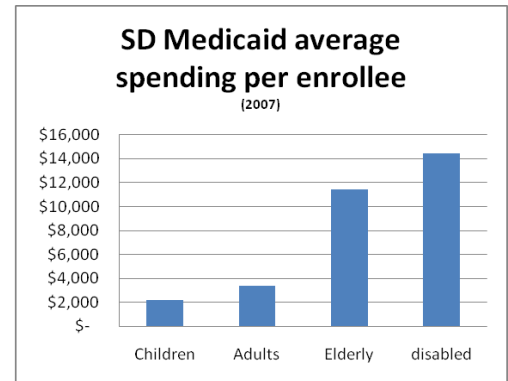
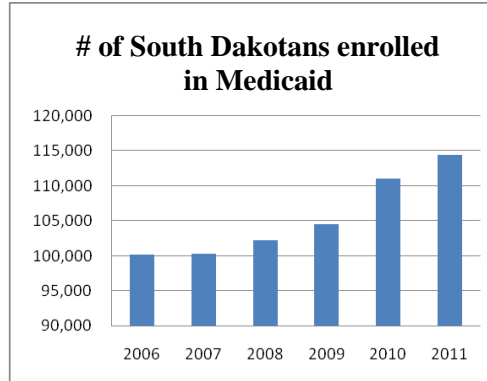


Who funds Medicaid and who is covered?

Providing health care for low-income children, elderly and disabled South Dakotans is a partnership between the federal government, which pays 59% of the costs, and the state, which pays 41%, through the General Fund. Both the number of eligible people and costs are rising. When South Dakota increases or decreases state Medicaid funding, the federal government also increases or decreases its 59% share proportionally.

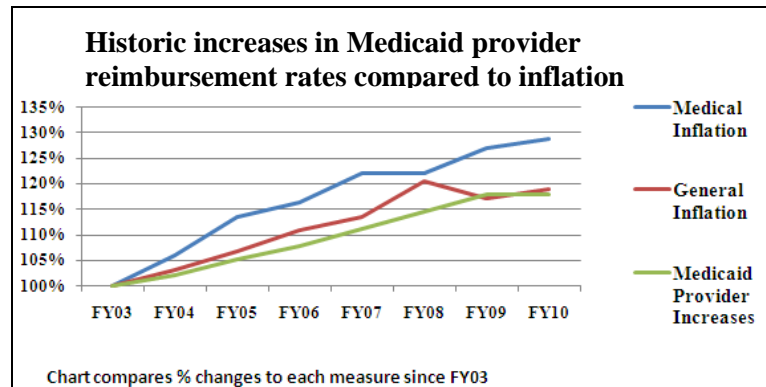
South Dakotans covered by Medicaid:

- One-third of children,
- Over half of nursing home residents,
- Most developmentally disabled residents.



How are medical providers paid for Medicaid services?

Health care providers are reimbursed by Medicaid at a rate lower than their normal charges for services. In FY10 and FY11 Medicaid reimbursements rates were frozen and in FY12 they were cut by an average of 7%. Even before the freeze and cuts, Medicaid reimbursement lagged medical inflation.



How does Medicaid impact the common good?

If South Dakotans need medical care but have no money, they either go without, or the cost of providing that care is shifted to other health care consumers or local county governments. Medicaid enables low-income and disabled South Dakotans to receive the preventive and supportive health services, and acute or long-term health care they could not otherwise afford. Such care is often the most cost effective way to take care of the person.

Are there other aspects of Medicaid that you value or would change?