## **MDCR SUMMARY AB 3**

Medicare Part A and Part B Summary: Persons With Utilization, Program Payments, and Cost Sharing for Disabled Original Medicare
Beneficiaries by Type of Coverage and Type of Service, Calendar Years 2008-2013

Type of Coverage and Service	2008	2009	2010	2011	2012	2013
Number of Original Medicare Enrollees			·			
Part A and/or Part B	6,355,607	6,405,540	6,573,744	6,726,359	6,773,393	6,765,81
Part A	6,354,308	6,404,368	6,572,744	6,725,555	6,772,556	6,765,25
Part B	5,418,238	5,486,336	5,675,609	5,827,624	5,873,849	5,885,76
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Persons With Utilization						
Part A and/or Part B	5,310,428	5,406,515	5,620,279	5,790,243	5,856,791	5,887,78
Part A	1,332,750	1,333,206	1,372,568	1,395,802	1,386,683	1,355,66
Inpatient Hospital Services	1,290,096	1,287,282	1,323,591	1,343,656	1,331,717	1,298,12
Skilled Nursing Facility Services	138,594	144,238	153,087	161,573	163,255	167,29
Hospice Services	54,924	58,438	62,122	66,577	70,277	73,02
Home Health Agency Services	184,456	193,598	205,303	209,952	209,590	210,58
Part B	5,221,461	5,334,357	5,546,091	5,714,372	5,780,799	5,814,22
Physician and Other Medical Services	5,133,825	5,252,768	5,462,832	5,625,721	5,690,595	5,713,74
Outpatient Services	3,888,902	4,013,864	4,193,562	4,358,981	4,461,450	4,503,08
Home Health Agency Services	196,214	220,901	247,489	255,359	256,679	256,27
Persons Served Per 1,000 Original Medicare Enrollees <sup>1</sup> Part A and/or Part B	836	844	855	861	865	870
Part A	210	208	209	208	205	200
Inpatient Hospital Services	203	201	201	200	197	192
Skilled Nursing Facility Services	22	23	23	24	24	25
Hospice Services <sup>2</sup>	7	8	8	8	8	
Home Health Agency Services	29	30	31	31	31	3:
Part B	964	972	977	981	984	988
Physician and Other Medical Services	948	957	963	965	969	97:
Outpatient Services	718	732	739	748	760	765
Home Health Agency Services	36	40	44	44	44	44
Program Payments						
Part A and/or Part B	\$52,762,624,064	\$57,882,106,533	\$61,390,068,219	\$64,168,177,277	\$65,735,659,702	\$66,171,507,273
Part A	26,417,125,241	28,941,398,204	30,427,037,474	31,747,450,506	31,828,412,416	32,043,784,703
Inpatient Hospital Services	23,381,677,995	25,570,131,086	26,702,177,584	27,613,514,107	27,784,225,740	27,884,256,318
Skilled Nursing Facility Services	1,800,219,231	2,023,409,269	2,265,707,122	2,647,487,920	2,485,873,263	2,599,896,664
Hospice Services	561,613,423	603,389,502	646,385,574	695,758,630	764,834,016	763,257,63
Home Health Agency Services	673,614,592	744,468,347	812,767,193	790,689,849	793,479,397	796,374,08
Part B	26,345,498,823	28,940,708,329	30,963,030,745	32,420,726,771	33,907,247,286	34,127,722,56
Physician and Other Medical Services	14,786,796,680	15,955,126,830	17,074,579,999	17,597,658,812	18,126,127,915	17,835,399,64
Outpatient Services	10,181,118,108	11,365,370,342	12,203,307,703	13,187,378,878	14,185,153,832	14,717,968,00
	1,377,584,035	1,620,211,157	1,685,143,044	1,635,689,081	1,595,965,538	1,574,354,928

