

Table 42
Covered Admissions and Total Charges for Medicare Skilled Nursing Facility Admissions, by Covered Days of Care and Type of Service: Calendar Year 2000

Covered Days of Care	All Services	Accommodations	Type of Ancillary Service								
			Total	Pharmacy	Laboratory	Radiology	Supply	Inhalation Therapy	Rehabilitation ¹	Other ²	
Total	1,936,127	1,936,115	1,909,735	1,806,693	Number of Admissions ³		445,600	1,194,613	283,735	1,638,612	280,149
1-8 Days	544,284	544,272	524,941	483,362	263,996		86,933	315,437	108,164	392,747	77,079
9-20 Days	647,650	647,650	642,299	605,655	379,719		153,823	405,002	106,559	565,661	105,416
21-40 Days	426,469	426,469	425,225	408,171	247,747		108,975	263,047	45,117	390,251	56,918
41-60 Days	161,645	161,645	161,398	157,078	98,135		44,736	103,740	12,431	149,221	19,286
61-80 Days	72,454	72,454	72,375	70,784	46,349		22,439	49,332	5,345	66,523	9,370
81 Days or More	83,625	83,625	83,497	81,643	56,161		28,694	58,055	6,119	74,209	12,080
Total Charges in Thousands											
Total	\$18,434,442	\$9,595,767	\$8,838,892	\$2,446,438	\$513,525		\$171,248	\$623,985	\$384,174	\$4,535,331	\$164,190
1-8 Days	1,776,258	772,244	1,004,078	348,319	88,246		27,388	100,297	73,092	341,211	25,526
9-20 Days	4,898,057	2,300,827	2,597,310	771,156	198,767		60,955	221,910	152,696	1,138,468	53,357
21-40 Days	5,060,271	2,571,372	2,488,943	678,250	137,635		47,276	161,035	94,674	1,328,491	41,582
41-60 Days	2,754,410	1,520,578	1,233,847	297,101	44,803		17,233	59,014	30,858	767,740	17,099
61-80 Days	1,605,517	937,794	667,731	152,884	19,908		8,250	32,089	14,498	430,267	9,836
81 Days or More	2,339,928	1,492,951	846,983	198,730	24,165		10,147	49,640	18,356	529,155	16,791
Percent of Charges											
Total	100.0	52.1	47.9	13.3	2.8		0.9	3.4	2.1	24.6	0.9
1-8 Days	100.0	43.5	56.5	19.6	5.0		1.5	5.6	4.1	19.2	1.4
9-20 Days	100.0	47.0	53.0	15.7	4.1		1.2	4.5	3.1	23.2	1.1
21-40 Days	100.0	50.8	49.2	13.4	2.7		0.9	3.2	1.9	26.3	0.8
41-60 Days	100.0	55.2	44.8	10.8	1.6		0.6	2.1	1.1	27.9	0.6
61-80 Days	100.0	58.4	41.6	9.5	1.2		0.5	2.0	0.9	26.8	0.6
81 Days or More	100.0	63.8	36.2	8.5	1.0		0.4	2.1	0.8	22.6	0.7

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 2000

Covered Days of Care	All Services	Accommodations	Type of Ancillary Service							Other ²
			Total	Pharmacy	Laboratory	Radiology	Supply	Inhalation Therapy	Rehabilitation ¹	
Total	\$9,521	\$4,956	\$4,628	\$1,354	\$470	\$384	\$522	\$1,354	\$2,768	\$586
1-8 Days	3,263	1,419	1,913	721	334	315	318	676	869	331
9-20 Days	7,563	3,553	4,044	1,273	523	396	548	1,433	2,013	506
21-40 Days	11,866	6,029	5,853	1,662	556	434	612	2,098	3,404	731
41-60 Days	17,040	9,407	7,645	1,891	457	385	569	2,482	5,145	887
61-80 Days	22,159	12,943	9,226	2,160	430	368	650	2,712	6,468	1,050
81 Days or More	27,981	17,853	10,144	2,434	430	354	855	3,000	7,131	1,390

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 Decision Support Access Facility; data development by the Office of Research, Development, and Information.