



# APPENDIX 1

Supplementary Data Tables  
Trends in the Overall  
Health Care Market

Table 1.1: Total National Health Expenditures, 1980 – 2016<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	Real Dollars <sup>(2)</sup>	Nominal Dollars (billions)	Real Dollars <sup>(2)</sup> (billions)
1980	\$255.3	\$255.3	\$1,110	\$1,110	\$12.0	\$12.0
1981	\$296.2	\$268.5	\$1,271	\$1,152	\$13.4	\$12.1
1982	\$334.0	\$285.2	\$1,421	\$1,214	\$15.0	\$12.8
1983	\$367.8	\$304.3	\$1,552	\$1,284	\$17.3	\$14.3
1984	\$405.0	\$321.2	\$1,695	\$1,344	\$19.6	\$15.6
1985	\$442.9	\$339.2	\$1,830	\$1,402	\$21.8	\$16.7
1986	\$474.7	\$356.9	\$1,945	\$1,463	\$24.3	\$18.3
1987	\$516.5	\$374.7	\$2,100	\$1,523	\$26.9	\$19.5
1988	\$579.3	\$403.5	\$2,336	\$1,627	\$30.6	\$21.3
1989	\$644.8	\$428.5	\$2,569	\$1,707	\$34.8	\$23.1
1990	\$721.4	\$454.8	\$2,840	\$1,791	\$40.3	\$25.4
1991	\$788.1	\$476.8	\$3,066	\$1,855	\$44.4	\$26.9
1992	\$854.1	\$501.6	\$3,285	\$1,929	\$47.0	\$27.6
1993	\$916.6	\$522.7	\$3,485	\$1,987	\$49.6	\$28.3
1994	\$967.2	\$537.8	\$3,636	\$2,022	\$53.0	\$29.5
1995	\$1,021.6	\$552.4	\$3,812	\$2,061	\$59.8	\$32.3
1996	\$1,074.4	\$564.3	\$3,965	\$2,082	\$68.1	\$35.8
1997	\$1,135.5	\$583.0	\$4,144	\$2,128	\$77.6	\$39.9
1998	\$1,202.0	\$607.6	\$4,339	\$2,194	\$88.5	\$44.7
1999	\$1,278.3	\$632.2	\$4,582	\$2,266	\$104.6	\$51.7
2000	\$1,369.1	\$655.1	\$4,855	\$2,323	\$121.0	\$57.9
2001	\$1,486.2	\$691.5	\$5,218	\$2,428	\$139.0	\$64.7
2002	\$1,628.6	\$746.0	\$5,666	\$2,595	\$157.9	\$72.3
2003	\$1,767.6	\$791.6	\$6,096	\$2,730	\$176.7	\$79.1
2004	\$1,895.7	\$826.9	\$6,479	\$2,826	\$192.8	\$84.1
2005	\$2,023.7	\$853.8	\$6,854	\$2,892	\$205.2	\$86.6
2006	\$2,156.2	\$881.3	\$7,232	\$2,956	\$224.1	\$91.6
2007	\$2,295.3	\$912.2	\$7,627	\$3,031	\$235.7	\$93.7
2008	\$2,399.1	\$918.2	\$7,897	\$3,022	\$241.5	\$92.4
2009	\$2,495.4	\$958.4	\$8,143	\$3,128	\$252.7	\$97.1
2010	\$2,598.8	\$982.0	\$8,412	\$3,179	\$253.1	\$95.6
2011	\$2,689.3	\$985.1	\$8,644	\$3,166	\$258.8	\$94.8
2012	\$2,797.3	\$1,003.9	\$8,924	\$3,203	\$259.2	\$93.0
2013	\$2,879.0	\$1,018.3	\$9,121	\$3,226	\$265.2	\$93.8
2014	\$3,026.2	\$1,053.3	\$9,515	\$3,312	\$298.0	\$103.7
2015	\$3,200.8	\$1,112.8	\$9,994	\$3,474	\$324.5	\$112.8
2016	\$3,337.2	\$1,145.7	\$10,348	\$3,553	\$328.6	\$112.8

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 6, 2017.

