

Table 13.11

Medicaid Payments per Person Served (Beneficiary), by Eligibility Group: Fiscal Years 1975-2004

Year	Total ¹	Children	Adults	Aged	Disabled
1975	\$556	\$228	\$455	\$1,205	\$1,276
1976	618	245	479	1,359	1,469
1977	711	270	545	1,512	1,743
1978	819	293	576	1,869	2,068
1979	951	317	661	2,094	2,500
1980	1,079	335	663	2,540	2,619
1981	1,238	366	725	2,948	3,071
1982	1,361	363	764	3,315	3,600
1983	1,503	402	802	3,545	3,891
1984	1,569	411	789	3,957	4,112
1985	1,719	452	860	4,605	4,459
1986	1,821	512	864	4,808	4,687
1987	1,949	542	999	4,975	4,974
1988	2,126	583	1,069	5,425	5,332
1989	2,318	668	1,206	5,926	5,817
1990	2,568	811	1,429	6,717	6,564
1991	2,752	902	1,555	7,617	7,005
1992	2,937	971	1,762	7,759	7,578
1993	3,042	1,013	1,813	8,168	7,706
1994	3,089	1,006	1,791	8,332	7,750
1995	3,311	1,047	1,777	8,868	8,435
1996	3,369	1,048	1,722	8,622	8,369
1997	3,568	1,111	1,809	9,538	8,832
1998	3,548	1,207	1,883	10,243	9,096
1999	3,819	1,282	2,104	11,268	9,832
2000	3,936	1,358	2,030	11,929	10,559
2001	4,084	1,454	2,067	12,691	11,310
2002	4,328	1,545	2,100	13,359	12,475
2003	4,487	1,606	2,292	13,677	13,303
2004	4,686	1,671	2,509	13,790	14,070

See footnote at end of table.

Table 13.11—Continued
Medicaid Payments per Person Served (Beneficiary), by Eligibility Group: Fiscal Years 1975-2004

Year	Total ¹	Children	Adults (Constant 2004 Dollars)	Aged	Disabled
1975	\$3,029	\$1,242	\$2,478	\$6,564	\$6,951
1976	3,006	1,192	2,330	6,611	7,146
1977	3,156	1,198	2,419	6,711	7,736
1978	3,339	1,195	2,348	7,620	8,431
1979	3,575	1,192	2,485	7,871	9,397
1980	3,704	1,150	2,276	8,719	8,990
1981	3,801	1,124	2,226	9,052	9,430
1982	3,749	1,000	2,104	9,131	9,916
1983	3,814	1,020	2,035	8,996	9,874
1984	3,693	967	1,857	9,314	9,679
1985	3,832	1,008	1,917	10,266	9,940
1986	3,911	1,100	1,856	10,326	10,066
1987	4,030	1,121	2,066	10,288	10,286
1988	4,116	1,129	2,070	10,504	10,324
1989	4,141	1,193	2,154	10,586	10,392
1990	4,260	1,345	2,371	11,143	10,889
1991	4,291	1,406	2,424	11,876	10,922
1992	4,344	1,436	2,606	11,475	11,207
1993	4,285	1,427	2,554	11,506	10,856
1994	4,179	1,361	2,423	11,272	10,485
1995	4,308	1,362	2,312	11,539	10,976
1996	4,265	1,327	2,180	10,914	10,594
1997	4,403	1,371	2,232	11,770	10,898
1998	4,275	1,454	2,268	12,341	10,959
1999	4,494	1,509	2,476	13,260	11,569
2000	4,508	1,555	2,325	13,661	12,093
2001	4,517	1,609	2,286	14,036	12,510
2002	4,665	1,666	2,264	14,400	13,447
2003	4,678	1,674	2,390	14,260	13,869
2004	4,686	1,671	2,509	13,790	14,070

¹Includes all eligibility groups reported on the HCFA Form-2082 and the Medicaid Statistical Information System (MSIS), some not shown separately.

NOTES: Beginning fiscal year 1998, capitated premiums for Medicaid eligibles enrolled in managed care plans were included in this series. 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 2004 dollars.

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.