

**Table 13.15**  
**Medicaid Payments per Person Served (Beneficiary), Aged, by Type of Service:**  
**Fiscal Years 1975-2010**

Year	Total <sup>1</sup>	Inpatient		Nursing		Outpatient	Home	Prescribed
		Hospital	ICF/MR	Facility <sup>2</sup>	Physician	Hospital	Health <sup>3</sup>	Drugs
1975	\$1,205	\$271	\$6,925	\$3,250	\$59	\$35	\$238	\$111
1976	1,359	310	8,951	3,328	65	42	493	134
1977	1,512	364	7,482	3,679	71	53	535	144
1978	1,869	446	9,700	4,350	78	48	801	158
1979	2,094	569	9,804	4,972	83	67	1,387	179
1980	2,540	970	16,346	5,742	101	74	1,873	198
1981	2,948	1,115	19,247	6,137	118	91	2,624	230
1982	3,315	1,241	11,464	6,945	115	101	2,944	249
1983	3,545	1,682	20,348	6,942	114	97	1,829	274
1984	3,957	1,778	23,343	7,430	119	105	2,263	312
1985	4,605	1,990	26,926	8,035	122	131	2,731	368
1986	4,808	2,228	32,328	8,487	119	142	3,015	394
1987	4,975	1,898	39,854	8,862	111	159	3,551	432
1988	5,425	1,937	45,601	9,309	116	175	4,344	474
1989	5,926	1,754	51,265	10,236	137	192	5,452	519
1990	6,717	1,865	52,943	11,776	139	206	6,013	581
1991	7,617	2,151	56,032	13,540	157	243	6,749	668
1992	7,759	2,152	43,083	14,630	169	260	6,944	763
1993	8,168	2,225	60,901	15,467	190	304	6,659	826
1994	8,332	2,180	53,983	16,209	203	320	6,742	880
1995	8,868	2,397	51,657	17,183	224	343	6,220	960
1996	8,622	2,303	56,902	18,377	245	376	6,631	1,037
1997	9,540	2,444	63,949	19,022	279	411	6,323	1,174
1998	10,243	2,544	81,337	19,639	270	436	2,199	1,343
1999	11,268	2,385	81,506	21,966	260	455	3,359	1,573
2000	11,929	2,303	83,250	22,477	268	504	3,140	1,853
2001	12,691	2,472	86,680	24,336	258	448	3,481	2,078
2002	13,359	2,700	94,410	25,636	261	451	3,992	2,272
2003	13,677	2,926	97,419	26,737	257	448	3,746	2,514
2004	13,790	2,937	101,910	27,650	253	504	4,098	2,735
2005	14,402	2,552	110,289	29,542	275	445	4,424	2,944
2006	13,268	2,703	110,763	30,669	260	423	5,272	1,175
2007	14,141	2,972	115,600	31,771	274	487	5,958	442
2008	14,742	3,157	123,246	33,097	282	598	6,259	432
2009	15,337	3,341	136,895	34,197	299	591	7,045	443
2010	15,339	3,071	128,948	34,919	295	621	7,623	449

See footnotes at end of table.

**Table 13.15—Continued**  
**Medicaid Payments per Person Served (Beneficiary), Aged, by Type of Service:**  
**Fiscal Years 1975-2010**

