

**Report 1: Demographics**  
**MA Enrollment Status and Age Grouping by MA Eligibility Group**  
**Unduplicated count of MA Eligible Recipients for June 2005 and Total MA Months for SFY 2005**  
**Dane & Rock Counties**

		SSI / SSI - R		MAPP		Waiver <sup>1</sup>		Nursing Home <sup>2</sup>		Other Eligibility <sup>3</sup>		Total Eligible Recipients		
MA Status	Age Group	June 2005 Count	Total MA Months	June 2005 Count	Total MA Months	June 2005 Count	Total MA Months	June 2005 Count	Total MA Months	June 2005 Count	Total MA Months	June 2005 Count	Total MA Months	% of Total
MA Only	18-39	2,080	24,691	27	362	46	535	-	5	9	118	2,162	25,711	16.9%
	40-64	2,351	28,080	86	947	109	1,261	6	96	9	152	2,561	30,536	20.1%
	65+	195	2,203	-	-	5	49	1	10	-	-	201	2,262	1.5%
<b>Sub-Total MA Only</b>		<b>4,626</b>	<b>54,974</b>	<b>113</b>	<b>1,309</b>	<b>160</b>	<b>1,845</b>	<b>7</b>	<b>111</b>	<b>18</b>	<b>270</b>	<b>4,924</b>	<b>58,509</b>	<b>38.5%</b>
Dual Eligible	18-39	1,262	15,590	175	2,013	107	1,234	3	34	3	48	1,550	18,919	12.4%
	40-64	2,341	28,053	593	6,523	513	5,838	44	552	15	152	3,506	41,118	27.1%
	65+	1,563	19,032	62	662	1,019	12,059	152	1,628	5	49	2,801	33,430	22.0%
<b>Sub-Total Dual Eligible</b>		<b>5,166</b>	<b>62,675</b>	<b>830</b>	<b>9,198</b>	<b>1,639</b>	<b>19,131</b>	<b>199</b>	<b>2,214</b>	<b>23</b>	<b>249</b>	<b>7,857</b>	<b>93,467</b>	<b>61.5%</b>
<b>Total Eligible Recipients</b>		<b>9,792</b>	<b>117,649</b>	<b>943</b>	<b>10,507</b>	<b>1,799</b>	<b>20,976</b>	<b>206</b>	<b>2,325</b>	<b>41</b>	<b>519</b>	<b>12,781</b>	<b>151,976</b>	<b>100.0%</b>

Source: Medicaid Eligibility Data Set released for long-term care expansion.

**Purpose:** This report displays the number of unduplicated consumers across the MA Eligibility groups as of June 2005 and the total of unduplicated MA eligible months for SFY 2005 from the Medicaid Eligibility Data Set released for the purposes of managed long-term care expansion.

**Other Information:** The data displayed in this table does not include the entire Medicaid population. It includes the sub set who had a long-term care service during the period included in the data release for the purposes of managed long-term care expansion. The categories represent how an individual gained access to Medicaid benefits through eligibility determination. Consumers who fall within a category may be enrolled in Family Care, Home and Community Based Waiver, Wisconsin Partnership Program, or other Medicaid Programs.

<sup>1</sup> Represents the Waiver Eligible Recipients included in the DHFS eligibility data set release and not the entire set of consumers on waivers.

<sup>2</sup> Represents the Nursing Home consumers who met the criteria for inclusion in the DHFS data set release due to enrollment in Family Care, Wisconsin Partnership Program or were found in the HSRS reporting system.

<sup>3</sup> Represents other recipients included in the DHFS eligibility data set release (AFDC, Badger Care, Foster Care, Healthy Start, Medicare Beneficiaries, Subsidized Adoption or Well Woman Program) or had missing data for MA Eligibility

**Report 2: Demographics**

**MA Enrollment Status and Age Grouping of Family Care and Wisconsin Partnership Program Recipients**

**Unduplicated count of Recipients for June 2005 and Total MA Months, SFY 2005**

**Dane & Rock Counties**

		Family Care		WPP		Total Recipients		% Total	
MA Status	Age Group	June 2005 Count	SFY 2005 Total MA Months	June 2005 Count	SFY 2005 Total MA Months	June 2005 Count	SFY 2005 Total MA Months	June 2005 Count	SFY 2005 Total MA Months
MA Only	18-39	-	-	24	322	24	322	3.0%	3.4%
	40-64	-	-	90	1,066	90	1,066	11.1%	11.4%
	65+	-	3	4	39	4	42	0.5%	0.4%
<b>Sub-Total MA Only</b>		-	<b>3</b>	<b>118</b>	<b>1,427</b>	<b>118</b>	<b>1,430</b>	<b>14.6%</b>	<b>15.2%</b>
Dual Eligible	18-39	-	-	29	343	29	343	3.6%	3.7%
	40-64	-	1	201	2,337	201	2,338	24.9%	24.9%
	65+	-	-	460	5,267	460	5,267	56.9%	56.2%
<b>Sub-Total Dual Eligible</b>		-	<b>1</b>	<b>690</b>	<b>7,947</b>	<b>690</b>	<b>7,948</b>	<b>85.4%</b>	<b>84.8%</b>
<b>Total All</b>		-	<b>4</b>	<b>808</b>	<b>9,374</b>	<b>808</b>	<b>9,378</b>	<b>100.0%</b>	<b>100.0%</b>

Source: Medicaid Eligibility Data Set released for long-term care expansion.

**Enrollment by Age Grouping of HCBW, COP-R, and Wait List Consumers**

**Unduplicated count of Waiver & COP-R Participants, June 2005 and SFY 2005**

**Unduplicated Consumers on Wait List, June 2005**

**Dane & Rock Counties**

Age Group	HCBW & COP-R		% Total		Wait List
	June 2005 Count	SFY 2005 Total MA Months	June 2005 Count	SFY 2005 Total MA Months	June 2005 Count
18-39	759	9,057	26.8%	26.9%	171
40-64	1,149	13,357	40.6%	39.7%	275
65+	925	11,240	32.7%	33.4%	288
<b>Total</b>	<b>2,833</b>	<b>33,654</b>	<b>100.0%</b>	<b>100.0%</b>	<b>734</b>

Source: Human Services Reporting Service (HSRS) Data Set released for long-term care expansion.

**Purpose:** This report provides a count of the unduplicated consumers enrolled in Family Care, Wisconsin Partnership Program, Home and Community-Based Waiver (HCBW), or Wait List as of June 2005 and/or the total MA eligible months for SFY 2005. The information in this report will facilitate analysis of the number of consumers who may be eligible to transition into a long-term care expansion program.

**Other Information:** Individuals in Family Care or Wisconsin Partnership Program (WPP) are identified in the Medicaid Eligibility Data Set released for the purposes of long-term care expansion planning. Individuals who are enrolled in HCBW & COP-R or are currently on a Wait List for services are identified in the HSRS dataset released for long-term care expansion planning. For additional information on how the Medicaid populations are identified, please see the Technical Appendix. Medicaid eligible months are the number of months the consumer was actually enrolled in Medicaid during the defined period.

