

Medicaid

STATE REPORTS – FY 1998

Montana

 Division of
Health Policy Research

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Medicaid State Report

MONTANA, FY 1998 (October 1, 1997 - September 30, 1998)



| I. MEDICAID ENROLLEES AND EXPENDITURES | MONTANA | | | MOUNTAIN REGION~ | | | UNITED STATES | | |
|---|---------------------------------|---------------------|-----------------------|-------------------------------------|---------------------|-----------------------|---------------------------------------|---------------------|-----------------------|
| A. Federal Medical Assistance Percentage (FMAP)* | 70.6% (FY98) | 72.3% (FY00) | 80.6% (Enhanced) | 64.5% (FY98) | 64.7% (FY00) | 75.3% (Enhanced) | 60.7% (FY98) | 60.7% (FY00) | 72.5% (Enhanced) |
| B. Total Medicaid Managed Care Enrollment, 06/30/1998 (% of Total Medicaid Enrollment) | 66,331 (98.4% of 67,387 **) | | | 1,023,187 (78.7% of 1,299,506) | | | 15,760,205 (52.5% of 30,009,674) | | |
| C. Percent of Births Paid for by Medicaid, 1997*** | 38% | | | 37% | | | 35% | | |
| D. FY 1998 and FY 1994-98 Averaged DSH^ Payment | \$0 M | | \$0 M | \$348 M | | \$384 M | \$14,958 M | | \$14,276 M |
| E. Enrollees, by Age, FY 1998# | <u>Enrollees</u> | | <u>Percent</u> | <u>Enrollees</u> | | <u>Percent</u> | <u>Enrollees</u> | | <u>Percent</u> |
| All Enrollees | 93,298 | | 100.0% | 1,926,532 | | 100.0% | 40,377,603 | | 100.0% |
| Children Under Age 21 | 51,466 | | 55.2% | 1,208,942 | | 62.8% | 22,331,022 | | 56.4% |
| Under Age 6 | 20,869 | | 22.4% | 541,627 | | 28.1% | 9,220,363 | | 22.8% |
| Infants | 4,200 | | 4.5% | 134,324 | | 7.0% | 2,014,962 | | 5.0% |
| Age 1 Through 5 | 16,669 | | 17.9% | 407,303 | | 21.1% | 7,205,401 | | 17.8% |
| Age 6 Through 20 | 30,597 | | 32.8% | 667,315 | | 34.6% | 13,110,659 | | 32.5% |
| F. Percent Enrollees and Expenditures^^ by Eligibility Category, FY 1998## | <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 | 93,298 | \$361 M | \$3,872 | 1,926,532 | \$6,004 M | \$3,116 | 40,377,603 | \$142,058 M | \$3,518 |
| Children^^^ | 51.3% | 17.6% | \$1,310 | 57.1% | 23.8% | \$1,260 | 50.6% | 16.4% | \$1,130 |
| Categorically Needy - Cash | 20.4% | 7.5% | \$1,392 | 16.0% | 5.6% | \$1,062 | 18.4% | 6.0% | \$1,137 |
| Categorically Needy - Noncash | 13.3% | 2.7% | \$773 | 20.7% | 7.9% | \$1,154 | 17.4% | 4.6% | \$910 |
| Medically Needy | 0.0% | 0.0% | \$1,469 | 0.1% | 0.0% | \$605 | 4.5% | 1.7% | \$1,294 |
| Other | 17.6% | 7.5% | \$1,619 | 20.3% | 10.3% | \$1,527 | 10.2% | 4.2% | \$1,418 |
| Adults | 21.4% | 10.8% | \$1,931 | 20.4% | 12.9% | \$1,900 | 21.8% | 10.7% | \$1,704 |
| Categorically Needy - Cash | 10.2% | 4.8% | \$1,781 | 7.4% | 4.4% | \$1,813 | 8.8% | 4.5% | \$1,796 |
| Categorically Needy - Noncash | 3.9% | 3.1% | \$3,023 | 6.1% | 4.5% | \$2,222 | 5.6% | 3.2% | \$1,987 |
| Medically Needy | 0.0% | 0.0% | \$2,913 | 0.1% | 0.1% | \$2,292 | 2.6% | 1.3% | \$1,717 |
| Other | 7.2% | 2.9% | \$1,549 | 6.8% | 3.8% | \$1,699 | 4.8% | 1.6% | \$1,199 |
| Blind and Disabled | 17.4% | 39.1% | \$8,538 | 14.8% | 39.4% | \$8,014 | 17.5% | 43.6% | \$8,680 |
| Aged | 9.9% | 32.4% | \$12,492 | 7.6% | 23.9% | \$9,417 | 10.2% | 29.3% | \$9,968 |

