



# Medicaid State Report

MONTANA, FY 1996 (October 1, 1995 - September 30, 1996)

Produced by the  
Department of Research  
Division of Health Policy Research

I. POPULATION AND CHILD HEALTH DATA									
	MONTANA			MOUNTAIN REGION*			UNITED STATES		
Total Population, 1996	887,038			16,084,657			265,253,529		
% Under Age 21	31.2%			32.8%			30.2%		
% Under Age 6	7.9%			9.4%			8.8%		
% Infants	1.3%			1.5%			1.4%		
% Age 1 Through 5	6.6%			7.9%			7.4%		
% Age 6 Through 20	23.3%			23.4%			21.4%		
% Age 21 and Older	68.8%			67.2%			69.8%		
<b>Infant Mortality, Low Birth Weight and Prenatal Care, 1995</b>	<b><u>Total</u></b>	<b><u>White</u></b>	<b><u>Other</u></b>	<b><u>Total</u></b>	<b><u>White</u></b>	<b><u>Other</u></b>	<b><u>Total</u></b>	<b><u>White</u></b>	<b><u>Other</u></b>
Infant Mortality per 1,000 Live Births	7.0	7.0	7.0	6.5	6.2	9.2	7.6	6.3	12.6
Neonatal Mortality	3.7	3.7	3.9	4.0	3.9	4.4	4.9	4.1	8.1
Postneonatal Mortality	3.3	3.3	3.1	2.5	2.3	4.8	2.7	2.2	4.5
% Low Birth Weight Infants									
Under 2500 Grams	5.8%	5.9%	5.7%	7.1%	6.9%	9.0%	7.3%	6.2%	11.6%
Under 1500 Grams	1.0%	1.0%	1.0%	1.1%	1.0%	1.5%	1.4%	1.1%	2.5%
% Not Receiving Prenatal Care									
In First Trimester	18.5%	16.5%	34.0%	22.9%	21.5%	35.5%	18.7%	16.4%	27.8%
Until Third Trimester or Not At All	3.5%	2.8%	8.9%	6.1%	5.6%	10.1%	4.2%	3.5%	7.0%
II. MEDICAID ENROLLEES, RECIPIENTS, AND EXPENDITURES, FY 1996									
A. Federal Medical Assistance Percentage (FMAP) and AFDC Income Thresholds									
FY96, FY98 and Enhanced FMAP~	69.4%	70.6%	79.4%	63.5%	64.5%	75.1%	56.7%	60.7%	72.5%
AFDC Income Threshold (%Poverty) For a Family of 3, 1996	\$5,322 ( 41.0% of \$12,980 )			\$5,140 ( 39.6% of \$12,980 )			\$5,311 ( 40.6% of \$13,082 )		
#B. Enrollees, Recipients, and Expenditures**									
	<b><u>Enrollees</u></b>	<b><u>Recipients</u></b>	<b><u>Expenditures</u></b>	<b><u>Enrollees</u></b>	<b><u>Recipients</u></b>	<b><u>Expenditures</u></b>	<b><u>Enrollees</u></b>	<b><u>Recipients</u></b>	<b><u>Expenditures</u></b>
Total, FY1996^	103,191	101,271	\$352 M	2,030,283	1,649,647	\$3,849 M	40,996,808	35,027,510	\$121,419 M
% Under Age 21	57.1%	56.0%	26.1%	63.3%	60.0%	29.6%	56.6%	53.6%	22.5%
% Under Age 6	24.3%	24.1%	9.3%	29.8%	28.3%	11.8%	24.7%	24.0%	9.5%
% Infants	4.1%	3.8%	3.2%	6.6%	5.9%	4.5%	5.2%	4.9%	3.7%
% Age 1 Through 5	20.3%	20.3%	6.1%	23.2%	22.3%	7.3%	19.5%	19.1%	5.8%
% Age 6 Through 20	32.8%	31.9%	16.9%	33.5%	31.7%	17.8%	31.9%	29.6%	13.0%
% Age 21 and Older	42.9%	44.0%	73.9%	36.7%	40.0%	70.4%	43.4%	46.4%	77.5%
Total Medicaid Managed Care Enrollment, 1997	62,004			887,072			15,345,502		
Percent of Births Paid for by Medicaid, 1995^^	38.3%			37.8%			40.4%		

Note: 'na' Data unavailable. \* Includes AZ, CO, ID, MT, NM, NV, UT & WY. ~ Region and US estimates of FY96 FMAPs are weighted by FY96 expenditures. FY98 and Enhanced FMAPs are unweighted averages.

