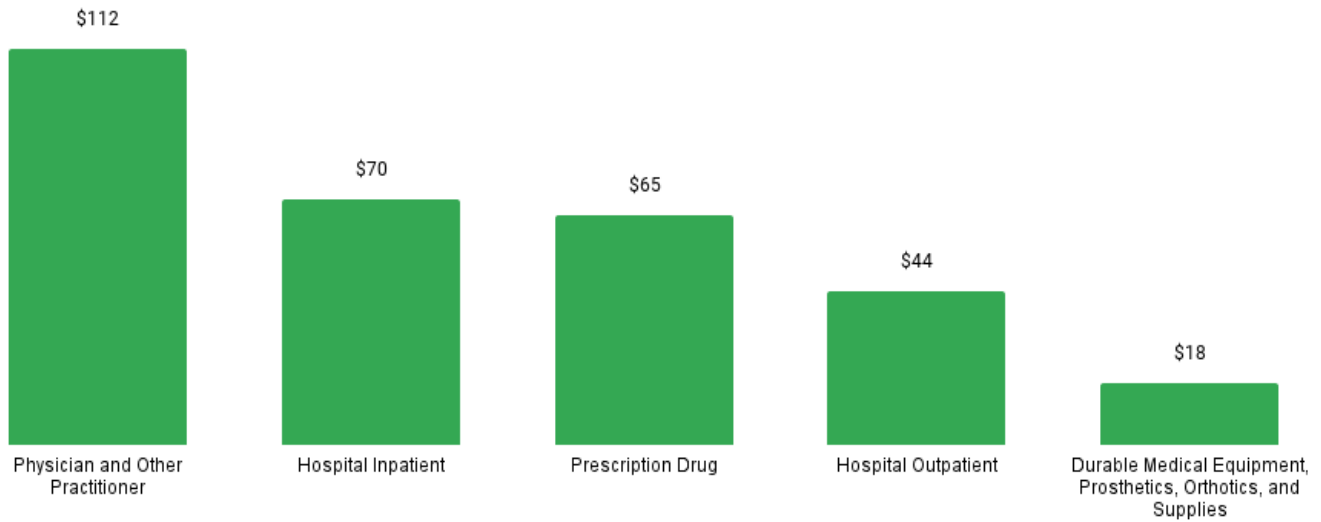


Figure 8. Employed Individuals with Disabilities Per Member Per Month by Service Area

Table 19. Employed Individuals with Disabilities Per Member Per Month Summary by Subgroup

Eligibility Category / Subcategory	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
ABD EID						
EID	\$1,275,629	-26%	3,663	3%	\$348	-28%

Table 20. Employed Individuals with Disabilities History by Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
EID		\$4,380,238	\$2,811,061	\$2,038,397	\$1,695,829	\$1,719,179	\$1,275,629	-70.9%
Member Months								
EID		3,999	3,271	2,875	3,135	3,551	3,663	-8.4%
PMPM								
EID		\$1,095	\$859	\$709	\$541	\$484	\$348	-68.2%

Table 21. Employed Individuals with Disabilities Per Member Per Month History by Service Area

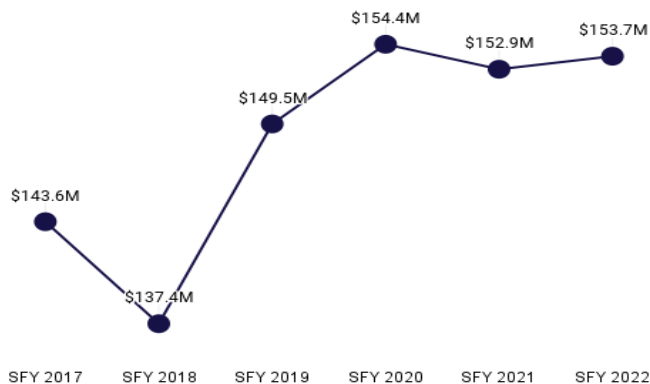
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$9.80	\$11.30	\$1.67	\$3.24	\$9.85	\$2.52
Ambulatory Surgery Center	\$6.37	\$4.38	\$1.66	\$3.33	\$2.44	\$6.04
Behavioral Health	\$45.03	\$52.71	\$27.35	\$23.66	\$18.93	\$12.71
Care Management Entity	--	--	--	--	--	--
Clinic/Center	--	--	--	--	--	--
Dental	\$21.92	\$7.39	\$5.95	\$6.41	\$5.85	\$5.77
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	\$56.19	\$32.38	\$30.38	\$27.63	\$42.66	\$17.64
End-Stage Renal Disease	\$9.32	\$1.18	\$4.04	\$4.11	\$0.85	\$1.81
Federally Qualified Health Center	\$11.77	\$9.04	\$12.58	\$12.84	\$10.87	\$6.03
Home Health	\$22.96	\$4.34	\$0.82	\$1.64	\$0.71	\$0.54
Hospice	\$2.06	\$3.43	\$1.61	\$5.04	--	--
Hospital Inpatient	\$274.27	\$172.64	\$105.98	\$99.45	\$102.10	\$69.79
Hospital Outpatient	\$140.61	\$84.49	\$146.29	\$80.97	\$51.24	\$43.52
Hospital-Other	-\$0.30	-\$13.68	\$0.06	\$0.15	\$0.01	--
Hospital Total	\$414.59	\$243.45	\$252.34	\$180.58	\$153.35	\$113.32
Intermediate Care Facility for Individuals with Intellectual Disabilities	--	--	--	--	--	--
Laboratory	\$1.59	\$0.99	\$0.63	\$0.68	\$0.55	\$0.30
Nursing Facility	\$0.20	--	--	--	--	--
Other	\$1.31	\$1.48	\$2.24	\$1.33	\$0.71	\$0.46
Physicians and Other Practitioners	\$211.29	\$247.29	\$142.50	\$137.45	\$153.37	\$112.43
Prescription Drug	\$276.48	\$233.28	\$217.13	\$127.90	\$79.13	\$65.28
Program for All-Inclusive Care of Elderly (PACE)	--	--	--	--	--	--
Psychiatric Residential Treatment Facility	--	--	--	--	--	--
Public Health or Welfare	\$0.79		\$0.38	\$0.40	\$0.38	\$0.07
Public Health, Federal	\$0.10	\$0.69	\$1.95	\$0.75	\$0.58	\$0.71
Rural Health Clinic	\$1.90	\$0.43	\$4.70	\$2.32	\$2.89	\$1.71
Vision	\$1.66	\$3.97	\$1.08	\$1.63	\$1.04	\$0.90
Waiver-Acquired Brain Injury	--	\$1.66	--	--	--	--
Waiver Total	--	\$1.66	--	--	--	--
Total	\$1,509.92	\$1,104.50	\$961.35	\$721.51	\$637.49	\$461.56

AGED, BLIND, OR DISABLED INTELLECTUAL / DEVELOPMENTAL DISABILITIES AND ACQUIRED BRAIN INJURY

EXPENDITURES

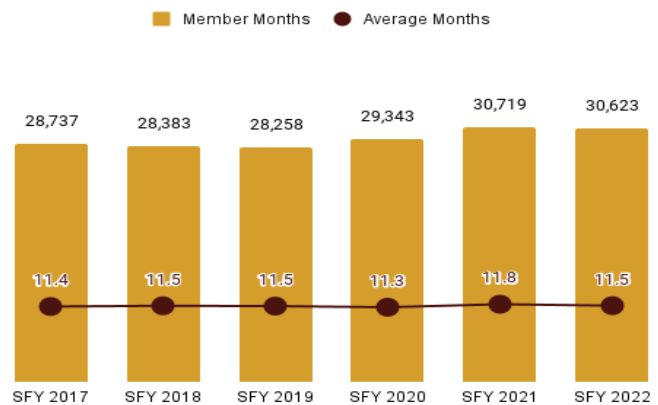
\$153.7 million

paid to providers for services rendered during the state fiscal year



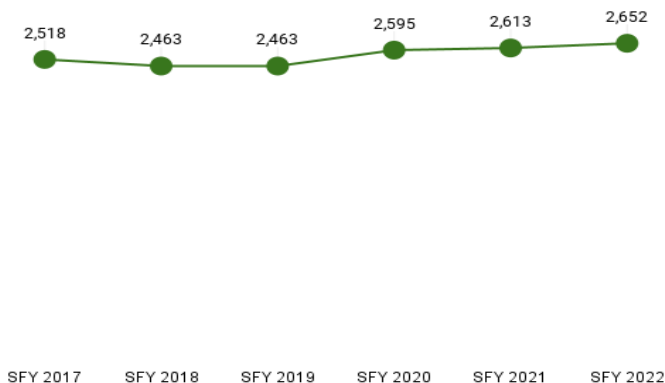
MEMBER MONTHS

30,623



MEMBERS
2,652

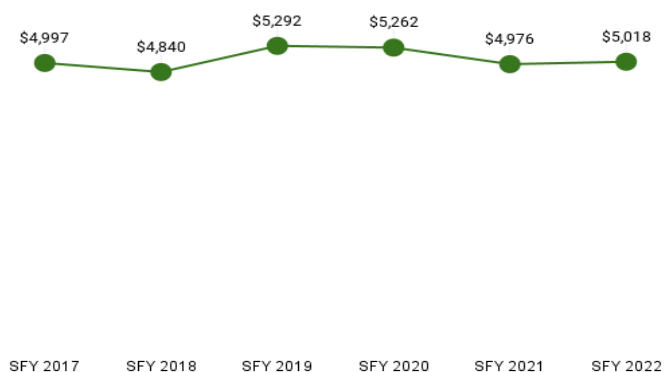
unique individuals enrolled during the state fiscal year



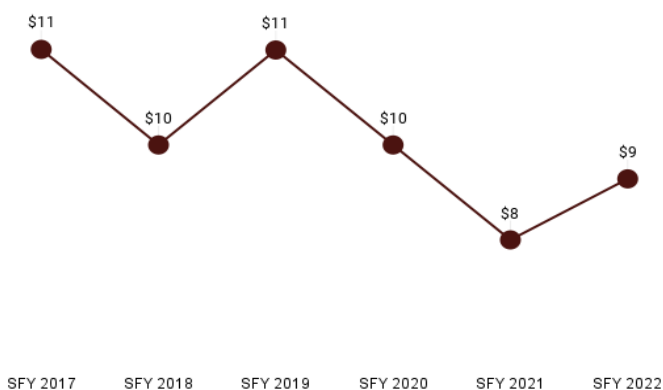
PER MEMBER PER MONTH

\$5,018

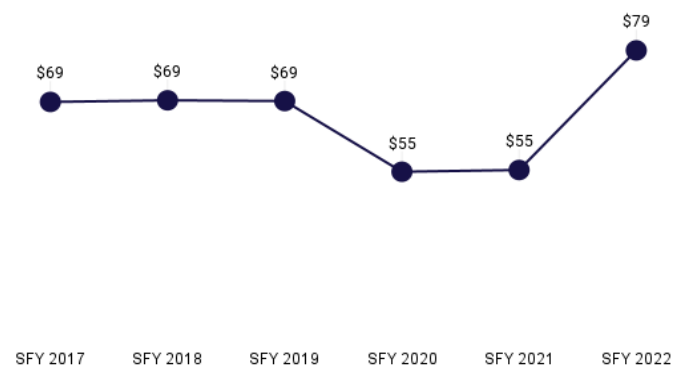
PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



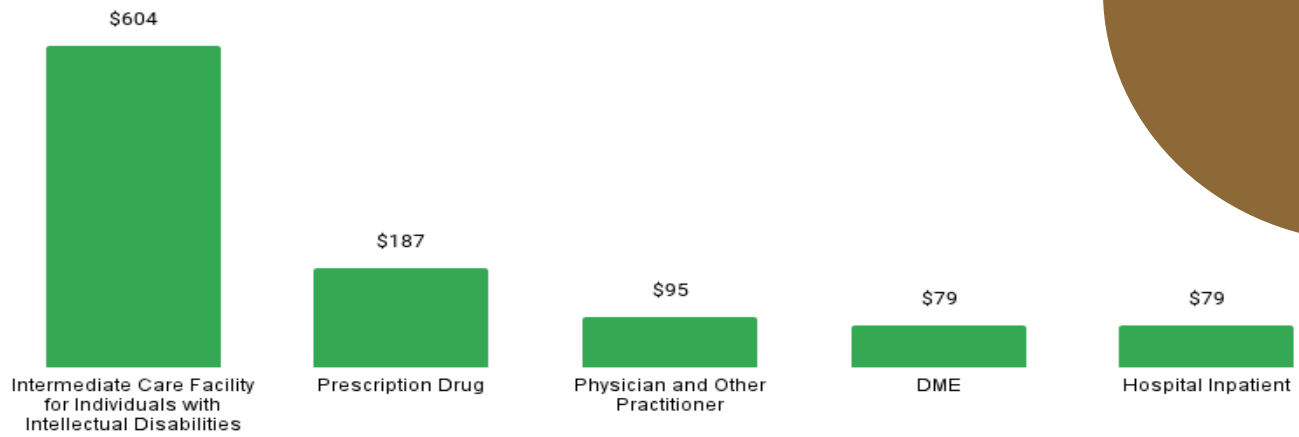


Figure 9. Intellectual/Developmental Disabilities and Acquired Brain Injury Per Member Per Month by Service Area

Table 22. Intellectual/Developmental Disabilities and Acquired Brain Injury Per Member Per Month Summary by Subgroup

Eligibility Category / Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
ABD ID/DD/ABI						
Comprehensive Waiver	\$122,133,290	-1%	21,964	-2%	\$5,530	1%
ICF-ID	\$18,572,895	9%	573	-3%	\$28,671	13%
Supports Waiver	\$12,957,566	8%	8,085	4%	\$1,553	3%

Table 23. Intellectual/Developmental Disabilities and Acquired Brain Injury Per Member Per Month History for Waiver and Non-Waiver Services

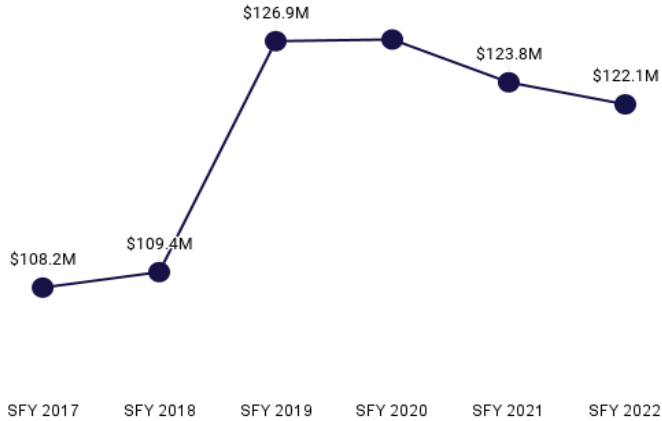
Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
ABD ID/DD/ABI	ABI Waiver	\$8,011,606	\$4,961,167	--	--	--	--	-100%
	Adult ID/DD Waiver	\$120	--	--	--	--	--	-100%
	Comprehensive Waiver	\$108,170,281	\$109,350,754	\$126,948,820	\$127,076,539	\$123,812,070	\$122,133,290	12.9%
	ICF ID (WY Life Resource Center)	\$19,173,268	\$13,613,841	\$12,985,188	\$17,038,857	\$17,030,531	\$18,572,895	-3.1%
	Supports Waiver	\$8,233,031	\$9,452,672	\$9,605,968	\$10,276,510	\$12,028,006	\$12,957,566	57.4%
Member Months								
ABD ID/DD/ABI	ABI Waiver	1,772	1,126	--	--	--	--	-100%
	Comprehensive Waiver	21,091	20,951	21,941	22,295	22,385	21,964	4.1%
	ICF ID (WY Life Resource Center)	754	663	611	597	593	573	-24.0%
	Supports Waiver	5,120	5,643	5,706	6,451	7,741	8,085	57.9%
PMPM								
ABD ID/DD/ABI	ABI Waiver	\$4,521	\$4,406	--	--	--	--	-100%
	Comprehensive Waiver	\$5,129	\$5,219	\$5,786	\$5,700	\$5,531	\$5,561	8.4%
	ICF ID (WY Life Resource Center)	\$25,429	\$20,534	\$21,252	\$28,541	\$28,719	\$32,413	27.5%
	Supports Waiver	\$1,608	\$1,675	\$1,683	\$1,593	\$1,554	\$1,603	-0.3%

COMPREHENSIVE WAIVER

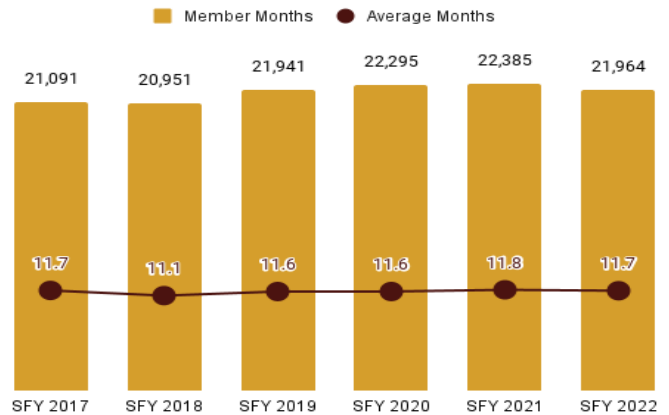
EXPENDITURES

\$122.1 million

paid to providers for services rendered during the state fiscal year



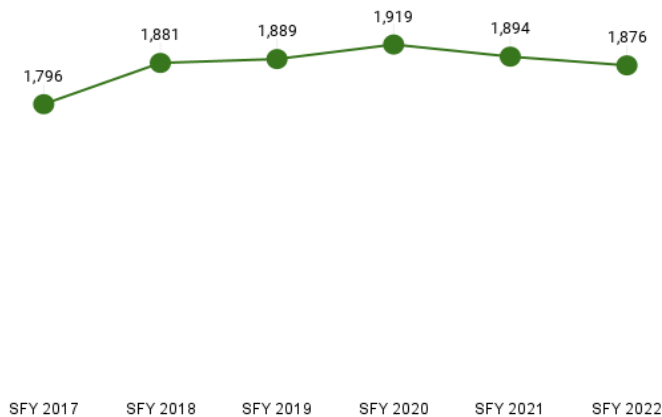
MEMBER MONTHS
21,964



MEMBERS

1,876

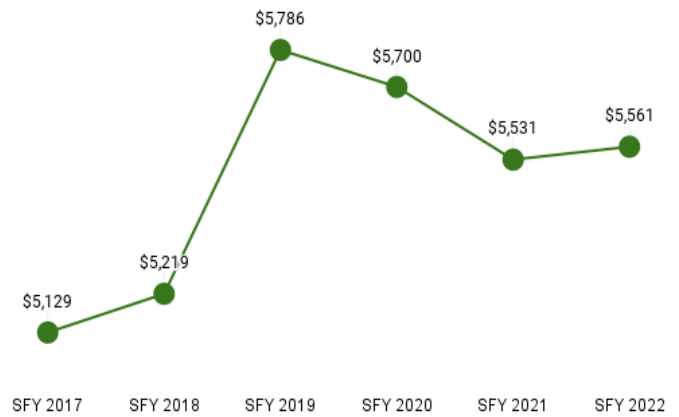
unique individuals enrolled during the state fiscal year



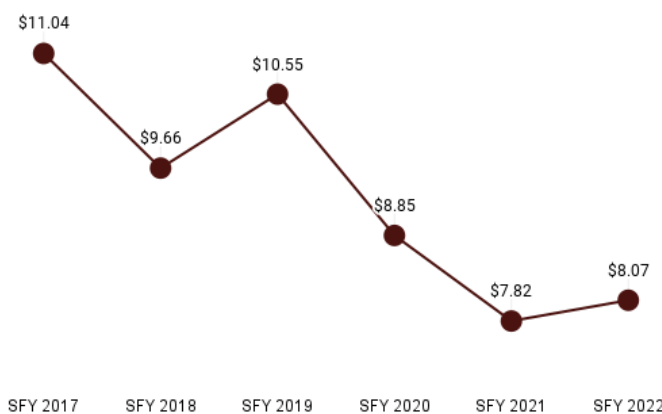
PER MEMBER PER MONTH

\$5,561

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

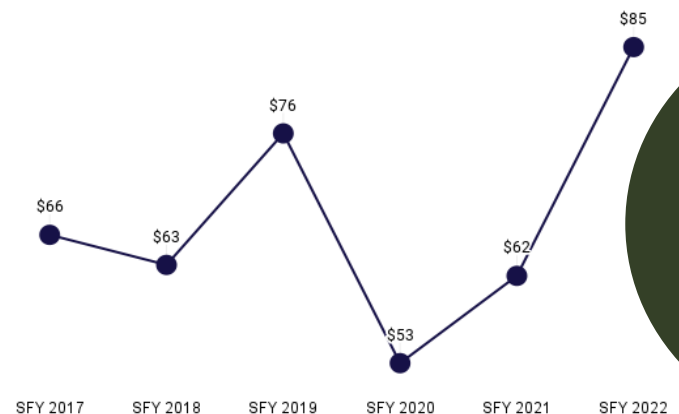


Table 24. Comprehensive Waiver Per Member Per Month History by Service Area

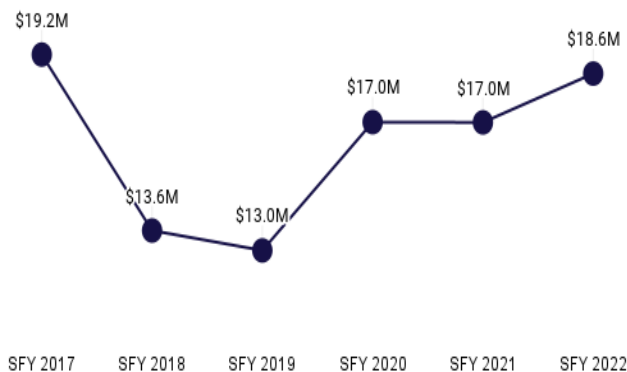
PMPM	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$3.24	\$4.73	\$2.67	\$1.88	\$2.31	\$4.81
Ambulatory Surgery Center	\$4.44	\$4.23	\$4.56	\$3.56	\$5.86	\$6.59
Behavioral Health	\$134.42	\$48.52	\$35.83	\$32.58	\$29.55	\$28.52
Care Management Entity	--	--	--	--	--	--
Clinic/Center	--	--	--	--	--	--
Dental	\$14.67	\$13.74	\$12.49	\$10.27	\$11.51	\$10.55
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	\$80.62	\$74.59	\$79.01	\$81.22	\$83.56	\$85.42
End-Stage Renal Disease	\$0.14	\$1.16	\$2.28	\$1.77	\$2.03	\$2.26
Federally Qualified Health Center	\$3.25	\$3.36	\$2.75	\$2.35	\$2.88	\$2.81
Home Health	\$216.19	\$72.29	\$16.24	\$25.65	\$12.79	\$13.84
Hospice	\$0.76	\$0.89	\$0.21	\$0.05	\$0.78	\$2.52
Hospital Inpatient	\$66.01	\$63.00	\$76.44	\$52.96	\$61.88	\$85.26
Hospital Outpatient	\$43.02	\$30.62	\$30.24	\$29.76	\$24.97	\$22.30
Hospital-Other	-\$0.01	\$0.09	\$0.06	\$0.07	\$0.03	\$0.02
Hospital Total	\$109.02	\$93.70	\$262.79	\$82.80	\$86.88	\$107.59
Laboratory	\$0.57	\$0.58	\$0.53	\$0.42	\$0.48	\$0.46
Nursing Facility	\$1.13	\$0.02	\$0.17	\$0.12	\$0.01	\$0.32
Other	\$0.52	\$0.32	\$0.45	\$0.48	\$0.42	\$0.33
Physician and Other Practitioner	\$160.17	\$122.48	\$104.49	\$95.72	\$90.18	\$83.67
Prescription Drug	\$238.16	\$224.47	\$211.87	\$202.11	\$197.35	\$202.09
Psychiatric Residential Treatment Facility	--	\$5.17	--	--	--	--
Public Health or Welfare	\$0.15	\$0.22	\$0.41	\$0.87	\$0.84	\$0.28
Public Health, Federal	\$4.17	\$1.89	\$2.55	\$2.29	\$3.44	\$2.92
Rural Health Clinic	\$1.34	\$1.69	\$1.72	\$1.63	\$2.01	\$1.69
Vision	\$3.87	\$3.28	\$3.08	\$2.73	\$2.62	\$2.58
Waiver-Comprehensive	\$4,151.91	\$4,542.03	\$5,197.86	\$5,151.28	\$4,995.52	\$5,001.37
Total	\$5,128.74	\$5,219.36	\$5,785.92	\$5,699.78	\$5,531.02	\$5,560.61

INTERMEDIATE CARE FACILITY FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES

EXPENDITURES

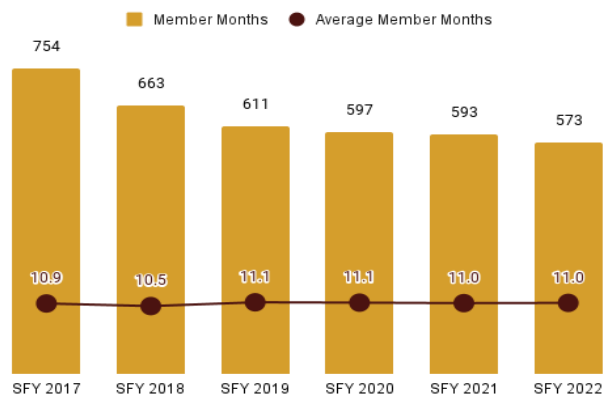
\$18.6 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

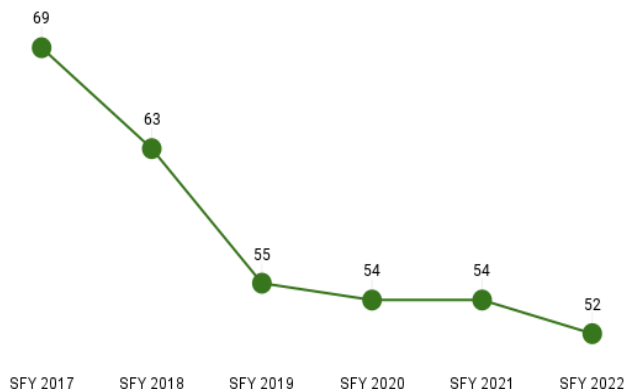
573



MEMBERS

52

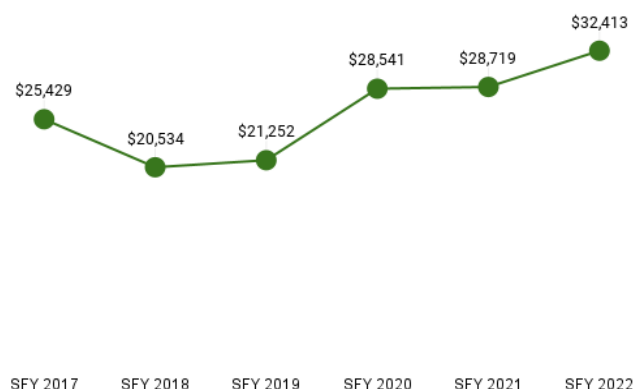
unique individuals enrolled during the state fiscal year



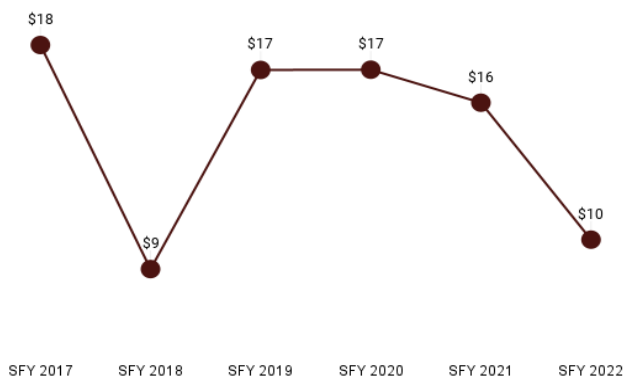
PER MEMBER PER MONTH

\$32,413

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

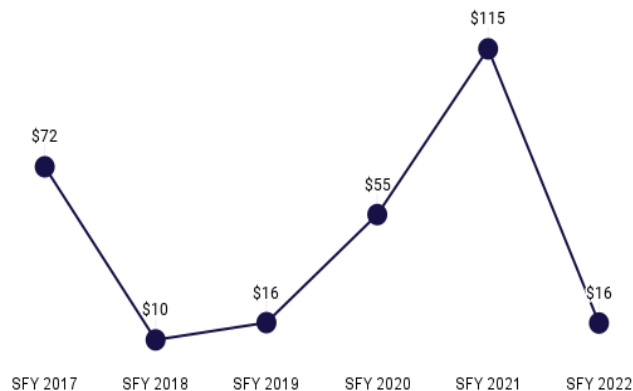


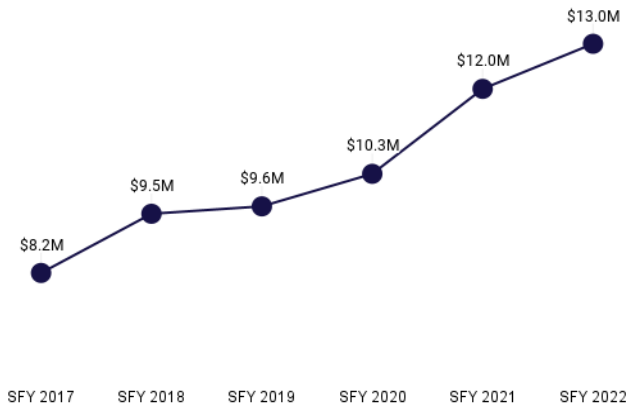
Table 25. Intermediate Care for Individuals with Intellectual Disabilities Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$14.19	\$1.88	\$19.46	\$17.74	\$29.89	\$0.04
Ambulatory Surgical Center	\$0.89	\$0.09	\$0.25	\$0.21	--	--
Behavioral Health	--	--	\$0.28	--	--	\$1.57
Dental	\$0.08	\$0.51	\$5.45	\$0.85	\$0.55	\$3.57
DME, Prosthetics/Orthotics/Supplies	\$15.28	\$11.48	\$24.74	\$337.20	\$45.15	\$55.09
Hospice	--	--	--	--	--	--
Hospital Total	\$102.45	\$17.13	\$33.80	\$79.55	\$128.37	\$31.50
Inpatient	\$72.32	\$9.84	\$16.07	\$55.07	\$114.88	\$15.92
Outpatient	\$30.13	\$7.30	\$17.73	\$24.48	\$13.49	\$15.58
Other Hospital	--	--	--	--	--	--
ICF-IID	\$25,239.59	\$20,467.47	\$21,127.68	\$28,060.60	\$28,461.51	\$32,292.38
Laboratory	--	\$0.04	--	--	--	\$0.07
Physician & Other Practitioner	\$53.09	\$32.02	\$37.32	\$42.29	\$51.07	\$27.05
Prescription Drug	\$0.50	\$0.02	--	--	--	--
Public Health, Federal	--	--	--	\$1.60	--	--
Vision	\$2.67	\$3.05	\$3.39	\$0.77	\$2.75	\$2.14
Overall	\$25,428.74	\$20,533.70	\$21,252.35	\$28,540.80	\$28,719.28	\$32,413.43

