

**EXHIBIT 25.** Medicaid Supplemental Payments to Non-Hospital Providers by State, FY 2024 (millions)

State <sup>1</sup>	Mental health facilities <sup>2</sup>			Nursing facilities and ICF/IDs <sup>3</sup>			Physicians and other practitioners <sup>4</sup>		
	Total Medicaid payments	Supplemental payments	Supplemental payments as % of total	Total Medicaid payments	Supplemental payments	Supplemental payments as % of total	Total Medicaid payments	Supplemental payments	Supplemental payments as % of total
<b>Total</b>	<b>\$8,121.8</b>	<b>\$3,159.4</b>	<b>38.9%</b>	<b>\$56,504.1</b>	<b>\$2,833.2</b>	<b>5.0%</b>	<b>\$12,610.8</b>	<b>\$2,559.1</b>	<b>20.3%</b>
Alabama	73.2	3.2	4.4	1,245.6	–	–	685.4	126.8	18.5
Alaska	30.1	17.6	58.5	198.5	–	–	223.7	–	–
Arizona	37.6	28.5	75.7	72.9	8.8	12.0	76.5	–	–
Arkansas	17.0	–	–	1,128.2	–	–	376.2	52.4	13.9
California	527.0	0.1	0.0	1,328.2	255.1	19.2	1,640.7	209.6	12.8
Colorado	8.7	–	–	979.6	156.8	16.0	569.7	277.6	48.7
Connecticut	254.6	105.6	41.5	1,465.6	–	–	905.0	43.9	4.9
Delaware	23.8	7.1	30.0	36.9	–	–	9.2	–	–
District of Columbia	107.4	6.5	6.1	393.3	–	–	40.4	4.5	11.1
Florida <sup>5</sup>	2,172.8	135.5	6.2	835.6	–	–	318.8	184.1	57.7
Georgia	17.8	–	–	1,849.4	100.1	5.4	475.5	54.0	11.4
Hawaii	–	–	–	10.8	–	–	0.6	–	–
Idaho	5.8	–	–	238.1	114.1	47.9	236.0	–	–
Illinois <sup>6</sup>	59.9	89.4	149.2	1,430.5	48.6	3.4	252.7	–	–
Indiana	111.6	–	–	2,931.3	787.8	26.9	289.4	22.9	7.9
Iowa	0.7	–	–	42.7	–	–	14.6	5.1	35.1
Kansas	22.5	22.3	99.1	83.0	–	–	7.0	1.1	15.8
Kentucky	31.4	27.6	87.8	1,723.6	0.6	0.0	47.7	15.8	33.2
Louisiana	136.7	132.4	96.8	1,863.5	6.7	0.4	20.0	–	–
Maine	151.7	74.6	49.2	520.5	–	–	260.0	11.2	4.3
Maryland	441.8	72.3	16.4	1,575.0	–	–	541.8	236.3	43.6
Massachusetts <sup>7</sup>	216.4	177.6	82.1	1,809.7	1.7	0.1	295.8	–	–
Michigan	183.8	161.2	87.7	2,723.7	521.7	19.2	246.7	104.5	42.3
Minnesota	177.6	–	–	1,307.3	–	–	544.2	26.8	4.9
Mississippi	14.0	–	–	1,352.2	3.5	0.3	172.6	29.2	16.9

EXHIBIT 25. (continued)

