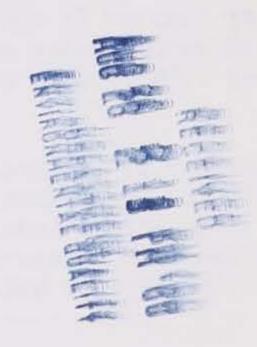
HEALTH CARE EXPENDITURES IN IOWA 1966 - 1976

PROPERTY OF DEPARTMENT OF ENVIRONMENTAL QUALITY

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- Iowa personal health care expenditures grew from 4.5 percent of the gross state product in 1966 to 6.7 percent in 1976, an increase of 49 percent. Nationally, personal health care expenditures as a percent of gross national product were 5 percent in 1966 and 7.7 percent in 1976. This constitutes a national increase of 54 percent. These figures indicate that an increasingly larger amount of state and national resources were being allocated to the health care system during the period.
- The proportion of Iowa personal health care expenditures financed by public sources (federal, state, and local governments) increased from 21 percent in 1966 to 29.5 percent in 1976. The proportion of health care expenditures paid for out-of-pocket by consumers declined from 52.5 percent in 1966 to 42.2 percent in 1976.
- While the proportion of personal health care expenditures paid for by consumers out-of-pocket decreased from 1966 to 1976, the amount paid increased. In 1966, Iowa consumers paid \$89.51 per capita out-of-pocket in personal health care services. In 1976 they paid \$225.09, an increase of 152 percent. Nationally, out-of-pocket expenditures rose from \$99.19 per capita in 1966 to \$184.93 per capita in 1976, an increase of 86 percent.
- In both Iowa and the United States, hospital care expenditures comprise the largest component of aggregate personal health care expenditures. In Iowa, hospital care accounted for 36.9 percent of personal care expenditures in 1966 and 41 percent in 1976. During this period, Iowa per capita hospital care expenditures rose from \$63.01 to \$213.89, an increase of 247 percent. Nationally, per capita hospital expenditures rose 276 percent from \$72.78 in 1966 to \$271.92 in 1976.

• In general, health care expenditures in Iowa and the United States have followed similar trends over the period from 1966 to 1976. Per capita personal health care expenditures in Iowa have consistently remained approximately 90 percent of national figures during the study period.

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INTRODUCTION

This report represents a first attempt to develop a funds flow analysis of the health care sector for the State of Iowa. A funds flow analysis identifies and links the sources and uses of funds expended for specific categories of services and goods. A funds flow analysis of the health care sector explains how health care dollars are spent (uses) and where these dollars come from (sources).

Integral to the development of a funds flow analysis of the Iowa health care sector is the derivation of a set of independent health care expenditure estimates. Although the Federal Government has national estimates of health care expenditures dating back to 1929, very few states have compiled current independent estimates of health care expenditures on a statewide level. With the completion of this report, Iowa joins the three other states in Federal Region VII (Kansas, Missouri, Nebraska) which have recently completed similar studies. To date, this is the only federal region in which all states have completed independent health care expenditure studies.

This report is comprised of five sections. The first section examines changes in expenditures for personal health care, by type of expenditure and source of funds, for select years between 1966 and 1976. The second section examines total and per capita expenditures for health care for the years 1966, 1969, 1974, 1975 and 1976. Iowa figures are also compared with national expenditure estimates. In section three, estimates of expenditures funded by public programs are presented. Section four compares Iowa personal health care expenditures with the gross state product. These Iowa figures are also contrasted with national health care expenditures and the gross national product. Section five compares Iowa per capita health expenditures with the expenditures of the other states in Federal Region VII.

In order to facilitate comparisons between Iowa and the United States, this study employs the methodology and definitions used to calculate national health expenditures. A description of the methodology and a list of definitions is included in the appendix of this report.

Although Iowa-specific data were used whenever possible, there were several gaps where national data had to be used. It should be noted that the data for 1966 and 1969 are fiscal year data ending June 30, while data for 1974, 1975 and 1976 are calendar year data. The use of calendar year estimates facilitates comparison with national expenditure figures and expenditure estimates from other states.

Only the results of the funds flow analysis are presented in this report. Future studies will analyze and explain the factors constraining changes in health care expenditures. Because of the delayed availability of public expenditure data, expenditure report updates will generally lag two years behind the current calendar year. The CY 1977 update should be available shortly after the release of this report.

The data provided by this report should expand the information base available to those formulating health care policy. Hopefully, future policy decisions will reflect this expansion.

PERSONAL HEALTH CARE EXPENDITURES IN IOWA AND THE UNITED STATES: 1966-1976

This section examines changes in Iowa and national expenditures for personal health care by type of expenditure and source of funds. Table 1 illustrates changes in aggregate and per capita personal health care expenditures in selected years between 1966 and 1976.

Table 1

AGGREGATE AND PER CAPITA PERSONAL HEALTH CARE EXPENDITURES
FOR IOWA AND THE UNITED STATES: SELECTED YEARS, FY 1966 - CY 1976

	IOWA		UNITED STATES			
Year	Aggregate (000)	Per Capita	Aggregate (000)	Per Capita		
FY 1966	\$ 468,631	\$170.60	\$ 36,005,406	\$183.84		
FY 1969 .	633,275	227.71	51,872,457	256.89		
CY 1974	1,142,193	399.93	104,466,000	443.50		
CY 1975	1,315,766	459.90	114,323,000	527.84		
CY 1976	1,532,858	533.35	130,151,000	596.02		

During this ten and one-half year period, aggregate personal health care expenditures in Iowa rose from \$468,631,000 in 1966 to \$1,532,858,000 in 1976. On a per capita basis, personal health care expenditures increased from \$170.60 in 1966 to \$533.35 in 1976. These changes represent a per capita increase of 213 percent for the entire period and an average annual increase of 11.5 percent. During this same period, United States per capita expenditures for personal health care rose from \$183.84 to \$596.02. The corresponding rates of increase were 224 percent and 11.9 percent, respectively.

In Table 2, the percent increase and annual rate of increase in per capita personal health care expenditures for Iowa and the United States are presented by type of service for the years 1966 and 1976. Per capita expenditures for personal health care increased by 213 percent in Iowa during this period. The percent increase for the United States as a whole was 224 percent.

Table 2

PER CAPITA EXPENDITURES FOR PERSONAL HEALTH CARE SERVICES

BY TYPE OF SERVICE AND RATE OF INCREASE

IN IOWA AND THE UNITED STATES: FY 1966 AND CY 1976

	Per Capita	Expenditures						
Type of Service	FY 1966	CY 1976	Percent Increase	Annua Rate				
		IOV	VA					
All Services	\$170.60	\$533.35	213%	11.5				
Hospital Care	63.01	218.89	247	12.6				
Physicians' Services	45.79	112.15	145	8.9				
Dentists' Services	13.98	37.61	169	9.9				
Other Professionals	6.45	11.19	73	5.4				
Drugs & Drug Sundries	23.53	76.88	225	11.9				
Eyeglasses & Appliances	8.29	9.16	10	1.0				
Nursing Home Care	5.89	56.27	855	24.0				
Other Health Services	3.67	11.19	205	11.2				
	UNITED STATES							
All Services	\$183.84	\$596.02	224%	11.8				
Hospital Care	72.78	271.92	276	13.4				
Physicians' Services	45.76	135.34	199	11.0				
Dentists' Services	14.63	42.47	189	10.6				
Other Professionals	5.82	13.50	132	8.3				
Drugs & Drug Sundries	29.69	53.84	81	5.8				
Eyeglasses & Appliances	6.68	9.16	37	3.0				
Nursing Home Care	7.18	50.98	610	20.5				
Other Health Services	6.28	19.00	202	11.1				

For both Iowa and the United States, the service area registering the largest per capita percent increase was nursing home care. Per capita nursing home expenditures in Iowa increased by 855 percent during the period while in the United States the percent increase was 610.

The service area accounting for the second highest percent increase in per capita expenditures was hospital care. Between 1966 and 1976 per capita hospital care expenditures rose by 247 percent in Iowa and by 276 percent in the United States.

There were two areas in which the percent increase in expenditures differed significantly between Iowa and the United States. Expenditures for drugs and drug sundries increased by 225 percent in Iowa. In the United States the percent increase was 81 percent. This difference may in some part be due to differences in estimating technique. Expenditures for other professionals increased by 73 percent in Iowa. In the United States the percent increase was 132 percent. Total and per capita health care expenditures in Iowa and the United States are summarized by type of service in Tables 15 and 16.

Health Expenditures Composition

With the exception of three service areas, the relative distribution of health expenditures by service category has not changed significantly during the period from 1966 to 1976. Table 3 displays the composition of spending for personal health services. Expenditures for hospital care comprised the largest component of total personal health expenditures in both Iowa and the United States.

Hospital expenditures in Iowa increased from 36.9 percent to 41.0 percent of total personal health expenditures during this period. In the United States, hospital expenditures increased from 39.3 percent to 45.6 percent.

Physicians' services, while still the second largest component of personal health expenditures in both the United States and Iowa, declined in relative magnitude in both Iowa and the United States. In Iowa expenditures for physicians' services declined from 26.8 percent in 1966 to 21.0 percent in 1976. In the United States, expenditures declined from 24.6 percent to 22.7 percent.

