



Skilled Nursing Monthly Report

Data through February 2023

<http://www.nic.org/nic-map> | 410-267-0504
National Investment Center for Seniors Housing & Care (NIC)

Key Takeaways

Occupancy

Skilled nursing property occupancy increased 23 basis points from January to end February at 81.3%. Occupancy is up 196 basis points from one year ago in February 2022 as it continues to recover since the pandemic low of 74.6% set in January 2021. Occupancy has increased for three months in a row. To be clear, challenges do persist as staffing shortages continue to create difficulties within skilled nursing properties limiting the ability to admit new residents in some markets. However, the current occupancy trend does suggest that demand for skilled nursing properties is recovering, given the increase in occupancy in 2022 and continuing in 2023. Occupancy remains low compared to February 2020 pre-pandemic levels of 88.8% (7.5 percentage points).

Managed Care

Managed Medicare revenue mix declined slightly, dropping 5 basis points from January to end February at 11.6%. It has declined 78 basis points since its recent high of 12.4% in February 2022. However, it is up by 254 basis points from the pandemic low set in May 2020 of 9.1%. Expectations are that it will continue to increase over time with the growth of managed Medicare. Meanwhile, Managed Medicare revenue per patient day (RPPD) was flat, holding at \$473 in February, but it is down 1.7% from last year in February 2022. It has decreased \$119 (20.1%) from January 2012 and continues to pressure some operators' revenue as managed Medicare enrollment grows around the country. However, some operators see managed Medicare as an opportunity for growth in patient volume.

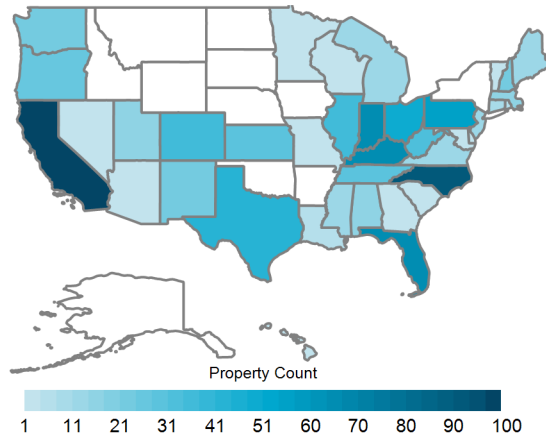
Medicaid

Medicaid patient day mix increased slightly to 64.7 % in February. However, it has increased 138 basis points from the pandemic low of 63.3% set in January 2021. In addition, Medicaid revenue mix decreased slightly in February, representing just over half of property revenue at 50.5%. However, it has increased 202 basis points from the pandemic low of 48.5% set in February 2022. Meanwhile, Medicaid revenue per patient day (RPPD) increased to \$269 in February. It increased 3.2% from \$261 one year ago in February 2022.

Medicare

Medicare revenue per patient day (RPPD) decreased slightly from January to end February 2023 at \$588. It has increased 2.6% since September 2022. Most of this increase in reimbursement is likely a result of the increase in Medicare rates to skilled nursing properties for fiscal year 2023 and potentially higher acuity patients, which also increases RPPD to care for more complex patients. Meanwhile, Medicare revenue mix decreased for the second month in a row. It decreased 30 basis points from January to end February at 22.1%. It is down from one year ago as well, decreasing 269 basis points from February 2022.

Coverage

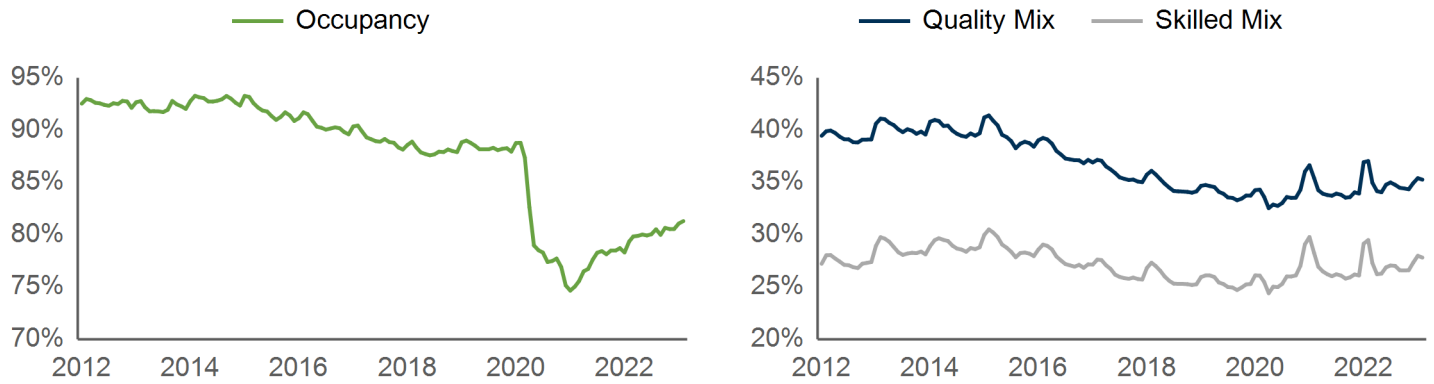


	January	February
States Represented	39	39
Number of Contributors	23	23
Total SNF Properties	919	939

