

Table 7.5
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, and Program Payments, by Number of Visits: Calendar Years 2000 and 2010

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
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
2010								
Total	3,434	100.0	126,063	100.0	\$18,615,688	100.0	\$19,407,218	100.0
1-9	824	24.0	4,904	3.9	841,023	4.5	1,336,640	6.9
10-19	900	26.2	13,278	10.5	2,209,517	11.9	2,824,072	14.6
20-29	520	15.2	13,094	10.4	2,109,040	11.3	2,487,493	12.8
30-39	316	9.2	11,239	8.9	1,759,351	9.5	2,060,542	10.6
40-49	215	6.3	9,873	7.8	1,522,587	8.2	1,761,012	9.1
50-99	435	12.7	30,350	24.1	4,536,776	24.4	4,912,696	25.3
100 or More	224	6.5	43,325	34.4	5,637,395	30.3	4,024,763	20.7

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 Standard Analytical Files; data development by the Center for Strategic Planning.