

Table VII.13b
Medicare Skilled Nursing Facility Utilization by State¹
Calendar Year 2009
(Continued)

	Total Patients	Total Discharges	Total Covered Days	Average Days Per Discharge	Total Reimbursement	Average Reimbursement Per Day	Average Reimbursement Per Discharge
MISSOURI	45,987	50,579	1,752,772	35	\$549,110,637	\$313	\$10,856
MONTANA	6,824	7,230	203,078	28	75,605,024	372	10,457
NEBRASKA	16,665	17,662	544,961	31	209,122,886	384	11,840
NEVADA	8,426	8,948	298,653	33	122,672,571	411	13,709
NEW HAMPSHIRE	10,823	11,876	374,821	32	150,036,010	400	12,634
NEW JERSEY	78,729	91,003	2,727,348	30	1,220,271,621	447	13,409
NEW MEXICO	7,046	7,053	243,900	35	83,903,122	344	11,896
NEW YORK	113,167	109,641	4,264,220	39	1,571,962,178	369	14,337
NORTH CAROLINA	57,098	54,952	2,128,336	39	683,915,982	321	12,446
NORTH DAKOTA	6,438	6,265	178,379	28	63,340,454	355	10,110
OHIO	99,466	108,653	3,771,380	35	1,296,855,953	344	11,936
OKLAHOMA	21,743	23,419	754,859	32	237,168,799	314	10,127
OREGON	13,313	14,181	388,877	27	157,009,631	404	11,072
PENNSYLVANIA	91,049	90,688	3,329,365	37	1,131,295,886	340	12,475
PUERTO RICO	564	593	9,357	16	1,812,353	194	3,056
RHODE ISLAND	7,601	8,088	265,881	33	97,385,745	366	12,041
SOUTH CAROLINA	25,281	25,323	997,272	39	322,772,339	324	12,746
SOUTH DAKOTA	7,430	7,723	224,937	29	87,703,787	390	11,356
TENNESSEE	45,607	50,044	1,858,334	37	568,497,855	306	11,360
TEXAS	112,777	116,192	4,837,337	42	1,586,147,409	328	13,651
UTAH	9,924	10,527	328,628	31	117,685,558	358	11,179
VERMONT	5,005	5,258	166,807	32	67,057,466	402	12,753
VIRGINIA	48,248	50,079	1,756,066	35	577,687,326	329	11,536
WASHINGTON	32,108	33,663	1,113,018	33	463,451,488	416	13,767
WEST VIRGINIA	12,812	13,390	469,134	35	145,078,877	309	10,835
WISCONSIN	42,249	40,712	1,488,210	37	535,689,817	360	13,158
WYOMING	3,226	3,363	103,968	31	39,183,364	377	11,651
OTHER TERRITORIES/POSSESSIONS	166	168	4,235	25	1,094,217	258	6,513

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 2009 and recorded in CMS central records as of June 2010. 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.

SOURCES: CMS/ORDI/OFM

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