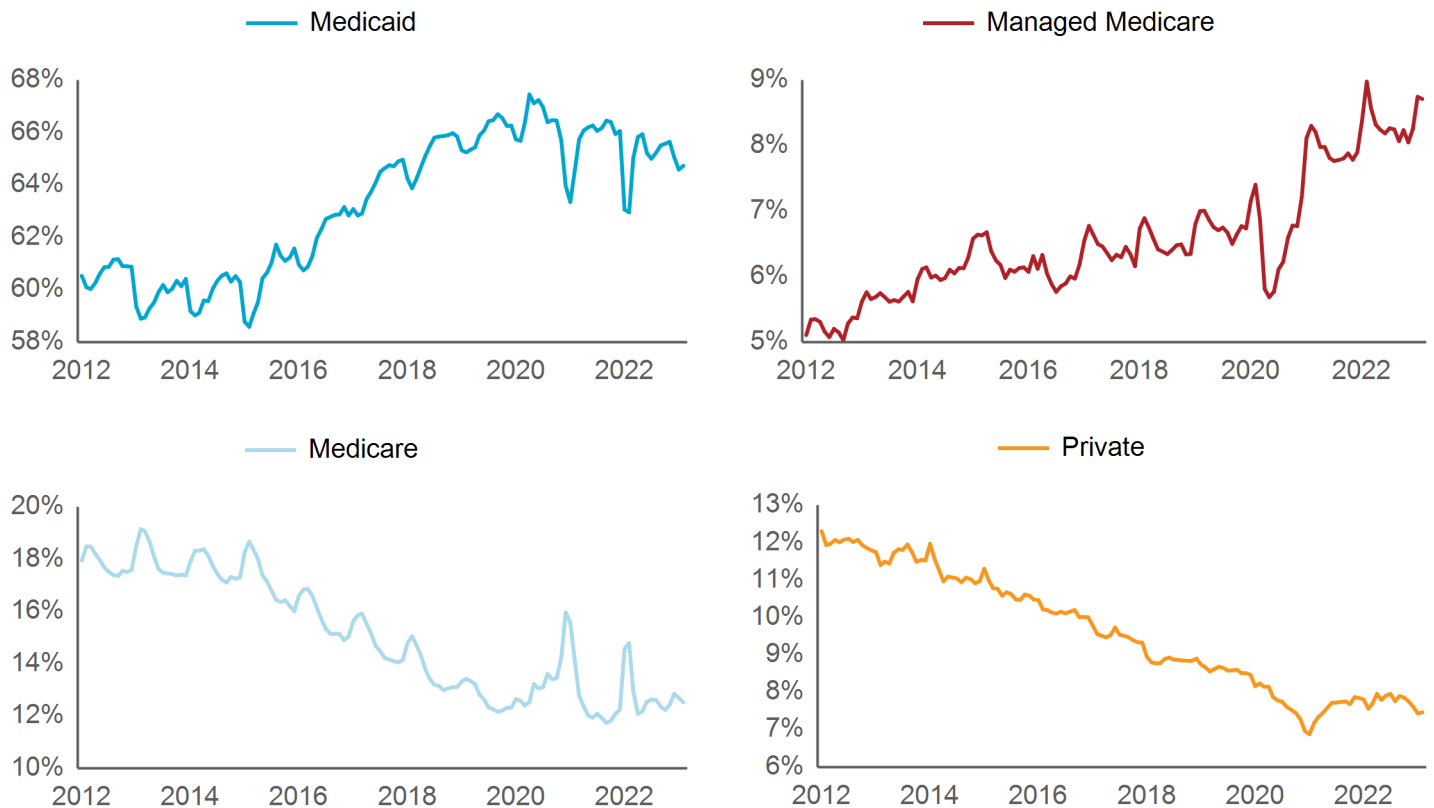
National Key Indicators

	National		Rural		Urban Cluster		Urban Area	
	Current Mo.	Mo./Mo.	Current Mo.	Mo./Mo.	Current Mo.	Mo./Mo.	Current Mo.	Mo./Mo.
Occupancy	81.3%	23 bps	80.6%	12 bps	78.8%	38 bps	82.0%	21 bps
Quality Mix	35.3%	-14 bps	34.6%	-36 bps	34.0%	32 bps	35.7%	-22 bps
Skilled Mix	27.8%	-17 bps	24.8%	-50 bps	24.8%	9 bps	28.9%	-18 bps
Patient Day Mix								
Medicaid	64.7%	14 bps	65.4%	36 bps	66.0%	-32 bps	64.3%	22 bps
Medicare	12.5%	-17 bps	12.1%	-75 bps	13.5%	-33 bps	12.3%	-4 bps
Managed Medicare	8.7%	-3 bps	6.6%	22 bps	5.8%	18 bps	9.7%	-13 bps
Private	7.5%	3 bps	9.8%	14 bps	9.2%	23 bps	6.7%	-4 bps
Revenue Per Patient Day								
Medicaid	\$269	0.4%	\$257	-0.2%	\$273	0.6%	\$270	0.5%
Medicare	\$588	-0.2%	\$584	-0.1%	\$587	-0.2%	\$590	-0.2%
Managed Medicare	\$473	-0.1%	\$434	-0.8%	\$460	-0.6%	\$478	0.1%
Private	\$330	0.3%	\$303	0.0%	\$307	0.2%	\$343	0.4%
Revenue Mix								
Medicaid	50.5%	-7 bps	51.8%	6 bps	53.7%	-25 bps	49.6%	-4 bps
Medicare	22.1%	-30 bps	21.1%	-131 bps	23.6%	-49 bps	21.9%	-10 bps
Managed Medicare	11.6%	-5 bps	8.5%	23 bps	7.7%	4 bps	12.9%	-12 bps
Private	7.0%	13 bps	8.9%	28 bps	8.1%	33 bps	6.5%	7 bps