		Inpatient		Nursing		Outpatient	Home	Prescribed
Year	Total <sup>1</sup>	Hospital	ICF/MR	Facility <sup>2</sup>	Physician	Hospital	Health <sup>3</sup>	Drugs
(Constant 2010 Dollars)								
1975	\$8,655	\$1,946	\$49,738	\$23,343	\$424	\$251	\$1,709	\$797
1976	8,867	2,023	58,404	21,715	424	274	3,217	874
1977	9,091	2,189	44,986	22,120	427	319	3,217	866
1978	10,401	2,482	53,979	24,207	434	267	4,457	879
1979	10,625	2,887	49,744	25,227	421	340	7,037	908
1980	11,578	4,421	74,507	26,173	460	337	8,537	903
1981	11,962	4,524	78,100	24,903	479	369	10,648	933
1982	12,025	4,502	41,586	25,193	417	366	10,679	903
1983	11,742	5,571	67,395	22,993	378	321	6,058	908
1984	12,141	5,455	71,622	22,797	365	322	6,943	957
1985	13,290	5,743	77,709	23,189	352	378	7,882	1,062
1986	13,116	6,078	88,188	23,152	325	387	8,225	1,075
1987	12,757	4,867	102,192	22,724	285	408	9,105	1,108
1988	12,965	4,629	108,979	22,247	277	418	10,381	1,133
1989	13,029	3,856	112,710	22,505	301	422	11,987	1,141
1990	13,597	3,775	107,172	23,838	282	416	12,172	1,177
1991	14,263	4,028	104,925	25,355	294	455	12,638	1,252
1992	13,566	3,763	75,329	25,580	295	455	12,141	1,334
1993	13,480	3,672	100,510	25,526	314	502	10,990	1,363
1994	13,202	3,454	85,533	25,682	322	507	10,682	1,394
1995	13,530	3,657	78,812	26,216	342	523	9,490	1,465
1996	12,822	3,425	84,623	27,330	364	559	9,861	1,542
1997	13,886	3,557	93,082	27,688	406	598	9,204	1,709
1998	14,656	3,639	116,375	28,099	386	623	3,146	1,921
1999	15,779	3,339	114,130	30,759	363	638	4,704	2,203
2000	16,282	3,144	113,637	30,681	365	688	4,286	2,529
2001	16,758	3,265	114,462	32,136	341	591	4,597	2,744
2002	17,184	3,473	121,442	32,976	336	580	5,135	2,923
2003	16,990	3,634	121,015	33,213	319	557	4,653	3,123
2004	16,490	3,512	121,864	33,063	303	602	4,901	3,271
2005	16,701	2,960	127,895	34,258	319	516	5,130	3,414
2006	14,913	3,038	124,493	34,470	292	475	5,925	1,321
2007	15,360	3,228	125,566	34,510	298	529	6,472	480
2008	15,532	3,326	129,858	34,873	298	630	6,595	455
2009	15,763	3,434	140,700	35,147	307	607	7,240	455
2010	15,339	3,071	128,948	34,919	295	621	7,623	449

<sup>1</sup>The total includes payments for all types of services reported on the HCFA Form-2082 and in the Medicaid Statistical Information System (MSIS), some not shown separately.

<sup>2</sup>Data shown include services shown separately in earlier years as skilled nursing facility (SNF) and intermediate care facilities (ICF-other). Beginning in fiscal year 1991, the conditions of participation for SNFs and ICF-other were unified, the distinction between them removed, and the services renamed nursing facility services. It is possible that the combined number of recipients includes some persons who used both types of nursing facility care during the reported fiscal year. This could inflate the number of users and lower the average payments per user.

<sup>3</sup>Trend in average payment per beneficiary (person served) for home health care are not strictly comparable to 1997 and prior years because of changes in the definitions of related categories of service. Reporting for 1998 added categories of service for personal care support services and home and community-based waiver services (category not shown separately in table). In 1999 the home and community-based waiver services were reclassified into the other related categories of service (category not shown separately in table).

NOTES: Beginning fiscal year 1998, capitated premiums for Medicaid eligibles enrolled in managed care plans were included in this series as a component of the total payment per person served (beneficiary). Dollar amounts are adjusted using a personal consumption expenditure index for health care services, U.S. Department of Commerce, Bureau of Economic Analysis (BEA), expressed in fiscal year 2010 dollars. With the release of the comprehensive revision of the national accounts in July of 2009, BEA introduced a new classification system for Personal Consumption Expenditures (PCE). With the new classification system and the release of the comprehensive revision estimates, components of medical care were changed, and the base year was updated to the year 2005. PCE health care services now exclude eye exams (currently classified in PCE goods under corrective eyeglasses and contact lenses), and net health insurance (now classified under insurance services). As a result of the PCE classification change, all PCE series were restated for the entire historical period to reflect the new PCE classification structure. ICF/MR is intermediate care facility for the mentally retarded.

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and CHIP Services: Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services (HCFA 2082), Medicaid Statistical Information System (MSIS), and the personal health care consumption indices from the U.S. Department of Commerce; data development by the Office of Information Products and Data Analytics.