**Report 3 : Demographics****Unduplicated Counts of Consumers enrolled in HCBW/COP-R, Family Care, Wisconsin Partnership Program  
or on a County Wait List as of June 2005****Dane & Rock Counties**

<b>Program Code</b>	<b>Elderly</b>	<b>Developmentally Disabled</b>	<b>Physically Disabled</b>	<b>Mental Health/AODA</b>	<b>Total</b>
HCBW & COP-R	851	1,367	498	117	2,833
Family Care	-	-	-	-	-
Wait List	272	155	226	81	734
Wisconsin Partnership Program	454	16	338	-	808
<b>Total</b>	<b>1,577</b>	<b>1,538</b>	<b>1,062</b>	<b>198</b>	<b>4,375</b>

  

<b>Eligible Months</b>	<b>19,225</b>	<b>18,105</b>	<b>12,442</b>	<b>2,440</b>	<b>52,212</b>
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Source: HSRS, Medicaid Eligibility, CMO Encounter, and Long-Term Care Functional Screen Data Sets released for long-term care expansion.

**Purpose:** This report provides a "point in time" picture of four Medicaid populations, HCBW/COP-R, Family Care, Wisconsin Partnership Program, and consumers on a Wait List, stratified by target group. This information will facilitate the user's understanding of the population that may be served in a long-term care expansion program.

**Other Information:** Target group was identified from the consumer's most recent Long-Term Care Functional Screen Hierarchical Target Group field. If a functional screen was unavailable, the first Client Characteristic field from HSRS was mapped to a particular target group. This report did not recognize or capture co-occurring, identified needs. The MH/AODA target group was identified if it was the first Client Characteristic in the HSRS data release for long-term care expansion. For more identifying information, please refer to the Technical Appendix.

**Report 4 : Demographics**

**Residential Living Arrangement for HCBW/COP-R, Wait List, Family Care, and WPP Consumers as of June 2005**

**Dane & Rock Counties**

<b>Residential Category</b>	<b>HCBW &amp; COP-R</b>	<b>Family Care</b>	<b>Wait List</b>	<b>WPP</b>	<b>Total</b>
Home/Apartment	2,109	-	531	675	3,315
CBRF	326	-	62	82	470
Adult Family Home (AFH)	318	-	8	6	332
Nursing Home	14	-	34	33	81
Other Living Arrangement <sup>1</sup>	40	-	87	10	137
RCAC	20	-	10	1	31
ICF-MR/Facility for the DD	3	-	1	-	4
DD Center	2	-	-	-	2
Brain Injury Rehab Unit	-	-	1	-	1
Mental Health Institute	1	-	-	-	1
Other IMD	-	-	-	1	1
<b>Total</b>	<b>2,833</b>	<b>-</b>	<b>734</b>	<b>808</b>	<b>4,375</b>

Source: HSRS, LTCFS Extract, and Medicaid Eligibility Data Sets for long-term care expansion

**Purpose:** This report displays the reported residential setting to provide the user with an understanding of home and community vs. other residential settings and to evaluate the need for further analyses of cost, placements and potential relocation.

**Other information:** The most recent Long-Term Care Functional Screen data was the primary source of the residential arrangement category. If a functional screen was unavailable, the Current Living Arrangement code in HSRS was used to identify an individual's living arrangement. The June 2005 functional screen information could have been collected as early as July 2004, since it is carried forward each month until updated. Please refer to the Technical Appendix for additional information on the identification of Medicaid populations and a crosswalk for determining residential category.

<sup>1</sup>Other Living Arrangement includes homeless shelters and any other type of residence not identified in the other categories.

**Report 5: Demographics**

**Recipients - Home & Community Based Waivers & COP-R Program as of June 2005  
Dane & Rock Counties**

Program	June, 2005 Enrollees	% of Total
COP Waiver & CIP II	1,075	37.9%
COP-R Only	464	16.4%
CIP 1A	107	3.8%
CIP 1B & CIP 1B - ICF/MR	1,139	40.2%
BIW	48	1.7%
<b>Total</b>	<b>2,833</b>	<b>100.0%</b>

Source: HSRS Data Set released for long-term care expansion.

**Purpose:** This report presents a stratification of the consumers served on home and community-based waivers and COP-R funded programs. It provides the user with an understanding of individuals' current needs based on the waiver as reported in the June 2005 data set released for long-term care expansion planning.

**Other Information:** Children's Long-Term Care waivers are not included in this table. For additional information, please see the Technical Appendix.

**Report 6: Demographics**

**Wait List Consumers by Target Group, June 2005  
Dane & Rock Counties**

Wait List	Elderly	Developmentally Disabled	Physically Disabled	Mental Health/AODA	Total
Institutional Residents	5	-	14	-	19
No Publicly Funded On-Going LTC Services	248	113	183	28	572
Some Pub. Funded Service, No COP/Waiver	19	42	29	53	143
<b>Total</b>	<b>272</b>	<b>155</b>	<b>226</b>	<b>81</b>	<b>734</b>

Source: HSRS and Long-Term Care Functional Screen Data Sets released for long-term care expansion.

**Purpose:** This report presents unduplicated consumers on a waiting list as of June 2005 for enrollment in a long-term care program. It provides the user with a stratification across the target groups using the member tracking SPC Codes in HSRS.

**Other Information:** Target group was identified from the consumer's most recent Long-Term Care Functional Screen Hierarchical Target Group field. If a functional screen was unavailable, the first Client Characteristic field from HSRS was mapped to a particular target group. The MH/AODA target group was identified if it was the first Client Characteristic in HSRS. The report did not recognize or capture co-occurring, identified needs. Please see the Technical Appendix for information on how the Wait List population was identified.

## Report 7: Utilization

### Unduplicated Service Counts for HCBW/COP-R, Wait List, and Family Care Consumers, SFY 2005

#### Dane & Rock Counties

Service Category	Count of unduplicated consumers using each service (not # encounters)			
	HCBW/COP-R	Family Care	Wait List	Total
<b>LONG TERM CARE SERVICES</b>				
Adaptive Equipment	1,270	2		1,272
Adult Day Activities	436	-		436
Case Management	3,251	2		3,253
Habilitation / Health	654	-		654
Home Care	1,604	2		1,606
Home Health Care	-	-		-
Housing	175	-		175
Institutional	-	-		-
Residential Care	800	-		800
Respite Care	272	-		272
Transportation	1,144	1		1,145
Vocational	342	1		343
Other Services	1,023	-		1,023
<b>MA CARD SERVICES</b>				
Case Management	171	-	107	278
Community Support Program	110	-	17	127
Community Care Organization Services	-	-	-	-
DME / DMS	1,746	-	237	1,983
Home Care Services ( OT, PT, ST, Pvt RN.)	262	-	40	302
In Home Intensive Psychotherapy	-	-	-	-
Medical Day Treatment	6	-	1	7
Mental Health Service, AODA - Adult	170	-	46	216
Mental Health Day Treatment - Child/Adolescent	-	-	-	-
MH - AODA Day Treatment	2	-	4	6
Nursing Facility	204	-	161	365
Personal Care	594	-	32	626
DD Centers	22	-	3	25
ICF MR Centers	1	-	2	3
Therapy, Office - OT, PT, ST	368	-	98	466
Transportation	344	-	85	429
Non Covered Services in Family Care Benefit	3,074	1	640	3,715

Source: HSRS, CMO Encounter Data, and Medicaid Claims and Eligibility Data Sets for long-term care expansion.

