

Medicaid

STATE REPORTS – FY 1997

Illinois



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September 1999



Medicaid State Report

ILLINOIS, FY 1997 (October 1, 1996 - September 30, 1997)

Division of
Health Policy Research

I. MEDICAID ENROLLEES AND EXPENDITURES									
	ILLINOIS			EAST NORTH CENTRAL REGION~			UNITED STATES		
A. Federal Medical Assistance Percentage (FMAP)*	50.0% (FY97)	50.0% (FY99)	65.0% (Enhanced)	56.1% (FY97)	56.2% (FY99)	69.3% (Enhanced)	56.6% (FY97)	60.7% (FY99)	72.5% (Enhanced)
B. Total Medicaid Managed Care Enrollment, 06/30/1997 (% of Total Medicaid Enrollment)	187,048 (13.6% of 1,370,354 **)			1,830,838 (41.5% of 4,409,395 **)			14,642,500 (47.5% of 30,813,957 **)		
C. Percent of Births Paid for by Medicaid, 1996***	40.0%			37.1%			38%		
D. FY 1997 and FY 1994-97 Averaged DSH^ Payment	\$274 M		\$274 M	\$1,443 M		\$1,280 M	\$15,937 M		\$14,105 M
# E. Enrollee, by Age, FY 1997	<u>Enrollees</u>		<u>Percent</u>	<u>Enrollees</u>		<u>Percent</u>	<u>Enrollees</u>		<u>Percent</u>
All Enrollees	1,868,205		100.0%	5,902,204		100.0%	40,327,268		100.0%
Children Under Age 21	1,108,986		59.4%	3,393,410		57.5%	22,729,432		56.4%
Under Age 6	536,454		28.7%	1,481,517		25.1%	9,643,356		23.9%
Infants	161,024		8.6%	331,858		5.6%	2,112,346		5.2%
Age 1 Through 5	375,430		20.1%	1,149,659		19.5%	7,531,010		18.7%
Age 6 Through 20	572,532		30.6%	1,911,893		32.4%	13,086,076		32.4%
## F. Percent Enrollees and Expenditures^^ by Eligibility Category, FY 1997	<u>Enrollees</u>	<u>Expenditures</u>	<u>\$Per Enrollee</u>	<u>Enrollees</u>	<u>Expenditures</u>	<u>\$Per Enrollee</u>	<u>Enrollees</u>	<u>Expenditures</u>	<u>\$Per Enrollee</u>
All Enrollees	1,868,205	\$6,009 M	\$3,217	5,902,204	\$21,098 M	\$3,575	40,327,268	\$137,720 M	\$3,415
Children^^^	55.1%	17.9%	\$1,046	51.5%	15.2%	\$1,045	51.4%	16.7%	\$1,132
Categorically Needy - Cash	25.1%	6.9%	\$890	22.0%	7.0%	\$1,130	21.4%	6.6%	\$1,081
Categorically Needy - Noncash	5.8%	1.7%	\$936	13.6%	3.2%	\$839	15.4%	4.2%	\$950
Medically Needy	7.5%	2.2%	\$962	4.8%	1.1%	\$788	5.3%	1.8%	\$1,199
Other	16.7%	7.0%	\$1,355	11.1%	3.9%	\$1,238	9.3%	4.0%	\$1,510
Adults	22.6%	10.9%	\$1,558	22.3%	11.0%	\$1,745	20.6%	10.9%	\$1,844
Categorically Needy - Cash	11.1%	6.0%	\$1,735	11.2%	6.6%	\$2,066	10.2%	5.4%	\$1,834
Categorically Needy - Noncash	1.6%	1.3%	\$2,625	4.0%	2.2%	\$1,931	3.6%	2.4%	\$2,271
Medically Needy	6.7%	2.2%	\$1,064	3.8%	1.2%	\$1,068	2.6%	1.4%	\$1,798
Other	3.1%	1.4%	\$1,435	3.2%	1.1%	\$1,194	4.1%	1.8%	\$1,523
Blind and Disabled	15.7%	52.6%	\$10,758	17.3%	45.7%	\$9,299	16.6%	43.4%	\$9,152
Aged	6.6%	18.6%	\$9,045	8.9%	28.1%	\$11,119	11.4%	29.0%	\$8,917

