	1975	1980	1985	1990	1995	1999	2000	2001	2002	2003	2004
Enrollment (person-years)	Number in millions										
Total	NA	NA	NA	22.9	33.4	32.8	34.0	37.7	39.9	41.4	42.4
Aged	NA	NA	NA	3.1	3.7	3.8	3.9	4.0	4.2	4.3	4.3
Blind/Disabled	NA	NA	NA	3.8	5.8	6.6	6.8	7.2	7.5	7.8	7.9
Children	NA	NA	NA	10.7	16.5	16.3	16.7	17.5	18.4	19.1	19.6
Adults	NA	NA	NA	4.9	6.7	6.2	6.7	8.9	9.8	10.3	10.6
Other Title XIX	NA	NA	NA	0.5	0.6	NA	NA	NA	NA	NA	NA
Beneficiaries	Number in millions										
Total	22.4	21.6	21.8	25.3	36.3	42.9	44.5	48.4	51.4	53.3	54.6
Aged	3.7	3.4	3.1	3.2	4.2	4.5	4.6	4.8	4.9	5.0	5.1
Blind/Disabled	2.4	2.8	3.0	3.7	6.0	7.3	7.5	8.0	8.3	8.6	8.8
Children	9.8	9.3	9.8	11.2	17.6	21.3	22.0	23.7	25.0	25.9	26.6
Adults	4.7	4.8	5.5	6.0	7.8	9.7	10.4	12.0	13.2	13.8	14.2
Other Title XIX	1.9	1.5	1.2	1.1	0.6	NA	NA	NA	NA	NA	NA

## Medicaid Enrollment and Beneficiaries Selected Fiscal Years

NOTES: Beneficiaries are enrollees on behalf of whom at least one payment is made during the fiscal year. Prior to 1991, beneficiary categories do not add to total because beneficiaries could be reported in more than one category. Totals after 1990 may not add due to rounding. Aged and Blind/Disabled eligibility groups include Qualified Medicare Beneficiaries (QMB) and Specified Low-Income Medicare Beneficiaries (SLMB). Children and Adult groups include both AFDC/TANF and poverty level recipients who are not disabled. Beneficiary data for fiscal years 1975-1995 are historical data from OIS as reported by states. Enrollment and beneficiary projections for fiscal years 1999-2004 were prepared by the Office of the Actuary for the President's FY 2004 budget. FY 1998-2004 do not include the State Children's Health Insurance Program (SCHIP).

In 1997, the Other Title XIX category was dropped and the enrollees therein were subsumed in the remaining categories. In 1998, Medicaid beneficiaries were redefined to include enrollees on behalf of whom a capitation payment is paid. The large increase between 1995 and 1999 is primarily the result of this change of definition.

SOURCES: CMS/CMSO/OIS/OACT

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