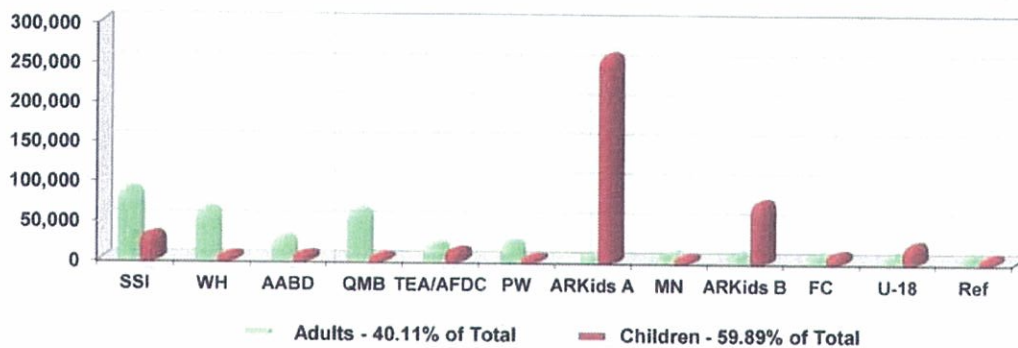


MEDICAID QUARTERLY REPORT MEDICAID ELIGIBLES AND RECIPIENTS SECOND QUARTER - SFY 2012

Eligibles and Recipients by Month

	SFY12			SFY11		
	Eligibles	Recipients	Recipients as % of Eligibles	Eligibles	Recipients	Recipients as % of Eligibles
Oct	667,110	370,584	55.55%	655,594	357,408	54.52%
Nov	664,210	376,279	56.65%	654,166	366,311	56.00%
Dec	675,550	408,264	60.43%	664,747	381,623	57.41%

Average Number of Eligibles per Month (2nd Quarter SFY12) by Aid Category, Adults and Children (including ARKids First and CHIP)



Eligibles (Adults and Children) by Aid Category

(Average for October, November, December 2011)

		Adults	Children	All
SSI	Supplemental Security Income	83,717	29,441	113,158
WH	Women's Health Waiver	60,375	1,230	61,605
AABD	Aid to the Aged, Blind and Disabled	24,212	3,593	27,805
QMB	Qualified Medicare Beneficiary	59,373	20	59,393
TEA/AFDC	Transitional Employment Assistance	15,121	10,440	25,560
PW	Pregnant Women	18,468	0	18,468
ARKids A	Low-Income Children	0	257,348	257,348
MN	Medically Needy	2,507	250	2,757
ARKids B	ARKids First Waiver	4,277	72,387	76,664
FC	Foster Care	247	6,832	7,079
U-18	Under Age 18	5	19,111	19,116
Ref	Refugee	3	0	3
Total Average Eligibles - 2nd Qtr SFY 2012:		268,304	400,652	668,957
Total Average Eligibles - 2nd Qtr SFY 2011:		262,867	395,302	658,169
Percentage of Increase from SFY 2011 to SFY 2012:		2.07%	1.35%	1.64%

Explanation of Monthly Recipient Counts: Recipient counts include individuals who actually received services. Individuals for whom there was a managed care fee claim as part of the Primary Care Provider Program (Connect Care), but for whom there was no actual medical service, are not counted.

Sources: ACES Report IM-2414, OnDemand HMGR325J

MEDICAID QUARTERLY REPORT

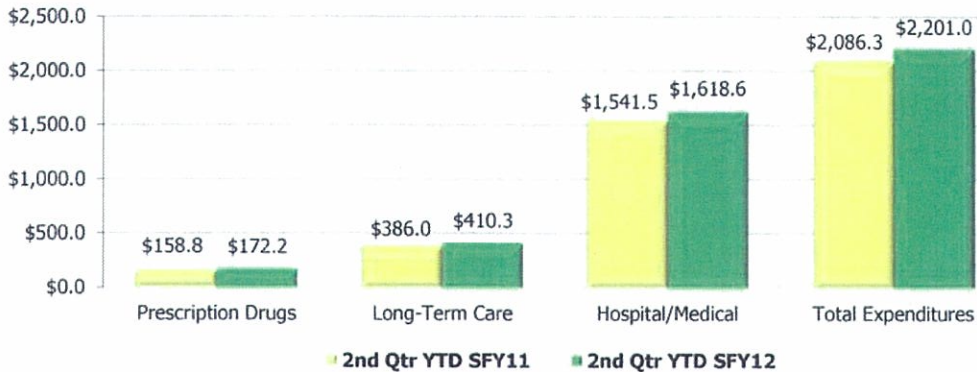
MEDICAID PROGRAM EXPENDITURE DATA - VENDOR PAYMENTS

SECOND QUARTER - SFY 2012

Expenditure Comparison by Appropriation

(Expressed in millions)

Note: Expenditure Comparison by Appropriation based on 26 weeks for both SFY 2011 and SFY 2012.

