### SoonerCare Fast Facts
November 2008

### TOTAL ENROLLMENT — OKLAHOMA SOONERCARE (MEDICAID)

<table>
<thead>
<tr>
<th>Qualifying Group</th>
<th>Age Group</th>
<th>Enrollment</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aged/Blind/Disabled</td>
<td>Child</td>
<td>16,769</td>
<td>2.73%</td>
</tr>
<tr>
<td>Aged/Blind/Disabled</td>
<td>Adult</td>
<td>121,054</td>
<td>19.74%</td>
</tr>
<tr>
<td>Children/Parents</td>
<td>Child</td>
<td>399,522</td>
<td>65.14%</td>
</tr>
<tr>
<td>Children/Parents</td>
<td>Adult</td>
<td>39,417</td>
<td>6.43%</td>
</tr>
<tr>
<td>Other</td>
<td>Child</td>
<td>601</td>
<td>0.10%</td>
</tr>
<tr>
<td>Other</td>
<td>Adult</td>
<td>16,306</td>
<td>2.66%</td>
</tr>
<tr>
<td>Oklahoma Cares (Breast &amp; Cervical Cancer)</td>
<td></td>
<td>2,622</td>
<td>0.43%</td>
</tr>
<tr>
<td>SoonerPlan (Family Planning)</td>
<td></td>
<td>16,755</td>
<td>2.73%</td>
</tr>
<tr>
<td>TEFRA</td>
<td></td>
<td>239</td>
<td>0.04%</td>
</tr>
</tbody>
</table>

Total Enrollment **613,285**

- Adults **193,880** (32%)
- Children **419,405** (68%)

**OTHER Group** includes—Child custody-Refugee-Qualified Medicare Beneficiary-SLMB-DDSD Supported Living and TB patients. For more information go to www.okhca.org under Individuals then to Programs. Insure Oklahoma members are **NOT** included in the figures above.

Note that all subsequent figures are groups within the above total enrollment numbers (except Insure Oklahoma). SoonerPlan (Family Planning) members are not entitled to the full scope of benefits only family planning services are covered.

The Insure Oklahoma (Oklahoma Employer/Employee Partnership for Insurance Coverage—O-EPIC) is a program to assist qualifying small business owners, employees & their spouses (Employer Sponsored Insurance—ESI) and some individual Oklahomans (Individual Plan—IP) with health insurance premiums. [www.insureoklahoma.org](http://www.insureoklahoma.org)

### SCHIP Breakdown of Total Enrollment

Members qualifying for SoonerCare (Medicaid) eligibility under the SCHIP program are under age 19 and have income between the maximum for standard eligibility and the expanded 185% of Federal Poverty Level (FPL) income guidelines.

<table>
<thead>
<tr>
<th>Age Breakdown</th>
<th>% of FPL</th>
<th>SCHIP Enrollees</th>
</tr>
</thead>
<tbody>
<tr>
<td>INFANT</td>
<td>150% to 185%</td>
<td>1,449</td>
</tr>
<tr>
<td>01-05</td>
<td>133% to 185%</td>
<td>12,174</td>
</tr>
<tr>
<td>06-12</td>
<td>100% to 185%</td>
<td>31,003</td>
</tr>
<tr>
<td>13-18</td>
<td>100% to 185%</td>
<td>19,131</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td><strong>63,757</strong></td>
</tr>
</tbody>
</table>

### Delivery System Breakdown of Total Enrollment

- SoonerCare Traditional (Fee-For-Service), 193,157, 31%
- SoonerPlan Choice, 403,733, 66%
- SoonerCare, 16,755, 3%

### Other Enrollment Facts

Unduplicated enrollees State Fiscal Year-to-Date (July through report month including O-EPIC) — **701,817**

### Other Breakdowns of Total Enrollment

- Oklahoma SoonerCare (Medicaid) members residing in a long-term care facility — **16,086**
- Oklahoma persons enrolled in both Medicare and Medicaid (dual eligibles) — **97,456**

* The counting method for the dual eligibles has changed to be more in line with our federal reporting.

### Race Breakdown of Total Enrollment

- American Indian: 57,106 (18,071, 12%)
- Asian or Pacific Islander: 4,986 (2,417, 1%)
- Black or African American: 65,728 (26,677, 15%)
- Caucasian: 283,779 (145,514, 70%)
- Multiple Races: 7,806 (1,201, 1%)
- Hispanic Ethnicity: 60,931 (9,143, 11%)

### Age Breakdown of Total Enrollment

- Children Age 18 and Under, 66%: 407,317
- Adults Age 19 to 64, 25%: 149,878
- Adults Age 65 and Over, 9%: 56,090

Data was compiled on 12/15/2008. Numbers frequently change due to certifications occurring after the data is extracted and other factors. This report is based on data within the system prior to 12/15/2008. A majority of the data is a "point in time" representation of the specific report month and is not cumulative. Unless stated otherwise, CHILD is defined as an individual under the age of 21.
November 25, 2008

Contact: Jo Kilgore, Public Information Manager, (405) 522-7474.

Long-Term Care Partnership Policies May Ease the Transition to Long-Term Care

OKLAHOMA CITY – The Oklahoma Health Care Authority is encouraging Oklahomans to plan ahead for their long-term care needs, and the holidays – when families get together – might be the perfect opportunity to do so.

November has been proclaimed as “Long-Term Care Awareness Month” by Gov. Brad Henry, recognizing the importance of planning for a person’s long-term care.

“The last thing that anyone should be worrying about when they become dependent on others is where the money for their care will come from,” said Cassell Lawson, Opportunities for Living Life director at the Oklahoma Health Care Authority.

SoonerCare (Oklahoma Medicaid) pays for approximately 70 percent of Oklahomans’ nursing home care, but relying on the state to pay for long-term care needs is not always the best option, Lawson said. “If SoonerCare is a person’s only source to pay for long-term care, he or she may have to exhaust all their current assets after working so hard to earn them.”

A new option, the Oklahoma Long-Term Care Partnership (OLTCP) policy, might be one avenue to consider, he said. Oklahomans who purchase an OLTCP policy can protect assets equal to the amount of benefits paid by the policy. Once the benefits of the OLTCP policy are exhausted, the state will disregard assets equal to the benefits paid by the policy, and allow the insured to qualify for SoonerCare as long as they meet all other necessary eligibility requirements.

A person who has more than $2,000 in assets without an OLTCP policy would have to completely liquidate all of those additional assets to pay for their long-term care before SoonerCare will pay for any of their long-term care needs.

People must still qualify for SoonerCare under state income and functional eligibility criteria. Functional eligibility looks at how well people can carry out routine activities and care for themselves on a daily basis.

Families should start preparing early for long-term care so that if they do eventually need it, they will have a reliable plan in place, Lawson said. People can begin thinking about their long-term care needs as early as their 20s.

“Premiums rise with age and on average double every 10 years,” he said. “In Oklahoma, if you bought a policy at age 50, your total premium cost over 30 years would cost less than one year of long-term care in 2008.”

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