

Table 101

Medicaid Payments, All Eligibility Groups, by Type of Service: Fiscal Years 1975-1999

Year	Total ¹	Inpatient		Nursing		Outpatient		Home	Prescribed	
		Hospital	ICF/MR	Facility ²	Physician	Hospital	Health	Drugs	Other	
Amount in Millions										
1975	\$12,242	\$3,374	\$380	\$4,319	\$1,225	\$373	\$70	\$815	\$1,686	
1976	14,091	3,905	634	4,685	1,369	555	134	940	1,869	
1977	16,239	4,562	917	5,328	1,505	877	180	1,018	1,852	
1978	17,992	4,992	1,192	6,229	1,554	835	210	1,082	1,898	
1979	20,472	5,655	1,488	7,152	1,635	847	263	1,196	2,236	
1980	23,311	6,412	1,989	7,887	1,875	1,101	332	1,318	2,397	
1981	27,204	7,194	2,996	8,542	2,101	1,409	428	1,535	2,999	
1982	29,399	7,670	3,467	9,406	2,086	1,438	496	1,599	3,237	
1983	32,391	8,813	4,079	10,002	2,175	1,574	597	1,771	3,380	
1984	33,891	8,848	4,256	10,633	2,220	1,646	774	1,968	3,546	
1985	37,508	9,453	4,731	11,587	2,346	1,789	1,120	2,315	4,167	
1986	41,005	10,364	5,072	12,433	2,547	1,980	1,352	2,692	4,565	
1987	45,050	11,302	5,591	13,247	2,776	2,226	1,690	2,988	5,230	
1988	48,710	12,076	6,022	14,277	2,953	2,413	2,015	3,294	5,660	
1989	54,500	13,378	6,649	15,531	3,408	2,837	2,572	3,689	6,436	
1990	64,859	16,674	7,354	17,693	4,018	3,324	3,404	4,420	7,971	
1991	76,964	19,851	7,680	20,699	4,946	4,280	4,101	5,424	9,983	
1992	91,480	23,686	8,552	23,547	6,122	5,296	4,888	6,790	12,599	
1993	101,709	25,734	8,831	25,431	6,952	6,215	5,601	7,970	14,975	
1994	108,270	26,180	8,347	27,095	7,189	6,342	7,042	8,875	17,200	
1995	120,141	26,331	10,383	29,052	7,360	6,627	9,406	9,791	21,191	
1996	121,685	25,176	9,555	29,630	7,238	6,504	10,868	10,697	22,017	
1997	124,430	23,143	9,798	30,504	7,041	6,169	12,237	11,972	23,566	
1998	142,260	21,441	9,482	31,892	6,070	5,759	2,702	13,522	51,392	
1999	153,479	22,230	9,332	33,251	6,556	6,094	2,906	16,612	56,498	

See footnotes at end of table.

Table 101—Continued

Medicaid Payments, All Eligibility Groups, by Type of Service: Fiscal Years 1975-1999

Year	Total ¹	Inpatient		Nursing		Outpatient	Home	Prescribed	
		Hospital	ICF/MR	Facility ²	Physician	Hospital	Health	Drugs	Other
					Percent				
1975	100.0	27.6	3.1	35.3	10.0	3.0	0.6	6.7	13.8
1976	100.0	27.7	4.5	33.2	9.7	3.9	1.0	6.7	13.3
1977	100.0	28.1	5.6	32.8	9.3	5.4	1.1	6.3	11.4
1978	100.0	27.7	6.6	34.6	8.6	4.6	1.2	6.0	10.5
1979	100.0	27.6	7.3	34.9	8.0	4.1	1.3	5.8	10.9
1980	100.0	27.5	8.5	33.8	8.0	4.7	1.4	5.7	10.3
1981	100.0	26.4	11.0	31.4	7.7	5.2	1.6	5.6	11.0
1982	100.0	26.1	11.8	32.0	7.1	4.9	1.7	5.4	11.0
1983	100.0	27.2	12.6	30.9	6.7	4.9	1.8	5.5	10.4
1984	100.0	26.1	12.6	31.4	6.6	4.9	2.3	5.8	10.5
1985	100.0	25.2	12.6	30.9	6.3	4.8	3.0	6.2	11.1
1986	100.0	25.3	12.4	30.3	6.2	4.8	3.3	6.6	11.1
1987	100.0	25.1	12.4	29.4	6.2	4.9	3.8	6.6	11.6
1988	100.0	24.8	12.4	29.3	6.1	5.0	4.1	6.8	11.6
1989	100.0	24.5	12.2	28.5	6.3	5.2	4.7	6.8	11.8
1990	100.0	25.7	11.3	27.3	6.2	5.1	5.2	6.8	12.3
1991	100.0	25.8	10.0	26.9	6.4	5.6	5.3	7.0	13.0
1992	100.0	25.9	9.3	25.7	6.7	5.8	5.3	7.4	13.8
1993	100.0	25.3	8.7	25.0	6.8	6.1	5.5	7.8	14.7
1994	100.0	24.2	7.7	25.0	6.6	5.9	6.5	8.2	15.9
1995	100.0	21.9	8.6	24.2	6.1	5.5	7.8	8.1	17.6
1996	100.0	20.7	7.9	24.3	5.9	5.3	8.9	8.8	18.1
1997	100.0	18.6	7.9	24.5	5.7	5.0	9.8	9.6	18.9
1998	100.0	15.1	6.7	22.4	4.3	4.0	1.9	9.5	36.1
1999	100.0	14.5	6.1	21.7	4.3	4.0	1.9	10.8	36.8

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.

²Data shown include services shown separately in earlier years as skilled nursing facility (SNF) and intermediate care facilities, other than for the mentally retarded (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.

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 other and of the total payment categories (\$19.3 billion for premiums in 1998 and \$21.5 billion in 1999). Trends in home health agency program expenditures are not strictly comparable to 1997 and prior because of changes in redefining selected home health services as home and community-based waiver services in 1998 and reclassified as other in 1999.

SOURCES: Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations: HCFA Form-2082 (Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services); MSIS; data development by the Office of Research, Development, and Information.