Expenditures for nursing home care rose markedly in Iowa during the period. In 1966 expenditures for nursing home care comprised 3.5 percent of all Iowa personal health care expenditures. In 1976 nursing home care expenditures accounted for 10.6 percent of the total. This rise was paralleled in the United States where nursing home expenditures rose from 3.9 percent to 8.6 percent.

Source of Funds

In addition to payments made directly by the consumer, health care expenditures are also financed through a variety of intermediaries or "third parties". These intermediaries include private insurers, government agencies acting as insurers or providers of health care, industry, and philanthropic organizations. Table 4 illustrates the actual and relative distribution of personal health care expenditures by source of funds in Iowa and the United States. Figures are presented for 1966 and 1976.

COMPOSITION OF SPENDING IN IOWA AND THE UNITED STATES: SELECTED YEARS 1966-1976 *

	FY 1966	FY 1969	CY 1974	CY 1975	CY 1976			
Type of Service			IOWA					
All Services	100.0	100.0	100.0	100.0	100.0			
Hospital Care	36.9	42.5	39.6	40.3	41.0			
Physicians' Services	26.8	22.4	19.0	19.1	21.0			
Dentists' Services	8.2	7.4	7.4	7.4	7.1			
Other Professionals	3.8	3.0	1.9	1.9	2.1			
Drugs & Drug Sundries	13.8	13.4	16.5	16.1	14.4			
Eyeglasses & Appliances	4.9	4.8	2.6	1.9	1.7			
Nursing Home Care	3.5	4.3	10.7	11.0	10.6			
Other Health Services	2.1	2.2	2.3	2.3	2.1			
	UNITED STATES							
All Services	100.0	100.0	100.0	100.0	100.0			
Hospital Care	39.3	43.1	45.0	45.1	45.6			
Physicians' Services	24.6	22.8	21.4	22.3	22.7			
Dentists' Services	8.0	7.4	7.3	7.2	7.1			
Other Professionals	3.2	2.5	2.1	2.2	2.3			
Drugs & Drug Sundries	14.0	12.5	10.5	9.5	9.0			
Eyeglasses & Appliances	3.6	3.4	2.3	1.7	1.6			
Nursing Home Care	3.9	4.8	8.5	8.7	8.6			
Other Health Services	3.4	3.6	2.9	3.3	3.2			
	(Components may not equal due to rounding)							

^{*} These percentages are based on the percent of total personal health care expenditures.

AGGREGATE AND PER CAPITA PERSONAL HEALTH CARE EXPENDITURES IN IOWA AND THE UNITED STATES

BY SOURCE OF FUNDS: FY 1966 AND CY 1976

			IOW	A (in 000)						
		FY 1966			CY 1976					
Source of Funds	Amount**	Per Capita	Percent	Amount**	Per Capita	Percent				
Total	\$468,631	\$ 170.60	100.0	\$1,532,858	\$ 533.35	100.0				
Private	370,065	134.72	79.0	1,080,188	375.85	70.5				
Insurance & Other*	124,185	45.21	26.5	433,273	150.76	28.3				
Out-of-Pocket	245,880	89.51	52.5	646,915	225.09	42.2				
Public Public	98,566	35.88	21.0	452,670	157.51	29.5				
Federal	34,554	12.58	7.4	318,023	110.66	20.7				
State & Local	64,Q12	23.30	13.6	134,647	46.85	8.8				
	UNITED STATES (in 000,000)									
Total	\$ 36,006	\$183.84	100.0	\$ 130,151	\$ 596.02	100.0				
Private	28,363	144.81	78.7	78,241	358.30	60.1				
Insurance & Other*	9,656	49.29	26.8	37,858	173.37	29.1				
Out-of-Pocket	18,707	95.81	52.0	40,383	184.93	31.0				
Public	7,643	39.02	21.3	51,910	237.72	39.9				
Federal	3,122	15.94	8.7	36,152	165.56	27.8				
State & Local	4,521	23.08	12.6	15,758	72.16	12.1				

^{*} The Insurance and Other category includes payments by philanthropy and industry.

^{**} The aggregate amounts are given in thousands for Iowa and millions for the United States.

Table 4 indicates that during the period 1966 to 1976, the majority of personal health care expenditures were financed through private sources. In both Iowa and the United States, however, the proportions of total expenditures financed through private sources declined from 1966 to 1976. In Iowa private sources accounted for 79.0 percent of personal health care expenditures in 1966. By 1976 this proportion had declined to 70.5 percent. Comparable figures for the United States were 78.7 percent and 60.1 percent, respectively. Correspondingly, expenditures by public sources increased from 21.0 percent to 29.5 percent of total personal health expenditures in Iowa and from 21.3 percent to 39.9 percent in the United States.

During this period actual public expenditures for personal health care in Iowa increased by 359 percent.

In both Iowa and the United States the proportion of total expenditures financed by consumers out-of-pocket declined from 1966 to 1976. In 1966, 52.5 percent of personal health care expenditures in Iowa were paid for out-of-pocket. By 1976 this proportion had declined to 42.2 percent. Corresponding national figures are 52.0 percent and 31.0 percent, respectively. Actual out-of-pocket expenditures in Iowa rose by 163 percent during the period. In comparison with the United States, 1976 out-of-pocket expenditures were considerably higher in Iowa. Proportionately, out-of-pocket sources accounted for 42.2 percent of total personal health expenditures in Iowa in contrast with 31 percent for the United States. In per capita terms, 1976 out-of-pocket expenditures were \$225.09 in Iowa and \$184.93 in the United States. This difference is primarily accounted for by the larger proportion of public funding in the United States. In 1976 public financing in the United States accounted for 10.4 percent more of total personal health expenditures than did public financing in Iowa.

The proportion of health expenditures financed by the Federal government rose significantly during the period. In Iowa in 1966, Federal sources accounted for 7.4 percent of health expenditures. By 1976 the Federal share had risen to 20.7 percent. National figures are 8.7 percent and 27.8 percent, respectively. In Iowa, actual Federal expenditures rose by 821 percent during the period.

TOTAL AND PER CAPITA HEALTH CARE EXPENDITURES IN IOWA AND THE UNITED STATES: 1966, 1969, 1974-1976

This section examines aggregate and per capita health care expenditures for the years 1966, 1969, and 1974-1976. It should be noted that expenditures for 1966 and 1969 were compiled on a fiscal year basis ending June 30. Expenditures for 1974, 1975 and 1976 were compiled on a calendar year basis.

Health Care Expenditures in 1966 and 1969

Iowa and United States expenditure data for the fiscal years 1966 and 1969 were obtained from a study conducted by the Department of Health, Education and Welfare. Because this study did not compile figures on government public health expenditures and on prepayment, direct health expenditures cannot be computed. However, since identical definitions and, in most instances, identical methodologies and sources were employed, personal health care expenditure data for all years in the study should be comparable.

Tables 5 and 6 present Iowa aggregate and per capita personal health care expenditure data for years 1966 and 1969. In these tables, expenditures are classified by both sources and uses. Tables 7 and 8 present identical information for the United States.

In 1966, aggregate expenditures for personal health care in Iowa were over \$468 million. By 1969 expenditures had risen to over \$633 million, an increase of approximately 35 percent. The per capita expenditure for Iowa was \$170.60 in 1966. By 1969 it had increased to \$227.71, an increase of approximately 33 percent.

Between 1966 and 1969, national aggregate expenditures rose from \$36,005 million to \$51,872 million, an increase of approximately 44 percent. The national per capita expenditure rose from \$183.84 in 1966 to \$256.89 in 1969, an increase of approximately 38 percent.

Not only was the Iowa per capita expenditure for these two years smaller in magnitude than the national expenditure, but the rates of increase for both Iowa aggregate and per capita expenditures were also smaller than those of the United States.

Sources of Funds

Private sources financed the majority of personal health care expenditures in both Iowa and the United States. In 1966 private sources accounted for 79.0 percent of Iowa health expenditures and 78.8 percent of United States expenditures. In 1969 these percentages had decreased to 67.4 and 64.5, respectively. This decrease shows the impact of the 1966 passage of Medicare and Medicaid on the public financing of personal health care.

