

**Table 148 (page 1 of 2). Medicare enrollees, enrollees in managed care, payment per enrollee, and short-stay hospital utilization, by state: United States, 1994 and 2007**

[Data are compiled by the Centers for Medicare & Medicaid Services]

State	Short-stay hospital utilization									
	Enrollment in thousands <sup>1</sup>		Percent of enrollees in managed care <sup>2</sup>		Payment per fee-for-service enrollee		Discharges per 1,000 enrollees <sup>3</sup>		Average length of stay in days <sup>3</sup>	
	1994	2007	1994	2007	1994	2007	1994	2007	1994	2007
United States <sup>4</sup>	36,190	43,259	7.9	19.5	\$4,375	\$8,246	345	347	7.5	5.6
Alabama	633	789	0.8	14.9	4,454	7,815	413	413	7.0	5.4
Alaska	33	57	0.6	0.8	3,687	6,720	269	242	6.3	5.6
Arizona	578	841	24.8	34.6	4,442	7,576	292	299	5.9	5.0
Arkansas	416	496	0.2	10.0	3,719	7,313	366	349	7.0	5.5
California	3,582	4,369	30.0	33.3	5,219	8,332	366	291	6.1	5.8
Colorado	413	558	17.2	30.9	3,935	7,159	302	296	6.0	4.9
Connecticut	497	537	2.6	10.6	4,426	9,093	287	341	8.1	5.9
Delaware	99	136	0.2	2.9	4,712	8,197	326	348	8.1	6.1
District of Columbia	80	74	3.9	8.7	5,655	9,732	376	388	10.1	6.7
Florida	2,584	3,133	13.8	24.8	5,027	9,594	326	358	7.1	5.7
Georgia	819	1,111	0.4	10.7	4,402	7,577	378	338	6.9	5.6
Hawaii	146	189	29.8	36.1	3,069	5,292	301	207	9.1	7.5
Idaho	146	207	2.5	21.3	3,045	6,014	274	219	5.2	4.6
Illinois	1,605	1,741	5.5	8.3	4,324	8,561	374	401	7.3	5.4
Indiana	805	941	2.6	10.1	3,945	7,658	345	337	6.9	5.4
Iowa	470	500	3.1	11.6	3,080	6,619	322	293	6.6	5.2
Kansas	378	412	3.3	7.8	3,847	7,514	348	323	6.5	5.3
Kentucky	578	711	2.3	11.5	3,862	7,625	396	374	7.2	5.5
Louisiana	572	639	0.4	17.6	5,468	9,388	399	388	7.2	5.7
Maine	198	247	0.1	2.8	3,464	6,553	322	273	7.6	5.3
Maryland	596	723	1.4	6.1	4,997	9,628	362	400	7.5	5.2
Massachusetts	924	997	6.1	17.5	5,147	8,684	350	364	7.6	5.4
Michigan	1,331	1,541	0.7	15.5	4,307	8,974	328	378	7.6	5.6
Minnesota	625	729	19.6	30.1	3,394	7,396	334	343	5.7	4.8
Mississippi	391	469	0.1	7.3	4,189	8,440	423	397	7.4	5.9
Missouri	821	946	3.4	16.4	4,191	7,795	349	378	7.3	5.4
Montana	128	156	0.4	12.3	3,114	6,026	306	261	5.9	4.7
Nebraska	247	268	2.2	9.7	2,926	7,279	281	283	6.3	5.3
Nevada	187	318	19.0	29.8	4,306	7,705	291	284	7.0	5.8
New Hampshire	152	204	0.2	3.2	3,414	6,947	281	253	7.6	5.8
New Jersey	1,158	1,257	2.6	9.5	4,531	9,520	354	377	10.2	6.4
New Mexico	205	285	13.6	21.6	3,110	6,472	301	264	6.0	5.0
New York	2,601	2,841	6.2	24.4	4,855	9,128	334	369	11.2	7.1
North Carolina	1,001	1,359	0.5	14.3	3,465	7,694	314	345	8.0	5.6
North Dakota	101	105	0.6	6.6	3,218	6,029	327	264	6.3	5.0
Ohio	1,649	1,805	2.4	17.9	3,982	8,245	350	389	7.1	5.3
Oklahoma	481	565	2.5	12.1	4,098	8,191	355	392	7.0	5.4
Oregon	469	567	27.7	39.4	3,285	6,451	305	249	5.2	4.9
Pennsylvania	2,053	2,184	3.3	32.8	5,212	8,239	379	386	8.0	5.7
Rhode Island	166	175	7.0	35.0	4,148	7,544	312	339	8.1	6.0
South Carolina	497	697	0.1	10.2	3,777	7,746	319	340	8.3	6.0
South Dakota	114	129	0.1	6.5	2,952	6,081	356	260	6.1	5.1
Tennessee	754	975	0.3	17.8	4,441	7,847	375	384	7.1	5.6
Texas	2,029	2,708	4.1	14.9	4,703	9,542	333	355	7.2	5.6
Utah	182	254	9.4	22.3	3,443	6,807	238	256	5.4	4.7
Vermont	82	102	0.1	1.9	3,182	6,740	283	211	7.6	5.5
Virginia	803	1,045	1.5	9.9	3,748	6,907	348	328	7.3	5.6
Washington	676	873	12.5	19.8	3,401	6,658	269	246	5.3	4.9
West Virginia	326	367	8.3	20.1	3,798	7,557	420	402	7.1	5.6
Wisconsin	752	854	2.0	20.5	3,246	7,187	310	303	6.8	5.0
Wyoming	58	74	3.3	4.6	3,537	6,234	315	269	5.6	4.8

See footnotes at end of table.

**Table 148 (page 2 of 2). Medicare enrollees, enrollees in managed care, payment per enrollee, and short-stay hospital utilization, by state: United States, 1994 and 2007**

[Data are compiled by the Centers for Medicare & Medicaid Services]

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

<sup>2</sup>Includes enrollees in Medicare-approved managed care organizations. See [Appendix II, Managed care](#).

<sup>3</sup>Data are for fee-for-service enrollees only.

<sup>4</sup>Includes residents of any of the 50 states and the District of Columbia.

NOTES: Prior to 2004, enrollment and percent 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. 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 2008. Available from: <http://www.cms.hhs.gov/MedicareMedicaidStatSupp/LT/list.asp>.