# Enrollee data are not available for NE. Recipient and Expenditures by Age data for AZ are from FY95 and not included in regional and US estimates. ^ Does not include HI children enrolled in managed care.

\*\* Does not include Disproportionate Share Hospital (DSH) payments. FY96 DSH payments to Montana were \$238,435.

^^ CT, MD, OH and SC data are from state fiscal year 1995. IL and OK data are estimates. HI, KS, KY, NJ, PA and VA data are from 1994. DC and ME data are unavailable. Regional and US estimates do not include the last 8 states.

<b>II. CONTINUED</b>	<b>MONTANA</b>			<b>MOUNTAIN REGION</b>			<b>UNITED STATES</b>		
<b># C. Expenditures by Age, FY 1996</b>	<u>Per Enrollee</u>	<u>Per Recipient</u>		<u>Per Enrollee</u>	<u>Per Recipient</u>		<u>Per Enrollee</u>	<u>Per Recipient</u>	
All Ages	\$3,413	\$3,478		\$1,896	\$2,333		\$2,945	\$3,466	
Children Under Age 21	\$1,560	\$1,640		\$831	\$1,593		\$1,167	\$1,486	
Under Age 6	\$1,296	\$1,350		\$705	\$1,350		\$1,130	\$1,407	
Infants	\$2,644	\$2,947		\$1,200	\$2,443		\$2,085	\$2,656	
Age 1 Through 5	\$1,025	\$1,054		\$563	\$1,060		\$878	\$1,085	
Age 6 Through 20	\$1,757	\$1,859		\$943	\$1,808		\$1,191	\$1,549	
Adults	\$5,869	\$5,904		\$3,413	\$5,686		\$5,229	\$5,905	
<b># D. Percent Enrollees, Recipients, and Expenditures(\$)</b> by Eligibility Category, FY 1996	<u>Enrollees</u>	<u>Recipients</u>	<u>Expenditures</u>	<u>Enrollees</u>	<u>Recipients</u>	<u>Expenditures</u>	<u>Enrollees</u>	<u>Recipients</u>	<u>Expenditures</u>
Children Under Age 21	41.3%	40.2%	14.2%	59.8%	55.5%	20.7%	52.4%	49.4%	15.3%
Categorically Needy - Cash	25.9%	24.6%	6.6%	25.1%	23.1%	7.4%	26.8%	24.9%	7.4%
Categorically Needy - Noncash	15.3%	15.6%	7.4%	13.5%	16.0%	6.2%	7.4%	6.9%	2.3%
Medically Needy	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	4.2%	3.8%	1.5%
Expansions*	0.0%	0.0%	0.0%	21.1%	16.4%	7.1%	14.1%	13.8%	4.1%
Adults	13.1%	12.6%	5.9%	18.4%	17.6%	9.9%	18.8%	18.4%	9.3%
Categorically Needy - Cash	13.1%	12.5%	5.8%	10.2%	10.0%	5.4%	11.0%	10.4%	5.1%
Categorically Needy - Noncash	0.1%	0.1%	0.0%	3.6%	2.8%	1.7%	2.9%	2.8%	1.2%
Medically Needy	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	2.2%	2.2%	1.3%
Expansions*	0.0%	0.0%	0.0%	4.5%	4.6%	2.7%	2.7%	3.0%	1.7%
Blind and Disabled	16.8%	17.3%	41.0%	13.6%	15.7%	42.7%	16.4%	18.1%	43.4%
Aged	8.9%	9.4%	32.1%	7.1%	9.1%	25.5%	10.2%	12.1%	30.8%
Other Title XIX (mostly children)	19.9%	20.5%	6.8%	1.2%	2.1%	1.2%	2.3%	2.0%	1.2%
<b># E. Enrollees, Recipients, and Expenditures (\$Million)</b> by Race and Age, FY 1996	<u>Enrollees</u>	<u>Recipients</u>	<u>Expenditures</u>	<u>Enrollees</u>	<u>Recipients</u>	<u>Expenditures</u>	<u>Enrollees</u>	<u>Recipients</u>	<u>Expenditures</u>
Total Under Age 21	58,925	56,053	\$92 M	1,283,567	669,634	\$1,066 M	23,142,242	18,257,442	\$27,122 M
% Age 0 Through 5	42.6%	43.0%	35.4%	47.1%	47.1%	39.9%	43.6%	44.8%	42.2%
% Age 6 Through 20	57.4%	57.0%	64.6%	52.9%	52.9%	60.1%	56.4%	55.2%	57.8%
% Non-hispanic White	73.6%	76.7%	79.8%	46.8%	53.8%	59.6%	40.9%	42.7%	42.3%
% Age 0 Through 5	44.0%	44.0%	35.6%	47.7%	48.7%	37.4%	43.6%	43.8%	37.2%
% Age 6 Through 20	56.0%	56.0%	64.4%	52.3%	51.3%	62.6%	56.4%	56.2%	62.8%
% Non-hispanic Black	0.7%	0.7%	0.9%	6.5%	5.4%	5.2%	29.1%	28.4%	25.6%
% Age 0 Through 5	45.0%	45.1%	37.9%	43.0%	44.6%	37.6%	41.5%	42.9%	44.1%
% Age 6 Through 20	55.0%	54.9%	62.1%	57.0%	55.4%	62.4%	58.5%	57.1%	55.9%
% Hispanic	2.3%	2.2%	2.0%	35.4%	31.5%	25.3%	20.8%	19.8%	14.6%
% Age 0 Through 5	41.7%	40.9%	39.3%	48.8%	46.7%	45.7%	48.1%	50.9%	53.0%
% Age 6 Through 20	58.3%	59.1%	60.7%	51.2%	53.3%	54.3%	51.9%	49.1%	47.0%
% Other	23.4%	20.3%	17.2%	11.3%	9.2%	9.9%	9.1%	9.1%	17.4%
% Age 0 Through 5	38.3%	39.6%	33.9%	41.3%	40.7%	41.3%	40.4%	41.7%	43.5%
% Age 6 Through 20	61.7%	60.4%	66.1%	58.7%	59.3%	58.7%	59.6%	58.3%	56.5%

