

Table B4b: CY 2016 Medicaid Deliveries and Associated Gestational/Post-Partum Expenditures by Delivery Type			
Vaginal or C-Section	Unique Deliveries	Total Payments	Average Payment
Caesarian	6,339	\$66,813,995	\$10,540.15
Vaginal	21,618	\$177,359,277	\$8,204.24
Unknown/No Delivery Information	1,839	\$16,256,734	\$8,839.99
Total	29,796	\$260,430,007	\$8,740.44
Note: Deliveries not classified (unknown) include fee-for-service deliveries that were identified via antepartum/stand-alone claims and all HMO deliveries. Delivery method could not be ascertained with this data.			
Source: Medicaid paid claims are derived from the Medicaid Management Information System (MMIS) data warehouse.			
Notes: Claims are based on services rendered during the calendar year and processed and paid up to three months after the end of the calendar year.			