



# APPENDIX 1

Supplementary Data Tables  
Trends in the Overall  
Health Care Market

Table 1.1: Total National Health Expenditures, 1980 – 2012<sup>(1)</sup>

Year	Total National Health Expenditures				Prescription Drugs Total	
	Total		Per Capita		Nominal Dollars (billions)	Real Dollars <sup>(2)</sup> (billions)
	Nominal Dollars (billions)	Real Dollars <sup>(2)</sup> (billions)	Nominal Dollars	Real Dollars <sup>(2)</sup>		
1980	\$255.8	\$255.8	\$1,112	\$1,112	\$12.0	\$12.0
1981	\$296.7	\$269.0	\$1,274	\$1,155	\$13.4	\$12.1
1982	\$334.7	\$285.8	\$1,424	\$1,216	\$15.0	\$12.8
1983	\$369.0	\$305.3	\$1,557	\$1,288	\$17.3	\$14.3
1984	\$406.5	\$322.4	\$1,701	\$1,349	\$19.6	\$15.6
1985	\$444.6	\$340.5	\$1,837	\$1,407	\$21.8	\$16.7
1986	\$476.9	\$358.5	\$1,954	\$1,469	\$24.3	\$18.3
1987	\$519.1	\$376.5	\$2,110	\$1,531	\$26.9	\$19.5
1988	\$581.7	\$405.2	\$2,346	\$1,634	\$30.6	\$21.3
1989	\$647.5	\$430.3	\$2,580	\$1,714	\$34.8	\$23.1
1990	\$724.3	\$456.6	\$2,851	\$1,798	\$40.3	\$25.4
1991	\$791.5	\$478.9	\$3,080	\$1,863	\$44.4	\$26.9
1992	\$857.9	\$503.9	\$3,300	\$1,938	\$47.0	\$27.6
1993	\$921.5	\$525.5	\$3,504	\$1,998	\$49.6	\$28.3
1994	\$972.7	\$540.8	\$3,657	\$2,033	\$53.1	\$29.5
1995	\$1,027.4	\$555.5	\$3,819	\$2,065	\$59.8	\$32.3
1996	\$1,081.8	\$568.2	\$3,992	\$2,097	\$68.1	\$35.8
1997	\$1,142.6	\$586.6	\$4,170	\$2,141	\$77.6	\$39.9
1998	\$1,208.9	\$611.1	\$4,364	\$2,206	\$88.4	\$44.7
1999	\$1,286.5	\$636.3	\$4,595	\$2,272	\$104.7	\$51.8
2000	\$1,377.2	\$659.0	\$4,884	\$2,337	\$120.9	\$57.8
2001	\$1,493.4	\$694.8	\$5,240	\$2,438	\$138.7	\$64.5
2002	\$1,638.0	\$750.2	\$5,687	\$2,605	\$158.2	\$72.4
2003	\$1,778.0	\$796.2	\$6,131	\$2,746	\$177.0	\$79.3
2004	\$1,905.7	\$831.3	\$6,504	\$2,837	\$193.0	\$84.2
2005	\$2,035.4	\$858.8	\$6,900	\$2,911	\$205.3	\$86.6
2006	\$2,166.7	\$885.6	\$7,271	\$2,972	\$224.5	\$91.7
2007	\$2,302.9	\$915.2	\$7,651	\$3,041	\$235.9	\$93.8
2008	\$2,411.7	\$923.0	\$7,933	\$3,036	\$242.6	\$92.8
2009	\$2,504.2	\$961.8	\$8,157	\$3,133	\$254.5	\$97.8
2010	\$2,599.0	\$982.1	\$8,411	\$3,178	\$255.7	\$96.6
2011	\$2,692.8	\$986.4	\$8,658	\$3,172	\$262.2	\$96.0
2012	\$2,793.4	\$1002.5	\$8,925	\$3,203	\$263.3	\$94.5

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released January 7, 2014.

<sup>(1)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

<sup>(2)</sup> Expressed in 1980 dollars; adjusted using the overall Consumer Price Index for Urban Consumers.