Notes: ~ Includes IL, IN, MI, OH & WI. * US averages of FY97 FMAP are weighted by FY97 expenditures. FY99 and Enhanced FMAPs are unweighted. ** Enrollment on 06/30/97 was 73.4% of total annual enrollment reported to HCFA on Form 2082 for FY 1997. *** Data unavailable for HI and VA. Data for AR, CT, GA, MT, NH & WV are from 1995 and not included in region and US averages. ^ Disproportionate Share Hospital Payments. # Enrollee by age data for HI are from FY 1996 and did not include managed care enrollees. ## Enrollees and expenditures by eligibility category data for AZ, HI, OK and TN are from FY 1996 and not included in regional and US averages. HI did not report managed care enrollee and expenditures data on Form HCFA-2082 in FY 1996. ^^ Includes Medicaid vendor payments, health plan premiums, capitation and HMO payments reported by the states to HCFA on Form HCFA-2082. ^^ As defined by HCFA based on age and other factors. 'na' Data unavailable. 'NA' Not Applicable.

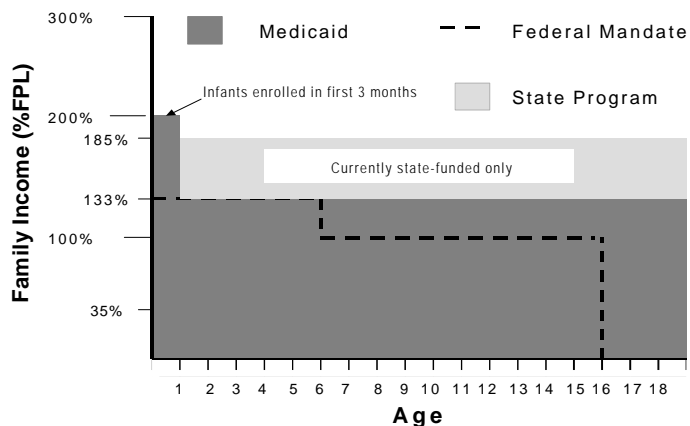
I. CONTINUED	ILLINOIS				EAST NORTH CENTRAL REGION				UNITED STATES			
	#G. FFS* Payments by Age and Type of Service		<u>CHILDREN Under 21</u>	<u>ADULTS</u>	<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>	
Physician Services		1.5%		2.9%	1.5%		3.1%		2.1%		3.6%	
Dental Services		0.0%		0.0%	0.3%		0.3%		0.5%		0.3%	
Other Practitioners		0.4%		0.0%	0.5%		0.6%		0.4%		0.4%	
EPSDT**		1.1%		0.0%	0.5%		0.0%		1.3%		0.0%	
Family Planning Services		0.0%		0.3%	0.0%		0.2%		0.1%		0.3%	
Rural Health Clinics		0.1%		0.1%	0.1%		0.1%		0.1%		0.1%	
Other Clinics		0.2%		0.5%	1.5%		3.0%		1.0%		2.4%	
Outpatient Hospital		1.2%		2.4%	1.3%		3.1%		1.6%		3.4%	
Inpatient Hospital		9.3%		19.0%	6.5%		13.4%		6.3%		12.2%	
Nursing Home/Intermediate Care		0.7%		32.4%	0.7%		36.5%		0.7%		32.1%	
Mental/Psychiatric Hospital Care		3.6%		2.9%	1.5%		1.2%		0.9%		0.7%	
Home Health Care		0.4%		4.1%	0.7%		4.4%		1.4%		8.6%	
