

Table 13.13
Medicaid Payments per Person Served (Beneficiary), Children, by Type of Service:
Fiscal Years 1975-2008

| Year | Total ¹ | Inpatient | | Nursing | | Outpatient | Home | Prescribed |
|------|--------------------|-----------|--------|----------|-----------|------------|---------------------|------------|
| | | Hospital | ICF/MR | Facility | Physician | Hospital | Health ² | Drugs |
| 1975 | \$228 | \$895 | (3) | (3) | \$60 | \$40 | \$143 | \$23 |
| 1976 | 245 | 1,007 | (3) | (3) | 64 | 54 | 231 | 21 |
| 1977 | 270 | 1,128 | (3) | (3) | 66 | 86 | 281 | 21 |
| 1978 | 293 | 1,232 | (3) | (3) | 70 | 83 | 168 | 22 |
| 1979 | 317 | 1,413 | (3) | (3) | 73 | 88 | 180 | 25 |
| 1980 | 335 | 1,509 | (3) | (3) | 87 | 90 | 105 | 28 |
| 1981 | 366 | 1,671 | (3) | (3) | 90 | 115 | 94 | 29 |
| 1982 | 363 | 1,838 | (3) | (3) | 93 | 116 | 131 | 31 |
| 1983 | 402 | 2,009 | (3) | (3) | 97 | 126 | 251 | 33 |
| 1984 | 411 | 2,186 | (3) | (3) | 101 | 128 | 284 | 36 |
| 1985 | 452 | 2,347 | (3) | (3) | 104 | 135 | 339 | 39 |
| 1986 | 512 | 2,611 | (3) | (3) | 105 | 148 | 345 | 50 |
| 1987 | 542 | 2,530 | (3) | (3) | 118 | 145 | 373 | 47 |
| 1988 | 583 | 2,711 | (3) | (3) | 126 | 156 | 501 | 49 |
| 1989 | 668 | 2,874 | (3) | (3) | 138 | 170 | 639 | 53 |
| 1990 | 811 | 3,287 | (3) | (3) | 154 | 191 | 736 | 61 |
| 1991 | 902 | 3,653 | (3) | (3) | 170 | 217 | 908 | 69 |
| 1992 | 971 | 3,310 | (3) | (3) | 187 | 243 | 968 | 80 |
| 1993 | 1,013 | 3,647 | (3) | (3) | 195 | 252 | 1,032 | 88 |
| 1994 | 1,006 | 3,588 | (3) | (3) | 197 | 252 | 1,010 | 95 |
| 1995 | 1,047 | 3,819 | (3) | (3) | 200 | 252 | 1,589 | 104 |
| 1996 | 1,048 | 3,627 | (3) | (3) | 205 | 246 | 1,855 | 112 |
| 1997 | 1,111 | 4,087 | (3) | (3) | 206 | 258 | 1,730 | 120 |
| 1998 | 1,207 | 4,284 | (3) | (3) | 209 | 260 | 704 | 138 |
| 1999 | 1,282 | 3,903 | (3) | (3) | 244 | 275 | 1,064 | 161 |
| 2000 | 1,358 | 3,844 | (3) | (3) | 246 | 291 | 788 | 188 |
| 2001 | 1,454 | 4,006 | (3) | (3) | 263 | 309 | 795 | 224 |
| 2002 | 1,545 | 4,305 | (3) | (3) | 270 | 322 | 874 | 258 |
| 2003 | 1,606 | 4,364 | (3) | (3) | 285 | 339 | 852 | 298 |
| 2004 | 1,671 | 4,369 | (3) | (3) | 297 | 365 | 900 | 335 |
| 2005 | 1,729 | 4,466 | (3) | (3) | 313 | 360 | 959 | 357 |
| 2006 | 1,808 | 3,986 | (3) | (3) | 310 | 379 | 1,042 | 370 |
| 2007 | 1,951 | 4,978 | (3) | (3) | 309 | 405 | 1,098 | 409 |
| 2008 | 2,035 | 4,943 | (3) | (3) | 335 | 434 | 1,191 | 433 |

See footnotes at end of table.