Data for Charts 1.1, 1.3, and 1.10

Table 1.2: Percent Change in National Expenditures for Selected Health Services and Supplies, 2002 – 2012<sup>(1)</sup>

Year	Hospital Care	Prescription Drugs	Admin. & Net Cost of Private Health Insurance	Home Health Care	Nursing Home Care
2002	8.3%	14.0%	24.4%	6.4%	4.1%
2003	8.2%	11.9%	17.7%	8.7%	6.2%
2004	7.6%	9.0%	7.0%	10.1%	5.4%
2005	7.7%	6.4%	7.0%	11.2%	6.3%
2006	7.0%	9.3%	9.8%	8.0%	4.3%
2007	6.2%	5.1%	3.8%	9.9%	7.8%
2008	5.3%	2.8%	-1.9%	7.8%	4.9%
2009	6.6%	4.9%	-1.3%	8.0%	4.5%
2010	4.6%	0.4%	9.0%	5.8%	3.2%
2011	3.5%	2.5%	5.0%	4.1%	4.3%
2012	4.9%	0.4%	4.0%	5.1%	1.6%

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released January 7, 2014.

<sup>(1)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

Data for Chart 1.7

Table 1.3: National Health Expenditures,<sup>(1)</sup> 1980 – 2022<sup>(2)</sup>

Year	Expenditures (billions)
1980	\$255.8
1990	\$724.3
2000	\$1,377.2
2001	\$1,493.4
2002	\$1,638.0
2003	\$1,775.4
2004	\$1,901.6
2005	\$2,030.5
2006	\$2,163.3
2007	\$2,298.3
2008	\$2,406.6
2009	\$2,501.2
2010	\$2,600.0
2011	\$2,700.7
2012	\$2,806.6
2013	\$2,914.7
2014	\$3,093.2
2015	\$3,273.4
2016	\$3,458.3
2017	\$3,660.4
2018	\$3,889.1
2019	\$4,142.4
2020	\$4,416.2
2021	\$4,702.0
2022	\$5,008.8

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released September 2013.

<sup>(1)</sup> Years 2012 – 2022 are projections.

<sup>(2)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

Data for Chart 1.8



Table 1.4: Consumer Out-of-pocket Payments for National Health Expenditures, 1992– 2012<sup>(1)</sup>

Year	Payment (billions)
1992	\$144.2
1993	\$145.3
1994	\$143.5
1995	\$146.4
1996	\$152.2
1997	\$163.8
1998	\$179.4
1999	\$190.4
2000	\$201.7
2001	\$209.0
2002	\$221.9
2003	\$238.2
2004	\$251.7
2005	\$267.3
2006	\$277.3
2007	\$293.6
2008	\$300.7
2009	\$300.7
2010	\$305.6
2011	\$316.1
2012	\$328.2

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released January 7, 2014.

<sup>(1)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

Data for Chart 1.9



Table 1.5: Growth in Total Prescription Drug Spending as a Percentage of Total Growth in National Health Expenditures, 1992 – 2012<sup>(1)</sup>

Year	Percentage
1992	3.95%
1993	4.07%
1994	6.78%
1995	12.33%
1996	15.31%
1997	15.61%
1998	16.30%
1999	21.04%
2000	17.81%
2001	15.32%
2002	13.47%
2003	13.45%
2004	12.50%
2005	9.52%
2006	14.59%
2007	8.42%
2008	6.07%
2009	12.96%
2010	1.18%
2011	6.95%
2012	1.11%

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released January 7, 2014.

<sup>(1)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

Data for Chart 1.11

Table 1.6: Consumer Out-of-pocket Spending vs. Private Health Insurance Spending for Prescription Drugs, 1992 – 2012<sup>(1)</sup>

Year	Out-of-pocket Payment (billions)	Private Health Insurance (billions)
1992	\$23.663	\$14.786
1993	\$23.891	\$16.214
1994	\$23.282	\$19.146
1995	\$23.351	\$24.376
1996	\$24.468	\$29.942
1997	\$25.986	\$35.922
1998	\$27.782	\$42.335
1999	\$30.852	\$51.913
2000	\$33.934	\$60.702
2001	\$36.625	\$70.634
2002	\$40.947	\$79.924
2003	\$45.644	\$87.239
2004	\$48.304	\$95.158
2005	\$51.509	\$102.207
2006	\$51.363	\$102.061
2007	\$52.052	\$107.421
2008	\$49.830	\$110.896
2009	\$49.450	\$117.985
2010	\$45.993	\$118.528
2011	\$46.926	\$119.488
2012	\$46.834	\$117.027

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released January 7, 2014.

