



Appendix 7
County Profile

Prepared by
Ohio Department of Job and Family Services

OHIO MEDICAID REPORT

**Update
April
2002**

**Prepared by the
Office of Ohio Health Plans (OHP)**

**Bob Taft
Governor**

**Tom Hayes
Director**



Foreword

This April 2002 Update of the April 2001 Ohio Medicaid Report is designed to augment the materials in the latter document, but it also can be used as a stand-alone county-by-county statistical report on the Medicaid program. Following a format similar to that used in the July 2000 document, this *Update* primarily contains state fiscal year (FY) 2000 data on each county in the state. It also contains state summary statistics to enable the reader to compare a county with the state average.

The April 2001 Ohio Medicaid Report is much larger than this current document (2002-Update), and contains, in addition to a wider-range of county-by-county FY 1999 data, a thorough overview of the Ohio Medicaid's programs' various components, plus a legislative history of Medicaid and a glossary of Medicaid terms. The full report is completed biannually.

Some additional Ohio-wide comparison data for FY 1999 and FY 2000 are presented in the table below.

	<u>FY 1999</u>	<u>FY 2000</u>
<i>Number of Ohioans covered by Medicaid:</i>	1,387,581	1,409,705
<i>Percentage of Medicaid eligibles who are Aged, Blind, or Disabled (ABD):</i>	28%	29%
<i>Percentage of Medicaid total spending for ABD individuals:</i>	80% (about \$12,894 /yr. /eligible)	80% (about \$13,796 /yr. /eligible)
<i>Percentage of Medicaid eligibles who are Covered Families and Children (CFC):</i>	72%	71%
<i>Percentage of Medicaid total spending for CFC individuals:</i>	20% (about \$1,243 /yr./ eligible)	20% (about \$1,364 /yr./ eligible)
<i>Total federal and state dollars spent for Ohio Medicaid (including Hospital Care Assurance Program, but not administration). Dollars reflect claims paid for services delivered in SFY 2000:</i>	\$6,988,518,930	\$7,638,797,112

	<u>FY 1999</u>	<u>FY 2000</u>
<i>Medicaid as a percentage of all state/federal Ohio Department of Job and Family Services funding:</i>	77%	77%
<i>Total Medicaid dollars as a percentage of Ohio's total state/federal expenditures:</i>	20%	23%
<i>Total Medicaid dollars as a percentage of all state GRF expenditures:</i>	15%	13%
<i>Amount of Medicaid funds given directly to Medicaid recipients:</i>	None	None
<i>Payments of Medicaid dollars directly to hospitals (including outpatient payments, Hospital Care Assurance Program funds and Medicare Cost Sharing):</i>	\$1,641,272,842	\$1,730,020,242
<i>Payments of Medicaid dollars to nursing facilities:</i>	\$1,906,921,076	\$2,076,124,597
<i>Payments of Medicaid dollars to public and private Intermediate Care Facilities for the Mentally Retarded</i>	\$542,411,809	\$550,180,474

While these figures do not necessarily suggest it, many changes continue to take place in the Ohio Medicaid Program. Since January 1998 there have been two expansions to the Covered Families and Children program. These two expansions (January 1998, and July 2000) have added an additional 85,500 Medicaid consumers as of March 2002. Please look for this report and other OHP reports that are available on the Office of Ohio Health Plans web site, <http://www.state.oh.us/odjfs/ohp>.

Please enjoy this Update: Ohio Medicaid Report - Update April 2002.

