

EXHIBIT 24. Medicaid Supplemental Payments to Hospital Providers by State, FY 2023 (millions)

State ¹	Inpatient and outpatient hospitals ²				
	Total Medicaid payments	DSH payments	Non-DSH supplemental payments	Section 1115 waiver authority payments	Supplemental payments as % of total
Total	\$90,102.8	\$13,956.5	\$23,579.5	\$10,257.7	53.0%
Alabama	3,004.6	206.0	1,564.2	—	58.9
Alaska ³	707.4	-1.3	—	—	-0.2
Arizona	1,414.3	137.2	413.9	—	39.0
Arkansas	1,417.3	22.8	524.4	—	38.6
California ⁴	14,060.9	805.8	5,335.7	2,300.4	60.0
Colorado	3,819.6	244.7	1,537.6	—	46.7
Connecticut	3,014.1	124.2	601.5	—	24.1
Delaware	76.7	10.0	—	—	13.0
District of Columbia	200.9	55.9	—	—	27.8
Florida ⁴	2,720.4	235.7	601.3	1,271.0	77.5
Georgia	2,413.5	537.0	245.5	—	32.4
Hawaii	98.3	44.1	—	—	44.9
Idaho	1,056.9	12.3	247.2	—	24.6
Illinois	3,016.7	354.5	1,133.6	—	49.3
Indiana	1,205.4	202.2	72.5	—	22.8
Iowa	126.4	18.1	72.5	—	71.6
Kansas ⁴	187.0	75.1	0.4	81.7	84.1
Kentucky	227.3	5.0	6.5	—	5.0
Louisiana	614.0	338.9	84.4	—	68.9
Maine	985.2	—	148.9	—	15.1
Maryland	1,223.7	116.5	60.7	—	14.5
Massachusetts ^{4,5,6}	3,735.2	—	656.1	642.8	34.8
Michigan	1,143.1	323.8	501.1	—	72.2
Minnesota	573.1	54.8	124.7	—	31.3
Mississippi	782.7	163.9	182.3	—	44.2
Missouri	2,623.9	558.1	520.3	—	41.1
Montana	944.6	—	377.8	—	40.0
Nebraska	41.6	32.6	—	—	78.4
Nevada	578.0	22.2	257.0	—	48.3
New Hampshire	256.5	213.4	23.5	—	92.4
New Jersey	1,467.2	766.5	242.1	—	68.7
New Mexico	439.6	36.1	219.0	—	58.0
New York	9,287.8	3,298.6	981.3	—	46.1
North Carolina	1,934.0	60.0	420.6	—	24.8
North Dakota	171.5	0.9	1.9	—	1.6
Ohio	1,525.3	683.6	—	—	44.8
Oklahoma	3,065.2	67.2	1,126.5	—	38.9

EXHIBIT 24. (continued)

State ¹	Inpatient and outpatient hospitals ²				
	Total Medicaid payments	DSH payments	Non-DSH supplemental payments	Section 1115 waiver authority payments	Supplemental payments as % of total
Oregon	\$427.0	\$72.4	\$153.0	–	52.8%
Pennsylvania	1,986.6	998.3	594.7	–	80.2
Rhode Island ⁶	344.1	157.8	10.1	\$37.6	59.7
South Carolina	1,263.7	549.3	195.4	–	58.9
South Dakota	294.0	0.9	8.0	–	3.0
Tennessee ⁴	1,002.6	94.8	80.0	806.0	97.8
Texas ^{4,5}	8,270.7	1,762.8	617.6	5,118.3	90.7
Utah	419.5	9.8	34.3	–	10.5
Vermont	245.9	22.7	–	–	9.2
Virginia ³	3,633.3	-6.3	3,334.4	–	91.6
Washington ⁵	828.8	268.8	149.9	0.0	50.5
West Virginia	214.0	55.4	14.8	–	32.8
Wisconsin	850.1	142.9	52.4	–	23.0
Wyoming	162.7	0.5	50.1	–	31.1

Notes: FY is fiscal year. DSH is disproportionate share hospital. Includes federal and state funds. Section 1115 refers to Section 1115 of the Social Security Act (the Act). Excludes payments made under managed care arrangements. All amounts in this table are as reported by states in CMS-64 data during the fiscal year to obtain federal matching funds; amounts include expenditures for the current fiscal year and adjustments to expenditures for prior fiscal years that may be positive or negative. Amounts reported by states for any given category (e.g., inpatient hospital) sometimes show substantial annual fluctuations. Some fluctuation in supplemental payments may reflect the fact that states may not consistently classify payments in the same way over time.

– Dash indicates zero. \$0.0 or \$-0.0 indicates a value between \$0.05 million and -\$0.05 million that rounds to zero. 0.0% or -0.0% indicates a value between 0.05% and -0.05% that rounds to zero.

¹ All states had certified their CMS-64 Financial Management Report (FMR) submissions as of May 29, 2024. Figures presented in this exhibit may change if states revise their expenditure data after this date.

² Includes inpatient, outpatient, critical access hospital, and emergency hospital categories in the CMS-64 data. The CMS-64 instructions to states note that DSH payments are those made in accordance with Section 1923 of the Act. Non-DSH supplemental payments are described in the CMS-64 instructions to states as those made in addition to the standard fee schedule or other standard payment for a given service. They include payments made under institutional upper payment limit rules and payments to hospitals for graduate medical education. Section 1115 waiver expenditure authority payments include those made under uncompensated care pools, delivery system reform incentive payments (DSRIP), and other non-DSH supplemental payments that have been authorized under Section 1115 waivers. Because the majority of DSRIP payments go to hospitals, DSRIP payments that were reported as other care services on the CMS-64 were included in the Section 1115 waiver expenditure category and the total hospital payment category.

³ State reports negative DSH payments due to prior period adjustments.

⁴ State made supplemental payments through an uncompensated care pool under Section 1115 waiver expenditure authority.

⁵ State made supplemental payments through a DSRIP or DSRIP-like program under Section 1115 waiver expenditure authority.

⁶ State made other supplemental payments under Section 1115 waiver expenditure authority.

Source: MACPAC, 2024, analysis of CMS-64 FMR net expenditure data as of May 29, 2024, and CMS-64 Schedule C waiver report data as of August 2, 2024.