



Medicaid State Report

NEVADA, 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

	NEVADA			MOUNTAIN REGION*			UNITED STATES		
Total Population, 1996	1,604,160			16,084,657			265,253,529		
% Under Age 21	29.3%			32.8%			30.2%		
% Under Age 6	8.9%			9.4%			8.8%		
% Infants	1.3%			1.5%			1.4%		
% Age 1 Through 5	7.6%			7.9%			7.4%		
% Age 6 Through 20	20.3%			23.4%			21.4%		
% Age 21 and Older	70.7%			67.2%			69.8%		
Infant Mortality, Low Birth Weight and Prenatal Care, 1995	Total	White	Other	Total	White	Other	Total	White	Other
Infant Mortality per 1,000 Live Births	5.7	5.5	7.2	6.5	6.2	9.2	7.6	6.3	12.6
Neonatal Mortality	2.8	2.9	2.6	4.0	3.9	4.4	4.9	4.1	8.1
Postneonatal Mortality	2.9	2.6	4.6	2.5	2.3	4.8	2.7	2.2	4.5
% Low Birth Weight Infants									
Under 2500 Grams	7.4%	6.7%	11.6%	7.1%	6.9%	9.0%	7.3%	6.2%	11.6%
Under 1500 Grams	1.2%	1.1%	1.9%	1.1%	1.0%	1.5%	1.4%	1.1%	2.5%
% Not Receiving Prenatal Care									
In First Trimester	24.3%	23.4%	29.9%	22.9%	21.5%	35.5%	18.7%	16.4%	27.8%
Until Third Trimester or Not At All	7.9%	7.6%	9.8%	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~	50.0%	50.0%	65.0%	63.5%	64.5%	75.1%	56.7%	60.7%	72.5%
AFDC Income Threshold (%Poverty) For a Family of 3, 1996	\$4,154 (32.0% of \$12,980)			\$5,140 (39.6% of \$12,980)			\$5,311 (40.6% of \$13,082)		

#B. Enrollees, Recipients, and Expenditures**

	<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, FY1996^	148,575	108,662	\$365 M	2,030,283	1,649,647	\$3,849 M	40,996,808	35,027,510	\$121,419 M
% Under Age 21	61.3%	57.7%	32.6%	63.3%	60.0%	29.6%	56.6%	53.6%	22.5%
% Under Age 6	30.8%	31.9%	14.5%	29.8%	28.3%	11.8%	24.7%	24.0%	9.5%
% Infants	6.2%	7.1%	4.8%	6.6%	5.9%	4.5%	5.2%	4.9%	3.7%
% Age 1 Through 5	24.6%	24.8%	9.7%	23.2%	22.3%	7.3%	19.5%	19.1%	5.8%
% Age 6 Through 20	30.5%	25.9%	18.1%	33.5%	31.7%	17.8%	31.9%	29.6%	13.0%
% Age 21 and Older	38.7%	42.3%	67.4%	36.7%	40.0%	70.4%	43.4%	46.4%	77.5%
Total Medicaid Managed Care Enrollment, 1997	26,376			887,072			15,345,502		
Percent of Births Paid for by Medicaid, 1995^^	27.5%			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 Nevada were \$73,560,000.

^^ 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.