Barbara Coulter Edwards
Deputy Director
Office of Ohio Health Plans
Ohio Department of Job and Family Services

**OHIO MEDICAID REPORT-SFY 2000
THIRD EDITION: UPDATE - APRIL 2002**

State of Ohio

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	603,944	262,997	43.5%
5-18	2,448,637	511,715	20.9%
19-44	4,217,512	361,900	8.6%
45-64	2,575,290	123,205	4.8%
65-84	1,330,961	106,064	8.0%
85+	176,796	43,825	24.8%
Total	11,353,140	1,409,705	12.4%
Male	5,512,262	571,147	10.4%
Female	5,840,878	838,558	14.4%
White	9,674,842	888,291	9.2%
Black	1,301,307	458,490	35.2%
Hispanic	217,123	37,794	17.4%
Asian/Pacific Islander	135,382	6,046	4.5%
Native American	24,486	1,416	5.8%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	31,318	29,404	194
1	29,599	27,696	644
2-4	77,370	63,663	3,108
5-18	264,706	214,872	32,137
19-44	194,728	58,873	108,299
45-64	11,561	140	111,504
65-84	54	2	106,008
85+	5	2	43,818
Total Eligibles	609,027	394,966	405,712
Total Expenditures	\$824,552,913	\$544,805,816	\$5,597,004,209

Expenditures by Category of Service

Category of Service	Recipients	Total Expenditures
Nursing Facility (NF)	80,060	\$2,076,124,597
ICF-MR	8,218	\$550,180,474
Hospital Inpatient (Inpatient)	127,185	\$891,111,107
Hospital Outpatient (Outpatient)	498,310	\$290,392,013
Physician	646,628	\$312,718,279
Prescription Drugs (Drugs)	761,385	\$871,881,374
HMO	371,080	\$384,609,870
Dental	262,204	\$49,877,822
Community Mental Health (CMH)	119,587	\$259,352,901
Community Alcohol and Drug (CAD)	20,141	\$29,971,254
Habilitation	95,997	\$250,461,832
Federally Qualified Health Centers	53,286	\$15,486,167
Clinic	87,919	\$33,810,378
All Other Categories (Other)	502,714	\$733,830,923
Medicare Cost Sharing (MCS)	177,022	\$340,470,998
Total*	1,238,539	\$7,090,279,990

The reported data was generated by the claims system; therefore, accounting adjustments such as prescription drug rebates are not reflected.

This data is State Fiscal Year 2000 except: Total Population is July 2000

HMO Expenditures include all Medicaid covered services. All data is for county in which recipients reside.

Race data will not add up to total eligibles because of high volume of "other" in Medicaid eligibility data, which is not counted here.

*Total includes Part A and B premium payments

**Per Eligible Per Month Expenditures, Ohio Health Plans
By Aid Category, Delivery System, and Category of Service,
State Fiscal Year 2000**

