

Table 120. Department of Veterans Affairs health care expenditures and use, and persons treated, by selected characteristics: United States, selected fiscal years 2000–2013

Excel, PDF, and more data years: <http://www.cdc.gov/nchs/hus/contents2014.htm#120>.

[Data are compiled from patient records, enrollment information, and budgetary data by the Department of Veterans Affairs]

Type of expenditure and use	2000	2005 ¹	2007 ¹	2008 ¹	2009 ¹	2010 ¹	2011 ¹	2012 ¹	2013 ¹
Health care expenditures									
Amount, in millions									
All expenditures ²	\$19,327	\$30,291	\$34,025	\$38,282	\$42,955	\$47,280	\$50,575	\$51,880	\$54,738
Percent distribution									
All services	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Inpatient hospital	37.3	24.3	24.0	23.5	22.7	21.4	20.6	20.1	19.8
Outpatient care	45.7	53.4	53.5	53.2	53.5	52.5	52.6	53.8	53.2
Nursing home care	8.2	8.4	8.3	8.1	7.8	7.4	7.2	7.3	7.0
All other ³	8.8	13.9	14.2	15.2	16.0	18.8	19.6	18.8	20.0
Health care use									
Number, in thousands									
Inpatient hospital discharges ^{4,5}	579	614	607	622	640	656	653	646	632
Outpatient visits ⁶	38,370	57,169	62,234	66,484	73,969	79,457	83,146	87,370	90,226
Nursing home discharges ^{5,7}	91	61	63	64	65	67	63	67	69
Inpatients ⁸									
Total	417	488	477	492	512	532	540	546	545
Percent distribution									
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Veterans with service-connected disability	34.4	37.6	39.9	41.1	42.6	43.5	44.9	46.5	48.3
Veterans without service-connected disability	64.7	61.5	59.1	58.0	56.4	55.6	54.3	52.6	50.8
Low income	41.7	39.9	36.9	35.4	34.8	34.6	33.4	32.1	30.4
Veterans receiving aid and attendance or housebound benefits or who are catastrophically disabled ⁹	16.0	12.1	11.3	11.1	10.5	10.1	9.8	9.6	9.4
Veterans receiving medical care subject to copayments ¹⁰	5.2	8.6	9.8	10.0	9.5	9.3	9.3	9.2	9.3
Other and unknown ¹¹	1.8	1.0	1.0	1.6	1.6	1.6	1.7	1.7	1.7
Nonveterans	0.9	0.9	0.9	0.9	1.0	0.9	0.9	0.9	0.9
Outpatients ⁸									
Total	3,657	5,077	5,221	5,291	5,439	5,631	5,789	5,903	6,009
Percent distribution									
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Veterans with service-connected disability	30.7	31.6	33.8	34.7	37.1	38.6	39.8	41.7	44.0
Veterans without service-connected disability	60.8	62.7	60.8	59.7	57.2	56.4	55.1	53.3	51.1
Low income	37.6	31.8	28.9	27.2	25.9	25.7	24.9	24.0	22.6
Veterans receiving aid and attendance or housebound benefits or who are catastrophically disabled ⁹	3.8	3.5	3.5	3.5	3.4	3.4	3.3	3.2	3.2
Veterans receiving medical care subject to copayments ¹⁰	15.4	25.4	25.5	25.2	23.8	23.0	22.3	21.4	20.7
Other and unknown ¹¹	4.0	2.0	3.0	3.8	4.0	4.3	4.6	4.6	4.6
Nonveterans	8.5	5.7	5.4	5.7	5.7	5.1	5.1	5.1	4.9

¹Starting with FY2005, the cost report data are taken from a different report than earlier years. The major impact of this change was to assign more cost to outpatient care than inpatient hospital. Also in FY2005, the responsibility for residential rehabilitation programs including domiciliary care was reassigned from extended care to mental health care.

²Health care expenditures exclude construction, medical administration, and miscellaneous operating expenses at Department of Veterans Affairs headquarters.

³Includes miscellaneous benefits and services, contract hospitals, education and training, subsidies to state veterans hospitals, nursing homes and residential rehabilitation treatment programs (formerly domiciliaries), and the Civilian Health and Medical Program of the Department of Veterans Affairs.

⁴Discharges from medicine, surgery, psychiatry, rehabilitation medicine, spinal cord, and neurology units. Starting with FY2005 data, includes domiciliary care. Does not include long-term stays.

⁵Until FY2004, includes Department of Veterans Affairs nursing home and residential rehabilitation treatment programs (formerly domiciliary) stays, and community nursing home care stays.

⁶Hospital outpatient care. Includes the following services: physicians, laboratory tests, home-based primary care, or outpatient fee-basis care.

⁷Includes state nursing home veteran patients.

⁸Individuals receiving services. Individuals with multiple discharges or visits are only counted once in the inpatient or outpatient category. The inpatient and outpatient totals are not additive because most inpatients are also treated as outpatients.

⁹Includes veterans who are receiving aid and attendance or housebound benefit and veterans who have been determined by the Department of Veterans Affairs to be catastrophically disabled.

¹⁰Includes veterans who receive medical care subject to copayments according to income level, based on financial means testing.

¹¹Includes expenditures for services for veterans who were prisoners of war, exposed to Agent Orange, and other. Veterans reporting Agent Orange exposure but not treated for it were means tested and placed in the low income or other group depending on income.

NOTES: Some veterans have multiple sources of health coverage, including Medicare or private insurance. Estimates in this table relate only to health care use paid for by the Veteran's Administration. At the end of FY2013, the veteran population was estimated at 22.0 million, with 45% aged 65 and over. Of all living veterans, 6% had served during World War II, 9% during the Korean conflict, 33% during the Vietnam era, 30% during the Persian Gulf War (service from August 2, 1990 to present), and 25% during peacetime. Percentages sum to more than 100% because some veterans serve during more than one war. See Appendix I, Department of Veterans Affairs National Enrollment and Patient Databases. Data for additional years are available. See the Excel spreadsheet on the *Health, United States* website at: <http://www.cdc.gov/nchs/hus.htm>.

SOURCE: Department of Veterans Affairs (VA), Office of the Assistant Deputy Under Secretary for Health, National Patient Care Database, National Enrollment Database, budgetary data, and unpublished data. Veteran population estimates were provided by the VA's Office of the Actuary. See Appendix I, Department of Veterans Affairs National Enrollment and Patient Databases.