Lab and X-Ray		0.2%		0.6%	0.1%		0.5%		0.2%		0.6%	
Drug		1.2%		7.8%	1.2%		9.0%		1.4%		8.3%	
Other Services***		3.9%		3.1%	3.7%		4.7%		3.5%		5.5%	
Total		23.8%		76.2%	20.0%		80.0%		21.5%		78.5%	
#H. Average FFS* Payments per User of Service and Percent of Enrollees Using Each Service	<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>	
	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+	Per-user	%Use+
Physician Services	\$174	45.7%	\$372	58.8%	\$196	42.8%	\$398	59.0%	\$248	45.7%	\$428	57.9%
Dental Services	\$95	0.1%	\$98	0.2%	\$116	13.1%	\$138	15.5%	\$166	17.5%	\$191	11.0%
Other Practitioners	\$449	4.8%	\$31	2.3%	\$408	7.6%	\$248	18.7%	\$264	8.1%	\$151	18.3%
EPSDT**	\$125	44.5%	\$105	0.7%	\$110	24.2%	\$83	0.3%	\$255	27.5%	\$115	0.6%
Family Planning Services	\$83	2.4%	\$209	9.4%	\$83	1.9%	\$254	7.5%	\$123	2.6%	\$233	8.4%
Rural Health Clinics	\$196	3.5%	\$224	4.3%	\$161	2.7%	\$197	2.9%	\$202	3.6%	\$233	3.3%
Other Clinics	\$438	1.9%	\$385	10.9%	\$642	13.1%	\$1,232	18.9%	\$552	9.9%	\$1,266	13.5%
Outpatient Hospital	\$196	32.7%	\$399	45.2%	\$240	30.2%	\$507	47.1%	\$304	28.0%	\$591	39.8%
Inpatient Hospital	\$7,148	6.8%	\$8,734	16.6%	\$4,849	7.6%	\$6,114	16.8%	\$4,628	7.3%	\$5,029	16.9%
Nursing Home/Intermediate Care	\$43,411	0.1%	\$19,890	12.4%	\$54,462	0.1%	\$21,154	13.2%	\$58,410	0.1%	\$23,922	9.3%
Mental/Psychiatric Hospital Care	\$71,473	0.3%	\$563,663	0.0%	\$31,815	0.3%	\$107,944	0.1%	\$19,642	0.3%	\$31,204	0.2%
Home Health Care	\$3,070	0.6%	\$5,390	5.8%	\$2,674	1.4%	\$5,256	6.4%	\$3,554	2.1%	\$7,582	7.8%
Lab and X-Ray	\$46	24.6%	\$106	45.8%	\$45	17.5%	\$100	35.8%	\$60	20.6%	\$122	34.3%
Drug	\$130	48.6%	\$966	61.8%	\$155	43.8%	\$1,078	64.2%	\$165	45.4%	\$984	58.9%
Other Services***	\$1,394	14.4%	\$1,108	21.1%	\$820	25.4%	\$986	36.3%	\$818	22.7%	\$1,172	32.4%
All Services	\$1,757	70.7%	\$7,171	80.9%	\$1,504	75.2%	\$7,017	87.4%	\$1,523	76.5%	\$6,352	86.5%

