

# **Medicaid Payments by Type of Service Selected Fiscal Years**

	2003	2004	2005
		in billions	
Total	\$262.6	\$281.8	\$300.7
		Percent of Total	
Inpatient Services	14.1	14.8	14.5
General Hospitals	12.7	13.7	13.6
Mental Hospitals	1.3	1.1	0.9
Nursing Facilities <sup>1</sup>	17.0	16.1	15.7
ICF/Mentally Retarded	4.4	4.1	4.0
Community-based Long Term Care Services <sup>2</sup>	10.6	10.8	11.2
Prescribed Drugs <sup>3</sup>	10.3	10.8	10.3
Physician Services	3.7	4.1	4.1
Dental Services	1.2	1.1	1.2
Outpatient Hospital Services	3.8	4.1	4.1
Clinic Services <sup>4</sup>	2.8	2.8	3.0
Laboratory and Radiological Services	0.3	0.4	0.4
Early and Periodic Screening	0.4	0.4	0.4
Targeted Case Management	1.1	1.0	0.9
Capitation Payments (non-Medicare)	17.2	16.4	16.8
Medicare Premiums	2.1	2.3	2.6
Disproportionate Share Hospital Payments	4.9	5.5	5.2
Other Services	5.8	4.5	4.8
Adjustments <sup>5</sup>	0.3	0.9	0.8

<sup>1</sup>Excludes payments under State Children's Health Insurance Program (SCHIP).

<sup>2</sup>Comprised of home health, home and community-based waivers, personal care and home and community-based services for functionally disabled elderly.

<sup>3</sup>Net of prescription drug rebates.

<sup>4</sup>Federal qualified health clinics, rural health clinics, and other clinics.

<sup>5</sup>Includes increasing and decreasing payment adjustments from prior quarters, collections, and other unallocated expenditures.

NOTES: Percent distribution based on rounded numbers.

SOURCES: CMS/CMSO/OACT

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