

**Table 31**

**Discharges, Total Days of Care, and Program Payments for Medicare Beneficiaries Discharged from Short-Stay Hospitals, by Total Days of Care: Calendar Year 2002**

Total Days of Care	Discharges <sup>1</sup>		Total Days of Care			Program Payments			
	Number	Percent	Number	Percent	Per Discharge	Amount in Thousands	Percent	Per Discharge <sup>2</sup>	Per Day
Total	12,607,370	100.0	74,565,880	100.0	5.9	\$94,194,024	100.0	\$7,507	\$1,263
1 Day	1,694,010	13.4	1,694,010	2.3	1.0	8,501,369	9.0	5,053	5,018
2 Days	1,763,080	14.0	3,526,160	4.7	2.0	8,261,801	8.8	4,709	2,343
3 Days	1,856,550	14.7	5,569,650	7.5	3.0	9,639,127	10.2	5,212	1,731
4 Days	1,561,610	12.4	6,246,440	8.4	4.0	9,137,250	9.7	5,874	1,463
5 Days	1,176,155	9.3	5,880,775	7.9	5.0	7,552,337	8.0	6,447	1,284
6 Days	908,465	7.2	5,450,790	7.3	6.0	6,409,114	6.8	7,082	1,176
7 Days	741,160	5.9	5,188,120	7.0	7.0	5,704,344	6.1	7,730	1,100
8 Days	548,430	4.4	4,387,440	5.9	8.0	4,559,806	4.8	8,350	1,039
9 Days	404,755	3.2	3,642,795	4.9	9.0	3,594,332	3.8	8,919	987
10 Days	316,135	2.5	3,161,350	4.2	10.0	2,954,504	3.1	9,382	935
11 Days	256,450	2.0	2,820,950	3.8	11.0	2,543,416	2.7	9,963	902
12 Days	201,085	1.6	2,413,020	3.2	12.0	2,120,802	2.3	10,591	879
13 Days	171,430	1.4	2,228,590	3.0	13.0	1,902,654	2.0	11,154	854

See footnotes at end of table.

**Table 31—Continued**  
**Discharges, Total Days of Care, and Program Payments for Medicare Beneficiaries Discharged from Short-Stay Hospitals, by Total Days of Care: Calendar Year 2002**

Total Days of Care	Discharges <sup>1</sup>		Total Days of Care			Program Payments			
	Number	Percent	Number	Percent	Per Discharge	Amount in Thousands	Percent	Per Discharge <sup>2</sup>	Per Day
14 Days	157,935	1.3	2,211,090	3.0	14.0	\$1,848,044	2.0	\$11,756	\$836
15 Days	122,595	1.0	1,838,925	2.5	15.0	1,520,912	1.6	12,455	827
16 Days	93,260	0.7	1,492,160	2.0	16.0	1,227,227	1.3	13,232	822
17 Days	78,135	0.6	1,328,295	1.8	17.0	1,092,624	1.2	14,071	823
18 Days	67,265	0.5	1,210,770	1.6	18.0	1,019,828	1.1	15,246	842
19 Days	55,235	0.4	1,049,465	1.4	19.0	884,564	0.9	16,134	843
20 Days	50,165	0.4	1,003,300	1.3	20.0	841,956	0.9	16,908	839
21-30 Days	251,360	2.0	6,123,640	8.2	24.4	5,612,084	6.0	22,501	916
31-40 Days	72,190	0.6	2,497,930	3.3	34.6	2,782,383	3.0	38,947	1,114
41-50 Days	28,360	0.2	1,270,225	1.7	44.8	1,565,020	1.7	55,824	1,232
51-60 Days	13,415	0.1	737,440	1.0	55.0	985,945	1.0	74,948	1,337
61-90 Days	12,835	0.1	920,535	1.2	71.7	1,205,034	1.3	95,676	1,309
91 Days or More	5,305	(3)	672,015	0.9	126.7	727,546	0.8	140,861	1,083

<sup>1</sup>Excludes discharges for managed care enrollees that were paid by the managed care plan.

<sup>2</sup>The average program payment per discharge does not reflect discharges with covered services, but for whom no program payments were reported.

<sup>3</sup>Less than 0.05 percent.

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services. Numbers may not add to totals because of rounding.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Data Extract System; data development by the Office of Research, Development, and Information.