Note: \* Includes recipients made eligible through Medicaid expansions. "na" Data unavailable.

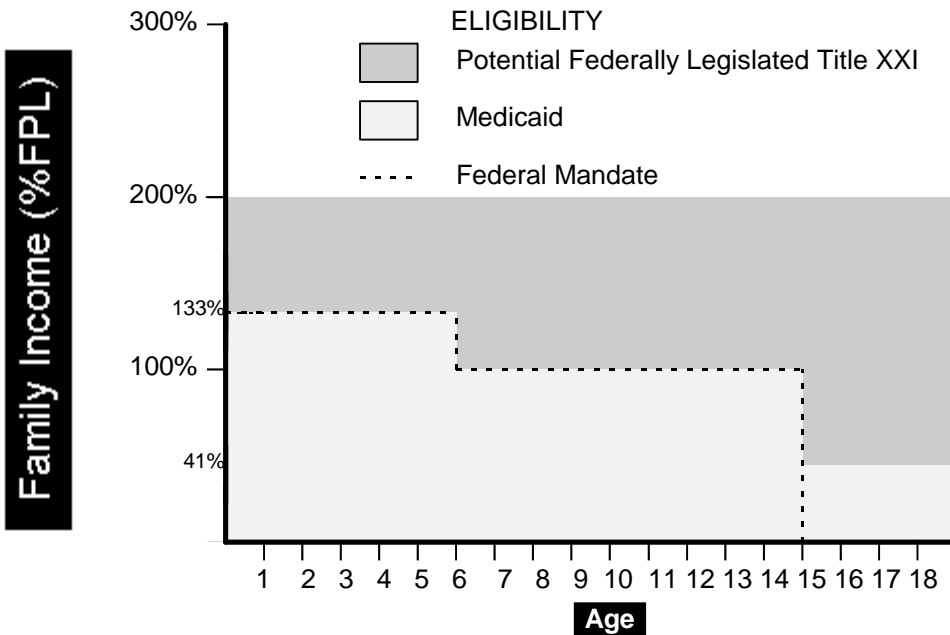
# Enrollee data are not available for NE. Recipient and expenditures by age data for AZ are from FY95 and not included in regional and US estimates. Enrollees and recipients with missing age data are not included in the percents. Managed care enrollees, service recipients and expenditure data are not included for HI since the state does not report managed care data on the HCFA2082.

