

Table 23

**Discharges, Total Days of Care, Total Charges, and Program Payments for Medicare
Beneficiaries Discharged from Short-Stay Hospitals, by Type of Entitlement:
Calendar Years 1972-2002**

Type of Entitlement and Year	Discharges		Total Days of Care		
	Number in Thousands	Rate per 1,000 HI Enrollees	Number in Thousands	Rate per 1,000 HI Enrollees	Per Discharge
All Beneficiaries					
1972	6,380	302	77,198	3,656	12.1
1973	6,984	300	81,529	3,499	11.7
1974	7,629	319	87,523	3,658	11.5
1975	8,001	325	89,275	3,623	11.2
1976	8,465	334	93,480	3,693	11.0
1977	8,808	338	96,825	3,711	11.0
1978	9,216	344	99,372	3,712	10.8
1979	9,642	351	102,469	3,750	10.7
1980	10,279	366	109,175	3,890	10.6
1981	10,660	368	110,806	3,827	10.4
1982	11,109	382	113,047	3,889	10.2
1983	11,436	387	112,011	3,786	9.8
1984	10,896	363	96,485	3,217	8.9
1985	10,027	328	86,339	2,822	8.6
1986	10,044	322	86,910	2,784	8.7
1987	10,110	317	89,651	2,815	8.9
1988	10,256	316	90,873	2,804	8.9
1989 ³	10,148	307	89,902	2,721	8.9
1990	10,522	312	92,735	2,749	8.8
1991 ⁴	10,737	312	92,935	2,699	8.7
1992 ⁴	10,958	312	91,990	2,616	8.4
1993 ⁴	10,979	306	87,883	2,446	8.0
1994 ⁴	11,282	335	84,742	2,516	7.5
1995 ⁴	11,435	340	80,056	2,378	7.0
1996 ⁴	11,474	345	75,660	2,272	6.6
1997 ⁴	11,527	353	73,029	2,239	6.3
1998 ⁴	11,355	355	70,055	2,192	6.2
1999 ⁴	11,605	365	70,508	2,219	6.1
2000 ⁴	11,720	363	70,330	2,175	6.0
2001 ⁴	12,231	366	72,607	2,171	5.9
2002 ⁴	12,607	365	74,566	2,158	5.9
Average Annual Rate of Change					
1972-1983 ⁶	5.4	2.3	3.4	0.3	-1.9
1983-2002 ⁶	0.5	-0.3	-2.1	-2.9	-2.6
1972-2002	2.3	0.6	-0.1	-1.7	-2.4

See footnotes at end of table.

Table 23—Continued

**Discharges, Total Days of Care, Total Charges, and Program Payments for Medicare
Beneficiaries Discharged from Short-Stay Hospitals, by Type of Entitlement:
Calendar Years 1972-2002**

Total Charges		Program Payments					
Amount in Millions	Per Discharge	Amount in Millions	Per Discharge ¹	Per HI Enrollee	Per Day	Percent of Total Charges	Percent of Total Medicare Payments ²
\$7,401	\$1,160	\$5,576	\$874	\$264	\$72	75.3	69.5
8,494	1,216	6,446	923	277	79	75.9	69.7
10,471	1,373	7,837	1,027	328	90	74.8	69.7
13,073	1,634	9,748	1,218	396	109	74.6	67.0
15,951	1,882	11,803	1,394	466	126	74.1	67.0
19,157	2,170	13,944	1,583	534	144	73.0	68.1
22,408	2,431	16,008	1,737	598	161	71.4	68.0
26,120	2,709	18,463	1,915	672	180	70.7	66.7
31,992	3,112	22,099	2,150	787	202	69.1	66.4
38,164	3,580	25,936	2,433	907	234	68.0	65.0
46,369	4,174	30,601	2,755	1,053	271	66.0	63.6
54,127	4,733	34,338	3,003	1,161	307	63.4	64.3
52,901	4,855	38,500	3,533	1,284	399	72.8	65.1
53,397	5,332	40,200	4,009	1,314	466	75.2	62.9
59,376	5,911	41,781	4,160	1,338	481	70.4	60.7
68,490	6,775	44,068	4,359	1,383	492	64.3	58.1
78,536	7,657	46,879	4,571	1,446	516	59.7	57.6
88,038	8,676	49,091	4,838	1,486	546	55.8	52.3
102,544	9,746	53,708	5,281	1,593	579	52.4	53.0
117,616	10,954	58,750	5,610	1,706	632	50.0	53.0
131,451	11,996	64,810	6,057	1,843	705	49.3	53.7
139,375	12,695	67,260	6,257	1,872	765	48.3	52.0
146,074	12,948	70,624	6,377	2,097	833	48.3	48.2
149,502	13,074	74,836	6,656	2,223	935	50.1	47.1
152,854	13,322	78,546	6,953	2,359	1,038	51.4	47.0
159,285	13,818	80,725	7,118	2,475	1,105	50.7	46.0
163,541	14,402	78,364	7,021	2,452	1,119	47.9	46.6
178,399	15,373	79,013	6,920	2,486	1,121	44.3	47.4
196,017	16,725	81,231	6,971	2,513	1,155	41.4	46.6
227,145	18,572	88,323	7,262	2,641	1,216	38.9	44.7
271,750	21,555	94,194	7,507	2,726	1,263	34.7	43.7
Average Annual Rate of Change							
19.8	13.6	18.0	11.9	14.4	14.0	---	---
8.9	8.3	5.5	4.9	4.6	7.7	---	---
12.8	10.2	9.9	7.4	8.1	10.0	---	---