Category of Service	Aid Category and Delivery System								
	Aged, Blind or Disabled							Covered Families and Children	
	ICF-MR Home		Nursing Facility	Living in Community	Waiver Programs			HMO	Fee For Service
	Private	Public			ODHS	PASSPORT	Mental Retardation		
Nursing Home	\$5.21	\$0.53	\$2,902.23	\$5.36	\$7.69	\$1.86	\$0.52	\$0.00	\$0.00
ICF/MR	\$5,238.70	\$6,954.67	\$61.09	\$0.03	(\$0.01)	\$0.00	\$0.15	\$0.00	\$0.00
Inpatient	\$59.45	\$25.42	\$108.20	\$126.91	\$244.61	\$35.19	\$24.64	\$0.00	\$57.90
Hospital Outpatient	\$19.15	\$16.70	\$11.24	\$44.02	\$64.91	\$8.67	\$12.92	\$0.00	\$23.57
Physician	\$16.76	\$9.13	\$12.78	\$40.44	\$201.98	\$14.65	\$13.01	\$0.00	\$26.33
Federally Qualified Health Center	\$0.03	\$0.00	\$0.14	\$1.16	\$0.79	\$0.17	\$0.24	\$0.00	\$1.93
Clinic	\$0.47	\$0.30	\$2.37	\$6.21	\$12.38	\$4.95	\$2.73	\$0.00	\$1.82
Dental	\$6.45	\$4.30	\$4.80	\$5.43	\$4.41	\$3.33	\$7.31	\$0.00	\$4.89
Drug	\$278.59	\$171.68	\$267.51	\$163.42	\$292.27	\$234.61	\$224.97	\$0.00	\$16.26
HMO	\$0.00	\$0.00	\$0.00	\$0.01	\$0.04	\$0.00	\$0.01	\$127.52	\$0.08
Mental Health Services									
Community Mental Health	\$3.98	\$1.19	\$6.07	\$49.66	\$16.54	\$8.69	\$13.04	\$8.64 (1)	\$13.26
Inpatient	\$6.28	\$2.61	\$4.92	\$15.60	\$4.47	\$0.77	\$7.47	\$0.00	\$3.01
Outpatient	\$0.14	\$0.19	\$0.05	\$1.03	\$0.81	\$0.10	\$0.51	\$0.00	\$0.34
Clinic	\$0.02	\$0.01	\$0.00	\$0.19	\$0.07	\$0.00	\$0.24	\$0.00	\$0.18
Physician/Psychiatrist/Psychologist	\$0.32	\$0.14	\$0.19	\$2.40	\$1.29	\$0.21	\$2.05	\$0.00	\$0.86
Alcohol and Drug Addiction Services									
Community Alcohol and Drug	\$0.04	\$0.00	\$0.11	\$3.10	\$0.64	\$0.11	\$0.05	\$1.83 (1)	\$2.73
Alc/Drug Inpatient	\$0.09	\$0.00	\$0.28	\$1.55	\$0.22	\$0.00	\$0.00	\$0.00	\$0.15
Alc/Drug Outpatient	\$0.00	\$0.00	\$0.01	\$0.25	\$0.06	\$0.00	\$0.02	\$0.00	\$0.07
ODMR/DD Habilitation	\$922.65	\$750.92	\$13.44	\$15.86	\$145.56	\$1.08	\$947.50	\$4.68 (1)	\$5.36
Community Based Waiver Services	\$1.41	\$1.88	\$2.39	\$0.47	\$1,560.63	\$652.95	\$2,833.57	\$0.00	\$0.00
Other Services									
Laboratory	\$3.84	\$1.88	\$1.60	\$1.14	\$1.63	\$0.33	\$0.83	\$0.00	\$0.61
Medical Transportation	\$15.23	\$4.53	\$38.68	\$9.32	\$82.72	\$47.16	\$8.38	\$0.00	\$0.94
Vision	\$1.63	\$1.32	\$1.36	\$1.32	\$0.84	\$0.97	\$1.50	\$0.00	\$0.96
Hospice	\$0.31	\$0.00	\$0.07	\$2.52	\$849.98	\$0.03	\$11.94	\$0.00	\$1.59
Home Health Services	\$0.07	\$0.10	\$0.77	\$8.56	\$120.39	\$23.00	\$24.08	\$0.00	\$0.75
Private Duty Nursing	\$0.62	\$0.47	\$9.45	\$7.37	\$1.16	\$0.63	\$0.34	\$0.00	\$0.03
Chiropractor/Podiatrist/Optometrlist	\$1.58	\$0.93	\$0.46	\$1.42	\$1.31	\$0.51	\$1.08	\$0.00	\$0.48
Durable Medical Equipment	\$35.70	\$18.23	\$21.89	\$12.06	\$157.72	\$34.81	\$43.13	\$0.00	\$1.72
Medicare Cost Sharing	\$50.07	\$39.23	\$131.92	\$51.59	\$95.82	\$158.71	\$40.55	\$0.00	\$0.08
All Services	\$6,668.80	\$8,006.37	\$3,604.02	\$578.39	\$3,870.93	\$1,233.50	\$4,222.79	\$142.67 (2)	\$165.87
Average Monthly Number of Eligible Persons	4,525	2,666	58,844	250,170	6,761	15,937	5,313	253,079	485,788
Percent of All Average Monthly Medicaid Eligibles	0.42%	0.25%	5.43%	23.10%	0.62%	1.47%	0.49%	23.37%	44.85%

(1) Services are funded and delivered to persons in HMOs through other state departments (outside of HMO contracts).

(2) HMO and fee-for-service expenditures per month are not valid for rate comparison purposes. HMO contracts are only in urban counties where delivery system costs are historically higher. Additionally, demographic characteristics of HMO and fee-for-service eligibles, including age gender and pregnancy cause differences in per eligible expenditures.