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AGGREGATE PERSONAL HEALTH CARE EXPENDITURES IN IOWA BY TYPE OF SERVICE AND SOURCE OF FUNDS FOR FISCAL YEARS 1966 AND 1969

			Source of Funds							
				Pub1 i	С					
Type of Service	Total	Private	Tota1	Federal	State & Local					
	FY 1966 (in 000)									
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services	\$173,078 125,788 38,403 17,722 64,625 22,759 16,185 10,071	\$105,764 117,492 37,697 17,107 60,400 22,524 6,109 2,972	\$ 67,314 8,296 706 615 4,225 235 10,076 7,099	\$ 19,738 2,501 337 262 1,918 72 4,689 5,037	\$ 47,576 5,795 369 353 2,307 163 5,387 2,062					
Personal Health	\$468,631	\$370,065	\$ 98,566	\$ 34,554	\$ 64,012					
			FY 1969 (in 000)							
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services	\$269,091 141,772 46,823 18,933 84,930 30,549 27,095 14,082	\$131,814 107,932 44,524 15,475 78,286 30,055 15,322 3,601	\$137,277 33,840 2,299 3,458 6,644 494 11,773 10,481	\$ 95,876 27,461 1,398 2,588 3,864 265 8,693 6,633	\$ 41,401 6,379 901 870 2,780 229 3,080 3,848					
Personal Health	\$633,275	\$427,009	\$205,266	\$146,778	\$ 59,488					

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PER CAPITA PERSONAL HEALTH CARE EXPENDITURES IN UNITED STATES BY TYPE OF SERVICE AND SOURCE OF FUNDS FOR FISCAL YEARS 1966 AND 1969

		S	ource of Funds						
				Public					
Type of Service	Total	Private	Total	Federal	State & Local				
		F	Y 1966						
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services Personal Health	\$ 72.28 45.26 14.63 5.82 29.69 6.68 7.18 6.28	\$ 45.33 42.22 14.41 5.62 24.84 6.53 4.10 1.76	\$ 26.96 3.04 0.22 0.20 0.85 0.15 3.08 4.52 \$ 39.02	\$ 10.47 0.66 0.10 0.05 0.37 0.07 1.40 2.82 \$ 15.94	\$ 16.49 2.38 0.12 0.15 0.48 0.09 1.67 1.70 \$ 23.08				
	FY 1969								
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services	\$110.72 58.65 18.92 6.40 32.09 8.76 12.21 9.15	\$ 53.37 45.16 17.77 5.41 30.36 8.51 3.66 2.08	\$ 57.35 13.49 1.16 0.99 1.73 0.26 8.54 7.07	\$ 36.58 10.18 0.56 0.73 0.92 0.13 5.45 4.35	\$ 20.77 3.30 0.59 0.26 0.81 0.13 3.09 2.71				
Personal Health	\$256.89	\$166.31	\$ 90.58	\$ 58.91	\$ 31.67				

3

In Iowa the two service categories evidencing the greatest changes in source of funding were hospital care and physicians' services. In 1966, 67.4 percent of Iowa hospital care was financed by private sources. By 1969, that figure had decreased to 49 percent.

In 1966, 93.4 percent of Iowa expenditures for physicians' services were financed through private sources. In 1969, that figure decreased to 76.1 percent. United States figures for these two service categories evidenced similar decreases over this time period.

Uses of Funds

In both 1966 and 1969 the service category accounting for the largest share of personal health care expenditures was hospital care. In Iowa, hospital care accounted for 36.9 of total 1969 health care expenditures. In 1969, this figure had risen to 42.5 percent. For the United States, the respective percentages were 39.3 and 43.1.

Physicians' services, although the second largest component of health care expenditures, declined as a percentage of total expenditures. In 1966 expenditures for physicians' services in Iowa comprised 26.8 percent of total expenditures. In 1969, they had declined to 22.4 percent. Respective figures for the United States were 24.6 percent and 22.8 percent.

In Iowa, expenditures for all other service categories, with the exceptions of nursing home care and other health services, declined in relative magnitude from 1966 to 1969. Nursing home expenditures increased from 3.5 percent to 4.3 percent of the total and other health services increased from 2.1 percent to 2.2 percent.

1974 Expenditures

Tables for calendar years 1974, 1975 and 1976 include expenditure figures for government public health activities and prepayment in addition to expenditures for personal health care services. Government public health activities are defined as expenditures by local, state and federal governments for health services such as mental hygiene, alcohol and drug abuse services, services for emotionally disturbed children, etc. Also included under this category are expenditures for licensing, regulatory and planning functions. Prepayment expenditures consist of the difference between premiums and benefits for all private third party insurers (i.e., the amount retained by health insurance organizations for operating expenses, additions to reserves and profits). Thus, the category called direct health care services consists of government public health expenditures, prepayment, and personal health services.

In 1974, total personal health care expenditures in Iowa were in excess of 1,142 million dollars. Expenditures for government public health activities and prepayment were \$37,591,000 and \$82,800,000, respectively. Expenditures for direct health care services totaled \$1,262,584,000 or \$442.08 per capita. Tables 9 and 10 detail aggregate and per capita personal and direct health care expenditures by type of service and source of funds for Iowa and the United States for 1974. In 1974, the per capita personal health care expenditures in the United States was estimated to be \$443.50. The national per capita

AGGREGATE AND PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES

IN IOWA BY TYPE OF SERVICE

AND SOURCE OF FUNDS: CY 1974

Type of Service	TOTAL		D 1						
Type of Service	TOTAL	Private				Public	0		
Type of Service	TOTAL	Total	Insurance & Other	Out-of- Pocket	Total	Federal	State & Local		
			AGGREGA	ATE EXPENDITU	RES (in 000)				
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Gov't. Public Health	452,153 216,466 84,930 21,365 188,790 29,474 122,450 26,565 1,142,193 37,591	263,882 171,135 81,772 17,999 181,969 26,923 79,292 11,725	192,460 92,990 8,320 6,961 7,138 297 1,441 11,725	71,422 78,145 73,452 11,038 174,831 26,626 77,851	188,271 45,331 3,158 3,366 6,821 2,551 43,158 14,840 307,496 37,591	136,633 37,720 1,974 1,135 4,303 2,040 25,961 5,885 	51,638 7,611 1,184 2,231 2,518 511 17,197 8,955 91,845 24,769		
Prepayment	82,800	82,800	82,800 404,132	513,365	345,087	228,473	116,614		
Direct Services	1,262,584 917,497 404,132 513,365 345,087 220,975 110,014								
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Prepayment	158.32 75.79 29.74 7.48 66.10 10.32 42.87 9_30 399_93 13.16 28.99	92.40 59.92 28.63 6.30 63.71 9.43 27.76 _ 4.11 292.26	67.39 32.56 2.91 2.44 2.50 .10 .50 - 4.11 - 112.51	25.01 27.36 25.72 3.86 61.22 9.32 27.26 	65.92 15.87 1.11 1.18 2.39 .89 15.11 5_20 107_67	47.84 13.21 .69 .40 1.51 .71 9.09 2.06 75.51 4.49	18.08 2.66 .41 .78 .88 .18 6.02 3.14 32.16 8.67		
Direct Services	442.08	321.25	141.50	179.75	220.83	80.00	40.83		

Table 10

AGGREGATE AND PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES IN THE UNITED STATES BY TYPE AND SERVICE AND SOURCE OF FUNDS: CY 1974

				Source of	Funds					
			Private			Public				
Type of Service	TOTAL	Total	Insurance & Other	Out-of- Pocket	Total	Federal	State & Local			
			AGGREG	ATE EXPENDITU	RES (in 000,0	00)				
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services	\$ 43,534 20,710 7,109 2,045 10,157 2,254 8,225 2,812	\$ 20,018 15,431 6,734 1,605 9,331 2,159 3,691 667	\$ 14,422 7,358 664 544 594 31 47 667	\$ 5,596 8,073 6,070 1,061 8,737 2,128 3,644	\$ 23,516 5,279 375 440 826 95 4,534 2,145 36,310	\$ 16,476 3,824 236 294 443 52 2,643 1,819	\$ 7,040 1,455 139 146 383 43 1,891 326			
Personal Health Gov't. Public Health Prepayment	96,846 4,238 3,382	3,382	3,382	35,309	4,238	2,091	2,147			
Direct Services	104,466	63,018	27,709	35,309	41,448	27,878	13,570			
	PER CAPITA									
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Gov't. Public Health Prepayment	\$199.36 94.84 32.56 9.36 46.51 10.32 37.67 12.88 443.50	\$ 91.67 70.67 30.84 7.35 42.73 9.89 16.90 3.05 	\$ 66.04 33.70 3.04 2.49 2.72 0.14 0.21 3.05 111.40	\$ 25.63 36.97 27.80 4.86 40.01 9.75 16.69	\$107.69 24.17 1.72 2.01 3.78 0.43 20.76 9.82 	\$ 75.45 17.51 1.08 1.35 2.03 0.24 12.10 8.33 	\$ 32.24 6.66 0.64 0.67 1.75 0.20 8.66 1.49 			
Direct Services	478.39	288.59	126.89	161.70	189.81	127.67	62.14			

AGGREGATE AND PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES

IN IOWA BY TYPE OF SERVICE

AND SOURCE OF FUNDS:

CY 1975

				Source of F	unds						
Marin a result of the later of			Private			Public					
. Type of Service	TOTAL	Total	Insurance & Other	Out-of- Pocket	Total	Federal	State & Local				
	AGGREGATE EXPENDITURES (in 000)										
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services	530,901 250,719 97,076 24,997 211,260 25,005 145,338 30,470	294,013 194,610 92,710 21,032 202,300 21,291 85,313 12,136	222,346 106,199 12,075 7,672 7,942 345 1,903 12,136	71,667 88,411 80,635 13,360 194,358 20,946 83,410	236,888 56,109 4,366 3,965 8,960 3,714 60,025 18,334	173,553 46,362 2,596 1,554 5,447 2,898 34,201 6,501	. 63,335 9,747 1,770 2,411 3,513 816 25,824 11,833				
Personal Health Gov't. Public Health	1,315,766 45,532	923,405	370,618	552,787	392,361 45,532	273,112	29,040				
Prepayment	92,920	92,920	92,920	552,787	437,893	289,604	148,289				
Direct Services	1,454,218	1,010,323	403,330	PER CAP	YTA						
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Prepayment	185.56 87.63 33.93 8.74 73.84 8.74 50.80 10.65 459.90	102.77 68.02 32.40 7.35 70.71 7.44 29.82 4.24 322.76	77.72 37.12 4.22 2.68 2.78 .12 .67 4.24 129.54	25.05 30.90 28.18 4.67 67.93 7.32 29.15 	82.80 19.61 1.53 1.39 3.13 1.30 20.98 6.41 - 137.14 - 15.91	60.66 16.20 .91 .54 1.90 1.01 11.95 	22.14 3.41 .62 .84 1.23 .29 9.03 4.14 -41.68 10.15				
Prepayment Direct Services	508.29	355.23	162.02	193.21	153.06	101.22	51.83				

