

Table 46

Trends in Persons Served, Visits, Total Charges, Visit Charges, and Program Payments for Medicare Home Health Agency Services, by Year of Service: Selected Calendar Years 1974-2000

| Year of Service | Persons Served | | Visits | | Total Charges in Thousands | Visit Charges | | | Program Payments | | | |
|-------------------|---------------------|---------------------|---------------------|-------------------|----------------------------|-------------------------------|-----------|-------------------|------------------|---------------------|--------------------------------|--------------|
| | Number in Thousands | Per 1,000 Enrollees | Number in Thousands | Per Person Served | | Amount in Thousands | Per Visit | Per Person Served | Per Enrollee | Amount in Thousands | Per Person Served ¹ | Per Enrollee |
| 1974 | 392.7 | 16 | 8,070 | 21 | \$147,499 | \$137,406 | \$17 | \$350 | \$6 | \$141,464 | \$360 | \$6 |
| 1976 | 588.7 | 23 | 13,335 | 23 | 312,325 | 292,697 | 22 | 497 | 11 | 289,851 | 492 | 11 |
| 1978 | 769.7 | 28 | 17,345 | 23 | 639 | 500,747 | 27 | 617 | 18 | 435,322 | 566 | 16 |
| 1980 | 957.4 | 34 | 22,428 | 23 | 798 | 770,703 | 33 | 767 | 26 | 662,133 | 692 | 23 |
| 1982 | 1,171.9 | 40 | 30,787 | 26 | 1,044 | 1,296,454 | 40 | 1,052 | 42 | 1,104,715 | 943 | 37 |
| 1983 | 1,351.2 | 45 | 36,844 | 27 | 1,227 | 1,657,024 | 43 | 1,162 | 53 | 1,398,062 | 1,035 | 47 |
| 1984 | 1,515.9 | 50 | 40,337 | 27 | 1,324 | 1,982,033 | 46 | 1,216 | 61 | 1,665,253 | 1,099 | 55 |
| 1985 | 1,588.6 | 51 | 39,742 | 25 | 1,279 | 2,124,312 | 46 | 1,285 | 66 | 1,773,048 | 1,116 | 57 |
| 1986 | 1,600.2 | 50 | 38,359 | 24 | 1,208 | 2,190,238 | 55 | 1,314 | 66 | 1,795,820 | 1,122 | 57 |
| 1987 | 1,564.5 | 48 | 36,088 | 23 | 1,113 | 2,210,670 | 58 | 1,345 | 65 | 1,791,589 | 1,145 | 55 |
| 1988 | 1,601.7 | 49 | 37,713 | 24 | 1,144 | 2,453,974 | 62 | 1,462 | 71 | 1,945,768 | 1,215 | 59 |
| 1989 | 1,724.9 | 51 | 47,258 | 27 | 1,407 | 3,240,071 | 66 | 1,805 | 93 | 2,431,643 | 1,410 | 72 |
| 1990 | 1,967.1 | 57 | 70,268 | 36 | 2,054 | 5,031,248 | 69 | 2,469 | 142 | 3,713,652 | 1,892 | 109 |
| 1991 | 2,242.9 | 64 | 99,825 | 45 | 2,862 | 7,365,931 | 71 | 3,173 | 204 | 5,369,051 | 2,397 | 154 |
| 1992 | 2,506.2 | 70 | 132,220 | 53 | 3,714 | 10,229,130 | 75 | 3,950 | 278 | 7,396,822 | 2,955 | 208 |
| 1993 | 2,874.1 | 79 | 164,234 | 57 | 4,520 | 13,673,836 | 81 | 4,607 | 364 | 9,726,444 | 3,389 | 268 |
| 1994 ¹ | 3,179.2 | 93 | 208,621 | 66 | 6,122 | 17,761,662 | 83 | 5,421 | 506 | 12,660,526 | 3,987 | 372 |
| 1995 ¹ | 3,469.4 | 102 | 249,394 | 72 | 7,322 | 21,591,139 | 84 | 6,045 | 616 | 15,391,094 | 4,441 | 452 |
| 1996 ¹ | 3,599.7 | 107 | 264,798 | 74 | 7,857 | 23,327,834 | 86 | 6,294 | 672 | 16,756,767 | 4,660 | 497 |
| 1997 ¹ | 3,557.5 | 106 | 258,168 | 73 | 7,821 | 23,460,105 | 88 | 6,400 | 690 | 16,718,263 | 4,704 | 507 |
| 1998 ¹ | 3,061.6 | 95 | 155,407 | 51 | 4,804 | 14,846,358 | 93 | 4,703 | 445 | 10,456,908 | 3,420 | 323 |
| 1999 ¹ | 2,719.7 | 85 | 113,439 | 42 | 3,525 | 11,370,780 | 98 | 4,069 | 344 | 7,936,513 | 2,921 | 247 |
| 2000 ¹ | 2,461.2 | 75 | 90,566 | 37 | 2,766 | 9,488,429 | 102 | 3,756 | 282 | 7,215,958 | 2,936 | 220 |
| | | | | | | Average Annual Rate of Change | | | | | | |
| 1974-1982 | 14.6 | 12.1 | 18.2 | 2.7 | 15.1 | 31.2 | 31.6 | 11.3 | 14.7 | 27.5 | 12.8 | 25.5 |
| 1982-1987 | 5.9 | 3.7 | 3.2 | -2.4 | 1.3 | 11.3 | 11.3 | 7.7 | 5.0 | 8.1 | 10.2 | 8.3 |
| 1987-2000 | 3.5 | 3.5 | 7.3 | 3.7 | 7.3 | 11.9 | 12.1 | 4.4 | 8.2 | 12.0 | 11.3 | 11.3 |
| 1974-2000 | 7.3 | 6.1 | 9.7 | 2.2 | 8.4 | 17.4 | 17.6 | 7.1 | 9.6 | 16.0 | 16.3 | 14.9 |

¹Beginning with 1994, Medicare enrollees in managed care plans are not included in the denominator used to calculate the utilization rates and average payments.

²Does not reflect beneficiaries who received covered services but for whom no program payments were reported during the reporting year.