<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: National Health Expenditures,<sup>(1)</sup> 1980 – 2025<sup>(2)</sup>

Year	Expenditures (billions)
1980	\$255.8
1990	\$724.3
2000	\$1,369.1
2001	\$1,486.2
2002	\$1,628.6
2003	\$1,767.6
2004	\$1,895.7
2005	\$2,023.7
2006	\$2,156.2
2007	\$2,295.3
2008	\$2,399.1
2009	\$2,495.4
2010	\$2,598.8
2011	\$2,689.3
2012	\$2,797.3
2013	\$2,879.0
2014	\$3,026.2
2015	\$3,200.8
2016	\$3,337.2
2017	\$3,539.3
2018	\$3,745.7
2019	\$3,965.5
2020	\$4,196.7
2021	\$4,441.8
2022	\$4,700.4
2023	\$4,972.2
2024	\$5,254.6
2025	\$5,548.8

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 6, 2017.

<sup>(1)</sup> Years 2015 – 2025 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 1.7



Table 1.3: Consumer Out-of-pocket Payments for National Health Expenditures, 1995 – 2016<sup>(1)</sup>

Year	Payment (billions)
1995	\$144.8
1996	\$150.4
1997	\$161.4
1998	\$176.9
1999	\$187.7
2000	\$198.9
2001	\$206.2
2002	\$219.3
2003	\$235.6
2004	\$248.5
2005	\$263.8
2006	\$273.3
2007	\$290.0
2008	\$295.2
2009	\$293.7
2010	\$299.7
2011	\$310.0
2012	\$318.3
2013	\$325.2
2014	\$330.1
2015	\$339.3
2016	\$352.5

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 6, 2017.

<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 1.8



Table 1.4: Consumer Out-of-pocket Spending vs. Private Health Insurance Spending for Prescription Drugs, 1995 – 2016<sup>(1)</sup>

Year	Out-of-pocket Payment (billions)	Private Health Insurance (billions)
1995	\$23.2	\$24.5
1996	\$24.2	\$30.1
1997	\$25.7	\$36.2
1998	\$27.5	\$42.6
1999	\$30.5	\$52.1
2000	\$33.6	\$61.1
2001	\$36.4	\$71.2
2002	\$40.8	\$79.8
2003	\$45.5	\$87.0
2004	\$48.1	\$95.1
2005	\$51.3	\$102.1
2006	\$51.2	\$102.0
2007	\$52.2	\$106.9
2008	\$49.6	\$109.7
2009	\$49.1	\$116.2
2010	\$45.2	\$116.1
2011	\$45.2	\$117.0
2012	\$45.1	\$112.9
2013	\$43.5	\$113.6
2014	\$44.8	\$128.1
2015	\$45.5	\$141.5
2016	\$45.0	\$142.6

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 6, 2017.

<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 1.10



Table 1.5: Number and Percent Uninsured, 1995 – 2016

Year	Number (millions)	Percent
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%
2013	41.8	13.3%
2014	33.0	10.4%
2015	29.0	9.1%
2016	27.6	8.6%

Source: US Census Bureau, Health Insurance Coverage in the United States: 2016. Data released September 2017. Figure HIC-4.  
HIC-4. Health Insurance Coverage Status and Type of Coverage by State--All Persons: 2008 to 2016. Link:  
[https://www2.census.gov/programs-surveys/demo/tables/health-insurance/time-series/acs/hic04\\_acs.xls](https://www2.census.gov/programs-surveys/demo/tables/health-insurance/time-series/acs/hic04_acs.xls)

