

CMS Program Data - Populations¹

Medicare (avg monthly)	CY 2015	CY 2016	CY 2017 ²
Parts A and/or B	55.6	57.1	58.0
Aged	46.7	48.3	49.1
Disabled	8.9	8.9	8.9
Original Medicare Enrollment	37.8	38.4	38.0
MA & Other Health Plan Enrollment	17.8	18.7	20.0
MA Enrollment	16.5	17.6	18.6
Part D (MA PD+PDP)	39.5	41.2	42.5

Medicaid (avg monthly) ³	FY 2015	FY 2016	FY 2017
Total	68.5	70.9	72.3
Aged	5.5	5.7	5.8
Blind/Disabled	10.5	10.6	10.6
Children	28.0	28.0	28.2
Adults	15.4	15.5	15.7
Expansion Adult	9.1	11.2	12.0

CHIP (avg monthly)³	5.9	6.5	6.7
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¹ Populations are in millions and may not add due to rounding

² Preliminary and subject to change

³ Projected estimates

MA - Medicare Advantage
MA PD - Medicare Advantage Prescription Drug Plan
PDP - Prescription Drug Plan
CHIP - Children's Health Insurance Program

SOURCES: CMS/Office of Enterprise Data & Analytics/Office of the Actuary

Medicare Deductibles, Coinsurance, Premiums

	CY 2016	CY 2017
Part A		
Inpatient Hospital		
Deductible	\$1,288.00	\$1,316.00
Coinsurance/Day	\$322.00	\$329.00
Coinsurance/LTR Day	\$644.00	\$658.00
Coinsurance/SNF Day	\$161.00	\$164.50

Part B		
Deductible	\$166.00	\$183.00

Part D		
Maximum Deductible	\$360.00	\$400.00
Initial Coverage Limit	\$3,310.00	\$3,700.00
Out-of-Pocket Threshold	\$4,850.00	\$4,950.00

Premiums		
Part A	\$411.00	\$413.00
Part B	\$104.90-\$389.80	\$134.00-\$428.60

NOTE: The inpatient hospital deductible applies per benefit period.

LTR - Life Time Reserve
SNF - Skilled Nursing Facility

SOURCE: CMS/Office of the Actuary

Original Medicare Persons Served and Payments by Type of Service Calendar Year 2015

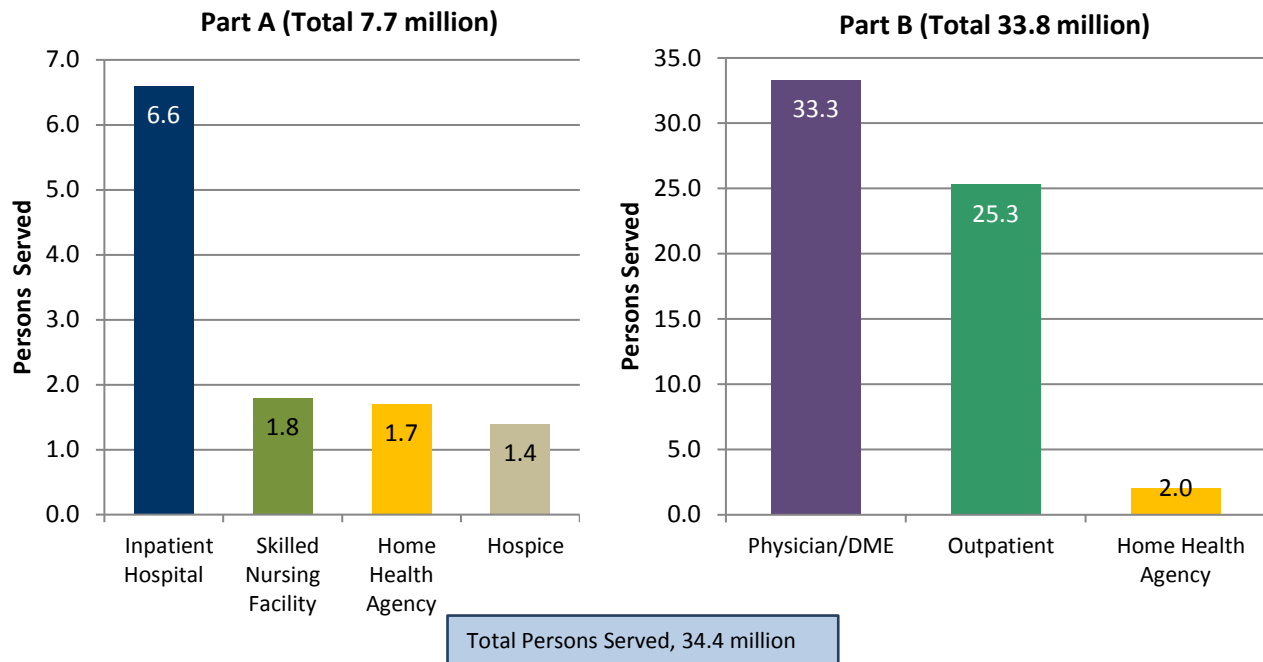
	Persons Served (in millions)	Program Payments (in billions)
Total	34.4	\$359.9
Part A	7.7	\$181.9
Inpatient Hospital	6.6	\$130.0
Skilled Nursing Facility	1.8	\$29.1
Home Health Agency	1.7	\$6.9
Hospice	1.4	\$15.9
Part B	33.8	\$178.0
Physician/DME	33.3	\$102.2
Outpatient	25.3	\$64.4
Home Health Agency	2.0	\$11.3

