

Total Annual Insurance-Related Expenditures by Residence

For All Ages

| Residence Type | Consumer Count | Total Expenditures | Total Authorized Services | Per Capita Expenditures | Per Capita Authorized Services | Utilized |
|----------------------------------------|-------------------|-----------------------|---------------------------------|----------------------------|--------------------------------------|----------|
| Out-of-State | 0 | | | | | |
| Home of Parent or Guardian | 93 | \$131,181 | \$176,636 | \$1,411 | \$1,899 | 74.3% |
| Independent Living or Supported Living | 0 | | | | | |
| Developmental Center/State Hospital | 0 | | | | | |
| Correctional Institution | 0 | | | | | |
| Community Care Facility (CCF) | 0 | | | | | |
| ICF Facility & Continuous Nursing | 0 | | | | | |
| Skilled Nursing Facility (SNF) | 0 | | | | | |
| Foster Home, Children | 0 | | | | | |
| Family Home, Adults | 0 | | | | | |
| Psychiatric Treatment Facility | 0 | | | | | |
| Rehabilitation Center | 0 | | | | | |
| Acute General Hospital | 0 | | | | | |
| Sub-Acute | 0 | | | | | |
| Community Treatment Facility | 0 | | | | | |
| Hospice | 0 | | | | | |
| Transient/Homeless | 0 | | | | | |
| Other | 0 | | | | | |
| Totals: | 93 | \$131,181 | \$176,636 | \$1,411 | \$1,899 | 74.3% |

For Birth to age 2 years, inclusive

| | | | | | | |
|----------------------------------------|---|---------|---------|---------|---------|-------|
| Out-of-State | 0 | | | | | |
| Home of Parent or Guardian | 3 | \$5,080 | \$5,530 | \$1,693 | \$1,843 | 91.9% |
| Independent Living or Supported Living | 0 | | | | | |
| Developmental Center/State Hospital | 0 | | | | | |
| Correctional Institution | 0 | | | | | |
| Community Care Facility (CCF) | 0 | | | | | |
| ICF Facility & Continuous Nursing | 0 | | | | | |
| Skilled Nursing Facility (SNF) | 0 | | | | | |
| Foster Home, Children | 0 | | | | | |
| Family Home, Adults | 0 | | | | | |
| Psychiatric Treatment Facility | 0 | | | | | |
| Rehabilitation Center | 0 | | | | | |
| Acute General Hospital | 0 | | | | | |
| Sub-Acute | 0 | | | | | |
| Community Treatment Facility | 0 | | | | | |
| Hospice | 0 | | | | | |
| Transient/Homeless | 0 | | | | | |
| Other | 0 | | | | | |
| Totals: | 3 | \$5,080 | \$5,530 | \$1,693 | \$1,843 | 91.9% |

Total Annual Insurance-Related Expenditures by Residence

For age 3 years to 21 years, inclusive

| Residence Type | Consumer Count | Total Expenditures | Total Authorized Services | Per Capita Expenditures | Per Capita Authorized Services | Utilized |
|----------------------------------------|----------------|--------------------|---------------------------|-------------------------|--------------------------------|----------|
| Out-of-State | 0 | | | | | |
| Home of Parent or Guardian | 90 | \$126,101 | \$171,106 | \$1,401 | \$1,901 | 73.7% |
| Independent Living or Supported Living | 0 | | | | | |
| Developmental Center/State Hospital | 0 | | | | | |
| Correctional Institution | 0 | | | | | |
| Community Care Facility (CCF) | 0 | | | | | |
| ICF Facility & Continuous Nursing | 0 | | | | | |
| Skilled Nursing Facility (SNF) | 0 | | | | | |
| Foster Home, Children | 0 | | | | | |
| Family Home, Adults | 0 | | | | | |
| Psychiatric Treatment Facility | 0 | | | | | |
| Rehabilitation Center | 0 | | | | | |
| Acute General Hospital | 0 | | | | | |
| Sub-Acute | 0 | | | | | |
| Community Treatment Facility | 0 | | | | | |
| Hospice | 0 | | | | | |
| Transient/Homeless | 0 | | | | | |
| Other | 0 | | | | | |
| Totals: | 90 | \$126,101 | \$171,106 | \$1,401 | \$1,901 | 73.7% |

For age 22 years and older

| | | | | | | |
|----------------------------------------|---|--|--|--|--|--|
| Out-of-State | 0 | | | | | |
| Home of Parent or Guardian | 0 | | | | | |
| Independent Living or Supported Living | 0 | | | | | |
| Developmental Center/State Hospital | 0 | | | | | |
| Correctional Institution | 0 | | | | | |
| Community Care Facility (CCF) | 0 | | | | | |
| ICF Facility & Continuous Nursing | 0 | | | | | |
| Skilled Nursing Facility (SNF) | 0 | | | | | |
| Foster Home, Children | 0 | | | | | |
| Family Home, Adults | 0 | | | | | |
| Psychiatric Treatment Facility | 0 | | | | | |
| Rehabilitation Center | 0 | | | | | |
| Acute General Hospital | 0 | | | | | |
| Sub-Acute | 0 | | | | | |
| Community Treatment Facility | 0 | | | | | |
| Hospice | 0 | | | | | |
| Transient/Homeless | 0 | | | | | |
| Other | 0 | | | | | |
| Totals: | 0 | | | | | |