National Trends

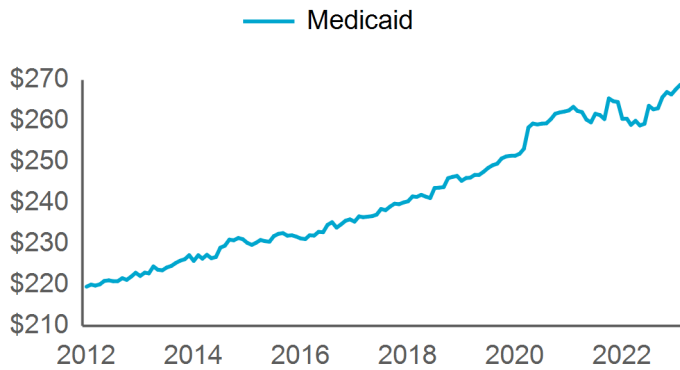


Patient Day Mix

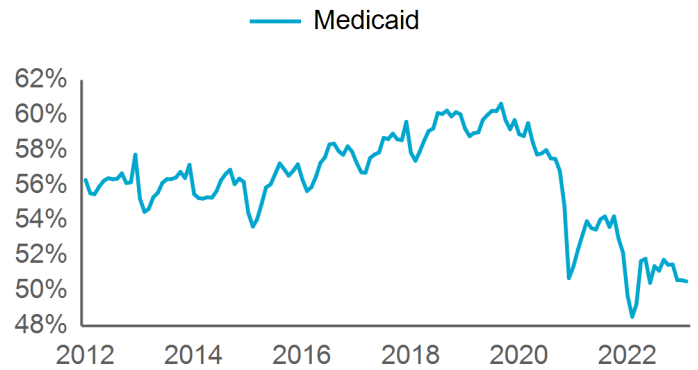


National Trends

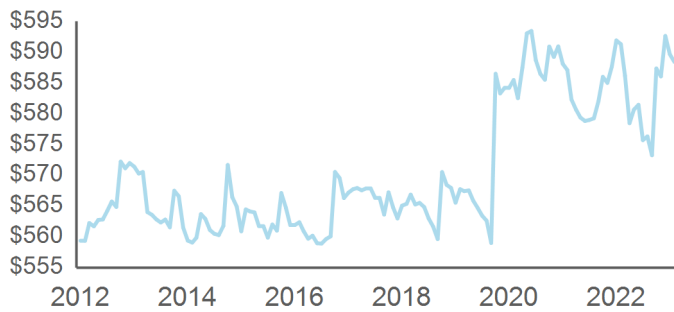
Revenue Per Patient Day



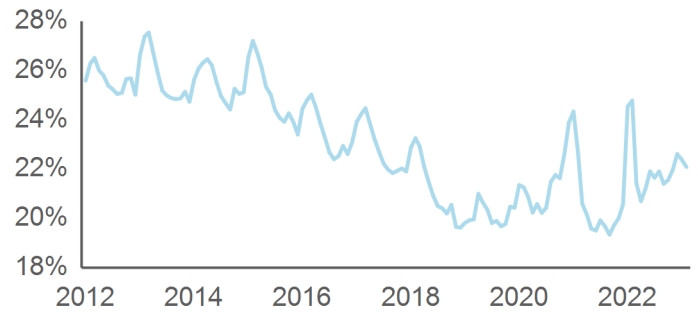
Revenue Mix



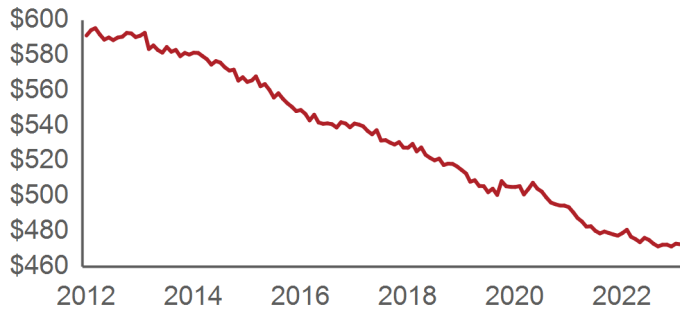
Medicare



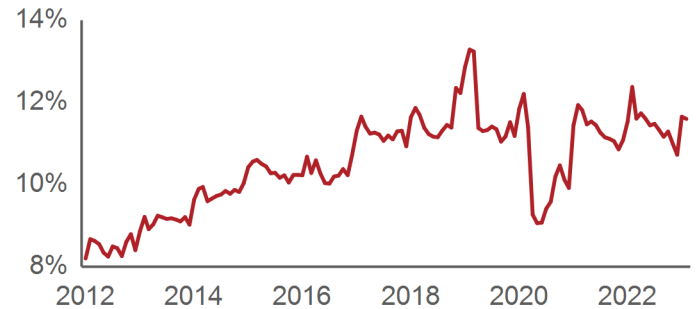
Medicare



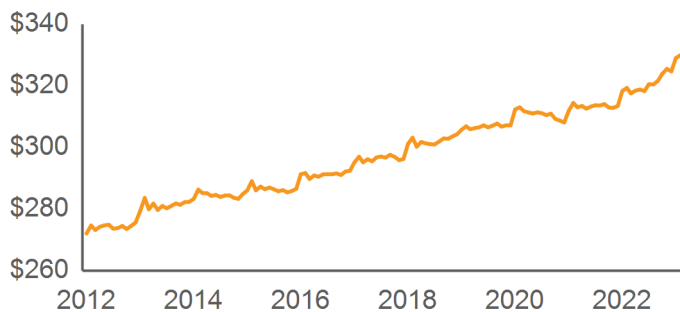