AGGREGATE AND PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES IN THE UNITED STATES BY TYPE OF SERVICE AND SOURCE OF FUNDS: CY 1975

				Source of	Funds				
			Private			Public			
Type of Service	TOTAL	Total	Insurance & Other	Out-of- Pocket	Total	Federal	State & Local		
			AGGRE	GATE EXPENDIT	URES (000,000)				
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services	\$ 51,574 25,502 8,257 2,543 10,815 1,894 9,982 3,756	\$ 22,089 19,075 7,793 1,940 9,806 1,780 4,246 919	\$ 19,358 8,954 1,085 627 675 29 167 919	\$ 2,731 10,121 6,708 1,313 9,131 1,751 4,079	\$ 29,485 6,427 464 603 1,010 114 5,736 2,836	\$ 20,324 4,625 280 416 531 63 3,276 2,116	\$ 9,161 1,801 184 187 479 51 2,460 721		
Personal_Health	114,323	67,648	31,814	35,834	46,675	31,631	15,044		
Gov't. Public Health Prepayment	4,643 4,779	4,779	4,779		4,643	2,410	2,233		
Direct Services	\$123,745	\$ 72,427	\$ 36,593	\$ 35,834	\$ 51,318	\$ 34,041	\$ 17,277		
	PER CAPITA								
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services	\$238.12 117.74 38.12 11.74 49.93 8.74 46.09 17.34	\$101.99 88.07 35.98 8.96 45.27 8.22 19.60 4.24	\$ 89.38 41.34 5.01 2.89 3.12 0.13 0.77 4.24	\$ 12.61 46.73 30.97 6.06 42.16 8.08 18.83	\$136.13 29.67 2.14 2.78 4.66 0.53 26.48 13.09	\$ 93.84 21.35 1.29 1.92 2.15 0.29 15.13 9.77	\$ 42.30 8.32 0.85 0.86 2.21 0.24 11.36 3.33		
Personal_Health	527.84	312.34	146.89	165.45	215.50	146.04	69.46		
ov't. Public Health repayment	21.44 22.06	22.06	22.06		21.44	11.13	10.31		
irect Services	\$571.34	\$334.40	\$168.95	\$165.45	\$236.94	\$157.17	\$ 79.77		

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expenditure for direct services was \$478.39. 1974 Iowa per capita expenditures for hospital care, physicians' services, dentists' services, other professionals, other services, and government public health were below national per capita expenditure for the same services. Iowa per capita expenditures for drugs and drug sundries, eyeglasses and appliances, nursing homes and prepayment were greater than or equal to national expenditures for those services.

Source of Funds

Approximately 73 percent of Iowa's direct health services were funded through private sources in 1974. Consumer out-of-pocket expenditures accounted for the largest proportion, 40.7 percent, of direct services expenditures. Private sources funded 73.1 percent of personal health care services in Iowa in 1974. Consumer out-of-pocket expenditures accounted for 44.9 percent of personal health care expenditures. In 1966, out-of-pocket expenditures were 52.5 percent of the total personal health expenditures. Public sources in Iowa financed a larger portion of personal health care services in 1974 than they did in 1966. In 1966 public sources accounted for 21 percent of the total while in 1974 they contributed 26.9 percent. Nationally, public sources financed 21.3 percent of personal health care expenditures in 1966 and in 1974, public sources financed 37.5 percent of the total.

In Iowa hospital care and physicians' services were financed primarily through third party payors (both private and public). Consumer out-of-pocket expenditures comprised 15.8 percent of total hospital expenditures and 13 percent of expenditures for physicians' services. Nursing home services and other professional services were also funded in large part through third party payors, although not to the same extent as hospital care and physicians' services.

Uses of Funds

Table 3 illustrates the proportional distribution of personal health care expenditures in Iowa and the United States by type of service. Hospital expenditures accounted for the largest component of total expenditures. In Iowa hospital expenditures were 39.6 percent of total expenditures. In the United States the figure was 45 percent. Expenditures for physicians' services were 19 percent of the total in Iowa and 21.4 percent of the total in the United States. With the exceptions of expenditures for hospital care and drugs and drug sundries, service specific expenditures for personal health care in Iowa were proportionately similar to national expenditures. In Iowa, expenditures for drugs and drug sundries and nursing home care comprised markedly higher proportions of total expenditures in 1974 in comparison to 1969.

1975 Expenditures

In 1975, total personal health care expenditures in Iowa were estimated to be \$1,315,766,000 or \$459.90 per capita. Expenditures for direct health care services totaled \$1,454,218,000 or \$508.29 per capita. Comparable per capita figures for United States personal and direct health care expenditures were \$527.84 and \$571.34, respectively. Iowa per capita expenditures for drugs and drug sundries, nursing home care and prepayment were greater than comparable national expenditures. Iowa expenditures for all other services were less than

or equal to national expenditures.

Aggregate personal health care expenditures in Iowa increased by 15.2 percent from 1974 to 1975. Per capita expenditures increased by 15 percent. Aggregate direct health care expenditures also increased by 15.2 percent. Correspondingly, aggregate national increases were 18 percent and 18.5 percent, respectively. In Iowa, expenditures for hospital care increased by 17.4 percent from 1974 to 1975. Expenditures for physicians' services increased by 15.8 percent. Tables 11 and 12 illustrate aggregate and per capita expenditures for Iowa and the United States for 1975.

Sources of Funds

Iowa per capita out-of-pocket expenditures for personal health care services rose from \$179.75 in 1974 to \$193.21 in 1975, an increase of 7.5 percent. Out-of-pocket expenditures accounted for 42 percent of the total in 1975. Private sources continued to fund the majority of Iowa personal health care expenditures in 1975. The respective figures in 1974 and 1975 were 73.1 percent and 70.2 percent.

In 1975 as in 1974 hospital care and physicians' services were largely financed through third parties. Services such as dentists' services and drugs and drug sundries were still largely financed out-of-pocket. Public financing for nursing home care increased from 35.2 percent in 1974 to 41.3 percent in 1975.

Uses of Funds

Table 3 illustrates the proportional distribution of personal health care expenditures in Iowa and the United States by type of service. In 1975, Iowa hospital expenditures were 40.3 percent of total expenditures. Nationally, hospital expenditures were 45.1 percent of total expenditures. These percentages were only slightly above the 1974 estimates. In both Iowa and the United States expenditures for physicians' services as a percentage of total expenditures also increased slightly. Expenditure proportions for drugs and drug sundries and eyeglasses and appliances declined slightly in both Iowa and the United States. In Iowa, drugs and drug sundries declined 16.5 percent to 16.1 percent. Nationally the decline was 10.5 percent to 9.5 percent. Iowa expenditures for drugs and drug sundries and nursing home care again proportionately exceeded national expenditures.

1976 Expenditures

In 1976, total personal health care expenditures in Iowa were \$1,532,858,000 or \$533.35 per capita. Expenditures for direct health care services totaled \$1,692,067,000 or \$588.75 per capita. Per capita figures for national personal and direct health care expenditures were \$596.02 and \$643.96, respectively. Iowa per capita expenditures for drugs and drug sundries, nursing home care, and prepayment were greater than national per capita expenditures. All other Iowa per capita expenditures were equal to or less than comparable national figures.