II. CONTINUED	NEVADA			MOUNTAIN REGION			UNITED STATES		
# C. Expenditures by Age, FY 1996	<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	\$2,458	\$3,361		\$1,896	\$2,333		\$2,945	\$3,466	
Children Under Age 21	\$1,284	\$1,881		\$831	\$1,593		\$1,167	\$1,486	
Under Age 6	\$1,140	\$1,520		\$705	\$1,350		\$1,130	\$1,407	
Infants	\$1,881	\$2,268		\$1,200	\$2,443		\$2,085	\$2,656	
Age 1 Through 5	\$954	\$1,307		\$563	\$1,060		\$878	\$1,085	
Age 6 Through 20	\$1,429	\$2,327		\$943	\$1,808		\$1,191	\$1,549	
Adults	\$4,213	\$5,315		\$3,413	\$5,686		\$5,229	\$5,905	
# D. Percent Enrollees, Recipients, and Expenditures(\$) 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	58.6%	54.5%	23.3%	59.8%	55.5%	20.7%	52.4%	49.4%	15.3%
Categorically Needy - Cash	26.3%	23.5%	8.1%	25.1%	23.1%	7.4%	26.8%	24.9%	7.4%
Categorically Needy - Noncash	30.6%	29.1%	13.8%	13.5%	16.0%	6.2%	7.4%	6.9%	2.3%
Medically Needy	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	4.2%	3.8%	1.5%
Expansions*	1.6%	1.9%	1.3%	21.1%	16.4%	7.1%	14.1%	13.8%	4.1%
Adults	17.2%	17.5%	10.8%	18.4%	17.6%	9.9%	18.8%	18.4%	9.3%
Categorically Needy - Cash	9.7%	9.1%	5.7%	10.2%	10.0%	5.4%	11.0%	10.4%	5.1%
Categorically Needy - Noncash	4.5%	4.4%	2.1%	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*	3.1%	4.0%	3.1%	4.5%	4.6%	2.7%	2.7%	3.0%	1.7%
Blind and Disabled	14.2%	16.7%	42.9%	13.6%	15.7%	42.7%	16.4%	18.1%	43.4%
Aged	9.7%	11.1%	22.7%	7.1%	9.1%	25.5%	10.2%	12.1%	30.8%
Other Title XIX (mostly children)	0.2%	0.2%	0.2%	1.2%	2.1%	1.2%	2.3%	2.0%	1.2%
# E. Enrollees, Recipients, and Expenditures (\$Million) 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	91,112	62,171	\$117 M	1,283,567	669,634	\$1,066 M	23,142,242	18,257,442	\$27,122 M
% Age 0 Through 5	50.2%	55.2%	44.6%	47.1%	47.1%	39.9%	43.6%	44.8%	42.2%
% Age 6 Through 20	49.8%	44.8%	55.4%	52.9%	52.9%	60.1%	56.4%	55.2%	57.8%
% Non-hispanic White	55.6%	56.6%	65.5%	46.8%	53.8%	59.6%	40.9%	42.7%	42.3%
% Age 0 Through 5	49.2%	53.7%	39.6%	47.7%	48.7%	37.4%	43.6%	43.8%	37.2%
% Age 6 Through 20	50.8%	46.3%	60.4%	52.3%	51.3%	62.6%	56.4%	56.2%	62.8%
% Non-hispanic Black	20.0%	19.8%	16.0%	6.5%	5.4%	5.2%	29.1%	28.4%	25.6%
% Age 0 Through 5	43.7%	49.6%	46.5%	43.0%	44.6%	37.6%	41.5%	42.9%	44.1%
% Age 6 Through 20	56.3%	50.4%	53.5%	57.0%	55.4%	62.4%	58.5%	57.1%	55.9%
% Hispanic	20.3%	19.6%	13.7%	35.4%	31.5%	25.3%	20.8%	19.8%	14.6%
% Age 0 Through 5	60.0%	65.9%	68.2%	48.8%	46.7%	45.7%	48.1%	50.9%	53.0%
% Age 6 Through 20	40.0%	34.1%	31.8%	51.2%	53.3%	54.3%	51.9%	49.1%	47.0%
% Other	4.2%	4.1%	4.8%	11.3%	9.2%	9.9%	9.1%	9.1%	17.4%
% Age 0 Through 5	48.0%	52.6%	38.8%	41.3%	40.7%	41.3%	40.4%	41.7%	43.5%
% Age 6 Through 20	52.0%	47.4%	61.2%	58.7%	59.3%	58.7%	59.6%	58.3%	56.5%

