

Table 7.5
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, and Program Payments, by Number of Visits: Calendar Years 1997 and 2006

Number of Visits	Persons Served		Visits		Total Charges		Program Payments	
	Number in Thousands	Percent	Number in Thousands	Percent	Amount in Thousands	Percent	Amount in Thousands	Percent
1997								
Total	3,558	100.0	258,168	100.0	\$23,460,105	100.0	\$16,718,263	100.0
1-9	820	23.0	4,096	1.6	453,521	1.9	326,454	2.0
10-19	647	18.2	9,094	3.5	978,214	4.2	676,581	4.0
20-29	395	11.1	9,532	3.7	1,002,319	4.3	694,720	4.2
30-39	265	7.4	9,085	3.5	936,294	4.0	653,835	3.9
40-49	193	5.4	8,563	3.3	869,803	3.7	610,492	3.7
50-99	506	14.2	35,469	13.7	3,486,321	14.9	2,466,810	14.8
More than 100	732	20.6	182,330	70.6	15,733,632	67.1	11,289,371	67.5
2006								
Total	3,026	100.0	104,127	100.0	\$13,627,482	100.0	\$13,912,750	100.0
1-9	833	27.5	4,794	4.6	715,150	5.2	1,170,554	8.4
10-19	842	27.8	12,274	11.8	1,797,036	13.2	2,538,364	18.2
20-29	454	15.0	11,321	10.9	1,609,324	11.8	1,911,030	13.7
30-39	253	8.4	8,958	8.6	1,240,706	9.1	1,368,051	9.8
40-49	161	5.3	7,353	7.1	1,002,696	7.4	1,082,017	7.8
50-99	307	10.1	21,458	20.6	2,829,790	20.8	2,826,991	20.3
More than 100	176	5.8	37,969	36.5	4,432,780	32.5	3,015,744	21.7

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. Total charges and visit charges are shown for trend purposes only. With the implementation of the home health agency prospective payment system, beginning October 1, 2000, program payments are now associated with episodes and not with individual visits. As a result, program payments may exceed charges. Numbers may not add to total because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Data Extract System; data development by the Office of Research, Development, and Information.