**Purpose:** This report provides the unduplicated count of consumers for each category of service stratified across program or wait list for SFY 2005. It cannot be used to develop per member per month (PMPM) service costs. The MA card services are service categories that would be included as a covered benefit through a long-term care expansion program.

**Other information:** The counts do not provide all encounters for each category of service. Utilization is counted only one time per consumer regardless of how many times a category of service was provided during SFY 2005. The long-term care service categories map to SPC Codes in the HSRS and CMO Encounter data. The MA Card Services represent the MA Card claims grouped using Family Care Categories of Service (FC COS). For mapping SPC and FC COS codes to service categories, please refer to the Technical Appendix. Non Covered Services include primary and acute services that are not included in the Family Care benefit package and remain as the Medicaid fee-for-service benefit. The Capitation service category has not been included in this report. MA card services reported for Family Care enrollees are due to partial month enrollment during SFY 2005.

**Report 8: Utilization  
Count of Primary & Acute MA Card Services for HCBW/COP-R, Wait List, and Family  
Care Consumers, SFY 2005  
Dane & Rock Counties**

Service Category	Count of unduplicated consumers using each service (not # encounters)			
	HCBW/COP-R	Family Care	Wait List	Total
Inpatient Hospital	621	-	161	782
Emergency Room	541	-	146	687
Outpatient Hospital	1,357	1	289	1,647
Nursing Home	2	-	6	8
Physician and Physician Clinic	2,471	-	465	2,936
Mental Health* (e.g. psychiatrist)	505	-	71	576
DME/DMS* (e.g. hearing aides)	714	-	27	741
Drugs	2,944	1	589	3,534
Home Care* (e.g. acute care nursing)	41	-	3	44
Lab and Radiology	1,693	-	351	2,044
Therapy	1	-	-	1
Dental	884	-	122	1,006
Transportation* (e.g. ambulance)	670	-	138	808
All Other	1,379	1	281	1,661

Source: HSRS, Medicaid Claims, and Eligibility Data Sets for long-term care expansion.

**Purpose:** This report provides a drill down of the Non Covered Services category from the MA card services section in report 7. It cannot be used to calculate PMPM service cost.

**Other Information:** Non covered services are primary and acute services not included in the Family Care benefit package and remain as a Medicaid fee-for-service benefit for Family Care enrollees. Utilization is counted only one time per consumer regardless of how many times a category of service was provided during SFY 2005. The service categories are grouped using Clinical Service Groupings (CSG) that are highly summarized from details in the Medicaid Claims Data Set. The Capitation service category is not included in this report. For more information about this report, please see the Technical Appendix.

\* Services specifically carved out of the Family Care Benefit as ancillary services and/or services related to acute and primary care.

**Report 9: Utilization  
Unduplicated Service Counts for HCBW/COP-R, Family Care, and Wait List Consumers by  
Target Group for SFY 2005  
Dane & Rock Counties**

Service Category	Count of unduplicated consumers using each service (not # encounters)				
	Elderly	Developmentally Disabled	Physically Disabled	Mental Health/AODA	Total
<b>LONG TERM CARE SERVICES</b>					
Adaptive Equipment	640	221	376	35	1,272
Adult Day Activities	186	145	47	58	436
Case Management	1,033	1,400	705	115	3,253
Habilitation / Health	170	393	90	1	654
Home Care	641	451	471	43	1,606
Home Health Care	-	-	-	-	-
Housing	93	16	45	21	175
Institutional	-	-	-	-	-
Residential Care	355	269	142	34	800
Respite Care	33	223	16	-	272
Transportation	316	579	204	46	1,145
Vocational	13	308	19	3	343
Other Services	36	940	47	-	1,023
<b>MA CARD SERVICES</b>					
Case Management	71	93	74	40	278
Community Support Program	11	-	15	101	127
Community Care Organization Services	-	-	-	-	-
DME / DMS	705	650	567	61	1,983
Home Care Services	104	59	135	4	302
In Home Intensive Psychotherapy	-	-	-	-	-
Medical Day Treatment	-	1	1	5	7
Mental Health Service, AODA - Adult	34	105	57	20	216
Mental Health Day Treatment - Child/Adolescent	-	-	-	-	-
MH - AODA Day Treatment	-	-	-	6	6
Nursing Facility	240	11	94	20	365
Personal Care	119	389	118	-	626
DD Center	-	25	-	-	25
ICF MR	-	3	-	-	3
Therapy - OT, PT, ST	110	163	174	19	466
Transportation	219	62	125	23	429
Non Covered Services in Family Care Benefit	1,210	1,480	849	176	3,715

Source: HSRS, CMO Encounter, Long-Term Care Functional Screen, Medicaid Claims and Eligibility Data Sets for long-term care expansion.

**Purpose:** This report provides the unduplicated count of consumers for each category of service stratified across target group for SFY 2005. It cannot be used to develop PMPM cost. The MA card services are service categories that would be included as a covered benefit through a long-term care expansion program.

**Other Information:** Target group was identified from the consumer's most recent Long-Term Care Functional Screen Hierarchical Target Group field. If a functional screen was unavailable, the first Client Characteristic field from HSRS was mapped to a particular target group. The counts do not provide all encounters for each category of service. Utilization is counted only one time per consumer regardless of how many times a category of service was provided during SFY 2005. The long-term care service categories map to SPC Codes in the HSRS and CMO Encounter data. The MA card services represent MA card claims grouped using Family Care Categories of Service (FC COS). For mapping SPC and FC COS codes to service categories and target group identification details, please refer to the Technical Appendix. The Capitation service category has not been included in this report. MA card services reported for Family Care enrollees are due to partial month enrollment during SFY 2005.

