

Table 7.5
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, and Program Payments, by Number of Visits: Calendar Years 1997 and 2004

| 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 |
| 2004 | | | | | | | | |
| Total | 2,836 | 100.0 | 89,130 | 100.0 | \$11,054,455 | 100.0 | \$11,402,560 | 100.0 |
| 1-9 | 838 | 29.6 | 4,756 | 5.3 | 662,186 | 6.0 | 1,104,047 | 9.7 |
| 10-19 | 795 | 28.0 | 11,522 | 12.9 | 1,575,487 | 14.3 | 2,268,572 | 19.9 |
| 20-29 | 416 | 14.7 | 10,382 | 11.6 | 1,380,465 | 12.5 | 1,649,003 | 14.5 |
| 30-39 | 230 | 8.1 | 8,157 | 9.2 | 1,057,341 | 9.6 | 1,150,932 | 10.1 |
| 40-49 | 142 | 5.0 | 6,529 | 7.3 | 833,230 | 7.5 | 865,745 | 7.6 |
| 50-99 | 265 | 9.3 | 18,514 | 20.8 | 2,288,737 | 20.7 | 2,187,833 | 19.2 |
| More than 100 | 148 | 5.2 | 29,269 | 32.8 | 3,257,008 | 29.5 | 2,176,427 | 19.1 |

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. 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 Medicare Data Extract System; data development by the Office of Research, Development, and Information.