Managed Medicare



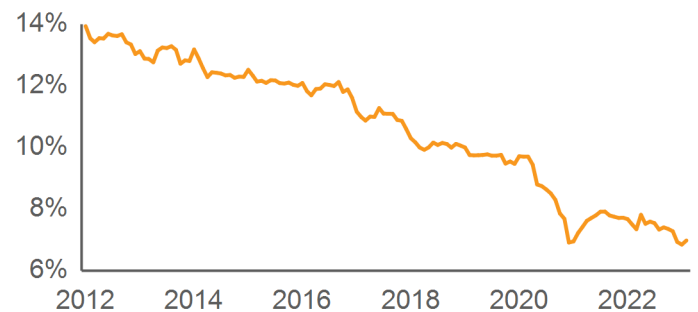
Managed Medicare



Private

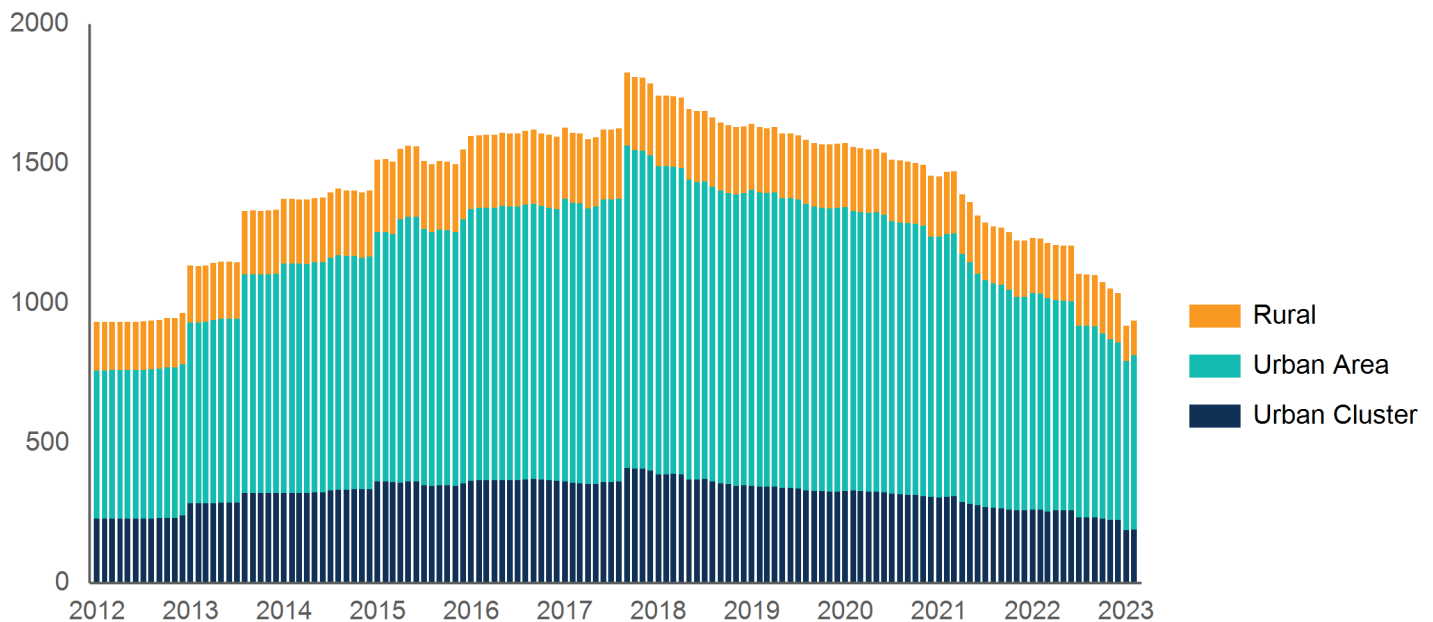


Private



Urban and Rural Trends

Reporting Property Distribution



Geographic classification is based on the 2010 US Census Bureau. All properties not considered Urban Area or Urban Cluster are classified in this report as Rural. According to the US Census Bureau:

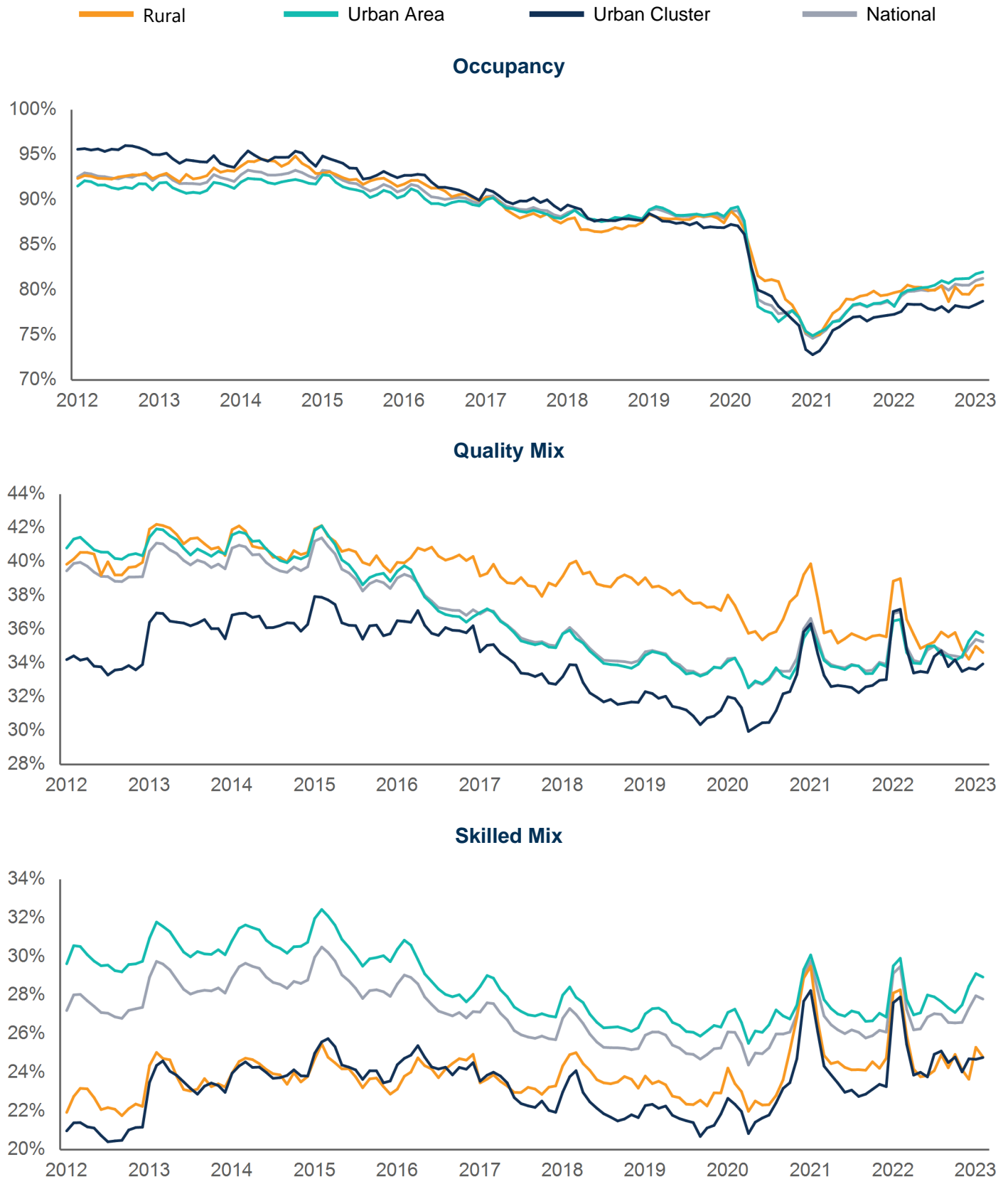
For the 2010 Census, the Census Bureau classified as urban all territory, population, and housing units located within urbanized areas (UAs) and urban clusters (UCs), both defined using the same criteria. The Census Bureau delineates UA and UC boundaries that represent densely developed territory, encompassing residential, commercial, and other nonresidential urban land uses. In general, this territory consists of areas of high population density and urban land use resulting in a representation of the “urban footprint.” Rural consists of all territory, population, and housing units located outside UAs and UCs.