AGGREGATE AND PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES

IN IOWA BY TYPE OF SERVICE

AND SOURCE OF FUNDS:

CY 1976

				Source of F	unds					
			Private			Public				
Type of Service	TOTAL	Total	Insurance & Other	Out-of- Pocket	Total	Federal	State & Local			
			AGGREGA	ATE EXPENDITUR	RES (in 000)					
Hospital Care Physicians' Services Dentists' Services Other Professionals Orugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Prepayment	629,090 322,320 108,105 32,168 220,948 26,326 161,734 32,167 1,532,858 52,489 106,720	360,304 255,692 102,620 27,534 210,429 22,985 87,441 13,183 1,080,188	264,553 122,982 14,978 5,723 9,315 405 2,134 13,183 433,273	95,751 132,710 87,642 21,811 201,114 22,580 84,677 	268,786 66,628 5,485 4,634 10,519 3,341 74,293 18,984 	199,657 54,977 3,248 1,839 6,376 2,346 41,942 7,638 - 318,023 - 18,001	69,129 11,651 2,237 2,795 4,143 995 32,351 11,346 34,488			
Direct Services	1,692,067	1,186,908	539,993	646,915	505,159	336,024	169,135			
	PER CAPITA									
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Prepayment	218.89 112.15 37.61 11.19 76.88 9.16 56.27 11.19 533.35 18.26 37.13	125.37 88.97 35.71 9.58 73.22 8.00 30.42 4.59 375.85	92.05 42.79 5.21 1.99 3.24 .14 .74 4.59 150.76	33.32 46.18 30.49 7.59 69.98 7.86 29.46 	93.52 23.18 1.91 1.61 3.66 1.16 25.85 6.61	69.47 19.13 1.13 .64 2.22 .82 14.59 2.66 	24.05 4.05 .78 .97 1.44 .35 11.26 3.95 -46.85			
Direct Services	588.75	412.98	187.89	225.09	175.77	116.92	58.85			

AGGREGATE AND PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES IN THE UNITED STATES BY TYPE OF SERVICE AND SOURCE OF FUNDS: CY 1976

	Source of Funds										
			Private		T	Public					
hysicians' Services entists' Services ther Professionals rugs & Drug Sundries yeglasses & Appliances lursing Homes ther Services ersonal Health repayment Direct Services Other Professionals Orugs & Drug Sundries Eyeglasses & Appliances Nursing Homes	TOTAL	Total	Insurance & Other	Out-of- Pocket	Total	Federal	State & Local				
			AGGREG	ATE EXPENDIT	URES (000,000)						
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services	\$ 59,378 29,553 9,231 2,949 11,757 2,001 11,133 4,149	\$ 26,353 22,510 8,764 2,189 10,662 1,877 4,851 1,035	\$ 22,963 10,678 1,334 775 843 35 195 1,035	\$ 3,390 11,832 7,430 1,414 9,819 1,842 4,656	\$ 33,025 7,043 467 760 1,095 124 6,283 3,113	\$ 23,343 5,215 292 551 598 66 3,731 2,356	\$ 9,682 1,828 175 209 497 58 2,552 757				
	130,151	78,241	37,858	40,383	51,910	36,152	15,758				
Gov't. Public Health Prepayment	5,296 5,174	5,174	5,174		5,296	2,730	2,566				
Direct Services	\$140,621	\$ 83,415	\$ 43,032	\$ 40,383	\$ 57,206	\$ 38,882	\$ 18,324				
	PER CAPITA										
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Homes Other Services Personal Health Gov't. Public Health Prepayment	\$271.92 135.34 42.27 13.50 53.84 9.16 50.98 19.00 596.02 24.25 23.69	\$120.68 103.08 40.13 10.02 48.83 8.60 22.21 4.74 358.30 23.69	\$105.16 48.90 6.11 3.55 3.86 0.16 0.89 4.74 173.37	\$ 15.52 54.18 34.02 6.47 44.97 8.44 21.32 	\$151.24 32.25 2.14 3.48 5.01 0.57 28.77 14.34 237.72	\$106.90 23.88 1.34 2.52 2.74 0.30 17.09 10.79 	\$ 44.34 8.37 0.80 0.96 2.27 0.27 11.69 3.47 - 72.16 - 11.75				
Direct Services	\$643.96	\$381.99	\$197.06	\$184.93	\$261.97	\$178.06	\$ 83.91				

Aggregate personal health care expenditures in Iowa increased by 16.5 percent from 1975 to 1976. Per capita expenditures increased by 16 percent. Iowa aggregate direct health care expenditures increased by 16.4 percent. Corresponding aggregate national increases were 13.8 percent and 13.6 percent, respectively. Iowa aggregate expenditures for hospital care increased by 18.5 percent from 1975 to 1976. Aggregate expenditures for physicians' services increased by 28.6 percent. Corresponding national figures were 15.1 percent for hospital care and 15.9 percent for physicians' services. Tables 13 and 14 present aggregate and per capita expenditures for personal and direct health care services for Iowa and the United States for 1976.

Sources of Funds

Iowa per capita out-of-pocket expenditures for personal health care services rose from \$193.21 in 1975 to \$225.09 in 1976, an increase of 16.5 percent. Corresponding national out-of-pocket expenditures rose by 11.8 percent during this period. In Iowa, out-of-pocket expenditures accounted for 42.2 percent of total personal health care expenditures in 1976. This represents a slight increase over 1975. Private sources funded 70.5 percent of personal health care expenditures in Iowa in 1976. The 1974 and 1975 figures were 73.1 percent and 70.2 percent.

Hospital care and physicians' services continued to be predominantly financed through third parties. With the exception of nursing home services, other services tended to be largely financed out-of-pocket. Public financing of nursing home services increased from 41.3 percent in 1975 to 45.9 percent in 1976.

Uses of Funds

Table 3 illustrates the proportional distribution of personal health care expenditures in Iowa and the United States by type of service. In 1976, Iowa hospital expenditures comprised 41 percent of total expenditures. Nationally, hospital expenditures were 45.6 percent of total expenditures. Expenditures for physicians' services increased from 19.1 percent to 21 percent in Iowa and from 22.3 percent to 22.7 percent in the United States. Expenditure proportions for drugs and drug sundries and eyeglasses and appliances continued to decline in both Iowa and the United States. While declining slightly, Iowa expenditures for nursing home services continued to proportionately exceed national expenditures.

NATIONAL AND STATE EXPENDITURES SUMMARY

Trends in aggregate and per capita personal and direct health care expenditures are presented in Tables 15 and 16, for Iowa and the United States. Iowa aggregate personal health expenditures rose from \$468,631,000 in 1966 to \$1,532,858,000 in 1976, an increase of 227 percent. The corresponding national increase was 262 percent. In Iowa, the greatest increases occurred in the categories of hospital care (aggregate percent increase of 264 percent), nursing home care (aggregate increase of 910 percent), and drugs and drug sundries (aggregate increase of 242 percent). Per capita increases in expenditures for the period 1966 to 1976 are presented in Table 2. National expenditures for hospital care, physicians' services, dentists' services, other professionals increased at a greater rate than did corresponding Iowa expenditures. However, percentage increases in nursing home and drug and drug sundries expenditures were greater in Iowa than in the United States during the period. Hospital care and physicians' services comprised the largest components of spending in both Iowa and the United States during the period.

Total per capita personal health expenditures in Iowa were approximately 90 percent of national per capita expenditures during the period. In 1966 the Iowa per capita expenditures for personal health care was \$170.60 or 92.8 percent of the national expenditure of \$183.84. In 1976 the Iowa per capita expenditure had increased to \$533.35 or 89.5 percent of the national figure of \$596.02.

In general, with the exceptions of expenditures for drugs and drug sundries, and nursing home care, Iowa per capita expenditures have remained below national expenditures. Per capita expenditures for nursing home care and drugs and drug sundries have consistently exceeded national expenditures in 1974, 1975, and 1976. In Iowa per capita expenditures for nursing home care rose from \$5.89 in 1966 to \$56.27 in 1976, an increase of 855 percent. Nationally nursing home care expenditures rose from \$7.18 in 1966 to \$50.98 in 1976, an increase of 610 percent. Iowa per capita expenditures for hospital services rose from \$63.01 in 1966 to \$218.89 in 1976, an increase of 247 percent. Nationally, hospital services expenditures rose from \$72.78 to \$271.92, an increase of 276 percent.

AGGREGATE PERSONAL DIRECT HEALTH CARE EXPENDITURES IN IOWA AND THE UNITED STATES: SELECTED YEARS FY 1966 - CY 1976

		То	tal Health Expendit	ures						
Type of Service	FY 1966	FY 1969	CY 1974	CY 1975	CY 1976					
			IOWA (in 000)		3113					
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services	\$ 173,078 125,788 38,403 17,722 64,625 22,759 16,185 10,071	\$ 269,091 141,772 46,823 18,933 84,930 30,549 27,095 14,082	\$ 452,153 216,466 84,930 21,365 188,790 29,474 122,450 26,565	\$ 530,901 250,719 97,076 24,997 211,260 25,005 145,338 30,470	\$ 629,090 322,320 108,105 32,168 220,948 26,326 161,734					
Personal Health Care	468,631	633,275	1,142,193	1,315,766	_ 1,532,858					
Gov't. Public Health Prepayment	NA NA	NA NA	37,591 82,800	45,532 92,920	52,489					
Direct Health Care	NA	NA NA	1,262,584	1,454,218	1,692,067					
	UNITED STATES (in 000)									
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services	\$14,156,984 8,864,844 2,865,815 1,139,985 5,031,932 1,209,007 1,406,974 1,229,865	\$22,356,307 11,841,984 3,820,845 1,291,978 6,479,968 1,769,697 2,465,000 1,846,698	\$ 45,534,000 20,710,000 7,109,000 2,045,000 10,157,000 2,254,000 8,225,000 2,812,000	\$ 51,574,000 25,502,000 8,257,000 2,543,000 10,815,000 1,894,000 9,982,000 3,756,000	\$ 59,378,000 29,553,000 9,231,000 2,949,000 11,757,000 2,001,000 11,133,000 4,149,000					
Personal Health Care	36,005,406	51,872,457	96,846,000	114,323,000	_ 130,151,000_					
Gov't. Public Health Prepayment	NA NA	NA NA	4,238,000 3,382,000	4,643,000 4,779,000	5,296,000 5,174,000					
Direct Health Care	NA	NA	104,446,000	123,745,000	140,621,000					