II. CONTINUED	MONTANA				MOUNTAIN REGION				UNITED STATES			
	<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>		<u>CHILDREN Under 21</u>		<u>ADULTS</u>	
#F. Expenditures by Age and Type of Service^												
Physician Services	13.9%		6.9%		8.1%		2.7%		10.1%		4.3%	
Dental Services	3.3%		1.0%		1.6%		0.3%		2.4%		0.4%	
Other Practitioners	4.2%		0.9%		0.9%		0.2%		2.0%		0.5%	
EPSDT*	1.9%		0.0%		1.3%		0.0%		5.2%		0.0%	
Family Planning Services	0.1%		0.5%		0.2%		0.3%		0.3%		0.4%	
Rural Health Clinics	na		na		0.2%		0.0%		0.7%		0.1%	
Other Clinics	3.0%		1.8%		2.4%		0.9%		4.7%		3.0%	
Outpatient Hospital	12.4%		5.3%		6.4%		2.1%		7.8%		4.2%	
Inpatient Hospital	26.9%		12.4%		20.1%		6.5%		31.1%		16.5%	
Nursing Home/Intermediate Care	0.5%		44.0%		1.5%		16.1%		3.3%		43.3%	
Mental/Psychiatric Hospital Care	9.4%		na		3.7%		0.1%		4.4%		0.9%	
Home Health Care	na		na		3.2%		5.8%		6.6%		9.5%	
Lab and X-Ray	2.0%		1.7%		0.6%		0.3%		1.3%		0.9%	
Drug	5.3%		10.7%		3.4%		4.1%		6.1%		9.2%	
Other Services	17.2%		14.8%		12.7%		2.4%		14.2%		6.6%	
<b>Total</b>	<b>100.0%</b>		<b>100.0%</b>		<b>100.0%</b>		<b>100.0%</b>		<b>100.0%</b>		<b>100.0%</b>	
#G. Average Cost per User of Service and Percent of Recipients Using Each Service												
	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+
Physician Services	\$259	88.1%	\$501	81.7%	\$262	74.5%	\$498	73.1%	\$238	60.6%	\$394	65.4%
Dental Services	\$189	28.6%	\$209	28.8%	\$174	21.8%	\$251	16.4%	\$161	21.0%	\$186	12.8%
Other Practitioners	\$534	12.8%	\$161	31.4%	\$276	7.9%	\$216	15.7%	\$287	10.2%	\$162	20.4%
EPSDT*	\$108	28.7%	\$58	1.1%	\$120	25.3%	\$93	1.4%	\$230	32.1%	\$114	0.8%
Family Planning Services	\$99	2.3%	\$357	8.6%	\$219	2.2%	\$463	8.6%	\$136	3.5%	\$226	10.1%
Rural Health Clinics	na	na	na	na	\$165	2.5%	\$184	2.1%	\$206	4.6%	\$226	3.6%
Other Clinics	\$648	7.5%	\$1,194	8.7%	\$368	16.0%	\$601	21.2%	\$503	13.4%	\$1,176	15.5%
Outpatient Hospital	\$489	41.5%	\$621	50.0%	\$370	41.5%	\$629	45.7%	\$296	37.6%	\$559	45.3%
Inpatient Hospital	\$3,591	12.3%	\$3,567	20.5%	\$4,442	10.9%	\$5,237	16.9%	\$4,880	9.1%	\$5,218	19.0%
Nursing Home/Intermediate Care	\$28,886	0.0%	\$19,615	13.3%	\$47,344	0.1%	\$18,609	11.8%	\$54,064	0.1%	\$24,889	10.4%
Mental/Psychiatric Hospital Care	\$31,214	0.5%	na	na	\$20,436	0.4%	\$15,694	0.1%	\$19,300	0.3%	\$27,205	0.2%
Home Health Care	na	na	na	na	\$5,129	1.5%	\$11,995	6.6%	\$3,500	2.7%	\$7,527	7.6%
Lab and X-Ray	\$105	31.0%	\$263	37.4%	\$71	19.2%	\$135	33.0%	\$61	29.9%	\$129	41.4%
Drug	\$148	59.2%	\$840	75.2%	\$133	61.6%	\$778	71.6%	\$146	59.7%	\$825	67.2%
Other Services	\$900	31.4%	\$1,675	52.3%	\$1,711	17.9%	\$996	33.0%	\$695	29.4%	\$914	43.3%