Notes: ~ Includes AZ, CO, ID, MT, NM, NV, UT & WY. * Regional and US averages of FY98 FMAP are weighted by FY98 expenditures. FY00 and Enhanced FMAPs are unweighted. ** Enrollment on 06/30/98 was 72.2% of total annual enrollment state reported to HCFA on Form2082 for FY 1998. *** Data for GA and MT are from 1996 and not included in regional and state averages. Data unavailable for DC, HI and VA. ^ Disproportionate Share Hospital Payments. # Age breakdowns for OK are from FY 1996 and not included in regional and US averages. ## Eligibility category breakdowns for HI and OK are from FY 1996 and not included in regional and US averages. ^^ 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 | 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> | |
| G. Payments by Age and Type of Service# | | | | | | | | | | | | |
| Physician Services | 3.0% | | 2.6% | | 1.7% | | 1.4% | | 1.5% | | 1.8% | |
| Dental Services | 0.9% | | 0.5% | | 0.6% | | 0.3% | | 0.4% | | 0.2% | |
| Other Practitioners | 0.5% | | 0.2% | | 0.1% | | 0.1% | | 0.2% | | 0.2% | |
| EPSDT* | 0.4% | | 0.1% | | 0.3% | | 0.0% | | 0.9% | | 0.1% | |
| Family Planning Services | 0.0% | | 0.0% | | 0.0% | | 0.0% | | 0.1% | | 0.1% | |
| Clinic Services | 0.2% | | 0.1% | | 0.9% | | 0.8% | | 0.9% | | 1.1% | |
| Outpatient Hospital | 1.4% | | 1.9% | | 1.2% | | 1.0% | | 1.3% | | 1.8% | |
| Inpatient Hospital | 5.5% | | 4.5% | | 4.9% | | 3.8% | | 5.1% | | 6.4% | |
| Nursing Home/Intermediate Care | 0.1% | | 27.8% | | 0.4% | | 15.6% | | 0.6% | | 24.5% | |
| Mental Health Facility Services | 0.1% | | 0.1% | | 0.3% | | 0.2% | | 0.8% | | 1.3% | |
| Personal Care / Home Health Services | 0.9% | | 6.1% | | 1.6% | | 3.2% | | 2.1% | | 4.7% | |
| Lab and X-Ray | 0.5% | | 0.6% | | 0.1% | | 0.1% | | 0.2% | | 0.3% | |
| Prescribed Drugs | 1.7% | | 7.1% | | 0.9% | | 3.8% | | 1.2% | | 6.1% | |
| Prepaid Health Care | 9.1% | | 6.4% | | 17.6% | | 15.0% | | 6.2% | | 4.3% | |
| Primary Care Case Management Services | 0.3% | | 0.1% | | 0.1% | | 0.0% | | 0.1% | | 0.0% | |
| Other Services** | 0.7% | | 1.6% | | 3.3% | | 2.9% | | 1.6% | | 2.0% | |
| Reporting Variance~ | 0.0% | | 15.0% | | 0.0% | | 16.4% | | 0.2% | | 20.0% | |
| All Services | 25.2% | | 74.8% | | 34.2% | | 65.8% | | 23.3% | | 76.7% | |
| H. Average Payments per User of Service and Percent of Enrollees Using Each Service# | | | | | | | | | | | | |
| | Per-user | %Use+ | Per-user | %Use+ | Per-user | %Use+ | Per-user | %Use+ | Per-user | %Use+ | Per-user | %Use+ |
| Physician Services | \$332 | 62.7% | \$507 | 44.3% | \$226 | 37.3% | \$345 | 37.3% | \$242 | 39.3% | \$384 | 37.8% |
| Dental Services | \$248 | 25.5% | \$276 | 14.5% | \$167 | 18.0% | \$243 | 8.5% | \$172 | 13.7% | \$204 | 7.7% |
| Other Practitioners | \$656 | 4.8% | \$146 | 13.1% | \$118 | 5.1% | \$124 | 8.8% | \$179 | 6.7% | \$110 | 13.2% |
| EPSDT* | \$150 | 20.5% | \$134 | 4.5% | \$51 | 30.4% | \$21 | 10.6% | \$224 | 26.1% | \$308 | 3.5% |
| Family Planning Services | \$132 | 2.1% | \$140 | 2.5% | \$70 | 1.6% | \$76 | 2.6% | \$159 | 2.6% | \$141 | 3.3% |
| Clinic Services | \$161 | 8.6% | \$258 | 3.7% | \$437 | 10.5% | \$585 | 11.2% | \$469 | 11.4% | \$874 | 9.7% |
| Outpatient Hospital | \$327 | 30.3% | \$641 | 25.9% | \$232 | 24.8% | \$410 | 20.1% | \$333 | 24.7% | \$582 | 24.6% |
| Inpatient Hospital | \$3,724 | 10.3% | \$3,816 | 10.2% | \$2,474 | 9.7% | \$3,047 | 10.3% | \$4,826 | 6.5% | \$4,807 | 10.5% |
| Nursing Home/Intermediate Care | \$23,183 | 0.0% | \$19,210 | 12.4% | \$39,817 | 0.0% | \$14,712 | 8.7% | \$63,002 | 0.1% | \$21,867 | 8.9% |
| Mental Health Facility Services | \$23,204 | 0.0% | \$41,340 | 0.0% | \$9,769 | 0.1% | \$8,932 | 0.2% | \$18,105 | 0.3% | \$28,065 | 0.4% |
| Personal Care / Home Health Services | \$333 | 17.8% | \$3,521 | 15.0% | \$1,444 | 5.4% | \$3,042 | 8.6% | \$1,752 | 7.3% | \$3,125 | 11.9% |
| Lab and X-Ray | \$119 | 27.1% | \$300 | 16.1% | \$43 | 14.3% | \$73 | 16.7% | \$66 | 17.6% | \$119 | 18.7% |
| Prescribed Drugs | \$219 | 53.8% | \$1,287 | 47.6% | \$165 | 27.2% | \$1,005 | 31.3% | \$188 | 41.0% | \$1,205 | 40.3% |
| Prepaid Health Care | \$625 | 100.0% | \$851 | 64.9% | \$1,756 | 48.6% | \$4,388 | 28.1% | \$771 | 50.0% | \$1,286 | 26.5% |
| Primary Care Case Management Services | \$25 | 80.8% | \$25 | 24.2% | \$29 | 14.8% | \$33 | 5.8% | \$28 | 12.2% | \$43 | 4.2% |
| Other Services** | \$364 | 14.0% | \$570 | 24.3% | \$1,338 | 12.1% | \$1,217 | 19.4% | \$799 | 12.2% | \$799 | 19.6% |
| All Services | \$1,762 | 100.0% | \$6,430 | 100.0% | \$1,855 | 89.6% | \$5,897 | 91.8% | \$1,571 | 92.3% | \$6,493 | 93.7% |