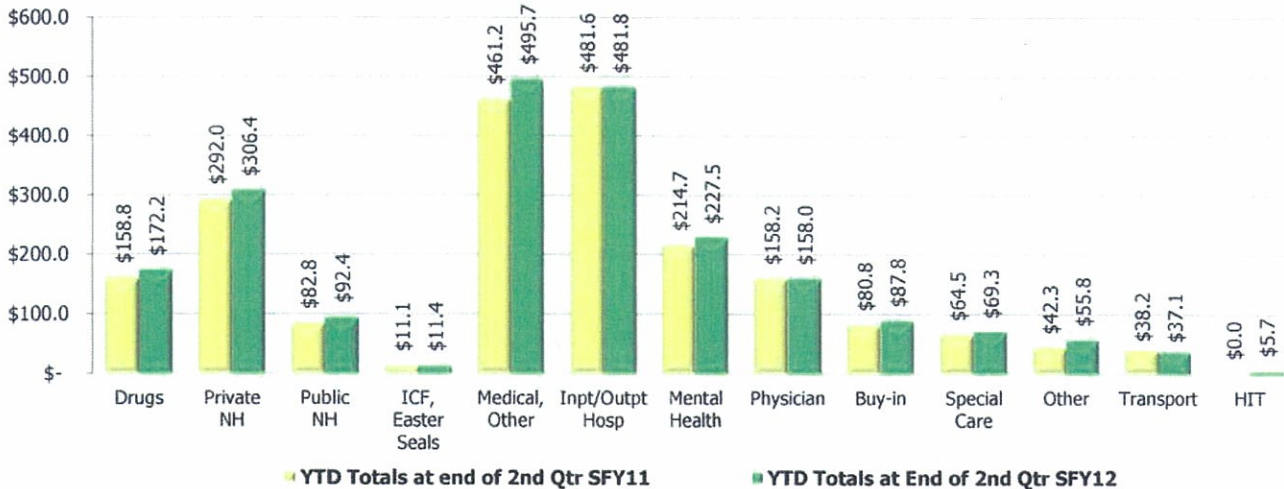


YTD Amounts	Hospital/ Medical	Drugs	Long Term Care	ARKids First	Medical Expansion	TOTAL
% of Budget Spent	97.30%	97.05%	99.13%	103.11%	90.17%	97.65%
Growth Over SFY11	4.58%	7.97%	6.30%	9.61%	26.17%	5.50%

Total Medicaid Expenditures by Category

(Expressed in millions)

Note: Expenditure Comparison based on 26 weeks for both SFY 2011 and SFY 2012.



Actual Trust Fund Usage SFY11:	\$0
Actual Trust Fund Usage this Quarter:	\$0
Actual Trust Fund Usage Year-to-Date SFY12:	\$0
SFY12 Projected Trust Fund Usage per 7/1 Operating Budget:	\$237,287,163
SFY12 Revised Projected Trust Fund Usage 12/30/11 Operating Budget:	\$155,069,319

Source: DHS, DAS, Quarterly Payout Reports

MEDICAID POLICY CHANGES
October - December 2011

Effective Date	Description of Policy Change
10-01-11	The Arkansas Medicaid Program implemented the revisions included in the 2012 International Classification of Diseases, 9 th Revisions, Clinical Modification (ICD-9-CM).
10-15-11	Criteria for audiologists who have contracts or employment with a school district or education service cooperative has been added to the Hearing manual. The Hearing manual has also been updated to list requirements for referring students for audiology services; identify assistive listening devices that Arkansas Medicaid does not cover; to identify codes that are non-payable to a school district or ESC and to add Place of Service code 03 for Public Schools.
11-15-11	The ARKids First-B manual has been updated to include substance abuse treatment services as covered services and to include information regarding substance abuse treatment services procedure codes.

MEDICAID ELIGIBILITY CHANGES
October - December 2011

Effective Date	Description of Eligibility Change
10-01-11	MS 11-17, New Business Process and Policy Revision. Procedure changes to reduce work load.
10-4-11	MS 11-18, Medicare Savings Reevaluation. Establish procedures for completing a SNAP and MSP reevaluation at the same time.
10-27-11	MS 11-19, Estate Recovery: Timeframe for Reporting the Death of a Nursing Facility, ICF/MR or Home and Community Base Waiver Recipient. Timeframe to report the death of a client in a nursing facility, ICF/MR or Home and Community Based Waiver.
10-27-11	MS 11-20, Assisted Living Facilities (ALF). To update the number of slots available for the Assisted Living Program. To incorporate the requirement that an applicant or client must have a physical disability. To incorporate the number of days an ALF applicant has to move into an assisted living facility.