

Chapter 16: Medicaid Recipients, Services, Utilization, and Program Payments

by Herbert A. Silverman

Introduction

This chapter examines the Medicaid experience for fiscal year (FY) 1991. It describes, compares, and contrasts the distribution of recipients, services used, and program payments by jurisdiction, basis of eligibility, and selected demographic characteristics (such as age, sex, and race or ethnicity). Data are presented first for recipients (persons who received Medicaid-covered services), then for use of Medicaid-covered services, and finally for program payments.

To provide a context for and a perspective to the details in this chapter, bear in mind the following salient facts about the Medicaid experience in FY 1991.

- Almost \$77 billion in program payments were made for claims submitted for services furnished to almost 28 million recipients, an average payment per recipient of \$2,752.
- The largest eligibility group was low income families which accounted for 71.3 percent of all recipients. Children in this group constituted 47.3 percent of the recipients and adults 24.0 percent.
- Children under 21 years of age constituted 52.2 percent of all recipients, but only 21.5 percent of program payments. Children can be found among the blind and disabled as well as low income families. Pregnant women and mothers under 21 years of age are classified as adults in the low income families eligibility group.
- Persons in the blind and disabled eligibility group accounted for 14.4 percent of the recipients but 36.7 percent of program payments.
- Persons 65 years of age or over constituted 14.6 percent of the recipients and accounted for 36.0 percent of program payments.
- Women constituted 63.8 percent of the recipients (prototypically, as pregnant women or head of household in low income families, or as an aged resident of a nursing home) and accounted for 64.6 percent of program payments.
- White people made up 52.7 percent of the recipients and accounted for 67.4 percent of program payments; the comparable figures for black people were 30.0 and 23.4 percent.
- The bulk of program payments went to institutional facilities and for long-term care needs of recipients: Nursing facilities (i.e. nursing homes) received \$20.7 billion, inpatient hospitals received \$19.9 billion, and intermediate care facilities for the mentally retarded (ICF/MR) received \$7.7 billion. These payments accounted for 63 percent of the total.

- Medicaid jurisdictions vary widely in the number and distribution of recipients by eligibility group and demographic characteristics. This reflects the options available to the individual jurisdictions to determine the eligibility criteria for Medicaid benefits. Nine jurisdictions had more than 1 million recipients, accounting for 55 percent of all recipients.
- Payments vary widely among the jurisdictions in the amount and distribution of payments by type of service, basis of eligibility, and recipient demographic characteristics. Five States had program payments of more than \$3 billion and accounted for 41 percent of total payments. New York alone accounted for 18 percent of program payments.

Sources and limitations of the data

The data used in this chapter come from reports submitted by the individual jurisdictions in the Health Care Financing Administration (HCFA Form-2082) (Pine, Baugh, and Clauser, 1993). Rather than representing services rendered in FY 1991, the data represent the recipients of services and payments on claims adjudicated in FY 1991 and reported to HCFA as of June 1, 1992. The payments reported in HCFA Form-2082 exclude Medicare Part A and Part B premiums paid by the States for dually enrolled persons, premiums paid for Medicaid enrollees in capitation plans (e.g., health maintenance organizations [HMO]), payments for program administration and training, and lump sum payments to disproportionate share hospitals (DSH). These are hospitals that receive higher Medicaid payments than others because they treat a disproportionate share of Medicaid patients. States determine if hospitals meet the criteria to be considered a DSH and establish a formula to calculate the amount of payment.

The counts of recipients shown in the accompanying tables constitute all persons identified as having a Medicaid payment made on their behalf during FY 1991. Although persons receiving Medicaid benefits were eligible to receive Medicaid-covered services, not all eligible persons did so or had payments made on their behalf during FY 1991. Indeed the number of those eligible was greater than of those actually receiving services. In FY 1991, HCFA Form-2082 did not permit identification of eligible persons if they did not receive services for which program payments were made. For this reason, rates based on the number of eligibles could not be computed. The definitions of eligibility groups and covered services used in this chapter are those described in earlier chapters of this issue by Gurny, Baugh, and Davis, and by Pine, Baugh, and Clauser.

The total amount of program payments reported in FY 1991 through HCFA Form-2082 is \$77 billion, differing from the \$90 billion reported by the HCFA Form-64 reporting system, "Quarterly Medicaid Statement of Expenditures for the Medical Assistance Program." The latter is an accounting statement of actual expenditures made by the States for which they are entitled to receive Federal payments under title XIX for the reporting quarter. This system reports expenditures excluded from the HCFA Form-2082 and adjustments for any identified overpayments or underpayments included in earlier reports. Among the more significant items included in HCFA Form-64 which are not reflected in HCFA Form-2082 are lump sum payments to DSH, and the effects of using provider taxes and donations which allow net State expenditures to be reduced by increasing Federal assistance payments (Buck and Klemm [1993] discuss HCFA Form-64 in greater detail).

Because of the number of individual sections constituting HCFA Form-2082, the extent and complexity of the data reported, and differences among the jurisdictions in the way data elements are defined and reported, inconsistencies in the data were present within and among jurisdictions. (Under waivers granted through Federal demonstration authority, Arizona administers a health care program for the poor funded primarily through capitation payments. Since capitation payments are excluded from HCFA Form-2082, the data in this chapter do not include Arizona's experiences.) This affected the reported totals and the distributions among the elements constituting the totals. To reconcile differences, reporting forms showing the greatest internal consistencies were used as control counts to which the data in other forms were compared or adjusted in the manner indicated by judgment. "Unknowns" reported for eligibility groups or demographic characteristics were distributed in the same ratio as known groups or characteristics.

Inconsistencies and the need to distribute unknowns was most pronounced for race and ethnicity data. Jurisdictions differ in their recording of race or ethnicity data. The difficulties with these data arise from the ambiguity introduced by the fact that a Hispanic person could also be identified by a race category. This will be amplified in relation to the discussion of the data in the tables.

The Medicaid programs in Puerto Rico and the Virgin Islands operate under arrangements different from those prevailing in the 50 States and the District of Columbia. Since 1967, these territories have operated under a cap on Federal matching payments established annually by Congress. In addition, Puerto Rico is exempt from the recipient freedom of choice requirement. Recipients are required to use services furnished by hospitals and clinics operated by the Department of Health which is also the Medicaid agency. In the Virgin Islands, all services are provided through public health facilities unless prior authorization is received. Many Medicaid-covered services available in the States were not, in FY 1991, provided to residents of Puerto Rico and the Virgin

Islands (e.g., nursing facility services). For these reasons, the patterns of service utilization and expenditures in Puerto Rico and the Virgin Islands differ notably from those in the States and the District of Columbia (Schiro, 1992; Pagan-Berlucchi and Muse, 1983). Although the data from Puerto Rico and the Virgin Islands are included in the accompanying tables, the discussion will not highlight the differences of their FY 1991 experiences from the other jurisdictions.

As discussed by Pine, Baugh, and Clauser (1993), the distinction between skilled nursing facilities (SNF) and intermediate care facilities other than those for the mentally retarded (ICF-other) was removed in FY 1991 as mandated by the Omnibus Budget Reconciliation Act (OBRA) of 1987. These facilities are now referred to as nursing facilities (NF). In this chapter, the services received in nursing homes are reported as NF services. Despite the elimination of the distinction between SNF and ICF services, nine States continued to report them separately. For the purposes of presenting the data, the totals were combined for these nine States. This could distort the count of persons receiving one or the other of the services. This will be amplified in the discussion of the data in Table 16.3.

Distribution of Medicaid recipients

The distribution of Medicaid recipients by eligibility group is shown in Table 16.1. The table lists the jurisdictions in rank order by total number of recipients. In FY 1991, almost 28 million persons received Medicaid-covered services. California had the largest number of recipients (4.02 million), far outdistancing the State with the next highest total, New York (2.46 million). Seven other jurisdictions had more than 1 million recipients: Texas, Ohio, Pennsylvania, Florida, Puerto Rico, Illinois, and Michigan. Together, these 9 jurisdictions accounted for 55.4 percent of all Medicaid recipients in FY 1991.

The largest number of recipients was in the eligibility group of low income families which includes adults and children receiving assistance to families of dependent children. As noted in previous chapters (Gurny, Baugh, and Davis, 1993) eligibility criteria vary from jurisdiction to jurisdiction. During FY 1991, 71.3 percent of the persons receiving Medicaid benefits were enrolled in this eligibility group.

The children in low income families constituted 47.3 percent of all recipients. In 9 jurisdictions, low income children constituted more than 50 percent of the recipients: Texas, Ohio, Illinois, Michigan, New Mexico, Utah, District of Columbia, Alaska, and Wyoming. In 5 jurisdictions, low income children constituted less than 40 percent of the recipients: Wisconsin, Alabama, Arkansas, Rhode Island, and Montana.

The blind and disabled constituted the next largest group of recipients, 14.4 percent of the total. In 5 jurisdictions, they constituted 20 percent or more of the recipients: Alabama, South Carolina, Arkansas, Connecticut, and Rhode Island; in 5 jurisdictions, they constituted less than 10 percent of the recipients: Texas, Minnesota, Utah, Alaska, and Wyoming.

Table 16.1
Number and percent distribution of Medicaid recipients, by eligibility groups, jurisdiction,
and rank order: Fiscal year 1991

Jurisdiction	Number of recipients in thousands	Percent of total	Cumulative percent of total	Eligibility group ¹				
				Aged	Blind and disabled	Low income families		Other title XIX
						Children	Adults	
Percent distribution								
All jurisdictions	27,966.6	100.0	—	11.9	14.4	47.3	24.0	2.4
California	4,019.1	14.4	14.4	11.4	14.6	44.0	28.2	1.8
New York	2,461.5	8.8	23.2	13.6	14.3	44.5	20.2	7.4
Texas	1,728.6	6.2	29.4	14.1	9.5	52.6	23.7	0.0
Ohio	1,299.3	4.6	34.0	9.1	12.3	54.0	23.9	0.8
Pennsylvania	1,277.4	4.6	38.6	10.6	15.2	46.4	23.5	4.3
Florida	1,248.9	4.5	43.0	14.0	14.8	46.6	22.8	1.8
Puerto Rico	1,201.2	4.3	47.3	0.0	4.5	65.5	30.0	0.0
Illinois	1,144.3	4.1	51.4	8.0	16.2	50.9	23.5	1.5
Michigan	1,112.5	4.0	55.4	7.7	13.7	50.7	27.9	0.0
Georgia	746.2	2.7	58.1	12.5	17.3	45.0	23.3	1.9
Tennessee	697.4	2.5	60.6	12.8	19.7	46.2	19.8	1.5
North Carolina	667.2	2.4	62.9	16.5	12.2	45.4	26.0	0.0
Massachusetts	651.1	2.3	65.3	14.8	17.5	45.2	21.7	0.9
Louisiana	640.6	2.3	67.6	14.2	15.1	49.0	21.7	0.0
New Jersey	614.1	2.2	69.8	12.2	15.9	47.0	23.2	1.7
Kentucky	525.5	1.9	71.6	10.9	19.5	41.8	23.1	4.8
Washington	506.3	1.8	73.4	9.4	13.3	42.8	28.3	6.2
Missouri	503.3	1.8	75.2	15.2	13.7	45.0	24.7	1.4
Mississippi	469.7	1.7	76.9	14.5	18.6	48.0	18.7	0.2
Virginia	442.1	1.6	78.5	16.4	15.5	45.4	22.7	0.0
Minnesota	421.7	1.5	80.0	12.9	9.9	49.9	24.8	2.6
Wisconsin	415.9	1.5	81.5	15.9	19.4	39.7	18.7	6.4
Indiana	415.2	1.5	83.0	11.7	15.4	47.1	25.1	0.7
Alabama	403.3	1.4	84.4	17.0	22.5	39.2	19.8	1.6
South Carolina	375.2	1.3	85.8	14.7	20.1	43.8	21.4	0.0
Maryland	362.5	1.3	87.1	12.1	15.1	49.0	21.8	1.9
Oklahoma	304.7	1.1	88.2	17.6	12.6	47.1	22.3	0.3
Arkansas	284.7	1.0	89.2	16.1	20.6	34.5	17.2	11.5
West Virginia	283.7	1.0	90.2	10.5	14.9	43.0	30.9	0.8
Connecticut	271.9	1.0	91.2	15.8	25.2	NA	NA	12.3
Oregon	263.3	0.9	92.1	10.0	11.8	49.9	28.3	0.0
Iowa	261.4	0.9	93.0	14.2	13.9	41.2	24.7	6.1
Colorado	223.4	0.8	93.8	14.2	13.7	45.1	25.2	1.8
Kansas	209.3	0.7	94.6	11.8	11.5	47.3	27.0	2.4
Rhode Island	163.7	0.6	95.2	18.4	20.3	39.4	21.1	0.8
New Mexico	162.0	0.6	95.8	8.6	15.2	54.8	21.4	0.0
Maine	150.6	0.5	96.3	14.3	16.5	41.1	24.0	4.1
Nebraska	133.8	0.5	96.8	13.7	11.6	44.8	21.4	8.5
Utah	129.3	0.5	97.2	6.5	9.9	51.1	29.6	2.9
District of Columbia	100.1	0.4	97.6	11.4	15.2	50.7	22.6	0.1
Hawaii	91.2	0.3	97.9	14.0	10.1	48.0	24.8	3.1
Vermont	70.7	0.3	98.2	14.9	13.1	44.2	27.0	0.8
Idaho	70.1	0.3	98.4	10.8	15.0	49.0	24.4	0.7
Montana	63.6	0.2	98.6	11.7	17.0	34.9	19.8	16.6
New Hampshire	59.7	0.2	98.9	19.6	13.6	47.9	18.4	0.5
Nevada	59.3	0.2	99.1	14.0	14.6	44.6	23.8	3.0
South Dakota	57.1	0.2	99.3	16.1	15.7	46.7	21.4	0.0
North Dakota	52.5	0.2	99.5	19.7	12.5	41.0	21.5	5.3
Alaska	51.3	0.2	99.6	6.6	8.6	55.1	29.7	0.0
Delaware	50.7	0.2	99.8	9.9	14.8	49.0	23.7	2.6
Wyoming	36.8	0.1	100.0	8.3	8.7	54.7	26.5	1.8
Virgin Islands	11.7	0.0	100.0	9.6	6.8	53.5	25.1	4.9

¹The percent sum of eligibility groups may exceed 100 percent because a recipient may be counted in more than one eligibility group.