Table 23—Continued

**Discharges, Total Days of Care, Total Charges, and Program Payments for Medicare
Beneficiaries Discharged from Short-Stay Hospitals, by Type of Entitlement:
Calendar Years 1972-2002**

Type of Entitlement and Year	Discharges		Total Days of Care		
	Number in Thousands	Rate per 1,000 HI Enrollees	Number in Thousands	Rate per 1,000 HI Enrollees	Per Discharge
Aged Beneficiaries					
1972	6,380	302	77,198	3,656	12.1
1973	6,751	313	78,987	3,662	11.7
1974	7,033	320	80,880	3,677	11.5
1975	7,285	324	81,592	3,631	11.2
1976	7,607	332	84,438	3,684	11.1
1977	7,850	334	86,967	3,705	11.1
1978	8,133	339	88,557	3,692	10.9
1979	8,478	345	91,239	3,717	10.8
1980	9,051	361	96,772	3,855	10.7
1981	9,400	367	98,223	3,838	10.4
1982	9,817	376	100,431	3,846	10.2
1983	10,152	381	99,740	3,740	9.8
1984	9,705	358	86,062	3,174	8.9
1985	8,918	322	76,926	2,779	8.6
1986	8,917	316	77,240	2,733	8.7
1987	9,000	312	79,804	2,769	8.9
1988	9,146	312	80,938	2,761	8.8
1989 ³	9,026	302	79,784	2,671	8.8
1990	9,351	307	82,179	2,696	8.8
1991 ⁴	9,510	306	81,994	2,641	8.6
1992 ⁴	9,663	306	80,818	2,559	8.4
1993 ⁴	9,628	300	76,719	2,393	8.0
1994 ⁴	9,802	331	73,278	2,471	7.5
1995 ⁴	9,879	336	68,842	2,340	7.0
1996 ⁴	9,853	341	64,610	2,237	6.6
1997 ⁴	9,873	351	62,184	2,212	6.3
1998 ⁴	9,683	354	59,286	2,169	6.1
1999 ⁴	9,873	365	59,577	2,204	6.0
2000 ⁴	9,913	361	59,002	2,152	6.0
2001 ⁴	10,289	364	60,470	2,139	5.9
2002 ⁴	10,510	361	61,515	2,113	5.9
Average Annual Rate of Change					
1972-1983 ⁶	4.3	2.1	2.4	0.2	-1.9
1983-2002 ⁶	0.2	-0.3	-2.5	-3.0	-2.7
1972-2002	1.7	0.6	-0.8	-1.8	-2.4

See footnotes at end of table.

Table 23—Continued

**Discharges, Total Days of Care, Total Charges, and Program Payments for Medicare
Beneficiaries Discharged from Short-Stay Hospitals, by Type of Entitlement:
Calendar Years 1972-2002**

