

Table 7.5
Persons Using Medicare Home Health Agency Services, Visits, Total Charges, and Program Payments, by Number of Visits: Calendar Years 2000 and 2012

Number of Visits	Persons Served		Visits		Total Charges		Program Payments	
	Number in Thousands	Percent	Number in Thousands	Percent	Amount in Thousands	Percent	Amount in Thousands	Percent
2000								
Total	2,461	100.0	90,566	100.0	\$9,488,429	100.0	\$7,215,958	100.0
1-9	767	31.2	3,903	4.3	464,863	4.9	424,383	5.9
10-19	577	23.4	8,050	8.9	936,155	9.9	790,594	11.0
20-29	318	12.9	7,644	8.4	866,230	9.1	686,760	9.5
30-39	194	7.9	6,608	7.3	733,211	7.7	562,678	7.8
40-49	129	5.2	5,715	6.3	625,562	6.6	471,194	6.5
50-99	273	11.1	18,817	20.8	1,997,487	21.1	1,477,357	20.5
100 or More	203	8.2	39,832	44.0	3,864,922	40.7	2,802,993	38.8
2012								
Total	3,460	100.0	117,669	100.0	\$18,498,219	100.0	\$18,025,554	100.0
1-9	833	24.1	4,983	4.2	902,581	4.9	1,485,062	8.2
10-19	937	27.1	13,784	11.7	2,408,935	13.0	2,944,812	16.3
20-29	530	15.3	13,271	11.3	2,241,257	12.1	2,402,587	13.3
30-39	320	9.3	11,350	9.6	1,860,082	10.1	1,974,357	11.0
40-49	216	6.2	9,844	8.4	1,587,713	8.6	1,663,777	9.2
50-99	431	12.5	29,775	25.3	4,682,522	25.3	4,513,337	25.0
100 or More	193	5.6	34,663	29.5	4,815,129	26.0	3,041,623	16.9

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 Office of Information Products & Data Analytics.