NOTE: NA denotes not available.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Persons eligible by reason of being poor and 65 years of age or over constituted only 11.9 percent of the Medicaid recipients. As will be noted later, persons 65 years of age or over who are enrolled in the aged eligibility group do not constitute all the persons 65 years or over receiving Medicaid-covered services. Some may have become eligible as blind or disabled, or as members of low income families. Further, the reader should bear in mind that the Medicare program is the primary public source of payments for health care services to the aged. The Medicaid program becomes an important payment source for health care services to the aged usually in relation to the need for chronic long-term nursing home care, a benefit not provided by Medicare. In 9 jurisdictions, the aged category constituted more than 16 percent of the recipients: North Dakota, New Hampshire, Rhode Island, Oklahoma, Alabama, North Carolina, Virginia, Arkansas, and South Dakota. This category constituted less than 10 percent of the recipients in Alaska, Delaware, Illinois, Michigan, New Mexico, Ohio, Utah, Washington, and Wyoming.

Medicaid recipients by demographic characteristics

The distribution of Medicaid recipients by age, sex, and race is shown in Table 16.2. The majority of recipients were under 21 years of age, reflecting the preponderance of recipients who were eligible as members of low income families. However, the percentage of children among the recipients shown in Table 16.2 is larger than the percentage of recipients who qualify as children in low income families in Table 16.1. Among the reasons for this apparent discrepancy are that some children are eligible because of blindness or disability, and some women under 21 are categorized as adults in low income families if they have children or are pregnant. When the data are recast on the basis of age, in most jurisdictions children under 21 years of age constitute 50 percent or more of the recipients. The highest was Wyoming at 60.2 percent. The jurisdictions in which persons under 21 years of age constituted less than 50 percent of the recipients were Alabama, Florida, Maine, Massachusetts, Montana, New Hampshire, North Dakota, Vermont, and Wisconsin.

Recipients 65 years of age or over constituted 14.6 percent of all recipients. This is greater than the percent eligible as aged in Table 16.1. Persons 65 years of age or over may be eligible on bases other than age, such as blindness, disability, or as an adult in a low income family. Thus, they are distributed among other eligibility categories. The 6 jurisdictions with the highest percentage of recipients 65 years or over were Florida, Alabama, North Dakota, Wisconsin, South Carolina, and Oklahoma—each with more than 18 percent. The aged were less than 10 percent of the recipients in Alaska, Michigan, Utah, and Wyoming.

The recipients of Medicaid are preponderantly female. This is not surprising inasmuch as the modal low income family eligible to receive Medicaid-covered services is headed by a single mother. In addition,

eligibility is explicitly extended to pregnant women. Among individual jurisdictions, female recipients range narrowly around the national average of 63.8 percent.

As previously mentioned, the data on the distribution of recipients by race or ethnicity should be interpreted with caution. Aside from reporting errors, the classification of Hispanics may be made by race (i.e., white or black person) as well as by the ethnic category, Hispanic. Race and ethnicity data for Puerto Rico were not reported. Though one might expect that a major portion of the Puerto Ricans might be Hispanic, this does not shed light on the distribution by race. The more extreme distributions shown in Table 16.2 seem to reflect the population distribution of the jurisdiction. Examples are that 76.4 percent of the recipients in Hawaii were Asian or Pacific Islander; more than 95 percent of the recipients were white people in Montana, New Hampshire, Vermont, and West Virginia; and the high percentage of American Indian or Alaskan Native reported in Alaska and North and South Dakota.

Health services by type and jurisdiction

The percent of recipients using selected Medicaid-covered services is shown by jurisdiction in Table 16.3. Recipient counts for each type of service are unduplicated. A recipient who received a given service more than one time was counted only once as a recipient of that service. Thus, a person with two inpatient hospitalizations was counted only once as a recipient of inpatient hospital services. This method was applied for each individual type of service. However, in the total of recipients, the person was counted only once no matter how many types of service were used. That is why the sum of percentages for individual services is greater than 100.

Physician services (68.4 percent) and prescriptions (70.0 percent) were used by the largest number of recipients. Prescriptions may be obtained in settings other than physicians' offices (e.g., hospital outpatient departments, clinics, and rural health clinics) or from other professionals (e.g., dentists and nurse practitioners in certain States). About one-half of the recipients used hospital outpatient services at least once. Inpatient hospital services were used by 17.9 percent of the recipients.

There were wide differences among the jurisdictions in the percent of recipients using the different services. Jurisdictional variations in the patterns of use may reflect differences in the eligibility criteria, coverage of services, health and demographic characteristics of the recipients, local practices and organization of medical services, and access to services.

The data for the use of NF services shown in Table 16.3 and subsequent tables combine what, in previous years, used to be defined as SNF and ICF-other services. Although the distinction between these services was removed as of October 1, 1990 (the beginning of FY 1991), HCFA Form-2082 retained the distinction between them. Nine States continued to report these services separately. The impact on the data is noted in the footnotes to Table 16.3. Nationally, 5.3 percent of

Table 16.2
Percent of Medicaid recipients, by age, sex, race or ethnic origin, and jurisdiction:
Fiscal year 1991

Jurisdiction	Number of recipients in thousands	Age			Sex		Race or ethnic origin ¹				
		Under 21 years	21-64 years	65 years or over	Male	Female	White	Black	American Indian or Alaskan native	Asian or Pacific Islander	Hispanic
		Percent distribution									
All jurisdictions	27,966.6	52.2	33.2	14.6	36.2	63.8	52.7	30.0	1.0	2.6	13.8
Alabama	403.3	47.9	30.4	21.7	33.3	66.7	42.8	56.8	0.1	0.2	0.1
Alaska	51.3	58.8	34.4	6.8	36.9	63.1	52.4	7.2	34.9	3.1	2.4
Arkansas	284.7	51.7	30.6	17.7	35.0	65.0	69.5	30.1	0.1	0.1	0.3
California	4,019.1	50.4	35.3	14.3	37.5	62.5	40.2	15.0	0.5	9.9	34.4
Colorado	223.4	53.8	31.7	14.5	34.6	65.4	55.3	10.7	1.0	1.7	31.3
Connecticut	271.9	53.0	31.1	15.9	35.0	65.0	46.7	24.5	0.1	0.9	27.7
Delaware	50.7	57.1	31.6	11.2	34.8	65.2	41.6	52.7	0.2	0.2	5.3
District of Columbia	100.1	54.8	33.2	12.1	35.7	64.3	2.1	97.9	0.0	0.0	0.0
Florida	1,248.9	40.4	37.8	21.9	35.0	65.0	48.5	38.7	0.1	0.4	12.4
Georgia	746.2	52.1	31.5	16.4	33.9	66.1	39.7	59.3	0.0	0.3	0.7
Hawaii	91.2	53.6	31.1	15.3	39.2	60.8	16.1	1.0	5.3	76.4	1.3
Idaho	70.1	57.2	31.1	11.7	35.4	64.6	88.0	0.4	2.5	0.3	8.8
Illinois	1,144.3	55.1	34.7	10.2	36.4	63.6	41.7	45.8	0.1	1.4	11.0
Indiana	415.2	52.5	33.3	14.3	34.7	65.3	73.0	24.6	0.1	0.3	2.1
Iowa	261.4	51.2	33.5	15.4	36.7	63.3	90.0	7.1	0.6	0.9	1.5
Kansas	209.3	53.1	34.7	12.2	38.0	62.1	71.4	20.2	1.3	2.3	4.8
Kentucky	525.5	50.0	35.7	14.2	37.3	62.7	86.3	13.5	0.1	0.0	0.1
Louisiana	640.6	56.4	29.4	14.2	35.8	64.2	32.6	67.4	0.0	0.0	0.0
Maine	150.6	48.1	35.5	16.5	36.0	64.0	NA	NA	NA	NA	NA
Maryland	362.5	52.2	33.9	13.9	34.6	65.4	41.3	55.7	0.2	1.7	1.3
Massachusetts	651.1	48.9	33.5	17.6	36.0	64.0	67.3	12.8	0.2	3.2	16.6
Michigan	1,112.5	53.9	36.7	9.4	37.3	62.7	62.3	33.1	0.5	0.9	3.2
Minnesota	421.7	53.9	31.7	14.4	38.6	61.4	75.2	9.8	5.3	5.8	3.8
Mississippi	469.7	55.5	27.1	17.4	34.5	65.5	29.1	70.3	0.2	0.4	0.1
Missouri	503.3	51.0	32.6	16.4	35.6	64.4	69.5	30.4	0.1	0.0	0.0
Montana	63.6	49.2	36.9	14.0	38.2	61.8	99.7	0.0	0.0	0.1	0.2
Nebraska	133.8	57.0	29.1	14.0	37.5	62.5	75.4	15.0	4.2	0.9	4.6
Nevada	59.3	53.5	31.8	14.7	34.8	65.2	65.1	23.5	2.1	1.2	8.1
New Hampshire	59.7	49.8	33.3	16.9	35.1	64.9	95.9	0.9	0.0	1.8	1.4
New Jersey	614.1	52.2	32.6	15.2	35.2	64.8	35.0	41.9	0.3	0.6	22.2
New Mexico	162.0	57.3	30.8	11.8	36.6	63.4	37.1	3.9	10.1	0.7	48.1
New York	2,461.5	53.6	31.4	15.1	36.1	63.9	44.7	30.7	0.3	1.1	23.2
North Carolina	667.2	51.2	32.1	16.8	33.4	66.6	45.6	51.1	2.3	0.3	0.8
North Dakota	52.5	48.3	31.5	20.3	37.3	62.7	76.5	0.7	21.2	0.8	0.9
Ohio	1,299.3	56.2	33.6	10.2	36.7	63.3	69.3	28.2	0.3	0.3	1.9
Oklahoma	304.7	51.3	30.5	18.2	34.4	65.6	68.4	19.4	9.1	0.5	2.6
Oregon	263.3	55.6	33.7	10.8	36.9	63.1	84.0	5.8	6.3	1.8	2.2
Pennsylvania	1,277.4	52.3	35.7	11.9	37.8	62.2	60.7	31.1	0.1	1.3	6.9
Rhode Island	163.7	50.5	33.8	15.7	36.0	64.0	NA	NA	NA	NA	NA
South Carolina	375.2	50.5	30.7	18.8	34.1	65.9	36.8	62.7	0.1	0.1	0.3
South Dakota	57.2	53.3	28.9	17.8	36.1	63.9	66.8	0.1	33.1	0.0	0.0
Tennessee	697.4	51.3	32.7	16.0	36.0	64.0	64.9	34.5	0.1	0.3	0.2
Texas	1,728.6	59.0	27.0	14.0	35.7	64.3	33.7	24.1	0.2	0.8	41.2
Utah	129.3	59.5	33.4	7.1	36.0	64.0	81.2	1.6	5.4	2.9	8.9
Vermont	70.7	48.8	36.0	15.2	39.0	61.0	99.0	0.4	0.2	0.3	0.1
Virginia	442.1	51.7	31.4	17.0	34.7	65.4	47.7	49.2	0.1	1.6	1.4
Washington	506.3	51.7	38.0	10.4	36.9	63.1	76.9	7.3	4.1	2.8	9.0
West Virginia	283.7	52.8	35.3	12.0	37.1	62.9	95.3	4.6	0.0	0.0	0.0
Wisconsin	415.9	46.2	34.8	19.0	37.0	63.0	75.8	12.2	3.8	4.4	3.9
Wyoming	36.8	60.2	31.4	8.4	35.0	65.0	79.3	2.1	5.8	3.1	9.7
Puerto Rico	1,201.2	50.5	33.8	15.7	36.0	64.0	NA	NA	NA	NA	NA
Virgin Islands	11.7	59.5	30.0	10.5	33.1	66.9	0.8	77.9	0.0	0.2	21.0

¹The race or ethnic origin of a significant number of recipients in some reporting States was unknown. The Bureau of Data Management and Strategy estimated recipients by race or ethnic origin for these States. Hispanic persons could also be reported as white or black. Data by race or ethnic origin, therefore, should be used with caution.

NOTE: NA denotes not available.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Table 16.3

Percent of Medicaid recipients using specified types of service, by jurisdiction: Fiscal year 1991