Notes: When less than 0.05% of expenditures is accounted for by a type of service, it is rounded to 0.0%. # Data for HI and OK are from FY 1996. Breakdowns by Type of Service for NE are from FY 1997. These are not included in regional and US totals. DSH payments not included. * EPSDT services are known to be under-reported on the HCFA2082 in many states due to complexities in the reporting process. EPSDT participation rate for Montana in 1997 was 86% according to the HCFA416. ** Include Home and Community Waiver, and 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. ~ A positive variance reflects expenditures not reported as any service type. A negative variance indicates that expenditures for all service types sum to exceed total expenditures state reported for age group. +Percents may sum to exceed 100 since enrollees may use multiple services. 'na' Data unavailable. 'NA' Not applicable.

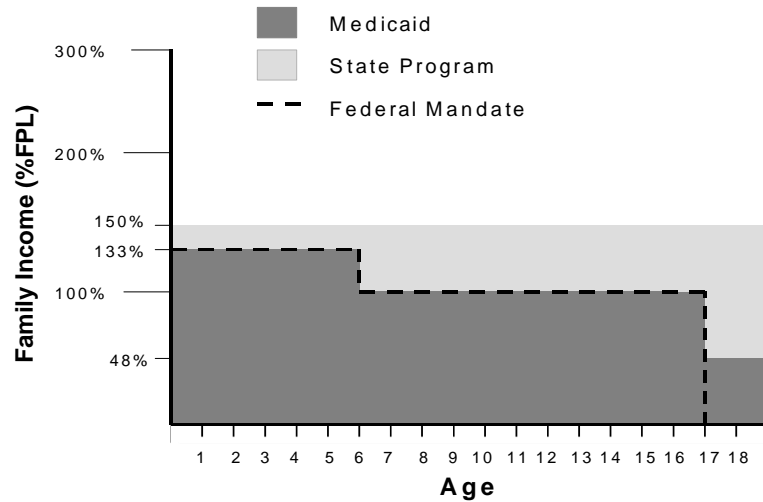
| I. CONTINUED | MONTANA | | MOUNTAIN REGION | | UNITED STATES | |
|--|------------------|----------------|------------------|----------------|------------------|----------------|
| I. Enrollees Under Age 21, by Race and Age, FY 1998# | <u>Enrollees</u> | <u>Percent</u> | <u>Enrollees</u> | <u>Percent</u> | <u>Enrollees</u> | <u>Percent</u> |
| Non-hispanic White | 36,607 | 71.1% | 535,503 | 44.3% | 8,942,666 | 40.0% |
| Ages 0 Through 5 | 15,466 | 42.2% | 242,037 | 45.2% | 3,674,647 | 41.1% |
| Ages 6 Through 20 | 21,141 | 57.8% | 293,466 | 54.8% | 5,268,019 | 57.6% |
| Non-hispanic Black | 426 | 0.8% | 76,347 | 6.3% | 6,572,457 | 29.4% |
| Ages 0 Through 5 | 174 | 40.8% | 30,428 | 39.9% | 2,493,510 | 37.9% |
| Ages 6 Through 20 | 252 | 59.2% | 45,919 | 60.1% | 4,078,947 | 62.1% |
| Hispanic | 1,124 | 2.2% | 440,474 | 36.4% | 4,814,500 | 21.6% |
| Ages 0 Through 5 | 449 | 39.9% | 209,347 | 47.5% | 2,211,872 | 45.9% |
| Ages 6 Through 20 | 675 | 60.1% | 231,127 | 52.5% | 2,602,628 | 54.1% |
| Other | 13,309 | 25.9% | 156,618 | 13.0% | 2,001,399 | 9.0% |
| Ages 0 Through 5 | 4,780 | 35.9% | 59,815 | 38.2% | 840,334 | 42.0% |
| Ages 6 Through 20 | 8,529 | 64.1% | 96,803 | 61.8% | 1,161,065 | 58.0% |

II. POPULATION AND CHILD HEALTH DATA

| | | | | | | |