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

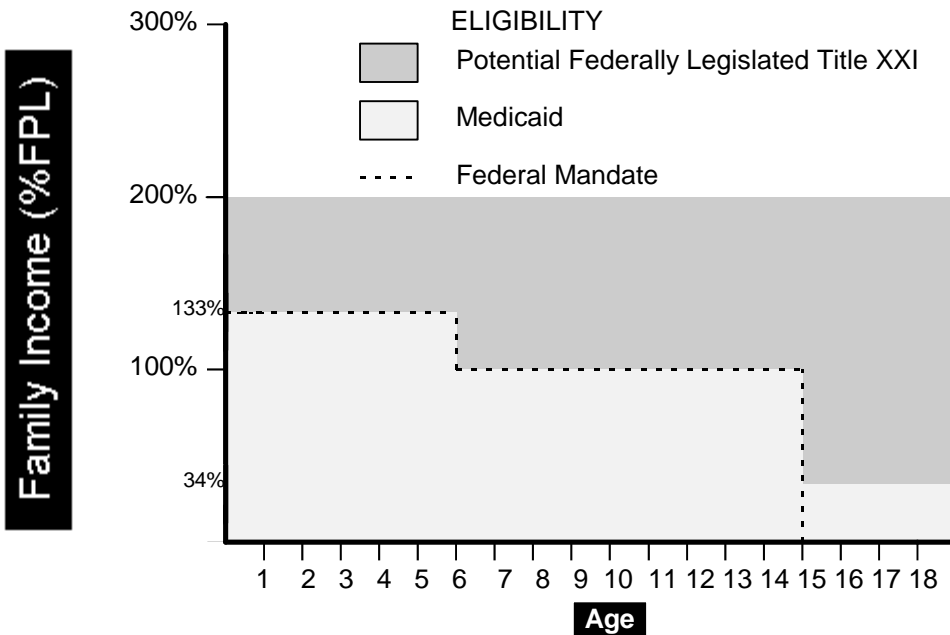
Enrollee data are not available for NE. Recipient and expenditures by age data for AZ are from FY95 and not included in regional and US estimates. Enrollees and recipients with missing age data are not included in the percents. Managed care enrollees, service recipients and expenditure data are not included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

