

Medicaid

STATE REPORTS – FY 1998

Ohio

 Division of
Health Policy Research

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Medicaid State Report

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

Division of Health Policy Research

I. MEDICAID ENROLLEES AND EXPENDITURES				OHIO			EAST NORTH CENTRAL REGION~			UNITED STATES		
A. Federal Medical Assistance Percentage (FMAP)*		58.1% (FY98)	58.7% (FY00)	71.1% (Enhanced)		56.4% (FY98)	56.9% (FY00)	69.8% (Enhanced)		60.7% (FY98)	60.7% (FY00)	72.5% (Enhanced)
B. Total Medicaid Managed Care Enrollment, 06/30/1998 (% of Total Medicaid Enrollment)		292,819 (28.4% of 1,032,405 **)				1,648,975 (38.8% of 4,248,748)				15,760,205 (52.5% of 30,009,674)		
C. Percent of Births Paid for by Medicaid, 1997***		35%				35%				35%		
D. FY 1998 and FY 1994-98 Averaged DSH^ Payment		\$657 M \$605 M				\$1,452 M \$1,314 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		1,402,364		100.0%		5,689,616		100.0%		40,377,603		100.0%
Children Under Age 21		796,056		56.8%		3,294,275		57.9%		22,331,022		56.4%
Under Age 6		311,775		22.2%		1,380,844		24.3%		9,220,363		22.8%
Infants		58,716		4.2%		296,576		5.2%		2,014,962		5.0%
Age 1 Through 5		253,059		18.0%		1,084,268		19.1%		7,205,401		17.8%
Age 6 Through 20		484,281		34.5%		1,913,431		33.6%		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		1,402,364	\$6,121 M	\$4,365		5,689,616	\$21,409 M	\$3,763		40,377,603	\$142,058 M	\$3,518
Children^^^		49.0%	12.7%	\$1,129		49.5%	15.1%	\$1,129		50.6%	16.4%	\$1,130
Categorically Needy - Cash		27.4%	6.7%	\$1,067		19.1%	5.7%	\$1,102		18.4%	6.0%	\$1,137
Categorically Needy - Noncash		18.4%	4.4%	\$1,047		16.5%	4.0%	\$901		17.4%	4.6%	\$910
Medically Needy		NA	NA	NA		2.5%	1.1%	\$1,613		4.5%	1.7%	\$1,294
Other		3.2%	1.6%	\$2,119		11.3%	4.3%	\$1,399		10.2%	4.2%	\$1,418
Adults		23.9%	9.1%	\$1,651		23.8%	9.8%	\$1,515		21.8%	10.7%	\$1,704
Categorically Needy - Cash		10.2%	5.2%	\$2,218		11.7%	5.2%	\$1,632		8.8%	4.5%	\$1,796
Categorically Needy - Noncash		12.8%	3.6%	\$1,217		5.1%	2.3%	\$1,669		5.6%	3.2%	\$1,987
Medically Needy		NA	NA	NA		3.5%	1.5%	\$1,554		2.6%	1.3%	\$1,717
Other		1.0%	0.3%	\$1,439		3.6%	0.8%	\$876		4.8%	1.6%	\$1,199
Blind and Disabled		16.5%	41.6%	\$11,001		17.8%	46.7%	\$9,677		17.5%	43.6%	\$8,680
Aged		10.5%	36.7%	\$15,220		8.9%	28.4%	\$11,833		10.2%	29.3%	\$9,968