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000. Numbers may not add to total because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services; Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 47
Persons Served, Visits, Total Charges, Visit Charges, and Program Payments for Medicare Home Health Agency Services,
by Demographic Characteristics: Calendar Year 2000

| Demographic Characteristic | Persons Served | | Visits | | Total Charges in Thousands | Visit Charges | | | Program Payments | | | |
|-------------------------------|---------------------------|-------------------------------------|---------------------------|-------------------------|-------------------------------------|-------------------------------------|---------------------------|-------------------------|------------------------------|---------------------------|--------------------------------------|------------------------------|
| | Number in Thousands | Per 1,000 Enrollees ¹ | Number in Thousands | Per Person Served | | Per 1,000 Enrollees ¹ | Amount in Thousands | Per Person Served | Per Enrollee ¹ | Amount in Thousands | Per Person Served ² | Per Enrollee ¹ |
| Total | 2,461 | 75 | 90,566 | 37 | 2,766 | \$9,488,429 | \$9,245,053 | \$3,756 | \$282 | \$7,215,958 | \$2,936 | \$220 |
| Age | | | | | | | | | | | | |
| Under 65 Years | 214 | 44 | 9,502 | 44 | 1,936 | 1,015,165 | 969,713 | 4,524 | 198 | 738,029 | 3,452 | 150 |
| 65-74 Years | 587 | 41 | 19,422 | 33 | 1,365 | 2,080,745 | 2,027,022 | 3,451 | 142 | 1,570,766 | 2,677 | 110 |
| 75-84 Years | 995 | 100 | 35,724 | 36 | 3,602 | 3,741,692 | 3,659,890 | 3,680 | 369 | 2,863,789 | 2,882 | 289 |
| 85 Years or Over | 665 | 181 | 25,919 | 39 | 7,036 | 2,650,827 | 2,588,429 | 3,894 | 703 | 2,043,375 | 3,077 | 555 |
| Sex | | | | | | | | | | | | |
| Male | 857 | 60 | 30,004 | 35 | 2,114 | 3,185,237 | 3,089,387 | 3,604 | 218 | 2,407,136 | 2,812 | 170 |
| Female | 1,604 | 87 | 60,562 | 39 | 3,266 | 6,303,193 | 6,155,665 | 3,838 | 332 | 4,808,822 | 3,002 | 259 |
| Medicare Status | | | | | | | | | | | | |
| Aged | 2,247 | 81 | 81,065 | 36 | 2,913 | 8,473,264 | 8,275,340 | 3,683 | 297 | 6,477,929 | 2,886 | 233 |
| Disabled | 214 | 44 | 9,502 | 44 | 1,936 | 1,015,165 | 969,713 | 4,524 | 198 | 738,029 | 3,452 | 150 |
| Race | | | | | | | | | | | | |
| White | 2,023 | 73 | 70,160 | 35 | 2,518 | 7,306,061 | 7,123,616 | 3,521 | 256 | 5,633,232 | 2,788 | 202 |
| Other ³ | 438 | 90 | 20,407 | 47 | 4,182 | 2,182,368 | 2,121,436 | 4,844 | 435 | 1,582,726 | 3,619 | 324 |

¹Medicare enrollees in managed care plans are not included in the denominator used to calculate the utilization rates and average payments.

²Does not reflect beneficiaries who received covered services but for whom no program payments were reported during the reporting year.

³Includes unknown race.

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000. Numbers may not add to total because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 48

**Persons Served, Visits, Total Charges, Visit Charges, and Program Payments
for Medicare Home Health Agency Services, by Area of Residence: Calendar Year 2000**

| Area of Residence | Persons Served | | Visits | | Total Charges in Thousands |
|----------------------------|---------------------|----------------------------------|---------------------|-------------------|----------------------------|
| | Number in Thousands | Per 1,000 Enrollees ¹ | Number in Thousands | Per Person Served | |
| All Areas ³ | 2,461 | 75 | 90,566 | 37 | \$9,488,429 |
| United States ⁴ | 2,366 | 74 | 87,641 | 37 | 9,179,214 |
| Northeast | 562 | 87 | 19,399 | 35 | 1,974,960 |
| Midwest | 529 | 64 | 15,499 | 29 | 1,644,156 |
| South | 943 | 78 | 43,333 | 46 | 4,376,667 |
| West | 331 | 66 | 9,409 | 28 | 1,183,430 |
| New England | 170 | 99 | 6,953 | 41 | 602,634 |
| Connecticut | 40 | 97 | 1,696 | 43 | 139,127 |
| Maine | 18 | 86 | 664 | 36 | 56,750 |
| Massachusetts | 77 | 107 | 3,328 | 43 | 296,912 |
| New Hampshire | 14 | 84 | 504 | 36 | 41,564 |
| Rhode Island | 11 | 100 | 393 | 34 | 43,818 |
| Vermont | 9 | 100 | 368 | 42 | 24,464 |
| Middle Atlantic | 393 | 83 | 12,446 | 32 | 1,372,326 |
| New Jersey | 79 | 76 | 2,274 | 29 | 252,342 |
| New York | 171 | 78 | 5,983 | 35 | 664,424 |
| Pennsylvania | 143 | 95 | 4,190 | 29 | 455,560 |
| East North Central | 386 | 68 | 11,615 | 30 | 1,256,531 |
| Illinois | 107 | 74 | 3,112 | 29 | 362,907 |
| Indiana | 45 | 55 | 1,464 | 33 | 146,939 |
| Michigan | 108 | 82 | 3,436 | 32 | 383,005 |
| Ohio | 93 | 66 | 2,713 | 29 | 276,984 |
| Wisconsin | 33 | 46 | 891 | 27 | 86,695 |
| West North Central | 144 | 56 | 3,884 | 27 | 387,626 |
| Iowa | 23 | 51 | 602 | 26 | 48,199 |
| Kansas | 17 | 49 | 515 | 30 | 54,475 |
| Minnesota | 23 | 40 | 525 | 23 | 54,532 |
| Missouri | 56 | 77 | 1,651 | 30 | 174,964 |
| Nebraska | 13 | 53 | 318 | 25 | 30,526 |
| North Dakota | 6 | 57 | 140 | 24 | 12,840 |
| South Dakota | 6 | 48 | 134 | 24 | 12,089 |

See footnotes at end of table.

Table 48—Continued

Persons Served, Visits, Total Charges, Visit Charges, and Program Payments
for Medicare Home Health Agency Services, by Area of Residence: Calendar Year 2000

| Amount in Thousands | Visit Charges | | | Program Payments | | |
|---------------------------|---------------|-------------------------|------------------------------|---------------------------|--------------|--------------------------------------|
| | Per Visit | Per Person Served | Per Enrollee ¹ | Amount in Thousands | Per Visit | Per Person Served ² |
| \$9,245,053 | \$102 | \$3,756 | \$282 | \$7,215,958 | \$80 | \$2,936 |
| 8,945,677 | 102 | 3,781 | 280 | 6,995,748 | 80 | 2,961 |
| 1,942,750 | 100 | 3,455 | 301 | 1,577,805 | 81 | 2,810 |
| 1,611,242 | 104 | 3,044 | 195 | 1,294,028 | 83 | 2,448 |
| 4,236,843 | 98 | 4,492 | 348 | 3,206,410 | 74 | 3,403 |
| 1,154,842 | 123 | 3,488 | 231 | 917,505 | 98 | 2,776 |
| 592,741 | 85 | 3,492 | 345 | 511,226 | 74 | 3,020 |
| 136,936 | 81 | 3,442 | 332 | 120,602 | 71 | 3,036 |
| 55,528 | 84 | 3,020 | 259 | 47,095 | 71 | 2,565 |
| 292,968 | 88 | 3,784 | 405 | 253,132 | 76 | 3,283 |
| 40,967 | 81 | 2,953 | 247 | 36,257 | 72 | 2,620 |
| 42,256 | 108 | 3,694 | 371 | 32,720 | 83 | 2,863 |
| 24,086 | 65 | 2,719 | 271 | 21,418 | 58 | 2,421 |
| 1,350,009 | 108 | 3,440 | 285 | 1,066,579 | 86 | 2,720 |
| 248,861 | 109 | 3,145 | 239 | 203,145 | 89 | 2,570 |
| 652,366 | 109 | 3,819 | 296 | 510,094 | 85 | 2,988 |
| 448,783 | 107 | 3,149 | 300 | 353,341 | 84 | 2,481 |
| 1,232,966 | 106 | 3,197 | 216 | 996,673 | 86 | 2,588 |
| 353,724 | 114 | 3,315 | 246 | 278,001 | 89 | 2,609 |
| 143,725 | 98 | 3,211 | 177 | 112,768 | 77 | 2,524 |
| 377,709 | 110 | 3,510 | 286 | 311,343 | 91 | 2,896 |
| 273,216 | 101 | 2,933 | 194 | 223,430 | 82 | 2,402 |
| 84,592 | 95 | 2,531 | 116 | 71,131 | 80 | 2,131 |
| 378,276 | 97 | 2,634 | 147 | 297,355 | 77 | 2,073 |
| 47,348 | 79 | 2,033 | 103 | 39,847 | 66 | 1,713 |
| 53,341 | 104 | 3,066 | 150 | 38,056 | 74 | 2,191 |
| 54,012 | 103 | 2,355 | 95 | 40,350 | 77 | 1,761 |
| 169,278 | 103 | 3,039 | 233 | 134,144 | 81 | 2,411 |
| 29,742 | 94 | 2,314 | 122 | 25,063 | 79 | 1,955 |
| 12,652 | 91 | 2,192 | 125 | 9,814 | 70 | 1,701 |
| 11,903 | 89 | 2,106 | 101 | 10,083 | 75 | 1,787 |