|--|----------------|---------------------------------------|-------------------|---------------------------------------|--------------------|---------------------------------------|
| A. Total Population, 1998 | 919,348 | 100.0% | 16,930,477 | 100.0% | 270,002,354 | 100.0% |
| Under Age 21 | 280,041 | 30.5% | 5,488,612 | 32.4% | 81,664,866 | 30.2% |
| Under Age 6 | 71,435 | 7.8% | 1,517,790 | 9.0% | 23,078,513 | 8.5% |
| Infants | 11,814 | 1.3% | 248,517 | 1.5% | 3,800,560 | 1.4% |
| Age 1 Through 5 | 59,621 | 6.5% | 1,269,273 | 7.5% | 19,277,953 | 7.1% |
| Age 6 Through 20 | 208,606 | 22.7% | 3,970,822 | 23.5% | 58,586,353 | 21.7% |
| Age 21 and Older | 639,307 | 69.5% | 11,441,865 | 67.6% | 188,337,488 | 69.8% |
| B. Infant Mortality, Low Birth Weight and Prenatal Care, 1997 | Total | White | Other | Total | White | Other |
| Infant Mortality per 1,000 Live Births | 6.9 | 6.0 | na | 6.6 | 6.4 | 9.0 |
| Neonatal Mortality | 3.8 | 3.8 | na | 4.1 | 4.0 | 5.0 |
| Postneonatal Mortality | 3.1 | 2.2 | na | 2.5 | 2.3 | 4.0 |
| % Low Birth Weight Infants | | | | | | |
| Under 2500 Grams | 7.0 | 6.9 | 7.8 | 7.3 | 7.1 | 9.1 |
| Under 1500 Grams | 1.0 | 1.0 | 1.6 | 1.1 | 1.1 | 1.7 |
| % Not Receiving Prenatal Care | | | | | | |
| In First Trimester | 17.7 | 15.2 | 35.7 | 22.3 | 21.2 | 31.2 |
| Until Third Trimester or Not At All | 3.2 | 2.4 | 9.1 | 5.7 | 5.4 | 8.9 |
| C. Pediatrician and Other Child Health Physician Ratios, 1998 | Total | % Child Population⁺ | Total | % Child Population⁺ | Total | % Child Population⁺ |
| <i>Children living in Health Service Areas* with:</i> | | | | | | |
| Fewer than 55 Pediatricians per 100K Children ~ | 239,395 | 100% | 3,273,292 | 70% | 34,317,300 | 50% |
| Fewer than 82 Child Health Physician per 100K Children ~ | 238,322 | 100% | 3,498,004 | 74% | 34,202,498 | 50% |

Notes: # Race categories may be inconsistent across state. Maine, for example, reported all enrollees as 'Other'. # Data for OK are from FY1996 and not included in regional and state totals. * Counties are grouped into Health Service Areas(HSAs, developed by the National Center for Health Statistics) based on commuting patterns within and across counties. ~ Median ratio for US. + Percents less than 0.5% are rounded to 0%. 'na' Data unavailable.