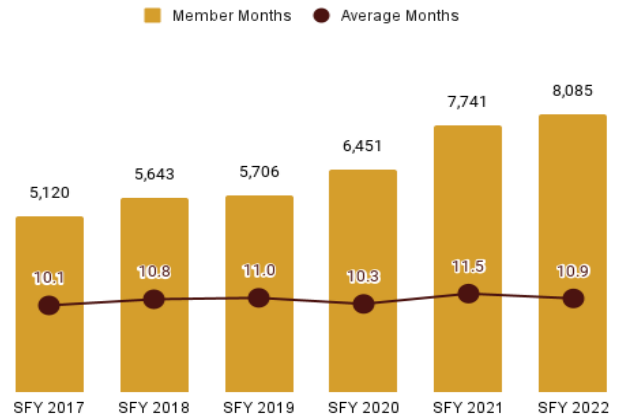
SUPPORTS WAIVER

EXPENDITURES \$13.0 million

paid to providers for services rendered during the state fiscal year

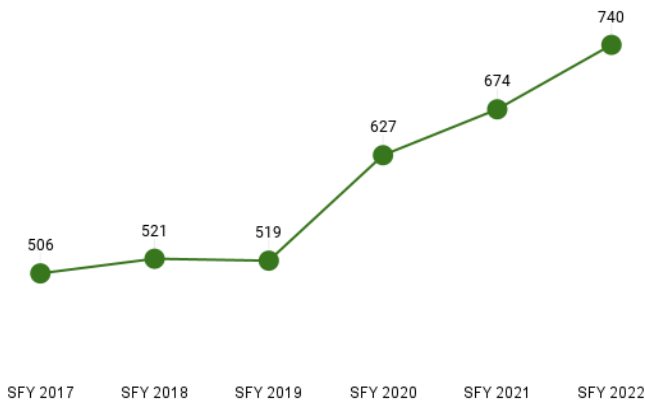


MEMBER MONTHS 8,085



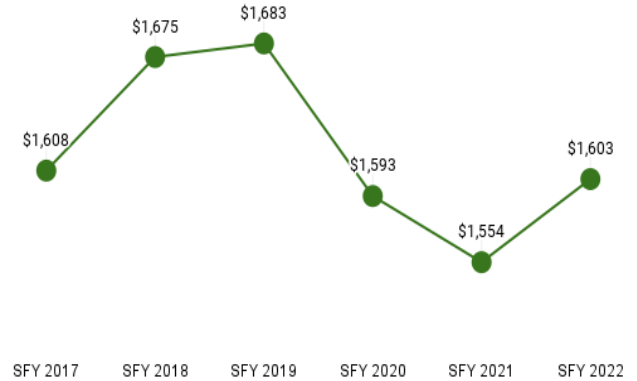
MEMBERS 740

unique individuals enrolled during the state fiscal year

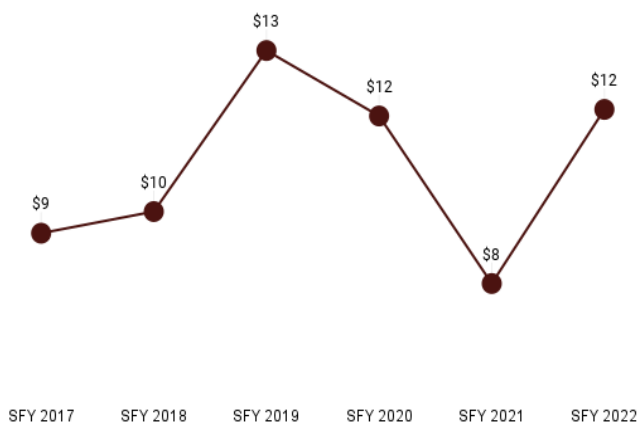


PER MEMBER PER MONTH \$1,603

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



Table 26. Supports Waiver Per Member Per Month by Service Area

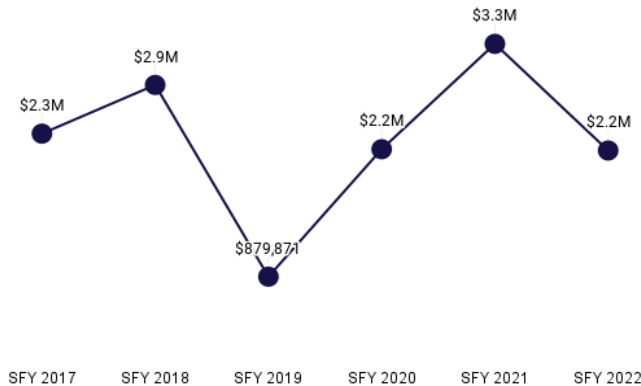
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$1.46	\$3.22	\$3.60	\$3.90	\$2.10	\$3.17
Ambulatory Surgical Center	\$5.86	\$5.64	\$3.98	\$5.52	\$5.08	\$10.34
Behavioral Health	\$97.99	\$46.60	\$49.58	\$42.11	\$71.83	\$58.74
Care Management Entity(CME)	\$3.99	--	--	--	--	--
Clinic/Center	\$15.70	\$1.43	\$0.95	\$0.18	\$1.79	\$1.04
Dental	\$39.51	\$12.98	\$14.32	\$11.44	\$12.67	\$14.03
DME, Prosthetics/Orthotics/Supplies	--	\$57.75	\$57.28	\$46.94	\$63.68	\$64.40
Federally Qualified Health Center	\$2.72	--	--	--	--	\$2.48
Home Health	\$23.35	\$5.25	\$4.69	\$3.35	\$4.77	\$5.54
Hospice	--	\$2.02	--	\$0.68	\$0.35	\$0.62
Hospital Total	\$35.93	\$124.31	\$87.27	\$95.83	\$64.81	\$100.30
Inpatient	\$35.89	\$87.41	\$59.11	\$61.03	\$29.85	\$67.13
Outpatient	\$0.04	\$37.04	\$28.11	\$34.75	\$34.94	\$33.16
Other Hospital	--	-\$0.15	\$0.05	\$0.05	\$0.02	--
ICF	\$0.47	--	--	--	--	--
Laboratory	\$1.16	\$0.34	\$0.80	\$0.41	\$0.42	\$1.00
Nursing Facility	\$0.97	--	--	\$0.04	--	\$0.80
Other	\$263.02	\$1.07	\$0.99	\$0.86	\$0.84	\$0.64
Physician & Other Practitioner	\$140.01	\$204.61	\$162.21	\$136.72	\$132.98	\$129.75
Prescription Drug	--	\$151.61	\$143.02	\$148.67	\$145.90	\$157.65
PRTF	\$7.53	--	--	--	--	--
Public Health or Welfare	\$0.13	\$9.81	\$3.15	\$2.61	\$5.26	--
Public Health, Federal	\$2.85	\$0.13	\$0.58	\$0.94	\$0.84	\$0.37
Rural Health Clinic	\$1.85	\$1.43	\$2.15	\$4.04	\$1.97	\$3.82
Vision	\$5.45	\$3.27	\$3.31	\$2.69	\$3.08	\$3.04
Waiver-Comprehensive	--	--	--	--	--	\$1,039.28
Waiver-Supports	\$881.56	\$1,038.61	\$1,140.37	\$1,081.71	\$1,030.82	--
Overall	\$1,608.01	\$1,675.11	\$1,683.49	\$1,593.00	\$1,553.81	\$1,602.67

AGED, BLIND, OR DISABLED INSTITUTION

EXPENDITURES

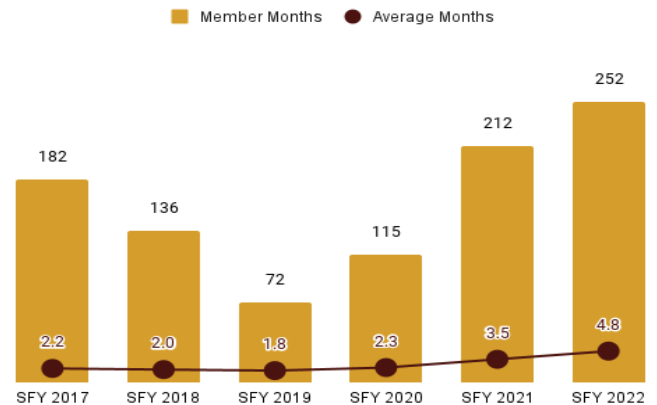
\$2.2 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

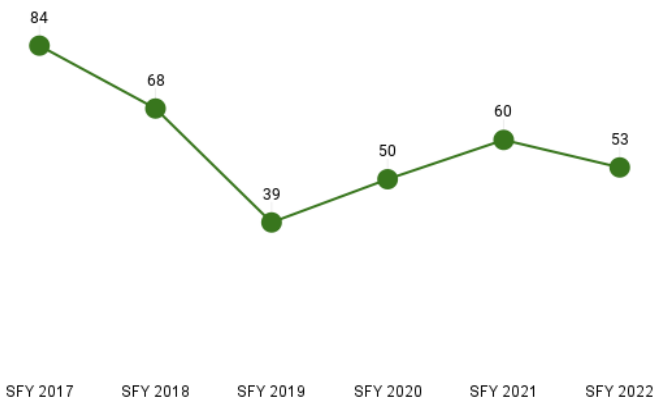
252



MEMBERS

53

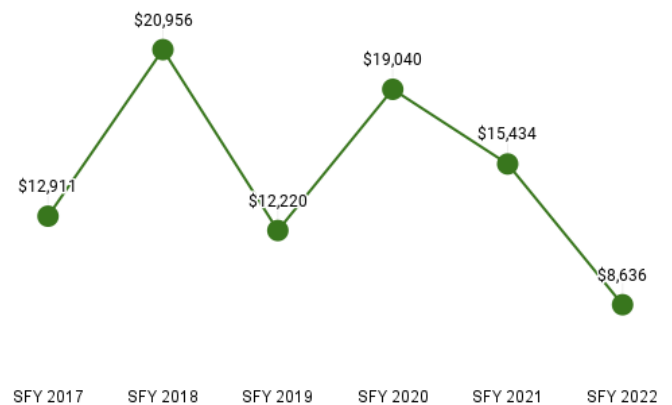
unique individuals enrolled during the state fiscal year



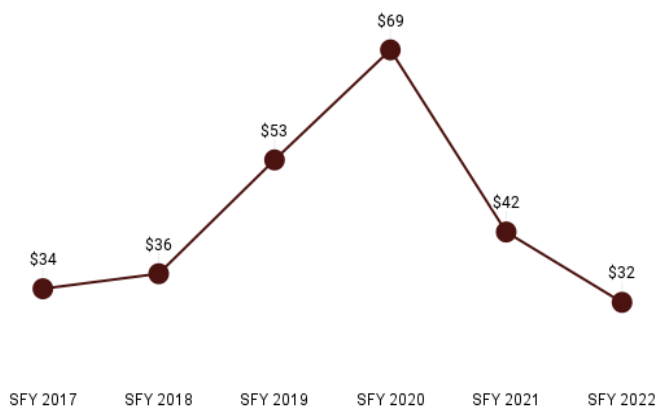
PER MEMBER PER MONTH

\$8,636

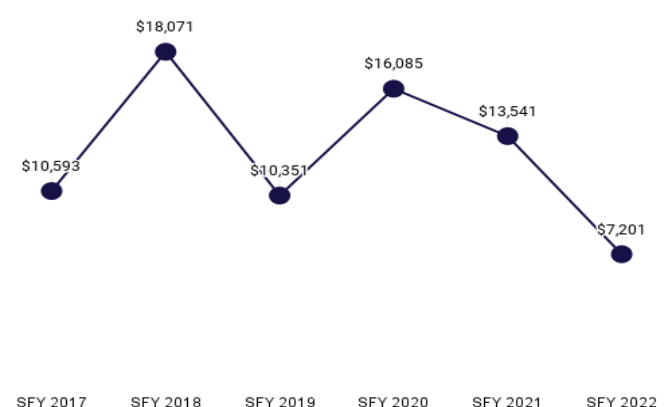
PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

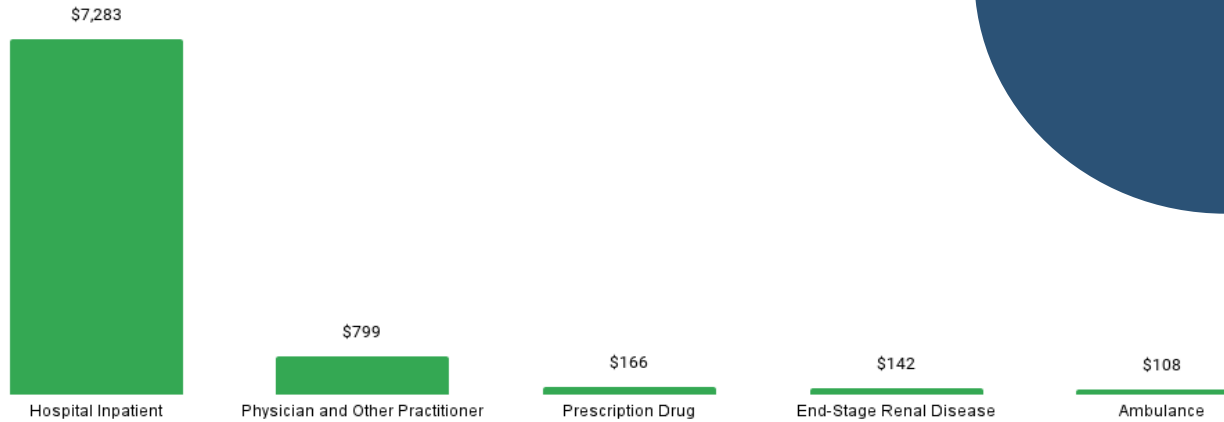


Figure 10. Institution Per Member Per Month by Service Area

Table 27. Institution Per Member Per Month Summary by Subgroup

Eligibility Category/ Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
ABD Institution						
Hospital	\$2,176,379	-33.5%	252	18.9%	\$8,636	-44%
IMD (WY State Hospital - Age 65 & Over)	\$0	-100.0%	--	--	--	--

Table 28. Institution History by Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
ABD Institution	Hospital	\$2,349,813	\$2,850,073	\$879,871	\$2,189,584	\$3,272,079	\$2,176,379	-7.4%
	IMD (WY State Hospital - Age 65 & Over)	--	--	\$112	\$21	--	--	--
Member Months								
ABD Institution	Hospital	182	136	72	115	212	252	38.5%
	IMD (WY State Hospital - Age 65 & Over)	--	--	--	--	--	--	--
Per Member Per Month								
ABD Institution	Hospital	--	\$20,956	\$12,220	\$19,040	\$15,434	\$8,636	--
	IMD (WY State Hospital - Age 65 & Over)	--	--	--	--	--	--	--

Table 29. Institution Per Member Per Month History by Service Area

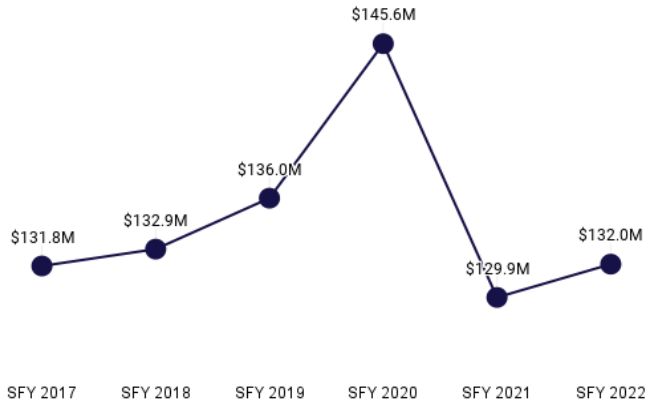
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$219.30	\$181.82	\$115.04	\$162.66	\$174.25	\$108.09
Ambulatory Surgical Center	--	--	--	--	--	--
Behavioral Health	\$11.35	\$14.93	\$18.61	\$0.03	\$1.62	\$7.36
Dental	\$1.16	\$4.12	--	\$0.78	--	\$0.92
DME, Prosthetics/Orthotics/Supplies	\$150.28	\$129.27	\$44.83	\$14.44	\$38.64	\$4.38
End-Stage Renal Disease	--	--	--	\$19.19	\$132.14	\$142.48
Federally Qualified Health Center	--	\$2.63	--	\$3.89	\$8.34	--
Home Health	\$5.42	\$15.29	\$14.08	--	\$14.28	\$15.39
Hospice	\$1.05	\$16.29	--	\$1.57	\$33.87	\$0.72
Hospital Total	\$10,681.59	\$18,184.66	\$9,540.25	\$16,831.87	\$13,690.47	\$7,372.67
Inpatient	\$10,593.27	\$18,070.89	\$9,316.71	\$16,732.65	\$13,540.96	\$7,282.68
Outpatient	\$88.00	\$113.77	\$223.54	\$99.22	\$149.51	\$89.99
Other Hospital	\$0.31	--	--	--	--	--
Laboratory	\$20.26	\$47.39	\$0.38	\$1.22	--	\$2.86
Nursing Facility	\$417.69	\$19.70	\$271.16	\$8.40	--	--
Other	\$17.19	\$33.04	\$43.54	\$2.16	--	--
Physician & Other Practitioner	\$1,281.59	\$2,221.78	\$1,796.09	\$1,844.26	\$1,279.36	\$799.50
Prescription Drug	\$93.41	\$69.62	\$361.54	\$25.69	\$44.22	\$166.46
Public Health or Welfare	\$9.23	\$11.47	\$13.33	\$14.61	\$9.06	\$1.90
Public Health, Federal	--	--	--	\$107.62	\$7.34	\$10.30
Rural Health Clinic	\$1.35	\$4.41	\$1.57	\$0.73	\$0.76	\$0.08
Vision	\$0.18	--	--	\$0.74	--	\$3.32
Total	\$12,911.06	\$20,956.42	\$12,220.44	\$19,039.86	\$15,434.33	\$8,636.42

AGED, BLIND, OR DISABLED LONG-TERM CARE

EXPENDITURES

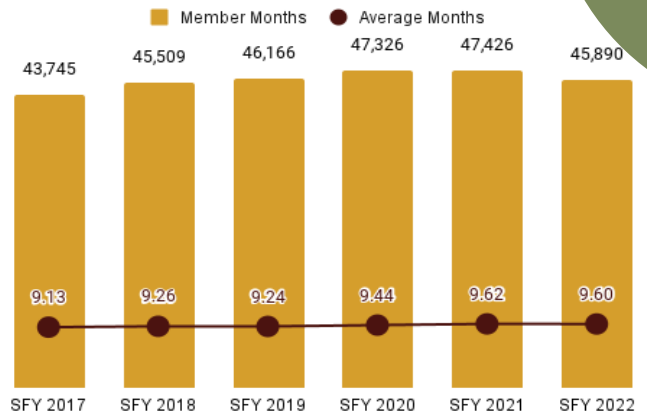
\$132 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

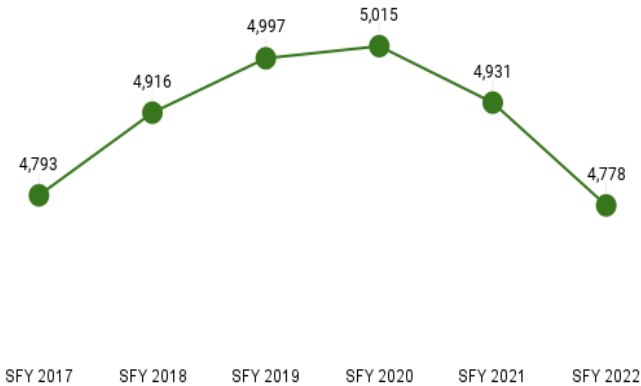
45,890



MEMBERS

4,778

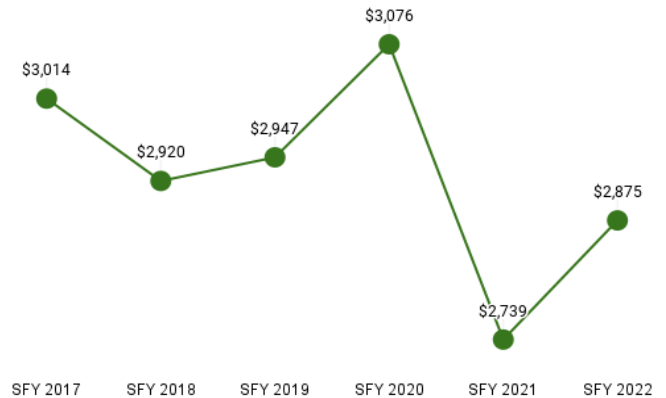
unique individuals enrolled during the state fiscal year



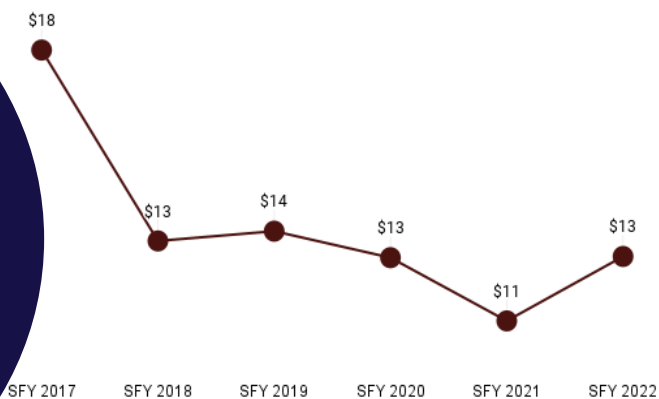
PER MEMBER PER MONTH

\$2,875

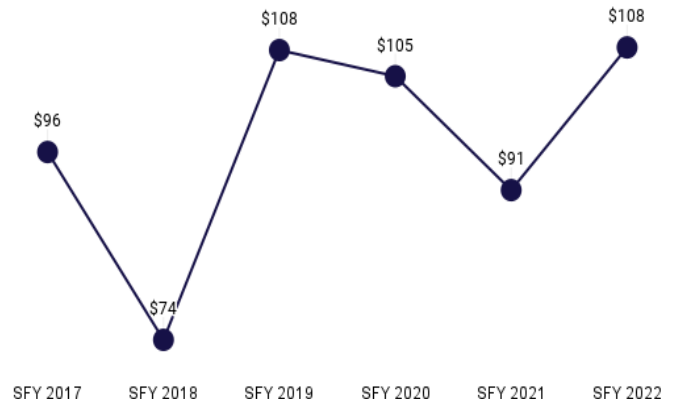
PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

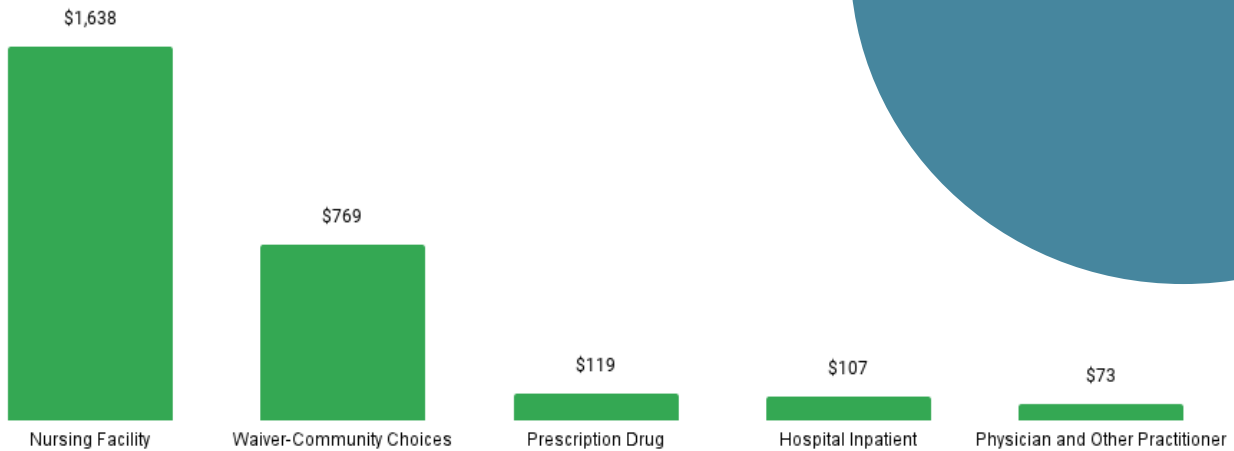


Figure 11. Long-Term Care Per Member Per Month by Service Area

Table 30. Long-Term Care Per Member Per Month Summary by Subgroup

Eligibility Category / Sub-group	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
ABD LTC						
Community Choices Waiver	\$52,803,529	7.7%	28,690	-1.1%	\$1,840	8.9%
Hospice	\$307,318	-29.4%	139	59.8%	\$2,211	-55.8%
Nursing Home	\$78,843,614	0.2%	17,061	-2.9%	\$4,621	3.3%
PACE	--	-100%	--	-100%	--	-100%

Table 31. Long-Term Care History by Subgroup

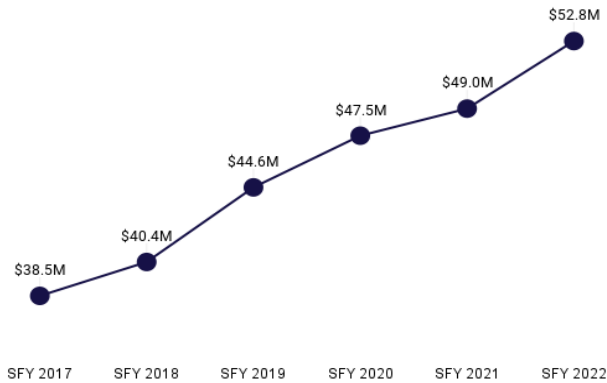
Eligibility Category/ Sub-group		SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
ABD LTC	Community Choices Waiver	\$38,546,435	\$40,442,652	\$44,616,668	\$47,509,128	\$49,023,710	\$52,803,529	37.0%
	Hospice	\$619,372	\$681,318	\$360,118	\$253,390	\$435,281	\$307,318	-50.4%
	Nursing Home	\$89,249,239	\$88,245,505	\$87,176,366	\$94,146,235	\$78,651,507	\$78,843,614	-11.7%
	PACE	\$3,426,553	\$3,515,171	\$3,885,399	\$3,689,689	\$1,784,714	--	-100%
Member Months								
ABD LTC	Community Choices Waiver	22,164	23,898	25,428	27,106	29,006	28,690	29.4%
	Hospice	241	221	108	63	87	139	-42.3%
	Nursing Home	19,893	19,818	19,025	18,539	17,578	17,061	-14.2%
	PACE	1,447	1,572	1,605	1,618	755	--	-100%
Per Member Per Month								
ABD LTC	Community Choices Waiver	\$1,739	\$1,692	\$1,755	\$1,753	\$1,690	\$1,840	5.8%
	Hospice	\$2,570	\$3,083	\$3,334	\$4,022	\$5,003	\$2,211	-14.0%
	Nursing Home	-	\$4,453	\$4,582	\$5,078	\$4,474	\$4,621	100%
	PACE	\$2,368	\$2,236	\$2,421	\$2,280	\$2,364	--	-100%

COMMUNITY CHOICES WAIVER

EXPENDITURES

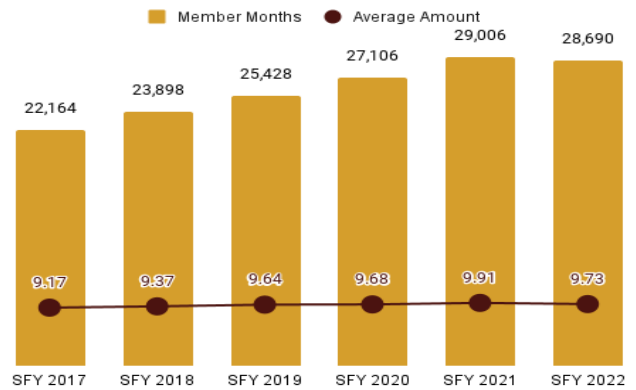
\$52.8 million

paid to providers for services rendered during the state fiscal year



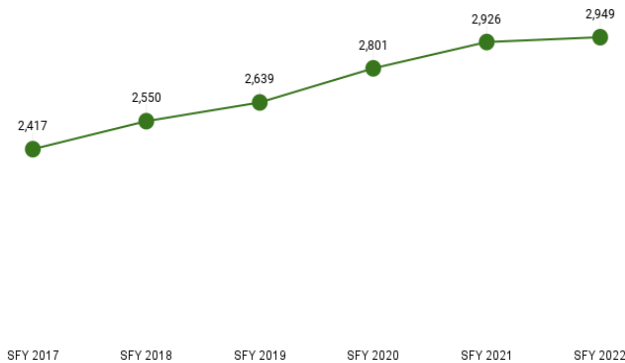
MEMBER MONTHS

28,690



MEMBERS
2,949

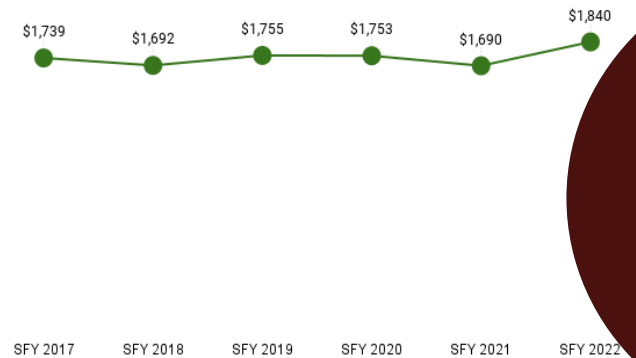
unique individuals enrolled during the state fiscal year