Table 48—Continued

**Persons Served, Visits, Total Charges, Visit Charges, and Program Payments
for Medicare Home Health Agency Services, by Area of Residence: Calendar Year 2000**

| Area of Residence | Persons Served | | Visits | | | Total Charges in Thousands |
|-----------------------------|---------------------|----------------------------------|---------------------|-------------------|----------------------------------|----------------------------|
| | Number in Thousands | Per 1,000 Enrollees ¹ | Number in Thousands | Per Person Served | Per 1,000 Enrollees ¹ | |
| South Atlantic | 493 | 76 | 17,603 | 36 | 2,700 | \$1,850,840 |
| Delaware | 7 | 65 | 222 | 31 | 2,029 | 22,840 |
| District of Columbia | 5 | 69 | 154 | 33 | 2,255 | 17,245 |
| Florida | 182 | 88 | 7,032 | 39 | 3,397 | 768,971 |
| Georgia | 58 | 66 | 2,568 | 45 | 2,950 | 257,517 |
| Maryland | 40 | 70 | 1,046 | 26 | 1,816 | 115,333 |
| North Carolina | 80 | 74 | 2,533 | 32 | 2,338 | 255,528 |
| South Carolina | 41 | 72 | 1,412 | 34 | 2,483 | 138,586 |
| Virginia | 60 | 70 | 2,030 | 34 | 2,357 | 214,233 |
| West Virginia | 19 | 61 | 606 | 32 | 1,940 | 60,587 |
| East South Central | 193 | 80 | 10,424 | 54 | 4,336 | 964,626 |
| Alabama | 46 | 73 | 2,466 | 54 | 3,937 | 215,250 |
| Kentucky | 45 | 77 | 1,916 | 43 | 3,281 | 174,753 |
| Mississippi | 40 | 96 | 2,514 | 64 | 6,090 | 232,755 |
| Tennessee | 63 | 81 | 3,529 | 56 | 4,519 | 341,867 |
| West South Central | 258 | 80 | 15,305 | 59 | 4,732 | 1,561,201 |
| Arkansas | 27 | 65 | 1,103 | 41 | 2,658 | 97,617 |
| Louisiana | 50 | 101 | 4,081 | 82 | 8,290 | 385,450 |
| Oklahoma | 38 | 83 | 2,354 | 63 | 5,198 | 229,082 |
| Texas | 143 | 76 | 7,767 | 54 | 4,145 | 849,053 |
| Mountain | 98 | 59 | 3,188 | 33 | 1,934 | 340,130 |
| Arizona | 20 | 47 | 497 | 24 | 1,145 | 60,207 |
| Colorado | 21 | 69 | 725 | 34 | 2,353 | 80,638 |
| Idaho | 9 | 62 | 258 | 28 | 1,725 | 27,340 |
| Montana | 8 | 56 | 208 | 27 | 1,525 | 20,139 |
| Nevada | 10 | 59 | 309 | 32 | 1,875 | 36,278 |
| New Mexico | 12 | 64 | 390 | 32 | 2,061 | 39,175 |
| Utah | 14 | 68 | 680 | 50 | 3,372 | 65,270 |
| Wyoming | 3 | 54 | 120 | 35 | 1,872 | 11,082 |
| Pacific | 233 | 70 | 6,222 | 27 | 1,854 | 843,300 |
| Alaska | 2 | 44 | 39 | 21 | 936 | 6,108 |
| California | 175 | 75 | 5,031 | 29 | 2,152 | 692,624 |
| Hawaii | 4 | 33 | 84 | 22 | 740 | 11,614 |
| Oregon | 21 | 68 | 399 | 19 | 1,288 | 50,849 |
| Washington | 32 | 57 | 669 | 21 | 1,209 | 82,106 |
| Outlying Areas ⁵ | 95 | 113 | 2,926 | 31 | 3,462 | 309,216 |

¹Medicare enrollees in managed care plans are not included in the denominator used to calculate the utilization rates and average payments.

²Does not reflect beneficiaries who received covered services but for whom no program payments were reported during the reporting year.

³Includes United States and outlying areas.

⁴Includes 50 States and District of Columbia.

⁵Includes Puerto Rico, Virgin Islands, Guam, residence unknown, and all other outlying areas.

NOTES: Approximately 2.5-percent of the persons receiving reimbursed services could not be classified and distributed by state of residence but are included in the total for all areas. Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000. Numbers may not add to total because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 48—Continued

**Persons Served, Visits, Total Charges, Visit Charges, and Program Payments
for Medicare Home Health Agency Services, by Area of Residence: Calendar Year 2000**