Jurisdiction	Number of recipients in thousands	Type of service													
		Inpatient hospital	Inpatient mental health ¹	Nursing facility ²	ICF/MR	Physicians	Dental	Other practitioners	Out-patient hospital	Clinic	Laboratory and radiological	Home health	Prescribed drugs	Family planning	Other ³
All jurisdictions	27,966.6	17.9	0.2	5.3	0.5	68.4	18.5	15.3	50.2	12.4	37.1	2.9	70.0	7.8	20.9
Alabama	403.3	15.8	0.1	5.0	0.3	77.5	11.1	11.2	36.1	5.6	27.2	3.2	72.5	8.6	17.3
Alaska ⁴	51.3	15.7	1.1	2.4 ⁵	0.2	70.9	28.9	14.4	41.5	7.1	13.9	3.5	56.4	3.2	27.9
Arkansas	284.7	24.9	0.4	7.3	0.6	79.8	11.7	16.7	44.5	10.5	31.8	4.9	76.8	5.4	21.7
California	4,019.1	15.5	0.0	2.9	0.2	70.7	2.1	17.8	44.8	11.7	42.0	0.7	74.8	5.7	17.6
Colorado	223.4	15.2	0.5	7.0	0.5	72.5	15.3	7.2	44.3	14.1	31.2	3.4	70.6	10.5	32.1
Connecticut ⁴	271.9	17.5	0.4	10.6 ⁶	0.6	65.9	34.0	28.1	59.1	20.9	17.3	6.0	73.1	2.3	32.1
Delaware	50.7	22.4	0.0	4.9	0.9	73.2	11.2	11.4	54.1	7.5	32.6	4.5	75.0	6.7	14.5
District of Columbia	100.1	25.4	0.5	4.6	0.6	58.2	11.7	4.3	49.0	7.8	37.6	3.1	58.9	4.9	40.3
Florida ⁴	1,248.9	19.1	0.0	7.4 ⁷	0.3	71.8	16.4	11.6	44.0	4.0	50.0	2.1	67.0	6.9	20.7
Georgia	746.2	25.2	0.0	5.0	0.2	77.8	27.8	14.4	53.1	4.1	12.1	2.7	78.3	9.6	26.1
Hawaii	91.2	10.2	0.0	4.3	0.2	81.0	39.3	10.4	34.2	9.7	37.9	0.7	78.4	2.6	12.1
Idaho ⁴	70.1	17.8	0.0	7.5 ⁸	0.8	85.0	14.1	9.6	47.2	5.5	52.0	3.5	72.6	7.3	17.9
Illinois	1,144.3	16.5	0.1	6.8	1.1	74.6	0.1	14.1	46.9	7.1	39.0	2.7	78.4	8.2	19.5
Indiana	415.2	22.5	0.5	9.9	1.4	67.5	29.8	23.1	57.5	36.2	46.7	1.0	78.1	7.7	23.7
Iowa	261.4	19.4	0.2	8.2	0.8	69.0	38.8	23.6	48.5	5.2	10.9	4.5	77.7	9.5	27.1
Kansas	209.3	13.5	0.4	8.8	1.0	75.7	15.2	13.9	35.2	21.7	45.2	1.9	69.9	7.6	12.3
Kentucky	525.5	18.8	0.5	4.5	0.2	79.6	24.7	15.4	50.4	14.2	48.0	6.4	77.4	7.5	28.9
Louisiana ⁴	640.6	18.4	0.2	5.7 ⁹	0.9	81.7	18.4	14.3	49.6	9.1	55.1	1.5	77.0	7.4	25.3
Maine	150.6	23.2	0.3	6.6	0.5	64.7	28.2	19.5	51.4	0.3	44.5	4.0	78.5	9.3	28.7
Maryland ⁴	362.5	21.8	0.5	7.1 ¹⁰	0.3	74.7	15.3	5.8	52.0	15.9	22.3	2.6	70.1	9.1	34.3
Massachusetts ⁴	651.1	17.8	0.3	9.2 ¹¹	0.3	69.0	33.1	18.9	53.6	18.1	28.4	6.9	71.7	18.7	35.4
Michigan	1,112.5	17.1	0.3	4.0	0.3	76.3	31.2	14.5	46.6	14.8	49.3	5.7	73.6	13.1	17.7
Minnesota	421.7	12.3	0.1	9.2	1.4	70.1	33.5	19.7	41.2	13.5	30.0	8.4	66.0	5.4	35.2
Mississippi	469.7	21.2	0.0	3.5	0.4	82.5	20.4	9.0	47.5	7.5	15.2	1.0	75.9	10.0	14.4
Missouri	503.3	21.4	0.1	6.7	0.5	63.1	25.0	14.4	53.4	51.8	23.5	2.7	76.1	10.3	13.0
Montana	63.6	16.2	0.9	8.4	0.4	80.2	34.8	22.7	41.0	7.3	25.6	1.1	71.3	5.0	20.2
Nebraska	133.8	15.7	0.3	11.4	0.5	86.2	33.8	25.5	46.8	4.4	37.4	2.8	76.8	6.4	12.7
Nevada	59.3	22.6	0.1	5.5	0.4	72.5	22.0	14.2	48.2	4.9	23.3	2.7	66.3	0.0	20.4
New Hampshire	59.7	15.5	0.4	10.7	0.1	66.9	21.0	13.9	50.0	11.9	45.8	5.5	74.3	9.6	16.9
New Jersey	614.1	16.9	0.2	6.2	0.6	72.3	30.4	18.9	51.9	12.7	44.4	3.5	82.5	7.6	17.3
New Mexico	162.0	17.4	0.2	3.7	0.5	81.2	17.7	6.8	51.8	8.0	12.6	1.3	71.9	3.5	24.3
New York	2,461.5	19.8	0.7	4.6	0.6	59.1	30.6	18.7	49.2	20.4	35.6	6.0	69.6	8.3	26.4
North Carolina	667.2	24.4	0.4	4.7	0.6	80.0	23.0	15.3	50.3	12.7	55.7	3.9	69.2	8.5	17.2
North Dakota	52.5	18.2	0.3	10.3	1.3	76.1	33.3	21.7	41.5	6.2	46.1	7.2	66.9	6.8	23.1
Ohio	1,299.3	16.7	0.0	6.4	0.7	68.8	26.8	22.4	52.9	14.1	45.5	1.3	68.8	10.0	26.6
Oklahoma ⁴	304.7	19.7	0.7	7.9 ¹²	1.0	73.9	16.1	13.7	31.7	7.2	36.4	3.8	70.9	6.0	10.7
Oregon	263.3	15.9	0.1	4.7	0.4	54.0	17.6	8.8	40.1	8.4	34.7	7.4	67.1	7.2	30.3
Pennsylvania	1,277.4	16.2	0.3	5.2	0.6	58.4	23.3	11.0	48.3	11.1	32.2	1.1	67.3	7.6	27.2

See footnotes at end of table.

Table 16.3—Continued

Percent of Medicaid recipients using specified types of service, by jurisdiction: Fiscal year 1991

Jurisdiction	Number of recipients in thousands	Type of service													
		Inpatient hospital	Inpatient mental health ¹	Nursing facility ²	ICF/MR	Physicians	Dental	Other practitioners	Out-patient hospital	Clinic	Laboratory and radiological	Home health	Prescribed drugs	Family planning	Other ³
Puerto Rico	1,201.2	6.2	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0
Rhode Island	163.7	22.7	0.1	15.6	0.6	35.1	16.4	16.3	44.5	0.0	9.1	8.6	62.4	3.9	16.8
South Carolina	375.2	29.9	0.3	3.5	0.9	78.9	19.5	15.8	47.5	21.2	24.6	2.7	72.1	10.9	19.0
South Dakota	57.1	22.4	0.2	10.5	1.0	70.9	11.9	8.3	49.3	14.3	31.2	3.5	63.6	6.8	14.6
Tennessee ⁴	697.4	20.1	0.5	5.6 ¹³	0.3	77.0	17.8	13.8	57.0	5.3	54.8	1.7	76.4	4.4	14.9
Texas	1,728.6	21.6	0.0	5.1	0.7	83.2	12.0	17.1	44.7	1.9	51.2	2.9	77.1	8.6	14.4
Utah	129.3	16.5	3.4	0.7	0.8	86.6	27.1	18.3	41.8	10.6	10.1	2.7	68.2	1.4	14.8
Vermont	70.7	13.2	0.0	5.1	0.4	81.2	34.3	17.6	49.1	9.0	6.9	4.6	76.9	8.4	28.2
Virgin Islands	11.7	4.3	0.0	0.0	0.0	1.7	13.6	0.0	65.5	0.0	2.6	0.1	58.6	5.8	7.9
Virginia	442.1	20.0	0.1	5.8	0.6	70.9	13.1	10.3	57.0	15.1	31.6	2.9	73.3	7.7	13.9
Washington	506.3	12.7	0.1	5.1	0.1	78.8	33.2	21.0	46.9	13.8	48.7	0.9	76.8	13.1	30.1
West Virginia	283.7	16.4	0.1	3.5	0.3	79.8	12.8	8.9	54.4	10.2	19.2	0.8	75.3	3.9	20.0
Wisconsin	415.9	15.5	0.6	10.4	1.1	50.0	29.4	16.4	48.1	52.8	53.9	3.6	72.4	10.9	34.6
Wyoming	36.8	17.6	0.0	6.1	0.1	77.1	21.3	16.8	47.2	9.5	48.5	2.0	75.7	11.0	11.7

¹Includes mental hospital services for the aged, mental health services for aged in skilled nursing facilities (SNF), and inpatient psychiatric facility services for individuals 21 years of age or under.

²Data shown include services shown separately in earlier years as SNF and intermediate care facility, other than for the mentally retarded (ICF-Other). Beginning in fiscal year 1991, the conditions of participation for SNFs and ICF-Other were unified, the distinction between them removed, and the services renamed nursing facility services. Nine States continued to report the data separately. The percentage displayed is based on adding the number of recipients of these services.

³Includes early and periodic screening, diagnosis, and treatment services, rural health clinic, and other services not shown separately.

⁴State reported SNF and ICF-Other data separately. Percent displayed assumes no overlap among users of these services and are added. The percent of recipients that would apply, in case of complete overlap, is shown in the following footnotes.

⁵Percent would be 1.6 if there were complete overlap of reported recipients of SNF and ICF-Other services.

⁶Percent would be 8.3 if there were complete overlap of reported recipients of SNF and ICF-Other services.

⁷Percent would be 4.1 if there were complete overlap of reported recipients of SNF and ICF-Other services.

⁸Percent would be 3.8 if there were complete overlap of reported recipients of SNF and ICF-Other services.

⁹Percent would be 4.9 if there were complete overlap of reported recipients of SNF and ICF-Other services.

¹⁰Percent would be 6.0 if there were complete overlap of reported recipients of SNF and ICF-Other services.

¹¹Percent would be 7.1 if there were complete overlap of reported recipients of SNF and ICF-Other services.

¹²Percent would be 7.8 if there were complete overlap of reported recipients of SNF and ICF-Other services.

¹³Percent would be 4.5 if there were complete overlap of reported recipients of SNF and ICF-Other services.

NOTE: ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Medicaid recipients used NF services. In 7 States, the number of recipients using NF services was greater than 10 percent: Connecticut, Nebraska, New Hampshire, North Dakota, Rhode Island, South Dakota, and Wisconsin.

Type of service and demographics

The use of health care services by the demographic characteristics of Medicaid recipients is presented in two formats. Table 16.4 distributes the users of specified services by age, sex, and race. These data are then recast to show within the demographic groupings what percent of the recipients used specified services. The latter information is displayed graphically by age (Figure 16.5), sex (Figure 16.6), and race or ethnicity (Figure 16.7).

Children under 6 years of age constituted a smaller proportion of users of most services shown in Table 16.4 than their representation among all recipients of services. However, Figure 16.5 shows that about 70 percent used physician services and prescription drugs, and more than one-half used outpatient hospital services. About 16 percent used inpatient hospital services. Data on program payments to be presented later will show that inpatient hospital services consumed the major share of the expenditures on behalf of these children.

Children from 6 to 20 years of age constituted the largest group of users of dental and inpatient mental health services (44.1 and 60.4 percent, respectively). It should be noted, however, that inpatient mental health services were used by only about 65,000 Medicaid recipients nationally. Only 0.5 percent of recipients in this age group used inpatient mental health services. This age group contributed the lowest number of users to the count of recipients using inpatient hospital services. It constituted a significant portion of the users of family planning services.

Recipients 21-64 years of age were the major users of ICF-MR constituting about 85 percent of the 145,500 persons using this service. However, only 1.3 percent of the recipients in this age group used ICF/MR services. Understandably, this age group constituted the major share of users of family planning services (60.4 percent), but only 14.1 percent of the recipients in this age group received these services. This group constituted the major share of users of Medicaid-covered inpatient hospital, physician, hospital outpatient, clinic, home health, laboratory and radiology, and prescription drug services.

In comparing the use of Medicaid-covered services by persons 65 years of age or over with the younger groups, the reader should again keep in mind that a major share of their health services is covered under the Medicare program. For the services covered by Medicare, Medicaid involvement would consist of payment for applicable deductibles and coinsurance, and services beyond Medicare coverage limits. Thus, of the services shown in Table 16.4, the only Medicaid-covered service where the aged constituted the major portion of users is NF services. This age group

constituted almost one-half (48.6 percent) of the users of Medicaid-covered NF services. Although reference to Figure 16.5 shows that only 17.8 percent of the aged recipients used Medicaid-covered NF services, later data on program payments will show that this service accounted for the major portion of Medicaid program payments for this group.

Females outnumber males by a wide margin as recipients of Medicaid-covered services. However, there are certain services where they constitute a disproportionately large share of the users. The disproportions arise from two modal situations where females significantly outnumber males: as head of household in low income families (younger females) and as residents of nursing homes (older females). Thus, younger females probably constituted the disproportionate share of users of inpatient hospital services (e.g., for deliveries) and family planning services. Females constituted almost two-thirds of Medicaid recipients receiving inpatient hospital services. One in five females received inpatient hospital services. The older females probably contributed to females' disproportionate share among users of NF and home health services. More than two-thirds of the recipients of NF services were females, but Figure 16.6 shows that only 5.7 percent of the females used any NF services in FY 1991. Females constituted three-fourths of the users of home health services, but only 3.4 percent actually used these services.

White people used the individual services about equal to or greater than their proportion of all recipients. Of particular note in this respect are long-term institutional care services, such as NF, inpatient mental health, and ICF-MR services, where white people constitute more than two-thirds of the users. The latter may reflect differences in the distribution by age and eligibility groups between white people and other racial and ethnic groups. Differences in age distribution will be discussed later.

Use of services by jurisdiction

The number of recipients and days of care received in general hospitals, NFs, and ICF/MRs along with the number of physician, rural health clinic, and home health visits, and the number of drug prescriptions are shown by jurisdiction in Table 16.8. Certain cautions are required in the interpretation of the data.

For general hospitals, the number of discharges shown are a count of separate hospital stays. The number of recipients discharged is an unduplicated count of persons discharged from a general hospital during the fiscal year. The recipient count shown in Table 16.8 does not match counts presented elsewhere because stays in general hospitals by recipients also covered by Medicare (i.e., the dually enrolled population) are excluded.

Days of care in a general hospital or NF were counted only if paid for in whole or part by Medicaid. Days of care paid entirely by sources other than Medicaid were not included in Table 16.8. Hence, for these services, it

Table 16.4

Percent distribution of Medicaid recipients, by age, sex, race or ethnic origin, and type of service: Fiscal year 1991

Type of service	Number of recipients in thousands	Age groups				Sex		Race or ethnic origin				
		Under 6 years	6-20 years	21-64 years	65 years or over	Male	Female	White	Black	American Indian or Alaskan native	Asian or Pacific Islander	Hispanic
		Percent of recipients										
All services	27,966.6	25.0	27.2	33.2	14.6	36.3	63.7	52.7	30.1	1.0	2.7	13.7
Inpatient hospital	5,014.2	22.6	15.3	43.4	18.7	28.9	71.1	54.6	29.2	0.9	1.5	13.8
Nursing facility ¹	1,489.9	14.0	15.3	22.0	48.6	31.6	68.4	68.5	18.4	0.3	0.7	12.1
Inpatient mental health ²	64.9	1.3	60.4	4.3	34.0	50.6	49.4	76.0	18.6	1.7	0.5	3.2
Intermediate care facility/mentally retarded	145.5	0.4	9.3	84.5	5.9	57.4	42.6	84.1	13.5	0.4	0.3	1.7
Physicians	19,118.9	25.5	26.3	34.4	13.7	35.6	64.4	53.6	29.2	0.9	2.9	13.4
Dental services	5,177.4	15.8	44.1	32.0	8.1	37.1	62.9	57.4	30.0	1.0	2.0	9.6
Other practitioners	4,271.4	10.8	31.0	39.6	18.7	32.2	67.8	57.5	26.9	0.8	2.2	12.5
Outpatient hospital	14,030.6	25.6	25.4	39.0	10.0	34.6	65.4	53.3	30.8	1.0	1.7	13.2
Clinic	3,472.7	20.5	25.3	44.1	10.2	34.2	65.8	56.1	29.3	1.4	2.4	10.9
Home health	809.0	8.9	11.6	49.2	30.3	25.3	74.7	60.2	28.4	0.7	1.1	9.6
Family planning	2,171.9	8.3	28.2	60.4	3.1	12.5	87.5	49.0	33.8	0.7	1.6	15.0
Laboratory and radiological	10,387.8	21.1	25.9	42.7	10.2	31.4	68.6	52.3	28.9	0.8	2.8	15.2
Prescribed drugs	19,581.3	25.2	24.3	34.2	16.3	35.1	64.9	54.9	28.8	0.8	2.9	12.6
Other ³	5,842.5	34.5	24.4	25.7	15.5	39.0	61.0	50.4	33.8	1.1	2.4	12.3

¹Includes recipients of skilled nursing facility (SNF) and intermediate care facility, other than for the mentally retarded (ICF-Other) services reported separately in prior years. This may entail some duplicated counts of persons who received both levels of services in the nine States that reported the two services separately. At the national level, the total number shown could be as much as 13 percent too high if each person reported as using ICF-Other services had also used SNF services. See Table 16.3 for additional information.

