

**Table 73**  
**Medicare Enrollees and Benefit Payments, by Area of Residence: Calendar Year 1999**

Area of Residence <sup>1</sup>	Enrollees			Managed Care as Percent of Total	Benefit Payments in Millions <sup>3</sup>			Managed Care as Percent of Total
	Total	Managed Care	Fee-for- Service		Total	Managed Care	Fee-for- Service	
United States <sup>2</sup>	38,318,620	6,965,780	31,352,840	18.2	\$208,512	\$38,424	\$170,088	18.4
Northeast	8,059,680	1,688,940	6,370,740	21.0	48,601	9,577	39,024	19.7
Midwest	9,143,400	916,040	8,227,360	10.0	45,240	4,657	40,583	10.3
South	13,682,360	1,781,880	11,900,480	13.0	75,125	10,156	64,969	13.5
West	7,433,180	2,578,920	4,854,260	34.7	39,541	14,033	25,508	35.5
New England	2,103,180	424,500	1,678,680	20.2	11,841	2,299	9,542	19.4
Connecticut	515,080	107,580	407,500	20.9	2,956	557	2,399	18.8
Maine	214,380	1,480	212,900	0.7	949	5	944	0.6
Massachusetts	952,280	240,860	711,420	25.3	5,898	1,374	4,525	23.3
New Hampshire	165,020	16,120	148,900	9.8	711	69	642	9.7
Rhode Island	168,380	56,560	111,820	33.6	944	287	657	30.4
Vermont	88,040	1,900	86,140	2.2	383	8	375	2.0
Middle Atlantic	5,956,500	1,264,440	4,692,060	21.2	36,760	7,278	29,482	19.8
New Jersey	1,200,700	197,760	1,002,940	16.5	7,613	1,042	6,571	13.7
New York	2,673,800	495,020	2,178,780	18.5	16,959	2,963	13,997	17.5
Pennsylvania	2,082,000	571,660	1,510,340	27.5	12,188	3,274	8,914	26.9
East North Central	6,311,320	640,460	5,670,860	10.1	32,410	3,312	29,098	10.2
Illinois	1,621,520	187,560	1,433,960	11.6	8,793	1,023	7,770	11.6
Indiana	838,260	34,160	804,100	4.1	3,903	165	3,738	4.2
Michigan	1,384,980	74,140	1,310,840	5.4	7,774	416	7,358	5.4
Ohio	1,696,920	301,580	1,395,340	17.8	8,685	1,535	7,150	17.7
Wisconsin	769,640	43,020	726,620	5.6	3,255	172	3,083	5.3

See footnotes at end of table.

**Table 73—Continued**  
**Medicare Enrollees and Benefit Payments, by Area of Residence: Calendar Year 1999**

Area of Residence <sup>1</sup>	Enrollees			Managed	Benefit Payments in Millions <sup>3</sup>			Managed
	Total	Managed	Fee-for-	Care as	Total	Managed	Fee-for-	Care as
		Care	Service	Percent of Total		Care	Service	Percent of Total
West North Central	2,832,080	275,580	2,556,500	9.7	\$12,830	\$1,346	\$11,485	10.5
Iowa	475,200	18,540	456,660	3.9	1,946	76	1,871	3.9
Kansas	384,700	28,940	355,760	7.5	1,818	141	1,678	7.7
Minnesota	647,160	89,120	558,040	13.8	2,778	439	2,339	15.8
Missouri	852,140	123,920	728,220	14.5	4,283	621	3,662	14.5
Nebraska	253,280	14,160	239,120	5.6	1,108	66	1,042	5.9
North Dakota	101,820	700	101,120	0.7	411	3	408	0.8
South Dakota	117,780	200	117,580	0.2	485	1	484	0.2
South Atlantic	7,408,100	1,070,600	6,337,500	14.5	40,694	6,396	34,297	15.7
Delaware	111,820	5,080	106,740	4.5	576	21	555	3.7
District of Columbia	76,420	8,260	68,160	10.8	556	54	503	9.6
Florida	2,793,240	789,400	2,003,840	28.3	17,136	4,968	12,168	29.0
Georgia	909,620	56,280	853,340	6.2	4,700	293	4,407	6.2
Maryland	635,220	88,080	547,140	13.9	4,028	520	3,508	12.9
North Carolina	1,111,960	46,320	1,065,640	4.2	5,274	185	5,089	3.5
South Carolina	556,140	2,940	553,200	0.5	2,726	13	2,714	0.5
Virginia	877,920	48,900	829,020	5.6	4,021	214	3,806	5.3
West Virginia	335,760	25,340	310,420	7.5	1,677	129	1,548	7.7

See footnotes at end of table.