| Visit Charges | | | | Program Payments | | |
|---------------------------|--------------|-------------------------|------------------------------|---------------------------|--------------|--------------------------------------|
| Amount in Thousands | Per Visit | Per Person Served | Per Enrollee ¹ | Amount in Thousands | Per Visit | Per Person Served ² |
| \$1,791,143 | \$102 | \$3,636 | \$275 | \$1,434,967 | \$82 | \$2,916 |
| 22,514 | 102 | 3,175 | 206 | 18,759 | 85 | 2,647 |
| 16,931 | 110 | 3,602 | 247 | 13,859 | 90 | 2,952 |
| 751,865 | 107 | 4,124 | 363 | 576,519 | 82 | 3,167 |
| 249,669 | 97 | 4,323 | 287 | 197,327 | 77 | 3,420 |
| 111,816 | 107 | 2,769 | 194 | 95,980 | 92 | 2,379 |
| 239,136 | 94 | 2,986 | 221 | 209,226 | 83 | 2,614 |
| 132,806 | 94 | 3,238 | 234 | 118,278 | 84 | 2,885 |
| 208,340 | 103 | 3,461 | 242 | 157,804 | 78 | 2,624 |
| 58,066 | 96 | 3,035 | 186 | 47,215 | 78 | 2,469 |
| 923,653 | 89 | 4,787 | 384 | 708,458 | 68 | 3,676 |
| 207,583 | 84 | 4,539 | 331 | 163,019 | 66 | 3,569 |
| 165,504 | 86 | 3,706 | 283 | 135,941 | 71 | 3,047 |
| 221,554 | 88 | 5,613 | 537 | 159,346 | 63 | 4,042 |
| 329,012 | 93 | 5,216 | 421 | 250,152 | 71 | 3,970 |
| 1,522,047 | 99 | 5,907 | 471 | 1,062,985 | 69 | 4,131 |
| 94,100 | 85 | 3,465 | 227 | 70,205 | 64 | 2,588 |
| 376,506 | 92 | 7,567 | 765 | 261,901 | 64 | 5,269 |
| 223,309 | 95 | 5,956 | 493 | 149,916 | 64 | 4,002 |
| 828,132 | 107 | 5,781 | 442 | 580,964 | 75 | 4,062 |
| 332,183 | 104 | 3,401 | 202 | 257,608 | 81 | 2,641 |
| 58,300 | 117 | 2,866 | 134 | 43,124 | 87 | 2,123 |
| 79,417 | 109 | 3,712 | 258 | 59,239 | 82 | 2,772 |
| 26,309 | 102 | 2,820 | 176 | 22,771 | 88 | 2,444 |
| 19,670 | 95 | 2,558 | 144 | 16,200 | 78 | 2,111 |
| 35,426 | 115 | 3,666 | 215 | 27,152 | 88 | 2,816 |
| 38,170 | 98 | 3,138 | 202 | 30,327 | 78 | 2,497 |
| 64,096 | 94 | 4,692 | 318 | 50,606 | 74 | 3,711 |
| 10,796 | 90 | 3,138 | 168 | 8,190 | 68 | 2,381 |
| 822,658 | 132 | 3,525 | 245 | 659,896 | 106 | 2,833 |
| 5,986 | 154 | 3,262 | 144 | 5,145 | 132 | 2,804 |
| 677,377 | 135 | 3,869 | 290 | 529,250 | 105 | 3,030 |
| 11,422 | 136 | 3,042 | 100 | 8,980 | 107 | 2,393 |
| 48,484 | 122 | 2,309 | 156 | 45,225 | 113 | 2,156 |
| 79,390 | 119 | 2,502 | 144 | 71,296 | 107 | 2,250 |
| 299,375 | 102 | 3,137 | 354 | 220,210 | 75 | 2,310 |

Table 49
Persons Using Medicare Home Health Agency Services, Visits, and Charges, by Type of Visit, Type of Agency, and Type of Control:
Calendar Year 2000

| Type of Visit | Type of Agency | | | | | Type of Control | | | |
|----------------------|-----------------------------|----------------------------|--------------------------|------------------------|----------------|-----------------|----------------------|-------------|------------|
| | All Agencies ¹ | Visiting Nurse Association | Government and Voluntary | Official Health Agency | Hospital-Based | Other | Voluntary Non-Profit | Proprietary | Government |
| | Persons Served in Thousands | | | | | | | | |
| Total ² | 2,461 | 401 | 5 | 201 | 979 | 876 | 1,465 | 792 | 204 |
| Nursing Care | 2,194 | 361 | 4 | 177 | 868 | 785 | 1,295 | 713 | 186 |
| Home Health Aide | 847 | 136 | 2 | 71 | 313 | 325 | 469 | 304 | 75 |
| Physical Therapy | 1,288 | 212 | 2 | 100 | 520 | 453 | 787 | 407 | 93 |
| Speech Therapy | 82 | 12 | (3) | 7 | 34 | 29 | 50 | 26 | 6 |
| Occupational Therapy | 392 | 67 | (3) | 25 | 160 | 140 | 246 | 120 | 25 |
| Other ⁴ | 409 | 69 | (3) | 29 | 159 | 152 | 247 | 139 | 23 |
| | Percent of Persons Served | | | | | | | | |
| Total ² | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| Nursing Care | 89.2 | 90.1 | 94.3 | 88.0 | 88.6 | 89.6 | 88.4 | 90.1 | 91.1 |
| Home Health Aide | 34.4 | 34.0 | 41.3 | 35.3 | 31.9 | 37.1 | 32.0 | 38.3 | 36.7 |
| Physical Therapy | 52.3 | 53.0 | 40.6 | 49.9 | 53.1 | 51.7 | 53.7 | 51.4 | 45.7 |
| Speech Therapy | 3.3 | 3.0 | 1.6 | 3.3 | 3.5 | 3.3 | 3.4 | 3.3 | 3.0 |
| Occupational Therapy | 15.9 | 16.6 | 4.8 | 12.4 | 16.4 | 16.0 | 16.8 | 15.2 | 12.3 |
| Other ⁴ | 16.6 | 17.1 | 9.4 | 14.3 | 16.3 | 17.4 | 16.8 | 17.6 | 11.2 |
| | Visits in Thousands | | | | | | | | |
| Total ² | 90,566 | 13,872 | 143 | 7,415 | 28,930 | 40,208 | 45,639 | 38,506 | 6,422 |
| Nursing Care | 44,593 | 6,387 | 69 | 3,483 | 14,339 | 20,316 | 22,069 | 19,465 | 3,059 |
| Home Health Aide | 27,652 | 4,723 | 51 | 2,330 | 7,839 | 12,709 | 13,177 | 12,362 | 2,114 |
| Physical Therapy | 14,106 | 2,103 | 19 | 1,278 | 5,185 | 5,521 | 7,948 | 5,170 | 987 |
| Speech Therapy | 657 | 85 | 1 | 59 | 261 | 251 | 379 | 231 | 47 |
| Occupational Therapy | 2,632 | 404 | 1 | 189 | 983 | 1,056 | 1,520 | 949 | 163 |
| Other ⁴ | 926 | 170 | 1 | 76 | 323 | 356 | 544 | 330 | 53 |

See footnotes at end of table.

