

Table 7.2
Persons Served, Visits, Total Charges, Visit Charges, and Program Payments for Medicare Home Health Agency Services,
by Demographic Characteristics: Calendar Year 2010

Demographic Characteristic	Persons Served		Visits			Total Charges in Thousands	Visit Charges			Program Payments			
	Number in Thousands	Per 1,000 Enrollees ¹	Number in Thousands	Per Person Served	Per 1,000 Enrollees ¹		Amount in Thousands	Per Visit	Per Person Served	Per Enrollee ¹	Amount in Thousands	Per Person Served ²	Per Enrollee ¹
Total	3,434	96	126,063	37	3,511	\$18,615,688	\$18,262,337	\$145	\$5,318	\$509	\$19,407,218	\$5,688	\$540
Age													
Under 65 Years	458	69	18,054	39	2,727	2,694,423	2,605,264	144	5,688	394	2,624,102	5,814	396
65-74 Years	810	52	26,703	33	1,706	3,981,129	3,899,254	146	4,812	249	4,179,425	5,199	267
75-84 Years	1,159	125	42,345	37	4,558	6,230,269	6,131,490	145	5,290	660	6,555,514	5,681	706
85 Years or Over	1,007	231	38,962	39	8,952	5,709,866	5,626,329	144	5,587	1,293	6,048,177	6,030	1,390
Sex													
Male	1,270	78	44,122	35	2,710	6,604,099	6,446,397	146	5,078	396	6,807,884	5,400	418
Female	2,165	110	81,941	38	4,174	12,011,589	11,815,940	144	5,458	602	12,599,334	5,857	642
Type of Entitlement													
Aged	2,976	102	108,010	36	3,687	15,921,265	15,657,072	145	5,260	535	16,783,116	5,669	573
Disabled	458	69	18,054	39	2,727	2,694,423	2,605,264	144	5,688	394	2,624,102	5,814	396
Race													
White	2,745	92	94,012	34	3,155	14,057,736	13,780,221	147	5,020	462	14,728,010	5,398	494
Other ³	689	113	32,051	47	5,246	4,557,952	4,482,116	140	6,504	734	4,679,208	6,843	766

¹Medicare enrollees in managed care plans are not included in the denominator used to calculate the utilization rates and average payments.

²Does not reflect beneficiaries who received covered services, but for whom no program payments were reported during the reporting year.

³Includes unknown race.

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 Standard Analytical Files; data development by the Center for Strategic Planning.