

Table 149. Medicare enrollees, enrollees in managed care, payment per enrollee, and short-stay hospital utilization, by state: United States, selected years 1994-2010

(Data are compiled from administrative data by the Centers for Medicare & Medicaid Services)

State	Short-stay hospital utilization									
	Enrollment in thousands ¹		Percent of enrollees in managed care ²		Payment per fee-for-service enrollee		Discharges per 1,000 enrollees ³		Average length of stay in days ³	
	1994	2010	1994	2010	1994	2010	1994	2010	1994	2010
United States ⁴	36,190	46,585	7.9	24.3	\$4,375	\$9,347	345	352	7.5	5.4
Alabama.....	633	845	0.8	21.4	4,454	8,539	413	385	7.0	5.3
Alaska.....	33	66	0.6	0.9	3,687	7,492	269	226	6.3	5.2
Arizona.....	578	930	24.8	36.1	4,442	8,659	292	324	5.9	4.8
Arkansas.....	416	531	0.2	14.3	3,719	7,849	366	335	7.0	5.2
California.....	3,582	4,757	30.0	35.4	5,219	9,666	366	318	6.1	5.4
Colorado.....	413	625	17.2	33.5	3,935	8,234	302	293	6.0	4.7
Connecticut.....	497	568	2.6	18.3	4,426	10,138	287	359	8.1	5.6
Delaware.....	99	149	0.2	3.7	4,712	9,207	326	312	8.1	5.8
District of Columbia.....	80	78	3.9	9.8	5,655	10,428	376	388	10.1	6.1
Florida.....	2,584	3,375	13.8	30.1	5,027	10,777	326	374	7.1	5.5
Georgia.....	819	1,236	0.4	21.2	4,402	8,849	378	336	6.9	5.4
Hawaii.....	146	206	29.8	41.6	3,069	5,960	301	218	9.1	6.6
Idaho.....	146	230	2.5	29.1	3,045	7,041	274	214	5.2	4.4
Illinois.....	1,605	1,839	5.5	9.7	4,324	9,691	374	382	7.3	5.2
Indiana.....	805	1,006	2.6	16.3	3,945	8,900	345	346	6.9	5.2
Iowa.....	470	517	3.1	13.2	3,080	7,571	322	276	6.6	5.1
Kansas.....	378	433	3.3	11.0	3,847	8,434	348	303	6.5	5.1
Kentucky.....	578	760	2.3	16.2	3,862	8,701	396	385	7.2	5.2
Louisiana.....	572	687	0.4	23.8	5,468	10,757	399	386	7.2	5.6
Maine.....	198	265	0.1	12.6	3,464	7,249	322	259	7.6	5.1
Maryland.....	596	785	1.4	8.1	4,997	10,425	362	381	7.5	5.0
Massachusetts.....	924	1,061	6.1	19.2	5,147	10,282	350	377	7.6	5.2
Michigan.....	1,331	1,651	0.7	16.3	4,307	10,152	328	391	7.6	5.3
Minnesota.....	625	786	19.6	41.7	3,394	9,322	334	391	5.7	4.6
Mississippi.....	391	497	0.1	9.6	4,189	9,879	423	382	7.4	5.8
Missouri.....	821	1,004	3.4	21.0	4,191	8,651	349	370	7.3	5.2
Montana.....	128	170	0.4	17.9	3,114	6,838	306	225	5.9	4.7
Nebraska.....	247	279	2.2	12.0	2,926	8,383	281	292	6.3	5.1
Nevada.....	187	357	19.0	30.3	4,306	9,069	291	317	7.0	5.5
New Hampshire.....	152	223	0.2	7.8	3,414	8,260	281	242	7.6	5.2
New Jersey.....	1,158	1,327	2.6	12.6	4,531	10,569	354	371	10.2	5.9
New Mexico.....	205	313	13.6	25.1	3,110	6,999	301	268	6.0	5.0
New York.....	2,601	2,988	6.2	30.2	4,855	10,127	334	402	11.2	6.7
North Carolina.....	1,001	1,490	0.5	17.8	3,465	8,694	314	333	8.0	5.3
North Dakota.....	101	109	0.6	8.5	3,218	7,036	327	247	6.3	4.9
Ohio.....	1,649	1,901	2.4	33.1	3,982	9,600	350	426	7.1	5.1
Oklahoma.....	481	603	2.5	15.1	4,098	9,097	355	374	7.0	5.2
Oregon.....	469	621	27.7	41.6	3,285	6,807	305	244	5.2	4.6
Pennsylvania.....	2,053	2,283	3.3	38.0	5,212	9,419	379	425	8.0	5.6
Rhode Island.....	166	183	7.0	34.5	4,148	9,108	312	364	8.1	5.9
South Carolina.....	497	774	0.1	16.0	3,777	8,886	319	330	8.3	5.6
South Dakota.....	114	137	0.1	8.1	2,952	7,103	356	259	6.1	5.0
Tennessee.....	754	1,058	0.3	24.5	4,441	8,714	375	373	7.1	5.3
Texas.....	2,029	3,001	4.1	19.6	4,703	10,694	333	342	7.2	5.4
Utah.....	182	283	9.4	33.7	3,443	7,667	238	256	5.4	4.4
Vermont.....	82	112	0.1	4.5	3,182	8,069	283	199	7.6	5.3
Virginia.....	803	1,141	1.5	14.6	3,748	7,831	348	319	7.3	5.3
Washington.....	676	972	12.5	25.1	3,401	7,455	269	254	5.3	4.7
West Virginia.....	326	382	8.3	22.8	3,798	8,213	420	381	7.1	5.6

Wisconsin.....	752	911	2.0	29.3	3,246	8,056	310	301	6.8	5.0
Wyoming.....	58	80	3.3	6.8	3,537	7,218	315	236	5.6	4.6

¹Total persons enrolled in hospital insurance, supplementary medical insurance, or both, as of July 1. Includes fee-for-service and managed care enrollees.

²Includes enrollees in Medicare-approved managed care organizations. See Appendix II, Managed care.

³Data are for fee-for-service enrollees only.

⁴Includes residents of any of the 50 states and the District of Columbia.

NOTES: Prior to 2004, enrollment and percentage of enrollees in managed care were based on a 5% annual Denominator File derived from the Centers for Medicare & Medicaid Services' (CMS) Enrollment Database.

Starting with 2004 data, the 100% Denominator File was used.

Payments per fee-for-service enrollee are based on fee-for-service billing reimbursement for a 5% sample of Medicare beneficiaries as recorded in CMS' National Claims History File. Short-stay hospital utilization is based on the

Medicare Provider Analysis and Review (MEDPAR)

stay records for a 20% sample of Medicare beneficiaries.

Estimates may not sum to totals because of rounding.

State based on residence of the beneficiary.

The 2009 payment data reported in the spreadsheet version of this table have not been finalized and are subject to revision.

Data for additional years are available. See Appendix III.

SOURCE: Centers for Medicare & Medicaid Services, Office of Research, Development, and Information.

Health Care Financing Review: Medicare and Medicaid Statistical Supplements for publication years 1996 to 2010.

Available from: <http://www.cms.hhs.gov/MedicareMedicaidStatSupp/LT/list.asp>.

See Appendix I, Medicare Administrative Data.

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