Table 49—Continued
Persons Using Medicare Home Health Agency Services, Visits, and Charges, by Type of Visit, Type of Agency, and Type of Control:
Calendar Year 2000

| Type of Visit | Type of Agency | | | | | | Type of Control | | |
|----------------------|---------------------------------------|----------------------------|--------------------------|------------------------|----------------|---------|----------------------|-------------|------------|
| | All Agencies ¹ | Visiting Nurse Association | Government and Voluntary | Official Health Agency | Hospital-Based | Other | Voluntary Non-Profit | Proprietary | Government |
| | Percent Distribution of Visits | | | | | | | | |
| Total ² | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| Nursing Care | 49.2 | 46.0 | 48.5 | 47.0 | 49.6 | 50.5 | 48.4 | 50.6 | 47.6 |
| Home Health Aide | 30.5 | 34.0 | 35.7 | 31.4 | 27.1 | 31.6 | 28.9 | 32.1 | 32.9 |
| Physical Therapy | 15.6 | 15.2 | 13.7 | 17.2 | 17.9 | 13.7 | 17.4 | 13.4 | 15.4 |
| Speech Therapy | 0.7 | 0.6 | 0.4 | 0.8 | 0.9 | 0.6 | 0.8 | 0.6 | 0.7 |
| Occupational Therapy | 2.9 | 2.9 | 0.8 | 2.5 | 3.4 | 2.6 | 3.3 | 2.5 | 2.5 |
| Other ⁴ | 1.0 | 1.2 | 1.0 | 1.0 | 1.1 | 0.9 | 1.2 | 0.9 | 0.8 |
| | Visit Charges in Millions | | | | | | | | |
| Total ² | \$9,245 | \$1,307 | \$13 | \$697 | \$3,078 | \$4,150 | \$4,672 | \$3,992 | \$581 |
| Nursing Care | 5,133 | 706 | 8 | 370 | 1,684 | 2,366 | 2,532 | 2,282 | 319 |
| Home Health Aide | 1,862 | 280 | 3 | 145 | 552 | 883 | 879 | 861 | 122 |
| Physical Therapy | 1,706 | 241 | 2 | 143 | 636 | 684 | 949 | 648 | 108 |
| Speech Therapy | 80 | 10 | (5) | 7 | 32 | 31 | 46 | 29 | 5 |
| Occupational Therapy | 322 | 47 | (5) | 22 | 122 | 131 | 184 | 120 | 18 |
| Other ⁴ | 141 | 24 | (5) | 10 | 52 | 54 | 82 | 51 | 8 |
| | Percent Distribution of Visit Charges | | | | | | | | |
| Total ² | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| Nursing Care | 55.5 | 54.0 | 57.6 | 53.1 | 54.7 | 57.0 | 54.2 | 57.2 | 54.9 |
| Home Health Aide | 20.1 | 21.4 | 22.7 | 20.8 | 17.9 | 21.3 | 18.8 | 21.6 | 21.0 |
| Physical Therapy | 18.5 | 18.4 | 16.9 | 20.5 | 20.7 | 16.5 | 20.3 | 16.2 | 18.6 |
| Speech Therapy | 0.9 | 0.8 | 0.5 | 1.0 | 1.0 | 0.7 | 1.0 | 0.7 | 0.9 |
| Occupational Therapy | 3.5 | 3.6 | 1.0 | 3.2 | 4.0 | 3.2 | 3.9 | 3.0 | 3.2 |
| Other ⁴ | 1.5 | 1.8 | 1.3 | 1.4 | 1.7 | 1.3 | 1.8 | 1.3 | 1.3 |

See footnotes at end of table.

Table 49—Continued
Persons Using Medicare Home Health Agency Services, Visits, and Charges, by Type of Visit, Type of Agency, and Type of Control:
Calendar Year 2000

| Type of Visit | Type of Agency | | | | | | Type of Control | | |
|----------------------|--|----------------------------|--------------------------|------------------------|----------------|---------|----------------------|-------------|------------|
| | All Agencies ¹ | Visiting Nurse Association | Government and Voluntary | Official Health Agency | Hospital-Based | Other | Voluntary Non-Profit | Proprietary | Government |
| | Average Number of Visits per Person Served | | | | | | | | |
| Total ² | 37 | 35 | 31 | 37 | 30 | 46 | 31 | 49 | 32 |
| Nursing Care | 20 | 18 | 16 | 20 | 17 | 26 | 17 | 27 | 17 |
| Home Health Aide | 33 | 35 | 27 | 33 | 25 | 39 | 28 | 41 | 28 |
| Physical Therapy | 11 | 10 | 10 | 13 | 10 | 12 | 10 | 13 | 11 |
| Speech Therapy | 8 | 7 | 7 | 9 | 8 | 9 | 8 | 9 | 8 |
| Occupational Therapy | 7 | 6 | 5 | 8 | 6 | 8 | 6 | 8 | 7 |
| Other ⁴ | 2 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 |
| | Average Visit Charge per Visit | | | | | | | | |
| Total ² | \$102 | \$94 | \$93 | \$94 | \$106 | \$103 | \$102 | \$104 | \$90 |
| Nursing Care | 115 | 111 | 110 | 106 | 117 | 116 | 115 | 117 | 104 |
| Home Health Aide | 67 | 59 | 59 | 62 | 70 | 69 | 67 | 70 | 58 |
| Physical Therapy | 121 | 115 | 115 | 112 | 123 | 124 | 119 | 125 | 110 |
| Speech Therapy | 122 | 117 | 130 | 113 | 124 | 124 | 121 | 126 | 112 |
| Occupational Therapy | 122 | 116 | 120 | 117 | 124 | 124 | 121 | 127 | 113 |
| Other ⁴ | 152 | 143 | 123 | 137 | 160 | 153 | 151 | 156 | 147 |
| | Average Visit Charge per Person Served | | | | | | | | |
| Total ² | \$3,756 | \$3,263 | \$2,872 | \$3,468 | \$3,144 | \$4,737 | \$3,188 | \$5,041 | \$2,848 |
| Nursing Care | 2,339 | 1,955 | 1,754 | 2,092 | 1,941 | 3,015 | 1,955 | 3,199 | 1,717 |
| Home Health Aide | 2,198 | 2,049 | 1,578 | 2,048 | 1,764 | 2,714 | 1,876 | 2,836 | 1,628 |
| Physical Therapy | 1,325 | 1,135 | 1,196 | 1,426 | 1,222 | 1,510 | 1,206 | 1,592 | 1,161 |
| Speech Therapy | 975 | 826 | 936 | 1,011 | 944 | 1,067 | 921 | 1,104 | 865 |
| Occupational Therapy | 823 | 701 | 597 | 886 | 763 | 937 | 746 | 998 | 734 |
| Other ⁴ | 345 | 355 | 394 | 362 | 326 | 357 | 332 | 369 | 337 |

¹Includes rehabilitation-based and skilled nursing facility-based agencies not shown separately.

²Numbers do not add to total since persons may receive more than one type of service.

³Fewer than 500 persons served.

⁴Includes medical social services and other health disciplines.

⁵Less than \$500,000.

