

Table 13.24

Medicaid Payments per Person Served (Beneficiary), by Basis of Eligibility and Area of Residence: Fiscal Year 2009

Area of Residence	Total	Aged	Disabled	Children ¹	Adults	Other/ Unknown
All Jurisdictions	\$5,225	\$15,337	\$15,670	\$2,145	\$3,144	\$2,160
Boston: Region I	7,238	20,038	19,065	3,091	3,129	4,255
Connecticut	9,476	30,362	34,701	2,825	3,525	9,952
Maine	4,734	9,835	12,833	2,180	1,640	1,665
Massachusetts	7,045	19,703	16,777	3,471	2,978	1,404
New Hampshire	7,052	20,841	17,965	3,163	3,718	648
Rhode Island	7,654	20,813	19,288	2,916	5,470	1,810
Vermont	5,757	10,515	15,901	3,264	3,460	1,087
New York: Region II	8,670	27,290	27,581	2,619	4,800	921
New Jersey	7,220	20,383	21,468	2,187	3,779	2,307
New York	9,004	29,049	29,234	2,761	4,942	781
Puerto Rico	---	---	---	---	---	---
Virgin Islands	---	---	---	---	---	---
Philadelphia: Region III	6,694	17,911	15,002	2,671	4,189	3,585
Delaware	6,053	21,268	20,303	2,782	5,125	212
District of Columbia	11,077	26,382	27,577	2,798	4,765	31,846
Maryland	7,481	22,418	22,605	2,765	5,879	2,956
Pennsylvania	6,365	18,578	12,230	2,642	3,443	241
Virginia	6,074	12,757	16,384	2,763	4,268	1,569
West Virginia	6,699	16,319	11,475	2,225	3,292	30,452
Atlanta: Region IV	4,593	12,443	11,209	2,067	3,596	1,737
Alabama	4,135	11,500	7,627	2,147	2,266	3,437
Florida	4,310	12,488	12,618	1,675	2,846	1,050
Georgia	4,109	10,374	10,062	1,936	4,923	1,693
Kentucky	5,341	13,777	10,378	2,716	4,415	633
Mississippi	3,433	13,591	9,179	1,947	3,015	-96
North Carolina	5,450	12,758	15,738	2,335	3,897	762
South Carolina	5,239	9,926	11,479	1,963	3,137	38,947
Tennessee	4,910	16,549	9,848	2,426	4,196	1,069

See footnotes at end of table.

Table 13.24—Continued

Medicaid Payments per Person Served (Beneficiary), by Basis of Eligibility and Area of Residence: Fiscal Year 2009

Area of Residence	Total	Aged	Disabled	Children ¹	Adults	Other/ Unknown
Chicago: Region V	\$5,539	\$16,678	\$16,159	\$1,884	\$3,225	\$16,129
Illinois	4,502	11,900	15,236	1,695	2,571	15,650
Indiana	4,871	18,502	16,706	1,771	2,992	770
Michigan	5,381	13,373	10,026	1,513	3,592	42,200
Minnesota	8,768	24,076	28,501	3,385	3,893	1,977
Ohio	6,243	21,458	18,015	2,073	3,711	1,369
Wisconsin	5,167	13,251	15,854	1,757	3,026	889
Dallas: Region VI	4,443	12,326	14,024	2,204	3,110	1,351
Arkansas	4,339	15,729	12,471	2,227	1,923	337
Louisiana	4,586	12,277	13,933	1,779	3,218	1,263
New Mexico	5,185	4,785	13,756	2,720	4,884	28,103
Oklahoma	4,419	12,081	13,815	2,074	3,194	782
Texas	4,330	12,159	14,528	2,271	2,795	620
Kansas City: Region VII	5,738	15,403	15,643	2,407	3,150	1,632
Iowa	5,974	16,777	19,023	2,008	3,008	2,414
Kansas	6,528	17,894	17,510	2,263	3,783	1,699
Missouri	5,265	13,270	13,233	2,545	2,964	759
Nebraska	6,218	17,487	19,040	2,685	3,544	4,860
Denver: Region VIII	5,581	16,678	17,559	2,141	3,229	6,710
Colorado	5,196	16,357	17,236	1,892	3,117	2,307
Montana	6,372	20,978	14,793	2,759	4,377	3,051
North Dakota	7,674	24,609	23,826	2,557	3,602	947
South Dakota	5,192	12,861	15,661	2,269	3,723	3,545
Utah	5,298	11,145	17,034	1,999	2,605	13,729
Wyoming	7,635	24,466	25,376	3,290	5,754	295

See footnotes at end of table.

Table 13.24—Continued

Medicaid Payments per Person Served (Beneficiary), by Basis of Eligibility and Area of Residence: Fiscal Year 2009

Area of Residence	Total	Aged	Disabled	Children ¹	Adults	Other/ Unknown
San Francisco: Region IX	\$3,388	\$9,931	\$14,779	\$1,753	\$1,894	\$355
Arizona	5,427	13,248	18,048	2,583	5,135	2,724
California	3,058	9,509	14,370	1,586	1,287	327
Hawaii	4,610	13,565	15,621	1,712	3,352	1,894
Nevada	4,259	10,891	14,290	2,066	2,323	1,687
Seattle: Region X	5,292	14,354	14,338	1,938	3,958	7,732
Alaska	8,990	23,645	26,235	4,985	6,577	2,040
Idaho	5,593	16,437	18,684	1,939	4,682	1,158
Oregon	5,258	13,304	13,527	2,025	4,481	1,070
Washington	4,872	13,721	12,709	1,585	3,230	9,518

¹Includes non-disabled children and foster care children.

NOTES: Beginning fiscal year 1998, capitated premiums for Medicaid eligibles enrolled in managed care plans were included in this series as a Medicaid payment. Also, States process a variety of payments that are not associated with an eligible individual (e.g., disproportionate share payments to hospitals, interim lump-sum provider reimbursement adjustments, and final cost report settlements). These adjustments can be positive (that is, an additional payment to the provider) or negative (that is, a recoupment). Because these payments cannot be associated with any one beneficiary, the eligibility and demographic characteristics for these payments are categorized as other/unknown. Where distributions by basis of eligibility are not provided by the jurisdiction, and where the averages would yield negative or unusually large values, the average payments are not shown. Beneficiaries covered under SCHIP and their payments are excluded from Medicaid.

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations: Medicaid Statistical Information System (MSIS); data development by the Center for Strategic Planning.