Type of Coverage and Service	2008	2009	2010	2011	2012	2013
Program Payments per Person With Utilization						
Part A and/or Part B	\$9,936	\$10,706	\$10,923	\$11,082	\$11,224	\$11,239
Part A	19,822	21,708	22,168	22,745	22,953	23,637
Inpatient Hospital Services	18,124	19,864	20,174	20,551	20,863	21,480
Skilled Nursing Facility Services	12,989	14,028	14,800	16,386	15,227	15,540
Hospice Services	10,225	10,325	10,405	10,450	10,883	10,452
Home Health Agency Services	3,652	3,845	3,959	3,766	3,786	3,782
Part B	5,046	5,425	5,583	5,674	5,865	5,870
Physician and Other Medical Services	2,880	3,037	3,126	3,128	3,185	3,121
Outpatient Services	2,618	2,832	2,910	3,025	3,179	3,268
Home Health Agency Services	7,021	7,335	6,809	6,405	6,218	6,143
Program Payments Per Original Medicare Enrollee			•			
Part A and/or Part B	\$8,302	\$9,036	\$9,339	\$9,540	\$9,705	\$9,780
Part A	4,157	4,519	4,629	4,720	4,700	4,737
Inpatient Hospital Services	3,680	3,993	4,063	4,106	4,102	4,122
Skilled Nursing Facility Services	283	316	345	394	367	384
Hospice Services <sup>2</sup>	75	79	82	85	90	88
Home Health Agency Services	106	116	124	118	117	118
Part B	4,862	5,275	5,455	5,563	5,773	5,798
Physician and Other Medical Services	2,729	2,908	3,008	3,020	3,086	3,030
Outpatient Services	1,879	2,072	2,150	2,263	2,415	2,501
Home Health Agency Services	254	295	297	281	272	267
Beneficiary Cost Sharing			•			
Part A and/or Part B	\$9,425,747,216	\$10,006,398,855	\$10,744,188,035	\$11,266,114,010	\$11,505,291,125	\$11,676,541,938
Part A	2,409,471,638	2,520,055,417	2,664,750,059	2,782,916,102	2,791,074,598	2,814,804,319
Part B	7,016,275,579	7,486,343,438	8,079,437,976	8,483,197,908	8,714,216,527	8,861,737,620
Beneficiary Cost Sharing Per Person With Utilization						
Part A and/or Part B	\$1,775	\$1,851	\$1,912	\$1,946	\$1,964	\$1,983
Part A	1,808	1,890	1,941	1,994	2,013	2,076
Part B	1,344	1,403	1,457	1,485	1,507	1,524
Beneficiary Cost Sharing Per Original Medicare Enrollee	, , , , , , , , , , , , , , , , , , , ,	,	, -	,	7	,-
Part A and/or Part B	\$1,483	\$1,562	\$1,634	\$1,675	\$1,699	\$1,726
Part A	379	393	405	414	412	416
Part B	1,295	1,365	1,424	1,456	1,484	1,506
II OI L D	1,293	1,505	1,424	1,430	1,404	1,300

<sup>&</sup>lt;sup>1</sup>The rate may exceed 1,000 because of methodology. Persons with utilization are counted as a whole person; enrollees are counted using a person-year methodology.

NOTES: The 'persons with utilization' counts do not reflect beneficiaries who received covered services, but for whom no program payments were reported. Counts also do not sum to totals because beneficiaries may have used more than one type of service during the reported year. Amounts may not sum to totals because of rounding. Utilization and expenditure data for home health agency services are from home health Part A and Part B claims.

SOURCE: Centers for Medicare & Medicaid Services, Office of Enterprise Data and Analytics, CMS Chronic Conditions Data Warehouse.

<sup>&</sup>lt;sup>2</sup>The total Medicare Part A enrollee counts and calculated 'per Part A enrollee' rates are based on enrollees in Original Medicare and Medicare Advantage/Other Health Plans combined, because once a beneficiary enrolled in a Medicare Advantage/Other Health Plan elects the hospice benefit, his or her Medicare benefits revert to fee-for-service.