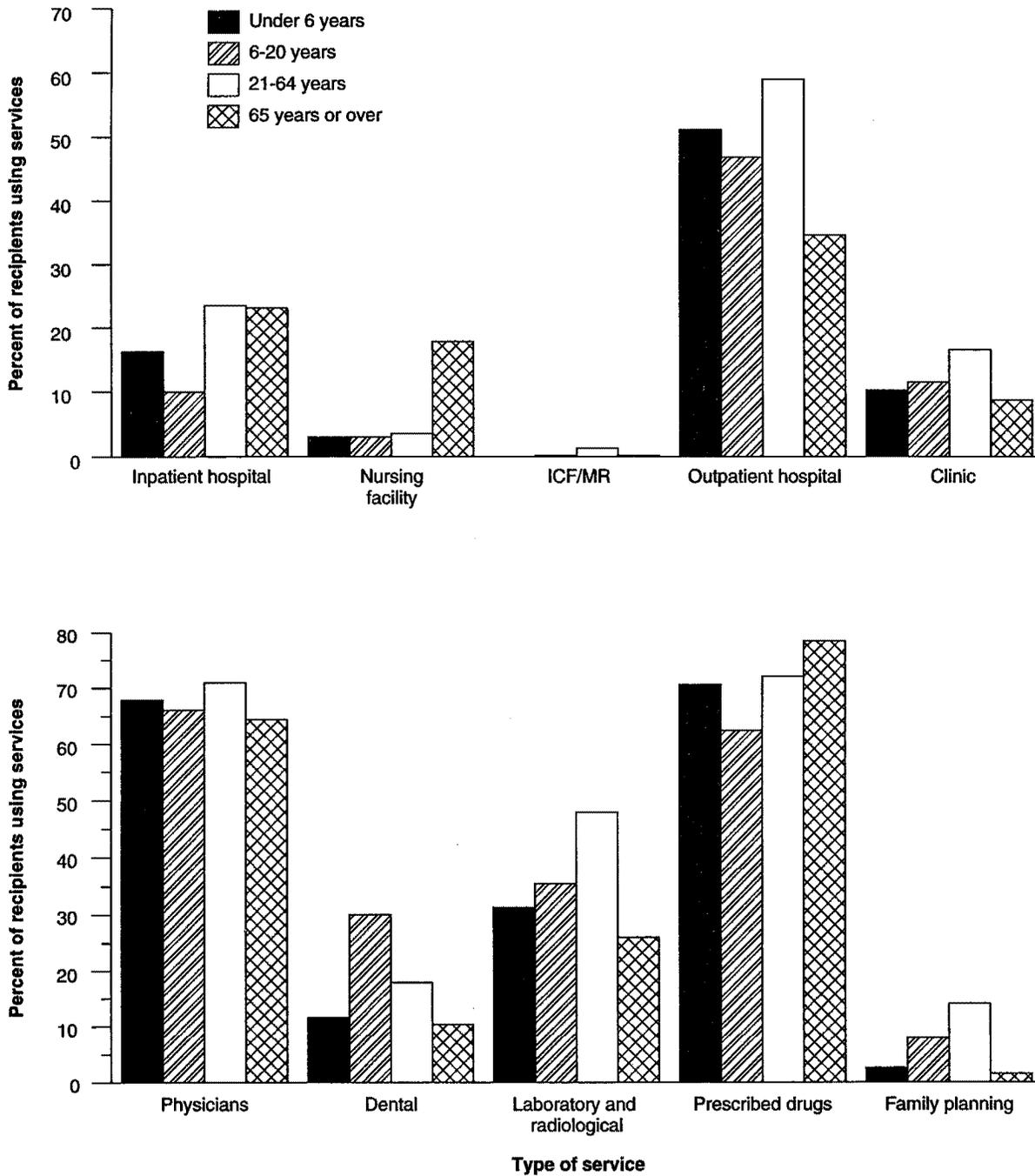
²Includes mental hospital services for the aged, mental health services for the aged in SNF, and inpatient psychiatric facility services for individuals 21 years of age or under.

³Includes early and periodic screening, diagnosis, and treatment services, rural health clinic services, and other covered services not reported separately.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Figure 16.5

Percent of Medicaid recipients using specified services, by age and type of service: Fiscal year 1991

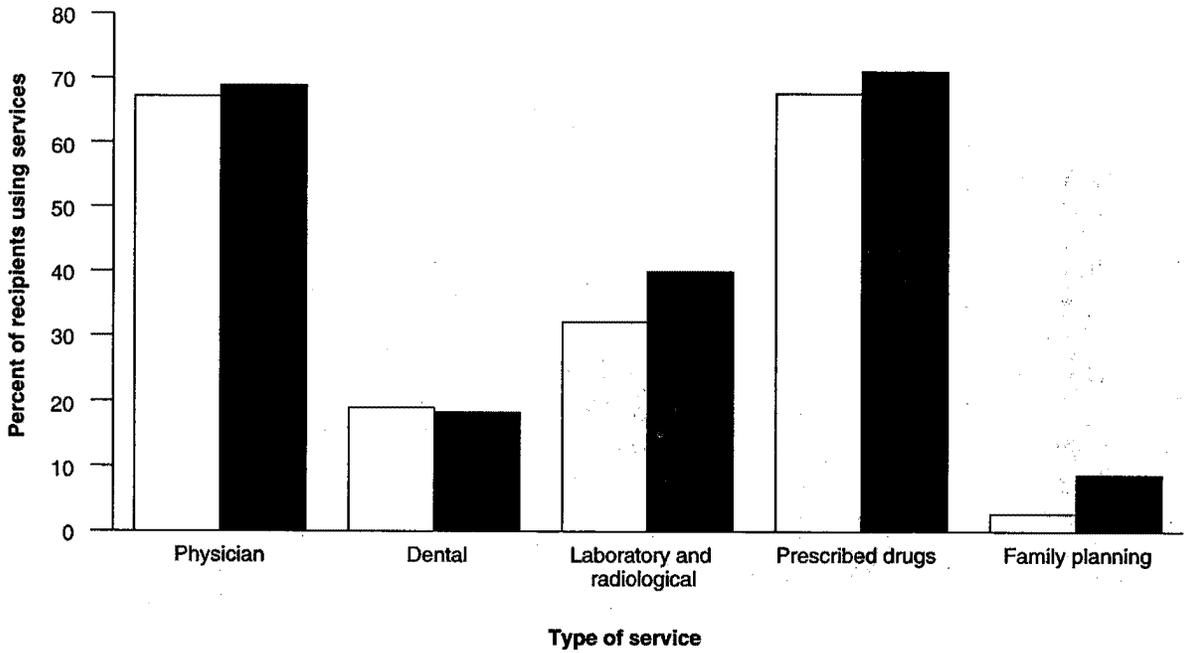
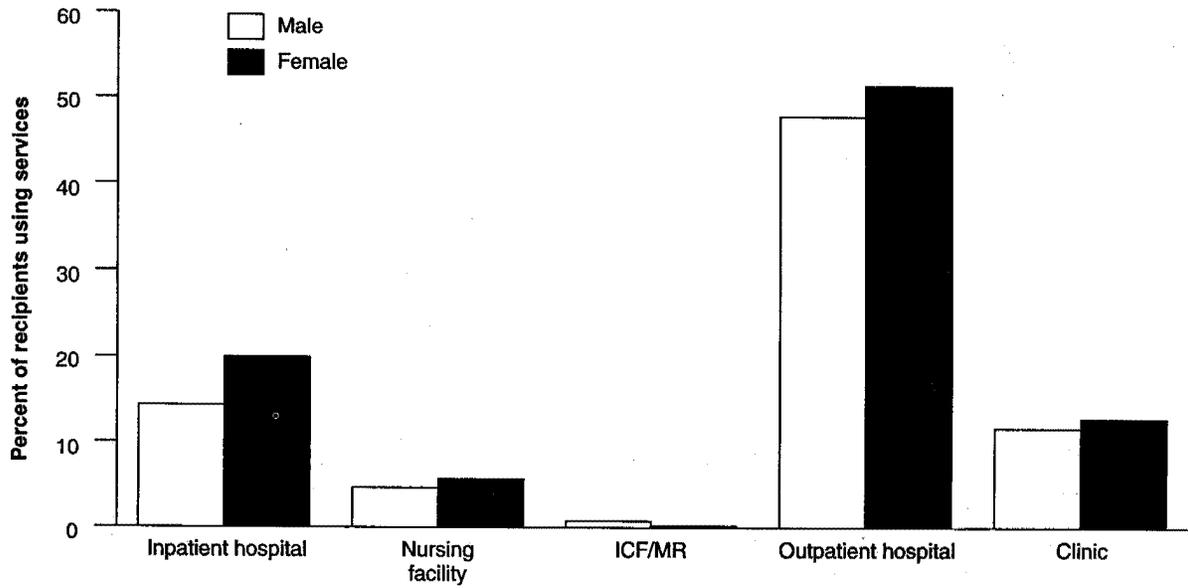


NOTE: ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Figure 16.6

Percent of Medicaid recipients using specified services, by sex and type of service: Fiscal year 1991

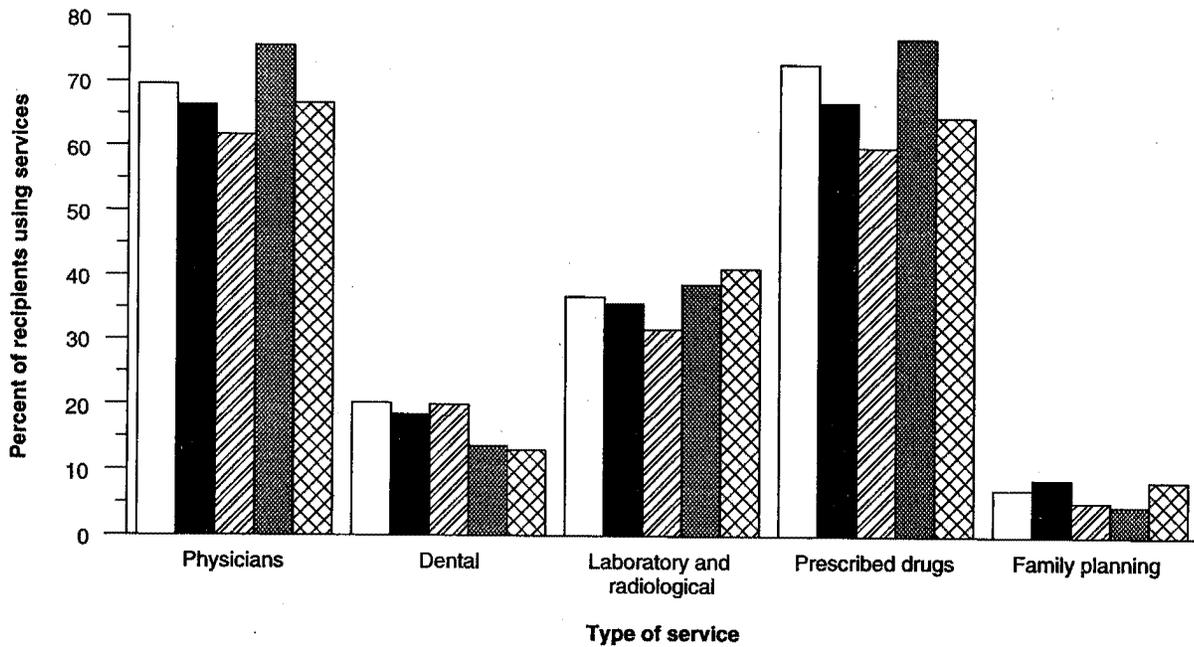
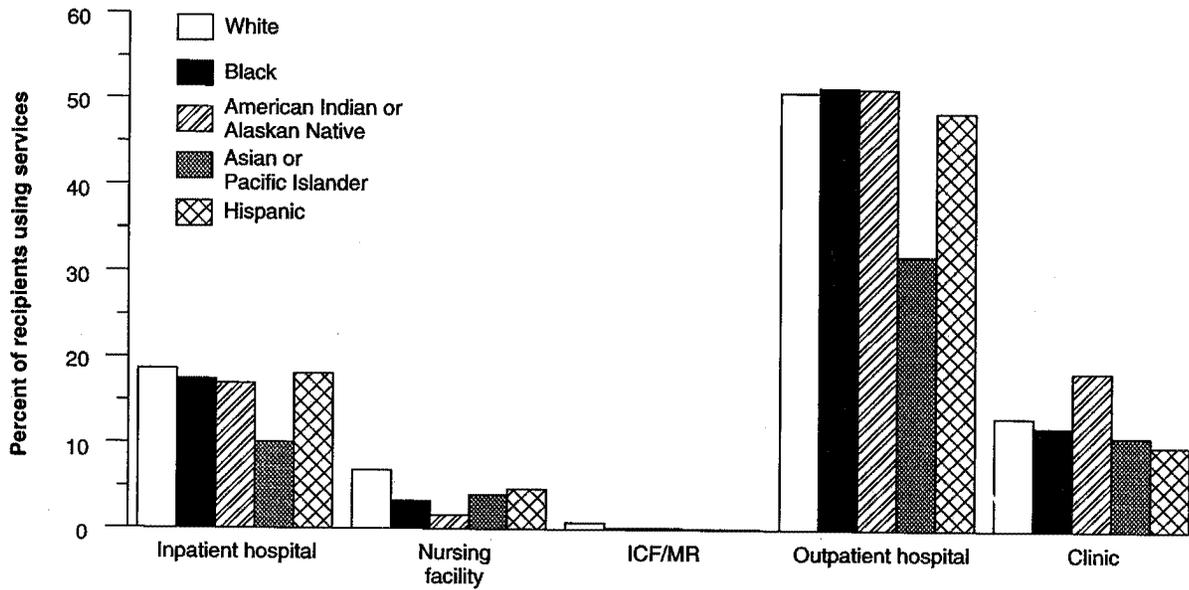


NOTE: ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Figure 16.7

**Percent of Medicaid recipients using specified services, by race or ethnic origin and type of service:
Fiscal year 1991**



NOTE: ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

is not possible to derive days per recipient or per discharge.

A physician visit is a consultation with a physician or a person acting under a physician's supervision. When a physician's bill does not show a visit but simply a flat fee, the recipient is reported as receiving a physician's service but the number of visits is not recorded. The number of prescriptions includes refills but covers only drugs dispensed outside hospitals and other inpatient facilities (Health Care Financing Administration, 1991).