State <sup>1</sup>	Mental health facilities <sup>2</sup>			Nursing facilities and ICF/IDs <sup>3</sup>			Physicians and other practitioners <sup>4</sup>		
	Total Medicaid payments	Supplemental payments	Supplemental payments as % of total	Total Medicaid payments	Supplemental payments	Supplemental payments as % of total	Total Medicaid payments	Supplemental payments	Supplemental payments as % of total
Missouri	\$232.8	\$207.3	89.0%	\$1,548.1	\$18.8	1.2%	\$40.5	–	–
Montana	22.4	–	–	201.6	16.2	8.0	235.8	–	–
Nebraska	1.8	1.8	100.0	584.3	21.4	3.7	0.9	–	–
Nevada	56.8	–	–	393.6	108.4	27.5	211.0	\$14.2	6.8%
New Hampshire	92.5	91.1	98.5	444.9	169.4	38.1	4.6	–	–
New Jersey	513.2	363.0	70.7	755.6	7.2	1.0	98.1	–	–
New Mexico	3.8	–	–	39.9	–	–	86.4	2.0	2.3
New York	689.4	302.5	43.9	8,310.9	75.9	0.9	619.7	–	–
North Carolina	210.0	210.0	100.0	2,311.6	–	–	251.1	16.4	6.5
North Dakota	15.6	1.0	6.3	451.1	3.9	0.9	58.2	–	–
Ohio	187.0	186.9	100.0	2,997.3	–	–	168.1	36.1	21.4
Oklahoma	90.4	3.3	3.6	976.2	5.3	0.5	707.8	32.8	4.6
Oregon	43.2	39.5	91.4	780.9	18.4	2.4	48.9	13.7	28.1
Pennsylvania	427.9	332.4	77.7	1,086.5	35.6	3.3	43.2	–	–
Rhode Island <sup>5,7,8</sup>	6.1	1.0	16.2	347.1	9.6	2.8	9.5	1.8	18.9
South Carolina	63.7	60.9	95.5	1,040.5	9.3	0.9	136.2	35.2	25.8
South Dakota	4.0	0.8	18.9	271.2	–	–	108.6	–	–
Tennessee	118.9	–	–	229.3	–	–	47.0	–	–
Texas <sup>5</sup>	279.1	277.7	99.5	1,832.9	6.6	0.4	882.8	657.9	74.5
Utah	20.3	–	–	555.2	237.6	42.8	148.2	62.0	41.8
Vermont	50.1	0.0	0.0	216.0	–	–	84.6	–	–
Virginia	104.0	–	–	441.5	23.7	5.4	313.1	254.2	81.2
Washington	–	–	–	1,322.7	3.4	0.3	57.3	7.3	12.7
West Virginia	27.9	18.9	67.8	1,113.1	–	–	-143.3	–	–
Wisconsin	26.0	–	–	962.2	23.7	2.5	73.8	–	–
Wyoming	11.3	–	–	144.6	33.3	23.0	68.5	19.8	28.9

**EXHIBIT 25.** (continued)

**Notes:** FY is fiscal year. ICF/ID is intermediate care facility for persons with intellectual disabilities. Includes federal and state funds. 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., nursing facility) 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 indicates an amount between zero and \$0.05 million that rounds to zero; 0.0% indicates an amount between zero and 0.05% that rounds to zero.

<sup>1</sup> All states had certified their CMS-64 Financial Management Report (FMR) submissions as of June 3, 2025. Figures presented in this exhibit may change if states revise their expenditure data after this date.

<sup>2</sup> Includes inpatient psychiatric services for individuals under age 21 and inpatient hospital or nursing facility services for individuals age 65 and older in an institution for mental diseases. Supplemental payments include disproportionate share hospital (DSH) payments made in accordance with Section 1923 of the Social Security Act (the Act) as well as uncompensated care pool and other non-DSH supplemental payments made under waiver expenditure authority of Section 1115 of the Act. States are not instructed to break out non-DSH supplemental payments for mental health facilities.

<sup>3</sup> Supplemental payments to nursing facilities and ICF/IDs include those made in addition to the standard fee schedule or other standard payments for a given service, including payments made under institutional upper payment limit rules as well as other non-DSH supplemental payments made under waiver expenditure authority of Section 1115 of the Act.

<sup>4</sup> Includes the physician and other practitioner categories in CMS-64 data; excludes additional categories (e.g., dental, nurse-midwife, nurse practitioner) for which states are not instructed to break out supplemental payments. Supplemental payments include those made in addition to the standard fee schedule payment as well as uncompensated care pool, delivery system reform incentive payments (DSRIP), and other non-DSH supplemental payments made under Section 1115 waiver expenditure authority. There is no regulatory upper payment limit for physicians and other practitioners (as there is for institutional providers).

<sup>5</sup> State made non-DSH payments to mental health facilities through an uncompensated care pool or other non-DSH supplemental payments under Section 1115 waiver expenditure authority.

<sup>6</sup> Illinois reported negative base payments for mental health facilities due to prior period adjustments, resulting in a supplemental payment percentage above 100 percent.

<sup>7</sup> State made non-DSH payments to nursing facilities through other non-DSH supplemental payments under Section 1115 waiver expenditure authority.

<sup>8</sup> State made non-DSH payments to nursing facilities through other non-DSH supplemental payments under Section 1115 waiver expenditure authority.

**Source:** MACPAC, 2025, analysis of CMS-64 FMR net expenditure data as of June 3, 2025, and CMS-64 Schedule C waiver report data as of August 8, 2025.