**OHIO MEDICAID REPORT-SFY 2000
THIRD EDITION: UPDATE - APRIL 2002**

Portage County

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	7,438	2,499	33.6%
5-18	33,166	4,323	13.0%
19-44	60,828	3,197	5.3%
45-64	33,941	885	2.6%
65-84	15,012	766	5.1%
85+	1,676	369	22.0%
Total	152,061	12,039	7.9%
Male	74,260	4,775	6.4%
Female	77,801	7,264	9.3%
White	144,585	10,585	7.3%
Black	4,840	1,270	26.2%
Hispanic	1,093	39	3.6%
Asian/Pacific Islander	1,266	34	2.7%
Native American	277	3	1.1%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	184	390	3
1	178	410	7
2-4	474	813	40
5-18	1,491	2,566	266
19-44	1,571	734	892
45-64	104	1	780
65-84	1	0	765
85+	0	1	368
Total Eligibles	4,003	4,915	3,121
Total Expenditures	\$6,376,496	\$4,701,290	\$55,430,685

Expenditures by Category of Service

Category of Service	Recipients	Total
Nursing Facility (NF)	637	\$15,464,031
ICF-MR	184	\$11,667,245
Hospital Inpatient (Inpatient)	1,444	\$10,229,947
Hospital Outpatient (Outpatient)	5,455	\$3,178,150
Physician	7,438	\$3,918,788
Prescription Drugs (Drugs)	8,137	\$8,027,425
HMO	0	\$0
Dental	3,810	\$779,554
Community Mental Health (CMH)	1,343	\$3,414,682
Community Alcohol and Drug (CAD)	163	\$174,170
Habilitation	594	\$2,516,130
Federally Qualified Health Centers	30	\$6,176
Clinic	1,142	\$202,820
All Other Categories (Other)	5,210	\$6,605,257
Medicare Cost Sharing (MCS)	1,342	\$2,803,155
Total	10,385	\$68,987,530

Preble County

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	2,146	707	32.9%
5-18	9,328	1,272	13.6%
19-44	14,945	914	6.1%
45-64	10,345	311	3.0%
65-84	5,032	329	6.5%
85+	541	115	21.3%
Total	42,337	3,648	8.6%
Male	21,090	1,546	7.3%
Female	21,247	2,102	9.9%
White	41,811	3,582	8.6%
Black	136	25	18.4%
Hispanic	181	2	1.1%
Asian/Pacific Islander	118	5	4.2%
Native American	91	3	1.1%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	31	134	1
1	0	140	2
2-4	98	269	5
5-18	423	798	51
19-44	374	263	277
45-64	27	0	284
65-84	0	0	329
85+	0	0	115
Total Eligibles	980	1,604	1,064
Total Expenditures	\$1,458,647	\$1,305,471	\$16,542,217

Expenditures by Category of Service

Category of Service	Recipients	Total
Nursing Facility (NF)	219	\$4,883,969
ICF-MR	86	\$4,252,744
Hospital Inpatient (Inpatient)	404	\$2,205,430
Hospital Outpatient (Outpatient)	1,229	\$753,552
Physician	2,082	\$882,819
Prescription Drugs (Drugs)	2,463	\$2,431,394
HMO	0	\$0
Dental	802	\$158,474
Community Mental Health (CMH)	345	\$436,333
Community Alcohol and Drug (CAD)	74	\$116,665
Habilitation	219	\$721,043
Federally Qualified Health Centers	38	\$12,676
Clinic	334	\$67,302
All Other Categories (Other)	1,606	\$2,201,538
Medicare Cost Sharing (MCS)	540	\$1,002,495
Total	2,998	\$20,126,432

The reported data was generated by the claims system; therefore, accounting adjustments such as prescription drug rebates are not reflected.

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Race data will not add up to total eligibles because of high volume of "other" in Medicaid eligibility data, which is not counted here.

