10,000 Americans will be eligible for Medicare every day over next 20 years

81 million will be enrolled in Medicare by 2030
In 1972, the Medicaid program was improved to include people under age 65 with permanent disabilities receiving Supplemental Security Income payments.
In 1990, the Medicaid prescription drug rebate program was signed into law. With this law, millions of Americans were given better choices and control over their healthcare, so they can receive the modern medical care they deserve.
About 80% of non-elderly Medicaid beneficiaries with disabilities, using long-term care services, receive community-based care.
3 out of every 5 nursing home residents use Medicaid coverage to afford their care.
SURVEY SAYS
97% of children and 87% of adults with Medicaid had a regular source of healthcare, similar to those individuals with employer-sponsored care (98% and 90%, respectively).
Since 2013, enrollment in Medicaid and the Children’s Health Insurance Program increased by 12.2 million individuals.
More than half of people with Medicaid are children.
In 2016, we will track 67 performance measures that show how much treatment guidelines are followed and their impact on healthcare.
Every day, the Medicare fee-for-service program receives and processes over 3.3 million claims—that’s over 38 claims per second!
Medicaid programs process almost 51 claims per second, which is equivalent to 4.4 million claims per day.
25.1 MILLION
The number of calls the 1-800-MEDICARE call center answered in 2014.
The number of page views on Medicare.gov in 2014. CMS keeps adding more information online at Medicare.gov.
43+ MILLION: The number of copies of the Medicare & You Handbooks we send to people with Medicare. The number of print copies goes down each year, as more people use the eHandbook online.
7,000 state employees across the U.S. are inspecting healthcare providers—like nursing homes and dialysis facilities—that participate in the Medicare and Medicaid programs.
Since 2007, HEAT’s Medicare Fraud Strike Force, a multi-agency group of investigators designed to fight Medicare fraud, has charged more than 1,700 defendants who collectively falsely billed the Medicare program more than $5.5 billion.
The return on investment the U.S. Dept. of Health and Human Services’ Medicare fraud taskforce received in 2013 for each $1 it spent on detecting, preventing, and combatting healthcare fraud, waste, and abuse.
In 2010, President Barack Obama signed into law the Patient Protection and Affordable Care Act, which included a number of important Medicare and Medicaid improvements such as creation of the CMS Innovation Center and Center for Program Integrity.
In 2010, the Affordable Care Act created the Innovation Center to design, implement, and evaluate innovative healthcare payment and service delivery models.
CMS’ Office of Minority Health was established in 2010 and ensures health equity for minority populations, including 13.5 million people who identify as racial and ethnic minorities, people with disabilities, members of the lesbian, gay, bisexual, and transgender (LGBT) community, and rural populations.
Accountable Care Organizations generated over $417 million in savings for Medicare in 2013.
From 2010 to 2014, Medicare spending per beneficiary grew 2 percentage points slower per year than growth in the Gross Domestic Product, the number used to measure the health of our economy.
As a result of the Affordable Care Act, more than 9.4 million seniors and people with disabilities with Medicare saved more than $15 billion on prescription drugs from 2010 through 2014.
Last year, experts predicted the Medicare hospital insurance coverage trust fund will remain funded through 2030—4 years longer than previously thought.
Since Medicare and Medicaid were created, life expectancy for Americans has increased from 70.2 years in 1965 to a record high of 78.8 years in 2012.
50 years ago today—on July 30, 1965—President Lyndon B. Johnson signed the Social Security Amendments of 1965, which led to the creation of Medicare and Medicaid.