Notes: ~ Includes IL, IN, MI, OH & WI. * Regional and US averages of FY98 FMAP are weighted by FY98 expenditures. FY00 and Enhanced FMAPs are unweighted. ** Enrollment on 06/30/98 was 73.6% 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	OHIO				EAST NORTH CENTRAL 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	1.4%	2.1%	1.2%	1.6%	1.5%	1.8%	1.5%	1.8%	1.5%	1.8%	1.5%	1.8%
Dental Services	0.2%	0.2%	0.3%	0.1%	0.4%	0.2%	0.4%	0.2%	0.4%	0.2%	0.4%	0.2%
Other Practitioners	0.1%	0.2%	0.3%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%
EPSDT*	0.2%	0.0%	0.5%	0.1%	0.9%	0.1%	0.9%	0.1%	0.9%	0.1%	0.9%	0.1%
Family Planning Services	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.1%	0.1%	0.1%	0.1%
Clinic Services	0.2%	0.3%	0.8%	0.8%	0.9%	1.1%	0.9%	1.1%	0.9%	1.1%	0.9%	1.1%
Outpatient Hospital	1.2%	1.8%	1.0%	1.5%	1.3%	1.8%	1.3%	1.8%	1.3%	1.8%	1.3%	1.8%
Inpatient Hospital	4.7%	6.4%	6.0%	7.3%	5.1%	6.4%	5.1%	6.4%	5.1%	6.4%	5.1%	6.4%
Nursing Home/Intermediate Care	0.8%	33.8%	0.6%	28.6%	0.6%	24.5%	0.6%	24.5%	0.6%	24.5%	0.6%	24.5%
Mental Health Facility Services	0.1%	0.0%	1.4%	1.2%	0.8%	1.3%	0.8%	1.3%	0.8%	1.3%	0.8%	1.3%
Personal Care / Home Health Services	0.8%	1.3%	1.1%	1.9%	2.1%	4.7%	2.1%	4.7%	2.1%	4.7%	2.1%	4.7%
Lab and X-Ray	0.0%	0.1%	0.1%	0.2%	0.2%	0.3%	0.2%	0.3%	0.2%	0.3%	0.2%	0.3%
Prescribed Drugs	1.0%	6.9%	1.1%	6.6%	1.2%	6.1%	1.2%	6.1%	1.2%	6.1%	1.2%	6.1%
Prepaid Health Care	5.2%	1.3%	4.9%	2.5%	6.2%	4.3%	6.2%	4.3%	6.2%	4.3%	6.2%	4.3%
Primary Care Case Management Services	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.1%	0.0%	0.1%	0.0%
Other Services**	3.6%	6.5%	2.6%	2.9%	1.6%	2.0%	1.6%	2.0%	1.6%	2.0%	1.6%	2.0%
Reporting Variance~	0.0%	19.5%	0.0%	20.6%	0.2%	20.0%	0.2%	20.0%	0.2%	20.0%	0.2%	20.0%
All Services	19.6%	80.4%	22.1%	77.9%	23.3%	76.7%	23.3%	76.7%	23.3%	76.7%	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	\$248	41.8%	\$457	46.0%	\$201	39.1%	\$371	39.1%	\$242	39.3%	\$384	37.8%
Dental Services	\$128	15.0%	\$133	13.1%	\$135	12.7%	\$126	9.8%	\$172	13.7%	\$204	7.7%
Other Practitioners	\$81	8.6%	\$89	21.5%	\$281	6.6%	\$121	13.4%	\$179	6.7%	\$110	13.2%
EPSDT*	\$104	15.7%	\$71	1.2%	\$111	26.4%	\$117	3.8%	\$224	26.1%	\$308	3.5%
Family Planning Services	\$120	0.5%	\$124	0.6%	\$85	1.8%	\$84	2.6%	\$159	2.6%	\$141	3.3%
Clinic Services	\$196	8.4%	\$722	4.6%	\$405	13.1%	\$633	11.5%	\$469	11.4%	\$874	9.7%
Outpatient Hospital	\$308	30.1%	\$533	34.5%	\$246	27.0%	\$478	27.7%	\$333	24.7%	\$582	24.6%
Inpatient Hospital	\$4,823	7.5%	\$4,821	13.3%	\$5,565	6.9%	\$6,287	10.2%	\$4,826	6.5%	\$4,807	10.5%
Nursing Home/Intermediate Care	\$72,420	0.1%	\$23,724	14.4%	\$55,339	0.1%	\$20,257	12.4%	\$63,002	0.1%	\$21,867	8.9%
Mental Health Facility Services	\$5,738	0.1%	\$5,996	0.1%	\$32,279	0.3%	\$49,450	0.2%	\$18,105	0.3%	\$28,065	0.4%
Personal Care / Home Health Services	\$3,156	2.0%	\$2,808	4.7%	\$1,738	4.1%	\$1,841	9.2%	\$1,752	7.3%	\$3,125	11.9%
Lab and X-Ray	\$62	4.1%	\$91	8.8%	\$49	16.8%	\$98	22.3%	\$66	17.6%	\$119	18.7%
Prescribed Drugs	\$190	38.6%	\$1,531	45.6%	\$178	40.0%	\$1,376	42.2%	\$188	41.0%	\$1,205	40.3%
Prepaid Health Care	\$932	42.9%	\$1,453	8.9%	\$790	39.4%	\$1,450	15.0%	\$771	50.0%	\$1,286	26.5%
Primary Care Case Management Services	NA	0.0%	NA	0.0%	\$23	6.5%	\$21	1.3%	\$28	12.2%	\$43	4.2%
Other Services**	\$1,868	15.0%	\$2,159	30.6%	\$1,233	13.6%	\$1,097	23.1%	\$799	12.2%	\$799	19.6%
All Services	\$1,685	89.4%	\$8,502	95.5%	\$1,631	86.3%	\$7,465	91.7%	\$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 Ohio in 1997 was 44% 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.