Total = Parts A and/or B

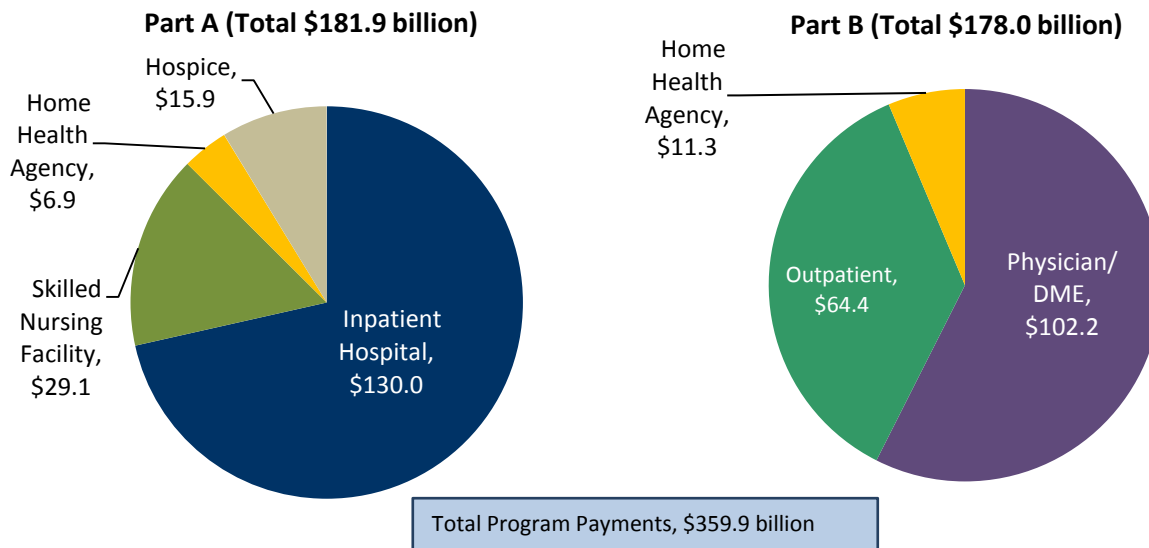
DME - Durable Medical Equipment

SOURCE: CMS/Office of Enterprise Data & Analytics

Original Medicare Persons Served (in Millions) by Type of Service Calendar Year 2015



Original Medicare Program Payments (in Billions) by Type of Service Calendar Year 2015



Total = Parts A and/or B

SOURCE: CMS/Office of Enterprise Data & Analytics

**Medicare Part D Utilization and Expenditures
Calendar Year 2015**

Utilizing Beneficiaries, in millions	38.9
Prescription Drug Events, in billions	1.4
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Total Part D Expenditures, in billions	\$89.8
Part D Benefit Payments	\$89.5
Part D Administrative Expenses	\$0.3