For the 2010 Census, the urban and rural classification was applied to the 50 states, the District of Columbia, Puerto Rico, American Samoa, Guam, the Commonwealth of the Northern Mariana Islands, and the U.S. Virgin Islands.

Urbanized Areas (UAs)—An urbanized area consists of densely developed territory that contains 50,000 or more people. The Census Bureau delineates UAs to provide a better separation of urban and rural territory, population, and housing in the vicinity of large places.

Urban Clusters (UCs)—An urban cluster consists of densely developed territory that has at least 2,500 people but fewer than 50,000 people. The Census Bureau first introduced the UC concept for Census 2000 to provide a more consistent and accurate measure of urban population, housing, and territory throughout the United States, Puerto Rico, and the Island Areas.

Urban and Rural Trends

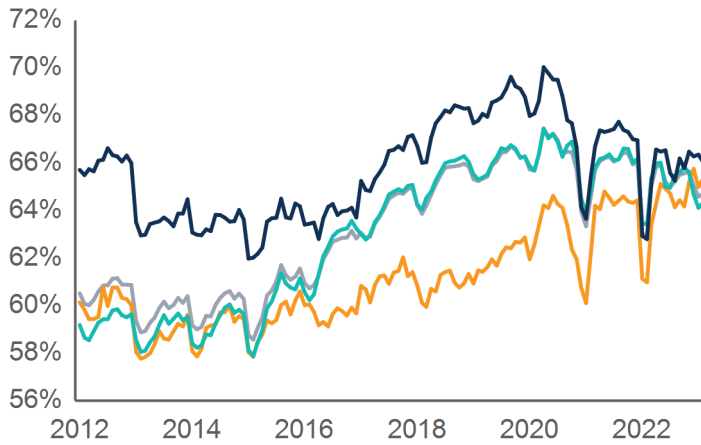


Urban and Rural Trends

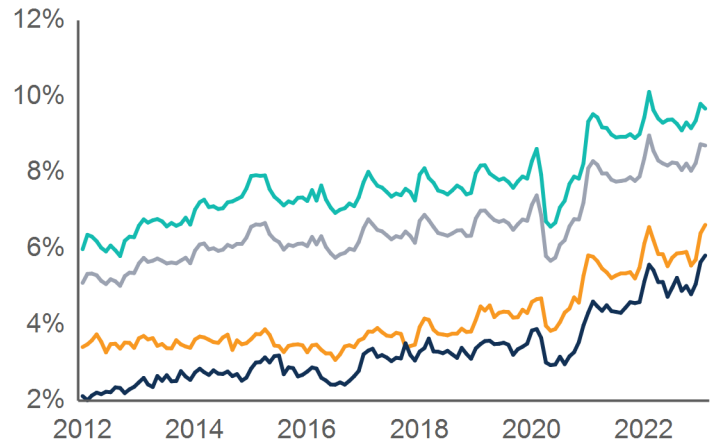
— Rural
 — Urban Area
 — Urban Cluster
 — National