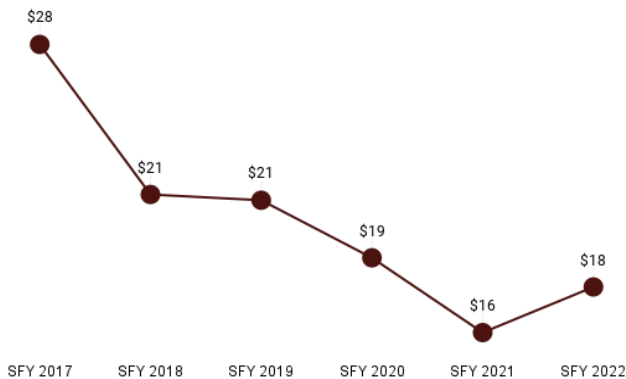
PER MEMBER PER MONTH

\$1,840

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

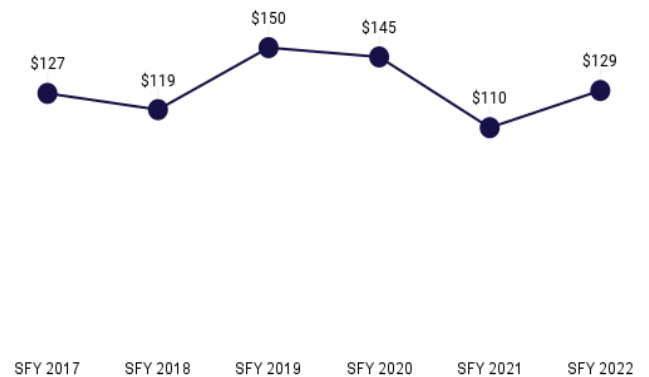


Table 32. Community Choices Waiver Per Member Per Month History by Service Area

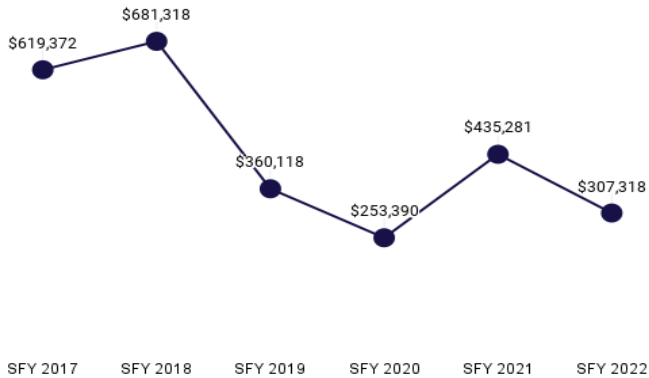
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$10.97	\$7.40	\$8.20	\$8.71	\$7.93	\$6.15
Ambulatory Surgical Center	\$1.94	\$1.72	\$1.08	\$1.32	\$1.92	\$2.56
Behavioral Health	\$43.21	\$28.53	\$18.98	\$17.72	\$16.75	\$15.87
Clinic/Center	\$12.07	--	--	--	--	--
Dental	\$71.07	\$4.91	\$5.08	\$4.26	\$4.43	\$4.50
DME, Prosthetics/Orthotics/Supplies	\$8.57	\$66.33	\$74.26	\$80.74	\$69.92	\$71.55
End-Stage Renal Disease	\$8.36	\$4.92	\$14.69	\$20.73	\$25.00	\$24.65
Federally Qualified Health Center	\$148.15	\$8.42	\$8.61	\$6.74	\$7.51	\$7.03
Home Health	\$6.88	\$17.08	\$3.02	\$4.08	\$6.19	\$5.42
Hospice	\$127.13	\$5.99	\$7.01	\$3.36	\$4.60	\$2.80
Hospital Total	\$65.67	\$180.91	\$217.19	\$194.28	\$168.30	\$172.55
Inpatient	\$66.47	\$119.13	\$149.59	\$145.02	\$111.94	\$126.81
Outpatient	-\$0.80	\$62.08	\$68.19	\$48.99	\$56.23	\$45.53
Other Hospital	--	-\$0.31	-\$0.59	\$0.27	\$0.13	\$0.20
Intermediate Care Facility for Individuals with Intellectual Disabilities	\$0.76	--	--	--	--	--
Laboratory	\$7.85	\$0.84	\$0.76	\$0.65	\$0.88	\$0.78
Nursing Facility	\$10.37	\$1.97	\$4.16	\$5.03	\$4.58	\$18.43
Other	\$106.07	\$7.45	\$5.70	\$1.91	\$1.29	\$0.71
Physician & Other Practitioner	\$119.05	\$108.22	\$99.27	\$98.67	\$90.63	\$95.84
Prescription Drug	--	\$149.68	\$153.53	\$161.30	\$152.78	\$168.57
Psychiatric Residential Treatment Facility	\$13.08	--	--	--	--	--
Public Health or Welfare	\$16.09	\$10.56	\$10.62	\$10.25	\$10.18	\$2.81
Public Health, Federal	\$2.32	\$9.35	\$6.78	\$7.21	\$8.39	\$7.09
Rural Health Clinic	\$1.14	\$2.64	\$2.78	\$2.57	\$2.13	\$2.05
Vision	--	\$1.07	\$0.94	\$0.79	\$0.96	\$0.91
Community Choices Waiver	\$958.41	\$1,074.31	\$1,111.97	\$1,122.40	\$1,105.77	\$1,230.21
Total	\$1,739.15	\$1,692.30	\$1,754.63	\$1,752.71	\$1,690.12	\$1,840.49

HOSPICE

EXPENDITURES

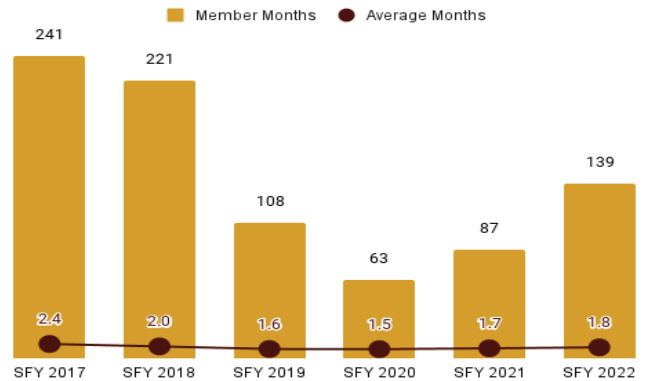
\$307,318

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

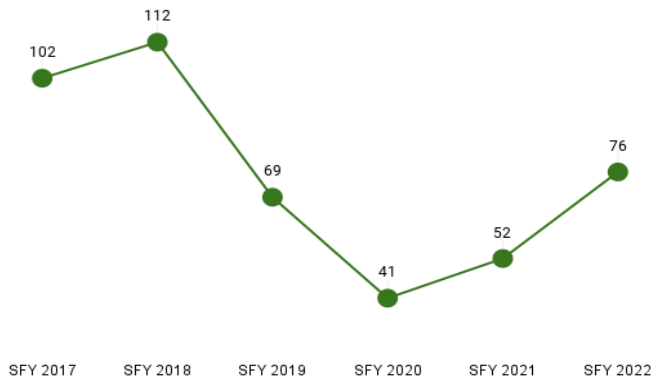
139



MEMBERS

76

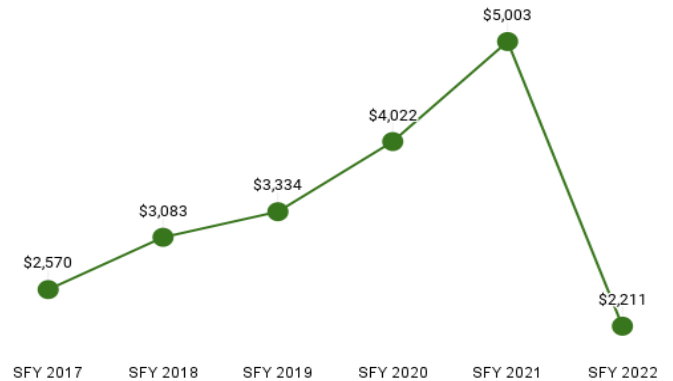
unique individuals enrolled during the state fiscal year



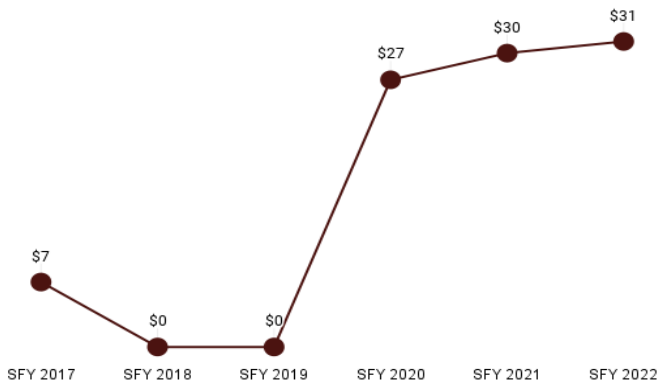
PER MEMBER PER MONTH

\$2,211

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

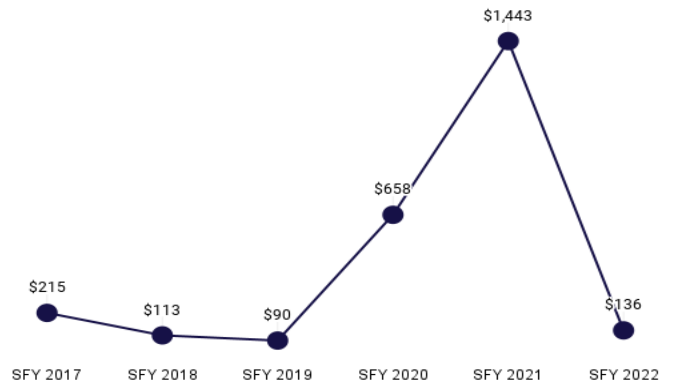


Table 33. Hospice Per Member Per Month History by Service Area

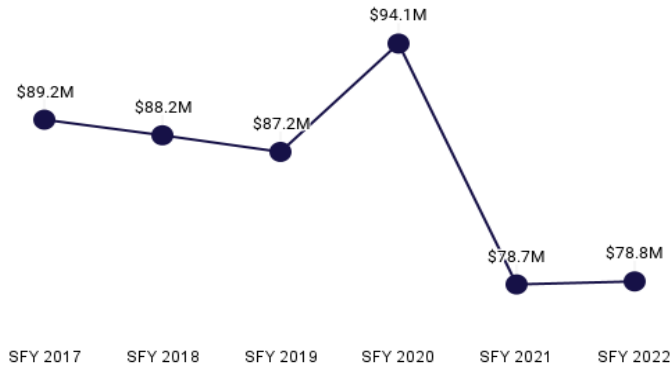
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$0.39	--	\$5.34	\$85.88	\$146.56	\$44.48
Ambulatory Surgical Center	--	--	--	--	--	--
Behavioral Health	--	\$10.29	\$0.74	--	--	\$1.58
Dental	\$12.73	--	--	--	\$0.94	--
DME, Prosthetics/Orthotics/Supplies	--	\$1.70	\$0.73	--	--	\$2.79
End-Stage Renal Disease	\$0.74	--	--	--	--	--
Federally Qualified Health Center	\$0.27	\$3.36	--	--	--	\$8.65
Home Health	\$0.54	--	--	--	\$1.94	--
Hospice	\$2,274.75	\$2,908.63	\$3,205.31	\$3,085.52	\$3,171.73	\$1,855.20
Hospital Total	\$231.12	\$114.10	\$99.14	\$690.74	\$1,517.98	\$166.82
Inpatient	\$214.63	\$113.21	\$89.68	\$657.71	\$1,442.69	\$135.62
Outpatient	\$16.40	\$0.57	\$9.46	\$33.03	\$75.29	\$31.20
Other Hospital	\$0.09	\$0.33	--	--	--	--
Laboratory	--	--	--	--	\$0.30	--
Nursing Facility	-\$1.44	\$2.33	--	--	--	--
Other	\$1.45	--	--	--	--	--
Physician & Other Practitioner	\$41.31	\$39.76	\$19.90	\$121.90	\$121.59	\$50.87
Prescription Drug	\$5.17	--	\$1.93	--	\$7.57	\$14.45
Public Health or Welfare	\$2.99	\$2.71	\$1.11	\$1.90	\$5.52	--
Public Health, Federal	--	--	\$0.22	\$36.11	\$29.09	\$66.09
Rural Health Clinic	--	--	--	--	--	--
Vision	--	--	--	--	--	--
Total	\$2,570.01	\$3,082.89	\$3,334.42	\$4,022.06	\$5,003.23	\$2,210.92

NURSING HOME

EXPENDITURES

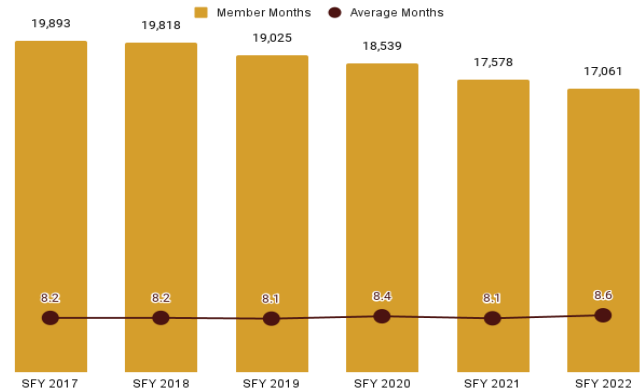
\$78.8 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

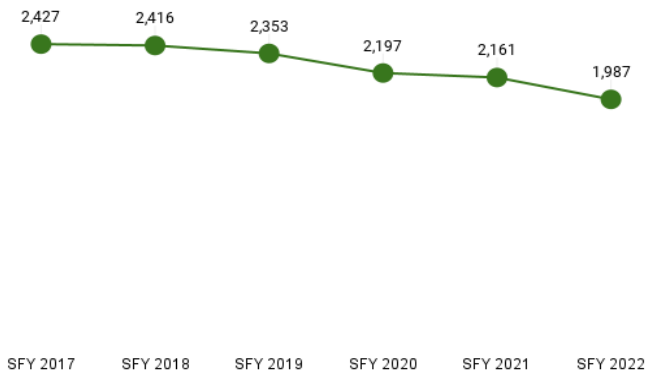
17,061



MEMBERS

1,987

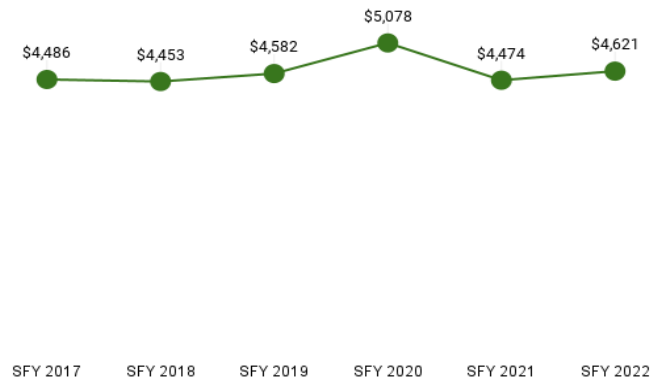
unique individuals enrolled during the state fiscal year



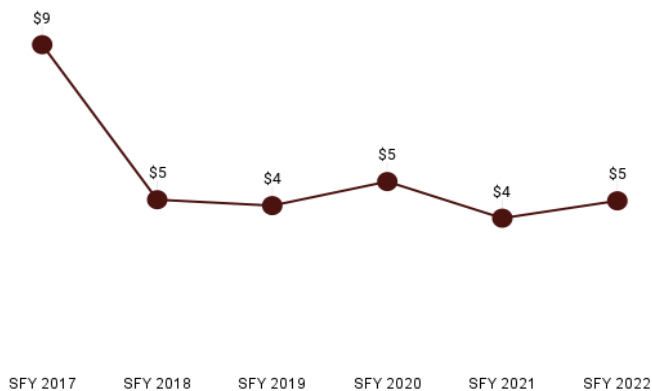
PER MEMBER PER MONTH

\$4,621

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

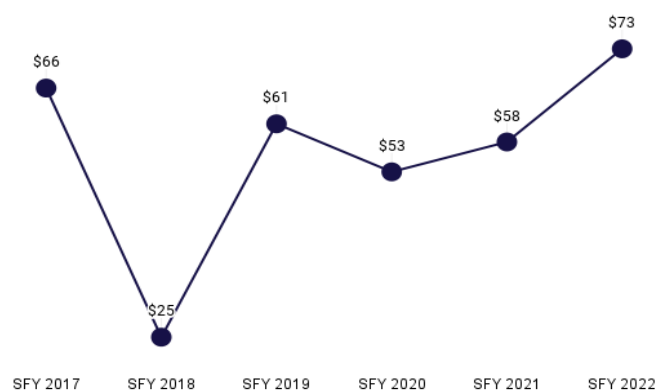


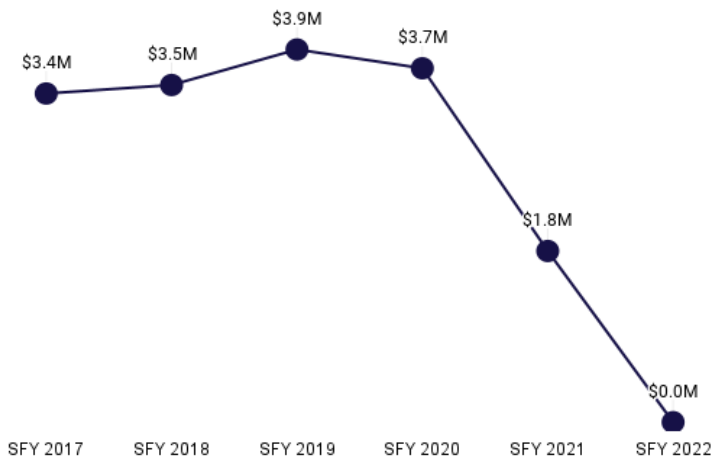
Table 34. Nursing Home Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$4.65	\$1.94	\$2.58	\$2.72	\$2.83	\$3.54
Ambulatory Surgical Center	\$0.79	\$0.33	\$0.43	\$0.10	\$0.78	\$1.53
Behavioral Health	\$12.72	\$8.15	\$6.06	\$5.77	\$4.20	\$5.76
Dental	\$6.93	\$3.74	\$3.39	\$3.49	\$4.03	\$4.60
DME, Prosthetics/Orthotics/Supplies	\$15.70	\$13.93	\$9.09	\$14.88	\$14.24	\$8.45
End-Stage Renal Disease	\$3.27	\$2.08	\$3.86	\$12.38	\$16.41	\$20.13
Federally Qualified Health Center	\$1.63	\$1.75	\$1.76	\$1.13	\$2.37	\$4.52
Home Health	\$1.00	\$0.12	\$0.27	\$0.58	\$0.18	--
Hospice	\$10.92	\$15.85	\$26.21	\$32.41	\$40.51	\$32.03
Hospital Total	\$86.80	\$36.06	\$72.96	\$70.06	\$75.77	\$88.23
Inpatient	\$66.48	\$25.33	\$60.51	\$52.59	\$57.52	\$72.88
Outpatient	\$21.01	\$10.35	\$12.03	\$17.14	\$18.14	\$15.28
Other Hospital	-\$0.68	\$0.38	\$0.42	\$0.34	\$0.12	\$0.07
Laboratory	\$0.15	\$0.05	\$0.07	\$0.22	\$0.67	\$1.50
Nursing Facility	\$4,247.38	\$4,284.07	\$4,360.39	\$4,857.10	\$4,246.22	\$4,375.98
Other	\$7.64	\$6.75	\$4.96	\$0.11	\$0.06	\$0.02
Physician & Other Practitioner	\$40.28	\$30.00	\$34.97	\$31.93	\$27.19	\$34.24
Prescription Drug	\$29.41	\$35.62	\$42.73	\$36.47	\$31.05	\$35.42
Public Health or Welfare	\$4.33	\$4.67	\$4.53	\$4.27	\$4.40	\$0.90
Public Health, Federal	\$10.23	\$4.42	\$4.13	\$2.06	\$1.23	\$2.60
Rural Health Clinic	\$2.04	\$2.73	\$3.20	\$2.25	\$1.91	\$1.38
Vision	\$0.59	\$0.54	\$0.61	\$0.33	\$0.39	\$0.46
Total	\$4,486.46	\$4,452.80	\$4,582.20	\$5,078.28	\$4,474.44	\$4,621.28

PROGRAM FOR ALL-INCLUSIVE CARE OF ELDERLY

EXPENDITURES

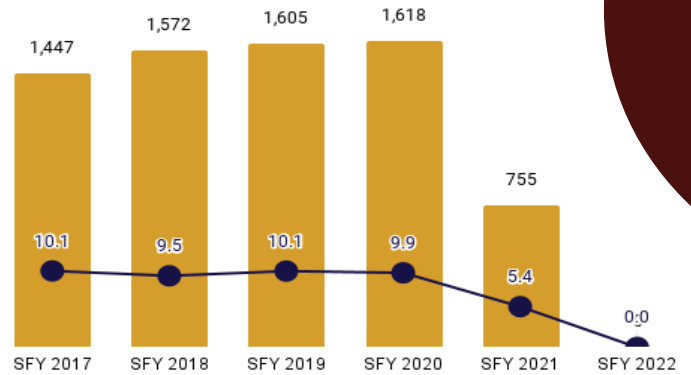
\$0 paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

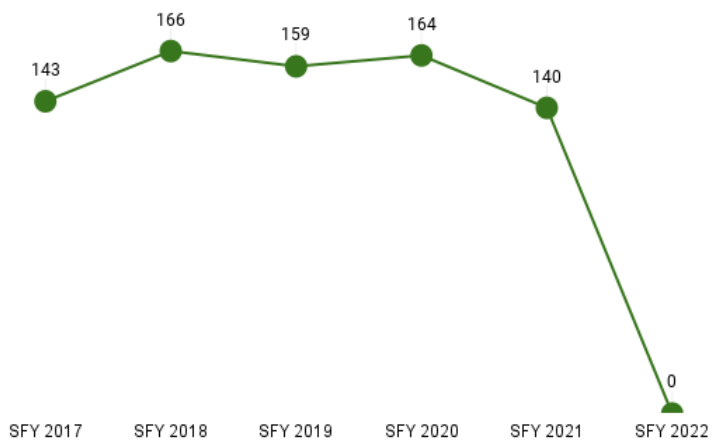
0

Member Months Average Month



MEMBERS

0 unique individuals enrolled during the state fiscal year



PER MEMBER PER MONTH

\$0

PMPM during the state fiscal year

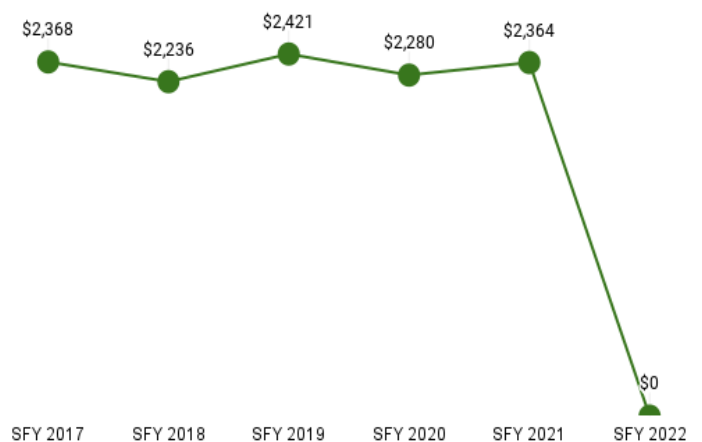


Table 35. Program for All-Inclusive Care of Elderly (PACE) Per Member Per Month History by Service Area

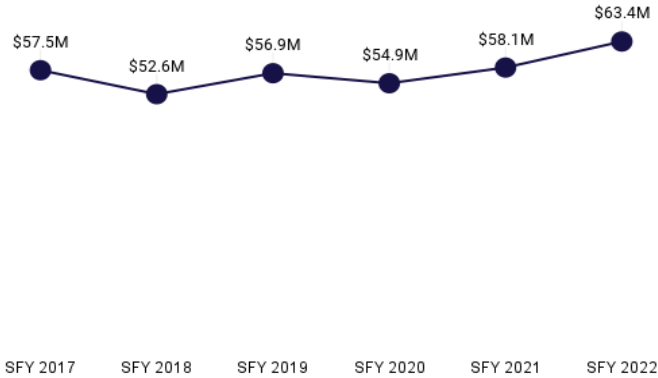
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	--	\$0.20	--	\$3.02	--	--
Behavioral Health	--	\$0.76	\$0.53	\$0.73	\$1.12	--
DME, Prosthetics/Orthotics/Supplies	--	--	\$0.05	\$0.71	--	--
Other	\$0.08	\$1.97	--	\$0.02	--	--
PACE	\$2,364.83	\$2,224.86	\$2,417.58	\$2,266.05	\$2,353.79	--
Physician & Other Practitioner	\$0.89	\$0.29	\$0.04	\$0.00	\$0.21	--
Public Health or Welfare	\$2.24	\$8.03	\$2.62	\$9.86	\$8.74	--
Total	\$2,368.04	\$2,236.11	\$2,420.81	\$2,280.40	\$2,363.86	--

SUPPLEMENTAL SECURITY INCOME

EXPENDITURES

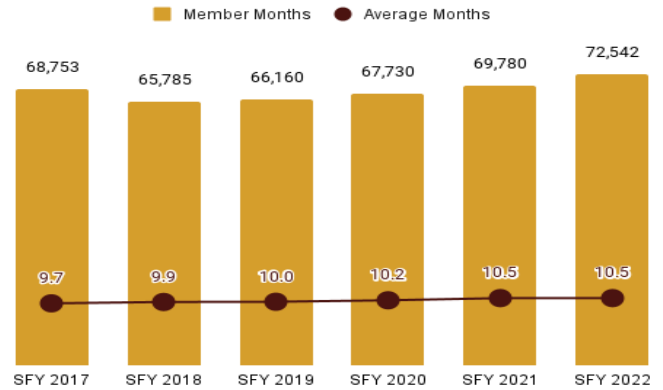
\$63.4 million

paid to providers for services rendered during the state fiscal year



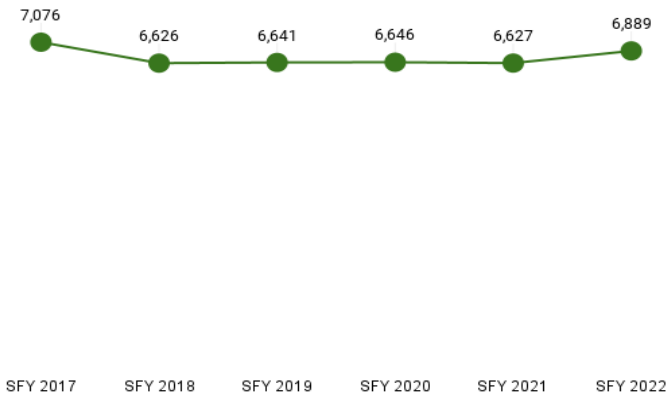
MEMBER MONTHS

72,542



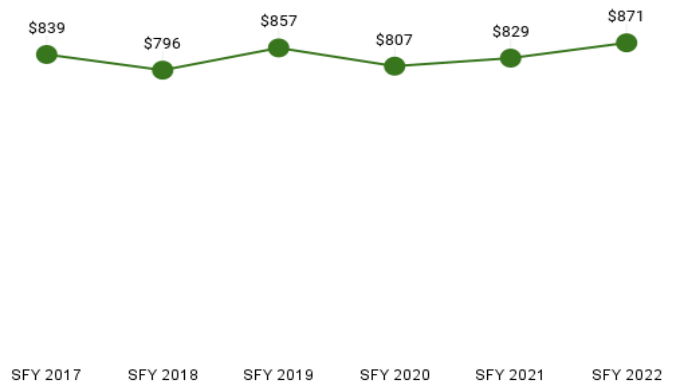
MEMBERS

6,889 unique individuals enrolled during the state fiscal year

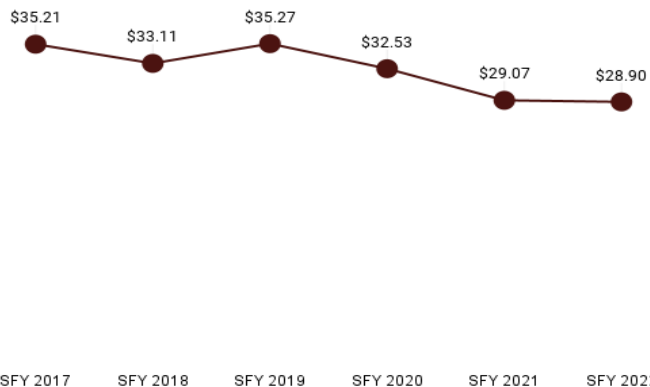


PER MEMBER PER MONTH

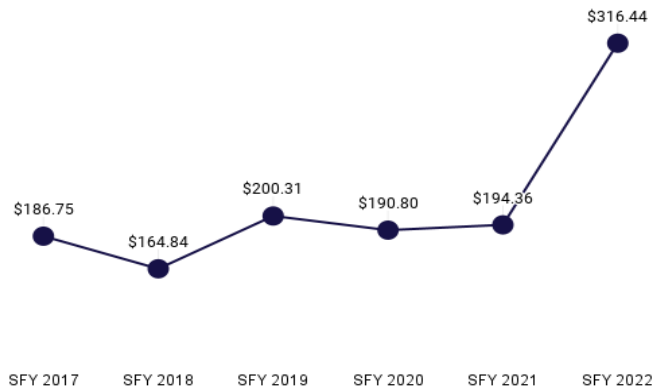
\$871 PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

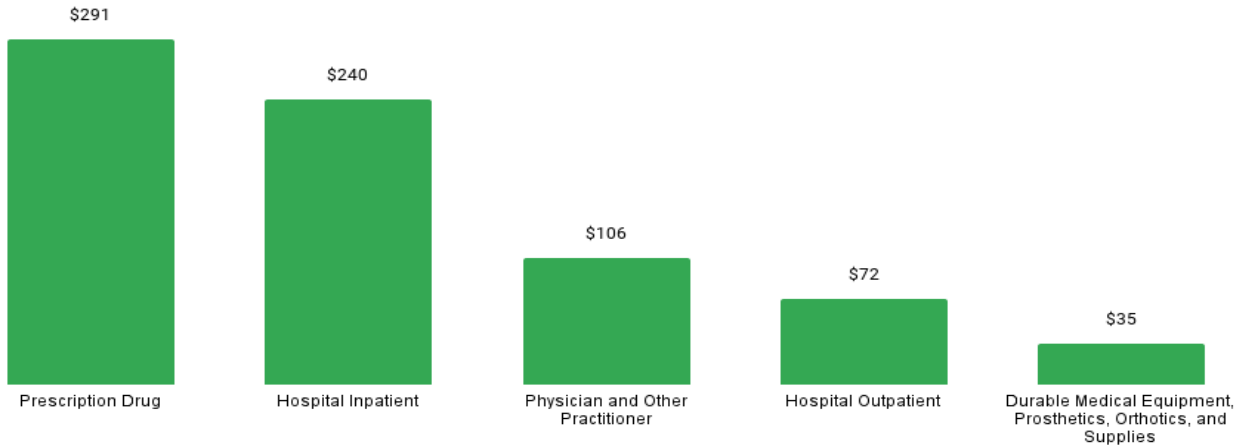


Figure 12. Supplemental Security Income Per Member Per Month by Service Area

Table 36. Supplemental Security Income Per Member Per Month Summary by Subgroup

Eligibility Category / Sub-group	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
ABD SSI						
SSI & SSI Related	\$63,386,657	9.2%	72,542	4.0%	\$874	5.0%