## Report 10: Utilization

### Unduplicated Primary & Acute MA Card Service Counts for HCBW/COP-R, Wait List, and Family Care Consumers by Target Group, SFY 2005 Dane & Rock Counties

Service Category	Count of unduplicated consumers using each service (not # encounters)				
	Elderly	Developmentally Disabled	Physically Disabled	Mental Health/AODA	Total
Inpatient Hospital	311	136	273	62	782
Emergency Room	148	244	235	60	687
Outpatient Hospital	379	672	517	79	1,647
Nursing Home	4	-	4	-	8
Physician and Physician Clinic	806	1,250	725	155	2,936
Mental Health* (e.g. psychiatrist)	90	242	106	138	576
DME/DMS* (e.g. hearing aides)	318	276	127	20	741
Drugs	1,167	1,372	821	174	3,534
Home Care* (e.g. acute care nursing)	2	29	12	1	44
Lab and Radiology	577	770	577	120	2,044
Therapy	-	1	-	-	1
Dental	181	577	206	42	1,006
Transportation* (e.g. ambulance)	359	161	241	47	808
All Other	507	654	381	119	1,661

Source: HSRS, Medicaid Claims and Eligibility, and LTCFS Data Sets for long-term care expansion.

**Purpose:** This report provides a drill down of the Non Covered Services category from the MA card services section in Report 9. It cannot be used to calculate PMPM service costs.

**Other Information:** Non covered services are primary and acute services not included in the Family Care benefit package and remain as a Medicaid fee-for-service benefit for Family Care enrollees. Utilization is counted only one time per consumer regardless of how many times a category of service was provided during SFY 2005. The service categories are grouped using Clinical Service Groupings (CSG) that are highly summarized from details in the Medicaid Claims. The Capitation service category is not included in this report. For more information about this report, please see the Technical Appendix. Target group was identified from the most recent Long-Term Care Functional Screen. If a functional screen was not available, the Client Characteristic 1 field in HSRS was used to map to a specific target group.

\* Services specifically carved out of the Family Care Benefit as ancillary services and/or services related to acute and primary care.

**Report 11: Illness Burden**

**Major Clinical Classification - Top Twenty Diagnoses for HCBW/COP-R, Wait List, and other MA Populations (SSI, WPP, ICFMR), Calendar Year 2004, and 1st 6 months of 2005**

**Dane & Rock Counties**

**11A: HCBW & COP-R Programs**

HCBW & COP-R Program Clinical Classifications Software Category	2004 Count of Consumers
Disorders of teeth and jaw	1,197
Other aftercare	863
Genitourinary symptoms and ill-defined conditions	811
Blindness and vision defects	753
Other lower respiratory disease	702
Other connective tissue disease	701
Esophageal disorders	656
Other mental conditions	640
Other non-traumatic joint disorders	614
Other screening for suspected conditions (not mental disorders or infectious disease)	593
Other eye disorders	590
Other nervous system disorders	518
Other gastrointestinal disorders	480
Diabetes mellitus without complication	478
Other skin disorders	473
Immunizations and screening for infectious disease	467
Essential hypertension	466
Spondylosis; intervertebral disc disorders; other back problems	436
Mycoses	394
Affective disorders	392

HCBW & COP-R Program Clinical Classifications Software Category	2005 Count of Consumers
Disorders of teeth and jaw	752
Genitourinary symptoms and ill-defined conditions	688
Other aftercare	621
Esophageal disorders	596
Other lower respiratory disease	533
Other connective tissue disease	483
Blindness and vision defects	470
Other mental conditions	451
Diabetes mellitus without complication	434
Other nervous system disorders	386
Other non-traumatic joint disorders	381
Other screening for suspected conditions (not mental disorders or infectious disease)	372
Essential hypertension	364
Other gastrointestinal disorders	343
Mycoses	341
Mental retardation	334
Affective disorders	313
Other skin disorders	308
Paralysis	297
Spondylosis; intervertebral disc disorders; other back problems	296

Source: HSRS data in conjunction with the 2004 and 2005 Clinical Classification Software (CCS) data set for long-term care expansion.

**Purpose:** This report captures the top 20 unduplicated diagnoses for HCBW and COP-R individuals for Calendar Year 2004 and partial year 2005.

**Other Information:** The diagnoses were captured from the original Medicaid claims and are summarized using the "Clinical Classifications Software." The counts do not provide all encounters for each diagnostic category. The diagnostic category is counted only one time per consumer regardless of how many times a diagnosis was reported during the calendar year 2004 and partial calendar year 2005. This information is sorted in descending order by the total number of unduplicated health conditions.

**11B: Consumers on Waitlist for Enrollment in a Long-Term Care Program**

Wait List Clinical Classifications Software Category	2004 Count of Consumers
Other lower respiratory disease	203
Esophageal disorders	196
Other connective tissue disease	187

Wait List Clinical Classifications Software Category	2005 Count of Consumers
Esophageal disorders	170
Other connective tissue disease	153
Other mental conditions	140

## Report 11: Illness Burden

### Major Clinical Classification - Top Twenty Diagnoses for HCBW/COP-R, Wait List, and other MA Populations (SSI, WPP, ICFMR), Calendar Year 2004, and 1st 6 months of 2005

#### Dane & Rock Counties

Other mental conditions	185
Disorders of teeth and jaw	182
Essential hypertension	178
Blindness and vision defects	167
Spondylosis; intervertebral disc disorders; other back problems	161
Other non-traumatic joint disorders	155
Other screening for suspected conditions (not mental disorders or infectious disease)	153
Diabetes mellitus without complication	151
Other aftercare	149
Other nervous system disorders	142
Nonspecific chest pain	141
Other eye disorders	133
Other gastrointestinal disorders	114
Abdominal pain	103
Other injuries and conditions due to external causes	98
Rehabilitation care; fitting of prostheses; and adjustment of devices	94
Other circulatory disease	93

Other lower respiratory disease	139
Diabetes mellitus without complication	130
Essential hypertension	124
Other non-traumatic joint disorders	112
Disorders of teeth and jaw	108
Other aftercare	108
Spondylosis; intervertebral disc disorders; other back problems	108
Other nervous system disorders	97
Other screening for suspected conditions (not mental disorders or infectious disease)	95
Blindness and vision defects	94
Nonspecific chest pain	89
Rehabilitation care; fitting of prostheses; and adjustment of devices	86
Genitourinary symptoms and ill-defined conditions	75
Diabetes mellitus with complications	74
Senility and organic mental disorders	73
Abdominal pain	72
Other injuries and conditions due to external causes	68

Source: HSRS data in conjunction with the 2004 and 2005 CCS data set for long-term care expansion.

**Purpose:** This report captures the top 20 unduplicated diagnoses for consumers on the Wait List for a long-term care program for Calendar Year 2004 and partial year 2005.

**Other Information:** The diagnoses were captured from the original Medicaid claims and are summarized using the "Clinical Classifications Software." The counts do not provide all encounters for each diagnostic category. The diagnostic category is counted only one time per consumer regardless of how many times a diagnosis was reported during the calendar year 2004 and partial calendar year 2005. This information is sorted in descending order by the total number of unduplicated health conditions. Consumers on the Wait List were identified by certain LTC SPC codes (see technical appendix).