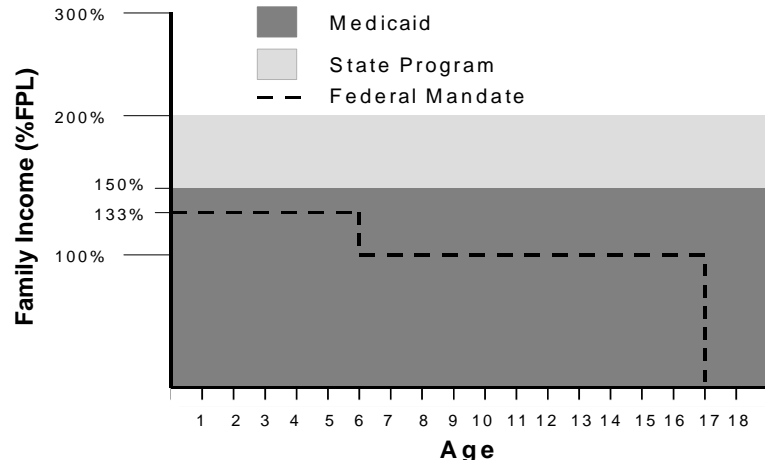
I. CONTINUED	OHIO		EAST NORTH CENTRAL REGION		UNITED STATES	
	<u>Enrollees</u>	<u>Percent</u>	<u>Enrollees</u>	<u>Percent</u>	<u>Enrollees</u>	<u>Percent</u>
I. Enrollees Under Age 21, by Race and Age, FY 1998#						
Non-hispanic White	463,770	58.3%	1,551,657	47.1%	8,942,666	40.0%
Ages 0 Through 5	187,229	40.4%	679,771	43.8%	3,674,647	41.1%
Ages 6 Through 20	276,541	59.6%	871,886	56.2%	5,268,019	57.6%
Non-hispanic Black	294,684	37.0%	1,263,879	38.4%	6,572,457	29.4%
Ages 0 Through 5	109,167	37.0%	481,800	38.1%	2,493,510	37.9%
Ages 6 Through 20	185,517	63.0%	782,079	61.9%	4,078,947	62.1%
Hispanic	731	0.1%	256,188	7.8%	4,814,500	21.6%
Ages 0 Through 5	208	28.5%	134,187	52.4%	2,211,872	45.9%
Ages 6 Through 20	523	71.5%	122,001	47.6%	2,602,628	54.1%
Other	36,871	4.6%	222,551	6.8%	2,001,399	9.0%
Ages 0 Through 5	15,171	41.1%	85,086	38.2%	840,334	42.0%
Ages 6 Through 20	21,700	58.9%	137,465	61.8%	1,161,065	58.0%

