

# State Prison Health Care Spending

## Montana

Health care and corrections have emerged as fiscal pressure points for states in recent years as rapid spending growth in each area has competed for scarce revenue. The intersection of these two spheres—health care for prison inmates—also has experienced a ramp-up, reaching nearly \$8 billion in 2011. In a majority of states, correctional health care spending and per-inmate health care spending peaked before fiscal year 2011. However, a steadily aging prison population threatens to drive costs back up.

The data presented here are from the State Health Care Spending Project's 50-state analysis of prison health care spending from fiscal 2007 to 2011. Find the full analysis, *State Prison Health Care Spending: An Examination*, at [www.pewtrusts.org/healthcarespending](http://www.pewtrusts.org/healthcarespending).

Analysis*	Montana	United States
<b>Total prison health care spending, 2007-11</b>		
Total spending, 2007 (thousands)	\$19,721	\$6,798,873
Total spending, 2011 (thousands)	\$29,284	\$7,679,772
Real change in spending, 2007-11	48%	13%
Real spending peaked before 2011	No	Yes
<b>Per-inmate health care spending and growth, 2007-11</b>		
Per-inmate spending, 2007	\$6,176	\$5,374
Per-inmate spending, 2011	\$8,454	\$6,047
Real change in spending, 2007-11	37%	13%
Real per-inmate spending peaked before 2011	Yes	Yes
<b>Prison population data†</b>		
Average daily prison population, 2007	3,193	1,265,239
Average daily prison population, 2011	3,464	1,270,036
Change in average daily population, 2007-11	8%	0%
Average daily population peaked before 2011	No	Yes
Percentage of inmates age 55 and older, 2007	9.00%	6.24%
Percentage of inmates age 55 and older, 2011	12.70%	8.21%
Percentage of inmates age 55 and older, 2007-11 average	10.52%	7.15%
Percentage change, 2007-11	41%	33%

\* All spending figures are in 2011 dollars. Nominal spending data for fiscal 2007 to 2010 were converted to 2011 dollars using the Implicit Price Deflator for Gross Domestic Product included in the Bureau of Economic Analysis' National Income and Product Accounts.

† Age data for prison populations were not available for any years in eight states: Alaska, Nebraska, New Hampshire, Nevada, New York, North Dakota, Utah, and Washington.

Sources: Pew survey; Association of State Correctional Administrators

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The State Health Care Spending Project, a collaboration between The Pew Charitable Trusts and the John D. and Catherine T. MacArthur Foundation, is examining seven major areas of state health care spending—Medicaid, the Children’s Health Insurance Program, substance abuse services, mental health care, prison health care, active state government employee health insurance, and retired state government employee health insurance. The project is providing a comprehensive examination of each of these health programs that states fund. The programs vary by state in many ways, so the research highlights those variations and some of the principal factors driving them. The project has also released state-by-state data on 20 key health indicators to complement the programmatic spending analysis.