#### 11C: Other Medicaid Population

Other Medicaid Population Clinical Classifications Software Category	2004 Count of Consumers
Disorders of teeth and jaw	2,390
Blindness and vision defects	2,300
Other connective tissue disease	2,061
Other lower respiratory disease	2,057
Other screening for suspected conditions (not mental disorders or infectious disease)	2,021
Spondylosis; intervertebral disc disorders; other back problems	1,861
Other non-traumatic joint disorders	1,828
Other eye disorders	1,774
Other mental conditions	1,680
Esophageal disorders	1,658
Essential hypertension	1,598

Other Medicaid Population Clinical Classifications Software Category	2005 Count of Consumers
Disorders of teeth and jaw	1,536
Other connective tissue disease	1,474
Other lower respiratory disease	1,437
Blindness and vision defects	1,423
Esophageal disorders	1,422
Spondylosis; intervertebral disc disorders; other back problems	1,412
Other mental conditions	1,327
Affective disorders	1,252
Other non-traumatic joint disorders	1,248
Essential hypertension	1,232
Other screening for suspected conditions (not mental disorders or infectious disease)	1,192

## Report 11: Illness Burden

### Major Clinical Classification - Top Twenty Diagnoses for HCBW/COP-R, Wait List, and other MA Populations (SSI, WPP, ICFMR), Calendar Year 2004, and 1st 6 months of 2005

#### Dane & Rock Counties

Other aftercare	1,534
Affective disorders	1,498
Abdominal pain	1,384
Immunizations and screening for infectious disease	1,353
Nonspecific chest pain	1,305
Anxiety; somatoform; dissociative; and personality disorders	1,299
Diabetes mellitus without complication	1,270
Disorders of lipid metabolism	1,250
Other upper respiratory infections	1,201

Diabetes mellitus without complication	1,143
Other aftercare	1,111
Anxiety; somatoform; dissociative; and personality disorders	1,012
Other upper respiratory infections	912
Abdominal pain	879
Schizophrenia and related disorders	868
Other eye disorders	865
Nonspecific chest pain	861
Disorders of lipid metabolism	836

Source: Wisconsin Medicaid Eligibility data in conjunction with the 2004 and 2005 CCS data sets for long-term care expansion.

**Purpose:** This report captures the top 20 unduplicated diagnoses in the other MA populations for Calendar Year 2004 and partial year 2005.

**Other Information:** The diagnoses were captured from the original Medicaid claims and are summarized using the "Clinical Classifications Software." The counts do not provide all encounters for each diagnostic category. The diagnostic category is counted only one time per consumer regardless of how many times a diagnosis was reported during the calendar year 2004 and partial calendar year 2005. This information is sorted in descending order by the total number of unduplicated health conditions.

## Report 12: Illness Burden

### Major Clinical Classification - Top Twenty Diagnoses by Target Group for HCBW/COP-R and Wait List, Calendar Year 2004 and first 6 months of 2005

#### Dane & Rock Counties

#### 12A: HCBW & COP-R Programs

HCBW & COP-R Clinical Classifications Software Category	Count of Consumers- 2004				
	Elderly	DD	PD	MH/ AODA	Total
Disorders of teeth and jaw	198	753	199	47	1,197
Other aftercare	253	361	204	45	863
Genitourinary symptoms and ill-defined conditions	329	269	189	24	811
Blindness and vision defects	183	370	165	35	753
Other lower respiratory disease	278	179	208	37	702
Other connective tissue disease	232	215	221	33	701
Esophageal disorders	269	175	177	35	656
Other mental conditions	152	327	141	20	640
Other non-traumatic joint disorders	231	193	165	25	614
Other screening for suspected conditions (not mental disorders or infectious disease)	153	244	162	34	593
Other eye disorders	147	283	133	27	590
Other nervous system disorders	150	167	181	20	518
Other gastrointestinal disorders	161	159	131	29	480
Diabetes mellitus without complication	215	101	138	24	478
Other skin disorders	125	235	87	26	473
Immunizations and screening for infectious disease	68	270	103	26	467
Essential hypertension	222	94	134	16	466
Spondylosis; intervertebral disc disorders; other back problems	155	107	156	18	436
Mycoses	147	162	64	21	394
Affective disorders	63	206	99	24	392

HCBW & COP-R Clinical Classifications Software Category	Count of Consumers-2005				
	Elderly	DD	PD	MH/ AODA	Total
Disorders of teeth and jaw	113	504	105	30	752
Genitourinary symptoms and ill-defined conditions	285	237	151	15	688
Other aftercare	174	277	134	36	621
Esophageal disorders	242	160	168	26	596
Other lower respiratory disease	229	147	137	20	533
Other connective tissue disease	161	152	148	22	483
Blindness and vision defects	102	246	94	28	470
Other mental conditions	108	227	107	9	451
Diabetes mellitus without complication	189	103	117	25	434
Other nervous system disorders	110	119	145	12	386
Other non-traumatic joint disorders	153	109	100	19	381
Other screening for suspected conditions (not mental disorders or infectious disease)	106	137	106	23	372
Essential hypertension	173	82	96	13	364
Other gastrointestinal disorders	113	126	92	12	343
Mycoses	119	153	48	21	341
Mental retardation	26	306	2	-	334
Affective disorders	38	179	76	20	313
Other skin disorders	87	160	48	13	308
Paralysis	22	188	86	1	297
Spondylosis; intervertebral disc disorders; other back problems	106	52	126	12	296

Source: HSRS data in conjunction with the 2004 and 2005 CCS data set for long-term care expansion.

**Purpose:** This report captures the top 20 unduplicated diagnoses for HCBW and COP-R individuals for Calendar Year 2004 and partial year 2005 stratified by target group.

## Report 12: Illness Burden

### Major Clinical Classification - Top Twenty Diagnoses by Target Group for HCBW/COP-R and Wait List, Calendar Year 2004 and first 6 months of 2005

#### Dane & Rock Counties

**Other Information:** The diagnoses were captured from the original Medicaid claims and are summarized using the "Clinical Classifications Software." The counts do not provide all encounters for each diagnostic category. The diagnostic category is counted only one time per consumer regardless of how many times a diagnosis was reported during the calendar year 2004 and partial calendar year 2005. It relates the clinical diagnostic information back to the consumer's target group as reported on their most recent Long Term Care Functional Screen. If a functional screen was not available, the first Client Characteristic field was used to map to a specific target group. The information is sorted in descending order by the total number of unduplicated health conditions.

