

Table VII.13b

Medicare Skilled Nursing Facility Utilization by State¹
Calendar Year 2007
(Continued)

	Total Patients	Total Discharges	Total Covered Days	Average Days Per Discharge	Total Reimbursement	Average Reimbursement Per Day	Average Reimbursement Per Discharge
MISSOURI	46,103	50,162	1,709,659	34	\$495,381,465	\$290	\$9,876
MONTANA	7,528	8,447	212,199	25	70,616,949	333	8,360
NEBRASKA	16,361	17,099	506,517	30	179,123,660	354	10,476
NEVADA	6,421	6,684	243,897	36	94,141,938	386	14,085
NEW HAMPSHIRE	10,643	11,648	368,454	32	134,662,833	365	11,561
NEW JERSEY	76,888	88,096	2,594,871	29	1,038,737,587	400	11,791
NEW MEXICO	6,280	6,169	216,165	35	63,856,811	295	10,351
NEW YORK	112,661	106,437	4,315,034	41	1,380,423,823	320	12,969
NORTH CAROLINA	54,698	51,577	2,067,071	40	603,924,421	292	11,709
NORTH DAKOTA	6,533	6,270	172,187	27	52,960,665	308	8,447
OHIO	105,385	113,186	3,982,242	35	1,250,923,359	314	11,052
OKLAHOMA	21,655	24,908	746,357	30	204,816,567	274	8,223
OREGON	13,255	14,385	383,197	27	144,654,169	377	10,056
PENNSYLVANIA	91,859	91,066	3,318,725	36	1,009,698,158	304	11,088
PUERTO RICO	837	891	16,001	18	2,554,985	160	2,868
RHODE ISLAND	7,131	7,372	240,079	33	82,458,585	343	11,185
SOUTH CAROLINA	23,950	23,679	954,202	40	275,441,824	289	11,632
SOUTH DAKOTA	7,448	7,850	199,062	25	72,973,335	367	9,296
TENNESSEE	42,799	47,748	1,787,564	37	501,800,516	281	10,509
TEXAS	109,791	116,393	4,573,817	39	1,333,877,562	292	11,460
UTAH	10,090	11,095	341,818	31	110,615,059	324	9,970
VERMONT	4,765	4,893	156,978	32	55,065,335	351	11,254
VIRGINIA	45,375	45,976	1,693,569	37	505,732,987	299	11,000
WASHINGTON	30,855	31,973	1,056,858	33	387,919,013	367	12,133
WEST VIRGINIA	13,466	13,655	487,870	36	138,147,550	283	10,117
WISCONSIN	41,057	39,069	1,435,470	37	495,983,478	346	12,695
WYOMING	3,481	3,649	109,315	30	36,436,034	333	9,985
OTHER TERRITORIES/POSSESSIONS	139	141	3,212	23	817,588	255	5,798

¹ Includes utilization and expenditure data for non-swing bed and swing bed services.

NOTES: Provider based data are derived from bills for services performed in 2007 and recorded in CMS central records as of June 2008. These interim payment amounts may differ from final cost report adjusted payment amounts. Patient counts are unique to the State and therefore do not add to the total. Data exclude no pay bills.

SOURCE: CMS/ORDI/OIS

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