<sup>(1)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

Data for Chart 1.12



Table 1.7: Number and Percent Uninsured, 1992 – 2012

Year	Number (millions)	Percent
1992	38.6	15.0%
1993	39.7	15.3%
1994	39.7	15.2%
1995	40.6	15.4%
1996	41.7	15.6%
1997	43.4	16.1%
1998	44.3	16.3%
1999	40.2	14.5%
2000	39.8	14.2%
2001	41.2	14.6%
2002	43.6	15.2%
2003	45.0	15.6%
2004	43.5	14.9%
2005	44.8	15.3%
2006	47.0	15.8%
2007	45.7	15.3%
2008	46.3	15.4%
2009	49.0	16.7%
2010	49.9	16.3%
2011	48.6	15.7%
2012	48.0	15.4%

Source: US Census Bureau, Income, Poverty, and Health Insurance Coverage in the United States: 2012. Data released September 2013. Table 7. People Without Health Insurance Coverage by Selected Characteristics: 2011 and 2012.  
 Link: <http://www.census.gov/prod/2013pubs/p60-245.pdf>.

Data for Chart 1.15



Table 1.8: Average Percent Uninsured by State, 2010 – 2012

State	Average Percent Uninsured	State	Average Percent Uninsured
Alabama	14.4	Montana	18.2
Alaska	18.4	Nebraska	13.0
Arizona	18.2	Nevada	22.5
Arkansas	18.1	New Hampshire	11.6
California	19.0	New Jersey	15.0
Colorado	14.1	New Mexico	21.0
Connecticut	9.3	New York	12.9
Delaware	10.7	North Carolina	16.9
District of Columbia	9.7	North Dakota	11.3
Florida	20.7	Ohio	13.2
Georgia	19.3	Oklahoma	17.1
Hawaii	7.8	Oregon	15.1
Idaho	17.3	Pennsylvania	11.2
Illinois	14.4	Rhode Island	12.0
Indiana	12.9	South Carolina	17.9
Iowa	10.8	South Dakota	13.5
Kansas	12.9	Tennessee	13.9
Kentucky	15.0	Texas	24.3
Louisiana	19.7	Utah	14.3
Maine	9.6	Vermont	8.3
Maryland	13.0	Virginia	13.3
Massachusetts	4.3	Washington	14.0
Michigan	12.1	West Virginia	14.3
Minnesota	9.1	Wisconsin	9.8
Mississippi	17.5	Wyoming	16.8
Missouri	14.0		

Source: US Census Bureau, Income, Poverty, and Health Insurance Coverage in the United States: 2012 Data released September 2013. Link: <http://www.census.gov/hhes/www/hlthins/data/incpovhlth/2012/state.xls>.

Data for Chart 1.16

Table 1.9: Medicaid Enrollees,<sup>(1)</sup> 1990, 1995, 2000 – 2013

Year	Aged (millions)	Blind/Disabled (millions)	Children (millions)	Adults (millions)	Other Title XIX <sup>(2)</sup> (millions)	Total (millions)
1990	3.2	3.7	11.2	6.0	1.1	25.3
1995	4.2	6.0	17.6	7.8	0.6	36.3
2000	4.6	7.5	22.0	10.4		44.5
2001	4.8	8.0	23.7	12.0		48.4
2002	4.5	7.9	25.5	12.9		50.9
2003	4.8	8.3	25.3	14.0		52.4
2004	5.1	8.9	27.8	15.4		57.3
2005	5.4	9.4	28.3	15.5		58.6
2006	5.5	9.8	29.5	16.0		60.9
2007	5.6	9.6	29.5	15.7		60.5
2008	5.6	9.6	30.6	16.3		62.1
2009	5.8	10.0	34.0	18.0		67.8
2010	5.5	10.4	33.5	18.3		67.7
2011	5.0	11.0	33.0	18.0		67.0
2012	6.0	11.0	34.0	20.0		71.0
2013	6.0	11.0	35.0	20.0		72.0

Source: Congressional Budget Office. Data released May 2013. Spending and Enrollment Detail for CBO's May 2013 Baseline: Medicaid. Link: <http://www.cbo.gov/sites/default/files/cbofiles/attachments/44204-2013-05-Medicaid.pdf>.

<sup>(1)</sup> Does not include CHIP Enrollees.

<sup>(2)</sup> In 1997, the Other Title XIX category was dropped and the enrollees therein were subsumed in the remaining categories. Other Title XIX enrollees referred to others who received Medicaid benefits.