#### 12B: Consumers on Waitlist for Enrollment in a Long-Term Care Program

Wait List Clinical Classifications Software Category	Count of Consumers-2004				
	Elderly	DD	PD	MH/ AODA	Total
Other lower respiratory disease	50	12	117	24	203
Esophageal disorders	50	14	112	20	196
Other connective tissue disease	37	14	123	13	187
Other mental conditions	28	52	86	19	185
Disorders of teeth and jaw	34	42	86	20	182
Essential hypertension	66	8	92	12	178
Blindness and vision defects	25	34	91	17	167
Spondylosis; intervertebral disc disorders; other back problems	25	11	109	16	161
Other non-traumatic joint disorders	44	13	87	11	155
Other screening for suspected conditions (not mental disorders or infectious disease)	25	10	94	24	153
Diabetes mellitus without complication	40	14	86	11	151
Other aftercare	25	13	93	18	149
Other nervous system disorders	18	12	101	11	142
Nonspecific chest pain	32	8	88	13	141
Other eye disorders	26	22	73	12	133
Other gastrointestinal disorders	19	7	81	7	114
Abdominal pain	16	8	67	12	103
Other injuries and conditions due to external causes	20	10	59	9	98
Rehabilitation care; fitting of prostheses; and adjustment of devices	20	10	55	9	94

Wait List Clinical Classifications Software Category	Count of Consumers-2005				
	Elderly	DD	PD	MH/ AODA	Total
Esophageal disorders	56	12	86	16	170
Other connective tissue disease	38	14	90	11	153
Other mental conditions	27	40	63	10	140
Other lower respiratory disease	42	6	80	11	139
Diabetes mellitus without complication	38	11	71	10	130
Essential hypertension	49	7	62	6	124
Other non-traumatic joint disorders	31	10	65	6	112
Disorders of teeth and jaw	23	26	54	5	108
Other aftercare	33	4	63	8	108
Spondylosis; intervertebral disc disorders; other back problems	26	7	67	8	108
Other nervous system disorders	17	9	66	5	97
Other screening for suspected conditions (not mental disorders or infectious disease)	15	8	58	14	95
Blindness and vision defects	16	20	45	13	94
Nonspecific chest pain	30	2	50	7	89
Rehabilitation care; fitting of prostheses; and adjustment of devices	28	9	39	10	86
Genitourinary symptoms and ill-defined conditions	32	7	30	6	75
Diabetes mellitus with complications	19	4	46	5	74
Senility and organic mental disorders	55	1	16	1	73
Abdominal pain	19	7	42	4	72

## Report 12: Illness Burden

### Major Clinical Classification - Top Twenty Diagnoses by Target Group for HCBW/COP-R and Wait List, Calendar Year 2004 and first 6 months of 2005

#### Dane & Rock Counties

Other circulatory disease	21	3	62	7	93
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Other injuries and conditions due to external causes	13	8	42	5	68
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Source: HSRS data in conjunction with LTCFS and 2004 and 2005 CCS data sets for long-term care expansion.

**Purpose:** This report captures the top 20 unduplicated diagnoses for consumers on a Wait List for a long-term care program for Calendar Year 2004 and partial year 2005 stratified by target group.

**Other Information:** The diagnoses were captured from the original Medicaid claims and are summarized using the "Clinical Classifications Software." The counts do not provide all encounters for each diagnostic category. The diagnostic category is counted only one time per consumer regardless of how many times diagnosis was reported during the calendar year 2004 and partial calendar year 2005. It relates the clinical diagnostic information back to the consumer's target group as reported on their most recent Long Term Care Functional Screen. If a functional screen was not available, the first Client Characteristic field was used to map to a specific target group. The information is sorted in descending order by the total number of unduplicated health conditions. Consumers on the Wait List were identified by certain LTC SPC codes, please see technical appendix.

**Report 13 : Functional Status  
 Functional Status of HCBW/COP-R, Wait List, Family Care, and Wisconsin Partnership  
 Program Consumers as of June 2005  
 Dane & Rock Counties**

Functional Screen Level of Care	HCBW & COP-R	Family Care	Wait List	WPP
<b>Disability or Nursing Home Level of Care</b>				
DD1A	65	-	-	12
DD1B	97	-	-	7
DD2	695	-	2	5
DD3	93	-	-	-
No DDLOC	1,176	-	137	777
ICF	1,318	-	59	360
SNF	519	-	29	374
ISN	38	-	6	67
No NHLOC	251	-	45	-
No DD or NH LOC	37	-	45	-
<b>Instrumental Activities of Daily Living</b>				
3 IADL's	216	-	27	113
4 IADL's	349	-	17	181
5 IADL's	815	-	44	306
6 IADL's	639	-	21	132
<b>Activities of Daily Living</b>				
Bathing - Level 2	968	-	54	345
Dressing - Level 2	642	-	35	243
Toileting - Level 1	411	-	21	184
Toileting - Level 2	429	-	26	186
Transfer - Level 2	369	-	16	169
<b>Behavioral Variables</b>				
Self-Injurious - Levels 1, 2, or 3	231	-	-	49
Offensive - Levels 1, 2, or 3	420	-	8	84
<b>Medication Management</b>				
Meds Management - Level 2a	460	-	21	198
Meds Management - Level 2b	842	-	40	276

Source: LTCFS Extract in conjunction with HSRS and Medicaid Eligibility Data Sets for long-term care expansion.

**Purpose:** This report provides an unduplicated count of various levels of functionality for individuals participating in Home and Community-Based Waivers, Family Care, Wisconsin Partnership Program or consumers on a Wait List as of June 2005.

**Other Information:** The target group designation is obtained from the consumer's Long-Term Care Functional Screen as of June 2005. The June 2005 functional screen information could have been collected as early as July 2004 since it is carried forward each month until updated. Many of the levels of functionality presented in this report are the result of logic that is built into the screen, while other components correspond to the screener's assessment of an individual's ability to perform various tasks. Family Care rate setting models utilize this information. The primary data source for the identification of HCBW enrollees and Wait List consumers is HSRS data that is reported by counties. WPP and Family Care participants are identified using the Medicaid Eligibility data set for long-term care expansion. This report does not capture all categories used in rate setting, and therefore should not be used to develop rates.

**Report 14 : Functional Status  
 Functional Status of HCBW/COP-R, Wait List, Family Care, and Wisconsin  
 Partnership Program Consumers by Target Group as of June 2005  
 Dane & Rock Counties**

Functional Screen Level of Care	Elderly	Developmentally Disabled	Physically Disabled
<b>Disability or Nursing Home Level of Care</b>			
DD1A	9	68	-
DD1B	11	93	-
DD2	45	657	-
DD3	2	91	-
No DDLOC	1,257	8	825
ICF	823	440	474
SNF	420	248	254
ISN	58	17	36
No NHLOC	23	212	61
No DD or NH LOC	18	3	61
<b>Instrumental Activities of Daily Living</b>			
3 IADL's	129	55	172
4 IADL's	233	106	208
5 IADL's	539	368	258
6 IADL's	353	377	62
<b>Activities of Daily Living</b>			
Bathing - Level 2	686	309	372
Dressing - Level 2	415	229	276
Toileting - Level 1	264	170	182
Toileting - Level 2	277	162	202
Transfer - Level 2	241	112	201
<b>Behavioral Variables</b>			
Self-Injurious - Level 1, 2, or 3	58	196	26
Offensive - Level 1, 2, or 3	141	315	56
<b>Medication Management</b>			
Meds Management - Level 2a	270	165	244
Meds Management - Level 2b	553	443	162

Source: LTCFS Extract in conjunction with HSRS and Medicaid Eligibility Data Sets for long-term care expansion.

