



The above chart represents the average monthly cost for a Medicaid enrollee by age and disability designation for FY 2013. Data for this chart were taken from the report on Medicaid presented to the 2013 and 2015 legislatures by the Department of Public Health and Human Services [which can be found here](#).

Disabled vs. Non-Disabled

Generally, the cost for a disabled enrollee is higher than the cost for a non-disabled enrollee for all groups except those older than age 65. Medicaid covers the cost of nursing home care for elderly non-disabled, resulting in significantly higher costs for this age group of non-disabled than in others.

Blind/Disabled Under Age 1

While the “Blind/Disabled under age 1” category has the highest Per Member Per Month cost, it also has the lowest actual enrollment. In FY 2013, average monthly enrollment for this group was only 50, compared to 79 in FY 2008, a 31.5% decrease. The largest group of enrollees was age 6-18 non-disabled, with an average monthly enrollment of 43,159 including those funded through the Children’s Health Insurance Plan (CHIP), compared to 22,675 in FY 2008, a 90.3% increase.