SOURCE: CMS/Office of Enterprise Data & Analytics/Office of the Actuary

Medicaid Beneficiaries and Payments by Selected Type of Service Fiscal Year 2013

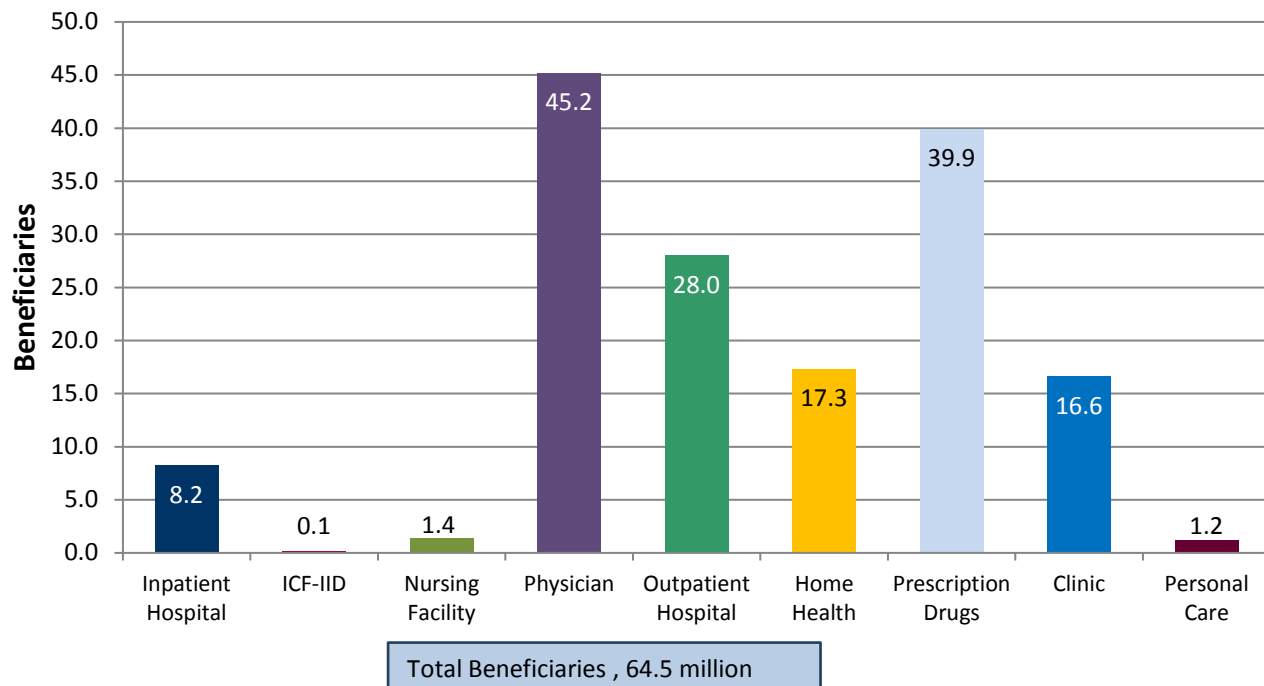
	Beneficiaries (in millions)	Payments (in billions)
All Services	64.5	\$361.3
Inpatient Hospital	8.2	\$30.6
ICF-IID	0.1	\$11.6
Nursing Facility	1.4	\$46.5
Physician	45.2	\$10.0
Outpatient Hospital	28.0	\$12.1
Home Health	17.3	\$6.3
Prescription Drugs	39.9	\$18.6
Capitation	--	\$251.0
Clinic	16.6	\$12.1
Personal Care	1.2	\$11.5
Other Services	--	\$61.8

NOTES: Beneficiaries represent unique individuals on whose behalf Medicaid payments for the indicated services were made during the fiscal year. Excludes enrollees in separate Title XXI Children's Health Insurance Programs. Excludes data for Colorado, Idaho, and Rhode Island and contains partial data for Kansas and North Carolina.

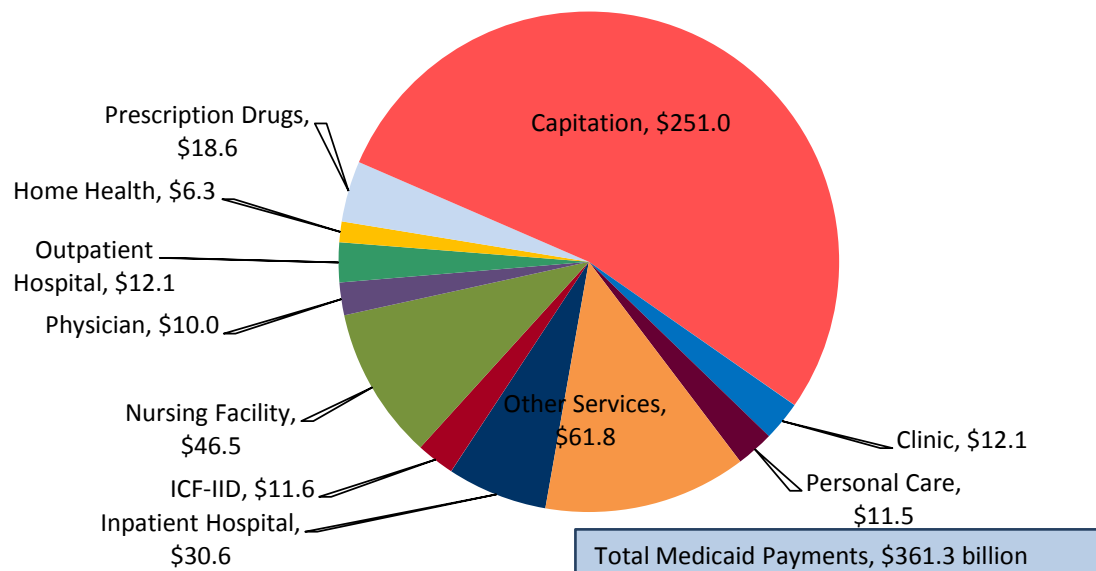
ICF-IID - Intermediate Care Facility for Individuals with Intellectual Disabilities.