Note: 'na' Data unavailable. 'NA' Not applicable. # Recipient and expenditures by type of service data for AZ and GA are from FY95 and not included in regional and US estimates. Managed care service utilization and expenditure data are not included for HI since the state does not report managed care data on the HCFA2082. \* EPSDT services are known to be under-reported in many states due to complexities in the reporting process.

^ When less than 0.05% of expenditures is accounted for by a type of service, it is rounded to 0.0%. + Percents do not sum to 100 because recipients use many services; when less than 0.05% use a service, it is rounded to 0.0%.

**III. TITLE XIX AND TITLE XXI PROGRAM ELIGIBILITY BASED ON FAMILY INCOME AS A PERCENTAGE OF THE FEDERAL POVERTY LEVEL (FPL), JUNE 1998**  
 [Total Number of States with Expansions or Medically Needy Program in Brackets]



**A. Title XIX Medicaid Eligibility and Expansions [44]**

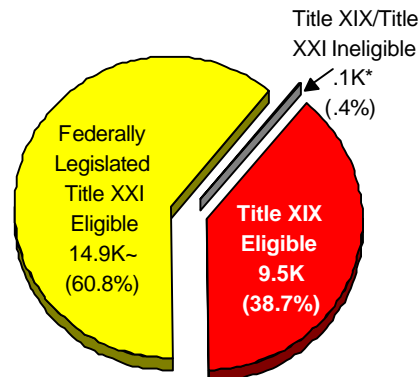
By federal mandate, all states must cover pregnant women and children to age 6 to 133% of the Federal Poverty Level (FPL) and children through age 14 up to 100% FPL, as of October 1, 1997.

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 15 through 18.

Montana did not expand its Title XIX Medicaid program beyond the federal mandate. The Medically Needy [34] were covered to 46% FPL in 1997. As of June 10, 1998, Montana's proposal for a Section 1115 Waiver was denied.

**IV. TITLE XIX (MEDICAID) AND FEDERALLY LEGISLATED TITLE XXI MEDICAID / SCHIP ELIGIBILITY FOR UNINSURED CHILDREN UNDER AGE 19, 1998 ESTIMATES**

Analysis of the 1994 - 1997 March Current Population Surveys and 1998 Census Bureau projections of child population revealed an estimated 24K uninsured children under age 19, of whom 9.5K are unenrolled Medicaid eligibles, 14.9K are federally legislated Title XXI/SCHIP eligibles-. Full implementation of and maximum enrollment into both Title XIX and Title XXI programs would reduce Montana's uninsured child population to .1K\*, or .0% of the state's 252K children under age 19.