NOTE: The home health prospective payment system was implemented beginning October 1, 2000.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 50
Number of Providers, Persons Served, Visits, and Program Payments for Medicare Home Health Agency Services, by Type of Agency: Calendar Year 2000

| Type of Agency | Providers | | Persons Served | | Visits | | | Visit Charges | | | Program Payments | | |
|-----------------------------------|-----------|---------|---------------------|----------|---------------------|----------|------------|---------------------|----------|------------|---------------------|----------|-------------------------|
| | Number | Percent | Number in Thousands | Per-cent | Number in Thousands | Per-cent | Per Person | Amount in Thousands | Per-cent | Per Person | Amount in Thousands | Per-cent | Per Person ¹ |
| Total | 7,100 | 100.0 | 2,461 | 100.0 | 90,566 | 100.0 | 37 | \$9,245,053 | 100.0 | \$3,756 | \$7,215,958 | 100.0 | \$2,936 |
| Visiting Nurse Association | 432 | 6.1 | 401 | 16.3 | 13,950 | 15.4 | 35 | 1,309,094 | 14.2 | 3,267 | 1,136,908 | 15.8 | 2,841 |
| Combined Government and Voluntary | 31 | 0.4 | 5 | 0.2 | 144 | 0.2 | 31 | 13,328 | 0.1 | 2,894 | 10,602 | 0.1 | 2,302 |
| Official Health | 903 | 12.7 | 201 | 8.2 | 7,474 | 8.3 | 37 | 701,357 | 7.6 | 3,492 | 560,105 | 7.8 | 2,792 |
| Hospital-Based | 2,161 | 30.4 | 979 | 39.8 | 28,555 | 31.5 | 29 | 3,045,613 | 32.9 | 3,111 | 2,392,122 | 33.2 | 2,446 |
| Skilled Nursing Facility-Based | 150 | 2.1 | 19 | 0.8 | 740 | 0.8 | 38 | 77,743 | 0.8 | 4,000 | 61,943 | 0.9 | 3,191 |
| Other ² | 3,423 | 48.2 | 857 | 34.8 | 39,703 | 43.8 | 46 | 4,097,918 | 44.3 | 4,784 | 3,054,279 | 42.3 | 3,571 |

¹Does not reflect persons who received covered services but for whom no program payments were reported during the reporting year.

²Represents freestanding non-visiting nurse association agencies, community home health agencies, rehabilitation-based agencies, and unknown agencies.

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 51
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, and Program Payments, by Number of Visits: Calendar Years 1997 and 2000

| 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 |
| 100 or More | 732 | 20.6 | 182,330 | 70.6 | 15,733,632 | 67.1 | 11,289,371 | 67.5 |
| 2000 | | | | | | | | |
| Total | 2,461 | 100.0 | 90,566 | 100.0 | 9,488,429 | 100.0 | 7,215,958 | 100.0 |
| 1-9 | 767 | 31.2 | 3,903 | 4.3 | 464,863 | 4.9 | 424,383 | 5.9 |
| 10-19 | 577 | 23.4 | 8,050 | 8.9 | 936,155 | 9.9 | 790,594 | 11.0 |
| 20-29 | 318 | 12.9 | 7,644 | 8.4 | 866,230 | 9.1 | 686,760 | 9.5 |
| 30-39 | 194 | 7.9 | 6,608 | 7.3 | 733,211 | 7.7 | 562,678 | 7.8 |
| 40-49 | 129 | 5.2 | 5,715 | 6.3 | 625,562 | 6.6 | 471,194 | 6.5 |
| 50-99 | 273 | 11.1 | 18,817 | 20.8 | 1,997,487 | 21.1 | 1,477,357 | 20.5 |
| 100 or More | 203 | 8.2 | 39,832 | 44.0 | 3,864,922 | 40.7 | 2,802,993 | 38.8 |

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000. Numbers may not add to total because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 52

Persons Using Medicare Home Health Agency Services, Visits, Total Charges, Visit Charges, and Program Payments, by Principal Diagnosis Within Major Diagnostic Classifications (MDCs): Calendar Year 2000

| Principal ICD-9-CM Diagnosis Within MDC ¹ | Principal ICD-9-CM Codes | Persons Served | | Visits | | Total Charges in Thousands | Visit Charges | | | Program Payments | | |
|--|--------------------------------|---------------------------|---------|---------------------------|-------------------------|----------------------------------|---------------------------|--------------|-------------------------|---------------------------|--------------|--------------------------------------|
| | | Number in Thousands | Percent | Number in Thousands | Per Person Served | | Amount in Thousands | Per Visit | Per Person Served | Amount in Thousands | Per Visit | Per Person Served ² |
| Total All Diagnoses ³ | --- | 2,461 | 100.0 | 90,566 | 37 | \$9,488,429 | \$9,245,053 | \$102 | \$3,756 | \$7,215,959 | \$80 | \$2,936 |
| Total Leading Diagnoses ⁴ | --- | 1,896 | 77.0 | 57,195 | 30 | 5,976,796 | 5,829,192 | 102 | 3,075 | 4,507,566 | 79 | 2,383 |
| Infectious and Parasitic Diseases (MDC 1) | 001-139 | 24 | 1.0 | 560 | 23 | 59,254 | 57,520 | 103 | 2,369 | 44,401 | 79 | 1,836 |
| Neoplasms (MDC 2) | 140-239 | 164 | 6.7 | 3,325 | 20 | 352,866 | 343,678 | 103 | 2,096 | 273,808 | 82 | 1,675 |
| Malignant Neoplasm of Trachea, Bronchus, and Lung | 162 | 24 | 1.0 | 446 | 18 | 46,233 | 45,576 | 102 | 1,886 | 36,919 | 83 | 1,533 |
| Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders (MDC 3) | 240-279 | 207 | 8.4 | 10,021 | 48 | 1,081,133 | 1,067,885 | 107 | 5,149 | 749,392 | 75 | 3,621 |
| Diabetes Mellitus | 250 | 159 | 6.5 | 8,891 | 56 | 967,765 | 956,721 | 108 | 6,006 | 662,133 | 74 | 4,166 |
| Disorders of Fluid, Electrolyte, and Acid-Base Balance | 276 | 30 | 1.2 | 606 | 20 | 61,547 | 60,210 | 99 | 2,024 | 47,250 | 78 | 1,591 |
| Diseases of the Blood and Blood Forming Organs (MDC 4) | 280-289 | 69 | 2.8 | 2,618 | 38 | 223,716 | 219,259 | 84 | 3,168 | 183,890 | 70 | 2,663 |
| Other Deficiency Anemias | 281 | 37 | 1.5 | 1,738 | 47 | 136,513 | 133,528 | 77 | 3,628 | 118,122 | 68 | 3,215 |
| Other and Unspecified Anemias | 285 | 18 | 0.7 | 455 | 26 | 45,893 | 45,242 | 99 | 2,545 | 35,196 | 77 | 1,985 |
| Coagulation Defects | 286 | 7 | 0.3 | 200 | 29 | 19,036 | 18,654 | 93 | 2,653 | 14,117 | 70 | 2,012 |
| Mental Disorders (MDC 5) | 290-319 | 55 | 2.2 | 1,366 | 25 | 139,740 | 138,614 | 101 | 2,541 | 106,908 | 78 | 1,966 |
| Schizophrenic Disorders | 295 | 6 | 0.2 | 162 | 26 | 16,977 | 16,893 | 104 | 2,747 | 12,793 | 79 | 2,084 |
| Affective Psychoses | 296 | 12 | 0.5 | 305 | 25 | 32,812 | 32,665 | 107 | 2,652 | 24,539 | 81 | 2,000 |
| Diseases of the Nervous System and Sense Organs (MDC 6) | 320-389 | 87 | 3.5 | 3,109 | 36 | 297,807 | 291,937 | 94 | 3,353 | 247,392 | 80 | 2,850 |
| Parkinson's Disease | 332 | 24 | 1.0 | 719 | 31 | 72,179 | 71,385 | 99 | 3,032 | 61,352 | 85 | 2,613 |

See footnotes at end of table.

