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MEDICAID THIRD-PARTY LIABILITY: FEDERAL GUIDANCE NEEDED TO HELP STATES ADDRESS CONTINUING PROBLEMS: GAO-06-862



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BiblioGov. Paperback. Book Condition: New. This item is printed on demand. Paperback. 40 pages. Dimensions: 9.7in. x 7.4in. x 0.1in. Medicaid, jointly funded by the federal government and the states, finances health care for about 56 million low-income people at an estimated total cost of about 298 billion in fiscal year 2004. Congress intended Medicaid to be the payer of last resort: if Medicaid beneficiaries have another source of health care coverage--such as private health insurance or a health plan purchased individually or provided through an employer--that source, to the extent of its liability, should pay before Medicaid does. This concept is referred to as third-party liability. When such coverage is used, savings accrue to the federal government and the states. Using data from the U. S. Census Bureau and the states, GAO examined (1) the extent to which Medicaid beneficiaries have private health coverage and (2) problems states face in ensuring that Medicaid is the payer of last resort, including the extent to which the Deficit Reduction Act of 2005 may help address these problems. This item ships from La Vergne, TN. Paperback.

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