

Table 13.11
Medicaid Payments per Person Served (Beneficiary), by Eligibility Group:
Fiscal Years 1975-2005

Year	Total ¹	Children	Adults	Aged	Disabled
1975	\$556	\$228	\$455	\$1,205	\$1,276
1976	618	245	479	1,359	1,469
1977	711	270	545	1,512	1,743
1978	819	293	576	1,869	2,068
1979	951	317	661	2,094	2,500
1980	1,079	335	663	2,540	2,619
1981	1,238	366	725	2,948	3,071
1982	1,361	363	764	3,315	3,600
1983	1,503	402	802	3,545	3,891
1984	1,569	411	789	3,957	4,112
1985	1,719	452	860	4,605	4,459
1986	1,821	512	864	4,808	4,687
1987	1,949	542	999	4,975	4,974
1988	2,126	583	1,069	5,425	5,332
1989	2,318	668	1,206	5,926	5,817
1990	2,568	811	1,429	6,717	6,564
1991	2,752	902	1,555	7,617	7,005
1992	2,937	971	1,762	7,759	7,578
1993	3,042	1,013	1,813	8,168	7,706
1994	3,089	1,006	1,791	8,332	7,750
1995	3,311	1,047	1,777	8,868	8,435
1996	3,369	1,048	1,722	8,622	8,369
1997	3,568	1,111	1,809	9,538	8,832
1998	3,548	1,207	1,883	10,243	9,096
1999	3,819	1,282	2,104	11,268	9,832
2000	3,936	1,358	2,030	11,929	10,559
2001	4,084	1,454	2,067	12,691	11,310
2002	4,328	1,545	2,100	13,359	12,475
2003	4,487	1,606	2,292	13,677	13,303
2004	4,686	1,671	2,509	13,790	14,070
2005	4,764	1,729	2,585	14,402	14,536

See footnote at end of table.

Table 13.11—Continued
Medicaid Payments per Person Served (Beneficiary), by Eligibility Group:
Fiscal Years 1975-2005

Year	Total ¹	Children	Adults	Aged	Disabled
(Constant 2005 Dollars)					
1975	\$3,135	\$1,285	\$2,565	\$6,794	\$7,194
1976	3,112	1,234	2,412	6,842	7,396
1977	3,266	1,240	2,504	6,946	8,007
1978	3,456	1,236	2,431	7,887	8,727
1979	3,700	1,233	2,572	8,147	9,726
1980	3,834	1,190	2,356	9,024	9,305
1981	3,935	1,163	2,304	9,369	9,760
1982	3,880	1,035	2,178	9,451	10,264
1983	3,948	1,056	2,106	9,311	10,219
1984	3,823	1,001	1,922	9,640	10,018
1985	3,966	1,043	1,984	10,625	10,288
1986	4,048	1,138	1,921	10,688	10,419
1987	4,172	1,160	2,138	10,648	10,646
1988	4,260	1,168	2,142	10,872	10,685
1989	4,286	1,235	2,230	10,957	10,756
1990	4,409	1,393	2,454	11,533	11,271
1991	4,441	1,456	2,509	12,292	11,305
1992	4,496	1,486	2,697	11,877	11,600
1993	4,435	1,477	2,643	11,910	11,236
1994	4,325	1,409	2,508	11,667	10,852
1995	4,459	1,410	2,393	11,944	11,361
1996	4,414	1,373	2,256	11,296	10,965
1997	4,557	1,419	2,311	12,182	11,280
1998	4,424	1,505	2,348	12,774	11,343
1999	4,652	1,562	2,562	13,725	11,975
2000	4,665	1,609	2,406	14,140	12,517
2001	4,675	1,665	2,366	14,528	12,948
2002	4,829	1,724	2,343	14,905	13,919
2003	4,842	1,733	2,474	14,759	14,355
2004	4,849	1,729	2,596	14,269	14,559
2005	4,764	1,729	2,585	14,402	14,536

¹Includes all eligibility groups reported on the HCFA Form-2082 and the Medicaid Statistical Information System (MSIS), some not shown separately.

NOTES: Beginning fiscal year 1998, capitated premiums for Medicaid eligibles enrolled in managed care plans were included in this series. 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 2005 dollars.

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.