Notes: # FFS payments by type of service data for HI, OK and TN are from FY 1996 and not included in regional and US averages. Utilization by type of service data for HI, OK and TN are from FY 1996 and not included in regional and US averages. When less than 0.05% of expenditures is accounted for by a type of service, it is rounded to 0.0%. * FFS (fee-for-service) payments. Except for Tennessee, which appears to be reporting capitation payments as Vendor Payments for Other services, payments in Sections G and H do not include i) DSH payments(15.9 Billion), and ii) health plan premiums, capitation and HMO payments(14.1 Billion). FFS payments totaled \$124 Billion nationally in FY 1997. ** EPSDT services are known to be under-reported in many states due to complexities in the reporting process. *** Any other medical or remedial care recognized under state law and specified by the Secretary, including but not limited to transportation, physical and occupational therapy, dentures, prosthetic devices, rehabilitative and hospice services. Note that Tennessee includes capitation, HMO and plan premium payments as expenditures for Other Services. + Percents may sum to exceed 100 because enrollees may use multiple services. Service recipients in managed care plans may not be counted. 'na' Data unavailable. 'NA' Not applicable.

I. CONTINUED									
ILLINOIS			EAST NORTH CENTRAL REGION			UNITED STATES			
# I. Enrollee Under Age 21, by Race and Age, FY 1997	<u>Enrollees</u>	<u>Percent</u>	<u>Enrollees</u>	<u>Percent</u>	<u>Enrollees</u>	<u>Percent</u>			
Non-hispanic White	413,061	37.2%	1,622,295	47.8%	9,292,048	40.9%			
Ages 0 Through 5	225,801	54.7%	749,940	46.2%	3,943,710	42.4%			
Ages 6 Through 20	187,260	45.3%	872,355	53.8%	5,348,339	57.6%			
Non-hispanic Black	495,580	44.7%	1,275,317	37.6%	6,626,394	29.2%			
Ages 0 Through 5	201,302	40.6%	504,501	39.6%	2,640,572	39.8%			
Ages 6 Through 20	294,278	59.4%	770,816	60.4%	3,985,823	60.2%			
Hispanic	183,164	16.5%	256,596	7.6%	4,699,339	20.7%			
Ages 0 Through 5	100,753	55.0%	134,823	52.5%	2,201,446	46.8%			
Ages 6 Through 20	82,411	45.0%	121,773	47.5%	2,497,893	53.2%			
Other	17,181	1.5%	239,202	7.0%	2,111,649	9.3%			
Ages 0 Through 5	8,598	50.0%	92,253	38.6%	857,628	40.6%			
Ages 6 Through 20	8,583	50.0%	146,949	61.4%	1,254,021	59.4%			
II. POPULATION AND CHILD HEALTH DATA									
A. Total Population, 1997	11,922,546	100.0%	43,872,432	100.0%	267,645,341	100.0%			
Under Age 21	3,638,645	30.5%	13,237,443	30.2%	80,988,943	30.3%			
Under Age 6	1,083,619	9.1%	3,722,587	8.5%	23,259,546	8.7%			
Infants	176,504	1.5%	609,121	1.4%	3,810,851	1.4%			
Age 1 Through 5	907,115	7.6%	3,113,466	7.1%	19,448,695	7.3%			
Age 6 Through 20	2,555,026	21.4%	9,514,856	21.7%	57,729,397	21.6%			
Age 21 and Older	8,283,901	69.5%	30,634,989	69.8%	186,656,398	69.7%			
B. Infant Mortality, Low Birth Weight and Prenatal Care, 1996	Total	White	Other	Total	White	Other			
Infant Mortality per 1,000 Live Births	8.6	6.4	16.0	8.2	6.4	15.8			
Neonatal Mortality	5.7	4.4	9.8	5.3	4.3	10.0			
Postneonatal Mortality	2.9	2.0	6.1	2.9	2.1	5.8			
% Low Birth Weight Infants									
Under 2500 Grams	8.0%	6.3%	13.5%	7.6%	6.4%	12.9%			
Under 1500 Grams	1.5%	1.1%	2.8%	1.4%	1.1%	2.8%			
% Not Receiving Prenatal Care									
In First Trimester	18.4%	15.3%	28.6%	16.8%	14.2%	28.8%			
Until Third Trimester or Not At All	4.2%	3.0%	8.1%	3.6%	2.7%	7.5%			
C. % Population Without Access to Primary Care Provider, 1996	11.1%		12.0%		16.3%				
D. Counties Designated Medically Underserved Areas*, 1996	79	(77.5%)	284	(65.0%)	2,470	(82.3%)			
E. Counties Designated Health Professional Shortage Areas*, 1996	36	(35.3%)	237	(54.2%)	1,925	(65.4%)			

Notes: # Race may not be reported consistently across state. Maine, for example, reported all enrollees as 'Other'. Data for HI are from FY 1996, do not include managed care enrollees and are not included in regional and US summaries. * Defined by the Bureau of Primary Health Care. Procedures and criteria for designation are available at " <http://www.bphc.hrsa.dhhs.gov/dsd/dsd11.htm#contents>".

III. MEDICAID AND SCHIP PROGRAM ELIGIBILITY BASED ON FAMILY INCOME AS A PERCENTAGE OF THE FEDERAL POVERTY LEVEL (%FPL), AUGUST 1999



A. Title XIX Medicaid Eligibility and Expansions

By federal mandate, all states must cover pregnant women and children to age 6 to 133% of the Federal Poverty Level (FPL) and children through age 15 up to 100% FPL, as of October 1, 1998.

In addition, 1996 federal welfare legislation requires states to use the AFDC income eligibility levels in effect as of July 16, 1996 to determine Medicaid eligibility. This establishes a state specific minimum eligibility level for poor children ages 16 through 18 (46% FPL for the state of Illinois, an equivalent of \$6384 for a family of 3 in 1999).

Illinois did not expand its Title XIX Medicaid program beyond the federal mandate. [41] The Medically Needy were covered to 45% FPL in 1997. [34] Brackets ([]) indicate total number of states with expansions or Medically Needy programs.

An estimated 38.5% of 403K uninsured children under age 19 in the state of Illinois were Medicaid eligible but unenrolled during 1997. A full report of Medicaid and SCHIP eligibility of uninsured children in the states can be downloaded from 'http://www.aap.org/advocacy/stateelg99.htm'.

