

Table 149 (page 1 of 2). Medicare enrollees, enrollees in managed care, payment per enrollee, and short-stay hospital utilization by geographic region and state: United States, 1994 and 2006

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

Geographic division and state ¹	Short-stay hospital utilization								
	Enrollment in thousands ²	Percent of enrollees in managed care ³		Payment per fee-for-service enrollee		Discharges per 1,000 enrollees ⁴		Average length of stay in days ⁴	
		2006	1994	2006	1994	2006	1994	2006	1994
United States ⁵	42,356	7.9	16.9	\$4,375	\$7,941	345	354	7.5	5.7
New England:									
Connecticut	530	2.6	7.3	4,426	8,554	287	341	8.1	5.9
Maine	241	0.1	1.0	3,464	6,187	322	269	7.6	5.4
Massachusetts	982	6.1	16.7	5,147	8,474	350	365	7.6	5.5
New Hampshire	198	0.2	1.5	3,414	6,949	281	246	7.6	5.7
Rhode Island	174	7.0	34.3	4,148	7,517	312	349	8.1	5.9
Vermont	99	0.1	0.5	3,182	6,564	283	212	7.6	5.5
Mideast:									
Delaware	132	0.2	1.6	4,712	7,548	326	363	8.1	6.0
District of Columbia	74	3.9	7.6	5,655	9,149	376	402	10.1	6.8
Maryland	708	1.4	5.2	4,997	9,427	362	407	7.5	5.2
New Jersey	1,242	2.6	9.0	4,531	9,069	354	382	10.2	6.4
New York	2,805	6.2	22.0	4,855	8,794	334	372	11.2	7.2
Pennsylvania	2,156	3.3	31.0	5,212	7,898	379	393	8.0	5.7
Great Lakes:									
Illinois	1,713	5.5	6.8	4,324	8,193	374	411	7.3	5.4
Indiana	923	2.6	6.5	3,945	7,481	345	340	6.9	5.5
Michigan	1,511	0.7	5.7	4,307	8,486	328	376	7.6	5.5
Ohio	1,778	2.4	15.6	3,982	7,997	350	397	7.1	5.3
Wisconsin	840	2.0	15.7	3,246	6,829	310	310	6.8	5.0
Plains:									
Iowa	495	3.1	9.5	3,080	6,505	322	296	6.6	5.3
Kansas	406	3.3	6.2	3,847	7,252	348	333	6.5	5.2
Minnesota	713	19.6	25.9	3,394	6,961	334	338	5.7	4.8
Missouri	930	3.4	14.7	4,191	7,348	349	379	7.3	5.5
Nebraska	264	2.2	8.0	2,926	6,792	281	288	6.3	5.2
North Dakota	104	0.6	5.2	3,218	5,898	327	266	6.3	5.0
South Dakota	127	0.1	2.6	2,952	5,840	356	264	6.1	4.9
Southeast:									
Alabama	772	0.8	12.5	4,454	7,479	413	420	7.0	5.4
Arkansas	485	0.2	5.4	3,719	6,974	366	355	7.0	5.5
Florida	3,080	13.8	22.9	5,027	9,273	326	366	7.1	5.8
Georgia	1,075	0.4	7.0	4,402	7,363	378	351	6.9	5.6
Kentucky	695	2.3	7.0	3,862	7,367	396	385	7.2	5.4
Louisiana	624	0.4	14.3	5,468	9,234	399	398	7.2	5.8
Mississippi	462	0.1	3.8	4,189	8,025	423	397	7.4	6.0
North Carolina	1,318	0.5	10.9	3,465	7,412	314	352	8.0	5.6
South Carolina	674	0.1	6.3	3,777	7,562	319	355	8.3	6.1
Tennessee	949	0.3	14.6	4,441	7,744	375	393	7.1	5.6
Virginia	1,018	1.5	7.1	3,748	6,709	348	334	7.3	5.7
West Virginia	361	8.3	8.8	3,798	7,204	420	388	7.1	5.5
Southwest:									
Arizona	815	24.8	34.8	4,442	7,202	292	306	5.9	5.1
New Mexico	276	13.6	20.5	3,110	6,245	301	267	6.0	5.1
Oklahoma	554	2.5	10.5	4,098	7,795	355	398	7.0	5.3
Texas	2,626	4.1	12.1	4,703	9,076	333	364	7.2	5.6
Rocky Mountains:									
Colorado	540	17.2	29.7	3,935	7,135	302	300	6.0	4.9
Idaho	200	2.5	17.0	3,045	6,056	274	229	5.2	4.7
Montana	152	0.4	7.9	3,114	5,946	306	270	5.9	4.8
Utah	246	9.4	17.3	3,443	6,477	238	256	5.4	4.7
Wyoming	72	3.3	4.2	3,537	6,276	315	275	5.6	4.8

See footnotes at end of table.

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Geographic division and state ¹	Enrollment in thousands ²	Percent of enrollees in managed care ³		Payment per fee-for-service enrollee		Short-stay hospital utilization			
						Discharges per 1,000 enrollees ⁴		Average length of stay in days ⁴	
		1994	2006	1994	2006	1994	2006	1994	2006
Far West:									
Alaska	54	0.6	0.6	3,687	6,625	269	260	6.3	5.4
California	4,275	30.0	32.9	5,219	8,088	366	299	6.1	5.9
Hawaii	185	29.8	36.0	3,069	4,953	301	215	9.1	7.1
Nevada	307	19.0	29.5	4,306	7,448	291	300	7.0	6.0
Oregon	553	27.7	37.2	3,285	6,125	305	250	5.2	4.9
Washington	847	12.5	17.4	3,401	6,485	269	250	5.3	4.9

0.0 less than 0.05.

¹Data are shown for Bureau of Economic Analysis (BEA) regions that are constructed to show economically interdependent states. These BEA geographic regions differ from U.S. Census Bureau geographic divisions shown in some *Health, United States* tables. See [Appendix II, Geographic region and division](#).

²Total persons enrolled in hospital insurance, supplementary medical insurance, or both, as of July 1. Includes fee-for-service and managed care enrollees.

³Includes enrollees in Medicare-approved managed care organizations. See [Appendix II, Managed care](#).

⁴Data are for fee-for-service enrollees only.

⁵Includes 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 2007. Available from: <http://www.cms.hhs.gov/MedicareMedicaidStatSupp/LT/list.asp>.