

Table II.6

## Medicaid/Type of Service

	Fiscal Year		
	2004	2005	2006
	In billions		
Total Medical Assistance Payments <sup>1</sup>	\$281.8	\$300.7	\$299.0
	Percent of Total		
Inpatient Services	15.6	15.5	15.3
General Hospitals	13.9	14.0	14.3
Mental Hospitals	1.7	1.6	1.1
Nursing facility services	16.5	15.4	16.0
Intermediate care facility services for mentally retarded	4.3	4.2	4.3
Community-based long term care services <sup>2</sup>	11.9	12.1	13.4
Prescribed drugs <sup>3</sup>	10.8	10.2	5.6
Physician services	4.1	4.1	4.2
Dental services	1.1	1.1	1.1
Outpatient hospital services	4.3	4.1	3.9
Clinic services <sup>4</sup>	2.9	3.0	3.1
Laboratory and radiological services	0.4	0.4	0.4
Early and periodic screening	0.4	0.4	0.4
Targeted case management services	1.0	1.0	1.0
Capitation payments (non-Medicare)	16.2	16.8	18.6
Medicare premiums	2.3	2.7	3.1
Disproportionate share hospital payments	6.1	5.7	5.7
Other services	4.4	5.0	5.6
Collections <sup>5</sup>	-2.3	-1.7	-1.8

<sup>1</sup>Excludes payments under State Children's Health Insurance Program (SCHIP).

<sup>2</sup>Comprised of home health, home and community-based waivers, personal care and home and community-based services for functionally disabled elderly.

<sup>3</sup>Net of prescription drug rebates.

<sup>4</sup>Federal qualified health clinics, rural health clinics, and other clinics.

<sup>5</sup>Includes collections for third party liability, probate, fraud and abuse, overpayments, and other.

SOURCE: Medicaid Financial Management Reports

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