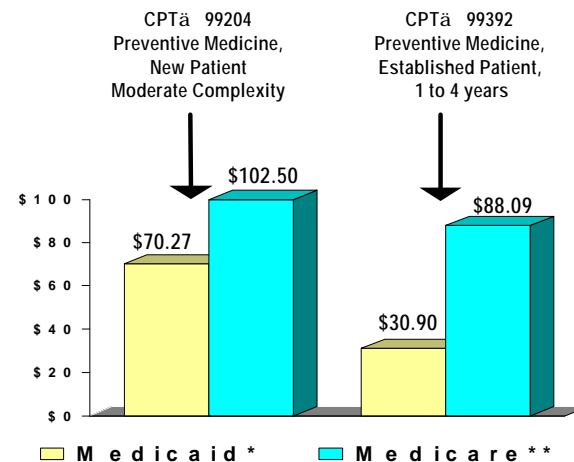
B. Title XXI Medicaid/SCHIP Program Eligibility:

Illinois's Title XXI Medicaid program covers infants who enrolled in the first 3 months from birth to 200% FPL, children ages 6 through 15 from 100% to 133% FPL and children ages 16 through 18 from 46% to 133% FPL. Its state program, currently run with state funds only, covers remaining children through age 18 to 185% FPL. Federally legislated maximum Title XXI SCHIP/Medicaid program eligibility for Illinois is 200% FPL through age 18. Dec 98 - Jun 99 Title XXI program enrollment figures are available by state on the Kaiser Family Foundation website, at 'http://207.22.102.105/content/1999/2153'.

More information about Medicaid and SCHIP activities in the states are available from reports published by the AAP's Department of Chapter and State Affairs: the SCHIP Update, available at "http://www.aap.org/advocacy/schiprep.htm", and the Access Issues section of the 1998 State Legislation Report, available at 'http://www.aap.org/advocacy/98statelegprpt.pdf'.

IV. MEDICAID SERVICES REIMBURSEMENT

Comparison of 1998/1999 Medicaid* and Medicare Reimbursement Rates for Two Services Commonly Used by Pediatricians**



* State level data reported by Illinois to the AAP in the 1998/1999 Medicaid Reimbursement Survey. ** Medicare Payment Schedule™ Physician's Current Procedural Terminology (CPT) five-digit codes, nomenclature and other data are copyright 1998 American Medical Association (AMA). All Rights Reserved. No fee schedules, basic unit, relative values or related listings are included in CPT. The American Academy of Pediatrics and the AMA assume no liability for the data contained herein.

A report compiled by the AAP's Division of Health Policy Research documents state reimbursement rates for more than 100 services commonly used by pediatricians. This report shows that services provided under Medicaid are typically reimbursed at 20 to 50 percent less than the same services provided under Medicare. The full report can be downloaded from "http://www.aap.org/research/medreim.htm".

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- II A. Population Estimates for the US and States by Single Year of Age and Sex: July 1, 1997. Population Division, US Census Bureau. Downloadable from <http://www.census.gov/population/estimates/state/stats/ag9798.txt> .
- II B. Monthly Vital Statistics Report, Vol. 46, No. 11(S), September 11, 1997. National Vital Statistics Report, Vol. 47, No. 9, November 10, 1998. National Center for Health Statistics, Center for Disease Control. Additional statistics provided by staff from the NCHS Mortality and Natality Statistics Branches.
- II C-E. HRSA State Profiles. Health Resources and Services Administration, April 1999. Downloadable from <http://www.hrsa.gov/profiles.htm> .

- III A-B. "Medicaid and SCHIP Income Eligibility Guidelines for Children" and "Title XXI Medicaid Expansion Population and Date of Implementation", reports published by the Department of Chapter and State Affairs, American Academy of Pediatrics, August 1999. State Facts: Health Needs and Medicaid Financing. The Kaiser Commission on Medicaid and the Uninsured, February 1998. American Academy of Pediatrics analysis of March Demographic File, Current Population Survey, 1998.

- IV. 1998/1999 Medicaid Reimbursement Survey, American Academy of Pediatrics, 1999.

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Complete sets of the state reports can be purchased by contacting the American Academy of Pediatrics, Division of Health Policy Research, 141 Northwest Point Blvd., PO. Box 927, Elk Grove Village, Illinois, 60007; (800) 433-9016, extension 7627. Contact Suk-fong Tang, PhD, Division of Health Policy Research, with comments about the report; contact Jean Cilik, Department of Chapter and State Affairs, for Medicaid questions and advocacy advice. FY1994 to FY 1997 Medicaid State Reports are also available in Adobe Acrobat PDF format on the Research page of the AAP Web site, at <http://www.aap.org/research/medicaid.htm> .