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Medical Assistance Program

This section summarizes medical-only cases. These cases do not include cash-related medical and are also known as Non-Grant Medical Assistance Programs.

Highlights:

- The average monthly Medical Assistance caseload in SFY 2009 was 560,987.
- Examples of the average monthly composition of the Medical Assistance caseload in SFY 2009 include:
 - Children's Medicaid, a monthly average of 195,160 (or 34.8%)
 - SSI Medicaid, a monthly average of 106,125 (or 18.9%)
 - Medicare Savings Program, a monthly average of 84,368 (or 15.0%)
 - TANF-related Medicaid, a monthly average of 32,418 (or 5.8%)
 - Pregnancy Medicaid, a monthly average of 29,418 (or 5.2%)

Non-Grant Medical Assistance Program Caseload by Categories SFY 2009

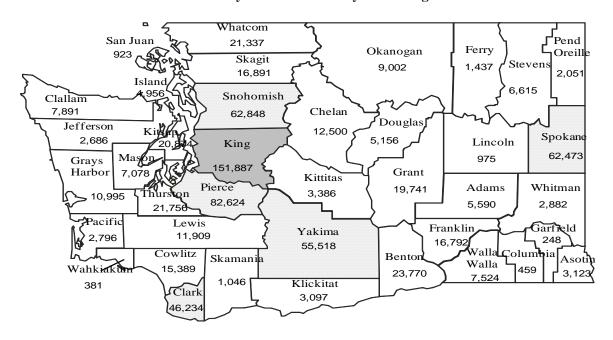
Source: ESA-ACES Data

Program Type	Description	Avg. Monthly Caseload ¹
Children's Medicaid	Children of low-income families (or non-needy relatives) under one year of age. Family income cannot exceed 200% of the Federal Poverty Level (FPL).	195,160
SSI Medicaid	Aged, blind and disabled persons who receive Supplemental Security Income (SSI). The Social Security Administration determines eligibility for SSI using income rules based on Title XVI of the Social Security Act.	106,125
Medicare Savings Program	Programs pay Medicare premiums, coinsurance, and deductibles for low-income Medicare beneficiaries. Income limits vary depending on program from 100% of FPL to 200% of FPL.	84,368
TANF-Related Medicaid	Families eligible for TANF who choose not to receive any cash benefits. Native Americans on Tribal TANF receive TANF-related medical authorized by CSD field staff.	32,418
Pregnancy Medicaid	Low-income pregnant women. Categorically Needy (CN) income limit is 185% of the FPL.	29,418
Newborn Medicaid	Automatic coverage for infants up to one year of age born to women who received Medicaid at the time of birth.	25,823
Post Pregnancy Family Planning Extension	Up to 10 months of automatic family planning coverage when the pregnancy ends.	24,919
Post-TANF Transitional Medicaid	Families automatically eligible for coverage when they leave TANF or TANF-related Medicaid due to increased earnings or child support collections.	22,595
SSI-Related Medicaid	Low-income aged, blind, or disabled persons who do not receive SSI cash benefits.	21,922

¹ Caseload numbers include Regions 1-6, and WASHCAP numbers are included.

Long Term Care	Medical assistance to our most vulnerable populations, such as developmentally disabled individuals, adults and children inpatient psychiatric care, families in need of nursing home assistance, and hospice.	11,894
Healthcare for Workers with Disabilities	Disabled persons who are working and who do not receive SSI. Premium amounts are based on income. Income cannot exceed 220% of the FPL.	1,307
Alien Emergency Medicaid	Federally funded program for immigrants who would qualify for full-scope Medicaid except for their alien status. Coverage is limited to emergency medical condition (pregnancy is not considered an emergency medical condition).	543
Refugee Medical Assistance	Refugees who do not qualify for cash assistance. Eligibility ends after the first eight months of residency in the U.S.	152

Number of Medical Clients by Residential County in Washington State: June 2009

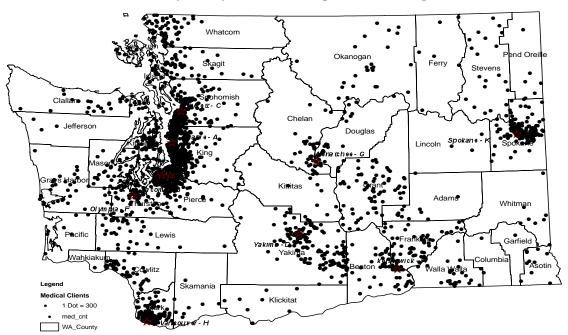


Source: ACES Data as of July 2009

Note: Medical reflects all coverage group codes. If a client is found to be in more than one county during the month (due to transition), then the client would be counted in each county they are found in.

Provided by DSHS/ESA/OS/E-MAPS - Oct. 16, 2009

Number of Medical Clients by Density of Residential Zip Code in Washington State: June 2009



Source: ACES Data as of July 2009
Note: Medical reflects all coverage group codes. If a client is found to be in more than one county during the month (due to transition), then the client would be counted in each county they are found in

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