Data for Chart 1.18

Table 1.10: Percent Change in CHIP Enrollment by State, FY 2011 – FY 2012<sup>(1)</sup>

State	Percent Change FY 11 - FY 12	State	Percent Change FY 11 - FY 12
Alabama	3%	Montana	17%
Alaska	-5%	Nebraska	6%
Arizona	78%	Nevada	0%
Arkansas	10%	New Hampshire	6%
California	1%	New Jersey	2%
Colorado	20%	New Mexico	-1%
Connecticut	0%	New York	-1%
Delaware	-17%	North Carolina	2%
District of Columbia	-16%	North Dakota	10%
Florida	-4%	Ohio	1%
Georgia	4%	Oklahoma	4%
Hawaii	10%	Oregon	9%
Idaho	8%	Pennsylvania	0%
Illinois	3%	Rhode Island	9%
Indiana	-2%	South Carolina	4%
Iowa	7%	South Dakota	5%
Kansas	6%	Tennessee	6%
Kentucky	0%	Texas	3%
Louisiana	-1%	Utah	11%
Maine	1%	Vermont	7%
Maryland	10%	Virginia	4%
Massachusetts	0%	Washington	-2%
Michigan	-2%	West Virginia	0%
Minnesota	-8%	Wisconsin	-2%
Mississippi	2%	Wyoming	2%
Missouri	-1%		

Source: Centers for Medicare & Medicaid Services. Data released April 2013. Number of Children Ever Enrolled by Program Type. Link: [http://www.medicaid.gov/Federal-Policy-Guidance/Downloads/FY-2012-Childrens-Enrollment-04\\_09\\_13.pdf](http://www.medicaid.gov/Federal-Policy-Guidance/Downloads/FY-2012-Childrens-Enrollment-04_09_13.pdf).

<sup>(1)</sup> 2009 figure reflects revised data released by Centers for Medicare & Medicaid Services on February 1, 2011.

Data for Chart 1.20

Table 1.11: Percentage of Employees with Employer-based Coverage Who Can Choose Conventional, PPO, HMO, POS, and HDHP/SO Plans, 1988 – 2013

	1988	1996	1999	2002	2006	2007	2008	2009	2010	2011	2012	2013
<b>Conventional<sup>(1)</sup></b>	90%	52%	26%	14%	10%	10%	8%	5%	6%	7%	4%	4%
<b>PPO</b>	18%	45%	62%	74%	79%	79%	77%	80%	79%	76%	75%	76%
<b>HMO</b>	46%	64%	56%	50%	43%	42%	41%	44%	42%	39%	37%	34%
<b>POS<sup>(2)</sup></b>		30%	45%	34%	23%	21%	24%	19%	14%	16%	14%	13%
<b>HDHP/SO<sup>(3)</sup></b>					14%	18%	25%	28%	32%	40%	39%	43%

Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data Released 2013. Employer Health Benefits: 1999, 2002, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013. Link: <http://ehbs.kff.org/pdf/2013/8345.pdf>. KPMG Survey of Employer-Sponsored Health Benefits: 1988, 1996.

<sup>(1)</sup> Conventional plans refer to traditional indemnity plans.

<sup>(2)</sup> Point-of-service plans not separately identified in 1988.

<sup>(3)</sup> In 2006, the survey began asking about HDHP/SO, high deductible health plans with a savings option.

Data for Chart 1.21

Table 1.12: Percent Distribution of Employer-sponsored Health Insurance Enrollment by Type of Plan, 1988 – 2013

	1988	1996	1999	2002	2006	2007	2008	2009	2010	2011	2012	2013
<b>Conventional<sup>(1)</sup></b>	73%	27%	10%	4%	3%	3%	2%	1%	1%	1%	0%	0%
<b>PPO</b>	11%	28%	39%	52%	60%	57%	58%	60%	58%	55%	56%	57%
<b>HMO</b>	16%	31%	28%	27%	20%	21%	20%	20%	19%	17%	16%	14%
<b>POS<sup>(2)</sup></b>		14%	24%	18%	13%	13%	12%	10%	8%	10%	9%	9%
<b>HDHP/SO<sup>(3)</sup></b>					4%	5%	8%	8%	13%	17%	19%	20%

Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data Released 2012. Employer Health Benefits: 1999, 2002, 2006, 2007, 2008, 2009, 2010, 2011, 2012 and 2013. Link: <http://ehbs.kff.org/pdf/2013/8345.pdf>. KPMG Survey of Employer-Sponsored Health Benefits: 1988, 1996.

<sup>(1)</sup> Conventional plans refer to traditional indemnity plans.

<sup>(2)</sup> Point-of-service plans not separately identified in 1988.

<sup>(3)</sup> In 2006, the survey began asking about HDHP/SO, high deductible health plans with a savings option.