Table 37. Supplemental Security Income History by Subgroup

Eligibility Category	Eligibility Sub-group	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
ABD SSI	SSI & SSI Related	\$57,928,592	\$52,630,498	\$56,913,651	\$54,858,616	\$58,065,776	\$63,386,657	9.4%
Member Months								
ABD SSI	SSI & SSI Related	68,753	65,785	66,160	67,730	69,780	72,542	5.5%
Per Member Per Month								
ABD SSI	SSI & SSI Related	\$843	\$800	\$860	\$810	\$832	\$874	3.7%

Table 38. Supplemental Security Income Per Member Per Month History by Service Area

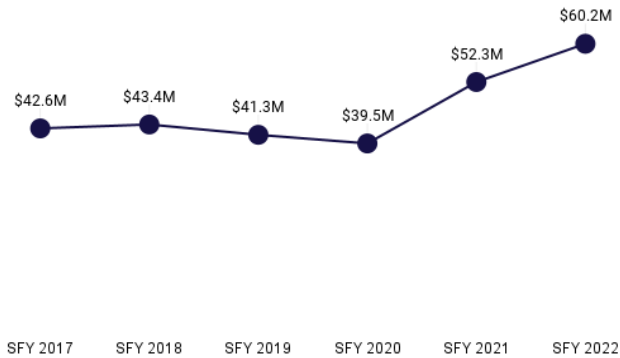
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$10.80	\$9.83	\$11.66	\$11.15	\$11.68	\$9.07
Ambulatory Surgical Center	\$4.54	\$3.64	\$3.39	\$3.70	\$4.48	\$5.28
Behavioral Health	\$60.05	\$49.27	\$42.31	\$37.79	\$34.24	\$30.93
Clinic/Center	\$2.19	\$1.40	\$1.27	\$0.59	\$0.81	\$0.95
End-Stage Renal Disease	\$11.97	\$8.74	\$8.13	\$7.07	\$7.45	\$6.17
Dental	\$29.28	\$32.60	\$34.99	\$34.93	\$33.94	\$34.85
DME, Prosthetics/Orthotics/Supplies	\$8.92	\$8.80	\$7.66	\$10.01	\$12.63	\$10.73
Federally Qualified Health Center	\$12.95	\$14.59	\$13.21	\$14.35	\$14.46	\$15.07
Home Health	\$23.13	\$4.56	\$2.05	\$1.80	\$2.80	\$2.74
Hospice	\$4.82	\$3.16	\$2.16	\$2.35	\$3.35	\$2.19
Hospital Total	\$258.65	\$233.12	\$268.14	\$258.85	\$272.14	\$312.58
Inpatient	\$186.40	\$163.77	\$200.04	\$191.49	\$194.30	\$240.36
Outpatient	\$72.40	\$69.46	\$68.04	\$67.29	\$77.80	\$72.19
Other Hospital	-\$0.16	-\$0.11	\$0.06	\$0.06	\$0.04	\$0.03
Laboratory	\$1.83	\$1.97	\$1.61	\$1.32	\$1.64	\$1.47
Nursing Facility	\$2.93	\$0.02	\$1.35	\$0.11	\$0.10	\$0.00
Other	\$1.78	\$1.57	\$1.79	\$1.70	\$1.21	\$1.03
Physician & Other Practitioner	\$120.57	\$115.21	\$110.86	\$101.52	\$102.93	\$106.45
Prescription Drug	\$221.80	\$260.17	\$304.37	\$281.14	\$285.57	\$290.84
PRTF	\$12.84	\$16.23	\$12.72	\$7.08	\$6.05	\$5.47
Public Health or Welfare	\$0.53	\$0.56	\$0.70	\$0.52	\$0.49	\$0.21
Public Health, Federal	\$45.09	\$25.46	\$23.23	\$25.15	\$27.36	\$29.22
Rural Health Clinic	\$1.86	\$2.83	\$3.57	\$3.94	\$4.03	\$4.27
Vision	\$2.64	\$2.67	\$2.55	\$2.17	\$2.18	\$2.14
Total	\$839.18	\$796.39	\$857.73	\$807.24	\$829.51	\$871.68

ADULTS

EXPENDITURES

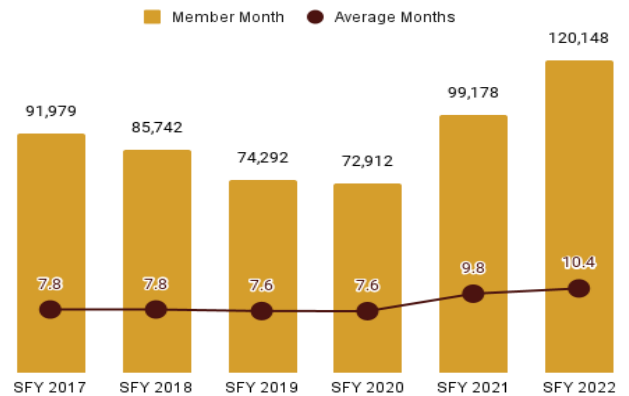
\$60.2 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

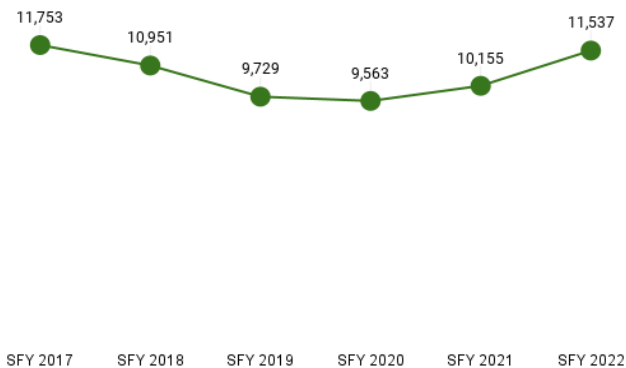
120,148



MEMBERS

11,537

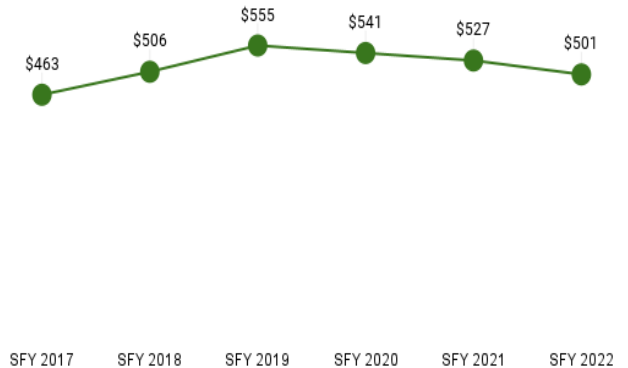
unique individuals enrolled during the state fiscal year



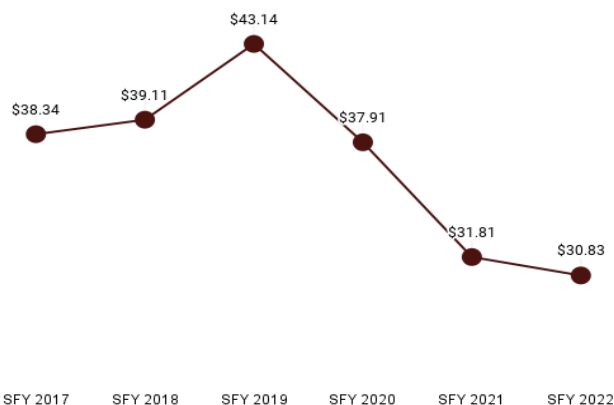
PER MEMBER PER MONTH

\$501

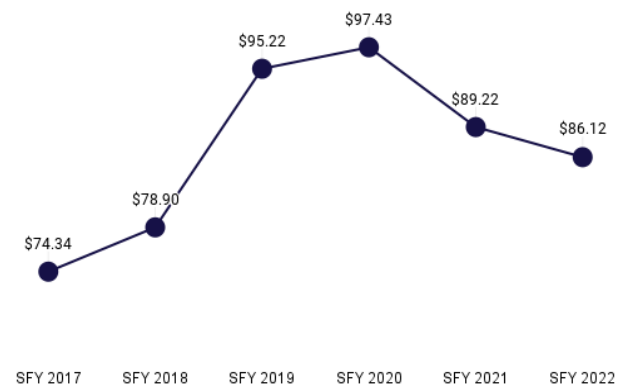
PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

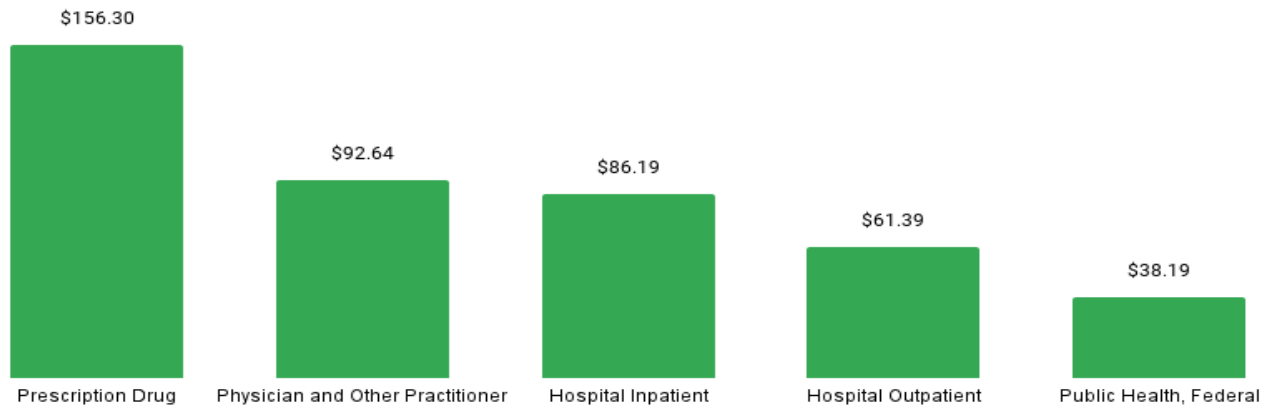


Figure 13. Adults Per Member Per Month by Service Area

Table 39. Adults Per Member Per Month Summary by Subgroup

Eligibility Category / Sub-group	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
Adults						
Family-Care Adults	\$59,630,740	15.1%	118,511	21.0%	\$503	-4.9%
Former Foster Care	\$605,263	36.7%	1,637	32.6%	\$370	3.1%

Table 40. Adults History by Subgroup

Eligibility Category / Subgroup		SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
Adults	Family-Care Adults	\$42,349,927	\$43,069,503	\$40,831,506	\$39,070,030	\$51,817,690	\$59,630,740	40.8%
	Former Foster Care	\$246,275	\$341,083	\$427,712	\$388,819	\$442,921	\$605,263	145.8%
Member Months								
Adults	Family-Care Adults	91,219	84,865	73,290	71,953	97,943	118,511	29.9%
	Former Foster Care	760	877	1,002	959	1,235	1,637	115.4%
Per Member Per Month								
Adults	Family-Care Adults	\$464	\$508	\$557	\$543	\$529	\$503	8.4%
	Former Foster Care	--	\$389	\$427	\$405	\$359	\$370	100%

Table 41. Adults Per Member Per Month History by Service Area

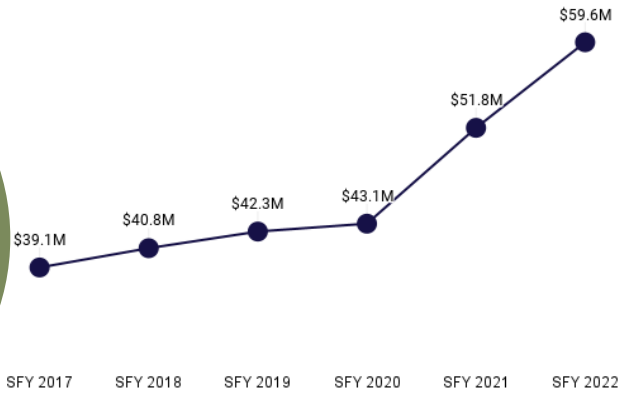
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$4.69	\$6.46	\$6.08	\$6.38	\$5.99	\$5.34
Ambulatory Surgical Center	\$4.87	\$5.07	\$5.30	\$5.45	\$6.31	\$7.02
Behavioral Health	\$33.20	\$25.34	\$22.34	\$20.05	\$17.87	\$17.12
Dental	\$14.60	\$7.29	\$7.08	\$6.79	\$6.02	\$4.63
DME, Prosthetics/Orthotics/Supplies	\$6.69	\$7.40	\$8.50	\$8.94	\$9.23	\$7.92
End-Stage Renal Disease	\$1.08	\$1.81	\$0.36	\$0.09	\$1.44	\$1.72
Federally Qualified Health Center	\$12.85	\$13.50	\$14.12	\$13.57	\$13.19	\$13.70
Home Health	\$1.82	\$0.58	\$0.12	\$0.15	\$0.61	\$0.15
Hospice	\$0.02	\$0.12	\$0.00	\$0.40	\$0.23	\$0.01
Hospital Total	\$140.53	\$156.53	\$186.60	\$174.51	\$163.88	\$147.60
Inpatient	\$74.17	\$78.93	\$95.38	\$97.24	\$89.31	\$86.19
Outpatient	\$66.70	\$77.63	\$91.74	\$77.30	\$74.57	\$61.39
Other Hospital	-\$0.33	-\$0.04	-\$0.53	-\$0.03	\$0.00	\$0.02
Laboratory	\$3.53	\$3.81	\$3.34	\$2.81	\$2.73	\$3.16
Nursing Facility	--	--	--	\$0.02	\$0.06	--
Other	\$1.47	\$1.62	\$2.14	\$2.01	\$1.44	\$0.29
Physician & Other Practitioner	\$94.42	\$99.10	\$102.37	\$96.67	\$92.65	\$92.64
Prescription Drug	\$92.87	\$137.16	\$156.80	\$157.36	\$155.17	\$156.30
Public Health or Welfare	\$0.08	\$0.10	\$0.15	\$0.15	\$0.15	\$0.17
Public Health, Federal	\$47.20	\$36.30	\$35.34	\$40.18	\$44.64	\$38.19
Rural Health Clinic	\$2.27	\$3.22	\$3.79	\$4.65	\$4.42	\$4.60
Vision	\$0.89	\$0.88	\$0.94	\$1.00	\$0.89	\$0.79
Total	\$463.11	\$506.29	\$555.37	\$541.18	\$526.94	\$501.35

FAMILY-CARE ADULTS

EXPENDITURES

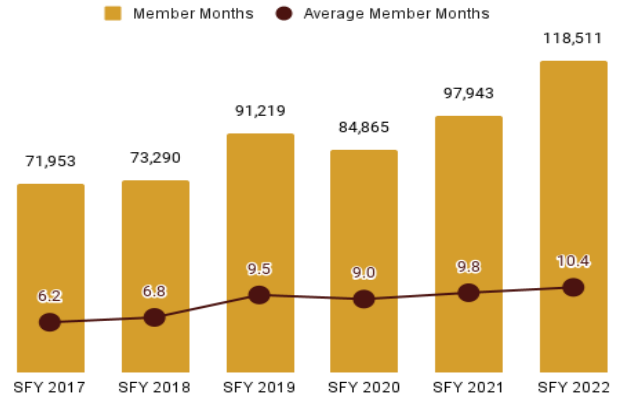
\$59.6 million

paid to providers for services rendered during the state fiscal year



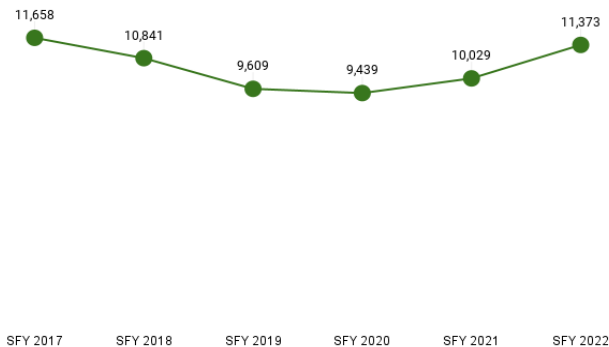
MEMBER MONTHS

118,511



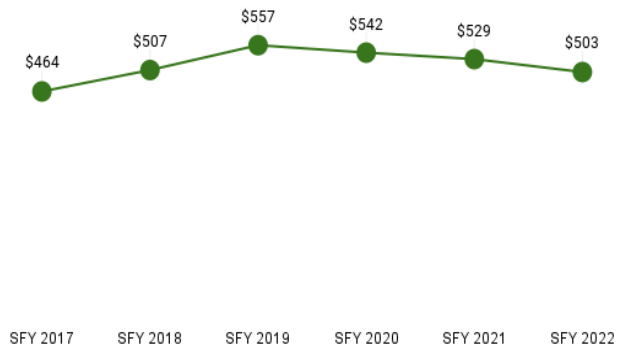
MEMBERS

11,373 unique individuals enrolled during the state fiscal year

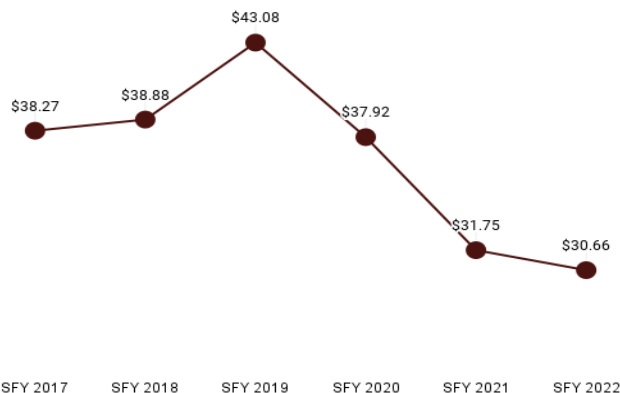


PER MEMBER PER MONTH

\$503 PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

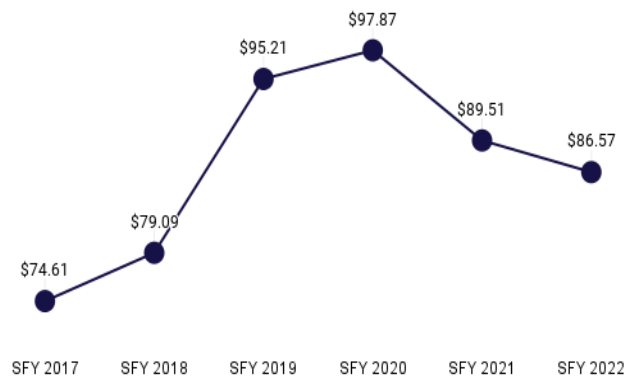


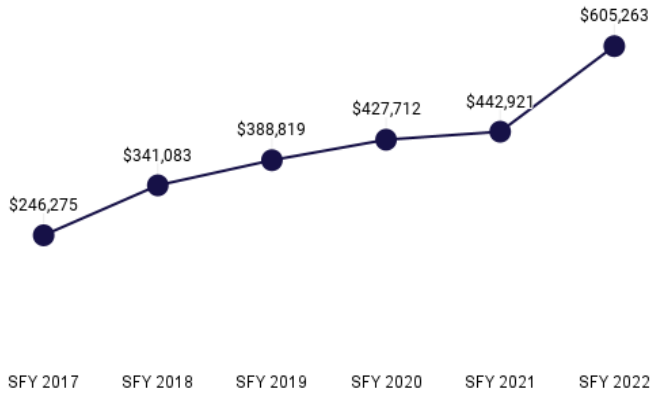
Table 42. Family-Care Adults Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$4.70	\$6.41	\$6.14	\$6.42	\$5.95	\$5.33
Ambulatory Surgical Center	\$4.84	\$5.12	\$5.35	\$5.49	\$6.36	\$7.09
Behavioral Health	\$33.20	\$25.11	\$22.14	\$19.77	\$17.69	\$16.92
Dental	\$14.66	\$7.32	\$7.10	\$6.72	\$6.04	\$4.63
DME, Prosthetics/Orthotics/Supplies	\$6.67	\$7.36	\$8.46	\$8.82	\$9.19	\$7.91
End-Stage Renal Disease	\$1.09	\$1.83	\$0.36	\$0.09	\$1.46	\$1.75
Federally Qualified Health Center	\$12.84	\$13.55	\$14.22	\$13.61	\$13.29	\$13.82
Home Health	\$1.83	\$0.58	\$0.12	\$0.15	\$0.62	\$0.15
Hospice	\$0.02	\$0.13	\$0.00	\$0.40	\$0.24	\$0.01
Hospital Total	\$140.92	\$156.96	\$187.04	\$175.26	\$164.49	\$148.12
Inpatient	\$74.44	\$79.13	\$95.38	\$97.67	\$89.61	\$86.64
Outpatient	\$66.81	\$77.87	\$92.21	\$77.61	\$74.87	\$61.47
Other Hospital	-\$0.33	-\$0.04	-\$0.54	-\$0.03	\$0.00	\$0.02
Laboratory	\$3.53	\$3.78	\$3.28	\$2.79	\$2.73	\$3.14
Nursing Facility	--	--	--	\$0.02	\$0.06	--
Other	\$1.48	\$1.61	\$2.15	\$2.03	\$1.45	\$0.29
Physician & Other Practitioner	\$94.48	\$99.23	\$102.15	\$96.94	\$92.77	\$92.99
Prescription Drug	\$93.28	\$137.85	\$158.14	\$158.30	\$156.49	\$157.19
Public Health or Welfare	\$0.08	\$0.10	\$0.15	\$0.15	\$0.15	\$0.17
Public Health, Federal	\$47.48	\$36.48	\$35.58	\$40.36	\$44.76	\$38.27
Rural Health Clinic	\$2.29	\$3.23	\$3.81	\$4.66	\$4.43	\$4.60
Vision	\$0.88	\$0.87	\$0.94	\$1.01	\$0.89	\$0.79
Total	\$464.27	\$507.51	\$557.12	\$542.99	\$529.06	\$503.17

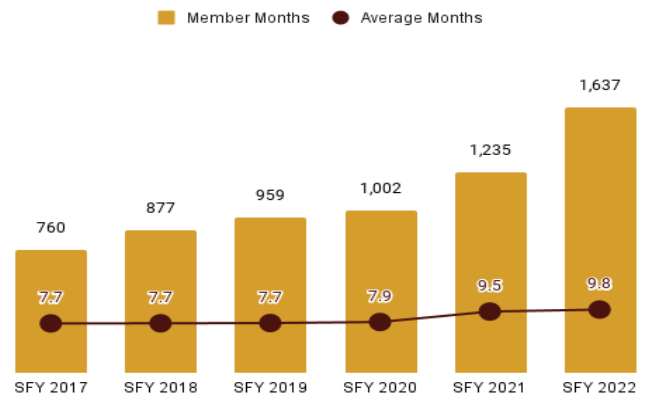
FORMER FOSTER CARE

EXPENDITURES
\$605,263

paid to providers for services rendered during the state fiscal year

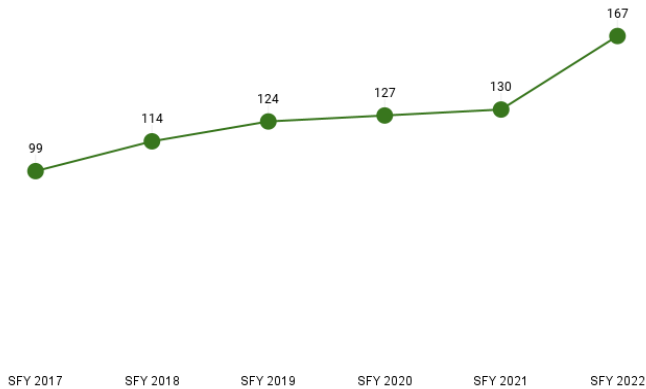


MEMBER MONTHS
1,637



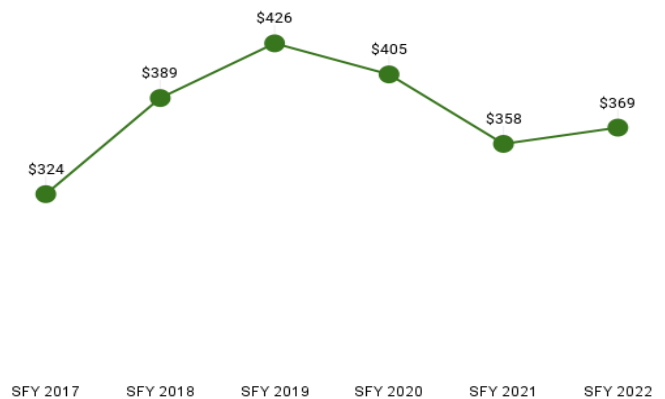
MEMBERS
167

unique individuals enrolled during the state fiscal year

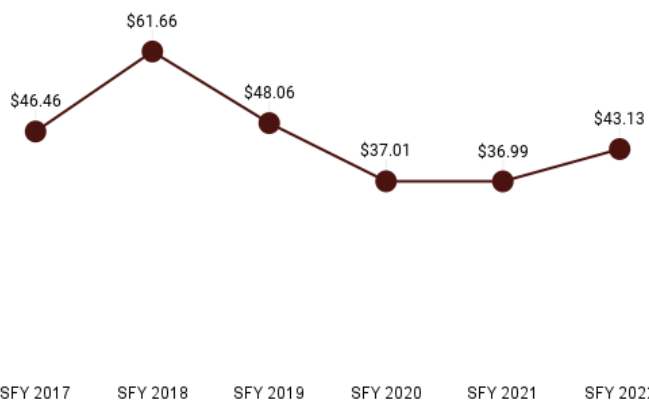


PER MEMBER PER MONTH
\$369

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

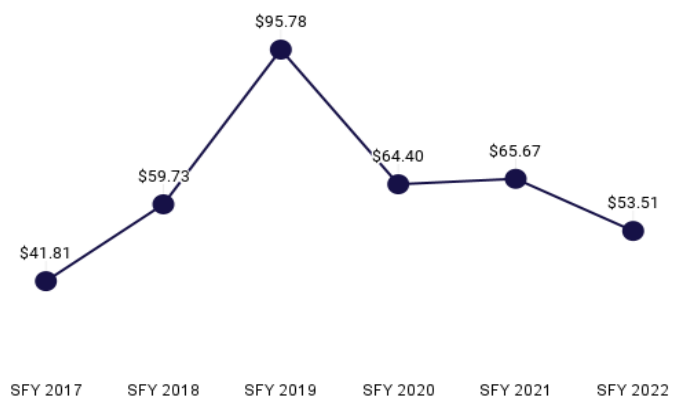


Table 43. Former Foster Care Per Member Per Month History by Service Area

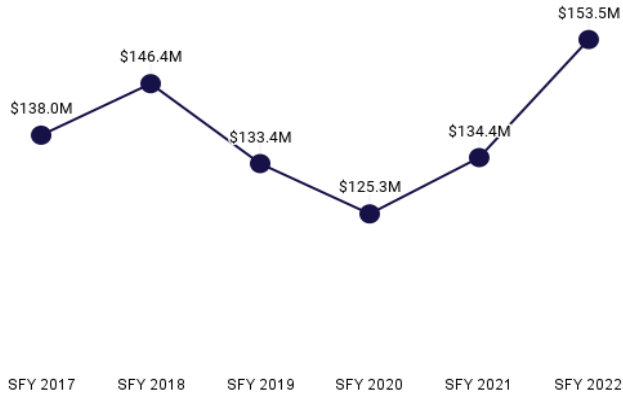
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$3.54	\$11.11	\$1.57	\$3.14	\$9.16	\$5.78
Ambulatory Surgical Center	\$9.00	\$0.38	\$1.92	\$2.86	\$2.50	\$2.47
Behavioral Health	\$33.35	\$47.18	\$37.28	\$40.49	\$31.89	\$31.59
Dental	\$7.44	\$4.59	\$5.58	\$12.06	\$4.64	\$4.73
DME, Prosthetics/Orthotics/Supplies	\$9.70	\$11.95	\$11.27	\$18.22	\$12.51	\$8.47
Federally Qualified Health Center	\$14.50	\$8.84	\$7.22	\$10.32	\$5.00	\$5.05
Hospital Total	\$94.76	\$114.74	\$153.71	\$118.52	\$116.13	\$109.63
Inpatient	\$41.81	\$59.73	\$95.78	\$64.40	\$65.67	\$53.51
Outpatient	\$52.95	\$55.01	\$57.93	\$54.12	\$50.46	\$55.93
Other Hospital	--	--	--	--	--	\$0.19
Laboratory	\$3.61	\$6.78	\$7.47	\$4.50	\$2.41	\$4.74
Other	\$0.36	\$3.11	\$1.55	\$0.78	\$1.20	\$0.50
Physician & Other Practitioner	\$87.00	\$85.84	\$118.67	\$76.50	\$82.66	\$67.67
Prescription Drug	\$44.69	\$70.56	\$58.79	\$87.22	\$50.90	\$91.63
Public Health or Welfare	\$0.17	\$0.20	\$0.25	\$0.07	\$0.12	\$0.09
Public Health, Federal	\$13.43	\$18.76	\$18.19	\$26.92	\$35.51	\$31.86
Rural Health Clinic	\$0.85	\$3.10	\$2.52	\$3.35	\$3.32	\$4.43
Vision	\$1.65	\$1.78	\$0.87	\$0.50	\$0.69	\$1.10
Total	\$324.05	\$388.92	\$426.86	\$405.44	\$358.64	\$369.74

