

Table 7.2
Persons Served, Visits, Total Charges, Visit Charges, and Program Payments for Medicare Home Health Agency Services,
by Demographic Characteristics: Calendar Year 2011

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 Visit	Per Person Served	Per Enrollee ¹	Amount in Thousands	Per Person Served ²	Per Enrollee ¹
Total	3,464	95	123,249	36	3,381	\$18,894,146	\$18,473,688	\$150	\$5,333	\$507	\$18,362,264	\$5,357	\$504
Age													
Under 65 Years	476	70	17,936	38	2,626	2,775,367	2,671,399	149	5,610	391	2,565,065	5,496	375
65-74 Years	819	51	25,934	32	1,621	4,002,736	3,904,980	151	4,768	244	3,998,813	4,941	250
75-84 Years	1,141	124	40,466	35	4,383	6,187,502	6,067,956	150	5,318	657	6,048,886	5,346	655
85 Years or Over	1,028	234	38,913	38	8,848	5,928,541	5,829,353	150	5,673	1,325	5,749,499	5,635	1,307
Sex													
Male	1,287	77	43,486	34	2,616	6,751,352	6,555,444	151	5,092	394	6,522,169	5,122	392
Female	2,176	110	79,762	37	4,021	12,142,795	11,918,243	149	5,476	601	11,840,095	5,496	597
Type of Entitlement													
Aged	2,988	101	105,313	35	3,555	16,118,779	15,802,289	150	5,289	533	15,797,198	5,335	533
Disabled	476	70	17,936	38	2,626	2,775,367	2,671,399	149	5,610	391	2,565,065	5,496	375
Race													
White	2,755	91	92,044	33	3,056	14,264,058	13,934,732	151	5,058	463	13,896,106	5,090	461
Other ³	709	112	31,205	44	4,922	4,630,089	4,538,956	145	6,402	716	4,466,157	6,400	704

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. 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 Office of Information Products and Data Analytics.