

**Table 13.16**  
**Medicaid Payments per Person Served (Beneficiary), Disabled, by Type of Service:**  
**Fiscal Years 1975-2011**

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	\$1,276	\$1,977	\$5,186	\$3,447	\$147	\$92	\$276	\$115
1976	1,469	2,072	6,940	3,882	158	114	492	135
1977	1,743	2,214	8,684	4,417	173	170	600	146
1978	2,068	2,392	11,926	5,167	183	165	893	157
1979	2,500	2,734	13,719	5,893	200	186	1,488	179
1980	2,619	2,948	16,653	5,105	234	217	652	193
1981	3,071	3,254	19,452	5,743	255	249	828	225
1982	3,600	3,672	23,065	6,732	252	272	966	246
1983	3,891	3,934	25,501	7,571	264	273	1,348	278
1984	4,112	4,196	29,353	8,530	262	315	1,813	312
1985	4,459	4,525	31,726	9,297	272	343	2,303	374
1986	4,687	4,841	34,462	10,073	277	361	2,592	418
1987	4,974	5,259	36,753	10,555	291	400	2,975	447
1988	5,332	5,502	40,910	11,370	309	453	3,768	488
1989	5,817	5,700	44,466	12,554	344	503	4,453	534
1990	6,564	6,717	50,242	14,202	366	524	5,252	617
1991	7,005	7,426	52,670	16,195	406	597	5,627	700
1992	7,578	8,314	57,775	17,548	452	658	6,159	800
1993	7,706	8,524	59,188	18,469	462	716	6,446	867
1994	7,750	8,831	52,747	19,132	465	709	7,212	936
1995	8,435	9,318	71,588	19,813	481	740	7,957	1,049
1996	8,369	9,026	69,740	20,734	491	761	9,172	1,166
1997	8,832	8,572	73,672	21,035	502	802	9,434	1,379
1998	9,096	8,519	75,819	20,864	481	828	3,211	1,625
1999	9,832	8,452	77,367	25,974	526	858	5,398	1,944
2000	10,559	8,479	80,194	26,555	534	926	5,054	2,314
2001	11,310	9,062	84,588	28,181	565	943	5,582	2,614
2002	12,475	9,454	92,789	27,766	593	988	5,713	2,851
2003	13,303	9,851	97,493	29,099	626	1,028	6,101	3,204
2004	14,070	10,467	102,054	29,888	664	1,110	6,220	3,603
2005	14,536	10,829	109,680	31,056	751	1,062	7,123	3,795
2006	13,902	10,928	113,537	31,983	724	1,100	7,543	2,647
2007	14,194	12,235	116,509	33,474	730	1,143	7,920	2,615
2008	14,843	12,403	126,644	35,075	768	1,217	8,440	2,730
2009	15,670	12,514	132,301	35,618	820	1,315	9,354	2,733
2010	15,752	12,622	131,679	37,040	818	1,404	8,609	2,697
2011	15,910	12,343	141,961	36,563	804	1,329	8,569	2,796

See footnotes at end of table.

**Table 13.16—Continued**  
**Medicaid Payments per Person Served (Beneficiary), Disabled, by Type of Service:**  
**Fiscal Years 1975-2011**

		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 2011 Dollars)								
1975	\$9,333	\$14,460	\$37,930	\$25,211	\$1,075	\$673	\$2,019	\$841
1976	9,760	13,767	46,111	25,793	1,050	757	3,269	897
1977	10,672	13,556	53,171	27,045	1,059	1,041	3,674	894
1978	11,719	13,555	67,583	29,281	1,037	935	5,060	890
1979	12,917	14,126	70,885	30,449	1,033	961	7,688	925
1980	12,157	13,684	77,299	23,696	1,086	1,007	3,026	896
1981	12,690	13,446	80,378	23,731	1,054	1,029	3,421	930
1982	13,298	13,564	85,201	24,868	931	1,005	3,568	909
1983	13,124	13,269	86,011	25,536	890	921	4,547	938
1984	12,848	13,110	91,713	26,652	819	984	5,665	975
1985	13,105	13,299	93,240	27,323	799	1,008	6,768	1,099
1986	13,020	13,448	95,731	27,982	769	1,003	7,200	1,161
1987	12,988	13,732	95,968	27,561	760	1,044	7,768	1,167
1988	12,976	13,390	99,560	27,670	752	1,102	9,170	1,188
1989	13,024	12,762	99,554	28,107	770	1,126	9,970	1,196
1990	13,530	13,846	103,570	29,276	755	1,080	10,827	1,271
1991	13,357	14,160	100,438	30,883	773	1,139	10,731	1,334
1992	13,493	14,803	102,870	31,245	805	1,172	10,966	1,424
1993	12,951	14,326	99,473	31,040	776	1,203	10,833	1,457
1994	12,504	14,249	85,106	30,869	750	1,144	11,636	1,510
1995	13,105	14,477	111,222	30,782	747	1,150	12,362	1,630
1996	12,674	13,669	105,616	31,400	744	1,152	13,890	1,766
1997	13,091	12,706	109,200	31,179	744	1,189	13,983	2,044
1998	13,253	12,412	110,469	30,399	702	1,206	4,678	2,368
1999	14,019	12,052	110,320	37,037	750	1,224	7,698	2,772
2000	14,678	11,786	111,471	36,911	743	1,288	7,024	3,217
2001	15,209	12,186	113,747	37,895	760	1,268	7,506	3,515
2002	16,346	12,388	121,580	36,381	778	1,295	7,485	3,736
2003	16,835	12,466	123,381	36,826	792	1,301	7,721	4,055
2004	17,141	12,752	124,328	36,411	809	1,353	7,578	4,389
2005	17,171	12,792	129,562	36,686	887	1,255	8,414	4,483
2006	15,919	12,514	130,007	36,623	829	1,259	8,637	3,031
2007	15,710	13,542	128,950	37,049	808	1,265	8,766	2,894
2008	15,935	13,315	135,962	37,655	824	1,306	9,061	2,931
2009	16,406	13,102	138,520	37,293	859	1,377	9,794	2,862
2010	16,048	12,859	134,155	37,736	833	1,430	8,771	2,747
2011	15,910	12,343	141,961	36,563	804	1,329	8,569	2,796

<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 health care services, U.S. Department of Commerce, Bureau of Economic Analysis (BEA), expressed in fiscal year 2011 dollars. For more information on personal consumption expenditures and price indexes, please see BEA NIPA Table 1.5.4 at <http://www.bea.gov>. ICF/MR is intermediate care facility for the mentally retarded. Beneficiaries covered under SCHIP and their payments are excluded from Medicaid. The payments reported for 2011 include last reported 2010 payments for Maine, Oklahoma, Kansas, Utah, and Idaho.

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and CHIP Services: 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 Information Products and Data Analytics.