



BASIC FACTS & FIGURES:

NONPROFIT HOME HEALTH SERVICES¹

- “Home care organizations” include a range of organizational types (e.g., home health services, hospice, home care aide, and Visiting Nurse Associations) and structures (e.g., freestanding and hospital-based).
- Home health services consist of medical, nursing, or therapeutic care (e.g., physical, occupational, and speech-language therapy) as well as personal care needs that are delivered at home to patients recovering from care in hospitals or nursing homes; patients who are disabled; the frail elderly; and chronically/terminally ill persons.
- There are about 12,000 Medicare-certified home health agencies in the United States, up about 30% since 2007. Sixteen percent (16%) of these agencies are nonprofit (down seven percentage points since 2007), 6% are government (down three percentage points since 2007), and 78% are for-profit (up ten percentage points since 2007).²
- Medicare is the largest payer (41%) of home health services, followed by Medicaid (24%), state/local governments (15%), out-of-pocket payments (10%), private insurance (8%), and other (2%).
- In 2009, there were over 3.5 million home health patients and about 126 million visits, with charges totaling \$18.4 billion.³
- The majority of home care patients are female (64%) and 65 years of age or older (69%). Of patients 65 years of age or older, 62% are Caucasian, 7% are black, and 2% are Hispanic.
- Annual expenditures for home health care (freestanding facilities only) were projected to be \$72.2 billion in 2009, or about 3% of total U.S. personal health care expenditures.
- Home health care organizations tend to be located in the southern United States followed by parts of the Midwest. The states with the most home health organizations include Texas, Florida, and California. The states with the largest concentration of nonprofit hospices are Vermont, New Jersey, Maine, Montana, and New Hampshire.

¹ Unless otherwise noted, data source is: National Association for Home Care & Hospice. Basic Statistics About Home Care. Updated 2010.

² Centers for Medicare & Medicaid Services. January 12, 2012. Medicare-certified agencies are only reported because of variation in licensing and oversight among states as well as difficulty in tracking and/or assessing non-certified agencies.

³ Source: National Association of Home Care and Hospice (Medicare Home Health Utilization and Payments, 2009) and Centers for Medicare & Medicaid Services Health Care Information Service (HCIS), March 2011. Totals include the United States and outlying areas and total patients is an approximate count, as patients may have received services in more than one states.

KEY HOME HEALTH CARE DATA BY STATE, 2011

State	% Nonprofit	% Government	% For-Profit
Alabama	8%	26%	66%
Alaska	50%	21%	29%
Arizona	12%	1%	87%
Arkansas	23%	46%	31%
California	12%	1%	87%
Colorado	17%	11%	72%
Connecticut	45%	5%	50%
Delaware	33%	0%	67%
District of Columbia	12%	0%	88%
Florida	6%	0%	94%
Georgia	26%	4%	70%
Hawaii	64%	7%	29%
Idaho	15%	9%	77%
Illinois	11%	5%	85%
Indiana	17%	7%	76%
Iowa	31%	42%	27%
Kansas	29%	30%	41%
Kentucky	40%	15%	46%
Louisiana	8%	4%	88%
Maine	66%	0%	34%
Maryland	39%	4%	57%
Massachusetts	41%	2%	58%
Michigan	8%	2%	90%
Minnesota	42%	18%	40%
Mississippi	13%	28%	58%
Missouri	34%	16%	50%
Montana	66%	19%	16%
Nebraska	38%	19%	43%
Nevada	6%	0%	94%
New Hampshire	66%	6%	28%
New Jersey	68%	10%	22%
New Mexico	27%	5%	68%
New York	58%	22%	20%
North Carolina	29%	25%	46%
North Dakota	81%	10%	10%
Ohio	19%	4%	77%
Oklahoma	15%	6%	79%
Oregon	53%	9%	39%
Pennsylvania	29%	0%	71%
Rhode Island	31%	0%	69%
South Carolina	24%	21%	54%
South Dakota	62%	5%	32%
Tennessee	19%	5%	77%
Texas	5%	2%	94%
Utah	19%	1%	80%
Vermont	92%	0%	8%
Virginia	20%	0%	80%
Washington	32%	19%	49%
West Virginia	33%	9%	58%
Wisconsin	41%	9%	50%
Wyoming	24%	34%	41%
Totals	16%	6%	78%

Source: Centers for Medicare & Medicaid Services (data obtained January, 12 2012). Total does not include U.S. Territories (52 home health organizations).