

Table 5.3

**Enrollees, Discharges, Total Days of Care, and Program Payments for Medicare Beneficiaries Discharged from Short-Stay Hospitals, by Demographic Characteristics, Type of Entitlement, and Discharge Status: Calendar Year 2005**

Demographic Characteristics, Medicare Status, and Discharge Status	Discharge <sup>1</sup>		Total Days of Care			Program Payments			
	Number in Thousands	Rate Per 1,000 HI Enrollees <sup>2</sup>	Number in Thousands	Percent	Per Discharge	Amount in Millions	Percent	Per Discharge <sup>3</sup>	Per Day
<b>Total</b>	12,904	355	73,996	100.0	5.7	\$107,615	100.0	\$8,383	\$1,454
<b>Age</b>									
Under 65 Years	2,350	374	14,210	19.2	6.0	18,642	17.3	8,042	1,312
65-69 Years	1,908	223	10,506	14.2	5.5	17,166	16.0	9,049	1,634
70-74 Years	1,926	280	10,487	14.2	5.4	17,362	16.1	9,052	1,656
75-79 Years	2,177	364	12,383	16.7	5.7	19,326	18.0	8,901	1,561
80-84 Years	2,113	462	12,273	16.6	5.8	17,447	16.2	8,275	1,422
85 Years or Over	2,429	598	14,136	19.1	5.8	17,672	16.4	7,287	1,250
<b>Sex</b>									
Male	5,669	351	32,669	44.2	5.8	50,751	47.2	9,011	1,553
Female	7,235	358	41,326	55.8	5.7	56,864	52.8	7,892	1,376
<b>Race<sup>4</sup></b>									
White	10,606	346	59,368	80.2	5.6	87,117	81.0	8,247	1,467
Other	2,249	405	14,353	19.4	6.4	20,082	18.7	9,021	1,399
<b>Type of Entitlement</b>									
Aged <sup>5</sup>	10,501	350	59,473	80.4	5.7	88,525	82.3	9,457	1,488
Disabled <sup>6</sup>	2,402	382	14,523	19.6	6.0	19,090	17.7	8,054	1,315
<b>Discharge Status</b>									
Alive	12,422	N/A	69,894	94.5	5.6	100,298	93.2	8,116	1,435
Dead	482	N/A	4,101	5.5	8.5	7,318	6.8	15,247	1,784

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

<sup>2</sup>Medicare enrollees in managed care plans are not included in the denominator used to calculate utilization rates.

<sup>3</sup>The average program payment per discharge does not reflect discharges with covered services, but for whom no program payments were reported.

<sup>4</sup>Excludes unknown race.

<sup>5</sup>Includes aged persons with end stage renal disease (ESRD).

<sup>6</sup>Includes disabled persons with ESRD and persons entitled to Medicare because of ESRD only.

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. HI is hospital insurance. NA is not available.

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.