

Table 14.6

Medicaid Persons Served (Beneficiaries), Children, by Selected Type of Service: Fiscal Years 1975-2003

Year	Total ¹	Inpatient		Nursing		Outpatient		Home	Prescribed
		Hospital	ICF/MR	Facility ²	Physician	Hospital	Health ³	Drugs	
Number Using Selected Service, in Thousands									
1975	9,598	984	4	6	6,659	3,619	58	5,552	
1976	9,924	1,005	3	4	6,908	4,037	55	5,961	
1977	9,651	1,019	4	4	6,864	4,024	62	6,067	
1978	9,376	1,023	3	2	6,705	3,992	141	6,016	
1979	9,106	944	5	2	6,459	3,528	185	5,655	
1980	9,333	978	5	9	6,085	4,238	72	5,590	
1981	9,581	955	1	2	6,482	4,282	90	5,810	
1982	9,563	866	1	2	6,175	4,171	65	5,432	
1983	9,535	881	1	0	6,111	4,159	39	5,488	
1984	9,684	845	1	1	6,330	4,178	44	5,667	
1985	9,757	864	1	1	6,284	4,269	64	5,592	
1986	10,029	924	(4)	2	6,496	4,445	69	5,949	
1987	10,168	1,005	(4)	(4)	6,649	4,520	60	6,073	
1988	10,037	1,003	(4)	(4)	6,628	4,321	51	6,125	
1989	10,318	1,138	1	(4)	6,908	4,662	59	6,454	
1990	11,220	1,345	1	1	7,689	5,250	75	7,259	
1991	12,855	1,472	1	2	8,911	6,157	103	8,605	
1992	15,200	1,992	1	3	10,402	7,151	126	10,068	
1993	16,285	1,905	1	1	11,350	7,651	149	10,989	
1994	17,194	1,924	1	1	11,546	7,626	202	11,238	
1995	17,164	1,725	1	1	11,041	7,389	259	10,708	
1996	16,739	1,625	(4)	1	10,314	6,777	329	9,988	
1997	15,791	1,363	1	2	9,370	5,472	309	9,129	
1998	18,969	1,199	1	5	7,847	4,776	206	8,168	
1999	18,837	1,152	1	1	7,617	4,617	132	8,118	
2000	19,723	1,274	1	1	7,848	4,923	190	8,316	
2001	21,064	1,314	1	2	8,364	5,284	208	8,954	
2002	23,227	1,334	1	2	9,265	5,768	227	9,930	
2003	24,831	1,380	1	2	9,785	6,075	248	10,818	

See footnotes at end of table.

Table 14.6—Continued

Medicaid Persons Served (Beneficiaries), Children, by Selected Type of Service: Fiscal Years 1975-2003

Year	Total ¹	Inpatient		Nursing		Outpatient	Home	Prescribed Drugs
		Hospital	ICF/MR	Facility ²	Physician	Hospital	Health ³	
Percent of Unduplicated Total Using Selected Service								
1975	100.0	10.3	(5)	(5)	69.4	37.7	0.6	57.8
1976	100.0	10.1	(5)	(5)	69.6	40.7	0.6	60.1
1977	100.0	10.6	(5)	(5)	71.1	41.7	0.6	62.9
1978	100.0	10.9	(5)	(5)	71.5	42.6	1.5	64.2
1979	100.0	10.4	(5)	(5)	70.9	38.7	2.0	62.1
1980	100.0	10.5	(5)	(5)	65.2	45.4	0.8	59.9
1981	100.0	10.0	(5)	(5)	67.7	44.7	0.9	60.6
1982	100.0	9.1	(5)	(5)	64.6	43.6	0.7	56.8
1983	100.0	9.2	(5)	(5)	64.1	43.6	0.4	57.6
1984	100.0	8.7	(5)	(5)	65.4	43.1	0.5	58.5
1985	100.0	8.9	(5)	(5)	64.4	43.8	0.7	57.3
1986	100.0	9.2	(5)	(5)	64.8	44.3	0.7	59.3
1987	100.0	9.9	(5)	(5)	65.4	44.5	0.6	59.7
1988	100.0	10.0	(5)	(5)	66.0	43.1	0.5	61.0
1989	100.0	11.0	(5)	(5)	67.0	45.2	0.6	62.6
1990	100.0	12.0	(5)	(5)	68.5	46.8	0.7	64.7
1991	100.0	11.4	(5)	(5)	69.3	47.9	0.8	66.9
1992	100.0	13.1	(5)	(5)	68.4	47.0	0.8	66.2
1993	100.0	11.7	(5)	(5)	69.7	47.0	0.9	67.5
1994	100.0	11.2	(5)	(5)	67.2	44.4	1.2	65.4
1995	100.0	10.1	(5)	(5)	64.3	43.0	1.5	62.4
1996	100.0	9.7	(5)	(5)	61.6	40.5	2.0	59.7
1997	100.0	8.6	(5)	(5)	59.3	34.7	2.0	57.8
1998	100.0	6.3	(5)	(5)	41.4	25.2	1.1	43.1
1999	100.0	6.1	(5)	(5)	40.4	24.5	0.7	43.1
2000	100.0	6.5	(5)	(5)	39.8	25.0	1.0	42.2
2001	100.0	6.2	(5)	(5)	39.7	25.1	1.0	42.5
2002	100.0	5.7	(5)	(5)	39.9	24.8	1.0	42.8
2003	100.0	5.6	(5)	(5)	39.4	24.5	1.0	43.6

¹The total persons served (beneficiaries) includes users of any type of services reported on the HCFA Form-2082 and in the Medicaid Statistical Information System (MSIS). A person receiving multiple services (e.g., inpatient hospital, physician, and outpatient services) is included once in the user count for each type of service and once in the total

²Data shown include services shown separately in earlier years as skilled nursing facility (SNF) and intermediate care facilities (ICF-other). Beginning in fiscal year 1991, the conditions of participation for SNFs and ICF-other were unified, the distinction between them removed, and the services renamed nursing facility services. It is possible that the combined number of recipients includes some persons who used both types of nursing facility care during the reported fiscal year. This could somewhat inflate the number of users and lower the average payments per recipient

³Trends in home health agency beneficiaries (persons served) and program expenditures are not strictly comparable to 1997 and prior because of changes in the definitions of related categories of service. Reporting for 1998 added categories of service for personal care support services and home and community-based waiver services (category not shown separately in table). In 1999 the home and community-based waiver services were reclassified into the other related categories of service (category not shown separately in table)

⁴Less than 500 users.

⁵Less than 0.05 percent.

NOTES: Beginning fiscal year 1998, a Medicaid-eligible person who during the year, received only coverage for managed care benefits was included in this series as a person served (beneficiary). ICF/MR is Intermediate care facility for the mentally retarded

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations: Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services (HCFA-2082) and the Medicaid Statistical Information System (MSIS); data development by the Office of Research, Development, and Information.