Data for Chart 1.13

Table 1.6: Average Percent Uninsured by State<sup>(1)</sup>, 2015 – 2016

State	Average Percent Uninsured	State	Average Percent Uninsured
Alabama	9.1%	Montana	8.1%
Alaska	14.0%	Nebraska	8.6%
Arizona	10.0%	Nevada	11.4%
Arkansas	7.9%	New Hampshire	5.9%
California	7.3%	New Jersey	8.0%
Colorado	7.5%	New Mexico	9.2%
Connecticut	4.9%	New York	6.1%
Delaware	5.7%	North Carolina	10.4%
District of Columbia	3.9%	North Dakota	7.0%
Florida	12.5%	Ohio	5.6%
Georgia	12.9%	Oklahoma	13.8%
Hawaii	3.5%	Oregon	6.2%
Idaho	10.1%	Pennsylvania	5.6%
Illinois	6.5%	Rhode Island	4.3%
Indiana	8.1%	South Carolina	10.0%
Iowa	4.3%	South Dakota	8.7%
Kansas	8.7%	Tennessee	9.0%
Kentucky	5.1%	Texas	16.6%
Louisiana	10.3%	Utah	8.8%
Maine	8.0%	Vermont	3.7%
Maryland	6.1%	Virginia	8.7%
Massachusetts	2.5%	Washington	6.0%
Michigan	5.4%	West Virginia	5.3%
Minnesota	4.1%	Wisconsin	5.3%
Mississippi	11.8%	Wyoming	11.5%
Missouri	8.9%		

Source: US Census Bureau, Health Insurance Coverage in the United States: 2016. Data released September 2017. Figure HIC-4. HIC-4. Health Insurance Coverage Status and Type of Coverage by State--All Persons: 2008 to 2016. Link:

[https://www2.census.gov/programs-surveys/demo/tables/health-insurance/time-series/acs/hic04\\_acs.xls](https://www2.census.gov/programs-surveys/demo/tables/health-insurance/time-series/acs/hic04_acs.xls)

<sup>(1)</sup>Average percent uninsured represents a weighted average of the uninsured rate for the years indicated.

Table 1.7: Medicaid Enrollees,<sup>(1)</sup> 1990, 1995, 2000, 2005, 2010 – 2018

Year	Aged (millions)	Blind/ Disabled (millions)	Children (millions)	Adults (millions)	Other Title XIX <sup>(2)</sup> (millions)	Total <sup>(4)</sup> (millions)
1990	3.2	3.7	11.2	6.0	1.1	25.2
1995	4.2	6.0	17.6	7.8	0.6	36.2
2000	4.6	7.5	22.0	10.4		44.5
2005	5.4	9.4	28.3	15.5		58.6
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	34.0	21.0		72.0
2014 <sup>(3)</sup>	6.3	11.3	38.8	23.8		80.0
2015	7.7	12.8	42.1	34.5		97.0
2016	7.7	11.5	43.4	34.5		97.0
2017	7.6	11.5	43.3	34.4		98.0
2018	7.6	11.4	43.2	34.3		99.0

Source: Congressional Budget Office. Data released January 2017. Detail of Spending and Enrollment for CBO's January 2017 Baseline: Medicaid. Link: <https://www.cbo.gov/sites/default/files/recurringdata/51301-2017-01-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.

<sup>(3)</sup> For 2014 onward, CBO changed from reporting annual enrollment to average monthly enrollment. Therefore, category values are derived from the total ever enrolled.

<sup>(4)</sup> Parts may not sum to total due to rounding.

Data for Chart 1.16



Table 1.8: Percent Change in CHIP Enrollment by State, FY 2015 – FY 2016

State	Percent Change FY 15 – FY 16	State	Percent Change FY 15 - FY 16
Alabama	12.8%	Montana	-1.3%
Alaska	53.8%	Nebraska	-11.5%
Arizona	127.3%	Nevada	11.4%
Arkansas	7.8%	New Hampshire	7.8%
California	5.8%	New Jersey	7.3%
Colorado	20.4%	New Mexico	-12.2%
Connecticut	2.7%	New York	8.5%
Delaware	8.8%	North Carolina	9.3%
District of Columbia	30.6%	North Dakota	0.0%
Florida	-12.4%	Ohio	23.5%
Georgia	0.5%	Oklahoma	-1.5%
Hawaii	-5.4%	Oregon	15.5%
Idaho	4.2%	Pennsylvania	16.3%
Illinois	-1.4%	Rhode Island	15.8%
Indiana	14.3%	South Carolina	-17.0%
Iowa	2.8%	South Dakota	14.1%
Kansas	2.8%	Tennessee	-0.2%
Kentucky	6.6%	Texas	2.4%
Louisiana	19.1%	Utah	5.7%
Maine	4.2%	Vermont	11.3%
Maryland	-3.3%	Virginia	1.8%
Massachusetts	7.8%	Washington	44.5%
Michigan	-30.9%	West Virginia	43.5%
Minnesota	1.1%	Wisconsin	1.8%
Mississippi	1.6%	Wyoming	11.1%
Missouri	12.1%		