**B. Title XXI SCHIP/Medicaid Program Eligibility:**

Montana submitted a plan for a combination of Medicaid expansion(s) and state program(s). Federally legislated maximum Title XXI SCHIP/Medicaid program eligibility for Montana is 200% FPL for all infants and children through age 18. As of June 26, 1998, 42 states and the District of Columbia submitted their Title XXI/SCHIP plans and HCFA approved 22 of the submitted plans.

- This estimate represents federally legislated eligibility (at or below 200% FPL or 50 percentage points above the state's Medicaid income limit as of March 31, 1997). Coverage could be provided through Medicaid or a separate state program.  
 \* Standard error is greater than 20%. This estimate is unreliable due to small sample size.

## REFERENCES

- I. "State Population Projections: 1995 to 2025. Detailed State Projections Data files" (PE-45). US Department of Commerce. Bureau of the Census. Available at : <http://www.census.gov/population/www/projections/stproj.html>. A April 7, 1998. National Center for Health Statistics. Division of Vital Statistics. "Number of infant and neonatal deaths and mortality rates, by race for the United States, each division, each State, Puerto Rico, Virgin Islands and Guam, and by sex for the United States, 1995." "Low birth weight by state and race of mother, 1995." "Percent of mothers beginning prenatal care in the first trimester and percent of mothers with late or no prenatal care by race of mother: United States and each State, Puerto Rico, Virgin Islands, and Guam, 1995."
- II. "Medicaid Services State by State, October 1996." Health Care Financing Administration. Intergovernmental Affairs Office. "State Children's Health Insurance Program; Reserved Allotments to States for Fiscal Year 1998; Enhanced Federal Medical Assistance Percentages." Federal Register, September 12, 1997. Published by the Department of Health and Human Services as Notice MB-115-N. "Annual Update of the HHS Poverty Guidelines." Federal Register: February 24, 1998 (Volume 63, Number 36, pages 9235-9238). "Medicaid Statistical File, FY 1996." Based on data from the HCFA-2082. Health Care Financing Administration. Bureau of Data Management and Strategy. "Medicaid Hospital Expenditures by Type of Service and by Region, Total Computable, Fiscal Year 1996." From the Medicaid Statistics System (MSS). "Medicaid Managed Care State Enrollment, June 30, 1997." Health Care Financing Administration. Available at : <http://www.hcfa.gov/medicaid/plantyp7.htm>. A April 7, 1998. "MCH Update: State Medicaid Coverage of Pregnant Women and Children, September 1997." National Governors' Association.
- III. "Title XIX and Title XXI Program Eligibility as a Percentage of the Federal Poverty Level." American Academy of Pediatrics Division of State Government and Chapter Affairs, July 1998. The Kaiser Commission on Medicaid and the Uninsured, February 1998. "Comprehensive State Health Reform Demonstrations" Health Care Financing Administration. Available at : <http://www.hcfa.gov/medicaid/ord-1115.htm>. A July 20, 1998. "State Approaches to Title XXI." American Academy of Pediatrics Division of State Government and Chapter Affairs, June 1998. "State Facts: Health Needs and Medicaid Financing." American Academy of Pediatrics Division of State Government and Chapter Affairs, June 1998.
- IV. American Academy of Pediatrics Division of Health Policy Research analysis of 1994 to 1997 March Demographic Files, Current Population Surveys, conducted by the Bureau of the Census for the Bureau of Labor Statistics.

## ORDERING INFORMATION

Complete sets of the state reports can be purchased by contacting the American Academy of Pediatrics, Department of Research, 141 Northwest Point Blvd., PO. Box 927, Elk Grove Village, Illinois, 60007; (800) 433-9016, extension 7627 or (847) 228-5005. Contact Beth Yudkowsky, Division of Health Policy Research, with comments about the report; contact Jean Cilik, Division of State Government and Chapters Affairs, for Medicaid questions and advocacy advice. The Medicaid State Reports, FY 1996 will also be made available on the Research page of the AAP Web site at <http://www.aap.org>.