

Table 42

Covered Admissions and Total Charges for Medicare Skilled Nursing Facility Admissions, by Covered Days of Care and Type of Service: Calendar Year 2002

Covered Days of Care	All Services	Accommodations	Type of Ancillary Service							Rehabilitation ¹	Other ²
			Total	Pharmacy	Laboratory	Radiology	Supply	Inhalation Therapy			
Number of Admissions ³											
Total	2,222,923	2,222,917	2,191,769	2,080,910	1,324,761	512,677	1,230,429	262,824	1,884,302	267,951	
1-8 Days	591,496	591,490	568,071	521,045	281,314	86,896	298,982	97,878	416,348	68,789	
9-20 Days	714,618	714,618	708,501	669,333	434,606	160,283	397,766	94,843	621,066	95,531	
21-40 Days	507,871	507,871	506,746	489,567	321,981	129,722	284,577	43,010	468,232	56,451	
41-60 Days	204,316	204,316	204,059	199,809	138,307	61,432	120,338	13,483	190,510	21,537	
61-80 Days	93,353	93,353	93,264	91,779	66,438	31,848	58,056	6,046	86,998	10,953	
81 Days or More	111,269	111,269	111,128	109,377	82,115	42,496	70,710	7,564	101,148	14,690	
Total Charges in Thousands											
Total	\$23,609,827	\$12,230,787	\$11,379,212	\$3,169,309	\$636,967	\$196,404	\$687,538	\$413,842	\$6,095,582	\$179,571	
1-8 Days	2,047,940	915,542	1,132,455	412,015	99,408	28,900	106,928	71,439	386,300	27,466	
9-20 Days	5,623,110	2,666,734	2,956,446	897,932	224,328	63,861	227,485	141,191	1,346,410	55,239	
21-40 Days	6,333,392	3,213,987	3,119,467	852,748	166,601	51,790	169,161	88,401	1,746,488	44,278	
41-60 Days	3,777,168	2,035,592	1,741,544	426,078	66,805	22,858	71,051	34,565	1,100,875	19,312	
61-80 Days	2,289,952	1,275,256	1,014,703	242,928	34,118	12,245	41,254	24,038	647,440	12,679	
81 Days or More	3,538,264	2,123,675	1,414,596	337,608	45,706	16,748	71,659	54,208	868,069	20,597	
Percent of Charges											
Total	100.0	51.8	48.2	13.4	2.7	0.8	2.9	1.8	25.8	0.8	
1-8 Days	100.0	44.7	55.3	20.1	4.9	1.4	5.2	3.5	18.9	1.3	
9-20 Days	100.0	47.4	52.6	16.0	4.0	1.1	4.0	2.5	23.9	1.0	
21-40 Days	100.0	50.7	49.3	13.5	2.6	0.8	2.7	1.4	27.6	0.7	
41-60 Days	100.0	53.9	46.1	11.3	1.8	0.6	1.9	0.9	29.1	0.5	
61-80 Days	100.0	55.7	44.3	10.6	1.5	0.5	1.8	1.0	28.3	0.6	
81 Days or More	100.0	60.0	40.0	9.5	1.3	0.5	2.0	1.5	24.5	0.6	

See footnotes at end of table.

Table 42—Continued

Covered Admissions and Total Charges for Medicare Skilled Nursing Facility Admissions, by Covered Days of Care and Type of Service: Calendar Year 2002

Covered Days of Care	All Services	Accom- modations	Type of Ancillary Service							Other ²
			Total	Pharmacy	Laboratory	Radiology	Supply	Inhalation Therapy	Rehabil- itation ¹	
Average Total Charge per Admission										
Total	\$10,621	\$5,502	\$5,192	\$1,523	\$481	\$383	\$559	\$1,575	\$3,235	\$670
1-8 Days	3,462	1,548	1,994	791	353	333	358	730	928	399
9-20 Days	7,869	3,732	4,173	1,342	516	398	572	1,489	2,168	578
21-40 Days	12,470	6,328	6,156	1,742	517	399	594	2,055	3,730	784
41-60 Days	18,487	9,963	8,535	2,132	483	372	590	2,564	5,779	897
61-80 Days	24,530	13,661	10,880	2,647	514	384	711	3,976	7,442	1,158
81 Days or More	31,799	19,086	12,729	3,087	557	394	1,013	7,167	8,582	1,402

¹Includes physical therapy, speech therapy, and occupational therapy.

²Includes services such as blood and blood components, etc.

³Reflects skilled nursing facility admissions with at least 1 day of covered care under Medicare.

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