*Total includes Part A and B premium payments

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Shelby County

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	2,911	886	30.4%
5-18	11,325	1,332	11.8%
19-44	17,421	994	5.7%
45-64	10,404	302	2.9%
65-84	5,049	296	5.9%
85+	800	168	21.0%
Total	47,910	3,978	8.3%
Male	23,786	1,611	6.8%
Female	24,124	2,367	9.8%
White	46,244	3,699	8.0%
Black	714	191	26.8%
Hispanic	383	51	13.3%
Asian/Pacific Islander	489	5	1.0%
Native American	80	2	2.5%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	53	209	0
1	49	158	1
2-4	120	290	6
5-18	388	881	63
19-44	382	316	296
45-64	22	1	279
65-84	0	0	296
85+	0	0	168
Total Eligibles	1,014	1,855	1,109
Total Expenditures	\$1,536,121	\$1,747,362	\$14,353,479

Expenditures by Category of Service

Category of Service	Recipients	Total
Nursing Facility (NF)	297	\$7,091,388
ICF-MR	11	\$626,847
Hospital Inpatient (Inpatient)	614	\$2,424,361
Hospital Outpatient (Outpatient)	1,818	\$1,045,930
Physician	2,473	\$1,201,453
Prescription Drugs (Drugs)	2,719	\$2,286,441
HMO	0	\$0
Dental	676	\$148,182
Community Mental Health (CMH)	317	\$339,053
Community Alcohol and Drug (CAD)	58	\$38,033
Habilitation	233	\$477,827
Federally Qualified Health Centers	10	\$3,702
Clinic	415	\$74,925
All Other Categories (Other)	1,953	\$1,828,695
Medicare Cost Sharing (MCS)	552	\$910,121
Total	3,413	\$18,496,959

Stark County

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	19,334	8,596	44.5%
5-18	79,573	15,962	20.1%
19-44	131,486	11,618	8.8%
45-64	90,651	3,775	4.2%
65-84	50,259	3,653	7.3%
85+	6,795	1,722	25.3%
Total	378,098	45,326	12.0%
Male	181,588	18,140	10.0%
Female	196,510	27,186	13.8%
White	344,351	33,043	9.6%
Black	27,219	11,237	41.3%
Hispanic	3,492	262	7.5%
Asian/Pacific Islander	2,116	60	2.8%
Native American	920	76	2.5%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	1,020	1,009	3
1	0	845	17
2-4	2,704	1,912	65
5-18	8,596	6,569	797
19-44	6,731	1,687	3,200
45-64	366	5	3,404
65-84	1	0	3,652
85+	0	0	1,722
Total Eligibles	20,439	12,027	12,860
Total Expenditures	\$26,394,545	\$10,488,100	\$188,082,451

Expenditures by Category of Service

Category of Service	Recipients	Total
Nursing Facility (NF)	3,195	\$79,396,681
ICF-MR	313	\$16,776,504
Hospital Inpatient (Inpatient)	3,626	\$21,685,497
Hospital Outpatient (Outpatient)	14,831	\$8,163,683
Physician	22,126	\$9,201,509
Prescription Drugs (Drugs)	25,951	\$28,054,721
HMO	20,941	\$15,615,131
Dental	8,109	\$1,374,590
Community Mental Health (CMH)	4,253	\$11,357,724
Community Alcohol and Drug (CAD)	680	\$556,440
Habilitation	3,022	\$9,451,641
Federally Qualified Health Centers	46	\$7,505
Clinic	2,019	\$624,113
All Other Categories (Other)	14,330	\$21,515,013
Medicare Cost Sharing (MCS)	6,304	\$11,597,769
Total	41,074	\$235,378,520

The reported data was generated by the claims system; therefore, accounting adjustments such as prescription drug rebates are not reflected.

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HMO Expenditures include all Medicaid covered services. All data is for county in which recipients reside.

Race data will not add up to total eligibles because of high volume of "other" in Medicaid eligibility data, which is not counted here.

