

Table 36

**Trends in Covered Days of Care, Covered Charges, and Program Payments for Skilled Nursing Facility Services Used  
by Medicare Beneficiaries, by Type of Entitlement: Selected Calendar Years 1967-2001**

Type of Entitlement and Year	Covered Days of Care		Covered Charges		Total Medicare Program Payments in Millions	Program Payments				
	Number in Thousands	Per 1,000 HI Enrollees	Amount in Millions	Per Day		Amount in Millions	Percent of Covered Charges	Percent of Total Medicare Program Payments	Per HI Enrollee	Per Day
<b>All Beneficiaries</b>										
1967	19,997	1,026	---	---	\$4,239	\$313	---	7.4	\$16	\$16
1971	6,481	361	---	---	7,354	195	---	2.7	9	30
1975	8,874	360	\$420	\$47	14,549	261	62.1	1.8	11	29
1983	9,032	305	897	99	53,438	456	50.9	0.9	15	51
1984	8,864	296	975	110	59,132	465	47.7	0.8	16	52
1986	7,770	249	1,123	144	68,583	501	44.6	0.7	16	65
1987	7,041	221	1,188	169	75,817	544	45.8	0.7	17	77
1988	11,802	364	1,982	168	80,595	964	48.7	1.2	30	82
1989	28,571	865	4,537	159	86,038	2,837	62.5	3.3	86	99
1990	21,242	630	4,263	201	101,419	1,827	42.9	1.8	54	86
1991	22,210	645	5,308	239	110,887	2,277	42.9	2.2	66	103
1992	25,271	719	6,904	273	132,951	3,128	45.3	2.4	89	124
1993	30,985	863	9,711	313	136,718	4,385	45.2	3.2	122	142
1994 <sup>1</sup>	36,091	1,072	12,864	356	147,106	5,904	45.9	4.0	175	164
1995 <sup>1</sup>	40,182	1,194	16,099	401	158,980	7,495	46.6	4.7	223	187
1996 <sup>1</sup>	45,883	1,378	20,134	439	167,063	9,095	47.5	5.4	273	208
1997 <sup>1</sup>	48,239	1,479	23,274	482	175,423	11,199	48.1	6.4	343	232
1998 <sup>1</sup>	45,429	1,422	22,516	496	168,164	11,224	49.9	6.7	351	247
1999 <sup>1</sup>	43,397	1,366	18,226	420	166,687	9,617	52.8	5.8	303	222
2000 <sup>1</sup>	44,834	1,387	18,208	406	174,261	10,651	58.5	6.1	329	238
2001 <sup>1</sup>	48,974	1,464	20,274	414	197,505	13,105	64.6	6.6	392	268
<b>Aged Beneficiaries</b>										
1967	19,997	1,026	---	---	\$4,239	\$313	---	7.4	\$16	\$16
1971	6,481	361	---	---	7,354	195	---	2.7	9	30
1975	8,585	382	\$406	\$47	13,056	252	62.0	1.9	11	29
1983	8,738	328	865	99	46,727	441	51.0	0.9	17	50
1984	8,578	361	940	110	52,118	449	47.8	0.9	17	52
1986	7,493	265	1,075	144	60,459	482	44.9	0.7	17	64
1987	6,875	235	1,136	167	67,893	524	46.1	0.8	18	77
1988	11,360	388	1,893	167	71,780	926	48.9	1.3	32	81
1989	27,216	911	4,300	158	76,356	2,698	62.7	3.5	90	99
1990	20,398	669	4,067	199	89,620	1,752	43.1	2.0	57	86

See footnotes at end of table.

**Table 36—Continued**  
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**by Medicare Beneficiaries, by Type of Entitlement: Selected Calendar Years 1967-2001**

Type of Entitlement and Year	Covered Days of Care		Covered Charges		Total Medicare Program Payments in Millions	Program Payments				
	Number in Thousands	Per 1,000 HI Enrollees	Amount in Millions	Per Day		Amount in Millions	Percent of Covered Charges	Percent of Total Medicare Program Payments	Per HI Enrollee	Per Day
<b>Aged Beneficiaries</b>										
1991	21,391	689	\$5,076	\$237	\$98,059	\$2,187	43.1	2.2	\$70	\$102
1992	24,377	772	6,616	271	117,534	3,009	45.5	2.6	95	123
1993	29,821	930	9,271	311	120,201	4,207	45.4	3.5	131	141
1994 <sup>1</sup>	34,667	1,169	12,247	353	128,069	5,650	46.1	4.4	191	163
1995 <sup>1</sup>	38,490	1,308	15,293	397	137,952	7,149	46.7	5.2	243	186
1996 <sup>1</sup>	43,842	1,518	19,084	435	144,485	9,094	47.7	6.3	315	207
1997 <sup>1</sup>	45,989	1,636	22,004	478	151,655	10,636	48.3	7.0	378	231
1998 <sup>1</sup>	43,206	1,580	21,245	492	144,418	10,647	50.1	7.4	389	246
1999 <sup>1</sup>	41,213	1,524	17,170	417	142,425	9,126	53.1	6.4	338	221
2000 <sup>1</sup>	42,443	1,548	17,109	403	148,488	10,097	59.0	6.8	368	238
2001 <sup>1</sup>	46,179	1,633	18,963	411	167,825	12,387	65.3	7.4	438	268
<b>Disabled Beneficiaries</b>										
1975	289	133	\$15	\$51	\$1,492	\$10	64.7	0.6	\$4	\$33
1983	293	101	33	111	6,711	16	48.0	0.2	5	53
1984	286	99	35	123	7,014	15	44.0	0.2	5	54
1986	277	93	47	171	8,123	19	39.4	0.2	6	68
1987	256	84	51	201	7,923	21	40.0	0.2	7	81
1988	442	142	88	200	8,796	38	43.6	0.4	12	87
1989	1,355	427	237	175	9,682	139	58.8	1.4	44	103
1990	844	260	195	231	11,800	76	38.7	0.6	23	90
1991	819	242	232	283	12,828	90	38.8	0.7	26	109
1992	894	250	287	322	15,417	119	41.4	0.8	33	133
1993	1,164	302	440	378	16,517	177	40.3	1.1	46	152
1994 <sup>1</sup>	1,424	353	616	433	19,037	254	41.3	1.3	63	179
1995 <sup>1</sup>	1,692	399	806	476	21,029	347	43.0	1.7	82	205
1996 <sup>1</sup>	2,041	463	1,049	514	22,577	460	43.9	2.0	104	226
1997 <sup>1</sup>	2,250	500	1,270	564	23,768	563	44.3	2.4	125	250
1998 <sup>1</sup>	2,216	480	1,271	573	23,746	577	45.4	2.6	125	260
1999 <sup>1</sup>	2,184	461	1,056	484	24,262	491	46.5	2.0	104	225
2000 <sup>1</sup>	2,392	488	1,099	459	25,773	554	50.5	2.1	113	232
2001 <sup>1</sup>	2,795	540	1,312	469	29,680	718	54.7	2.4	139	257

<sup>1</sup>Beginning with 1994, Medicare enrollees in managed care plans are not included in the denominator used to calculate utilization rates and average payments.

NOTES: HI is hospital insurance. 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 Decision Support Access Facility; data development by the Office of Research, Development, and Information.