Table 16

PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES IN IOWA AND THE UNITED STATES: SELECTED YEARS FY 1966 - CY 1976

Type of Service	FY 1966	FY 1969	CY 1974	CY 1975	CY 1976
			IOWA		
Hospital Care Physicians' Services Dentists' Services Other Professionals Orugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services	63.01 45.79 13.98 6.45 23.53 8.29 5.89 3.67	96.76 50.98 16.84 6.81 30.54 10.98 9.74 5.06	158.32 75.79 29.74 7.48 66.10 10.32 42.87 9.30	185.56 87.63 33.93 8.74 73.84 8.74 50.80 10.65	218.89 112.15 37.61 11.19 76.88 9.16 56.27 11.19
Personal Health Care	170.60	227.71	399.93	459.90	533.35
Gov't. Public Health Prepayment	NA NA	NA NA	13.16 28.99	15.91 32.48	18.26 37.13
Direct Health Care	NA	NA	442.08	508.29	588.75
			UNITED STATES		(4)
Hospital Care Physicians' Services Dentists' Services Other Professionals Drugs & Drug Sundries Eyeglasses & Appliances Nursing Home Care Other Health Services Personal Health Care	72.28 45.26 14.63 5.82 25.69 6.68 7.18 6.28	110.72 58.65 18.92 6.40 32.09 8.76 12.21 9.15 	199.36 94.84 32.56 9.36 46.51 10.32 37.67 	228.12 117.74 38.12 11.74 49.93 8.74 46.09 	271.92 135.34 42.27 13.50 53.84 9.16 50.98
Gov't. Public Health Prepayment	NA NA	NA NA	19.41 15.49	21.44 22.06	24.35 23.69
Direct Health Care	NA	NA	478.39	571.34	643.96

PUBLIC PROGRAM EXPENDITURES: 1974-1976

This section presents public program expenditures and funding sources in calendar years 1974, 1975 and 1976. In 1974 public sources in Iowa spent approximately \$307,496,000 in personal health care services. This amount constituted 26.9 percent of total expenditures for personal health care. In 1975 public funding rose to \$392,361,000 or 29.8 percent of total expenditures. In 1976 public funding amounted to \$452,670,000 or 29.5 percent of total expenditures. Nationally, public funds financed a larger proportion of personal health care expenditures. In 1974 public program funds financed 37.4 percent and in 1976 they financed 39.9 percent.

Both in Iowa and nationally, federal funds constitute the majority of public funds. In 1976, federal funds accounted for 70.3 percent of all public expenditures for personal health care in Iowa. Nationally, federal funds accounted for 69.6 percent of expenditures. 1976 figures for direct health care services in Iowa and the United States were 66.5 percent and 68 percent respectively.

Tables 17 - 19 present expenditures for public programs by type of expenditure. Table 20 presents the percent distribution of expenditures for public programs by type of expenditure. These tables indicate that the Medicare (Health Insurance for Aged) and Medicaid programs finance the majority of publicly funded services. In 1976, for all services (direct health care services), Medicare accounted for 43.8 percent and Medicaid for 25.9 percent of all public expenditures. From 1974 to 1976, the proportion of public program expenditures funded by these two programs rose from 65.9 percent to 69.7 percent. Veterans hospitals and nursing homes and general hospital and medical care accounted for another 18.1 percent (1976) of public health expenditures.

In Iowa, Medicare and Medicaid financed 85.9 percent of public expenditures for physicians' services in 1976. These programs also financed 69.7 percent of public expenditures for hospital care in the same year. Medicaid was the major public financer of nursing home care in the state. In 1976, 88.1 percent of all public expenditures for nursing home care were made through Medicaid.

EXPENDITURES FOR DIRECT HEALTH SERVICES AND SUPPLIES IN IOWA UNDER PUBLIC PROGRAMS,

BY PROGRAM, TYPE OF EXPENDITURE AND SOURCE OF FUNDS: CY 1974

(in thousands)

(in chousands)											
Program and Source of Funds	Total	Hospital Care	Physician Services	Dentist Services	Other Profes- sional Services	Drug and Drug Sundries	Eyeglasses and Appliances	Nursing Home Care	Other Health Services	Government Public Health Activities	
Total_											
Health Insurance for Aged Medicaid Worker's Compensation General Hosp. & Medical Care Veterans Administration Defense Department	154,002 73,357 5,798 58,070 14,685 2,324	118,989 13,527 2,913 44,155 7,141 1,530	30,210 8,009 2,456 1,431 1,978 723	2,899 229 14	529 620 171 49	5,956 114 1 696 51	1,212 904 114 140	3,062 35,734 3,308 1,054	534 4,055 3,448 6	5,174 5,071	
Other Health Programs Federal	36,848	17	523	16	1,997	4	179		6,797	27,344	
Health Insurance for Aged Medicaid General Hosp. & Medical Care Veterans Administration Defense Department	154,002 43,613 1,515 14,685 2,324	118,989 8,078 882 7,141 1,530	30,210 4,783 1,978 723	1,731 229 14	529 370 2	3,557 696 51	1,212 540 140	3,062 21,340 505 1,054	335 127 3,448 6	2,878	
Other Health Programs State and Local	12,303	14	26		234		147		1,968	9,943	
Medicald Workers' Compensation General Hosp. & Medical Care Other Health Programs	29,744 5,798 56,555 24,545	5,449 2,913 43,273 3	3,226 2,456 1,431 497	1,168	250 171 47 1,763	2,399 114 1 4	364 114 32	14,394 2,803	3,928 4,829	2,296 5,071 17,401	

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EXPENDITURES FOR DIRECT HEALTH SERVICES AND SUPPLIES IN IOWA UNDER PUBLIC PROGRAMS, BY PROGRAM, TYPE OF EXPENDITURE AND SOURCE OF FUNDS: CY 1975

(in thousands)

Program and Source of Funds	Total	Hospital Care	Physician Services	Dentist Services	Other Profes- sional Services	Drug and Drug Sundries	Eyeglasses and Appliances	Mursing Home Care	Other Health Services	Government Public Health Activities
Total Mealth Insurance for Aged Morkers' Compensation Medicaid Meneral Hosp. & Medical Care Meterans Administration Defense Department Other Health Programs	193,912 7,753 102,976 70,272 16,781 2,591 43,609	150,551 3,920 20,754 51,622 8,307 1,727	37,382 3,319 10,322 1,489 2,259 796 542	4,080 259 6 20	812 229 913 27	143 7,842 3 905 63 5	1,761 143 1,504 146	3,406 50,908 4,482 1,157	590 6,376 3,747 7,621	5,990 6,273 33,269
ealth Insurance for Aged edicaid eneral Hosp. & Medical Care eterans Administration efense Department ther Health Programs State and Local	193,912 58,836 1,713 16,781 2,591 15,773	150,551 11,857 1,105 8,307 1,727 6	37,382 5,897 2,259 796 28	2,331 259 6	812 522 221	4,480 905 63	1,761 859 146 132	3,406 29,125 513 1,157	346 95 3,747 2,313	3,419
Horkers' Compensation Medicaid Meneral Hosp. & Medical Care Other Health Programs	7,753 44,140 68,559 27,836	3,920 8,897 50,517	3,319 4,425 1,489 514	1,749	229 391 27 1,764	143 3,362 3 5	143 645 28	21,855 3,969	244 6,281 5,308	2,571 6,273 20,196

Table 19

EXPENDITURES FOR DIRECT HEALTH SERVICES AND SUPPLIES IN IOWA UNDER PUBLIC PROGRAMS,

BY PROGRAM, TYPE OF EXPENDITURE AND SOURCE OF FUNDS: CY 1976

(in thousands)

Program and Source of Funds	Total	Hospital Care	Physician Services	Dentist Services	Other Profes- sional Services	Drug and Drug Sundries	Eyeglasses and Appliances	Nursing Home Care	Other Health Services	Government Public Health Activities
Total Health Insurance for Aged Workers' Compensation Medicaid General Hosp. & Medical Care Veterans Administration Defense Department	221,301 8,794 130,672 72,827 18,854 2,569	172,009 4,455 28,185 53,414 8,750 1,674	44,091 3,736 13,131 1,575 2,530 823	5,137 309 5	994 259 1,079 48	172 9,151 10 1,092 56	1,001 172 1,859 162	3,206 65,447 4,328 1,311	708 5,272 4,700 11 8,293	5,973 8,179 38,337
Other Health Programs Federal	50,145	299	743	34	2,255	3/	148		0,293	30,337
Health Insurance for Aged Medicaid General Hosp. & Medical Care Veterans Administration	221,301 74,710 1,419 18,854	172,009 16,102 1,119 8,750	44,091 7,502 2,530	2,935	994 616	5,228	1,001 1,062 162	3,206 37,390 34 1,311	413 266 4,700 11	3,461
Other Health Programs State and Local	2,569 17,172	1,674	823	- 5	229	56	122		2,248	14,540
Workers' Compensation Medicaid General Hosp. & Medical Care	8,794 55,961 71,407	4,455 12,083 52,295	3,736 5,629 1,575	2,202	259 463 48	3,923 10	172 797	28,057 4,294	295 5,006	2,512 8,179
Other Health Programs	32,973	296	712	34	2,026	37	26		6,045	23,797

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PERCENT DISTRIBUTION OF PUBLIC PROGRAM EXPENDITURES IN IOWA BY PROGRAM AND TYPE OF EXPENDITURES, 1974 AND 1976

	Type of Service										
	A11 Services		Hospital Services		Physicians' Services		Nursing Servi				
PUBLIC PROGRAM	1974	1976	1974	1976	1974	1976	1974	1976			
All Programs	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			
Health Insurance for the Aged (Medicare)	44.6	43.8	63.2	64.0	66.6	66.2	7.1	4.3			
Workers' Compensation	1.7	1.7	1.5	1.7	5.4	5.6					
Medicaid	21.3	25.9	7.2	10.5	17.7	19.7	82.8	88.1			
General Hospital & Medical Care	16.8	14.4	23.5	19.9	3.2	2.4	7.7	5.8			
Veterans Hospitals	4.3	3.7	3.8	3.3	4.4	3.8	2.4	1.8			
Defense Department	.7	.5	.8	.6	1.6	1.2					
Other Health Programs	10.7	9.9	0	.1	1.2	1.1					

Components may not equal total due to rounding.