Patient Day Mix

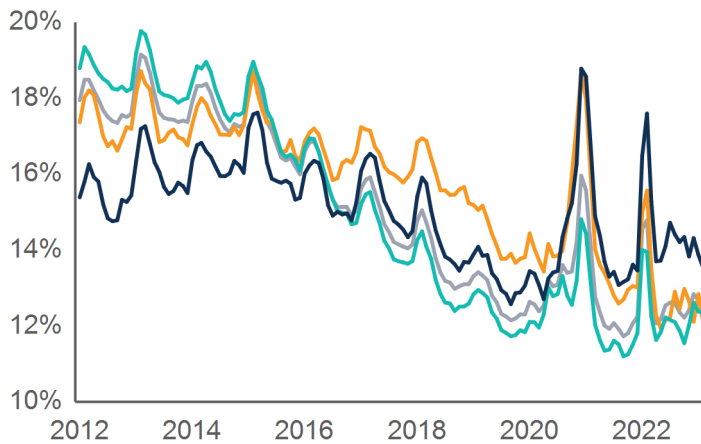
Medicaid



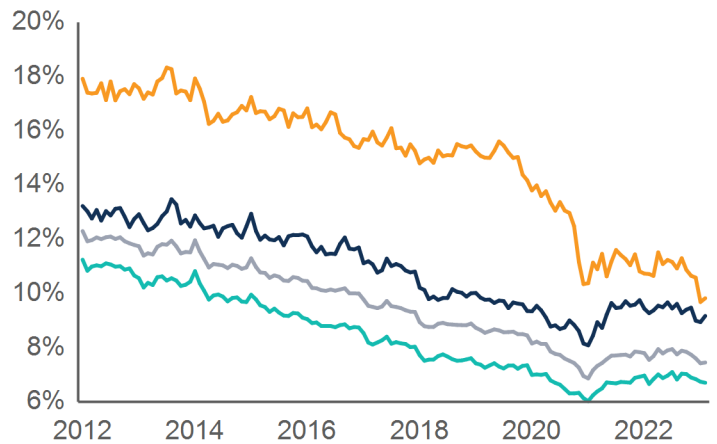
Managed Medicare



Medicare



Private

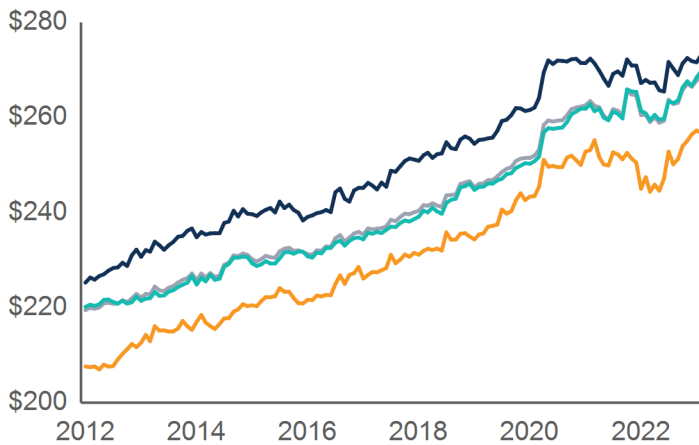


Urban and Rural Trends

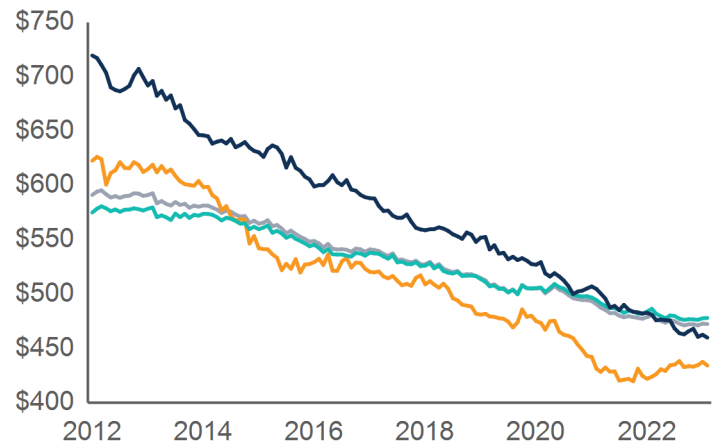
— Rural
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Revenue Per Patient Day