Medicaid payments by eligibility and jurisdiction

The distribution of Medicaid payments by eligibility group and jurisdiction is shown in Table 16.9. The jurisdictions are listed by rank in total payments. Program payments were highest in New York, \$13.7 billion, about \$6 billion more than in California (\$7.6 billion), the second ranked State, where, in turn, payments were double that of third-ranked Ohio at \$3.7 billion. Also spending over \$3 billion were Texas and Pennsylvania. The top 5 States accounted for 41 percent of total program expenditures. The 18 States with the lowest amount of program payments account for only 5 percent of the national total.

By basis of eligibility, the blind and disabled accounted for the largest share of program expenditures (36.7 percent). Among the States, the percent of expenditures for the blind and disabled ranged from less than 25 percent in Hawaii and Wyoming to 49.8 percent in Illinois. The aged accounted for the second largest share of program payments (33.1 percent). The distribution for the aged ranged from 16.9 percent in Utah to more than 50 percent in Connecticut and New Hampshire. The differences in the distributions reflect State program characteristics governing eligibility criteria, service coverage, and payment methods. These, in turn, affect the number of recipients in each group and the patterns of services used.

At the national level, the blind and disabled and the aged eligibility groups accounted for expenditures far exceeding their share of recipients (Figure 16.10). The blind and disabled accounted for 14.4 percent of the recipients and 36.7 percent of the expenditures. This group includes persons who are eligible to receive services from ICF/MRs. As will be noted later, average program payments for recipients using any ICF/MR services were \$52,780. The aged group accounted for 11.9 percent of the recipients and 33.1 percent of the expenditures. On the other hand, children in low income families constitute 47.3 percent of the recipients but account for only 15.1 percent of program payments. Children on Medicaid constitute a low cost recipient group. To a lesser extent, so do the adults in low income families who constitute 24.0 percent of the recipients and account for only 13.5 percent of program payments.

The data in Table 16.11 compare how the Medicaid jurisdictions rank on recipients and program expenditures. State programs can be characterized by options selected with respect to eligibility criteria,

benefit structure, and the level of payment for services. For instance, a State may elect to make more people eligible for services but cover fewer services, or it might prefer to tighten eligibility criteria but cover more services. Under either of these options, the State chooses the level of payments it would make to the providers of services. The combination of choices would affect the State's rank on the measures shown in Table 16.11.

Payments by demographic characteristics and jurisdiction

The distribution of Medicaid program payments by the demographic characteristics of the recipients is shown by jurisdiction in Table 16.12. Of particular interest is the range of average payment per recipient. Among the States, average payments range from a low of \$1,607 in Mississippi to a high of \$5,994 in Connecticut. Particularly noteworthy is California's average payment of \$1,886. This is the second lowest among the States. As noted earlier, California had the highest number of recipients and the second highest total program payments. On the other hand, States like New Hampshire and North Dakota have relatively small numbers of recipients but have relatively high average payments per recipient, both well over \$4,000 per recipient—significantly above the national average of \$2,752. This provides an example of the leeway that individual jurisdictions have in structuring their programs by tailoring eligibility criteria, benefits, and payment levels.

Relating the distribution of payments to the distribution of recipients offers a perspective on the use of services. Persons under 21 years of age account for 52.2 percent of the recipients but only 21.5 percent of the payments. On the other hand, persons 65 years or over account for only 14.6 percent of the recipients but 36.0 percent of the payments (recall that age is not the only basis of eligibility for persons 65 years or over). Keep in mind that many of the aged receiving Medicaid benefits also receive Medicare benefits which are not shown in these tables.

The distribution of payments by sex does not differ significantly from the distribution of recipients by sex. There is a disparity in the distribution of benefits by race or ethnicity. White people who represent 52.7 percent of the recipients account for 67.4 percent of the program payments. Every other racial and ethnic group account for a proportion of payments that is less than their proportion of recipients. Tabulations not shown in this chapter indicate that about 18 percent of the white recipients are more than 65 years of age. The highest percent for other racial and ethnic groups is about 9 percent. Persons 21 years of age or over constitute 53 percent of the white recipients. The comparable percentages for the other racial and ethnic groupings are: Black, 41 percent; American Indian and Alaska Native, 36 percent; Asian and Pacific Islander, 41 percent; and Hispanic, 33 percent. Thus, the minority races are more heavily represented among persons less than 21 years of age. As noted previously,

Table 16.8
Selected measures of use of services by Medicaid recipients, by jurisdiction: Fiscal year 1991

Jurisdiction	General hospital ¹			Nursing facility ²		ICF/MR ³		Physician visits ⁴	Rural health visits	Home health visits	Number of drug prescriptions
	Recipients discharged	Discharges	Days of care	Recipients	Days of care	Recipients	Days of care				
All jurisdictions	3,581,606	5,211,154	28,751,795	1,449,524	387,620,644	142,666	50,223,317	129,064,265	1,378,778	70,648,837	377,024,696
Alabama	41,450	56,894	251,220	20,111	5,464,367	1,354	462,741	3,501,592	63,497	3,467,042	4,494,448
Alaska ⁵	6,879	11,706	53,417	1,241	216,703	102	40,243	195,529	1,219	323,538	299,039
Arkansas	49,363	55,813	315,958	15,973	5,867,826	142	605,435	1,762,543	0	104,149	3,641,336
California	459,103	647,130	2,387,255	115,434	24,804,539	9,592	3,150,733	19,262,191	395,410	978,938	36,812,024
Colorado	26,189	33,180	189,861	15,440	3,606,338	1,013	283,770	928,150	67,338	1,930,890	2,133,307
Connecticut	47,654	63,104	379,891	28,772	7,512,924	1,649	566,935	1,831,991	218	4,324,872	3,449,149
Delaware	9,632	12,930	61,255	2,493	1,002,755	458	143,603	377,440	0	563,366	479,796
District of Columbia	20,484	32,082	249,357	4,555	1,025,774	619	197,115	524,233	0	434,209	837,433
Florida ⁵	169,150	215,704	1,193,458	92,987	14,702,446	3,259	1,151,437	5,690,619	188,914	847,112	15,040,860
Georgia	126,609	199,985	1,069,789	37,162	14,147,585	1,752	619,589	5,976,371	28,329	3,492,773	8,841,481
Hawaii	8,754	15,517	70,456	3,907	974,321	201	62,795	4,967,763	0	19,966	98,722,488
Idaho ⁵	10,536	14,841	71,993	5,233	1,231,528	551	192,289	232,423	3,333	17,924	750,107
Illinois	167,071	235,033	1,435,305	77,826	18,478,411	12,265	3,601,408	4,440,311	14,514	570,192	12,931,882
Indiana	73,750	122,251	609,076	41,209	29,560,163	5,894	4,259,214	1,542,287	0	39,327	3,261,632
Iowa	39,604	57,403	305,678	21,322	6,304,526	2,080	713,862	2,276,728	5,740	534,003	3,308,918
Kansas	28,215	44,968	211,704	18,353	5,017,484	2,076	783,738	2,079,084	3,173	632,576	1,743,608
Kentucky	74,876	129,621	593,996	23,584	9,376,051	1,287	846,124	2,383,344	22,883	541,922	7,254,476
Louisiana ⁵	90,076	119,641	694,894	35,591	9,229,260	6,004	2,097,191	9,151,352	0	263,845	8,187,936
Maine	18,549	29,713	160,643	9,884	566,413	735	257,298	678,063	37,601	203,078	1,793,910
Maryland ⁵	64,735	86,689	463,606	25,577	5,977,560	1,209	399,219	1,228,310	2,678	96,498	3,462,446
Massachusetts ⁵	61,676	95,153	1,559,091	58,011	12,261,046	1,949	560,270	41,917	0	461	7,011,620
Michigan	131,778	165,155	1,154,467	43,714	12,203,265	3,181	988,576	4,843,427	0	5,041,965	12,254,514
Minnesota	46,685	60,749	361,285	38,789	10,340,324	5,900	1,459,407	2,292,306	0	161,846	4,573,505
Mississippi	69,630	156,061	381,155	16,430	4,462,942	1,929	651,795	221,572	4,868	99,863	4,589,997
Missouri	84,202	120,357	594,400	33,817	8,931,004	2,278	690,818	3,170,691	7,403	2,982,705	5,723,918
Montana	7,816	18,532	51,094	5,329	1,446,218	243	94,257	537,967	0	17,608	748,876
Nebraska	18,491	24,749	117,623	11,989	3,069,637	732	254,290	917,488	0	239,026	1,979,626
Nevada	11,826	16,232	115,865	3,232	833,959	227	77,625	364,945	497	83,690	493,239
New Hampshire	7,258	9,949	57,040	6,382	1,848,558	60	11,371	272,768	6,045	2,523,348	862,088
New Jersey	75,982	133,145	933,760	38,209	10,532,467	3,833	1,336,915	3,352,290	0	3,952,186	8,427,969
New Mexico	27,275	34,332	131,393	5,962	1,903,331	771	265,996	394,014	8,346	17,421	1,454,446
New York	297,004	409,424	4,473,440	113,635	32,204,116	15,389	5,178,377	6,470,838	0	23,468,614	26,168,221
North Carolina	91,056	123,157	673,669	31,035	7,921,332	4,250	1,442,979	2,035,212	80,290	1,736,967	5,757,450
North Dakota	7,268	9,922	55,068	5,436	1,262,133	670	182,706	472,104	4,499	1,590,178	607,885
Ohio	176,756	233,554	1,202,638	83,606	20,177,735	8,479	2,780,691	5,143,620	48,595	504,998	15,319,466
Oklahoma ⁴	45,227	57,406	195,918	24,113	6,447,812	2,955	1,016,050	740,794	290	273	2,373,168
Oregon	36,976	44,871	155,608	12,343	2,950,060	950	305,068	393,261	4,789	220,859	2,100,122
Pennsylvania	146,149	201,720	1,327,685	66,319	17,728,597	7,289	2,591,149	4,624,036	134,993	359,027	14,288,324
Puerto Rico	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Rhode Island	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
South Carolina	51,448	65,711	398,985	13,081	3,514,079	3,426	1,186,911	651,748	7,294	149,628	2,811,219
South Dakota	8,382	11,428	93,566	5,975	1,624,270	597	199,573	186,276	22,396	361,771	507,186

See footnotes at end of table.

Table 16.8—Continued
Selected measures of use of services by Medicaid recipients, by jurisdiction: Fiscal year 1991

Jurisdiction	General hospital ¹			Nursing facility ²		ICF/MR ³		Physician visits ⁴	Rural health visits	Home health visits	Number of drug prescriptions
	Recipients discharged	Discharges	Days of care	Recipients	Days of care	Recipients	Days of care				
Tennessee ⁴	106,090	254,794	754,690	36,876	9,074,916	2,417	811,131	4,065,459	3	255,329	8,239,598
Texas	307,290	357,858	1,599,687	87,621	23,241,799	12,945	4,387,450	9,627,597	44,455	706,840	11,474,997
Utah	18,971	65,824	96,996	942	231,176	971	329,748	1,666,551	2,935	831,934	1,253,431
Vermont	6,517	10,304	50,284	3,610	877,172	253	82,195	612,177	12,622	698,177	841,971
Virgin Islands	499	620	5,975	0	0	0	0	1,092	0	136	36,680
Virginia	67,457	90,746	457,855	24,940	6,633,666	2,852	981,010	932,890	895	228,603	5,657,606
Washington	51,952	94,892	406,366	25,985	6,299,469	490	145,031	3,651,570	7,694	96,729	5,270,693
West Virginia	37,093	49,212	205,148	9,935	2,664,333	737	236,555	987,689	141,282	67,160	2,721,883
Wisconsin	43,705	102,402	341,823	43,296	10,837,059	4,617	1,516,532	957,253	3,618	4,763,831	5,692,953
Wyoming	6,468	8,690	30,409	2,258	1,031,195	34	24,102	404,389	122	101,444	335,769

¹Values reported for general hospital refer only to the non-dually enrolled population (i.e., Medicaid recipients who were not also enrolled in Medicare). Data reported in this table represent hospitalizations for which Medicaid was the primary payer. Recipient counts for this service reported in other tables are not restricted in this way.

²Data shown include services shown separately in earlier years as skilled nursing facility (SNF) and intermediate care facility, other than for the mentally retarded (ICF-Other). Beginning in fiscal year 1991, the conditions of participation for SNFs and ICF-Other were unified and the distinction between them removed and the services were renamed nursing facility services. Nine States continued to report the data separately.

³Claims for physician visits for the dually enrolled are included only if a physician visit procedure appeared on the claim.

⁴State reported SNF and ICF-Other data separately. Data were combined in table. See Table 16.3 for additional information.

NOTES: NA denotes not available. ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Table 16.9
Amount and percent distribution of Medicaid payments, by eligibility group and jurisdiction:
Fiscal year 1991

