

Table 13.10
Medicaid Payments, by Eligibility Group: Fiscal Years 1975-2009

Year	Total ¹	Children	Adults	Aged	Disabled
Amount in Millions (Nominal Dollars)					
1975	\$12,242	\$2,186	\$2,062	\$4,358	\$3,145
1976	14,091	2,431	2,288	4,910	3,920
1977	16,239	2,610	2,606	5,499	4,883
1978	17,992	2,748	2,673	6,308	5,620
1979	20,472	2,884	3,021	7,046	6,882
1980	23,311	3,123	3,231	8,739	7,621
1981	27,204	3,508	3,763	9,926	9,455
1982	29,399	3,473	4,093	10,739	10,405
1983	32,391	3,836	4,487	11,954	11,367
1984	33,891	3,979	4,420	12,815	11,977
1985	37,508	4,414	4,746	14,096	13,452
1986	41,005	5,135	4,880	15,097	14,913
1987	45,050	5,508	5,592	16,037	16,817
1988	48,710	5,848	5,883	17,135	18,594
1989	54,500	6,892	6,897	18,558	20,885
1990	64,859	9,100	8,590	21,508	24,404
1991	76,964	11,600	10,421	25,444	28,251
1992	91,480	14,758	12,403	29,089	34,004
1993	101,709	16,504	13,605	31,554	38,655
1994	108,270	17,302	13,585	33,618	42,298
1995	120,141	17,976	13,511	36,527	49,418
1996	121,685	17,544	12,275	36,947	52,065
1997	124,430	17,544	12,307	37,721	54,130
1998	142,260	22,896	14,865	40,601	60,374
1999	153,479	24,151	15,801	42,522	65,850
2000	168,307	26,775	17,763	44,503	72,742
2001	186,905	30,636	20,170	48,356	80,386
2002	213,497	35,890	23,635	51,924	92,414
2003	233,206	39,871	26,800	55,271	102,014
2004	257,748	44,205	30,721	59,541	111,614
2005	273,203	46,846	32,215	62,929	118,683
2006	265,049	49,612	32,682	57,457	114,745
2007	276,246	53,716	34,153	57,179	119,617
2008	296,830	57,137	37,698	61,131	129,040
2009	325,819	64,022	45,423	64,332	141,596

See footnotes at end of table.

Table 13.10—Continued
Medicaid Payments, by Eligibility Group: Fiscal Years 1975-2009

Year	Total ¹	Children	Adults	Aged	Disabled
Amount in Millions (Constant 2009 Dollars)					
1975	\$87,744	\$15,668	\$14,779	\$31,236	\$22,542
1976	89,455	15,433	14,525	31,171	24,886
1977	94,998	15,269	15,245	32,169	28,566
1978	97,417	14,879	14,473	34,155	30,429
1979	101,066	14,238	14,914	34,785	33,975
1980	103,384	13,850	14,329	38,757	33,799
1981	107,403	13,850	14,856	39,188	37,329
1982	103,759	12,257	14,446	37,901	36,723
1983	104,383	12,362	14,460	38,523	36,631
1984	101,173	11,878	13,195	38,256	35,754
1985	105,321	12,394	13,327	39,581	37,773
1986	108,833	13,629	12,952	40,070	39,581
1987	112,392	13,741	13,951	40,009	41,955
1988	113,261	13,598	13,679	39,842	43,235
1989	116,583	14,743	14,754	39,698	44,676
1990	127,743	17,923	16,918	42,361	48,065
1991	140,225	21,135	18,987	46,358	51,472
1992	155,623	25,106	21,100	49,485	57,847
1993	163,320	26,501	21,846	50,668	62,070
1994	166,908	26,673	20,943	51,825	65,206
1995	178,338	26,684	20,056	54,221	73,356
1996	176,072	25,385	17,761	53,460	75,335
1997	176,219	24,846	17,429	53,421	76,659
1998	198,037	31,873	20,693	56,520	84,045
1999	209,099	32,903	21,527	57,932	89,714
2000	223,524	35,559	23,591	59,103	96,607
2001	240,136	39,361	25,914	62,128	103,280
2002	267,199	44,918	29,580	64,985	115,659
2003	281,857	48,189	32,391	66,802	123,296
2004	299,878	51,430	35,742	69,274	129,858
2005	308,247	52,855	36,347	71,001	133,907
2006	289,848	54,253	35,740	62,833	125,482
2007	291,947	56,769	36,094	60,429	126,415
2008	304,297	58,574	38,646	62,669	132,286
2009	325,819	64,022	45,423	64,332	141,596

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 health care services, U.S. Department of Commerce, Bureau of Economic Analysis (BEA), expressed in fiscal year 2009 dollars. With the release of the comprehensive revision of the national accounts in July of 2009, BEA introduced a new classification system for Personal Consumption Expenditures (PCE). With the new classification system and the release of the comprehensive revision estimates, components of medical care were changed, and the base year was updated to the year 2005. PCE health care services now excludes eye exams (currently classified in PCE goods under corrective eyeglasses and contact lenses), and net health insurance (now classified under insurance services). As a result of the PCE classification change, all PCE series were restated for the entire historical period to reflect the new PCE classification structure. SCHIP payments are excluded from Medicaid.

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 Center for Strategic Planning.