CHILDREN

EXPENDITURES

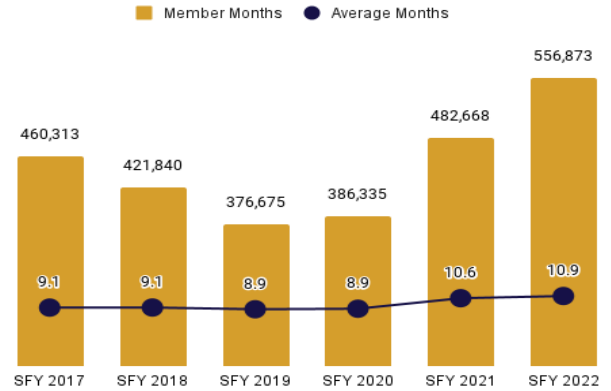
\$153.5 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

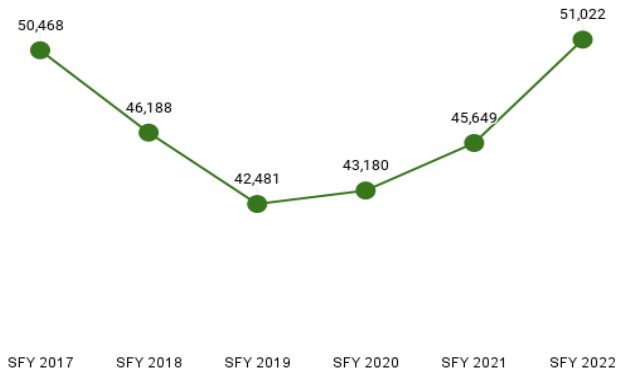
556,873



MEMBERS

51,022

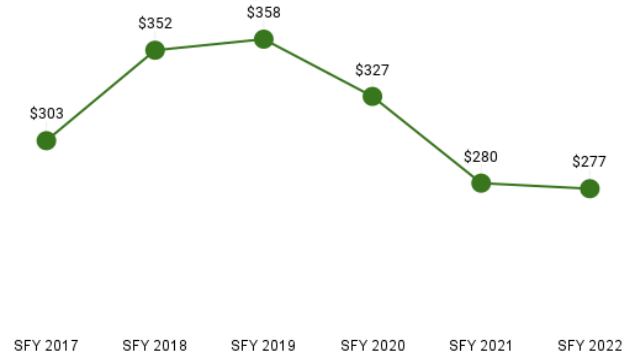
unique individuals enrolled during the state fiscal year



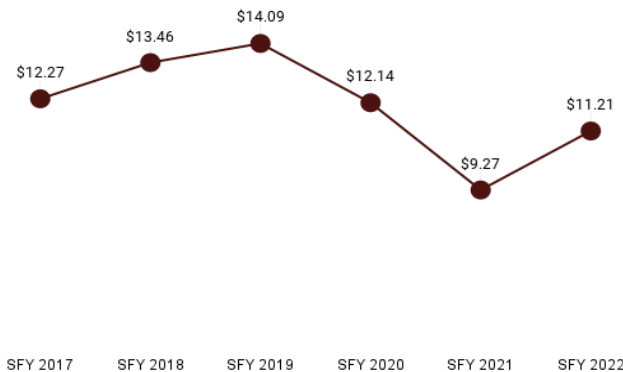
PER MEMBER PER MONTH

\$277

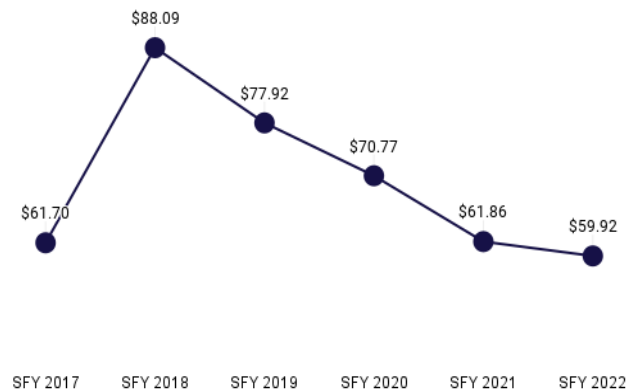
PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

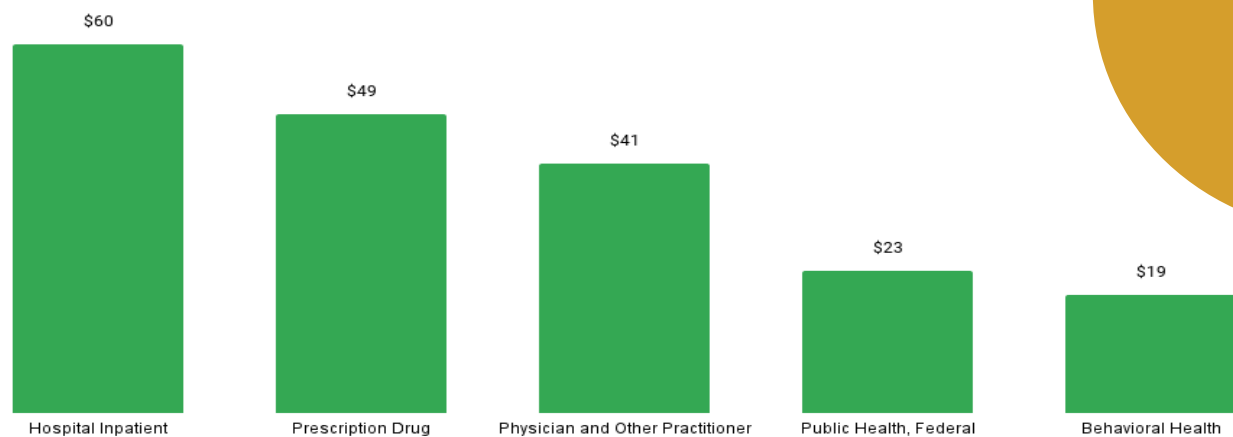


Figure 14. Children Per Member Per Month by Service Area

Table 44. Children Per Member Per Month Summary by Subgroup

Eligibility Category / Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
Children						
Care Management Entity ¹¹	\$3,180,802	-7.2%	2,152	-19.6%	\$1,478.07	15.5%
Children	\$100,565,901	15.7%	471,610	14.9%	\$213.24	0.7%
Children's Mental Health Waiver	\$605,624	-14.4%	1,260	24.5%	\$480.65	-31.2%
Foster Care	\$17,207,869	-0.7%	36,023	8.0%	\$477.69	-8.0%
Newborn	\$32,226,740	22.5%	45,969	29.4%	\$701.05	-5.3%

11. Data for CME include all services incurred for children while enrolled in the program. For this reason, totaling across all populations will not equal the total expenditures for children.

Table 45. Children History by Subgroup

Eligibility Category	Eligibility Sub-group	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
Children ¹²	Care Management Entity	\$4,440,269	\$4,274,691	\$2,323,464	\$3,000,810	\$3,425,771	\$3,180,802	-28.4%
	Children	\$86,993,561	\$88,178,017	\$84,883,419	\$80,090,650	\$86,892,989	\$100,565,901	15.6%
	Children's Mental Health Waiver	\$754,123	\$684,245	\$499,798	\$423,027	\$707,302	\$605,624	-19.7%
	Foster Care	\$21,251,297	\$22,118,661	\$20,985,975	\$19,385,893	\$17,322,127	\$17,207,869	-19.0%
	Newborn	\$24,997,341	\$31,977,754	\$25,033,453	\$22,703,763	\$26,308,852	\$32,226,740	28.9%
Member Months								
Children	Care Management Entity	2,943	3,007	2,025	2,231	2,677	2,152	-26.9%
	Children	386,864	357,909	328,984	332,983	410,292	471,610	21.9%
	Children's Mental Health Waiver	737	815	533	539	1,012	1,260	71.0%
	Foster Care	33,368	30,927	28,121	29,940	33,346	36,023	8.0%
	Newborn	36,678	29,417	17,223	20,830	35,522	45,969	25.3%
Per Member Per Month								
Children	Care Management Entity	\$1,508.76	\$1,421.58	\$1,147.39	\$1,345.05	\$1,279.71	\$1,478.07	-2.0%
	Children	\$224.87	\$246.37	\$258.02	\$240.52	\$211.78	\$213.24	-5.2%
	Children's Mental Health Waiver	\$2,523	\$2,001	\$1,727	\$1,722	\$1,478	\$1,164	-53.9%
	Foster Care	\$636.88	\$715.19	\$746.27	\$647.49	\$519.47	\$477.69	-25.0%
	Newborn	\$681.54	\$1,087.05	\$1,453.49	\$1,089.96	\$740.64	\$701.05	2.9%

12. Expenditures for Children, CMHW, and Foster Care include CME expenditures.

Table 46. Children Group Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$2.57	\$2.73	\$3.36	\$3.16	\$2.52	\$2.69
Ambulatory Surgical Center	\$6.65	\$6.76	\$7.02	\$6.03	\$6.08	\$7.03
Behavioral Health	\$37.65	\$42.60	\$44.30	\$40.18	\$28.05	\$19.20
Care Management Entity	\$10.29	\$11.29	\$8.32	\$8.96	\$7.20	\$5.77
Clinic/Center	\$2.50	\$1.97	\$1.89	\$0.95	\$1.43	\$1.42
Dental	\$23.07	\$23.56	\$25.11	\$21.91	\$20.76	\$18.24
DME, Prosthetics/Orthotics/Supplies	\$2.99	\$3.32	\$4.30	\$3.54	\$3.13	\$2.91
End-State Renal Disease	\$0.01	--	--	--	--	--
Federally Qualified Health Center	\$5.93	\$6.62	\$6.92	\$9.15	\$7.00	\$8.30
Home Health	\$0.26	\$0.03	\$0.04	\$0.47	\$0.49	\$0.46
Hospice	--	--	--	\$0.07	\$0.01	\$0.02
Hospital Total	\$80.42	\$108.77	\$99.83	\$90.14	\$80.90	\$78.16
Inpatient	\$61.74	\$88.12	\$77.91	\$70.14	\$62.37	\$59.83
Outpatient	\$18.73	\$20.69	\$21.94	\$20.00	\$18.53	\$18.32
Other Hospital	-\$0.05	-\$0.04	-\$0.03	--	--	--
Laboratory	\$0.36	\$0.41	\$0.35	\$0.38	\$0.43	\$0.50
Other	\$0.55	\$0.82	\$1.00	\$0.85	\$0.68	\$0.50
Physician & Other Practitioner	\$50.54	\$51.19	\$54.47	\$46.70	\$39.98	\$40.59
Prescription Drug	\$33.60	\$40.98	\$46.45	\$46.87	\$39.82	\$48.56
PRTF	\$25.54	\$26.35	\$23.52	\$18.22	\$14.39	\$9.94
Public Health or Welfare	\$0.22	\$0.24	\$0.39	\$0.33	\$0.20	\$0.25
Public Health, Federal	\$10.64	\$14.18	\$20.06	\$19.50	\$17.55	\$23.25
Rural Health Clinic	\$2.04	\$2.89	\$3.46	\$3.83	\$3.55	\$3.92
Vision	\$7.26	\$7.71	\$8.05	\$6.75	\$6.35	\$5.48
Total	\$303.08	\$352.42	\$358.85	\$327.99	\$280.50	\$277.19

CARE MANAGEMENT ENTITY

The Care Management Entity subgroup, started in SFY 2016, includes children and youth who have complex behavioral health conditions and need intensive care coordination.

The children enrolled in this eligibility subgroup have primary enrollment in another Medicaid or state-funded program, such as Children, Foster Care, Children's Mental Health Waiver, Supplemental Security Income, or state-funded Institutional Foster Care. For this reason, their Care Management Entity member months are not included in the total member months for the Children eligibility category or Medicaid overall.

The data below shows the expenses and PMPM for the population's total services, including both CME services as well as Medicaid services incurred while enrolled in the program. These expenses are also included in the detailed sections for the recipients' primary subgroups.



Member Months Average Months

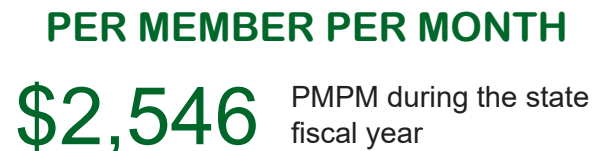
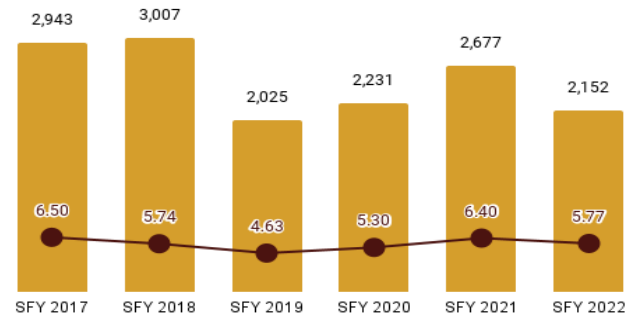


Table 47. Care Management Entity Group Per Member Per Month History by Service Area

Service	2017	2018	2019	2020	2021	2022
Ambulance	\$5.29	\$3.53	\$4.31	\$5.16	\$4.69	\$5.26
Ambulatory Surgery Center	\$4.70	\$3.60	\$4.03	\$1.87	\$3.07	\$7.23
Behavioral Health	\$492.15	\$421.66	\$389.33	\$452.99	\$347.44	\$288.83
Care Management Entity	\$1,591.20	\$1,534.11	\$1,302.66	\$1,746.32	\$1,392.79	\$1,622.72
Clinic/Center	\$1.80	\$0.23	\$0.23	\$0.26	\$0.24	\$29.36
Dental	\$27.58	\$24.30	\$16.82	\$24.25	\$26.35	\$6.29
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	\$4.56	\$2.80	\$2.11	\$3.32	\$3.85	\$38.73
Federally Qualified Health Center	\$10.80	\$11.88	\$12.37	\$15.63	\$15.68	\$24.70
Home Health	\$8.36	--	--	--	\$4.13	
Hospital Total	\$156.03	\$121.93	\$133.28	\$209.05	\$190.92	\$137.54
Hospital Inpatient	\$125.98	\$96.84	\$103.17	\$164.11	\$149.64	\$100.24
Hospital Outpatient	\$30.11	\$25.09	\$30.26	\$44.94	\$41.28	\$37.30
Hospital-Other	-\$0.05	--	-\$0.14	--	--	--
Laboratory	\$1.02	\$1.15	\$0.81	\$1.69	\$0.98	\$1.03
Other	\$2.70	\$4.32	\$6.90	\$8.48	\$8.76	\$7.96
Physician and Other Practitioner	\$80.44	\$56.85	\$55.15	\$90.78	\$76.47	\$81.65
Prescription Drug	\$148.89	\$113.93	\$103.65	\$165.81	\$183.77	\$199.87
Psychiatric Residential Treatment Facility	\$307.29	\$178.39	\$145.45	\$323.90	\$202.25	\$68.87
Public Health or Welfare	\$0.09	\$0.11	\$0.09	\$0.46	\$0.23	\$0.18
Public Health, Federal	\$0.63	\$3.01	\$0.82	\$1.83	--	\$3.51
Rural Health Clinic	\$2.08	\$4.73	\$4.92	\$13.69	\$12.00	\$10.82
Vision	\$10.54	\$11.15	\$7.74	\$12.91	\$13.44	\$11.55
Total	\$2,856.17	\$2,497.68	\$2,190.68	\$3,078.40	\$2,487.07	\$2,546.10

CHILDREN

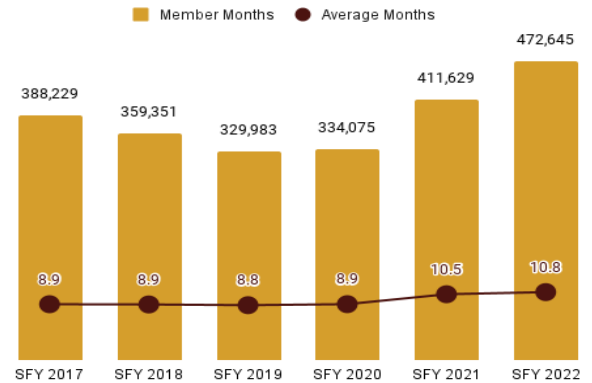
EXPENDITURES

\$102.1 million
paid to providers for services rendered
during the state fiscal year



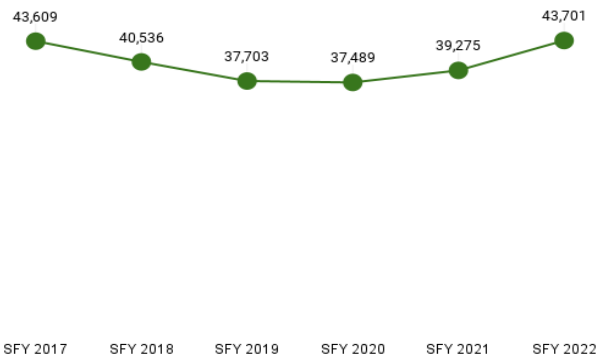
MEMBER MONTHS

472,645



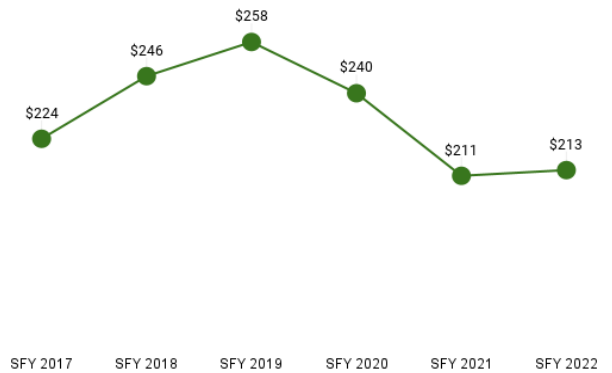
MEMBERS

43,701 unique individuals
enrolled during the
state fiscal year

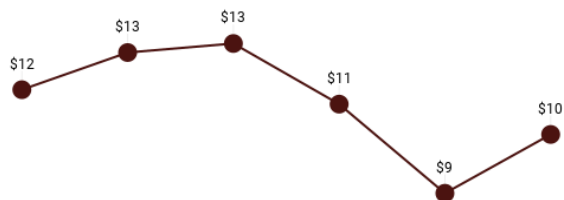


PER MEMBER PER MONTH

\$213 PMPM during the state
fiscal year



EMERGENCY ROOM PMPM



SFY 2017 SFY 2018 SFY 2019 SFY 2020 SFY 2021 SFY 2022

HOSPITAL INPATIENT PMPM



SFY 2017 SFY 2018 SFY 2019 SFY 2020 SFY 2021 SFY 2022

Table 48. Children Subgroup Per Member Per Month History by Service Area

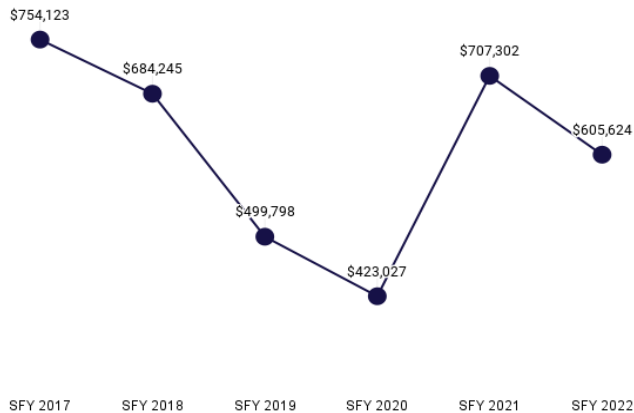
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$1.59	\$1.73	\$2.06	\$2.01	\$1.70	\$1.72
Ambulatory Surgical Center	\$7.30	\$7.22	\$7.28	\$6.47	\$6.60	\$7.55
Behavioral Health	\$28.68	\$31.35	\$31.48	\$29.08	\$21.75	\$15.72
Clinic/Center	\$2.50	\$1.82	\$1.63	\$0.83	\$1.26	\$1.27
Dental	\$24.94	\$25.09	\$25.77	\$22.98	\$22.29	\$19.62
DME, Prosthetics/Orthotics/Supplies	\$2.70	\$3.11	\$3.95	\$3.21	\$2.80	\$2.52
End-Stage Renal Disease	--	--	--	--	--	--
Federally Qualified Health Center	\$4.90	\$5.45	\$5.53	\$7.49	\$5.97	\$7.07
Home Health	\$0.17	\$0.01	\$0.03	\$0.53	\$0.54	\$0.51
Hospice	--	--	--	--	\$0.01	\$0.02
Hospital Total	\$43.66	\$51.35	\$52.38	\$48.25	\$42.58	\$38.39
Inpatient	\$25.67	\$31.85	\$32.16	\$29.32	\$25.09	\$20.96
Outpatient	\$17.99	\$19.53	\$20.25	\$18.93	\$17.49	\$17.43
Other Hospital	-\$0.05	-\$0.03	-\$0.03	\$0.00	\$0.00	\$0.00
Laboratory	\$0.37	\$0.40	\$0.34	\$0.35	\$0.44	\$0.51
Other	\$0.46	\$0.62	\$0.73	\$0.65	\$0.51	\$0.28
Physician & Other Practitioner	\$41.70	\$41.92	\$42.69	\$36.97	\$32.10	\$32.57
Prescription Drug	\$31.90	\$38.69	\$42.96	\$44.93	\$39.36	\$48.28
PRTF	\$14.29	\$14.07	\$12.09	\$8.83	\$8.37	\$5.84
Public Health or Welfare	\$0.17	\$0.17	\$0.21	\$0.19	\$0.14	\$0.18
Public Health, Federal	\$10.03	\$12.74	\$17.77	\$17.69	\$15.64	\$21.99
Rural Health Clinic	\$1.88	\$2.61	\$3.00	\$3.18	\$3.07	\$3.43
Vision	\$7.66	\$8.02	\$8.11	\$6.89	\$6.65	\$5.76
Total	\$224.87	\$246.37	\$258.02	\$240.52	\$211.78	\$213.24

CHILDREN'S MENTAL HEALTH WAIVER

EXPENDITURES

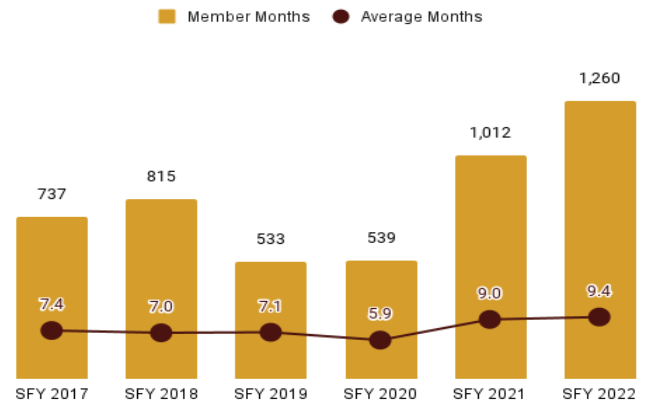
\$605,624

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

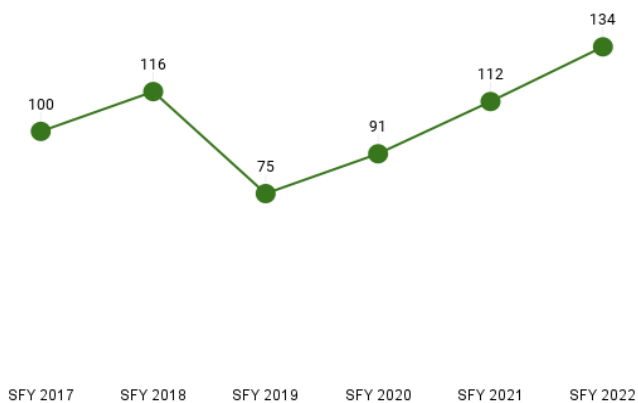
1,260



MEMBERS

134

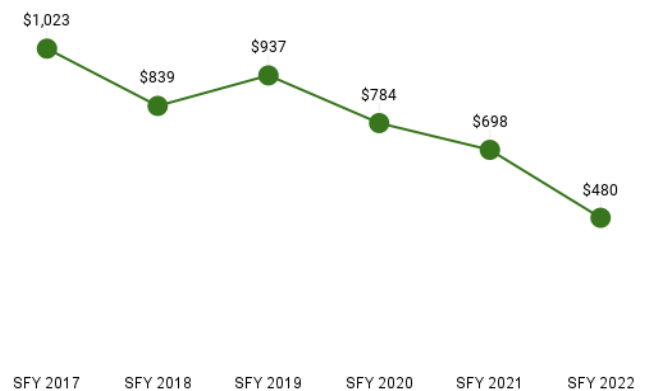
unique individuals enrolled during the state fiscal year



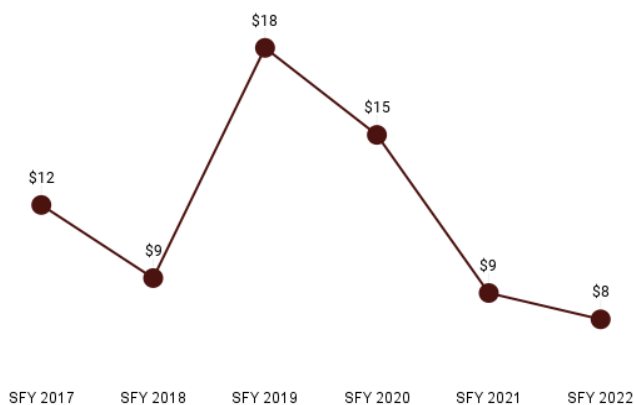
PER MEMBER PER MONTH

\$480

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

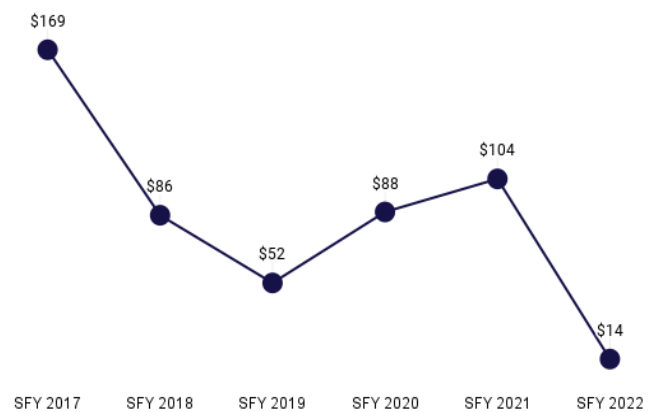


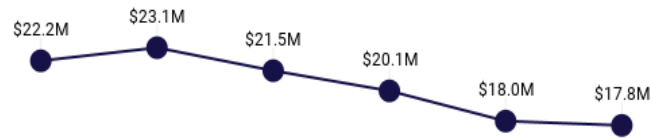
Table 49. Children's Mental Health Waiver Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$4.62	\$0.00	\$0.62	\$5.02	\$6.78	\$0.48
Ambulatory Surgical Center	\$1.65	\$4.45	\$12.94	\$0.00	\$2.34	\$2.95
Behavioral Health	\$185.17	\$220.34	\$243.43	\$211.37	\$191.90	\$105.47
Care Management Entity	--	\$1.19	--	--	\$0.34	\$2.76
Clinic/Center	--	--	\$1.04	--	\$1.31	--
Dental	\$17.97	\$21.52	\$27.46	\$15.44	\$16.75	\$20.15
DME, Prosthetics/Orthotics/Supplies	\$0.45	\$0.12	\$1.65	\$2.07	\$1.42	\$0.16
Federally Qualified Health Center	\$8.00	\$8.59	\$17.09	\$4.97	\$3.60	\$13.02
Home Health	\$4.13	--	--	--	--	--
Hospital Total	\$188.87	\$95.82	\$74.05	\$107.18	\$142.51	\$30.39
Inpatient	\$174.37	\$86.24	\$52.29	\$87.89	\$104.47	\$14.11
Outpatient	\$14.51	\$9.58	\$22.38	\$19.51	\$38.04	\$16.28
Other Hospital	--	--	-\$0.62	-\$0.22	--	--
Laboratory	\$1.01	\$1.25	\$0.53	\$0.14	\$0.40	\$0.56
Other	\$3.10	\$4.74	\$13.74	\$7.96	\$4.76	\$4.50
Physician & Other Practitioner	\$66.66	\$33.16	\$41.61	\$52.86	\$50.21	\$38.07
Prescription Drug	\$128.73	\$91.85	\$111.67	\$149.42	\$95.70	\$67.40
PRTF	\$403.53	\$342.64	\$373.12	\$210.91	\$165.79	\$183.45
Public Health or Welfare	\$0.07	--	\$0.09	--	--	\$0.13
Public Health, Federal	--	--	--	\$0.98	--	--
Rural Health Clinic	\$2.72	\$7.09	\$8.90	\$6.08	\$8.68	\$3.37
Vision	\$6.57	\$6.81	\$9.75	\$10.45	\$6.42	\$7.79
Total	\$1,023.23	\$839.56	\$937.71	\$784.84	\$698.92	\$480.65

FOSTER CARE

EXPENDITURES \$17.8 million

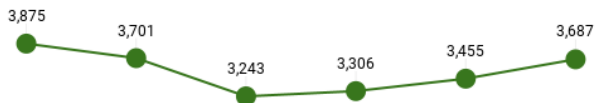
paid to providers for services rendered during the state fiscal year



SFY 2017 SFY 2018 SFY 2019 SFY 2020 SFY 2021 SFY 2022

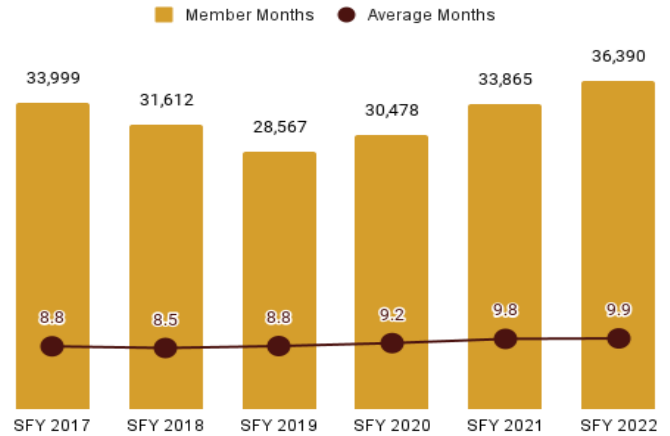
MEMBERS 3,687

unique individuals enrolled during the state fiscal year



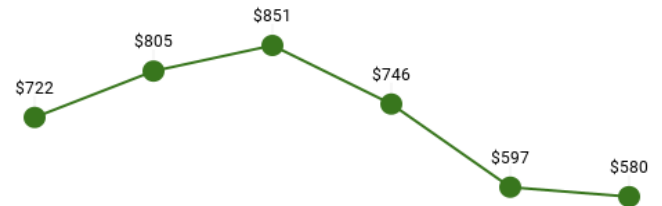
SFY 2017 SFY 2018 SFY 2019 SFY 2020 SFY 2021 SFY 2022