Jurisdiction	Payments in millions	Percent of total	Cumulative percent of total	Eligibility groups				
				Aged	Blind and disabled	Low income families		Other title XIX
						Children	Adults	
				Percent distribution				
All jurisdictions	\$76,964.5	100.0	—	33.1	36.7	15.1	13.5	1.6
New York	13,728.5	17.8	17.8	41.8	36.5	11.3	8.5	1.8
California	7,578.5	9.8	27.7	25.6	36.0	15.1	21.2	2.1
Ohio	3,653.4	4.7	32.4	32.6	34.6	19.8	12.7	0.3
Texas	3,532.1	4.6	37.0	34.8	28.7	18.6	17.8	0.0
Pennsylvania	3,436.2	4.5	41.5	33.1	33.5	18.1	13.4	1.9
Florida	2,944.4	3.8	45.3	31.3	33.5	19.3	14.5	1.5
Massachusetts	2,828.3	3.7	49.0	39.4	35.8	14.3	10.4	0.1
Illinois	2,731.2	3.5	52.5	22.2	49.8	15.3	11.0	1.7
New Jersey	2,724.7	3.5	56.1	32.5	41.4	10.3	13.8	2.0
Michigan	2,540.1	3.3	59.4	23.4	42.4	17.2	17.0	0.0
Georgia	1,799.3	2.3	61.7	26.9	35.6	14.8	21.7	0.9
North Carolina	1,787.6	2.3	64.0	32.5	32.9	19.2	15.4	0.0
Louisiana	1,723.3	2.2	66.3	24.0	38.0	20.8	17.2	0.0
Indiana	1,661.8	2.2	68.4	28.4	42.1	15.7	13.4	0.4
Connecticut	1,629.9	2.1	70.6	51.0	31.8	NA	NA	4.0
Minnesota	1,561.3	2.0	72.6	38.7	39.4	11.1	9.6	1.2
Tennessee	1,485.2	1.9	74.5	25.7	37.3	20.0	14.8	2.2
Wisconsin	1,471.0	1.9	76.4	40.5	40.5	8.2	6.4	4.4
Maryland	1,292.2	1.7	78.1	30.0	36.0	18.2	12.4	3.5
Virginia	1,218.4	1.6	79.7	35.8	35.3	14.9	14.0	0.0
Kentucky	1,200.3	1.6	81.2	25.6	39.9	15.6	15.9	3.0
Washington	1,131.4	1.5	82.7	33.1	29.6	14.0	21.4	1.8
Missouri	1,117.9	1.5	84.2	38.2	32.5	16.7	12.2	0.4
South Carolina	910.3	1.2	85.3	25.7	42.5	16.0	15.7	0.0
Oklahoma	814.4	1.1	86.4	32.4	30.9	21.7	14.8	0.2
Alabama	805.5	1.0	87.5	32.6	38.4	13.0	14.9	1.1
Iowa	765.9	1.0	88.4	28.6	38.3	13.6	15.9	3.7
Mississippi	754.9	1.0	89.4	30.8	36.5	16.5	15.9	0.2
Arkansas	688.0	0.9	90.3	31.9	40.4	11.6	7.5	8.5
Colorado	672.8	0.9	91.2	29.7	39.8	13.9	14.3	2.4
Oregon	666.5	0.9	92.1	24.6	40.9	15.2	13.5	5.9
Rhode Island	657.1	0.9	92.9	38.3	43.4	9.3	8.3	0.5
Kansas	553.0	0.7	93.6	30.2	36.1	15.5	16.6	1.6
West Virginia	542.5	0.7	94.3	30.6	35.0	12.1	20.3	2.0
Maine	536.3	0.7	95.0	39.6	35.5	10.9	11.7	2.3
District of Columbia	445.9	0.6	95.6	31.1	40.5	16.8	11.5	0.1
Nebraska	389.8	0.5	96.1	36.6	34.0	12.8	10.9	5.8
New Mexico	342.2	0.4	96.6	24.6	39.4	20.7	15.2	0.0
Utah	311.3	0.4	97.0	16.9	39.4	17.8	24.8	1.0
New Hampshire	292.4	0.4	97.4	51.4	33.8	9.3	5.3	0.2
Hawaii	237.5	0.3	97.7	42.9	23.5	15.4	17.3	0.8
North Dakota	226.9	0.3	98.0	39.6	38.8	11.6	8.4	1.6
Idaho	223.0	0.3	98.2	28.6	43.3	13.9	13.7	0.5
Vermont	196.7	0.3	98.5	34.1	40.4	10.4	14.4	0.6
South Dakota	196.3	0.3	98.8	36.4	40.7	14.6	8.4	0.0
Montana	193.2	0.3	99.0	32.5	39.1	9.0	9.8	9.5
Delaware	186.1	0.2	99.2	30.7	42.3	13.3	12.2	1.5
Nevada	178.2	0.2	99.5	27.7	41.5	13.4	14.4	3.0
Alaska	160.2	0.2	99.7	21.0	29.8	27.1	22.1	0.0
Puerto Rico	146.1	0.2	99.9	0.0	5.0	72.1	22.9	0.0
Wyoming	90.2	0.1	100.0	31.6	24.1	21.7	21.1	1.5
Virgin Islands	4.2	0.0	100.0	18.1	18.1	26.9	25.7	11.2

NOTE: NA denotes not available.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

this age group accounts for benefit payments far below their proportion of recipients. This disparity in the age distribution contributes to differences in the distribution of program payments by race or ethnicity.

The interaction of age with health status as they affect the distribution of program payments is reflected in differences in patterns of service use. As shown in Figure 16.7, white people use institutional services more intensively than the other race or ethnic groups. The greater use of NF services by white people partially reflects the age factor. As noted previously, ICF/MR services are very costly and the data show its greater use by white people.

Payments by service and jurisdiction

The distribution of Medicaid program payments by type of service and jurisdiction is shown in Table 16.14. The data show that almost two-thirds of Medicaid payments are for inpatient and institutional services. About one-fourth goes for general hospital services and almost three-eighths goes for long-term care (i.e., NF

and ICF/MR services). This actually understates the amount of publicly-funded institutional and long-term care services used by Medicaid recipients. Almost all of the aged also have Medicare coverage. Thus, additional payments would be made on their behalf for hospital and SNF services by the Medicare program. If one

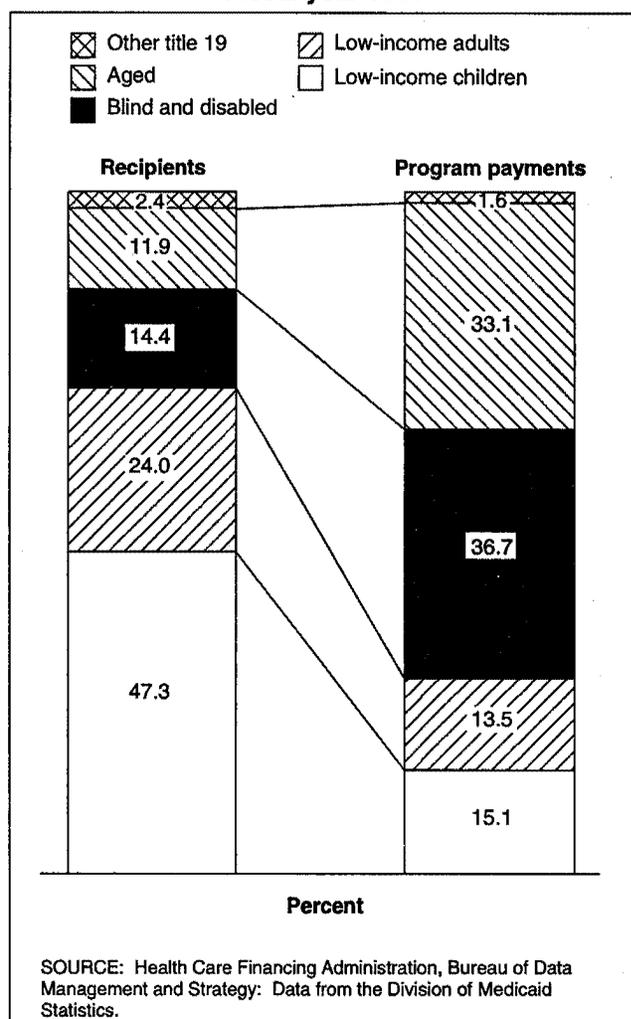
Table 16.11

Medicaid jurisdictions ranked, by number of recipients and payments for recipients: Fiscal year 1991

Medicaid jurisdiction	Number of recipients	Amount of payments
	Rank order	
California	1	2
New York	2	1
Texas	3	4
Ohio	4	3
Pennsylvania	5	5
Florida	6	6
Puerto Rico	7	50
Illinois	8	8
Michigan	9	10
Georgia	10	11
Tennessee	11	17
North Carolina	12	12
Massachusetts	13	7
Louisiana	14	13
New Jersey	15	9
Kentucky	16	21
Washington	17	22
Missouri	18	23
Mississippi	19	28
Virginia	20	20
Minnesota	21	16
Wisconsin	22	18
Indiana	23	14
Alabama	24	26
South Carolina	25	24
Maryland	26	19
Oklahoma	27	25
Arkansas	28	29
West Virginia	29	34
Connecticut	30	15
Oregon	31	31
Iowa	32	27
Colorado	33	30
Kansas	34	33
Rhode Island	35	32
New Mexico	36	38
Maine	37	35
Nebraska	38	37
Utah	39	39
District of Columbia	40	36
Hawaii	41	41
Vermont	42	44
Idaho	43	43
Montana	44	46
New Hampshire	45	40
Nevada	46	48
South Dakota	47	45
North Dakota	48	42
Alaska	49	49
Delaware	50	47
Wyoming	51	51
Virgin Islands	52	52

Figure 16.10

Percent distribution of Medicaid recipients and program payments, by eligibility groups: Fiscal year 1991



SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Table 16.12

**Average Medicaid payment per recipient, by jurisdiction, and percent distribution of payments, by age, sex, and race or ethnic origin:
Fiscal year 1991**

Jurisdiction	Total payments in millions	Payment per recipient	Age			Sex		Race or ethnic origin ¹				
			Under 21 years	21-64 years	65 years or over	Male	Female	White	Black	American Indian or Alaskan native	Asian or Pacific Islander	Hispanic
			Percent distribution									
All jurisdictions	\$76,964.5	\$2,752	21.5	42.5	36.0	35.4	64.6	67.4	23.4	0.7	1.3	7.2
Alabama	805.5	1,997	22.8	38.0	39.2	30.1	69.9	58.3	41.5	0.0	0.1	0.1
Alaska	160.2	3,123	35.0	43.5	21.5	38.3	61.7	54.8	5.7	35.1	2.8	1.5
Arkansas	688.0	2,417	32.3	36.9	30.8	36.5	63.5	83.7	16.1	0.0	0.1	0.1
California	7,578.5	1,886	22.3	50.6	27.1	36.5	63.5	56.8	14.5	0.3	5.0	23.3
Colorado	672.8	3,011	25.0	44.8	30.3	37.1	62.9	72.2	6.7	0.5	1.1	19.4
Connecticut	1,629.9	5,994	13.4	38.8	47.9	35.0	65.0	79.5	11.7	0.1	0.4	8.4
Delaware	186.1	3,671	22.2	43.7	34.1	33.6	66.4	59.1	37.2	0.2	0.2	3.3
District of Columbia	445.9	4,456	20.4	47.1	32.4	40.7	59.3	7.7	92.3	0.0	0.0	0.0
Florida	2,944.4	2,358	21.6	40.9	37.6	35.1	64.9	62.5	30.1	0.1	0.2	7.2
Georgia	1,799.3	2,411	24.7	42.5	32.9	29.3	70.7	53.5	45.8	0.1	0.2	0.5
Hawaii	237.5	2,606	19.5	35.4	45.1	37.8	62.2	18.0	0.6	3.4	76.3	1.6
Idaho	233.0	3,184	26.7	42.5	30.8	36.8	63.2	93.2	0.3	1.9	0.2	4.4
Illinois	2,731.2	2,387	22.1	48.7	29.2	38.6	61.4	58.4	34.1	0.1	1.0	6.4
Indiana	1,661.8	4,003	22.6	43.2	34.2	36.0	64.0	82.1	16.6	0.1	0.1	1.1
Iowa	765.9	2,930	23.9	45.4	30.8	37.4	62.6	94.1	4.3	0.4	0.5	0.7
Kansas	553.0	2,642	23.4	45.7	30.8	37.3	62.7	83.6	12.5	0.7	1.0	2.3
Kentucky	1,200.3	2,284	25.1	44.5	30.4	34.0	66.0	88.4	11.5	0.1	0.0	0.0
Louisiana	1,723.3	2,690	31.0	44.9	24.1	36.6	63.4	46.2	53.8	0.0	0.0	0.0
Maine	536.3	3,561	18.2	41.4	40.5	35.9	64.1	NA	NA	NA	NA	NA
Maryland	1,292.2	3,565	25.3	41.8	32.9	36.0	64.0	53.2	44.8	0.1	1.1	0.8
Massachusetts	2,828.3	4,344	18.4	37.5	44.2	33.3	66.7	84.2	9.0	0.2	0.9	5.7
Michigan	2,540.1	2,283	21.9	51.0	27.1	36.7	63.3	72.6	25.1	0.2	0.7	1.4
Minnesota	1,561.3	3,702	15.0	41.5	43.4	38.2	61.8	90.2	4.6	2.6	1.7	0.9
Mississippi	754.9	1,607	26.3	37.6	36.1	30.3	69.7	43.9	55.7	0.1	0.2	0.1
Missouri	1,117.9	2,221	22.0	38.4	39.6	34.3	65.7	76.4	23.6	0.0	0.0	0.0
Montana	193.2	3,037	20.6	42.3	37.1	37.9	62.1	99.0	0.0	0.0	0.0	0.1
Nebraska	389.8	2,915	23.0	39.8	37.2	35.6	64.4	85.5	9.6	2.2	0.4	2.2
Nevada	178.2	3,005	26.9	44.4	28.8	38.1	61.9	77.5	14.1	2.1	1.2	5.1
New Hampshire	292.4	4,898	10.6	37.9	51.5	33.1	66.9	95.5	0.4	0.0	3.8	0.3
New Jersey	2,724.7	4,437	16.5	44.7	38.8	33.3	66.7	62.3	29.0	0.2	0.3	8.2
New Mexico	342.2	2,113	27.2	43.2	29.5	36.1	63.9	55.0	3.0	8.2	0.5	33.3
New York	13,728.5	5,577	17.0	38.3	44.7	35.9	64.1	61.0	26.3	0.1	0.5	12.0
North Carolina	1,787.6	2,679	24.4	42.5	33.1	35.5	64.5	58.5	39.3	1.6	0.2	0.4
North Dakota	226.9	4,319	17.3	42.5	40.2	39.4	60.6	88.2	0.3	11.0	0.2	0.3
Ohio	3,653.4	2,812	24.1	40.0	35.9	34.1	65.9	76.7	22.1	0.2	0.1	0.9
Oklahoma	814.4	2,673	30.5	36.6	32.9	36.4	63.6	77.7	13.6	7.0	0.3	1.4
Oregon	666.5	2,531	21.8	50.9	27.4	39.6	60.4	90.8	3.8	2.9	1.1	1.4
Pennsylvania	3,436.2	2,690	23.1	42.3	34.6	35.7	64.3	70.3	25.0	0.0	0.7	3.9

See footnotes at end of table.