*Total includes Part A and B premium payments

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Summit County

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	28,802	12,331	42.8%
5-18	113,428	24,837	21.9%
19-44	198,964	18,461	9.3%
45-64	125,133	5,744	4.6%
65-84	67,900	4,593	6.8%
85+	8,672	1,921	22.2%
Total	542,899	67,887	12.5%
Male	261,471	26,803	10.3%
Female	281,428	41,084	14.6%
White	457,683	37,657	8.2%
Black	71,608	28,358	39.6%
Hispanic	4,781	389	8.1%
Asian/Pacific Islander	7,741	481	6.2%
Native American	1,086	56	5.2%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	2,079	667	10
1	2,024	640	28
2-4	5,101	1,631	151
5-18	17,046	6,048	1,743
19-44	11,753	1,835	4,873
45-64	751	4	4,989
65-84	5	0	4,588
85+	2	0	1,919
Total Eligibles	38,761	10,825	18,301
Total Expenditures	\$50,248,606	\$13,501,689	\$247,177,361

Expenditures by Category of Service

Category of Service	Recipients	Total
Nursing Facility (NF)	3,360	\$86,627,434
ICF-MR	78	\$4,383,045
Hospital Inpatient (Inpatient)	3,648	\$42,052,459
Hospital Outpatient (Outpatient)	15,928	\$10,486,491
Physician	19,847	\$8,468,317
Prescription Drugs (Drugs)	24,828	\$38,552,463
HMO	41,620	\$43,887,675
Dental	8,332	\$1,747,672
Community Mental Health (CMH)	5,890	\$12,822,575
Community Alcohol and Drug (CAD)	1,021	\$1,597,178
Habilitation	4,895	\$15,127,269
Federally Qualified Health Centers	409	\$77,047
Clinic	1,407	\$1,476,735
All Other Categories (Other)	16,010	\$39,818,270
Medicare Cost Sharing (MCS)	7,596	\$16,014,864
Total	62,391	\$323,139,494

Trumbull County

Medicaid Coverage

Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	11,022	5,497	49.9%
5-18	46,297	10,556	22.8%
19-44	76,432	7,734	10.1%
45-64	55,927	2,453	4.4%
65-84	31,655	1,875	5.9%
85+	3,783	935	24.7%
Total	225,116	29,050	12.9%
Male	108,969	11,836	10.9%
Female	116,147	17,214	14.8%
White	204,163	22,173	10.9%
Black	17,778	6,423	36.1%
Hispanic	1,794	127	7.1%
Asian/Pacific Islander	1,048	34	3.2%
Native American	333	14	5.2%

Medicaid Eligible Population

Age Group	HF	HST	ABD
0	490	699	6
1	0	746	18
2-4	1,231	1,746	65
5-18	4,148	5,773	635
19-44	4,043	1,374	2,317
45-64	299	0	2,154
65-84	0	0	1,875
85+	0	0	935
Total Eligibles	10,707	10,338	8,005
Total Expenditures	\$18,553,250	\$8,916,907	\$107,864,066

Expenditures by Category of Service

Category of Service	Recipients	Total
Nursing Facility (NF)	1,724	\$41,811,796
ICF-MR	163	\$6,277,607
Hospital Inpatient (Inpatient)	3,637	\$21,257,879
Hospital Outpatient (Outpatient)	13,529	\$8,637,179
Physician	19,409	\$9,511,246
Prescription Drugs (Drugs)	21,120	\$20,095,056
HMO	195	\$105,045
Dental	8,150	\$1,520,719
Community Mental Health (CMH)	2,752	\$3,890,539
Community Alcohol and Drug (CAD)	367	\$262,955
Habilitation	2,839	\$7,211,855
Federally Qualified Health Centers	151	\$31,931
Clinic	1,865	\$979,136
All Other Categories (Other)	13,607	\$12,084,843
Medicare Cost Sharing (MCS)	3,454	\$7,236,164
Total	25,414	\$140,913,949

The reported data was generated by the claims system; therefore, accounting adjustments such as prescription drug rebates are not reflected.

This data is State Fiscal Year 2000 except: Total Population is July 2000

HMO Expenditures include all Medicaid covered services. All data is for county in which recipients reside.

