

**Table 149. Medicare Benefits by Type of Provider: 1990 to 2010**

[In millions of dollars (65,721 represents \$65,721,000,000). For years ending Sept. 30. Distribution of benefits by type is estimated and subject to change. The Medicare program has two components: Hospital Insurance (HI) or Medicare Part A and Supplementary Medical Insurance (SMI) consisting of Medicare Part B (medical insurance) and Part D (prescription drug plans). See text in this section for details. See footnote 1, Table 144, for 2008 data changes]

Type of provider	1990	1995	2000	2005	2007	2008	2009	2010
<b>Hospital insurance benefits</b>								
<b>(Part A), total</b> .....	<b>65,721</b>	<b>113,395</b>	<b>125,992</b>	<b>181,934</b>	<b>203,990</b>	<b>217,791</b>	<b>234,302</b>	<b>245,180</b>
Inpatient hospital .....	57,012	81,095	86,561	122,718	125,533	128,851	132,768	137,834
Skilled nursing facility .....	2,761	8,684	10,269	18,644	22,432	24,117	25,826	27,047
Home health agency .....	3,295	15,715	4,880	5,892	6,313	6,537	6,942	7,138
Hospice .....	318	1,854	2,818	7,678	10,482	11,137	11,977	12,910
Managed care .....	2,335	6,047	21,463	27,001	39,230	47,150	56,789	60,253
<b>Supplementary medical insurance benefits (Part B), total</b> .....								
<b>41,498</b>	<b>63,490</b>	<b>88,876</b>	<b>147,449</b>	<b>172,698</b>	<b>183,289</b>	<b>200,169</b>	<b>204,885</b>	
Physician fee schedule .....	(NA)	31,110	35,958	57,211	58,780	59,396	62,462	63,442
Durable medical equipment .....	(NA)	3,576	4,577	7,894	8,188	8,454	8,209	8,131
Carrier lab <sup>1</sup> .....	(NA)	2,819	2,194	3,521	4,050	4,141	4,639	4,924
Other carrier <sup>2</sup> .....	(NA)	4,513	7,154	15,195	15,698	16,390	17,269	17,199
Hospital <sup>3</sup> .....	(NA)	8,448	8,516	18,974	22,882	23,435	26,447	26,800
Home health .....	(NA)	223	4,281	6,750	9,053	10,100	11,326	12,087
Intermediary lab <sup>4</sup> .....	(NA)	1,437	1,748	2,820	3,019	2,912	3,274	3,235
Other intermediary <sup>5</sup> .....	(NA)	5,110	6,099	11,350	13,305	12,775	14,375	14,330
Managed care .....	(NA)	6,253	18,348	23,735	37,724	45,686	52,167	54,739
<b>Supplementary medical insurance benefits (Part D), total</b> <sup>6</sup> .....	<b>(X)</b>	<b>(X)</b>	<b>(X)</b>	<b>1,198</b>	<b>51,341</b>	<b>46,728</b>	<b>56,559</b>	<b>63,525</b>

NA Not available. X Not applicable. <sup>1</sup> Lab services paid under the lab fee schedule performed in a physician's office lab or an independent lab. <sup>2</sup> Includes free-standing ambulatory surgical centers facility costs, ambulance, and supplies. <sup>3</sup> Includes the hospital facility costs for Medicare Part B services which are predominantly in the outpatient department. The physician reimbursement associated with these services is included on the "Physician Fee Schedule" line. <sup>4</sup> Lab fee services paid under the lab fee schedule performed in a hospital outpatient department. <sup>5</sup> Includes End Stage Renal Disease (ESRD) free-standing dialysis facility payments and payments to rural health clinics and federally qualified health centers. <sup>6</sup> Starting with 2006, Part D provides subsidized access to drug insurance coverage on a voluntary basis for all beneficiaries and premium and cost-sharing subsidies for low-income enrollees. Benefits prior to 2006 were for transitional assistance to beneficiaries with low income.

Source: U.S. Centers for Medicare and Medicaid Services, unpublished data. See also <<http://www.cms.hhs.gov/ReportsTrustFunds/>>.

**Table 150. Medicare Insurance Trust Funds: 1990 to 2010**

[In billions of dollars (126.3 represents \$126,300,000,000). SMI is Supplemental Medical Insurance. See headnote, Table 149]

Type of trust fund	1990	1995	2000	2005	2006	2007	2008	2009	2010
<b>TOTAL MEDICARE</b>									
Total income .....	126.3	175.3	257.1	357.5	437.0	462.1	480.8	508.2	486.0
Total expenditures .....	111.0	184.2	221.8	336.4	408.3	431.7	468.1	509.0	522.8
Assets, end of year .....	114.4	143.4	221.5	309.8	338.5	368.9	381.6	380.8	344.0
<b>HOSPITAL INSURANCE (Part A)</b>									
Net contribution income <sup>1</sup> .....	72.1	103.3	154.5	182.6	194.3	205.4	213.5	206.3	199.3
Interest received <sup>2</sup> .....	8.5	10.8	11.7	16.1	16.4	17.4	16.3	17.0	15.9
Benefit payments <sup>3</sup> .....	66.2	116.4	126.8	180.0	189.0	200.2	232.3	239.3	244.5
Assets, end of year .....	98.9	130.3	177.5	285.8	305.4	326.0	321.3	304.2	271.9
<b>SMI (Part B)</b>									
Net premium income .....	11.3	19.7	20.6	37.5	42.9	46.8	50.2	56.0	52.0
Transfers from general revenue .....	33.0	39.0	65.9	118.1	132.7	139.6	146.8	162.8	153.5
Interest received <sup>2</sup> .....	1.6	1.6	3.5	1.4	1.8	2.2	3.5	3.0	3.1
Benefit payments <sup>3</sup> .....	42.5	65.0	88.9	149.9	166.2	176.4	180.3	202.6	209.7
Assets, end of year .....	15.5	13.1	44.0	24.0	32.3	42.1	59.4	75.5	71.4
<b>SMI (Part D)</b>									
Net premium income .....	(X)	(X)	(X)	—	3.5	4.0	5.0	6.3	6.5
Transfers from general revenue <sup>4</sup> .....	(X)	(X)	(X)	1.1	39.2	38.8	37.3	47.1	51.1
Interest received .....	(X)	(X)	(X)	—	—	—	—	—	—
Benefit payments <sup>4</sup> .....	(X)	(X)	(X)	1.1	47.0	48.8	49.0	60.5	61.7
Assets, end of year .....	(X)	(X)	(X)	—	0.8	0.8	0.9	1.1	0.7

— Represents zero. X Not applicable. <sup>1</sup> Includes income from taxation of benefits beginning in 1994. Includes premiums from aged ineligible enrollees in Hospital Insurance (HI). <sup>2</sup> Includes recoveries of amounts reimbursed from the trust fund. <sup>3</sup> Beginning 1998, monies transferred to the SMI trust fund for home health agency costs, as provided for by P.L. 105-33, are included in HI benefit payments but excluded from SMI benefit payments. <sup>4</sup> The amount for 2005 includes amounts transferred for transitional assistance for Part D of Medicare

Source: U.S. Centers for Medicare and Medicaid Services, 2011 Annual Report of the Board of Trustees of the Federal Hospital Insurance and Federal Supplementary Medical Insurance Trust Funds. See also <<http://www.cms.hhs.gov/ReportsTrustFunds/>>.