**Purpose:** This report provides an unduplicated count of various levels of functionality for individuals participating in Home and Community-Based Waivers, Family Care, Wisconsin Partnership Program or consumers on a Wait List as of June 2005, stratified across target group.

**Other Information:** The target group designation is obtained from data based on an individual's Long-Term Care Functional Screen as of June 2005. Many of the levels of functionality presented in this report are the result of logic that is built into the screen while other components correspond to the screener's assessment of the individual's ability to perform various tasks. Family Care rate setting models utilize this information. This report does not capture all categories used in rate setting and therefore it should not be used to develop rates.

## Report 15: Costs

### Service Costs for HCBW/COP-R, Wait List, and Family Care Consumers for SFY 2005 Dane & Rock Counties

Service Category	HCBW & COP-R	Family Care	Wait List	Total
<b>LONG TERM CARE SERVICES</b>				
Adaptive Equipment	\$ 1,577,877	\$ 12		\$ 1,577,890
Adult Day Activities	2,279,528	-		2,279,528
Case Management	7,403,101	1,188		7,404,289
Habilitation / Health	745,839	-		745,839
Home Care	13,491,443	7,983		13,499,425
Home Health Care	-	-		-
Housing	244,004	-		244,004
Institutional	-	-		-
Residential Care	17,280,930	-		17,280,930
Respite Care	544,259	-		544,259
Transportation	4,728,613	127		4,728,740
Vocational	2,970,633	725		2,971,358
Other Services	45,211,052	-		45,211,052
<b>Subtotal - LTC Services</b>	<b>\$ 96,477,280</b>	<b>\$ 10,034</b>		<b>\$ 96,487,314</b>
<b>MA CARD SERVICES</b>				
Case Management	\$ 49,815	\$ -	\$ 45,694	\$ 95,509
Community Support Program	579,333	-	76,303	655,636
Community Care Organization Services	-	-	-	-
DME / DMS	1,268,404	-	126,893	1,395,297
Home Care Services (OT, PT, ST, Pvt RN)	5,362,081	-	128,588	5,490,669
In Home Intensive Psychotherapy	-	-	-	-
Medical Day Treatment	8,678	-	1,754	10,432
Mental Health Service, AODA - Adult	81,765	-	17,807	99,572
Mental Health Day Treatment - Child/Adolescent	-	-	-	-
MH - AODA Day Treatment	1,323	-	4,186	5,508
Nursing Facility	770,980	-	2,691,937	3,462,917
Personal Care	11,155,047	-	402,132	11,557,179
DD Centers	184,913	-	21,074	205,987
ICF MR Centers	1,368	-	4,970	6,338
Therapy - OT, PT, ST	122,631	-	52,964	175,596
Transportation	138,072	-	56,779	194,850
Non Covered Services in Family Care Benefit	18,182,576	709	4,445,303	22,628,588
<b>Subtotal - MA Card Services</b>	<b>\$ 37,906,985</b>	<b>\$ 709</b>	<b>\$ 8,076,383</b>	<b>\$ 45,984,077</b>
<b>Total Amount Paid</b>	<b>\$ 134,384,265</b>	<b>\$ 10,743</b>	<b>\$ 8,076,383</b>	<b>\$ 142,471,391</b>

<b>Eligible Months</b>	<b>33,654</b>	<b>4</b>	<b>9,180</b>	<b>42,838</b>
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Source: HSRS, CMO Encounter, and Medicaid Claims and Eligibility Data Sets for long-term care expansion.

**Purpose:** This report provides the costs for consumers on a Home and Community-Based Waiver, in Family Care, or on a Wait List for enrollment in a long-term care program included in the data sets released for long-term care expansion. The category of services is defined for the current enrolled/reported Medicaid Program or the fee-for-service Medicaid services that are covered under the Family Care benefit for SFY 2005. This report will support program/budget modeling exercises when combined with utilization data.

**Other Information:** The long-term care service categories map to SPC Codes in the HSRS and CMO Encounter data. The MA Card Services represent the MA Card claims grouped using Family Care Categories of Service (FC COS). For mapping SPC and FC COS codes to service categories, refer to the Technical Appendix. Non Covered Services include primary and acute services that are not included in the Family Care benefit package and remain as a Medicaid fee-for-service benefit. The Capitation service category has not been included in this report. MA card services reported for Family Care enrollees are due to partial month enrollment during SFY 2005.

**Report 16: Cost Report**  
**Service Costs for Primary & Acute MA Card Services for HCBW/COP-R, Wait List, and Family Care**  
**Consumers for SFY 2005**  
**Dane & Rock Counties**

Service Category	HCBW & COP-R	Family Care	Wait List	Total Amount Paid
Inpatient Hospital	\$ 2,335,691	\$ -	\$ 1,503,479	\$ 3,839,171
Emergency Room	95,887	-	36,046	131,932
Outpatient Hospital	893,122	7	416,374	1,309,503
Nursing Home	26	-	128	154
Physician and Physician Clinic	830,951	-	313,217	1,144,167
Mental Health* (e.g. psychiatrist)	700,996	-	155,929	856,925
DME/DMS* (e.g. hearing aides)	206,460	-	5,868	212,327
Drugs	12,148,650	529	1,702,917	13,852,097
Home Care* (e.g. acute care nursing)	551	-	48	598
Lab and Radiology	208,723	-	95,670	304,393
Therapy	85	-	-	85
Dental	143,838	-	19,828	163,666
Transportation* (e.g. ambulance)	157,370	-	35,831	193,201
All Other	460,227	172	159,969	620,368
<b>Total Amount Paid</b>	<b>\$ 18,182,576</b>	<b>\$ 709</b>	<b>\$ 4,445,303</b>	<b>\$ 22,628,588</b>
<b>Eligible Months</b>	<b>33,654</b>	<b>4</b>	<b>9,180</b>	<b>42,838</b>

Source: HSRS, Medicaid Claims, and Eligibility Data Sets for long term-care expansion.

**Purpose:** This report provides a drill down of the costs of Non Covered Services category from the MA card services section in Report 15 for SFY 2005.

**Other Information:** Non Covered Services are primary and acute claim costs not currently included in the Family Care benefit package and remain as a Medicaid fee for service benefit for Family Care enrollees. The service categories are grouped using Clinical Service Groupings (CSG) that are highly summarized from details in the Medicaid Claims Data Set. The Capitation service category is not included in this report. Those participating in Home and Community-Based Waivers are identified in the HSRS data as reported by each county. Consumers currently on the Wait List have been identified by certain LTC SPC codes (see technical appendix). Family Care participants are identified by using the program identifier in the Wisconsin Medicaid Eligibility data set.

\* Services specifically carved out of the Family Care Benefit as ancillary services and/or services related to acute and primary care.

