

Table 40

**Covered Persons, Covered Admissions, Covered Days of Care, Covered Charges, Coinsurance and Program Payments for  
Skilled Nursing Facility Services Used by Medicare Beneficiaries, by Type of Entitlement and Covered Days of Care:**

**Calendar Year 2002**

Type of Entitlement and Covered Days of Care			Covered Days of Care			Covered Charges			
	Persons <sup>1</sup>	Covered Admissions <sup>2</sup>		Per	Per	Amount	Per	Per	Per
			Number	Admission	Person	in Thousands	Admission	Person	Day
All Beneficiaries									
Total	1,560,556	2,222,923	54,674,168	24.6	35.0	\$23,131,058	\$10,406	\$14,822	\$423
1-8 Days	428,926	591,496	2,879,112	4.9	6.7	1,995,740	3,374	4,653	693
9-20 Days	517,914	714,618	10,048,570	14.1	19.4	5,535,484	7,746	10,688	551
21-40 Days	341,901	507,871	14,583,265	28.7	42.7	6,227,263	12,262	18,214	427
41-60 Days	130,447	204,316	10,099,213	49.4	77.4	3,711,802	18,167	28,454	368
61-80 Days	56,157	93,353	6,490,141	69.5	115.6	2,245,278	24,051	39,982	346
81 Days or More	85,211	111,269	10,573,867	95.0	124.1	3,415,490	30,696	40,083	323
Aged									
Total	1,467,645	2,086,025	51,297,366	24.6	35.0	21,541,366	10,327	14,678	420
1-8 Days	401,010	551,450	2,689,718	4.9	6.7	1,848,091	3,351	4,609	687
9-20 Days	487,888	671,615	9,442,750	14.1	19.4	5,169,723	7,697	10,596	547
21-40 Days	323,979	479,836	13,775,627	28.7	42.5	5,831,712	12,154	18,000	423
41-60 Days	123,204	192,590	9,518,801	49.4	77.3	3,473,160	18,034	28,190	365
61-80 Days	52,778	87,496	6,082,087	69.5	115.2	2,085,855	23,839	39,521	343
81 Days or More	78,786	103,038	9,788,383	95.0	124.2	3,132,825	30,405	39,764	320
Disabled									
Total	92,911	136,898	3,376,802	24.7	36.3	1,589,691	11,612	17,110	471
1-8 Days	27,916	40,046	189,394	4.7	6.8	147,649	3,687	5,289	780
9-20 Days	30,026	43,003	605,820	14.1	20.2	365,760	8,505	12,181	604
21-40 Days	17,922	28,035	807,638	28.8	45.1	395,551	14,109	22,071	490
41-60 Days	7,243	11,726	580,412	49.5	80.1	238,642	20,352	32,948	411
61-80 Days	3,379	5,857	408,054	69.7	120.8	159,423	27,219	47,181	391
81 Days or More	6,425	8,231	785,484	95.4	122.3	282,665	34,342	43,995	360

See footnotes at end of table.

Table 40—Continued

**Covered Persons, Covered Admissions, Covered Days of Care, Covered Charges, Coinsurance and Program Payments for  
Skilled Nursing Facility Services Used by Medicare Beneficiaries, by Type of Entitlement and Covered Days of Care:  
Calendar Year 2002**

Type of Entitlement and Covered Days of Care	Coinsurance Payments				Program Payments			
	Amount in Thousands	Per Admission	Per Person	Per Day	Amount in Thousands	Per Admission <sup>3</sup>	Per Person	Per Day
<b>All Beneficiaries</b>								
Total	\$3,029,367	\$1,363	\$1,941	\$55	\$14,503,083	\$6,528	\$9,294	\$265
1-8 Days	38,955	66	91	14	881,149	1,491	2,054	306
9-20 Days	177,522	248	343	18	3,083,495	4,317	5,954	307
21-40 Days	696,664	1,372	2,038	48	4,057,914	7,993	11,869	278
41-60 Days	720,322	3,526	5,522	71	2,545,137	12,460	19,511	252
61-80 Days	525,186	5,626	9,352	81	1,540,245	16,501	27,427	237
81 Days or More	870,719	7,825	10,218	82	2,395,144	21,527	28,108	227
<b>Aged</b>								
Total	2,832,470	1,358	1,930	55	13,657,515	6,550	9,306	266
1-8 Days	35,988	65	90	13	826,544	1,500	2,061	307
9-20 Days	165,160	246	339	17	2,908,931	4,334	5,962	308
21-40 Days	655,366	1,366	2,023	48	3,847,296	8,021	11,875	279
41-60 Days	678,166	3,521	5,504	71	2,406,536	12,499	19,533	253
61-80 Days	491,744	5,620	9,317	81	1,447,595	16,547	27,428	238
81 Days or More	806,046	7,823	10,231	82	2,220,612	21,552	28,185	227
<b>Disabled</b>								
Total	196,897	1,438	2,119	58	845,568	6,181	9,101	250
1-8 Days	2,967	74	106	16	54,604	1,365	1,956	288
9-20 Days	12,362	287	412	20	174,564	4,062	5,814	288
21-40 Days	41,297	1,473	2,304	51	210,618	7,518	11,752	261
41-60 Days	42,156	3,595	5,820	73	138,601	11,827	19,136	239
61-80 Days	33,442	5,710	9,897	82	92,650	15,824	27,419	227
81 Days or More	64,673	7,857	10,066	82	174,532	21,207	27,164	222

<sup>1</sup>Number of beneficiaries receiving Medicare skilled nursing facility covered services.

<sup>2</sup>Reflects skilled nursing facility admissions with at least 1 day of covered care under Medicare.

<sup>3</sup>The denominator used to calculate the average program payment per covered admission includes only those bills with Medicare reimbursement greater than zero.

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

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.