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HEALTH EXPENDITURES AND GROSS STATE PRODUCT

In this section, personal and direct health care expenditures are compared with Iowa's gross state product. "Gross State Product (GSP) is an estimate of the current market value of all final goods and services produced by the Iowa economy (in a year)." * Table 21 indicates that personal health care expenditures, as a percent of GSP, have risen considerably over the period from 1966 to 1976. In 1966 personal health care expenditures constituted 4.5 percent of the GSP. By 1976 they had risen to 6.7 percent of the GSP, an increase of 48.9 percent. In the United States personal health care expenditures as a percent of Gross National Product (GNP) were 5.0 percent in 1966 and 7.7 percent in 1976. This constitutes an increase nationally of 54 percent.

The estimates displayed in Table 21 indicate that personal health care expenditures have been increasing at a faster rate than either the GSP or the GNP. During the 1966 to 1976 period, Iowa's GSP increased by 122 percent. During the same period, ** personal health care expenditures in Iowa increased by 227 percent. Nationally, while GNP rose by approximately 135 percent, national personal health care expenditures increased by more than 262 percent.

^{* 1980} Statistical Profile of Iowa, Iowa Development Commission.

^{**} Actually 10.5 years for health expenditures.

PERSONAL AND DIRECT HEALTH CARE EXPENDITURES

AS PERCENTAGES OF GROSS STATE PRODUCT AND GROSS NATIONAL PRODUCT

IN IOWA AND THE UNITED STATES: FY 1966, FY 1969, CY 1974, CY 1975, CY 1976

	TI	IOV	10			UNITE	STATES			
Gross State Product (000)*		Personal Health Expendi- tures	Percent of GSP	Direct Health Expendi- tures	Percent of GSP	Gross National Product (000,000)	Personal Health Expendi- (000,000)	Percent of GNP	Direct Health Expendi- tures (000,000)	Percent of GNP
	ATO 200 000	\$ 468,631	4.5	(000) NA	NA NA	\$ 722,400	\$ 36,005	5.0	NA	NA
1966	\$10,300,000	\$ 468,631		NA	NA	904,200	51,872	5.7	NA	NA
1969	12,200,000	1,142,193		\$1,262,584	6.7	1,412,900	96,846	6.9	\$104,466	7.4
1974	18,817,800	1,315,766		1,454,218	6.8	1,528,800	114,323	7.5	123,745	8.1
1975 1976	21,429,200	1,532,858		1,692,067		1,700,100	130,151	7.7	140,621	8.2

^{*} GSP figures for 1966 and 1969 are calendar year figures.

SOURCE:

Survey of Current Business, U.S. Dept. of Commerce, July, 1978.

1980 Statistical Profile of Iowa, Iowa Development Commission.

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HEALTH CARE EXPENDITURES IN FEDERAL REGION VII: 10WA, MISSOURI, KANSAS, AND NEBRASKA

All four states in HHS Region VII have now completed health expenditure studies. Tables 22 and 23 display per capita personal and direct health care expenditure figures by type of service and source of funds for 1976. With the exception of Missouri, all states in the region expended less per capita for personal and direct health care than the United States. With the exception of Missouri, all states spent less per capita for hospital care and physicians' services than the United States. Expenditure figures for other service components of personal health care were generally lower than the national figures with the exception of nursing home care and drugs and drug sundries. Iowa, Kansas and Nebraska spent substantially more per capita for nursing home care than the United States. Iowa, Missouri and Nebraska spent substantially more for drugs and drug sundries than the United States. In all four states, per capita expenditures for government public health activities were less than national expenditures. Per capita expenditures for prepayment were higher throughout the region than nationally.

Private sources financed a greater proportion of direct health care expenditures in all four states than in the United States. Nationally, private sources funded 59.3 percent of direct expenditures. In Iowa, Missouri, Kansas and Nebraska, private sources funded 70.1 percent, 71.9 percent, 63 percent and 72 percent of direct expenditures, respectively. Correspondingly, public sources funded a greater proportion of direct expenditures nationally than they funded in any of the four states. With the exception of Kansas, all four states spent more per capita through private sources for direct health care than did the United States. Only Kansas spent less out-of-pocket per capita than the United States. All four states spent less per capita through public programs than the United States.

Table 22

PER CAPITA PERSONAL AND DIRECT HEALTH CARE EXPENDITURES

BY TYPE OF SERVICE IN THE UNITED STATES, IOWA, MISSOURI,

KANSAS, AND NEBRASKA: CY 1976

Type of Service	United States	Iowa	Missouri	Kansas	Nebraska
Hospital Care	\$271.92	\$218.89	\$284.39	\$248.73	\$237.01
Physicians' Services	135.34	112.15	147.79	122.72	84.52
Dentists' Services	42.27	37.61	34.85	35.57	39.83
Other Professionals	13.50	11.19	13.47	12.24	8.43
Drugs and Drug Sundries	53.84	76.88	71.75	43.86	85.25
Eyeglasses and Appliances	9.16	9.16	9.16	9.12	9.16
Nursing Home Care	50.98	56.27	46.30	57.33	75.06
Other Health Services	19.00	11.19	7.80	10.85	13.96
Personal Health Care	596.02	533.35	615.54	540.42	553.22
Govt. Public Health	24.25	18.26	18.08	12.59	17.21
Prepayment	23.69	37.13	35.60	26.74	46.11
Direct Health Care	\$643.96	\$588.75	\$669.22	\$579.75	\$616.54

SOURCE: Health Care Expenditures in Kansas, 1966-1976, Elizabeth Mills, Kansas OHP

Health Care Expenditures in Nebraska, Selected Years, 1966-1976, David Palm,

Arthur Chan, Nebraska SHPDA

Health Care Expenditures in Missouri, 1966-1967, Thomas Lange, Missouri SHPDA.

Table 23

PER CAPITA DIRECT HEALTH CARE EXPENDITURES BY SOURCE OF FUNDS IN THE UNITED STATES, IOWA, MISSOURI,

KANSAS, AND NEBRASKA: CY 1976

United States	Iowa	Missouri	Kansas	Nebraska
\$643,96	\$588.75	\$669.22	\$579.75	\$616.54
				+
381.99	412.98	481.14	365.31	443.78
197.06	187.89	210.40	191.39	193.14
184.93	225.09	270.74	173.92	250.14
			+	
261.97	175.77	188.08	214.44	172.76
178.06	116.92	128.87	148.08	135.11
83.91	58.85	59.21	66.36	37.65
	381.99 197.06 184.93 261.97 178.06	381.99 412.98 197.06 187.89 184.93 225.09 	381.99 412.98 481.14 197.06 187.89 210.40 184.93 225.09 270.74 261.97 175.77 188.08 178.06 116.92 128.87	381.99 412.98 481.14 365.31 197.06 187.89 210.40 191.39 184.93 225.09 270.74 173.92 261.97 175.77 188.08 214.44 178.06 116.92 128.87 148.08

SOURCE: Health Care Expenditures in Kansas, 1966-1976, Elizabeth Mills, Kansas OHP.

Health Care Expenditures in Nebraska, Selected Years, 1966-1976, David Palm,
Arthur Chan, Nebraska, SHPDA.

Health Care Expenditures in Missouri, 1966-1967, Thomas Lange, Missouri SHPDA.

DEFINITION OF TERMS

PERSONAL HEALTH CARE EXPENDITURES:

Personal health care expenditures represent all outlays for health services and supplies except expenses for government public health activities and prepayment. Also excluded are amounts spent by private voluntary health agencies on training and administration and all expenditures for research, construction, and training.

DIRECT HEALTH CARE EXPENDITURES:

Direct health care expenditures are defined as personal health care expenditures plus expenditures for government public health activities and prepayment.

HOSPITAL SERVICES:

Expenditures for hospital services are defined as funds expended for services and supplies provided by public and private hospitals. This includes physician and ancillary services provided for and billed by hospitals. Expenses for manpower training and research are excluded where separable. State hospital schools at Woodward and Glenwood are excluded from this category.