Source: Centers for Medicare & Medicaid Services. Data released July 2017. Number of Children Ever Enrolled Report.  
 Link: <https://www.medicaid.gov/chip/downloads/fy-2016-childrens-enrollment-report.pdf>

Data for Chart 1.18

Table 1.9: Percentage of Employees with Employer-based Coverage Who Can Choose Conventional, PPO, HMO, POS, and HDHP/SO Plans, 1988 – 2017

	1988	1996	1999	2002	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
<b>Conventional<sup>(1)</sup></b>	90%	52%	26%	14%	10%	10%	8%	5%	6%	7%	4%	4%	3%	2%	2%	1%
<b>PPO</b>	18%	45%	62%	74%	79%	79%	77%	80%	79%	76%	75%	76%	77%	72%	74%	73%
<b>HMO</b>	46%	64%	56%	50%	43%	42%	41%	44%	42%	39%	37%	34%	31%	32%	33%	33%
<b>POS<sup>(2)</sup></b>		30%	45%	34%	23%	21%	24%	19%	14%	16%	14%	13%	13%	16%	13%	15%
<b>HDHP/SO<sup>(3)</sup></b>					14%	18%	25%	28%	32%	40%	39%	43%	45%	51%	56%	57%

Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data Released 2017. Employer Health Benefits: 1999, 2002, 2006 – 2017. Link: <http://files.kff.org/attachment/Report-Employer-Health-Benefits-Annual-Survey-2017>  
KPMG Survey of Employer-Sponsored Health Benefits: 1988, 1996.

PPO: Preferred Provider Organization; HMO: Health Maintenance Organization.

(1) Conventional plans refer to traditional indemnity plans.

(2) Point-of-service (POS) plans not separately identified in 1988.

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

Data for Chart 1.19

Table 1.10: Percent Distribution of Employer-sponsored Health Insurance Enrollment by Type of Plan, 1988 – 2017

	1988	1996	1999	2002	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
<b>Conventional<sup>(1)</sup></b>	73%	27%	10%	4%	3%	3%	2%	1%	1%	1%	<1%	<1%	<1%	1%	<1%	<1%
<b>PPO</b>	11%	28%	39%	52%	60%	57%	58%	60%	58%	55%	56%	57%	58%	52%	48%	48%
<b>HMO</b>	16%	31%	28%	27%	20%	21%	20%	20%	19%	17%	16%	14%	13%	14%	15%	14%
<b>POS<sup>(2)</sup></b>		14%	24%	18%	13%	13%	12%	10%	8%	10%	9%	9%	8%	10%	9%	10%
<b>HDHP/SO<sup>(3)</sup></b>					4%	5%	8%	8%	13%	17%	19%	20%	20%	24%	29%	28%

Source: The Kaiser Family Foundation and Health Research and Educational Trust. Data Released 2017. Employer Health Benefits: 1999, 2002, 2006 – 2017. Link: <http://files.kff.org/attachment/Report-Employer-Health-Benefits-Annual-Survey-2017>  
KPMG Survey of Employer-Sponsored Health Benefits: 1988, 1996.

PPO: Preferred Provider Organization; HMO: Health Maintenance Organization.

(1) Conventional plans refer to traditional indemnity plans.

(2) Point-of-service (POS) plans not separately identified in 1988.

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

Data for Chart 1.20



Table 1.11: Growth in Medicare Spending per Beneficiary vs. Private Health Insurance Spending per Enrollee, 1995 – 2016<sup>(1,2,3)</sup>

Year	Growth in Medicare Spending per Beneficiary	Growth in Private Health Insurance Spending per Enrollee
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	4.6%	6.3%
2009	3.2%	7.3%
2010	0.3%	4.9%
2011	1.4%	4.6%
2012	0.3%	5.5%
2013	-0.6%	2.9%
2014	1.9%	-0.4%
2015	0.8%	5.9%
2016	0.4%	6.2%

Source: Centers for Medicare & Medicaid Services, Office of the Actuary. Data released December 6, 2017.