II. POPULATION AND CHILD HEALTH DATA

A. Total Population, 1998	11,259,682	100.0%	44,063,020	100.0%	270,002,354	100.0%
Under Age 21	3,324,936	29.5%	13,262,206	30.1%	81,664,866	30.2%
Under Age 6	910,985	8.1%	3,692,514	8.4%	23,078,513	8.5%
Infants	149,423	1.3%	605,250	1.4%	3,800,560	1.4%
Age 1 Through 5	761,562	6.8%	3,087,264	7.0%	19,277,953	7.1%
Age 6 Through 20	2,413,951	21.4%	9,569,692	21.7%	58,586,353	21.7%
Age 21 and Older	7,934,746	70.5%	30,800,814	69.9%	188,337,488	69.8%
B. Infant Mortality, Low Birth Weight and Prenatal Care, 1997	<u>Total</u>	<u>White</u>	<u>Other</u>	<u>Total</u>	<u>White</u>	<u>Other</u>
Infant Mortality per 1,000 Live Births	7.8	6.5	14.4	8.0	6.4	14.7
Neonatal Mortality	5.2	4.5	9.1	5.3	4.4	9.5
Postneonatal Mortality	2.6	2.1	5.3	2.6	2.0	5.3
% Low Birth Weight Infants Under 2500 Grams	7.7	6.7	12.7	7.7	6.5	12.9
Under 1500 Grams	1.5	1.3	2.7	1.5	1.2	2.8
% Not Receiving Prenatal Care						
In First Trimester	14.5	12.4	25.4	16.5	14.0	27.8
Until Third Trimester or Not At All	4.2	3.1	9.8	3.8	2.9	8.0
C. Pediatrician and Other Child Health Physician Ratios, 1998	<u>Total</u>	<u>% Child Population</u> ⁺	<u>Total</u>	<u>% Child Population</u> ⁺	<u>Total</u>	<u>% Child Population</u> ⁺
Children living in Health Service Areas* with:						
Fewer than 55 Pediatricians per 100K Children ~	1,536,102	54%	6,199,188	54%	34,317,300	50%
Fewer than 82 Child Health Physician per 100K Children ~	1,316,081	46%	5,767,403	51%	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 (32% FPL for Ohio, an equivalent of \$4,528 for a family of 3 in 2000).

Ohio did not expand its Title XIX Medicaid program beyond the federal mandate. The Medically Needy were not covered 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 41% of 283K uninsured children under age 19 in Ohio 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>'.

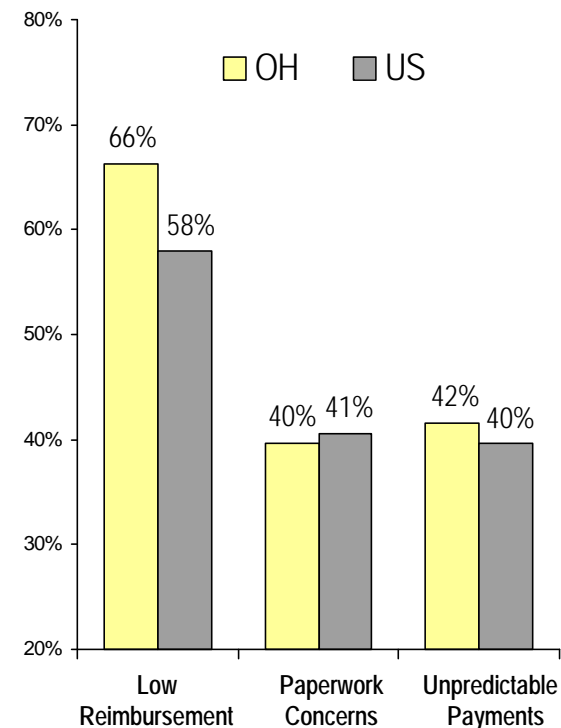
B. Title XXI Medicaid/SCHIP Program Eligibility

Ohio's Title XXI Medicaid program covers infants and children through age 5 from 133% to 200% FPL, children ages 6 through 16 from 100 to 200% FPL and children ages 17 through 18 from 32% to 200% FPL.

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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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.