

**Medicaid Payments by Type of Service
Selected Fiscal Years**

	1985	1997	1998	1999	Percent Distribution 1999
Amount in millions					
Total	\$37,508	\$124,430	\$142,260	\$152,629	100.0
Inpatient Services	10,645	25,152	24,241	23,940	15.7
General Hospitals	9,453	23,142	21,441	22,182	14.5
Mental Hospitals	1,192	2,009	2,801	1,758	1.2
Nursing Facilities ¹	5,071	30,504	31,892	33,113	21.7
ICF Services	11,246	9,798	9,482	9,326	6.1
Mentally Retarded	4,731	9,798	9,482	9,326	6.1
All Other ¹	6,516	NA	NA	NA	NA
Physician Services	2,346	7,041	6,070	6,497	4.3
Dental Services	458	1,036	901	1,203	0.8
Other Practitioner Services	251	979	587	467	0.3
Outpatient Hospital Services	1,789	6,169	5,759	6,061	4.0
Clinic Services	714	4,252	3,921	5,778	3.8
Laboratory & Radiological Services	337	1,033	939	1,147	0.8
Home Health Services	1,120	12,237	2,702	2,898	1.9
Prescribed Drugs	2,315	11,972	13,522	16,567	10.9
Family Planning ⁴	195	418	449	NA	NA
EPSDT ⁴	85	1,617	1,335	NA	NA
Rural Health Clinics ⁴	7	308	NA	NA	NA
Home and Comm. Based Waiver Serv. ⁴	NA	NA	6,709	NA	NA
Prepaid Health Care	NA	NA	19,296	21,115	13.8
PCCM Services	NA	NA	134	463	0.3
Sterilization Services	NA	NA	NA	121	0.1
Personal Support Services	NA	NA	8,222	10,499	6.9
Other Care	928	11,033	4,386	12,967	8.5
Unknown	NA	NA	1,713	469	0.3

¹ Beginning in 1991, the category, nursing facilities, was created to include skilled nursing facilities and intermediate care facility services for all other than the mentally retarded. ⁴ Beginning in 1999, these services were reclassified as program types and the payments subsumed in the remaining types of service.

NOTES: Percent distribution based on rounded numbers. Prior to 1998, vendor payments exclude premiums and capitation amounts. Beginning in FY 1998, payments include capitated payments as a type of service category.

SOURCES: CMS/CMSO/ORDI

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