Total Annual Insurance-Related Expenditures by Residence

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For All Ages	_			Total		Per Capita	
Residence Type		sumer Count	Total Expenditures	Authorized Services	Per Capita Expenditures	Authorized Services	Utilized
Out-of-State		0					
Home of Parent or Guardian		350	\$557,508	\$1,377,158	\$1,593	\$3,935	40.5%
Independent Living or Supporte	ed Living	0					
Developmental Center/State H	ospital	0					
Correctional Institution		0					
Community Care Facility (CCF))	0					
ICF Facility & Continous Nursing		0					
Skilled Nursing Facility (SNF)		0					
Foster Home, Children		0					
Family Home, Adults		0					
Psychiatric Treatment Facility		0					
Rehabilation Center		0					
Acute General Hospital		0					
Sub-Acute		0					
Community Treatment Facility		0					
Hospice		0					
Transient/Homeless		0					
Other		0					
	Totals:	350	\$557,508	\$1,377,158	\$1,593	\$3,935	40.5%
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For Birth to age 2 years, incl	usive						
Out-of-State		0	•	•	• • • • •	•	
Home of Parent or Guardian		79	\$103,847	\$271,579	\$1,315	\$3,438	38.2%
Independent Living or Supported Living		0					
Developmental Center/State Hospital		0					
Correctional Institution		0					
Community Care Facility (CCF)		0					
ICF Facility & Continous Nursing		0					
Skilled Nursing Facility (SNF)		0					
Foster Home, Children		0					
Family Home, Adults		0					
Psychiatric Treatment Facility		0					
Rehabilation Center		0					
Acute General Hospital		0					
Sub-Acute		0					
Community Treatment Facility		0					
Hospice		0					
Transient/Homeless		0					
Other		0					
	Totals:	79	\$103,847	\$271,579	\$1,315	\$3,438	38.2%

Total Annual Insurance-Related Expenditures by Residence

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For age 3 years to 21 years, inclusive Consumer		· Total	Total Authorized	Per Capita	Per Capita Authorized	
Residence Type	Count		Services	Expenditures	Services	Utilized
Out-of-State	C)				
Home of Parent or Guardian		\$446,622	\$1,087,739	\$1,673	\$4,074	41.1%
Independent Living or Supported Living						
Developmental Center/State H	lospital C					
Correctional Institution	C					
Community Care Facility (CCF)						
ICF Facility & Continous Nursin	ng C					
Skilled Nursing Facility (SNF)						
Foster Home, Children	C					
Family Home, Adults	C					
Psychiatric Treatment Facility						
Rehabilation Center						
Acute General Hospital						
Sub-Acute	C					
Community Treatment Facility	C					
Hospice	C					
Transient/Homeless	C					
Other	C					
	Totals: 267	\$446,622	\$1,087,739	\$1,673	\$4,074	41.1%
For age 22 years and older						
Out-of-State	C		¢47.040	#4.700	#4.400	00.50/
Home of Parent or Guardian		\$7,040	\$17,840	\$1,760	\$4,460	39.5%
Independent Living or Supported Living						
Developmental Center/State Hospital						
Correctional Institution						
Community Care Facility (CCF)						
ICF Facility & Continous Nursing						
Skilled Nursing Facility (SNF)	C					
Foster Home, Children		1				
Family Home, Adults						
Psychiatric Treatment Facility)				
Rehabilation Center						
Acute General Hospital						
Sub-Acute						
Community Treatment Facility		1				
Hospice						
Transient/Homeless						
Other						
	Totals: 4	\$7,040	\$17,840	\$1,760	\$4,460	39.5%