

Table 6.2

Covered Admissions, Covered Days of Care, Covered Charges, and Program Payments for Skilled Nursing Facility Services Used by Medicare Beneficiaries, by Demographic Characteristics, Type of Entitlement, and Discharge Status: Calendar Year 2006

Demographic Characteristic, Type of Entitlement, and Discharge Status	Covered Admissions ¹		Covered Days of Care		
	Number	Per 1,000 HI Enrollees ²	Total in Thousands	Per 1,000 HI Enrollees ²	Per Admission
Total	2,543,133	72	67,143	1,892	26
Age					
Under 65 Years	186,324	30	4,865	782	26
65-69 Years	220,243	26	5,429	648	25
70-74 Years	254,805	38	6,186	934	24
75-79 Years	403,992	71	10,162	1,775	25
80-84 Years	545,021	123	14,402	3,243	26
85 Years or Over	932,748	228	26,099	6,386	28
Sex					
Male	908,751	57	22,916	1,447	25
Female	1,634,382	83	44,227	2,251	27
Race⁴					
White	2,190,389	73	57,070	1,904	26
Other	345,603	64	9,884	1,817	29
Type of Entitlement					
Aged ⁵	2,349,557	80	62,091	2,122	26
Disabled ⁶	193,576	31	5,052	812	26
Discharge Status					
Alive	2,425,625	NA	65,007	NA	27
Dead	117,508	NA	2,135	NA	18

¹Includes skilled nursing care admissions with at least 1 day of covered care under Medicare.

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

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

⁴Excludes unknown race.

⁵Includes aged persons with end stage renal disease (ESRD).

⁶Includes disabled persons with ESRD and persons entitled to Medicare because of ESRD only.

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. 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.

Table 6.2—Continued

Covered Admissions, Covered Days of Care, Covered Charges, and Program Payments for Skilled Nursing Facility Services Used by Medicare Beneficiaries, by Demographic Characteristics, Type of Entitlement, and Discharge Status: Calendar Year 2006

Covered Charges			Program Payments			
Amount in Thousands	Per Admission	Per Day	Amount in Thousands	Percent of Covered Charges	Per Admission ³	Per Day
\$31,493,529	\$12,384	\$469	\$20,498,788	65	\$8,067	\$305
2,368,593	12,712	487	1,407,356	59	7,561	289
2,689,238	12,210	495	1,632,357	61	7,418	301
3,119,239	12,242	504	1,919,753	62	7,540	310
4,977,103	12,320	490	3,154,647	63	7,814	310
6,790,686	12,459	471	4,445,271	65	8,162	309
11,548,670	12,381	442	7,939,403	69	8,518	304
10,990,029	12,094	480	7,050,414	64	7,765	308
20,503,499	12,545	464	13,448,374	66	8,234	304
26,903,173	12,282	471	17,510,428	65	8,000	307
4,502,403	13,028	456	2,931,076	65	8,489	297
29,034,462	12,357	468	19,037,815	66	8,109	307
2,459,067	12,703	487	1,460,972	59	7,555	289
30,533,022	12,588	470	19,851,696	65	8,190	305
960,507	8,174	450	647,091	67	5,510	303