



Figure 1: Key points

- Payments to physicians are based only on fee-for-service Medicaid and Medicare
- Medicare fees are adjusted for geographic and other location-specific factors

On average in the U.S. in 2012, Medicaid physician fees were **66 percent** of Medicare fees

- Considerable variation across states underlies that national statistic
 - 37 percent in Rhode Island
 - 134 percent in North Dakota
 - < 60 percent in CA, FL, Mich, Missouri, NH, NJ, NY, and RI, where almost 40 percent of Medicaid beneficiaries live
 - Almost half the states are at no more than 75 percent of Medicare fee levels

Vermont's ratio was **80 percent** in 2012, placing it at #17 ranked from highest to lowest

- For primary care physicians, the ratio was 81 percent at #12
- For physicians in obstetric care, 82 percent at #27
- For physicians in all other services, 77 percent at #24

Sources:

Stephen Zuckerman and Dana Goin. "How Much Will Medicaid Physician Fees for Primary Care Rise in 2013? Evidence from a 2012 Survey of Medicaid Physician Fees." Urban Institute and Kaiser Commission on Medicaid and the Uninsured, December 2012. <https://kaiserfamilyfoundation.files.wordpress.com/2013/01/8398.pdf>

Kaiser Family Foundation. "Medicaid-to-Medicare Fee Index." <http://kff.org/medicaid/state-indicator/medicaid-to-medicare-fee-index/>