**Report 17: Cost Report**  
**Service Costs for HCBW/COP-R, Family Care, and Wait List Consumers by Target Group for SFY**  
**Dane & Rock Counties**

Service Category	Elderly	Developmentally Disabled	Physically Disabled	Mental Health/AODA	Total Amount Paid
<b>LONG TERM CARE SERVICES</b>					
Adaptive Equipment	\$ 503,023	\$ 646,491	\$ 413,265	\$ 15,110	\$ 1,577,890
Adult Day Activities	490,088	1,625,309	115,000	49,131	2,279,528
Case Management	1,888,566	3,916,894	1,513,195	85,635	7,404,289
Habilitation / Health	234,058	361,880	145,661	4,240	745,839
Home Care	4,762,711	4,512,206	4,166,929	57,579	13,499,425
Home Health Care	-	-	-	-	-
Housing	117,260	39,104	46,505	41,135	244,004
Institutional	-	-	-	-	-
Residential Care	7,058,419	6,975,188	2,647,933	599,390	17,280,930
Respite Care	84,228	424,389	35,642	-	544,259
Transportation	314,830	4,031,732	355,240	26,938	4,728,740
Vocational	49,296	2,796,333	124,379	1,349	2,971,358
Other	1,774,728	40,609,740	2,826,584	-	45,211,052
<b>Subtotal - LTC Services</b>	<b>\$ 17,277,207</b>	<b>\$ 65,939,267</b>	<b>\$ 12,390,335</b>	<b>\$ 880,506</b>	<b>\$ 96,487,314</b>
<b>MA CARD SERVICES</b>					
Case Management	\$ 14,858	\$ 42,348	\$ 17,517	\$ 20,786	\$ 95,509
Community Support Program	32,340	-	81,873	541,423	655,636
Community Care Organization Services	-	-	-	-	-
DME / DMS	296,636	421,753	657,319	19,589	1,395,297
Home Care Services (OT, PT, ST, Pvt RN)*	580,498	1,331,590	3,560,004	18,577	5,490,669
In Home Intensive Psychotherapy	-	-	-	-	-
Medical Day Treatment	-	563	1,410	8,459	10,432
Mental Health Service, AODA - Adult	6,910	50,996	28,266	13,400	99,572
Mental Health Day Treatment - Child/Adolescent	-	-	-	-	-
MH - AODA Day Treatment	-	-	-	5,508	5,508
Nursing Facility	2,147,563	35,756	1,075,402	204,196	3,462,917
Personal Care	1,198,769	7,630,903	2,727,506	-	11,557,179
DD Center	-	205,987	-	-	205,987
ICF MR	-	6,338	-	-	6,338
Therapy - OT, PT, ST	34,678	65,855	72,896	2,167	175,596
Transportation	63,545	26,303	89,668	15,334	194,850
Non Covered Services in Family Care Benefit	4,936,565	6,362,578	8,695,498	2,633,948	22,628,588
<b>Subtotal - MA Card Services</b>	<b>\$ 9,312,363</b>	<b>\$ 16,180,969</b>	<b>\$ 17,007,359</b>	<b>\$ 3,483,387</b>	<b>\$ 45,984,077</b>

Prepared for DHS by The Management Group

October 20, 2006

<b>Total Amount Paid</b>	\$ 26,589,570	\$ 82,120,236	\$ 29,397,693	\$ 4,363,893	\$ 142,471,391
<b>Eligible Months</b>	13,932	17,906	8,560	2,440	42,838

Source: HSRS, CMO Encounter Data, and Medicaid Claims Data in conjunction with LTCFS data sets for long-term care expansion.

**Purpose:** This report provides the costs for consumers on a Home and Community-Based Waiver, in Family Care, or on a Wait List for enrollment in a long-term care program included in the data sets released for long-term care expansion and stratified by target group.

**Other Information:** The long-term care service categories map to SPC Codes in the HSRS and CMO Encounter data. The MA Card Services represent the MA Card claims grouped using Family Care Categories of Service (FC COS). For mapping SPC and FC COS codes to service categories, refer to the Technical Appendix. Target group was identified from the most recent Long-Term Care Functional Screen. If a functional screen was not available, the first Client Characteristic field in HSRS was used to map to a specific target group, see technical appendix. Non Covered Services include primary and acute services that are not included in the Family Care benefit package and remain as a Medicaid fee-for-service benefit. The Capitation service category has not been included in this report.

**Report 18: Cost Report**  
**Service Costs of Primary & Acute MA Card Services for HCBW/COP-R, Wait List, and Family Care**  
**Consumers by Target Group for SFY 2005**  
**Dane & Rock Counties**

Service Category	Elderly	Developmentally Disabled	Physically Disabled	Mental Health/AODA	Total Amount Paid
Inpatient Hospital	\$ 497,311	\$ 514,913	\$ 2,306,343	\$ 520,604	\$ 3,839,171
Emergency Room	10,193	44,649	62,231	14,860	131,932
Outpatient Hospital	304,638	264,863	687,630	52,371	1,309,503
Nursing Home	89	-	66	-	154
Physician and Physician Clinic	201,514	279,516	575,354	87,784	1,144,167
Mental Health* (e.g. psychiatrist)	48,006	64,126	66,066	678,727	856,925
DME/DMS* (e.g. hearing aides)	76,388	94,438	33,524	7,977	212,327
Drugs	3,570,819	4,743,630	4,351,124	1,186,524	13,852,097
Home Care* (e.g. acute care nursing)	16	323	252	7	598
Lab and Radiology	37,417	65,921	173,117	27,939	304,393
Therapy	-	85	-	-	85
Dental	38,077	71,575	47,382	6,632	163,666
Transportation* (e.g. ambulance)	19,283	36,526	127,517	9,875	193,201
All Other	132,816	182,012	264,893	40,647	620,368
<b>Total Amount Paid</b>	<b>\$ 4,936,565</b>	<b>\$ 6,362,578</b>	<b>\$ 8,695,498</b>	<b>\$ 2,633,948</b>	<b>\$ 22,628,588</b>
<b>Eligible Months</b>	<b>13,932</b>	<b>17,906</b>	<b>8,560</b>	<b>2,440</b>	<b>42,838</b>

Source: HSRS, Medicaid Claims, and Eligibility Data Sets in conjunction with LTCFS data sets for long-term care expansion.

**Purpose:** This report provides a drill down of the costs of Non Covered Services category from the MA card services section in Report 17, stratified by target group for SFY 2005.

**Other Information:** Non Covered Services are primary and acute claim costs not currently included in the Family Care benefit package and remain as a Medicaid fee-for-service benefit for Family Care enrollees. The service categories are grouped using Clinical Service Groupings (CSG) that are highly summarized from details in the Medicaid Claims. The Capitation service category is not included in this report. Target group was identified from the most recent Long Term Care Functional Screen. If a functional screen was not available, the first Client Characteristic field in HSRS was used to map to a specific target group.

\* Services specifically carved out of the Family Care Benefit as ancillary services and/or services related to acute and primary care.