Race data will not add up to total eligibles because of high volume of "other" in Medicaid eligibility data, which is not counted here.

*Total includes Part A and B premium payments

**OHIO MEDICAID REPORT-SFY 2000
THIRD EDITION: UPDATE - APRIL 2002**

Wayne County

Medicaid Coverage			
Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	6,258	1,719	27.5%
5-18	26,210	3,301	12.6%
19-44	40,154	2,595	6.5%
45-64	25,315	939	3.7%
65-84	12,020	780	6.5%
85+	1,607	423	26.3%
Total	111,564	9,757	8.7%
Male	55,090	4,098	7.4%
Female	56,474	5,659	10.0%
White	108,040	8,966	8.3%
Black	1,749	627	35.8%
Hispanic	837	62	7.4%
Asian/Pacific Islander	755	30	4.0%
Native American	183	12	6.6%

Medicaid Eligible Population			
Age Group	HF	HST	ABD
0	127	266	0
1	125	289	1
2-4	304	597	10
5-18	914	2,259	128
19-44	1,210	524	861
45-64	65	1	873
65-84	0	0	780
85+	0	0	423
Total Eligibles	2,745	3,936	3,076
Total Expenditures	\$4,436,568	\$2,543,471	\$55,233,088

Expenditures by Category of Service		
Category of Service	Recipients	Total
Nursing Facility (NF)	788	\$17,842,770
ICF-MR	193	\$17,224,299
Hospital Inpatient (Inpatient)	986	\$5,701,339
Hospital Outpatient (Outpatient)	3,839	\$1,911,182
Physician	5,740	\$2,533,375
Prescription Drugs (Drugs)	6,487	\$6,871,271
HMO	0	\$0
Dental	2,651	\$616,273
Community Mental Health (CMH)	914	\$1,627,446
Community Alcohol and Drug (CAD)	309	\$147,425
Habilitation	663	\$1,761,028
Federally Qualified Health Centers	3	\$788
Clinic	589	\$126,282
All Other Categories (Other)	4,460	\$5,516,121
Medicare Cost Sharing (MCS)	1,606	\$2,693,780
Total	8,280	\$64,573,377

Williams County

Medicaid Coverage			
Age Group	Total Population	Medicaid Eligibles	Percent Medicaid
0-4	2,012	838	41.7%
5-18	8,717	1,119	12.8%
19-44	14,042	875	6.2%
45-64	8,979	244	2.7%
65-84	4,706	306	6.5%
85+	732	175	23.9%
Total	39,188	3,557	9.1%
Male	19,466	1,412	7.3%
Female	19,722	2,145	10.9%
White	37,562	3,339	8.9%
Black	283	31	11.0%
Hispanic	1,049	157	15.0%
Asian/Pacific Islander	205	10	4.9%
Native American	89	12	6.6%

Medicaid Eligible Population			
Age Group	HF	HST	ABD
0	31	176	0
1	0	174	2
2-4	75	351	3
5-18	258	818	43
19-44	357	302	216
45-64	21	1	222
65-84	0	0	306
85+	0	0	175
Total Eligibles	768	1,822	967
Total Expenditures	\$902,028	\$1,658,487	\$13,663,487

Expenditures by Category of Service		
Category of Service	Recipients	Total
Nursing Facility (NF)	322	\$7,273,294
ICF-MR	17	\$873,375
Hospital Inpatient (Inpatient)	442	\$2,129,579
Hospital Outpatient (Outpatient)	1,090	\$555,264
Physician	1,807	\$821,847
Prescription Drugs (Drugs)	2,233	\$2,147,491
HMO	0	\$0
Dental	588	\$102,859
Community Mental Health (CMH)	293	\$520,371
Community Alcohol and Drug (CAD)	33	\$56,974
Habilitation	195	\$407,676
Federally Qualified Health Centers	0	\$0
Clinic	292	\$16,487
All Other Categories (Other)	1,439	\$1,134,325
Medicare Cost Sharing (MCS)	503	\$945,167
Total	2,805	\$16,984,710

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