Total Charges		Program Payments					
Amount in Millions	Per Discharge	Amount in Millions	Per Discharge ¹	Per HI Enrollee	Per Day	Percent of Total Charges	Percent of Total Medicare Payments ²
\$7,401	\$1,160	\$5,576	\$874	\$264	\$72	75.3	69.5
8,227	1,219	6,245	925	290	79	75.9	69.1
9,614	1,367	7,209	1,025	328	89	75.0	70.3
11,853	1,627	8,859	1,216	394	109	74.7	67.9
14,263	1,875	10,589	1,392	462	125	74.2	67.7
17,072	2,175	12,455	1,587	531	143	73.0	69.1
19,772	2,431	14,182	1,744	591	160	71.7	68.9
22,938	2,706	16,251	1,917	662	178	70.8	67.7
28,114	3,106	19,460	2,150	775	201	69.2	66.6
33,564	3,571	22,814	2,427	891	232	68.0	62.3
40,875	4,164	27,008	2,751	1,034	269	66.1	64.6
47,851	4,713	30,398	2,994	1,140	305	63.5	65.1
46,964	4,839	34,188	3,523	1,261	397	72.8	65.6
47,371	5,312	35,738	4,007	1,291	465	75.4	63.3
52,623	5,901	37,030	4,153	1,310	479	70.4	60.9
60,900	6,766	39,350	4,372	1,365	493	64.6	58.6
69,920	7,645	41,918	4,583	1,430	518	60.0	58.1
78,204	8,665	43,747	4,847	1,465	548	55.9	52.9
90,948	9,726	47,842	5,270	1,570	582	52.6	53.4
103,871	10,922	52,278	5,601	1,684	638	50.3	53.3
115,789	11,982	57,494	6,058	1,821	704	49.7	54.1
122,083	12,681	59,281	6,253	1,849	764	48.6	52.2
126,880	12,944	61,691	6,375	2,081	831	48.6	48.3
129,319	13,091	64,987	6,656	2,209	928	50.3	47.1
131,673	13,364	67,860	6,961	2,349	1,050	51.5	47.0
136,777	13,854	69,547	7,124	2,473	1,118	50.8	46.4
139,738	14,432	67,204	7,022	2,458	1,134	48.1	46.5
152,293	15,426	67,588	6,918	2,500	1,134	44.4	47.5
165,964	16,742	69,088	6,995	2,519	1,171	41.6	46.5
191,263	18,590	74,742	7,291	2,643	1,236	39.1	44.5
226,904	21,590	79,120	7,550	2,718	1,286	34.9	43.4
Average Annual Rate of Change							
18.5	13.6	16.7	11.8	14.2	14.0	---	---
8.5	8.3	5.2	5.0	4.7	7.9	---	---
12.1	10.2	9.2	7.5	8.1	10.1	---	---

Table 23—Continued

**Discharges, Total Days of Care, Total Charges, and Program Payments for Medicare
Beneficiaries Discharged from Short-Stay Hospitals, by Type of Entitlement:
Calendar Years 1972-2002**

Type of Entitlement and Year	Discharges		Total Days of Care		
	Number in Thousands	Rate per 1,000 HI Enrollees	Number in Thousands	Rate per 1,000 HI Enrollees	Per Discharge
Disabled Beneficiaries					
1974 ⁵	596	309	6,643	3,446	11.1
1975	716	330	7,683	3,544	10.7
1976	858	359	9,042	3,780	10.5
1977	958	366	9,858	3,764	10.3
1978	1,083	388	10,815	3,872	10.0
1979	1,164	400	11,230	3,858	10.0
1980	1,228	414	12,403	4,186	10.1
1981	1,260	420	12,583	4,196	9.9
1982	1,292	437	12,616	4,271	9.8
1983	1,284	440	12,272	4,206	9.6
1984	1,191	413	10,423	3,614	8.8
1985	1,109	381	9,413	3,238	8.5
1986	1,127	381	9,670	3,269	8.6
1987	1,109	366	9,847	3,249	8.9
1988	1,111	358	9,936	3,203	8.9
1989 ³	1,122	354	10,118	3,191	9.0
1990	1,171	360	10,556	3,245	9.0
1991 ⁴	1,227	362	10,941	3,230	8.9
1992 ⁴	1,294	362	11,173	3,122	8.6
1993 ⁴	1,352	350	11,165	2,891	8.3
1994 ⁴	1,480	367	11,465	2,846	7.7
1995 ⁴	1,556	367	11,214	2,646	7.2
1996 ⁴	1,621	367	11,051	2,505	6.8
1997 ⁴	1,654	368	10,845	2,411	6.6
1998 ⁴	1,673	362	10,769	2,333	6.4
1999 ⁴	1,732	365	10,931	2,306	6.3
2000 ⁴	1,807	368	11,328	2,309	6.3
2001 ⁴	1,942	376	12,137	2,347	6.2
2002 ⁴	2,098	385	13,051	2,395	6.2
Average Annual Rate of Change					
1974-1983 ⁶	8.9	4.0	7.1	2.2	-1.6
1983-2002 ⁶	2.6	-0.7	0.3	-2.9	-2.3
1974-2002	4.6	0.8	2.4	-1.3	-2.1

¹Beginning in 1990, the average program payment per discharge does not reflect discharges with covered services, but for whom no program payments were reported.