Table 16.12—Continued

Average Medicaid payment per recipient, by jurisdiction, and percent distribution of payments, by age, sex, and race or ethnic origin:
Fiscal year 1991

Jurisdiction	Total payments in millions	Payment per recipient	Age			Sex		Race or ethnic origin ¹					
			Under 21 years	21-64 years	65 years or over	Male	Female	White	Black	American Indian or Alaskan native	Asian or Pacific Islander	Hispanic	
Rhode Island	657.1	4,014	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
South Carolina	910.3	2,426	23.9	44.9	31.3	35.2	64.8	51.5	48.2	0.1	0.0	0.0	0.1
South Dakota	196.3	3,435	24.2	37.9	37.9	39.2	60.8	84.1	0.1	15.8	0.0	0.0	0.0
Tennessee	1,485.2	2,130	26.4	44.0	29.7	34.3	65.7	73.4	26.3	0.0	0.1	0.1	0.1
Texas	3,532.1	2,043	26.5	38.9	34.6	32.8	67.2	52.4	20.6	0.1	0.4	0.4	26.4
Utah	311.3	2,408	29.2	53.3	17.5	36.8	63.2	87.8	1.4	3.0	1.5	1.5	6.3
Vermont	196.7	2,782	16.8	48.6	34.6	37.2	62.8	99.3	0.1	0.1	0.4	0.4	0.1
Virginia	1,218.4	2,756	21.7	41.5	36.9	34.2	65.8	58.2	39.8	0.1	1.0	1.0	0.9
Washington	1,131.4	2,235	20.4	45.0	34.6	31.6	68.4	84.4	5.5	3.0	2.4	2.4	4.8
West Virginia	542.5	1,912	22.6	44.9	32.5	34.2	65.8	95.8	4.1	0.0	0.0	0.0	0.0
Wisconsin	1,471.0	3,537	15.0	37.5	47.5	37.1	62.9	90.6	5.7	1.5	0.9	0.9	1.3
Wyoming	90.2	2,450	29.5	38.8	31.7	31.7	68.3	84.9	1.2	3.8	3.4	3.4	6.7
Puerto Rico	146.1	122	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Virgin Islands	4.2	359	39.1	41.0	20.0	33.2	66.8	2.6	72.8	0.0	8.0	8.0	16.6

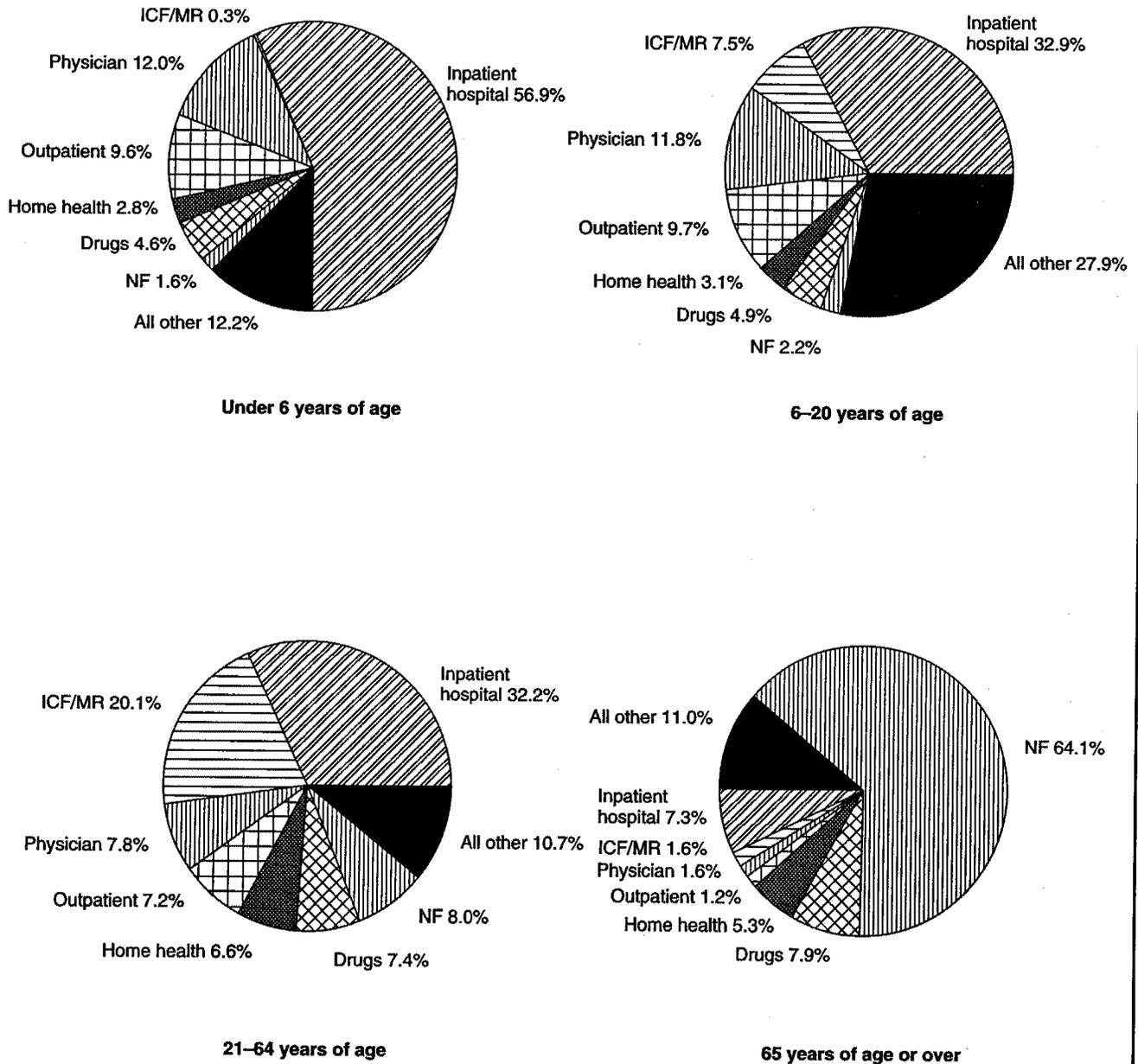
¹The race or ethnic origin of a significant number of recipients in some reporting States was unknown. The Bureau of Data Management and Strategy estimated payments by race or ethnic origin for these States. Hispanic persons could also be counted as white or black. Data by race or ethnic origin, therefore, should be used with caution.

NOTE: NA denotes not available.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Figure 16.13

Percent distribution of Medicaid payments, by age and type of service: Fiscal year 1991



NOTES: ICF/MR is intermediate care facility for the mentally retarded. NF is nursing facility. "All other" includes dental services, laboratory and X-ray services, clinic services, other practitioners' services, and mental health services.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

considers that home health services constitute, in part, long-term care and include physician and other health care services rendered to residents of these facilities, then long-term care is the major expenditure of the Medicaid program.

There are notable variations among the jurisdictions in the distribution of payments by type of service. For instance, inpatient hospital services accounted for more than 30 percent of program expenditures in California, District of Columbia, Florida, Louisiana, Maryland, Nevada, Rhode Island, and Utah, but less than 15 percent in Connecticut, Minnesota, North Dakota, Oregon, and Wisconsin. NF payments constituted more than one-third of the program payments in Connecticut, Hawaii, Maine, Minnesota, Nebraska, New Hampshire, North Dakota, Ohio, and Wisconsin, but less than 20 percent in Louisiana, Oregon, South Carolina, and Utah. These variations reflect the interaction of eligibility criteria, benefit structure, and characteristics of the local population and economy.

Payments by service and demographic characteristics

The distribution of Medicaid program payments by type of service and demographic characteristic of the recipients is shown in Table 16.15. Examination of the data shows that expenditures were highest for NF services, \$20.7 billion. The major share of these expenditures are made on behalf of aged white females. Reference to Figure 16.13 shows that 64.1 percent of Medicaid expenditure on behalf of the aged is for NF services. NF expenditures represented the largest expense category for females (30.8 percent) (Figure 16.16) and for white people (33.9 percent) (Figure 16.17).

Inpatient hospital services represented the second largest expenditure, \$19.9 billion. Females account for 61.7 percent of the hospital expenditures. Children under 6 years of age accounted for only 22.3 percent of hospital expenditures. However, inpatient hospital expenditures represent 56.9 percent of the expenditures for these children—the highest percent for any of the demographic groups shown (Figure 16.13). This points to two features of the pattern of services used by these children: the high level of expenditures for delivery and their subsequent low level of use of other health care services. These combine to make hospital expenditures assume the indicated large share of the total. Inpatient hospital services account for 47.7 percent of the expenditures on behalf of Hispanics.

The third highest expenditures were for ICF/MR services—\$7.7 billion. As noted previously, only 145,500 persons used this service. Thus, average expenditures per user were \$52,780. The major share of these expenditures were made on behalf of white males between 21-64 years of age.

When payments for inpatient mental health services are added to those for inpatient hospital, NF, and ICF/MR services, about 65 percent of Medicaid payments were for institutional services. If NF and ICF/MR services are perceived as long-term care

services, almost 37 percent of Medicaid expenditures were for such services. The inclusion of hospital, physician, and ancillary services used by residents of these facilities would increase the long-term care proportion significantly.

Prescription drugs accounted for \$5.4 billion in program payments. Adults accounted for 85 percent of expenditures. For adults, prescription drugs accounted for more than 7 percent of the payments made on their behalf; for children, it was less than 5 percent.

Physician, outpatient, and home health services each accounted for between \$4 billion and \$5 billion in program payments. Each of these services are also covered by Medicare for persons eligible for both programs. Thus, the Medicaid expenditures shown in Table 16.15 and Figure 16.13 understate the extent to which recipients 65 years or over use these services.

Conclusion

The Medicaid program provides the States great flexibility in establishing the eligibility criteria for enrollment in the program, for the benefits covered, the scope of the benefits provided, and the methods and amounts of payment for the covered services. This flexibility interacts with local differences in the demographic and economic characteristics of the population, employment patterns, health care resources, and local choice to produce significant differences in the characteristics of recipients, patterns of services used, and the amount and distribution of program payments by type of service and type of recipient. The Medicaid experience in FY 1991 described in this chapter illustrates this diversity.

The distribution of Medicaid benefits in FY 1991 indicates that the program could still be characterized as one that provides predominantly for institutional services and the long-term care needs of recipients, particularly, the aged. However, when the 1991 experience is viewed against the longitudinal perspective provided by Pine, Baugh, and Clauser (1993), it is clear that Medicaid is a program in flux. The recent Medicaid expansions reflect an increasing national concern about the health of children living in low income families. Accordingly, services to children have been taking an increasing share of the program's expenditures. Concomitantly, expenditures for long-term care services to the aged, although increasing and expected to continue doing so, is a less dominating feature of the Medicaid program. As the 1991 data point out, children have not been major users of Medicaid-covered services. To assure that children in low income families receive the necessary services to maintain good health and achieve normal development, increasing emphasis will be placed on evaluation, diagnosis, and preventive services. Increasing the commitment to the health of children in low income families while maintaining historic commitments to the medical needs of the low income aged, blind, and disabled adds to an already severe financial squeeze felt at both the State and national levels. The maintenance of these commitments

Table 16.14
Percent of Medicaid payments, by type of service and jurisdiction: Fiscal year 1991

Jurisdiction	Total payments in millions	Type of service													
		Inpatient hospital	Inpatient mental health ¹	Nursing facility ²	ICF/MR	Physicians	Dental	Other practitioners	Out-patient hospital	Clinic	Laboratory and radiological	Home health	Prescribed drugs	Family planning	Other ³
		Percent distribution													
All jurisdictions	\$76,964.5	25.8	2.6	26.9	10.0	6.4	0.9	0.6	5.6	2.9	1.2	5.3	7.0	0.5	4.4
Alabama	805.5	21.9	1.3	28.8	9.0	9.6	0.7	0.3	2.4	2.0	0.6	5.9	9.4	0.7	7.4
Alaska ⁴	160.2	21.8	4.1	22.4	6.9	18.0	3.0	0.7	5.1	3.8	0.3	1.6	4.7	0.2	7.4
Arkansas	688.0	20.7	2.3	29.3	11.9	9.6	0.6	0.5	3.7	3.4	0.9	4.2	9.8	0.2	3.0
California	7,578.5	37.1	0.2	21.1	6.1	9.1	0.3	1.0	5.1	3.6	2.1	0.4	8.8	0.4	4.9
Colorado	672.8	21.4	2.6	26.3	7.6	7.3	0.5	0.2	4.2	5.0	0.8	10.0	6.5	1.2	6.5
Connecticut ⁴	1,629.9	12.3	2.6	42.3	13.8	3.1	0.7	0.5	5.7	1.4	0.2	9.1	4.6	0.1	3.6
Delaware	186.1	28.7	0.0	28.5	12.8	5.6	0.3	0.4	7.1	0.3	0.7	4.1	5.3	0.2	6.2
District of Columbia	445.9	31.3	4.9	25.5	8.5	3.9	0.2	0.1	6.7	5.5	0.8	3.0	3.8	0.1	5.7
Florida ⁴	2,944.4	30.2	0.4	26.0	5.7	9.6	1.2	0.4	6.3	1.5	2.6	1.4	9.4	0.3	4.8
Georgia	1,799.3	27.4	0.0	24.5	6.1	12.9	1.4	0.6	8.1	2.0	0.3	3.0	8.9	1.4	3.4
Hawaii	237.5	19.8	0.0	37.9	3.0	5.0	3.4	0.9	5.1	0.8	1.4	0.4	8.4	0.1	3.7
Idaho ⁴	223.0	22.4	0.4	26.5	15.2	5.0	0.7	1.1	4.9	1.3	1.2	4.8	7.2	0.6	4.8
Illinois	2,731.2	29.6	0.7	28.7	14.0	6.6	0.0	0.7	3.6	0.7	1.2	3.4	7.4	0.4	3.0
Indiana	1,661.8	21.4	3.1	32.1	11.6	6.0	1.3	1.1	6.3	2.1	1.8	1.2	8.6	0.4	3.1
Iowa	765.9	22.9	0.5	25.3	18.0	8.6	2.4	0.7	6.4	0.5	0.2	2.6	8.4	0.5	2.9
Kansas	553.0	23.8	3.6	29.0	17.6	6.3	0.9	0.6	2.0	2.9	2.0	2.2	6.6	0.5	1.9
Kentucky	1,200.3	23.1	2.3	22.5	4.8	10.6	1.9	0.6	7.9	4.9	2.3	6.0	9.3	0.8	3.0
Louisiana ⁴	1,723.3	31.6	2.8	18.5	13.7	9.5	1.3	0.5	4.8	0.9	2.0	0.7	9.3	0.4	3.9
Maine	536.3	20.5	1.8	33.9	9.0	4.1	1.0	0.6	6.4	0.0	0.8	5.3	7.2	0.5	9.1
Maryland ⁴	1,292.2	31.3	3.7	26.7	4.7	7.9	0.4	0.1	7.6	2.8	0.4	2.4	6.0	0.6	5.5
Massachusetts	2,828.3	24.7	1.5	33.1	4.0	5.0	1.1	0.3	7.2	3.7	0.4	8.2	5.5	0.3	5.2
Michigan	2,540.1	26.7	2.9	21.9	7.6	7.3	1.2	0.3	6.2	8.9	1.5	4.4	8.2	0.7	2.4
Minnesota	1,561.3	13.2	1.4	39.3	17.2	5.6	1.1	1.0	2.6	1.8	0.5	6.6	5.5	0.1	4.0
Mississippi	754.9	28.9	0.3	24.2	7.6	11.1	1.2	0.4	7.9	0.6	0.5	0.8	11.5	0.6	4.3
Missouri	1,117.9	23.7	0.7	31.1	9.3	5.0	1.2	0.3	7.7	3.4	0.5	2.2	8.9	0.4	5.7
Montana	193.2	19.6	4.6	30.7	7.6	8.1	1.8	1.4	5.1	2.3	0.6	0.6	7.4	0.4	9.9
Nebraska	389.8	16.7	1.6	35.4	7.8	9.8	1.3	1.2	4.5	0.6	1.2	2.5	8.5	0.5	8.4
Nevada	178.2	31.9	0.2	24.7	8.2	11.9	2.2	1.4	5.3	0.2	0.7	4.1	6.1	0.0	3.0
New Hampshire	292.4	10.0	2.4	48.5	0.6	2.7	0.4	0.5	4.8	4.5	0.5	17.1	5.0	0.4	2.5
New Jersey	2,724.7	28.8	1.9	30.2	10.3	2.5	1.0	0.2	6.5	2.1	0.6	7.1	6.8	0.3	1.8
New Mexico	342.2	24.4	1.4	25.2	10.0	13.6	1.1	0.6	8.5	0.8	0.6	0.9	7.7	0.3	4.9
New York	13,728.5	23.9	7.5	24.2	11.0	1.6	0.9	0.7	4.8	3.5	0.3	13.6	3.8	0.3	3.7
North Carolina	1,787.6	26.0	2.1	23.7	13.6	8.7	1.3	0.3	4.8	1.4	2.2	6.3	7.0	0.7	2.0
North Dakota	226.9	14.6	1.5	33.8	17.8	4.7	1.4	0.4	4.5	1.4	1.0	10.5	5.0	0.3	3.1
Ohio	3,653.4	23.5	0.0	33.5	10.7	5.1	0.9	0.6	6.3	2.9	1.2	0.9	7.1	0.7	6.6
Oklahoma ⁴	814.4	26.2	5.5	26.2	13.3	7.1	0.8	0.6	3.5	1.5	0.9	4.5	7.1	0.4	2.2
Oregon	666.5	13.9	1.9	19.4	14.7	5.8	0.9	0.3	5.0	3.7	1.4	14.1	7.2	0.4	11.2
Pennsylvania	3,436.2	24.2	3.6	29.7	13.2	3.7	0.6	0.2	3.0	2.2	0.8	0.4	8.5	0.5	9.4
Puerto Rico	146.1	44.5	0.0	0.0	0.0	0.0	0.0	0.0	55.5	0.0	0.0	0.0	0.0	0.0	0.0

See footnotes at end of table.

