



Health, United States Spotlight

Health Care Expenditures & Payers



September 2016

ABOUT HEALTH, UNITED STATES

Health, United States is the annual report on health, produced by the National Center for Health Statistics and submitted by the Secretary of the Dept. of Health and Human Services to the President and Congress.

The report uses data from government sources as well as private and global sources to present an overview of national health trends. This infographic features indicators from the report's Health Care Expenditures & Payers subject area.

For more information, visit the Health, United States website at: <http://www.cdc.gov/nchs/hus.htm>.

Four Subject Areas of Health, United States

- Health status & determinants
- Health care resources
- Utilization of health resources
- Health care expenditures & payers

MEDICAID COVERAGE

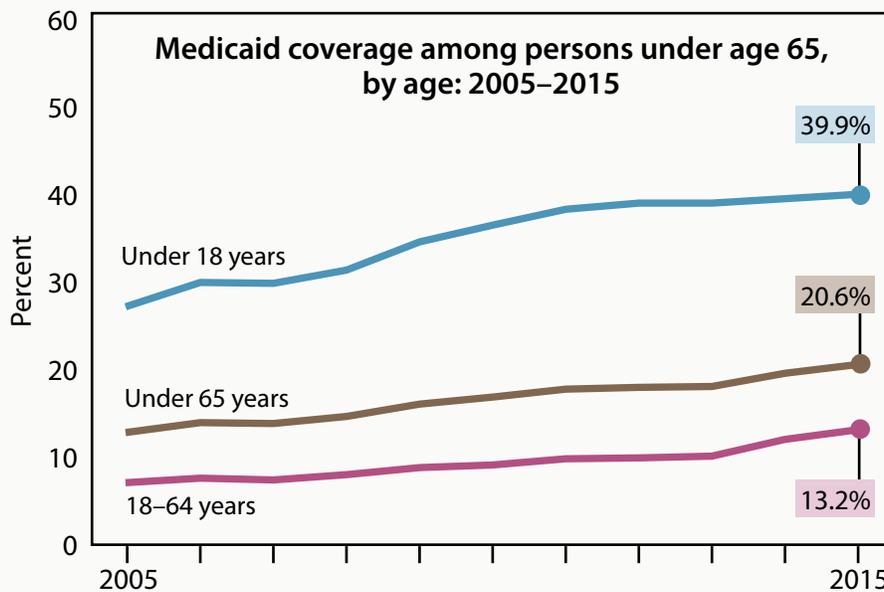
ABOUT THE DATA

Source: NCHS/National Health Interview Survey (NHIS)

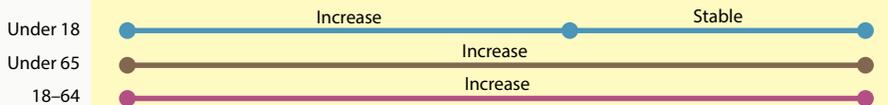
Respondents: Noninstitutionalized civilians.

Methodology: Coverage for adults was respondent-reported. Coverage for children was reported by a parent or a knowledgeable adult.

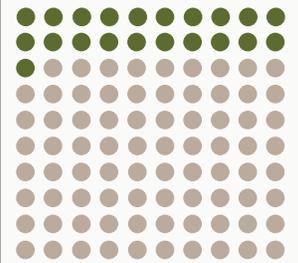
- Notes:
- Medicaid includes coverage by Medicaid, state-sponsored plans, or the Children's Health Insurance Program.
 - Type of coverage represents coverage at the time of interview.



How has Medicaid coverage among persons under 65 changed from 2005 to 2015?

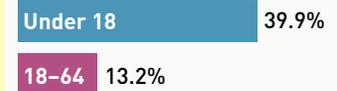


In 2015, approximately **21 OUT OF 100** people under age 65 had Medicaid coverage.

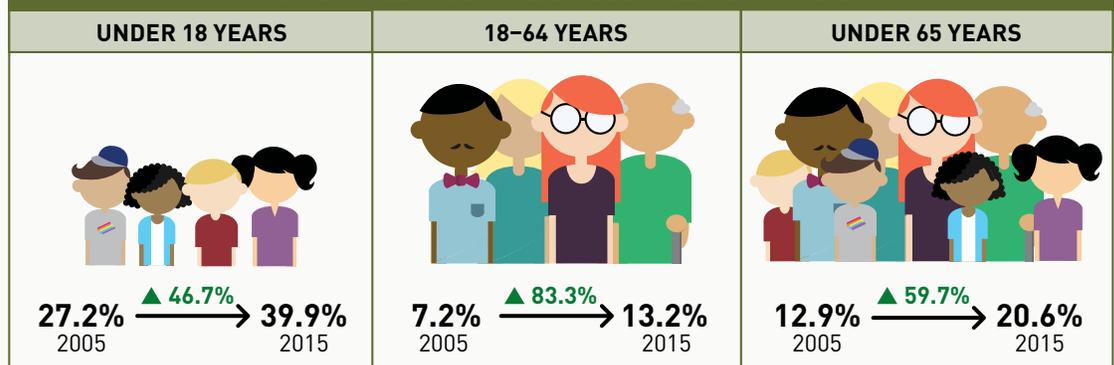


= 55.4 MILLION PEOPLE under 65 with Medicaid

Children under age 18 were **3 TIMES MORE LIKELY** than adults aged 18-64 to have Medicaid coverage in 2015.



