

Table 96

**Medicaid Payments per Person Served (Beneficiary), All Eligibility Groups, by Type of Service: Fiscal Years 1975-2002**

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	\$556	\$983	\$5,538	\$3,292	\$81	\$50	\$204		\$58
1976	618	1,100	7,135	3,442	88	65	420		63
1977	711	1,211	8,530	3,819	94	102	485		66
1978	819	1,320	11,486	4,517	99	97	558		71
1979	951	1,568	13,022	5,198	108	110	734		84
1980	1,079	1,742	16,439	5,654	136	113	846		96
1981	1,238	1,943	19,812	6,226	146	141	1,065		108
1982	1,361	2,172	23,312	7,104	150	146	1,313		118
1983	1,503	2,384	27,006	7,317	155	156	1,416		129
1984	1,569	2,552	30,170	7,847	156	164	1,768		141
1985	1,719	2,753	32,238	8,427	163	178	2,092		166
1986	1,821	2,924	35,089	8,887	171	185	2,278		183
1987	1,949	3,000	37,490	9,322	181	203	2,777		198
1988	2,126	3,151	41,413	9,880	193	229	3,542		215
1989	2,318	3,251	44,999	10,696	217	250	4,225		232
1990	2,568	3,630	50,048	12,108	235	269	4,733		256
1991	2,752	3,959	52,791	13,893	259	305	5,070		277
1992	2,937	4,091	56,636	14,969	282	349	5,279		308
1993	3,042	4,366	59,156	15,798	293	378	5,250		333
1994	3,089	4,463	52,497	16,531	296	383	5,446		363
1995	3,311	4,735	68,613	17,424	309	397	5,740		413
1996	3,369	4,696	68,232	18,589	317	409	6,293		474
1997	3,568	4,877	72,033	19,029	333	453	6,575		571
1998	3,548	5,021	74,960	19,379	327	474	2,206		699
1999	3,819	4,943	76,443	20,568	357	491	3,571		837
2000	3,936	4,919	79,330	20,220	356	533	3,135		975
2001	4,084	5,323	83,173	21,929	372	548	3,475		1,082
2002	4,328	5,771	91,588	22,326	378	571	3,689		1,165

See footnotes at end of table.

Table 96—Continued

**Medicaid Payments per Person Served (Beneficiary), All Eligibility Groups, by Type of Service: Fiscal Years 1975-2002**

Medicaid Payments per Person Served (Beneficiary), by Type of Service, Fiscal Years 1975-2002								
		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 2002 Dollars)								
1975	\$2,812	\$4,971	\$28,008	\$16,649	\$410	\$253	\$1,032	\$293
1976	2,791	4,968	32,224	15,545	397	294	1,897	285
1977	2,930	4,990	35,151	15,737	387	420	1,999	272
1978	3,100	4,997	43,478	17,098	375	367	2,112	269
1979	3,319	5,472	45,445	18,140	377	384	2,562	293
1980	3,439	5,552	52,392	18,020	433	360	2,696	306
1981	3,529	5,539	56,482	17,750	416	402	3,036	308
1982	3,481	5,555	59,619	18,168	384	373	3,358	302
1983	3,541	5,617	63,626	17,239	365	368	3,336	304
1984	3,429	5,577	65,935	17,149	341	358	3,864	308
1985	3,558	5,698	66,725	17,442	337	368	4,330	344
1986	3,631	5,830	69,968	17,721	341	369	4,542	365
1987	3,742	5,760	71,980	17,898	348	390	5,332	380
1988	3,822	5,664	74,446	17,761	347	412	6,367	386
1989	3,845	5,392	74,636	17,741	360	415	7,008	385
1990	3,956	5,591	77,086	18,649	362	414	7,290	394
1991	3,984	5,731	76,421	20,112	375	442	7,339	401
1992	4,033	5,617	77,766	20,554	387	479	7,249	423
1993	3,979	5,710	77,373	20,663	383	494	6,867	436
1994	3,880	5,606	65,939	20,764	372	481	6,841	456
1995	4,000	5,721	82,895	21,051	373	480	6,935	499
1996	3,959	5,519	80,190	21,847	373	481	7,396	557
1997	4,088	5,587	82,528	21,802	381	518	7,533	655
1998	3,969	5,617	83,851	21,677	366	530	2,467	782
1999	4,147	5,367	82,992	22,330	387	533	3,877	908
2000	4,185	5,230	84,355	21,500	379	567	3,334	1,037
2001	4,194	5,467	85,410	22,518	382	563	3,568	1,111
2002	4,328	5,771	91,588	22,326	378	571	3,689	1,165

<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 payment 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 medical services, U.S. Department of Commerce, Bureau of Economic Analysis, expressed in fiscal year 2002 dollars. ICF/MR is intermediate care facility for the mentally retarded.

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations: 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 Research, Development, and Information.