²Based on total Medicare program payments.

³Represents the only year that the Medicare Catastrophic Coverage Act of 1988 was in effect.

⁴This table was revised from earlier editions for years 1991-1998 to exclude discharges from short-stay hospitals that were paid for by Medicare managed care plans, thus yielding fee-for-service utilization only for those years. Data for years prior to 1991 were not revised. However, these managed care enrollees were included in calculating all user rates per enrollee until 1994. Beginning with 1994, Medicare managed care enrollees are excluded from all calculations.

⁵Effective July 1, 1973, Medicare coverage was extended to disabled beneficiaries under the Social Security and Railroad Retirement Programs. Coverage was also extended to persons under 65 years of age who require dialysis or a kidney transplant for end stage renal disease. Public Law 95-292 removed the under age 65 restriction for persons with end stage renal disease, effective October 1978.

⁶Average annual rates of change are provided for periods before and after 1983 to show the impact of the prospective payment system's implementation (beginning October 1, 1983) on short-stay hospital utilization.

NOTES: Medicare program payments represent fee-for-service only and exclude amounts paid for managed care services.

HI is hospital insurance.

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.

Table 23—Continued

**Discharges, Total Days of Care, Total Charges, and Program Payments for Medicare
Beneficiaries Discharged from Short-Stay Hospitals, by Type of Entitlement:
Calendar Years 1972-2002**

Total Charges		Program Payments					
Amount in Millions	Per Discharge	Amount in Millions	Per Discharge ¹	Per HI Enrollee	Per Day	Percent of Total Charges	Percent of Total Medicare Payments ²
\$857	\$1,438	\$628	\$1,054	\$326	\$95	73.3	64.0
1,220	1,704	889	1,242	410	116	72.9	59.6
1,688	1,967	1,214	1,415	508	134	71.9	61.2
2,085	2,176	1,489	1,554	569	151	71.4	60.5
2,636	2,434	1,826	1,686	654	169	69.3	61.6
3,182	2,734	2,212	1,900	760	197	69.5	59.9
3,878	3,158	2,639	2,149	891	213	68.1	58.6
4,600	3,651	3,122	2,478	1,041	248	67.9	58.9
5,494	4,252	3,593	2,781	1,216	285	65.4	56.6
6,276	4,887	3,940	3,068	1,350	321	62.8	58.7
5,937	4,987	4,312	3,621	1,495	414	72.6	61.5
6,026	5,435	4,462	4,023	1,535	474	73.9	59.9
6,752	5,991	4,751	4,216	1,606	491	70.4	59.0
7,590	6,843	4,718	4,254	1,557	479	62.2	54.1
8,617	7,759	4,961	4,468	1,600	499	57.6	53.8
9,834	8,764	5,344	4,763	1,685	528	54.3	48.2
11,596	9,904	5,866	5,371	1,809	556	50.6	49.7
13,746	11,206	6,473	5,680	1,912	592	47.1	50.5
15,661	12,101	7,316	6,051	2,086	665	46.7	50.6
17,292	12,794	7,978	6,294	2,107	726	46.1	50.2
19,193	12,971	8,933	6,390	2,218	776	46.5	47.4
20,182	12,968	9,849	6,655	2,324	878	48.8	46.8
21,181	13,067	10,686	6,901	2,422	967	50.5	47.3
22,508	13,609	11,178	7,084	2,485	1,031	49.7	47.0
23,803	14,231	11,160	7,012	2,418	1,036	46.9	47.0
26,106	15,074	11,425	6,933	2,410	1,045	43.8	47.1
30,053	16,629	12,143	6,835	2,475	1,072	40.4	47.1
35,882	18,475	13,581	7,106	2,626	1,119	37.8	45.8
44,846	21,380	15,074	7,287	2,767	1,155	33.6	45.5
Average Annual Rate of Change							
24.8	14.6	22.6	12.6	17.1	14.6	---	---
10.9	8.1	7.3	4.7	3.8	7.0	---	---
15.2	10.1	12.0	7.1	7.9	9.4	---	---