Table 13.13—Continued
Medicaid Payments per Person Served (Beneficiary), Children, by Type of Service:
Fiscal Years 1975-2008

| Year | Total ¹ | Inpatient | | Nursing | | Outpatient | Home | Prescribed |
|-------------------------|--------------------|-----------|--------|----------|-----------|------------|---------------------|------------|
| | | Hospital | ICF/MR | Facility | Physician | Hospital | Health ² | Drugs |
| (Constant 2008 Dollars) | | | | | | | | |
| 1975 | \$1,593 | \$6,254 | (3) | (3) | \$419 | \$280 | \$999 | \$161 |
| 1976 | 1,517 | 6,235 | (3) | (3) | 396 | 334 | 1,430 | 130 |
| 1977 | 1,540 | 6,435 | (3) | (3) | 376 | 491 | 1,603 | 120 |
| 1978 | 1,547 | 6,505 | (3) | (3) | 370 | 438 | 887 | 116 |
| 1979 | 1,526 | 6,803 | (3) | (3) | 351 | 424 | 867 | 120 |
| 1980 | 1,449 | 6,527 | (3) | (3) | 376 | 389 | 454 | 121 |
| 1981 | 1,409 | 6,432 | (3) | (3) | 346 | 443 | 362 | 112 |
| 1982 | 1,249 | 6,325 | (3) | (3) | 320 | 399 | 451 | 107 |
| 1983 | 1,263 | 6,314 | (3) | (3) | 305 | 396 | 789 | 104 |
| 1984 | 1,197 | 6,364 | (3) | (3) | 294 | 373 | 827 | 105 |
| 1985 | 1,238 | 6,427 | (3) | (3) | 285 | 370 | 928 | 107 |
| 1986 | 1,325 | 6,757 | (3) | (3) | 272 | 383 | 893 | 129 |
| 1987 | 1,318 | 6,154 | (3) | (3) | 287 | 353 | 907 | 114 |
| 1988 | 1,322 | 6,146 | (3) | (3) | 286 | 354 | 1,136 | 111 |
| 1989 | 1,393 | 5,995 | (3) | (3) | 288 | 355 | 1,333 | 111 |
| 1990 | 1,558 | 6,313 | (3) | (3) | 297 | 368 | 1,414 | 118 |
| 1991 | 1,603 | 6,489 | (3) | (3) | 303 | 385 | 1,613 | 122 |
| 1992 | 1,611 | 5,491 | (3) | (3) | 310 | 403 | 1,606 | 133 |
| 1993 | 1,586 | 5,710 | (3) | (3) | 305 | 395 | 1,616 | 138 |
| 1994 | 1,512 | 5,394 | (3) | (3) | 296 | 379 | 1,518 | 143 |
| 1995 | 1,515 | 5,528 | (3) | (3) | 289 | 365 | 2,300 | 151 |
| 1996 | 1,479 | 5,117 | (3) | (3) | 289 | 347 | 2,617 | 158 |
| 1997 | 1,534 | 5,644 | (3) | (3) | 284 | 357 | 2,388 | 166 |
| 1998 | 1,638 | 5,815 | (3) | (3) | 284 | 352 | 956 | 188 |
| 1999 | 1,703 | 5,185 | (3) | (3) | 325 | 366 | 1,414 | 214 |
| 2000 | 1,758 | 4,978 | (3) | (3) | 319 | 377 | 1,020 | 243 |
| 2001 | 1,822 | 5,019 | (3) | (3) | 330 | 388 | 996 | 281 |
| 2002 | 1,886 | 5,254 | (3) | (3) | 330 | 393 | 1,067 | 315 |
| 2003 | 1,892 | 5,144 | (3) | (3) | 335 | 399 | 1,004 | 351 |
| 2004 | 1,895 | 4,957 | (3) | (3) | 337 | 414 | 1,021 | 380 |
| 2005 | 1,902 | 4,913 | (3) | (3) | 345 | 396 | 1,056 | 393 |
| 2006 | 1,928 | 4,251 | (3) | (3) | 331 | 404 | 1,112 | 395 |
| 2007 | 2,012 | 5,131 | (3) | (3) | 318 | 418 | 1,132 | 421 |
| 2008 | 2,035 | 4,943 | (3) | (3) | 335 | 434 | 1,191 | 433 |

¹The 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.

²Trend 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).

³Average payment per person served are not shown for these categories. The small number of users causes large fluctuations in the time series that may be misleading.

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 2008 dollars. With the release of the comprehensive revision of the national accounts in July of 2009, BEA introduced a new classification system for Personal Consumption Expenditures (PCE). With the new classification system and the release of the comprehensive revision estimates, components of medical care were changed, and the base year was updated to the year 2005. PCE health care services now exclude eye exams (currently classified in PCE goods under corrective eyeglasses and contact lenses), and net health insurance (now classified under insurance services). As a result of the PCE classification change, all PCE series were restated for the entire historical period to reflect the new PCE classification structure. ICF/MR is intermediate care facility for the mentally retarded.

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.