MEMBER MONTHS 36,390



PER MEMBER PER MONTH \$580

PMPM during the state fiscal year



SFY 2017 SFY 2018 SFY 2019 SFY 2020 SFY 2021 SFY 2022

Table 50. Foster Care Per Member Per Month History by Service Area

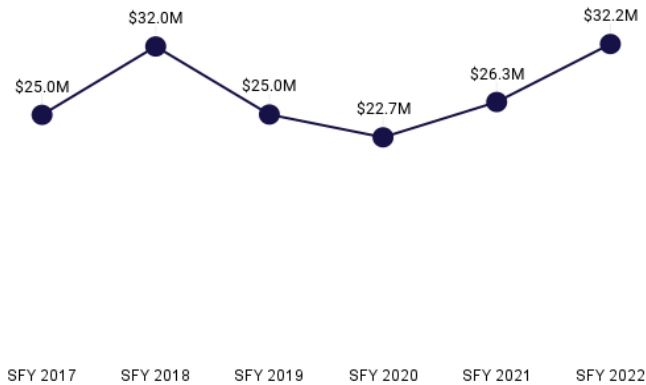
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$2.81	\$3.64	\$4.93	\$4.12	\$3.25	\$3.75
Ambulatory Surgical Center	\$5.16	\$6.30	\$6.75	\$4.57	\$4.93	\$5.69
Behavioral Health	\$178.89	\$207.86	\$216.92	\$187.82	\$130.17	\$86.21
Care Management Entity	--	--	--	--	\$0.04	--
Clinic/Center	\$3.91	\$4.12	\$4.34	\$2.30	\$3.41	\$2.80
Dental	\$26.55	\$28.03	\$31.96	\$24.83	\$22.83	\$20.33
DME, Prosthetics/Orthotics/Supplies	\$3.91	\$4.25	\$6.41	\$5.45	\$5.65	\$5.56
End-State Renal Disease	\$0.09	--	--	--	--	--
Federally Qualified Health Center	\$5.00	\$6.24	\$7.79	\$10.23	\$7.61	\$9.86
Home Health	\$0.74	\$0.02	\$0.02	\$0.01	\$0.05	\$0.06
Hospital Total	\$84.67	\$89.81	\$104.30	\$98.98	\$77.93	\$102.17
Inpatient	\$65.08	\$65.78	\$77.22	\$74.52	\$51.94	\$80.27
Outpatient	\$19.61	\$24.07	\$27.10	\$24.46	\$25.97	\$21.89
Other Hospital	-\$0.02	-\$0.05	-\$0.02	--	\$0.01	--
Laboratory	\$0.46	\$0.68	\$0.57	\$0.66	\$0.67	\$0.70
Other	\$0.70	\$1.19	\$1.68	\$1.48	\$1.00	\$0.91
Physician & Other Practitioner	\$55.70	\$57.49	\$63.47	\$52.53	\$48.09	\$53.65
Prescription Drug	\$64.23	\$81.81	\$82.35	\$77.35	\$66.07	\$70.91
PRTF	\$175.63	\$185.23	\$165.00	\$131.87	\$99.15	\$70.25
Public Health or Welfare	\$0.19	\$0.20	\$0.45	\$0.30	\$0.24	\$0.36
Public Health, Federal	\$16.00	\$24.09	\$33.27	\$30.10	\$34.94	\$31.55
Rural Health Clinic	\$1.96	\$3.15	\$4.17	\$5.26	\$4.30	\$4.99
Vision	\$10.29	\$11.07	\$11.91	\$9.63	\$9.13	\$7.95
Total	\$722	\$805	\$851	\$746	\$597	\$580

NEWBORN

EXPENDITURES

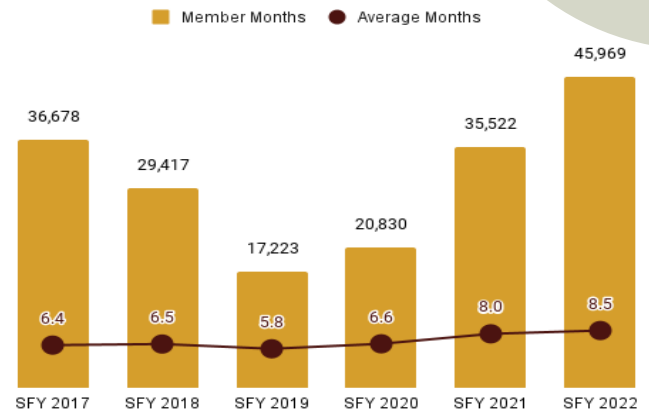
\$32.2 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

45,969



MEMBERS

5,397

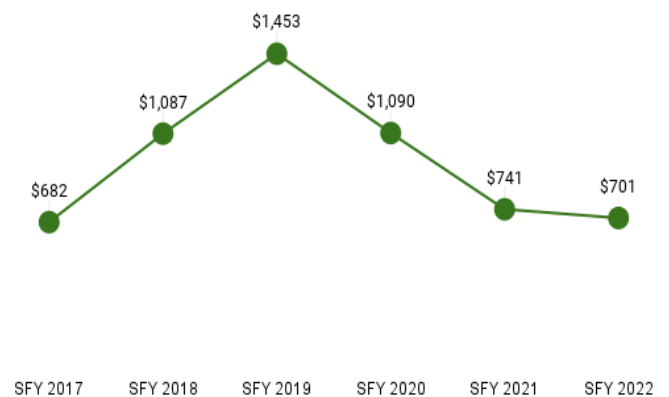
unique individuals enrolled during the state fiscal year



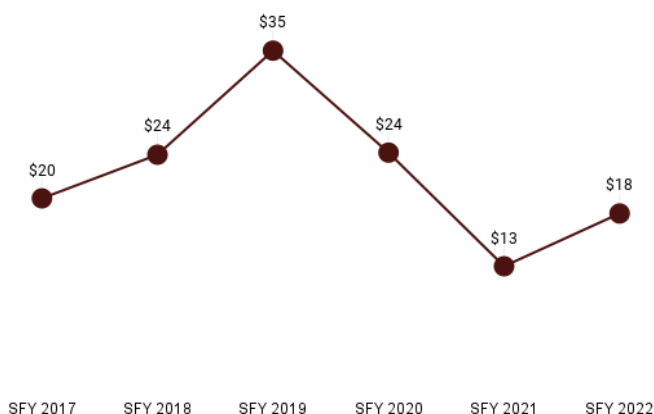
PER MEMBER PER MONTH

\$701

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

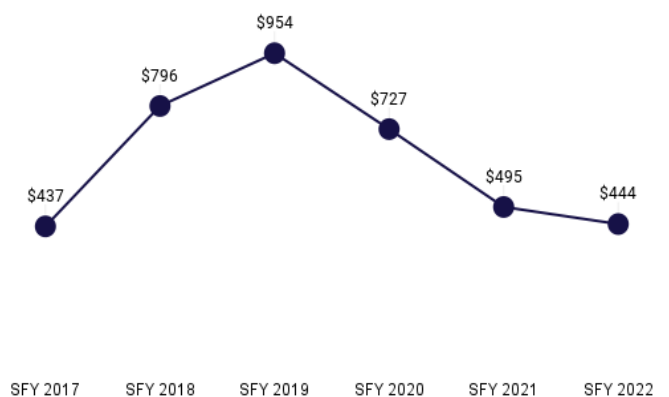


Table 51. Newborn Per Member Per Month History by Service Area

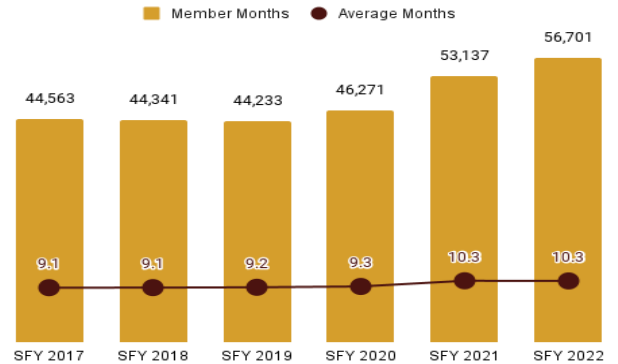
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$12.59	\$13.92	\$25.73	\$20.17	\$11.24	\$11.88
Ambulatory Surgical Center	\$1.26	\$1.72	\$2.36	\$1.21	\$1.23	\$2.86
Behavioral Health	\$0.81	\$0.76	\$1.26	\$1.13	\$0.15	\$0.08
Clinic/Center	\$1.23	\$1.64	\$2.95	\$1.00	\$1.43	\$1.87
Dental	\$0.26	\$0.43	\$1.15	\$0.79	\$1.20	\$2.36
DME, Prosthetics/Orthotics/Supplies	\$5.21	\$5.03	\$7.79	\$6.06	\$4.61	\$4.90
Federally Qualified Health Center	\$17.61	\$21.30	\$31.80	\$34.24	\$18.43	\$19.62
Home Health	\$0.69	\$0.24	\$0.12	\$0.16	\$0.26	\$0.21
Hospice	--	--	--	--	\$1.04	--
Hospital Total	\$462.55	\$827.62	\$999.51	\$746.62	\$524.53	\$468.66
Inpatient	\$436.89	\$796.31	\$953.79	\$715.86	\$501.57	\$443.90
Outpatient	\$25.71	\$31.51	\$45.85	\$30.75	\$22.95	\$24.75
Other Hospital	-\$0.05	-\$0.20	-\$0.13		\$0.01	\$0.00
Laboratory	\$0.13	\$0.14	\$0.16	\$0.37	\$0.19	\$0.26
Other	\$1.26	\$2.71	\$4.59	\$2.88	\$2.23	\$2.31
Physician & Other Practitioner	\$138.83	\$157.86	\$265.35	\$193.73	\$123.04	\$112.71
Prescription Drug	\$21.78	\$24.49	\$52.59	\$31.52	\$18.91	\$33.39
Public Health or Welfare	\$0.84	\$1.09	\$3.74	\$2.70	\$0.84	\$0.90
Public Health, Federal	\$12.42	\$21.74	\$42.77	\$33.64	\$23.81	\$30.33
Rural Health Clinic	\$3.70	\$5.94	\$10.98	\$12.08	\$8.17	\$8.13
Vision	\$0.34	\$0.40	\$0.63	\$0.29	\$0.37	\$0.59
Total	\$681.54	\$1,087.05	\$1,453.49	\$1,089.95	\$740.64	\$701.05

MEDICARE SAVINGS PROGRAMS

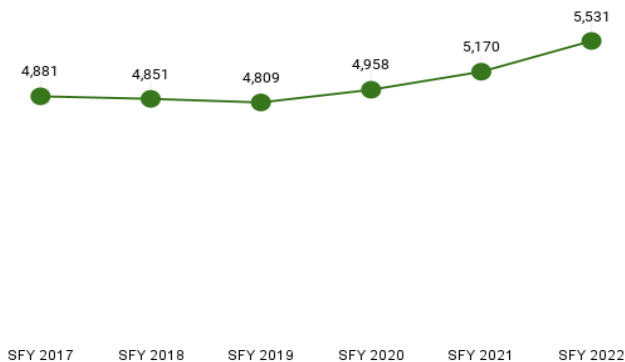
EXPENDITURES
\$2 million
 paid to providers for services
 rendered during the state fiscal year



MEMBER MONTHS
56,701

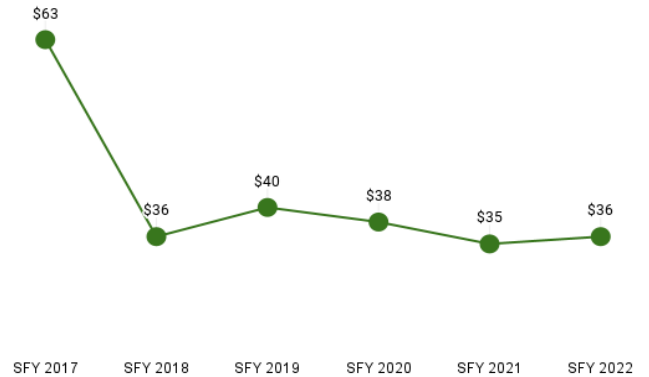


MEMBERS
5,531 unique individuals
 enrolled during the state
 fiscal year

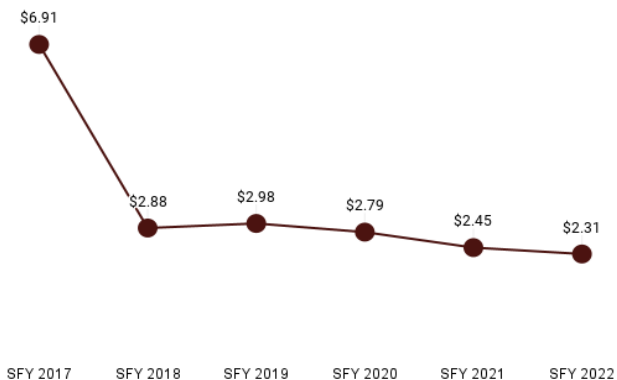


PER MEMBER PER MONTH

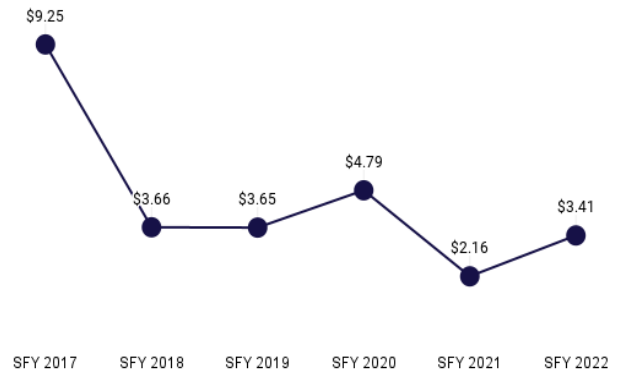
\$36 PMPM during the state
 fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

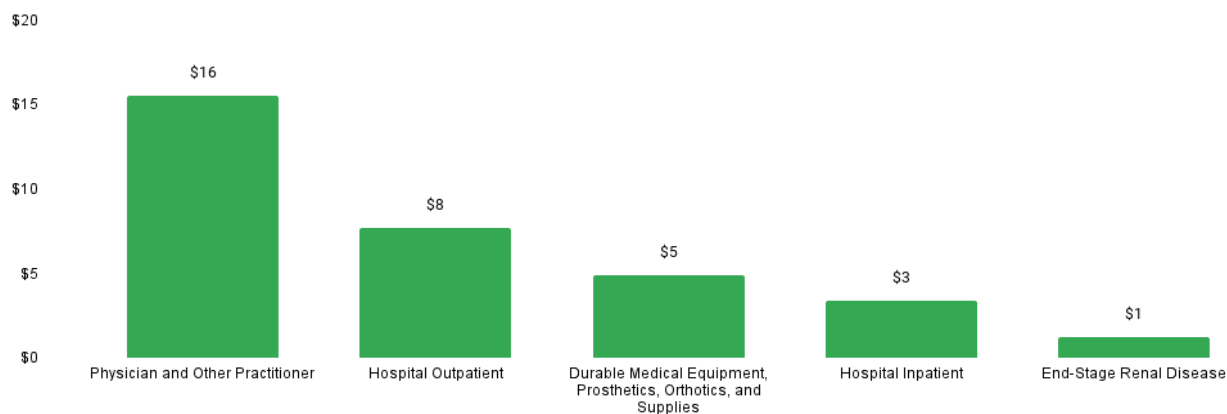


Figure 15. Medicare Savings Programs Per Member Per Month by Service Area

Table 52. Medicare Savings Programs Per Member Per Month Summary by Subgroup

Eligibility Category / Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
Medicare Savings Programs						
Qualified Medicare Beneficiary	\$2,017,886	7.9%	32,336	5.0%	\$62	2.3%
Qualified Medicare Beneficiary Dual	\$5,291	264450.0%	--	--	--	--
Specified Low-Income Medicare Beneficiary	\$3,374	-74.2%	24,365	9.1%	\$0	-86.2%

Table 53. Medicare Savings Program History by Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
Medicare Savings Programs	Part B - Partial AMB	\$120	--	--	--	--	--	-100%
	Qualified Medicare Beneficiary	\$4,037,535	\$2,774,127	\$1,586,094	\$1,753,077	\$1,718,709	\$1,832,429	-55%
	Qualified Medicare Beneficiary Dual	--	--	--	\$163	\$2	\$5,291	100%
	Specified Low-Income Medicare Beneficiary	\$27,903	\$21,453	\$17,549	\$18,409	\$19,795	\$13,055	-53%
	Specified Low Income Medicare Beneficiary Dual	--	--	--	\$120	--	--	--
Member Months								
Medicare Savings Programs	Part B - Partial AMB	--	--	--	--	--	--	--
	Qualified Medicare Beneficiary	26,964	27,142	26,133	26,980	30,804	32,336	23%
	Qualified Medicare Beneficiary Dual	--	--	--	--	--	--	--
	Specified Low Income Medicare Beneficiary	17,599	17,199	18,100	19,291	22,333	24,365	29%
	Specified Low Income Medicare Beneficiary Dual	--	--	--	--	--	--	--
Per Member Per Month								
Medicare Savings Programs	Part B - Partial AMB	--	--	--	--	--	--	--
	Qualified Medicare Beneficiary	\$103.00	\$58.00	\$67.00	\$64.00	\$61.00	\$62.00	-63%
	Qualified Medicare Beneficiary Dual	--	--	--	--	--	--	--
	Specified Low Income Medicare Beneficiary	\$1.00	\$1.00	\$1.00	\$1.00	\$1.00	\$0.00	-100%
	Specified Low Income Medicare Beneficiary Dual	--	--	--	--	--	--	--

Table 54. Medicare Savings Programs Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$1.20	\$0.11	\$0.09	\$0.08	\$0.09	\$0.07
Ambulatory Surgical Center	\$0.68	\$0.10	\$0.17	\$0.23	\$0.28	\$0.33
Behavioral Health	\$1.57	\$1.11	\$1.15	\$0.97	\$0.80	\$0.62
Dental	--	--	--	--	--	--
DME, Prosthetics/Orthotics/Supplies	\$3.66	\$3.36	\$4.25	\$4.23	\$4.54	\$4.90
End-State Renal Disease	\$2.16	\$0.78	\$0.93	\$0.84	\$1.29	\$1.29
Federally Qualified Health Center	\$1.03	\$1.11	\$1.43	\$1.13	\$0.94	\$0.77
Home Health	--	--	--	--	--	\$0.01
Hospital Total	\$28.97	\$9.02	\$10.57	\$10.20	\$10.94	\$11.14
Inpatient	\$9.28	\$3.63	\$3.65	\$2.79	\$2.16	\$3.41
Outpatient	\$19.68	\$5.21	\$6.78	\$7.27	\$8.67	\$7.71
Other Hospital	\$0.02	\$0.18	\$0.14	\$0.14	\$0.11	\$0.03
Laboratory	\$0.07	\$0.05	\$0.03	\$0.02	\$0.02	\$0.07
Nursing Facility	\$0.78	\$0.03	\$0.07	\$0.12	\$0.02	\$0.10
Other	\$0.11	\$0.14	\$0.17	\$0.13	\$0.13	\$0.07
Physician & Other Practitioner	\$20.14	\$17.91	\$18.39	\$17.46	\$14.83	\$15.54
Prescription Drug	--	--	--	--	\$0.01	\$0.11
Public Health or Welfare	\$1.16	\$0.87	\$0.94	\$0.91	\$0.63	\$0.14
Public Health, Federal	\$0.07	\$0.09	\$0.08	\$0.01	--	\$0.00
Rural Health Clinic	\$0.58	\$1.05	\$1.36	\$0.92	\$0.57	\$0.25
Vision	\$0.55	\$0.45	\$0.41	\$0.35	\$0.36	\$0.31
Total	\$62.74	\$36.17	\$40.03	\$37.60	\$35.44	\$35.74

QUALIFIED MEDICARE BENEFICIARY

EXPENDITURES

\$2 million

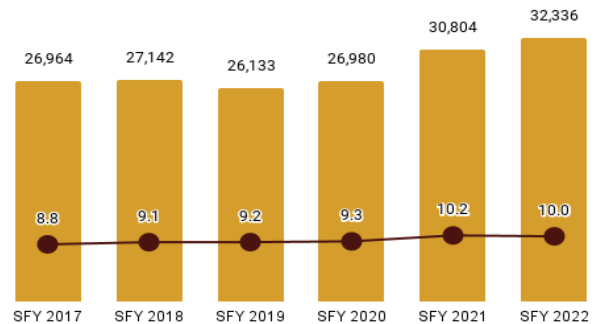
paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

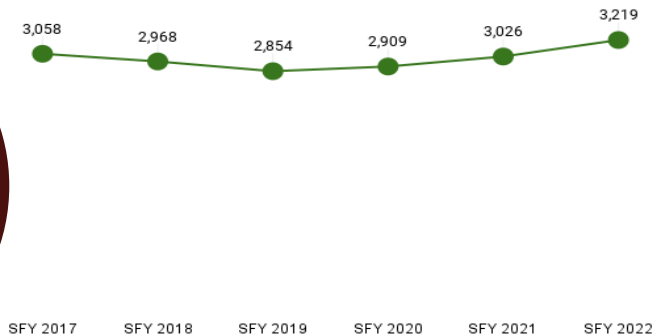
32,336

Member Months Average Months



MEMBERS

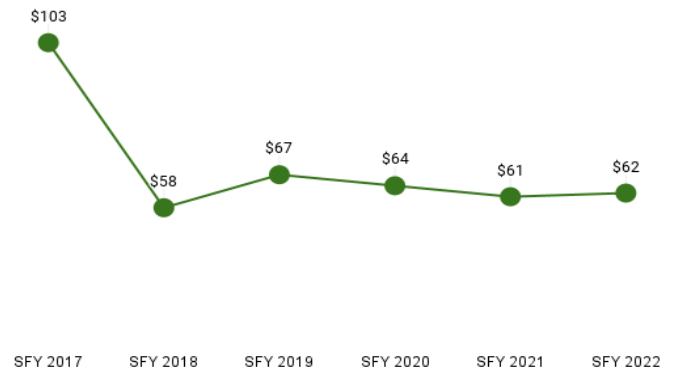
3,219 unique individuals enrolled during the state fiscal year



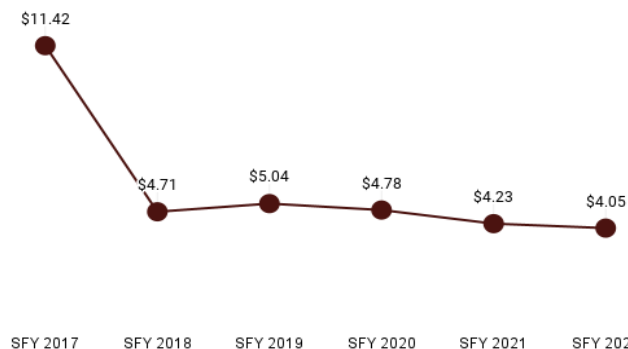
PER MEMBER PER MONTH

\$62

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

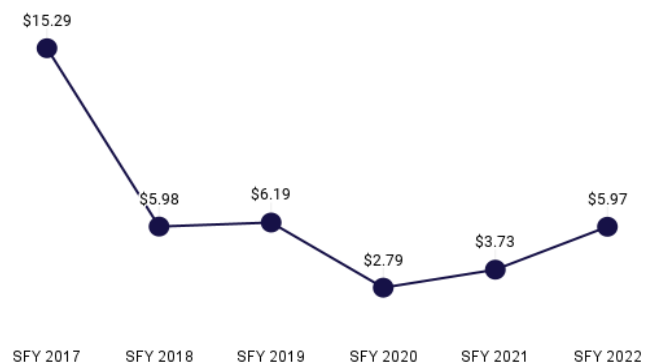


Table 55. Qualified Medicare Beneficiary Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$1.99	\$0.17	\$0.15	\$0.13	\$0.16	\$0.12
Ambulatory Surgical Center	\$1.12	\$0.16	\$0.29	\$0.39	\$0.48	\$0.59
Behavioral Health	\$2.58	\$1.80	\$1.93	\$1.63	\$1.36	\$1.07
DME, Prosthetics/Orthotics/Supplies	\$6.04	\$5.49	\$7.20	\$7.25	\$7.83	\$8.60
End-State Renal Disease	\$3.57	\$1.27	\$1.57	\$1.44	\$2.23	\$2.26
Federally Qualified Health Center	\$1.71	\$1.81	\$2.42	\$1.94	\$1.63	\$1.36
Hospital Total	\$47.88	\$14.73	\$17.89	\$17.49	\$18.88	\$19.54
Inpatient	\$15.34	\$5.93	\$6.19	\$4.79	\$3.73	\$5.97
Outpatient	\$32.52	\$8.51	\$11.47	\$12.46	\$14.95	\$13.51
Other Hospital	\$0.03	\$0.29	\$0.23	\$0.23	\$0.20	\$0.06
Laboratory	\$0.11	\$0.08	\$0.04	\$0.04	\$0.03	\$0.13
Nursing Facility	\$1.29	\$0.04	\$0.13	\$0.21	\$0.03	\$0.03
Other	\$0.17	\$0.23	\$0.29	\$0.22	\$0.23	\$0.12
Physician & Other Practitioner	\$33.29	\$29.26	\$31.13	\$29.95	\$25.58	\$27.24
Prescription Drug	--	--	--	--	\$0.01	\$0.20
Public Health or Welfare	\$1.14	\$0.79	\$0.90	\$0.85	\$0.67	\$0.15
Public Health, Federal	\$0.12	\$0.15	\$0.13	\$0.02		\$0.00
Rural Health Clinic	\$0.96	\$1.71	\$2.30	\$1.58	\$0.98	\$0.44
Vision	\$0.90	\$0.74	\$0.70	\$0.60	\$0.63	\$0.55
Total	\$102.88	\$58.44	\$67.06	\$63.75	\$60.71	\$62.40

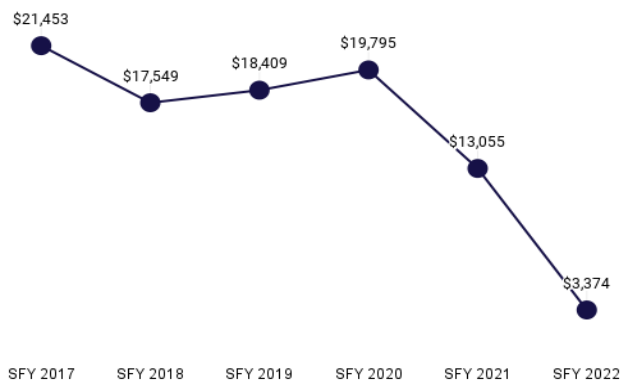
SPECIFIED LOW-INCOME MEDICARE BENEFICIARY

This program provides assistance with Medicare Part B premiums (not included in PMPM totals) and assessments supporting application to long-term care or HCBS waivers.

