

Table 51

Persons Using Medicare Home Health Agency Services, Visits, Total Charges, and Program Payments, by Number of Visits: Calendar Years 1997 and 2001

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
More than 100	732	20.6	182,330	70.6	15,733,632	67.1	11,289,371	67.5
2001								
Total	2,403	100.0	73,573	100.0	\$8,199,439	100.0	\$8,513,702	100.0
1-9	731	30.4	3,936	5.3	492,612	6.0	875,151	10.3
10-19	646	26.9	9,013	12.3	1,102,370	13.4	1,630,558	19.2
20-29	346	14.4	8,301	11.3	986,636	12.0	1,205,259	14.2
30-39	196	8.2	6,695	9.1	778,194	9.5	849,599	10.0
40-49	122	5.1	5,409	7.4	619,429	7.6	632,630	7.4
50-99	230	9.6	15,649	21.3	1,741,585	21.2	1,609,094	18.9
More than 100	131	5.5	24,570	33.4	2,478,611	30.2	1,711,411	20.1

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. 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.