**Table 73—Continued**  
**Medicare Enrollees and Benefit Payments, by Area of Residence: Calendar Year 1999**

Area of Residence <sup>1</sup>	Enrollees			Managed	Benefit Payments in Millions <sup>3</sup>			Managed
	Total	Managed	Fee-for-	Care as	Total	Managed	Fee-for-	Care as
		Care	Service	Percent		of Total	Care	Service
East South Central	2,519,040	138,200	2,380,840	5.5	\$12,759	\$701	\$12,058	5.5
Alabama	677,940	54,480	623,460	8.0	3,494	311	3,183	8.9
Kentucky	612,240	34,560	577,680	5.6	2,910	166	2,744	5.7
Mississippi	414,100	4,920	409,180	1.2	2,232	22	2,210	1.0
Tennessee	814,760	44,240	770,520	5.4	4,123	202	3,920	4.9
West South Central	3,755,220	573,080	3,182,140	15.3	21,672	3,058	18,614	14.1
Arkansas	431,220	18,600	412,620	4.3	1,998	87	1,911	4.4
Louisiana	595,340	116,780	478,560	19.6	3,946	684	3,263	17.3
Oklahoma	502,540	50,200	452,340	10.0	2,609	226	2,383	8.7
Texas	2,226,120	387,500	1,838,620	17.4	13,119	2,061	11,058	15.7
Mountain	2,154,000	577,840	1,576,160	26.8	9,979	2,886	7,092	28.9
Arizona	661,280	261,100	400,180	39.5	3,234	1,385	1,848	42.8
Colorado	461,640	163,960	297,680	35.5	2,265	779	1,486	34.4
Idaho	163,400	16,040	147,360	9.8	656	61	595	9.2
Montana	135,480	3,800	131,680	2.8	524	12	513	2.2
Nevada	234,640	78,640	156,000	33.5	1,226	423	803	34.5
New Mexico	229,780	46,000	183,780	20.0	982	190	792	19.3
Utah	204,120	6,820	197,300	3.3	813	29	784	3.6
Wyoming	63,660	1,480	62,180	2.3	278	8	270	2.9
Pacific	5,279,180	2,001,080	3,278,100	37.9	29,563	11,147	18,416	37.7
Alaska	40,280	360	39,920	0.9	225	1	224	0.5
California	3,861,080	1,570,220	2,290,860	40.7	23,331	9,247	14,084	39.6
Hawaii	163,620	53,960	109,660	33.0	643	243	400	37.8
Oregon	489,900	186,120	303,780	38.0	2,080	801	1,279	38.5
Washington	724,300	190,420	533,880	26.3	3,283	854	2,429	26.0

<sup>1</sup>Based on the area of residence of the beneficiary as of March 2000.

<sup>2</sup>Excludes Puerto Rico, Guam, Virgin Islands, residence unknown, foreign countries, and other outlying areas not shown separately.

<sup>3</sup>Fee-for-service benefit payments are estimated from relative distribution of billing reimbursement by State of residence and from actuarial estimates of total incurred fee-for-service benefit payments. Managed care benefit payments represent estimates of premiums paid by Medicare to Medicare+Choice (risk), cost, health care pre-payment plans, and other managed care organizations by State of residence of the beneficiary and may differ from those distributions based on the location of the plan. The distribution by State is estimated from the relative distribution of the initial monthly payments as determined by the Group Health Plan premium file and from actuarial estimates of total incurred managed care premiums. The relative distribution does not reflect the impact of all payment factors and of all retroactive adjustments.

NOTES: Numbers may not add to total because of rounding. Percents based on unrounded numbers.

SOURCES: Centers for Medicare & Medicaid Services, Office of Information Services: Decision Support Access Facility; Office of the Actuary; data development by the Office of Research, Development, and Information.