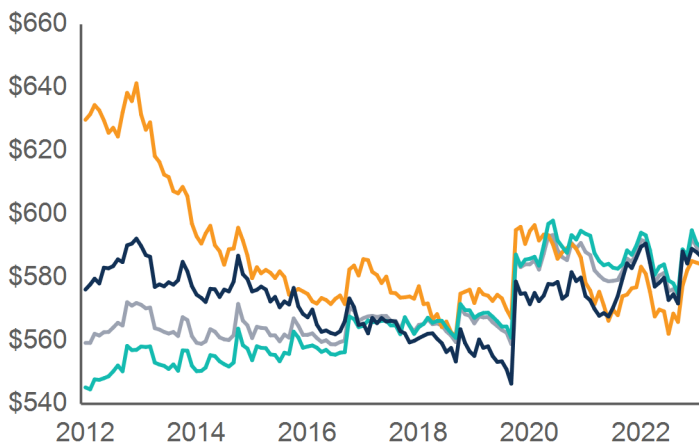
Medicaid



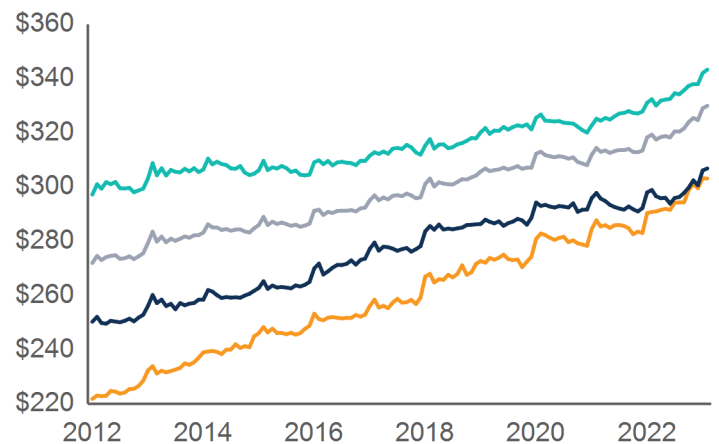
Managed Medicare



Medicare



Private

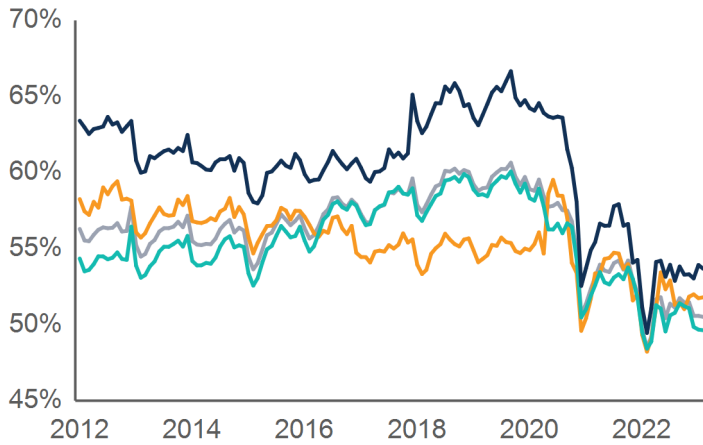


Urban and Rural Trends

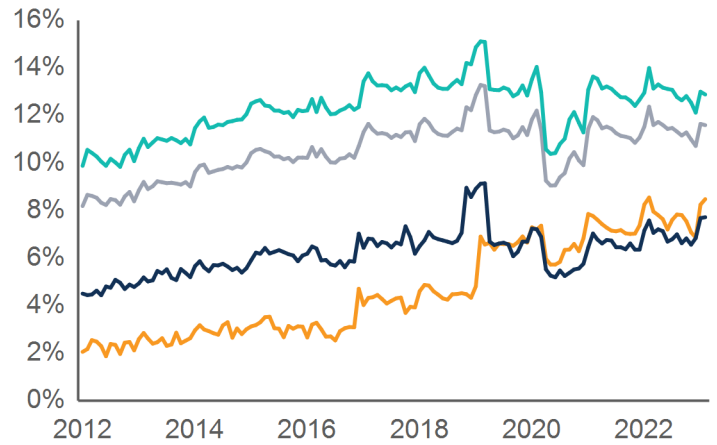
— Rural
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Revenue Mix

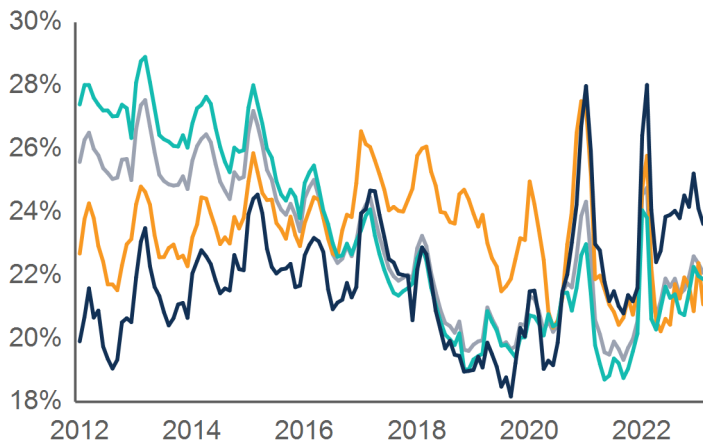
Medicaid



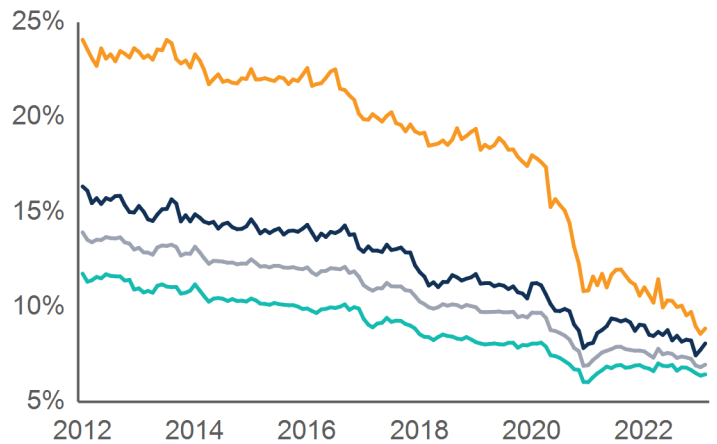
Managed Medicare



Medicare



Private



Explanation of Data

This data and its output is based on the sample population collected each month by NIC and the sample collected on an historical basis. The historical data/time-series data and month/month figures are calculated using same-store analysis. Current month includes all contributors' data to date. Historical data is deflated using same-store month-month changes.

This data should not be interpreted as a census survey for the skilled nursing properties within the United States, but only a representation of the property count and state count as shown on Page 2.

National Skilled Nursing Trends are only reflective of the data from the current sample size within the NIC Skilled Nursing Data Initiative.

Patient Day Mix and Revenue Mix may not add up to 100% because "other patient days and revenue" that cannot be attributed to Medicaid, Medicare, managed Medicare, or Private are omitted from the tables and charts in this report. Other patient days and revenue may include but are not limited to additional benefit types such as veteran's benefits, community programs, and ancillary services.

Glossary

Occupancy: Actual patient days divided by total days.

Patient Day Mix: Actual patient days of each payor source divided by the total actual patient days.

Quality Mix: Actual Medicare, managed Medicare/other, and Private patient days divided by the total actual patient days.

Revenue Per Patient Day (RPPD): Total revenue divided by actual patient days for each payor source.

Revenue Mix: Total revenue for each payor source divided by the total revenue.

Skilled Mix: Actual Medicare and managed Medicare/other days divided by total actual patient days.