EXPENDITURES

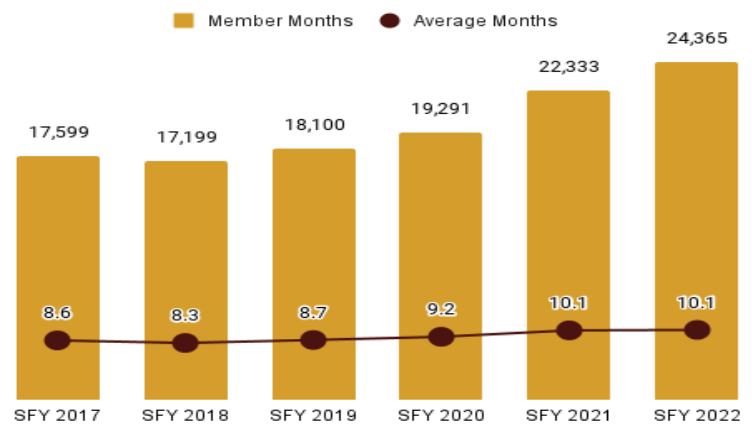
\$3,374

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

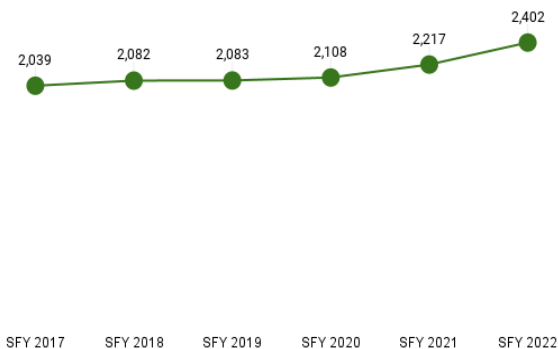
24,365



MEMBERS

2,402

unique individuals enrolled during the state fiscal year



PER MEMBER PER MONTH

\$0.14

PMPM during the state fiscal year

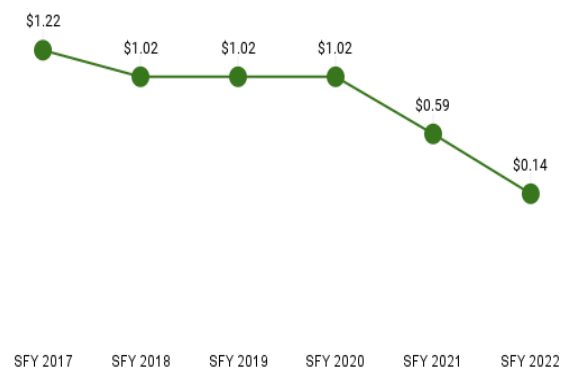


Table 56. Specified Low-Income Medicare Beneficiary Per Member Per Month History by Service Area

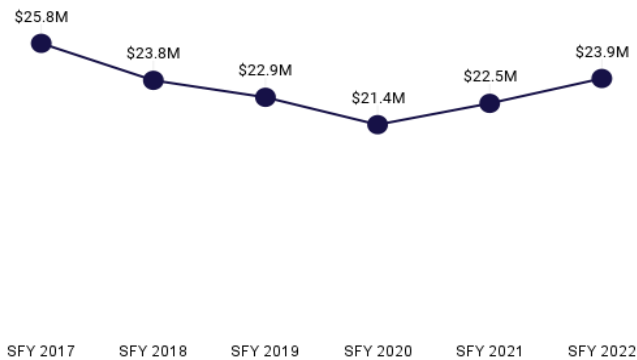
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Behavioral Health	\$0.04	\$0.02	\$0.01	\$0.04	\$0.02	\$0.02
Public Health or Welfare	\$1.18	\$1.00	\$1.01	\$0.98	\$0.57	\$0.12
Total	\$1.22	\$1.02	\$1.02	\$1.02	\$0.59	\$0.14

PREGNANT WOMEN

EXPENDITURES

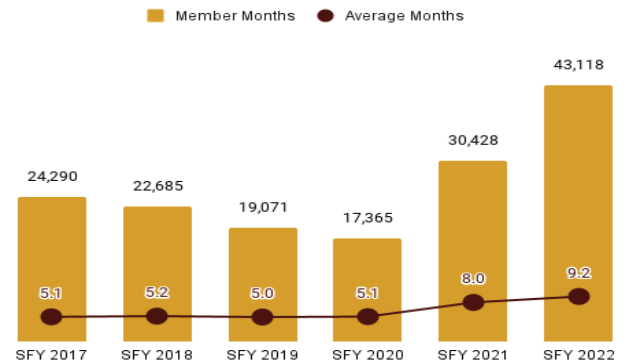
\$23.9 million

paid to providers for services rendered during the state fiscal year



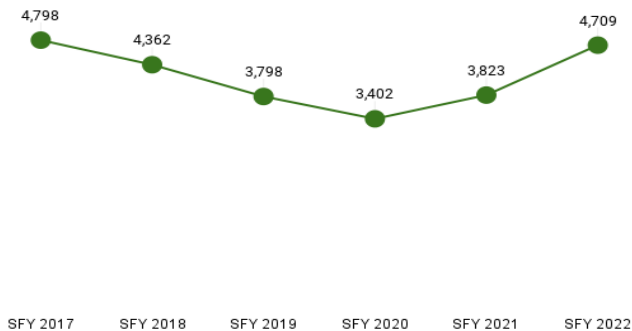
MEMBER MONTHS

43,118



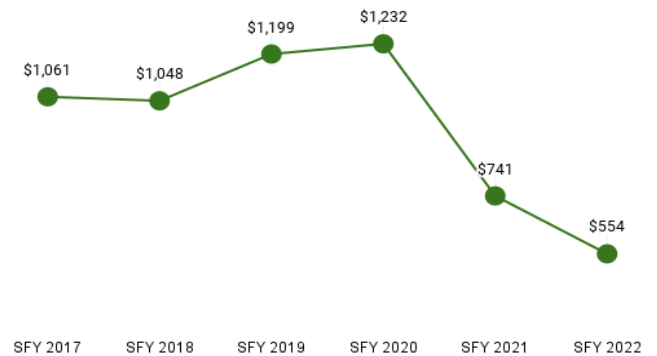
MEMBERS

4,709 unique individuals enrolled during the state fiscal year

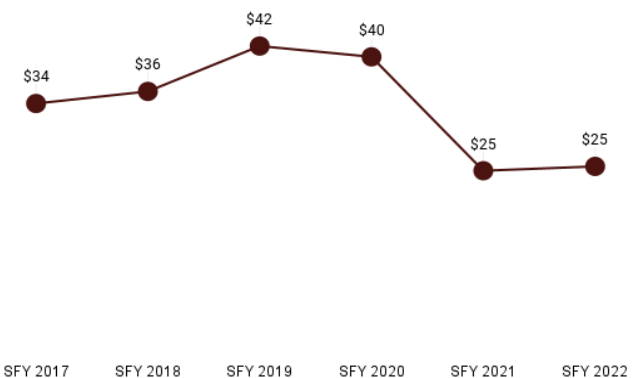


PER MEMBER PER MONTH

\$554 PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

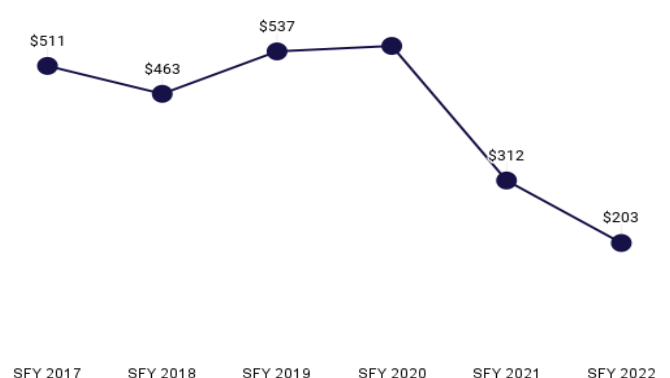


Table 57. Pregnant Women Per Member Per Month Summary by Subgroup

Eligibility Category / Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
Pregnant Women						
Pregnant Women	\$23,872,605	5.9%	43,118	41.7%	\$554	0.0%

Table 58. Pregnant Women History by Subgroup

Eligibility Category / Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures							
Pregnant Women	\$25,771,556	\$23,775,130	\$22,869,490	\$21,387,703	\$22,533,637	\$23,872,605	-7.37%
Member Months							
Pregnant Women	24,295	22,685	19,079	17,365	30,428	43,118	77.48%
Per Member Per Month							
Pregnant Women	\$1,061	\$1,048	\$1,199	\$1,232	\$554	\$554	-47.79%

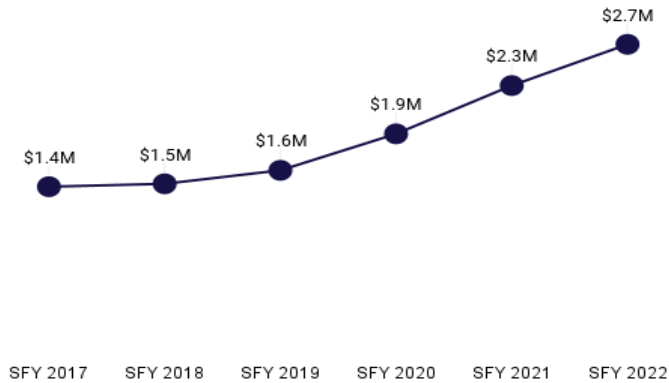
Table 59. Pregnant Women Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$18.27	\$15.41	\$10.62	\$14.31	\$12.17	\$11.06
Ambulatory Surgical Center	\$2.53	\$1.33	\$2.23	\$2.26	\$2.41	\$2.47
Behavioral Health	\$21.11	\$11.76	\$11.70	\$9.80	\$11.48	\$9.75
Clinic/Center	--	--	\$0.01	--	--	--
Dental	\$13.55	\$6.88	\$7.68	\$7.43	\$5.52	\$5.17
DME, Prosthetics/Orthotics/Supplies	\$2.21	\$2.46	\$1.96	\$2.22	\$1.61	\$2.06
Federally Qualified Health Center	\$46.60	\$32.68	\$34.62	\$36.32	\$36.31	\$26.45
Home Health	\$0.11	\$0.07	\$0.17	\$0.32	\$0.24	\$0.22
Hospital Total	\$576.38	\$544.55	\$625.78	\$636.55	\$366.53	\$251.96
Inpatient	\$511.37	\$462.78	\$536.62	\$546.35	\$311.87	\$203.28
Outpatient	\$68.46	\$82.52	\$90.64	\$90.22	\$54.66	\$48.68
Other Hospital	-\$3.45	-\$0.76	-\$1.49	-\$0.01	\$0.00	\$0.01
Laboratory	\$9.32	\$8.68	\$8.77	\$8.62	\$4.85	\$7.43
Other	\$1.30	\$1.91	\$1.96	\$3.65	\$2.04	\$1.24
Physician & Other Practitioner	\$312.72	\$318.47	\$348.58	\$365.59	\$200.34	\$137.39
Prescription Drug	\$35.01	\$53.53	\$66.71	\$59.96	\$51.18	\$57.83
Public Health or Welfare	\$0.37	\$0.50	\$1.26	\$1.32	\$0.37	\$0.78
Public Health, Federal	\$45.13	\$46.71	\$60.76	\$60.36	\$51.55	\$44.82
Rural Health Clinic	\$1.75	\$3.52	\$5.33	\$9.30	\$5.56	\$5.38
Vision	\$1.65	\$1.31	\$1.73	\$1.55	\$1.03	\$0.83
Total	\$1,060.64	\$1,047.89	\$1,198.63	\$1,231.66	\$740.56	\$553.66

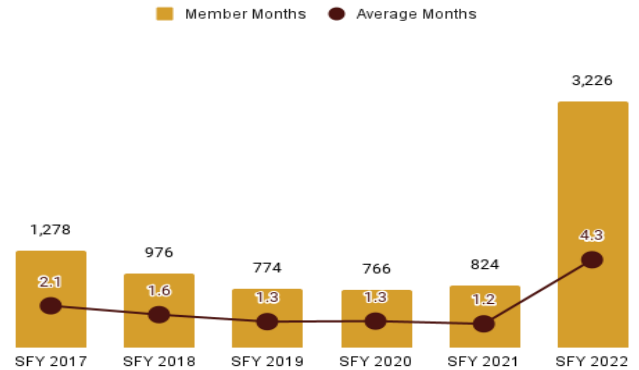
SPECIAL GROUPS

EXPENDITURES \$2.7 million

paid to providers for services rendered during the state fiscal year

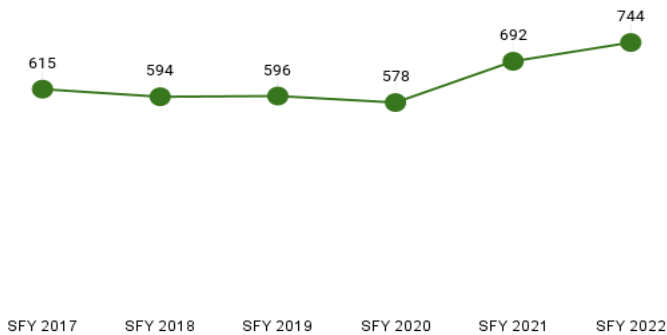


MEMBER MONTHS 3,226



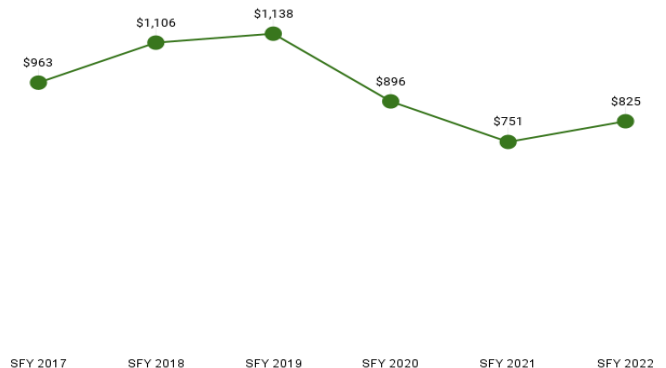
MEMBERS

744 unique individuals enrolled during the state fiscal year

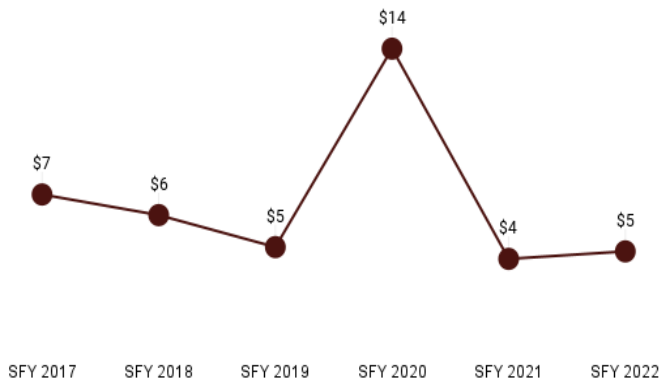


PER MEMBER PER MONTH

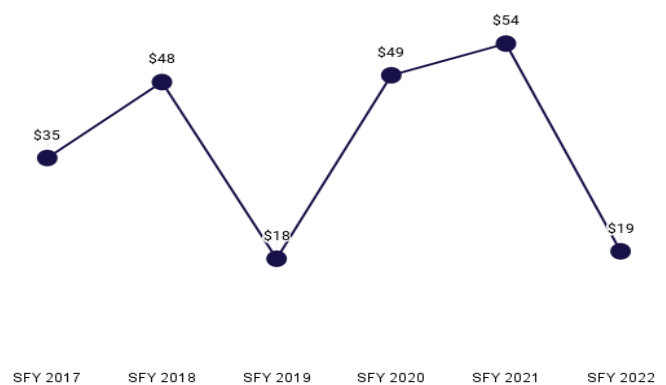
\$825 PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM



PMPM FOR TOP SERVICE AREAS

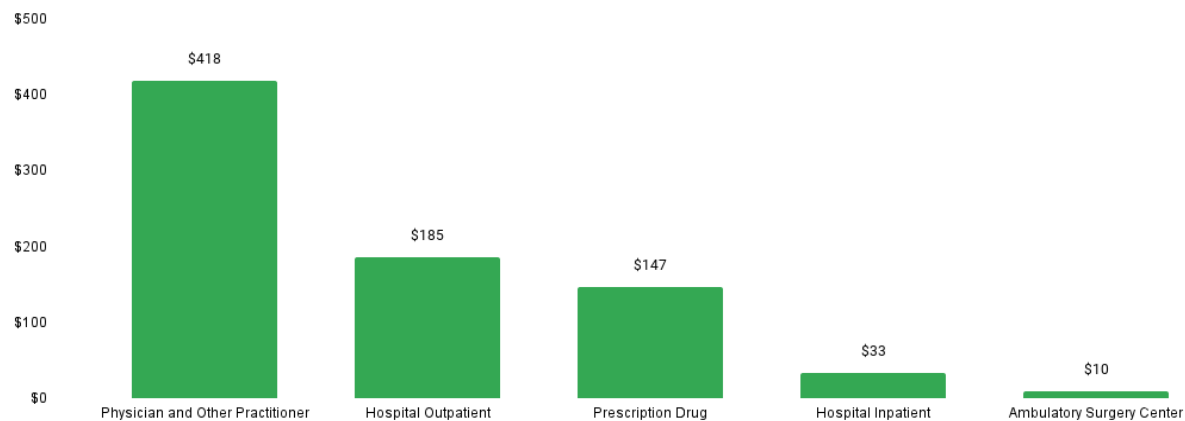


Figure 16. Special Groups Per Member Per Month by Service Area

Table 60. Special Groups Per Member Per Month History for Waiver and Non-Waiver Services

Eligibility Category / Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
Special Groups						
Breast and Cervical	\$2,653,523	14.9%	996	33.0%	\$2,664	-13.6%
Family Planning Waiver	\$2,447	2208.5%	64	-14.7%	\$38	3700.0%
Tuberculosis	--	--	--	--	--	--
Incarcerated Medicaid Member	\$6,177	-100%	2,166	-100%	\$3	-100%

Table 61. Special Groups Per Member Per Month History for Waiver and Non-Waiver Services

Eligibility Category	Eligibility Sub-group	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
Special Groups	Breast and Cervical	\$1,440,578	\$1,466,631	\$1,582,515	\$1,895,022	\$2,309,485	\$2,653,523	84.2%
	Family Planning Waiver	\$4,364	\$3,258	\$2,425	\$1,990	\$106	\$2,447	-43.9%
	Tuberculosis	\$14	--	--	--	--	--	-100%
	Incarcerated Medicaid Member	--	--	--	--	--	\$6,177	100%
Member Months								
Special Groups	Breast and Cervical	867	717	594	647	749	996	14.9%
	Family Planning Waiver	410	259	180	119	75	64	-84.4%
	Tuberculosis	1	--	--	--	--	--	-100%
	Incarcerated Medicaid Member	--	--	--	--	--	2,166	100%
Per Member Per Month								
Special Groups	Breast and Cervical	\$1,662	\$2,046	\$2,664	\$2,929	\$3,083	\$2,664	60.3%
	Family Planning Waiver	\$11	\$13	\$13	\$17	\$1	\$38	245.5%
	Tuberculosis	\$14	--	--	--	--	--	-100%
	Incarcerated Medicaid Member	--	--	--	--	--	\$3	100%

Table 62. Special Groups Per Member Per Month History by Service Area

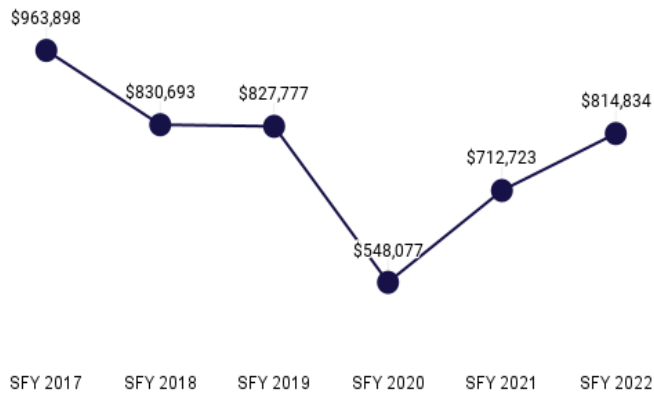
Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$8.59	\$5.36	\$0.23	\$0.59	\$1.13	\$0.64
Ambulatory Surgical Center	\$7.67	\$7.74	\$3.98	\$2.15	\$2.07	\$9.54
Behavioral Health	\$10.72	\$7.62	\$11.38	\$4.13	\$4.74	\$4.44
Dental	\$3.87	\$1.73	\$1.69	\$1.31	\$1.82	\$2.36
DME, Prosthetics/Orthotics/Supplies	\$7.17	\$15.02	\$9.72	\$5.78	\$5.12	\$2.82
Federally Qualified Health Center	\$12.34	\$12.91	\$13.91	\$5.72	\$6.67	\$9.30
Home Health	\$1.84	\$0.70	\$0.16	--	\$1.50	\$0.34
Hospice	\$2.70	\$1.94	\$6.97	--	--	\$0.62
Hospital Total	\$334.98	\$436.38	\$414.76	\$376.10	\$248.66	\$218.49
Inpatient	\$94.77	\$138.62	\$49.34	\$101.18	\$87.18	\$33.23
Outpatient	\$240.38	\$297.79	\$365.42	\$274.92	\$161.48	\$185.26
Other Hospital	-\$0.17	-\$0.02	--	--	--	--
Laboratory	\$9.69	\$9.22	\$2.89	\$1.17	\$2.41	\$6.76
Other	\$0.30	\$0.54	\$1.00	\$0.71	\$0.42	\$0.04
Physician & Other Practitioner	\$335.17	\$357.51	\$438.26	\$356.65	\$382.86	\$418.20
Prescription Drug	\$201.79	\$237.71	\$225.45	\$137.17	\$89.55	\$146.76
Public Health or Welfare	\$0.02	\$0.00	\$0.07		\$0.08	\$0.10
Public Health, Federal	\$23.91	\$10.88	\$6.61	\$3.23	\$2.16	\$2.56
Rural Health Clinic	\$0.29	\$0.11	\$1.00	\$1.67	\$1.31	\$1.75
Vision	\$2.27	\$1.44	\$0.53	\$0.12	\$0.56	\$0.50
Total	\$963.30	\$1,106.84	\$1,138.61	\$896.51	\$751.09	\$825.22

NON-CITIZENS WITH MEDICAL EMERGENCIES

EXPENDITURES

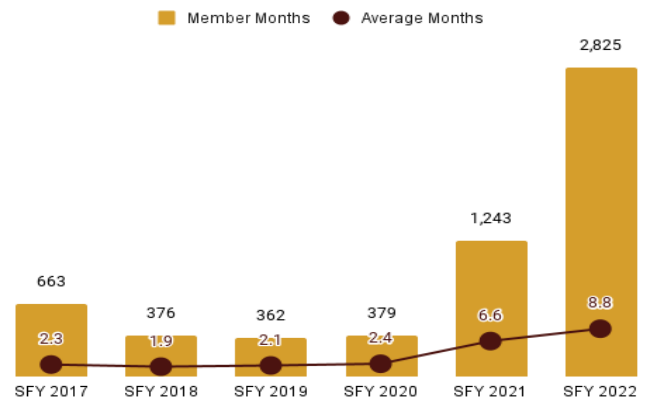
\$814,834

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

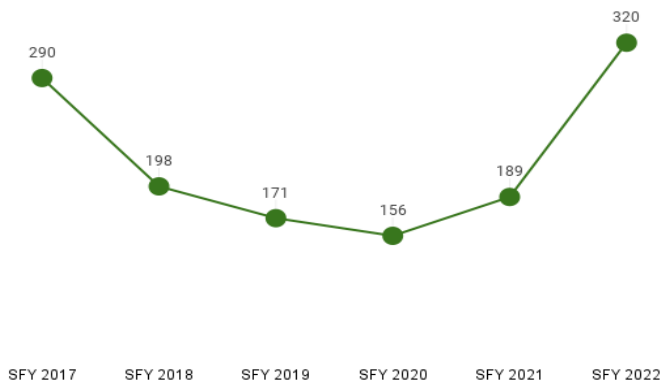
2,825



MEMBERS

320

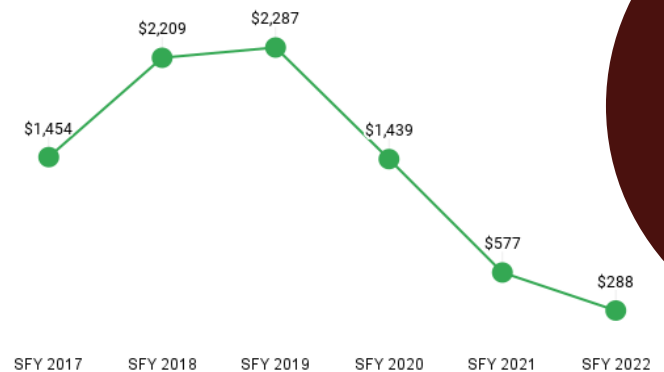
unique individuals enrolled during the state fiscal year



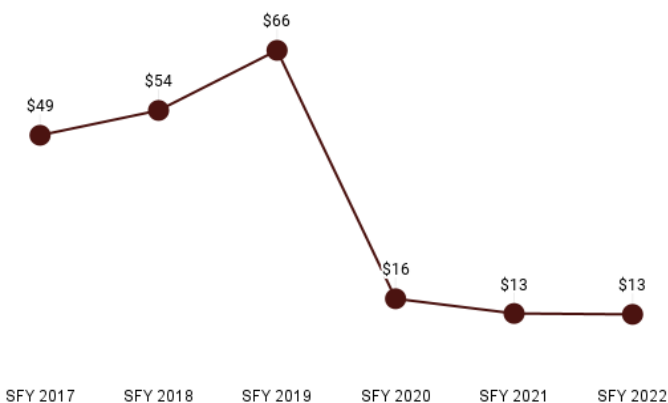
PER MEMBER PER MONTH

\$288

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

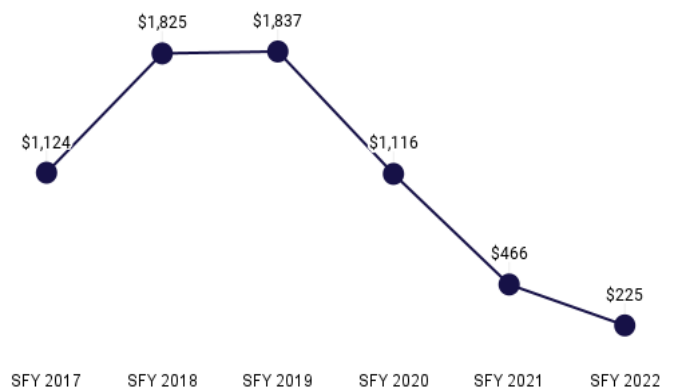


Table 63. Non-Citizens with Medical Emergencies Per Member Per Month Summary by Subgroup

Eligibility Category / Subgroup	Expenditures	1 Year % Change	Member Months	1 Year % Change	PMPM	1 Year % Change
Non-Citizens with Medical Emergencies						
Non-Citizens	\$814,834	14.3%	2,825	127.3%	\$288	-49.7%

Table 64. Non-Citizens with Medical Emergencies History by Subgroup

Eligibility Category	Eligibility Subgroup	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	5 Year % Change
Expenditures								
Non-Citizens with Medical Emergencies	Non-Citizens	\$963,898	\$830,693	\$827,777	\$548,077	\$712,723	\$814,834	-15.5%
Member Months								
Non-Citizens with Medical Emergencies	Non-Citizens	663	376	362	379	1,243	2,825	326.1%
Per Member Per Month								
Non-Citizens with Medical Emergencies	Non-Citizens	\$1,454	\$2,209	\$2,287	\$1,446	\$573	\$288	-80.2%

Table 65. Non-Citizens with Medical Emergencies Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$50.53	\$36.38	\$26.87	\$8.68	\$3.16	\$3.16
Ambulatory Surgical Center	--	--	--	--	--	--
Federally Qualified Health Center	--	\$2.11	\$2.02	--	\$0.17	\$0.17
Hospital Total	\$1,876.67	\$1,908.63	\$1,129.19	\$477.91	\$238.78	\$238.78
Inpatient	\$1,825.26	\$1,836.73	\$1,116.41	\$465.74	\$225.05	\$225.05
Outpatient	\$51.41	\$71.90	\$12.79	\$12.17	\$13.65	\$13.65
Other	--	--	--	--	\$0.08	\$0.08
Laboratory	--	\$0.09	\$0.32	--	\$0.12	\$0.12
Physician & Other Practitioner	\$282.09	\$337.83	\$287.36	\$86.80	\$46.10	\$46.10
Prescription Drug	--	--	--	--	--	--
Rural Health Clinic	--	\$1.64	\$0.35	--	\$0.11	\$0.11
Total	\$1,454	\$2,209	\$2,287	\$1,439	\$577	\$288

BREAST AND CERVICAL

EXPENDITURES

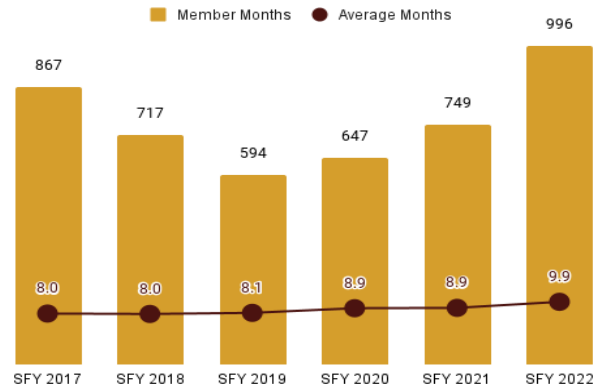
\$2.7 million

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS

996



MEMBERS

101

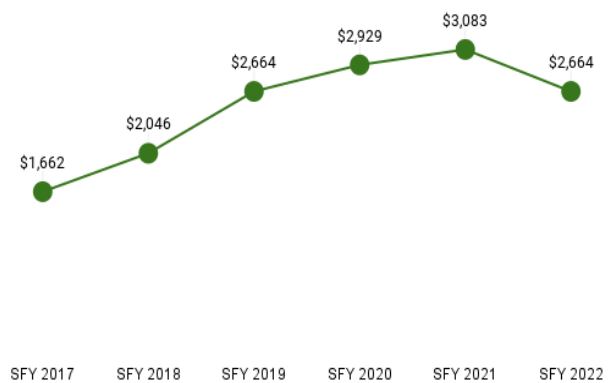
unique individuals enrolled during the state fiscal year



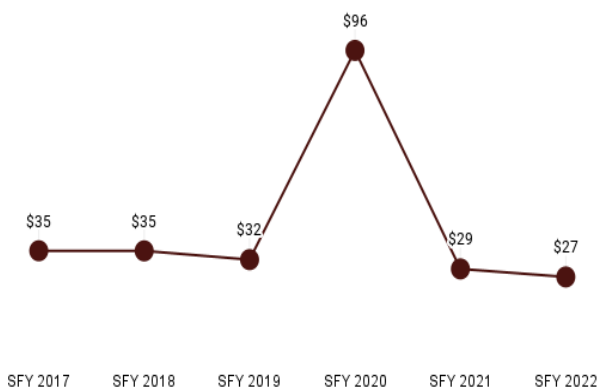
PER MEMBER PER MONTH

\$2,664

PMPM during the state fiscal year



EMERGENCY ROOM PMPM



HOSPITAL INPATIENT PMPM

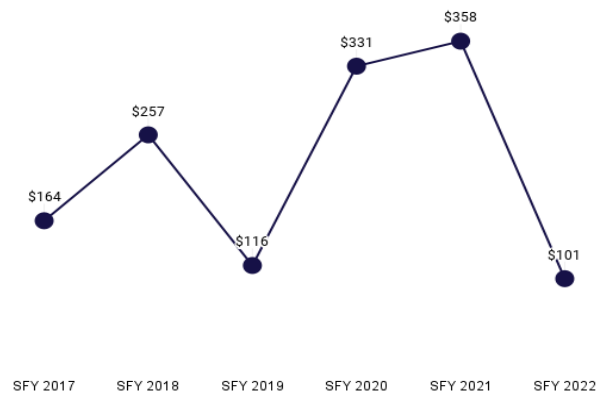


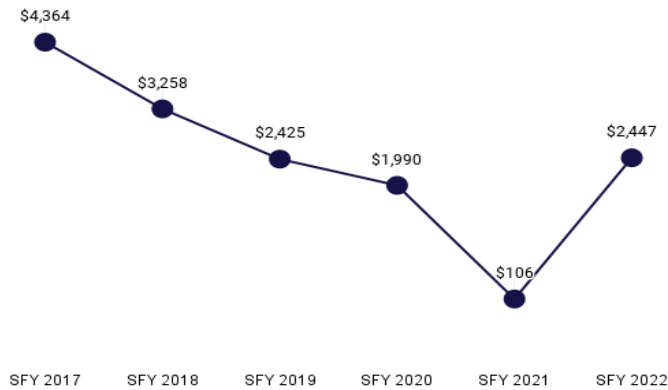
Table 66. Breast and Cervical Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Ambulance	\$14.86	\$9.92	\$0.54	\$1.94	\$4.65	\$2.07
Ambulatory Surgical Center	\$13.28	\$14.34	\$9.32	\$7.03	\$8.51	\$30.90
Behavioral Health	\$18.54	\$14.12	\$26.66	\$13.51	\$19.45	\$14.38
Dental	\$6.69	\$3.21	\$3.97	\$4.27	\$7.47	\$7.64
DME, Prosthetics/Orthotics/Supplies	\$12.40	\$27.83	\$22.77	\$18.92	\$21.01	\$9.15
Federally Qualified Health Center	\$21.34	\$23.39	\$31.34	\$18.72	\$27.40	\$28.92
Home Health	\$3.18	\$1.30	\$0.37	--	\$6.17	\$1.09
Hospice	\$4.66	\$3.60	\$16.33	--	--	\$2.00
Hospital Total	\$579.55	\$808.25	\$971.96	\$1,230.04	\$1,020.87	\$701.47
Inpatient	\$163.97	\$256.75	\$115.64	\$330.91	\$357.91	\$101.41
Outpatient	\$415.87	\$551.55	\$856.33	\$899.13	\$662.96	\$600.05
Other Hospital	-\$0.29	-\$0.05	--	--	--	--
Laboratory	\$16.71	\$16.86	\$6.77	\$3.82	\$9.91	\$21.90
Other	\$0.35	\$1.00	\$2.18	\$2.32	\$1.73	\$0.12
Physician & Other Practitioner	\$576.99	\$660.45	\$1,025.31	\$1,165.94	\$1,571.84	\$1,353.28
Prescription Drug	\$347.17	\$438.21	\$527.64	\$446.00	\$367.50	\$475.36
Public Health or Welfare	\$0.03	\$0.00	\$0.17	--	\$0.35	\$0.34
Public Health, Federal	\$41.37	\$20.15	\$15.49	\$10.58	\$8.88	\$8.30
Rural Health Clinic	\$0.51	\$0.21	\$2.11	\$5.45	\$5.37	\$5.66
Vision	\$3.93	\$2.67	\$1.23	\$0.41	\$2.32	\$1.61
Total	\$1,661.57	\$2,045.51	\$2,664.17	\$2,928.94	\$3,083.43	\$2,664.18

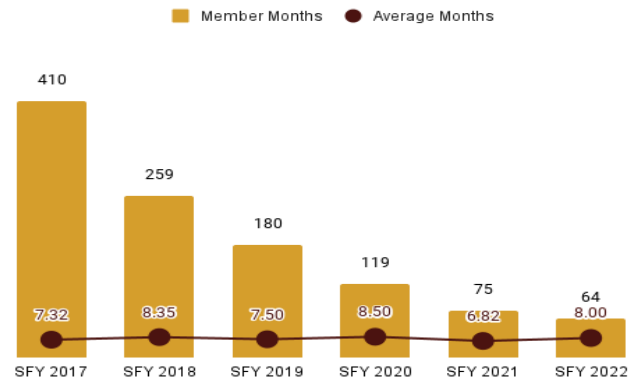
FAMILY PLANNING WAIVER

EXPENDITURES
\$2,447

paid to providers for services rendered during the state fiscal year



MEMBER MONTHS
64



PER MEMBER PER MONTH

\$38

PMPM during the state fiscal year

MEMBERS
< 10 unique individuals enrolled during the state fiscal year

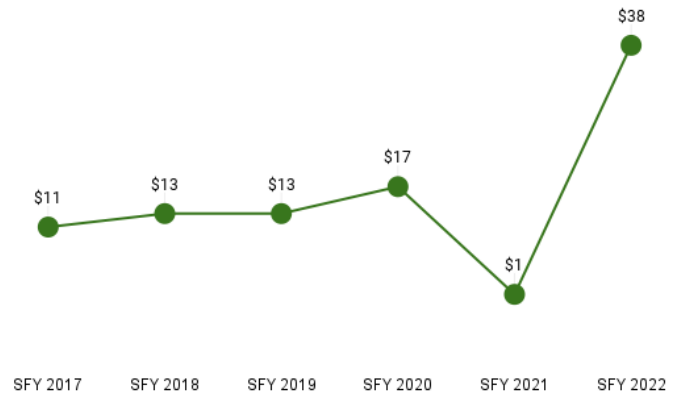


Table 67. Family Planning Waiver Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Federally Qualified Health Center	--	\$1.45	\$4.19	--	--	\$18.65
Laboratory	\$0.11	\$0.64	--	--	--	--
Other	\$0.36	--	\$0.55	--	--	--
Physician & Other Practitioner	\$6.11	\$4.76	\$5.69	\$2.56	\$0.03	\$19.57
Prescription Drug	\$4.07	\$5.73	\$2.30	\$14.16	\$1.38	--
Rural Health Clinic	--	--	\$0.75	--	--	--
Vision	--	--	--	--	--	--
Total	\$10.64	\$12.58	\$13.47	\$16.72	\$1.41	\$38.23

TUBERCULOSIS

Table 68. Tuberculosis Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Prescription Drug	\$13.65	--	--	--	--	--
Total	\$13.65	--	--	--	--	--

INCARCERATED MEDICAID MEMBER

Table 69. Incarcerated Medicaid Member Per Member Per Month History by Service Area

Service	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Hospital Total	--	--	--	--	--	\$2.85
Inpatient	--	--	--	--	--	\$2.85
Total	--	--	--	--	--	\$2.85

APPENDIX A: GLOSSARY AND ACRONYMS

GLOSSARY

Acquired Brain Injury (ABI)

Damage to the brain that occurs after birth and is not related to a congenital or degenerative disorder.