CHANGE IN MEDICAID COVERAGE BETWEEN 2005 AND 2015



MEDICARE MANAGED CARE

ABOUT THE DATA

Source: Centers for Medicare & Medicaid Services (CMS)

Methodology: Data are derived from the CMS Enrollment Database. Enrollment data include all persons enrolled in the Medicare program as of July 1.

Note: State data are based on the residence of the Medicare beneficiary.

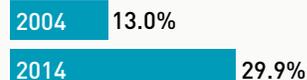
What is MEDICARE MANAGED CARE?

Medicare managed care plans **contract with a network of providers** to administer care to, and coordinate care for, managed care enrollees. Plan types include health maintenance organizations (HMOs) and preferred provider organizations (PPOs).

In 2014, 3 out of every 10 Medicare enrollees were in **managed care**.

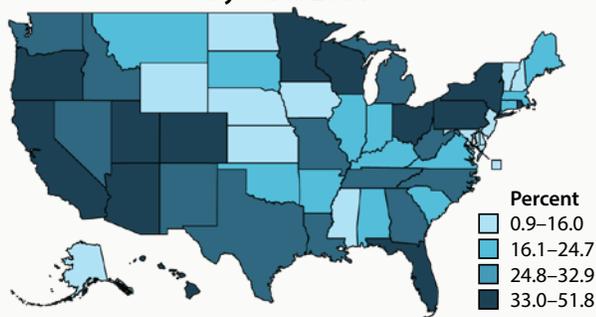


The % of Medicare enrollees in **managed care** was 2.3 times greater in 2014 than in 2004.

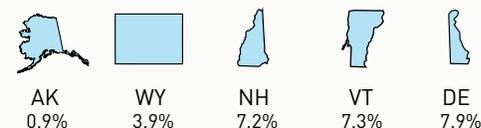


MEDICARE MANAGED CARE is optional. Enrollment reflects managed care availability in each state as well as the enrollee's choice to enroll.

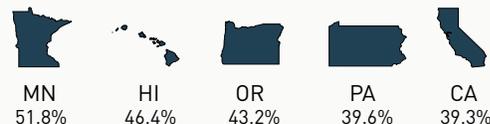
Medicare enrollees in managed care, by state: 2014



Lowest % of Medicare enrollees in managed care



Highest % of Medicare enrollees in managed care



PRESCRIPTION (RX) DRUG SPENDING

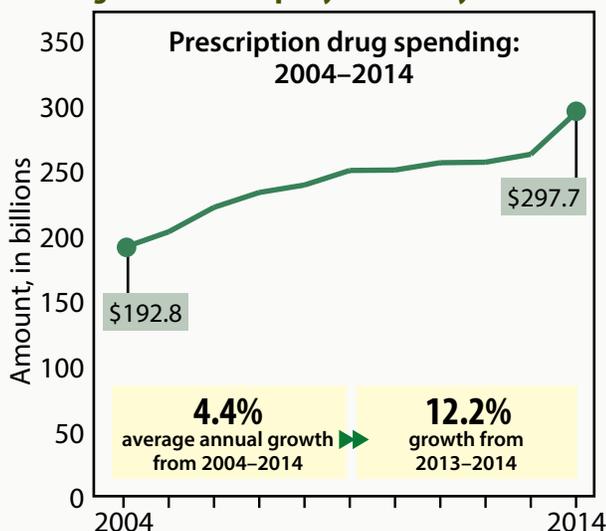
ABOUT THE DATA

Source: Centers for Medicare & Medicaid Services (CMS)/National Health Expenditure Accounts (NHEA)

Notes:

- **Medicaid** includes the Children's Health Insurance Program.
- **Other** includes the Department of Defense, Department of Veteran Affairs, and third party payers and programs (e.g., worksite health care, school health).

PRESCRIPTION DRUG SPENDING has grown more rapidly in recent years.



How have FUNDING SOURCES changed for Rx drug spending between 2004 and 2014?

SOURCE	2004	2014
Private	49.3%	42.8% ▼
Medicaid	19.1%	9.7% ▼
Medicare	1.7%	29.0% ▲
Out-of-pocket	25.0%	15.0% ▼
Other	4.9%	3.5% ▼
All sources	100.0%	100.0%

For additional information on *Health, United States*, see <http://www.cdc.gov/nchs/hus.htm>.

For further information about NCHS and its programs, see <http://www.cdc.gov/nchs>.