

**Table 73**  
**Medicare Enrollees and Benefit Payments, by Area of Residence: Calendar Year 2000**

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		Care	Service	Percent
				of Total				of Total
All Areas	39,632,060	6,891,720	32,740,340	17.4	\$221,141	\$40,135	\$181,006	18.1
United States <sup>2</sup>	38,782,220	6,886,940	31,895,280	17.8	219,698	40,126	179,572	18.3
Northeast	8,119,820	1,662,420	6,457,400	20.5	50,971	9,986	40,984	19.6
Midwest	9,207,560	931,840	8,275,720	10.1	47,644	4,961	42,683	10.4
South	13,887,820	1,730,060	12,157,760	12.5	79,386	10,261	69,125	12.9
West	7,567,020	2,562,620	5,004,400	33.9	41,697	14,918	26,780	35.8
New England	2,122,880	403,560	1,719,320	19.0	12,420	2,322	10,097	18.7
Connecticut	517,520	105,120	412,400	20.3	3,114	572	2,542	18.4
Maine	216,300	2,020	214,280	0.9	1,023	8	1,016	0.7
Massachusetts	961,100	237,080	724,020	24.7	6,124	1,429	4,695	23.3
New Hampshire	168,600	2,780	165,820	1.6	767	11	756	1.4
Rhode Island	170,300	56,340	113,960	33.1	974	303	671	31.1
Vermont	89,060	220	88,840	0.2	418	1	418	0.1
Middle Atlantic	5,996,940	1,258,860	4,738,080	21.0	38,551	7,664	30,887	19.9
New Jersey	1,211,800	171,960	1,039,840	14.2	8,064	974	7,090	12.1
New York	2,694,640	493,680	2,200,960	18.3	17,811	3,168	14,643	17.8
Pennsylvania	2,090,500	593,220	1,497,280	28.4	12,676	3,522	9,154	27.8
East North Central	6,358,020	651,320	5,706,700	10.2	34,137	3,521	30,616	10.3
Illinois	1,626,340	190,060	1,436,280	11.7	9,083	1,085	7,998	11.9
Indiana	847,600	34,940	812,660	4.1	4,189	175	4,014	4.2
Michigan	1,402,040	82,160	1,319,880	5.9	8,169	484	7,684	5.9
Ohio	1,706,340	297,360	1,408,980	17.4	9,228	1,575	7,652	17.1
Wisconsin	775,700	46,800	728,900	6.0	3,469	201	3,268	5.8

See footnotes at end of table.

**Table 73—Continued**  
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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		Care	Service	Percent
				of Total				of Total
West North Central	2,849,540	280,520	2,569,020	9.8	\$13,507	\$1,440	\$12,067	10.7
Iowa	475,180	17,400	457,780	3.7	2,132	75	2,057	3.5
Kansas	386,300	30,660	355,640	7.9	1,938	154	1,783	8.0
Minnesota	655,220	87,000	568,220	13.3	2,935	459	2,475	15.7
Missouri	858,880	133,680	725,200	15.6	4,442	695	3,748	15.6
Nebraska	254,120	10,620	243,500	4.2	1,133	52	1,081	4.5
North Dakota	101,540	720	100,820	0.7	431	3	428	0.8
South Dakota	118,300	440	117,860	0.4	496	2	494	0.3
South Atlantic	7,526,680	1,006,980	6,519,700	13.4	43,067	6,316	36,752	14.7
Delaware	114,900	5,580	109,320	4.9	644	25	619	3.8
District of Columbia	75,400	6,960	68,440	9.2	534	50	484	9.4
Florida	2,827,120	757,460	2,069,660	26.8	18,206	4,951	13,255	27.2
Georgia	928,040	57,440	870,600	6.2	4,888	317	4,571	6.5
Maryland	645,820	69,840	575,980	10.8	4,275	457	3,817	10.7
North Carolina	1,131,060	47,520	1,083,540	4.2	5,513	208	5,305	3.8
South Carolina	570,140	1,620	568,520	0.3	2,974	6	2,968	0.2
Virginia	896,440	35,340	861,100	3.9	4,323	167	4,156	3.9
West Virginia	337,760	25,220	312,540	7.5	1,712	135	1,577	7.9

See footnotes at end of table.

**Table 73—Continued**  
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Area of Residence <sup>1</sup>	Enrollees			Managed	Benefit Payments in Millions <sup>3</sup>			Managed
	Total	Managed	Fee-for-Service	Care as Percent of Total	Total	Managed	Fee-for-Service	Care as Percent of Total
		Care				Care		
East South Central	2,553,040	149,120	2,403,920	5.8	13,540	\$783	\$12,757	5.8
Alabama	685,960	59,640	626,320	8.7	3,691	348	3,344	9.4
Kentucky	618,360	34,300	584,060	5.5	3,067	175	2,892	5.7
Mississippi	418,840	6,080	412,760	1.5	2,351	26	2,325	1.1
Tennessee	829,880	49,100	780,780	5.9	4,431	234	4,197	5.3
West South Central	3,808,100	573,960	3,234,140	15.1	22,778	3,162	19,616	13.9
Arkansas	433,640	18,540	415,100	4.3	2,148	88	2,060	4.1
Louisiana	599,740	107,500	492,240	17.9	4,073	668	3,405	16.4
Oklahoma	507,100	54,200	452,900	10.7	2,729	250	2,478	9.2
Texas	2,267,620	393,720	1,873,900	17.4	13,828	2,155	11,673	15.6
Mountain	2,204,020	555,780	1,648,240	25.2	10,575	2,944	7,631	27.8
Arizona	675,520	241,660	433,860	35.8	3,433	1,350	2,083	39.3
Colorado	470,340	162,040	308,300	34.5	2,352	820	1,532	34.9
Idaho	166,760	17,220	149,540	10.3	730	70	661	9.5
Montana	136,920	480	136,440	0.4	583	1	582	0.2
Nevada	246,280	81,500	164,780	33.1	1,307	465	841	35.6
New Mexico	233,680	44,320	189,360	19.0	984	200	784	20.3
Utah	208,660	6,880	201,780	3.3	886	30	856	3.4
Wyoming	65,860	1,680	64,180	2.6	301	8	293	2.5
Pacific	5,363,000	2,006,840	3,356,160	37.4	31,122	11,974	19,149	38.5
Alaska	41,960	300	41,660	0.7	219	1	218	0.4
California	3,922,000	1,584,280	2,337,720	40.4	24,487	9,940	14,547	40.6
Hawaii	167,680	53,800	113,880	32.1	719	272	447	37.8
Oregon	495,760	185,920	309,840	37.5	2,245	870	1,375	38.7
Washington	735,600	182,540	553,060	24.8	3,452	891	2,561	25.8

<sup>1</sup>Based on the area of residence of the beneficiary as of March 2001.

<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 using the risk plan methodology and from actuarial estimates of total incurred managed care premiums. Adjustments to cost and health care pre-payment plans are not reflected in the managed care payments. Hence, for both fee-for-service and managed care, 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.