Data for Chart 1.22



Table 1.13: Growth in Medicare Spending per Beneficiary vs. Private Health Insurance Spending per Enrollee, 1992 – 2012<sup>(1,2)</sup>

Year	Growth in Medicare Spending per Beneficiary	Growth in Private Health Insurance Spending per Enrollee
1992	8.8%	7.7%
1993	6.6%	4.6%
1994	7.6%	1.7%
1995	7.2%	1.6%
1996	4.6%	1.6%
1997	4.2%	3.3%
1998	0.3%	4.8%
1999	2.8%	4.4%
2000	3.2%	6.1%
2001	8.4%	8.8%
2002	5.4%	9.3%
2003	4.9%	9.8%
2004	6.7%	8.1%
2005	5.8%	6.7%
2006	3.5%	6.4%
2007	2.6%	5.2%
2008	4.9%	6.3%
2009	3.0%	7.4%
2010	0.4%	4.5%
2011	1.8%	3.5%
2012	0.9%	4.3%

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released January 7, 2014.

<sup>(1)</sup> CMS completed a benchmark revision in 2009, introducing changes in methods, definitions and source data that are applied to the entire time series (back to 1960). For more information on this revision, see <http://www.cms.gov/nationalhealthexpenddata/downloads/benchmark2009.pdf>.

<sup>(2)</sup> Data reflects spending on benefits commonly covered by Medicare and Private Health Insurance.

Data for Chart 1.24

Table 1.14: Percentage of Medicaid Beneficiaries Enrolled in Medicaid Managed Care by State, 2010 and 2011

State	% Enrolled		State	% Enrolled	
	10	11		10	11
Alabama	59.6%	61.1%	Montana	74.6%	76.1%
Alaska	0.0%	0.0%	Nebraska	85.6%	85.1%
Arizona	90.5%	88.7%	Nevada	85.1%	83.6%
Arkansas	78.4%	78.4%	New Hampshire	0.0%	0.0%
California	55.1%	60.1%	New Jersey	76.8%	77.7%
Colorado	94.6%	94.6%	New Mexico	73.1%	72.8%
Connecticut	69.9%	68.6%	New York	68.1%	76.7%
Delaware	77.4%	80.5%	North Carolina	77.5%	83.2%
District of Columbia	69.7%	67.4%	North Dakota	67.3%	63.6%
Florida	64.5%	63.8%	Ohio	73.5%	75.4%
Georgia	91.0%	91.3%	Oklahoma	90.1%	86.5%
Hawaii	98.0%	98.7%	Oregon	86.7%	98.2%
Idaho	87.6%	100.0%	Pennsylvania	81.7%	81.5%
Illinois	56.5%	67.8%	Rhode Island	67.4%	68.6%
Indiana	70.4%	70.3%	South Carolina	100.0%	100.0%
Iowa	90.1%	91.1%	South Dakota	80.3%	75.8%
Kansas	86.6%	87.4%	Tennessee	100.0%	100.0%
Kentucky	88.2%	89.4%	Texas	67.0%	70.7%
Louisiana	63.7%	65.3%	Utah	83.3%	99.8%
Maine	67.7%	49.3%	Vermont	56.7%	58.5%
Maryland	79.5%	74.6%	Virginia	59.2%	58.2%
Massachusetts	53.5%	53.1%	Washington	86.7%	88.1%
Michigan	86.2%	88.4%	West Virginia	48.6%	51.0%
Minnesota	63.8%	65.7%	Wisconsin	62.4%	63.7%
Mississippi	75.9%	87.2%	Wyoming	0.0%	0.0%
Missouri	99.1%	97.7%	<b>Nation</b>	<b>71.5%</b>	<b>74.2%</b>

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Medicaid Managed Care Enrollment Report as of June 30, 2010 and July 1, 2011.

Data for Chart 1.26



Table 1.15: Operating Margins of the Top Insurers, 2011 – 2013

	2011	2012	2013
<b>Aetna</b>	9.1%	8.2%	6.7%
<b>WellPoint</b>	7.4%	7.3%	8.0%
<b>United HealthCare</b>	8.3%	8.4%	7.9%
<b>Cigna</b>	10.0%	9.5%	6.7%
<b>Humana</b>	6.1%	5.2%	5.0%

Source: FactSet Research Systems Inc. Data for all years updated as of March 2014.  
Data from Hoovers used in 2011 and earlier years' Chartbooks.

Data for Chart 1.29