PHYSICIANS' SERVICES:

Expenditures for physicians are defined as funds expended to all non-Federal, self-employed practicing M.D.s and D.O.s. Expenditures for all other practicing physicians are included in other categories; expenditures for physicians salaried by hospitals are included under hospital services. These expenditures represent the gross business receipts of income of Iowa physicians.

DENTISTS' SERVICES:

Expenditures for dentists' services are defined as funds expended to all non-Federal, self-employed, practicing dentists. Also included in this category are expenditures for dental laboratories, dental hygienists, dental assistants and other dental professionals. Expenditures for other dentists' services (e.g. hospital based dentists) are included in other categories. These expenditures represent the gross business receipts of income of Iowa dentists.

OTHER PROFESSIONAL SERVICES:

Expenditures for other professional services are defined as funds expended for medical labs, chiropractors, medical photographers, midwives, nutritionists, occupational therapists, physiotherapists, podiatrists, psychotherapists, visiting nurses and those involved in vocational rehabilitation. It also includes part of the incomes of opticians and optometrists.

DRUGS AND DRUG SUNDRIES:

Expenditures for drugs and drug sundries are defined as funds expended for prescription drugs, proprietary medicines, and first aid products except for those dispensed by hospital pharmacies.

EYEGLASSES AND APPLIANCES:

Expenditures for eyeglasses and appliances represent spending for eyeglasses (prescription and non-prescription), contact lenses, and related supplies dispensed by optical goods stores; braces and other orthopedic devices; and wheelchairs and other physical apparatus. Optometrist fees are not included since they are included in "Other Professional Services". Ophthalmologist fees are included in "Physicians' Services".

NURSING HOME FARE:

Expenditures for nursing home care represent funds expended for professional, practical, and domiciliary nursing homes. Boarding homes are excluded because they provide custodial rather than nursing care. Expenditures for VA nursing home facilities are also included in this category. Iowa figures include only funds expended for licensed skilled nursing facilities and licensed intermediate care facilities.

OTHER HEALTH SERVICES:

Expenditures for other health services are defined as a residual amount as funds expended by public and private health programs that are not included in other categories. Included in this category are funds expended for 1) local public school health services, 2) federal grants to voluntary health agencies, 3) community mental health centers and 4) non-contract health care services provided by correctional facilities and state hospital schools.

GOVERNMENT PUBLIC HEALTH ACTIVITIES:

Expenditures for government public health activities represent funds expended by local, state, and federal governments for health services such as mental hygiene, alcoholic services, services for emotionally disturbed children, drug abuse services, various screening programs, etc. Also included under this category are expenditures for licensing, regulatory, and planning functions.

PREPAYMENT:

Prepayment expenses consist of the difference between premiums and benefits for all private third-party insurers (i.e., the amount retained by health insurance organizations for operating expenses, additions to reserves, and profits).

OUT-OF-POCKET:

Out-of-pocket expenditures are defined as direct consumer expenditures for services and supplies not reimbursed by other mechanisms. It represents direct outlay by the consumer for supplies or services.

PRIVATE INSURANCE AND OTHER:

Private insurance expenditures are the benefits paid for various services by all private third-party insurers (Blues and commercial insurance companies).

Other payments include amounts spent by voluntary health agencies, industrial in-plant services, and other philanthropic endeavors.

PUBLIC:

Public expenditures include all levels of government (Federal, state, and local) and all monies (direct services, grants) for various services.

GENERAL HOSPITAL AND MEDICAL CARE:

General hospital and medical care includes care provided by or through state and local public hospitals.

WORKERS' COMPENSATION:

Workers' compensation includes medical expenditures under this program even though the benefits are paid by private insurers.

MEDICARE:

Expenditures made under Title XVIII of the Social Security Act.

MEDICAID:

Expenditures made under Title XIX of the Social Security Act.

MATERNAL & CHILD HEALTH:

Expenditures made under Title V of the Social Security Act.

DEFENSE DEPARTMENT:

Expenditures for health services made from Defense Department funds. Expenditures under the CHAMPUS program are included in this category.

METHODOLOGY

This section describes the general approach used in implementing this flow of funds study. It provides a brief explanation of sources of data and methods of estimation.

The methods used in this study parallel those used by other states and by the federal government. In general, the approach used estimates the total expenditures for each type of service (hospital care, physician services, etc.) and then obtains, from various sources, estimates of third party expenditures (private insurance, public programs, voluntary agencies, etc.). The difference between the estimated expenditures and those accounted for by third party payers is attributed to ou-of-pocket payments.

Hospital Care:

Total expenditures by public and private hospitals including psychiatric and Veterans Administration hospitals were estimated from information published by the American Hospital Association. Expenditures for state hospitals were obtained from the State Auditor's office. Expenditures for hospitals for the mentally retarded were not included in this category. Expenditures for health care services provided by the state hospital schools were included in the 'Other Health Services' category.

Physicians' Services:

Total expenditures for physicians' services were estimated by multiplying the average gross income of physicians in the midwest region of the United States by the number of full time, practicing, self-employed physicians in Iowa during a given year. Physician income statistics were obtained from average gross income statistics published by Medical Economics. The number of active, full time, non-federal, self-employed physicians was obtained from health personnel statistics issued by the Iowa Office for Planning & Programming and the Iowa Department of Health.

Dentists' Services:

Total expenditures for dentists' services were estimated by multiplying the average gross income of dentists in the United States by the number of non-federal, self-employed, practicing dentists in Iowa during a given year. Dentist income statistics were obtained from American Dental Association surveys and the Health Care Financing Administration. The number of dentists was obtained from health personnel statistics issued by the Iowa Office for Planning & Programming and the Iowa Department of Health.

Other Professional Services:

Because of data limitations, it is currently not possible to derive an independent estimate of expenditures for services by other professionals. In

order to estimate the gross business receipts of other health professionals, it was assumed that the ratio of other professionals' income to physicians' income in the United States was approximately equivalent to the ratio of other professionals income to physicinas' income in Iowa. The national ratio was computed and multiplied by Iowa expenditures for physicians' services in order to provide the estimate.

Drug and Drug Sundries:

Iowa data for expenditures for drugs and drug sundries are currently unavailable. Because over the past few years the percent of disposable income spent on prescription drugs in the United States has remained relatively stable at .84 percent, this percentage was applied to Iowa disposable income figures from Survey of Current Business in order to obtain an estimate for expenditures for prescription drugs in Iowa. Since total prescription drug sales are approximately 60 percent of total drug and drug sundry revenues, the estimated prescription drug revenues for Iowa were divided by .60 in order to obtain an estimate for total expenditures for drugs and drug sundries.

Eyeglasses and Appliances:

No independent method for estimating this category of expenditure currently exists. National per capita figures were multiplied by the Iowa population in order to obtain an estimate.

Nursing Homes:

Nursing home expenditures were estimated by adding together the estimated expenditures for Intermediate Care Facilities (ICF) and Skilled Nursing Facilities (SNF). Expenditure data for SNFs was obtained from their respective Medicare intermediaries. Expenditure data for ICFs was estimated by multiplying the estimated number of patient days for Iowa ICFs by the average cost per patient day for Iowa ICFs. Patient day figures were obtained from the Iowa Department of Health. Average cost data were obtained from the Iowa Department of Social Services. It should be noted that this estimate is a "cost" estimate, and does not include any excess of revenues over expenses generated by nursing homes. Estimates of national expenditures and expenditures by other states also employ cost based estimates.

Government Public Health Activities:

Expenditures for service category were estimated by summing the outlays for health care reported by various levels of government for services not included in other categories. Included in this category are expenditures for planning, licensing and regulatory functions.

Other Health Services:

Expenditures for this service category are comprised of funds expended by public and private health programs for services that are not included in other categories.

Prepayment:

Expenditures for prepayment were obtained by subtracting total health insurance benefits for Iowa from total health insurance premiums for Iowa. Both benefits and premiums were adjusted to exclude disability benefits and premiums.

Private Insurance:

Total expenditure figures for private health insurance benefits and premiums in Iowa were obtained from <u>Source Book of Health Insurance Data</u> published by the Health Insurance Institute. Figures were adjusted to exclude disability premiums and benefits. Benefits were distributed by type of service in the same proportions as national health insurance benefits.

Other Sources of Funds:

Included in this category are expenditures made by voluntary health agencies and private colleges, industrial in-plant services. Although a survey of voluntary health agencies in Iowa was conducted, only a small number were able to provide relatively complete data; therefore, the national per capita expenditures were multiplied by Iowa population figures to obtain an estimate. Private colleges were surveyed for their expenditures.

Public Programs:

Expenditures under public programs were generally estimated by surveying state agencies and departments that provide health care services, surveying the Veterans Administration, and gleaning through state, county and municipality audits. Worker's compensation figures, due to their unavailability on a state level, were estimated using per capita figures from Missouri. It was felt that of the available figures, Missouri's provided the best approximation of the employment mix existing in Iowa. Figures for federal grant expenditures in Iowa were obtained from the Iowa Office for Planning and Programming. Medicare data were obtained from the Health Care Financing Administration. When information was provided by fiscal year, it was converted to calendar year by monthly pro-rating.

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