

**Table 13.15**  
**Medicaid Payments per Person Served (Beneficiary), Aged, by Type of Service:**  
**Fiscal Years 1975-2006**

Year	Total <sup>1</sup>	Inpatient		Nursing		Outpatient	Home	Prescribed
		Hospital	ICF/MR	Facility <sup>2</sup>	Physician	Hospital	Health <sup>3</sup>	Drugs
1975	\$1,205	\$271	\$6,925	\$3,250	\$59	\$35	\$238	\$111
1976	1,359	310	8,951	3,328	65	42	493	134
1977	1,512	364	7,482	3,679	71	53	535	144
1978	1,869	446	9,700	4,350	78	48	801	158
1979	2,094	569	9,804	4,972	83	67	1,387	179
1980	2,540	970	16,346	5,742	101	74	1,873	198
1981	2,948	1,115	19,247	6,137	118	91	2,624	230
1982	3,315	1,241	11,464	6,945	115	101	2,944	249
1983	3,545	1,682	20,348	6,942	114	97	1,829	274
1984	3,957	1,778	23,343	7,430	119	105	2,263	312
1985	4,605	1,990	26,926	8,035	122	131	2,731	368
1986	4,808	2,228	32,328	8,487	119	142	3,015	394
1987	4,975	1,898	39,854	8,862	111	159	3,551	432
1988	5,425	1,937	45,601	9,309	116	175	4,344	474
1989	5,926	1,754	51,265	10,236	137	192	5,452	519
1990	6,717	1,865	52,943	11,776	139	206	6,013	581
1991	7,617	2,151	56,032	13,540	157	243	6,749	668
1992	7,759	2,152	43,083	14,630	169	260	6,944	763
1993	8,168	2,225	60,901	15,467	190	304	6,659	826
1994	8,332	2,180	53,983	16,209	203	320	6,742	880
1995	8,868	2,397	51,657	17,183	224	343	6,220	960
1996	8,622	2,303	56,902	18,377	245	376	6,631	1,037
1997	9,540	2,444	63,949	19,022	279	411	6,323	1,174
1998	10,243	2,544	81,337	19,639	270	436	2,199	1,343
1999	11,268	2,385	81,506	21,966	260	455	3,359	1,573
2000	11,929	2,303	83,250	22,477	268	504	3,140	1,853
2001	12,691	2,472	86,680	24,336	258	448	3,481	2,078
2002	13,359	2,700	94,410	25,636	261	451	3,992	2,272
2003	13,677	2,926	97,419	26,737	257	448	3,746	2,514
2004	13,790	2,937	101,910	27,650	253	504	4,098	2,735
2005	14,402	2,552	110,289	29,542	275	445	4,424	2,944
2006	13,268	2,703	110,763	30,669	260	423	5,272	1,175

See footnotes at end of table.

**Table 13.15—Continued**  
**Medicaid Payments per Person Served (Beneficiary), Aged, by Type of Service:**  
**Fiscal Years 1975-2006**

		Inpatient		Nursing		Outpatient	Home	Prescribed
Year	Total <sup>1</sup>	Hospital	ICF/MR	Facility <sup>2</sup>	Physician	Hospital	Health <sup>3</sup>	Drugs
(Constant 2006 Dollars)								
1975	\$7,004	\$1,575	\$40,251	\$18,890	\$343	\$203	\$1,383	\$645
1976	7,054	1,609	46,460	17,274	337	218	2,559	696
1977	7,161	1,724	35,434	17,423	336	251	2,534	682
1978	8,131	1,940	42,198	18,924	339	209	3,485	687
1979	8,399	2,282	39,322	19,942	333	269	5,563	718
1980	9,303	3,553	59,872	21,032	370	271	6,860	725
1981	9,659	3,653	63,061	20,107	387	298	8,597	754
1982	9,743	3,648	33,695	20,413	338	297	8,653	732
1983	9,599	4,554	55,096	18,797	309	263	4,952	742
1984	9,939	4,466	58,630	18,662	299	264	5,684	784
1985	10,954	4,734	64,049	19,113	290	312	6,496	875
1986	11,018	5,106	74,085	19,449	273	325	6,909	903
1987	10,978	4,188	87,941	19,555	245	351	7,836	953
1988	11,208	4,002	94,210	19,232	240	362	8,975	979
1989	11,296	3,343	97,721	19,512	261	366	10,393	989
1990	11,890	3,301	93,717	20,845	247	364	10,644	1,029
1991	12,672	3,579	93,220	22,526	262	404	11,228	1,112
1992	12,244	3,396	67,987	23,087	267	410	10,958	1,204
1993	12,278	3,345	91,545	23,250	286	457	10,010	1,242
1994	12,028	3,147	77,927	23,399	293	462	9,732	1,270
1995	12,313	3,328	71,725	23,858	311	476	8,636	1,333
1996	11,646	3,111	76,857	24,822	331	508	8,956	1,401
1997	12,561	3,218	84,203	25,047	367	541	8,326	1,546
1998	13,169	3,270	104,565	25,247	347	560	2,826	1,726
1999	14,149	2,994	102,342	27,582	326	572	4,218	1,975
2000	14,577	2,815	101,737	27,468	327	616	3,837	2,264
2001	14,977	2,918	102,297	28,721	305	528	4,109	2,452
2002	15,366	3,105	108,590	29,486	300	518	4,591	2,613
2003	15,216	3,255	108,376	29,744	285	499	4,167	2,797
2004	14,710	3,133	108,714	29,496	270	537	4,372	2,918
2005	14,847	2,631	113,700	30,456	283	459	4,561	3,035
2006	13,268	2,703	110,763	30,669	260	423	5,272	1,175

<sup>1</sup>The total includes payments for all types of services reported on the HCFA Form-2082 and in the Medicaid Statistical Information System (MSIS), some not shown separately.

<sup>2</sup>Data 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 inflate the number of users and lower the average payments per user.

<sup>3</sup>Trend in average payment per beneficiary (person served) for home health care are not strictly comparable to 1997 and prior years 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).

NOTES: Beginning fiscal year 1998, capitated premiums for Medicaid eligibles enrolled in managed care plans were included in this series as a component of the total payment per person served (beneficiary). Dollar amounts are adjusted using a personal consumption expenditure index for medical services, U.S. Department of Commerce, Bureau of Economic Analysis, expressed in fiscal year 2006 dollars. 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), Medicaid Statistical Information System (MSIS), and the personal health care consumption indices from the U.S. Department of Commerce; data development by the Office of Research, Development, and Information.