<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.

<sup>(3)</sup> CMS no longer includes the National Health Expenditure (NHE) table used to calculate growth in Medicare spending from 1994-2013. Data for 2014 and subsequent years reflects calculations using current NHE tables as recommended by CMS in email correspondence.

Table 1.12: Percentage of Medicaid Beneficiaries Enrolled in Medicaid Managed Care by State, 2011 and 2015

State	% Enrolled		State	% Enrolled	
	11	15		11	15
Alabama	61.1%	62.9%	Montana	76.1%	74.1%
Alaska	0.0%	0.0%	Nebraska	85.1%	95.7%
Arizona	88.7%	84.6%	Nevada	83.6%	87.7%
Arkansas	78.4%	80.5%	New Hampshire	0.0%	86.6%
California	60.1%	74.3%	New Jersey	77.7%	90.5%
Colorado	94.6%	96.1%	New Mexico	72.8%	78.6%
Connecticut	68.6%	0.0%	New York	76.7%	76.1%
Delaware	80.5%	89.2%	North Carolina	83.2%	79.8%
District of Columbia	67.4%	70.8%	North Dakota	63.6%	54.1%
Florida	63.8%	79.0%	Ohio	75.4%	74.4%
Georgia	91.3%	68.9%	Oklahoma	86.5%	66.2%
Hawaii	98.7%	98.9%	Oregon	98.2%	82.2%
Idaho	100.0%	100.0%	Pennsylvania	81.5%	86.2%
Illinois	67.8%	89.0%	Rhode Island	68.6%	100.0%
Indiana	70.3%	72.0%	South Carolina	100.0%	100.0%
Iowa	91.1%	93.8%	South Dakota	75.8%	75.1%
Kansas	87.4%	90.3%	Tennessee	100.0%	91.9%
Kentucky	89.4%	93.3%	Texas	70.7%	82.7%
Louisiana	65.3%	83.6%	Utah	99.8%	98.1%
Maine	49.3%	84.1%	Vermont	58.5%	65.4%
Maryland	74.6%	80.1%	Virginia	58.2%	69.1%
Massachusetts	53.1%	67.6%	Washington	88.1%	100.0%
Michigan	88.4%	97.2%	West Virginia	51.0%	38.5%
Minnesota	65.7%	74.4%	Wisconsin	63.7%	66.2%
Mississippi	87.2%	68.2%	Wyoming	0.0%	0.1%
Missouri	97.7%	97.7%	<b>Nation</b>	<b>74.2%</b>	<b>79.7%</b>

Sources: 1. Centers for Medicare & Medicaid Services, Office of the Actuary. Medicaid Managed Care Enrollment and Program Characteristics, 2015, released Winter 2016. Link: <https://www.medicaid.gov/medicaid/managed-care/downloads/enrollment/2015-medicaid-managed-care-enrollment-report.pdf>.

2. The Kaiser Family Foundation. State Health Facts. Total Medicaid Managed Care Enrollment. Link: <http://kff.org/medicaid/state-indicator/total-medicaid-mc-enrollment/>.

Data for Chart 1.24



Table 1.13: Operating Margins of the Top Insurers, 2013 – 2015

	2013	2014	2015
<b>Aetna</b>	6.7%	7.3%	8.1%
<b>Anthem<sup>(1)</sup></b>	8.0%	5.9%	5.9%
<b>United HealthCare</b>	7.9%	7.9%	7.0%
<b>Cigna</b>	6.7%	9.5%	8.8%
<b>Humana</b>	5.0%	4.5%	4.5%

Source: YCharts data used for 2014 and 2015. Data from FactSet Research Systems Inc. used in 2012, 2013, and earlier years' Chartbooks.

<sup>(1)</sup> Wellpoint in 2014 and earlier years' Chartbooks. In December 2014, Wellpoint changed its name to Anthem.

Data for Chart 1.29