II. CONTINUED	NEVADA				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	12.9%		11.4%		8.1%		2.7%		10.1%		4.3%	
Dental Services	2.9%		1.0%		1.6%		0.3%		2.4%		0.4%	
Other Practitioners	1.7%		0.9%		0.9%		0.2%		2.0%		0.5%	
EPSDT*	2.7%		0.0%		1.3%		0.0%		5.2%		0.0%	
Family Planning Services	na		na		0.2%		0.3%		0.3%		0.4%	
Rural Health Clinics	0.3%		0.1%		0.2%		0.0%		0.7%		0.1%	
Other Clinics	0.4%		0.2%		2.4%		0.9%		4.7%		3.0%	
Outpatient Hospital	7.6%		6.0%		6.4%		2.1%		7.8%		4.2%	
Inpatient Hospital	36.3%		24.6%		20.1%		6.5%		31.1%		16.5%	
Nursing Home/Intermediate Care	6.1%		36.1%		1.5%		16.1%		3.3%		43.3%	
Mental/Psychiatric Hospital Care	18.9%		0.1%		3.7%		0.1%		4.4%		0.9%	
Home Health Care	2.5%		6.0%		3.2%		5.8%		6.6%		9.5%	
Lab and X-Ray	0.4%		0.5%		0.6%		0.3%		1.3%		0.9%	
Drug	3.2%		8.5%		3.4%		4.1%		6.1%		9.2%	
Other Services	3.9%		4.5%		12.7%		2.4%		14.2%		6.6%	
Total	100.0%		100.0%		100.0%		100.0%		100.0%		100.0%	
#G. Average Cost per User of Service and Percent of Recipients 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>	
	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+	Average Cost	%Use+
Physician Services	\$411	59.2%	\$784	77.1%	\$262	74.5%	\$498	73.1%	\$238	60.6%	\$394	65.4%
Dental Services	\$331	16.5%	\$390	13.1%	\$174	21.8%	\$251	16.4%	\$161	21.0%	\$186	12.8%
Other Practitioners	\$205	15.9%	\$249	19.3%	\$276	7.9%	\$216	15.7%	\$287	10.2%	\$162	20.4%
EPSDT*	\$109	46.7%	\$57	0.1%	\$120	25.3%	\$93	1.4%	\$230	32.1%	\$114	0.8%
Family Planning Services	na	na	na	na	\$219	2.2%	\$463	8.6%	\$136	3.5%	\$226	10.1%
Rural Health Clinics	\$164	3.9%	\$187	3.0%	\$165	2.5%	\$184	2.1%	\$206	4.6%	\$226	3.6%
Other Clinics	\$251	3.0%	\$404	3.1%	\$368	16.0%	\$601	21.2%	\$503	13.4%	\$1,176	15.5%
Outpatient Hospital	\$308	46.1%	\$671	47.5%	\$370	41.5%	\$629	45.7%	\$296	37.6%	\$559	45.3%
Inpatient Hospital	\$3,671	18.6%	\$5,646	23.1%	\$4,442	10.9%	\$5,237	16.9%	\$4,880	9.1%	\$5,218	19.0%
Nursing Home/Intermediate Care	\$57,891	0.2%	\$21,782	8.8%	\$47,344	0.1%	\$18,609	11.8%	\$54,064	0.1%	\$24,889	10.4%
Mental/Psychiatric Hospital Care	\$34,820	1.0%	\$1,994	0.4%	\$20,436	0.4%	\$15,694	0.1%	\$19,300	0.3%	\$27,205	0.2%
Home Health Care	\$7,329	0.7%	\$5,402	5.9%	\$5,129	1.5%	\$11,995	6.6%	\$3,500	2.7%	\$7,527	7.6%
Lab and X-Ray	\$44	16.1%	\$80	32.3%	\$71	19.2%	\$135	33.0%	\$61	29.9%	\$129	41.4%
Drug	\$124	49.1%	\$694	65.1%	\$133	61.6%	\$778	71.6%	\$146	59.7%	\$825	67.2%
Other Services	\$728	10.0%	\$912	26.1%	\$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]

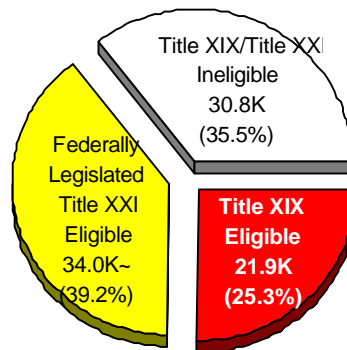
By federal mandate, all states must cover pregnant women and children to age 6 to 133% of the Federal Poverty Level (FPL) and children through age 14 up to 100% FPL, as of October 1, 1997.

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.

Nevada did not expand its Title XIX Medicaid program beyond the federal mandate. The Medically Needy [34] were not covered in 1997. As of June 10, 1998, Nevada had not submitted a proposal for a Section 1115 Waiver.

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 87K uninsured children under age 19, of whom 21.9K are unenrolled Medicaid eligibles, 34.0K are federally legislated Title XXI/SCHIP eligibles. Full implementation of and maximum enrollment into both Title XIX and Title XXI programs would reduce Nevada's uninsured child population to 30.8K, or 6.7% of the state's 457K children under age 19.



B. Title XXI SCHIP/Medicaid Program Eligibility:

Nevada submitted a plan for the creation of a state program. Federally legislated maximum Title XXI SCHIP/Medicaid program eligibility for Nevada 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.

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.

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