Table 52—Continued
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, Visit Charges, and Program Payments, by Principal
Diagnosis Within Major Diagnostic Classifications (MDCs): Calendar Year 2000

| Principal ICD-9-CM Diagnosis Within MDC ¹ | Principal ICD-9-CM Codes | Persons Served | | Visits | | Total Charges in Thousands | Visit Charges | | | Program Payments | | |
|---|--------------------------------|---------------------------|---------|---------------------------|-------------------------|----------------------------------|---------------------------|--------------|-------------------------|---------------------------|--------------|--------------------------------------|
| | | Number in Thousands | Percent | Number in Thousands | Per Person Served | | Amount in Thousands | Per Visit | Per Person Served | Amount in Thousands | Per Visit | Per Person Served ² |
| Diseases of the Circulatory System (MDC 7) | 390-459 | 751 | 30.5 | 20,964 | 28 | \$2,184,936 | \$2,151,276 | \$103 | \$2,863 | \$1,662,850 | \$79 | \$2,217 |
| Essential Hypertension | 401 | 95 | 3.8 | 2,519 | 27 | 255,056 | 253,392 | 101 | 2,680 | 185,885 | 74 | 1,970 |
| Hypertensive Heart Disease | 402 | 12 | 0.5 | 489 | 41 | 47,217 | 46,680 | 95 | 3,949 | 32,536 | 67 | 2,754 |
| Acute Myocardial Infarction | 410 | 35 | 1.4 | 610 | 17 | 64,179 | 63,673 | 104 | 1,825 | 50,181 | 82 | 1,441 |
| Other Acute and Subacute Forms of Ischemic Heart Disease | 411 | 13 | 0.5 | 234 | 17 | 24,817 | 24,662 | 106 | 1,844 | 19,154 | 82 | 1,435 |
| Angina Pectoris | 413 | 15 | 0.6 | 326 | 22 | 31,882 | 31,703 | 97 | 2,188 | 23,844 | 73 | 1,648 |
| Other Forms of Chronic Ischemic Heart Disease | 414 | 86 | 3.5 | 1,415 | 16 | 152,346 | 150,800 | 107 | 1,746 | 118,910 | 84 | 1,380 |
| Cardiac Dysrhythmias | 427 | 60 | 2.4 | 1,185 | 20 | 121,923 | 121,024 | 102 | 2,027 | 94,707 | 80 | 1,589 |
| Heart Failure | 428 | 196 | 8.0 | 5,146 | 26 | 525,400 | 519,520 | 101 | 2,651 | 399,847 | 78 | 2,045 |
| Transient Cerebral Ischemia | 435 | 24 | 1.0 | 519 | 22 | 53,711 | 53,321 | 103 | 2,256 | 44,271 | 85 | 1,877 |
| Acute but Ill-Defined Cerebrovascular Disease | 436 | 111 | 4.5 | 3,514 | 32 | 373,774 | 369,859 | 105 | 3,347 | 298,526 | 85 | 2,706 |
| Other Peripheral Vascular Disease | 443 | 23 | 0.9 | 715 | 31 | 71,843 | 69,691 | 97 | 3,050 | 53,256 | 74 | 2,333 |
| Diseases of the Respiratory System (MDC 8) | 460-519 | 263 | 10.7 | 6,176 | 24 | 629,789 | 622,508 | 101 | 2,370 | 483,433 | 78 | 1,845 |
| Pneumonia, Organism Unspecified | 486 | 85 | 3.5 | 1,585 | 19 | 164,593 | 162,488 | 103 | 1,913 | 128,251 | 81 | 1,514 |
| Chronic Airway Obstruction, not Elsewhere Classified | 496 | 82 | 3.3 | 2,009 | 25 | 202,655 | 201,111 | 100 | 2,457 | 157,232 | 78 | 1,925 |
| Diseases of the Digestive System (MDC 9) | 520-579 | 120 | 4.9 | 2,545 | 21 | 264,645 | 258,585 | 102 | 2,153 | 203,010 | 80 | 1,694 |
| Diseases of the Genitourinary System (MDC 10) | 580-629 | 106 | 4.3 | 3,239 | 31 | 307,932 | 296,329 | 91 | 2,796 | 245,292 | 76 | 2,320 |
| Other Disorders of Urethra and Urinary Tract | 599 | 48 | 1.9 | 1,294 | 27 | 125,040 | 120,849 | 93 | 2,529 | 97,158 | 75 | 2,038 |
| Diseases of the Skin and Subcutaneous Tissue (MDC 12) | 680-709 | 176 | 7.1 | 8,345 | 47 | 931,153 | 864,735 | 104 | 4,918 | 651,704 | 78 | 3,715 |
| Other Cellulitis and Abscess | 682 | 47 | 1.9 | 1,325 | 28 | 151,030 | 143,570 | 108 | 3,062 | 106,189 | 80 | 2,272 |
| Chronic Ulcer of Skin | 707 | 119 | 4.8 | 6,639 | 56 | 738,771 | 681,585 | 103 | 5,712 | 516,159 | 78 | 4,335 |

See footnotes at end of table.

Table 52—Continued
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, Visit Charges, and Program Payments, by Principal
Diagnosis Within Major Diagnostic Classifications (MDCs): Calendar Year 2000