III. MEDICAID AND SCHIP PROGRAM ELIGIBILITY BASED ON FAMILY INCOME AS A PERCENTAGE OF THE FEDERAL POVERTY LEVEL (%FPL), June 2000



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 16 up to 100% FPL, as of October 1, 1999. 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 17 through 18 (48% FPL for Montana, an equivalent of \$6,792 for a family of 3 in 2000).

Montana did not expand its Title XIX Medicaid program beyond the federal mandate. The Medically Needy were covered up to 73% FPL in 1998. As of 1998, there were a total of 41 states with Title XIX Medicaid expansions and 38 states covered the Medically Needy.

An estimated 37% of 49K uninsured children under age 19 in Montana were Medicaid eligible but unenrolled during 1998. Reports of children's health insurance status and Medicaid and SCHIP eligibility of uninsured children in the states can be downloaded from '<http://www.aap.org/advocacy/schipef.htm>'.

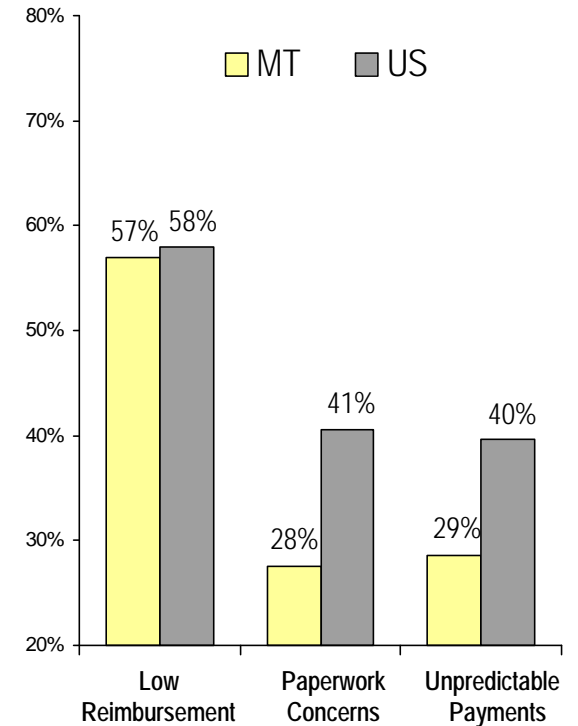
B. Title XXI Medicaid/SCHIP Program Eligibility

Montana's Title XXI state program covers children through age 18 to 150% FPL. Federally legislated maximum Title XXI SCHIP/Medicaid program eligibility for Montana is 200% FPL for all infants and children through age 18.

More information about SCHIP activities in the states, including the SCHIP Update, are available from reports published by the AAP's Department of Chapter and State Affairs, available at "<http://www.aap.org/advocacy/schip.htm>". An information clearinghouse on SCHIP program evaluation can be accessed at "<http://www.aap.org/advocacy/evaluation.htm>".

IV. BARRIERS TO PEDIATRICIAN PARTICIPATION IN MEDICAID, AAP SURVEY, 2000

Percent Pediatricians Rating Reason "Very Important" for Limiting Medicaid Participation



A survey sent to a random sample of 13,000 Fellows of the American Academy of Pediatrics in early 2000 found that low reimbursement, paperwork concerns, and unpredictable payments were the top 3 reasons pediatricians cited for limiting participation in the Medicaid program. Complete state reports of this survey and other studies conducted by the AAP Division of Health Policy Research can be accessed from the AAP Research page at "<http://www.aap.org/research>".

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- II A. Population Estimates for the US and States by Single Year of Age and Sex: July 1, 1998. Population Division, US Census Bureau. Downloadable from <http://www.census.gov/population/estimates/state/stats/st-99-11.txt>.
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- IV. 2000 Pediatrician Participation Survey. American Academy of Pediatrics, 2000.

Medicaid State Reports, FY 1994 through 1998, are available in Adobe Acrobat PDF format on the Research page of the AAP Web site, at <http://www.aap.org/research/medicaid.htm>. Contact Suk-fong Tang, PhD, Division of Health Policy Research, with comments about the report; contact Dan Walter, Department of Chapter and State Affairs, for Medicaid questions and advocacy advice.