Ambulatory Surgical Center (ASC)

A free-standing facility, other than a physician's office or a hospital, where surgical and diagnostic services are provided on an ambulatory basis. The facility operates exclusively for the purpose of providing surgical services to patients not requiring hospitalization and in which the expected duration of services would not exceed 24 hours.

Centers for Medicare and Medicaid Services (CMS)

The government agency within the Department of Health and Human Services that administers the Medicare program, and works with states to administer Medicaid. In addition to Medicare and Medicaid, CMS oversees the Children's Health Insurance Program.

Cognos

Business Intelligence reporting tool used to extract data from the Medicaid Management Information System (MMIS).

Co-payment

A fixed amount of money paid by the enrolled member at the time of service.

Council on Accreditation

An organization that accredits healthcare organizations.

Current Procedural Terminology (CPT)

A code set developed by the American Medical Association for standardizing the terminology and coding used to report medical procedures and services. CPT codes are Level I of the HCPCS code set.

Department of Health and Human Services (HHS)

The United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.

Durable Medical Equipment (DME), Prosthetics, Orthotics, and Supplies

Medical equipment and other supplies that are intended to reduce an individual's physical disability and restore the individual to his or her functional level.

Dual Individual

For the purposes of this Report, an individual enrolled in Medicare and Medicaid who is eligible to receive Medicaid services.

Eligibility

Criteria that establish an individual as qualified to enroll in Medicaid. The federal government establishes minimum eligibility standards and requires states to cover certain population groups. States have the flexibility to cover other population groups within federal guidelines.

Enrollment

A unique count of members enrolled in Medicaid. Enrollment may be reported at a point in time (e.g., as of June 30) or over a time-frame (e.g., SFY 2015).

End-Stage Renal Disease (ESRD)

The complete, or almost complete, failure of the kidneys to function. The only treatments for ESRD are dialysis or kidney transplantation.

Expenditure

Funds or money spent to liquidate an expense regardless of when the service was provided or the expense was incurred.

Family Planning Waiver

A Section 1115 waiver that provides family planning services and birth control options to women who have received Medicaid benefits under the Pregnant Women program and who would otherwise lose Medicaid eligibility 60 days after giving birth. Sometimes referred to as the Pregnant by Choice Waiver.

Federal Fiscal Year (FFY)

The 12-month accounting period, for which the federal government plans its budget, usually runs from October 1 through September 30. The FFY is named for the end date of the year (e.g., FFY 2009 ends on September 30, 2009).

Federal Medical Assistance Percentage (FMAP)

The percentage rates used to determine the federal matching funds allocated to the Medicaid program. The FMAP is the portion of the Medicaid program that is paid by the federal government.

Federal Poverty Level (FPL)

The amount of income determined by the Department of Health and Human Services that is needed to provide a minimum for living necessities.

Federally Qualified Health Center (FQHC)

A designated health center in a medically under-served area that is eligible to receive cost-based Medicare and Medicaid reimbursement.

Home and Community-Based Services (HCBS)

Care provided in the home and community to individuals eligible for Medicaid. The HCBS programs help the elderly and disabled, intellectually disabled, developmentally disabled, and certain other disabled adults.

HCBS Acquired Brain Injury (ABI) Waiver

An HCBS waiver developed to assist adults from ages 21 to 65 with acquired brain injuries to receive training and support that will allow them to remain in their home communities and avoid institutionalization. Being replaced by the Comprehensive and Supports Waiver starting in SFY 2016.

HCBS Adult Developmental Disabilities (DD) Waiver

An HCBS waiver developed to assist adults with developmental disabilities to receive training and support that will allow them to remain in their home communities and avoid institutionalization. Replaced by the Comprehensive and Supports Waiver starting in April 2014.

HCBS Child Developmental Disabilities (DD) Waiver

A HCBS waiver developed to assist children under age 21 with developmental disabilities to receive training and support that will allow them to remain in their home communities and avoid institutionalization. Replaced by the Comprehensive and Supports Waiver starting in April 2014.

HCBS Children's Mental Health (CMH) Waiver

A HCBS waiver developed to allow youth with serious emotional disturbances who need mental health treatment to remain in their home communities.

HCBS Comprehensive Waiver

A HCBS waiver developed to replace the former DD waivers for people with a developmental disability.

HCBS Community Choices (CC) Waiver

A HCBS waiver that provides in-home services to participants ages 19 and older who require services equivalent to a nursing facility level of care.

HCBS Supports Waiver

A HCBS waiver developed to replace the former DD waivers for people with a developmental disability. Provides a more flexible service than the Comprehensive Waiver, but with a lower cap on benefits.

Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID)

A facility that primarily provides comprehensive and individualized healthcare and rehabilitation services above the level of custodial care to intellectually disabled individuals but does not provide the level of care available in a hospital or skilled nursing facility.

Medicaid

A joint federal-state program authorized by Title XIX of the Social Security Act that provides medical coverage for certain low-income and other categorically related individuals who meet eligibility requirements. A portion of the Medicaid program is funded by the federal government using the Federal Medical Assistance Percentage.

Medicaid Management Information System (MMIS)

An integrated group of procedures and computer processing operations (subsystems) that supports the Medicaid program operations. The functional areas of the MMIS include recipients, providers, claims processing, reference files, surveillance and utilization review, management and administration reporting, and third-party liability. The MMIS is certified by the Centers for Medicare and Medicaid Services.

Medicare

A federal program, authorized by Title XVIII of the Social Security Act, that provides medical coverage for individuals age 65 or older, individuals under age 65 with certain disabilities, and individuals of all ages with end-stage renal disease.

Per Member per Month

The monthly average cost for each enrolled member.

Pregnant by Choice Waiver

A Section 1115 waiver that provides family planning services and birth control options to women who have received Medicaid benefits under the Pregnant Women program and who would otherwise lose Medicaid eligibility 60 days after giving birth. For the purposes of this report, this is referred to as the Family Planning Waiver.

Prior Authorization (PA)

The requirement of a prescriber to obtain permission to prescribe a medication prior to prescribing it. In the context of a PBM plan, a program that requires physicians to obtain certification of medical necessity prior to drug dispensing.

Procedure Code

A HCPCS Level I or Level II code used to report the delivery of healthcare for reimbursement purposes.

Psychiatric Residential Treatment Facility (PRTF)

A facility that provides services to individuals who require extended care beyond acute psychiatric stabilization or extended psychiatric services. These services address long-standing behavioral disturbances, which are not usually responsive to shorter-term care.

Recipient

For the purposes of this Report, an individual enrolled in Medicaid who received Medicaid services.

Rural Health Clinic (RHC)

A designated health clinic in a medically under-served area that is non-urbanized as defined by the U.S. Bureau of Census and that is eligible to receive cost-based Medicare and Medicaid reimbursement.

Section 1115 Waiver

An experimental, pilot, or demonstration project authorized by Section 1115 of the Social Security Act. Section 1115 projects allow states the flexibility to test new or existing approaches to financing and delivering the Medicaid program.

State Fiscal Year (SFY)

The 12-month accounting period for which the state plans its budget, usually runs from July 1 through June 30. The SFY is named for the end date of the year (e.g., SFY 2022 ends on June 30, 2022).

State Funds

For the purposes of this Report, funds that do not receive any Medicaid Federal Medical Assistance Percentage.

Supplemental Security Income (SSI)

A federal income supplement program administered by the Social Security Administration. It is designed to assist the aged, blind, or disabled individuals who have little or no income and provides cash to meet basic needs for food, clothing, and shelter.

ACRONYMS

Table 70. Acronym Definitions

Acronym	Meaning
ABD	Aged, Blind, or Disabled
ABI	Acquired Brain Injury
ALF	Assisted Living Facility
AMB	Aged Medicare Beneficiary
ASC	Ambulatory Surgery Center
CME	Care Management Entity
CMHC	Community Mental Health Center
CMS	Centers for Medicare and Medicaid Services
CPT	Current Procedural Terminology
DD	Developmental Disabilities
DME	Durable Medical Equipment
EID	Employed Individuals with Disabilities
ESRD	End-Stage Renal Disease
FQHC	Federally Qualified Health Center
HCBS	Home and Community Based Services
ICF-IID	Intermediate Care Facility for Individuals with Intellectual Disabilities
ID	Intellectual Disabilities
IMD	Institution for Mental Disease (WY State Hospital)
LTC	Long-Term Care
MAGI	Modified Adjusted Gross Income
MMIS	Medicaid Management Information System
PACE	Program of All-Inclusive Care for the Elderly
PA	Prior Authorization
PMPM	Per Member Per Month
POS	Prosthetics, Orthotics, and Supplies
PRTF	Psychiatric Residential Treatment Facility
QMB	Qualified Medicare Beneficiaries
RHC	Rural Health Clinic
SFY	State Fiscal Year
SLMB	Specified Low-Income Medicare Beneficiaries
SSI	Supplemental Security Income
TB	Tuberculosis
WDH	Wyoming Department of Health
WES	Wyoming Eligibility System

APPENDIX B: DATA METHODOLOGY

Table 71. Data Definition and Methodology Summary

Data	Definition	Methodology
Expenditures	Claim payment processed through the MMIS	Extracted based on the first date of service on claims that were never voided/adjusted and final adjusted claims
Enrolled Member	Individual enrolled in Medicaid	Unduplicated count extracted from Wyoming Data Warehouse using the Cognos tool
Member Months	Total months individuals are enrolled in Medicaid	Extracted from Cognos at program code level based on enrollment status on the last day of each month
Per Member Per Month (PMPM)	Monthly average cost for each enrolled member	Equal to expenditures divided by member months
Eligibility Category	Defined population of enrolled members; consists of one or more Eligibility Sub-Groups	Based on eligibility program codes per Medicaid Eligibility Program Chart A
Eligibility Sub-Group	More specific designations for populations of enrolled members within the eligibility categories	Based on eligibility program codes per Medicaid Eligibility Program Chart A
Service Area	Type of service provided	Based on taxonomy of the provider paid for the service
Service Category	High-level grouping of service areas	Based on the service breakdown shown in the Services section of this report

Table 72. Medicaid Chart A Eligibility Program Codes

Eligibility Category	Eligibility Sub-Group	Program Codes	
Aged, Blind, Disabled Employed Individuals with Disabilities	Employed Individuals with Disabilities	S56	Emp Ind w/ Disabilities > 21
		S57	Emp Ind w/ Disabilities < 21
		S61	Continuous EID <19
Aged, Blind, Disabled Intellectual/ Developmental Disabilities and Acquired Brain Injury	Acquired Brain Injury	B01	Acq Brain Injury Wvr SSI
		B02	Acq Brain Injury Wvr 300%
		S60	Acq Brain Injury Wvr w/ EID <65
		W17	EID Support ABI Waiver Adult > 21
		W18	SSI Support ABI Waiver Adult > 21
		W19	SSI Support ABI Waiver Aged > 65
		W20	300% Support ABI Waiver Adult > 21
		W21	300% Support ABI Waiver Aged > 65
		W22	EID Comp ABI Waiver Adult > 21
		W23	SSI Comp ABI Waiver Adult > 21
		W24	SSI Comp ABI Waiver Aged > 65
		W25	300% Comp ABI Waiver Adult > 21
		W26	300% Comp ABI Waiver Aged > 65

Eligibility Category	Eligibility Sub-Group	Program Codes	
Aged, Blind, Disabled Intellectual/ Developmental Disabilities and Acquired Brain Injury (continued)	Adult ID/DD	S22	DD Waiver SSI > 65 (inactive)
		S23	DD Waiver 300% Cap > 65 (inactive)
		S44	DD Wvr SSI Between 21 & 65 Yrs (inactive)
		S45	DD Wvr 300% Between 21 & 65 Yrs (inactive)
		S59	DD Waiver w/ EID > 21 (inactive)
		W03	EID Comp Waiver Adult > 21
		W08	SSI Comp Waiver Adult > 21
		W10	SSI Comp Waiver Aged > 65
		W14	300% Comp Waiver Adult > 21
		W16	300% Comp Waiver Aged > 65
		W01	EID Support Waiver Adult > 21
		W05	SSI Support Waiver Adult > 21
		W07	SSI Support Waiver Aged > 65
		W11	300% Support Waiver Adult > 21
		W13	300% Support Waiver Aged > 65
	Child ID/DD	S58	DD Waiver w/ EID < 21 (inactive)
		S64	Continuous DD < 19 (inactive)
		S93	DD Waiver SSI <21 (inactive)
		S94	DD Waiver 300% Cap <21 (inactive)
		W04	EID Comp Waiver Child < 21
		W09	SSI Comp Waiver Child < 21
		W15	300% Comp Waiver Child < 21
		W02	EID Support Waiver Child < 21
		W06	SSI Support Waiver Child < 21
		W12	300% Support Waiver Child < 21
	ICF-ID (WY Life Resource Center)	S03	ICF-MR SSI > 65
		S04	ICF-MR 300% Cap > 65
		S05	ICF-MR SSI < 65
		S06	ICF-MR 300% Cap < 65
Aged, Blind, Disabled Institution	Hospital	S14	Institutional (Hosp) Aged - Inactive
		S15	Inpatient Hospital 300% Cap > 65
		S34	Institutional (Hosp) Disabled - Inactive
		S35	Inpatient Hospital 300% Cap < 65
	IMD (WY State Hospital - Age 65+)	S13	Inpat-Psych > 65

Eligibility Category	Eligibility Sub-Group	Program Codes	
Aged, Blind, Disabled, Long-Term Care (continued)	Nursing Home	N97	NH Temp Services
		S01	NH-SSI & Ssa Blend >65
		S02	NH-SSI & Ssa Blend <65
		S10	Nursing Home SSI >65
		S11	Nursing Home 300% Cap >65
		S17	Retro Medicaid-"Pr" Aged (inactive)
		S18	Retro Medicaid-"Rm" Aged (inactive)
		S30	Retro Medicaid-"Pr" Disabled (inactive)
		S32	Nursing Home SSI <65
		S33	Nursing Home 300% Cap <65
		S54	Medicaid Only-No Rm & Brd >65
		S55	Medicaid Only-No Rm & Brd <65
		S90	Retro Medicaid-"Rm" Disabled
	PACE	P11	PACE < 65
		P12	PCMR < 65
		P13	PACE SSI Disabled < 65
		P14	PACE Mcare SSI Disabled < 65
		P15	PACE NF < 65
		P16	PACE NF SSI Disabled < 65
		P17	PACE NF Mcare Disabled < 65
		P18	PACE NF Mcare SSI Disable < 65
		P21	PACE > 65
		P22	PCMR > 65
		P23	PACE SSI Aged > 65
		P24	PACE Mcare SSI Aged > 65
		P25	PACE NF > 65
		P26	PACE NF SSI Aged > 65
		P27	PACE NF Mcare Aged > 65
		P28	PACE NF Mcare SSI Aged > 65

Eligibility Category	Eligibility Sub-Group	Program Codes	
Aged, Blind, Disabled SSI & SSI Related	SSI & SSI Related	S12	SSI Eligible >65
		S20	Blind SSI - Receiving Payment
		S21	Blind SSI - Not Receiving Pymt
		S31	SSI Eligible <65
		S36	Disabled Adult Child (DAC)
		S37	Goldberg-Kelly
		S39	1619 Disabled
		S40	Aptd Essent. Person Med Only (inactive)
		S48	Zebley >21
		S49	Zebley <21
		S92	Widow-Widowers SDX
		S98	Pseudo SSI Aged (inactive)
		S99	Pseudo SSI Disabled (inactive)
		S09	SSI-Disabled Child Definition
		S16	Pickle >65
		S38	Pickle <65
		S42	Widow-Widowers
		S43	Qual Disabled Working Ind
Aged, Blind, Disabled, Long-Term Care	Community Choices Waiver	R01	Asst Living Fac Wvr SSI < 65
		R02	Asst Living Fac Wvr 300% < 65
		R03	Asst Living Fac Wvr SSI > 65
		R04	Asst Living Fac Wvr 300% > 65
		N98	WLTC Temp Services
		S24	LTC Waiver SSI > 65
		S25	LTC Waiver 300% Cap > 65
		S46	LTC Waiver SSI < 65
		S47	LTC Waiver 300% Cap < 65
	Hospice	S50	Hospice Care > 65
		S51	Hospice Care < 65
Adults	Family-Care Adults	A01	Family Care Past 5yr Limit >21 (inactive)
		A03	Family Care >21
		A68	12 Mo Extended Med >21
		A69	2nd-6mos. Trans Mcaid Adult (inactive)
		A75	Institutional (AFDC) Adult (inactive)
		A77	AFDC-Up Unemployed Parent Ad (inactive)
		A79	Retro Medicaid-"Rm" Adult (inactive)
		M11	Family MAGI PE >21
		A80	Refugee Adult (inactive)
		A82	Alien: 245 (IRCA) Adult (inactive)
		A83	Alien: 210 (IRCA) Adult (inactive)
		A70	AFDC Medicaid - Adult (inactive)
		A76	4 Mo Extended Med >21
		A78	Retro Medicaid-"Pr" Adult (inactive)
		M04	Family MAGI >21
	Former Foster Care	M08	Former Foster Youth > 21
		M18	Former Foster Youth PE > 21
	Newly Eligible Adults	M01	Adult MAGI > 21
		M13	Adult MAGI PE > 21

Eligibility Category	Eligibility Sub-Group	Program Codes	
Children	Children	A02	Family Care Past 5yr Limit <21
		A04	Family Care <21
		A50	AFDC Medicaid (inactive)
		A54	2nd-6mos. Trans Mcaid Child (inactive)
		A56	Alien: 245 (IRCA) Child (inactive)
		A57	Baby <1 Yr, Mother SSI Elig (inactive)
		A59	Retro Medicaid-"Pr" Child (inactive)
		A60	4 Mo Extended Med <21
		A61	Institutional (AF-IV-E) (inactive)
		A62	Retro Medicaid-"Rm" Child (inactive)
		A63	Refugee Child (inactive)
		A64	Alien: 245 (IRCA) Child (inactive)
		A58	Child 6 Through 18 Yrs
		A65	AFDC-Up Unemployed Parent Ch (inactive)
		A67	12 Mo Extended Med <21
		A87	16+ Not In School AF HH (inactive)
		K03	Kidcare to Child Magi
		M02	Adult MAGI <21
		M03	Child MAGI
		M05	Family MAGI <21
		M10	Children's PE
		M12	Family MAGI PE <21
		M14	Adult MAGI PE <21
		S62	Continuous SSI Eligible <19
		A55	Child 0 Through 5 Yrs
	Children's Mental Health Waiver	S65	Cont Childrns Ment Health Wvr < 19
		S95	Childrens Ment Hlth Wvr SSI < 21
		S96	Childrens Ment Hlth Wvr 300% <21
	Foster Care	A51	IV-E Foster Care
		A52	IV-E Adoption
		A85	Foster Care Title 19
		A86	Subsidized Adoption Title 19
		A88	Aging Out Foster Care
		A97	Foster Care 0 Through 5
		A98	Foster Care 6 Through 18
		M09	Former Foster Youth <21
		M17	Former Foster Youth PE <21
		S63	Continuous Foster Care <19
	Newborn	A53	Newborn

Eligibility Category	Eligibility Sub-Group	Program Codes	
Medicare Savings Programs	Qualified Medicare Beneficiary	Q17	QMB > 65
		Q41	QMB < 65
	Specified Low Income Medicare Beneficiary	Q94	SLMB 2 > 65
		Q95	SLMB 2 < 65
		Q96	SLMB 1 > 65
		Q97	SLMB 1 < 65
	Part B - Partial Aged Medicare Beneficiary	Q98	Part B-Partial Aged - Inactive
		Q99	Part B-Partial Disabled - Inactive
Non-Citizens with Medical Emergencies	Non-Citizens	A81	Emergency Svc < 21
		A84	Emergency Svc > 21
Pregnant Women	Pregnant Women	A71	Pregnant Woman < 21
		A72	Pregnant Woman > 21
		A73	Qualified Pregnant Woman > 21
		A74	Qualified Pregnant Woman < 21
		M06	Pregnancy MAGI > 21
		M07	Pregnancy MAGI < 21
		A19	Presumptive Eligibility
Special Groups	Breast and Cervical	B03	Breast & Cervical > 21
		B04	Breast & Cervical < 21
		M15	Breast & Cervical PE > 21
		M16	Breast & Cervical PE < 21
	Tuberculosis	S52	Tuberculosis (Tb) > 65
		S53	Tuberculosis (Tb) < 65
	Family Planning Waiver	A20	Pregnant By Choice

Table 72.Data Parameters by Service Area

Service Area	Pay-to-Provider Taxonomy		Other Parameters
Ambulance	341600000X	Ambulance	n/a
Ambulatory Surgery Center	261QA1903X	Ambulatory Surgery Center	n/a
Behavioral Health	101Y00000X 101YA0400X 101YP2500X 103G00000X 103K00000X 103TC0700X 1041C0700X 106E00000X 106H00000X 106S00000X 163W00000X 164W00000X 171M00000X 172V00000X 2084P0800X 261QM0801X 261QR0405X 364SP0808X	Professional Counselor; Certified Mental Health Worker Addictions Therapist/Practitioner Professional Counselor Neuropsychologist Behavior Analyst Clinical Psychologist Social Worker Assistant Behavior Analyst Marriage and Family Therapist Behavior Technician RN LPN Case Worker Community Health Worker; Peer Specialist; Certified Addictions Practitioner Assistant Psychiatrist Mental Health - including Community Mental Health Center Rehabilitation, Substance Use Disorder NP, APN Psychiatric/Mental Health	n/a
Care Management Entity	251S00000X	CHPR CME	n/a
Clinic/Center	261Q00000X	Clinic/Center	n/a
Dental	122300000X 1223D0001X 1223E0200X 1223G0001X 1223P0221X 1223P0300X 1223S0112X 1223X0400X	Dentist Dental Public Health Endodontics General Practice Dentist Pedodontics Periodontics Surgery, Oral and Maxillofacial Orthodontics	n/a
Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	332B00000X 332S00000X 335E00000X	DME Hearing Aid Equipment POS	n/a
End-Stage Renal Disease	261QE0700X	End-Stage Renal Disease	n/a
Federally Qualified Health Center	261QF0400X	Federally Qualified Health Center	n/a
Home Health	251E00000X	Home Health	n/a
Hospice	251G00000X	Hospice Care, Community Based	n/a
Hospital Total	261QR0400X 282N00000X 282NR1301X 283Q00000X 283X00000X	Rehabilitation General Acute Care Hospital General Acute Care Hospital - Rural Psychiatric Hospital Rehabilitation Hospital	n/a
Hospital Inpatient	282N00000X 282NR1301X 283Q00000X 283X00000X	General Acute Care Hospital General Acute Care Hospital - Rural Psychiatric Hospital Rehabilitation Hospital	Claim Type: I, X
Hospital Outpatient	261QR0400X 282N00000X 282NR1301X 283X00000X	Rehabilitation General Acute Care Hospital General Acute Care Hospital - Rural Rehabilitation Hospital	Claim Type: O, V
Laboratory	291U00000X	Clinical Medical Laboratory	n/a
Nursing Facility	275N00000X 314000000X	Medicare Defined Swing Bed Skilled Nursing Facility	n/a
Program for All-Inclusive Care of Elderly (PACE)	251T00000X	PACE Organization	n/a

Service Area	Pay-to-Provider Taxonomy		Other Parameters
Physician and Other Practitioner	All Taxonomies starting with '20' EXCLUDING 2084P0800X 363A00000X 225X00000X 225100000X 213E00000X 363L00000X 363LA2200X 363LF0000X 363LG0600X 363LX0001X 363LP0200X 367A00000X 367500000X 231H00000X 235Z00000X	Psychiatrists Physician Assistant Occupational Therapist Physical Therapist Podiatrist Nurse Practitioner Nurse Midwife Nurse Anesthetist Audiologist Speech-Language Pathologist	n/a
Prescription Drug	333600000X	Pharmacy	Claim Type: P
Psychiatric Residential Treatment Facility	323P00000X	Psychiatric Residential Treatment Facility	Claim Types: I, X
Public Health, Federal	261QP0904X	Public Health, Federal	n/a
Public Health or Welfare	251K00000X	Public Health or Welfare	n/a
Rural Health Clinic	261QR1300X	Rural Health Clinic	n/a
Vision	152W00000X 156FX1800X	Optometrist Optician	n/a
Waiver - Total	251B00000X 251C00000X 251X00000X	Case Management Day Training, DD PACE PPL	Claim Type: W, G Recipient Program Codes: B01, B02, S60, R01, R02, R03, R04, S65, S95, S96, S22, S23, S44, S45, S59, S58, S64, S93, S94, N98, S24, S25, S46, S47, W03, W04, W08, W09, W10, W14, W15, W16, W01, W02, W05, W06, W07, W11, W12, W13, W17, W18, W19, W20, W21, W22, W23, W24, W25, W26
Acquired Brain Injury Waiver	251C00000X 251X00000X	Day Training, DD PACE PPL	Claim Type: W, G Recipient Program Codes: B01, B02, S60
Adult ID/DD Waiver	251C00000X 251X00000X	Day Training, DD PACE PPL	Claim Type: W, G Recipient Program Codes: S22, S23, S44, S45, S59
Child ID/DD Waiver	251C00000X 251X00000X	Day Training, DD PACE PPL	Claim Type: W, G Recipient Program Codes: S58, S93, S94, S64
Children's Mental Health Waiver	251C00000X	Day Training, DD	Claim Type: W, G Recipient Program Codes: S95, S96, S65
Comprehensive Waiver	251C00000X 251X00000X	Day Training, DD PACE PPL	Claim Type: W, G Recipient Program Codes: W03, W04, W08, W09, W10, W14, W15, W16, W22, W23, W24, W25, W26

Service Area	Pay-to-Provider Taxonomy		Other Parameters
Community Choices Waiver	251B00000X	Case Management	Claim Type: W, G Recipient Program Codes: S24, S25, S46, S47, N98, R01, R02, R03, R04
Supports Waiver	251C00000X 251X00000X	Day Training, DD PACE PPL	Claim Type: W, G Recipient Program Codes: W01, W02, W05, W06, W07, W11, W12, W13, W17, W18, W19, W20, W21