| Principal ICD-9-CM Diagnosis Within MDC ¹ | Principal ICD-9-CM Codes | Persons Served | | Visits | | Total Charges in Thousands | Visit Charges | | | Program Payments | | |
|--|--------------------------------|---------------------------|---------|---------------------------|-------------------------|----------------------------------|---------------------------|--------------|-------------------------|---------------------------|--------------|--------------------------------------|
| | | Number in Thousands | Percent | Number in Thousands | Per Person Served | | Amount in Thousands | Per Visit | Per Person Served | Amount in Thousands | Per Visit | Per Person Served ² |
| Diseases of the Musculoskeletal System and Connective Tissue (MDC 13) | 710-739 | 373 | 15.2 | 8,416 | 23 | \$890,270 | \$881,477 | \$105 | \$2,361 | \$724,420 | \$86 | \$1,945 |
| Rheumatoid Arthritis and Other Inflammatory Polyarthropathies | 714 | 13 | 0.5 | 466 | 36 | 44,904 | 44,451 | 95 | 3,391 | 36,689 | 79 | 2,802 |
| Osteoarthritis and Allied Disorders | 715 | 158 | 6.4 | 2,957 | 19 | 319,352 | 317,351 | 107 | 2,007 | 260,672 | 88 | 1,652 |
| Other and Unspecified Arthropathies | 716 | 31 | 1.3 | 726 | 24 | 72,446 | 71,886 | 99 | 2,333 | 63,355 | 87 | 2,058 |
| Other and Unspecified Disorders of Back | 724 | 40 | 1.6 | 725 | 18 | 77,636 | 77,220 | 107 | 1,932 | 66,181 | 91 | 1,660 |
| Other Disorders of Bone and Cartilage | 733 | 32 | 1.3 | 1,195 | 38 | 120,432 | 119,038 | 100 | 3,768 | 89,537 | 75 | 2,840 |
| Congenital Anomalies (MDC 14) | 740-759 | 7 | 0.3 | 140 | 19 | 14,598 | 14,356 | 103 | 1,988 | 11,314 | 81 | 1,570 |
| Symptoms, Signs, and Ill-Defined Conditions (MDC 16) | 780-799 | 265 | 10.8 | 6,805 | 26 | 680,757 | 660,410 | 97 | 2,489 | 556,082 | 82 | 2,101 |
| General Symptoms | 780 | 63 | 2.5 | 1,249 | 20 | 129,448 | 128,225 | 103 | 2,052 | 101,207 | 81 | 1,624 |
| Symptoms Involving Urinary System | 788 | 54 | 2.2 | 2,465 | 46 | 219,711 | 205,816 | 83 | 3,806 | 184,300 | 75 | 3,412 |
| Injury and Poisoning (MDC 17) | 800-999 | 400 | 16.3 | 12,630 | 32 | 1,398,292 | 1,346,895 | 107 | 3,365 | 1,048,262 | 83 | 2,627 |
| Fracture of Neck of Femur | 820 | 75 | 3.0 | 1,753 | 24 | 189,419 | 187,876 | 107 | 2,519 | 158,271 | 90 | 2,130 |
| Open Wound of Other and Unspecified Sites, Except Limbs | 879 | 36 | 1.5 | 1,404 | 39 | 161,846 | 152,649 | 109 | 4,212 | 112,127 | 80 | 3,101 |
| Open Wound of Knee, Leg (Except Thigh), and Ankle | 891 | 29 | 1.2 | 1,207 | 41 | 138,410 | 129,877 | 108 | 4,453 | 96,700 | 80 | 3,323 |
| Supplementary Classification of Factors Influencing Health Status and Contact with Health Services | V01-V82 | 10 | 0.4 | 300 | 29 | 30,924 | 28,984 | 97 | 2,794 | 23,280 | 78 | 2,250 |

¹ICD-9-CM is *International Classification of Diseases, 9th Revision, Clinical Modification* (Volume 1). Only the first listed or principal diagnosis has been used.

²Does not reflect beneficiaries who received covered services but for whom no program payments were reported during the reporting year.

³Includes invalid codes not listed separately.

⁴Specific leading diagnostic categories were selected for presentation because of frequency of occurrences or because of special interest.

NOTES: MDCs 11 and 15 were not shown separately (but included in the total), because they were for the most part, not applicable to Medicare beneficiaries. Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000. Numbers may not add to total because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 53
Persons Served and Program Payments for Medicare Home Health Agency (HHA) Services,
by Selected Diagnoses: Calendar Years 1997 and 2000

| Principal ICD-9-CM Diagnosis ¹ | ICD-9-CM Codes | 1997 | | | | |
|---|-------------------|----------------------------|-------------|------------------------|-------------|-----------------------------------|
| | | Persons in Thousands | Percent | Program Payments | | |
| | | | | Amount in Thousands | Percent | Per Person Served ² |
| Total All Diagnoses | --- | 3,558 | 100.0 | \$16,718,263 | 100.0 | \$4,702 |
| Total Selected Diagnoses ³ | --- | 2013 | 56.6 | 7,681,940 | 45.9 | 3,816 |
| Diabetes Mellitus | 250 | 324 | 9.1 | 2,260,343 | 13.5 | 6,995 |
| Essential Hypertension | 401 | 244 | 6.9 | 839,278 | 5.0 | 3,447 |
| Other Forms of Chronic Ischemic Heart Disease | 414 | 124 | 3.5 | 252,328 | 1.5 | 2,037 |
| Heart Failure | 428 | 339 | 9.5 | 1,139,447 | 6.8 | 3,364 |
| Acute But Ill-Defined Cerebrovascular Disease | 436 | 179 | 5.0 | 675,853 | 4.0 | 3,779 |
| Pneumonia, Organism Unspecified | 486 | 108 | 3.0 | 208,135 | 1.2 | 1,925 |
| Chronic Airway Obstruction, Not Elsewhere Classified | 496 | 145 | 4.1 | 453,561 | 2.7 | 3,131 |
| Chronic Ulcer of Skin | 707 | 149 | 4.2 | 913,679 | 5.5 | 6,171 |
| Osteoarthritis and Allied Disorders | 715 | 206 | 5.8 | 433,641 | 2.6 | 2,115 |
| General Symptoms | 780 | 99 | 2.8 | 271,892 | 1.6 | 2,762 |
| Fracture of Neck of Femur | 820 | 96 | 2.7 | 233,783 | 1.4 | 2,432 |
| All Other Diagnoses | --- | 1,545 | 43.4 | 9,036,323 | 54.1 | 5,849 |

¹ICD-9-CM is *International Classification of Diseases, 9th Revision, Clinical Modification* (Volume 1). Only the first listed or principal diagnosis has been used.

²Does not reflect persons who received covered services but for whom no program payments were reported during the reporting year.

³Based on frequency of occurrence in 2000.

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. The home health prospective payment system was implemented beginning October 1, 2000.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 53—Continued
Persons Served and Program Payments for Medicare Home Health Agency (HHA) Services,
by Selected Diagnoses: Calendar Years 1997 and 2000

| Persons in Thousands | Percent | 2000 | | | Percent Change 1997-2000 | | |
|----------------------------|---------|------------------------|---------|-----------------------------------|-----------------------------|---------------------|----------------------------|
| | | Program Payments | | Per Person Served ² | Persons | Program Payments | Average Program Payment |
| | | Amount in Thousands | Percent | | | | |
| 2,461 | 100.0 | \$7,215,959 | 100.0 | \$2,936 | -31 | -57 | -38 |
| 1,229 | 49.9 | 2,987,093 | 41.4 | 2,431 | -39 | -61 | -36 |
| 159 | 6.5 | 662,133 | 9.2 | 4,166 | -51 | -71 | -40 |
| 95 | 3.8 | 185,885 | 2.6 | 1,970 | -61 | -78 | -43 |
| 86 | 3.5 | 118,910 | 1.6 | 1,380 | -31 | -53 | -32 |
| 196 | 8.0 | 399,847 | 5.5 | 2,045 | -42 | -65 | -39 |
| 111 | 4.5 | 298,526 | 4.1 | 2,706 | -38 | -56 | -28 |
| 85 | 3.5 | 128,251 | 1.8 | 1,514 | -21 | -38 | -21 |
| 82 | 3.3 | 157,232 | 2.2 | 1,925 | -43 | -65 | -39 |
| 119 | 4.8 | 516,159 | 7.2 | 4,335 | -20 | -44 | -30 |
| 158 | 6.4 | 260,672 | 3.6 | 1,652 | -23 | -40 | -22 |
| 63 | 2.5 | 101,207 | 1.4 | 1,624 | -36 | -63 | -41 |
| 75 | 3.0 | 158,271 | 2.2 | 2,130 | -22 | -32 | -12 |
| 1,232 | 50.1 | 4,228,866 | 58.6 | 3,433 | -20 | -53 | -41 |