SOURCE: CMS/Center for Medicaid and CHIP Services

Medicaid Beneficiaries (in Millions) by Type of Service Fiscal Year 2013



Medicaid Payments (in Billions) by Type of Service Fiscal Year 2013



SOURCE: CMS/Center for Medicaid and CHIP Services

Medicare Institutional Providers Calendar Year 2016

Type of Provider	Count
Total Hospitals	6,146
Short Stay	3,419
Psychiatric	570
Rehabilitation	277
Children's	99
Long Term	420
Critical Access	1,343
Religious Non-Medical	18
Home Health Agencies	11,956
Skilled Nursing Facilities	15,274
Labs	254,133
Outpatient PT/Speech Pathology	2,080
Rural Health Clinics	4,153
Federally Qualified Health Centers	7,723
Ambulatory Surgical Centers	5,529
Comprehensive Outpatient Rehab Facilities	193
Hospices	4,473

PT - Physical Therapy

SOURCE: CMS/Office of Enterprise Data & Analytics

Medicare Non-Institutional Providers by Specialty⁴
Calendar Year 2016

Specialty Type	Count
Total Providers	1,249,691
Primary Care	226,310
Surgical Specialties	109,234
Medical Specialties	147,866
Anesthesiology	41,732
Obstetrics/Gynecology	34,889
Pathology	12,354
Psychiatry	28,031
Radiology	37,560
Emergency Medicine	46,816
Non-Physician Practitioners	391,605
Limited Licensed Practitioners	104,318
Ambulance Service Supplier	10,334
All Other Providers	80,815

⁴ Providers utilized by Original Medicare beneficiaries for all Part B non-institutional provider services. Providers may be counted in more than one specialty classification but are reported as a single provider in the "Total Providers" count.

SOURCE: CMS/Office of Enterprise Data & Analytics

**Medicare Durable Medical Equipment, Prosthetics, Orthotics
and Supplies (DMEPOS) Providers by Specialty
Calendar Year 2016⁵**

Specialty Type	Count
Total DMEPOS Providers	85,297
Pharmacy	50,077
Medical Supply Company	10,138
Optometry	5,485
Podiatry	5,232
Individual Certified Prosthetist/Orthotist	2,444
Optician	2,033
Orthopedic Surgery	1,929
Ophthalmology	1,477
General Practice	1,395
All Other DMEPOS Providers	5,351

⁵ Providers utilized by Original Medicare beneficiaries for all Part B non-institutional DMEPOS services. Providers may be counted in more than one specialty classification but are reported as a single provider in the "Total DMEPOS Providers" count.

SOURCE: CMS/Office of Enterprise Data & Analytics

Medicare Prepaid Contracts (08/2017)

	Count
Total Prepaid Plans (MA and others)	737
Total Prescription Drug Plans	64

SOURCE: CMS/Center for Medicare

National Health Expenditures Calendar Year 2015

Total	\$3,205.6
% of GDP	17.8%
Per Capita	\$9,990
Health Insurance	\$2,384.5
Private Health Insurance	\$1,072.1
Medicare	\$646.2
Medicaid (Title XIX)	\$545.1
CHIP (Title XIX & XXI)	\$14.6
Department of Defense	\$41.8
Department of Veterans Affairs	\$64.7

Dollars in billions except for Per Capita.

SOURCE: CMS/Office of the Actuary

CMS Financial Data Fiscal Year 2016 ⁶

Total Federal Program Spending (\$ in billions)	\$1,067.2
Medicare Benefits ⁷	\$683.6
Total Medicaid	\$368.3
CHIP	\$14.8
Other Spending	\$0.5
Total Program Management (\$ in millions)	\$6,387.7
Total Appropriation	\$4,279.9
Other Sources	\$2,107.8
Total Health Care Fraud & Abuse Control Funding (\$ in millions)	\$1,959.9
FTE Employment	6,238

⁶ Program Management figures in FY 2016 are preliminary and subject to change.

⁷ Medicare Benefits, including Health Information Technology Incentive Payments.

SOURCE: CMS/Office of Financial Management