Table 16.14—Continued
Percent of Medicaid payments, by type of service and jurisdiction: Fiscal year 1991

Jurisdiction	Total payments in millions	Type of service													
		Inpatient hospital	Inpatient mental health ¹	Nursing facility ²	ICF/MR	Physicians	Dental	Other practitioners	Out-patient hospital	Clinic	Laboratory and radiological	Home health	Prescribed drugs	Family planning	Other ³
Rhode Island	657.1	43.4	1.2	25.3	10.1	1.2	0.4	0.2	3.7	0.0	0.1	7.6	4.0	0.1	2.7
South Carolina	910.3	27.4	2.7	18.4	15.8	10.0	0.9	0.5	3.8	4.1	0.7	3.7	7.0	0.9	4.1
South Dakota	196.3	22.1	2.2	30.6	13.7	6.7	0.4	0.3	4.5	2.0	0.6	8.1	5.4	0.4	3.0
Tennessee ⁴	1,485.2	22.3	1.7	24.4	6.8	11.5	1.1	0.5	9.1	3.2	3.0	0.8	9.7	0.7	5.0
Texas	3,532.1	26.1	0.0	25.5	13.4	11.0	0.8	0.6	6.2	0.1	2.7	4.2	7.0	0.9	1.4
Utah	311.3	30.2	13.4	4.2	11.9	10.8	1.5	0.7	4.6	5.6	0.2	7.7	6.9	0.3	1.9
Vermont	196.7	17.6	0.3	26.8	10.4	6.8	1.5	0.5	7.1	3.3	0.1	9.1	8.8	0.3	7.4
Virgin Islands	4.2	35.7	0.0	0.0	0.0	7.3	1.9	0.0	25.6	0.0	2.0	0.1	20.2	1.1	6.0
Virginia	1,218.4	23.3	1.3	25.9	10.9	9.0	0.6	0.3	7.8	3.0	0.9	3.7	8.6	0.4	4.5
Washington	1,131.4	21.2	0.2	31.3	1.5	10.3	2.8	0.7	6.7	7.9	1.9	0.5	9.1	0.4	5.4
West Virginia	542.5	29.5	1.2	24.0	7.7	8.3	0.7	0.3	3.6	9.3	0.7	0.6	7.9	0.2	5.8
Wisconsin	1,471.0	14.7	2.2	37.9	11.6	2.7	0.7	0.3	4.4	3.2	1.4	5.6	8.2	0.5	6.6
Wyoming	90.2	28.9	0.4	30.8	2.4	10.9	1.3	0.4	6.9	1.7	1.8	0.8	7.5	2.4	3.8

¹Includes mental hospital services for the aged, mental health services for aged in skilled nursing facilities (SNF), and inpatient psychiatric facility services for individuals 21 years of age or under.

²Data shown include services shown separately in earlier years as skilled nursing facility (SNF) and intermediate care facility, other than for the mentally retarded (ICF-Other). Beginning in fiscal year 1991, the conditions of participation for SNFs and ICFs-Other were unified and the distinction between them removed. Nine States as noted above continued to report the data separately. For display purposes, the payments were combined.

³Includes early and periodic screening, diagnosis, and treatment services, rural health clinic, and other services not shown separately.

⁴State reported SNF and ICF-Other data separately. Data were combined in table.

NOTE: ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Table 16.15

Percent distribution of Medicaid payments, by age, sex, race or ethnic origin, and type of service: Fiscal year 1991

Type of service	Payments in millions	Age				Sex		Race or ethnic origin ¹				
		Under 6 years	6-20 years	21-64 years	65 years or over	Male	Female	White	Black	American Indian or Alaskan native	Asian or Pacific Islander	Hispanic
		Percent distribution										
All services	\$76,964.5	10.1	11.4	42.5	36.0	35.4	64.6	67.4	23.4	0.7	1.3	7.2
Inpatient hospital	19,851.0	22.3	14.5	53.1	10.1	38.3	61.7	50.3	33.7	0.9	1.7	13.4
Combined mental health ¹	2,009.6	1.1	36.9	13.4	48.6	48.5	51.5	74.8	20.3	1.3	0.5	3.2
ICF/MR	7,679.5	0.3	8.6	85.4	5.7	58.2	41.9	84.0	13.6	0.5	0.3	1.6
Nursing facility ²	20,699.2	0.6	0.9	12.6	85.8	25.9	74.1	85.0	12.0	0.3	0.8	1.8
Physicians	4,946.2	18.9	20.9	51.4	8.8	29.7	70.3	55.7	27.9	1.1	2.8	12.6
Dental	709.4	13.8	38.8	37.9	9.5	37.1	63.0	60.9	26.5	1.2	2.6	8.8
Other practitioners	436.9	14.5	24.0	53.0	8.6	36.0	64.0	53.2	28.3	0.6	1.7	16.2
Outpatient hospital	4,280.0	17.4	19.8	54.8	8.0	34.1	65.9	54.7	31.4	1.1	1.4	11.5
Clinic	2,207.6	3.6	9.9	42.4	44.2	31.3	68.7	66.4	27.2	0.7	0.9	4.9
Home health	4,101.4	5.2	6.5	52.7	35.6	38.0	62.0	73.2	21.8	0.7	0.5	3.8
Family planning	357.9	2.1	14.6	82.3	1.0	5.1	94.9	51.5	33.8	0.8	1.1	12.8
Laboratory and radiological	895.7	8.6	15.0	59.5	16.9	28.0	72.0	56.0	27.3	0.7	2.3	13.8
Prescribed drugs	5,424.0	6.7	7.9	44.9	40.6	31.1	68.9	69.6	22.4	0.5	1.8	5.7
Combined other ³	3,364.5	19.5	21.1	41.5	18.0	41.7	58.4	55.2	35.7	1.0	1.6	6.5

¹Includes mental hospital services for the aged, mental health services for the aged in skilled nursing facilities (SNF), and inpatient psychiatric facility services for individuals age 21 or under.

²Includes payments for services previously characterized as SNF and intermediate care facility, other than for the mentally retarded (ICF-Other) services. See footnote 2 in Table 16.14 for additional information.

³Includes early and periodic screening, diagnosis, and treatment services; rural health clinic services; and other covered services not reported separately.

NOTE: ICF/MR is intermediate care facility for the mentally retarded.

SOURCE: Health Care Financing Administration, Bureau of Data Management and Strategy: Data from the Division of Medicaid Statistics.

Figure 16.16

Percent distribution of Medicaid payments, by sex and type of service: Fiscal year 1991

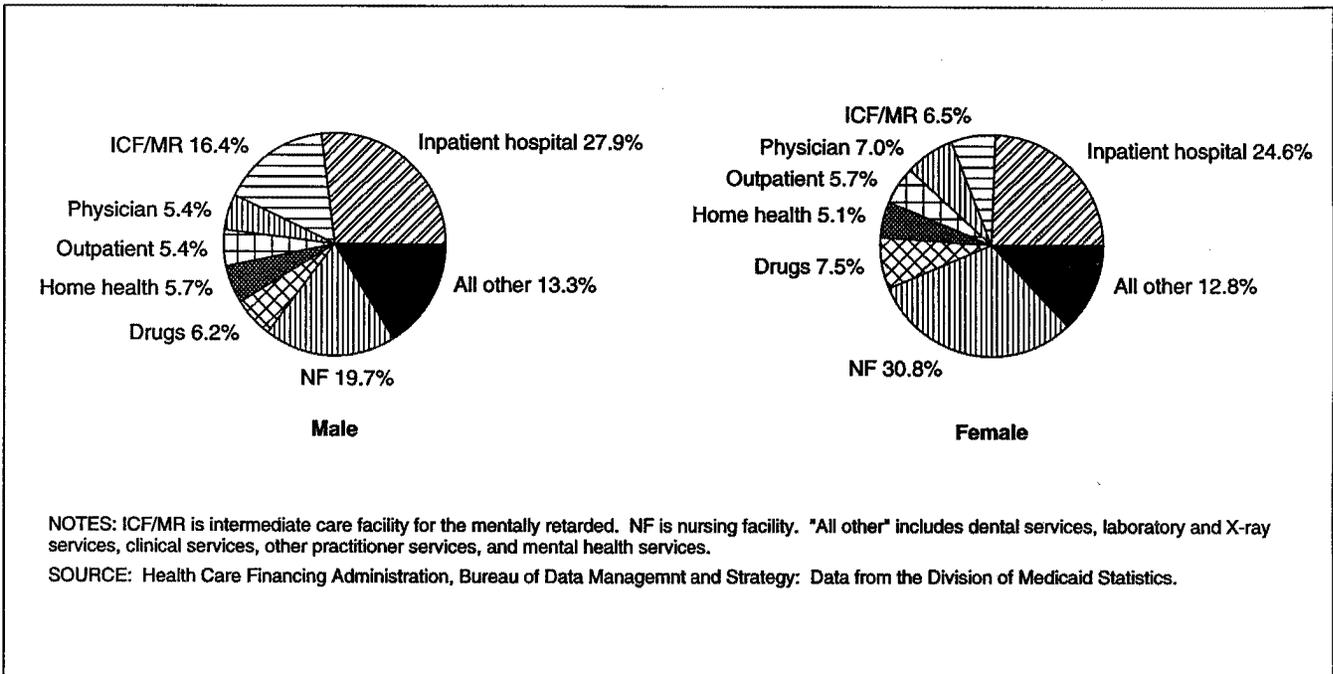
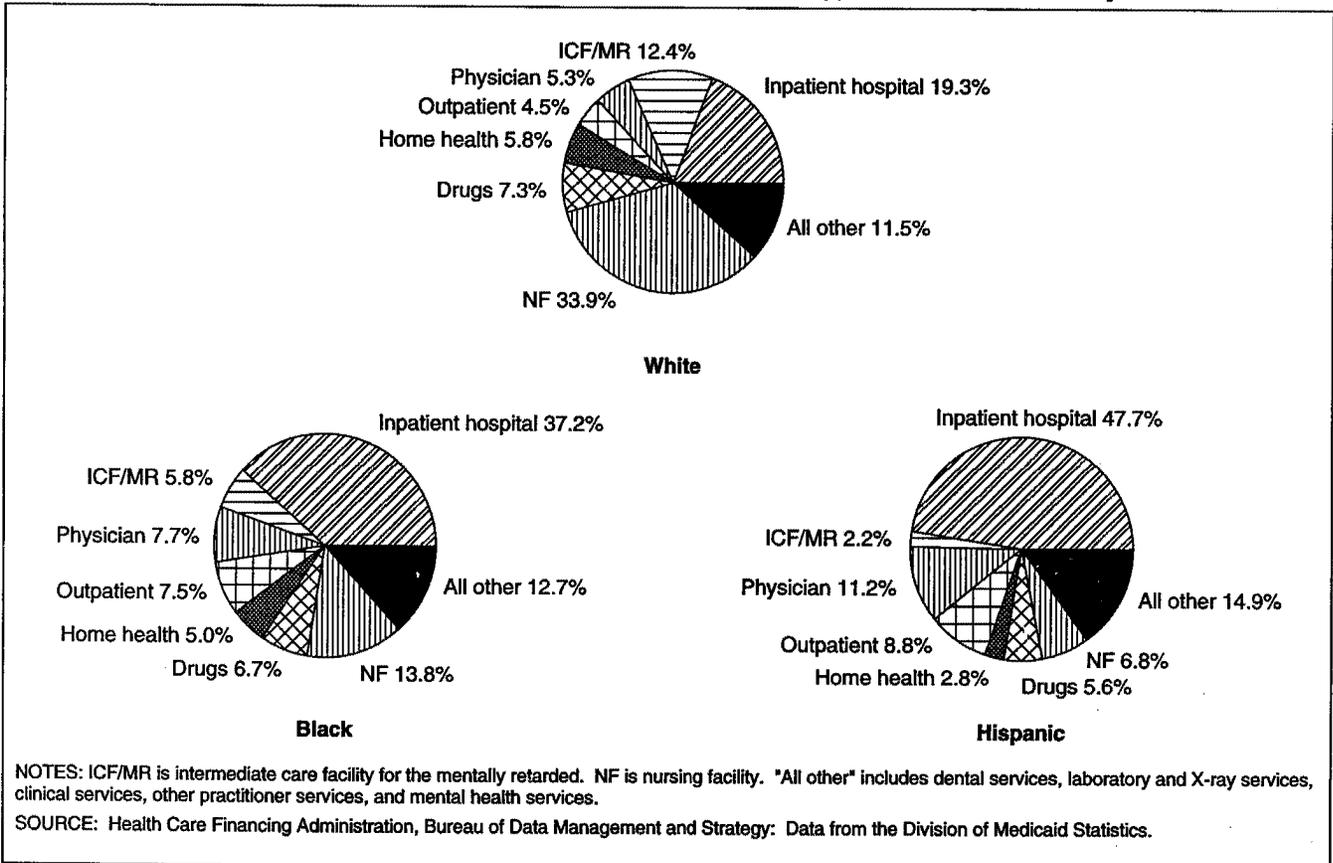


Figure 16.17

Percent distribution of Medicaid payments, by race and type of service: Fiscal year 1991



in any contemplated reform of the American health care system will pose difficult choices. The resolution of conflicting priorities and the allocation of resources will not be painless. The decisionmaking will not be limited to a Medicaid context alone, but will juxtapose the values embedded within the program itself against other national and local values and priorities. The program data of future years will provide evidence on the direction of the debate.

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