Table 55 Medicare Supplementary Medical Insurance Disbursements for Benefits, by Type of Provider: Selected Calendar Years 1970-1999

Type of Provider	1970	1975	1983	1985	1986	1988	1990	
4				Dollars in Millions				
Total Old Format ¹	\$1,975	\$4,273	\$18,106	\$22,947	\$26,239	\$33,970	\$42,468	
Physicians and Suppliers ²	1,790	3,416	14,062	17,312	19,213	24,372	29,609	
Outpatient Facilities ³	114	643	3,385	4,319	5,157	6,549	8,482	
Managed Care ⁴	26	80	410	720	1,113	2,019	2,827	
Home Health Agencies ⁵	34	95	25	38	31	47	74	
Independent Laboratories	11	39	224	558	725	983	1,476	
Total New Format ¹								
Physician Fee Schedule								
Durable Medical Equipment								
Carrier Lab								
Other Carrier								
Hospital								
Home Health Agencies ⁵								
Intermediary Lab								
Other Intermediary								
Managed Care								
	Percent Distribution							
Total Old Format ¹	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Physicians and Suppliers ²	90.6	79.9	77.7	75.4	73.2	71.7	69.7	
Outpatient Facilities ³	5.8	15.0	18.7	18.8	19.7	19.3	20.0	
	1.3	1.9	2.3	3.1	4.2	5.9	6.7	
Home Health Agencies ⁵	1.7	2.2	0.1	0.2	0.1	0.1	0.2	
Independent Laboratories	0.6	0.9	1.2	2.4	2.8	2.9	3.5	
Total New Format ¹								
Physician Fee Schedule								
Durable Medical Equipment								
Carrier Lab								
Other Carrier								
Hospital								
Home Health Agencies ⁵								
Intermediary Lab								
Other Intermediary								
Managed Care								

Represents disbursements accrued on a cash-flow basis. Excludes disbursements for program administration and the net cost of private health insurance, government public health activities, and research and construction.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of the Actuary, Division of Medicare and Medicaid Cost Estimates; data development by the Office of Research, Development, and Information.

²Excludes disbursements for health maintenance organizations, competitive medical plans, and other prepaid health plans.

³Includes disbursements for hospital outpatient facilities, end stage renal disease freestanding facilities, rural health clinics, outpatient rehabilitation facilities, and ambulatory surgical centers.

^{**}All cludes disbursements for health maintenance organizations, competitive medical plans, and other prepaid health plans.

**As a result of the Omnibus Budget Reconciliation Act 1980 legislation, most home health agency services were covered under the hospital insurance program beginning in 1981. The Balanced Budget Act of 1997 provided that home health services unassociated with a hospital or skilled nursing facility stay would gradually be transferred from Part A (HI) to Part B (SMI).

Table 55—Continued

Medicare Supplementary Medical Insurance Disbursements for Benefits, by Type of Provider:

Selected Calendar Years 1970-1999

1991	1992	1993	1995	1997	1998	1999					
1991	1992		ollars in Millions		1990	1999					
¢47.226	¢40.260										
\$47,336	\$49,260	\$53,979	\$64,972	\$72,757							
31,915	32,480	34,589	40,474	42,411							
9,925	10,702	12,632	15,625	17,416							
3,804	4,124	4,632	6,608	10,980							
3,60 4 65	4,124 78	4,032 120	200	228							
1,627	1,876	2,006	2,065	1,722							
\$47,336	\$49,260	\$53,979	\$64,972	\$72,757	\$76,673	\$81,333					
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26,002	25,325	26,329	31,660	31,898	32,449	33,348					
2,109	2,367	2,805	3,689	4,236	4,038	4,286					
2,863	2,862	2,972	2,807	2,385	2,087	2,077					
3,345	3,624	4,017	4,530	5,586	5,940	6,451					
5,946	6,479	7,490	8,668	9,373	8,738	8,801					
92	116	148	229	239	160	1,244					
1,026	1,232	1,398	1,448	1,503	1,541	1,674					
2,680	3,126	4,148	5,331	6,575	6,382	5,750					
3,275	4,128	4,672	6,610	10,962	15,338	17,702					
0,270	7,120	4,072	0,010	10,002	10,000	17,702					
	Percent Distribution										
100.0	100.0	100.0	100.0	100.0							
67.4	65.9	64.1	62.3	58.3							
21.0	21.7	23.4	24.0	23.9							
8.0	8.4	8.6	10.2	15.1							
0.1	0.2	0.2	0.3	0.3							
3.4	3.8	3.7	3.2	2.4							
100.0	100.0	100.0	100.0	100.0	100.0	100.0					
54.9	51.4	48.8	48.7	43.8	42.3	41.0					
4.5	4.8	5.2	5.7	5.8	5.3	5.3					
6.0	5.8	5.5	4.3	3.3	2.7	2.6					
7.1	7.4	7.4	7.0	7.7	7.7	7.9					
12.6	13.2	13.9	13.3	12.9	11.4	10.8					
0.2	0.2	0.3	0.4	0.3	0.2	1.5					
2.2	2.5	2.6	2.2	2.1	2.0	2.1					
5.7	6.3	7.7	8.2	9.0	8.3	7.1					
6.9	8.4	8.7	10.2	15.1	20.0	21.8					